

# “The Town Crier”

## THE OFFICIAL CHAPTER NEWSLETTER FOR REGION II OF THE ACP, SOUTHERN CALIFORNIA



**July 2009 Newsletter for the ACP, Southern California, Region II**

**By George Sarka MD, MPH, FACP, FACR, FACPM**

**DrPH Candidate in Public Health, UCLA  
Governor of the ACP, Southern California,  
Region II**

**Medical Historian and Lecturer**

With the advent of the Town Crier, a new name gives birth to new ideas and new goals. As your Governor, I hope to institute many changes to make our Chapter the best in California. Our Region has done quite well this year in many ways. In this issue, read about the following:

- Our new members to the Governor’s Council,
- The upcoming 11<sup>th</sup> Annual California ACP Internal Medicine Review Course on 7/25-26/09 at the Beaver Medical Clinic in Redlands, California
- **The Upcoming Annual Scientific Meeting and Practicum for Region II (*The Future of the Internist in the 21<sup>st</sup> Century*) on Saturday, 10/3/09 at the Ritz-Carlton, Laguna Niguel in Dana Point, California from 7:30AM to 5PM**
- **The SEP Pre-Course on Friday, 10/2/09 from 2PM-6PM at Saddleback Memorial Medical Center in Laguna Hills, California**
- **In our Awards Section, meet our first new Master in 5 years, our new fellows for 2009 and more....**
- **“What the Internist Needs to Know about Migraines” in the Internist’s Corner and more....**

## I. The Governor's Council:

### A) The Governor's Council of Region II for the 2009-2010 Year:

We have attracted many of the best and brightest individuals to join our Governor's Council from Loma Linda University, UCI as well as Western University in Pomona. In fact, the Governor's Council welcomes several new members including J. Michael Finley DO, FACOI, FACP, FACR and Andrew Pumerantz DO, FACP as well as the medical students Rob Lin and Jason Jason, all from Western University in Pomona to our council. From UCI, N.D. Vaziri MD, MACP has joined our council. In addition, we have 2 new chief residents, Swapna Reddy MD and Keenu Sandhu MD joining from UCI. From Loma Linda, Medical Student Jo Everett will be joining the council as well as the BOD/HPPC. They all have unique specialties and interest to enhance our organization and its dynamic future.

Our present Governor's Council consists of the following members:

**Alpesh N. Amin, MD, MBA, FACP**  
**Thomas C. Cesario, MD, MACP (Former Governor)**  
**Jo Everett (Medical Student)**  
**J. Michael Finley DO, FACOI, FACP, FACR**  
**Philip M. Gold, MD, MACP (Former Governor)**  
**Douglas R. Hegstad, MD, FACP (Former Governor)**  
**James James (Medical Student)**  
**Rob Lin (Medical Student)**  
**Lawrence K. Loo, MD, FACP (Former Governor)**  
**Andrew S. Pumerantz DO, FACP**  
**Swapna Reddy MD (Chief Resident)**  
**Maher A. Roman, MD, MBA, FACP**  
**Keenu Sandhu MD (Chief Resident)**  
**Melvyn L. Sterling, MD, FACP, FAAHPM (Former Governor)**  
**Jeremiah G. Tilles, MD, MACP (Former Governor)**  
**George Sarka, MD, MPH, FACP, FACR (Present Governor)**  
**Debra L. Stottlemyer, MD, MBA**  
**Conny Tirtaman-Sie, MD, FACP, FAHA, FESC**  
**Leah Tudtud-Hans, MD, FACP**  
**N.D. Vaziri MD, MACP**

I would like to thank you **Nitanth R. Vangala, MD**, former Chief Resident from UCI for his service to the Governor's Council in 2008-2009. We wish him success on his future career.

## **B) The Chapter Coordinator**

### **Assistant and Technical Advisor to the Chapter Coordinator**

A SPECIAL THANK YOU to our **Chapter Coordinator, Virginia Ho** and her assistant **Yin May Tieu** for the countless hours of work to maintain Region II and the Governors Council and the upcoming future meetings including the Annual Scientific Program and Practicum on Saturday, October 3, 2009 at the Ritz-Carlton Laguna Niguel in Dana Point, CA..

## **II. Meetings Germane to Region II:**

### **A) Educational Dinner Meetings:**

Region II had a very successful Educational Dinner Meeting on 2/25/09 in Santa Ana. Two lectures were given that night.. The first was on “*Why Fellowship in the ACP?*” by your governor. This was followed by an excellent and informative speech on “*Pain Pathways*” by. Region II hopes to hold many more meetings of this type in different areas of the chapter. Remember that registration is limited for these programs for physicians. Region II tries to accommodate medical students if openings are available. So register early. I look forward to meeting you at these meetings in the fall 2009.



