

Jefferson Faculty

Charlie Yeo: The Consummate Competitor

Three times a week, Charlie Yeo walks into a locker room, dons a uniform, rallies his team and goes out to face a formidable competitor: pancreatic cancer. He almost always wins.

In his five years as the Samuel D. Gross Professor and Chair of the Department of Surgery, Charles J. Yeo, MD – a lifelong sports enthusiast who once dreamed of becoming the next Bill Bradley – has used his competitive nature and skill to make Jefferson a premier center for pancreatic cancer surgery and research.

Widely – and, Yeo says, inaccurately – credited with developing the mini-Whipple, Yeo has performed 1,028 pancreaticoduodenectomies, including many preserving the pylorus, entire stomach and several centimeters of the upper duodenum. Only one other surgeon in the United States has performed more: Yeo's mentor and close friend, John L. Cameron, MD, the Alfred Blalock Distinguished Service Professor of Surgery at The Johns Hopkins University School of Medicine and former chair of the department.

Many surgeons shy away from the pancreas because of the difficulty of the operations and the high rate of complications and mortality. The reputation of Yeo's team – and he repeatedly emphasizes, "I am not The Man hitting a home run here; this is a team" – draws patients from throughout the country, many told by physicians back home that no hope exists. Yeo's office screens dozens of cases each week and accepts six to 10 new patients. When Yeo arrived in Philadelphia, Jefferson surgeons performed about 20 pancreatic operations each year; today, they perform more than 200.

Research holds equal interest for Yeo. While working at Hopkins, he belonged to a team that began unraveling the intricacies of pancreatic cancer genetics and established that the mini-Whipple was just as effective in most cases as the Whipple but with far fewer complications. He continues his clinical and basic-science research in Philadelphia.

Yeo has written more than 400 peer-reviewed scientific papers and more than 95 book chapters and was the editor-in-chief of the sixth edition of Shackelford's *Surgery of the Alimentary Tract*.

Yeo recently shared his thoughts about medicine, his field and Jefferson.

Q: What motivates you as a surgeon and researcher?

A: Being given the opportunity to operate on a human being is a privilege. Yesterday, I spent 8½ hours taking a tumor out of a woman who was told back in California that it couldn't be removed. This morning, when I visited her, the sun was streaming across her bed and she was as bright as can be. She thanked me, and who wouldn't find that motivating? In my career as a surgical attending, I have performed more than 4,371 operations, and every single one of

them has been a challenge and a learning experience. When I'm in the operating room my heart races and I feel energized. But, in the end, in the big picture, I haven't helped all that many people. The way I can touch more people is by educating them about pancreatic cancer, doing important studies that ask important questions and by making operations safer.

Q: Why did you focus on the pancreas?

A: For the first five years as a junior faculty member at Hopkins, I was a jack of all trades, operating on breast masses, hernias, thyroids, lungs and the vascular system. Because I had federal funding for research involving GI hormones, I received a booklet from the NIH about grants every week or two. One day in 1989 or '90, I noticed a RFA (request for application) involving pancreatic cancer research. Few were doing it at the time. I checked with several of my fellow junior faculty members and we decided: Why not? This multidisciplinary group would get together monthly and we'd throw out ideas; we were all excited about the work. The clinical practice grew with the science.

Q: What advances against pancreatic cancer do you expect to see in your lifetime?

A: Well, I don't know how long I'll live, but I do have a mission: Doing the studies that affect the safety of surgery around the globe and understanding the genetics of pancreatic cancer. We already know that pancreatic cancer isn't one disease that responds to one treatment. Our lab, led by Jon Brody, PhD, discovered that the drug most commonly prescribed in the field does little for several subgroups of patients and they should get a different drug. This finding was almost heretical. I want to be able to practice true personalized medicine, to identify all the different types of pancreatic cancer and to find the perfect combination of surgery and chemotherapy or chemoradiotherapy to combat each one.

Q: Have your expectations about Philadelphia been fulfilled?

A: I came to Jefferson for the leadership opportunity, for a maturing and growth opportunity. It's been very much what I had hoped. I inherited a very good faculty and recruited some very talented junior and senior members to double the size of the department. I have received great support from the Jefferson leadership. People have been tremendously nice and interested in collaboration. Center City is a vibrant place, and it doesn't hurt that the Phillies won the World Series two years ago! Coming to Jefferson has been wonderful for my whole family; my wife, Theresa, is a faculty member in our School of Nursing and the president of the TJUH Women's Board, and my daughter is a senior in high school.

