

healthy *together*

**QUIZ: ARE YOU
HEART SMART?**

**HEALTHY HABITS,
LATINO-STYLE**

**NEW HOPE FOR
OVARIAN CANCER**

**EAT LIKE
AN MVP!
NJ DEVILS STAR
TAYLOR HALL
TELLS HOW**



We're Focused on Community

Coretta Scott King once said that the greatness of a community is best measured by the compassionate actions of its members. At RWJBarnabas Health, we share King's belief in the power of compassionate action.

Each of our hospitals is actively engaged in making a difference on critical issues, including housing, employment, food security and economic empowerment. That includes everything from hiring locally to finding ways to make fresh, affordable produce widely available. System-wide, we've added RWJBarnabas Health TeleMed, a telemedicine service that improves access to care for people with transportation or scheduling challenges.

To expand our community reach, we partner with other organizations, like the New Jersey Devils, to bring about positive change. One example: Collaborating with the staff of the Barnabas Health Hockey House at Newark's Prudential Center, our specialty physicians and nutrition experts have developed a youth hockey program that promotes optimal performance and good health while building confidence, sportsmanship and life skills. It's now available at ice-hockey rinks throughout the state. The Devils organization and players, including NHL MVP Taylor Hall, also work closely with us to bring encouragement and moments of joy to hospitalized children.

At Clara Maass Medical Center, we strive for excellence in designing our programs and services to meet the needs of our local community. Our Supper Club for Seniors Health Series, held monthly, is attended by more than 100 seniors and provides health information to help them to proactively manage their health. And, to connect with our growing Latino community, our Center of Excellence for Latino Health works with health ministries at local houses of worship to help parishioners practice healthy eating while continuing to enjoy traditional Latino cuisine. At RWJBarnabas Health, we believe in the greatness of the New Jersey community and are glad to help improve quality of life for everyone who, like us, calls the Garden State home.

Yours in good health,

BARRY H. OSTROWSKY
PRESIDENT AND CHIEF EXECUTIVE OFFICER
RWJBARNABAS HEALTH

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



6 Ways to Fight the Flu



Last winter's influenza (flu) season sent an unusually high number of people to Emergency Departments and outpatient clinics, according to the Centers for Disease Control and Prevention. Although flu season generally starts in November, it can extend through March and beyond. To protect yourself:

- Avoid close contact with sick people—and stay home if you're the one who's sick. The flu spreads through tiny droplets when infected people sneeze, talk or cough.
- Get a flu vaccine shot. It's best to get one before the season, but it can still have protective benefits later on.
- Avoid touching your eyes, nose and mouth, because flu viruses can live on surfaces and objects.
- Clean and disinfect surfaces and objects that may be contaminated.
- Wash your hands often with soap and water for at least 20 seconds. If soap and water aren't available, use an alcohol-based hand rub.
- If you think you have the flu, see your primary care provider. If antiviral drugs are prescribed, take as directed.

Emergency warning signs of flu sickness in children include fast breathing, bluish skin color, fever with a rash and not waking up or not interacting. In adults, warning signs include difficulty breathing, pain or pressure in the chest or abdomen, confusion, severe or persistent vomiting. For all ages, flu-like symptoms that improve but then return with fever and worse cough are warning signs.

Our Emergency Department is open 24 hours a day, 7 days a week. In an emergency, you may contact the Emergency Department at Clara Maass Medical Center at 973.450.2100 or dial 911.

Clara Maass Medical Center | **RWJBarnabas HEALTH**

1 Clara Maass Drive, Belleville, NJ 07109
973.450.2000 | rwjbh.org/claramaass

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WINTER 2019



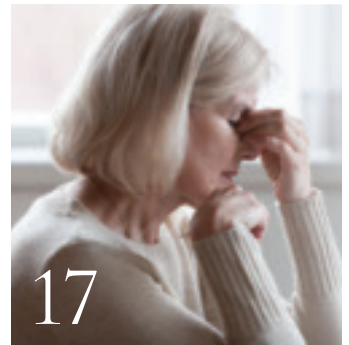
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- 2. WELCOME LETTER.** A community update from our CEOs.
- 4. TAKE A QUICK HEART-SMART QUIZ.** The answers may surprise you.
- 5. GETTING PATIENTS HOME FASTER.** A new unit helps prevent long hospital stays.
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- 12. GOOD FOOD FOR EVERY BODY.** The Wellness on Wheels van takes healthy cooking on the road.
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- 23. READY FOR BABY.** From childbirth prep to infant care, we can help.

TAKE A QUICK HEART-SMART QUIZ

HOW MUCH DO YOU KNOW ABOUT TAKING GOOD CARE OF YOUR HEART?

“Simple adjustments to your lifestyle, from limiting sugar intake to adding exercise such as walking to your daily habits, can result in a much happier and healthier heart,” says Elie Chakhtoura, MD, Director of the Cardiac Catheterization Laboratory at Clara Maass Medical Center and a member of Barnabas Health Medical Group. Still, misconceptions about heart health are common. Take this quiz—and see if the answers surprise you.

1. Walking for just two-and-a-half hours per week will provide heart-health benefits.

T F

2. Breast cancer kills more women than heart disease does.

T F

3. As long as I stay fit and am not overweight, I don't have to worry about heart disease.

T F

4. Bananas are good for your heart.

T F

5. The only sign of a heart attack is a sudden, sharp pain in the chest.

T F

6. Depression, stress or anxiety can physically hurt your heart.

T F

7. Avoid eggs in a heart-healthy diet.

T F

AND THE ANSWER IS ...

1. TRUE Studies have shown that a minimum of 150 minutes of moderate-to-brisk walking per week can significantly lower your risk of heart disease, stroke, high blood pressure and many other ailments.

2. FALSE While many women worry more about breast cancer, heart disease and stroke causes more deaths in U.S. women (1 in 3) than breast cancer does (1 in 31)—in fact, more than all other cancers combined.

3. FALSE Though staying at a healthy weight lowers your risk of heart disease and stroke, a person of any body type can have high cholesterol, high blood pressure or even high blood sugar. A family history of early heart disease can also be a risk factor. Have regular checkups and review your risk factors with your doctor.

4. TRUE Bananas are rich in potassium, which counteracts the effects of sodium and helps ease tension in blood vessel walls. Other potassium-rich foods include sweet potatoes, spinach, tomatoes and avocados. Fruits and vegetables in general are high in vitamins and fiber and low in fat. The American Heart Association recommends eating 4-5 servings of each per day.

5. FALSE While most heart attacks involve chest discomfort, it can start slowly and can also come and go. Other signs of a heart attack, which may or may not be accompanied by chest pain, include pain in one or both arms, or in the neck, jaw, stomach or upper back; shortness of breath; lightheadedness; or nausea. If you experience these warning signs, call 911.

6. TRUE Studies have shown that moderate to severe depression can increase risk of heart disease. One theory is that prolonged stress increases levels of the hormones adrenaline and cortisol, which can increase your heart rate and disrupt other bodily processes. Another reason may be that depression, anxiety and stress tend to be linked with bad habits like smoking, overeating and physical inactivity. Try to address stressful feelings with meditation or yoga, and seek therapy if necessary.

7. FALSE Recent research has indicated that healthy people can eat up to one egg a day with no increase in their risk of heart disease (this however, does not apply to patients with diabetes mellitus or heart disease). And beware of eggs' all-too-common accompaniments—bacon, sausage, cheese or high-fat hash browns.



ELIE CHAKHTOURA, MD

Your heart doesn't beat just for you. Get it checked. To schedule an appointment with a Clara Maass Medical Center cardiac specialist, call **973.450.2000** or visit rwjbh.org/heart.

GETTING PATIENTS

HOME FASTER

THE ADULT OBSERVATION UNIT ALLOWS PATIENTS TO AVOID LENGTHY HOSPITAL STAYS.

It's one of the calls an Emergency Department (ED) physician has to make: Can this patient go home, or does he or she need to stay in the hospital?

At Clara Maass Medical Center (CMMC), there's a third option: the Adult Observation Unit, where patients can have a brief stay while having access to sophisticated tests.

