OHNS Spotlight

October 2025

HENRY FORD HEALTH®

In this issue:

New $3M NIH grant supports Henry Ford + MSU researchers studying HPV-positive head and neck cancers

Researchers from Henry Ford Health + Michigan State University Health Sciences have been awarded a $3 million grant from the National Institute of Dental and Craniofacial Research to study new treatments for patients who have head and neck cancer caused by the human papillomavirus, or HPV.

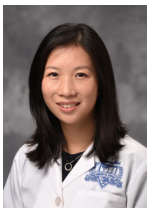
"HPVs cause most cervical cancers and approximately 25% of head and neck cancers, and that number is rising sharply," said Dohun Pyeon, Ph.D., professor of microbiology, genetics and immunology in the MSU College of Human Medicine and College of Natural Science and principal investigator on this research. "However, scientists don't know much about how the virus helps these cancers evade the body's immune defenses. Our research has identified the MARCHF8 protein as a possible culprit, inhibiting the immune system to kill these infected tumor cells. We want to understand how that happens and how to stop it."

Pyeon says that HPV-positive cancers often bypass the immune system and other natural mechanisms in the body that typically clear early-stage cancer cells very efficiently. And given that an estimated 600 to 700 million people in the world are already infected with HPV, the number of patients who will need treatment for head and neck cancer is expected to rise substantially.

Pyeon and a team of researchers from Henry Ford and MSU discovered preliminary answers about how to improve the body's detection of these cancer cells with grants from the Henry Ford + MSU Cancer Seed Funding Program and the Strategic Partnership Grant from the MSU Research Foundation.

"When cells become infected by a virus, they may develop cancer more rapidly," said Qing-Sheng Mi, M.D., Ph.D., vice chair for research in the MSU Department of Dermatology, director of the Center for Cutaneous Biology and Immunology, and director of the immunology program of the Henry Ford Cancer Institute at Henry Ford Health. Mi is also professor of medicine at the MSU College of Human Medicine and serves as the co-principal investigator on this project. "These virus-infected cells often downregulate the key molecule enabling the tumor antigen to stimulate the immune system, essentially cloaking themselves from T cell surveillance. Our single-cell analysis of the tumor microenvironment indicates that knockdown MARCHF8 can significantly boost antitumor immunity, making it a potential new therapeutic target."

"Findings from this research are intended to reduce the intensity of treatment of HPV-positive head and neck cancers and create a better treatment with fewer side effects," said Steven Chang, M.D., chair of the Department of Otolaryngology/Head and Neck Surgery at Henry Ford Health, interim chair of the Department of Otolaryngology/Head and Neck Surgery at the MSU College of Human Medicine, and a contributor to the research. "We highly recommend the HPV vaccine for those who can get it. Because HPV is a virus, in some patients it can integrate into a patient's DNA and disrupt the normal cell functions for many years without being eliminated by the immune system. This can lead to cancer, and we want to change that."



Samantha Tam, M.D., otolaryngologist at Henry Ford Health adds that while treatment of this disease is very effective at curing the disease, all treatment modalities will result in changes to function, affecting patients for their lifetime. "Unfortunately, oral HPV infections, which cause these cancers, are extremely common. Understanding how these infections develop into cancers is an essential step to improving our treatment options for patients in the future."

To learn more about the Henry Ford Health + Michigan State University Health Sciences collaboration, a 30-year partnership established in January 2021, to discover and advance a new standard of health, visit henryfordmsu.org.

HENRY FORD HEALTH + MICHIGAN STATE UNIVERSITY Health Sciences

Our Multidisciplinary, Patient-Centered Approach to Advancing Obstructive Sleep Apnea Treatment at Henry Ford Health

As a former Otolaryngology resident at Henry Ford, I was fortunate to receive mentorship and early exposure to the field of sleep surgery. I was drawn to this specialty because of the variety of surgical procedures and patient populations we treat, the opportunity to collaborate with specialists across disciplines, the excitement of new and innovative treatments for sleep issues, and the profound impact that treating sleep disorders can have on a patient's quality of life. The early exposure and training brought me back to Henry Ford where our commitment to innovation and integrated care has led to the growth of our comprehensive sleep medicine and surgery programs.

