

A Publication of  
**CLARA MAASS MEDICAL CENTER**

SPRING 2019

# healthy *together*

THE ABCs  
OF ARTHRITIS

A MAJOR GIFT  
TRANSFORMS  
LABOR SUITES

A CHILD'S  
MEDICAL  
MYSTERY,  
SOLVED

WHERE TO GET  
THE BEST CANCER CARE

## CLARA MAASS MEDICAL CENTER EARNS ACCOLADES

CMMC's steadfast commitment to improving the health and well-being of the communities it serves is exemplified by the national awards and recognition we have received. Here are some recent examples:

- **OVERALL EXCELLENCE** Awarded a Four-Star rating from the Centers for Medicare and Medicaid Services (CMS). Released in 2019, the CMS rating provides details to the public on more than 60 different quality measures in seven categories.
- **SAFETY** Earned 11 Grade "A" scores in Hospital Safety and Quality from The Leapfrog Group.
- **LGBTQ** Earned designation in LGBTQ (Lesbian, Gay, Bisexual, Transgender and Questioning) Healthcare Equality from the Human Rights Campaign Foundation in 2018.
- **SPECIALTY EXCELLENCE** Earned Specialty Excellence Awards from Healthgrades in Labor and Delivery, and Obstetrics and Gynecology, 2018, and in Bariatric Surgery, 2018, 2019.
- **DISEASE-SPECIFIC CERTIFICATION** Earned the Gold Seal of Approval from the Joint Commission with Disease-Specific Care Certification in Acute Coronary Syndrome, Congestive Heart Failure, Elective Joint Hip Replacement, Elective Joint Knee Replacement and Advanced Certification in Palliative Care.
- **CONNECTIVITY** Named by the American Hospital Association Health Forum to the 18th Annual Health Care Most Wired Hospitals list for 2016, 2017 and 2018.
- **WORKPLACE PARTNERSHIP** Earned Platinum recognition in 2018 from Health Resources and Services Administration (HRSA) Workplace Partnership for Life Hospital Campaign for increased organ donation efforts
- **QUALITY PATIENT CARE** Designated Primary Stroke Center by the New Jersey Department of Health, and designated Bariatric Surgery Center of Excellence by the American Society for Metabolic and Bariatric Surgery.

**Clara Maass Medical Center** | **RWJBarnabas HEALTH**

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# SAFETY: It Takes a Team

When it comes to safety, our philosophy is simple. RWJBarnabas Health is committed to zero incidents of preventable harm for our patients, families, visitors and each other. This quest, which we call Safety Together, is designed to help create the best possible outcomes for our patients and an exceptional work environment for our team.

We're applying the same tools used by High Reliability Organizations (HROs) in the manufacturing and nuclear industries. These companies have greatly reduced accidents by using standardized error-prevention processes. Similar safety systems are being embraced by our staff in both clinical and non-clinical roles as they go about their day-to-day tasks.

At Clara Maass Medical Center, we foster a culture of safety by implementing a program we call "Rounding to Influence." Our leadership team visits all areas of the hospital to ensure staff awareness and to provide additional education and support, especially to our front-line staff. Every day, our management team starts the day by sharing information about potential or existing safety issues that may affect patients, visitors or employees and identifying solutions for those issues. We've also required training on HRO for all of our employees. All of our HRO initiatives are designed with the overall goal of keeping everyone who comes through our doors safe and completely free from harm.

Becoming an HRO means everyone who works for RWJBarnabas Health knows that they can make a difference for our patients, for their teammates at work and for our communities as a whole. We're excited to empower our family of employees to do everything possible to support our mission of excellence as we care for you and your family.

Yours in good health,



**BARRY H. OSTROWSKY**  
PRESIDENT AND CHIEF EXECUTIVE OFFICER  
RWJBARNABAS HEALTH



**MARY ELLEN CLYNE, PhD**  
PRESIDENT AND CHIEF EXECUTIVE OFFICER  
CLARA MAASS MEDICAL CENTER



Clara Maass Medical Center complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. For more information, see link on our home page at [www.rwjbh.org/claramaass](http://www.rwjbh.org/claramaass). Clara Maass Medical Center cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo. ATENCIÓN: Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al 973.450.2000. Clara Maass Medical Center konfòm ak lwa sou dwa sivil federal ki aplikab yo e li pa fè diskriminasyon sou baz ras, koulè, peyi orijin, laj, enfimite oswa sèks. ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 973.450.2000.



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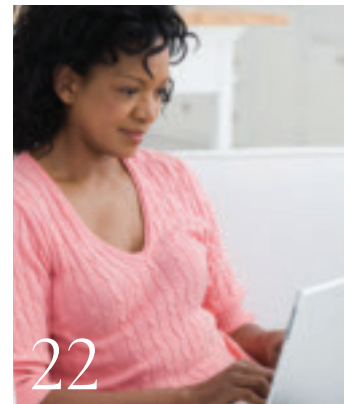
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# FOR YOU AND YOUR BABY: Parent Education Programs

**CLARA MAASS MEDICAL CENTER IS HERE TO HELP YOU AND YOUR NEWBORN GET OFF TO A GREAT START.**

Having a baby is one of life's most exciting and cherished experiences, made more wonderful when parents feel good about their pregnancy and delivery, and have a team to lend support in raising and nurturing their newborn. The Maternity Center at Clara Maass Medical Center has a dedicated, experienced and professional staff to assist you and your family with getting a loving, caring start for your new addition.

## **TOUR OF THE MATERNITY CENTER AT CMMC**

**First Sunday of each month  
9 a.m. and 10 a.m.**

Prepare for the birth of your child by touring the Maternity Center at Clara Maass Medical Center and learning about our parent education series. Following the tour, meet a member of our team to discuss our admission process and explore the various childbirth options available at Clara Maass Medical Center.

## **LACTATION SUPPORT FOR BREASTFEEDING MOTHERS**

Our "Warm Line" is here for you! After the birth of your baby, if you have questions or concerns about breastfeeding, call our Warm Line at 973.450.2868, 24 hours a day, and leave a message. Our Lactation Consultants will return your call as soon as possible.

## **INFANT CARE CLASS**

**Fourth Wednesday of each month, 7–9 p.m.**

In two hours, learn what you need to know about parenting in an interactive "university" for parents-to-be. Learn the basics on how to navigate parenthood including topics such as newborn and postpartum care. Parents are welcome to attend at any time.

## **BREASTFEEDING WORKSHOP**

**Second Monday of each month, 7–9 p.m.**

For new mothers considering breastfeeding, our workshop offers the assurance and knowledge needed to establish successful breastfeeding. Our certified lactation consultant will share with new parents the advantages for both mother and baby of lactation, preparation, nutrition and breast care. Dads-to-be and partners are also welcome.