"We know that patients do better if they don't require a lengthy hospital stay," says John Fontanetta, MD, Chairman of Emergency Medicine at CMMC. "With the Observation Unit, we can take care of people who are too ill to go home, and we can do so quickly and efficiently.

"Diagnostic testing can take place around the clock in the Observation Unit," he explains. "We can complete tests in 18 to 24 hours that might take three days or more in the hospital."

TESTS 24/7

For example, a patient may come to the ED with chest pain. If it's diagnosed as a heart attack, the patient can be admitted directly to the hospital; if it isn't, the patient can be moved to the Observation Unit, where

he may undergo a blood test, an electrocardiogram or a stress test and, if necessary, be sent directly to the hospital's cardiac catheterization laboratory.



JOHN FONTANETTA, MD



Similarly, a patient who's had a syncopal episode (passing out or fainting) can have one of a range of tests—for example, an echocardiogram, or a carotid Doppler test to check for blocked arteries, or a magnetic resonance imaging (MRI) of the head to check for structural damage in the brain. A patient with asthma or chronic obstructive pulmonary disease (COPD) exacerbation can receive intensive therapy and be well enough to go home within 24 hours.

"The capabilities we have go far beyond what's available at an urgent care center," Dr. Fontanetta says. "And ED physicians no longer have to make the call as to whether a patient can safely go home and wait for tests as an outpatient later. We can do them all right here."

BIGGER AND BETTER

CMMC is among the first in the state to offer observation services and is now expanding its facility from 24 to 34 beds. The expanded unit will have 24 adult beds and 10 pediatric beds, each in a separate area to provide better care.

"As you can imagine, an ED can be a very hectic place," Dr. Fontanetta

At the ribbon cutting for the expanded Adult Observation Unit: Edward A. Mercogliano, MD, Chairman of Surgery, CMMC; Joseph Testa, MD, Director, Adult Observation Unit, CMMC; John Fontanetta, MD, Chairman, Department of Emergency Medicine, CMMC; Robert Brautigan, MD, General Surgeon and CMMC Medical Staff President; and Mary Ellen Clyne, PhD, President and Chief Executive Officer, CMMC.

says. "Our expansion is aimed at creating a calmer, quieter environment, one that is more conducive to treatment. We will have an upgraded waiting area. We're also creating a space where the discharge process can take place apart from care for sick patients."

"Overall, there's a better flow of patients throughout," says Wilfredo Yap Jr., MSN, RN-BC, NEA-BC, Director of CMMC's ED. "The care we're giving is compassionate, individualized care, but in a brighter, more welcoming, better-equipped environment."

Learn more about how Clara Maass Medical Center is always improving to serve you better at www.rwjbh.org/claramaass. In an emergency, call 911.

EAT, PRAY, GET HEALTHY

**HOW CMMC BUILDS TRUST—AND
HEALTHY HABITS—THROUGH
CHURCH MINISTRIES IN THE LATINO
COMMUNITY**



On saints' feast days at St. Lucy's Church in Newark, the congregation comes together to celebrate their varied heritages with a potluck meal. Many of the church members are from Latin American countries, including Mexico, Ecuador, Colombia and the Dominican Republic. Food is a big part of any gathering, especially traditional dishes—which often include lots of cheese, pork, fried fare, sugar and refined carbohydrates.

But it was becoming increasingly apparent that the food that fed the congregants' souls wasn't always doing good things for their bodies. Health problems like diabetes, high blood pressure, kidney disease and other ills are rampant in the community.

That's why the Center of Excellence for Latino Health at Clara Maass Medical Center (CMMC) stepped in with an outreach program to help the people of St. Lucy's learn how to maintain their health and their heritage. "When people leave one country to come to another, it's hard to give up their food," says Sarah Bonilla, MPH, Program Manager at the Center. "We're trying to help them make healthy changes."

OUTREACH TO THE COMMUNITY

The Center of Excellence for Latino Health was begun about two years ago, under the direction of Thomas Ortiz, MD, Medical Director of the Center. "The population in the area has been shifting to more of a Latino community," he explains. Dr. Ortiz put together an advisory board of community leaders to identify

and prioritize health issues to be addressed.

Because church attendance in the community is high, the Center examined ways to work with churches to provide health information. Grants from the Healthcare Foundation of NJ and Verizon has provided assistance in funding the program.

Bonilla was hired shortly thereafter and began visiting pastors and largely Latino churches in the area. She started a conversation with some St. Lucy's church members who were particularly receptive to the idea of establishing a health ministry.

Because the Center is designed to help the community to access healthcare and to close the gap in health disparities, preventive care is highly encouraged. So too, is letting the community know how they can take advantage of CMMC's many resources.

The outreach program at St. Lucy's began with monthly screenings, where bilingual nurses from CMMC visited after Spanish-language Masses to check blood pressure and glucose levels to screen for diabetes. The ministry also offered salsa-themed and Zumba exercise classes.

Next came tweaking the food at the church's social events to make it healthier. That, admits Bonilla, was a bit difficult.



THOMAS ORTIZ, MD



Opposite page, Sarah Bonilla, Program Manager, at a recent healthy cooking event. This page, clockwise, Wilmer Bermeo and Mercy Suquitana of Familias Saludables at Saint Lucy's; Diana Singh and Yajayra Cortes, Montclair State University students; event attendees; sauteed vegetables for quesadillas; Bonilla helps lead the lesson.



ONE BITE AT A TIME

The health ministry started serving whole-grain bread instead of white. Suggested recipes for potlucks used chicken instead of fried pork. Bonilla brought in portion plates, so people could see what a healthy plate of vegetables, protein and grain looks like. Organizers stopped ordering pizza for the children and teenagers, so the younger church members had to eat the same healthy food as the adults.

The health ministry even came up with a plan to promote health and raise money for the church at the same time. They began selling water for \$1 at events—and soda for \$2.

Not all of the changes went over well initially. Some people complained they didn't like the "new" food. Gradually, however, acceptance has increased.

Since no one wants to be told their food is unhealthy, the Center for Excellence for Latino Health is educating the community about the fact that obesity can lead to more problems, like diabetes, kidney disease and problems with circulation.

HERE FOR LATINOS

CMMC wants to earn the trust of the Latino community and make it very clear that the Medical Center is here for them. The

Center can help provide patients with a list of physicians who are bilingual, and have them talk to a counselor to see if they qualify for subsidized insurance or for a free pharmacy program. Thinking even longer-term, the Center is actively involved in efforts to encourage young Latino students to enter health professions.

"At Clara Maass, our staff has received special training so that the entire hospital community is more sensitive to disparities in healthcare," Dr. Ortiz says. "We've also employed additional tactics to reach out to the Latino community by ensuring that our promotional and educational materials are in both English and Spanish. We have focused on hiring more bilingual staff in many areas of the hospital, at every level of the organization, to ensure more effective communications with our patients and their families."

The Center of Excellence for Latino Health at CMMC also runs smaller outreach programs at several other area churches, and hopes to add more. "Screenings and health fairs are always available," Bonilla says, "and this program is about building healthy communities together."

For more information about the Center of Excellence for Latino Health; resources available to Spanish-speaking patients; or how to bring a program to your own church, call **973.450.2996** or visit www.rwjbh.org/claralatiohealth.

A TOAST TO EXCELLENCE

AN EVENING OF FINE FOOD AND DRINK CELEBRATES THE MEDICAL CENTER'S PRIDE IN ITS SERVICES, PHYSICIANS AND GENEROUS DONORS.

Supporters and aficionados of fine food and wine attended the signature fundraising event A Tasteful Experience at the Pleasantdale Chateau in West Orange on Nov. 12. "Not only is this one of our most spectacular events of the year, it also helps us raise awareness of the advanced treatment, compassionate care and state-of-the-art programs and services available at Clara Maass Medical Center," says Mary Ellen Clyne, PhD, President and Chief Executive Officer of Clara Maass Medical Center. The event raised nearly \$100,000.