Determining the best treatment plan for the patient
I believe that a thorough patient history is one of the most important parts of determining whether surgery is the best option for a patient. Understanding a patient's symptoms, what treatments they have already tried—and why those may have failed—as well as their personal motivations for seeking treatment, help guide us toward the best treatment plan. Of course, the physical exam and sleep study data also play important roles in determining recommendations. In general, surgical treatments for OSA tend to be more successful in patients with a lower BMI or those with clearly identifiable anatomic causes of obstruction.

After consultation in the office, many patients undergo a drug-induced sleep endoscopy under sedation, which allows us to determine the specific site(s) of upper airway obstruction during sleep. Through this process we're able to identify a suitable treatment path for the vast majority of patients, whether that involves surgery, optimizing non-surgical therapies, or helping patients overcome barriers to effective CPAP use.

Implementing patient care pathways to enhance patient outcomes
We have been working extensively for the past two years on developing a comprehensive patient care pathway for the treatment of obstructive sleep apnea. Research has shown that clinical care pathways promote consistent and high-quality patient-centered care. Our Otolaryngology department encompasses divisions of Dentistry and Oral and Maxillofacial Surgery, and we work closely with our colleagues in Sleep Medicine, Obesity Medicine, Behavioral Health, and more disciplines. Our teams continuously collaborate to improve this pathway. This multidisciplinary approach prioritizes patient-centered care, increases efficiency, and helps patients find the most appropriate and effective treatment option.

Recognizing the significant burden of obstructive sleep apnea (OSA) on patient health and quality of life, our program is designed to provide highly individualized, evidence-based surgical options.
Historically, most sleep surgery procedures have focused on addressing areas of upper airway collapse by removing or stiffening tissue. These surgeries include tonsillectomy and adenoidectomy, pharyngoplasty, and epiglottic procedures, among others. While those surgeries still play an important role for many patients, they have limitations—particularly since OSA can recur over time due to aging, loss of muscle tone, or weight gain.

In contrast, the newer hypoglossal nerve stimulator implants deliver stimulation to activate muscles of the tongue and upper airway during sleep to prevent upper airway collapse. Neurostimulation procedures offer an advantage in that their effects can be adjusted over a patient's lifetime, providing a more adaptable and durable treatment option. Nasal surgeries and in-office procedures are also frequently performed to improve nasal breathing during sleep and snoring, and these play an important role in helping many patients tolerate and effectively use CPAP, as well as enhance the success of other OSA treatments. Furthermore, we collaborate with Dentistry to offer patients the option of oral appliance therapy and with Oral and Maxillofacial Surgery to evaluate patients who may benefit from skeletal surgery.

Most of the patients I see have discontinued CPAP or never successfully initiated it due to intolerance. Sleep surgery options have helped many of these individuals finally be able to get effective treatment.

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A new era in treatments for OSA

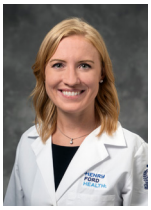
Henry Ford has a longstanding history of innovation in research and the treatment of sleep disorders. We are committed to staying at the forefront of innovation in sleep surgery and are currently preparing to be among the first to offer the newly developed bilateral hypoglossal nerve stimulator implant, expanding our range of advanced therapeutic options. Furthermore, our colleagues in Sleep Medicine have been active in clinical trials exploring potential pharmaceutical options for sleep apnea. Our goal is to evaluate patients holistically, using the latest diagnostic tools, and offer a full spectrum of interventions tailored to individual anatomical and physiological findings.

How sleep surgery has made a difference

Sleep surgery has made a significant difference in the lives of many patients. Beyond alleviating their sleep-related symptoms, it has led to positive effects on OSA-related comorbidities for some and has even improved relationships and the quality of sleep for many of their bedpartners. It's incredibly rewarding to hear patients share how much of a difference these procedures have made for them.

Partnering to improve health

As the understanding of sleep-disordered breathing evolves, so must our interventions. At Henry Ford, we are proud to offer a comprehensive, innovative, and collaborative approach to treating sleep apnea and related disorders, and we are committed to partnering with our colleagues in medicine to deliver the best outcomes for our patients.



