

A Publication of  
**NEWARK BETH ISRAEL MEDICAL  
CENTER AND CHILDREN'S  
HOSPITAL OF NEW JERSEY**

# healthy

*together*

**COLD, FLU OR  
COVID-19?  
HOW TO TELL**

**FOOD THAT LIFTS  
YOUR MOOD**

**LUNG CANCER:  
NEW TREATMENTS**

**PROTECT YOUR HEART  
FROM STRESS**

# Rising to the Challenge

**D**uring the COVID-19 pandemic, changes in healthcare have been unprecedented. Fighting a new and unpredictable virus and making it safe for patients to receive all types of care under these extraordinary conditions have become our top priorities.

We're proud of how RWJBarnabas Health has risen to these challenges, as stories in this issue show. From new mothers who need help with breastfeeding to seniors looking for advice on how and whether to have social interactions, we're here for you with support and guidance.

We offer telehealth services for children and adults through RWJBarnabas Health TeleMed®, which makes virtual visits available for many issues in both primary and specialty care. If an in-person doctor visit is required, know that all physicians in our RWJBarnabas Health Medical Group have implemented additional safety standards for their offices, including social distancing, mask wearing, intensified disinfection protocols and COVID-19 screening of patients and staff.

Of course, in the event you or a loved one need to go to the hospital, you can rest assured that each facility in the RWJBarnabas Health system has taken every precaution for the safety of patients, visitors and team members.

At Newark Beth Israel Medical Center and Children's Hospital of New Jersey, we continue to take every precaution to ensure the safety of our patients, visitors and staff, including universal masking, specialized disinfection procedures and ensuring social distancing throughout the facility. In addition, in the midst of this pandemic, we continue to expand. Earlier this year, we completed the renovation of our maternity unit, and this fall we will break ground on the largest expansion of our facility in the past 50 years. In this issue, you will read about the project that promises to transform the face of our facility and the Lyons Avenue corridor.

At RWJBarnabas Health, caring for the community is our mission and our passion. Please take good care of yourselves by wearing a mask when needed, washing your hands frequently and practicing social distancing.

Yours in good health,



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




**DARRELL K. TERRY, SR.**  
PRESIDENT AND CHIEF EXECUTIVE OFFICER  
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## HEALTH NEWS

### WORLD'S BEST HOSPITAL—AGAIN

Newark Beth Israel Medical Center (NBI) has been named one of the World's Best Hospitals 2020 by *Newsweek* magazine, marking two years in a row that the medical center has received this recognition.

Newark Beth Israel has long been a center of excellence and a destination center for the most advanced cardiac care, heart and lung transplant, comprehensive cancer care and pediatric specialties at Children's Hospital of New Jersey.



### BEST MATERNITY CARE HOSPITAL

NBI is one of 231 hospitals across the country named a Best Maternity Care Hospital as part of *Newsweek's* Best Health Care series. NBI has fully met The Leapfrog Group's standards for maternity care on evidence-based, nationally standardized metrics.



### GOLD ACHIEVEMENT FOR CARDIAC RESUSCITATION

NBI has received the Get With The Guidelines Resuscitation Gold Award for the third year in a row. This achievement is given to medical centers that have implemented specific quality improvement measures outlined by the American Heart Association for the treatment of patients who suffer cardiac arrests in the hospital.



### HIGH-QUALITY CANCER CARE





The Frederick B. Cohen, MD, Comprehensive Cancer and Blood Disorders Center at NBI recently earned the Association for Clinical Oncology's Quality Oncology Practice Initiative, a three-year certification recognizing high-quality care for outpatient hematology-oncology practices within the U.S.

### ASCO QOPI Certification Program

**Newark Beth Israel Medical Center** | **RWJBarnabas HEALTH**  
**Children's Hospital of New Jersey**

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# TAKING CARE OF TEETH (AND MORE)

**THE CHIVIAN DENTAL CENTER CONTINUES A CENTURY-OLD TRADITION OF CARING FOR THE NEWARK COMMUNITY.**

Good oral health—the condition of the mouth, teeth and gums—is essential to good overall health. In fact, there is a recognized association between periodontal disease and cardiovascular health, stroke, diabetes and adverse pregnancy outcomes.



**RUSS S. BERGMAN, DMD**

For top dental care, Newark residents can turn to the Chivian Dental Center at Newark Beth Israel Medical Center (NBI), located at 201 Lyons Avenue. It is one of the largest hospital-based

dental programs in the state, providing 16,000 outpatient visits and 500 inpatient consultations each year.

“We do general dentistry, just as anyone would find at their dentist on Main Street,” says Russ S. Bergman, DMD, Vice Chair and General Practice Residency Program Director, Department of Dentistry, at the Chivian Dental Center. “In addition, we can also provide every specialty in the dental field—bridgework, implants, dentures, endodontic services and more.”

What makes the Chivian Dental Center special, however, goes beyond its breadth of expertise. The center has a long tradition of caring for the community and attracting top talent to the area.

The renaming of the dental center was made possible by the generosity of Simona Chivian Chazen and her husband, Jerome Chazen.

## A HEALTHY HISTORY

Formerly known as the Newark Beth Israel Dental Center, the center was renamed in 2018 in honor of Noah Chivian, DDS, Emeritus Chair, Department of Dentistry, at NBI and former Director of Endodontics, who first joined the staff in 1959 and continues to teach there. His father, Jacob Chivian, DDS, who passed away in 1971, was one of the first to join the center in 1928.

That kind of long-term connection is not unusual among the center’s staff. As a General Practice Residency program, the center has 13 residents, who apply for the highly competitive residency after finishing dental school. The residents treat patients under the supervision of the attending staff of more than 60 dentists, who volunteer their time.

“These dentists enjoy their interaction with residents and patients,” says Dr. Bergman. “It’s something they love to do. Most of them are previous graduates of the program. When you are part of the Newark Beth Israel Medical Center family as a resident, the connection lasts for your professional lifetime.”

## THE BIG PICTURE

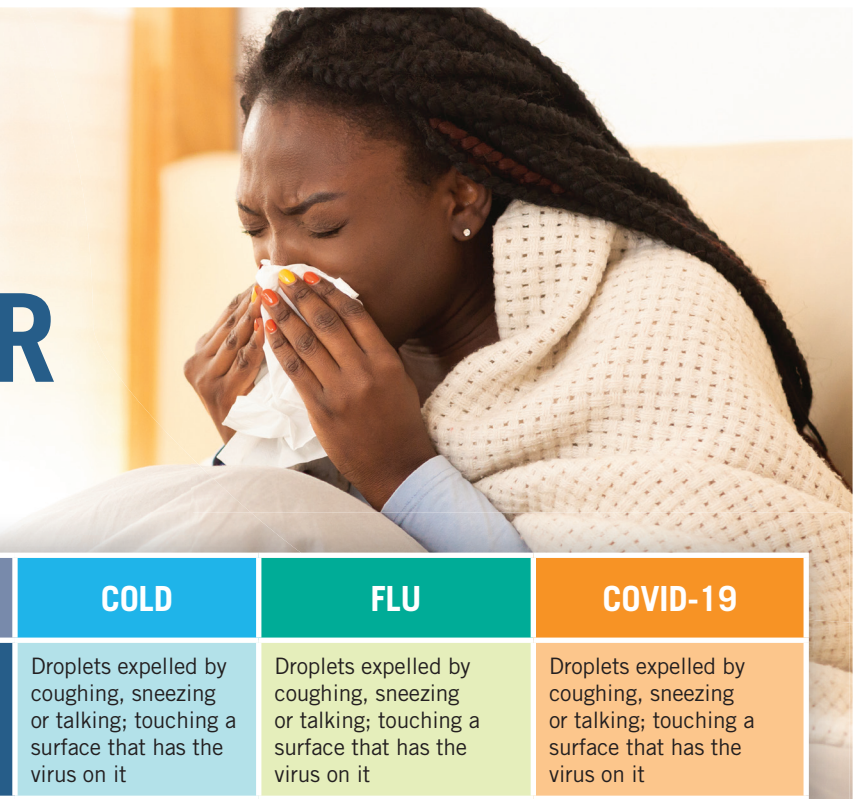
As part of a major medical center, residents and staff at the Chivian Dental Center are an integral part of care for a range of conditions. “A patient may come to the Emergency Department with trauma or a life-threatening infection and need our expertise,” explains Dr. Bergman. “We also work closely with patients who are undergoing chemotherapy, because their ability to fight infection is diminished.”

