

A Publication of
**ROBERT WOOD JOHNSON
UNIVERSITY HOSPITAL SOMERSET**

SUMMER 2019

healthy *together*



**WHY YOU NEED
A PRIMARY CARE
PHYSICIAN**

**OVERCOMING
KNEE PAIN**

**COULD YOU
BENEFIT FROM
WEIGHT-LOSS
SURGERY?**

**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.

Robert Wood Johnson University Hospital Somerset's Steeplechase Cancer Center offers a team approach to cancer care, bringing together medical oncologists, surgeons, radiation oncologists, radiologists, pathologists, nurses, patient navigators, social workers, nutritionists, therapists and other medical specialists. The hospital recently welcomed a new gynecologic oncologist, added a new cancer patient navigator and expanded its palliative care services. In addition, the hospital's new Chinese Medical Program and Indian Medical Program offer bilingual patient navigation services for members of the Asian community.

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



ANTHONY CAVA
PRESIDENT AND CHIEF EXECUTIVE OFFICER
ROBERT WOOD JOHNSON UNIVERSITY
HOSPITAL SOMERSET



HEALTH NEWS

AN "A" FOR PATIENT SAFETY

This spring, Robert Wood Johnson University Hospital (RWJUH) Somerset was awarded an "A" for achieving the highest national standards in patient safety from The Leapfrog Group, a national nonprofit organization committed to improving healthcare quality and safety. This is the second consecutive and eighth "A" RWJUH Somerset has received since 2012.



CONVENIENT CARE FOR LGBTQIA PATIENTS

RWJUH Somerset recently celebrated the expansion of PROUD Family Health, the first in New Jersey to offer primary care services to the LGBTQIA community. Among those attending the ribbon-cutting ceremony were Jackie Cornell, Principal Deputy Commissioner of Health for NJ; Amy Mansue, Executive Vice President and Chief Experience Officer, RWJBarnabas Health; and Aaron Potenza, Policy Director, Garden State Equality. The center has moved to a new private office in the Somerset Family Practice building and is open five days a week with daytime and evening hours.

Robert Wood Johnson | RWJBarnabas
University Hospital **HEALTH**
Somerset

110 Rehill Ave., Somerville, NJ 08876 | 908.685.2200

CONNECT WITH US ON

- @RWJSomerset
- @RWJSomerset
- RWJBarnabas Health

RWJUH Somerset complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. For more information, see link on our home page at rwjbh.org/somerset. RWJUH Somerset cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo. ATENCIÓN: Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al 908.685.2200. RWJUH Somerset konfòm ak lwa sou dwa sivil Federal ki aplikab yo e li pa fè diskriminasyon sou baz ras, koulè, peyi orijin, laj, enfimite oswa sèks. ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis ed pou lang ki disponib gratis pou ou. Rele 908.685.2200.

healthy *together* contents

SUMMER 2019



8



6



21



4



10

2. WELCOME LETTER.

A community update from our CEOs.

4. A NEW LEASE ON LIFE.

A double knee replacement has enabled one patient to participate in his favorite sports.

6. THE FUTURE OF CANCER CARE.

One breast cancer patient's experience in a clinical trial.

8. BETTER CARE FOR THE COMMUNITY.

The new Indian Medical Program helps to improve access to screening and treatment.

9. CRANIAL TUMORS: HELP FOR HARD CASES.

Top neurosurgeons at RWJBarnabas Health tackle the toughest tumors.

10. PEAK PERFORMANCE: SECRETS OF BASEBALL PROS.

Healthy habits are no minor matter for these outstanding local players.

12. NEW CANCER TREATMENT, NEW HOPE. CAR T-cell therapy is saving patients.

14. PARTNERING TO FIGHT PAIN. One boy's chronic pain ordeal leads to help for other children.

15. HEART HEALTH: KNOW YOUR NUMBERS. Keep on top of these tests to protect your heart.

16. THE KEY TO QUITTING SMOKING OR VAPING. A free, proven program for people who've tried to quit before.

17. TOP REASONS TO SEE A PRIMARY CARE PHYSICIAN. How a PCP can help you feel your best.

18. A SECOND CHANCE. A dedicated emergency team saved the life of a young heart attack patient.

20. BENEFITS OF WEIGHT-LOSS SURGERY. A bariatric surgeon answers questions about common procedures.

21. NEW SPACES FOR HEALING. Three renovation projects aim to improve patient care.

22. COMMUNITY CALENDAR. A roundup of health education and support programs.



EASING PRESURGICAL JITTERS

Education and support are important for patients who may be anxious about their upcoming joint replacement surgery, so Robert Wood Johnson University Hospital (RWJUH) Somerset requires patients to attend a presurgical class. “Anxiety increases if patients anticipate a lot of pain,” says Marcella O’Herlihy, RN, Joint Care Coordinator. “They’re already in a lot of pain from arthritis.” The classes are led by O’Herlihy, as well as a social worker, physical therapist and occupational therapist. Patients learn how to prepare for surgery and how they will be cared for at the hospital. They’re also able to ask questions and share their concerns. “Knowing when their lives will return to normal again really helps to reduce anxiety,” says O’Herlihy.

A NEW LEASE ON LIFE

THANKS TO A DOUBLE KNEE REPLACEMENT, ONE PATIENT CAN PARTICIPATE IN HIS FAVORITE SPORTS—PAIN-FREE.



RWJUH Somerset hosts a reunion dinner for joint replacement patients, which allows them to exchange stories about their experiences. Right: Ken Leivonen participated in a bowling tournament in Las Vegas less than a year after his knee replacement surgery.