### **B) “The Adventures in the History of Medicine” on 3/7/09:**

In the winter of 2009, Region II sponsored an 8.5 CME-symposium on “*Adventures in the History of Medicine.*” event on Saturday, 3/7/09 at Saddleback Memorial Medical Center. It was an extremely successful one-day with 66 people attending it from all over California. The Governor’s Council intends to repeat the event with new subjects in the winter of 2010. This is will a unique conference on subjects that are rarely if ever discussed and including the following:

- Dr. Elizabeth Blackwell
- The History of Surgery
- The History of Nursing
- The History of Psychiatry
- The History of Surgery
- And more...

Further details will be provided later in 2009.

Sir William Osler once said, “Every patient you see is a lesson in much more than the malady from which he suffers.”

### C) SAVE THESE DATES

- **The 11<sup>th</sup> Annual California ACP Internal Medicine Review Course on 7/25-26/09:**

**I would like to highlight the** 11th annual CA ACP Internal Medicine Review Course will involve many Region II Members as speakers:

Who should attend: - Primary Care physicians, fellows and residents who plan to take the ABIM Certification/Recertification Exams.

- Medical students who will be taking Part II of the National Board Exam.

When: July 25 and 26, 2009 (Sat and Sunday)

Where: The Beaver Medical Clinic in Redlands, CA

Cost: \$100 for 1 day; \$200 for 2 days

Registration and program:

[http://www.acponline.org/about\\_acp/chapters/ca/rev\\_course09.pdf](http://www.acponline.org/about_acp/chapters/ca/rev_course09.pdf)

Questions: Contact Natalie Kaczur at 760-747-0014



### \*D) SAVE THESE DATES



- **The Upcoming Annual Scientific Meeting and Practicum for Region II (*The Future of the Internist in the 21<sup>st</sup> Century*) on Saturday, 10/3/09 at the Ritz-Carlton Laguna Niguel in Dana Point, California**
- **Up to 8.75 AMA PRA Category 1 CME available**

### AND

**The SEP Pre-Course on Friday, 10/2/09 from 2PM-6PM at**

**Saddleback Memorial Medical Center**

**24451 Health Center Drive**

**Laguna Hills, California**

- **Up to 4.0 AMA PRA Category 1 CME available**



 **SADDLEBACK  
MEMORIAL**  
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Next is our upcoming Annual Scientific Meeting and Practicum will be titled the following: “*The Future of the Internist in the 21<sup>st</sup> Century*” on Saturday, October 3, 2009 at the Ritz-Carlton, Laguna Niguel in Dana Point, California from 7:30AM to 5:00PM. The SEP Pre-Course will be held the day before on Friday, October 2, 2009 at Saddleback Memorial Medical Center in Laguna Hills.

**Topics for Discussion at the Symposium will include the following:**

**Career Decisions in Internal Medicine**

- **The Solo Internist to Concierge Medicine**
- **The Hospitalist to the The Academician**
- **Do I Join an HMO?**
- **The Medical Home**
- **How do I get paid?**
- **Quality, Safety and P4P: A Systems-Based Practice Lesson from the VA**

**The Governor’s Corner**

- **Awards, Region II Issues**
- **Fostering Excellence in Internal Medicine:: 2009**
- **The Political Side of Health Care**

**The Essentials of Internal Medicine**

- **What’s New in Asthma/COPD?**
- **An Update on Vaccines for the Internist**
- **Genetics in Neurology for the 21<sup>st</sup> Century**
- **From Bugs to Drugs to Political Thugs—New Therapies and CMS Laws in Infectious Disease for the 21<sup>st</sup> Century Internist**
- **From Headaches to Multiple Sclerosis to Seizures to Parkinson’s Disease and Beyond**
- **Doc Finley’s Top Ten Rheumatological Therapies List**
- **Where Does the Internist Fit in the Paradigm of Pain Management in the 21<sup>st</sup> Century?**

**Our Classic Scholastic Competitions**

- **Oslerian Medical Jeopardy (The Traditional Type of Learning for the Medical Residents representing the finest medical institutions of Region II)**
- **Medical Bingo for ACP Internist (A Novel Type of Learning)**
- **The Traditional Poster Competition for Medical Student and Medical Residents**

**And of Course—Entertainment, Education, Prizes and Fun**

All physicians speaking at this symposium are from Region II. Additionally, there will be an Oslerian Medical Jeopardy session between medical residents from the different medical schools in our region (Loma Linda, UCI and Western University) and then between the winning medical resident team and the “Seasoned Physicians.” Afterwards everyone can compete for prizes and honor at Medical Bingo. Support your region!

