

HEALTH U



Hackensack
Meridian Health

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Spring Into Better Health

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Below the Surface

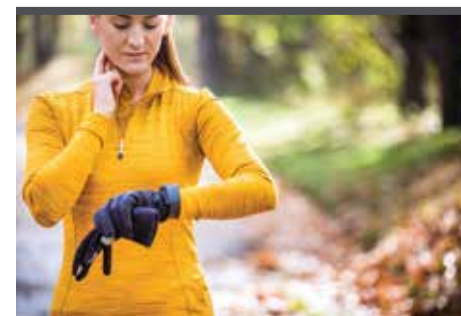
Ovarian cancer can be a “silent killer” because it’s often not found in early stages. Here’s what you should know about warning signs.



Tune in to our HealthU podcast!
For more details, visit
HMHforU.org/Podcast.



Moving soon? Download the ultimate moving checklist to help you transition your health care at HMHforU.org/MovingChecklist.



Find six reasons your heart rate is high—and what to do about it—at HMHforU.org/HeartRate.



Pregnancy comes with a lot of decisions. Here’s why the COVID vaccine is an important one: HMHforU.org/PregnancyVax.

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HealthU is a 2021 APEX Award winner and a 2021 Content Marketing Awards finalist.



BetterU

quick tips to help you live your healthiest life

Health for Generations

They say everything changes when you become a parent. Our day-to-day looks different, our priorities shift, and it seems like our hearts expand to new sizes. I've long known that to be true, but I recently learned the same applies when becoming a grandparent.

Earlier this year, I became a first-time grandfather with the birth of my granddaughter. It's been a joyous time and a great reminder to prioritize my health. If we want to be active participants in our children's and grandchildren's lives—and take part in all of their milestones—our health has to come first.

Part of putting our health first means eating well and staying active through regular exercise. That's not always easy when we are on the go. In this issue, you'll find three helpful tips for making time for physical activity amidst a busy schedule (page 5). On page 7, you'll find a four-step recipe for grilled Greek salad using delicious and nutritious heart-healthy ingredients. You can always find additional tips for healthy eating and exercise at [HMHforU.org](https://www.hmhforu.org).



Bob Garrett became a first-time grandparent this year with the birth of his granddaughter.

I also encourage you to stay on top of preventive screenings. If you haven't seen your primary care doctor in a while, schedule an annual wellness visit to check in and get recommended care. If you don't have a doctor, you can search for one near you at [HMHforU.org](https://www.hmhforu.org).

FindADoc. You can also find an easy-to-reference guide for when to get which screenings at [HMHforU.org/GetScreened](https://www.hmhforu.org/GetScreened).

Lastly, I encourage everyone—including my fellow grandparents—to get vaccinated and boosted against COVID-19, and to continue following appropriate protocols. The past few years have taught us a lot about resilience, and I often think about what I'll tell my granddaughter someday about living through these challenging times.

I know part of the story will be how fortunate I was to work with people who are committed to giving their all regardless of the challenge. The other part will be how so many of us in our community came together in a time of great need to care for those around us. 🌟

Robert C. Garrett, FACHE, CEO
Hackensack Meridian Health



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Rise and Shine!

Easy morning exercises for busy people

Many of us plan to work out every day but often go to bed each night without having found the time for any meaningful physical activity.

Making time for exercise is beneficial in many ways: It helps lift your mood, boost your energy levels, control your weight, lower your risk of chronic health diseases and improve your sleep quality. Although it may seem daunting to find additional time in your schedule for physical activity, it's worth it. Many people feel that they're better parents, partners, friends and employees when they exercise regularly.

Try these three tips for getting in exercise while maintaining a busy schedule.

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1

Break It Up

Adults should get 30 minutes of moderate-intensity physical activity every day, or 150 minutes per week. If you don't always have an entire half hour to devote to exercise, you can break the time into two or three chunks over the course of the day.

2

Put It on the Schedule

Block off exercise time on your calendar, and follow through on it the same way that you would honor a work meeting or a doctor's appointment.

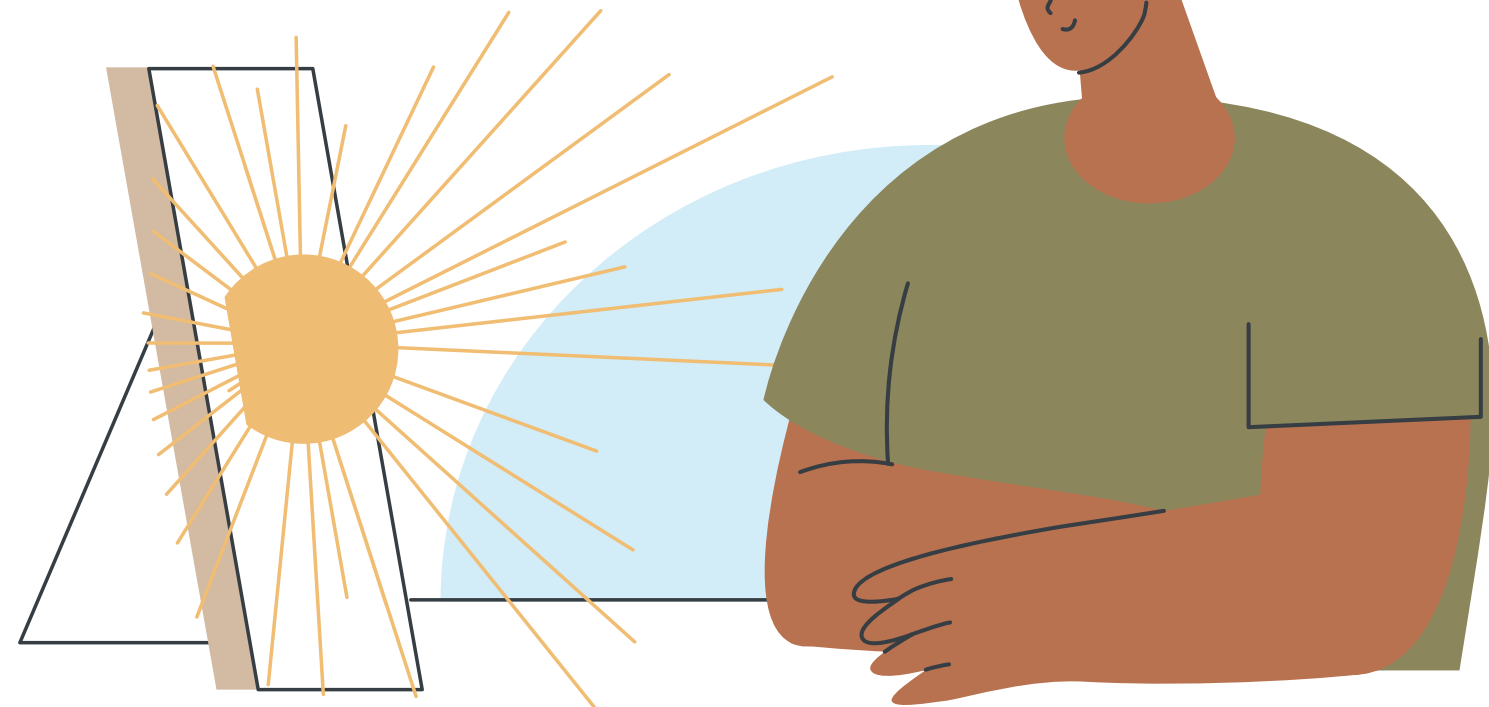
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Conquer It Early

Consider exercising in the morning before unexpected work or family plans can derail your efforts to get some physical activity. You'll start off your day feeling accomplished with one notable task from your to-do list already checked off. It may help if you set out your workout clothing the night before—you'll have one less thing to think about in the morning.

Go Online

Find more tips for living a healthier life through exercise at [HMHforU.org/Exercise](https://www.hmhforu.org/Exercise).



Bright Side

Can light therapy lamps help with depression symptoms?

Bright light therapy, also known as phototherapy, is safely used to treat a number of illnesses, including sleep disorders, jet lag and especially a type of depression called seasonal affective disorder (SAD).

People with SAD experience depression symptoms especially during months with fewer daylight hours. "Light therapy is not a cure but can help reduce symptoms of depression, such as lack of energy, trouble sleeping, anxiety, and feelings of sadness, hopelessness and irritability," says **Adriana Phan, M.D.**, a psychiatrist at **Hackensack University Medical Center**. "Light therapy has few side effects and may increase the effectiveness of antidepressants or other treatments for depression."

How Sunlight Affects the Brain

People with SAD may want to sleep more and be less active. Scientists believe that it's because of how sunlight affects the brain. "Light may stimulate the parts of the brain that control mood, appetite and sleep, which can contribute to how a person feels," says Dr. Phan. "When there is less sunlight, some people may not produce enough melatonin, a hormone in the



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Hackensack and Maywood

brain that is involved with sleep, or serotonin, another hormone that manages mood, appetite and sleep."

Researchers also suspect that a person's circadian rhythm is thrown off when there is a lack of sunlight. "The brain has a biological clock known as circadian rhythm that regulates the body's functions," says Dr. Phan. "During days with less sunlight, some people get depressed."

How Light Therapy Works

During light therapy, a person sits in front of a lamp and is exposed to bright white light for a period of time. The light may be set to a lower lux level (how illuminance is measured), then gradually increased. Depending on the individual, treatment might last from 20 minutes up to three hours, and a person might have light therapy once or more per day for consecutive days until

symptoms improve. A doctor can provide guidance on how long to use light therapy.

It can take a few days to a couple of weeks for symptoms to improve; it takes time and consistency. Once symptoms improve, you can stop or reduce light therapy. "It's important to keep track of how you are feeling and how long you use light therapy each day, and communicate with your doctor so treatment can be adjusted as needed," says Dr. Phan.

If you experience bothersome side effects such as headaches, eyestrain, nausea or agitation, spend less time exposed to light and ask your doctor for advice.

Where to Get a Light Therapy Lamp

You can buy a light therapy lamp or box online or at a home goods store. They cost between \$20 and \$500. Talk with your doctor about which light therapy device is right for you. Keep in mind that light used for SAD is different from light used to treat skin disorders that emits UV light. Light boxes used for SAD filter out harmful UV light.

"If symptoms of depression, decreased energy and poor sleep persist despite using light therapy, reach out to your physician or a mental health expert to determine if additional interventions may be necessary," Dr. Phan says.

Learn about behavioral health services at Hackensack Meridian Health at [HMHforU.org/MentalHealth](https://www.hmhforu.org/MentalHealth).

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4 Ways to Lower Your Cholesterol

About one-third of Americans have higher-than-normal cholesterol levels, and almost 10 percent have total cholesterol levels that are 240 mg/dL or higher, which puts them at greater risk of developing heart disease. "We no longer focus on total cholesterol, but we look at the good [HDL], bad [LDL] and ugly [triglycerides] components of your cholesterol to guide a better understanding of your risk for a heart attack or stroke, as well as guide ways for you to improve upon them," says cardiologist **Michael Lim, M.D.**



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Lifestyle changes may help you lower your cholesterol levels to an acceptable range. Eating nutritious foods, exercising regularly, losing weight and quitting smoking all may help decrease your LDL cholesterol levels and/or increase your HDL cholesterol levels.

Consider these options:

1 Eat more fiber. Fruits, vegetables, beans and whole-grain foods like oats or barley may help lower your LDL cholesterol levels.



