

# WESTCHESTER PHYSICIAN

October 2018

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## PRESIDENT'S MESSAGE PHYSICIAN ADVOCACY

"New York has been consistently ranked by Wallet Hub as one of the WORST states in the country to be a physician, due to its excessive mandates, low insurer payments for care, and exorbitant practice costs. One of the reasons for this designation is the extraordinarily expensive cost for medical liability insurance in New York State." – from the MSSNY Legislative Program 2018

I recently attended a legislative breakfast for the Westchester and Putnam County Medical Societies held at the Hilton Westchester, in Rye Brook. This was an event where legislators and candidates came to meet with physicians to help understand the candidates' stances on various topics. MSSNY had put forth a legislative agenda that was provided to all the speakers. Topics included:

- Medical liability reform
- Physician collective negotiation
- Preserving access to care for injured workers
- Relief of administrative burden, such as prior authorizations
- Single payor bill – NY Health
- Legalization of recreational marijuana

This is by no means comprehensive and there are certainly many topics of concern to MSSNY including public health related issues, such as addressing the opioid crisis and addressing health care disparities, but it served as a good starting point for conversation.

As I listened to the candidates, it started to sound like any other stump speech on "the health care system." Rather than address any of the topics above in detail, many chose to answer in very broad brush strokes, I presume so as to not offend anyone in the room. I heard terms like "Medicare for all" or when it came to medical liability reform, "lawyers need to make a living too." When pressed on an issue, many had said that they would need to "investigate that topic a little further."

*(Continued on page 19)*



**OMAR SYED, MD**  
*President, WCMS*

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## UPCOMING EVENTS

**2018 WCMS/WAM  
Holiday Party**  
Friday, November 30  
C.V. Rich Mansion  
White Plains, NY

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***FROM THE EDITOR...*****PETER J. ACKER, MD****IT'S SUPPLEMENTARY, MY DEAR WATSON**

Note: Another column from several years ago – still just as relevant today

Though the main newspaper fixture on my breakfast table is the New York Times, I also subscribe to the Journal News for its local news, entertainment and (gulp – guilty pleasure) its comics. Frequently, while flipping through the first section I come across a full page ad disguised to look like a news article promoting some new “revolutionary” supplement that is taking the medical community “by storm”. Typically, there is a picture of a scientist and breathless description about the ground breaking research which is apparently causing lab workers to jump up and down in excitement. Holy eureka! And of course there is the admonition to act now, because crowds are already forming outside of pharmacies across the country demanding the product. Supplies are limited! But wait, there is good news – for you esteemed reader, we have reserved some just for you, but act quickly!

OK, I exaggerate, but not by much. I confess I often find these ads entertaining and I scan through them quickly while chuckling before turning the page. The other day, for some reason I paused over an ad for a supplement that purports to increase memory and cognition. Not that I have need for such a product – my family and co-workers can attest to my razor sharp memory – now where was I – oh yeah the ad. I decided to check out quickly the claims cited. The product was a proprietary preparation of phosphatidylserine, which everybody knows is a phospholipid contained in cell membranes which is an important factor in cell cycle signaling especially in relationship to apoptosis (duh!).

I started my investigation in a time honored fashion – I goggled it and found out that this phospholipid has been studied off and on for many years. As far as the early nineties, there were some suggestions of a possible connection between this substance and memory. In 2003, the FDA, in a response to petition from a company (different from the one in the recent ad), had the following conclusion: “Very limited and preliminary scientific research suggests that phosphatidylserine may reduce the risk of cognitive dysfunction in the elderly. FDA concludes that there is little scientific evidence supporting this claim.” Not a very ringing endorsement.

But wait this is a new “formulation” created by a very prominent and award winning scientist. His picture is right there and I must say he looks quite professorial. There are no details as to how this particular formulation is different from generic phosphatidylserine. I went back to google and learned that this was a real scientist with impressive credentials who had done bench research in cell membrane physiology over several decades. He is now retired. I decided to dig a bit more and did a med line search. I searched his name and an impressive number of

(Continued on page 19)

# What is WealthCare?



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## WCMS Board Meeting Schedule

2018-2019

November 8

December 13


January 10

February 7

March 7


April 4

May 9



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## STOP THE TRAIN

Elliot Barsh, MD

Do you enjoy some alone time, or solitude?

Solitude is not loneliness. To me loneliness is something I feel when I am alone more than I want to be, or in a way that I don't want to be.

Loneliness is a feeling. It doesn't feel good.

Solitude comes from the Latin word *solitudinem*, which means "loneliness".