## **PREPARING FOR CHILDBIRTH**

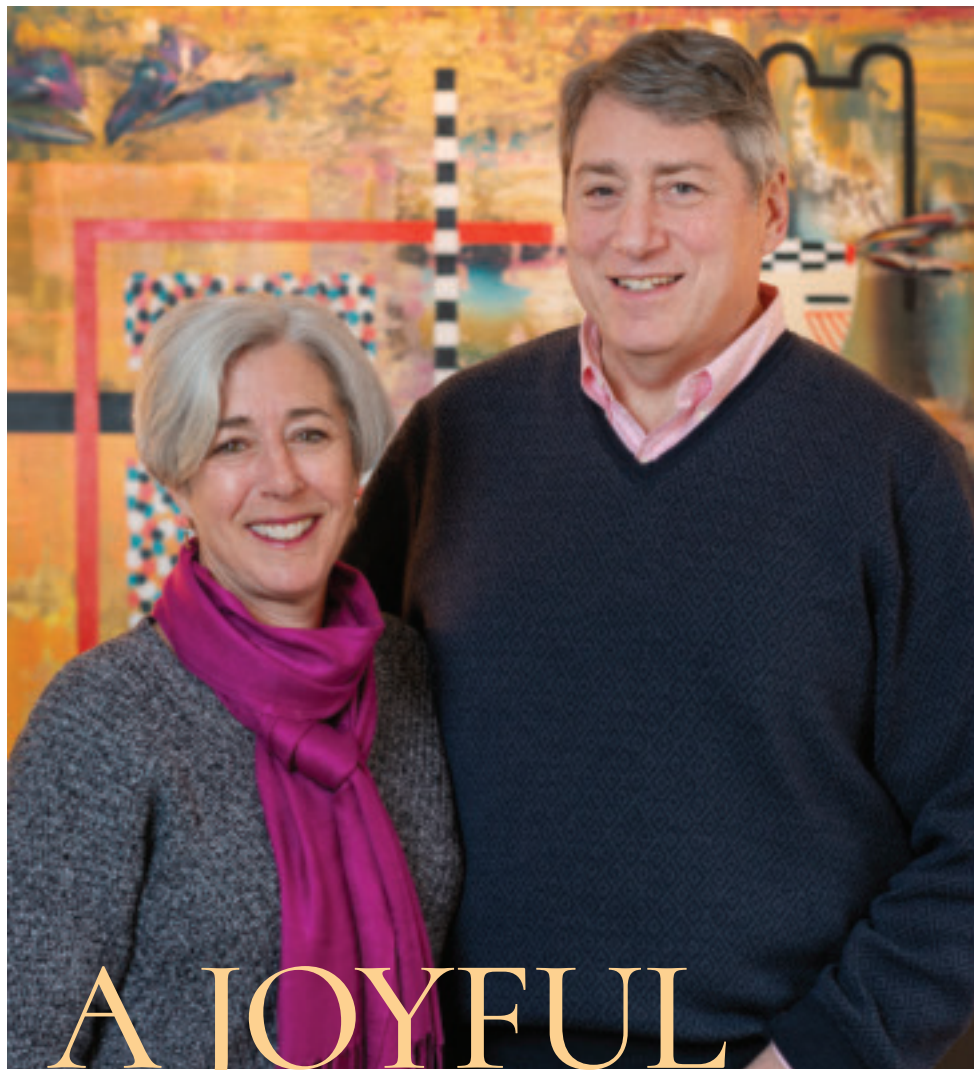
**Evening Option: First and second Wednesday of each month, 7–9 p.m. or Weekend Option: Third Saturday and Sunday of each month, 10 a.m. to 12 p.m.**

For parents who plan to deliver at the Maternity Center at Clara Maass Medical Center, this workshop will help them to prepare for the birth of their child by discussing birth options available and practicing birthing skills. Expectant mothers may attend at any stage of their pregnancy.



Registration is required for all classes, events and support groups. Call **888.724.7123**. (Note: If a session does not reach a minimum number of participants, you will be notified and placed on the schedule for the next class.)





# A JOYFUL CHILD BIRTH

**A LEADING DONATION ENABLES ALL NEW MOTHERS AT CLARA MAASS MEDICAL CENTER TO HAVE A FIRST-CLASS EXPERIENCE.**

**E**xtensive research has supported what many women know intuitively: The environment in which birth takes place makes a big difference to the well-being of new mothers.

At Clara Maass Medical Center (CMMC), every woman who gives birth will now have a state-of-the-art and holistic environment, thanks to a transformative gift by Brian Sterling, a member of the Board of Trustees of Clara Maass Medical Center and of the Clara Maass Medical Center Foundation, and his wife, Linda.

“We have two children, and we want to make sure that women of all different cultures and economic standpoints have a positive and healthy labor and delivery

experience,” says Linda. “Whether it’s your first child or your fifth, you want to have an environment that moms as well as doctors and nurses can feel positive about.”

The Labor, Delivery and Recovery (LDR) unit at CMMC will now house six richly decorated, contemporary suites with amenities such as refrigerators and coffee machines. All rooms are private, with private bathrooms. Patients say that having privacy, as well as enough room for visiting family members, is a priority as they bond with the newborn.

In addition to providing the latest technology and care, the LDR team at CMMC takes a holistic approach to childbirth. If she wants to, a woman can

make use of a birthing ball (on which she can gently rock during labor to ease pain) or a birthing chair (which allows for a squatting position during labor).

## **GIVING THAT FEELS GOOD**

The Sterlings say that supporting the institutional priorities of CMMC is a key consideration for them. “We think Clara Maass is a jewel—a small community hospital that is really delivering top-quality medical care and healthcare to the community,” says Brian. “We have enormous respect for the judgment of President and Chief Executive Officer Mary Ellen Clyne and her team.”

Brian, who grew up in West Orange, first became involved with CMMC after a cardiac scare in 2012 that sent him to the Emergency Department. “They took such good care of me,” he says. “And as we’ve gotten to know more about Clara Maass, their concept of wellness, in addition to healthcare, really reverberates with us. Wellness is about nutrition, it’s about food security, having a clean place to live, getting educated—it all ties up, and that is what Clara Maass is promoting. It’s very important to us to help further their mission.”

Giving to CMMC is a source of personal satisfaction, the Sterlings say. “I’m a breast cancer survivor,” says Linda. “You never worry about your health until something goes wrong, and then you realize how important it is. We have the benefit of having outstanding healthcare, but so many people don’t, and you can see the financial and other stresses it puts on their family.

“When we talk with Mary Ellen Clyne about all the different things Clara Maass does to help families, it makes us feel extraordinarily good to know that we’re having an impact on people’s lives at what may be one of the most important times in their lives. We’re happy to be able to do it.”

To learn more about opportunities to give to Clara Maass Medical Center, visit [www.claragiving.org](http://www.claragiving.org).





To learn more about pediatric care at Clara Maass Medical Center, visit [www.rwjbh.org/claramaasspediatrics](http://www.rwjbh.org/claramaasspediatrics).

Lorena and her son Gabriel read together at home.



# THE CASE OF THE MYSTERY RASH

WHEN A LITTLE BOY CAME TO THE EMERGENCY DEPARTMENT COVERED IN WELTS,  
THE EXPERTISE OF THE PEDIATRICS TEAM CAME TO THE RESCUE.

Young Gabriel had always been a bright, curious ball of fire. So when, at age 3, he began to mope around the house and didn't want to play as he normally did, his mom, Lorena, knew something was wrong.

"The symptoms were vague—fatigue and fever—but not especially alarming," she says, "until one night, he suddenly broke out with a rash and welts all over his tiny body."

The welts were "everywhere"—on his torso, legs, arms, neck, ears, face and lips. His skin itched horribly. "It was awful," Lorena says. "His skin was swollen from head to toe." None of the over-the-counter medications she tried helped.

## A RARE CONDITION

Lorena had never been to Clara Maass Medical Center (CMMC), but her instincts told her to head to the Emergency Department (ED) there. "Gabriel's pediatrician had always spoken highly of it, and it's just a few minutes from our home," she says.

That decision connected Gabriel to a deep team of pediatric specialists, both in the ED and in the Pediatric Unit. He needed that expertise, because the cause of his condition was far from obvious. Gabriel arrived at midnight, and emergency physicians worked quickly to examine him and run tests.

"We see tens of thousands of patients every year in our Emergency Department, and we are experts at uncovering the cause of health conditions, even rare ones," says John Fontanetta, MD, Chairman of Emergency Medicine. "For children, we also have a total of 60 pediatric specialists, with several on-site 24 hours a day, to provide additional expertise for patients like Gabriel."

