Hi. Welcome to this issue of HealthU
A message from Robert C. Garrett, FACHE, CEO of Hackensack Meridian Health.

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Better U quick tips to help you live your healthiest life

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Visit HMHforU.org for these and other great health care stories.
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 joyful 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.

Robert C. Garrett, FACHE, CEO
Hackensack Meridian Health

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/FindADoc. You can also find an easy-to-reference guide for when to get which screenings at 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.

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.

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

Conquer It Early
Consider exercising in the morning before unexpected work or family plans can derail your efforts to get physical activity. You’ll start 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.
BetterU
EMOTIONAL HARMONY supporting your emotional and mental health

Bright Side
Can light therapy lamps help with depression symptoms?

Light therapy—also known as phototherapy—is safely used to treat a number of illnesses, but the most common use is for a type of depression called seasonal affective disorder, or SAD. People who have SAD experience symptoms of depression during certain times of the year, especially months when there are fewer daylight hours.

“Light therapy is not a cure, but it has been shown to help reduce symptoms that come with depression, such as loss of energy, trouble sleeping, anxiety, and feelings of sadness, hopelessness and irritability,” says Eric C. Alcera, M.D., a behavioral health specialist at Hackensack Meridian Health.

How Sunlight Affects the Brain
People with SAD may want to sleep more and be less active. Scientists believe that it’s because of a hormone that regulates the body’s functions, known as circadian rhythm, typically a 24-hour period, that regulates the body’s functions,” says Dr. Alcera. “So during times of the year when there is less sunlight, some people get depressed.”

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, typically a 24-hour period, that regulates the body’s functions,” says Dr. Alcera.

How Light Therapy Lamps Work
During light therapy, a person sits in front of a lamp and is exposed to very bright white light for a certain period of time. The light may be set to a lower lux level, which is how illumination 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 usually takes a few days for symptoms to improve, but it could take up to a couple of weeks. 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. Alcera.

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. Medical device companies also sell them. They cost anywhere from $20-$500. Talk with your doctor about which light therapy device is right for you.

How Light Affects the Brain
Is less sunlight, some people may not produce enough melatonin, a hormone in the brain that is involved with sleep, or serotonin, another hormone that manages mood, appetite and sleep, which can contribute to how a person feels,” says Dr. Alcera. “When there is less sunlight, some people may not produce enough melatonin, a hormone in the brain that

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 cholesterol to guide a better understanding of your risk for a heart attack or stroke, as well as guide ways to improve upon them,” says Justin Herrel, M.D., family medicine specialist at Ocean University Medical Center.

Lifestyle changes may help you lower your cholesterol levels in 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 fats. 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.

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

Grilled Greek Salad
In a heavy pan, heat olive oil and pepper to medium-high.

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.

Spoon the mixture generously over the lettuce, sprinkle feta on top and serve.

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.

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

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

Steps
Mix topping ingredients with vinegar and oil, then set aside.

1. In a heavy pan, heat olive oil and pepper to medium-high.

2. 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.

3. 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.

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

For additional tips on eating healthy, visit HMHforU.org/Nutrition
What causes brain freeze? Sandra Escandon, M.D., weighs in:

Brain freeze is often referred to as an ice cream headache and is medically known as sphenopalatine ganglogenaesthesia. 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 rush of blood.

Can you develop allergies as an adult? Qasim Husain, M.D., FACS, FAAOA, 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:

New exposures. Some people are not exposed to enough levels of allergens as a child but reach that threshold as an adult. This can occur when moving to a new area or getting a new pet.

A changing environment. There are higher amounts of pollen and mold in our atmosphere, as well as poor indoor air quality and increasingly sedentary lifestyles. These factors may cause people who never had allergies to develop symptoms.

Immune system compromise. Exposure to allergens during illness or pregnancy can increase sensitivity.

Hypervigilant focus on cleanliness ("the hygiene hypothesis"). 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.

How often should you wash your clothes? Georgios Giannakopoulos, D.O., weighs in:

It depends on a few factors. You can follow this guide.

