

# MSSC NEWS

## A CLOSER LOOK

### Wichita HIV expert finds hope in new medications

Wichita physician Donna Sweet, MD, world renowned for her expertise on HIV and AIDS, has seen the news stories published this year that scientists may have found a cure for HIV.

It requires a specialized bone marrow transplant and certain conditions to be present and has only impacted two people globally. It's hopeful, but not yet practical, Sweet says, instead preferring to focus on the most gratifying news she's heard in years: HIV that is so under control, it is virtually undetectable.

"We really are closer to being able to control the epidemic overall," said Sweet, a professor of Internal Medicine at the University of Kansas School of Medicine-Wichita, and director of the KU Wichita Internal Medicine Midtown and Ryan White Programs.

She points to the U=U movement, which stands for "Undetectable=Untransmittable," which she says has been adopted by the Centers for Disease Control & Prevention (CDC) and lauded in numerous peer-reviewed journals as the new landscape for HIV control and prevention.

Sweet, along with the CDC, the National Institutes of Health and other stakeholders, says breakthrough research and development in the treatment of HIV and AIDS prevention has gotten to the point where antiretroviral therapy taken consistently as prescribed has re-

sulted in an undetectable viral load (the amount of HIV in the blood), and has virtually eliminated the risk of sexually transmitting HIV.

"It means people in monogamous relationships can get rid of the condom, and heterosexual couples can conceive a child the old-fashioned way without increased risk to the woman," Sweet said. "Treatment is prevention."

Sweet, who is a former Medical Society of Sedgwick County board president, has been treating HIV and AIDS patients since 1983. Those early days were bleak and terrifying for patients. "It was a dark era when we didn't help much of anybody," Sweet said.

Today, with triple therapy in her clinic, Sweet says 88%-89% of HIV patients are undetectable, contributing to overall better public health. "When you can't transmit it, it decreases incidences of new infection."

New treatment drugs have cut down on the number of pills people take every day, and drug companies are working to come up with safer, more tolerable medications with fewer side effects. On the horizon, Sweet says, extended-release nanoparticle technology



DONNA SWEET, MD

PLEASE SEE **HIV TREATMENT**, PAGE 2

### Poll: Americans say HIV is serious issue for country

A recent Kaiser Family Foundation Health Tracking Poll found a large majority of Americans (80%) view the HIV epidemic as a serious national issue, including a third (34%) who view it as "very serious."

Nearly half (46%) view it as a serious concern for people they know, including a quarter (24%) who view it as "very serious."

Kaiser officials said the poll is the first to probe in depth about the public's views and knowledge of the nation's HIV epidemic since President Trump announced this year a new initiative to significantly reduce the HIV epidemic in the U.S. within 10 years.

The survey also assessed public awareness of newer HIV prevention and treatment strategies. Less than half (42%) of the public overall is aware of PrEP, a prescription medication that dramatically lowers the risk of getting HIV when taken as a preventive measure. Awareness of PrEP is highest among black Americans (55%), though a significant minority (45%) don't know such a drug exists. PrEP awareness has increased since 2014, when 14 percent of the public knew about the drug.

### SAVE THE DATES

Mark your calendars! You won't want to miss these upcoming meetings and events of the Medical Society of Sedgwick County. More information coming soon.

#### ► **WD<40 Mixer**

**WHEN:** Thursday, Aug. 22

#### ► **Access the Edge**

Project Access fundraiser

**WHEN:** Thursday-Friday, Aug. 29-30

#### ► **MSSC General Membership Meeting** celebrating international medical graduates

**WHEN:** Tuesday, Oct. 1

#### ► **MSSC Annual Meeting**

**WHEN:** Tuesday, Dec. 3

June  
2019



Physicians  
who care for ...  
our patients,  
our community,  
and our profession.

**MSSC**  
MEDICAL SOCIETY of  
SEDGWICK COUNTY

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PLEASE SEE **KAISER POLL** PAGE 3

# AMA represents a wide range of interests and points of view



**Dr. Michael Lievens, MD**  
June President's Message

For the past two years, as MSSC president-elect and now as president, I have attended the annual AMA meeting in Chicago in early June.

The AMA is a large organization that must represent a wide range of interests and points of view, even though it represents only physicians. It has surprised me just how different the interests and opinions have become amongst a group of professionals that I would have predicted would be more homogeneous.

Developing AMA policy and positions is messy, painstaking work, which seems to crawl along at a snail's pace. The delegates work surprisingly long and difficult hours in committee work, wrestling with those divergent points of view.

