

Surgery News

LUNG INSTITUTE

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Meet
Dr. Gloria Li

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successful rare dual
transplant

Dr. Fernandez and team
find new pain management
strategy that helps lung
transplant patients

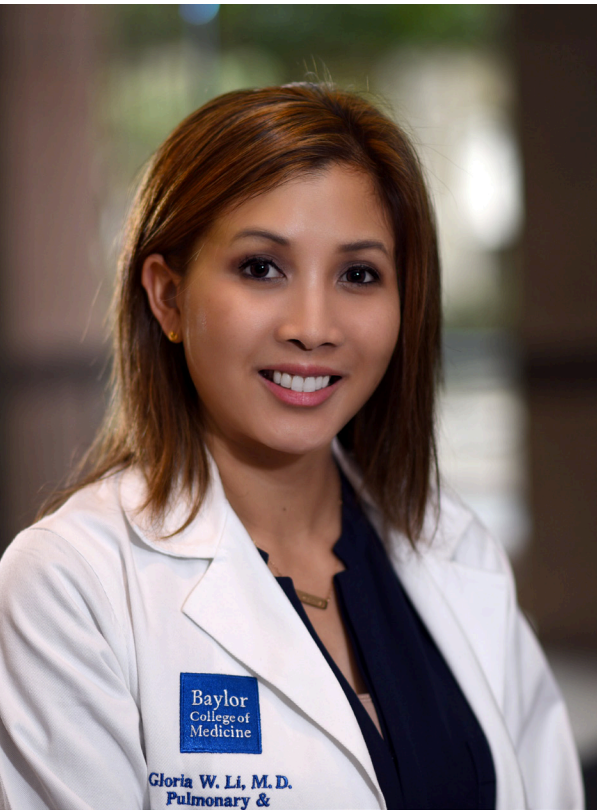
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Staff Highlights



Meet Dr. Gloria Li

Gloria Li, M.D., is an assistant professor of medicine in the Section of Pulmonary, Critical Care and Sleep Medicine. Dr. Li received her medical degree from the University of Texas Medical Branch in 2011. She completed internal medicine residency and pulmonary and critical care fellowship at Baylor College of Medicine. During her training she discovered her passion in lung transplant and was recruited to join the Baylor St. Luke's Medical Center Lung Transplant Program. She has helped the program become a national leader in lung transplant; currently the program is nationally ranked in the top ten in terms of number of transplants performed annually.