1. Wash new clothing before wearing
2. Wash these items after every use:
   - Socks
   - Underwear
   - Bathing suits
   - T-shirts
   - Shirts that fit snugly and are worn directly against the skin
3. Wash these items after two or three wears:
   - Bras
   - Pajamas
   - Loungewear that you relax in around the house after you come home from work
4. Wash these items after four or five uses:
   - Jeans
   - Stained clothing
   - Underwear
   - Workout clothing you’ve sweated in
   - Socks
   - Underwear
   - Workout clothing you’ve sweated in

Read more at HMHforU.org/Clothes
More than 21,000 American women are diagnosed with ovarian cancer every year, but only about 20 percent of ovarian cancers are found early—a dismaying statistic stemming from several key factors, says Mark Borowsky, M.D., director of Gynecologic Oncology at Jersey Shore University Medical Center.

“The problem with ovarian cancer is it doesn’t present with a lot of symptoms until it’s quite advanced,” he explains. “There’s also no effective screening test.”

Another strategy used now is giving half of the chemotherapy to patients prior to surgery, a technique called neo-adjuvant chemotherapy. “This strategy, with chemotherapy taking place before surgery, is becoming more common in ovarian cancer treatment,” Dr. Borowsky notes. “It allows surgery to be performed with much less surgical morbidity and mortality, sometimes even changing the surgery from a big open abdominal procedure with prolonged hospitalization and recovery into a laparoscopic or robotic-assisted minimally invasive surgery.”

Dr. Borowsky says the single biggest improvement in the care of ovarian cancer patients over the past decade has been the introduction of three oral chemotherapy drugs, known as PARP inhibitors, as follow-up maintenance therapy for women with ovarian cancer. “Using this maintenance regimen after traditional surgery and chemotherapy, we’re seeing women experience much longer periods without the disease recurring,” he says.\

Risk factors for ovarian cancer can include:
- Strong family history of breast cancer and/or ovarian cancer
- Mutation in BRCA1, BRCA2 and certain other genes, as detected by genetic testing
- Family or personal history of breast cancer occurring in both breasts
- Ashkenazi Jewish heritage

Options for Treatment

Traditional treatment for ovarian cancer includes surgery followed by chemotherapy delivered intravenously or into the abdominal cavity. Other options sometimes used include a technique of infusing heated anti-cancer drugs directly into the abdominal cavity at the time of surgery, a technique referred to as HIPEC.

Dr. Penney gives Karen three options: wait and monitor, surgery, and chemotherapy. “I decided to take the most aggressive route and have a hysterectomy,” says Karen, who opted for a robotic-assisted procedure at Riverview to remove her uterus and ovaries.

Robotic-assisted surgery eliminates Karen McDermott’s ovarian cyst while offering a quick recovery.

Karen McDermott, EJ, of Wall, New Jersey has always led an active lifestyle. “The retired physical education teacher enjoys going to the gym, taking fitness classes and spending time at the beach. Last spring, when bladder issues led Karen to see a urologist, an ultrasound revealed she had a cyst on her ovary. Luckily, the cyst seemed to be benign and was not causing too much pain—just occasional discomfort when Karen was in bed at night. Karen’s doctor recommended keeping a close eye on the cyst for continued growth. Several months later, Karen went for her annual checkup with her gynecologist, Robert Penney, M.D., affiliated with Riverview Medical Center.

“A pelvic ultrasound showed that the cyst on her ovary had grown significantly since the last scan,” says Dr. Penney. “In addition, a mass was now growing around the cyst.”

Robotic-Assisted Approach

Dr. Penney gave Karen three options: wait and monitor the cyst to see if it grew larger, remove the affected ovary and cyst, or undergo a hysterectomy.

Karen was an excellent candidate for robotic surgery,” says Dr. Penney. “Robotic surgery has many benefits, including faster and easier recovery for patients, less post-operative pain, smaller incisions with less scarring for improved cosmetic results and an expedited return to daily activities.”

“Still, I don’t want to wait. I want to be proactive.”

“My aunt died of ovarian cancer, and my mom died of breast cancer. Because of my family history, I decided to take the most aggressive route and have a hysterectomy,” says Karen, who opted for a robotic-assisted procedure at Riverview to remove her uterus and ovaries.