Andrea Plawecki, M.D. is dual-board certified in Otolaryngology—Head and Neck Surgery and Sleep Medicine. Her clinical and research interests include surgical treatments for obstructive sleep apnea and sleep-related breathing disorders, as well as improving quality of multidisciplinary care for otolaryngologic conditions and sleep disorders.

Quick facts

Henry Ford Hospital has been recognized as a Best Hospital for 2024-25 in the Ear, Nose & Throat specialty by U.S. News & World Report, which features the top 50 of America's "Best Hospitals" in 15 specialties.

Henry Ford Otolaryngology

- Includes the Divisions of Audiology, Oral & Maxillofacial Surgery and a section of General Hospital Dentistry
- USNWR Top Hospital Ranking 3 years in a row (2017-2019)
- Otolaryngology services provided at 5 Henry Ford Health hospitals
- 9 outpatient clinics
- More than 3,500 surgeries annually
- More than 68,000 outpatient visits
- 26 otolaryngologists in the department
- 4 oral & maxillofacial surgeons
- 2 general hospital dentists
- 27 audiologists, 4 audiology fellows
- 15 advanced practice providers
- 20 otolaryngology residents
- 1 head and neck cancer fellow
- 1 rhinology fellow
- 1 sleep fellow
- 1 OMFS head and neck fellow
- More than $36M in patient revenue
- Department produced in 2024:
  peer reviewed publications = 69
  abstracts = 31
  oral/poster presentations = 27

Head and Neck Cancer

- In top 10 percentile for time of initiation of postoperative radiation therapy for head and neck cancer patients < 6 weeks
- 900 surgeries
- Surgery services provided at all 5 Henry Ford Health hospitals
- More than 80 reconstructive cases annually
- 5,800 outpatient visits

Some Highlighted 2025 Manuscripts from our Team:

Bennett E, Marino J, **Stach BA**, Ramachandran V, and Faulkner K. Clinical Feasibility of the Audible Contrast Threshold (ACT) Test. Hearing Review 2025; 32(1):22-25.

Donaldson LB, Mason W, and Jones LR. Evaluation and Management of the External Nasal Valve. Otolaryngol Clin North Am 2025; Epub ahead of print. PMID: 39755472

Eide JG, Pellizzari R, Saibene AM, De Donato L, Bitner B, Wei K, Panara K, Kshirsagar R, Lee D, Douglas JE, Whitehead R, Filip P, Papagiannopoulos P, Tajudeen B, Kuan EC, Adappa ND, Palmer JN, and **Craig JR**. Craniofacial Pain Locations and Outcomes After Endoscopic Sinus Surgery for Unilateral Sphenoid Sinusitis: A Multi-Institutional Study. Laryngoscope 2025; Epub ahead of print. PMID: 39749758

Henner DE, Drambarean B, Gerbeling TM, Kendrick JB, Kendrick WT, Koester-Wiedemann L, Nickolas TL, Rastogi A, Rauf AA, Dyson B, **Singer MC**, Desai P, Fox KM, Cheng S, and Goodman W. Practice patterns on the management of secondary hyperparathyroidism in the United States: Results from a modified Delphi panel. PLoS One 2025; 20(1):e0266281. PMID: 39888902

Kondamuri NS, Dedhia RC, and **Yaremchuk KL**. Ten-Year Update: The State of Sleep Surgery Training for Otolaryngologists. Otolaryngol Head Neck Surg 2025; Epub ahead of print. PMID: 40134210

Graboyes EM, Maurer SN, Kistner-Griffin E, Armeson K, Starr E, McLeod T, Balliet WE, Doenges J, Slavin-Spenny O, Vanderlan JR, Day A, Pipkorn P, Puram SV, **Tam SH**, Ruggiero KJ, and Sterba KR. Protocol for a multisite, parallel-group, randomized clinical trial comparing a brief tele-cognitive behavioral therapy intervention (BRIGHT) with attention control for the reduction of body image-related distress among head and neck cancer survivors. Contemp Clin Trials 2025; 153:107888. PMID: 40139457

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Adjei Boakye E, Nair M, Al-Antary N, Wilson C, Kerr K, Zatirka TM, Hirko KA, Elsiss F, **Chang SS**, Movsas B, Ryan M, and **Tam S**. Exploratory analysis of electronic patient-reported outcomes collection: comparing online and in-clinic modalities in cancer care. Qual Life Res 2025; Epub ahead of print. PMID: 40237928