Chivian dentists also consult on cases of cardiac or valvular surgery. “The surgeon wants to be sure there are no areas of current or potential infection in the oral cavity because those can potentially lead to complications post-surgery,” Dr. Bergman says.

“We are part of the one of the largest postgraduate dental programs in the state, and the oldest by far—we go back almost 100 years,” says Dr. Bergman. “We treat all kinds of patients at all ages and every kind of dental procedure. That’s the special sauce that makes ours a great program.”

To learn more about dental services at Newark Beth Israel Medical Center, call **973.926.7642** or visit **[www.rwjbh.org/newarkbeth](http://www.rwjbh.org/newarkbeth)**.

# IS IT A COLD, FLU OR COVID-19?



**THEY'RE ALL VIRAL, AND THEY SHARE SOME SYMPTOMS. HERE'S HELP WITH TELLING THE DIFFERENCE.**

It's happening now and likely to increase during flu season: Patients have upper-respiratory symptoms and worry that these indicate COVID-19. "Call your primary care doctor and describe your symptoms to know what your next steps should be," says Eric Wasserman, MD, Chairman and Medical Director of the Emergency Department (ED) at Newark Beth Israel Medical Center. "However, if you feel that your symptoms warrant a trip to the ED, by all means you should come in." Statistics show that people with underlying health issues, such as cancer or diabetes, are more at risk from COVID-19, as are African-Americans and Latinos.

"In general, I'd advise people to try to stay calm," Dr. Wasserman continues. "The likelihood that you're going to recover from

any of these is very high. The important thing is to seek medical attention when you need it."

Use this chart to get an idea of what symptoms may mean.



**ERIC WASSERMAN, MD**

	COLD	FLU	COVID-19
HOW IT SPREADS	Droplets expelled by coughing, sneezing or talking; touching a surface that has the virus on it	Droplets expelled by coughing, sneezing or talking; touching a surface that has the virus on it	Droplets expelled by coughing, sneezing or talking; touching a surface that has the virus on it
KEY SYMPTOMS	Mainly upper respiratory: nasal congestion, sore throat, headache, possibly mild cough	Fever, chills, muscle aches, exhaustion; runny nose, sore throat, headache; possible nausea, vomiting, diarrhea	A wide range, including fever, cough, shortness of breath; sometimes, lack of taste or smell, which may come on suddenly. Some people experience only a few of these symptoms, or none at all.
HOW IT'S DIAGNOSED	No test; diagnosis based on symptoms	Swab test performed by healthcare provider	Usually swab or saliva test performed by healthcare provider
TREATMENT	Bed rest; fluids; over-the-counter medications such as decongestants, pain relievers and cough suppressants	Bed rest; fluids; over-the-counter medications to relieve symptoms. In severe or high-risk cases, antiviral medications may be prescribed.	COVID-19 treatments are still in the development stage.
RECOVERY TIME	A few days to two weeks	A few days to two weeks, if no complications, such as pneumonia, develop	For mild cases, about two weeks; for more severe cases, six weeks or more, and hospitalization may be required
PREVENTIVE MEASURES	Wash hands frequently; don't touch face; avoid close contact with infected persons	Wash hands frequently; don't touch face; avoid close contact with infected persons. Annual flu vaccine is recommended for most people aged 6 months and older	Wash hands frequently; don't touch face; wear mask; maintain 6 feet of distance from other people outside your home; avoid close contact with infected persons

To find a primary care physician at Newark Beth Israel Medical Center, call **888.724.7123** or visit [www.rwjbh.org/newarkbeth](http://www.rwjbh.org/newarkbeth).



# TWO TIMES LUCKY

**SUCCESSFUL WEIGHT LOSS SURGERY, FOLLOWED BY A HEART  
TRANSPLANT, RESTORED A BRIDGEWATER MAN TO HEALTH.**



Jerry Kubu is doing well after undergoing two major surgeries within six months.

In late 2019, Jerry Kubu, 61, was at Newark Beth Israel Medical Center (NBI) with a serious heart condition when he got a very important call. It was from the heart transplant team at NBI.

The caller said, simply, “Jerry, are you ready?”

Jerry replied, “Yes. How long until we do it?”

Caller: “About six hours.”

For almost a year, the Bridgewater resident and a broad variety of specialists at NBI had been working very hard to keep his heart functioning. Jerry had a type of heart failure called low ejection fraction, or EF, meaning that his heart could no longer pump (eject) enough blood to meet his body’s needs.

“For years, my doctors had been trying everything medically possible to avoid the need for a heart transplant,” he recalls. “At one point I was involved with a clinical trial for a drug to increase the EF percentage. We hoped for the best but prepared in case a transplant was needed. In the meantime, I also had another problem: my weight.” He weighed 280 pounds—a major obstacle for a complex surgery like a heart transplant.

“Obesity can be a deal-breaker for heart transplant,” says Margarita Camacho, MD, Surgical Director of NBI’s Advanced Heart Failure Treatment and Transplant Program and Jerry’s surgeon. “We know that obesity increases the risk of heart disease, high blood pressure, arteriosclerosis [hardening of the arteries] and other conditions. Those risks don’t change if you have a new heart.”

Jerry would need to lose at least 80 pounds before a transplant was a possibility, but his challenges were great. “Diet and exercise can be very difficult for someone with a heart condition,” says Alan Saber, MD, Director of the Bariatric and Metabolic Surgery Program at NBI.

“However, bariatric surgery makes any subsequent surgery less risky,” Dr. Saber explains. “Morbidly obese patients who need orthopedic surgery or heart surgery will benefit greatly from bariatric surgery first.”

## TEAMS IN PLACE

Many obese patients are turned away from heart transplant



MARGARITA CAMACHO, MD



ALAN SABER, MD

programs and other surgeries, such as orthopedic surgery, Dr. Saber says, because hospitals lack the expertise to address multiple health issues.

NBI, however, has medical teams in many specialties—

including strong heart transplant and bariatric (weight loss) surgery programs—who are highly experienced in working together to address the many challenges each patient might have.

“Bariatric surgery is complex, and heart transplant surgery is complex,” Dr. Camacho says. “It’s terrific that we have the teams and systems in place so all these specialists can work together.”

Jerry would need that experience urgently as his heart condition continued to deteriorate and weight loss became the top priority. “My cardiologist and I decided on bariatric surgery,” Jerry says. “Within about 15 minutes, my doctor had Dr. Saber in the room with us to begin setting up the tests I would need. I was astounded by how quickly that happened.”

Jerry’s bariatric surgery—a sleeve gastrectomy, in which a large portion of the stomach is removed so that it holds less food—was successful. By August 2019, he’d lost almost 100 pounds.

Unfortunately, his heart condition had continued to worsen. His condition meant that he was placed near the top of the heart transplant list. He waited only three weeks before getting the call that a donor heart was on the way to NBI.

“Everyone at NBI had prepared me well, so I knew what to expect,” he says. “But when the time actually came, then it hit me. I was nervous.”

## A NEW LIFE

Jerry’s confidence and trust soared, however, as the team wheeled him toward the operating suite. There he saw, lining the hallway, his nurses, other members of his transplant team and his family.

“They were smiling, dancing, waving and clapping for me, excited for me,” he says. “I heard them say, ‘You got this!’ ‘We love you!’ ‘You got this!’ It was a tremendous thing they did. It put me in a good place.”

The heart transplant was a success. Jerry returned home after just three weeks in the hospital.

“With my new heart, I feel better than I’ve ever felt,” he says. “Even months after the transplant, I noticed more and more things I could do.”

More important, he says, he has a new perspective on life. His success after two major surgeries in a six-month span led to what he calls an “epiphany.”

“Every one of the people I got to know at Newark Beth Israel Medical Center gave me confidence,” Jerry says. “I knew I could trust everything that they did. But what they gave me was beyond medical care. It was powerful.”

Today, when people tell him how great he’s doing, he says he has nothing to do with it. “It was the surgeons and all the people at Newark Beth Israel Medical Center that did great,” he says. “Each of them, with the power of the spirit of God, is part of my success.”