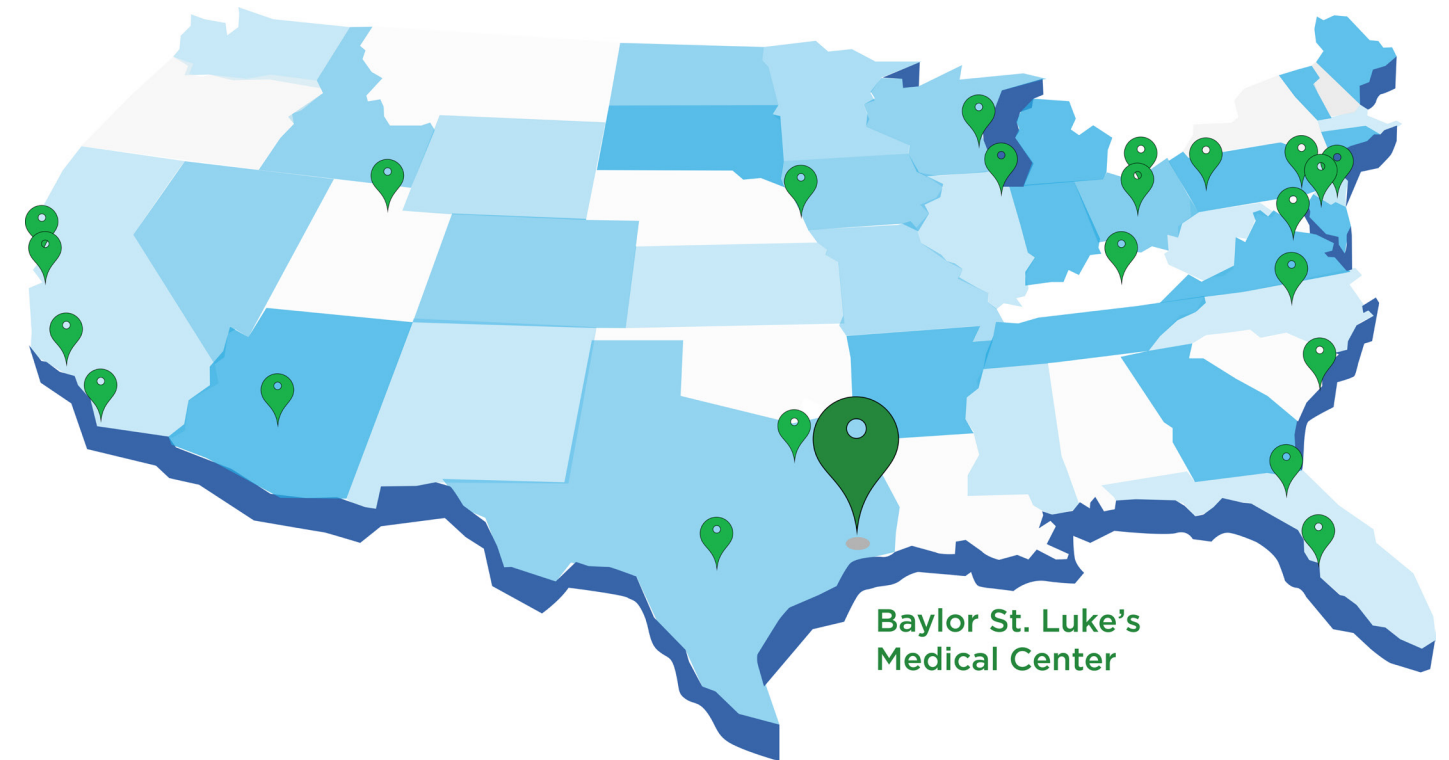
During the COVID pandemic, she played a crucial role in the implementation of telemedicine into the team's practice. She is the director of the CHI St. Luke's Virtual Pulmonary Rehab Program where there are over 70 patients with advanced lung disease who are enrolled.

Dr. Li specializes in the diagnosis and management of advanced lung diseases and sees referrals in the Advanced Lung Disease Clinic. She is part of the department's core faculty committee in the recruitment, training, and education of pulmonary and critical care medicine fellows.

In her free time, she enjoys exercising and spending time with her husband, Mark, and their three children: David, Aria and Brandon. She recently completed her first marathon in January 2024. She volunteers for and is on the board of directors for a non-profit organization called Hand to Hold, an organization that provides personalized support for families of neonatal ICU babies.



Happenings



OPTN DCD Lung Transplant Collaborative

The Center for Advanced Lung Disease and Transplantation was one of 29 programs that participated in the national quality improvement project organized by the Organ Procurement and Transplantation Network (OPTN) to increase the utilization of donor lungs from donation after circulatory death (DCD). Demand for lung transplantation far exceeds the supply of organs and DCD donor lungs remain an underutilized resource, resulting in a high number of patients missing their lung transplant window or dying while on the waitlist. The goal of the collaborative was to increase the utilization of DCD donor lungs so more patients with end stage lung disease can receive a lifesaving lung transplant.

Key successes achieved were improvements in standardizing the lung DCD donor evaluation and management, enhanced communication between donor and transplant centers, streamlining procurement of DCD lungs and reducing costs. These efforts resulted in a remarkable 45% increase in DCD lung utilization over the course of the collaborative. The lessons learned will go a long way towards expanding access to lung transplant and improving the care of patients with end stage lung disease.



Dr. Ramiro Fernandez discusses a CT scan of the chest with Subin Valayil, physician assistant

Dr. Ramiro Fernandez and team find new pain management strategy that helps lung transplant patients

Achieving adequate pain control after lung transplantation is an essential milestone in a patient’s recovery. Historically, high levels of opioids, which have serious side effects, have formed the backbone of pain management after lung transplantation. Recently, a novel technique that involves freezing the intercostal nerves between the ribs has shown great success in alleviating pain after other chest surgeries.