After years of tearing up the ice in hockey, wearing heavy equipment as a volunteer firefighter, and crouching behind home plate as a softball catcher, Ken Leivonen, 57, was often in pain as a result of knee osteoarthritis, in which the cartilage that cushions the joint wears away. A sports aficionado, he decided to take up activities that were easier on his joints: golf and bowling. Over time, even those sports caused pain. “I had to use a golf cart because I couldn’t walk the course,” recalls Ken, who lives in Bedminster and works as a chemical engineer. “Last year, I was only able to play once, and I didn’t feel good about it because my right knee was holding me back.”

Ken also had trouble walking through airports during frequent business trips. “My knees were worn out,” he says. “Sometimes I would have to walk half a mile between gates, and I couldn’t make it without almost being in tears from the pain. During the last couple of trips, I actually called for a cart to bring me to my gate. Needless to say, I felt very low about this.”

CONQUERING KNEE PAIN

Four years ago, Ken began receiving injections to control the knee pain. The pain relief would last about six months, but after a few years, the injections weren’t as effective. Surgery was the only option. In July 2018, he had both knees replaced by Stephen Kayiaros, MD, an orthopedic surgeon at Robert Wood Johnson University Hospital (RWJUH) Somerset. Now, he not only has new joints but also a new outlook on life.

“Immediately afterward, I felt so much better,” he says. “I couldn’t have asked for a better outcome.”

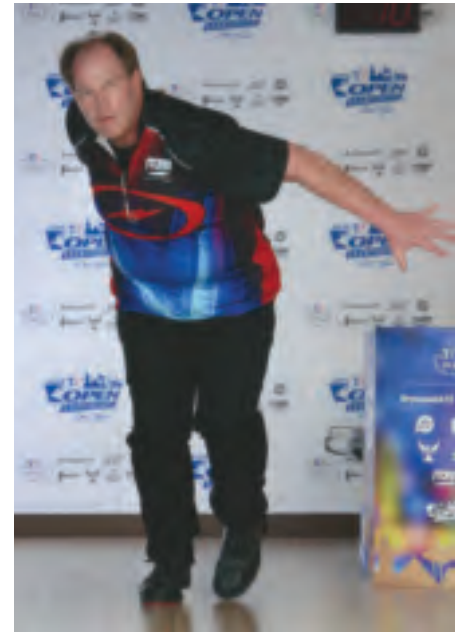
Last October, just a few months after the surgery, Ken traveled to Universal Studios in Orlando, Fla., and was surprised by how many miles he could walk. “I went to the park with friends, and when I returned to the hotel I looked at my pedometer on my phone and saw that I had walked 21 miles that day,” he says.

In March, Ken traveled to Las Vegas for a bowling tournament. He bowled his average, and he’s optimistic his game will improve. “I can bowl six or eight games at a time now,” he says. “My bowling is getting better than it was before the surgery.”

A SMOOTH RECOVERY

Ken was pleasantly surprised by how well the surgery went—and how comfortable he was afterward. “I had some stiffness from the compression bandages on both legs to control swelling, but it wasn’t very painful,” he says. Ken felt well enough to attend a lunch for joint replacement patients, which is held on Tuesdays and Thursdays. “We exchanged stories about our experiences and the activities we were looking forward to getting back to,” says Ken.

On the day of the surgery, Ken began physical therapy (PT). Before patients can leave the hospital, they must be able to walk, climb stairs, and get in and out of a car and bathtub. After Ken was



discharged, he had two weeks of PT, during which the therapist came to his home five times per week. Then he had 10 weeks of outpatient PT.

Since the surgery, Ken has lost about 35 pounds through a combination of exercise and portion control. “Thanks to the surgery, it’s easier for me to exercise,” he says. Keeping his weight down will not only improve his overall health but also the longevity of his new knees.

Last November, Ken attended a reunion dinner for joint replacement patients at the hospital. “It was good to talk to other patients,” he says. “Most of the people I spoke with who had knee replacements said they wish they’d done it sooner. You can add me to that list now.”

To learn more about joint replacement at RWJUH Somerset, contact the Joint Surgery Center at **908.704.3789** or visit www.rwjbh.org/ortho.



RWJBarnabas Health and Robert Wood Johnson University Hospital Somerset, 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.

For more information, call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.

IMPROVING THE FUTURE OF CANCER CARE

ONE BREAST CANCER PATIENT'S EXPERIENCE IN A CLINICAL TRIAL.

During her recent battle with an aggressive type of breast cancer, Lori Monaghan was prescribed two medications, which she credits with helping to save her life. Her cancer was HER2 positive, meaning the protein HER2 was present, increasing the chances that the disease could spread and return. The medications target the tumor's HER2 receptors and slow its growth. "Before these drugs were approved by the Food and Drug Administration, my prognosis would have been very different," says Lori,

Patient Lori Monaghan and her daughter, Kylee, 16, enjoy quality time together at a nearby barn where Kylee practices horseback riding.

49, who lives in Branchburg with her husband, 19-year-old son and 16-year-old daughter. “Thank goodness women agreed to participate in the clinical trials that led to the drugs’ approval.”

When Lori learned she was eligible to participate in a clinical trial at Steeplechase Cancer Center at Robert Wood Johnson University Hospital (RWJUH) Somerset, she didn’t hesitate. “My thought was, How can I give back? If my daughter or one of my nieces is diagnosed in the future, I’d like to help improve the standard of care,” says Lori, who works for a pharmaceutical company.

Lori enrolled in a clinical trial investigating whether breast cancer patients with one to three diseased underarm lymph nodes should have at least eight nodes removed after chemotherapy, which is standard practice, or fewer nodes—only the suspicious ones. In both groups, radiation treatment would follow. The hope is that by removing fewer lymph nodes, patients would be less likely to develop lymphedema, which occurs when surgery causes fluid to build up in the arm, chest and other tissues, leading to swelling and pain and, sometimes, restricting movement.