To learn more about bariatric surgery at Newark Beth Israel Medical Center, visit [www.rwjbh.org/weightloss](http://www.rwjbh.org/weightloss). To learn about heart transplants at NBI, visit [www.rwjbh.org/hearttransplant](http://www.rwjbh.org/hearttransplant).



At NBI's newly renovated Healthcare Foundation of New Jersey Mother-Baby Unit, every detail has been thoughtfully designed.



# SPECIAL DELIVERIES



**THE NEWLY RENOVATED MOTHER-BABY UNIT PROVIDES PRIVATE ROOMS AND THE MOST ADVANCED CARE.**

More than 3,000 babies are “Born at The Beth” every year, and at Newark Beth Israel Medical Center (NBI) each experience is unique.

“This isn’t cookie-cutter care,” says MaryAnne Markowski, CNM, MSN, MSHS, Director of Midwifery Services at NBI. “We cater to the needs of each mother, whether a woman is a low-risk patient who wants a completely natural birth or there is a high-risk situation. The wide range of care we provide really sets us apart.”

At the core of this experience is NBI’s Collaborative Practice, in which board-certified nurse midwives and board-certified obstetricians, led by Chair of Obstetrics and Gynecology Khalid Sawaged, DO, FACOG, work closely together. “The midwives work as a team with our doctors, and we have a mutual respect for one another,” Markowski says. “It’s a unique model and we’ve worked hard to achieve it.” Every detail is regarded as an opportunity to promote safety and bonding, such as fostering skin-to-skin contact and trying to get baby on the breast right after

delivery to support breastfeeding.

At NBI’s 34-bed Healthcare Foundation of New Jersey Mother-Baby Unit, all rooms are spacious, private and newly renovated. “We encourage rooming-in for the baby, and our private rooms allow a birth partner to comfortably stay with the new mother during her time at the hospital,” says LaShawn Jemison, MSN, MBA, RN, Director of Perinatal Services at NBI.

In recognition of how important each birth is, the Mother-Baby Unit has a “Zero Birthday Cake” program to celebrate the life of the newborn and congratulate the family.

## AN ADVANCED ENVIRONMENT

In cases where a newborn needs medical intervention, obstetricians can turn to NBI’s Level 4 Regional Perinatal Center—one of only two such centers in the state—which provides the highest level of neonatal intensive care to newborns; a Comprehensive Children’s Heart Center; and a full Children’s Hospital of New Jersey with more than 30 pediatric specialties.



## MATERNITY CARE RECEIVES NATIONAL RECOGNITION

Newark Beth Israel Medical Center (NBI) is proud to have been named a Best Maternity Care Hospital by *Newsweek* magazine. One of just 231 hospitals in the country to receive this distinction, NBI met all standards for maternity care on evidence-based, nationally standardized metrics. These include lower rates of early elective delivery, NTSV C-section and episiotomy, as well as compliance with process measures including newborn bilirubin screening prior to discharge and blood clot prevention techniques for mothers delivering via C-section.

“Keeping our new mothers and their babies safe and healthy is our top priority, and it shows,” says Darrell K. Terry, Sr., President and Chief Executive Officer at NBI and Children’s Hospital of New Jersey. “Our new moms certainly expect the best, and we continue to set new standards for high-quality care.”

“Labor and delivery is always an exciting experience for us,” Markowski says. “We bring life into the world. What better job is there?”

For more information about maternity services at Newark Beth Israel Medical Center, visit [www.rwjbh.org/maternity](http://www.rwjbh.org/maternity).







# GOING OUT: WHAT'S SAFE FOR SENIORS?

**WHEN IT COMES TO COVID-19 AND SOCIAL CONTACT,  
IT PAYS TO WEIGH THE RISKS AND BENEFITS.**

A senior citizen who lives alone had become depressed. Her family said she seemed confused when they spoke to her on the phone. Should she allow visitors into her home to help her, or was the risk of contagion too great?

An elderly couple was being urged to attend the wedding of a dear family member, and they very much wanted to be there. Should they go?

These and similar questions are being debated daily by older adults, who are among the groups most at risk for severe illness from COVID-19.



JESSICA ISRAEL, MD

“When stay-at-home recommendations began, many assumed that there would be a clear end date and kept a stiff upper lip as they socially isolated,” says Jessica Israel, MD, Senior Vice

President of Geriatrics and Palliative Care for RWJBarnabas Health and a member of RWJBarnabas Health Medical Group.

However, as questions about transmission and treatment persist, it's become clear that life will not be going back to “normal” anytime soon—and prolonged isolation has health risks as well.

“Today, older adults need to evaluate the risk of having an interaction vs. the risk of not having it,” says Dr. Israel. “And we all need to be open to the fact that there's no one-size-fits-all answer for everybody.”

## THREE QUESTIONS

To weigh out the pluses and minuses of a social interaction, Dr. Israel advises, ask yourself three questions:

**“What are the risks of what I'm thinking about doing?”** Will people be masked, will there be the ability to wash or sanitize hands, and will commonly touched surfaces be sanitized? Will the event be indoors or outdoors?

**“How am I feeling emotionally?”** Are you emotionally OK, or is staying inside affecting your ability to live your life successfully? For example, do you have a hard time getting motivated to get out of bed to begin your day? Have you lost interest in talking to people on the phone or in doing things you could enjoy, such as sitting outside?

**“How am I feeling physically?”** Is your health good, or do you have trouble with normal activities, such as walking from room to room? Have you been putting off care for a health condition?

Based on these considerations, Dr. Israel advised the family of the depressed older woman that she should have visitors. “It was becoming an unsafe situation, and when it comes to depression, you can't solve everything with medication,” she says. “The family had been trying to protect her by staying away, but she needed to see them in person, with all appropriate safety measures taken, of course.”

As for the elderly couple who were invited to the wedding, Dr. Israel asked them whether all guests would be masked and practice social distancing. The answer was no. “I had to tell them that I thought it would be too unsafe for them. They actually felt relieved,” she says.

“People come to me all the time and say, ‘Can I go to the hairdresser? Can I go to a restaurant that has outdoor seating?’” says Dr. Israel. “I tell them there may not be a great answer. No activity is without any risk at all, so you have to consider what you can do to mitigate that risk.”

The one activity that's definitely off-limits for now is hugging grandchildren, says Dr. Israel. “We're still learning, but it looks like young people spread the virus very easily, even if they show no symptoms at all,” she says. “I hate to say it, but hugging grandkids should be on hold for a while longer.”

To learn more about healthcare for seniors at RWJBarnabas Health, visit [www.rwjbh.org/seniorhealth](http://www.rwjbh.org/seniorhealth).



A pregnant woman with curly hair, wearing a light blue long-sleeved shirt, is smiling and holding a white tablet computer. The background is a soft-focus indoor setting with a white brick wall and a white cushion.

# NEW MOTHERS, NEW CHALLENGES

**VIRTUAL SUPPORT IS HELPING NEW AND EXPECTING  
MOMS GET THROUGH THE PANDEMIC SAFELY.**

The experience of being pregnant and having a baby is different during the era of COVID-19.

In-person baby showers aren't happening. Pregnant women aren't seeing friends and coworkers on a daily basis, so they can't have the kind of "Is this normal?" discussions that tend to come up between expecting and experienced mothers.

After the baby is born, many women have to go without help from other family members because of travel restrictions or fears of bringing COVID-19 into a home with a newborn.

"Many families are trying to navigate the emotional, physical and social challenges often experienced after the birth of a baby without the traditional support of friends and family," says Suzanne Sernal, Vice President for Women's Services at RWJBarnabas Health (RWJBH). "We've been hearing that pregnant women feel anxious because they're isolated and not able to experience pregnancy and new motherhood as they'd imagined they would."

For many women, help has come in the form of virtual support groups, facilitated by experts at RWJBH hospitals. Specific topics vary from hospital to hospital, but two groups are open to all: virtual support for women who are experiencing perinatal mood and anxiety disorders (PMADs) and virtual support for breastfeeding.

"One of the most important things women learn in these groups is that the things they're feeling are normal and they can talk about them," Sernal says. "We've created comfortable, safe virtual spaces for expecting and new mothers."

## MANAGING ANXIETY

Women may come to a PMAD group feeling that they're alone, but in fact, PMAD—which used to be called postpartum depression—affects 1 in 5 pregnant and new moms. Though a very real illness, it is temporary and treatable, and peer support has been shown to be a powerful help.