1 From left to right: Brent Rudnick, Secretary, Clara Maass Medical Center Board of Trustees; Nicholas Minoia, Member, Clara Maass Medical Center Board of Trustees; John V. Kelly, Jr., MD, Member, Clara Maass Medical Center Board of Trustees; Andrea Barbier, DO, Vice President, Clara Maass Medical Staff and Member, Clara Maass Medical Center Board of Trustees; Robert Brautigam, MD, Medical Staff President and Member, Clara Maass Medical Center Board of Trustees and Clara Maass Foundation Board of Trustees; Mary Ellen Clyne, PhD, President and Chief Executive Officer, Clara Maass Medical Center; Robert Gaccione, Sr., Chairman, Clara Maass Medical Center Board of Trustees and Clara Maass Foundation Board of Trustees; Brian Sterling, Member, Clara Maass Medical Center Board of Trustees and Clara Maass Foundation Board of Trustees; Robert V. Gamba, Chairman, Clara Maass Medical Center Foundation Board of Trustees and A Tasteful Experience Co-Chair; Mei-Mei Tuan, Member, Clara Maass Medical Center Board of Trustees and Clara Maass Foundation Board of Trustees; The Honorable Robert Gangeruso, Member, Clara Maass Medical Center Board of Trustees.

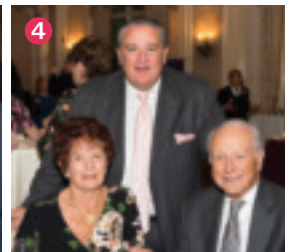


2 Mario DeChellis, General Manager, Stew Leonard's Wines and Spirits of Springfield and a wine representative share some of the many options of wine available at the event.

3 Anupama Adlakhia, MD; Andrea Barbier, DO, Vice President, Clara Maass Medical Staff; and Frank Mazzarella, MD, Chief Medical Officer, Clara Maass Medical Center

4 Lois Gaccione; Robert Gaccione, Jr., A Tasteful Experience Co-Chair and Vice Chairman of the Foundation Board; and Robert Gaccione, Sr., Chairman, Clara Maass Medical Center Board of Trustees

5 Chef Joe poses with his creations at the fresh mozzarella station generously provided by Nanina's in the Park and Foundation Trustee Joseph Maurillo.



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- South & Pine
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- Sushi Café
- Ward's Ice Cream
- Warwick Valley Winery

To learn more about the Clara Maass Medical Center Foundation, call **973.450.2277** or visit www.claramaassfoundation.org.

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SAVE THE DATE
CLARA MAASS MEDICAL CENTER GOLF INVITATIONAL FEATURING FORMER NEW YORK GIANT DAVID DIEHL AND FRIENDS
Monday, May 13, 2019
Montclair Golf Club
West Orange, NJ

THE DOCTOR IS IN ONLINE

WITH RWJBARNABAS
HEALTH TELEMED,
A DOCTOR CAN BE
AVAILABLE 24/7.

Health needs have a way of happening at inconvenient times. You're on a business trip and forgot a prescription. It is after hours and your doctor's office is closed. Your family is on vacation and you have a sick child. Or you're simply too sick to get out of bed.

For those situations and more, RWJBarnabas Health TeleMed now offers telemedicine—medical care available through a smartphone, tablet or computer—for urgent needs, or for people who feel they just don't have time to visit a doctor.

"At RWJBarnabas Health, we've been doing telemedicine for a long time in specific specialty services," says Amy Mansue, President, Southern Region, RWJBH. "For example, when very fragile babies are sent home, telemedicine lets doctors and nurses see a baby in real time if parents have a concern."

The rollout of the broader RWJBarnabas Health TeleMed program to the general public follows a successful pilot program with the system's 30,000 employees. "We know that telemedicine is not a one-size-fits-all solution for every demographic,"

Mansue says. "But we also know that people's lives are increasingly time-pressed, and that we're in a world of one-click expectations when it comes to service.

"Our job is to find ways to get people access to the services they need, at the right level of care, at the time they need it."

HOW IT WORKS

Once enrolled, patients can log in at any time of night or day for a videoconference with one of the on-call, U.S. board-certified physicians. There's a flat fee of \$45, payable by credit card at the time of service. (Many private insurance plans cover telemedicine, and in New Jersey, state-funded health insurance plans are required to, as long as certain standards are met.) RWJBarnabas Health TeleMed is secure and compliant with HIPAA, a federal law that sets standards for, among other things, the privacy of health information.

The doctor at the other end of the camera can assess symptoms, look at the area in question and make a judgment as to whether follow-up tests are needed. Though telemedicine is not meant to replace a patient's relationship with his or

her primary care doctor, "we do know that there are people who don't have access to primary care, or don't go routinely," Mansue says. "This is a way to connect them with healthcare."

Older patients may find telemedicine easier to adopt because long-distance healthcare has become common for chronic conditions, such as checking pacemakers or heart monitors over the phone. Younger patients, on the other hand, may actually prefer telemedicine to the in-person kind.

"One study showed that 70 percent of people under age 35 had accessed medical care through telemedicine," Mansue says. "They do everything through their phones—create relationships, order pizza—so it feels natural to do healthcare that way as well."

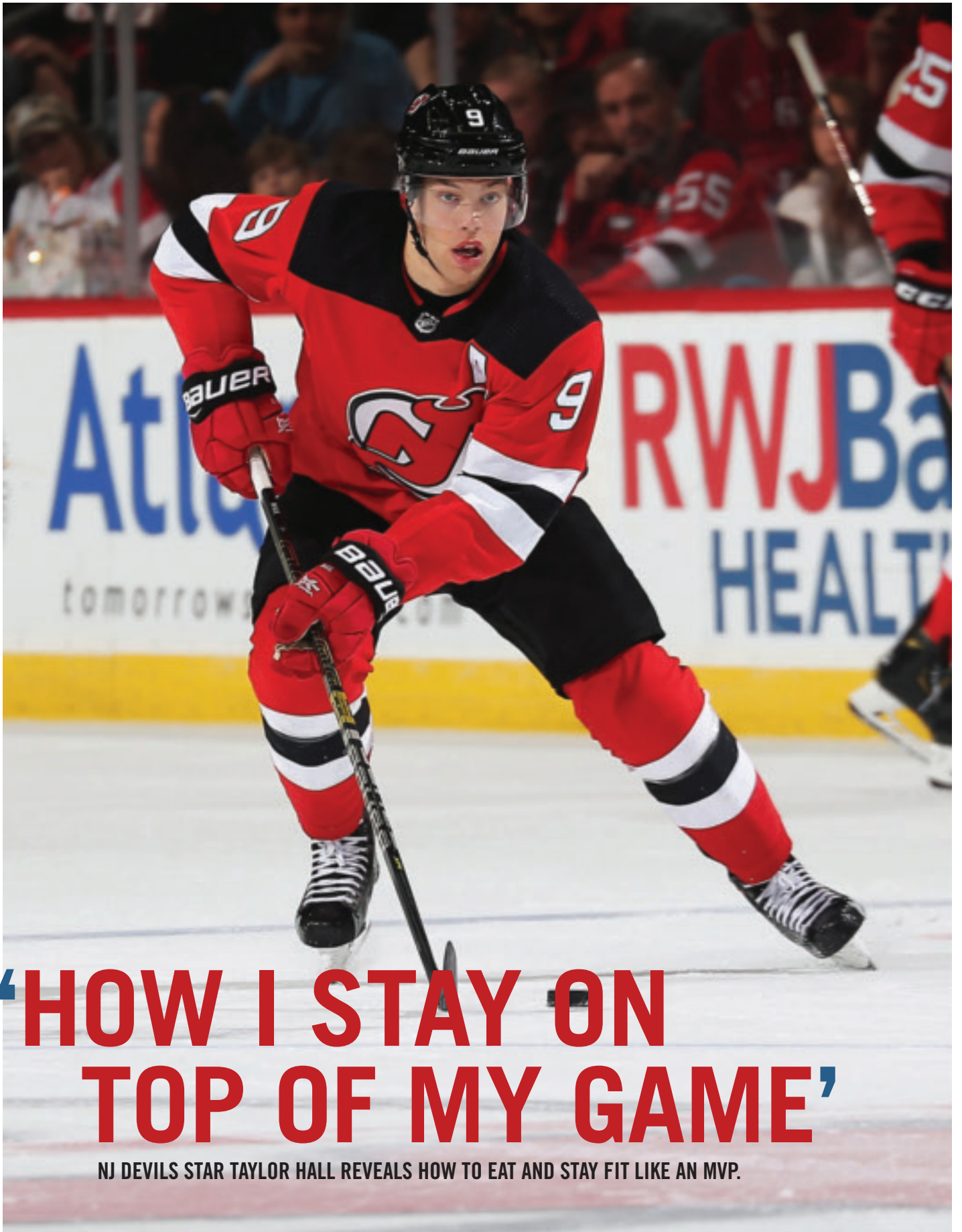
Ultimately, the goal for RWJBarnabas Health TeleMed is for physicians to be able to access, with patient permission, a patient's entire medical record in order to help make better diagnoses.

