

A Publication of
SAINT BARNABAS MEDICAL CENTER

SPRING 2019
SUMMER 2019

healthy *together*



**SIMPLE EXERCISES
FOR BACK PAIN**

**BUILD A BETTER
SCHOOL LUNCH**

**BREAST
CANCER
FACE IT WITH
A TOP TEAM**

**FITNESS TIPS
FROM BASEBALL PROS**

Celebrating a Good Year

Time really does fly. Already, a year has passed since we first announced our partnership with Rutgers University, one of the nation's leading public educators, to create a new state of health in New Jersey. We're thrilled by how much already has been accomplished and how our partnership is benefiting patients and communities across the state. And we're energized by our plans for the future.

Our medical group includes hundreds of primary care and specialty physicians with over 200 locations across the state. Our partnership with Rutgers gives each of these physicians seamless access to the strength of our combined, state-of-the-science medical expertise, services and treatments.

One of the most exciting things to come out of our partnership with Rutgers so far is the recently announced creation of a dedicated cancer hospital, to be built in New Brunswick on the Robert Wood Johnson University Hospital campus. This new cancer center of excellence will take on the most complex cases, enabling more cancer patients to stay in New Jersey close to family and friends for treatment.

At Saint Barnabas Medical Center, top-tier cancer care is characterized by patient-centric, multidisciplinary, specialized care, delivered in a compassionate manner. We harness the powers of novel cancer therapies coupled with dedicated physicians who specialize in specific types of cancer. With advances in understanding the genetic makeup of cancer, we are able to offer patients personalized treatment plans. We currently have 13 disease site-specific tumor boards where new and complex cases are presented to teams of specialists including medical oncologists, surgical oncologists, radiation oncologists, gastroenterologists, interventional radiologists, pathologists, nurses, genetic counselors, nutritionists and social workers. Following a thorough review of each patient's case, individualized cancer treatment plans are created to ensure our patients are receiving the most advanced and effective care.

We look forward to bringing you many more benefits as we continue to hardwire Rutgers across the RWJBarnabas Health system.

Yours in good health,

BARRY H. OSTROWSKY
PRESIDENT AND CHIEF EXECUTIVE OFFICER
RWJBARNABAS HEALTH



STEPHEN P. ZIENIEWICZ, FACHE
PRESIDENT AND CHIEF EXECUTIVE OFFICER
SAINT BARNABAS MEDICAL CENTER



HEALTH NEWS

SAINT BARNABAS MEDICAL CENTER EARNS ACCOLADES

Saint Barnabas Medical Center's steadfast commitment to improving the health and well-being of the community it serves is exemplified by the awards and recognition we have received. Here are some recent examples:

• **NURSING EXCELLENCE**

SBMC has achieved Magnet recognition from the American Nurses Credentialing Center's Magnet Recognition Program, which distinguishes organizations that meet rigorous standards for nursing excellence. Just 492 U.S. healthcare organizations out of over 6,200 U.S. hospitals have achieved Magnet recognition.



• **GRADE A FOR SAFETY**

SBMC recently earned its 15th straight A in The Leapfrog Group's Hospital Safety Grade ranking, one of only 41 hospitals in the nation to earn an A every year since the program's inception in 2012.



• **INCLUSIVENESS AND EQUALITY**

SBMC was once again named a leader in LGBTQ Healthcare Equality by the Human Rights Campaign Foundation. SBMC earned top marks in meeting non-discrimination and training criteria that demonstrate a commitment to equitable, inclusive and compassionate care for LGBTQ patients and their families, who often face significant challenges in securing the healthcare they need and deserve.

Saint Barnabas Medical Center | **RWJBarnabas HEALTH**

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BIGGER, BETTER, BRIGHTER

WHAT'S NEW AT SAINT BARNABAS MEDICAL CENTER



NEW ADVANCED TECHNOLOGY AT THE CANCER CENTER OFFERS FASTER TREATMENT

The TrueBeam system is fully integrated to perform radiotherapy and radiosurgery. This advanced system synchronizes imaging, patient positioning, motion management and treatment delivery. TrueBeam offers personalized treatment for some of the most complex cases including brain, lung, liver, pancreas and prostate cancer. Additionally, treatments that once took 10 to 30 minutes can now be completed in less than two minutes. With faster treatment, there is less chance of tumor and patient movement, making the treatment process more precise, comfortable and convenient for patients.



AMONG THE BEST IN THE U.S.

For the 15th consecutive time, Saint Barnabas Medical Center was awarded straight A grades from The Leapfrog Group's Hospital Safety Grade,

one of only 41 hospitals in the country—and the only hospital in a seven-state area, including New York, New Jersey, Connecticut, Pennsylvania, Delaware, Rhode Island and Maryland—to have achieved straight As since the survey began in 2012.

"Patient safety is a core value and our number one priority at Saint Barnabas Medical Center. We are proud to be among the elite group of 41 hospitals nationally recognized for our intentional focus on patient safety and high-quality healthcare for our patients and their families," says Stephen P. Zieniewicz, FACHE, President and CEO, Saint Barnabas Medical Center.

To find a Saint Barnabas Medical Center physician skilled in the use of state-of-the-art, minimally invasive technology, call **888.724.7123**.



NEW SBMC MEDICAL STAFF INDUCTED

Congratulations to our new Medical Staff Leadership, who were inducted at the most recent Quarterly Medical Staff Meeting. Pictured, from left, are Treasurer Alison Grann, MD; 2nd Vice President Michael

Addis, MD; Secretary John Shumko, MD; Immediate Past President Stephen Crane, MD; 1st Vice President Alan Garten, MD; and President John Russo, MD.



NEXT-GENERATION ROBOTIC SURGERY

Physicians and staff from the Operating Room at Saint Barnabas Medical Center celebrated the addition and upgrade of the daVinci Robotic Surgical Systems. The hospital welcomed the newest generation of

this technology, which can be used for advanced, minimally invasive surgery including gastrointestinal, thoracic, gynecologic and urologic surgery.



BUILD A BETTER SCHOOL LUNCH

HOW TO PUT NON-BORING LUNCHES ON THE TABLE, WITH EASE.

When it comes to making lunch for school or camp, parents want options that are nutritious, that their kids will eat—and that are simple to prepare.

“I tell parents to stock up with foods that are easy to grab and go,” says Lindsay Yoakam, registered dietitian at Saint Barnabas Medical Center. “Try to include all the food groups—protein, carbohydrates and fresh fruits and veggies. Items like string cheese, hard-boiled eggs, nuts, fresh fruits and carrot sticks with dip are easy and nutritious.” Bento boxes, which have different compartments for a main dish and sides, are increasingly popular and help make assembling lunch easier.

Don’t overlook leftover dinner entrees for the next day’s lunch, Yoakam says. Chili and soups can be sent in a Thermos. “A cold pasta salad with extra veggies added in, tossed with Italian dressing for flavor, works well,” she says. Take a page from the current “bowl food” trend, in which ingredients are combined in a bowl, often with the addition of sauce. “You could put in brown rice, beans, cheese, maybe some chicken from the night before and some salsa,” Yoakam suggests.

Sandwiches are a straightforward lunch item, but you might try to mix them up a little—perhaps with a whole-wheat wrap of banana slices and Nutella. (Nut-free commercial spread alternatives include SunButter, made from sunflower seeds, and WowButter, made from roasted soy.) Or pack ingredients for a mini “pizza”—a whole-wheat pita your child can top with red sauce from a little container and shredded cheese, veggies and mushrooms.

Processed, packaged foods aren’t recommended because of their high levels of preservatives, sodium and/or sugar, Yoakam says. A small bag of popped rice chips is okay, as is packaged trail mix or energy bars that don’t contain added sugars and high levels of saturated fats.