In addition, numerous special-interest groups, corporations and political entities desire to obtain the AMA's endorsement, or to influence its policy and position on numerous issues. All of this seems to pull the attention of the AMA in many directions, sometimes good, sometimes not so beneficial.

The most contentious issue this year seemed to be the AMA's long-standing opposition to a single-payer health system. The issue generated a loud protest at the outset of the meeting, which reportedly included medical students and nurses.

The AMA voted to maintain its opposition to a single-payer system (e.g. Medicare for all) by a 53% to 47% margin. The voting reportedly largely followed a "young vs. experienced/old" dividing line. It might be interesting to see how this develops over the next few years.

For the third year in a row, the delegates elected a female president-elect. The AMA also has spent a lot of time and energy on diversity issues of all kinds. This is a good thing, for which the organization deserves credit.

I find it sad, however, that the AMA has had to spend so much effort on this issue. There are so many topics affecting practicing doctors every day, which are demanding urgent attention, such as prior authorizations, EHR, augmented intelligence, workforce shortages and more. I look forward to the time when there is an

equal-opportunity playing field for all, so the issues that all of us face can be addressed with the full resources of the organization.

On another topic: Many of you likely read the recent New York Times article by Dr. Danielle Ofri, which has been widely shared on social media by doctors and nurses. It discusses how the business of health care depends upon exploiting the dedication and professionalism of doctors, nurses and health care workers of all kinds. It is a good read, and I encourage you to read it if you haven't already.

I was struck by the timing of the article and wondered if the publication during the AMA meeting was intentional or coincidental. The work that physicians bear – in patient care, record keeping, research, addressing health care policy and so on – is massive. It seems that we are bearing a bigger burden than ever before. Yet, we are ever more subservient to payers, investors, hospitals . . . to "corporate medicine."

This makes me quite concerned about the future of our profession. We seem to be working harder than ever, yet we have less power and influence over the system than ever. As more of us become employees of corporate medicine, our ability to shape our future seems to diminish.

I completely understand why physicians choose to be employees. There are many reasons it may be a wise choice for any of us. The corporate nature and size that medicine has become often makes it essential to be an employed physician just to survive.

As a profession as a whole, however, we need to be in control of patient care as much as possible. Physicians need to take "ownership" of their practice and their patients, whether they "own it" or not. It is a mind-set, or a paradigm. By "owning" patient care and decision making, we can control at least a part of the health care system.

If doctors don't control this piece of the pie, who can be trusted to do it in our place?

Lastly, I urge all of you to be a member of the AMA. Kansas is at risk of losing a delegate to the AMA assembly. Delegate numbers are a representation of the number of members from any given state, just like the U.S. House of Representatives. If you are already a member, thank you. If not, please sign up and be counted.

## HIV treatment

CONTINUED FROM PAGE 1

might mean people get an injection every four to eight weeks instead of taking daily pills.

Sweet, who describes her role as knowing how to prescribe the right treatments and taking care of people, says she is passionate about getting people tested and on the right treatment plan, working around a cumbersome health care system and access challenges.

Some of her recent published studies and editorials have focused on education among primary care physicians about their willingness to ask about sexual histories among their patients and prescribe a pre-exposure prophylaxis (PrEP), which the CDC says is a way for people who do not have HIV (but who are at substantial risk of getting it) to prevent HIV infection by taking a pill every day. Studies show it prevents more than 90 percent of new infections, Sweet said.

"People don't talk enough about HIV. There's still a lot of misinformation," Sweet said. "It's one of those things that can ruin your life, but if handled well, you can go on."

Sweet visited Garden City this month where she gave a talk to about 20 providers, most who have never heard of PrEP. Sweet says she is trying, through her Kansas AIDS Education and Training Center, to help practitioners prevent even one person from getting infected.

"Every patient deserves what we as a system can give them," Sweet said. "If there's good medication, we ought to be able to get it to them. We have great meds, now we need to get people on them and take good care of them to stay on it. It starts with one person."