In the group, new and expecting

mothers may express their sadness or anger, or feelings of being overwhelmed, without feeling judged.

"The conversations these women are having are so meaningful," Sernal says. "Some of them feel so isolated and sad at the beginning of a session, and by the end they're actually smiling and have been given a handful of resources they can immediately tap into as soon as the session is over."

Conversations can continue in a private Facebook community, and telehealth visits with a behavioral health specialist can be arranged. "We've been able to open the doors for more women to get support for mood and anxiety disorders because the virtual groups have eliminated geographic barriers," Sernal says.

## BREASTFEEDING BASICS

Breastfeeding is good for both mother and baby, but it comes with many challenges—from latching-on to milk supply, tongue-tie, pain, pumping, diet, weaning and more. In virtual breastfeeding support groups, women connect with other new mothers as well as International Board-Certified Lactation Consultants to get the answers they need.

Lactation consultants allow moms to take the lead by raising issues that are of concern to them and provide their professional advice and insight as needed.

"When I got home from the hospital, I missed the support of the great lactation consultants and nurses there," says Lauren Tran, 34, of South Orange, who had a baby boy in mid-June. "I wondered if it would feel silly to do a breastfeeding group virtually instead of in person. But that feeling went away quickly, and we are building camaraderie and getting to know each other just as we would if we were in person."

"Knowing I'm not alone in challenges I'm dealing with is so helpful," says Shlomit Sanders, 33, of Elizabeth, who gave birth in April. "There are breastfeeding behaviors in babies that first-time moms have no idea about—for example, a feeding position that



## PROTECTING MOMS AND BABIES FROM COVID-19

"The medical community is still learning about all of the potential effects COVID-19 may have on pregnancy and newborns," says Suzanne Sernal, Vice President for Women's Services at RWJBH. "What we do know is that all of the stay-safe recommendations—mask wearing, distancing, and frequent and thorough handwashing—that apply to us all are especially important for pregnant women and infants, and those who visit or care for them."

The Centers for Disease Control and Prevention recommends that mothers who come into a hospital for delivery be tested for COVID-19, even if they have no symptoms (cough, shortness of breath, fever or chills, loss of taste or smell). "At RWJBarnabas Health hospitals, we've put every precaution in place to ensure the safety of everyone in our facilities, including mothers and their birth partners," says Sernal. "So far, we've delivered more than 10,000 babies during this pandemic and have kept every one of those mothers and babies safe and healthy."

works great one time and not at all the next. It's so comforting to normalize these behaviors."

"At RWJBarnabas Health, we've made ourselves available to all of the pregnant and parenting women in our communities, and we welcome their questions," Sernal says. "We want them to have a great experience, even as they take all the measures needed to stay safe and healthy during the pandemic."

To learn more about virtual breastfeeding support, visit [www.rwjbh.org/breastfeedingsupport](http://www.rwjbh.org/breastfeedingsupport). To learn about the PMAD group, visit [www.rwjbh.org/PMADsupport](http://www.rwjbh.org/PMADsupport). To learn more about maternity care at RWJBarnabas Health, visit [www.rwjbh.org/maternity](http://www.rwjbh.org/maternity).





# RADIATION ONCOLOGY: IT TAKES A TEAM

PATIENTS IN THE RWJBARNABAS HEALTH SYSTEM HAVE ACCESS  
TO THE MOST ADVANCED TREATMENTS FOR CANCER.



RWJBarnabas Health, together with Rutgers Cancer Institute of New Jersey—the state's only NCI-Designated Comprehensive Cancer Center—provides close-to-home access to the latest treatment options. For more information, call 844.CANCERNJ or visit [www.rwjbh.org/beatcancer](http://www.rwjbh.org/beatcancer).

Radiation oncology, which uses precisely targeted doses of high-energy radiation to eliminate cancer cells, is an effective treatment for a wide range of cancers.

Within the field, though, are numerous treatment options, and that leads to crucial questions. Would a patient's cancer respond best to external beam radiation therapy, in which high-energy rays are directed from the outside into a specific part of the body? Or internal radiation, which involves putting a source of radiation inside the patient's body? And within those two categories, which specific treatment is most likely to be more effective for a particular patient?

Cancer patients in New Jersey can be assured that they have the best minds in the field on their cases, thanks to the unique partnership between RWJBarnabas Health (RWJBH) and Rutgers Cancer Institute of New Jersey, the state's only National Cancer Institute-Designated Comprehensive Cancer Center.

"All of the radiation oncology doctors at the 11 hospitals in the RWJBarnabas Health system and Rutgers Cancer Institute consult with each other. We don't hesitate to pick up the phone," says Bruce Haffty, MD, FACR, FASTRO, FASCO, Chair of Radiation Oncology for Rutgers Cancer Institute and for Rutgers Robert Wood Johnson Medical School and New Jersey Medical School.

"Moreover, we all know what technologies are available throughout the system. So if a patient at one of our cancer centers needs a treatment that's available at Rutgers Cancer Institute or any RWJBarnabas Health facility,



BRUCE HAFFTY, MD

we ensure that treatment can be offered based on the individual patient needs. If a clinical trial at any of those places could benefit a patient, his or her oncologist will know about

it and the patient will have access to it," explains Dr. Haffty, who is also the Associate Vice Chancellor for Cancer Programs.

"In this way, we can provide a seamless continuity of advanced care that's of great benefit to our patients," he says.

### CONSISTENT CONNECTION

Physicians at RWJBH and Rutgers Cancer Institute represent a vast array of cancer specialties. "A physician can call a specialist at another RWJBarnabas Health hospital to consult on any case," Dr. Haffty says. "For example, I get calls all the time about cases in my specialties, breast cancers and head and neck cancers. The same kind of discussions go on among experts in gastrointestinal, brain, blood cancers—all kinds of subspecialties within radiation oncology."

Such consultations aren't left to chance. Cancer specialists at RWJBH and Rutgers Cancer Institute meet regularly to discuss their cases. "We've implemented peer-review planning sessions, where every new patient case at each facility is peer-reviewed by multiple physicians," says Dr. Haffty. "Physicians share their ideas about what treatments might best benefit the patient—perhaps Gamma Knife, CyberKnife, proton therapy or other sophisticated radiation therapy techniques. Very few health systems have all of these options available."

Physicians and patients also have the benefit of the most up-to-date national research and the latest clinical trials. As one of just 51 U.S. institutions designated a Comprehensive Cancer Center by the National Cancer Institute, Rutgers Cancer Institute is a leader in conducting cancer research and translating scientific discoveries into novel treatments.

"The partnership between Rutgers Cancer Institute and RWJBarnabas Health is unique in that it offers the latest technology available in combination with all of our subspecialty expertise," says Dr. Haffty, "and anybody who walks in the door anywhere in the system has the benefit of all of it."



### ADVANCED TREATMENTS

Radiation oncologists at Rutgers Cancer Institute of New Jersey and throughout the RWJBarnabas Health system are experts in the most advanced radiation treatments available, including but not limited to:

**BRACHYTHERAPY:** In this type of radiation therapy, the radioactive source is delivered through seeds, ribbons, catheters or wires placed within or just next to a tumor.

**CYBERKNIFE:** This robotic radiosurgery system is noninvasive and delivers intense, highly focused doses of radiation directed by a sophisticated computer guidance system.

**GAMMA KNIFE RADIOSURGERY:** This treatment uses multiple beams of radiation focused with extreme accuracy on the tumor or area to be treated. With Gamma Knife, no incision is required to treat tumors and other abnormalities of the brain.

**INTENSITY MODULATED RADIATION THERAPY (IMRT) AND IMAGE GUIDED RADIATION THERAPY (IGRT):** These therapies utilize advanced imaging and computerized radiation delivery techniques that provide high-resolution, three-dimensional imaging to pinpoint tumor sites while protecting healthy tissue.

**PROTON BEAM THERAPY:** This type of therapy uses protons (subatomic particles with a positive electric charge) to precisely target locations within tumors while protecting surrounding tissues and organs.

Your cancer care is too important to wait. Our cancer centers and our hospitals have taken every precaution as we continue to provide the most advanced cancer care. To schedule an appointment with one of our cancer specialists, call **844.CANCERNJ (844.226.2376)**.





