

SYNERGY REPORT

TRAUMA-RELATED IR: The Life-Saving Expertise of Synergy Interventional Radiologists

Highly skilled and specialized interventional radiologists from Synergy Radiology Associates serve more trauma centers in Houston than any other radiology group, performing life-saving procedures for hundreds of trauma patients each year. In 2018 alone, Synergy interventional radiologists performed more than 150 emergent procedures, including both trauma and non-trauma, just during the evening and overnight hours. In this issue of the Synergy Report, we talk with two Synergy interventional radiologists involved in trauma IR procedures: Phillip Parmet, M.D., and Michael Richter, M.D.

Interventional radiology (IR) uses image guided, minimally invasive techniques to treat conditions that had previously been performed with more invasive surgery – often with less pain, less risk and quicker recovery time. The biggest differences between “routine” IR and trauma IR are the time factor and the setting. Dr. Parmet explained that Trauma IR services are for patients who have sustained major internal injuries and at risk of death from massive bleeding.

“It’s about us going in quickly, finding the site of injury, and stopping the bleed,” said Dr. Parmet. “From a tiny puncture in the groin, we can navigate our tools inside the body to the injured vessels and deploy hemostatic agents from within the artery to block it off or slow it down sufficiently for the body’s natural clotting process to stop the bleeding on its own.”

“Compared to many other clinical scenarios, trauma adds an acuity factor,” noted Dr. Richter. “While most IR procedures are carefully planned out in advance, with trauma and internal bleeding, time is of the essence.”

The Synergy trauma IR team has three interventionalists on call at any given time, 24/7, available within 30 minutes of any trauma team activation.

“Serving two level II trauma centers and one trauma center pursuing level II designation, we have the largest trauma practice of any private group in the Houston area,” said Dr. Parmet.

Trauma centers served by Synergy radiologists are Memorial Hermann The Woodlands Medical Center, Memorial Hermann Southwest Hospital and HCA Houston Healthcare Clear Lake.

“To cover this geographic area, we divided the greater Houston region into three divisions: North, Central/West and South, and each one of those divisions has 3 to 4 hospitals within it, so it’s a pretty large operation,” observed Dr. Richter. “Our IR team works very hard and may be called out on a moment’s notice at all hours of the night. But it’s nice to step back once in a while to look at the areas we cover and the patients we serve and celebrate the IR team’s life-saving contributions.”

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In a life-threatening emergency, interventional radiologists provide trauma treatment through a technique called embolization, which blocks blood flow and stops rapid blood loss. They can also repair severely damaged arteries and veins with stents.

Trauma is divided into blunt trauma and penetrating injury, with blunt trauma being mostly motor vehicle crashes and falls, while penetrating trauma is usually stabbings and shootings. Embolization in trauma IR is the most common treatment. The most common trauma injuries seen by IRs are lacerations to the liver and spleen, which may be actively bleeding or may be at risk for further damage from invasive surgery based on the type of injury.

High-level trauma arriving at the hospital ED is assessed by the trauma surgeon. Based upon imaging and the injury, an IR team member may be called in to address the internal injuries without the patient having to go to the operating room. However, IR may also be called in after a surgical procedure.

"With a liver bleeding from multiple sites, for example, the surgical team may take the patient to the OR to place packing material around the liver for damage control to reduce the bleeding," observed Dr. Parmet. "This buys time for an unstable patient to be transfused and specific bleeding sites more selectively addressed by the interventional radiologist."

"If we can selectively treat a bleeding splenic laceration, we can spare much of the normal splenic tissue as opposed to operative management with a complete splenectomy," added Dr. Parmet. "Preserving most of the spleen allows patients to retain the organ's key functions, including blood filtering, supporting the immune system and fighting infection."

Stent grafting for damaged arteries and veins can also be performed in the trauma setting.

"If a vessel is severely damaged but important enough to where you can't sacrifice it, then sometimes you can put in a stent graft or a covered stent, which has material bonded in it to seal off the arterial injury," said Dr. Richter.

At Synergy, trauma IR is a component of the group's vascular and interventional services. Drs. Richter and Parmet both describe a major move toward nonoperative management (NOM) of trauma. This increasingly popular and successful approach is revolutionizing treatment options available for an increasing number of situations.


"There is a paradigm shift in how trauma and emergencies are being treated," said Dr. Richter. "As our capabilities and expertise expand, the expectation is that minimally invasive approaches are used wherever possible. Interventional radiology is now an integral component of the multidisciplinary approach to trauma."

"Interventional radiology is on the cutting edge in providing these minimally invasive therapies in the trauma setting and beyond," said Dr. Parmet. "For critically injured trauma patients, if we're able to address emergent issues in a less invasive way, hopefully we can help decrease the morbidity associated with alternative major surgical procedures whenever possible. We work hard with our trauma surgery colleagues to help achieve the best possible outcomes for these critically ill patients."