# MSSC member physicians earn Health Care Heroes honors



ELISHA BRUMFIELD



BRENT DURAN



JULIE ELDER



LISA GILBERT



CHRISTOPHER HALPHEN



WILLIAM LOEWEN



NASSIM NABBOUT



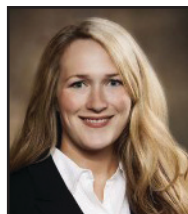
PHILIP NEWLIN



CAMILO PALACIO



JAMES S. PIGG



ALISON RAYMOND



JACKSON SOBBING



DONNA SWEET



MICHAEL VARENHORST

Fifteen MSSC members were named as Health Care Heroes by the Wichita Business Journal. The annual awards recognizes companies, individuals and organizations for their contributions to improving health care in Wichita and the surrounding area. The recipients will be honored at an awards dinner in August.

William Loewen with West Wichita Family Physicians and Donna Sweet with KU School of Medicine are receiving lifetime achievement awards. Carolyn Gaughan, who is retiring on Aug. 31 as executive vice president of the Kansas Academy of Family Physicians, also is receiving a lifetime achievement award. Heartland Cardiology was recognized in the Health Care Innovations category.

Other MSSC members being recognized are Drs. Elisha Brumfield, Philip Newlin, Lisa Gilbert, Brent Duran, Julie Elder, Christopher Halphen, Nassim Nabbout, Camilo Palacio, James S. Pigg, Alison Raymond, Jackson Sobbing, Michael Varenhorst and Camden Whitaker.



CAMDEN WHITAKER

## KAISER POLL

CONTINUED FROM PAGE 1

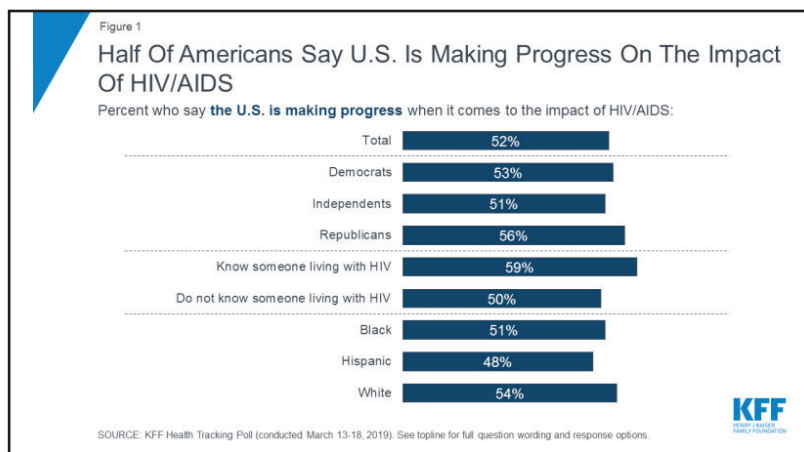
There are also gaps in understanding about how antiretrovirals (ARVs), the medications used to treat HIV, work. Small shares are aware the medications used to treat people living with HIV are “very effective” at both improving the health of people living with HIV (27%) and preventing the spread of the virus (15%). Awareness about antiretrovirals’ ability to stop the spread of the virus is somewhat higher among black and Hispanic Americans than white Americans, but the vast majority across all groups underestimate its effectiveness.

About half (52%) have not heard the term “undetectable,” which refers to the use of ARVs to reduce the viral load to levels not detected by standard lab tests. Another 8 percent say they have heard the term but do not know what it means. This prevention strategy is commonly known as treatment as prevention. According to the CDC, when someone maintains an undetectable viral load there is effectively no risk of sexual transmission. Both PrEP and treatment as prevention are key elements of the new plan.

Wichita HIV expert Donna Sweet, MD, a professor of Internal Medicine at the University of Kansas School of Medicine-Wichita, and director of the KU Wichita Internal Medicine Midtown and Ryan White Programs, said it’s imperative that every single person between the ages of 15-65 get tested at least once for HIV. And they should get tested again if they are involved in any risky behavior. “This is the only way to get to an HIV-free universe by 2030,” she said. “It’s all about treatment and prevention.”

The Kaiser study also found that black and Hispanic adults – populations that are disproportionately affected by HIV – are more likely than white adults to view the epidemic as very serious for the nation overall and for people they know. These differences by race also extend to people’s own personal concerns with nearly four in 10 black adults (41%) and half (51%) of Hispanic adults saying they are concerned about getting HIV compared to one in 10 white adults (12%).

Views on whether President Trump and his administration are “doing enough” to help solve the problem of HIV/AIDS in this country vary by party. Most Republicans (57 percent) say President Trump and his administration are “doing enough,” while a majority of Democrats say they are “not doing enough” (83 percent)



### Ruling could raise malpractice costs

A recent Kansas Supreme Court ruling could result in higher malpractice insurance costs. In *Hilburn v. Enerpipe LTD*, the court ruled that state laws limiting noneconomic damages (pain and suffering) violate the Kansas Constitution. These caps, which sought to balance the needs of patients and families with the public interest of maintaining a stable and affordable business climate, are a major reason why Kansas has enjoyed a stable medical malpractice environment for many years.