Aiden Shanklin, left, has a custom treatment plan designed by his doctors to alleviate symptoms caused by a genetic mutation.

muscle tone or motor skills caused by damage to or abnormal development of the brain. CP symptoms often include exaggerated reflexes, floppy or rigid limbs and involuntary motions.

Aiden lived with this diagnosis for six years. Then he was taken to see Adam Aronsky, MD, a developmental and behavioral pediatrician at CSH in Mountainside. Dr. Aronsky felt that Aiden's clinical picture did not align with those of CP patients and suggested that he undergo genetic testing. That led to the discovery that Aiden actually had a GRIN2B mutation, a genetic disorder with symptoms very similar to those of CP.

"Because the symptoms of CP and GRIN2B-related syndrome are so similar, our treatment plan has not changed," Nicole says. "However, the new diagnosis has provided a lot of answers to my questions."

Aiden now sees three physicians at the CSH Mountainside location who work together to help with his treatment plan. Dr. Aronsky treats Aiden's bone and muscle function. JenFu Cheng, MD, a physical medicine and rehabilitation physician (physiatrist), provides Botox injections that assist with the parts of Aiden's body that have high muscle tone (spasticity). Neurologist Andrea Richards, MD, assesses any episodes he may have. For example, when there was concern that a laughing condition was a sign of a seizure, she was able to determine that it was just part of Aiden's personality.

"This experience has taught me that it's OK to ask questions, even if you think they don't make sense or seem silly," Nicole says.

"I encourage other families going through similar experiences to go with their gut, ask questions, research everything you can and share your experiences with others. You never know who will benefit from your story."

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

# EVERYDAY JOYS

**EXPERT CARE PROVIDES A YOUNG PATIENT WITH THE BEST POSSIBLE QUALITY OF LIFE.**



**Children's Specialized Hospital®**

An RWJBarnabas Health facility

At 8 years old, Aiden Shanklin is wheelchair-dependent, has a sensory processing disorder and functions at the level of a 1-and-a-half-year-old.

He also loves to laugh, listen to the acoustic guitar, ride horseback and swim or run his hands under water. Aiden is doing these things and living his best possible life, thanks to the loving care of his family and the expertise of doctors at Children's Specialized Hospital (CSH).

"Children's Specialized Hospital has provided us with such excellent care. I couldn't ask for a better team for Aiden," says his mother, Nicole. "They have given

us the opportunity to provide him the best quality of life that we can."

## QUESTIONS ANSWERED

When Aiden was 9 months old, Nicole became concerned because he had trouble holding his head up and had no trunk control. "When I would go to lift him, it felt as if I were picking up a rag doll," she says.

A pediatrician diagnosed Aiden with cerebral palsy (CP), a disorder of movement,

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. We 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 conditions. We have convenient locations throughout the state: Bayonne, Clifton, East Brunswick, Egg Harbor Township, Hamilton, Jersey City, Mountainside, New Brunswick, Newark, Toms River and Warren.

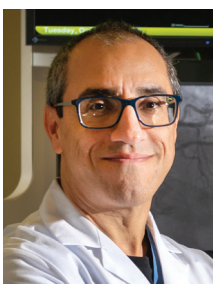


# HOW STRESS HARMS THE HEART

**HEART MUSCLE DISEASE IS INCREASING, AND EXPERTS THINK EMOTIONAL DISTRESS IS A MAJOR CAUSE.**

If someone says their heart is broken, you instantly know what that means: The person is feeling deep grief, usually from the loss of a love relationship or the passing of a loved one.

The pain is emotional, but it can feel—and be—physical as well.



FADI CHAABAN, MD

In fact, cardiac specialists know extreme emotional stress can actually “break” a heart’s functioning by reducing the ability of heart muscles to pump, thereby depriving the brain and organs of oxygen-rich blood. This is called stress cardiomyopathy, also known as “broken heart syndrome,” and cases have been on the rise.

“Recent data show an increase of four times the number of stress cardiomyopathy cases compared to before the COVID-19

pandemic,” says Fadi Chaaban, MD, Director and Chief of Cardiology at Clara Maass Medical Center and a member of RWJBarnabas Health Medical Group.

## HOW IT HAPPENS

“The mechanism for triggering stress cardiomyopathy is not completely understood, but it’s possible that there is a link between the brain and the heart where you have a high activation of neurons in the brain stem,” says Dr. Chaaban. “These in turn secrete a tremendous amount of stress hormones and neuropeptides, which could be captured by the receptors of the heart, leading to a temporary dysfunction of an area in the heart.” However, the COVID-19 virus attacks the heart in many ways that are still not completely understood, he notes.

Stress cardiomyopathy has the same symptoms as a heart attack: chest pain, shortness of breath, sweating, dizziness, nausea and vomiting, weakness and pounding of the heart. In addition to being triggered by intense emotion, it can be caused by significant physical stress, such as a severe asthma attack or a broken bone.

“Many times, a patient comes in with what presents as a heart attack, and we discover it was actually stress cardiomyopathy only after further testing, such as an echocardiogram or angiogram,” says Dr. Chaaban.

Women, especially those over 50, seem to be more at risk of emotion-caused stress cardiomyopathy. When men have the condition, it is more often caused by physical stress.

## MANAGING STRESS

“We don’t know why some people get stress cardiomyopathy and others don’t, but what we can tell patients is that they are highly likely to fully recover,” says Dr. Chaaban. “We generally need to provide supportive treatment for several weeks, with medications to help improve blood pressure, remove fluid from the lungs and prevent blood clots.” For very sick patients, a ventilator or an intra-aortic balloon pump may be needed.

Managing stress is the most important thing anyone can do to protect the heart, he says. “The best way to de-stress yourself is to live a healthy life—stay active, eat well and maintain a healthy weight as well as a positive attitude,” he says. “Life is stress, but you can learn not to take things personally and become more resilient to whatever life throws at you.”

The most urgent message Dr. Chaaban has is for people to pay attention to their symptoms. “If you’re stressed out and suddenly feeling chest pain, don’t ignore it,” he says. “Get checked as quickly as possible. Call 911 or go to the Emergency Department. That’s a controlled environment where we can help you and support you until the stress has passed and your heart has healed.”

Your heart doesn’t beat just for you. Get it checked. To find a cardiac specialist at RWJBarnabas Health, call **888.724.7123** or visit [www.rwjbh.org/heart](http://www.rwjbh.org/heart).





# GETTING THE MOST OUT OF TELEHEALTH

**VIRTUAL VISITS WON'T REPLACE IN-PERSON APPOINTMENTS, BUT THEY CAN PROVIDE SIGNIFICANT BENEFITS.**

Not long ago, virtual doctor visits—appointments conducted via video or phone—were relatively rare. Now they're commonplace, and they're here to stay. "The pandemic gave telehealth a jump-start, but I believe it will become a permanent part of the healthcare delivery system," says Andy Anderson, MD, President and Chief Executive Officer of the combined medical group of RWJBarnabas Health and Rutgers Health. "We are seeing



ANDY ANDERSON, MD

ever-increasing use of our RWJBarnabas Health TeleMed services."

Telehealth can be used for primary and routine medical care, as well as for some aspects of specialty care. "There's still enormous value in

face-to-face appointments and physical examinations, and that will never go away," says Dr. Anderson. "But telehealth has many uses, both for convenience and for making and maintaining the doctor-patient connection." Here, he explains why.

## Can a wellness visit be done through telehealth?

A good deal of preventive screening can be done this way. A doctor can ask, "Have you had your mammogram? Have you scheduled your colonoscopy? What kind of diet are you consuming? Are you sleeping well?" Patients can self-report their weight and, if they have a blood pressure cuff at home—as many patients do—their blood pressure numbers. A doctor can screen for cognitive issues, give referrals, advise on a plan for self-care and recommend future tests and appointments.

Telehealth is not, clearly, a full substitute for an in-person visit and

examination. But it is a valuable way for people to get many of their healthcare needs met.

## Besides wellness visits, what other kinds of primary care can be conducted virtually?

If you have an acute issue—for example, a cut or sprain, or a possible urinary tract infection—telehealth is a way to sort out the next steps, such as a doctor office visit, trip to urgent care or a prescription.

Also, aspects of care for chronic conditions like diabetes, heart failure and high blood pressure can be managed via telehealth. A doctor can ask about blood sugar levels, about symptoms and about medication side effects. The physician can see certain symptoms over video, such as swelling in legs.