HEALTHY BASICS TO MIX AND MATCH

For a balanced meal, include at least one protein and one carbohydrate in the lunch box, adding fresh, dip-pable vegetables such as broccoli or sugar snap peas. Fruits are best if fresh, but can also have nutritional value if defrosted from frozen. Canned fruits tend to have a lot of added sugar, as do fruit leathers and dried fruits, but dehydrated fruit crisps are a good choice.

PROTEINS	CARBOHYDRATES
Hard-boiled eggs	Whole-wheat pasta
Beans	Whole-wheat pita
Tofu	Quinoa
Tuna/chicken/egg salad	Buckwheat
Yogurt/yogurt drinks	Whole-grain crackers
Cheese	Whole-grain mini-bagels
Hummus or bean dip	Whole-wheat wrap
Peanut butter or nut-free spread from seeds or soy	Whole-wheat bread

As for sweet desserts, Yoakam’s recommendation is to limit them to once a day—so if your child is going to have cookies after dinner, don’t send them in for lunch.

“Work with your child to plan lunches he or she will like, with nutrition as a priority,” Yoakam says. “Keep in mind the core food rules for food in the family: Parents buy and serve it, and kids decide how much or whether they’ll eat it.”

To find a pediatrician at Saint Barnabas Medical Center, call **888.724.7123** or visit www.rwjbh.org/doctors.

FACING BREAST CANCER TOGETHER

A TEAM OF SPECIALISTS SURROUNDS AND SUPPORTS BREAST CANCER PATIENTS.

When someone gets a diagnosis of breast cancer, the future appears uncertain. Questions abound: What's my first step? Who will provide my care? Will I be OK?

Breast cancer specialists at The Cancer Center at Saint Barnabas Medical Center (SBMC) and the Barnabas Health Ambulatory Care Center (ACC) are dedicated to making sure no one faces those questions alone. The extensive group of experts works as one unit to provide innovative and individualized care at diagnosis, during treatment and afterward.

"Newly diagnosed patients are often frightened and don't know where to turn," says Michele Blackwood, MD, Medical Director and Northern Regional Director

of Breast Services for RWJBarnabas Health, Chief, Section of Breast Surgery at Rutgers Cancer Institute of New Jersey and a member of Barnabas Health Medical Group. "Once we've assembled their team and a plan of action is in place, everyone calms down. Families feel optimistic knowing their loved one is in good hands."

A PERSONALIZED APPROACH

As soon as a patient is diagnosed at The Breast Center at the ACC, physicians proactively reach out to experts at The Cancer Center. A multidisciplinary lineup of specialists (see chart, opposite page), is then assembled.

"Not all breast cancer is the same," explains Anya Litvak, MD, a breast medical oncologist with The Cancer Center. "It's a complex disease that requires a large group of specialized doctors throughout the process—from abnormal mammography to diagnosis to treatment, whether that means surgery, chemotherapy, endocrine therapy, radiation therapy or a clinical trial."

Each week, physicians gather at meetings to discuss patients. "We talk about upcoming operations and difficult diagnoses," says Dr. Blackwood. "All of these wonderful doctors focus their intellect toward one patient. We put our heads together and come up with the best treatment plan."

Every aspect of that plan is customized. "We individualize each patient's treatment," says Alison Grann, MD, Chair of the Department of Radiation Oncology. "For a patient facing breast cancer, we have a variety of options for radiation



RWJBarnabas Health and The Cancer Center at Saint Barnabas 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. Call 844.CANCERNJ. To schedule a mammogram, visit www.rwjbh.org/mammo.



MICHELE BLACKWOOD, MD



ANYA LITVAK, MD



ALISON GRANN, MD



MICHAEL SCOPPETUOLO, JR., MD

treatment, depending on his or her needs.”

At every step of the journey, patient navigators guide and support patients, coordinating appointments and making sure patients know where to go and in what order they should see various specialists. Appointments are scheduled promptly, with multiple visits arranged for the same day. “We do our best to make patient care seamless and hassle-free,” says Dr. Blackwood.

As soon as patients and families arrive for appointments at the ACC, they’re welcomed by extended team members. Valets offer complimentary parking and a concierge helps them navigate the building. Experienced staff and administrators get to know the patients over time as treatment progresses.

ADVANCES IN TREATMENT

The Cancer Center’s comprehensive array of cancer-fighting tools includes the newest technologies and treatments.

Surgery patients benefit from recent advances in surgical and reconstructive procedures, with new approaches including:

- Mastopexy breast lift during lumpectomy
- Nipple-sparing mastectomy
- DIEP flap reconstruction surgery, in which a new breast is formed from transplanted abdominal tissue
- Pre-pectoral reconstruction, in which implants are placed directly over the muscle, resulting in less post-mastectomy pain and a more natural appearance

At The Infusion Center at SBMC, the latest FDA-approved chemotherapy protocols are administered. In addition, Dr. Litvak says, medical oncologists screen patients to see if a clinical trial (an FDA-approved research study in which patients are given cutting-edge treatments) might be an appropriate option for them.

“Our very strong multidisciplinary team, along with our partnership with Rutgers Cancer Institute of New Jersey, means we have the clinical expertise, technology, access to clinical trials and breadth of experience to deliver world-class care for breast cancer and other cancers,” says Michael Scoppetuolo, Jr., MD, Medical Director of The Cancer Center. “With very specialized, targeted therapies, we can meet all patient treatment needs, and do it close to where they live.”

IT TAKES A TEAM

You’re not alone in your fight against breast cancer. Specialists on your team at Saint Barnabas Medical Center may include:



MEDICAL ONCOLOGIST: manages overall care and treats cancer using chemotherapy, targeted therapy or immunotherapy



PATHOLOGIST: examines cells under a microscope to identify breast cancer



INTERVENTIONAL RADIOLOGIST: reads and interprets imaging tests and performs biopsy procedures



BREAST SURGEON: removes cancer using surgical techniques such as lumpectomy and mastectomy



PLASTIC SURGEON: specializes in state-of-the-art breast reconstruction techniques



RADIATION ONCOLOGIST: uses radiation therapy to shrink or eliminate tumors



RADIATION THERAPIST: assists radiation oncologists in administering radiation therapy



GENETIC COUNSELOR: assesses risk of developing breast cancer based on family history



PATIENT NAVIGATOR: coordinates appointments and supports cancer team



ONCOLOGY NURSE: specializes in caring for patients with cancer



SOCIAL WORKER: counsels, supports and advocates for patients and families



PSYCHOLOGIST: provides individual and family counseling



DIETITIAN: helps structure healthful eating during and after treatment



RESEARCH COORDINATOR: specializes in conducting clinical trials under the guidance of a principal investigator



LYMPHEDEMA SPECIALIST: treats swelling of the arm, a possible side effect of cancer treatment

To learn more about cancer care at Saint Barnabas Medical Center, visit www.rwjbh.org/beatcancer.



HOW TO AVOID THE FLU THIS YEAR

DOING THESE TWO THINGS IS YOUR BEST DEFENSE.

Flu season, which lasts from approximately October to May, is coming.

The flu generally peaks during the colder months, when people are more likely to congregate inside and spread germs. “But people should know that the flu virus is here all year, even in the summer, so it’s a good idea to take precautions,” says Christopher Freer, DO, Clinical Chair of Emergency Medicine at Saint Barnabas Medical Center.

TAKE YOUR SHOT

The first and most important step is to get the flu vaccine, ideally early in the fall.

“Don’t wait until January when the flu is spiking and you can’t find the vaccine,” Dr. Freer says. “I would recommend



CHRISTOPHER FREER, DO

getting it in August or September.”

Because there are multiple types of flu viruses and they are constantly evolving, the composition of the flu vaccine—

and often, its effectiveness—varies from year to year.

“Some years they get it right. Some years the flu is a little smarter and your vaccine isn’t as effective,” Dr. Freer says. “But it’s worth getting the shot in any case. What we’re seeing is that patients who are vaccinated might get the flu, but their symptoms are not as severe as those of people who didn’t get the shot.”