ADVANCING BREAST CANCER TREATMENT

The clinical trial, which aims to enroll more than 2,900 patients at more than 1,100 institutions, is one of approximately 25 trials for various types of cancer that are underway at any given time at RWJUH Somerset, says Siby Varughese, RN, director of community oncology research at the Cancer Center. “We enroll, on average, about 20 percent of our cancer patients in trials,” she says.

Last year, the landmark TAILORx breast cancer study—which involved 14 women from Steeplechase Cancer Center—showed that many early-stage breast cancer patients with HER2-negative cancer don’t benefit from chemotherapy in addition to hormone therapy after surgery. Deborah Toppmeyer, Chief Medical Officer and Director of the Stacy Goldstein Breast Cancer Center at RWJUH Somerset’s

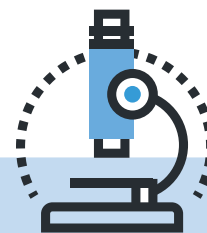
partner, Rutgers Cancer Institute of New Jersey, was one of the key collaborators on the TAILORx study. “It was a pivotal trial, and we’re proud that our patients contributed to the findings,” says Varughese.

After Lori’s diagnosis, cancer cells were found in one lymph node—a tiny organ that helps to fight infection—in her left armpit, so she was given chemotherapy prior to her double mastectomy, which was performed in October 2018. The breast surgeon tested her lymph node tissue during the surgery. There were no signs of cancer, so only two nodes were removed. After the surgery, however, pathology results revealed residual cancer in one lymph node. Lori had to decide whether to re-enter the clinical trial and have surgery to remove more lymph nodes, then undergo radiation—or just have radiation. She consulted with her breast surgeon, Deborah Lue, MD, of RWJ Physician Enterprise’s Steeplechase Breast Specialists and medical director of the Cancer Center’s Sanofi US Breast Care Program, and chose not to proceed with the next step of the study, which would involve further removal of nodes. “At that point, I was recovering from surgery and didn’t want to risk having more nodes removed,” she says.

TOP-NOTCH CARE

Clinical trial participants and the people who care for them are increasingly seen as partners in research. Lori says she benefited from the experience: In addition to the satisfaction that came from participating, she says she received excellent care. “Patients in clinical trials are closely monitored,” says Varughese. “A research nurse follows them, and patients play a more active role in their healthcare.”

Lori completed radiation therapy in December 2018. In June, she finished receiving infusions of the medications



CLINICAL TRIALS AT RWJUH SOMERSET

Last year, more than 220 patients were enrolled in clinical trials at Robert Wood Johnson University Hospital (RWJUH) Somerset through a partnership with Rutgers Cancer Institute of New Jersey, the state’s only National Cancer Institute-Designated Comprehensive Cancer Center and one of only 50 in the nation. In cancer clinical trials, researchers study new and improved options for prevention, screening, treatment, quality of life and survivorship. A major advantage of participating is that “patients may receive access to a cutting-edge therapy before it becomes the standard of care,” says Siby Varughese, RN, director of community oncology research at Steeplechase Cancer Center. Eligibility for a trial depends on specific criteria, such as the type and stage of a person’s disease, previous treatment history, other medical conditions, age and gender.

she had been taking. She’s taking another drug that can help reduce the risk of a recurrence. This summer, Lori will have reconstructive surgery.

Lori is grateful for her care team—the medical oncologist, radiation oncologist, breast surgeon, plastic surgeon, nurses, dietitian, social worker and the Sanofi US Wellness Boutique, which offers wigs and other items for cancer patients. “The Cancer Center has provided amazing care,” she says. “They offer everything you’d find at a larger center but with an approach and setting that feels like home.”

To learn more about clinical trials at RWJUH Somerset, call **908.685.2481** or visit www.rwjbh.org/clinical-trials.



Indian Medical Program coordinator Shisha Patel assists a patient at a recent health screening.

accompanies patients to treatments. She also provides translation and interpretation services. So far, Shisha has assisted more than 150 patients. “This helps patients avoid the Emergency Department,” says Shisha.

IMPROVING PREVENTIVE CARE

Preventive care isn't part of Indian culture, so “one of my goals is to have people in the community come for screening tests,”

says Shisha. She organizes screenings for blood pressure, cholesterol, blood sugar and prostate cancer at local community centers and the hospital. She also runs community education programs, which feature speakers on various topics, such as diabetes and cancer. “Indian people are at higher risk of developing diabetes, cardiovascular disease and various cancers,” says Alpesh Patel, MD, a cardiologist at RWJUH Somerset. “We'd like to eliminate the health disparities in these areas.”

The program is modeled on the successful Chinese Medical Program, which launched in June 2018 to improve access to care for members of the Chinese community. The Chinese Medical Program, which also features a bilingual patient navigator, has already helped many people obtain medical appointments and screenings.

So far, the Indian Medical Program appears to be a success. “Patients love the personalized service I provide,” says Shisha. “They like the fact that I'm from the same culture. I understand and respect their language and traditions. Once people receive my help, they continue reaching out to me because they're comfortable.”

BETTER CARE FOR THE COMMUNITY

THE NEW INDIAN MEDICAL PROGRAM HELPS TO IMPROVE ACCESS TO SCREENING AND TREATMENT.

Nearly 22,000 people in Somerset County are of Indian descent, according to the U.S. Census. Due to language or cultural barriers, many people in the Indian community aren't receiving the medical services they need. To improve their access to healthcare, Robert Wood Johnson University Hospital (RWJUH) Somerset launched the Indian Medical Program in November 2018. “Some people in the community are hesitant to get medical help,” says Shisha

Patel, coordinator of the program. “For instance, some elderly people don't want to be a burden to their families. So they don't bring up a health problem until an emergency arises.”

