A Breath of Fresh Air for Central Florida Area Pulmonary Patients

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By Nancy DeVault, Staff Writer

Central Florida Pulmonary Group, P.A. (“CFPG”) was established as a small practice in 1982 by the late Dr. Robert Bast and has grown to be among the largest pulmonary practices in the state. The group is currently comprised of fourteen physicians and three nurse practitioners offering quality health care at three area locations (Downtown Orlando, East Orlando and Altamonte Springs) with 24-hour a day on call emergency services. CFPG provides diagnostic and treatment services for a wide array of pulmonary conditions including asthma, chronic obstructive pulmonary disease (“COPD”), cystic fibrosis (“CF”), pulmonary fibrosis, emphysema, sleep apnea, lung cancer and other lung diseases. In aggregate, the group includes physicians who are board certified in internal medicine, pulmonary disease, critical care medicine and sleep medicine. CFPG is also proud to be one of the few nonacademic centers in the nation hosting an adult CF clinic and one of the largest programs in Florida.

Lung diseases are among the most common ailments worldwide. Within the United States, there is a greater incidence of lung disease throughout the southeast. This group is expanding to meet the demand for care within our community with highly skilled medical specialists concentrated on the latest cutting edge and minimally invasive procedures.

“CFPG is currently conducting 18 active research studies to identify new ways to treat CF, COPD, pulmonary fibrosis and pulmonary hypertension, with additional studies on the horizon,” said Dr. Daniel Layish (who joined the practice in 1997 after doing his Pulmonary/Critical Care Fellowship at Duke University Medical Center.) “It is unusual to see this level of clinical trials at a private practice group, but it simply illustrates our pledge to improve methods and overall care.” Dr. Layish explains that the physicians of CFPG further demonstrate their
commitment to the field of pulmonary medicine and the Metro Orlando community by serving in various medical facilities, associations and university leadership roles. Presently, Dr. Layish is the Medical Director of the Intensive Care Unit, Respiratory Therapy and Pulmonary Rehab at Winter Park Memorial Hospital. He also serves as the Director of the Orlando Clinical Resource Center for the Alpha-1 Foundation (a non-profit organization focused on curing Alpha-1 Antitrypsin Deficiency, a hereditary lung disease).

EXPANDING FACILITY AND STAFF INCREASE CAPABILITIES

This fall, CFPG will replace their existing downtown location with a new state-of-the-art facility. The building will be situated on the same property allowing the current office to evolve into an administrative headquarters. The upgrade will allow for additional exam rooms, while maintaining the same convenient services to patients including onsite computed axial tomography scans. “In house CT imaging allows patients to receive rapid answers for their symptoms. For example, if a patient comes in with shortness of breath, we may give them an explanation that day. We review the scan results together and utilize the picture as a visual tool not only for diagnosis but to help explain findings (such as lung nodules),” explains Dr. Layish. He says the growth of the practice is necessary to accommodate an influx of patients due to aging baby boomers.

“Our area hospitals are growing and Orlando is becoming a go-to place for medical care and training,” says Dr. Layish. In fact, this summer the inaugural class of the University of Central Florida Medical School will be required to complete a medical rotation in critical care and many of the students will work alongside CFPG physicians at area hospital intensive care units. UCF medical students will not be the only new faces visiting with patients of CFPG as the practice is welcoming two new physicians. Presently an Interventional Pulmonology Fellow at Beth Israel Deaconess Medical Center at Harvard Medical School, Jorge Guerrero, M.D., will join the group this July; with Neveen Malik, D.O., a Pulmonary and Critical Care Fellow at the University of Medicine and Dentistry of New Jersey School of Osteopathic Medicine, to join in October.