Craig JR, **Mason W**, Laumet G, Alkhoory W, Hensley MD, Holleman D, and Hason N. Sensory and Autonomic Fibers in Anterior Ethmoid, Posterior Nasal, Posterolateral Nasal Nerves. Laryngoscope 2025; Epub ahead of print. PMID: 40192001

Singer MC, and Terris DJ. Potential Disadvantages of the Modified Miami Criteria. JAMA Otolaryngol Head Neck Surg 2025; Epub ahead of print. PMID: 40402508.

Witek ME, Ward MC, Bakst R, Chandra RA, **Chang SS**, Choi KY, Galloway T, Hanna GJ, Hu KS, Robbins J, Shukla ME, Siddiqui F, Takiar V, Walker GV, Fu Y, and Margalit DN. Paranasal Sinus and Nasal Cavity Cancers: Systematic Review and Executive Summary of the American Radium Society Appropriate Use Criteria. Head Neck 2025; Epub ahead of print. PMID: 40344605.

Okifo O. The Anatomy of the Mind. JAMA 2025; Epub ahead of print. PMID: 40569612.

Hijazi KM, Mao H, Holdsworth DW, Dixon SJ, **Armstrong JE**, and Rizkalla AS. Prototype design of porous Ti6Al4V intraosseous implant for use in mandibular reconstruction. J Mech Behav Biomed Mater 2025;171:107144. PMID: 40753708

Some Highlighted 2025 Manuscripts from our Team (continued):

Schuman AD, McKeon M, Allen J, Altaye M, Amin MR, Bayan SL, Belafsky PC, Bock JM, DeSilva BW, Dion G, Ekbom DC, Friedman AD, Fritz M, Guardiani EA, Johnson C, Kasperbauer J, Kim B, Krekeler BN, Kuhn M, Kwak P, Ma Y, Madden LL, Matrka L, **Mayerhoff RM, Piraka C**, Rosen C, Tabangin M, Wilson K, Young VN, Postma G, and Howell RJ. Dysphagia Outcomes in Zenker Diverticulum: A Longitudinal POuCH Study. Laryngoscope 2025; Epub ahead of print. PMID: 40828004.

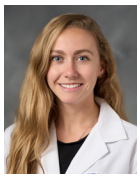
Dunn MR, Fridman I, Kinlaw AC, Neslund-Dudas C, **Tam S**, and Elston Lafata J. Identifying Barriers to Being Offered and Accepting a Telehealth Visit for Cancer Care: Unpacking the Multi-Levels of Documented Racial Disparities in Telehealth Use. Health Serv Res 2025; e14461. Epub ahead of print. PMID: 39976577

Bernacchi V, Hirko K, **Boakye EA, Tam S**, Lucas T, and Moss JL. Lung cancer disparities in rural, persistent poverty counties: a secondary data analysis. BMC Public Health 2025; 25(1):878. PMID: 40045229

Henry Ford Health Otolaryngology Providers

To request a consult or referral to a Henry Ford Health physician, call (877) 434-7470 or refer a patient online.

Behavioral Health Psychologist

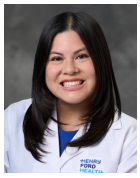


Elise Pearl, Ph.D.

Pediatric Otolaryngology

Ilaaf Darrat, M.D.
Division Head

Comprehensive Otolaryngology



Linh Dang, M.D.

Alvin Ko, M.D.

Christie Morgan, M.D.

Pavan Reddy, M.D.

Joshua Romero, M.D.

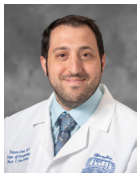
Ravi Shah, M.D.

Jonathon Vargo, M.D.

Endocrine Surgery

Michael Singer, M.D.
Division Head

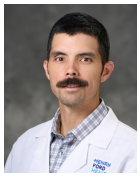
Facial Plastics / Reconstruction



Robert Deeb, M.D.
Division Head

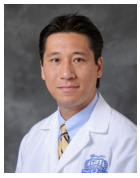
Lamont Jones, M.D.

Laura Garcia-Rodriguez, M.D.