Shisha is a Gujarat native who speaks Gujarati and Hindi languages fluently. She helps hospitalized patients understand their discharge summaries; schedules medical appointments; arranges round-trip transportation to the hospital; recommends specialists; fills out forms; and



For more information on the Indian Medical Program at RWJUH Somerset, call **908.595.2348**.



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.

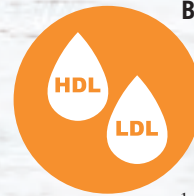


HEART RATE (PULSE): The number of times your heart beats per minute. “This is helpful if you’re exercising and want to see if your training is significantly affecting your heart rate,” says Dr. Waxman. The American Heart Association recommends at least 150 minutes of moderate-intensity exercise per week.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



SAFEGUARD YOUR HEALTH

FIVE REASONS TO SEE A PRIMARY CARE PHYSICIAN.

Whether you're ill or need to stay on top of your blood pressure or cholesterol, it's helpful to have a primary care physician (PCP) in your corner. Yet one-quarter of adults don't have a provider to turn to when they're sick, according to a 2018 Kaiser Family Foundation poll. That's true for nearly half of adults under age 30, as well as 28 percent of those ages 30 to 49. Nearly 20 percent of people ages 50 to 64 don't have a PCP either. If you fall into this category, consider seeing a PCP for the following reasons:

1. ALL OF YOUR HEALTHCARE NEEDS WILL BE ADDRESSED. "We care for the whole patient, not just a single medical problem," says Sarah Uddin, MD, a PCP at Bridgewater Primary Care. "When you have an ailment, it's easy to forget that the body functions as a whole. If a person has chest pain, for instance, it doesn't mean the *only* cause is the heart." In addition, a PCP can address mental health issues. When he or she prescribes medication, a patient's financial well-being is considered. If a medication is not affordable, a PCP can recommend a less expensive alternative or provide a coupon code.



SARAH UDDIN, MD



ROBERT M. FLOWERS, DO

2. YOU'LL RECEIVE PREVENTIVE CARE. You might feel well, but you might not realize you have high cholesterol or high blood pressure because these conditions are often symptomless. "We can help prevent a heart attack by monitoring your cholesterol and blood pressure," says Robert M. Flowers, DO, a PCP at Bridgewater Medical Group. PCPs also take a complete medical history (such as diet and exercise habits) to determine a patient's risk factors for diseases. In addition, they provide important vaccines (see "What to Expect at a Checkup").

3. YOUR PCP MAY BE ABLE TO PERFORM GYNECOLOGIC AND OTHER PROCEDURES. Some PCPs, including Dr. Uddin, can perform Pap smears, endometrial biopsies and colposcopy, in which the cervix, vagina and vulva are examined. They may be able to place an IUD or a contraceptive implant. Some PCPs are also able to drain cysts or abscesses (pus-filled bumps) and perform bone density testing, says Dr. Uddin.

4. YOUR CHILDREN AND PARENTS CAN ALSO SEE YOUR PCP. PCPs are board-certified in family medicine, so they can treat people of all ages, including pregnant women. "Over time, I become part of the family, and patients feel comfortable coming to me with their health concerns," says Dr. Uddin.

5. A PCP CAN HELP YOU MAKE THE BEST HEALTHCARE DECISIONS FOR YOU. "I build relationships with my patients, and I can help them decide what treatment is best for them as people, not just their medical problem," says Dr. Flowers.



RWJUH SOMERSET PRIMARY CARE PRACTICES

For a physician referral, call **888.724.7123**.

BRANCHBURG

- RWJPE Branchburg Medical Group

BRIDGEWATER

- RWJPE Bridgewater Medical Group
- Bridgewater Primary Care

HILLSBOROUGH

- RWJPE Primary Care Center at Hillsborough
- RWJPE Towne Centre Family Care
- RWJPE Richard Corson, MD

MANVILLE

- RWJPE Manville Primary Care

PISCATAWAY

- RWJPE Piscataway Dunellen Family Practice

RARITAN

- RWJPE Primary Care at Raritan

SOMERSET

- RWJPE Care First
- RWJPE Franklin Family Medicine

SOMERVILLE

- RWJPE Somerset Family Practice
- PROUD Family Health
- Central Jersey Internal Medicine

WARREN

- RWJPE Comprehensive Family Medicine
- RWJPE Warren Internal Medicine



WHAT TO EXPECT AT A CHECKUP

- Bloodwork to check cholesterol, blood sugar, thyroid hormone, anemia and kidney and liver function
- Blood pressure testing
- Depression screening
- Weight (your physician may calculate your Body Mass Index, a weight-height ratio that can indicate your risk for a health problem)
- Flu vaccine (annually)
- Shingles vaccine (at age 50)
- Pneumonia (pneumococcal) vaccine (for adults 65 and older)
- Tetanus, diphtheria and pertussis vaccine (once every 10 years)



A SECOND CHANCE AT LIFE

A DEDICATED EMERGENCY TEAM SAVED A PATIENT WHOSE HEART HAD STOPPED FOR MORE THAN 30 MINUTES.

Mark Connors woke up last Christmas morning in a hospital bed with no idea where he was or what had happened to him. “I opened my eyes, and my daughter and wife were sitting next to my bed,” the 56-year-old environmental engineer recalls. “I heard someone say, ‘He’s a Christmas miracle.’ I was completely bewildered. What was I doing here?”