Back in Action

Just five days after her robotic hysterectomy, Karen was back at the gym and enjoying Zumba class. The week immediately following her surgery, she was able to make it to the gym a total of four times.

“At the gym, everyone kept saying, ‘I can’t believe you’re here—didn’t you just go in for surgery?’ They couldn’t believe I was able to bounce back so quickly,” Karen recalls. Today, Karen is pain-free and continues to enjoy an active lifestyle.
6 Signs You May 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 considered the base of your core and includes a group of skeletal muscles located within the pelvis that support and contribute to bowel, bladder and sexual function. If your pelvic floor muscles are weak or not working correctly, you may experience uncomfortable, inconvenient or embarrassing symptoms.

Rosalind Cox-Larrieux, PT, PRPC, physical therapist at Bayshore Medical Center, 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.

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.

Treatment for Pelvic Floor Dysfunction

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

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

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

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

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

Headaches are incredibly common. There are many types, all of which have different causes, characteristics and treatment options. Neurologist Monte Pellmar, M.D., FAAN, director of the Headache Center at Jersey Shore University Medical Center, offers insight on the three most common types of primary headaches.

When to See a Doctor

Make an appointment to discuss your headaches with your doctor if your headaches are becoming more severe, more frequent, not responsive to treatments or associated with any new or worsening symptoms.

These red flags demand more urgent attention:

- The worst headache of your life
- New onset headaches in individuals over age 50
- New headaches associated with cancer or HIV
- Headaches associated with symptoms such as fever or weight loss
- A significant change in the character or frequency of the headache
- Headaches precipitated by exertion, such as weight lifting, sexual intercourse, coughing, sneezing or straining

Learn more about our rehabilitation services at HMforU.org/Rehab.
And one of these: Spotlight on U

The goal, however, should be to return to normal living.

Treatments:

Options for treating migraines include:

- CGRP antibodies
- Nutraceuticals such as magnesium and COQ10
- Medications such as triptans and gepants.

Disruption in sleep patterns

Perimenopause

Menstruation

Loud noise

Bright lights

Medications

Certain foods

Worsening pain with movement

And one of these:

- Sensitivity to noise and light
- Nausea and or vomiting

Causes: Migraine is an inherited disease known to be a neurovascular disorder. Triggers include:

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

Treatments: Options for treating migraines include simple tasks, such as lying down in a quiet, dark room or putting an ice pack or cold compress on the head.

Prevention treatment options include:

- Avoiding triggers
- Nutraceuticals such as magnesium and COQ10
- Anti-seizure medicine
- Antidepressants
- Blood pressure medicine
- Botulinum toxin
- CGRP antibodies
- Gpants

Cluster Headache

Symptoms: Cluster headaches are more common in men. The pain generally occurs behind or around the eye on one side and is very painful. These headaches often occur over a period of a few weeks or months, typically awakening the individual in the middle of the night. They are shorter in duration than migraine and can occur up to eight times a day.

Causes: Although the exact cause of cluster headaches is not known, we know a portion of the brain called the hypothalamus is involved.

Treatments: If you are experiencing cluster headaches, Dr. Pellmar recommends seeing a doctor. “It’s important to find a doctor who can diagnose cluster headaches and work with you to find an effective treatment and exclude other conditions that can mimic cluster headaches.”

Risk Factors for Stroke

Risk factors for stroke include:

- High blood pressure
- Smoking
- Heart diseases such as cardiomyopathy and atrial fibrillation
- Diabetes
- Age (your 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

Stress 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 Stephen Martino, M.D., a neurologist at Jersey Shore University Medical Center and Ocean University Medical Center.

Here’s how.

How to Prevent 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. Martino says.
Timothy Welch was 43 when he was diagnosed with Parkinson’s disease 13 years ago. The Whiting, New Jersey resident had been working as a chef, but “sharp knives and tremors really didn’t go together too well,” he says. Undaunted, he went back to college and got a master’s degree so he could work as a substitute special education teacher at the elementary school where his wife taught second grade.

