

ABOUT ME

Dr. Oren Tessler grew up in Montreal, Quebec. After earning his bachelor's degree in psychology from Montreal's McGill University and working in a biochemistry lab for two years, he applied to McGill's joint M.D./M.B.A. program.

With Dr. Tessler's interest in both medicine and business, the competitive five-year program was a natural next step. "I really wanted to merge the two [fields]," he says. "That was, at the time, my focus."

Medicine won out over business, however, at the start of Dr. Tessler's third year of medical school, when he observed a two-and-a-half-hour cleft-lip-and-palate surgery. He was so fascinated, he completely lost track of time. "I looked at my watch; I thought it had been 10 minutes," Dr. Tessler remembers.

After completing a competitive plastic surgery residency, also at McGill, Dr. Tessler accepted a fellowship at Massachusetts General Hospital in Boston. The position afforded him the opportunity to focus on microsurgery, reconstructive breast surgery and migraine surgery. "It allowed me to do more research, investigate things I had a passion for," Dr. Tessler says. He also worked with the Harvard Plastic Surgery program while in Boston.

In 2012, Dr. Tessler visited New Orleans, and was drawn to the city's burgeoning scientific and medical research developments — specifically, those taking place at Louisiana State University. "I started seeing the future: where this city and this institution were going," Dr. Tessler says. He wrote to LSU's chief of plastic and reconstructive surgery, Dr. Charles Dupin, and was offered "a wonderful position that excited him from the beginning," he says.

Dr. Tessler teaches and treats patients in conjunction with the Louisiana Breast and Cervical Health Program at LSU. He cites the program's comprehensive combination of cancer services as a boon to the community. "A patient comes in and all the steps start automatically," he says. "Nothing gets missed."

In addition to teaching surgical residents as an assistant professor of clinical surgery, Dr. Tessler works with breast cancer patients at University Hospital. He knows that patients are often overwhelmed by their diagnosis; for this reason, he allots plenty of time for those who have questions. "You have to give [patients] time so they can relax and think properly and discuss for a moment," he says.

Dr. Tessler is now chief of the Division of Plastic and Reconstructive Surgery at University Hospital, LSU Health and Sciences Center. "It's a great time to be at LSU — a great time to be in New Orleans," he says.

ABOUT MY PRACTICE

Dr. Tessler practices microsurgery, an approach that focuses on attaching smaller and smaller blood vessels and nerves with the use of a microscope during surgery. Microsurgery makes it possible to transfer tissue from one part of the body to another, and has changed the way Dr. Tessler and other surgeons perform breast reconstruction after mastectomy.

With up to 10x magnification, microsurgery allows



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surgeons to employ sutures that the naked eye can't see. "Every little movement counts," Dr. Tessler says. "It has allowed us to really revolutionize trauma and oncology surgery."

In the early 1990s, LSU surgeons were responsible for revolutionizing breast reconstruction microsurgery by following vessels through muscle tissue, explains Dr. Tessler. In this state-of-the-art procedure, known as the perforator DIEP flap, abdominal tissue is transplanted to the chest to reconstruct the breast(s) after mastectomy. Because it does not involve removal of muscle, the DIEP flap procedure results in less trauma to the abdominal musculature. "Now, major impediments of the surgery have been removed," says Dr. Tessler.

As advanced surgical techniques allow doctors to perform more invasive and involved breast cancer removal surgeries, offering a wide range of reconstruction options is pivotal. In treating breast cancer patients at LSU, Dr. Tessler helps patients choose the right option for reconstruction from all of the options available, including prophylactic mastectomies for high-risk patients, prosthetic implants and DIEP flaps.

PHILOSOPHY

Dr. Tessler stresses that it is paramount to listen to patients' wishes, instead of focusing solely on fixing a problem. He finds that his background in psychology helps him consider the bigger picture.

"Plastics is unique in that it does not only deal with quantity of life; it deals with quality of life," Dr. Tessler says. "Because quality of life has many subjective aspects, it is imperative in our field to treat the patient as a whole person, and not just treat the disease."

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