"The elimination of the caps on pain and suffering awards soon will translate into increased insurance premiums for physicians, hospitals and health care professionals, which ultimately will be passed on to the patient," the Kansas Medical Society said in a statement.

Business groups also were disappointed by the ruling. "One overzealous jury award could be enough to put a small business out of business," said Dan Murray, state director of the National Federation of Independent Business.

KMS is reviewing the decision and will be working with health care providers and others to assess its implications and determine how best to respond.

### Health plan available to MSSC members

A brand new health insurance plan for Medical Society members will become available beginning July 1.

The health plan utilizes the ProviDRs Care Network using the NexUS value-based health care program. It will be administered by Medova Healthcare.

"We're offering a unique health plan to MSSC members, giving physicians and their practices another choice," said Karen Cox, CEO of ProviDRs Care, Kansas' only physician owned and managed PPO.

What's unique about this new plan is that it is based on the NexUS model, which focuses on the cost drivers of health plans to reduce costs, and it is a partially self-funded insurance plan modeled for small employers.

Cox said the new plan is an exciting venture for ProviDRs Care. "With NexUS, this is a game changer in the marketplace," she said.

The group is pulling materials together now, but has already fielded several calls from practices eager for group quotes.

Members interested in learning more about the new product can contact Cox at [KarenCox@ProviDRsCare.Net](mailto:KarenCox@ProviDRsCare.Net).

## MEMBERSHIP

*Members of the Society who know a good and sufficient reason why any of the following applicants are not eligible for membership are requested to communicate with the Medical Society of Sedgwick County, (316) 683-7557.*

Key: [BC] Board Certified [F] Accredited Fellowship [R] Residency [AT] Additional Training [F\*] Unaccredited Fellowship

### NEW APPLICANTS

#### John F. Anderson, MD, PhD

[F-A] Cardiothoracic Radiology  
[R] Diagnostic Radiology  
Kansas Imaging Consultants  
OFF: 689-5050  
FAX: 689-6192  
3600 E Harry, 67218

#### Samuel Ashby, DO

[F-A] Adult Reconstructive- Hip & Knee  
Ascension Medical Group Via Christi- Founders Circle  
OFF: 613-4640  
FAX: 613-4643  
1947 Founders Circle, 67226

#### Kelsey Bourm, MD

[R] Diagnostic Radiology  
Wichita Radiology Group  
OFF: 685-1367  
FAX: 685-9388  
551 N Hillside S-320, 67214

#### Brent Cameron, MD

[R] Radiation Oncology  
Wichita Radiology Group  
OFF: 685-1367  
FAX: 685-9388  
551 N Hillside S-320, 67214

#### Patrick G. Craig, DO

[F] Neuroradiology  
Kansas Imaging Consultants  
OFF: 689-5050  
FAX: 689-6192  
3600 E Harry, 67218

#### Saba Fatima, MD

[R] Pediatrics  
KUSM- Wichita Pediatric Hospitalist  
OFF: 962-7422  
FAX: 962-7805  
550 N Hillside Bldg 1 6th Floor, 67214

#### Salman A. Hasan, DO

[R] Radiation Oncology  
Ascension Medical Group Via Christi Cancer Center  
OFF: 268-5927  
FAX: 291-7940  
817 N Emporia, 67214

#### Gary J. King, MD

[R] Pediatrics  
Ascension Via Christi- Pediatric Hospitalists  
OFF: 268-8065  
FAX: 291-4396  
929 N St Francis, 67214

#### Philip Montgomery, MD

[R] Pediatrics  
Mid Kansas Pediatric Association  
OFF: 634-2000  
FAX: 634-2321  
9825 Shannon Woods, 67226

#### Lindsey C. Peller, DO

[R] Pediatrics  
Mid Kansas Pediatric Associates, PA  
OFF: 634-2000  
FAX: 634-2321  
9825 Shannon Woods, 67226

**Levi C. Short, MD**

[F] Nephrology  
 [BC] Internal Medicine  
 Wichita Nephrology Group, PA  
 OFF: 263-5891  
 FAX: 263-3083  
 818 N Emporia S-310, 67214