Freer says vaccination awareness is increasing because people are seeing more media reports about influenza-related deaths. “You read awful stories about people, including children, dying,” Dr. Freer says. “Many of those patients were not vaccinated.”

Flu shots are recommended for anyone over the age of 6 months, especially people in a high-risk group for flu complications. Those groups include pregnant women, young children, people over age 65 and people with chronic health conditions like asthma, diabetes or heart and lung disease.

EVERYDAY PRECAUTIONS

All it takes to spread the flu is one cough in a crowd, “Then the virus is airborne, and there’s a six-foot radius where there are

5 STEPS TO GERM-FREE HANDS

1 A thorough wetting with clean, running water (warm or cold)



2 Apply soap and lather up to create friction that will lift dirt, grease and microbes from the skin.

3 Scrub hands for at least 20 seconds (the length of time it takes to hum the Happy Birthday song from beginning to end twice).



4 Rinse well under clean, running water to wash away dirt and germs.

5 Dry hands using a clean towel, or air-dry them.



Source: U.S. Centers for Disease Control and Prevention

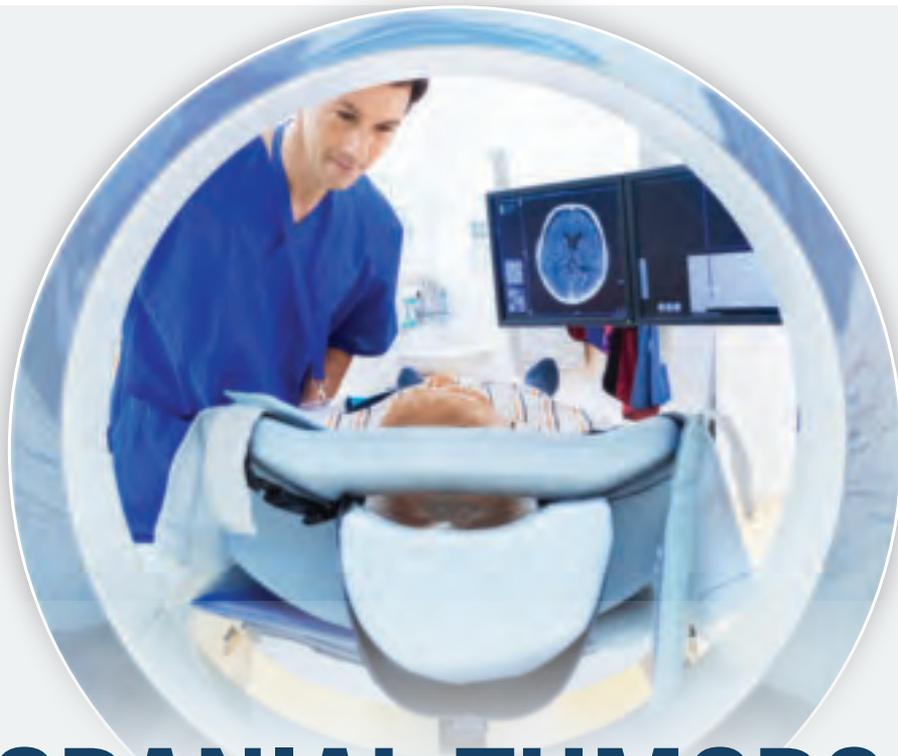
droplets you can inhale and get it,” Dr. Freer says. Germs can also contaminate common spaces such as door handles, faucets and bannisters. It’s possible to get the flu by unknowingly picking up germs and then touching your eyes, nose or mouth.

Dr. Freer’s silver bullet to combat the flu is old-school handwashing, and plenty of it.

“When they teach us as residents about the 10 most common causes of infection, they show you 10 fingers,” he said. “I cannot stress it enough. You really have to be a germaphobe. With all the high-tech stuff now, it still comes down to that.”

Handwashing the right way is different from the quick soap-and-rinse most people do. Research has shown that a full 20-second scrub, including lathering the backs of hands, between the fingers and under the nails, is necessary. If soap and water are not available, an alcohol-based hand scrub is the next best thing.

To find a primary care physician at Saint Barnabas Medical Center, call 888.724.7123 or visit www.rwjbh.org/doctors.



CRANIAL TUMORS: HELP FOR HARD CASES

**HOW TOP NEUROSURGEONS AT RWJBARNABAS HEALTH
TACKLE THE TOUGHEST TUMORS.**

Cranial tumors are never easy to treat, but some are especially challenging. Those cases are often sent to Anil Nanda, MD, MPH, and the team of expert neurosurgeons affiliated with RWJBarnabas Health (RWJBH).

Recently, for example, there were the cases of an 8-year-old girl with an arteriovenous malformation, a bird's nest-like tangle of blood vessels at the top of her spine that paralyzed her, and a 21-year-old woman with a hemorrhaged brain stem cavernoma. Both patients were referred to Dr. Nanda and the enhanced neurosurgical program he is creating with colleagues

throughout RWJBH. The lesions were successfully removed.

“People should know that we can take care of very complicated neurosurgical issues with good

outcomes right here in New Jersey,” says Dr. Nanda, who has been recognized as a global leader in neurosurgery.

But Dr. Nanda is not just building a practice that specializes in cranial tumors in his roles as Senior Vice President of Neurosurgical Services for RWJBH and Professor and Joint Chair of the Department of Neurosurgery at both Rutgers Robert Wood Johnson Medical School and Rutgers New Jersey Medical School. Dr. Nanda is creating a world-class center of neurosurgery at RWJBH. In addition to providing state-of-the-art training for medical residents, the effort is attracting top talent to New Jersey from all over the world.

GRATIFYING RESULTS

Neurosurgery services at RWJBH cover many areas, including spinal disease, stroke, aneurysms, brain trauma and more.

Dr. Nanda's specialty is surgery of the skull base, an area formed by bones at the bottom of the skull that is crisscrossed by nerves and blood vessels carrying messages and oxygen to the brain.

Last fall, an especially challenging patient was referred: a 38-year-old woman whose personality had been slowly deteriorating over the previous five years. She had become hostile to family and friends, and her memory and cognition were impaired.

Finally, an MRI of the woman's brain found the cause of her problems: a 9-centimeter (approximately 3.5-inch) meningioma, a benign, slow-growing tumor that forms on membranes covering the brain.

“The tumor's pressure on her frontal lobe—which handles cognitive functions such as planning, memory and emotional expression—was so great that it had been compacted and barely showed on the MRI,” says Dr. Nanda.

During surgery, Dr. Nanda first stopped the tumor's blood supply, then began the removal process. “After a difficult operation, the growth was entirely removed, and with the pressure gone, the frontal lobe expanded to its normal size,” he says.

Three days later, the woman was sitting up and talking and her former upbeat personality had begun to return.

“It was really gratifying for our team to be able to effect such a dramatic change,” says Dr. Nanda.

“Symptoms like this woman's are often chalked up to depression or schizophrenia or, in the case of an older person, dementia,” he explains. “In such cases, it's important to investigate possible causes in detail, sooner rather than later.”

For residents of New Jersey and the region, the good news is that excellent care for such conditions is available close to home. Says Dr. Nanda, “RWJBarnabas Health is building a team of top neurosurgeons and other experts in neuroscience that is among the best in the world.”



ANIL NANDA, MD

To learn more about New Jersey's most comprehensive neurosurgery program, call **833.656.3876** or visit www.rwjbh.org/neurosurgery.



PEAK PERFORMANCE:

SECRETS OF BASEBALL PROS

A HEALTHY LIFESTYLE IS NO MINOR MATTER FOR THESE OUTSTANDING LOCAL PLAYERS.