Chronic disease management should be done in a combination of in-person and telehealth visits. But many patients have been very happy to have routine check-ins take place in a video visit, sparing them time they'd have to spend traveling to the doctor's office.

## When an in-person visit isn't practical, why not just have a telephone call?

We encourage a video visit whenever possible, and fortunately, the technology for having one has become very simple to use. There's a huge visual component to communication—body language, expression. It's important to see the patient and have them see you when you're counseling or coaching them, or asking about side effects.

## Are there any special issues for children?

For kids, much of their preventive care has to do with getting vaccines on schedule, so they'll need in-person visits more than most adults.

## Can telehealth be used for COVID-19 screening?

Absolutely. In fact, it's a very important screening tool because, ideally, you don't want a person to show up to a medical office and potentially expose other people. An initial screening can be done effectively over the phone or via a video call by asking about the patient's health history and symptoms. Then prescriptions, tests or other next steps can be arranged as needed. The same is true, by the way, for people who have a bad cold or the flu.

To learn more about RWJBarnabas Health TeleMed®, call 888.724.7123 or visit [www.rwjbh.org/telemed](http://www.rwjbh.org/telemed).







# NEW RULES FOR SCHOOL

## HOW TO MAKE SURE YOUR CHILD'S NEEDS ARE BEING MET DURING A VERY DIFFERENT SCHOOL YEAR

Regardless of how your child is receiving instruction this fall—in the classroom, remotely, or via a combination—one thing is certain: This school year looks nothing like any before it, presenting challenges for children and everyone who cares for them.

The best thing parents and caregivers can do is to create routine, advises Anne Frederickson, MD, Clinical Director of Child and Adolescent Psychiatry at Newark Beth Israel Medical Center. “The more kids have structure, whether in

school or remotely, the better they tend to do,” she says. “Maintain family routines as best you can.

“But keep in mind that not everything needs to be perfect right now,” she



ANNE FREDERICKSON, MD

continues. “If the house is a little messier than usual because you’re spending time with your kids instead, that’s fine!”

Here’s more advice from Dr. Frederickson about helping kids feel safe and keeping them connected:

■ **COMMUNICATION IS KEY.** Set up an open line of communication with teachers to prevent small problems from becoming larger issues. Ask questions: Is your child showing signs of anxiety about school? Is your child keeping up? Students with special needs are especially vulnerable to not getting what they need in times of change, Dr. Frederickson notes. “Advocate for what your child needs, regardless of the learning environment.”

■ **PROMOTE RELAXATION SKILLS.**

For younger kids, this may mean engaging in coloring worksheets. Older kids may practice deep breathing or take a walk. “Be a role model for these behaviors,” she says. “Demonstrate self-care and coping skills.”

Recognize the need for socialization. Remote learning and scaled-back classrooms limit built-in opportunities to socialize, so encourage your kids to find ways to stay connected with friends. “Just as you plan time for school, plan time for social interaction,” says Dr. Frederickson. Kids can watch a movie or television show “together” while apart, or even try a virtual board game with a friend.

■ **REMEMBER THAT SOCIAL MEDIA IS NOT SOCIALIZATION.**

“Sending messages and videos is not the same as having back-and-forth interactions in real time,” Dr. Frederickson cautions. She further advises parents to monitor kids’ social media presence by following them online or requesting their passwords.

■ **LIMIT NEWS MEDIA.** “Watching the news when your child is around may stir up anxiety,” says Dr. Frederickson. “Don’t hide what’s going on in the world, but become a gateway. Give your child as much information as he or she can manage.”

■ **NOTICE RED FLAGS.** Be aware of signs of withdrawal or isolation: kids no longer playing with things they usually play with, or teens not wanting to socialize with friends or family. In younger children, signs of emotional distress may manifest as stomachaches or headaches that originate without any apparent reason, explains Dr. Frederickson. Other signs of stress in kids of all ages include changes in sleep or appetite.

■ **LOOK FOR THE SILVER LINING.**

“If you can use this time to get your children in the mindset of finding the positive in any situation,” says Dr. Frederickson, “that’s a coping skill that you are giving them for life.”

To learn about pediatric psychiatric services at Newark Beth Israel Medical Center, call **973.926.7026** or visit **[www.rwjbh.org/newarkbeth](http://www.rwjbh.org/newarkbeth)**.

### A NEW FRONT DOOR:

The reimagined main lobby, a light-filled two-story glass structure, will be a focal point for Osborne Terrace and Lyons Avenue and will allow passersby to see the activity going on inside. An appealing mix of limestone panels and glass curtainwall will replace the current brick on the facade that bears the medical center's name. All down the block, "pocket gardens" will refresh the eye and provide places for pedestrians to rest or converse. Dozens of newly planted trees will line the medical center campus.



# TRANSFORMING OUR NEIGHBORHOOD

### A MAJOR RENOVATION PROJECT IS DESIGNED FOR COMMUNITY INTERACTION.



**MEETING SPACES:** Rooms for community use will be visible on the upper level of the lobby, showcasing one of the many ways in which the community and the hospital interact.

When envisioning the exterior changes that are part of a \$100 million renovation project, Newark Beth Israel Medical Center (NBI) planners kept one word firmly in mind: "Welcome."

"Hospital leadership told us that their goals for this project were to establish a sense of openness and safety, so that visitors and people in the community will instantly feel comfortable and know this is a place where they will be welcomed and get quality healthcare," says Ken Kramer, a principal at FCA, Francis Cauffman Architects.

The medical center occupies 11 acres, much of it adjoining residential neighborhoods. It's a true anchor institution for the city, yet the exterior has not reflected the way the medical



**A NEW APPROACH:** The new Emergency Department exterior will use textured glass to achieve welcoming transparency while maintaining patient privacy. A protective canopy has been added at the entrance to shield visitors from the elements as they are dropped off. New lighted bollards (small posts) will illuminate the approach to the building. Across the street, trees and seating areas have been added as a small oasis for pedestrians, and the sidewalk has been extended to make crossing easier.



**A GRAND NEW ENTRANCE:** A plaza is planned for the corner of Schuyler and Lyons avenues, near the entrance to the Frederick B. Cohen, MD, Comprehensive Cancer and Blood Disorders Center. Benches, flowers and trees will adorn the expansive plaza, which will be a focal point for local residents and provide yet another way to share the neighborhood with the community.

center and the community are entwined. Currently, the entrance to the main lobby is difficult to see from Lyons Avenue, and the boundaries of the campus tend to be dark, walled or fenced.

Those boundaries have been carefully considered and “softened” so that there will no longer be such stark dividing lines. Streetscapes around NBI will include “pocket gardens” to provide refreshing breaks along city blocks, and the number of trees on campus will increase from seven to more than 50. These changes, along with plazas and extended sidewalks, will send the message that the hospital is not just a place where community members go for treatment or to get a prescription filled. It can be a place for other activities, such as strolling, walking a dog or sitting and relaxing.

Thoughtfully planned lighting outside of buildings will cast a glow through the night, providing secure spaces throughout the campus. The two bus stops on campus will remain in the same locations but will be upgraded with better lighting and new plantings.

The designers have kept environmental sustainability in mind throughout the process, including low-flow bathroom fixtures, low-VOC paints and automated window treatments to control the amount of light coming in during the day. In addition, the new trees and planting will absorb a good amount

of rainwater during storms, instead of the water hitting concrete and immediately running into the storm sewers.

The transformed campus will certainly be beautiful, but it will be much more than that. “Beautification is something you look at,” says Steven Stainbrook, an urban planning specialist and principal at FCA. “Architecture is something you experience, and in this project everyone—staff member, patient, visitor—is equally part of that experience. The design makes clear that not only is the medical center in the neighborhood; the neighborhood is in the medical center.”

To learn about ways to support this project, visit [www.newarkbethgiving.org](http://www.newarkbethgiving.org).



Veronica Navarro and her husband, Edmundo, meet with Sari Jacoby, MD, at a visit for Veronica's immunotherapy treatment.



# TWO LUNG CANCERS, TWO APPROACHES

**A HUSBAND AND WIFE BOTH DEVELOPED LUNG CANCER, BUT THEIR TREATMENTS WERE VERY DIFFERENT.**

Veronica and Edmundo Navarro never expected to live out their wedding vows quite like they have. “We promised ‘in sickness and in health,’ but I didn’t think about it so literally,” says Veronica, 68.

