

# Turning Ideas into Action: The Urology Advisory Group



Michael and Gale Silverberg

“What if?” is one of the most exciting and powerful questions in medicine. It opens minds and open doors to new opportunities, new approaches, and new treatments to benefit patients.

Over the past six years, the Urology Advisory Group has been assisting Yale Urology in transforming the “What if?” questions into action plans by supporting its strategic and philanthropic goals and raising funds for unfunded urology missions. The group’s efforts—under the leadership of chairman Michael Silverberg—have enabled Yale urologists to share their expertise with underserved patients in the New Haven community and as far afield as Uganda.

“When we started the group in December 2013, we wanted to accomplish two goals,” said Mr. Silverberg, a patient of Yale Urology and an insurance advisor in West Hartford, Connecticut. “We wanted to get the name of Yale Urology out into the community so that people know that Yale is a place to get care equal to or better than what they’d find in Boston or New York. And we wanted to raise money for situations where current Yale funding is not available. I think we’ve done a pretty good job at both.”

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When Mr. Silverberg was diagnosed with an aggressive form of prostate cancer in spring 2013, there was no doubt in his mind where he would seek treatment. He has had a lifelong fondness for Yale. “I was born at Grace New Haven Hospital, where Smilow Cancer Hospital is today,” he said. “It was natural for me to go to Yale.”

Nostalgia aside, Mr. Silverberg knew he’d be in skilled hands at Yale. He and his wife, Gale, had contributed to the building fund for Smilow Cancer Hospital and knew of Yale’s vast resources for cancer care. Through his involvement with the Yale Cancer Center Director’s Advisory Board, he heard a presentation by Peter Schulam, MD, PhD, and was thoroughly impressed by Dr. Schulam’s expertise.

“When I told my daughter in Ohio that I was diagnosed with prostate cancer and getting

treatment at Yale, a urologist acquaintance of hers said, ‘Wow, how did Mike connect with Dr. Schulam?’” he recalled. “I knew I was fortunate to be dealing with a nationally renowned prostate and urological surgeon.”

Under Dr. Schulam’s leadership, Yale Urology has expanded from eight to more than 30 physicians at the forefront of their field. Mr. Silverberg benefitted from the team’s advanced skills. Preston Sprenkle, MD, a pioneer in advanced imaging techniques, conducted his MRI-guided biopsy. Mr. Silverberg underwent surgery with Dr. Schulam, an expert in minimally invasive surgery. After a course of radiation, trace amounts of cancer remain in his blood. As a result, he continues on hormone treatment and closely monitors his PSA levels under the watchful eye of Daniel Petrylak, MD, a leader in the research and development of new drugs and treatments to fight urological cancers. “My care has been exceptional,” Mr. Silverberg said. “Every person I have encountered has been friendly, efficient, and caring.”

Mr. Silverberg’s gratitude for his care at Yale Urology made it an easy “yes” when he was

asked by Dick Capobianco to help launch the Urology Advisory Group in late 2013. The group of 25 volunteers meets twice a year with Dr. Schulam to hear presentations about current—and prospective—developments in Yale Urology. “To hear doctors speak about their work on such an intimate basis is extremely meaningful,” Mr. Silverberg said. A key takeaway—and key talking point for when group members take their message to the public—is the wide range of conditions treated by Yale Urology. “It’s not just about prostate cancer,” Mr. Silverberg said. “There are serious pediatric and female urological problems as well that Yale Urology has the expertise to treat.”

For example, one of the group’s first sponsorships was for a public information campaign about pelvic floor disorders championed by

Leslie Rickey, MD, MPH. Complications with bladder control, vaginal support, and bowel functions can happen for women at any age and be triggered by childbirth, menopause, or aging. Many women, however, do not seek treatment, either out of embarrassment, uncertainty about medical coverage, or a mistaken assumption that these conditions are a normal part of the aging process. “We helped Dr. Rickey get the word out to the general population in New Haven about these conditions and the treatment that’s available,” Mr. Silverberg said.

The Urology Advisory Group also sponsored the creation of a teaching and surgical program in Kenya that has since switched its base to Uganda. Twice per year, a Yale Urology faculty member and urology resident provide hands-on training in urological surgery to physicians in vastly under-resourced areas. The team also brings needed medical supplies. “The stories the urologists have brought back from Uganda have been unbelievable,” Mr. Silverberg said. “The types of tumors they see are staggering, but it’s what these people learn to live with because they don’t have urological care available to them.”

That outlook is now changing, thanks in large part to the support of the Urology Advisory Group. “It is a distinct pleasure working with Mike and everyone on the Urology Advisory Group,” said Dr. Schulam. “They are engaged and enthusiastic about our work and we are grateful for their support of the efforts of the physicians, researchers and staff of the Yale Urology.”

Mr. Silverberg always looks forward to hearing the next “What If?” question that Dr. Schulam might present at the upcoming Urology Advisory Group meeting. “Our members are a wonderful group of very generous, committed people who are very loyal to Yale Urology,” Mr. Silverberg said. “We want to help, not just by giving money but by giving our support in ways that will bring people to Yale Urology’s doors.”