When they unleash a blazing pitch or knock one out of the park, star baseball players can seem like superheroes. Granted, they *are* gifted. But to perform at that level, standouts from minor league baseball teams abide by healthy principles that weekend warriors and young athletes can share.

RWJBarnabas Health (RWJBH) partners with four top minor league baseball teams in the state: The Lakewood BlueClaws, New Jersey Jackals, Somerset Patriots and Trenton Thunder. What RWJBH and the

To learn more about RWJBarnabas Health corporate partnerships, visit www.rwjbh.org/corporatepartners.

A PARTNERSHIP WITH IMPACT: At left, RWJBarnabas Health and the Lakewood BlueClaws teamed up to deliver much-needed baseball gear to the children of Puerto Rico after Hurricane Maria. RWJBH also delivered medical supplies to the island as part of its social impact and global health initiatives.

HEALTHY FAMILY FUN: Below, the Somerset Patriots play at the 6,100-seat TD Bank Ballpark in Bridgewater.



ALFREDO RODRIGUEZ

INFIELDER | SOMERSET PATRIOTS
HEIGHT: 6'0" | WEIGHT: 175

STRETCH FOR SUCCESS: "Warm-ups used to be static, but now we have dynamic warm-ups, which do a better job of getting your body ready for whatever you want it to do. That means moving while stretching, like walking or pulling a knee to the chest."



JACK PERKINS

PITCHER | LAKEWOOD BLUECLAWS
HEIGHT: 6'4" | WEIGHT: 200

GET A LEG UP: "If you're a pitcher for your school or local team, the best thing to do is get your legs as strong as possible with squats, running and sprints. Legs are the strong foundation that's going to take you deep into games and give you more velocity."



MICHAEL DILL PHOTOGRAPHY

GARRETT WHITLOCK

PITCHER | TRENTON THUNDER
HEIGHT: 6'5" | WEIGHT: 190

CORE PRINCIPLES: "A good strong core is important for anybody to keep a healthy balance. I do planks and also 'dead bugs'—exercises where you lie pressed flat on the floor and extend your arms and legs."



CONRAD GREGOR

INFIELDer/OUTFIELD | NEW JERSEY JACKALS
HEIGHT: 6'3" | WEIGHT: 220

CONSISTENCY IS KEY: "If you don't have time to get to a gym, do body-weight exercises that don't require equipment—pushups, squats, squat thrusts and similar exercises. That's what I do in my hotel room when we're on the road."

ball teams have in common is their community- and health-oriented focus. "Minor league baseball has a strong grassroots spirit that you don't necessarily see in professional sports," says Michael Knecht, Senior Vice President, Strategic Marketing and Communications for RWJBH. "These are organizations that are embedded in the communities we serve, and that have similar missions and values." Any given season might feature a celebration of patients, social outreach or healthy lifestyle education for fans.

In that spirit, top players, at right, reveal their fitness tips for peak performance.

NEW CANCER TREATMENT, NEW HOPE

HOW CAR T-CELL THERAPY HELPED A PATIENT WHEN CHEMOTHERAPY COULD NOT.

Dave Rodney, 62, didn't have time to be sick. A professional concert and travel promoter, and an avid musician and cook, he had too much living to do.

But in August 2017, while working out, Dave felt a slight discomfort in his lower abdomen. He assumed he'd pulled a muscle. However, at a routine physical shortly afterward, his doctor advised him to go to the Emergency Department at Saint Barnabas Medical Center (SBMC) in Livingston.

There, a scan revealed an abdominal mass. Dave was admitted for further tests. The eventual diagnosis: diffuse large B-cell lymphoma (DLBCL). This aggressive blood cancer, a form of non-Hodgkin lymphoma, usually starts as a fast-growing mass in a lymph node.

From September 2017 through January 2018, Dave was treated with chemotherapy under the care of Andrew Brown, MD, a medical oncologist with The Cancer Center at SBMC. Unfortunately, a first round was unsuccessful, as was a second round with a different medication.

The next step would typically be to assess whether a stem cell transplant might work. But now, there is also a new treatment called CAR T-cell therapy. "It was very important that I get him to a specialty center that handles complex cases," says Dr. Brown. "Because of our health system's partnership, I sent him down to Rutgers Cancer Institute of New Jersey and Robert Wood Johnson University Hospital in New Brunswick."

NEW POSSIBILITIES

In the fall of 2017, the Food and Drug Administration made a big announcement: It had approved CAR T-cell therapy for adults with DLBCL and for children and young adults with acute lymphoblastic leukemia.

In this therapy, T cells (a type of immune system cell) are taken from a patient's blood. In a laboratory, a chimeric antigen receptor (CAR), which binds to a certain protein on the patient's cancer cells, is added to each cell. These CAR T cells are then added back to the patient's blood to attack cancer cells.

The treatment is given only to patients whose cancer has proven resistant to chemotherapy and who may not be good candidates for stem cell transplants. Further, it can be offered only at centers that have clinicians, nurses and other healthcare

professionals who are FACT (Foundation for the Accreditation of Cellular Therapy)-certified.

The teams at Robert Wood Johnson University Hospital (RWJUH) and Rutgers Cancer Institute fit the bill. Dave Rodney would be their first patient for CAR T-cell therapy.

"This is a transformative therapy," says Dennis Cooper, MD, Chief, Blood and Marrow Transplantation at Rutgers Cancer Institute. "In the past, if a patient with this type of lymphoma wasn't responsive to chemotherapy, apart from experimental treatments we were essentially out of luck. Now we have a new option that's potentially curative."

MOVING AHEAD

Dave met with Dr. Cooper in March of 2018. At that and subsequent visits, he learned more about the procedure and its potential benefits and risks.

"They were very honest and open," Dave says. "Yes, I'd be the first. But on the plus side, many eyes and ears would be watching me to make sure everything went well. What they said made perfect sense, so I was sold."

"I can't think of a time in my career where the staff spent so much time, collectively, preparing to treat a patient," says Dr. Cooper. "There are strict criteria for care when a patient is getting CAR T cells, encompassing everything from the electronic record to drugs that can cause a reaction, and more."

"Everyone in the hospital was very committed. The people who work in the blood and marrow transplant unit, the ICU nurses, the nurse practitioners, the rapid response teams, the neurology attendings and literally every medical resident went through training before we treated our first CAR T-cell patient."

After thorough preparations, Dave's T cells were collected and sent to a laboratory



ANDREW BROWN, MD



DENNIS COOPER, MD



Dave Rodney, the first CAR T-cell therapy patient at Rutgers Cancer Institute of New Jersey and Robert Wood Johnson University Hospital, is back to doing the things he loves.

PHOTO CREDIT: JOHN O'BOYLE.



RWJBarnabas Health and The Cancer Center at Saint Barnabas 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, including clinical trials. Visit www.rwjbh.org/beatcancer.

in California to be re-engineered, a process that takes several weeks.

In November, Dave received a mild pre-treatment chemotherapy to clear his blood of lymphocytes that could compete with CAR T cells. Then he was admitted to RWJUH to receive brand-new CAR T cells via infusion. He stayed in the hospital for two weeks as his body adjusted.

"It's impossible to describe the high level of care I had—the professionalism, expertise, warmth and caring," Dave says. "These are the best people on the planet!"

AN EXCITING FUTURE

CAR T-cell therapy is currently under consideration to treat some forms of myeloma, a cancer of plasma cells. "CAR T cells are also being modified in the hope they can work on solid tumors—brain tumors, abdominal tumors," says Dr. Cooper. "People are realizing that you can redirect CAR T cells to almost any target you want, as long as it's on a tumor cell and not a normal cell."

Unlike in chemotherapy, which kills both healthy and cancer cells, the CAR T cells remain in the patient's body for months and continue fighting the cancer. "There's a lot of work happening on ways to make CAR T cells stay in action even longer," says Dr. Cooper.

Dave continues to return for scans to check on his progress. Meanwhile, his return to normal activity is encouraging.