There is a world of difference between solitude and loneliness, though the two terms are often used interchangeably.

From the outside, solitude and loneliness look a lot alike...Solitude is the state of being alone without being lonely. It is a positive and constructive state of engagement with oneself.

Creativity flourishes in solitude. It allows you to dive into ideas, focus on problems, think outside the box, and reach deep within yourself and your imagination in a way that is not possible around others.

We have very busy days, and not just when we are at work. We worry about our kids when they want to be alone because we are afraid that they are anxious or depressed. That is a true concern for all of us.

Remember that it is normal for us to want some solitude. It is normal, and probably essential to our well-being and resilience. If we are not finding the time then try asking someone for help in making the time for yourself.

Please take a look at this video by Tanya Davis and Andrea Dorfman on Solitude. It is heartwarming.

<https://youtu.be/k7X7sZzSXYs>

Snoopy always makes me smile.



"You could be in an instant surrounded if you needed it. If your heart is bleeding, make the best of it. There is heat in freezing, be a testament." ...Tanya Davis



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## THE BUSINESS OF MEDICINE TIMING THE MARKET

Rick Weinstein, MD, MBA  
Director Orthopedic Surgery Westchester  
Sport& Spine at White Plains Hospital Center

The stock market goes up, the stock market goes down. One day you lose money and the next day your portfolio is exploding.

When something goes on sale, do you buy it? If something you want has become very expensive, is that the time to buy it? Although the answer to these questions seem obvious, most people including us brilliant doctors lose our minds and join in the contagion of buying and selling at the absolute wrong times. When the stock market is on an upswing, more people buy shares and when the market is dropping many people try and dump their shares. You need to be smarter than the panicking general population in order to succeed in accumulating your wealth.

Let's gain some perspective on the stock market. Looking at the average annual results over the past 90 years, the S&P 500 returned 9.8%. The best year was 1954 with a return of 45.02% and just last year the 2017 return was a very respectable 19.42%. The worst year was 2008 where the S&P dropped by 38.49%.

Albert Einstein said, "Compound interest is the most powerful force in the universe. He who understands, it earns it... he who doesn't... pays it." If you left your money in the stock market after it plummeted in 2008 it would have taken you four years to get back to where you were. If you pulled your money out of the market as the stocks were falling and did not reinvest, you would never regain your losses. Now if you invested more money in the stock market after the crash of 2008, you would have seen returns of 36% over the next 2 years. You cannot look at one day or even one year to decide how and when to invest. Be scientific and be smart, not emotional.

I recommend investing in the market using dollar cost averaging. That means investing a fixed amount of cash regularly. I invest my money on biweekly or monthly intervals regardless of how the stock market is doing at that time. I do keep

some cash reserves and will invest even more when the market takes a sharp drop. And I would strongly advise against buying on borrowed money or buying on margin because you put yourself at too much risk if the market does drop short-term.

Also, I prefer buying mutual funds or ETFs rather than individual stocks. We spend most of our days helping our patients (or in our EMRs) and do not have time to monitor individual companies. I do buy some stocks but only rarely and in smaller amounts as this is a much riskier investment. I would rather leave the decisions of buying and selling individual stocks to a smart full-time investor.

If you are going to need the money shortly, get out of risky investments. As one of my sons is in college and another applying, I have moved most of their college money out of S&P investments and into conservative investments. If you are retiring shortly, you need to reallocate your money to protect the amount you will need for the next few years. Don't risk what you cannot afford to lose.

The market cannot be timed. No one can predict when the market will go up or down or even when the next crash will come. Just know it will. Invest regularly and don't whimp-out on buying when the market is dropping. Don't you dare sell when the market is dropping unless you have a true financial emergency. The market will continue to return an average of 10% annually. You can bank on that.

In future articles I will discuss how to pick the right mutual funds and how to diversify appropriately.