2 Decrease animal fat (saturated fat). Saturated fats—typically found in beef, pork, cheese, butter, chicken skin and coconut oil—can increase your LDL and total cholesterol levels.



3 Avoid trans fats. To help lower your LDL cholesterol levels, reach for heart-healthy oils like olive oil or avocado oil instead of cooking with partially hydrogenated vegetable oils like margarine.



4 Go Mediterranean. Increasing nuts, avocados, olive oil, fish (think salmon or tuna), flaxseeds and leafy green vegetables in your diet may help lower LDL cholesterol levels.



For additional tips on eating healthy, visit [HMHforU.org/Nutrition](https://www.hmhforu.org/Nutrition).



Grilled Greek Salad

Serves 2

Ingredients

- 2 teaspoons olive oil
- ½ teaspoon black pepper
- 2 heads romaine lettuce, halved lengthwise, ends trimmed
- 2 tablespoons feta cheese, crumbled

Steps

- 1 Mix topping ingredients with vinegar and oil, then set aside.
- 2 In a heavy pan, heat olive oil and pepper to medium-high.
- 3 Before the oil starts to smoke, add the romaine, cut side down. Weigh the lettuce down with a heavy lid. There should be a nice sear within 2–4 minutes. Turn over and cover for another minute or two, then plate.
- 4 Spoon the mixture generously over the lettuce, sprinkle feta on top and serve.

Toppings

- 1 cup cherry tomatoes, halved
- 1 cup cucumbers, cubed
- ¼ cup red onion, diced and/or pickled
- ¼ cup Kalamata olives, pitted and halved (optional)
- 2 tablespoons herbs, such as oregano and dill
- 1 teaspoon olive oil
- 1 tablespoon red wine vinegar

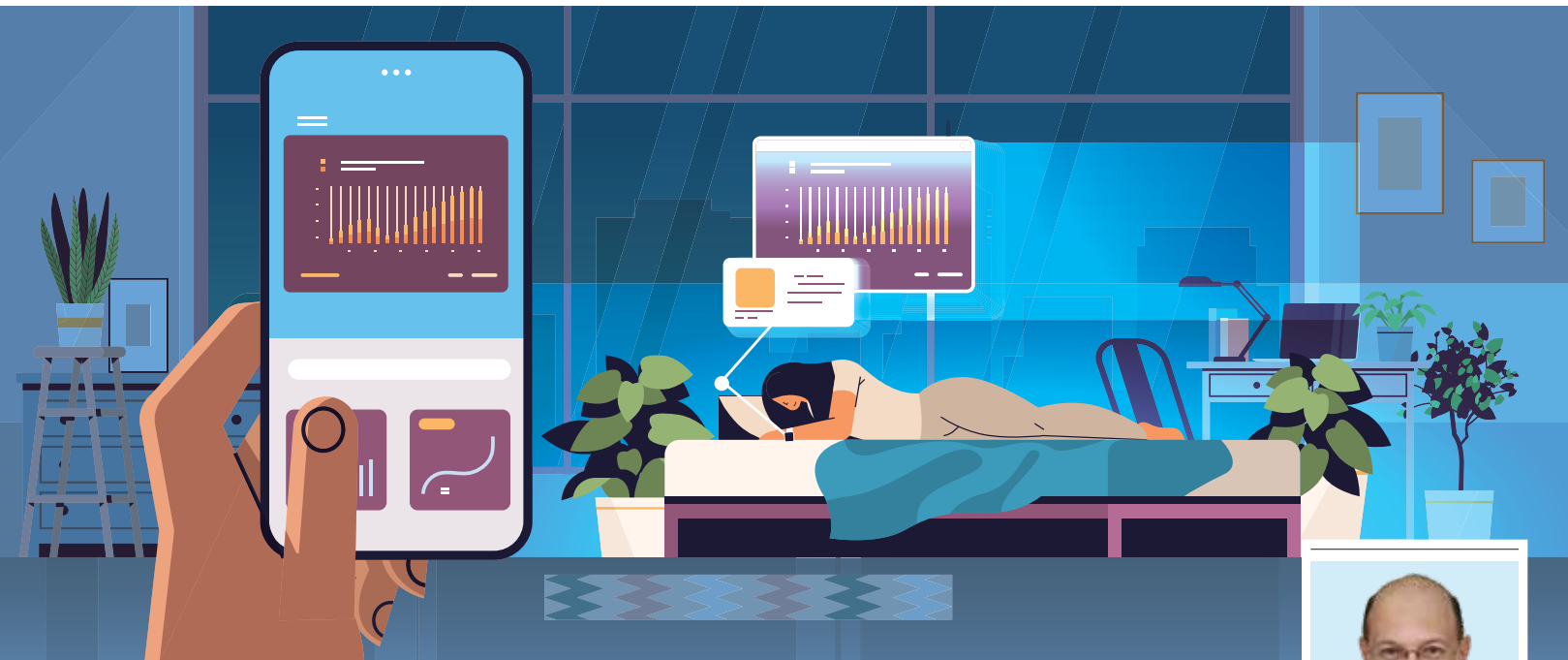
Seasoned Cook

If you're having this as a meal, add more protein with lentils, beans, chicken or canned fish. To make a Nicoise version of this dish, add tuna, an egg and potatoes. The lettuce makes a great base for other leftovers, too.

Nutritional Information

Per serving: 202 calories, 7g protein, 20g carbohydrates, 7g fiber, 12g fat (3g sat fat, 8g mono/poly), 295mg sodium

Find more recipes and tips for healthy eating at [HMHforU.org/HealthyEating](https://www.hmhforu.org/HealthyEating).



Can wearables help you sleep?

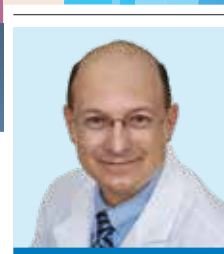
John Villa, D.O., weighs in:

Wearable sleep trackers (watches, rings, bracelets, etc.) can encourage you to get more rest and help you establish good sleep habits. They may accurately depict the amount of time you spend in bed, even if they don't show exactly how long you've been asleep. If you want to improve your sleep quality, a wearable device may encourage you to consistently go to bed on time to ensure you clock enough time in bed.

Keep in mind that the information wearables provide is not as reliable as the data that doctors can get during an overnight sleep study. They can't reliably determine whether

you're falling asleep or if you're already asleep, and because they can't accurately assess how deep your sleep is, they aren't good judges of overall sleep quality—at least for now. They also aren't adept at recognizing short naps as periods of sleep.

If you track your sleep for a few weeks and notice problematic patterns, such as middle-of-the-night tossing and turning, it may be helpful to discuss the data with your doctor to determine if you may have insomnia, sleep apnea or another problem that's affecting your sleep.



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Read more at [HMHforU.org/Wearables](https://www.HMHforU.org/Wearables).

What causes brain freeze?

Regina Krel, M.D., weighs in:

Brain freeze is often referred to as an ice cream headache and is medically known as a sphenopalatine ganglioneuralgia. It happens when the cold hits the roof of your mouth or back of your throat, changing the temperature.

It's thought that the pain of brain freeze is caused by the triggering of the trigeminal nerve, which carries sensory information from your face and around your head to your brain.

Once activated, the blood vessels constrict from the cooling. To adjust to the drastic temperature change, your body sends more blood to warm the affected area, causing the blood vessels to swell. It's believed that brain freeze pain is caused by the constriction and then rush of blood.

Read more at [HMHforU.org/BrainFreeze](https://www.HMHforU.org/BrainFreeze).

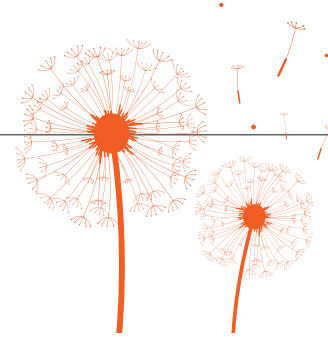


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Can you develop allergies as an adult?

Juan Ravell, M.D., weighs in:

While most allergies present themselves during childhood, it is certainly easy to develop them as an adult.

In fact, it's becoming increasingly common for people to develop allergies in adulthood. That may be due to several factors:

An aging population. As we age, our immune system becomes weaker over time, and we are more susceptible to illness, including allergies.

A changing environment. There are higher amounts of pollen and mold in our atmosphere, which may cause people who never had allergies to develop symptoms.

Hypervigilant focus on cleanliness. In the last few decades, we have become increasingly preoccupied with using antibacterial soaps, alcohol-based hand sanitizers and bleach for wiping down surfaces. As a result, our

immune systems aren't used to fighting off minor invaders, so our bodies can overreact with more concerning allergy symptoms.

If you notice allergy symptoms coming on shortly after an activity, such as eating a certain food, taking a new medicine, petting a cat or mowing the lawn, make an appointment to see your doctor. Your doctor may recommend that you see an allergy specialist and get tested to find out what you're allergic to.



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Learn more at [HMHforU.org/AdultAllergies](https://www.HMHforU.org/AdultAllergies).

How often should you wash your clothes?

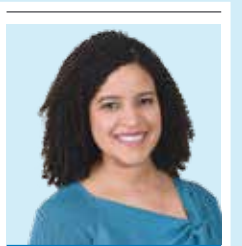
Magna Josefina Pastrano Lluberes, M.D., weighs in:

It depends on a few factors. You can follow this guide.
▶ Wash new clothing before wearing
Wash these items after every use:
▶ Socks
▶ Underwear
▶ Bathing suits
▶ T-shirts
▶ Shirts that fit snugly and are worn directly against the skin
▶ Workout clothing you've sweated in
▶ Stained clothing
▶ Clothing worn while sick

Wash these items after two or three wears:
▶ Bras
▶ Pajamas
▶ Loungewear that you relax in around the house after you come home from work

Wash these items after four or five uses:
▶ Jeans
▶ Pants
▶ Sweaters
▶ Sweatshirts
▶ Dress clothing

Read more at [HMHforU.org/Clothes](https://www.HMHforU.org/Clothes).



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Below the Surface

Ovarian cancer can be a “silent killer” because it’s often not found in early stages. Here’s what you should know about the early warning signs.

More than 21,000 American women are diagnosed with ovarian cancer every year, and 14,000 die from it, according to the American Cancer Society (ACS). But only about 20 percent of ovarian cancers are found early, a dismaying statistic stemming from several key factors, says **Donna McNamara, M.D.**, chief of medical gynecologic oncology at **Hackensack University Medical Center** and co-director of **John Theurer Cancer Center**.

“The problem with ovarian cancer is that it doesn’t present with many symptoms,” she explains. “There’s also no standardized screening test because, unfortunately, scientists haven’t yet discovered any that detect this cancer at an earlier stage.”

Dr. McNamara notes that Pap smears—screening tests for cervical cancer—do not look at the ovaries, so they do not screen for ovarian cancer.

Hallmark Signs of Ovarian Cancer

Another obstacle to ovarian cancer detection is the fact that early symptoms are often vague and resemble those of other ailments.

These signs can include:

- ▶ Bloating
- ▶ Fatigue
- ▶ Abdominal pain or pressure
- ▶ Nausea
- ▶ Gassiness
- ▶ Feeling unusually full after eating
- ▶ Changes in bowel habits
- ▶ Bladder changes, including increase in urination amount or frequency
- ▶ Lower back pain
- ▶ Menstrual changes
- ▶ Painful intercourse

If any of these symptoms are persistent or you experience them more than 12 times per month, Dr. McNamara urges you to make an appointment with your doctor.