"I'm as busy as ever," Dave says, "feeling better and doing all the things I love doing."

A version of this article first appeared in the Rutgers Cancer Institute of New Jersey publication Cancer Connection.

To learn more about CAR T-cell therapy at Rutgers Cancer Institute of New Jersey, visit www.cinj.org/car-tcelltherapy or call **844.CANCERNJ**.



From left, Gail Knight, MD, Senior Vice President and Chief Medical Officer, Rady Children's Hospital; Michael Dribbon, PhD, Vice President of Business Development and Chief Innovation and Research Officer, CSH; Patrick Frias, MD, President and CEO at Rady Children's Hospital; Warren E. Moore, FACHE, President and CEO of CSH; and Katherine Bentley, MD, Director of the Chronic Pain Management Program at CSH.

PARTNERING TO FIGHT PAIN

ONE BOY'S ORDEAL LED TO HELP FOR OTHER SOUTHERN CALIFORNIA CHILDREN WHO SUFFER FROM CHRONIC PAIN.



Children's Specialized Hospital®
An RWJBarnabas Health facility

at
Rady Children's Hospital

A simple heel fracture from running on a California beach led to excruciating pain for 14-year-old Jasper Neale. The fracture took a long time to heal. Worse, the pain grew and radiated throughout his body. "I wasn't able to wear clothes. I couldn't shower. I couldn't walk. If a wind blew on me, I would be screaming," he says.

Eventually, Jasper was diagnosed with Complex Regional Pain Syndrome (CRPS)—a chronic condition that is believed to be caused by damage to the nervous system—at Rady Children's Hospital in San Diego. And although he underwent weeks of outpatient therapy, the pain only got worse.

Jasper's physical therapist showed him and his parents an online video she'd found. It told the story of a girl who had suffered

similar symptoms, but managed to get them under control through an intensive course of therapy at another children's hospital. "My husband and I decided we must find a program like this for Jasper," says his mother, Lori Neale. After some research, they selected the inpatient Chronic Pain Management Program at Children's Specialized Hospital (CSH) in New Brunswick.

Less than three weeks later, Jasper and his father were on a flight to New Jersey and CSH. That decision would change his life—and, ultimately, make life better for other San Diego, Southern California and southwestern U.S. children living in pain.

MASTERING THE PAIN

At CSH, the innovative Chronic Pain Management Program treats children with this condition through intensive physical, occupational and psychological therapy. Patients learn coping techniques to desensitize themselves to pain and mitigate it—without the use of opioids or other medications.

"One of the goals of the program is to improve the pain, but the main goal is to improve function and get our patients back to their lives," explains Katherine Bentley, MD, Director of the Chronic Pain Management Program.

After seven weeks, Jasper graduated from the program and was able to return to his California home, and to his life as a teenager.

But Jasper's recovery was not the only positive outcome of his experience. Aware of the need for a multidisciplinary approach to pain management for area patients, Rady Children's Hospital and CSH created a partnership. In April, the all-new Children's Specialized Hospital Chronic Pain Management Program at Rady Children's Hospital-San Diego opened for business.

"This joint endeavor provides us the great opportunity to treat the needs of patients and families in the Southern California region," says Warren E. Moore, FACHE, President and CEO at CSH, "and for that I could not be more grateful."

Jasper would agree. "Now," he says, "I can do anything I want to do."

For more information about Children's Specialized Hospital, call **888.244.5373** or visit **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.



HEART HEALTH: KNOW YOUR NUMBERS

KEEP ON TOP OF THESE SIMPLE TESTS TO STAY HEALTHY.

When it comes to protection against heart disease, the evidence is simple and clear: Preventive strategies work.

“People can have a significant effect on their heart health through the lifestyle choices they make,” says Sergio Waxman, MD, MBA, an interventional cardiologist and Chief of the Division of Cardiology at Newark Beth Israel Medical Center, an RWJBarnabas Health facility. “There are not many diseases where that is so clearly documented.”

A key part of self-care is understanding the following about your heart health. Your primary care provider can check these numbers at your yearly physical, and you can track some of them between visits.



SERGIO WAXMAN, MD



BLOOD PRESSURE: The force of blood rushing through your vessels. High blood pressure, which can damage or weaken blood vessels, is defined as a reading of 130/80. “A lot of patients get nervous in a doctor’s office, which may elevate their blood pressure, so it’s important to check it outside the office as well,” says Dr. Waxman. You can buy a manual or digital blood pressure monitor at the drugstore, or use a public device available at some pharmacies.

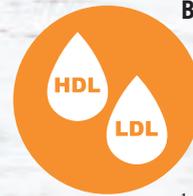


HEART RATE (PULSE): The number of times your heart beats per minute. “This is helpful if you’re exercising and want to see if your training is significantly affecting your heart rate,” says Dr. Waxman. The American Heart Association recommends at least 150 minutes of moderate-intensity exercise per week. The more fit you are, the

sooner your heart rate returns to normal after exercise.



BLOOD SUGAR: High glucose (blood sugar) levels are strongly correlated with cardiovascular disease because over time they damage blood vessels and nerves. “An annual blood test after overnight fasting is all that’s needed, unless your levels are elevated,” says Dr. Waxman. “If they are, the other number you should know is your Hemoglobin A1C, which is a measure of your average glucose levels over the past three months.”



BLOOD CHOLESTEROL: A waxy substance produced by the liver. Cholesterol is transported to and from cells by lipoproteins. Low-density lipoprotein (LDL, known as the “bad” kind) deposits cholesterol on artery walls; high-density lipoprotein (HDL) removes it. Both levels are determined by a simple blood test.

Your doctor also might suggest your blood be tested for C-reactive protein. “Some investigators think this may be as important as the LDL number for assessing cardiac risk,” says Dr. Waxman.



BODY MASS INDEX (BMI): This is a measure of body fat based on height and weight. The higher your BMI, the greater your risk for cardiac and other diseases. You can calculate your BMI with the help of online calculators and charts from the National Institutes of Health or the Centers for Disease Control and Prevention.

While most people know they should take better care of their health, they often feel that work and family demands prevent it, says Dr. Waxman. “Try to give yourself one hour every day to devote to taking care of yourself, whether it’s exercising, preparing healthy meals, checking your blood pressure, taking a nap or a combination of things,” he advises. “It’s like what they say about oxygen on airplanes: Put your mask on first or you won’t be able to help someone else.”

Your heart doesn’t beat just for you. Get it checked. To make an appointment with one of New Jersey’s top cardiac specialists, visit www.rwjbh.org/heart or call **888.724.7123**.



THE KEY TO QUITTING SMOKING OR VAPING

RWJBARNABAS HEALTH OFFERS FREE AND PROVEN SUPPORT FOR PEOPLE WHO STRUGGLE WITH TOBACCO OR NICOTINE DEPENDENCE.

Nicotine addiction is a powerful foe. The drug triggers a brief surge of endorphins—the feel-good hormones—each time it’s inhaled through a cigarette or an electronic nicotine delivery system (ENDS), such as an e-cigarette or vaping device. That pleasure dissipates quickly, leading to the urge for another inhalation.

A pack-a-day smoker, for example, goes through this cycle about 250 times daily, creating an addictive reward system in both brain and body that causes dependence on nicotine. When the person tries to stop, withdrawal



CONNIE GREENE

symptoms—irritability, attention difficulties, sleep disturbances and more—lead him or her to light up again, and the cycle continues.

Most people who are still smoking today have already tried and failed to quit five to seven times, according to Connie Greene, Vice President, RWJBarnabas Health (RWJBH) Institute for Prevention and Recovery.

“They may even feel a lot of shame and guilt because of that,” she says. “But the truth is, if people who are dependent on nicotine could quit on their own, they would have done so already.”