While subbing in an art class one day, he joined the students in drawing and discovered he had a talent. He soon began exhibiting and selling landscape paintings, and while he kept creating art at home, he ceased showing his work at local venues.

When he and his wife moved from upstate New York to New Jersey in 2021, Timothy had to find a new neurologist to help manage his Parkinson’s. He was looking for a cohesive team that could support him on his long-term journey. “Luck,” he says, brought him to Rocco DiPaola, M.D., a neurologist with a specialty in movement disorders at Jersey Shore University Medical Center.

“Part of the reason I chose Dr. DiPaola was for the whole team,” Timothy says. “Their communication lines were all in sync, and that was important. I thought the quality of my care would be better.”

Relief From Tremors
During their first meeting, Dr. DiPaola evaluated Timothy and suggested that he might benefit from deep brain stimulation (DBS) surgery. DBS surgery places thin electrodes into specific areas of the brain and connects them under the skin to a pacemaker-like device inserted under the collarbone or in the abdominal cavity. Electric pulses from the device are sent to the brain to reduce tremors.

“DBS is not a cure for Parkinson’s disease, but it helps control the symptoms, specifically tremor, dyskinesias and motor fluctuations—stabilizing functional activity for years,” Dr. DiPaola says. Dr. DiPaola referred Timothy to the chair of neurosurgery at the Neuroscience Institute at Jersey Shore, Shabbar Danish, M.D. “I thought the surgery would be successful for him,” Dr. Danish says. “I thought it would allow him to eliminate most of the medications he was taking and improve his quality of life.”

Timothy had DBS surgery in January 2022, and as soon as his pacemaker-like device was turned on and properly adjusted a few weeks later, he felt an immediate improvement in his symptoms. He is walking much better, his tremors are under control, and the medications he had been taking have been eliminated or the dosages reduced.

“Quality of life has vastly improved,” Timothy says, so much so that he has art shows scheduled for the summer. “I can’t thank my medical team enough. They’re more like a family unit, and I’m kind of one of theirs now.”

An Aspirin a Day?

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 Brett Sealove, M.D., chief of cardiology at Jersey Shore 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. Sealove. “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. Be sure to 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.

Learn more about comprehensive heart care close to home at HMHealth.org/Heart.

How should you take a daily aspirin to help prevent a heart attack?
**Spotlight on U**

**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 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 who experience chronic joint pain may be more sensitive to this discomfort, which is caused by tissue taking up more space than usual and overburdening the joints,” says Jason Wong, D.O., orthopedic surgeon at Southern Ocean Medical Center.

**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, 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 look for any twinges and discomfort that might not otherwise cause concern.**

**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 takes pressure off your joints.
- **Keep moving.** Find ways to get in your usual activity, 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 you do 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.
- **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. **

**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.

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**Walk the Walk**

Former Jersey Shore University Medical Center nurse Sue Blasi is back walking her beloved beagle 3 miles a day after a partial knee replacement surgery.

Sue Blasi was at one of her favorite places, the golf course, when her left knee gave out in summer 2020. The injury was the last straw for the former operating room nurse at Jersey Shore University Medical Center, who knew that progressive arthritis affecting the joint would eventually stop her from playing her beloved sport and taking long walks with her beagle, Journey. “My knee was the size of a grapefruit and became too painful to even walk my dog, which is super important to me,” recalls the 62-year-old Sea Girt, New Jersey, resident.

But Sue’s 15 years on staff at Jersey Shore—where her father had been a surgeon—provided key insight into treatment options and available expertise. She tapped hip and knee orthopedic surgeon Greg Roehrig, M.D., after noninvasive measures such as anti-inflammatory medications and physical therapy weren’t effective.

**Partial Replacement, Total Solution**

Dr. Roehrig determined Sue was a candidate for a partial knee replacement. “Even though total knee replacement isn’t as well known as total knee replacement, it’s been around for decades, and a lot of research supports how effective it can be,” Dr. Roehrig explains. “We had a great opportunity to preserve the two-thirds of Sue’s knee that didn’t need replacing and simply replace the one-third that did.”

Partial knee replacement offers a minimally invasive approach that requires only a small incision. After surgery, Sue returned home later that day without any complications such as infection, blood clots or blood loss.