Lyndhurst, New Jersey, resident Diane Papamarkos learned she had ovarian cancer in 2017 after experiencing bloating that was so sudden and dramatic, it appeared as though the 64-year-old was pregnant—a symptom Dr. McNamara calls “one of the hallmark signs.”

“If tumor cells start falling off the ovary, which we call ‘seeding,’ they can spread anywhere throughout the abdominal cavity,” explains Dr. McNamara, who treated Diane after she was diagnosed at stage 3. “Ovarian cancer can then start leaking fluid into the abdominal cavity. Because the cancer is sitting on top of the bowel and this fluid is pushing on organs, we see gastrointestinal symptoms such as bloating and gassiness.”

After being diagnosed using imaging tests that included an ultrasound and CAT scans, Diane underwent nine rounds of chemotherapy that wiped out some of her tumors. Surgery to remove her reproductive organs and all visible traces of cancer was next, then three more rounds of chemotherapy. This time, it also included an innovative technique that infuses warmed anti-cancer drugs directly into the abdominal cavity rather than a vein.

“This type of chemotherapy is more difficult to tolerate than pure intravenous chemo, but data at that time indicated it was more effective than IV chemo alone, and Diane was able to



Diane Papamarkos has been cancer-free since her treatment for stage 3 ovarian cancer ended in late 2017.

Risk Factors

Oncologist Donna McNamara, M.D., shares some of the common risk factors for ovarian cancer:

- ▶ Strong family history of breast cancer and/or ovarian cancer
- ▶ Mutation in BRCA1 or BRCA2 genes, as detected by genetic testing
- ▶ Family or personal history of breast cancer occurring in both breasts
- ▶ Ashkenazi Jewish heritage



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close-knit team. “I work very closely with our gynecologic surgical oncologists, and we have a very caring, empathetic support team,” she says. “Clinical trials are also available for our patients, so they can receive cutting-edge therapies before they’re available to the general population.”

Go Online

Learn more about gynecologic cancer treatment at John Theurer Cancer Center at [HMHforU.org/OvarianCancer](https://www.hmhforu.org/OvarianCancer).

tolerate it,” Dr. McNamara says. “She had a tough time but was a trooper and always had a smile on her face.”

This newer strategy, with chemotherapy taking place before surgery, is fast becoming the norm in ovarian cancer treatment, Dr. McNamara notes. Other recent advances include using three oral chemotherapy drugs, known as PARP inhibitors, as follow-up maintenance therapy for all women with ovarian cancer, regardless of gene mutations.

“Using these novel agents, we’re seeing women experience longer periods without the disease recurring,” she says.

Remarkable Outcome

Now 69, Diane is a grateful recipient of the leading-edge ovarian cancer approach. “Dr. McNamara was on target every time, about everything,” she says. “Why would I go anywhere else?”

Cancer-free since her treatment ended in late 2017, the mother of two grown children undergoes regular blood tests to confirm her tumor markers remain low. One of those markers, called CA-125, can detect a protein often found at higher levels in people with ovarian cancer. This test, however, isn’t as useful as a general screening tool since CA-125 levels can also be tied to noncancerous conditions.

“Diane is now four years out. Since most ovarian cancer tends to recur within two years, we’re very hopeful about her prognosis,” Dr. McNamara says. “Her tumor marker levels have been beautiful. With a 70 percent chance of recurrence within five years for stage 3 disease, it’s pretty remarkable she’s doing this well and disease-free.”

Dr. McNamara says Hackensack stands out in ovarian cancer care because of its

6 Signs You Need Pelvic Floor Rehab

If your pelvic floor muscles are weak or not working correctly, here's what you can expect.

The pelvic floor is a group of skeletal muscles in the base of your torso that are responsible for bowel and bladder function and sexual pleasure.

If your pelvic floor muscles are weak or are not working correctly, you may experience uncomfortable, inconvenient or embarrassing symptoms.

Nicolette Spaccavento, OTR/L, occupational therapist at St. Joseph's Wayne Medical Center affiliated with **JFK Johnson Rehabilitation Institute**, shares six reasons why you may need pelvic rehabilitation.

1 You are experiencing urinary or fecal incontinence. Problems with the pelvic floor muscles can sometimes result in urine or stool leakage, also called incontinence, because the muscles are stretched, weakened or relaxed at the wrong time. When sneezing, coughing or exercise causes leakage, it is called stress incontinence.

2 You are constipated or having difficulty urinating. Chronic constipation—straining pain or the inability to have a bowel movement—and pain when urinating may be symptoms of pelvic floor dysfunction. “When the pelvic floor muscles are not fully relaxed, it may be difficult to empty the bladder or rectum,” says Nicolette.

3 You are experiencing urinary or fecal urgency. Sudden urges to urinate or have a bowel movement that send you running to the restroom may signify a pelvic floor disorder.

4 You have pelvic organ prolapse. Pelvic organ prolapse is a condition that occurs when the muscles and ligaments of the pelvic floor weaken, causing pelvic organs to drop in the pelvis. Similar to a hernia, this disorder may cause organs to bulge into the vagina

or rectum. Pelvic organ prolapse commonly occurs in women after childbirth, a hysterectomy or menopause.

5 You have pelvic pain. Ongoing pelvic pain, including pain in your genitals or rectum, could be a sign of a problem with your pelvic floor muscles. Some people may also notice pain in their groin, hips, lower abdomen or lower back when sitting.

6 You are experiencing sexual dysfunction. Because pelvic floor dysfunction can affect the uterus and vagina in women, it may cause symptoms such as pain during sex. Men with pelvic floor dysfunction may experience erectile dysfunction.

How Pelvic Floor Dysfunction Is Treated

The good news is that an occupational therapist specializing in pelvic floor rehabilitation may be able to help. After an initial evaluation, patients typically attend one 45-minute session a week for six to eight weeks.

“If we find that a patient has a lot of muscle weakness, we will show them how to exercise starting in a lying down position and eventually progress to sitting and standing,” Nicolette says.

Occupational therapists also work on body mechanics, postural training and breathing. “We help patients to strengthen their abdominal, back and hip muscles so they can move and lift with proper body mechanics,” says Nicolette. “We also teach patients to use their diaphragm to breathe correctly, which can improve pelvic floor health.”

Just as with any occupational or physical therapy program, performing the exercises at home is crucial. “We teach self-care so people can practice at home,” Nicolette says. “It’s about educating and empowering our patients.”



Learn more about our rehabilitation services at HMHforU.org/Rehab.

Heads Up

What type of headache might you be experiencing, and what can you do about it?

Headaches are incredibly common. There are many different types, all of which have varying causes, characteristics and treatment options.

Migraine

Symptoms: “A person with a migraine typically reports moderate to severe throbbing pain often located on one side of the head,” says **Hao Huang, M.D.**, headache medicine specialist at **Hackensack University Medical Center**. The headache may last for hours or days. Migraine attacks are commonly associated with nausea and vomiting, as well as sensitivity to light and/or sound.

Causes: The underlying cause of migraine attacks is under investigation, although there is probably a genetic component since they often run in families. **Migraine triggers include:**

- ▶ Stress
- ▶ Dehydration or hunger
- ▶ Certain foods
- ▶ Medications
- ▶ Bright lights
- ▶ Loud noise
- ▶ Menstruation
- ▶ Menopause
- ▶ Disruption in sleep patterns

Treatments: Options for treating migraine attacks include simple tasks, such as lying down in a quiet, dark room or putting an ice pack or cold compress on the head. There are also many migraine medications that can stop the headaches when they occur, as well as treatment options that may prevent migraine attacks, such as anti-seizure medicine, antidepressants, blood pressure medicine, Botox, peptide inhibitors or electrical stimulation.

Tension Headaches

Symptoms: Tension headaches are due to muscle tension and are characterized by a dull pain, tightness or pressure in the head or neck. They can last less than an hour or up to a few days.

Causes: Triggers of tension headaches include:

- ▶ Physical or emotional stress
- ▶ Not getting enough sleep
- ▶ Anxiety and depression
- ▶ Fatigue
- ▶ Hunger and dehydration
- ▶ Teeth/jaw clenching
- ▶ Overexertion
- ▶ Neck or back problems

Treatments: Tension headaches are usually managed with over-the-counter pain medication. “If you experience frequent or prolonged headaches, or if they don’t improve with self-care, it may be time to see a doctor,” says **Brian Amorello, Ph.D.**, counseling psychologist at Hackensack. “If your doctor diagnoses

tension headaches, they may recommend lifestyle changes, therapy or medications to treat your pain.”

Cluster Headaches

Symptoms: Cluster headaches generally occur behind or around the eye on one side and can be very painful. These headaches often occur for a few weeks or months, typically at night time. They may go away for a period of time but can spontaneously start again.

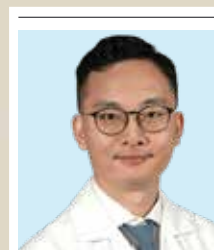
Symptoms include:

- ▶ Extreme pain in or around the eye on one side of the head
- ▶ Restlessness
- ▶ Feeling flushed
- ▶ Tearing up
- ▶ Sniffling with a runny nose
- ▶ Swelling, droopiness and/or redness around an eye

Causes: The cause of cluster headaches is under investigation. This type of headache usually isn’t associated with triggers such as food or stress, like some of the other headache types.

Treatments: If you are experiencing cluster headaches, Dr. Huang recommends seeing a doctor. “It’s important to find a doctor who can help diagnose cluster headaches and work with you to find an effective treatment,” he says.

If your headaches are becoming more severe, more frequent or unresponsive to treatments—or if they are associated with any new or worsening symptoms—make an appointment with your doctor to discuss them. 🌀

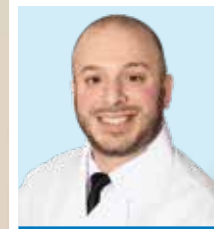


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Brian Amorello, Ph.D.

Counseling psychologist

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Go Online

Learn about headache and migraine treatments at Hackensack Meridian Health at HMHforU.org/Headache.



Peace of Mind

A common heart condition that affects up to a quarter of the population led to a stroke for 54-year-old Julie Van Tine.

In September 2019, 54-year-old Julie Van Tine got home from a regular day at work in office administration, spent her evening as she normally would and went to bed feeling fine. The Hawthorne, New Jersey, resident woke up in the middle of the night and realized she couldn't move her right side or, worse, talk.

"I tried to wake my husband, but I couldn't say anything," she remembers.

While she couldn't form words, she could make sounds. Her crying woke her husband, who hustled her into the car and drove her to **Hackensack University Medical Center**.

She arrived at the hospital unable to speak, swallow or understand what the medical staff said to

her, says neurologist **Martin Gizzi, M.D.** A CT scan clearly showed a small clot that was impacting the speech area of the left hemisphere of Julie's brain.

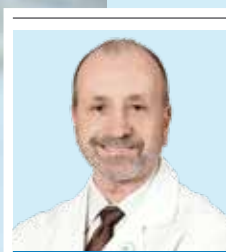
Common Issue With Uncommon Consequences

By the time Julie arrived at the hospital, it was already too late for clot-busting drugs. What wasn't obvious was what had caused her stroke.