She and Edmundo, 70, both were diagnosed with lung cancer in 2019 and have had overlapping treatments. Together, the couple has experienced firsthand how treatment for lung cancer has advanced, with very promising results.

## **A TURNAROUND**

The family’s ordeal began with Veronica. She first realized something was terribly wrong in March 2019, when she started coughing up blood, in addition to her chronic shortness of breath. “She had been having respiratory symptoms for several months,” says Sari Jacoby, MD, medical oncologist at the Newark Beth Israel Medical

Center (NBI) Frederick B. Cohen, MD, Comprehensive Cancer and Blood Disorders Center. "It had been brewing for a while."

The blood led to a chest X-ray that revealed a worrisome smudge, and Veronica was referred to the cancer center at NBI. There, a diagnostic procedure called an endobronchial ultrasound (EBUS) bronchoscopy discovered a cancerous stage 3 tumor at the spot where her trachea (windpipe) branched into her left lung. The tumor was blocking air flow to the entire lung. "By the time she got here, that whole side of her lung had collapsed," Dr. Jacoby says. "She was critically ill and oxygen-dependent."

"I didn't cry, believe it or not," Veronica says of her diagnosis. "I asked the doctors, 'Help me to fight this.' I wanted to do everything I could do to recover and survive." Dr. Jacoby felt hopeful. "We have many more options for treating lung cancer than in the past, and I was completely optimistic that there would be therapies to get the disease under control," Dr. Jacoby says.

The tumor's location made surgery risky because removing it would compromise Veronica's entire left lung. Instead, Veronica underwent a regimen of concurrent radiation treatments and weekly chemotherapy, punctuated by two stronger sessions of chemotherapy to shrink the tumor.

By June, Veronica noticed she could breathe better. "When Dr. Jacoby listened to my left lung, she said, 'Oh my gosh, you're amazing! I can hear air!'" Veronica recalls.


Up to that point, Dr. Jacoby had heard nothing from the left lung. "Suddenly it sounded completely normal," she says. "Air

was moving all the way through."

"I want to call Dr. Jacoby my miracle doctor," says Veronica. She has since been on a maintenance treatment consisting of an infused immunotherapy



SARI JACOBY, MD

  
RWJBarnabas Health and the Frederick B. Cohen, MD, Comprehensive Cancer and Blood Disorders Center at Newark Beth Israel Medical Center, together 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 options. For more information, call 844.CANCERNJ or visit [www.rwjbh.org/beatcancer](http://www.rwjbh.org/beatcancer).



Veronica and Edmundo credit their good results to excellent medical care and their strong faith.

every two weeks and continues to do well.

As Veronica's radiation and chemo began wrapping up in late summer, Edmundo began to experience shortness of breath.

"But I was ignoring it," he confesses.

"Edmundo accompanied his wife to pretty much every visit, and he began to look more frail," says Dr. Jacoby. "He was working and active but fatigued and losing weight. But he's extremely quiet and doesn't complain." Then Edmundo, too, began seeing blood when he coughed.

There was no question in Edmundo's mind about where to get checked. "I saw how they treated my wife at Newark Beth Israel," he says. "She was like a VIP." He went through a round of tests, including an EBUS. "When I saw Dr. Jacoby appear afterward, I thought, 'Uh-oh, I think I have the same ailment as my wife,'" Edmundo says. He was diagnosed with stage 4 metastatic lung cancer, and it had established several lesions in his brain.

### PERSONALIZED APPROACH

Having a husband and wife develop lung cancer at the same time was an unusual situation. Although both Edmundo and Veronica had lung cancer, their cases were not the same.

"They had two distinct diseases. The drivers of each were completely different mechanisms," Dr. Jacoby says. "There's been tremendous evolution and growth in the last 10 years as we better understand what causes

lung cancer and how to treat it." Today, advanced lung cancer treatment allows doctors to take a personalized approach.

While Veronica's cancer was vulnerable to the immunotherapy infusions that have marked the final part of her treatment, Edmundo's was susceptible to an oral drug. "I take one pill daily," he says.

In addition, he underwent a procedure called stereotactic radiosurgery, a minimally invasive surgery that uses 3D imaging to target high doses of radiation, for his brain lesions. "It focuses just on the site of the tumor to kill cancer cells but preserve healthy brain tissue," Dr. Jacoby explains.

Five of Edmundo's six brain lesions have disappeared, and the one that remained has shrunk. His lung tumor has also shrunk almost to vanishing, though his condition is complicated by the lung conditions emphysema and chronic obstructive pulmonary disorder (COPD). "Our daily pill is working," Edmundo says. "What seemed a very dark sky now has some great daylight."

Sharing lung cancer has brought the couple closer, Veronica says. "Having the same ailment makes me understand how he feels, how he thinks and probably what to expect because we're on the same ride," she says. She credits their strong Catholic faith and their positive attitude for helping them get through their health challenges.

The couple's sense of closeness extends to their caregiving teams as well. "I'm so glad I stuck with Newark Beth Israel," Edmundo says, even though the facility is outside their home community. "Everyone treats you like family."

# FOOD THAT LIFTS YOUR MOOD

THE MOST POWERFUL “MEDICINE” FOR FEELING GOOD  
MAY BE WHAT YOU PUT ON YOUR PLATE.

What if you were offered a tool that was guaranteed to lift your spirits and give you the energy to do all the things you want to do? The fact is, you already have this tool at your disposal. Numerous medical studies have found that what we eat on a daily basis is powerful “medicine”—perhaps the most powerful—for fighting depression and fatigue.

“Most people associate some kinds of food with comfort, such as pasta or ice cream,” explains Karen Basedow, MS, RD, CDE, a nutritionist for the Family Health Center outpatient clinic at Newark Beth Israel Medical Center. “But the connection between food and how we feel is much deeper than many of us know. Food actually triggers chemical reactions in our brain that lead to changes in our moods.”

How does what we eat affect the way we feel?

**FOOD CAN REDUCE DEPRESSION RISK.** Research shows that a higher risk of depression is linked to a diet that includes few fruits and vegetables, but lots of red or processed meat (deli meat, bacon and hot dogs) as well as high-fat dairy products like whole milk and butter. Meanwhile, a diet that includes lots of fruits, vegetables, low-fat dairy, whole grains, fish and olive oil is strongly associated with a much lower risk of depression.

**FOOD CAN INCREASE ENERGY.** Sugary foods like soda and candy lead to a sharp surge of energy because they trigger the brain to release a feel-good chemical called dopamine. However, this so-called “sugar high” will be brief and will be followed by a slump in mood and energy levels.

On the other hand, a well-balanced diet that includes healthy fats, whole grains, lean proteins, fruits and vegetables leads to steady levels of energy. Basedow has seen this effect in her patients. “Many who have taken our ‘vegan challenge’ and focused on a mostly plant-based diet report feeling better, more sustained energy levels,” she says.

**FOOD CAN IMPROVE MEMORY AND THINKING SKILLS.** A recent large-scale study of 28,000 people in 40 different countries found that people who ate the healthiest diets were 24 percent less likely to have a decline in their thinking skills, compared with people who ate the least healthy diets.

**FOOD CAN EASE ANXIETY.** Certain foods spur the release of the feel-good brain chemicals dopamine and serotonin. This category includes foods rich in the nutrient magnesium, such as leafy greens like spinach and Swiss chard, as well as nuts, seeds and whole grains. The same is true for foods rich in B vitamins, such as avocado and almonds, and foods that contain zinc, such as oysters, cashews, liver and egg yolks.

These emotional benefits, of course, come on top of the physical benefits of a healthy diet—joints that don’t ache, fewer colds, better bowel function, lower cholesterol, reduced risk of heart and kidney disease, and much more.

To learn about free healthy living and healthy eating classes at Newark Beth Israel Medical Center’s Reverend Dr. Ronald B. Christian Community Health and Wellness Center, call **973.926.7371**.

## YOUR PLATE, YOUR WAY

Good-mood meals can be created using your favorite ingredients—no matter what cuisine you like.

The eating plan most often linked to positive moods is called the Mediterranean diet, because it’s based on the traditional diet of people in areas bordering the Mediterranean Sea. But in reality, this way of eating has no geographic boundaries. “Fruits, vegetables and fish differ from country to country, but they are just as nutritious and good for you,” says Karen Basedow, MS, RD, CDE.