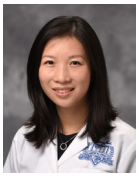


Tate Naylor, M.D.

Head and Neck Cancer Surgery

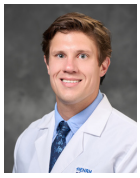


Steven Chang, M.D.
Department Chair

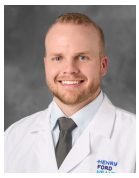


Samantha Tam, M.D.
Division Head
Vice-Chair

Shivangi Lohia, M.D.



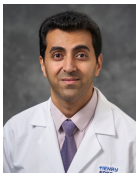
Richard Raad M.D.



Jake Sims D.O.

Head And Neck Cancer Surgery / Microvascular Reconstruction

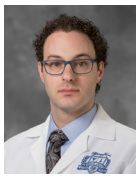
Syed Ali, M.D.



Rushil Dang, D.M.D., M.S.

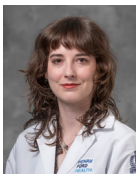
Suhael Momin, M.D.

Laryngology and Professional Voice



Ross Mayerhoff, M.D.
Division Head

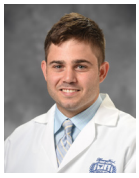
Glendon Gardner, M.D.



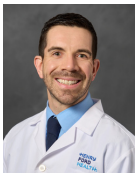
Haley Sibley, M.D.

Oral and Maxillofacial Surgery

Jerrold Armstrong, D.D.S.
Division Head



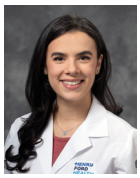
Benjamin Barbetta, D.M.D., M.D.



Paul Bermudez, M.D.

Jaroslaw Buda, C.N.P.

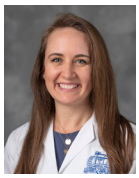
Hospital Dentistry



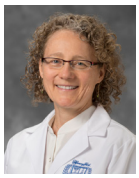
Angela Douglas, D.D.S.

Tanaya Porter, D.D.S.

Otology and Neurotology

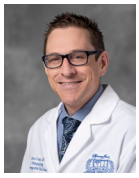


Kristen Angster, M.D.
Division Head
Vice-Chair



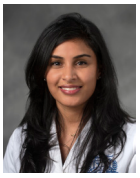
Laura Brainard, M.D.

Rhinology and Anterior Skull Base



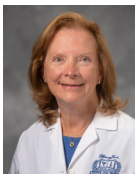
John Craig, M.D.
Division Head

Glen Dsouza, M.D.

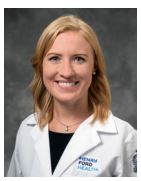


Amrita Ray, D.O.

Sleep Medicine



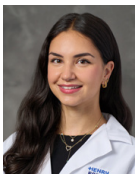
Kathleen Yaremchuk, M.D.
Chair Emeritus



Andrea Plawecki, M.D.

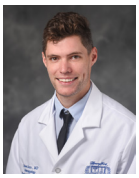
Otolaryngology Residents

Abdurrahman Abdurrob, M.D.



Tala Al-Saghir, M.D.

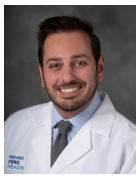
Lane Donaldson, M.D.



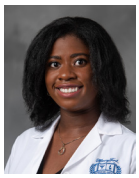
Raven Dunn, M.D.

Japnam Jassal, M.D.

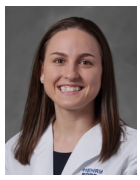
Kyle Leonard, M.D.



William Mason, M.D.

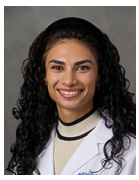


Oghenefejiro Okifo, M.D.

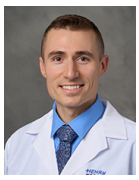


Kimberly Oslin, M.D.

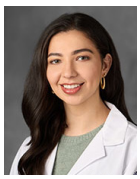
Abigail Reid, M.D.



Zara Sragi, M.D.



Benjamin Wils, M.D.

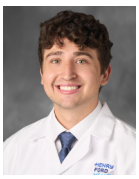


Maie Zagloul M.D.

