ADRENAL TUMOR EVALUATION AND PERI-OPERATIVE MANAGEMENT

Carolinias Medical Center is pleased to offer a multidisciplinary program for the management of adrenal tumors using minimally-invasive surgical techniques.

Our team includes laparoscopic endocrine surgeons, pathologists, endocrinologists, anesthesiologists and radiologists. Led by Kent W. Kercher, MD, and B. Todd Heniford, MD, the surgical team has provided individualized care to patients with adrenal tumors for more than 13 years.

Early identification and treatment can dramatically improve quality of life and overall outcomes for patients with hormonally functional and nonfunctional adrenal lesions. Due to the complexity of evaluating and managing endocrine tumors, collaboration among a variety of clinical specialists is required for optimal treatment.

Formal assessment of adrenal tumors requires complete biochemical evaluation to determine the functional status of each lesion. Serum and urine studies are performed at the initial office visit with additional endocrinology consultation and further testing dictated by the nature of the lesion. Adrenal tumors are then classified based on functional and/or radiographic criteria:

• Cushing’s Syndrome (cortisol hypersecretion)
• Conn’s Syndrome (aldosterone over-production)
• Pheochromocytoma (catecholamine/adrenaline hypersecretion)
• Adrenal “Incidentaloma” (radiographically identified lesion without hormonal excess)
• Adrenal Cortical Carcinoma (primary adrenal cancer)
• Adrenal Metastasis (cancer spread to the adrenal gland from another site)
High quality radiographic imaging is critical to localizing and characterizing adrenal tumors. Through the use of state-of-the-art computed tomography (CT) scanning, our team of body imaging specialists can diagnose even the smallest adrenal lesions that may be hormonally active. Our facility is also equipped to provide advanced imaging modalities including MIBG and PET. For patients in need of adrenal venous sampling, experienced interventional radiologists provide an additional option for localizing aldosterone-producing tumors of the adrenal glands.

Depending on the functional status of each adrenal lesion, endocrine referral is readily available to allow for preoperative hormonal evaluation and peri-operative management. Patients with cortisol and adrenaline-producing tumors require particularly close monitoring of blood pressure and hormonal balance prior to, during and after surgery, to ensure safe tumor removal and optimal recovery. Our surgeons, anesthesiologists and endocrinologists have extensive experience in managing these patients around the time of surgery.

LAPAROSCOPIC ADRENALECTOMY
Our highly-trained surgeons perform specialized surgery to precisely and safely remove adrenal tumors. The majority of procedures can be performed laparoscopically. After laparoscopic adrenalectomy, most patients are able to leave the hospital within one to two days of the procedure. Laparoscopic surgery (also known as minimally invasive surgery) allows surgeons to perform the same procedures as in traditional open surgery, but with the added benefits of smaller incisions, less risk of complications, reduced post-operative pain, shorter hospital stays, smaller scars, quicker recovery time and ultimately, a more rapid return to work and regular activities.

CMC ADRENAL CENTER
A COLLABORATIVE PROGRAM OF:

Carolina Specialty Surgery Center
Division of Gastrointestinal and Minimally-Invasive Surgery

Charlotte Radiology
Departments of Body Imaging and Interventional Radiology

Division of Endocrinology
Charlotte Medical Clinic
Mecklenburg Medical Group
CMC Department of Internal Medicine

Carolina Pathology Group

Southeast Anesthesiology Consultants

Genetics/Cancer Risk Assessment Program

Kent W. Kercher, MD, FACS, is Chief of Minimal Access Surgery in the Division of Gastrointestinal and Minimally Invasive Surgery at Carolinas Medical Center. He also serves as co-director of CMC Adrenal Center, Carolinas Laparoscopic and Advanced Surgery Program (CLASP) and Carolinas Hernia Center. As a Clinical Professor of Surgery at the University of North Carolina, Dr. Kercher’s primary clinical interests include minimally invasive solid organ and gastrointestinal surgery, laparoscopic adrenalectomy, laparoscopic hernia repair and laparoscopic splenectomy. In addition, Dr. Kercher has a special interest in laparoscopic nephrectomy for live donor kidney transplantation and laparoscopic nephrectomy for benign and malignant diseases of the kidneys.

B. Todd Heniford, MD, FACS, is Chief of the Division of Gastrointestinal and Minimally Invasive Surgery at Carolinas Medical Center and Clinical Professor of Surgery at the University of North Carolina. He also serves as co-director of Carolinas Laparoscopic and Advanced Surgery Program, Carolinas Hernia Center and CMC Adrenal Center. Dr. Heniford’s clinical interests include all facets of laparoscopic surgery, with special interest in esophageal and anti-reflux surgery, hernia repair, solid organ surgery and minimal access approaches for cancer.

FOR MORE INFORMATION OR TO SCHEDULE AN APPOINTMENT CONTACT CMC ADRENAL CENTER AT 704-446-2772, OR VIA EMAIL AT CMC-ADRENALCENTER@CAROLINASHEALTHCARE.ORG