Registration fees for the October 3, 2009 Symposium are the following:  
**\$20.00** for ACP Medical Students and Non ACP Medical Students  
**\$50.00** for Associate ACP Resident Members and Non ACP Residents  
**\$70.00** for ACP Affiliate Members/Allied Health Professionals and Non Allied Health Professionals  
**\$100.00** for ACP Physicians (Members, Fellows and Masters)  
**\$135.00** for Non ACP Physicians  
**\$50.00** for Guest/Spouse (lunch only)

Registration for the October 2, 2009 SEP Pre-Course

**\$35.00** for all ACP Physicians

**\$50.00** for all non ACP Physicians

Please register early!

To register and view the itinerary, please go to

<http://www.acponline.org/chapters/ca> and click your mouse on *meetings* for October 2009 and go to Southern California, Region II and register on line OR call **1-800-528-1546 (M-F 6AM to 2PM)**. I hope to see many of you there. This is a great way to keep up on current medical information, CME and socializing with your medical colleagues. A wonderful time is guaranteed for all.

**E) Future Board of Governor's Meetings on 7/1/09 and 9/09:**

The Board of Governors Meeting will be meeting in July and September of 2009 to make certain that the upcoming Annual Scientific Meeting and Practicum are a success.

### **III. The Health Policy and Procedure Committee:**

Region II members have been very active in political issues affecting our area at both a state and national level addressing such issues as the following:

- The Decreasing Numbers of Interns and Residents entering the specialty Internal Medicine
- The Future of the Internist in the 21<sup>st</sup> Century
- The Medical Home
- Universal Health Care
- Payment Issues for Internists at a regional and national level
- The OBAMA Healthcare Plan for Medicine

Monthly HPPC Meetings on the fourth Wednesday of the month

Leadership Day in Sacramento on March 11, 2009

Leadership Day in Washington D.C. on May 19-20, 2009

## **IV. The Awards File:**



### **A) Congratulations in receiving the CHAPTER EXCELLENCE AWARD on April 22, 2009**

**To REGION II, SOUTHERN CALIFORNIA of the ACP and all its MASTERS,  
FELLOWS, MEMBERS, ASSOCIATES, AFFILIATES and MEDICAL  
STUDENTS**

### **B) Congratulations to Our Newest Recipients of the LAUREATE AWARD on October 18, 2008**

**ALPESH N. AMIN MD, MBA, FACP (Governor's Council Member)  
LAWRENCE K. LOO MD, FACP (former Governor and Governor's Council  
Member)  
MELVYN L. STERLING MD, MACP, FAAHPM (former Governor and  
Governor's Council Member)**

### **C) Congratulations to Our Newest MASTER from Region II on April 23, 2009**

**MELVYN L. STERLING MD, MACP, FAAHPM**

### **D) Congratulations to Our Newest FELLOWS from Region II on April 23, 2009**

**MORTEZA CHITSAZAN DO, FACP  
ANDREW S. PUMERANTZ DO, FACP  
DEBRA L. STOTTLEMYER MD, MBA, FACP  
LEAH TUdTUD-HANS MD, FACP  
MIKIO TACHIBANA MD, FACP  
MICHAEL D. WANG MD, FACP**

### **E) Congratulations to Our Newest Recipient of the ACP 2009 Key Contact Awards Program from Region II on May 19, 2009 and our Next President of the C6 Council**

**MAHER A. ROMAN MD, MBA, FACP**

**F) Congratulations to Region II's Recipients of the following awards on March 7, 2009:**

The First Recipient of the Cesario Lifetime Achievement Award in Medical Educational: **THOMAS C. CESARIO MD, MACP**

The First Recipient of the Gold Lifetime Achievement Award in Internal Medicine: **PHILIP M. GOLD MD, MACP**

The First Recipient of the Hegstad Treasurer's Award: **DOUGLAS R. HEGSTAD MD, FACP**

The First Recipient of the Tilles Lifetime Achievement Award in Health and Public Policy: **JEREMIAH G. TILLES MD, MACP**