"That's an aspirational goal right now, because electronic medical record systems don't communicate between themselves as well as they need to yet," Mansue says. "But the technology improves every year."



AMY MANSUE

To enroll or learn more about RWJBarnabas Health TeleMed, powered by American Well, visit www.rwjbh.org/telemed, or download the app at the App Store or Google Play.



‘HOW I STAY ON TOP OF MY GAME’

NJ DEVILS STAR TAYLOR HALL REVEALS HOW TO EAT AND STAY FIT LIKE AN MVP.

PHOTO CREDIT © JERSEY DEVILS/ANDY MARLIN

Taylor Hall's healthy eating habits started young. "I can remember being at tournaments with my parents. All the other kids would be having Slurpees and chocolate bars after the game, but my parents had oranges and granola bars ready for me," the 26-year-old New Jersey Devils left wing recalled during a post-practice interview at RWJBarnabas Health Hockey House in Newark. "Eating well was instilled in me at an early age and it's something I take pride in, for sure."

Those healthy habits—along with hard work and amazing talent—have paid off, for Hall's career as well as for his team. Last year, he scored a career-high 93 points and led the Devils to the Stanley Cup playoffs for the first time in five years. He also became the first-ever Devils player to win the Hart Trophy as the league's most valuable player.

What's his secret for staying at peak fitness? It turns out that Hall's regimen, while serious, is also simple, with principles that can be followed by athletes at any level.

EATING TO WIN

Ask Hall to name a favorite food, and you won't hear anything about ice cream or cake. "I tend to avoid sugar," he says. "I'm lucky that I don't often have a craving for it. But with the calories we expend, it's very important for me to digest healthy carbohydrates and lots of protein.

"I keep my diet pretty simple. Protein, carbohydrates and then as much roughage as I can—a side dish like asparagus or sweet potatoes, and always a salad with dinner. Gluten-free pasta, rice and quinoa—those are really good for people like me who expend a lot of energy."

Hall sticks to snacks that are low in carbohydrates and high in fat, like nuts, or high in protein, like Greek yogurt. "That kind of snack is not going to give you a big burst of energy before bedtime, so it will allow you to rest properly," he says.

Less nutritionally worthy foods are limited, but not eliminated. "My cheat foods are cheeseburgers and pizza," Hall says. "Maybe once a week you have yourself a night where you have those things. Certainly, you've got to live your life."

Getting enough fluid takes on special urgency for professional athletes. "Staying as well-hydrated as possible is huge. You don't want cramps during the game," Hall says.

HELPING KIDS GET HEALTHIER, TOGETHER

RWJBarnabas Health (RWJBH) and the New Jersey Devils have built a robust partnership focused on promoting health and good, clean hockey fun.

RWJBH is the official healthcare provider for the Devils and their home base, the Prudential Center, where healthy snacks are available at all events. With the help of its specialty physicians and experts in nutrition and wellness, RWJBH collaborates with the Devils to benefit pro players, young athletes and children in need. Some examples:

- A rink affiliate program brings youth hockey clinics and wellness and nutrition education to players and coaches at ice hockey rinks statewide.
- The two organizations partner each year on the Running With the Devils 5K Run and Walk, with proceeds benefiting RWJBH hospitals.
- Devils players visit RWJBH hospitals to participate in special events for children. "That's a huge part of being a hockey player," says Devils star Taylor Hall. "We have a platform to give back, whether with a smile or simple encouragement. And not only is it great for the patients, it's also good for us."

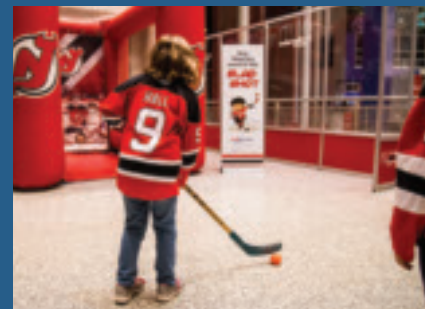
He starts each day with two 500-milliliter bottles of water as soon as he wakes up, to get his metabolism going. "All day, I drink a ton of water, and during games, as many fluids with electrolytes as possible."

BODY AND MIND

During the 82-game season, players expend energy where it counts—on the ice. After the season, Hall takes up to a month off from any physical activity, to give his body a rest. From then on, he works out and skates three times a day, five days a week.

His advice for other athletes is to focus their workouts on what their weaknesses are. "Some athletes might already have a very strong core, but need to work on their foot speed," he says. "Overall, don't worry about what you're good at. Just try and correct stuff that might be hampering you a little bit."

To prepare mentally, Hall uses meditation and relaxation techniques. "When I have a calm brain and everything seems easy



From top: practicing shots in the Little Devils zone; membership is free for ages 12 and under; healthy snack options for all Devils fans.

to me, I seem to play my best," he says.

A WORD TO YOUNG ATHLETES

Perhaps surprisingly, Hall's advice to aspiring young hockey stars is not necessarily to work harder, but to take a step back. "Some parents have their kids in hockey year-round," he says. "You see these kids who are amazing hockey players, but they just don't seem to have a passion for it. I would say that you have to try out different things and have some free time.

"You have to really love whatever you do," he says. "The thing that you have the most passion for in life is what you're going to be successful at."

To learn more about the RWJBarnabas Health/New Jersey Devils partnership, visit www.rwjbh.org/devils.



GOOD FOOD FOR EVERY BODY

WELLNESS ON WHEELS MOBILE EDUCATION VAN PROVIDES A HANDS-ON APPROACH TO HEALTHY EATING.

When the big green van pulls up, the kids say “Wow!”—and that’s just the reaction RWJBarnabas Health healthcare providers and their partners are looking for.

The 35-foot vehicle, decorated with bright fruits and vegetables, is the hub of the Wellness on Wheels mobile education initiative, which launched in the fall of 2018. Equipped with a hydroponic and earth-box greenhouse and a full kitchen, the van travels to places like preschools, senior homes and houses of worship in areas where affordable, healthy food is hard to come by.



BARBARA MINTZ

It’s fun to see young kids marvel at what an herb’s root looks like, run their fingers through soil, sort plastic fruits and vegetables or smile as they taste-test healthy recipes. Behind those

hands-on activities is an overarching goal: to help communities get healthier.

“At RWJBarnabas Health, we embrace the concept of bringing health and wellness to communities by teaching people in places where they live, work, earn and learn,” says Barbara Mintz, Senior Vice President, Healthy Living and Community Engagement. “We want to make sure that people in underserved communities have a level playing field when it comes to being healthy.”

HELP FOR HUNGER

More than 900,000 New Jersey residents face hunger every day, according to the Community Food Bank of New Jersey. Unemployment, low wages and high housing costs contribute to the problem. So does the prevalence of “food deserts,” areas where residents live more than one mile from a supermarket and, without a car, must depend on public transportation to get there. Too often, those residents resort to unhealthy packaged or fast foods.

Wellness on Wheels aims to change those patterns and, to increase its impact, partners with local community groups. At a recent event at a New Brunswick preschool, hosted in conjunction with the Puerto Rican Action Board, a dietitian fluent in conversational Spanish showed children how to fill a plate with colorful food and

The Wellness on Wheels van is rolling to communities throughout the state.

demonstrated a simple, healthy recipe. Says Mintz, “We partner with local food banks and farmers markets to distribute healthy foods at our events.” Simple, culturally appropriate recipes are also provided to further support the mission of helping good health begin at home.

EATING WELL

CORN AND BLACK BEAN SALSA

We can get protein from plants as well as animals. Corn and black bean salsa makes a protein-packed after-school snack, or the perfect side dish with dinner.