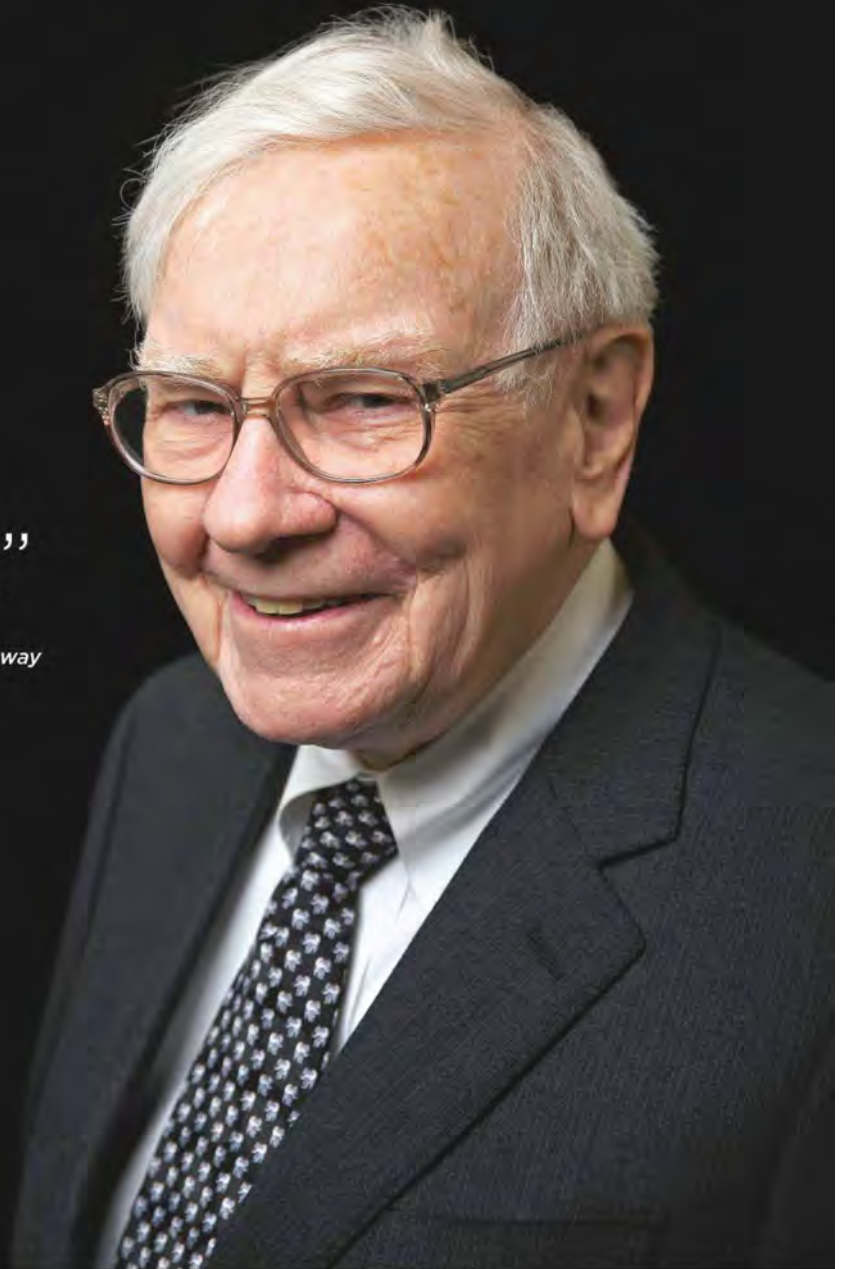
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- Warren Buffett, CEO, Berkshire Hathaway



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**LEGISLATIVE BREAKFAST RECAP**

DANIEL GOLD, MD, CHAIR LEGISLATIVE COMMITTEE



Assemblywoman Sandy Galef



Assemblyman Kevin Byrne

The Westchester County Medical Society Held a Candidates Forum at the Hilton Westchester in Rye on Sunday, September 30<sup>th</sup>. The breakfast meeting allowed candidates for the state Assembly and Senate to present their views and policy prescriptions for issues related to the health and medical care of their constituents. The WCMS Legislative Committee discussed the following areas of interest during the forum; medical malpractice insurance and tort reform, collective negotiation, scope of practice issues, the single payor bill NY Health Act, and legalization of marijuana. The audience was encouraged to ask questions related to these issues and the candidates addressed each during the Forum. It was enlightening and led to some spirited debate.

Unfortunately, the value of the debate was restricted to only a handful of Society members as attendance was sparse despite the convenient venue and robust panel of incumbents and challengers.

The Committee would like to thank all who attended, especially the candidates who took time out of their busy schedules to present their ideas and positions to the Society. In attendance were: Pete Harkham, Assemblyman David Buchwald, Assemblywoman Sandy Galef, Senator Terry Murphy, John Nuculovic, Assemblyman Kevin Byrne, Joe Pinon; Assemblyman Thomas Abinanti, Assemblyman Gary Pretlow and Senator Shelly Mayor. Thanks also to WCMS staff and Executive Director Janine Miller for organizing the event, and to MSSNY President, Dr. Malcom Reid for attending.

Most importantly, please remember to vote November 6!