Mark didn’t yet realize it, but he was

lucky to be alive. Two days earlier, he’d had a massive heart attack at home, and his heart stopped beating on its own for nearly 33 minutes. But thanks to the Emergency Department (ED) physicians at Robert Wood Johnson University Hospital (RWJUH) Somerset and their team of first responders, Mark has made a full recovery. He’s back at work, playing softball again and spending time with his beloved 10-year-old grandson. “I get goose bumps every time I think about it because if it hadn’t been for my ED physician, Danielle Minett, MD, and her amazing staff, I wouldn’t be here,” says Mark.

A MIRACULOUS SURVIVAL

On December 23, Mark, who was recovering from hernia surgery, had just finished eating breakfast at his home in Hillsborough when he experienced what he thought was awful indigestion. “I started to sweat, so I went out to the garage to try to cool off,” he recalls. That’s the last



Left: Mark Connors is grateful to Danielle Minett, MD, the Emergency Department physician who helped save his life after a massive heart attack. Above: Mark with the emergency responders, from left to right: EMT Joseph Pultorak, EMT Jeffrey Christie, paramedic Glenn Hagen and EMT Carl Walker.

thing he remembers of that day. His wife, Irma, found him a few minutes later in the downstairs hallway, foaming at the mouth. Panicked, she ran out of the house and straight into neighbor Brendan Perez's home. He called 911, and two police officers arrived almost immediately and began administering CPR. Within minutes, an ambulance arrived.

The paramedics, Glenn Hagen and Mark Beach, performed an electrocardiogram (EKG), which records the heart's electrical activity. It showed that Mark was having a heart attack. The paramedics called the RWJUH Somerset ED. "They deserve most of the credit for keeping Mark alive," recalls Dr. Minett. "They kept shocking him with the defibrillator and administering medications until he could get to us." As soon as Mark arrived at the hospital, Dr. Minett knew they were in crisis mode. "It was clear he was having a massive heart attack," she says.

Dr. Minett performed an ultrasound of Mark's heart, repeated his EKG to confirm that he was having a heart attack and activated the cardiac catheterization team. "Usually, when someone receives CPR for such a prolonged time prior to arriving at the hospital, their neurologic function is severely affected," says Dr. Minett. "But the fact that Mark's pupils were reactive and he was moving was very encouraging." Thanks to the CPR and multiple rounds of defibrillation, Mark had signs of good neurologic function. In fact, his neurologic function was so good

that he had to be sedated because Dr. Minett was concerned he might pull out his breathing tube.

Within minutes, cardiologist Pratik Patel, MD, arrived in the ED. Dr. Patel whisked Mark upstairs to the Cardiac Catheterization Lab. Mark's left anterior descending artery—one of the major arteries—was completely blocked, so a stent was placed to open the blocked artery. On Christmas Day, the Intensive Care Unit (ICU) team decreased the sedation, and Mark was taken off the ventilator. "There's always the concern that the patient won't 'wake up' after a cardiac arrest, but Mark did!" says Dr. Minett.

A PATIENT'S GRATITUDE

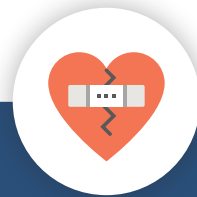
A few weeks after returning home, Mark wrote a letter of thanks to hospital staff members. Two months later, he and Irma brought lunch for the entire ED team to show their appreciation. "I stared at this amazing young woman who refused to give up on me and gave me another shot at life," recalls Mark. "Words couldn't express how I was feeling. I just hugged her."

Dr. Minett shares her patient's gratitude. "I've been working in the ED for nine years, and most people who come in in the shape Mark was in don't make it," she says. "The fact that I was able to help save his life is one of the highlights of my career." Dr. Minett emphasizes that saving his life was a team effort. "There were probably 25 people who played a role, including the ED nurses and techs, cardiac catheterization laboratory

team, Dr. Patel and the ICU team," she says.

Mark has made a full recovery. He spent two weeks in the hospital and another two weeks at a rehabilitation center. He came home in late January, then had physical therapy at the hospital three days a week. In April, he returned to work. "I feel great," he says. "I've lost about 30 pounds, I'm eating healthfully, and I'm easing back into activity again."

Dr. Minett isn't surprised that Mark is doing so well. "Mark deserves a lot of credit for the recovery he's made," she says. "I knew he would pull through when I saw him in the ED. He's been a fighter this whole time."



SIGNS OF A HEART ATTACK

If you experience one or more of the symptoms below for more than a few minutes, **CALL 911**.

- chest pressure, squeezing or pain
- lightheadedness, nausea or vomiting
- jaw, neck or back pain
- discomfort or pain in your arm or shoulder
- shortness of breath



GET IT CHECKED

Your heart doesn't beat just for you. Get it checked. To find a Robert Wood Johnson University Hospital (RWJUH) Somerset cardiac specialist, call **888.724.7123** or visit www.rwjbh.org/heart.



DAVID WARD, MD

COULD YOU BENEFIT FROM WEIGHT-LOSS SURGERY?

A BARIATRIC SURGEON ANSWERS QUESTIONS ABOUT COMMON PROCEDURES AND THEIR SAFETY AND EFFECTIVENESS.

Nearly half of all Americans are obese and are at increased risk of heart disease, stroke, type 2 diabetes and 13 types of cancers, including brain, breast and colorectal, according to the Centers for Disease Control and Prevention. In 2017, 228,000 people had bariatric surgery to slim down, according to the American Society for Metabolic and Bariatric Surgery. David Ward, MD, a bariatric surgeon at Robert Wood Johnson University Hospital (RWJUH) Somerset, explains the procedures he performs and the results patients can expect.

Which bariatric procedures do you perform most frequently?

Two procedures are at the top of the list: sleeve gastrectomy and gastric bypass. Most often, I perform sleeve gastrectomy, in which about 80 percent of the stomach is removed. The remaining section

is shaped like a banana. This surgery helps patients feel full after eating small amounts of food and causes gut hormone levels to drop so they're not as hungry.