"The team took steps immediately to alleviate the severe itching," Lorena says, with gratitude. "From the time my son arrived at Clara Maass, everyone worked hard to make him more comfortable while seeking the cause of his discomfort."

Over the next several hours, staff researched possible causes of his condition. They called in Susan Hagen

Morrison, MD, a pediatric allergy, immunology and infectious disease specialist at CMMC who also serves as the Director of Pediatrics.

About 12 hours after Gabriel was admitted to the Pediatric Unit, Dr. Morrison came to Lorena with the answer: Gabriel had a rare condition called erythema multiforme. Caused by a virus, it can lead to welts and blisters on the skin, mouth and eyes. "It's a skin rash, and it's a scary one," says Dr. Morrison. "It evolves over several days and you get what look like bull's-eyes all over the body. Sometimes it comes after a cold, sometimes it comes after medication. It's uncommon, but it does happen."

The medical team was able to assure Lorena that Gabriel's welts, though worrying, would eventually go away on their own and that he would probably have no long-term side effects. She stayed with him in the Pediatric Unit for three days as the medical team worked to get the itching under control.

## WHAT PARENTS NEED

During this time, Lorena developed a new appreciation for her local hospital.

"The doctors and nurses did exactly what I would want them to do," she says, recalling their swift, exacting actions. "Their confidence said to me, 'Although there's something wrong, we're going to figure it out, tell you what it is and get treatment underway.'"

"This is what we do every day, but we understand that an ED visit is certainly not what a parent does every day," says Dr. Fontanetta. "We know that reassurance is what a parent needs, as much as their child needs care."

"When it comes to medical care in some hospitals, there can be a separation between the caregiver and the patient," Lorena says. "But at Clara Maass, beginning with the staff in the ED, they managed to break down any barrier and become part of my family. Everyone I met made us feel this way."

Gabriel, now 7 years old, is in first grade and back to his bright, active self. He has had no more symptoms.

But the experience made a big impact on the family. In appreciation, Lorena now serves on the Advisory Board of CMMC's Center of Excellence for Latino Health ([www.rwjbh.org/claralatiohealth](http://www.rwjbh.org/claralatiohealth)), and when she and a relative recently needed hospital care, CMMC was their choice.

"It's now a family thing between us and Clara Maass," she says. "The people there are amazing."



JOHN FONTANETTA, MD



SUSAN HAGEN MORRISON, MD

# ALL ABOUT ARTHRITIS

**OUR ORTHOPEDICS EXPERT SHARES INSIGHTS ABOUT PREVENTION AND TREATMENT.**

The term “arthritis” is a catch-all phrase for more than 100 conditions that affect joints and their surrounding tissues, causing pain that can range from mild to severe. About 54 million U.S. adults have arthritis, according to the Centers for Disease Control and Prevention. Frank Femino, MD, Director of Orthopedics at Clara Maass Medical Center (CMMC), answers a few key questions about this common—and sometimes debilitating—condition.

**What causes arthritis?**

There are many types of arthritis. Broadly speaking, it can be divided into either “wear and tear” or “inflammatory.”

Wear-and-tear arthritis, or osteoarthritis, is caused by the joints wearing out due to overuse or injury. Inflammatory arthritis is a disease that causes inflammation and pain in the joints. Two common examples are rheumatoid arthritis and psoriatic arthritis.

**What can people do to prevent arthritis?**

Maintaining good health is the best preventive measure. This includes proper nutrition; weight loss, if necessary, through sensible dieting; and an exercise program that avoids overuse or injury. There’s a

balance between being sedentary and being active to the point where it’s excessive and you’re causing damage. The old adage “train, don’t strain” is a good one to keep in mind.

Inflammatory arthritis is best treated by a rheumatologist, who can prevent joint damage through proper medication.

**How is arthritis treated?**

I like to start with very conservative, holistic treatments. These include proper footwear; weight loss, if needed; and an exercise program or physical therapy to increase joint flexibility and strength.

This can always be supplemented with oral medication, as necessary. Herbal supplements, such as turmeric, are often helpful. Glucosamine and chondroitin sulfate are also widely available over the counter. Check with your physician to be sure herbal and over-the-counter medications are safe for you.

Injections of either cortisone or gel (hyaluronic acid) can give sustained relief from arthritic pain.

**When should a person consider joint replacement to relieve arthritis?**

It’s based on pain. If, after conservative care, your knee or hip is telling you



**FRANK FEMINO, MD**

what to do, as opposed to you telling it what to do, it’s time to think about joint replacement. Joint replacement is the ultimate cure for arthritis of the hip and knee, but it’s a personal decision. The patient has to feel not only physically ready, but emotionally ready.

**What is the surgery and recovery like?**

I think of joint replacement as a temporary inconvenience for the patient. At CMMC, we use minimally invasive techniques for surgery and the latest in pain management to speed recovery and get the patient back to normal activity. Many patients stay in the hospital only one or two days, and some even leave the same day. They then receive physical therapy at home for a week or so, and then as an outpatient.

Some patients may require a short stay on our Transitional Care Unit, and then they go home. Either way, they’re back to an active lifestyle quickly and comfortably.



To learn more about orthopedics at Clara Maass Medical Center, visit [www.rwjbh.org/ortho](http://www.rwjbh.org/ortho).





# MAKING A REAL IMPACT

**RWJBARNABAS HEALTH IS COMMITTED TO PROMOTING COMMUNITY HEALTH, BOTH INSIDE AND OUTSIDE A MEDICAL CENTER'S WALLS.**

A child is taken to the emergency department for asthma, is treated and sent home—to an apartment where leaky pipes cause mold that triggers her asthma.

A man is given a prescription for high blood pressure but can't afford to get it filled.

A woman is counseled about healthy eating to help control diabetes but doesn't have access to fresh fruits and vegetables.

Because social conditions play a critical role in wellness, RWJBarnabas Health (RWJBH) has ramped up its commitment to communities' whole health through its Social Impact and Community Investment (SICI) Practice.



**MICHELLENE DAVIS, ESQ.**

## FINDING WHAT WORKS

“Traditionally, the way in which institutions like ours have delivered healthcare has been to wait for people to come to us,” says Michellene Davis, Esq., Executive Vice President and Chief Corporate Affairs Officer for RWJBH, who heads the SICI effort. “Now we’re acting on the fact that health disparities begin and continue outside our doors. We’re looking at the whole patient and the context in which he or she lives.”

The range of approaches is broad. “Every RWJBarnabas Health hospital conducts its own community health needs assessment, because each community is unique,” Davis explains. Recent examples of SICI-related efforts include:

• **BUY LOCAL:** RWJBH has made a deep commitment to buy from local and minority- and women-owned businesses. For example, Newark Beth Israel Medical Center has a contract with Newark vendor Rock Ya Socks to

purchase socks for its patients, which has strengthened the vendor’s capacity to grow and expand.

• **HIRE LOCAL:** RWJBH has pledged to hire 350 Newark residents by 2020 as part of the Newark 2020 partnership of local institutions and employers. Jersey City Medical Center’s Career Ladders program, which will soon be adopted system-wide, helps develop a path to promotion for entry-level employees.

• **INVEST LOCAL:** To spur innovation and future investment, RWJBH has invested in Audible.com’s Newark Venture Partners Labs IT innovation center to stimulate the establishment of new businesses.

Through partnerships, the RWJBH system helps improve community health, reduce disparities and enhance equity, including:

• **SAFE AND HEALTHY HOUSING:** Robert Wood Johnson University Hospital New Brunswick participated in the New Brunswick Healthy Housing Collaborative, designed to work with families to create high-health environments in homes throughout the region. RWJBH is currently in discussions with national, state and local partners to expand its commitment to creating affordable housing in other communities throughout the state.