- 1½ cups frozen corn, thawed and drained
- 1 cup low-sodium black beans, drained and rinsed
- 1 tomato, diced
- ½ red bell pepper, diced
- ¼ red onion, diced
- ½ jalapeño pepper, minced (optional)
- 2 tablespoons chopped parsley (or 1 tablespoon dried)
- zest and juice of 1 lime
- 1 tablespoon olive oil
- 1/8 teaspoon salt
- 1/8 teaspoon black pepper

In a large bowl, combine all the ingredients and stir. Set salsa aside to allow flavors to come together. Serve with tortilla chips or on top of your favorite Latin-inspired dishes.



To see a video of the Wellness on Wheels inaugural outing and to learn more, visit www.rwjbh.org/WellnessWheels.

GETTING OLDER, GETTING BETTER



GERIATRIC PSYCHIATRY CAN HELP ADULTS NAVIGATE ALL THE TRANSITIONS THAT COME WITH AGING.

“Improving with Age” is the title of a presentation that Lina Shihabuddin, MD, Chief Medical Officer, Behavioral Health Network at RWJBarnabas Health (RWJBH), likes to give.

“A lot of things do get better with age,” says Dr. Shihabuddin, who is board-certified in adult and geriatric psychiatry as well as hospice and palliative medicine. “Growing older should not be thought of as a bad thing, but as a transition to a different phase of life.”

That’s a call not just to think positive, but also to think about aging and health in a new way. It’s the approach healthcare practitioners like those in the RWJBH Behavioral Health Network are taking when they proactively screen for depression and anxiety in primary care settings.

“It’s no longer ‘I have a disease, so I need to see a doctor,’” Dr. Shihabuddin explains. “It’s ‘I need to be well.’ Screening and early intervention helps patients of every age stay ahead of the game.”

ISSUES OF AGING



LINA SHIHABUDDIN, MD

Geriatric psychiatry, also known as geropsychiatry, refers to mental health care of a person 65 years or older. “People seek out geriatric psychiatry for two reasons,”

Dr. Shihabuddin says. “One, they may be dealing with very normal life adjustments that come with aging, which may include retirement, loss of a partner or distance from family.

“A second level of the issue is the start of memory problems, erratic behavior, possibly unsafe driving,” Dr. Shihabuddin says. “Is this the beginning of dementia, or a reversible medical problem? That’s where the intersection of primary care, neurology and geriatric psychiatry really comes into play.” Anxiety, depression and other issues can be triggered by a wide range of conditions, such as thyroid dysfunction, vascular problems, obesity or untreated diabetes.

Once the problem is diagnosed, healthcare providers can come up with a treatment plan, which may include anything from treating a disease, to creating a safer environment at home, to finding ways to be sure the patient has activity during the day, to teaching family members how to minimize conflict.

“The last resort, for us, is to offer medications,” such as antidepressants or sleep aids, Dr. Shihabuddin says.

“Medications have more side effects for geriatric patients, and take longer to get out of the system. In treating geriatric patients, you have to start at very low dosages and slowly increase the dose if needed.”

TAKING THE FIRST STEP

Dr. Shihabuddin urges older adults (or their loved ones) to speak with their primary care provider as soon as signs of depression or anxiety appear. “The earlier you detect and treat a disorder, the better off you are,” she says.

Getting older gets a bad rap, Dr. Shihabuddin believes. “Yes, as the body ages, the neurons in the brain cells get less flexible, so it may be harder to learn new things,” she says. “On the other hand, the mind is more mature, giving older people the ability to look more analytically at situations and take them in stride. That’s what we call wisdom.

“People think about aging and they tend to think about things falling apart,” Dr. Shihabuddin says. “If we do enough early detection and prevention, it does not have to be like that.”

To learn more about geriatric psychiatry services in the RWJBarnabas Health system, visit www.rwjbh.org/geriatricpsych.

EVALUATING HEART FAILURE

Determining the degree of a patient's heart failure allows doctors to make the best recommendations for preventing, delaying or treating the condition. Cardiologists put heart failure into one of four classes, starting with symptoms. Here is the New York Heart Association Classification:

- **CLASS I:** Ordinary physical activity does not cause undue fatigue or shortness of breath
- **CLASS II:** Comfortable at rest, excessive physical activity results in fatigue and shortness of breath
- **CLASS III:** Symptoms with non-excessive physical activity
- **CLASS IV:** Symptoms at rest

The cardiologist will then do an objective assessment of the degree of heart failure based on observations as well as tests such as a blood test, X-ray, electrocardiogram, stress test and echocardiogram.

LIVING WELL WITH HEART FAILURE



IT'S POSSIBLE TO FEEL GOOD AND STAY ACTIVE, EVEN WITH A DIAGNOSIS OF HEART FAILURE.

The term “heart failure” means that this vital organ is damaged in some way. Despite the dire-sounding nature of the term, however, a diagnosis of heart failure is far from a death sentence.

“Care for heart failure patients has improved so dramatically that, although this is a chronic problem, patients who have it can live long and productive lives,” says Gary Rogal, MD, Chief of Cardiology for RWJBarnabas Health and a member of Barnabas Health Medical Group.

The key to this positive outcome is simple—but not necessarily easy. The heart failure patient must take medicine as directed and make the recommended lifestyle changes.

“The patient who listens to the things their doctor recommends they do will do better in the long term,” Dr. Rogal says. “I always tell my patients, ‘50 percent of your outcome is based on what I do, and 50 percent is based on what you do.’”

UNDERSTANDING THE TERMS

About 5.7 million U.S. adults have heart failure, according to the Centers for Disease Control and Prevention.

“‘Heart failure’ is a generic, umbrella term that covers many different disease entities,” Dr. Rogal says. “In the simplest terms, the heart is a pump, and it is failing as a pump.” The failure can fall into two different categories that often exist together: left-sided and right-sided dysfunction. (See sidebar at right.)



GARY ROGAL, MD

“People

sometimes get confused when they hear ‘heart failure,’ and ask, ‘Am I going to have a heart attack?’” Dr. Rogal says. “The reality is that they’re two different types of pathologies.”

Heart failure does not lead to a heart attack, he explains. Also, heart failure develops gradually, but a heart attack happens suddenly, when blood flow to an artery leading to the heart is blocked.

In either case, patients will receive similar advice for a heart-healthy lifestyle.

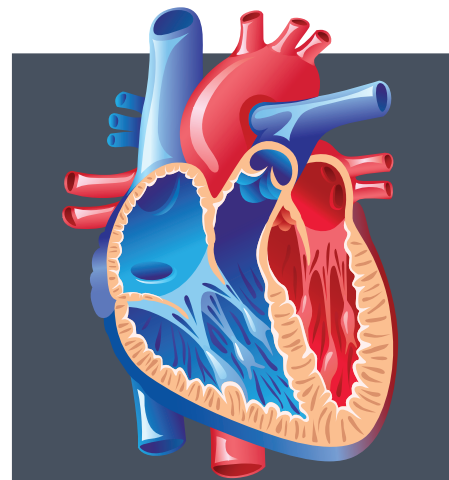
GETTING TO GOOD HABITS

Those recommendations likely come as no surprise: Take medication as directed. Exercise. Eat a healthy, low-salt diet. Stop smoking. Get enough sleep. Manage stress. Still, many patients don’t follow doctors’ orders, Dr. Rogal says. “People’s lives are so busy, and this tends to be a problem that’s not an immediate issue staring them in the face,” he says. “They think they can pay attention to it tomorrow.”

At the first sign of weakening or abnormality of the heart muscle, “I tell patients they need to start medications to help their heart muscle and begin to exercise,” Dr. Rogal says. “Walking is the easiest way to begin. And over the years, the pharmacology for heart failure has dramatically improved, so that we have a broad spectrum of medicines we can use.”

Dr. Rogal also recommends that patients with heart failure stop drinking. “Alcohol is a direct toxin to the heart muscle,” he says. “It can also lead to other issues, such as excessive sodium intake and dietary indiscretion. In my view, once you’ve started to develop any sign of heart muscle impairment, it’s time to hang up the alcohol.”