With gastric bypass, the stomach is divided into two sections. The top part becomes a small pouch the size of a walnut—limiting the amount of food that can be eaten—and is connected to the middle of the small intestine. The remaining parts of the stomach and intestinal tract don't absorb food. Like the sleeve gastrectomy, gastric bypass leads to hormonal changes that reduce appetite.

Who are the best candidates for bariatric surgery?

Adults with a body mass index (BMI, a weight-height ratio) of 40 or greater and those with a BMI of 35 to 39 who have a health condition such as diabetes, sleep apnea, hypertension or severe joint disease are good candidates. The type of surgery we recommend depends on a patient's health. Sleeve gastrectomy is generally advised as long as a patient doesn't have severe acid reflux or esophagitis (inflammation of the esophagus). We steer those patients—as well as those

with poorly controlled diabetes—toward gastric bypass. Smokers require a sleeve gastrectomy because they're at higher risk for ulcers.

How safe is bariatric surgery?

Sleeve gastrectomy and gastric bypass, which require only a few tiny incisions, carry a 1 in 10,000 chance of death, similar to gallbladder surgery. The risk of experiencing other complications, such as bleeding, bowel obstruction or intestinal leakage, is also low. Patients stay overnight in the hospital so we can monitor them.

What results can patients generally expect?

They can lose 8 percent to 10 percent of their body weight in the first month after surgery. The majority of weight loss usually occurs in the first nine months. Many patients also experience significant health improvements, such as being able to stop taking medications for high blood pressure. Type 2 diabetes and sleep apnea may resolve. Our nutritionists and psychologists can help patients maintain their weight loss.

For more information on bariatric surgery at RWJUH Somerset, visit www.rwjbh.org/weightloss.

The new Cardiology Pavilion features private and semi-private rooms, as well as the latest telemetry system for monitoring patients' heart activity.



NEW SPACES FOR HEALING

THREE RENOVATION PROJECTS AIM TO IMPROVE PATIENT CARE.

In recent years, Robert Wood Johnson University Hospital (RWJUH) Somerset has been expanding and upgrading its services and facilities to provide for a growing number of patients. “We’re enhancing our facilities to meet the needs of our community and continue to provide the highest quality of care,” says Anthony Cava, President and Chief Executive Officer. The Somerset Health Care Foundation is currently raising funds for three major renovation projects: the Cardiology Pavilion, Eating Disorders Unit and Orthopedic Center. “This is the first major fundraising campaign we’ve had in years, and the support we receive from the community is crucial,” says Paul Hubert, chairman of the Somerset Health Care Foundation. “We’re excited about improving the patient experience both medically and aesthetically.” Here’s how patients will benefit:

CARDIOLOGY PAVILION

Providing top-notch treatment for cardiovascular disease, the nation’s leading cause of death, is a priority. When renovations to the Cardiology Pavilion are completed later this year, there will be a new, centrally located Cardiac Diagnostic Center on the second floor with cutting-edge equipment and easy access for patients and family members. Two 30-bed

units were recently completed. They each include 12 private rooms and nine semi-private rooms. The rooms feature the latest telemetry system for monitoring patients’ heart activity, new “smart” beds with safety information in multiple languages, and the ability to communicate with the nursing station. In addition, a new call bell system was installed. When a patient calls a nurse, lights outside the room reflect his or her need. Nurses can monitor patients individually from a centralized location in each unit.

EATING DISORDERS UNIT

RWJUH Somerset is one of only two hospitals in New Jersey that offer inpatient and outpatient care for eating disorders patients. A multidisciplinary team cares for these patients and their family members. This fall, the unit will undergo a major renovation. The number of beds will increase from 14 to 20, and adolescent and adult patients will have separate living spaces. In addition, there will be outdoor spaces and open space for dining, therapy and quiet time. Outpatient programs will be moved to another location to provide

A LOCAL HOSPITAL HAS THE POWER TO ADD GREAT STRENGTH TO ITS COMMUNITY... JUST AS A COMMUNITY HAS THE POWER TO ADD GREAT STRENGTH TO ITS HOSPITAL.

appropriate levels of care and space to both inpatients and outpatients.

ORTHOPEDIC CENTER

RWJUH Somerset received the Joint Commission’s Gold Seal of Approval for total hip and total knee replacement surgery, which means the hospital meets the healthcare accreditation organization’s standards for delivering high-quality care. As such, the number of orthopedic surgeries performed has increased. To accommodate this growth, 25 state-of-the-art, private rooms will be created and the unit will be exclusively dedicated to orthopedic surgery patients. Focusing only on the needs of orthopedic patients will enhance their recovery process. The renovations are expected to be completed this year.

For more information on how to support RWJUH Somerset, contact the Somerset Health Care Foundation at **908.685.2885**.



Community Education

Events are free and registration is required unless otherwise indicated. To register or for more information, call **888.724.7123** or visit www.rwjbh.org/somerset. Cancellations within two weeks of a program are non-refundable under any circumstances.

4-H Fair: Good Health Is Fun!

Visit Robert Wood Johnson University Hospital (RWJUH) Somerset's tent for free health information and prizes.

August 7 through August 9
10 a.m. to 10 p.m.
North Branch Park, free

Child and Babysitting Safety

This course provides teenagers ages 11 to 15 with everything they need to know to care for younger children, including tips for working with parents and kids, safety, caregiving and first aid. Each student receives a two-year certification in Child and Babysitting Safety and a two-year certification in Heartsaver AED (Adult Child Infant CPR & AED).

Tuesday, August 20 and
Wednesday, August 21
4 to 8 p.m.