Julie didn't have any of the usual risk factors for stroke, such as diabetes, hypertension or high cholesterol, and she had no family history of stroke. Advanced cardiac imaging allowed Dr. Gizzi and Julie's medical team to determine that her stroke was caused when the blood clot passed through a small hole in her heart—called a patent foramen ovale (PFO)—that didn't close following her birth.

"PFOs are quite common. Up to 25 percent of the population may have one," Dr. Gizzi says. "In the vast majority of people, they are of no significance. They are only significant when they are considerably larger and associated with some floppiness or instability of the tissue that divides the left and right atria."

A multidisciplinary team of cardiac and neurology experts at Hackensack's Heart and Brain Clinic determined that Julie was a good candidate for a procedure to close the hole with an umbrella-like medical device inserted through a catheter. That procedure took place about a week after her stroke.



Martin Gizzi, M.D.
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On the Road to Recovery

More than two years later—and following inpatient and outpatient physical and speech therapy—Julie has regained much of the function she didn't have immediately following her stroke. Today, she is able to swallow, understand language and speak. But she sometimes still struggles to find words, a language disorder called aphasia that resulted from the stroke.

"We think her improvement has been excellent," says Dr. Gizzi. "The recovery period for aphasia goes on for years, so the fact that she's two years out and still improving is not unusual."

On the recommendation of Dr. Gizzi, Julie regularly attends programs at a nearby aphasia center, which allows her to practice speaking while doing fun things in a social setting.

"I love it," Julie says. "It's the best thing I ever did because these people can relate to you. It's like a family."

Learn more about the Heart and Brain Clinic, where we evaluate and treat people with PFO, at HMHforU.org/HeartAndBrain.

How to Prevent Stroke

The best way to prevent a stroke is to reduce your risk.

Stroke is the fifth-leading cause of death in the United States, according to the American Heart Association, and the number one cause of disability. Eighty percent of strokes are preventable.

The best way to prevent a stroke is to reduce your risk, says **Martin Gizzi, M.D.**, director, Division of Cerebrovascular Diseases, Department of Neurology & Neuroscience Institute, **Hackensack University Medical Center**.

Risk Factors for Stroke

- ▶ High blood pressure
- ▶ Smoking
- ▶ Heart diseases such as cardiomyopathy and atrial fibrillation
- ▶ Diabetes
- ▶ Age (risk increases as you get older)
- ▶ Gender (men are more likely to have strokes)
- ▶ Taking hormonal birth control
- ▶ Race/ethnicity (strokes occur more often in African American, Alaska Native and American Indian adults)
- ▶ Personal or family history of stroke or heart disease
- ▶ Brain aneurysms or blood vessel malformations
- ▶ Obesity
- ▶ Poor diet
- ▶ Alcohol/illegal drug use



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Go Online

Learn about lifesaving stroke care close to home at HMHforU.org/Stroke.

10 Tips to Reduce Your Risk

Dr. Gizzi offers these tips to reduce your risk of stroke:

- 1 Check your blood pressure regularly.** If you have elevated blood pressure consistently, talk to your doctor about treatment to control it.
- 2 Get tested for diabetes,** especially if you have a family history of it.
- 3 Get a heart health check.** Heart disease, heart weakness or cardiac arrhythmias such as atrial fibrillation can cause blood clots to shoot to the brain, causing a stroke.
- 4 Be vigilant about your cholesterol.** Many vessel-clogging problems that occur in the heart from high blood fats (cholesterol) also occur in the blood vessels in the brain and in the vessels leading to the brain. So it's important to regularly check your cholesterol and make necessary dietary or medication changes to lower it.
- 5 Maintain a healthy weight.** Obesity on its own is a risk factor for stroke. But it also can lead to other health issues, such as high blood pressure, heart disease and diabetes, which are additional stroke risk factors.
- 6 Eat foods low in cholesterol and fats,** especially saturated fats and trans fats, such as lean meats, nonfat dairy and whole-grain breads.
- 7 Exercise regularly.** Aim for 30 minutes a day, five days a week. But even 10 minutes of exercise a day offers health benefits.
- 8 If you smoke, stop.** Smoking can damage blood vessels as well as the heart. It also can increase blood pressure and lead to decreased oxygen supply from the lungs.
- 9 Drink less alcohol.** Even one or two drinks a day can increase the risk of high blood pressure and stroke.
- 10 Reduce stress.** Stress can alter blood sugar and raise blood pressure as well as cause cardiac rhythm irregularities.

"The best treatment for stroke is preventing one from happening in the first place, which means making lifestyle choices that keep your blood vessels and heart strong and healthy," Dr. Gizzi says. 🌟

HEART HEALTH



An Aspirin a Day?

Here's what to know about a daily aspirin to prevent a heart attack.

In October 2021, the U.S. Preventive Services Task Force released updated recommendations for preventive aspirin use: Adults over age 60 should no longer consider taking a daily aspirin to prevent a first heart attack or stroke. For adults ages 40–59 who are at higher risk for cardiovascular disease and who do not have a history of cardiovascular disease, the task force now recommends they decide with their doctor if they should take a daily low-dose aspirin as a preventive measure.

“It’s important to know that someone should not start taking aspirin daily simply because they’ve reached a certain age,” says **David Landers, M.D.**, cardiologist at **Hackensack University Medical Center**. “It’s also important to note that the task force’s recommendations apply to people who are not currently taking a daily aspirin. If your doctor has recommended a daily low-dose aspirin because you’ve had a heart attack or stroke, this new guidance doesn’t apply to you.”

Why the Change?

While aspirin has been shown to lower the chance of a first heart attack or stroke, it also could potentially cause internal bleeding in the stomach, intestines and brain. The chances of this occurring increase with age and can be life-threatening. Because of this, people age

60 and older are advised not to start taking aspirin daily if they have not been doing so already.

If you are already taking aspirin daily, talk to your doctor about what’s right for you based on your specific health condition.

How to Keep Your Heart Healthy

“Heart disease remains the leading cause of death in the United States,” says Dr. Landers. “As you get older, it becomes even more important to remain vigilant about your heart health.”

Maintaining heart health is a lifelong responsibility. Here are some things you can do to help your heart stay strong as you age:

- ▶ **Reduce your sodium intake** by cooking more meals at home. Read the labels on your food, as the recommended daily salt intake is just 1,500 mg.
- ▶ **Take time to rest and de-stress.** Make sure you are getting adequate sleep each night.
- ▶ **Lessen your alcohol intake.**
- ▶ **If you smoke, quit.** Smoking is very unhealthy and does a great deal of damage to the heart. Get the help you need to stop for good.
- ▶ **Commit yourself to exercising daily** for a minimum of 30 minutes.
- ▶ **Have open conversations with your doctors** and work with them to maintain your overall health. ⚙️



David Landers, M.D.

Cardiologist

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Teaneck

Go Online

Learn about comprehensive heart care close to home at [HMHforU.org/Heart](https://www.hmhforu.org/Heart).

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The Picture of Health

One day, Manisha Mehta was given a clean bill of health. The next, she was fighting for her life.



At 68, Manisha Mehta was considered the picture of health. At her yearly checkup in fall 2019, she was given the all clear. But a month later, she and her husband, Bhupen, were on their way to spend his birthday with their family and beloved grandson, and Manisha started to feel strange.

Initially, she thought it was acid reflux. But her condition rapidly deteriorated, and within a few minutes, she felt nauseous and thought she was going to pass out.

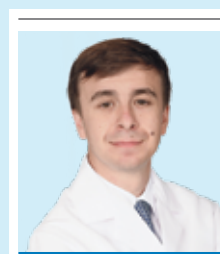
Luckily, **Palisades Medical Center** was just moments away. Upon arrival, doctors determined she was in complete heart failure and needed complex cardiac care. Manisha was airlifted to **Hackensack University Medical Center**, where an entire team of specialists was waiting.

“Manisha presented with what we call acute STEMI, which is an acute myocardial infarction,” says cardiac surgeon **Yuriy Dudi, M.D.** In other words, Manisha was having a major heart attack.

It Takes a Team

Manisha arrived at Hackensack in shock, which caused her to go into cardiac arrest multiple times. She had to be resuscitated four times.

While her team of doctors attempted to clear numerous blockages in her heart, they placed an Impella heart pump, designed to pump blood to the rest of the body while allowing the heart to rest. Even that was not enough; she had to be placed in a medically induced coma and put on an ECMO, a machine that takes over heart and lung function completely,



Yuriy Dudi, M.D.

Cardiac surgeon

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allowing the heart to rest and the recovery process to begin.

Fortunately, her doctors were able to successfully place five stents. Manisha says of her care team: “They are angels disguised as doctors, nurses and health care workers.”

She was able to return home just in time to spend Thanksgiving with her family.

Important Message for Women

Manisha’s case is unique given that she was asymptomatic with no risk factors. But many people have warning signs of a heart attack well in advance, such as:

- ▶ Chest pain
- ▶ Pressure triggered with activity but relieved with rest
- ▶ One of the many underlying conditions that increase the risk of heart attack

“You should see your primary care physician every year, regardless of your symptoms,” Dr. Dudi says.

This is especially true for women, who are more likely to have atypical symptoms with a heart attack than men.

Manisha encourages women to be proactive with checkups and tell their doctor everything. In hindsight, she believes there may have been a few subtle signs that she chalked up to age.

These days, Manisha has a new lease on life. She spends her time reading, playing online strategy games and—most importantly—spending time with her grandson. “He is my world,” she says. “I’m so thankful to everyone at Hackensack for saving my life.”

Heart disease doesn’t affect all women the same way, and the warning signs for women are not always the same as men. The Heart & Vascular Hospital at **Hackensack University Medical Center** has created the Women’s Cardiac Institute to meet these unique needs. Led by a team of female cardiologists, the Women’s Cardiac Institute takes a comprehensive and collaborative approach to heart care and offers the full spectrum of services to prevent and treat heart disease.

To learn more, call **855-996-HWCI (4924)**.

ORTHOPEDIC HEALTH

Under Pressure

Why do your joints hurt during rainy weather?

Some people swear they can predict when rain is in the forecast because their joints start to ache. Other people notice similar discomfort during other weather events or when the seasons change.

Experts believe that joints may ache among affected people because of changes in barometric pressure, which occur during weather system changes. Before it rains, barometric pressure tends to decrease.

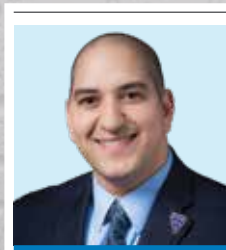
When this happens, there's less air pressure exerting itself on your body, which may allow muscles, tendons and other tissue surrounding the joints to expand. The expansion may crowd the joints, putting extra pressure on them, which may lead to pain.

"People with arthritis or those who experience chronic joint pain may be more sensitive to this type of discomfort, which is caused by tissue taking up more space than usual and overburdening the joints," says hip and knee orthopedic surgeon **Stephen Rossman, D.O.**

Other Reasons for Weather-related Joint Pain

You may do things differently on rainy or cold days, which may contribute to joint pain. For example:

- ▶ You may be less physically active, and sitting idly may make your muscles and joints stiffen up, causing pain.
- ▶ The gloomy weather may sour your mood, causing you to focus on negatives, including joint pain.
- ▶ You may have come to expect joint pain during rainy or cold weather, so you may be on the lookout for any twinges and discomfort that might not otherwise cause concern.