**Robert L. Ullom, MD**

[BC] Family Medicine  
 West Wichita Family Physicians, PA  
 OFF: 721-4544  
 FAX: 721-8307  
 8200 W Central, 67212

**Brady J. Werth, MD**

[R] General Surgery  
 Wichita Surgical Specialists  
 OFF: 263-0296  
 FAX: 494-6897  
 818 N Emporia S-200, 67214

**ELECTED TO PROBATIONARY****Lindsay J. Byrnes, MD**

[BC] Pediatrics  
 [BC] Internal Medicine



KUSM- Wichita Pediatric Hospitalist  
 OFF: 962-7422  
 FAX: 962-7805  
 550 N Hillside Bldg 1 6th Floor, 67214  
 Medical education obtained at Univ of Kansas 8/2003-5/2007; Residency in Pediatrics at Univ of Minnesota 6/2007-6/2011.

**Jose R. Cepeda, MD**

[BC] Emergency Medicine



Wesley Emergency Services  
 OFF: 962-2000  
 550 N Hillside, 67214  
 Medical education obtained at INTEC of Santo Domingo 8/2000-3/2006; Residency in Emergency Medicine at Hospital UPR 7/2011-6/2014; Fellowship in Emergency Medicine at Akron City Hospital 10/2014-4/2016.

**Ricky W. Lee, MD**

[BC] Neurology



[BC] Clinical Neurophysiology  
 [BC] Epilepsy  
 Ascension Medical Group Via Christi- Neurology  
 OFF: 268-8500  
 FAX: 291-7993  
 848 N St Francis S-3901, 67214  
 Medical education obtained at Rosalind Franklin Univ 7/2003-6/2007; Internship at Univ of California 6/2007-6/2008; Residency in Neurology at the Univ of California 7/2008-6/2011; Fellowship in Neurophysiology/Epilepsy at the Mayo Clinic 7/2011-6/2013.

**George J. Philip, MD**

[BC] Surgical Critical Care



[BC] Surgery  
 Kansas Surgical Consultants, LLP  
 OFF: 685-6222  
 FAX: 618-9576  
 3243 E Murdock S-404, 67208  
 Medical education obtained at UNIBE 1/1998-1/2004; Internship in General Surgery at Cleveland Clinic 7/2008-6/2009; Residency in General Surgery at Univ of Toledo Medical Center 7/2009-6/2015.

**ROSTER UPDATE****ELECTED TO ACTIVE**

**Charles Coffey, MD, MPH**  
**John Evans, MD**  
**Caleb Harris, MD**  
**Colleen Loo-Gross, MD, MPH**  
**Scott McIntyre, MD**  
**Nicole Riddel, MD**  
**Jose Carlos Velasco Di Domenico, MD**

**REINSTATE TO ACTIVE****Danielle Villalobos, MD**

[BC] Family Medicine  
 Wesley Family Medicine  
 OFF: 962-3070  
 FAX: 962-3136  
 850 N Hillside, 67214

**CHANGES****Phillip F. Hagan, MD**

Moving 6/10/2019 to  
 Advanced Orthopaedic Associates  
 Office: 631-1600  
 Fax: 631-1676  
 2778 N Webb Rd, 67226

**Heidi Larison, DO**

Office Moving to  
 Wichita Primary Care, LLC  
 OFF: 448-8339  
 FAX: 221-7149  
 7570 W 21st St N S-1010A, 67205

**Kari Clouse, MD**

Flint Hills Medical Clinic  
 OFF: 218-0008  
 FAX: 218-0003  
 307 W Hwy 54 S-300, Andover 67002

**Mueeza Zafar, MD**

Clifton Family Medicine West  
 New FAX: 524-9800

**Bryon McNeil, MD**

Address Change  
 Kansas Medical Center- ER Dept  
 OFF: 300-4811  
 9840 E 21st St N, 67206

**RETIRED**

**Michael D. Atwood, MD** – June 14, 2019  
**Stephen Grillot, DO** – July 1, 2019  
**Donald James, MD** – June 30, 2019  
**Terence McDonald, MD** – June 7, 2019  
**Richard Steinberger, MD** – June 14, 2019  
**Eldon K. Sunderland, MD** – June 12, 2019

**DROPPED**

**Daniel Rivera, MD**  
**Iram A. Sirajuddin, MD**

**LEAVE OF ABSENCE**

**James French, MD** – June 30, 2019

# MSSC NEWS

MEDICAL SOCIETY of  
SEDGWICK COUNTY

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