Robert Wood Johnson University Hospital Somerset
To register or for additional class dates or questions, visit us at www.rwjbh.org/cpr.
\$65 (includes course material)

A Gut Feeling: The Health of Your Digestive System May Weigh You Down

Understand the digestive system: how food is digested, how fats are stored, the difference between good versus bad gut bacteria, foods that promote good bacteria, and how your stomach affects weight and overall wellness. A cooking demonstration with healthy gut foods will follow. Light lunch served. *Tia Hagins, RD, community nutritionist*
Jim McGrady, general manager and executive chef at Somerville Elks

Tuesday, August 20
11 a.m. to 1:30 p.m.
Somerville Elks

Driver Safety Program

Participants will learn techniques for preventing

accidents and/or tickets in this AARP defensive driving course. Certificates awarded upon completion of the course may entitle participants to an auto insurance discount.

Tuesday, September 10
8:30 a.m. to 2:30 p.m.
Avalon at Bridgewater, \$20 for AARP members, \$24 for non-members. Breakfast and lunch included.

Radiating Advances in Prostate Health

Discover urologic conditions (incontinence, benign prostatic hyperplasia, prostate cancer, etc.), risk factors, symptoms, causes, diagnostic testing, screening and treatments, such as robotic-assisted surgery (the da Vinci Surgical System), and new advances in radiation. Lunch included. *Joel Braver, MD, radiation oncologist*
Dhiren Dave, MD, urologist and robotic surgeon

Thursday, September 12
11 a.m. to 1:30 p.m.
Steeplechase Cancer Center

Aerobics for the Mind: Is Your Memory Stressing You Out?

Understand the differences between stress, anxiety and depression, the causes, the impact on memory, diagnostic tools and treatment options. Staff will lead memory-strengthening activities. *Glen Wagner, clinical supervisor of behavioral health services*

Thursday, September 26
10 a.m. to 12:30 p.m.
Somerville Elks, \$10

HealthHike Walking Program: Sudden Cardiac Arrest...Be Still My Beating Heart

Understand the symptoms of sudden cardiac arrest, causes, risk factors, emergency response procedures and treatments. Attendees may participate in Wellness

Walkers, a walking program to improve overall health. Participants will receive pedometers, nutritional and mileage tracking logs, recipes and complimentary health screenings. *Raymond Catania, MD, cardiologist*
Wednesday, October 2
10 to 11 a.m.
AMC Theatres at Bridgewater Commons mall

Breast Cancer: Is it all in the Genes?

Discover your risk for developing breast cancer and learn about genetic testing and counseling. Includes lunch, raffle and giveaways. *Kathleen Toomey, MD, oncologist and medical director of Steeplechase Cancer Center*
Friday, October 4
12 to 1 p.m.
Fuld Auditorium

Youth Mental Health First Aid Training

Learn how to help adolescents who are experiencing a mental health or addiction challenge or are in crisis. This course reviews typical adolescent development and teaches a five-step action plan for how to help young people. Topics covered include anxiety, depression, substance use and eating disorders. RWJUH Somerset Behavioral Health will provide resources and service information. *Brenda Esler, LSW, licensed social worker and youth mental health first aid trainer*
Saturday, October 5 and
October 12
9 a.m. to 1:30 p.m.
Steeplechase Cancer Center, 3rd Floor Conference Room
Offered in collaboration with EmPoWER Somerset.



Say Yes to the Cure! The Annual Breast Cancer Awareness Event Featuring Lori Allen from Say Yes to the Dress: Atlanta

Join us for a special evening for mothers and daughters featuring dinner and a bridal fashion show with Lori Allen, star of TLC's *Say Yes to the Dress: Atlanta*. Allen, a breast cancer survivor, will share her inspirational story of survival and how she turned her experience into a positive one. Experts from our Steeplechase Cancer Center will also provide information on breast cancer causes and risk factors, early detection and surgical options. A meet and greet with Allen will follow the program.

Lori Allen, breast cancer survivor, television celebrity and owner of Bridals by Lori. Deborah Lue, MD, FACS, breast surgeon and director of the Breast Program. Colin Failey, MD, board-certified plastic surgeon and chief of plastic surgery.
Tuesday, October 22, 5:30 to 9 p.m.
Bridgewater Manor, \$25

Make Time for Mammography

According to Susan G. Komen, breast cancer deaths among African American women were 42 percent higher than those among other women between 2010 and 2014. In this seminar for African American women, discover strategies to reduce breast cancer risk and the importance of screening. Dinner included.

Thursday, October 10 6 to 8 p.m.
Steeplechase Cancer Center 3rd Floor Conference Room

To register or for more information, please call Taqwa Brookins at 908.685.3439.

Entrenamiento de Primeros Auxilios para la Salud Mental de los Jóvenes

Aprenda como ayudar a los adolescentes que están padeciendo de problemas de salud mental, adicción o en crisis. El curso introduce las dificultades comunes de salud mental para los jóvenes, repasa el desarrollo típico en los adolescentes y enseña un plan de acción en 5 pasos para ayudar a los jóvenes en situaciones de crisis. Los temas cubiertos incluyen ansiedad, depresión, uso de sustancias, trastornos en los que se pueden producir psicosis, trastornos de la conducta (TDAH) y trastornos de la alimentación. RWJUH Somerset Behavioral Health proporcionará recursos e información sobre el servicio. *Milagros Balboa-Hart, Instructora certificada en Primeros Auxilios de Salud Mental para Jóvenes* *Bethzabe Fernandes, Instructora certificada en Primeros Auxilios de Salud Mental para Jóvenes*

Programa Ofrecido en 2 series: Sabados, el 19 y 26 de Octubre 9 a.m. to 1:30 p.m.
Steeplechase Cancer Center
 Ofrecido en colaboración con EmPoWER Somerset

Webinars

No time to attend one of our educational seminars in person? Log on to your computer and join us for a live webinar with one of our medical experts. The webinars are offered in collaboration with Friends' Health Connection.