Stephen Rossman, D.O.
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Ways to Minimize Pain

Try these strategies to ward off or reduce weather-related joint pain:

- ▶ **Exercise regularly.** Being physically active helps strengthen your muscles and bones, which helps take pressure off your joints.
- ▶ **Keep moving.** Find ways to get your usual activity in, even if you can't walk around the block. Consider walking at the mall or using a treadmill.
- ▶ **Stretch before moving.** Do a few stretches before any physical activity. You'll warm up your muscles and improve your flexibility, which are good for your joints.
- ▶ **Keep your weight in a healthy range.** Lose weight if you're overweight, or maintain your current weight if it's in the healthy range. Carrying around extra weight puts additional strain on your joints, including your knees and hips, which may intensify weather-related joint pain. Every pound you lose is equal to losing 5–6 pounds on your hip or knee (losing 10 pounds could equal 60 pounds on your hip or knee).
- ▶ **Use heat before activity and cold after.** A heating pad may help relax your muscles and loosen you up before activity, while cold afterward can help with swelling and inflammation.
- ▶ **Take over-the-counter anti-inflammatory medication.** Medications like ibuprofen help reduce pain and lower inflammation, which should help you start to feel better.
- ▶ **Try to maintain a positive outlook.** Don't let a gray, miserable day bring down your mood. When you feel better emotionally, you may also feel better physically. 🌀

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New Knee, New Life

After total knee replacement using an innovative, new robotic technology, Eugenia Dziopa is back to her daily strolls—pain-free.

Eugenia Dziopa has always been an avid walker, enjoying daily strolls around her neighborhood in northern New Jersey. But two years ago, she began experiencing pain in her left knee from degenerative arthritis.

"I noticed that I could not walk far anymore," says Eugenia, who was 64 at the time. "If I would go even half a block, or even from the parking lot at work, I would be in pain. That was my breaking point, and I knew I needed to see an orthopedic specialist."

Eugenia made an appointment with **Yair D. Kissin, M.D.**, vice chairman of Orthopedic Surgery at **Hackensack University Medical Center**, the same hospital where she works as a biorepository technologist.

"There are nonoperative means that we almost always try first," Dr. Kissin says. "Initially, we did conservative treatments for

Eugenia, including physical therapy followed by injections. In her case, those did not work."

In early 2020, Hackensack became the first hospital in the country to offer a new robotic technology for total knee replacement procedures for patients who have bone-on-bone or severe degenerative arthritis.

"About a week after Hackensack acquired the technology, I was looking for a good candidate," Dr. Kissin says. "Because Eugenia had been a patient of mine for a while, I thought she was the right person to talk to about this technological advancement."

Robot Technology to the Rescue

With the new robotic technology, preoperative planning allows the surgeon to design

and prepare, in a virtual environment, the patient's personalized joint replacement surgical plan. The active robot aids the surgeon in executing the preoperative surgical plan with automated, hands-free cutting and removal of the diseased bone and cartilage.

In February 2020, Eugenia became the first patient in the country to have a total knee replacement with the new robotic technology after it became commercially available.

The surgery was successful. Within two weeks, Eugenia had 90-degree motion in her knee; after three months, she was at 120 degrees of motion—the normal range.

"This is the future of orthopedic surgery and knee replacement," Dr. Kissin says. "Hackensack is ahead in doing it now."

Life After Knee Replacement

In February 2022, Eugenia celebrated her two-year post-surgery milestone.

"I can walk more than a mile around my neighborhood with no problems," she says. "I also take the stairs at work now instead of the elevator for additional exercise. I can do everything I did before I had knee issues."

Eugenia is thankful she made the decision to have the surgery because it has allowed her to enjoy family time again.

"I have my normal life back. I have grandchildren, and I can take walks with them. My life is so much better now than before knee replacement surgery," she says.



Two years after knee replacement surgery, Eugenia Dziopa can walk more than a mile around her neighborhood without any problems.



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Go Online

Learn how our orthopedic experts are committed to helping you maintain optimal health, get moving and live life to the fullest at [HMHforU.org/Ortho](https://www.hmhforu.org/Ortho).

Home Field Advantage

Learn the most common sports injuries in kids—and how you can help prevent them.



There are many advantages to your kids participating in group sports and athletic activities. They get a chance to learn about physical fitness, improve their concentration skills and boost self-esteem.

While there are many valuable benefits, playing sports can potentially be a risky activity. According to data from the Centers for Disease Control and Prevention, injuries caused by youth sports account for nearly 3 million emergency room visits each year.

Most Common Sports Injuries in Kids

Some of the most common sports injuries for kids are overuse injuries, concussions and sprains.

Overuse Injuries: About half of kids' sports injuries are the result of overuse. "An overuse injury can happen after focusing on one sport for an extended period or when taking on too much physical activity too quickly," says **Amit Merchant, D.O.**, pediatric orthopedic surgeon at **Joseph M. Sanzari Children's Hospital at Hackensack University Medical Center**. "These injuries can vary from stress fractures to tendinitis."

Concussions: A concussion is a traumatic brain injury that's caused by a mild blow or bump to the head. When the head gets hit, the sudden movement can cause the brain to bounce against or twist in the skull. "Concussions involve a temporary loss of normal brain function," says Dr. Merchant. "They usually are not life-threatening but should be taken seriously."

Sprains: When you have a sprain, you have stretched or torn the ligaments that connect your bones to joints. Sprains—more specifically ankle sprains—are some of the most common sports injuries in kids. A mild sprain can be cared for at home, while a more severe case may require surgery.

5 Ways to Prevent Injury

It's important to encourage your children to play sports safely and in a proper manner. Dr. Merchant provides tips for preventing sports injuries in kids.

Warm up and cool down. Your child should be doing a warmup and cool-down before and after they participate in sports. A light warmup will improve mobility, increase blood flow and improve posture. Cooling down should focus on the gradual decrease of heart rate and sweating.

Use proper form. Every sport has proper and improper ways to play. Your child should be shown the correct techniques and form by their coaches and trainers. If you are able, help them practice polishing their skills during off-seasons.

Wear proper protective gear. Depending on the sport your child plays, they may need a helmet, padding, mouthguard, eye protection, cleats and protective cups.

Encourage nutrition and hydration. Your child should drink fluids—whether that be water or a sports drink—before, every 20 minutes during, and after they play. This is even more crucial in hot and humid weather. Be sure your young athlete is eating a well-balanced diet and maintains a regular eating schedule.

Don't let your child participate while they're injured. When an injury is sustained, get help as soon as possible. Don't let your child push themselves while they are in pain. Make sure they are fully healed before they return to play. 🦄



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Go Online

Learn more about family-centered care for kids at Hackensack Meridian Health at [HMHforU.org/Kids](https://www.hmhforu.org/kids).



A New Attitude

Scoliosis surgery saves 16-year-old Crystal Chiluiza from a life of pain and gives her newfound confidence.

At age 16, Crystal Chiluiza has learned how to savor the simple things in life: playing with her young niece, Scarlett, spending time with friends and having the ability to merely sit still. Until recently, she couldn't remember a time when scoliosis didn't cause her constant pain.

"I was always in pain, whether it was excruciating pain or less than that," Crystal says. "It didn't matter if I was sitting or standing, in the middle of class or just hanging out with my friends. It would happen all day, every day."

That's all different now, thanks to life-changing scoliosis surgery at **Joseph M. Sanzari Children's Hospital at Hackensack University Medical Center**.

New Options for Children With Scoliosis

Often diagnosed during adolescence, scoliosis is characterized by a sideways curvature of the spine, which causes pain and disability. It can affect the body's appearance as it causes the ribs, hips and shoulders to shift unevenly.

As Crystal's scoliosis worsened over the years, Ruby Chiluiza felt the pain of a mother. "Crystal wanted to be comfortable physically but also comfortable with the way she looked," she says. Looking for options, they found pediatric orthopedic surgeon **Amit Merchant, D.O.**

For a growing child with scoliosis, nonsurgical options like bracing and physical therapy are exhausted first. When Dr. Merchant saw Crystal for the first time at age 14, though, her curve had worsened to the point of needing posterior spinal fusion surgery to straighten her spine.

"The goal of surgery was to preserve Crystal's mobility and quality of life without worrying about the lifelong consequences of progressive

scoliosis," says Dr. Merchant. If Crystal didn't have the procedure, her curve would have worsened and eventually affected her heart and lungs.

Spinal fusion is generally reserved for adolescents with severe scoliosis; it isn't feasible for younger children with failed bracing. With traditional surgery, patients undergo an implantation of screws and rods. Because young patients are growing, multiple surgeries follow about every six months to "grow" the rods during a procedure called distraction.

But an innovative technology called the MAGEC system allows surgeons to better control scoliosis in children. The technology allows the spine to continue growing with the child. The magnetic rods are distracted during an office visit, which means fewer surgeries. "Treatment for scoliosis is evolving in such a rapid way that new options are becoming available where we can improve scoliosis with less-invasive surgeries and faster recovery while preserving as much spinal motion as possible," says Dr. Merchant.

Pain-free and Happy

Crystal's surgery went well, and Dr. Merchant doesn't expect her to need additional ones.

"Crystal and our family are not just happy, but super happy," Ruby says. "Dr. Merchant is an angel sent to us."

Crystal says she would recommend the procedure to anyone looking for relief from endless back pain and disfigurement. "The way I coped was to tell myself that if I had the surgery, all that was bad about this situation would go away," she says. And it did. "I'm pain-free and happy with the way I look."

In a Pinch

How do you know if you have a pinched nerve, and when should you see a doctor about it?



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A pinched nerve can be quite painful and is often the result of a normal wear-and-tear injury to the spine. “Spinal nerves originate from the spine and branch out to the arms and legs,” says **Jonathan Yun, M.D.**, a neurosurgeon at **Mountainside Medical Center**. “They are responsible for providing sensation to various parts of the body, so if they are compressed or irritated, it can cause significant pain.”

But how do you know if you have a pinched nerve, and when should you see a doctor about it?

How to Tell if You Have a Pinched Nerve

If you have a pinched nerve, you may experience sudden or progressive pain that can involve your back and radiate down your arms or legs, as well as weakness or numbness.

To determine whether you have a pinched nerve or something else, speak with a primary care doctor, neurologist or neurosurgeon. The doctor will ask you questions about your pain and medical history, and do a physical examination to determine if you have a pinched nerve or another issue.

If your doctor suspects it could be a pinched nerve, you will have an MRI, a type of imaging that can highlight where the nerve might be compressed.

The pain could be happening for a variety of reasons, including peripheral neuropathy, disc herniation or arthritic changes in the spine. Your doctor will look for focused areas of weakness and correlate these areas with the associated nerves, as well as rule out other conditions before diagnosing a pinched nerve.

Treatment for a Pinched Nerve

Most pinched nerve cases can be managed conservatively. Conservative treatment options include:

- ▶ **Over-the-counter pain medication** or stronger, prescribed pain medicine
- ▶ **Physical therapy**
- ▶ **Steroid injections** including epidurals administered by a pain management specialist

These methods tend to be successful in situations where the pain is sudden and intense.

Surgery is also an option for some patients. “Today, we have minimally invasive ways to address pinched nerves,” Dr. Yun says. “Patients often go home the same day as their surgery rather than having to spend

a few nights in the hospital.” After surgery, a person can usually return to a normal lifestyle in a matter of days.