• **FOOD SECURITY:** A Wellness on Wheels mobile greenhouse travels to communities throughout the entire RWJBH region. Additionally, youth in Newark created a documentary, “Food for Thought,” to explore the impact of food insecurity on a community’s health.

Davis believes the SICI effort will inspire and energize not just RWJBH employees, but community members as well. “People will want to come to an entity that has high-quality, culturally competent clinical care, and at the same time invests in creating good in the world,” she says. “This is about being the change you wish to see in the world. Everyone is welcome to join us on this journey.”

To learn more about RWJBarnabas Health’s social impact initiatives, visit [www.rwjbh.org/socialimpact](http://www.rwjbh.org/socialimpact).

# BETTER CARE FOR OLDER ADULTS

HEALTHCARE PROVIDERS ARE TAKING A FRESH LOOK AT HOW TO TREAT THE ELDERLY.

An elderly man who'd been admitted to the hospital was disoriented. "He thinks he's talking to his father, who died years ago," the man's daughter told his doctor. "Does this mean he has Alzheimer's?"

He did not. What he did have was delirium, brought on by the many changes in his routine caused by his admission to the hospital. It's a common problem for elderly patients, according to Jessica Israel, MD, Corporate Chair, Geriatrics and Palliative Care, for RWJBarnabas Health (RWJBH).

"Family members get alarmed, but in many cases, that confusion is treatable—though we may have to be a bit of a detective to find out what the problem is," she explains. "It could be anything from untreated pain, to an electrolyte disturbance, to a urinary tract infection, to a sleep/wake cycle disturbance."

Sensitivity to changes in routine is just one of many reasons older patients need thoughtful care, Dr. Israel says. As the U.S. population ages—by the year 2030, 1 of every 5 residents will be older than 65, according to the U.S. Census Bureau—RWJBH facilities are at the forefront of a national drive to develop age-friendly care.



JESSICA ISRAEL, MD

"Throughout the system, we're taking a very close look at what it means to be age-friendly, not just in hospital care, but in all areas in which we treat patients," says Dr. Israel.

## A NEW APPROACH

The American Hospital Association, in partnership with the Catholic Health Association of the United States, the Institute for Healthcare Improvement and the John A. Hartford Foundation, has created the "4M Model" to guide hospitals and health systems in providing age-friendly care. The four elements are:

**What Matters:** taking the time to sit down for a discussion with an older patient to understand his or her concerns, goals and preferences for treatment.

**Medications:** taking additional care with drugs. "Giving a new prescription to someone who is 90 years old is not the same as giving it to someone who is 19," says Dr. Israel. "As we age, medications don't work the same way in the body, and there's a greater risk of interactions."

**Mentation:** identifying and managing depression, dementia and delirium.

**Mobility:** making sure a patient is helped to move safely every day so he or she doesn't lose the muscle tone needed for everyday tasks.

## BEST PRACTICES

When Dr. Israel took on her role as Corporate Chair, Geriatrics and Palliative Care, almost two years ago, she knew that the RWJBH system already had some exemplary age-friendly programs. To extend their reach and to share ideas across hospitals, she created a geriatrics collaborative. "Every hospital in our system has a multidisciplinary team focused in geriatric care that may include doctors, nurses, social workers, physical therapists, administrators, pharmacists and health educators," says Dr. Israel.

Two areas stood out as ripe for expansion. One was the James and Sharon Maida Geriatrics Institute at Monmouth Medical Center Southern Campus, where Dr. Israel is the Director, which specializes in all aspects of inpatient and outpatient geriatric care. The other is Better Health, a senior membership program offered by the Institute, with a full range of health, wellness and social events. Both the Institute and the Better Health program will be replicated at Saint Barnabas Medical Center in Livingston and Robert Wood Johnson University Hospital Hamilton this year, with other RWJBH hospitals to follow.

The RWJBH system is moving ahead on multiple other fronts. Eight hospitals have or are working toward Nurses Improving Care for Healthsystem Elders (NICHE) certification, and all hospitals will ultimately have Geriatric Emergency Department Accreditation (GEDA). As part of the RWJBH partnership with Rutgers University, the geriatrics team also is working to enhance existing geriatrics fellowship training programs for physicians. And all RWJBH employees will take a computerized learning module, currently in development, that will help them understand what it means to be older.

The possibilities are endless, because geriatrics itself is so wide-ranging. "Sometimes the best person to reach out to is not a doctor, but a physical therapist, nutritionist or social worker," says Dr. Israel. "The thing I love most about geriatrics is that it's not some group of doctors telling you what to do. It's a team of people looking at your life and helping you live it to your best."





## HOW TO GET BETTER CARE

Jessica Israel, MD, Corporate Chair, Geriatrics and Palliative Care for RWJBarnabas Health, offers these tips for older adults.

- **Have an advocate.** “Sometimes four ears are better than two when it comes to a doctor visit or hospital stay,” says Dr. Israel.
- **Ask questions.** If you don’t understand something or it isn’t the way you thought it was going to be, ask.
- **Keep an accurate list of medications and physician contact numbers with you.** This will help doctors treat you more quickly if an emergency arises.
- **Explore advance directives.** “Patients of all ages should assign a healthcare proxy,” advises Dr. Israel. “But then also be sure to tell that person what your wishes are in the event that complicated medical decisions must be made.”

To learn more about age-friendly programs and services at RWJBarnabas Health, visit [www.rwjbh.org/seniorhealth](http://www.rwjbh.org/seniorhealth).





## THE CUTTING EDGE: BLOOD AND BONE MARROW TRANSPLANTS

For some cancer patients, a blood and bone marrow transplant (BMT) can be an effective treatment and even a potential cure. The Blood and Marrow Transplant Program at Rutgers Cancer Institute of New Jersey is the only such program in New Jersey that's integrated within an NCI-Designated Comprehensive Cancer Center.

"All blood and immune cells are made in the bone marrow," explains Roger Strair, MD, PhD, Chief of Blood Disorders at Rutgers Cancer Institute. "Blood cells carry oxygen, fight infection and prevent bleeding. Immune cells also fight infection by attacking anything in the body that's perceived as not belonging, or foreign." In a BMT procedure from a donor, a patient receives a transplant of healthy blood and immune cells and those cells in turn grow and make new cells, including immune cells that can attack cancer cells. If the person's own cells are used, there is no immune attack of cancer, but the cells allow a rapid recovery from high-dose chemotherapy.

At Rutgers Cancer Institute, BMT is used to treat a variety of blood and immune disorders, including acute and chronic leukemias, various types of lymphoma, Hodgkin's disease, multiple myeloma and more.

information. When a patient goes to an NCI-Designated Comprehensive Cancer Center, he or she gets the benefit of their collective knowledge, clinical trials and research.

### Does a patient need to travel to New Brunswick, where Rutgers Cancer Institute is located, in order to take advantage of its services?

No. We have built a network across all 11 RWJBarnabas Health hospitals so that the outstanding treatment and care provided by Rutgers Cancer Institute is available as close to home as possible for all New Jerseyans and those in our region.

If, for example, a patient lives near Saint Barnabas Medical Center in Livingston, that patient will find that the cancer program there is anchored by Rutgers Cancer Institute; that he or she has access to many of the same clinical trials as those taking place in New Brunswick; and that experts in surgery and radiation oncology and so on are partnered with Rutgers Cancer Institute.

Now, let's say that a patient needs a specialized service—for example, a bone marrow transplant, which we do in New Brunswick. Because we have a coordinated system, we can seamlessly transfer care of that patient to New Brunswick. Our partnership with RWJBarnabas Health allows patients to enter the world of an NCI-Designated Comprehensive Cancer Center through multiple doors.