Ramiro Fernandez, M.D., assistant professor of surgery in the David J. Sugarbaker Division of Thoracic Surgery and a research team conducted a study evaluating postoperative opioid use, clinical outcomes and respiratory function in lung transplant recipients treated with either intercostal nerve cryoablation or standard pain management. They found that compared to standard management, the cryoablation group had a significantly lower cumulative opioid use during their hospital stay compared to the standard pain management group. In addition, the cryoablation group had better respiratory function at six and 12 months after transplant compared to the standard management group. The study ultimately identified a novel pain management strategy that reduces opioid use after transplant, enhances lung function and improves the overall recovery of lung recipients.

Lung Institute physicians participate in Chevron Houston Marathon



Dr. Justin Segraves, assistant professor of pulmonology, ran the Aramco Half Marathon in 2023 and Chevron Houston Marathon in 2024



Dr. Gloria Li, assistant professor of pulmonology, running the Chevron Houston Marathon



Dr. Puneet Garcha, associate professor of pulmonology, and his wife Dr. Haala Rokadia

Physicians speak at national conferences

Dr. Gabriel Loor gave two talks on donor lung utilization at the inaugural The Stanford Cardiothoracic Transplantation Summit in Vail, Colorado in January including “What’s Next for the OCS Device” and “Use of local procurement networks: navigating procurement in the changing landscape of CAS.” The three-day symposium gathered experts from the entire spectrum of the transplant team, to showcase the latest and upcoming breakthroughs in heart and lung transplantation.

Drs. Loor and Ramiro Fernandez presented at the 60th Society of Thoracic Surgeons National Meeting in San Antonio, Texas in January. Dr. Loor’s talks were “Thoracic organ preservation: temperature or technology?” and “How will advances in organ preservation change practice, outcomes, and access I transplantation?” Dr. Fernandez’s talk was “Contemporary Lung Transplant Outcomes with Portable Ex-Vivo Lung Perfusion.”

CARING HANDS



Surgeons perform successful rare dual transplant for man denied in home state

He did not smoke, yet he needed a lung transplant. He was not a heavy drinker, yet he needed a liver transplant. Even if they could locate a liver/lung match, at 63 years old he would be considered a high-risk candidate for a dual transplant. And it was during the height of the pandemic.

It was a matter of life or death for Larry Nesler, who was diagnosed with idiopathic interstitial lung disease and cirrhosis of the liver, both advanced conditions that necessitated organ transplants if he were to survive.

“These diagnoses were a real surprise,” Nesler said. “I was in shock. I told myself, ‘This can’t be.’ I had a very bad hand dealt to me.”

Despite not knowing what caused the conditions, Nesler’s lung capacity was worsening fast, and he was unable to walk across a room without having to rest. His life depended on acceptance into an organ transplant program. The Booneville, Mississippi businessman was denied by another transplant center which rejected him for fear he would not survive the major surgery.

However, Nesler received approval from the transplant team at Baylor St. Luke’s Medical Center and rented an apartment nearby to stay in constant contact with his medical team, including Gabriel Loor, M.D., Puneet Singh Garcha, M.D., and John Goss, M.D. It took three months, but he received a match for both a lung and a liver and after a 10-and-a-half-hour surgery, he was on the road to recovery with a new lease on life.

“Nesler’s case was complicated since he was older than 50 and in need of a dual organ transplant,” said Gabriel Loor, M.D., associate professor of surgery and surgical director of the Lung Transplant Program at Baylor St. Luke’s. “There is not a lot of experience with this combination, but we drew upon our collective experience with surgery in high-risk scenarios to ensure the safest outcomes.”

“It is so good to be alive, I am overjoyed. That is the gift these guys gave me.”
- Larry Nesler

Nesler remained in the hospital for three weeks of constant observation and encouragement from his Lung Institute medical team. “I had people who really cared about me. This group, from the doctors to the nurses to the assistants to the fellows, was just remarkable. I’m not on the face of this earth without that group,” he insisted.

Mr. Nesler moved back to Mississippi and made a full recovery where he is loving life, spending time with his family and young grandchildren. “It is so good to be alive, I am overjoyed. That is the gift these guys gave me,” he said.

The Lung Institute

Here are the locations you can find us:

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17450 St. Luke's Way
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The logo for the Lung Institute, featuring the text "LUNG INSTITUTE" in a bold, black, sans-serif font.

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