Greene and her colleagues want these people to know that it’s not their fault. “They’re in the grip of a very insidious addiction, which may have a genetic component,” she says. “But there is hope, and there is recovery.”

“The more times you’ve tried and the more you’ve been unsuccessful, the greater chance you have for success with our Nicotine and Tobacco Dependence Treatment Program.”

A NEW APPROACH

“We look at quitting as a process,” says Michael Litterer, Director of Prevention and Recovery at RWJBH. “It’s not as simple as making a decision and going cold turkey. In our program, we develop an individualized plan for each person who comes to us.”

When a smoker contacts the Nicotine and Tobacco Dependence Treatment Program by phone or email, a certified tobacco treatment specialist will be there to help. “You don’t have to quit right away,” Litterer says. Instead, next steps can include:

- Individualized nicotine dependence assessment, focusing on triggers and stressors
- Ongoing support in both individual or group settings
- Access to a medical director on staff to assist with primary care coordination and prescription medications
- Free nicotine replacement therapy (nicotine patches, gum and lozenges)
- Recommendations and navigation for appropriate prescription nicotine dependence medications
- Assistance in understanding the real impact of ENDS devices and cigarettes
- Behavioral modification and assistance in managing or eliminating nicotine withdrawal symptoms

“Most importantly, we will support people through the entire process of ending their nicotine or tobacco addiction. Relapsing and using nicotine during the quit attempt is sometimes part of the journey. We understand this,” Litterer says.

The program, which is funded by the New Jersey Department of Health Office of Tobacco Free, Nutrition and Fitness, does not charge participants.

The most important thing for people to know, Greene says, is that they don’t have to try to quit alone. “Call the QuitCenter number, or send us an email,” she says. “We’ll take it from there.”

To learn more about reaching recovery from nicotine or tobacco dependence, call the QuitCenter line at **732.837.9416**, or email quitcenter@rwjbh.org for a free confidential assessment. For more information, visit www.rwjbh.org/nicotinerecovery.



HAPPENINGS AT THE HOSPITAL

SAINT BARNABAS MEDICAL CENTER CELEBRATES EXCELLENCE IN PATIENT CARE.



COLORECTAL CANCER AWARENESS MONTH RECOGNIZED

Although it is the nation's third-leading cause of cancer-related deaths, colon cancer is one of the few cancers that can be prevented through proper screening. For National Colorectal Cancer Awareness Month, Saint Barnabas Medical Center (SBMC) hosted an event at which more than 600 people strolled through a 20-foot-long inflatable replica of the human colon, learning the value of prevention and early detection in the fight against colon cancer. Throughout the event, Mark E. Gilder, MD, colon and rectal surgeon at SBMC and Barnabas Health Medical Group physician, answered questions about colon health, screenings and treatment, both in person and through questions submitted over SBMC's social media channels. To learn more, visit www.rwjbh.org/sbmcgicancer.

At left, Dr. Gilder is pictured at the event with the Wound and Ostomy nurses from SBMC. From left, Stephanie Anderson, BSN, RN; Elizabeth Vocaturo, MSN, RN, CWON; Catherine Fahey, BSN, RN, CWON; Stacy Krakower, BSN, RN, CWCN; and Sandra Johansen, RN, BA, CWON, Program Manager, The Center for Wound and Burn Healing and Inpatient Wound and Ostomy Services.



SECOND ANNUAL PARKINSON'S AWARENESS DAY PROGRAM HELD

SBMC's Parkinson's Family Advisory Council (PFAC) celebrated its Second Annual Parkinson's Awareness Day. More than 150 attendees heard from Arash Fazl, MD, PhD, a Barnabas Health Medical Group physician, board-certified in psychiatry and neurology, who specializes in movement disorders, Parkinson's disease (PD), dystonia, tremor and deep brain stimulation, and Paul R. Gigante, MD, a neurosurgeon who specializes in frameless deep brain stimulation for PD and essential tremor. SBMC offers a large number of exercise and support programs for the community. To learn more about them, visit www.rwjbh.org/sbmc events.

Pictured at the event, back row from left, are Sally Malech, MPH, RD, Senior Director, Strategic Marketing and Communications; Lindsay A. Cianciotto, MSN, RN, CNL, Director of Nursing Finance; Gregory J. Rokosz, DO, JD, FACEP, Senior Vice President, Medical and Academic Affairs/Chief Medical Officer; Arash Fazl, MD, PhD; Paul R. Gigante, MD; Doug DeStefano, PharmD, Director of Pharmacy; Dawn Howard, DNP, APN, ANP-BC, Director, Transitions of Care; Lauren Norcross, Outreach Coordinator; and, front from left, Kristen Angowski, Nursing Administration; Margie Heller, System Administrator, Global Health, RWJBarnabas Health and Administrative Director, Community Health and Outreach, Saint Barnabas Medical Center; and Michele Sutton and Stu Cooper, Parkinson's Family Advisory Council members.



RENOVATED CARDIAC CATHETERIZATION LAB OPENS

The newly renovated Cardiac Cath Lab, designed exclusively for electrophysiology procedures, is equipped with the latest technological advancements and allows for more efficient workflow and enhanced safety. These enhancements, along with the experienced team that runs one of the highest-volume ablation centers in the state, means heart patients with arrhythmia receive exceptional, cutting-edge treatment at SBMC. To learn more or to make an appointment with an SBMC cardiologist, call 888.724.7123 or visit www.rwjbh.org/heart.

Above, Marc Roelke, MD, Director of Electrophysiology, is pictured cutting the ribbon surrounded by Cath Lab staff including Leo Lunney, BSN, RCIS, Director of Nursing, Cardiac Cath Lab; Jocelyn Tablazon, BSN, RN, Patient Care Director, Cardiac Cath Lab; Christine Casazza, RN, CHF, Electrophysiology Coordinator; and Maggie Lundberg, MSN, MPA, RN, CCRN, Interim Chief Nursing Officer.

To learn about educational events at Saint Barnabas Medical Center, visit www.rwjbh.org/sbmc events.

* RWJBarnabas Health and The Cancer Center at Saint Barnabas 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 clinical treatments and trials. To learn more, call 844.CANCERNJ.



CHOOSING THE RIGHT RADIATION THERAPY

WITH ADVANCED TECHNOLOGY, EXPERTS CAN CUSTOMIZE TREATMENT TO A PATIENT’S PRECISE NEEDS.

To learn more about cancer treatment at Saint Barnabas Medical Center, visit www.rwjbh.org/beatcancer.

More than half of people with cancer receive radiation therapy—the use of high-energy beams to kill cancer cells and shrink tumors—as all or part of their treatment, according to the American Cancer Society.

With recent advances, the types of radiation therapy used can vary widely. “No two patients are treated alike,” says Alison Grann, MD, Chair of the Department of Radiation Oncology at The Cancer Center at Saint Barnabas Medical Center (SBMC), who heads a team of radiation oncologists,

radiation therapists, physicists, dosimetrists and nurses.

“We provide individualized care based on the specific type of cancer, the size and location of the tumor and any preexisting conditions,” Dr. Grann says. “We’re quick to implement new standards of care that benefit patients, such as shorter radiation courses, and we have a large arsenal of technology to help us.”

With the latest technology, board-certified radiation oncologists at SBMC can treat all types of cancer—even hard-to-reach

tumors—with pinpoint precision. In the past, normal tissue surrounding the site of the cancer was often damaged by radiation therapy. Now, with new therapies, experts can better target cancer cells directly—often in far less time than in the past.

NEW TREATMENTS

There are two main types of radiation therapy: **external beam radiation** and **internal radiation**.

External beam radiation therapy, the most common type, uses machines called linear accelerators to direct high-energy rays from the outside into a specific part of the body. They operate with a technique known as **intensity-modulated radiation therapy (IMRT)**, which manipulates radiation beams so they conform to the shape of a tumor.