**Westchester Academy of Medicine**  
**9<sup>th</sup> Annual Golf Outing & Fundraiser**  
**Thursday, October 4, 2018—Westchester Country Club—Rye, NY**

On Thursday, October 4th forty golfers took advantage of the beautiful fall weather and enjoyed playing in the *9<sup>th</sup> Annual Westchester Academy of Medicine Golf Outing & Fundraiser*. The Outing was held at Westchester Country Club in Rye. Following the golf, an additional group of members and guests joined the golfers for dinner, fellowship, and prizes. Joseph Tartaglia, MD, President of the Academy, welcomed everyone, thanked the Golf Committee, recognized and thanked all sponsors, and presented John Thomas Lee, MD with the 6th Annual “Friend of the Academy” award. All proceeds directly benefit the Academy’s very busy CME activities and its scholarship fund, which annually contributes toward events which foster student interest in careers in medicine.

**The Academy would like to thank the following sponsors and participants for their  
generous support of this year’s outing:**

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**2018 Golf Committee:**

Joseph Tartaglia, MD, Chair, President Westchester Academy of Medicine •  
Marshal Peris, MD • Omar Syed, MD • Ameet Goyal, MD • Steve Malfitano • Mary Ellen Pilkington •  
Janine Miller, Executive Director

## “Friend of the Academy” Award

Presented to

**Thomas Lee, MD, WCMS & WAM Past President**



Dr. Joseph Tartaglia, President of the Westchester Academy of Medicine, presented Thomas Lee, MD with the 6th Annual “Friend of the Academy” award at the Golf Outing Dinner on Thursday, October 4, 2018. Dr. Lee was honored with this award for his many years of support and service to the Westchester Academy of Medicine. Dr. Thomas Lee has dedicated his time and resources to Academy and Society events for many years, and is a continuous support system for the physicians of Westchester. The Westchester Academy of Medicine would like to thank Dr. Lee for his unwavering dedication to our organization. **Photo: Joseph Tartaglia, MD & Thomas Lee, MD**



Drs. Joseph & Antonella Tartaglia, Dr. Thomas & Margaret Lee; Dr. Peter Acker & Gila Acker; Dr. Thomas Madejski, MSSNY President & Brian Foy



Dr. Mark Fox; Dr. Alfred Tinger; Dr. Thomas Madejski & Thomas Sellers



Fred Benckwit; Joseph Murphy; Rachit Manglani & Justin Walter



Brian Dennis; Dr. Marshal Peris; Dennis Bolger; Dr. Omar Syed



## WEBSITE ACCESSIBILITY LAWSUITS ARE ON THE RISE

### *In order to avoid litigation, providers should review their websites for compliance*

Over the last six months, many health care providers in New York have been sued in the United States District Court, Southern District of New York, for alleged violations of the Americans with Disabilities Act concerning their websites.

Specifically, the lawsuits are brought by New York residents who are blind or have other disabilities, and allege that they went on the provider's public-facing website and had difficulty fully accessing or navigating the website because it is not optimized to be accessible to persons with disabilities. The most typical problem that the lawsuits raise is that the website is not optimized to interface with screen reading technology, which persons who are blind use to access information on websites.

The lawsuits are brought as potential class actions. The individual plaintiff typically seeks to certify a class of all persons with disabilities who have had difficulties fully accessing the provider's website. The lawsuit seeks an injunction to compel the provider to make the changes needed to put the website into compliance, an order requiring the practice to undergo monitoring and training to ensure compliance, compensatory damages, and attorney's fees.

### **Why you need to act now?**

Providers who are sued in these lawsuits potentially face significant liability. And, problematically, the claims are usually not covered by insurance. So, it is imperative that providers take steps before they are sued to learn whether their websites are fully accessible to persons with disabilities, make whatever changes are required, and regularly monitor their websites in the future.

The first step that providers should take is to engage either their IT staff, or outside IT consultants, to perform a disability accessibility audit on their website. There are a number of commercially available software programs that IT staff can use to perform this audit.

After this audit is performed, providers should make the required changes in their website to come into full compliance with the WCAG 2.0 AA standard as quickly as they can.

Once the changes are made, a regular, periodic - for example, monthly - audit of the website should be performed to ensure that the website remain in compliance. This is very important, because as new content is added to a website, it can quickly get out of compliance.