**G) Congratulations to the Residents of Region II Winners at the Annual Meeting on October 18, 2008**

**1. Clinical Vignettes**

- a. **DR. SEYED NAZERI (first prize)**
- b. **DR. ATIA SHAH (second prize)**
- c. **DR. TRUCLINH NGUYEN (third prize)**

**2. Research Posters**

- a. **DR. REENA PATEL (first prize)**
- b. **DR. ATIA SHAH (second prize)**
- c. **DR. SILVANA GIANELLI (second prize)**
- d. **DR. WALTER TSANG (third prize)**

## V. The Internist's Corner:



### “What an Internist Needs to Know About Migraines.”

George Sarka MD,MPH,FACP,FACR,FACPM

#### **The History:**

The term *migraine* comes from the French and is derived from the Greek word *hemicrania*, which means *half a head*. The old English word for migraine was *megrin*.

Galen(131 to 200AD) was a Greek physician and writer was the person who termed one-sided headache as *hemicrania*.

#### **Epidemiology:**

Affect more people than asthma and DM combined-nearly 28 million(18%F,6%M) per the National Headache Foundation. Affect sufferers during their peak productive years(ages of 25 to 55). The World Health Organization rates severe migraines as one of the most disabling chronic conditions. More than 80% of those with migraines report disability. In the United States, an estimated 28 million Americans suffer from headaches that meet the HIS diagnostic criteria for migraine. Yet only 48% of the headache sufferers actually receive a specific diagnosis for migraine, suggesting the some migraine conditions are either not diagnosed or misdiagnosed as other headache types including sinus headache.

The burden of disease for migraines is approximately \$24.7 billion annually with \$12.7 billion in direct health care costs and \$12 billion in indirect costs.\*

\*48th Annual Scientific Mtg of the AHS in 2006.

#### **Facts:**

Typically begin in the teenage years and seldom begin after the age of 40. Frequency and severity are highly variable. May be associated with menstruation. Accounts for 75% of HA referred for neurologic consultation. Hereditary disorder, autosomal dominant. Positive family history in up to 90% of patients, if the parents are interviewed.Prevalence is 2.5% below the age of 7, 5 to 10% after age 7, after puberty, F>M, by adulthood 6% of males, 18% of females. Childhood precursors of Migraines include the following: motion sickness; episodic syndromes of childhood;vertigo; abdominal pain; and low threshold to headache.

### **Migraine Symptoms:**

- Unilateral HA(60% of cases)
- Pain may begin as a dull ache- then become throbbing and possibly incapacitating
- Visual or sensory loss
- Photophobia or phonophobia
- Fortification Spectra
- Mood changes

### **Benign Features Suggesting Migraines:**

- Patient is otherwise healthy
- Family history of migraine
- Stable headache pattern
- Unilateral, but may change sides
- Associated with menstruation
- Prodrome or aura
- Trigger factors
- Resolves with sleep;
- Fulfills the International Classifications for Headache Disorders (ICHD) criteria

### **Migraine Equivalents:**

- Acute Confusional Migraine
- Basilar Migraine
- Benign Paroxysmal Vertigo
- Cyclic Vomiting
- Hemiplegic Migraine
- Ophthalmoplegic Migraine
- Transient Global Amnesia

### **The Five Phases of a Complete Migraine Attack:**

- **Prodrome**
- The prodrome occurs hours to days before the headache and consists of changes in mood, behavior, appetite, and cognition.
- **Aura**
- The aura occurs within 1 hour of the headache and is most commonly visual or sensory.
- **Headache**
- The headache itself is commonly unilateral and may be pulsatile
- **Headache Termination**
- **Postdrome**
- After termination of the headache, the complete migraine attack is ended with the postdrome or hangover phase.

### **Migraines with or without auras:**

Migraines may be accompanied by an aura. Visual auras are the most common and include photopsias, flashing lights, scintillating scotomata, and fortification spectra. Sensory auras are next most common-numbness or paresthesias in a limb. Motor

weakness and aphasia are less common. This type of headache is commonly known as a classic migraine. A migraine without an aura is known as a common migraine.

**Remember:**

Migraineurs are often misdiagnosed. Many migraineurs have been misdiagnosed as sinus headaches. Neck pain, which is often believed diagnostic of tension-type headache or myofascial pain, is seen in 75% of migraineurs.