The Breast Is Yet To Come: Breastfeeding Benefits for Mother and Child

During this webinar, discover the health benefits of breastfeeding for mother and child, how to get started, strategies for overcoming challenges, the recommended duration of feedings, and foods to avoid. *Dora Goodwill, RN, manager of maternal child health services* *Nasrin Nikpour, RN, BSN, RNC IBCLC, lactation specialist*

Tuesday, August 13, 12 to 12:30 p.m.
To register, visit <https://tinyurl.com/y3xocgo2>

Be A Lifesaver: Become A Blood Donor

During this webinar, understand who qualifies to donate blood, how often you can give, the benefits, the blood testing process, and recipient and donor safety. *Christia Keyte, supervisor of blood services*

Thursday, August 15, 12 to 12:30 p.m.
To register, visit <https://tinyurl.com/yypa6owf>

Get PrEP to Prevent the Spread of HIV and AIDS

During this webinar, learn about the human immunodeficiency virus (HIV), risk factors, how it's contracted, diagnostic testing, types of HIV and treatments, including new antiretroviral therapy. Learn prevention strategies and how RWJUH Somerset's PROUD Family Health can help. *Jeremy Pyke, MSN, APN, FNP-C, advanced practice nurse* *Danielle King, MPH, coordinator/navigator for PROUD Family Health*

Wednesday, September 18, 12 to 12:30 p.m.
To register, visit <https://tinyurl.com/y3yqhb6h>

Doctor's Orders: Preventive Medicine

During this webinar, learn about preventive medicine, the relationship between preventive medicine and primary care, the importance of primary care, types of preventive services, recommended guidelines and care covered by insurance. *Sarah Uddin, MD, family practitioner*

Tuesday, October 15, 12 to 12:30 p.m.
To register, visit <https://tinyurl.com/y33q7zke>

Bariatric Programs

WEIGHT-LOSS SURGERY SEMINAR

Have you been unsuccessful at keeping the weight off? Weight-loss surgery may be the right choice for you. Do you qualify, and which procedure is the best option? Join bariatric surgeons at RWJUH Somerset for free seminars to learn about weight-loss surgery options, including information about gastric banding, gastric sleeve and gastric bypass.

Tuesday, September 17 (Glenn Forrester, MD) 6:30 to 8 p.m.
Steeplechase Cancer Center First Floor Conference Room
For more information or to register, please call 888.724.7123

BARIATRIC SUPPORT GROUP

For anyone considering bariatric surgery, pre-op and post-op.

Tuesdays: August 27, September 24 and October 22 6:30 to 7:30 p.m.
Steeplechase Cancer Center First Floor Conference Room

Community Health Screenings

BLOOD PRESSURE SCREENING

Wednesday, September 11, 9 a.m. to 12 p.m.
Tarantino Promenade at RWJUH Somerset, free
 No pre-registration required.

CHOLESTEROL SCREENING

Includes total cholesterol, HDL, ratio and glucose.
Wednesday, September 11, 9 a.m. to 12 p.m.
Tarantino Promenade at RWJUH Somerset, \$15
 No pre-registration required.

PROSTATE CANCER SCREENING

This free Prostate-Specific Antigen (PSA) screening and exam by a urologist is for high-risk men 35 and over and all men 40 and over. This is a part of a study, so participants must complete a questionnaire. Registration required. Call 908.685.2814 to schedule an appointment.
Thursday, September 19, 5:30 to 7:30 p.m.
Steeplechase Cancer Center, Suite 2300 or Saturday, September 21, 9 to 11 a.m.
Steeplechase Cancer Center, Suite 2300

PULMONARY SCREENING

This free screening will include a peak flow meter evaluation, pulmonary health education and sleep health education.
RWJUH Somerset Respiratory Care & Sleep Services

Wednesday, September 25, 1 to 4 p.m.
St. James Church, Basking Ridge
 Offered in collaboration with Bernards Township Health Department. For an appointment time and to register, please call 908.204.2520.

ORTHOPEDIC SCREENING

RWJUH Somerset orthopedic surgeons, physical therapists and certified athletic trainers will assess bone and joint pain, test strength and range of motion, and provide exercise recommendations.
Stephen Kayiaros, MD, and David Abrutyn, MD, orthopedic surgeons
Saturday, October 12, 9 a.m. to 12 p.m.
TD Bank Ballpark, Bridgewater
 Call 908.685.2814 to pre-register.

110 Rehill Avenue, Somerville, NJ 08876



11th Annual Steeplechase Distance Run

10K - 5K - 2 Mile

Sunday, September 29, 2019

Amsterdam School
 301 Amsterdam Drive
 Hillsborough, NJ 08844

Avid runners, walkers, cancer survivors, physicians, families and friends will gather for this memorable event which includes USATF certified 10K and 5K courses. By supporting this event, you are impacting thousands of local patients and their families who rely on the Steeplechase Cancer Center at Robert Wood Johnson University Hospital Somerset for hope and healing.

Featuring Event T-shirt, Food & Drink, Kids' Sprints, DJ



Schedule (Rain or Shine):

Registration	7:30 am	10K Awards	10:15 am
10K	8:45 am	Kid's Sprints	10:45 am
5K	9:30 am	5K Awards	11:00 am
2 Mile	9:30 am		

Robert Wood Johnson University Hospital Somerset | **RWJBarnabas HEALTH**
 Steeplechase Cancer Center

Steeplechasedistancerun.com

Proceeds benefit the Steeplechase Cancer Center at Robert Wood Johnson University Hospital Somerset.