### **For more information about this topic, please contact:**

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## **The Westchester Academy of Medicine & The Westchester County Medical Society**

Cordially Invites Our Members & Their Families to Our

### **ANNUAL HOLIDAY COCKTAIL PARTY**

**Friday, November 30, 2018**

**7:00 p.m. to 10:00 p.m.**

#### **C.V. Rich Mansion**

305 Ridgeway  
White Plains, NY

Please consider donating an item for our Raffle, to be held in conjunction with our Holiday Party. All proceeds from the Raffle benefit the Westchester Academy of Medicine and our Scholarship Fund activities.

Please RSVP to Janine Miller at [jmiller@wcms.org](mailto:jmiller@wcms.org),  
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Name \_\_\_\_\_ # of Adults: \_\_\_\_\_

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## MLMIC JOINS BERKSHIRE HATHAWAY FAMILY OF COMPANIES

MLMIC Insurance Company (formerly known as Medical Liability Mutual Insurance Company) ("MLMIC"), announced today the completion of its conversion from a property and casualty mutual insurance company to a property and casualty stock insurance company and its acquisition by National Indemnity Company, a subsidiary of Berkshire Hathaway Inc. ("Berkshire Hathaway"). The conversion and acquisition follow a September 6, 2018 approval by the Superintendent of the New York State Department of Financial Services and a September 14, 2018 vote of policyholders of MLMIC with policies in effect on July 14, 2016. The cash consideration resulting from the conversion will be paid out to eligible policyholders (policyholders with policies in effect from July 15, 2013 through July 14, 2016) (or their designees) as promptly as practicable.

As a subsidiary of Berkshire Hathaway, MLMIC will have enhanced capacity and financial strength to continue to serve New York State physicians, hospitals and dentists as it has for over 40 years. MLMIC remains the largest underwriter of medical professional liability insurance in New York and continues to be a New York-focused medical malpractice writer regulated by New York State. It will be operated by the same Board of Directors and staff that have served the market well for several decades.

Per an amended and restated charter, MLMIC has changed its full name from "Medical Liability Mutual Insurance Company" to "MLMIC Insurance Company." However, it will still be known by and referred to using the familiar shorthand: "MLMIC."

Warren Buffett, Berkshire Hathaway's CEO, stated, "MLMIC is a gem of a company that has protected New York's physicians, mid-level providers, hospitals and dentists like no other for over 40 years. We are delighted to add them to the Berkshire Hathaway family and enhance their capacity to serve these and other policyholders for many years to come."

Dr. James Reed, Chairman of MLMIC's Board of Directors, said, "We are delighted to partner with such a fine organization. MLMIC has always had strong standing and stability within the challenging New York insurance market, and the alliance with Berkshire Hathaway will bring policyholders further peace of mind, knowing MLMIC will be able to offer them an even higher level of service and financial security."

### **About MLMIC Insurance Company**

*MLMIC has been a leader in the medical malpractice insurance industry for over 40 years. Its mission is to provide quality professional liability insurance to healthcare professionals in New York. Today, MLMIC is not only the largest writer of professional liability insurance in the State of New York, but also one of the largest companies of its kind in the nation. MLMIC insures more than 13,000 physicians, 3,000 dentists, dozens of hospitals and thousands of other healthcare professionals and facilities. MLMIC can be found on the internet at [www.mlmic.com](http://www.mlmic.com).*

### **About National Indemnity Company**

*National Indemnity Company is one of the leading property/casualty members of the Berkshire Hathaway group of insurance companies, with the highest possible financial strength rating by A.M. Best. Located in Omaha, Nebraska, and backed by a wealth of experience, National Indemnity Company offers the kind of stability that (re)insureds can depend upon. National Indemnity Company can be found on the internet at [www.nationalindemnity.com](http://www.nationalindemnity.com).*



## WHY PHYSICIANS SHOULD EMBRACE FAILURE

*Jason Chesney is an otolaryngologist and can be reached at [Fail to heal](#) and on Twitter [@Failtoheal](#)*

Failure is a guarantee. “Success” assumes that certain metrics have been set and that the words used to describe those metrics are understood in the exact same way by all parties involved. One patient with parotid cancer and given facial paralysis after surgery was thrilled to be alive. Another is furious about a widened scar.

The brain, primed to act on behalf of the organism, works at times without our input and leads us astray. Neuroscience has definitively shown that we can only process so much at once. What if Chabris and Simon’s “Invisible Gorilla” is a clavicular tumor, unseen on a routine chest film while analyzing possible airspace disease?

Adam and Eve messed up, fooled by the mind and temptation. The Bible tells an old story of failure of the human race, over and over again. Each time, something was learned, and not repeated by someone else. We are better off now because of it.