**Migraine Mimickers:**

- Subarachnoid Hemorrhage
- Meningitis
- Ischemic Stroke/TIA
- Arteriovenous Malformation
- Tumor(Primary or Metastatic)
- Arteritits
- Subdural Hematoma
- Partial Seizures
- Sleep Apnea Headaches

**The Pathophysiology of Migraines:**

- Inherited Disorder, up to 90% have an affected relative
- Migraineur inherits a uniquely sensitive brain than can be triggered by a combination of 1 or more internal or external factors, including hormonal fluctuations, sleep irregularity, skipped meals, travel and weather.
- Central Nervous System hyperexcitability, trigeminal/brain stem activation and neurogenic inflammation that leads to meningeal vessel dilatation play key roles.
- As a result of central sensitization, migraineurs also experience cutaneous allodynia, during which nonpainful stimuli become painful.

**Foods that may Trigger Migraines:**

- Foods rich in tyramine(cheese, red wine)
- Foods containing monosodium glutamate(Chinese and Mexican food)
- Foods containing nitrates(cold cuts--bologna, salami, smoked meats)
- Pickled, fermented, marinated food(pasta salads)
- Alcoholic beverages(especially red wine, beer and champagne)
- Caffeinated beverages(soft drinks, tea and coffee)

**Migraine Management:**

- Diagnose
- Education of the Patient
- Behavioral Plan
- Therapy
  - a)Acute Therapy
  - b)Preventive Treatment

**Treatment of Migraines:**

- Identify precipitants and reinforcers of HA
- Eliminate environment triggers, e.g.
  - strong odors(perfumes)
  - bright lights
  - loud noises
  - avoid stressful situations
  - skipping of meals,water deprivation
  - irregular sleep patterns
  - foods(caffeine,chocolate,ETOH,those with MSG,tyramine,nitrites/nitrates)

**Medications:**

**ABORTIVE**

- Acetaminophen
- NSAIDs
- Isometheptene/Dichloralpheazone/acetaminophen
- Triptans
- Ergotamines
- Antiemetics adjunctively
- Narcotics
- Barbituates

**PROPHYLACTIC**

- Tricyclic Antidepressants
- Beta Blockers
- Calcium Channel Blockers
- Valproic Acid
- Antiepileptics
- SSRIs
- MAOIs/Methysergide
- Botox

**Indications for Prophylactic Treatment of Migraines:**

- Headache frequency
- Acute medication  $\geq 2$  days/week
- Inadequate acute treatment response
- Headaches affecting the patient's day-to-day life (causing absence from work or school)
- Migraine "transforming" to chronic daily headache, Rebound Headaches
- Patient preference/Comorbid Disease Issues

**How do you decide among medications for migraine prophylaxis?**

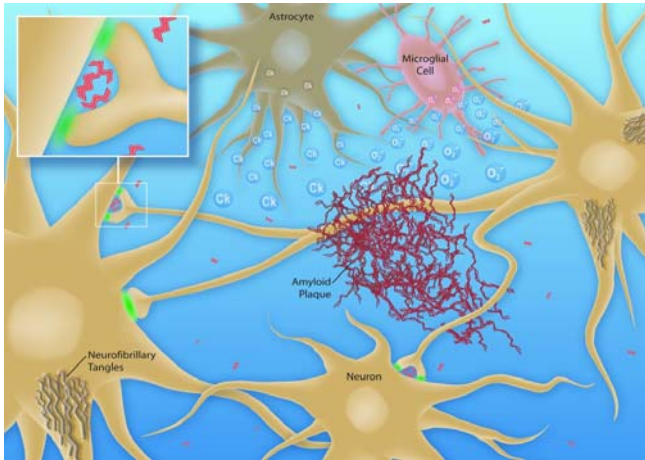
- Look for comorbid conditions
- Consider patient's work habits, exercise program, dosing schedule
- Beta blockers may be better with those with visual symptoms

- TCAs with those with sleeping problems

**Pearls on Using Preventive Agents for Migraines:**

- Start low, go slow but not too slow
- Use behavioral approaches(biofeedback) with preventive medications to improve outcomes
- Use a HA calendar to track outcome
- Consider rebound when preventives do not work
- Consider modification of treatment plans

## VI. In the Next Issue of the Town Crier...



**In the next issue of the Governor's Newsletter, the Physician's Corner will discuss the issue of Alzheimer's Disease .**

Thank you and success and fulfillment in your profession.  
Sincerely,

A handwritten signature in black ink, appearing to read 'George Sarka' followed by a stylized flourish.

**George Sarka MD, MPH, FACP, FACR, FACPM  
DrPH Candidate in Public Health at UCLA  
Associate Clinical Professor of Medicine, UCLA  
Governor of the ACP, Southern California, Region II**