BED REST USED FOR DIAGNOSIS

Though common, many sleep disorders (including sleep apnea) remain undiagnosed and untreated. In 2009, CFPG established the Institute of Sleep Medicine under the direction of medical director Syed Mobin, M.D., F.C.C.P., F.A.A.S.M. “Roughly twenty to thirty percent of our patients present with sleep disorder related symptoms,” said Dr. Mobin. This sleep center includes a two-bed unit at the East Orlando clinic and six-bed unit at the Altamonte clinic. The Institute of Sleep Medicine is accredited by the American Academy of Sleep Medicine.

Dr. Mobin trained at the Mayo Clinic and serves as an Assistant Professor of Medicine at the University Of Central Florida School Of Medicine. He is also chairman of pulmonary medicine at Florida Hospital. Dr. Mobin, along with six other sleep specialists at CFPG (including Dr. Daniel Layish, Dr. Francisco Remy, Dr. Ahmed Masood, Dr. Eugene Go, Dr. Mahmood Ali and Dr. Tabarak Qureshi), as well as licensed sleep technicians,
conduct and evaluate various sleep studies. “Our sleep practice most often sees patients with obstructive sleep apnea (“OSA”), followed by insomnia, in addition to other sleep disorders such as narcolepsy, restless legs syndrome, circadian rhythm problem, shift work disorder, REM behavior disorder, parasomnias and central sleep apnea,” says Dr. Mobin.

“The risk of sleep apnea increases with age and is more prevalent in men than women. Risk also increases in post-menopausal women. We help many patients diagnosed with narcolepsy that experience involuntary sleep attacks during the day. This can be a danger to their health as well as others,” says Dr. Mobin. Narcoleptic patients usually present in their adolescence, 20s, or 30s. Overnight sleep studies evaluate the sleep stages, sleep efficiency, and the number of times the patient stops breathing or wakes up during the night. When this process is complete, a ‘score’ is calculated. “These findings help our sleep team develop a treatment plan for patients suffering from OSA, which usually starts with continuous positive airway pressure (“CPAP”) therapy,” explains Dr. Mobin.

CFPG’s sleep center provides a comprehensive and multidisciplinary approach. Depending on the severity of a patient’s OSA and ability to tolerate a CPAP machine, other interventions might be required. Specialists such as the orthodontist or otolaryngologist might perform upper airway surgery or recommend oral appliances. Patients suffering from insomnia may require behavioral therapy and relaxation technique with a sleep psychologist.

Obesity is a major contributing factor to sleep apnea. “Treatment plans often include nutritional discussions,” says Dr. Mobin. “Because sleep apnea patients are battling fatigue and excessive sleepiness, it can be especially challenging for them to lose weight physically. Often, treatment of OSA helps patients lose weight. It is essential to treat OSA, particularly since it increases risk of high blood pressure, heart disease, stroke and risk of diabetes,” explains Dr. Mobin. “The Institute of Sleep Medicine is successful because our well trained and dedicated staff provides a comprehensive and caring approach for our patients.”

**CUTTING EDGE TREATMENTS CAN ELIMINATE NEED ‘TO CUT’**

The physicians of CFPG now practicing in Metro Orlando stem from all over the world. “We have doctors from the Philippines, Israel, Pakistan, Vietnam, Puerto Rico, Colombia, India and several other countries. We are like the United Nations of medicine all working together for the well-being of our patients,” describes Dr. Layish. “Along with our diversity, we offer different skills complimentary of each other. It’s like a multidisciplinary practice where we all have our own niche,” adds Y. Daniel Haim, M.D., F.C.C.P., who graduated from Sackler School of Medicine in Tel-Aviv, Israel, before completing his residency at St. Lukes-Roosevelt Hospital in New York and fellowship at Temple University Hospital in Pennsylvania. For Dr. Haim, practicing at CFPG since 1995, that ‘niche’ is interventional bronchoscopy, which includes laser ablation of endobronchial tumors, airway
stents and bronchoscopic biopsy of lung masses and lymph nodes with ultrasound guidance.