**Standout Program**

Only days later, Sue was already deep into a four-week course of outpatient physical therapy, strengthening muscles and restoring the knee’s full range of motion. “My biggest concern being an athlete was I’d overdo it, so even though I could have swung a golf club four weeks after surgery, I delayed that,” she explains. “I wanted to give my body the best shot to heal.”

Her steadfast approach paid off. Sue can’t even feel the artificial portion of her knee joint and was back on the golf course—where she’s competitive in local tournaments—three months after surgery. “I go to the gym, I work, I golf, and I happily walk my dog 3 miles at a time,” Sue reports. “I feel like I have no limitations.”

Adds Dr. Roehrig: “For Sue, it was a bit like coming home. There was a comfort level as a former team member, coming back to an environment she was so familiar with. But the same environment is available to patients who aren’t team members, because our team is welcoming, compassionate, diligent and meticulous with doing everything the right way.”

**Learn more about knee replacement at Hackensack Meridian Health at HMHforU.org/NewKnees.**
Spotlight on U

11-year-old was alarmed to learn her painfully Unusual Fracture, Straightforward Approach

Still dressed in formal horse show attire, Grace Doherty
benefited from a minimally invasive approach. After a brief
hospital stay, Grace went home. She attended school virtually
so her shoulder wouldn’t get jostled as the bones mended.
Four weeks later, Dr. Lentz removed the surgical pins
during a brief office visit, allowing Grace to begin
physical therapy to regain her shoulder strength and
range of motion.

“Without a big incision, healing is faster,” Dr. Lentz
says. “Grace has a normal arm now, and if she wants
to get back on a horse again, she’s cleared to do that.” Grace, however, is taking time to reflect on her
experience and decide whether her hobbies will
again include horseback riding or perhaps a shift
toward other pursuits. In the meantime, she’s savoring the small wins. “I like being able to eat
and wash my hair by myself and throw my dog’s ball,” she says. “I just like being able to use
my arms again.”

Learn more about pediatric orthopedic care at
HackensackMeridianHealth.org/PedOrtho

Savoring Small Pleasures

Ever since she could talk, Grace Doherty wanted
to ride a horse. But when the Marlboro, New Jersey, girl fell off one of her favorites, Lady Bug,
during an equestrian show in October 2021, the
11-year-old was alarmed to learn her painfully
injured arm couldn’t be treated at a local urgent
care center.

Fortunately, specialists at K. Hovnanian Children’s Hospital
at Jersey Shore University Medical Center were up to the
task, skillfully shepherding the fifth-grader and
her parents through minimally invasive surgery
to reset her badly broken shoulder and offered
Grace a new perspective on everyday pleasures.

“Grace has a normal arm now, and if she wants
to get back on a horse again, she’s cleared to do that.”
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5 Ways to Prevent Injury

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.

Use proper form. Every sport has
proper and improper ways to play. Your child should be shown the correct tech-
niques 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
don’t 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.

Sprinters: 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.

Go Online

Learn more about family-centered care for kids at
Hackensack Meridian Health at HMHforU.org/Kids

PEDIATRICS

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
carries with it a potential risk for injury. 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
activity too quickly,” says Jonathon Lentz, D.O., pediatric
orthopedic surgeon at K. Hovnanian Children’s Hospital
at Jersey Shore 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
jolted, 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. Lentz. “They usually are not
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9 Steps to Better Gut Health

What foods and habits can promote good digestion and improve your gut health?

We all know how uncomfortable it can be to feel bloated, be constipated or experience an occasional bout of diarrhea. You may not realize it, but your everyday diet and lifestyle habits may affect your digestive system. If you spend too much time feeling gut discomfort, take an honest assessment of what you eat and how you spend your time to see if your tendencies may be negatively impacting your gut.

“Many people don’t realize that certain nutrient-dense foods are better for the digestive tract and that so-called ‘junk foods’ may trigger digestion problems,” says Oliver Felibrico, M.D., internal medicine doctor at Jersey Shore University Medical Center. “People know that healthy lifestyle habits, like exercising regularly and getting enough sleep, are good for them. But many don’t realize that healthy habits promote good digestion and that slacking in these areas may contribute to poor gut health.”

