

DHC Interviews: Dinesh Kalra, MD, FACC, FSCCT, FSCMR, FNLA

The University of Louisville (UofL) Hospital remains a pillar of the Kentucky healthcare community due to its long-standing commitment to innovation, research, and exceptional medical care. This foundation was built by, and remains intact, thanks to numerous talented physicians who lent their talents to the institution.

One of UofL Hospital's newest physicians is the acclaimed Dr. Dinesh Kalra, who joined the UofL Department of Medicine as the new Chief of the Division of Cardiovascular Medicine on September 1. Dr. Kalra will also serve as Professor of Medicine and Endowed Chair of Cardiovascular Innovations.

Aaron Burch, Communications Director for Doctors for Healthy Communities (DHC) recently sat down with Dr. Kalra to talk about his position at UofL Hospital, his past experiences as a physician in Chicago, and his goals for the future of his department. The interview below has been edited for clarity. Thank you to Dr. Kalra for speaking with DHC, and good luck with all your endeavors at UofL Hospital.

DHC: Dr. Kalra, congratulations on your new position at the University of Louisville. Could you talk about your responsibilities as UofL's Chief of Cardiovascular Medicine?

Dr. Kalra: My primary responsibility is to make sure the UofL Division of Cardiology leads in innovation, patient care, and is the best in cardiovascular health care delivery. Our division in the academic school of medicine has always been a strong one with a rich history. For example, we were the first in the state to do heart transplants. Just a few weeks ago, physicians at UofL Health–Jewish Hospital were the first in the world to put in a particular kind of artificial heart (an Aeson Heart) in a woman.

We have had many firsts in the field of cardiology over the past several decades. I want to continue that tradition of being excellent and leading innovation. As an academic institution, UofL has a mandate to provide cutting-edge and compassionate care.

How large is your department?

The division of cardiology at UofL Health has a total of 25 cardiologists. They are in various subspecialties, but that is a total cardiology strength. All of them are experts in their field. We get referrals for complex cases from far and wide. Case in point, we have the only heart transplant hospital in the greater Louisville Metro area. We do the greatest number of heart valve procedures without open-heart surgery.

I'm the only board-certified Lipidologist (a physician who specializes in advanced cholesterol disorders) in the area. I'm also an expert in cardiac CT and cardiac MRI, which allows us to detect heart disease much earlier in patients by noninvasive imaging.

UofL is also growing its program in advanced cardiac imaging at University Hospital and Jewish Hospital. All these new technologies and tools are really amazing in terms of how sensitive they are in picking up disease before overt damage has occurred and informing patient treatment. Such newer technology allows us to give our patients state-of-the-art care without having to travel outside of the state.

What goals do you have to maintain the integrity of the department? And, how would you like to continue to evolve the clinical care and research currently taking place?

I have a 3-pronged plan to address the needs of the community. First and foremost, I wish to bring an even bigger cadre of experts into the University program, people who have specialized skills within cardiology. We are hiring more heart transplant and heart failure doctors, preventive cardiologists, and interventional cardiologists. We're also going to hire cardiologists with expertise in congenital heart disease and electrical disorders of the heart. The first thing we need to do is boost our division's workforce.

Second, we are starting to provide preventive cardiac care at a much earlier stage in a patient's life. We want to see patients 20 years before their first heart attack rather than after. We are addressing risk factors such as high cholesterol, obesity, diet, physical activity, sleep disorders, hypertension, etc. We want to see who has coronary plaque i.e., who has a potential blockage, and find that out decades before it becomes a problem, so we can prevent that plaque from producing a heart attack or stroke.

Third, UofL has a rich history of research. We are continuing that tradition by empowering our physicians and bringing in new researchers to lead the way in areas such as stem cells and genetics, heart transplantation, newer devices, and cardiac imaging, one of my areas of expertise.

What challenges do you foresee to realize these goals?

The first hurdle is locating enough financing for these bold projects. They're all doable, but our health system has gone through some lean times. Due to Covid and other financial events, our revenues had recently taken a hit. We are always looking for philanthropy and talking with people who want to invest in the future of heart disease and research. That's the first aspect to consider. Next is building an even stronger clinical team to deliver these new treatments to our communities.

The second involves teaching our population to embrace healthier lifestyles. Moving from Chicago to Kentucky, I see that there is less focus here on healthy lifestyles. Kentucky, unfortunately, leads from the bottom in rates of obesity, diabetes, hypertension, and unhealthy eating.

It takes time to change a community mindset, but it can be done. We want to discuss plant-based diets, getting more exercise, not smoking, and seeing your doctors regularly for preventive care. Focusing on prevention in the whole population is the next big wave in medicine. We can do it. In 20 to 30 years, I hope people look at a lack of exercise and a poor diet the same way as smoking today.

How has the pandemic shifted the dynamics of the department (if at all)?

Covid has exposed weaknesses within our health care systems, but it has also given us opportunities to build upon. The entire world was shaken when Covid first hit. We didn't have any plans beforehand, because we had never gone through something similar. It is a testament to science and research that we were quickly able to identify RNA vaccines as a clinical tool. Within a span of nine months, researchers were able to come out with a clinically effective vaccine. The moral of that story is that we must commit to supporting biomedical research even when times are good, so we can prepare for unforeseen eventualities that may come down the road.

From the perspective of cardiology, during the acute cases of Covid, we saw fewer patients seeking care for heart attacks and strokes. People were scared to come to the hospital, and they were unfortunately having their heart attacks at home without medical care. Unfortunately, we thus witnessed an increased number of deaths not only from Covid, but also from heart attacks and strokes, and other cardiovascular diseases, which was very unfortunate. Now thankfully that trend is starting to reverse. Our message to the

community is "Don't be afraid to come to a hospital when you need care, especially if you are experiencing chest pains, shortness of breath, or stroke symptoms."

We have ICU beds, ventilators, and other technology available. We're doing everything possible to mitigate the spread of Covid. Follow up with your doctors, even for routine care. Don't be afraid of seeing your healthcare provider today if you need medical care. Patients who have heart disease are at a higher risk of contracting covid if they are unvaccinated, so it is really important for cardiac patients to get vaccinated and the booster if their physicians advise that.

I think of Louisville as a smaller Chicago in some ways. We have a series of small boroughs that come together to form a vibrant city. We have a dynamic food scene. The residents have significant pride in their city. How are you adjusting to the move, and has anything stood out to you so far?

I love this community and the city. I've been nothing but pleasantly surprised. It struck me how kind and friendly everyone was when I arrived. Kentucky is the number one state for kindness in the country. I can honestly say that I've experienced that firsthand. That has been remarkable, and I want to thank the city of Louisville for extending to me and my family that warmth, Southern hospitality, and kindness.

Second, you can get anywhere within the city in 20 minutes. The area is really beautiful. I get up every morning and I'm able to see deer in my backyard. Not a knock against Chicago, but this is a fascinating change of scenery. Not to mention, it has an amazing, vibrant food scene, and a lot of culture. Louisville is multi-ethnic and very diverse. It's really a fun and amazing city, and I'm glad I moved here.

Our primary audience is health care workers, non-profit leaders, and active citizen volunteers around the city. Is there anything you'd like to say to them?

I want to do is give a big shout-out to all the people working in health care – that includes our nurses, physicians, and technicians. All of us were unprepared for this pandemic two years ago. Collectively, they have worked with so much grit, courage, determination, and compassion. They've made personal sacrifices. We will come out on the other side of this stronger than ever. Hats off to all of them.

Thank you again to Dr. Kalra for this great interview. To learn more, read <u>UofL's Press</u> <u>Release</u> welcoming him to the city and the intuition.



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