More recent:

I have missed more than 9000 shots in my career. I have lost almost 300 games. On 26 occasions I have been entrusted to take the game-winning shot ... and missed. And I have failed over and over and over again in my life. And that is why I succeed.

– Michael Jordan

Would 9,000 missed diagnoses make you the greatest of all time?

No doubt it would. If you survived.

There are innumerable examples of failure leading to immeasurable success. Check out “Tools for Titans” by Tim Ferris.

It turns out our predecessors and heroes were also epic failures.

Dr. John Gibbon invented the heart-lung machine with 20-plus years of research. His first patient died, the second was successful, the next two died. He left cardiac surgery from the outcomes. With his work, other pioneers led the field of bypass surgery to where we are today. Dr. Gibbon’s missed shots left three babies dead.

Our mistakes are usually less sensational. Consider the family physician who sees 30 patients with multiple complaints a day. They have to see that many to make their production bonus numbers. Patient 29 that day has heartburn, a PPI is prescribed. The next day, the physician finds out the patient is dead from MI. Is there a silver lining in that?

Alas, our profession is in a crisis. 1,000,000 patients lose a doctor each year to suicide. The fire of medical burnout is blazing.

“Failure” in medicine means suffering and death, often at our hands. Now get back to work, and do not let the weakness show. Ridicule would follow, always at the hands of those terrified of having the role reversed. The target of the surgeon throwing instruments or the professor hurling insults during rounds is not the human at the other end. It is at all of their own errors and the Gods for putting them in this place. They don’t know this, and certainly, the poor souls at the other end don’t, either.

Why are stories of survival followed by thriving after extreme psychological stress so amazing? This is because they are rare in the most extreme sense. It is because we all have a breaking point, a psychological aneurysm on our ego’s aorta. If stressed enough, it will break. Maybe the individual lives, but somewhere the body suffers. Does the transient decrease in blood flow cause an ischemic organ? Does the patient suffer post-operative pulmonary embolism? TIA?

The mind works no differently, with an acute mortality by an error from your hands causing a rupture of the ego. You may live and return to work. Do you now handle conflict differently? Are your children now afterthoughts due to your constant worry over a future malpractice suit? Or, do you suffer from post-interventional morbidity, for example, the physician with depression admitted to the psych ward, terrified of this fact being passed onto the community and losing his credibility or license. How would you pay your student debt loans if that happened?

The aneurysm patient heads to rehabilitation, off from work many months. The surgeon returns to work the next day, so as not to show weakness. If you needed a day, it would be understood. But for how long? Someone has to take call.

*(Continued on page 19)*

## Doctors of Distinction Recognizes Excellence in Westchester Medicine

Doctors of Distinction recognizes excellence in Westchester medicine Originally published by Westfair.com



*The 2018 honorees were Philip Maynard, William Frishman, Fran Ganz-Lord, N. Jeremy Hill, Milan Kinkhabwala, Sarah Bellemare, Sasan Roayaie, Daren Wu, Boriana Parvez and Elias Hyams. Not pictured are Mitchell Benson, Tanya Dutta and Michael Grasso III.*

A group of Westchester County's most distinguished doctors – and one promising student – was recognized Sept. 20 at the annual Doctors of Distinction Awards at the Doral Arrowwood in Rye Brook.

The awards were presented by the Westchester County Business Journal and the law firm Brown, Gaujean, Kraus & Sastow PLLC.

The first award, for Cutting Edge Research, went to Dr. Mitchell C. Benson, a urologist with NewYork-Presbyterian Lawrence Hospital and emeritus chair of the Department of Urology at Columbia University.

Benson, in prepared remarks read by NYP Lawrence Vice President Timothy Hughes, noted his

specialty in urological oncology and praised NewYork-Presbyterian's "commitment to oncology" at Lawrence Hospital. He cited the cancer center the Bronxville [hospital opened in 2016](#).

"(NewYork-Presbyterian) made a significant commitment to providing unsurpassed cancer care to our patients in Westchester County," he said.

Also accepting the Cutting Edge award was Dr. Elias S. Hyams, an associate professor of urology at Columbia University School of Medicine with practice sites in Bronxville and Tarrytown.

In his remarks, Hyams described research as "fundamentally important" and enriching to his professional life.

"I try to view research organically and try to look at my practice for questions, uncertainties, that I may be able to look into more deeply and may be able to find answers for to improve my practice and improve patient experiences," Hyams said.

Dr. Tanya Dutta, a noninvasive cardiologist at Westchester Medical Center, accepted the award for Female Trailblazer. Dutta is a lifelong advocate for women's heart health and described the current moment as an especially exciting time to be a female cardiologist. Throughout her career, she has seen "an incredible increase in heart disease among women."