Your digestive tract is teeming with bacteria and other microscopic flora. “Good” microbes aid the digestive process. If your gut becomes overrun with “bad” flora, you may experience discomfort or other problems. Take these steps to establish or maintain ideal levels of “good” gut flora.

1. **Cut back on sugar**
   Eating too many sweets may shift the balance of gut flora toward “bad” microbes, making it more likely that you’ll experience gas, bloating or other digestive problems. Artificial sweeteners are also linked with bloating and negative shifts in gut flora.

2. **Limit fried food**
   Choose baked over fried foods whenever possible. Fried foods promote the growth of “bad” gut flora and discourage the growth of “good” microbes.

3. **Consume probiotics**
   Eating foods containing “good” live bacteria, known as probiotics, may reduce gut inflammation and digestive problems. After you consume probiotics, they remain in your gut and encourage the growth of “good” gut flora. They’re found in some yogurt, sauerkraut, kimchi and other fermented foods.

4. **Eat more fiber**
   Most Americans consume half as much fiber as is recommended, so if you’re like everyone else, you probably aren’t getting enough. “Fiber helps you move your bowels regularly, so eating more may help you avoid constipation. Good sources of fiber include fruits, vegetables, beans, whole grains, nuts and seeds,” Dr. Felibrico says. If you don’t consume much fiber now, slowly increase the amount you eat, because upping the fiber content of your diet in larger increments may temporarily cause bloating and gas.

5. **Eat a plant-based diet**
   Consuming fruits, vegetables, whole grains, beans and other plant-based foods promotes gut health naturally because of their fiber content. They also encourage the proliferation of “good” gut flora. Red meat may help “bad” gut flora to thrive. Cutting red meat from your diet by eating more plant-based foods may encourage “good” microbes to thrive and help lower gut inflammation — making digestion easier.

6. **Manage stress levels**
   Stress and anxiety may make it more challenging for your digestive tract to operate efficiently, which may lead to heartburn, bloating or other issues. Whenever possible, practice healthy habits that help reduce stress, including exercise, deep breathing or meditation.

7. **Exercise more**
   People who exercise regularly are more likely to manage their weight and avoid obesity, which is linked to poor gut health. Thinking and eating like an athlete may improve your gut microbiome. Research has found that athletes have more diverse gut flora, which may help aid digestion.

8. **Get more sleep**
   Sleeping for 7–9 hours each night may make it easier to control your weight, and being well rested helps “good” gut flora to thrive.

9. **Quit smoking**
   Smoking is an unhealthy habit that isn’t just bad for your lungs; people who smoke alter the proportion of gut flora in their digestive tracts, pushing the balance toward “bad” microbes. Take steps to stop smoking for your overall health and your gut health. 

Learn about gastroenterology and nutrition services at Hackensack Meridian Health at HMHforU.org/GutHealth.

Oliver Felibrico, M.D.
Internal medicine doctor
800-822-8905
Howell

iStock.com/Nadzeya_Dzivakova/Oksana Latysheva/newannyart
Tossing the CPAP

An innovative implantable treatment for obstructive sleep apnea offers new hope for better sleep.

Roughly half of patients who need continuous positive airway pressure (CPAP) machines are not able or willing to use these devices for the long term despite the serious health risks they face from obstructive sleep apnea. Now there is an innovative, new treatment approved by the U.S. Food and Drug Administration that may be an alternative to CPAP: the Inspire® Upper Airway Stimulation system.

The Inspire® system is an implantable device that frees patients from uncomfortable face masks, cumbersome plastic tubing and noise, as well as the stuffy nose, skin irritation and dry mouth that come with CPAP machine use. The device operates from within the patient’s body and works with their natural breathing process to alleviate apnea episodes.

“The patients require treatment because apnea restricts oxygen flow to the brain, heart and other vital organs, putting them at substantial risk for heart damage, stroke, weight gain, high blood pressure, heart failure and even Type 2 diabetes,” says Adrian Pristas, M.D., corporate medical director of Sleep Medicine at Hackensack Meridian Health. “For patients who have moderate to severe obstructive sleep apnea, the Inspire® device functions much like a pacemaker to keep their throat open so they breathe naturally and get healthful sleep.”