SBMC was the first hospital in the tristate area to utilize the **Halcyon radiotherapy system**, which delivers IMRT for prostate, lung, head and neck, brain and other cancers. “The image quality is outstanding, the treatment time is quick and patients appreciate how quiet it is,” says Dr. Grann.

For certain cases, SBMC radiation oncologists may choose the **Vision AlignRT system**, which employs **surface guided radiation therapy (SGRT)**, a technique that tracks the patient’s surface and movements in 3D. The resulting precise delivery of radiation provides protection for the heart during treatment for cancer in the left breast.

The **CyberKnife Robotic Radiosurgery System** is a noninvasive alternative to surgery for many types of tumors. It administers **stereotactic body radiation therapy (SBRT)**, also known as **stereotactic ablative radiotherapy (SABR)**, which delivers intense, highly focused doses of radiation to tumors but limits the dose to surrounding tissues. CyberKnife’s cutting-edge technology tracks tumors in real time with continual image guidance, adjusting

for a patient’s breathing and movement.

“With other machines, we have to stop the beams to account for a patient’s respiration,” says Raquel Wagman, MD, a radiation oncologist at SBMC. “With this system, patients breathe normally while radiation continues to be delivered without interruption.”

“The CyberKnife uses a robotic arm that rotates around the patient,” says David Huang, MD, a radiation oncologist at SBMC who specializes in lung and head and neck cancers. “It delivers one beam at a time, taking X-rays every 15 seconds to make sure we’re on target.”

In addition to precision, CyberKnife offers a shorter treatment time, ranging from one to five sessions, depending on the cancer.

The newest machine in SBMC’s arsenal, the **TrueBeam radiotherapy system**, also delivers SBRT, but faster than other technologies can. With older linear accelerators, the standard time was 20 minutes per treatment. “With the TrueBeam, we can finish in one to one-and-a-half minutes. We’re delivering the same treatment, but more accurately and in less time,” says Dr. Huang. TrueBeam treats cancer anywhere in the body, including the lungs, breasts, prostate and head and neck.

“We are fortunate at Saint Barnabas, as most facilities don’t have both TrueBeam and CyberKnife and the option of choosing which is best for the patient,” notes Dr. Grann.

INTERNAL OPTIONS

Internal radiation therapy, as the name implies, involves putting a source of radiation inside the patient’s body—for example, into a tumor or inside a cavity in the body, such as the uterus or rectum.

One method of internal radiation therapy is **selective internal radiation therapy (SIRT)**, which uses tiny radioactive beads to control cancers in the liver. “Saint Barnabas is the first hospital in New Jersey to offer SIRT,” says Dr. Wagman. “With SIRT, we can target disease in the liver, reduce pain and delay progression.”

Dr. Wagman says her team has also seen



SBMC WAS THE FIRST HOSPITAL IN THE TRISTATE AREA TO UTILIZE THE HALCYON RADIOTHERAPY SYSTEM, WHICH DELIVERS IMRT FOR PROSTATE, LUNG, HEAD AND NECK, BRAIN AND OTHER CANCERS.

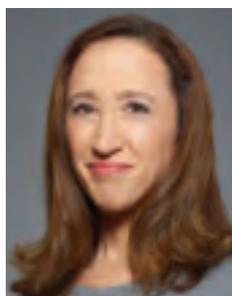
excellent results with gynecologic cancers using **brachytherapy**, which involves placing a radioactive implant into cancerous areas. Patients can also opt to have anesthesia during the procedure—something standalone radiation therapy centers can’t offer.

Radiation oncologists at The Cancer Center continue to be leaders in the field of radiation. For example, Dr. Wagman is launching a program for neuroendocrine cancer using a new FDA-approved cancer medicine called Lutathera, which emits a small amount of radioactivity, in a joint effort between the Radiation Oncology and Nuclear Medicine departments. In addition, the partnership that RWJBarnabas Health and The Cancer Center have with Rutgers Cancer Institute of New Jersey, the state’s only NCI-Designated Comprehensive Cancer Center, gives radiation therapy patients access to the latest research and clinical trials

“We understand the latest research and the innovative technology that we can offer patients, but we also see each patient as an individual,” says Dr. Grann. “As a team, we will take the best possible care of each patient we see.”



ALISON GRANN, MD



RAQUEL WAGMAN, MD



DAVID HUANG, MD



Tim Mahoney, PT, DPT with a patient at Saint Barnabas Medical Center's Outpatient Physical Rehabilitation Center in Millburn.

**“OPPOSITE”
MOVEMENTS CAN
BE THE ANSWER
FOR MANY BACK
PROBLEMS.**

SIMPLE EXERCISES FOR BACK PAIN

Back pain doesn't have to be scary. In fact, up to 80 percent of people with back pain can treat their own problem without surgery, injections or medication, says Tim Mahoney, PT, DPT (Doctor of Physical Therapy) and Supervisor, Saint Barnabas Medical Center Rehabilitation at Millburn.

“Research shows that back pain is predominantly movement- and position-related,” Mahoney says. “When that’s the case, the appropriate treatment is movement, position, exercise and activity.”

It’s a surprising approach for many who assume that their back pain is destined to be a chronic medical problem. “Only about 1 percent of back pain is caused by something truly sinister—cancer, a fracture, an infection, a tumor,” Mahoney says.

CAUSE AND EFFECT

“It’s important to understand that back pain is a symptom, not a diagnosis—the same way chest pain can be a symptom of indigestion, a heart attack or something else altogether,” Mahoney says. “When we see a patient with back pain, the goal is to establish what’s causing the underlying problem and treat that issue.”

A skilled physical therapist can assess a patient’s back pain by taking a thorough

Saint Barnabas Medical Center offers a Comprehensive Rehabilitation Center at the Barnabas Health Ambulatory Care Center at 200 South Orange Avenue in Livingston, and two outpatient facilities, one in Millburn and one at the JCC MetroWest in West Orange. For more information, call **973.322.7500**.

medical history. “We’ll want to know whether the pain is local or is a referred pain—for example traveling from the back down the leg,” Mahoney says. “Is it constant or intermittent pain? How long has it been going on?”

Serious concerns may arise if the patient describes a change in bowel or bladder habits related to pain, pain at night, or a recent fall or impact to the spine. In those cases, or if a patient feels something serious may be going on with his or her health, a physician should be consulted, Mahoney says.

In the absence of those issues, Mahoney—who is a certified Diplomat (Dip, MDT) in The McKenzie Method of Mechanical Diagnosis and Therapy—will focus on mechanical and musculoskeletal issues. Questions are asked and movements assessed to elicit the patient’s “directional preference.” Simply put, directional preference means some movements and actions, such as bending or sitting, may provoke and worsen pain; moving in another direction, such as by standing or walking, may eliminate the pain.

After a thorough assessment, specific exercises and postures to adopt and to temporarily avoid can be prescribed. This treatment doesn’t involve heat, cold, back braces or medication, and the goal is for it to be practiced by the patient at home.

SELF-HELP

“Often, people think they have pain because they gained weight or they’re getting old, and that’s not necessarily true,” Mahoney says. “We don’t have a clear understanding of what the mechanism is for every kind of back pain. We see young people and fit, athletic people with back pain. We see people who are very active and are on their feet all day, and people living a very sedentary lifestyle.

“What we do know is that frequently, what helps is movement in the opposite direction of the one a person’s body is in for most of the day.”

Mahoney’s goal is to empower patients to control their own back pain. As with any physical issue, the better patients understand it, the better they can prevent and deal with it, he believes. “It’s just like how you don’t have to go to the dentist every time you brush your teeth,” Mahoney says. “You know how to do it. Similarly, when you know the movements you need, you understand what to do when pain comes on and how to prevent it from coming back.”

ALL THE RIGHT MOVES

Tim Mahoney, PT, DPT and a patient demonstrate three simple exercises he frequently prescribes for patients with back pain.