“I use laser bronchoscopy to remove endobronchial tumors obstructing the airway. For a benign tumor, the thermal energy of the laser can be a curative procedure; however a malignant tumor would also require chemotherapy in addition to the laser bronchoscopy technique,” describes Dr. Haim, currently serving as President of Florida Hospital’s Medical staff, a member on the Tumor Board, and Assistant Professor at University of Central Florida’s School of Medicine. According to Dr. Haim, this technique has minimal side effects and provides patients with significant relief of symptoms very quickly.

Dr. Guerrero, who has co-authored seven interventional pulmonology research studies, will soon offer another minimally invasive procedure at CFPG called medical thoracoscopy. “Patients with pleural effusions (pleural fluid) who require recurrent drainage of the pleural space to treat shortness of breath or respiratory failure are best treated with thoracoscopy or ultrasound guided tunnel pleural catheter, compared to the current option of thoracentesis. Thoracoscopy is better for the patient since it can be provided under conscious sedation or sometimes general anesthesia in a bronchoscopy suite or operation room. A rigid camera (thoracoscope) allows high definition visualization of the pleural space,” explains Dr. Guerrero.

Dr. Guerrero uses this painless procedure for patients with pleural cancer, fungal infections and inflammatory diseases such as sarcoidosis or Wegener’s Disease. He will be the only Interventional Pulmonologist within Metro Orlando utilizing this advanced technique.

**LUNG TRANSPLANT PATIENTS CAN SOON BREATHE EASY WITH NEW PROGRAM**

Central Florida area patients who suffer with advanced lung diseases such as emphysema, pulmonary fibrosis, pulmonary hypertension and CF may soon be eligible to improve their quality of life through a local lung transplantation program. Andres Pelaez, M.D., a CFPG physician since 2010, will serve as Medical Director of the Florida Hospital Lung Transplant Program, slated to officially launch in July 2012, alongside Surgical Director Hartmuth Bittner, M.D.

Over the past two years, Dr. Pelaez and his team at Florida Hospital have set the foundation for the first Lung Transplant Program in Central Florida by establishing a team of transplant experts, while educating area physicians on patient referral crite-
ria and processes. Dr. Pelaez, also serving as the Assistant Medical Director of TransLife Organ and Tissue Services, has also focused on optimizing donor management through this local organ procurement organization.

“CFPG will lead the pre and post transplant aspects of patient treatment. Through our collaborative process, physicians will first assist Florida Hospital’s Lung Transplant Program by referring appropriate patients and then be a part of the management team when patients are hospitalized,” stated Dr. Pelaez.

**CYSTIC FIBROSIS CLINIC: WHERE CALORIES COUNT**

Dr. Layish says that CFPG is proud of the impact of their Adult CF Center, in which he serves as co-Program Director alongside Francisco Calimano, M.D. “Just a decade or two ago, patients with CF did not reach adulthood. But now life expectancy has improved and we work with over 100 adults managing their genetic condition,” he says. CFPG hosts a CF Clinic twice a month for patients to receive consultations with their doctor, social workers, dieticians, nurses and a respiratory therapist.

“Our team has established a food pantry housed within the Altamonte location of CFPG. CF patients need to consume anywhere from 3,000 to 5,000 calories a day which can become very costly,” said Lindsay Samayoa, CRT, Respiratory Therapist and Adult Cystic Fibrosis Program Coordinator, adding that this effort aids both the patients nutritional and financial needs. “Some patients struggle financially as a result of constant medical costs including specialists’ visits, hospital stays and medication expenses. By having this food pantry, we are helping patients feed themselves and their families by decreasing the financial burden of groceries.” Samayoa says that the majority of patients live anywhere between 1 to 2 hours away and traditionally visit every 1 to 2 months or sooner if problems arise.

“We are dedicated to delivering the highest quality of care for our patients; because that is what they expect and deserve,” states Dr. Layish. It is the mission of CFPG to provide the best quality of pulmonary and critical care medicine. Dr. Haim explains he is proud to be among such a dedicated and diverse group of physicians. CFPG looks forward to many years of continued service to the community in providing high quality care.