We're also creating an extensive cancer navigation program to help patients throughout and after treatment. Our goal as a cancer program is not only to have the best treatments, physicians and clinical trials. It is also to give the best care in helping patients navigate what can be the most challenging period of their lives.

Rutgers Cancer Institute of New Jersey, a partner of RWJBarnabas Health, is the state's only National Cancer Institute-Designated Comprehensive Cancer Center. Only 50 cancer centers in the U.S. have earned that classification. It's an impressive achievement—but what does it mean to cancer patients and their families?

We asked Steven K. Libutti, MD, FACS, Senior Vice President of Oncology Services,

RWJBarnabas Health, to explain.

Dr. Libutti is also Director, Rutgers Cancer Institute of New Jersey and Vice Chancellor for Cancer Programs, Rutgers Biomedical Health and Sciences.



### If a person who has been diagnosed with cancer asks your advice, what do you tell him or her?

A diagnosis of cancer can feel overwhelming, and people want to know where they should go for treatment in order to get the best possible outcome.

I always tell people that cancer doesn't travel well. It's more the rule than the exception that a patient requires multi-modality treatment, such as surgery, chemotherapy and radiation therapy. The patient is best served by staying as close to home as possible while getting exceptional treatment.

Patients should listen to the advice given by their physician, and get more than one opinion. They also need to be able to cut through the noise and static of the marketplace. That means they should understand the meaning of the word "comprehensive" when it refers to cancer treatment.

### What does it mean to be a Comprehensive Cancer Center?

Many cancer centers will use the word "comprehensive," but it doesn't have the same meaning as a Comprehensive Cancer Center that's designated by the National Cancer Institute (NCI), which is very specific and prestigious.

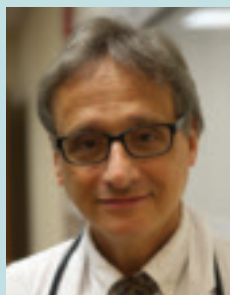
An NCI designation is a five-year grant that is acquired through an arduous, competitive, years-long process. Only 70 cancer centers in the country are chosen and of those, only 50 receive the designation Comprehensive Cancer Center, meaning

that they do laboratory research and clinical trials, as well as provide services directly to patients.

All of these centers collaborate and share



STEVEN K. LIBUTTI, MD



ROGER STRAIR, MD

A healthcare worker in purple scrubs with a stethoscope around her neck is smiling and looking towards a patient. The patient's hand is visible in the foreground, resting on a surface. The background is bright and out of focus.

# THE GOAL: ZERO ERRORS

**THE RWJBARNABAS HEALTH SYSTEM IS ON A MISSION TO  
ACHIEVE THE HIGHEST SAFETY STANDARDS.**

To learn more about  
RWJBarnabas Health, visit  
[www.rwjbh.org](http://www.rwjbh.org).



If a nuclear power plant has a serious accident, it's big news. In large part, that's because organizations in this and other high-risk industries, where errors can be catastrophic, have developed robust safety policies to prevent mistakes from being made. In industry parlance, they're what's known as High Reliability Organizations, or HROs.

The parallels to healthcare systems, with their high-stakes, highly complex operations, are clear. "At RWJBarnabas Health, we're on a journey to becoming an HRO," says John Bonamo, MD, MS, FACOG, FACPE, Executive Vice President and Chief Medical and Quality Officer at RWJBarnabas Health (RWJBH). "There's no end point, no HRO certification. Instead, being an HRO is a way of doing business. Ultimately, it delivers the highest-quality care and safest experience for our patients and for our employees."

The aim of the initiative, called "Safety Together," is clear—and bold. "Our goal is zero incidents of preventable harm to patients and employees," Dr. Bonamo says. "That's it."

### THE THREE-LEGGED STOOL

"When people are interviewed in large-scale focus groups about what they want from a hospital, they tend to mention three things," says Dr. Bonamo. "One is, 'Help me'—that's about excellence in the quality of clinical care. The second is, 'Be nice to me'—and that's about the patient experience, the communication and kindness.

"Then there's 'Don't hurt me.' That's about safety, the third leg of the stool. For a long time, hospitals didn't pay enough attention to that.

"Now, the best hospitals realize that you can have the most expert surgeon and the greatest bedside manner, but those things aren't enough if a patient falls out of bed or gets an infection from a catheter."



JOHN BONAMO, MD

Over the past year, all employees at every RWJBH facility have received in-depth training in safety, error prevention and performance excellence. "We're giving employees a new skill set so

they can actively prevent harm," says Dr. Bonamo. The goal of zero defects is seen as everyone's responsibility.

### TOOLS FOR SUCCESS

To aid in this quest, staff members have a number of tools and techniques to use. They include:

**Stopping the line.** "In the past, if a staff member had a feeling something wasn't right, he or she might have buried that instinct, thinking 'I'm probably wrong,'" says Dr. Bonamo.

"Now they're empowered to say, 'I'm not comfortable with X, Y or Z.'"

Recently, he recounts, a nurse was preparing a young woman to go into surgery for gall bladder removal when the patient mentioned she had a "funny feeling" in her chest. The nurse called an EKG (electrocardiogram) tech and refused to send the patient to the OR until the test was done. As it turned out, the woman was in the middle of having a heart attack, and the delay may well have saved her life.

**Clarifying questions.** If a staff member is not sure about something that's happening, he or she can be comfortable asking for clarification. In addition, every order gets repeated back. If the dosage ordered is 50 milligrams, the pharmacist or nurse will clarify, "That's five-oh, right?" If the verbal order is for a urology test, there will be an alphabet check to be sure it wasn't for a *neurology* test.

**Cross-checks.** "That means that if you see me making a mistake, you correct me or ask if I'm sure that's right," says Dr. Bonamo. "In the past, people were afraid they'd be told to mind their own business.

"But now we realize that if I have a 1 in 1,000 chance of making a mistake and you have a 1 in 1,000 chance and we cross-check each other, there's a million in one chance of making a mistake. We're realizing that healthcare is a team sport."

**Safety huddles.** Every unit in every building has a stand-up safety huddle each morning to go over the previous 24 hours and forecast the next 24. An hour later, there's a facility-based huddle, a larger gathering with the same purpose.



For Seth Rosenbaum, MD, MMM, SVP, Chief Medical Officer at Robert Wood Johnson University Hospital Hamilton, his team, and all RWJBH employees, HRO values are a daily priority.

### MANY VOICES

"Each of our employees has a new voice, a chance to practice at the top of their skills and be heard," says Dr. Bonamo. "We've made significant progress in our safety event rate, and we're confident it's going to continue to go down."

Each RWJBH hospital has created patient-family advisory councils to get more insight into how they can improve delivery of care. In any circumstance, Dr. Bonamo says, patients should demand the highest quality in their healthcare. "You wouldn't take a flight on an airline that didn't have the highest-quality standards and a great safety record," he says. "It's the same thing in healthcare. You should be seeking care in a facility that's on a journey to becoming an HRO."

### THE ABCs OF BECOMING AN HRO

At RWJBarnabas Health, all team members follow these principles of safety:

- S**peak up for safety.
- A**ccurately communicate.
- F**ocus on the task.
- E**xercise and accept a questioning attitude.
- T**houghtfully interact.
- Y**ou and me together.



Therapy dog Burton helped ease demanding therapy sessions for toddler Ava Finelli.