Minimally invasive surgery uses a microscope and special instruments that allow the surgeon to make tiny incisions on the nerve to decompress it.

“Speaking to a neurosurgeon doesn’t mean you’ll need surgery,” says Dr. Yun. “My job is to educate patients and make sense of their symptoms, and my personal philosophy is to try all conservative options, then consider surgery as a last resort.”

He encourages patients to see a doctor as soon as they experience pain symptoms because it provides the best chance of resolving the problem. “The earlier you can see a specialist, the better,” he says.

How to Avoid a Pinched Nerve

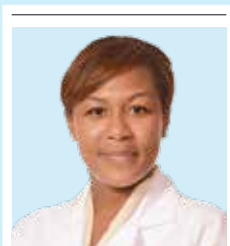
Often, a pinched nerve is something that develops over months or years, says Dr. Yun. Here are four things you can do to avoid the condition:

- 1 Check your posture.** Proper posture is important. If standing or sitting up straight is challenging, there are posture exercises you can do. It’s important to take care of your body by not bending, twisting or lifting excessively in ways that aren’t appropriate.
- 2 Exercise safely.** Maintaining a physically active lifestyle to stay as fit as possible is great for your spine and overall health. When exercising, take care of your body by not overdoing it or pushing yourself too hard, which can cause injury. With that said, anyone can develop a pinched nerve. Dr. Yun has treated all kinds of people for pinched nerves, regardless of age, gender and body type. “It even happens randomly to very fit individuals,” he says.
- 3 Lose weight.** If you are overweight or obese, consider losing weight, as extra weight puts added stress on your spine and joints and can injure or inflame the nerves.
- 4 Work smarter.** If you have a job that requires you to perform repetitive motions or lift heavy objects, consider how your movements or positioning might be affecting your body. Make sure you lift properly and take breaks if you become tired. If you work at a desk, get up and walk around at least once an hour. ⚙️

Go Online

Learn about Mountainside Medical Center’s new minimally invasive spine center at [HMHforU.org/MountainsideSpine](https://www.HMHforU.org/MountainsideSpine).

Uterine Fibroids



Nagaeda Jean, M.D.

Obstetrician/
gynecologist

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Montvale

Women with uterine fibroids may wonder and worry about how these noncancerous growths in their uterus may impact their ability to get pregnant or cause complications when they're pregnant. "Most women with fibroids are able to get pregnant," says **Nagaeda Jean, M.D.**, an obstetrician/gynecologist at **Pascack Valley Medical Center**. "However, once pregnant, the fibroids could have an impact on the pregnancy."

What Are Uterine Fibroids?

Uterine fibroids are noncancerous growths occurring in the uterus. They are common in women of reproductive age, with the chance of developing them increasing with age until menopause. Also known as leiomyomas (lie-o-my-O-muhs) or myomas, uterine fibroids can range in size from as small as a pea to as large as a melon. They grow into the uterine cavity, within the wall of the uterus or on the outside of the uterus. Women can have just one or many fibroids.

What Causes Uterine Fibroids?

While we do not know exactly what causes uterine fibroids, we do know the hormones estrogen and progesterone influence their growth, Dr. Jean says.

We also know certain women are more likely to develop them:

- ▶ African American or Latinx women
- ▶ Women with a family history of uterine fibroids
- ▶ Women who are obese

Symptoms of Uterine Fibroids

Often, women may not know they have fibroids. It is not unusual for a woman to first learn she has uterine fibroids until she is pregnant and begins getting ultrasounds to track the progress of the pregnancy, Dr. Jean says. But she notes that pregnancy does not cause uterine fibroids.

Depending on where they are in the uterus, fibroids—even large ones—may not cause symptoms.

However, common symptoms include:

- ▶ Pelvic pain
- ▶ Heavy bleeding, sometimes heavily enough to cause anemia
- ▶ Bloating
- ▶ Pain with sex
- ▶ Frequent urination
- ▶ Rectal pressure
- ▶ Enlarged abdomen
- ▶ Lower back pain

When women don't have symptoms, doctors often recommend monitoring with regular pelvic exams and ultrasounds.

For those with symptoms, "the treatment is based on patient symptoms, the number of fibroids and location of the fibroids," Dr. Jean says. Recommended treatments range from medications to manage symptoms to surgical intervention to shrink or remove the fibroids, including robotic surgery for some women.

Effects on Pregnancy

Most women with uterine fibroids can get pregnant. "Fibroids often do not have an effect on fertility," Dr. Jean says. "Depending on where the tumors are located and the size, most women with fibroids are able to get pregnant."

That said, it's important for women with a known history of uterine fibroids, or a family history of them, to see their doctor for a full pelvic examination and pelvic ultrasound before getting pregnant. Even if there is no history of uterine fibroids, if a woman is thinking about getting pregnant, she should talk to her OB/GYN about fibroids even if she is asymptomatic for uterine fibroids, Dr. Jean says.

The results of a pelvic exam and ultrasound will give women and their doctors a clear understanding of the status of the uterine environment prior to pregnancy, and if fibroids are detected, there can be discussions about fibroid management and any

If you are expecting—or hoping to become pregnant—here's what you should know about uterine fibroids.

and Pregnancy

potential interventions needed before attempting to get pregnant.

While uterine fibroids usually are not a threat to fertility, they can cause complications during pregnancy. "Women with fibroids should keep up with their routine visits, keep up with their routine scans and have a conversation with their doctor to help them have a smooth pregnancy," Dr. Jean says.

Uterine fibroids can increase the risk of:

- ▶ Preterm delivery
- ▶ Cesarean section delivery
- ▶ Malpresentation, such as breech delivery
- ▶ Pain during pregnancy
- ▶ Miscarriage
- ▶ Bleeding during pregnancy
- ▶ Stalled labor

"Fibroids are common, and when they present during pregnancy, there is a risk of complications that may arise. However, there are many patients with fibroids who have uneventful pregnancies," Dr. Jean says. "With the number of years that we've treated patients with fibroids and pregnancy, and with the new technologies and treatments available, it is more possible for patients to have uneventful pregnancies now." ❄️

iStock.com/SongSpeckels/DrAfter123

Be a Quitter

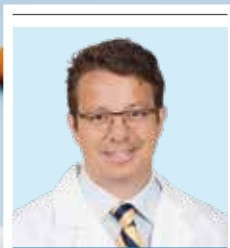
What happens to your body one, five and 10 years after you quit smoking?

Off the top of your head, you might be able to think of several reasons why quitting smoking could be beneficial. These benefits are particularly important when it comes to your overall state of health, especially your lung health. Once you've kicked the habit, the number of health benefits continues to increase as time passes.

"It is no secret that smoking cigarettes takes a toll on our bodies," explains **Nabil P. Rizk, M.D.**, chief of the Division of Thoracic Surgery at **Hackensack University Medical Center**. "It can lead to negative impacts on our health, including lung cancer and lung disease."

Likewise, smoking can lead to increased risk for stroke and coronary heart disease, and increased risk for other cancers, like pancreatic.

After a person quits smoking, their health can improve quickly. Immediate benefits include a drop in heart rate and blood pressure and a lowered carbon monoxide level. Once you've reached the one-year mark, the benefits become even more significant.



Nabil P. Rizk, M.D.
Thoracic surgeon
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Here are the benefits your body will see one, five and 10 years after you quit smoking:

1 Year After You Quit

"At the one-year mark, you will have noticeable improvements to your lung health," Dr. Rizk explains. "This includes being able to breathe more easily when doing physical tasks and a decrease in the amount of coughing you experience."

Your heart will thank you, as well. At this point, your risk of coronary heart disease is half of what it was when you were smoking. Your heart attack risk is now also decreased.

5 Years After You Quit

Five years after you've quit smoking, your risk for stroke is reduced. Likewise, your risk of developing the following cancers has reduced: cervical, mouth, throat, esophagus and bladder.

10 Years After You Quit

"Ten years after you quit, your risk of dying from lung cancer is now about half the amount it was when you were smoking," Dr. Rizk says. "Your cancer risk is also decreased for pancreatic cancer and cancer of the larynx." 🌟

Hackensack Meridian Health now offers a treatment program to help people quit smoking and vaping. To speak with a tobacco treatment specialist, call **551-996-1632**, text **201-655-1024** or email QuitCenter@hmn.org.

Go Online

Should you get screened for lung cancer? Find out at [HMHforU.org/LungScreen](https://www.hmn.org/LungScreen).

Bridge to Recovery



Eileen Bostonian feared a heart problem, but soon learned she needed robotic lung surgery instead.

Branchville, New Jersey, resident Eileen Bostonian, 64, lost her parents to heart disease when they were in their 60s, so she has been diligent about seeing her doctor for yearly checkups. She is also a 12-year breast cancer survivor, so she knows the importance of monitoring her health.

In 2020, when doctors ordered a chest scan to check her heart, they discovered concerning spots on Eileen's lungs. Follow-up CT scans and a biopsy ordered by her pulmonologist showed the spots were small tumors.

Initially, her doctors at **Hackensack University Medical Center** were concerned that the tumors were a recurrence of her breast cancer or related to the fact that Eileen had been a smoker many years ago. The best way forward to determine the extent and nature of the tumors was surgery.

Nabil P. Rizk, M.D., a thoracic surgeon who specializes in treating cancers in the esophagus and lungs, joined Eileen's care team. "The initial goal of the surgery was to

prove whether she had cancer," Dr. Rizk says. "We removed a nodule on her left lower lobe, which came back as a tumor type called carcinoma, a low-grade tumor."

A Positive Outlook

Scans of Eileen's tumors, which were located in both the left and right lungs, showed the most problematic were larger ones that were near important structures. After Eileen recovered from the first surgery in October 2020, she was scheduled for additional procedures to address the other nodules.

Fortunately, Eileen was a candidate for robotic surgery, which means less blood loss, faster recovery times and fewer complications when compared to traditional surgery.

"We had to address the tumors that were relatively large, potentially growing into airways or causing local problems," Dr. Rizk says. "We went after the first two on the right side and took out the middle lobe of her right lung, where there was a central tumor

close to blood supply. The second one was on a portion of the right upper lobe called the posterior segment."

Cancer Free

That surgery was successful, but Eileen wasn't quite done yet. "Six months later, they went back on the other side and got the last one removed," she says. "The tumors were so small, and the doctors said I didn't need chemo, radiation or anything else. I was blessed to catch it early."

During Eileen's final surgery in March 2021, Dr. Rizk used navigational bronchoscopy—which uses a special tool to treat less-accessible areas of the lungs—to map the tumor in the left lobe. "We robotically identified the nodule on the left upper lobe and 'inked' it so we could easily find it during the surgery to remove it," Dr. Rizk says. "Effectively, we removed all visible sites of disease in her lungs."

Signs of Vaping Disease

Here's what to know about EVALI, a dangerous vaping-related lung disease.

Some people turned to vaping as a “healthier” alternative to smoking, but others—especially teens—are attracted to the fun flavors, like strawberry, vanilla and pink lemonade, that are marketed.

Either way, the unfortunate truth is we are starting to see the effects of vaping are equally—if not more—harmful as smoking traditional cigarettes.

A new dangerous vaping-related lung disease is called EVALI (e-cigarette or vaping product use-associated lung injury).

What Causes EVALI?