PRESS-UP

The patient lies on her stomach and bends upward, in a move similar to the cobra position in yoga.



SLOUCH OVER-CORRECT

The patient sits and slouches in a forward posture, and over-corrects by arching her back as high as she can and trying to bend backward in the chair.



LUMBAR SUPPORT

The patient rolls up a towel, or uses a pillow, and positions it behind her back in a chair to help prevent a slouched sitting posture.





Sandy Sullivan

‘THANK YOU FOR SAVING MY LIFE’



FAST, EXPERT ACTION SAVES A WOMAN WHO WOKE UP WITH SYMPTOMS OF A HEART ATTACK.

This past December, Sandy Sullivan, a 55-year-old mother of four, was looking forward to seeing her twin boys, United States Army Rangers, who were coming home for Christmas.

On December 16, 2018, at 4 a.m., Sandy woke up with a pain in her throat. “It definitely did not feel like a normal sore throat. It was just getting worse and then I started to break out in sweat,” Sandy recalls. She woke her husband and they went to the Emergency Department at Saint Barnabas Medical Center (SBMC).

There, doctors quickly concluded that she was having a heart attack, which occurs when a coronary artery is suddenly blocked. She was rushed into the Cardiac Catheterization Lab. Bruce J. Haik, MD, System Director of Cardiac Catheterization Labs for RWJBarnabas Health and a member of Barnabas Health Medical Group, placed a stent—a tube-shaped device that helps keep arteries open—in the artery.

“What was unique about Sandy’s case was the fact that although she did have a history of tobacco abuse, she had no other risk factors for a heart attack. She was also relatively young, for a woman, to suffer a heart attack,” says Dr. Haik.



BRUCE J. HAIK, MD

“The whole thing happened pretty quickly,” says Sandy. “I remember being on the table telling the doctor, I hope this goes well because my twin boys are being deployed in a couple of weeks. I wasn’t sure if I was going to be alive or not.”

“Although Sandy’s symptoms were

textbook—chest pain and associated diaphoresis [sweating] waking her up from sleep—she did initially present with a sore throat,” explains Dr. Haik. “Nausea, dizziness, anxiety as well as chest pain, which may include back or neck pain or throbbing in arms, are not uncommon presentations for women.”

UNEXPECTED SYMPTOMS

Sandy recovered in the Coronary Care Unit and was up and walking the next day. She was able to start getting back to her normal daily routine a week later, just in time to see her sons.

“The entire Emergency Department staff and Cardiac Department were amazing and made me feel very comfortable. Thank you for saving my life,” says Sandy.

“Although Sandy’s symptoms were

textbook—chest pain and associated diaphoresis [sweating] waking her up from sleep—she did initially present with a sore throat,” explains Dr. Haik. “Nausea, dizziness, anxiety as well as chest pain, which may include back or neck pain or throbbing in arms, are not uncommon presentations for women.”

Sandy continues her cardiac care with cardiologist Devang Gandhi, MD, a member of Barnabas Health Medical Group, and by participating in cardiac rehabilitation at SBMC. She also sounds a note of caution for women who may be having unexpected symptoms of a heart attack. “If it doesn’t feel right,” she says, “it’s probably not right.”

ADVANCED CARDIAC CARE AT SAINT BARNABAS MEDICAL CENTER

Saint Barnabas Medical Center (SBMC) provides a full array of advanced cardiovascular services including Transcatheter Aortic Valve Replacement (TAVR), non-invasive cardiac imaging, advanced echocardiography techniques, coronary CTA (computed tomography angiography), diagnostic and interventional cardiac catheterization, peripheral vascular services including carotid stenting, and open heart surgery including valve surgery and coronary revascularization. In addition, the medical center offers a full range of electrophysiology services including pacemaker and cardiac defibrillator implantation, Watchman, electrophysiologic studies and atrial fibrillation ablation.

SBMC has received The Joint Commission disease-specific certifications for Acute Coronary Syndrome, Heart Failure and Cardiac Rehabilitation.

Your heart doesn’t beat just for you. Get it checked. To find an SBMC cardiac specialist, call at **888.724.7123** or visit www.rwjbh.org/heart.

FUNDING THE WAY FORWARD

FRIENDS AND SUPPORTERS OF SAINT BARNABAS MEDICAL CENTER GATHER TO CELEBRATE AND TO LEARN.



ELIZA TITUS SOCIETY LUNCHEON

The annual luncheon of the Eliza Titus Society celebrates those in the community who have included Saint Barnabas Medical Center in their estate plans. This year's luncheon featured a presentation on healthy aging by Theresa M. Redling, DO, FACP, Medical Director of Geriatric Health and Disease Management. To learn more about the Eliza Titus Society and making a planned gift to Saint Barnabas Medical Center, please contact Elena Miklaszewski at elena.miklaszewski@rwjbh.org or 973.322.4338.

Pictured above, from left, back row: Patrick Haughey, Chief Operating Officer, Jaqueline Canete, Donna Laudati, Harriet Freeman, Chris Shubeck and Theresa Redling, DO, FACP, Medical Director, Geriatric Health and Disease Management. Front row: Kathy Brand, Joanne Williams, Annette Sun, Shyan Sun, MD, DCH, FAAP, Kathy Zizza, Trustee and MaryAnn Zizza.



5TH ANNUAL CYCLERED

The 5th Annual CycleRed raised funds in support of community and global health, helping vulnerable communities, both locally and around the world. It was hosted by Margie Heller, System Administrator, Global Health, RWJBarnabas Health and Administrative Director, Community Health and Outreach, Saint Barnabas Medical Center; Ernani Sadural, MD; Alan Garten, MD, Chair, Department of Radiology; Rahul Pawar, MD; Cristina Pamaar, MD; and Lauren Norcross.

Above, from left, back row: Eric Handler, DO, Associate Director, Emergency Medicine; Dan Sansobrin, MD; Margie Heller, System Administrator, Global Health, RWJBarnabas Health and Administrative Director, Community Health and Outreach, Saint Barnabas Medical Center; Stephen Crane, MD; Mokhtar Asaadi, MD, Clinical Chair of Plastic and Reconstructive Surgery; Michael Drews, MD, FACOG; Stuart Geffner, MD, MS-HCM, FACS, Chair and Surgeon-in-Chief, Department of Surgery; John Russo, MD, President, Medical Staff; Rahul Pawar, MD. Front row: Ernani Sadural, MD, Director of Global Health, RWJBarnabas Health; Kimmerle Pawar, MD; Joshua Goldstein, MD; Robert Kamieniecki, MD.



THE FUTURE OF HEALTHCARE

Saint Barnabas Medical Center welcomed friends and supporters for a special presentation on The Future of Healthcare and The Transformation of Emergency Medicine. Featured speakers Patrick Haughey, Chief Operating Officer, and Eric Handler, DO, FACEP, Associate Director of Emergency Medicine, updated guests on Saint Barnabas Medical Center's ongoing transformation, including the Emergency Department Expansion Project that is currently underway.

Pictured, from left: Eric Handler, DO, FACEP, Associate Director, Emergency Medicine; Kathy Zizza, Trustee; Patrick Haughey, Chief Operating Officer.

Saint Barnabas Medical Center: Best of the best in the U.S. 15 times in a row

One of only 41 hospitals in the nation to achieve straight A's for safety.



Saint Barnabas Medical Center remains the only hospital in the surrounding six states to earn 15 straight A's from the Leapfrog Group. Becoming one of only 41 hospitals in the country to accomplish this achievement underscores Saint Barnabas Medical Center's commitment as a High Reliability Organization (HRO).

Through the concerted effort of Saint Barnabas Medical Center's physicians, nurses, staff, volunteers and leadership, patients and families benefit from the highest level of quality care and the safest possible hospital experience.

Saint Barnabas Medical Center

RWJBarnabas HEALTH

Let's be healthy together.