# A BABY'S BEST FRIEND

**HOW A THERAPY DOG HELPED ONE LITTLE GIRL RECOVER HER STRENGTH.**

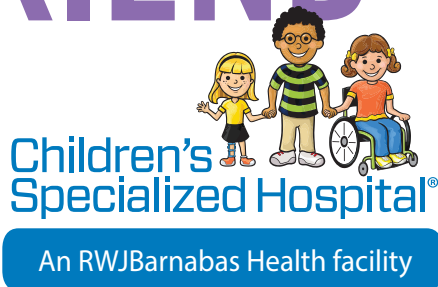
Respiratory Syncytial Virus, known as RSV, is an infection in the respiratory tract that can lead to serious problems. It's always a matter of concern when a baby gets it, but is even more so when the child has an underlying medical condition.

That was the case for little Ava Finelli, who was born with Spinal Muscular Atrophy (SMA), a genetic disease affecting



**MICHELE FANTASIA, MD**

part of the nervous system that leads to weakness in the limbs. Children with SMA have weak intercostal (between the ribs) muscles, and underdeveloped lungs and chest muscles. When



Ava contracted RSV in January 2018, at not quite 2 years old, she could not cough strongly enough to rid her airways of mucus. She had trouble swallowing, and became weaker, struggling to lift her head and move her arms and legs.

Ava was sent to Children's Specialized Hospital for treatment. "She had an intensive therapy program," says Michele Fantasia, MD, the physiatrist and specialist in pediatric rehabilitation medicine who oversaw the plan. After several weeks of respiratory, physical, occupational and pool therapy, Ava showed remarkable progress and was able to lift her head and to better move her arms and legs. "It was incredible to see the progress Ava made in such a short

time," her mother, Laura, says.

"These kids require a whole team, and we're very well versed in treating children with respiratory issues as well as various neuromuscular disorders," says Dr. Fantasia. The doctor acknowledges that the team also had a secret weapon: Burton, a 2-year-old therapy dog. "She *looved* Burton," she says.

## EYES ON BURTON

During therapy sessions, Burton would position himself across from Ava so that she could work on stretching and moving her arms to reach him. He ran back and forth across the room so that she'd work on turning her head from side to side. Because Ava focused so intently on Burton, her therapy sessions were eased. "Burton was her motivator," Laura says. "He's so friendly and energetic, he really helped her forget how difficult the movements were."

Ava was discharged after two months. She continues to get outpatient therapy and to take Spinraza, a promising new medication for SMA. "She did very well with us overall," Dr. Fantasia reports, "and was able to go back to her home, family and typical toddler activities."

For more information about Children's Specialized Hospital, call **888.244.5373** or visit **[www.childrens-specialized.org](http://www.childrens-specialized.org)**.

At Children's Specialized Hospital, we provide world-class care for children and young adults who face special health challenges across the state of New Jersey and beyond. Our locations in Bayonne, Clifton, East Brunswick, Egg Harbor Township, Hamilton, Jersey City, Mountainside, New Brunswick, Newark, Toms River and Warren treat everything from chronic illnesses and complex physical disabilities like brain and spinal cord injuries, to developmental and behavioral issues like autism and mental health.





# BEHAVIORAL HEALTH CRISIS:

## WE CAN HELP

**PSYCHIATRIC EMERGENCY CARE IS AVAILABLE WHEN OUR COMMUNITY NEEDS IT MOST.**

When a mental health issue causes an individual to act in a way that places himself or others in danger, it's likely to be a psychiatric emergency. These emergencies form a broad category that can include situations such as threatening suicide, threatening another person or experiencing acute post-traumatic stress.

In time of a psychiatric crisis, a professional assessment and a connection to appropriate services may be needed. The Psychiatric Emergency Screening Service (PESS) at Clara Maass Medical Center (CMMC), the designated provider of immediate psychiatric care for the western portion of Essex County, is available to help.

Although the first instinct for many people facing a psychiatric crisis is to go to the nearest Emergency Department, other resources in the community are better suited to provide comprehensive help for behavioral health issues.

"We may have a family member calling about a loved one, a mental health clinic calling about a patient, or the police may call PESS when they see someone they know behaving erratically," says Joe Cuffari, LPC, Assistant Vice President of Psychiatric Emergency Services at RWJBarnabas Health.

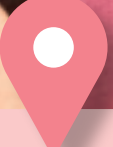
The PESS unit is based in the CMMC Emergency Department, where screeners respond to calls through a 24-hour hotline.

### REACHING OUT

The program, which marked its one-year anniversary at CMMC last November, is extending its reach. "We want to help people avoid coming to the hospital," says Tess Medina, MAS, BSN, RN, BC, Assistant Vice President, Behavioral Health Services at CMMC. "We have a mobile outreach team, including staff located at the West Orange Police substation three days a week."

The mobile response team travels to patients to provide assessments at their home, school or any other location throughout the 20 municipalities where the PESS unit provides services. The team also provides outreach to universities, correctional facilities, nursing homes and nearby hospitals.

"What's amazing is how we've been able to increase our presence in the community—we've nearly tripled the number of mobile screenings that we do," says Wanda Maragni, Licensed Clinical Social Worker and Director of PESS. "Our goal is to take care of people in the communities we serve so they can be evaluated quickly and receive the care that they need."



### WHERE WE SERVE

Clara Maass Medical Center PESS covers these municipalities:

- Belleville
- Bloomfield
- Caldwell
- Cedar Grove
- East Orange
- Essex Fells
- Fairfield
- Glen Ridge
- Livingston
- Maplewood
- Millburn
- Montclair
- North Caldwell
- Nutley
- Orange
- Roseland
- South Orange
- Verona
- West Caldwell
- West Orange

If you or someone you know is experiencing a psychiatric emergency, you can call the PESS crisis intervention hotline 24 hours a day, seven days a week at **973.844.HELP (4357)**. To learn more or to make an appointment at any of the RWJBarnabas Health Behavioral Health Network sites throughout NJ, call the Network Access Center at **800.300.0628**.



# TEAMWORK FOR

# WEIGHT LOSS SUCCESS

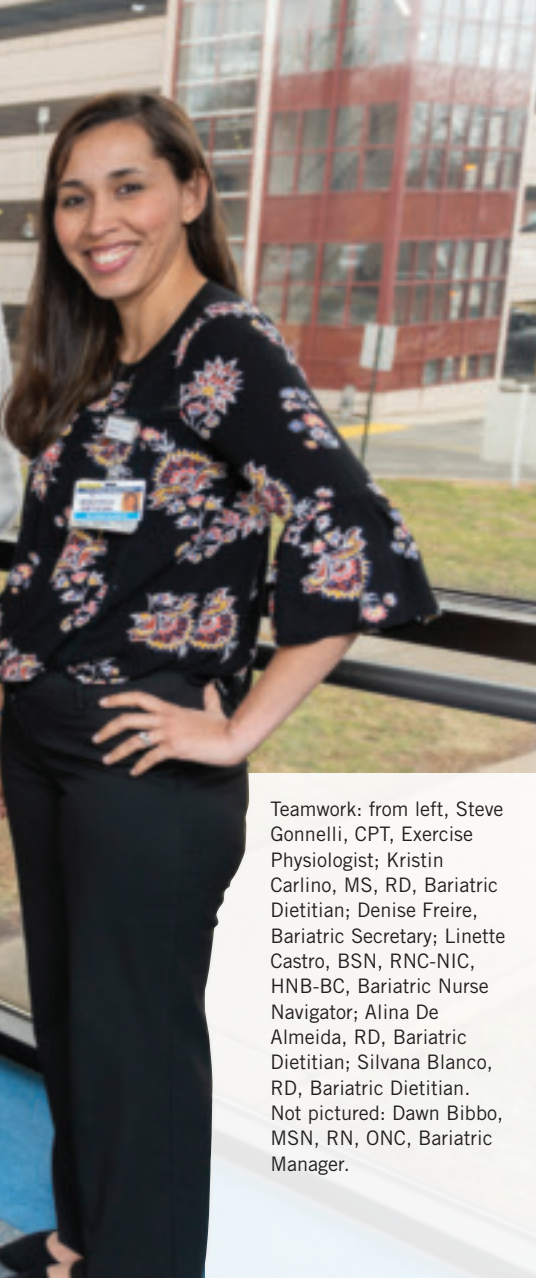
**A DEDICATED GROUP OF BARIATRICS PROFESSIONALS SUPPORTS PATIENTS BEFORE, DURING AND WELL AFTER SURGERY.**

**H**aving successful bariatric (weight loss) surgery is far from a solo journey.

Of course, having a really skilled surgeon is key—and Clara Maass Medical Center (CMMC) has three who specialize in the procedure. “Surgery is a tool, but it’s only part of the equation,” says Naveen Ballem, MD, Director of Bariatric Surgery at CMMC. “We also have a full team that supports the patient before, during and after the surgery.”