With thousands of vaping products available on the market, researchers have had a difficult time determining the exact causes of EVALI. However, data strongly suggests that the combination of vitamin E acetate (found in e-cigarette and vaping products) and tetrahydrocannabinol (commonly known as THC, the principal psychoactive ingredient in marijuana) can result in long-term respiratory and cardiovascular health issues. There's still a lot to learn, and other additives have not been ruled out as a problem—not to mention the issues that come with an unregulated industry.

“People don't really know what's in the products they are vaping. You can wind up with a bad batch or something that has additives in it that can cause this injury to your lungs and heart and put your life at risk,” says **Aida Capo, M.D.**, pulmonologist at **Palisades Medical Center**.

Symptoms of EVALI

Symptoms of EVALI are similar to those of the flu and other illnesses, making a diagnosis challenging for patient and doctor. “People may confuse these symptoms with something else, which is concerning,” Dr. Capo says.

EVALI symptoms include:

- ▶ Shortness of breath
- ▶ Dry cough
- ▶ Fever
- ▶ Chills
- ▶ Vomiting
- ▶ Diarrhea
- ▶ Abdominal pain
- ▶ Headache
- ▶ Dizziness
- ▶ Coughing up blood
- ▶ Weight loss
- ▶ Chest pain

Specifically, a hacking, dry cough and shortness of breath can be two of the early signs of EVALI. “It can be somebody who's otherwise healthy and starts developing shortness of breath with exertion,” Dr. Capo says. “Let's say you're a young teenager who can normally run a mile or two a day, but then you start developing shortness of breath walking a short distance.”

What to Do if You Have Symptoms

If you are experiencing any of these symptoms and you vape, contact your primary care doctor right away. If you are having trouble breathing or are very short of breath, consider going to the emergency room for immediate medical attention.

“Vaping is becoming much more common and trendy now with the teenage and younger adult population,” says Dr. Capo. “People who vape need to be super vigilant of the potential harm.” 🌟



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Doctor Spotlight

Carolyn Peart, M.D., enjoys giving back to the community and volunteering at children's hospitals.

CAROLYN PEART, M.D.

Family medicine

Palisades Medical Center

As a child growing up in Jamaica, Carolyn Peart, M.D., would observe her grandmother as she cared for the people in their remote community.

Far from the nearest hospital, her grandmother made health care accessible for their neighbors. “That inspired me to want to care for people and help them,” says Dr. Peart, a family medicine specialist at **Palisades Medical Center** since September 2021.

When she was 16, Dr. Peart immigrated to the U.S. with her family and settled in Michigan. After completing her undergraduate education, she tried some other careers before coming back to her calling in medicine. She moved to New York for her residency.

At Palisades, Dr. Peart says she values the team environment. “There's always someone you can reach out to, and everyone helps each other out,” she says.

Why did you choose family medicine?

I chose family medicine because it allows me to build a relationship with my patients over many years. I'm able to follow patients from the time they're babies until they're elderly. You get to do a little of everything, and you may even care for an entire family.

How do you develop meaningful relationships with patients?

I like to develop relationships with patients through a technique I call ‘the golden two minutes.’ I let the patient tell me their story, and I just listen. Then, if it's something I can relate to, I can share my story or input, so I can build a rapport.



What do you like to do in your free time?

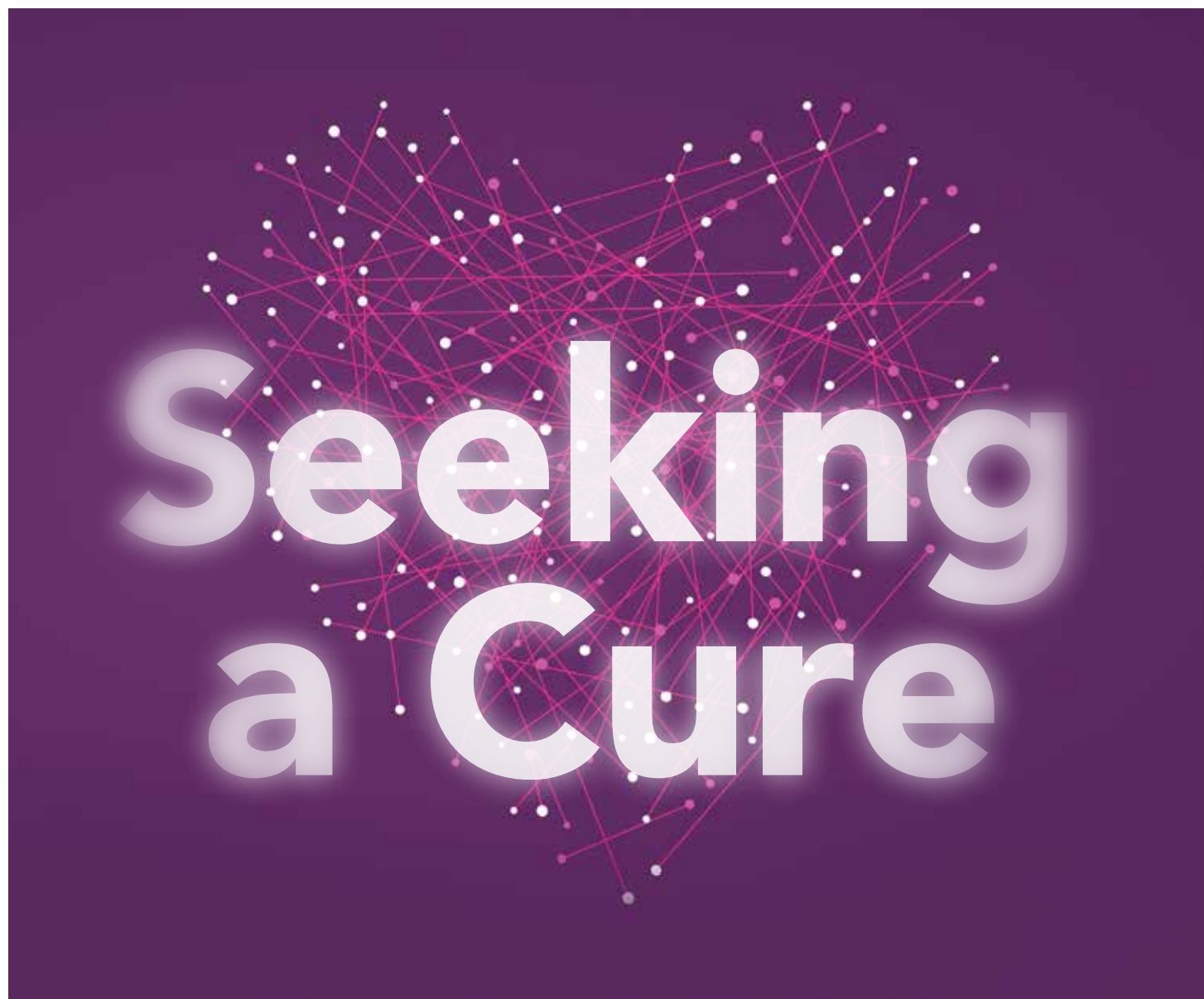
In my free time, I enjoy reading fiction, autobiographies and self-help books. I also enjoy volunteering, working at children's hospitals, nursing homes, homeless shelters and community fairs. I have returned to the Caribbean to offer my services there, as well. I also enjoy exercising, dancing, yoga, and spending time with family and friends.

What are your favorite foods to cook?

My favorite foods to cook are ackee and salt fish. Ackee is technically a fruit, but it's cooked and used as a vegetable. It's traditionally eaten with salted cod fish in Jamaica. In fact, it's the national dish of Jamaica. I enjoy making various curry dishes. Lately, I've been trying plant- and fish-based cuisines. 🌟

To make an appointment with Dr. Peart, call **800-822-8905** or visit **HMHforU.org/FindADoc**.

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Hackensack Meridian Children's Health is at the heart of a new potentially curative treatment for sickle cell disease.

Sickle cell disease affects 100,000 Americans, including 1 in every 365 African American births and 1 in every 16,000 Hispanic American births.

Sickle cell disease is an inherited blood disorder wherein misshapen blood cells impede the vascular distribution of oxygen throughout the body, causing pain, organ damage and even stroke.

"When you have sickle cell disease, you have a mutation in your beta-globin gene that causes your red blood cells to sickle—to be crescent-shaped instead of round," says pediatric hematologist/oncologist **Alfred Gillio, M.D.**, director of the Children's Cancer Institute at **Joseph M. Sanzari Children's Hospital** at **Hackensack University Medical Center**. "These moon-shaped red blood cells get stuck in small blood

istock.com/gremlin

istock.com/appleaur

5 Things to Know About Sickle Cell Disease

You can carry the sickle trait even if you don't have sickle cell disease.



Sickle cell disease can occur in people of any ethnicity.



Pain "crises" are sickle cell disease's signature symptom.



Sickle cell disease can cause organ damage, stroke and even death.



There are potential cures for sickle cell disease.



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Stacey Rifkin-Zeneng, D.O.

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Jessica Scerbo, M.D.

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Neptune

vessels, which disrupts the flow of oxygen to tissue. It's very painful."

Historically, the only response to sickle cell disease was managing it with pain medication. "But recently, new potentially curative treatments have emerged—giving new hope to those who experience excruciating, debilitating pain resulting from sickle cell disease," says pediatric hematologist/oncologist **Stacey Rifkin-Zeneng, D.O.**, section chief, Pediatric Pain and Palliative Care, Joseph M. Sanzari Children's Hospital.

A Disease Affecting Entire Families

"Sickle cell disease affects every organ in a patient's body," says Dr. Rifkin-Zeneng. "This disease really has a tremendous effect not only on the patient, but also the family."

Sickle cell disease runs in families, but the inherited trait that causes it is recessive. "Sickle cell disease is inherited in an autosomal recessive manner, so children can carry the trait and not have the disease," says **Jessica Scerbo, M.D.**, section chief, pediatric hematology oncology at **K. Hovnanian Children's Hospital**. "Babies only develop the disease if they inherit the trait from both of their parents."

The trait is widely known to exist in African bloodlines, but it's also present in Hispanic, Mediterranean and even Arab-Indian lineages.

New Treatments Emerge

Today, there are two curative treatments for sickle cell disease. The first is a bone marrow transplant, which replaces a patient's unhealthy blood-forming cells with healthy ones provided by a donor. This requires finding a well-matched (HLA-matched) bone marrow donor.

"Siblings only have a 25 percent chance of being tissue-matched. A volunteer-matched donor or a half-matched donor can often be identified, although these alternative donor transplants can be associated with more complications," says Dr. Rifkin-Zeneng.

A second therapy is currently undergoing clinical trials at sites across the country, including Joseph M. Sanzari Children's Hospital. "The new therapy, called LentiGlobin, is a gene-based therapy where doctors harvest the patient's own stem cells and add to them a corrected gene that makes non-sickle hemoglobin," says Dr. Rifkin-Zeneng, the principal investigator of the gene therapy study.

Here's how it works:

- ▶ The patient undergoes chemotherapy to kill off existing stem cells.
- ▶ After that, the patient is transfused with their own genetically modified stem cells.
- ▶ Then the patient's body can produce normal red blood cells that neutralize the effects of sickled red blood cells.

"With this treatment, the patient is their own donor, and we are modifying their own cells to add copies of a functional beta-globin gene," Dr. Gillio says.

Hope When There Are No Options

If its curative effects hold, gene therapy could prove to be even more attractive than bone marrow transplants.