OMFS Resident

Humza Ali, DDS

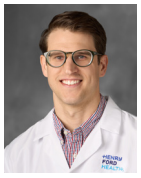
Joel Chahal, DMD



William Fabiano, DMD

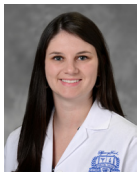
Cameron Szelesi, DMD

Head and Neck Fellow



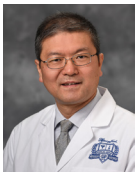
Vince Desiato, DO

Advanced Practice Practitioners



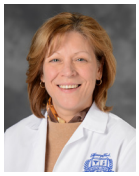
Rachel Bollman, M.S.P.A.S, P.A.-C.
Lead APP

Scott Boyd, P.A.-C



Wei Gao, M.S.M., P.A.-C.

Alexis Hernandez, P.A.-C

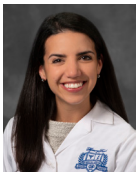


Michelle Mardegian, P.A.-C.

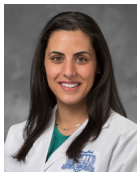
Hannah Miller, PA

Batoul Nasser, PA

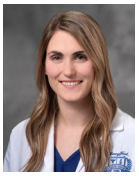
Kristen Patel, PA



Loren Perlberg, A.G.A.C.N.P., BC



Reema Rahal. P.N.C., CNP, A.G.N.P.-C.



Riley Robinson, P.A.-C.

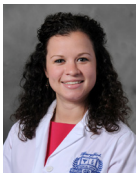
Elizabeth Steiner, P.A.-C.

Ghenoi Yasin, M.S.B.S., P.A.-C.

Audiologists

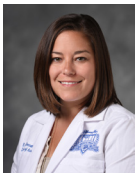
Brad Stach, Ph.D.
Division Head of Audiology

Patty Aldridge, AuD

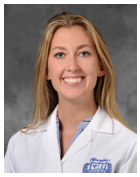


Erika Allan, AuD

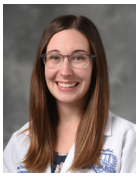
Taylor Arbogast, AuD



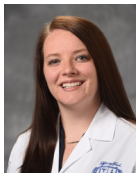
Erica Bennett, AuD, Ph.D.



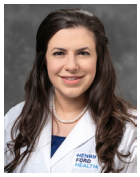
Ashley Bruce, AuD



Samantha Conn, AuD



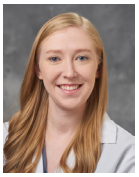
Chelsea Conrad, AuD



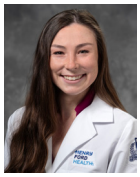
Lauren G Dadisho, AuD

Ashley Deeb, AuD

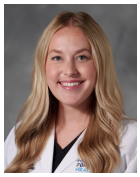
Garrett Findlater, AuD



Kassandra Fitzgerald, AuD

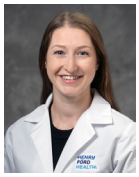


Emma I Garber, AuD

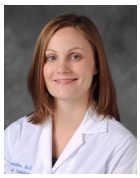


Haley Garr, AuD

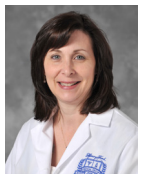
Mary J Kassa, AuD



Rachel Kirby, AuD

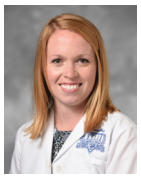


Kellie Kornmiller, AuD

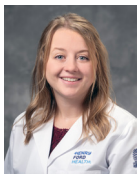


Jeanne Livernois, AuD

Brian C Lloyd, AuD

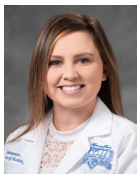


Katie Makowiec, AuD



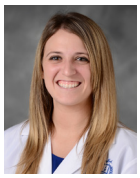
Ashley M Pudelek, AuD

Wendy Rizzo, AuD

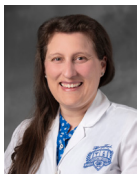


Nicole Satkowiak, AuD

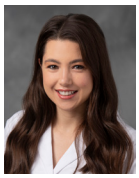
Karrie Slominski, AuD



Kaylee Smith, AuD



Jessica Strabbing, AuD



Nicole Velander, AuD