The bariatrics team at CMMC is comprehensive. It includes a secretary, a nurse manager, a nurse navigator (who is the contact person for patients, helping to provide medical information and direct them to other resources) and a clinical reviewer. The team also includes bariatric





Teamwork: from left, Steve Gonnelli, CPT, Exercise Physiologist; Kristin Carlino, MS, RD, Bariatric Dietitian; Denise Freire, Bariatric Secretary; Linette Castro, BSN, RNC-NIC, HNB-BC, Bariatric Nurse Navigator; Alina De Almeida, RD, Bariatric Dietitian; Silvana Blanco, RD, Bariatric Dietitian. Not pictured: Dawn Bibbo, MSN, RN, ONC, Bariatric Manager.

dietitians and an exercise physiologist who meet with patients to help them permanently transform their bodies with healthy lifestyle choices.

### FOOD FOR THOUGHT

Patients meet with a dietitian anywhere from two to six times over the course of their treatment. “We start seeing patients after they’ve met with a surgeon, but before they have the surgery—and sometimes even before they’ve made up

their minds to go ahead with it,” says Kristin Carlino, RD, Bariatric Dietitian. “After meeting with the surgeon, they have a good understanding of what the operation will entail, but not necessarily a good understanding of what their diet will be like.”

Many patients are apprehensive about how their eating habits will need to change, and the dietitians can address some of those concerns. “We want patients to learn to think differently about their food,” says Carlino. “For instance, a patient might ask me to recommend the healthiest fast food. Instead, I urge them to prep their meals the night before, so they don’t have to rely on fast food restaurants.” Dietitians talk about portion sizes, vitamin needs and general healthy eating habits. “We’re teaching healthy eating for life,” she says.

In some bariatric surgery programs, patients only get 15 minutes with a nutritionist, or only meet with a nutritionist as part of a group, says Silvana Blanco, RD, Bariatric Dietitian. But at CMMC, the meetings are individual, and last for an hour. Some of the nutritional advice patients receive has more to do with behavior than with what specific foods to eat. “We talk about things like eating slower, turning off the TV while you eat, handling stress eating,” explains Blanco.

### GETTING ACTIVE

The same kind of individualized support is applied to fitness by Steve Gonnelli, CPT, the bariatric team’s exercise physiologist.



NAVEEN BALLEM, MD

“I meet with patients once before and once after the surgery,” he explains, “and I make recommendations based on each person’s strengths and weaknesses.”

Many patients have knee pain, back pain, or shoulder pain

and haven’t been active in a while. “But I try to convey before we meet that they’re not coming to see me for a brutalizing workout,” Gonnelli says. “No one is forced to do anything they don’t want to do. I show them some movements. For some, all they can do at first is lean against a wall or desk, and focus on contracting their abdominals, or do a wall-sit with knees slightly bent. I alter each exercise to suit each patient.”

Exercise, he says, is important for several reasons. “If they don’t exercise, they might lose too much muscle mass.” In addition, strength training—and building muscle—can help mask the loose skin that sometimes remains after extreme weight loss.

Pre-surgery, patients also consult with a psychologist and may need clearance from a cardiologist or pulmonologist as well.

### A LASTING BOND

Post-surgery, in addition to visits with the dietitians and exercise physiologist for a personalized exercise prescription, patients have several ways to stay in touch. They visit their surgeon once a year for follow-ups—for life. They can also join a monthly bariatric support group at the hospital. Recent meetings have included a Zumba class, a farmers market, yoga, stress relief, holiday eating and vitamin information. Some patients continue attending the group for years. “And they’re really welcoming to new people,” says Carlino.

The team at CMMC sees approximately 500 patients a year, ranging in age from the late teens into the 70s. Team members say they love seeing the changes in their patients’ lives—changes that often go way beyond fitting into a smaller clothing size.

“Yesterday we found out that one of the patients who lost 100 pounds got a new job,” says Blanco. “She couldn’t work before because she was in too much pain from excess weight.” Like so many, that patient reaped the rewards of hard work and good health habits—with the help of a great team.

To learn more about bariatric surgery at Clara Maass Medical Center, attend one of the monthly “Surgical Options for Weight Loss” seminars led by one of CMMC’s bariatric surgeons. To register, visit [www.rwjbh.org/weightloss](http://www.rwjbh.org/weightloss).



## QUIZ

# DO YOU KNOW HOW TO MANAGE HYPERTENSION?

IF YOU HAVE HIGH BLOOD PRESSURE, THERE ARE SEVERAL TOOLS THAT CAN HELP BRING IT DOWN.

**H**ypertension, also known as high blood pressure, means that your blood is pushing too forcefully against the walls of your blood vessels. Over time, this force can damage delicate tissues in the arteries and can ultimately lead to heart attack, stroke or other cardiovascular problems.

“Because hypertension symptoms are subtle, many people don’t do enough to manage the condition in its early stages,” says Eli Chakhtoura, MD, Director of the Cardiac Catheterization Laboratory at Clara Maass Medical Center.

“Fortunately, if you have hypertension, there are many things you can do to keep it under control.” Take this quick quiz to see how well you understand the condition.



ELI CHAKHTOURA, MD

Your heart doesn’t beat just for you. Get it checked. To schedule an appointment with a Clara Maass Medical Center cardiac specialist, visit [www.rwjbh.org/heart](http://www.rwjbh.org/heart).

**1. A low-sodium diet means I have to put away the salt shaker.**

T  F

**2. I only need to take my blood pressure medication until my numbers come down.**

T  F

**3. Certain foods can help bring blood pressure down.**

T  F

**4. Exercise will raise my blood pressure.**

T  F

**5. Relaxing can help lower blood pressure.**

T  F

AND THE ANSWER IS ...

**1. FALSE.** It’s true that if you are adding a lot of salt to foods, you should cut back. However, up to 70 percent of the sodium in our diets comes from packaged, processed foods, including canned soups and sauces, fast food and cured meats such as bacon. To reduce sodium intake, eat fresh foods whenever possible. For processed foods, read the Nutrition Facts on food labels to determine how many milligrams (mg) of sodium are in each serving of the product.

**2. FALSE.** It is possible that you will need to take the medicines for the rest of your life.

Work closely with your doctor to determine how much medicine you need to take, and for how long. Be sure to take medication exactly as prescribed.

**3. TRUE.** Any foods that have potassium—including bananas, sweet potatoes and leafy greens like spinach, broccoli, kale or collards—can help flush sodium out of the body. A daily cup of blueberries has been shown to lower patients’ blood pressure. Fish that are high in omega-3 fatty acids—like salmon, mackerel, herring, sardines and albacore tuna—have many cardiovascular benefits and also lower blood pressure.