Gene therapy also surmounts graft-versus-host disease, a common transplant complication wherein immune cells in the donor's marrow recognize that they're in a foreign body and begin attacking the marrow recipient. "Graft-versus-host disease can be significant and life-threatening, and when we use the patient's own cells, we don't have to worry about it," Dr. Rifkin-Zeneng says.

This investigational treatment, which is a one-time therapy, may be an option for patients who have no other treatment options. "This therapy may be a major advance for sickle cell patients. The results from early clinical studies are encouraging," Dr. Gillio says. 🌟

Go Online

To learn more about the sickle cell clinical trial, contact the study research staff at pedsresearch@hmn.org or call 551-996-5600.



We offer a number of programs to help keep our communities healthy. Topics range from general wellness to heart health, stroke, cancer care, women's health and more. View some featured events below.

For a full listing or to register, visit HackensackMeridianHealth.org/Events or call 800-560-9990.

SchedUle

Here are just a few of the events & classes this April through July 2022

Hackensack University Medical Center
30 Prospect Avenue
Hackensack
800-560-9990

Mountainside Medical Center
1 Bay Avenue
Montclair
888-973-4674

HOSPITAL LOCATIONS

Palisades Medical Center
7600 River Road
North Bergen
800-560-9990

Pascack Valley Medical Center
250 Old Hook Road
Westwood
877-848-9355



Cancer Care

Don't Fry Day: May Is Skin Cancer Awareness Month

Join this presentation to learn more about current trends in skin cancer prevention during this national call-to-action for skin cancer prevention. Speaker: Robin Ashinoff, M.D.

May 6, noon–12:45 p.m., virtual event



Childbirth/ Maternity

Tummy Time This fun and supportive class helps improve your baby's comfort with spending time on their belly. Tummy time is vital for proper strengthening of neck and back muscles, and for your baby's normal development toward future milestones.

Apr. 26, May 24, June 28 & July 26, noon–1 p.m., Palisades Medical Office Building, 7650 River Rd., Ste. 320, North Bergen

► **Prepared Childbirth Class** Apr. 30 & May 7, June 11 & 18 and July 23 & 30, 10 a.m.–1 p.m., Palisades; May 15, June 25, July 23 & 27, 9 a.m.–4:30 p.m., virtual event

► **Breastfeeding Class** Apr. 27, May 18, June 15 & July 20, 6:30–9 p.m., Palisades

► **Breastfeeding Class** May 11, June 22, July 20 & Aug. 24, 7–10 p.m., virtual event

► **Tour of the Labor & Delivery, Postpartum and Nursing Units** Visit MountainsideHosp.com/OhBaby for a virtual tour at Mountainside.

► **Infant Care and Safety Class** Expectant parents learn about the care, safety, growth and development of infants. May 16, June 6, July 11 & Aug. 8, 7–9:30 p.m., HackensackMeridianHealth.org/events or 1-800-560-9990.



Heart Health

Stay on Beat With Your Blood Pressure Learn simple steps to help control your blood pressure and prevent heart failure and stroke.

May 3, noon–12:45 p.m., virtual event

► **High Blood Pressure** Nutrition tips to help control your blood pressure. Presented by our registered dietician. May 5, noon–1 p.m., virtual event

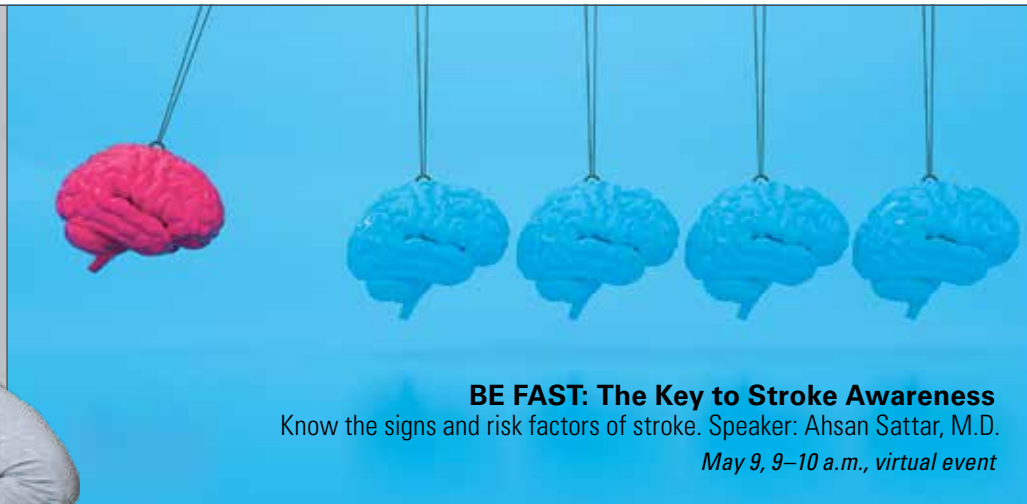
Special Events



Back Pain: Watch Your Back

Join us to learn symptoms and treatments available. Speaker: Jonathan Yun, M.D.

June 2, 1–2 p.m., virtual event



BE FAST: The Key to Stroke Awareness

Know the signs and risk factors of stroke. Speaker: Ahsan Sattar, M.D.

May 9, 9–10 a.m., virtual event

Family First Health and Wellness Day

May 14, 11 a.m.–2 p.m., rain date May 15
Palisades Main Campus



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General Wellness

Creating a Healthy Home for You and the Environment Join our Earth Day Seminar to learn simple but important tips to create a healthier home environment.

Apr. 22, noon–12:45 p.m., virtual event

► **Sleeves Up, Vaccinate** Join us to learn more about the importance of immunizations for children and adults. Speaker: Everett Schlam, M.D., Apr. 27, 3–4 p.m., virtual event

► **Steps to Prevent Sepsis** Sepsis is a powerful response to an infection. It's very important to get help ASAP if you think you have sepsis. May 4, 4–5 p.m., virtual event

► **What Is Reiki?** June 6, noon–12:45 p.m., virtual event

► **Blood Pressure, Pulse, Pulse Ox and CEED (Cancer Education and Early Detection) Program** June 7, 9–11 a.m., North Bergen Nutrition Senior Center, 1441 45th St., North Bergen

► **Blood Pressure, Pulse, Pulse Ox and CEED (Cancer Education and Early Detection) Program** July 19, 10 a.m.–noon, Holy Redeemer Community Church, 569 65th St., West New York

► **Weight-loss Surgery** To learn more about weight-loss surgery, attend a free seminar. To find a seminar near you, visit HackensackMeridianHealth.org/WeightLoss.

► **Support Groups** Hackensack Meridian Health offers regular support group meetings. Learn more at HackensackMeridianHealth.org/SupportGoups.



Pay It Forward

Two-time kidney transplant recipient Marilyn Moulton makes a generous gift to support future transplant patients.



Marilyn Moulton was working as a successful Wall Street analyst when she suddenly fainted. "I went to my father's doctor, who told me I was in kidney failure and needed to be admitted to the hospital," she says.

Over the next several years, Marilyn would endure blood tests and hours-long hemodialysis three times a week. A social worker urged her to talk to **Hackensack University Medical Center** about a kidney transplant, and in 2015, she had her first transplant.

The kidney worked well for a few years, but then started to deteriorate. She began having health issues and went back on dialysis. Because of her DNA and the high levels of antibodies in her blood from the first transplant, the odds of finding another match were slim.

Then, on November 13, 2021, Marilyn got a call from Hackensack. They had a match. A medical team led by **Michael J. Goldstein, M.D., FACS**, director of Organ Transplantation, performed the surgery that afternoon. It was a success, and Marilyn was discharged just four days later.

Even before her second kidney transplant, Marilyn made the decision to give a portion of her estate to Hackensack. "I was so grateful to everyone at Hackensack that they helped me twice," she says.

Marilyn has willed more than \$1 million through a bequest provision to Hackensack Meridian Hackensack University Medical Center Foundation to support research in the Division of Organ Transplantation at the hospital through The Marilyn and Albert Roland Moulton Foundation, a name that honors her father. "I want them to use this gift for kidney research to help other people, so they don't have to go through dialysis," Marilyn says.

Adds Courtney Klein, director of development for the Foundation: "Marilyn is genuinely invested in making a difference. Her gift is a remarkable testament to Dr. Goldstein and the trust she has in him to better the lives of organ transplant patients—today and in the future."

Dr. Goldstein and his team are involved in research activities to improve the quality of organ recovery and preservation. "By improving these techniques, we can help a lot more patients with lifesaving transplants," he says.

Adds Jacqueline M. Bartley, vice president of gift planning: "We are honored to celebrate Marilyn's extraordinary generosity today, knowing her legacy will impact many patients for generations to come."

Start your virtual fundraiser today at Give.HackensackMeridianHealth.org/HostYourOwn

Select your fundraiser type and sign up

Customize your page: Tell your story and add a personal photo

Start fundraising: Email and share your page with family and friends

Feel good about making a difference



Use your smartphone or tablet camera to scan me

Need help getting started? Email giving@hmhn.org.

Take a Mental Break

Each May, Mental Health Awareness Month is recognized across the globe. This year, take time to remember that mental health is essential to overall health.

The term mental illness refers to all mental disorders. This includes a variety of conditions, such as anxiety, depression, eating disorders, obsessive-compulsive disorders and more. Mental illness can impact your emotional state, thought process and behaviors.

The Numbers on Mental Health

1 in 5 ADULTS in the U.S. experience mental illness

1 in 20 ADULTS in the U.S. experience serious mental illness

1 in 6 YOUTH between the ages of 6 and 17 experience a mental health disorder each year

46.4% of people in the U.S. will experience a mental illness during their lifetime

57% have experienced COVID-19-related mental health adversity or trauma

The ABCs of 4-7-8

Breathing exercises are simple ways to relax and clear your mental space. One breathing exercise to try is the 4-7-8 technique.

Close your mouth and inhale through your nose for a **COUNT OF 4**

Hold your breath for a **COUNT OF 7**

Exhale through your mouth, making a whoosh sound for a **COUNT OF 8**



Make Time for You

Engaging in puzzles and games of all kinds can support mental health by:

Producing dopamine, responsible for improving concentration, motivation and optimism

Promoting relaxation and reducing stress

Building social bonds, when games are played with others

Practicing mindfulness



Go Online

Learn about behavioral health services at Hackensack Meridian Health at HMHforU.org/MentalHealth.

istock.com/STL_Aurora72/sesame

Sources: National Alliance on Mental Illness, Sapien Labs



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Behind the Scenes of COVID-19

See firsthand, honest accounts from Hackensack Meridian Health team members on the front lines of the COVID-19 pandemic in our new video series, UNMASKED.

Watch team members from across the network open up about the struggles, moments of frustration and intense bonds that have formed while working in these unprecedented times.

Learn more or watch the latest episodes at HMHforU.org/Unmasked.



We Are Hiring!

We are looking for individuals who are passionate about health care to join our growing team, where great benefits, robust learning and development programs, and more perks are offered. Both clinical and non-clinical positions are open in our health care facilities throughout New Jersey.

See open positions at jobs.hackensackmeridianhealth.org or scan the QR code.



Hackensack
Meridian Health
KEEP GETTING BETTER

As the state's largest, most comprehensive health network, Hackensack Meridian Health is made up of 7,000 physicians, 17 hospitals and more than 500 locations. For a complete listing of our hospitals, services and locations, visit HackensackMeridianHealth.org/Locations.