Once the Inspire® device has been activated during a sleep study, the patient controls it with a handheld device similar to a remote control. Like a CPAP, it is only used when the patient is planning to sleep. But instead of donning the cumbersome mask and rig, the patient presses a button on the remote control and holds it momentarily over the device implanted in their chest.

During the first year after implantation, patients normally see their doctor several times to confirm the device is working properly and there are no side effects. After that, most can move to annual check-ups.

A Whole New World

“Studies have shown that Inspire® therapy can enhance a patient’s health by significantly reducing the frequency and adverse impact of their sleep apnea events,” Dr. Pristas says. Thomas Brandeisky, D.O., otolaryngologist and Sleep University Medical Center, adds: “In addition to offering this innovative technology at Jersey Shore, we are now providing even more access for patients and have made it available at Ocean. Across the region, we’ll be able to treat even more patients who struggle with CPAP.”

How It Works

The Inspire® device—a small impulse generator—is inserted during an outpatient procedure while the patient is under general anesthesia. A pocket is created surgically under the skin below the collarbone to hold the device.

Minor incisions are required to attach the two instruments that extend from the device: One is a sensor placed in the chest between the external and intercostal muscles to measure the patient’s breathing. The other is a stimulator attached to the nerve at the base of the tongue when the patient inhales to open the airway.

Among the main health concerns in the pandemic era is insomnia, or the ability to fall and/or stay asleep. While some COVID survivors with long-term symptoms experience insomnia, the Centers for Disease Control and Prevention does not list this sleep disorder as a common COVID-19 symptom. Rather, many new cases of insomnia are caused by pandemic-related stress.

“In the past two years, we have seen an increase in insomnia and sleep disorders across all age groups,” says Adrian Pristas, M.D., corporate medical director of Sleep Medicine at Hackensack Meridian Health. “There has been so much to worry about during the pandemic—avoiding the illness, working remotely, helping kids with remote school—and all of these stressors can cause anxiety or depression, which can lead to insomnia. Sleepers right now can also be caused by a total disruption of daily routines, monotony in the day or complete lack of a daily routine. “Fortunately, one sleepless night does not mean you now have insomnia,” says Dr. Pristas. “With a few simple changes to your daily habits, you can get your sleep back on track.”

HealthU Spring 2022 HackensackMeridianHealth.org

Go Online

Learn more about care for sleep disorders, including the Inspire® therapy, at HMHealth.org/SleepHealth

Is COVID-19 Keeping You Awake?

Even for those who have never contracted COVID-19, the pandemic has taken a toll on many people’s health, including the ability to fall or stay asleep.

How to Get Some Zs

Here are a few tips to help you catch some Zs:

• Establish a routine, and stick to it. Wake up and go to bed at the same time every day, and create a relaxing bedtime routine. Dim the lights, have a warm cup of caffeine-free tea or read a book to help you wind down.

• Get moving during the day. Regular exercise—specifically moderate aerobic exercise like walking—can help people with insomnia fall asleep faster and stay asleep longer.

• Turn off your devices. Blue light from cell phones, tablets and computers can suppress the secretion of melatonin, the hormone that makes you sleepy. Avoid this by powering off at least an hour before bed.

• Don’t use your bedroom as an office. Your body should associate this room with sleep, not work. If you can’t avoid a bedroom workspace, at the least don’t work in bed.

• If deep reading makes you get out of bed, “Getting anxious about sleep can actually perpetuate the problem,” says Dr. Pristas. “If you don’t fall asleep after about 30 minutes, get out of bed and engage in a relaxing activity or meditation.”

• Talk to your doctor. If your insomnia has been persistent for a few weeks, your doctor can help find the right solution for you.

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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 health, especially your lung health. And, once you’ve quit the habit, the number of those health benefits continues to increase as time passes.