The same caution does not hold true for sexual activity. “In most cases, patients



TWO SIDES OF HEART FAILURE

WITH LEFT-SIDED HEART FAILURE, the muscle in the left side of the heart weakens so that the heart can’t pump enough blood properly (systolic dysfunction), or stiffens (diastolic dysfunction) so that the pressure in the heart goes up. Either case can result in fluid in the lungs and reduced heart output, resulting in marked reduction in exercise capacity, breathing difficulty and fatigue.

IN RIGHT-SIDED, OR RIGHT VENTRICULAR (RV) HEART FAILURE, the right side of the heart loses pumping power, leading to a backup of blood in the veins that results in swelling and congestion.

can remain sexually active,” Dr. Rogal says. “But be sure to discuss this with your doctor to ensure there are no limitations.”

Heart failure patients will find that the benefits of a heart-healthy lifestyle far outweigh the effort required to create new habits. Says Dr. Rogal, “You can live a very productive and positive life with heart failure—as long as you follow the guidelines shared by your doctor.”

YOUR HEART DOESN'T BEAT JUST FOR YOU. GET IT CHECKED.

The cardiac specialists at RWJBarnabas Health care for approximately 20,000 heart failure patients in New Jersey each year. RWJBH provides cardiac care for patients of every age and every condition, from wellness programs to heart transplants. To schedule a checkup or to learn more about world-class heart care near you, visit www.rwjbh.org/heart.



Harley (third from right) came back to Children's Specialized Hospital for a visit with friends and fellow alumni of the Chronic Pain Management Program.



WORKING THROUGH THE PAIN

HOW A BRAVE YOUNG WOMAN GOT HER LIFE BACK, WITH THE HELP OF CHILDREN'S SPECIALIZED HOSPITAL

When Katherine Bentley, MD, Director of the Pain Program at Children's Specialized Hospital, first met Harley Bourgeois, the 20-year-old had been confined to a wheelchair for more than a year.

Harley had traveled with her mother from their North Carolina home to New Brunswick so that the young woman could be evaluated for the hospital's Chronic Pain Management Program. It had been six years since Harley had been diagnosed with complex regional pain syndrome (CRPS), a chronic condition



KATHERINE BENTLEY, MD

that is thought to be caused by an injury to the nervous system, and that grows more excruciating over time.

"It was a long way to come just to be evaluated, but we had to

meet her, and she had to know what she would be getting into if she came back for the program," Dr. Bentley says. "It's a huge commitment. But she was ready for it."

UNEXPLAINED ACHES

Harley's problem started when, as a healthy middle-schooler, she had an X-ray for a minor injury that caught a suspicious abnormality on her right femur. An oncologist removed the lump, and all seemed well—but the aching in Harley's right leg never went away.

One day, the horse she was riding bucked, shooting her into the air. She landed on the same aching femur. For many months thereafter, she and her parents traveled from doctor to doctor as the pain escalated. By the time Harley got to Children's Specialized Hospital, the slightest touch—even a breeze—sent pain shooting through her body.

"CRPS is a hard diagnosis because it's a diagnosis of exclusion. You rule out everything else, test by test," Dr. Bentley says. "While we don't know everything about why a youngster might be experiencing this chronic pain, we know that intensive therapies and multidisciplinary treatment plans can help them." Harley worked with a dedicated team of physical therapists, occupational therapists, psychologists, child life specialists and physician/advanced practice nurses.

The Chronic Pain Management Program is not for the faint of heart. "Harley was

weaned off her pain meds, and had hours of therapy every day, six days a week," Dr. Bentley says. The goal of therapy is to re-train the brain to decrease sensitivity to pain. Patients can take advantage of aqua therapy in the hospital's pool, as well as cutting-edge technology like the ZeroG, a dynamic support harness that helps people walk without using their full body weight.

The program also emphasizes mental preparation for reentering the normal life that so many have lost. A typical day would include meditation, individual and group psychology sessions, peer mentoring and evening recreation.

Over the course of eight demanding weeks, Harley made progress: mastering the parallel bars, walking up a stair, walking with a walker and the ZeroG harness. Finally, one day when her mother visited, Harley surprised her by walking to her without assistance, and giving her a big hug.

That was in March 2018. Harley is now a student at North Carolina State University, fulfilling her dream of studying livestock and poultry management. She still makes time to visit her friends and former therapists at Children's Specialized.

"The takeaway of this story is, 'never give up hope,'" Dr. Bentley says. "Harley had been in such pain and dysfunction for a long time, but she kept looking for a way to get better. And thanks to her perseverance and commitment, she did."

To learn more about the Chronic Pain Management Program and other services at Children's Specialized Hospital, visit www.childrens-specialized.org.



A QUESTION OF BALANCE

SPECIALISTS CAN FIND OUT WHY YOU FEEL DIZZY— AND HELP MAKE THE FEELING STOP.

If you've ever felt like the room is spinning, you understand a bit of what it's like for people who have problems with the inner ear and other balance difficulties. For some, the spinning rarely stops. The impact on their life and livelihood can be significant.

"Some people feel dizzy with every single movement," says Frank J. Mazzarella, MD, CHCQM, Chief Medical Officer at Clara

Maass Medical Center (CMMC). "They cannot work, drive or even walk. They become bound to their bed or chair, because that's the only place where they feel better."

Many do not get the right diagnosis,

and so they live with the problem, he says.

Nationally, as many as 35 percent of people over the age of 40, and 85 percent of those over age 85, have some problem with balance. At the Comprehensive Balance Center at CMMC, specialists evaluate and treat approximately 80 new patients with dizziness and vertigo every month.

PINPOINTING THE CAUSE

Vertigo is the feeling of whirling or spinning. Dizziness is feeling lightheaded or unsteady. Either sensation can put someone at risk for falls and injuries.

Symptoms are sometimes caused by inner ear or balance disorders (vestibular disorders). Other times, they are caused by medications, head injury, issues with the eyes, and health conditions such as stroke.

"We use a very new, state-of-the-art device called the vestibular rotary chair, that can help us to pinpoint the cause of the

DO YOU NEED A BALANCE TEST?

You might benefit from Balance Testing at Clara Maass if you:

- Feel unsteady or feel like you're falling
- Have fallen
- Feel the room is spinning
- Get dizzy when you lay down or turn over in bed
- Feel like you're moving, though you are sitting still
- Have blurry vision
- Feel disoriented, lose your sense of time or where you are

If even one of these applies to you, talk to your doctor or call the Comprehensive Balance Center at Clara Maass Medical Center at **888.297.1507**.

disorder," Dr. Mazzarella says. "It also helps us diagnose whether an inner ear problem affects one or both ears."

During the vestibular chair test, the patient wears special goggles similar to those used in video games. As the patient watches images, the chair swivels slowly from side to side. A computer closely tracks eye movements, giving the specialist highly accurate information to make a diagnosis.

Not every balance center has invested in this technology, Dr. Mazzarella says. But the specialists at CMMC know it's an important part of making the right diagnosis, so they can create the right treatment plan.

Depending on the cause, treatment might include medications. The most effective treatment involves working with an physical therapist experienced in this kind of care.

"Because we are a comprehensive center, we have the specialists to do everything, from evaluation to testing and treatment, all in the same location," Dr. Mazzarella says. "If you have a concern about balance, call us to discuss how you might benefit from further testing."



FRANK MAZZARELLA, MD



“KNOW WHAT’S NORMAL FOR YOU”

RWJBarnabas Health and Clara Maass Medical Center, in partnership with Rutgers Cancer Institute of New Jersey—the state’s only NCI-designated Comprehensive Cancer Center—brings a world-class team of researchers and specialists to fight alongside you, providing close-to-home access to the latest treatment and clinical trials.

A SPECIALIST GIVES ADVICE ON DETECTING—AND DEALING WITH—OVARIAN CANCER.

To learn more about gynecologic oncology services at Clara Maass Medical Center, visit www.rwjbh.org/gynonc.

The topic of ovarian cancer can be especially frightening for women. Because it shows few symptoms until it’s fairly advanced, it is often described as a “silent killer.”

Many women worry that they’ll miss possible early symptoms—such as pelvic pain, bloating, fatigue, a feeling of fullness or needing to urinate more frequently—that could also indicate a more mundane ailment.