"Although the number of female cardiologists remains unfortunately 10 percent, I think that, because there's been such growing awareness among all cardiologists, the health of women overall has become much better," Dutta said.

Dr. Boriana Parvez, a pediatrician and neonatologist at Maria Fareri Children's Hospital, accepted the Female Trailblazer award as well. Parvez was described as the driving force behind a groundbreaking donor milk program aimed at improving the health of premature babies in the hospital's Regional Neonatal Intensive Care Unit. She told the story of a premature baby born at Westchester Medical Center who later died when transferred to a hospital where the family was unable to access donor milk.

"This tragedy inspired us to start lobbying our politicians to ensure that donor milk is a covered benefit under Medicaid, and we accomplished that in 2017," Parvez said. "As of December, donor milk now is a covered benefit so every family does not have to worry that they cannot afford to do that."

She said her unit at Maria Fareri will soon take those efforts a step further by creating a donor milk bank to help improve the health of premature babies.

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The 2018 Caring for All award went to Dr. Daren Wu, the chief medical officer of Open Door Family Medical Centers Inc., a community health center with 13 sites in Westchester and Putnam counties. Wu said the centers care for tens of thousands of Westchester's most vulnerable patients. About 71 percent of Open Door's patients survive on a household income of \$24,000 per year or less, he said.

"Because each one of us in this room is either a patient him or herself, or has a loved one struggling with cancer, heart disease, kidney failure, diabetes and any number of other devastating medical conditions, we can all understand or relate to hoimagine struggling with one of these conditions and being poor; imagine wanting to take care of yourself or your family and not knowing where to start."

At Open Door, Wu said, doctors not only do the traditional work of treating people, but also try to "wrap ourselves around patients who need us" by asking about other potential issues, such as food insecurity or domestic violence.

Dr. Sasan Roayaie, a surgeon at White Plains Hospital, received the No Land Too Far award for his travels to treat cancer patients in Mongolia, Liberia and Haiti. He said his trips help with "distilling medicine down to its essence."

"As physicians, it's easy to get lost in bureaucracy imposed on us," Roayaie said. "But when you go on these trips, you really get back to the reasons we all went into this field to begin with."

Dr. Michael Grasso III also received the No Land Too Far award, but the Phelps Memorial Hospital urologist was unable to attend.

Next up was the All In The Family award, recognizing husbands and wives, parents and children or siblings who share a practice. The award recognized the husband-wife duo of Drs. Milan Kinkhabwala and Sarah Bellemare. Kinkhabwala is a professor of surgery at Montefiore Medical Center-Albert Einstein College of Medicine and director of abdominal transplantation at Montefiore. Bellemare is a hepatobiliary and liver transplant surgeon at Montefiore Medical Center-Albert Einstein College of Medicine.

Kinkhabwala described medicine as a 24/7 business that can be burdensome for a family.

"This isn't a life I would trade even though it's been extremely difficult," he said. "It's one of the most satisfying because we are able to take patients that are really on death's door and be able to restore life."

N. Jeremy Hill was recognized next with the Biomedical

Breakthrough award. Hill is a research scientist at Burke Neurological Institute and the director of neurological technology at Blythedale Children's Hospital. His research, as described in the recognition, is "committed to the process of innovation ... to allow smart, adaptive technology to answer the outstanding needs of rehabilitation following brain injury."

Recognized with the Exceptional Leadership award was Dr. Fran Ganz-Lord, the deputy chief medical officer and chief medical value officer at CareMount Medical. Ganz-Lord said her inspiration in the profession comes from a close friend who made a full recovery after suffering a ruptured aneurysm but later died from undiagnosed influenza and pneumonia.

"I know very well the good and bad, what we can do and what we really want to do," Ganz-Lord said. "As a leader, I think about that all the time. I think about how the pressures on us in health care today are to move health care much more into a business than it's been before, but, for me, I think about it as much more personal."

Westchester Medical Center Chief of Medicine Dr. William H. Frishman was recognized next with the Lifetime Achievement award. Frishman is also chairman of the department of medicine and a professor of pharmacology at New York Medical College.

The doctor noted the advances seen in his field of cardiology over the past 50 years, as well as the obstacles he surmounted to find success in medicine.

"Coming from a South Bronx heritage, complicated by the premature loss of my father when I was a young boy from a heart attack, I had a drive to succeed," Frishman said. "Luckily, in the South Bronx I could run fast ... and was willing to work hard."