The Mediterranean diet includes:

- Daily consumption of seasonal vegetables and fruits, whole grains and healthy fats (such as those found in nuts and olive oil)
- Weekly eating of fish, poultry, beans and eggs
- Moderate portions of dairy products
- Limited intake of red meat.

The plan is easy to adapt. For example, many people of West African heritage use a lot of vegetables in favorite dishes, such as fufu, a recipe that begins with pounded yams or plantains. Beans, corn and peppers, all Mediterranean diet staples, are common in many Caribbean and Central American dishes. Black rice, used in many Chinese and Southeast Asian recipes, has the highest level of antioxidants (which protect cells) of all types of rice.

At right, find cultural flavors and whole-food ingredients in recipes from the Reverend Dr. Ronald B. Christian Community Health and Wellness Center.

## ETHIOPIAN VEGETABLE STEW



Based on a traditional Ethiopian recipe, this hearty dish is packed with nutrients and flavors commonly used in African dishes, including teff, a whole grain with a mild, nutty taste, that thickens the base of the stew.

### INGREDIENTS:

- 2 tablespoons olive oil
- 2 cups chopped onion
- 4 cloves garlic, minced

- 1 tablespoon berbere spice blend (purchase in an African grocery)
- 4 cups vegetable stock, low-sodium or organic
- 1 cup water
- 1 cup uncooked teff
- 1 ¼ pounds sweet potato, chopped into small cubes
- 4 tomatoes, chopped, or 1 14.5-ounce can no-salt-added tomatoes
- 8 cups collard greens
- ¼ cup natural peanut butter (containing just peanuts and salt, no sugar or added oils)

### DIRECTIONS:

- Place olive oil in a large stew pot. Add onion and garlic; cook until translucent.
- Add berbere spice and cook 30 seconds, stirring until combined.
- Add stock, water, teff, sweet potatoes and tomatoes. Bring to boil, stirring occasionally.
- Cover and cook 20 minutes, adding a little water if stew is too thick.
- Add collard greens and simmer until wilted.
- Add peanut butter. Mix well and serve.



## FISH TACOS WITH TILAPIA, PEPPERS AND ONIONS

This recipe uses ingredients commonly available in the Caribbean diet—lots of fresh peppers, onions, lime and fish combined with corn or rice and seasonings that provide a little heat, such as the jalapeño used here.

### INGREDIENTS:

- 1 white onion, sliced
- 1 red pepper, seeded and sliced
- 1 yellow pepper, seeded and sliced
- 1 orange pepper, seeded and sliced
- 1 teaspoon olive oil
- 1 tablespoon fresh chopped cilantro
- 4 tilapia fillets, 5 ounces each
- Cooking spray
- 8 6-inch corn tortillas
- 1 small jalapeño
- 1 lime, cut in 8 wedges

### DIRECTIONS:

- Preheat skillet on high heat with olive oil.
- Add onions and peppers and sauté on high heat until edges of vegetables begin to brown. Set aside in mixing bowl.
- Spray grill pan with cooking spray and cook fish fillets until translucent, about 3 minutes each side or until fish flakes easily when tested with a fork.
- Add fish to vegetables and toss lightly.
- Warm tortillas according to package directions.
- Divide taco mixture among tortillas and garnish each tortilla with cilantro and wedge of lime.



## COCONUT PUMPKIN SOUP

Pumpkin is used in African and some Asian cultures. In tropical locales such as Thailand or the Caribbean, coconut milk is used frequently in beverages or sauces. A number of cultures combine pumpkin and coconut in stews, rice dishes and soups.

### INGREDIENTS:

- 1 medium orange sweet pepper, seeded and chopped
- 2 medium carrots, chopped
- 1 medium onion, chopped
- 1 tablespoon vegetable oil
- 1 14-ounce can reduced-sodium chicken broth
- 1 15-ounce can pumpkin
- 1 14-ounce can light coconut milk
- ½ teaspoon ginger or pumpkin pie seasoning
- 1 medium fresh jalapeño, seeded and finely chopped
- 2 tablespoons snipped fresh cilantro (or another seasonal fresh herb, such as sage)

### DIRECTIONS:

- In a large saucepan, cook sweet pepper, carrots and onion in hot oil over medium heat about 5 minutes, or until tender.
- In a large bowl, combine broth, canned pumpkin and coconut milk. Stir in ginger and jalapeño.
- Add liquid ingredients to saucepan of vegetables.
- Bring to a boil, reduce heat. Simmer, uncovered, 10 minutes or until heated through, stirring frequently.
- If you like a thicker soup, simmer longer to desired thickness. Be careful to cook on low heat, checking frequently.
- Add cilantro or other garnishes to taste.

201 Lyons Ave., Newark, NJ 07112

# Getting Healthy Together!

When in-person meetings can't happen, we can still help. Newark Beth Israel Medical Center is ready to meet you virtually. Below are some of our virtual support groups and educational programs. New programs are frequently added. To learn about more of our programs, visit [www.rwjbh.org/events](http://www.rwjbh.org/events).

## Senior Wellness Connect (Virtual)

**Mondays, 10 to 11 a.m.**

How to stay strong and healthy through the years, offered by the Wellness Team at Newark Beth Israel Medical Center. Focused on health and longevity for adults 55 and over. To register and receive call-in information, call 973.926.3312.

## Healthy Kids in Hannah's Kitchen (Virtual)

**Tuesdays, 4:30 to 5:30 p.m.**

Healthy virtual cooking class for ages 8–12 (adult supervision required), offered by the Wellness Team at Newark Beth Israel Medical Center. To register and receive call-in information, call 973.726.7371.

## Taste Testers in Hannah's Kitchen (Virtual)

**Wednesdays, 10 to 11 a.m.**

This interactive cooking class uses simple recipes to encourage toddlers, ages 2–4, to try new foods through texture and flavor. Offered by the Wellness Team at Newark Beth Israel Medical Center. Adult supervision required. To register and receive call-in information, call 973.726.7371.

## Prenatal Yoga with Ignite One (Virtual)

**Wednesdays, 11:30 a.m. to 12:30 p.m.**

Gentle yoga for expecting moms, offered by the Wellness Team at Newark Beth Israel Medical Center. To register and receive call-in information, call 973.726.7371.

## Breast Cancer Support Group (Virtual)

**Third Wednesday of the month, 10 to 11 a.m.**

Offered by the Frederick B. Cohen, MD, Cancer Center. To register and receive call-in information, call 973.926.7976.

## Learning to Live with Cancer (Virtual)

**Third Thursday of the month, 1:30 to 2:30 p.m.**

A general cancer support group, offered by the Frederick B. Cohen, MD, Cancer Center. To register and receive call-in information, call 973.926.7565.

## Breast Screening Program

**Fridays, October 2, 9 and 16**

Registration required to provide social distancing. Free services will be provided to those who meet financial eligibility criteria. Call 973.926.2673 for more information.

## ONLINE SUPPORT FOR NEW AND EXPECTING MOTHERS

### Breastfeeding Support

**Every Monday from 12 to 1 p.m.**

International Board-Certified Lactation Consultants will provide guidance and answer questions about latch issues, breast/nipple pain, milk supply concerns, pumping, supplementation, returning to work and weaning. Register at [www.rwjbh.org/breastfeedingsupport](http://www.rwjbh.org/breastfeedingsupport).

### Perinatal Mood and Anxiety Disorders

**Every Wednesday from 11 a.m. to 12 p.m.**

One of the most common complications of childbirth is anxiety or feelings of anger or sadness. You are not alone. Join our judgment-free and supportive virtual community, led by a Perinatal Mood Disorder certified specialist. Register at [www.rwjbh.org/PMADsupport](http://www.rwjbh.org/PMADsupport).



## FARMERS MARKET

**Thursdays, 11 a.m. to 4 p.m.**

The Beth Greenhouse Corner of Osborne Terrace and Lehigh Avenue, Newark

New this year: Now accepting SNAP, WIC and Senior Farmers Market Vouchers.

Social distancing practiced, masks recommended.

For more information or for online ordering: Kerri Likakis, MS, RDN, 973.926.7371 or [kerri.likakis@rwjbh.org](mailto:kerri.likakis@rwjbh.org)