Noah Goldman, MD, a gynecologic

oncologist at Clara Maass Medical Center, understands the frustration. He also understands the fear of ovarian cancer, which ranks fifth in cancer deaths among women.

“Symptoms can be hard, but not impossible, to detect,” he says. “However, people need to know that a diagnosis of

ovarian cancer is not a death sentence. That's an old wives' tale.

"There have been some really big strides made in terms of treatment."

A PRUDENT APPROACH

The key to catching early symptoms, Dr. Goldman says, is to know your body. "Yes, everybody has bloating at some point, or back pain, or urinary symptoms," he says. "But things that don't resolve themselves within a week or so need to be investigated. Ovarian cancer shouldn't necessarily be the first thing in someone's head, but should certainly be in the conversation."

Women who are diagnosed early have a much greater five-year survival rate. "Listen to your body, and if you recognize that something is happening that's not normal for you, seek help either from your primary care provider or your gynecologist," Dr. Goldman advises. "Getting to the doctor early is important. It's better to be seen and told there's nothing wrong than to ignore symptoms."

To help women track symptoms of ovarian and other gynecologic cancers (cervical, uterine, vaginal and vulvar), the Centers for Disease Control and Prevention provides a downloadable two-week symptoms diary. (Find it and more information at www.cdc.gov/cancer/knowledge.)

REASON FOR HOPE

Despite greater awareness, the fact remains that the majority of women with ovarian cancer are diagnosed when the disease is beyond the early stage. "Unfortunately, the need for early detection remains the real crux of the matter, and researchers are always trying new ways to find a reliable screening," Dr. Goldman says.

By the time a patient is in Dr.



NOAH GOLDMAN, MD

Goldman's office, she has been through rounds of testing, and decisions must be made about the next step. "We have the discussion about whether it's necessary to do



Ovarian cancer survivor Pam Alson

LESSONS FROM A SURVIVOR

Pam Alson's journey with ovarian cancer has been a successful but long one—and one that's left her with wisdom she wants to share with others: "Be your own advocate."

In 1996, Pam had an abdominal mass removed that, her doctor told her, was benign. In 2004, now with a new doctor, she had surgery for another abdominal mass. "Your ovarian cancer has recurred," the surgeon told her. Indeed, her records showed that the first mass had been cancerous—a fact that the first doctor had not shared.

In 2006, an intestinal blockage was discovered. "My surgeon literally snapped his fingers and said he'd go in and remove it," Pam recalls. The major surgery that followed led to an infection and an arduous, year-long recovery period.

In 2009, a marker in Pam's blood indicated another tumor. "This one was in a very bad place, in the blood vessels near my heart," she recalls. "The same surgeon snapped his fingers again and said, 'I'm going in to take care of this.'"

That didn't sit right with Pam. "I thought it was very aggressive," she says. "The cancer journey is tough, and at first you're like a deer in the headlights, but by this point I was more savvy. I was able to say, you know what? I need a second opinion."

With a friend, Pam conducted extensive research into doctors with expertise in her very rare type of cancer, granulosa cell tumor. That search led her to gynecologic oncologist Noah Goldman, MD. "I went to see him and he told me, 'I am not a cowboy,'" Pam remembers. "He said he would not do surgery, but would go the route of chemo and radiation." The course of treatment took care of Pam's tumor without damaging the vessels around her heart. "I believe Dr. Goldman saved my life, because I don't think I would have survived the surgery," Pam says.

In 2015, Pam required another pelvic surgery, which Dr. Goldman performed. In May 2018, Pam required a fifth surgery, which Dr. Goldman was able to do laparoscopically at Clara Maass Medical Center.

"I walked out of the hospital the same day," she says. "And Dr. Goldman had tests done on my tumor and told me we now have new options in the chemo area. That was like a breath of fresh air.

"When you put yourself in a doctor's hands, you should feel safe," Pam says. "That's how I feel with Dr. Goldman. He's accessible, he's knowledgeable and he's kind. I can't say enough good things about him."

Any woman undergoing treatment deserves the same, she says. "You can switch doctors. Be sure to keep a notebook, get copies of all your test results, talk to other people who have done it and do your research.

"Be your own advocate—and find a doctor who is willing to allow that relationship."

chemotherapy up front to shrink tumors, or whether an operation can remove all disease," he says.

Depending on her individual case, a patient may also be eligible for targeted (biologic) therapies that attack cancer cells while doing little damage to normal cells.

"I always give my patients the 'rule of 20s,'" Dr. Goldman says. "Twenty percent of patients will get treated and never

have any problems again. For another 20 percent, treatment is not going to work and they are going to succumb to the disease.

"And for 60 percent, this is going to be a chronic disease that gets treated and goes away, comes back and gets re-treated. Since the average age for getting ovarian cancer is around 64, a woman can have another 10, 15 or 20 years of living with this disease."

THE WILL TO LOSE WEIGHT

WHAT HAPPENED WHEN ONE YOUNG MAN WENT ALL IN ON WEIGHT-LOSS SURGERY

After college, Joseph Rosania gained weight. So much so that the lifelong athlete had ballooned from about 250 pounds—“a little on the heavy side, but nothing to write home about,” he says—to more than 400 pounds before he hit age 30.

“I was traveling a lot for work, eating out, living in hotels,” the Morristown resident says. “I went from playing sports my entire life to not doing much physical activity, and I started gaining weight, year after year.”

He tried various diets—the Atkins Diet, Nutrisystem—only to gain the pounds back. Still, he maintains, he wasn’t too worried. “Sometimes you look in the mirror and don’t see yourself as you truly are,” he says.

His family and friends were worried about him, though. His primary care provider warned that he was prediabetic and that his cholesterol was high. His father, a chiropractor, heard through some of his own patients about Naveen Ballem, MD, a bariatric surgeon at Clara Maass Medical Center, and recommended that Joe go to see him for an evaluation.

“Dr. Ballem laid everything out for me,” Joseph says. “He had me meet with a nutritionist and a physical therapist.” Initially uncertain, Joseph did some

soul-searching and started to think about his future.

“After a while, I thought, you know what? This [bariatric surgery] is something I’m going to do. And I’m going to commit to it fully.” The surgery was set for September 2017.

REDUCING HUNGER

Bariatric (weight-loss) surgery involves decreasing the size of the stomach. Joseph had a surgical procedure called the gastric sleeve, in which the stomach is reduced to a quarter of its original size. As a result, patients feel full faster. The surgery also reduces the production of the so-called “hunger hormones,” ghrelin and leptin.

“By the time most people come to me, they’ve tried diet and exercise and have seen short-term success,” Dr. Ballem says. “In the long term, however, those options have fallen short, and they’ve gained the weight back.

“Being overweight is a multidisciplinary problem that encompasses a lot of factors—habits, genetics, lifestyle—and it’s important to work on all of those things. But once a person’s BMI [body mass index, a weight-to-height ratio] is greater than 35, most people need an extra tool. Bariatric surgery can be that.”

Joseph made good on his promise to

commit to the surgery and to the permanent lifestyle changes that were required in order to lose weight and keep it off. “The surgery curbed my hunger,” he reports. “I can eat anything I used to eat, but the size of a meal now is what will fit in the palm of my hand. I joke that I went from a 42-ounce porterhouse to a petite filet.” Through follow-up sessions with a nutritionist, he learned to keep track of what he eats, to cook healthier and to eat more grains, fruits and vegetables.

He also got back to the gym, taking the kind of structured classes that remind him of the coach-led workouts of his school days. He took up running and worked his way up to a 5K and then a 10K. Thirteen months after the surgery, he was down to 190 pounds.

“Joseph was just an incredibly motivated young man. Not only is he medically healthier today, his personality now shines through,” Dr. Ballem says. “He’s so energetic, so outgoing, and he’s living his healthiest and best life.”

Weight-loss surgery helped Joseph Rosania get back to being a runner.



NAVEEN BALLEM, MD

To learn more about bariatric surgery at Clara Maass Medical Center, attend one of the monthly “Surgical Options for Weight Loss” seminars led by one of CMMC’s bariatric surgeons. To register, call **973.450.2393** or go to rwjbh.org/weightloss.

HELP FOR WOUNDS THAT WON'T HEAL

FOR PEOPLE WITH DIABETES, EXTRA AWARENESS—AND EXPERT CARE—CAN REDUCE WOUND-RELATED RISKS.