Dr. Richter provided a recent example of the expanding role of IR in trauma.

"I recently went in to embolize a patient's bleeding artery in the chest from a gunshot wound. That's something that until recently would have been an open surgical procedure," described Dr. Richter. "But the expectations are shifting, and if there's a bleeding artery that can be repaired with nonoperative management, we're the ones to call. And our essential role will continue to expand in the future."

In addition to their increasing presence in the acute care setting for trauma patients, Drs. Richter and Parmet both also point to the increased utilization of interventional radiology and the IR support team in the full spectrum of patient care, with minimally invasive techniques and technologies continually being refined to allow for even better care and patient outcomes in the future.

For more information, visit the [Synergy Vascular & Interventional Services](#) page or the [Society of Interventional Radiology Patient Center](#). 

IR SECTION MEETINGS:

Bringing IR minds together to improve healthcare

Synergy Radiology Associates recently held its first 2019 interventional radiology (IR) section meeting to review interventional radiology cases and promote quality and safety.


Synergy interventional radiologist Michael Richter, M.D., organizes the meetings. He observed that it's important to get everyone together as a team, share experiences and learn from each other.

"We're making our large group smaller," said Dr. Richter. "With a group our size, the IR team is spread out across a large geographic area. These section meetings create a forum where we can discuss patient care, review challenging cases and learn about the latest developments in interventional radiology."

In addition to interventional radiologists, the IR section meeting involves physician assistants and nurse practitioners as well as device support staff.

"These regular gatherings also help increase collaboration and expand skill sets among our physicians," noted Dr. Richter. "This undoubtedly leads to improvements in quality of patient care and helps our group to build practice capabilities in new or advanced procedures such as radioembolization, and bone ablations during kyphoplasty."



A significant portion of the meeting focused on IR case reviews, where several of the physicians presented interesting IR cases they performed and discussed them in detail with the group. In the future, Dr. Richter plans to structure the meetings so they qualify as Continuing Medical Education (CME) events, which will enable IR physicians and supporting practitioners to gain CME education credits. 

PHYSICIAN SPOTLIGHT

Congratulations to Memorial Herman Northeast (MHNE)-affiliated interventional radiologist Phillip Parmet, M.D., who was recently awarded the MHNE Partners in Caring (PIC) award. The award recognizes physicians and staff who help create a memorable experience and advance healthcare for patients.

Founded in 1988, the Partners in Caring program has provided a source of creativity, support and enthusiasm for Memorial Hermann employees, patients, families and physician partners. Through grass roots efforts, PIC has instilled a culture of caring throughout the organization and makes Memorial Hermann a great place to work under its purpose to connect, inspire and engage.



Josh Urban, SVP, CEO, Memorial Hermann Northeast Hospital and Memorial Hermann The Woodlands Medical Center (left), presenting the Memorial Hermann Partners in Caring Experience Award to Synergy radiologist Phillip Parmet, M.D.

PHOTO CREDIT: Photo Courtesy of Memorial Hermann



Josh Urban presents the Physician of the Year Nominee plaque to Dr. Parmet.

PHOTO CREDIT: Photo Courtesy of Memorial Hermann

Dr. Parmet was also a 2018 MHNE Physician of the Year Nominee for outstanding performance and for his service and dedication to patients.

Congratulations to Dr. Parmet and our entire Synergy radiology team for making a difference in the lives of patients every day across the greater Houston area.

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COMMUNITY INVOLVEMENT

Heroes in Health Sporting Clay Shoot

In February, Synergy sponsored a team and two support stations at the Sixth Annual Memorial Hermann Heroes in Health Sporting Clay Shoot at the Greater Houston Gun Club. Our team of four radiologists included: Walid Adham, M.D., Grider Gordon, M.D., Terence O'Connor, M.D. and Armando Saenz, M.D.

The Heroes in Health tournament benefits the Memorial Hermann Life Flight® air ambulance service that transports critically ill and injured patients in the Greater Houston area. Life Flight is a community service provided by Memorial Hermann that operates as a hospital-based, non-profit organization, and relies on community support and fundraising to support its operations.

Houston's only hospital-based air medical service, Life Flight serves Houston and surrounding communities, including Harris County, southeast Texas and part of western Louisiana.

More than 200 people participated in this year's event to raise nearly \$190,000 in support of Life Flight.

To learn more about Heroes in Health, visit <https://www.memorialhermann.org/heroes-in-health/>.

For more information about the Life Flight program or to donate, visit www.memorialhermann.org/lifeflight/donate/.



(Pictured left to right)
Sasi Yallampalli, MD., Michael Richter, MD, Michael Rodriguez, MD, Terence O'Connor, MD

We hope you find this an informative and valuable tool. We welcome your feedback at contactus@synerggrad.org or at (713) 621-1103.

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