**4. FALSE.** Regular physical activity—30 minutes on most days of the week—has been shown to bring blood pressure down. It makes the heart stronger, meaning it has to work less to pump blood, which decreases the force of blood in the arteries. Walking, cycling, swimming and dancing can be effective ways of lowering blood pressure, as can active house and yard work and sports.

**5. TRUE.** In a short-term stressful situation, your body produces a surge of hormones that can cause your heart to beat faster and your blood vessels to narrow. Long-term stress can lead to behaviors that contribute to higher blood pressure, such as smoking, drinking too much alcohol and eating unhealthy foods. A healthy lifestyle and a change in attitude can do wonders for improving your cardiovascular health.





## LOW-SODIUM RECIPE: TURKEY QUINOA STUFFED PEPPER

SERVES 7

The American Heart Association recommends no more than 2,300 milligrams of sodium a day for adults. For entrees, keep sodium below 700 milligrams, says Elizabeth Hanna, Clinical Nutrition Manager at Clara Maass Medical Center. This recipe has 329 milligrams of sodium per one-pepper serving.

### INGREDIENTS:

- 8 ounces tri-color quinoa
- 7 fresh whole peppers—variety of green and red
- 3 teaspoons canola oil
- ¼ ounce minced garlic
- 2½ ounces chopped yellow onions
- 1 pound ground turkey
- 2 ounces Worcestershire sauce
- ½ teaspoon black ground pepper
- 1 can (13½ ounces) diced tomatoes, no salt added
- 1 6¾ ounce can tomato paste
- 1 and ⅔ ounces part-skim mozzarella cheese, shredded

### DIRECTIONS:

- Preheat oven to 400 degrees F.
- Prepare quinoa according to recipe.
- Cut tops off peppers and rough-chop them; set aside for meat mixture.
- Remove seeds from peppers; wash and set aside in a baking dish sprayed with vegetable oil spray.
- In a pot over medium heat, add oil, garlic, onions and chopped peppers. Sauté for 2–3 minutes.
- Add ground turkey, Worcestershire sauce and black pepper. Cook until meat is browned and internal temperature is at least 165 degrees F.
- Add diced tomatoes and tomato paste. Stir to combine. Cook for 5 minutes or until most of the liquid is absorbed.
- Add quinoa to the meat mixture. Stir thoroughly.
- Fill each pepper with mixture.
- Cover pan and bake for 30 minutes.
- Uncover dish. Top each pepper with 1 tablespoon mozzarella cheese. Return to oven to melt cheese.

RECIPE © 2019 FROM SODEXO MINDFUL MEALS



# BREAST CANCER SCREENING: WHAT EVERY WOMAN SHOULD KNOW



RWJBarnabas Health and Clara Maass Medical Center, in partnership with Rutgers Cancer Institute of New Jersey—the state's only NCI-Designated Comprehensive Cancer Center—provide close-to-home access to the latest treatment and clinical trials. Visit [www.rwjbh.org/beatcancer](http://www.rwjbh.org/beatcancer).



## DON'T LET COMMON MYTHS STAND IN THE WAY OF EARLY DETECTION.

When it comes to breast cancer, knowing the best ways to detect and treat the disease at its earliest stages can be the key to a good outcome. We asked Maria J. Kowzun, MD, Breast Surgical Oncologist with Rutgers Cancer Institute of New Jersey, who currently sees patients at Clara Maass Medical Center, to address some of the most misunderstood aspects of breast cancer risk, screening methods and treatment.

### **MYTH** IF THERE'S NO LUMP IN MY BREAST, I CAN'T HAVE BREAST CANCER.

**FACT:** Breast cancer has to start somewhere, and it starts with just a few microscopic cells that multiply. The point of regular screening mammograms is to catch cancer early, before it gets too large and begins to spread to the lymph nodes and the rest of the body. Mammograms have caught cancers as small as a pinhead or a grain of rice—smaller than can be detected by a physical exam.

Monthly breast self-exams—and regular physical exams by a doctor—are still important, since cancer can arise in between screenings even in women who get regular mammograms. But mammograms are the gold standard for detecting cancer at the earliest stage, when surgery can be completely curative.

### **MYTH** MAMMOGRAMS ALWAYS HURT.

**FACT:** There's sometimes minimal discomfort during a mammogram since, in order to get a good image, it is necessary to gently compress the breasts between two glass plates. The degree of discomfort that a woman will feel depends on many factors, including her own sensitivity to pain, breast structure (especially if the breasts are cystic) and so on.

If you've experienced pain during mammograms in the past, there are a few



MARIA J. KOWZUN, MD

things you can do before your next screening:

- If you're premenopausal, schedule the mammogram for the time of your monthly cycle when your breasts are least tender.

- Take an

over-the-counter non-steroidal anti-inflammatory drug (NSAID), such as ibuprofen, 45-60 minutes before the mammogram. (Check with your doctor first.)

- Try concentrating on your breathing—deep breaths in and out—to help you relax, as anxiety can add to your concern about potential discomfort.

The important thing to remember is that *a mammogram should never hurt so much that it stops you from keeping up with regular breast cancer screenings.* If you're concerned about pain, talk to your doctor.

### **MYTH** BREAST CANCER IS RARE IN OLDER WOMEN.

**FACT:** According to the American Cancer Society, 44 percent of new breast cancer cases in 2017 were diagnosed in women between the ages of 60 and 79, so it's essential to be vigilant. It's important for every woman to have a discussion with her doctor about her own circumstances and when it's okay to stop having regular mammograms.

### **MYTH** THERE'S NO BREAST CANCER IN MY FAMILY, SO MY RISK IS MINIMAL.

**FACT:** There is a 1 in 8 chance that an American woman will develop

breast cancer over the course of her lifetime. Of these cases, only 5 to 10 percent are associated with a hereditary predisposition. This means that 90 percent or more of new breast cancer cases arise in women with no family history of the disease.

Even if you can't think of anyone in your family who was ever diagnosed with breast cancer, it's still important to have regular screening mammograms so that if you do develop the disease, it will be detected and treated early.

### **MYTH** A BREAST CANCER DIAGNOSIS IS ALMOST ALWAYS FOLLOWED BY DISFIGURING SURGERY.

**FACT:** For the vast majority of breast cancer cases, surgery is the first line of treatment. However, our goal as breast surgeons is to perform surgery in a way that is cosmetically acceptable to the patient. We've come a long way from the radical mastectomies of the past that left patients without the breast and the underlying muscle. For patients with small and early-stage cancer, lumpectomies are now available that remove the cancer itself with just a small margin of normal breast tissue around it.

If we anticipate that surgery may result in cosmetic deformity, we can rearrange breast tissue during surgery in order to recreate a natural-looking breast. For patients who require mastectomy—removal of the entire breast—we work with plastic surgeons to offer breast reconstruction using implants or a patient's own body tissue.

Ultimately, our goal is not just to treat the breast cancer, but to treat the whole person and to physically restore her so that she can feel happy when she looks at herself in the mirror.

To learn about breast cancer screening and treatment at Clara Maass Medical Center, call **973.844.4161**.  
To request a mammogram appointment, visit [www.rwjbh.org/mammo](http://www.rwjbh.org/mammo).

# Your heart doesn't beat just for you.

**Get it checked.** It beats for your husband or wife, your children and grandchildren. It beats for your brothers and sisters, your friends and lovers. It beats for everyone who cares deeply about you. So please, get your heart checked. For them. For you. For more information and to make an appointment with one of New Jersey's top cardiologists, [visit \*\*rwjbh.org/heart\*\*](http://rwjbh.org/heart).

Clara Maass  
Medical Center

RWJBarnabas  
HEALTH

Let's be healthy together.