He described himself as fortunate to have taught over 10,000 medical students and participated in medical breakthroughs through research.

The final award of the night went to one of Frishman's current students. Philip Maynard, a fourth-year medical student at New York Medical College, was recognized with the Promise for the Future award. Maynard has served each year as a member of the student senate and was elected by his peers into his class' Gold Humanism Honor Society.

Maynard said it was exciting to "be nominated and awarded for something that I still aspire to be. It's certainly a vote of confidence, and it is motivation for me."

The awards were sponsored by J.P.Morgan Securities, as well as White Plains Hospital, WMCHHealth, NewYork-Presbyterian Lawrence Hospital and Montefiore. Other sponsors included Rectangle Health, Grassi Healthcare Advisors, Webster Bank, Open Door Family Medical Centers, and Val's Putnam Wines and Liquors.





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*FROM THE EDITOR...***PETER J. ACKER, MD**

IT'S SUPPLEMENTARY, MY DEAR WATSON

*(Continued from page 2)*

publications came up. I then searched phosphatidylserine and found that there are thousands of articles on this substance. However, none of them has this particular researcher on the list of authors.

Next, I looked up articles that had phosphatidylserine and cognition and dementia and found a modest number of articles – most echoed what was written by the FDA in 2003. I did find an article published in a journal called **Advance Therapeutics** from 2014. It described a “proprietary preparation” that in a small study showed some modest effects on memory and delay of cognitive decline in the elderly. The journal is not one I'm familiar with. Its web site describes it as an international peer reviewed journal. I did note that upon acceptance of an article, a fee of \$660 dollars per page would be charged to the authors.

I admit, I am biased. I have been for years suspicious of the supplement industry with their seemingly hyperbolic claims and the huge profit margins they enjoy. Furthermore, I am not a researcher, and probably not a good judge of the provenance of some of the industry's claims, but I must say my brief foray into investigating this particular claim has only served to strengthen my impression. I would love to hear from any the neurologists or psychiatrists in our community and get their take on this.

Email me at [peter.acker@gmail.com](mailto:peter.acker@gmail.com)



## WHY PHYSICIANS SHOULD EMBRACE FAILURE

Jason Chesney is an otolaryngologist and can be reached at [Fail to heal](#) and on Twitter [@Failtoheal](#)  
*(Continued from page 15)*

Who can you turn to? The stigma associated with mental health is itself a cause for mental health disease, just like JCAHO causes as many problems as it solves. Pam Wible, in her book *Physician Suicide Letters* (yes, there is a whole book of these, and she could write a series) speaks of the system against openness. Physician assistance programs have been a contributor to this problem. Just read about [Chris Dawson](#).

Every single one of us has distressing moments in this line of work. We are guaranteed to fail. Yet, when it occurs, we feel alone. Backed into an impossible situation, we kill ourselves at a rate higher than any other profession. We fail to heal ourselves.

I don't have a prescription answer for this. Perhaps no single intervention can help. The only thing I can think of is to talk about it, and offer my own ear for anyone who needs it. I have been there myself.



## PRESIDENT'S MESSAGE

*(Continued from page 1)*

I recognize that the physicians of Westchester County and New York State will comprise a diverse group of individuals from both ends of the political spectrum. Differing political views are to be expected. My take away from last month's legislative event was the importance of physician involvement and advocacy. Most of our legislators are *not* directly in health care, and do not have the same understanding and direct experience with the issues listed above. I am sure each one of us can quickly rattle off a list of issues that impact our patients and practices on a daily basis. The challenge is figuring out *what* and *how* to do something about them. It is vital that we come together to have a greater and more visible impact. We need to be involved and help influence the decisions that directly dictate and influence both the well-being of our patients and our practices. I would urge you to consider joining the MSSNYPAC. The MSSNYPAC provides access that helps advocate for better care for our patients, important public health initiatives and fair treatment of physicians. We need to take some action so we can turn New York into a more desirable place to practice medicine!

[https://www.mssny.org/MSSNY/Governmental\\_Affairs/MSSNYPAC/PAC\\_FAQs/MSSNY/Governmental\\_Affairs/MSSNYPAC/PAC\\_FAQs.aspx?hkey=c43d9d84-b521-48d9-883a-f8802e9d6e3d](https://www.mssny.org/MSSNY/Governmental_Affairs/MSSNYPAC/PAC_FAQs/MSSNY/Governmental_Affairs/MSSNYPAC/PAC_FAQs.aspx?hkey=c43d9d84-b521-48d9-883a-f8802e9d6e3d)



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