It's no exaggeration to say there are people standing (and walking) on their own two feet because of the work at The Wound Center at Clara Maass.

The Center treats more than 200 patients a week for all kinds of injuries that need help healing, including post-surgical wounds. But foot and lower leg wounds are especially worrisome when they occur in people with diabetes.

"A diabetic ulceration, which is basically a hole in the integrity of the skin, is really a medical emergency," explains Frank Arena, DPM, Medical Director of The Wound Center. "Sometimes diabetic wounds get infected. A patient can then become septic and have to be admitted to the hospital. They may face multiple surgeries, amputation or even death."



FRANK ARENA, DPM

These complications arise from conditions that often accompany diabetes. One of these is an impaired ability to fight infection. Another complication is

an increased incidence of peripheral vascular disease. "The development of peripheral neuropathy is one of the most common precipitants of a diabetic wound. With this condition, the feet initially have burning sensations or pain but eventually become completely numb. In the absence of pain, people are more apt to injure themselves and ignore a potential problem," Dr. Arena explains.

While the risks are greatest for people whose diabetes is poorly controlled, diabetic ulcerations can become a problem for people at any stage of the disease. "I advise anyone with diabetes to consult a doctor right away for even small foot and leg wounds," Dr. Arena says. "Complications can happen very quickly."

STEPS TO HEALING

The Center's wound-care team comes from multiple specialties and has an arsenal of both high- and low-tech treatments available. "We can reduce wound-healing time by weeks or even months," Dr. Arena says. Some of the most effective treatments include:

- **Tissue replacement:** With products such as Apligraf and Dermagraft, wounds are treated with skin equivalents made from

healthy human skin cells. Applied to open wounds, these products protect them and help them heal faster.

- **Vacuum-Assisted Closure (VAC):** A machine with a sponge-like attachment provides low-grade suction to help wounds close and heal faster.
- **Total contact casting:** A special fiberglass cast takes the weight off a wound, allowing patients to be mobile and walk even as their wound is healing.
- **Hyperbaric oxygen therapy:** A patient breathes oxygen at higher than atmospheric pressure for a couple of hours a day, oxygenating the blood so it can heal wounds more quickly.

"We've had patients who were actually scheduled for amputations come to the Center for a second opinion, and we were able to help them," Dr. Arena says. "But every wound we help heal, no matter how small, is a success."

To learn more about The Wound Center at Clara Maass, call **973.844.4070** or visit rwjbh.org/clarawound.



FALLING FORWARD

WHAT HAPPENED WHEN A HOSPITAL EXECUTIVE GOT A PATIENT'S-EYE VIEW

In March 2017, an accident turned Bonnie Geissler, MHA, RN, into a patient at Clara Maass Medical Center (CMMC) in a split second. “I took a hard fall on a hard floor,” she says. “It happened so fast, I didn’t even have time to brace myself.” The result was a badly broken kneecap.

Just weeks before, Geissler had begun a temporary position at CMMC as the Interim Chief Nursing Officer and Vice President for Patient Care Services. When she fell, she happened to be with CMMC surgical team members as they were all getting ready to go to a meeting.

Some of her new colleagues secured a pillow and blanket to keep her warm on the cold floor. Others alerted the Emergency Department (ED), operating room and radiology teams. With Geissler’s leg in an unnatural position because of the break, ED staff members started problem-solving about the best way to move her without causing more damage.

“Immediately after my fall, everyone was doing what they do every day,” Geissler says. “No one missed a beat. It was just second nature to them.

“It was surreal, since I was the one they were taking care of,” says the longtime nurse. “It was also impressive, because of how compassionate and competent everyone was.”



FRANK FEMINO, MD



BONNIE GEISSLER, MHA, RN

A COMPLEX REPAIR

“Her kneecap was literally broken in half, and her pain was a concern,” says Frank Femino, MD, Geissler’s surgeon and Director of Orthopedics at CMMC. “Thankfully,

by the time she arrived at the operating room, staff had already gotten her blood work and X-rays. We wasted no time getting her into surgery.”

Dr. Femino and his surgical team completed the complex knee repair that evening and Geissler was home the next day. Over the following weeks and months of recovery and rehabilitation, she got to know even more of her new CMMC colleagues. Whether recovering at home, getting physical therapy or going about her work in the hospital, she gained a new understanding of the atmosphere at CMMC.

“Ingrained in the culture here is an understanding of the whole person, and the commitment to take care of the patients and families who spend time with us,” Geissler says.

Having had more than 40 years’ experience working for RWJBarnabas Health, Geissler was familiar with excellent care throughout the system. CMMC, though, felt special. With the benefit of her experience as both colleague and patient, Geissler was pleased to accept an offer to become permanent Chief Nursing Officer and Vice President for Patient Care Services at CMMC.

“You can’t teach the kind of care and compassion I’ve seen here firsthand. It is so natural to all the employees here,” Geissler says. “It’s one of the reasons I decided to stay, and I’m so happy I did.”

To learn more about orthopedic care services at Clara Maass Medical Center, visit www.rwjbh.org/ortho or call **973.450.2399**.

GETTING READY FOR BABY

FROM CHILDBIRTH PREPARATION TO INFANT CARE, CMMC HAS YOU COVERED.



Having a baby is one of life's most exciting experiences—and, for first-timers, the prospect may also be a bit intimidating. That's where Clara Maass Medical Center (CMMC) steps in, with a range of Parent Education Programs to help answer every question.

"It's important for the community to have access to the information they need in order to have a healthy, happy pregnancy and childbirth," says Michael Straker, MD, Director of the Department of Obstetrics and Gynecology at CMMC. "It's especially valuable to find out about the childbirth experience at the hospital where you're going to deliver."

WHEN, WHERE AND HOW

Tours of CMMC's state-of-the-art labor, delivery and recovery unit are offered on the first Sunday of each month. The unit houses six contemporary suites with private bathrooms and showers.



MICHAEL STRAKER, MD

Expectant

parents can also get ready for the big day by attending the Preparing for Childbirth class, which discusses available birth options as well as offering practice in birthing skills. Children ages 3 and up can enjoy the Welcome Baby! Sibling Program.

Each month, a Breastfeeding Workshop, run by a Certified Lactation Consultant, offers reassurance about breastfeeding and the knowledge needed to establish it successfully. "We are here to assist in meeting your goals," Dr. Straker notes. "The child isn't born knowing how to breastfeed, and breastfeeding is not intuitive for the mom. It's important for parents to have access to support and to information about breastfeeding techniques." After the baby is born, CMMC's "Warm Line" (973.450.2868) is available 24 hours a day for parents to leave questions about breastfeeding, which will be answered by a Certified Lactation Consultant as soon as possible.

Whether pre- or post-birth, parents and caregivers can attend an Infant Massage

and/or an Infant Care class to help them navigate a whole range of baby basics. Infant massage is a proven way to improve a baby's sleep and digestion, and to reduce stress for both parents and babies.

ADVICE EVERYWHERE

Expert advice from healthcare providers can be a useful balance for the flood of advice that expectant and new parents tend to get.

Dr. Straker advises his patients to take advantage of all information sources available to them, with one caveat: "Don't necessarily take someone's advice or what you read as gospel," he says. "They are giving you their own experience, but that won't necessarily be your experience. That's why you have healthcare providers—to be the resource you need for your particular situation.

"As a parent of two children of my own, I tell my patients that babies don't come with instruction manuals," he says. "But you will figure out what works for you and your child."

Registration is required for all Parent Education Programs. To learn more and to register, call **1.888.724.7123** or visit www.rwjbh.org/maternity.

Clara Maass Medical Center: Among the best in the US, again.

Nationally recognized for patient safety and quality for the 11th time.



Continuing a tradition of delivering health care excellence, Clara Maass Medical Center earned an A grade for patient safety and quality from The Leapfrog Group for Fall 2018.

This marks the 11th time overall that we have achieved the highest national standard for the quality and safety of the care we provide, and we are grateful to the patients and families who choose Clara Maass Medical Center for their health care. We remain committed to putting our patients first.

Congratulations to the Medical Staff, employees and volunteers at Clara Maass Medical Center on this remarkable achievement.