



Dr. Gustavo G. Fernandez-Ranvier: my stories and thoughts as an endocrine surgeon

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Editor's note

The focused issue “*The Management of Thyroid Tumors in 2020 and Beyond*” edited by Drs. Jonathon Russell and Jeremy Richmon is going to be released in *Annals of Thyroid (AOT)* in the coming months. This issue aims to review the state-of-art in the management of thyroid pathology, to provide a venue for original research focused on remote access or minimally invasive thyroid management and to review the success at extending proven management strategies into new geographic regions. Taking this opportunity, we have done a series of interviews with the authors discussing the highlights of their articles and sharing their experiences or stories in this field.

Dr. Gustavo G. Fernandez-Ranvier is an assistant professor in Surgery at the Mount Sinai Hospital in New York City. His areas of specialty and research interests include thyroid and parathyroid disease, adrenal and pancreatic neuroendocrine tumors, and minimally invasive and bariatric surgery. It is great honor for *AOT* to interview Dr. Fernandez-Ranvier on his stories, current focus, opinions on transoral endoscopic thyroidectomy vestibular approach (TOETVA) and bilateral axillo-breast approach (BABA).

Expert's introduction

Dr. Fernandez-Ranvier (*Figure 1*) is a board certified and fellowship trained surgeon who received his Bachelor's degree in biology and his Doctor of Medicine at the University of Buenos Aires School of Medicine in Argentina. Dr. Fernandez-Ranvier has undergone extensive training. He completed his residency in general surgery at A. Posadas/Parmenio Piniero Hospital in Buenos Aires, Argentina. Thereafter, he attended the University of California, where he completed a 3-year postdoctoral fellowship in Endocrine Surgical Oncology and a clinical



Figure 1 Gustavo G. Fernandez-Ranvier, MD, PhD.

fellowship in Colorectal Surgery focusing on minimally invasive approaches and robotic surgery for the treatment of colon and rectal cancer. Dr. Fernandez-Ranvier remained in California, where he completed additional residency programs at Loma Linda University Medical Center and San Joaquin General Hospital. He has also obtained a Doctor of Philosophy degree (PhD) at the University of Buenos Aires, School of Medicine with his PhD thesis entitled “*Clinical and Molecular Pathogenesis of Parathyroid Tumors*”. This original research was performed at the University of California at San Francisco under the mentorship of world renowned endocrine surgeon, Dr. Orlo H. Clark. Dr. Fernandez-Ranvier went on to complete his fellowship in Minimally Invasive Endocrine and Metabolic Surgery at the Icahn School of Medicine at Mount Sinai and is currently an assistant professor in Surgery at the Mount Sinai Hospital in New York City. He also serves

as the director of the clinical research fellowship and the associate program director of the minimally invasive and metabolic surgery clinical fellowship. His areas of specialty and research interests include thyroid and parathyroid disease, adrenal and pancreatic neuroendocrine tumors, and minimally invasive and bariatric surgery.

Interview

AOT: *You received your Bachelor's degree in biology, MD and PhD in Argentina where you also completed your residency. And then you completed a three-year postdoctoral fellowship and a clinical fellowship in America. Could you make a comparison between medical education and medical system of Argentina and America?*

Dr. Fernandez-Ranvier: Medicine is the same anywhere in the world. In a third world country like Argentina, resources are limited when compared to America. With that being said, physicians in Argentina are used to working with less, and are forced to deliver the best care to their patients by going the extra mile each time. Medicine in America is at a different level. America is where ideas and innovation happen and where top notch training helps to produce many of the world's best physicians.

AOT: *What made you focus on your field?*

Dr. Fernandez-Ranvier: I'm an endocrine and metabolic surgeon and I have always had the attraction and the vision to follow a career as a doctor focusing in endocrine surgery. My first steps in the endocrine surgery world were taken in 2005, when I was looking for an opportunity to do research in the field. That's when I met Dr. Orlo H. Clark at the University of California in San Francisco (UCSF) who gave me an opportunity to join his prestigious group. During the interview, Dr. Clark asked me "what were my goals in life and in my career?" I told him that I was looking for a place to do research where I can be productive, grow and show the strengths and commitment that I have for the sciences. Then he asked me, "When would you be available to start if a position is offered to you?" My answer was "Yesterday". That moment made a mark on my soul. Dr. Clark is one of the nicest and most dedicated individuals in surgery, and working with him created an opportunity

to challenge myself as a scientist. In that moment my career as an endocrine surgeon began; it led to multiple basic science and clinical research presentations at national and international conferences and ultimately to multiple publications in renowned journals. But most importantly, I made friends and valuable connections in the field.

AOT: *What is your current research focus? Is there any program or project you now involved in? If there is, could you introduce it to our readers?*

Dr. Fernandez-Ranvier: One of my current focuses and interest has been on how best to treat patients with minimally invasive procedures. I am actively involved in developing and performing a novel scarless transoral approach for the treatment of thyroid (TOETVA) and parathyroid (TOEPVA) tumors, and to date, we have successfully treated dozens of local and international patients with this approach.

AOT: *In the focused issue "The Management of Thyroid Tumors in 2020 and Beyond", you have contributed an article with Dr. William B. Inabnet III and Dr. Hyunsuk Sub on "TOETVA vs. BABA". How do you see TOETVA and BABA? Could you make a comparison between them?*

Dr. Fernandez-Ranvier: This process entailed a paradigm shift, away from the traditional trans-cervical thyroidectomy, toward a more refined technique in an attempt to hide scarring and improve cosmetics in the neck region. Both TOETVA and BABA remote access techniques to treat patients with a different spectrum of thyroid and parathyroid disease are excellent options for those patients who are concerned for the visible surgical neck scar after the traditional surgery. TOETVA is a purely scarless technique with small incisions in the oral cavity (vestibule) whereas the BABA approach, is performed through four very small incisions made in each axilla and one along the breast.

AOT: *What would be your suggestions for students or doctors who are leaving their homeland to study medicine?*

Dr. Fernandez-Ranvier: It is important to set in advance your goals and expectations for your future career and

life. Being away from your family roots and culture for an extended period of time can cause anxiety but can also create unlimited opportunities. My suggestion is to never give up, never stop dreaming, and don't forget to dream big.

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