“It is no secret that smoking cigarettes takes a toll on our bodies,” explains Ziad Hanhan, M.D., FACS, director of minimally invasive thoracic surgery at Bayshore Medical Center and Riverview 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, coronary heart disease and other cancers, like pancreatic and esophageal.

Aft er a person quits smoking, their health can improve quickly. These 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. Here are the benefits your body will see one, five and 10 years after you quit smoking.

1 Year After You Quit Smoking

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

Additionally, 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 Smoking

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 Smoking

“In addition to all of the benefits we’ve already mentioned, your risk of dying from lung cancer is now about half the amount it was when you were smoking,” Dr. Hanhan says. “Your cancer risk is also decreased for pancreatic cancer and cancer of the larynx.”

Should you get screened for lung cancer? Find out at HMHforU.org/LungScreen.
**Signs of Vaping Disease**

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

Some people are turning 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 across the U.S. Either way, the unfortunate truth is we are starting to see that the effects of vaping are equally, if not more, harmful than 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) is one of the principal psychoactive ingredients in marijuana, can result in long-term respiratory and cardiovascular health issues. But there’s still a lot for researchers to learn, and other additives have not been ruled out as a cause.

**What Are the 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, like the flu, which is concerning,” says Mona Awad, M.D., pulmonologist and critical care specialist at Bayshore whose patients with EVALI often mistake the disease for a GI condition.

**EVALI symptoms include:**

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

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 a shortness of breath with exertion,” Dr. Awad 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 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.

While our understanding of vaping-related lung injuries continues to develop, there’s no doubt that vaping is a risky behavior that’s putting lives at risk. “Vaping is becoming much more common and trendy now with the teenage and younger adult population,” says Dr. Awad. “People who vape need to be super vigilant of the potential harm.”

**Doctor Spotlight**

**MIHIR M. PATEL, M.D.**

**Family medicine**

Ocean University Medical Center

Although he spent nine years of his childhood in India, for Mihir M. Patel, M.D., Ocean County, New Jersey is home. The family medicine provider at Hackensack Meridian Medical Group–Jackson Family Medicine and Ocean University Medical Center enjoys giving back to his neighbors and his neighborhood.

“I grew up in the same 10-mile radius of where I practice now,” he says. “It’s rewarding to give back to the community I grew up in.”

Shortly before he was born in Perth Amboy, New Jersey, Dr. Patel’s parents immigrated to the U.S. from India. When he was 9 months old, he went back to India to live with his grandparents while his parents built up their family business. When he returned to the states, he spent his teenage years working in his family’s convenience store and finding his place in a new culture. Converting with hundreds of customers every day, he not only learned English but also how to connect and build relationships with people.

Dr. Patel was a member and chief resident of the first family medicine residency class at Ocean and stayed as an attending physician. The skills he learned while growing up in the family business have been especially important in his practice, where Dr. Patel sees patients from all walks of life.

**Why did you choose family medicine?**

I chose family medicine because of the opportunity to build long-term relationships with patients. I get to help people, talk to them and have relationships for years and years. Through that bond, I can prevent diseases. I take time to explain what diabetes, high blood pressure and high cholesterol are and what they can do to a person. I see, so often, that because of a lack of understanding of these conditions, there’s a lack of compliance with treatment. I’ve noticed that going in depth with counseling has been a huge success. I’m passionate about taking the time to talk about that.

**What are your go-to ways of staying healthy?**

The key to a healthy diet is planning. I typically use Sunday to plan and prep my meals for the week. Planning and prepping prevents settling for an unhealthy meal and eating out. My meals consist of complex carbohydrates, protein and healthy fats. My favorite go-to healthy snacks are sliced apples, berries, nuts and peanut butter.

To make an appointment with Dr. Patel, call 800-822-8905 or visit HMHealth.org/FindADoc.
It is a very painful condition that requires regular blood transfusions.

There are two main curative treatments for sickle cell disease:

1. **Bone marrow transplant**
   - The patient undergoes chemotherapy to kill off their own bone marrow.
   - The patient is then transfused with healthy blood cells from a donor.
   - The patient’s own immune system attacks the donor cells, which can be severe.

2. **Gene therapy**
   - The patient undergoes chemotherapy to kill off their own bone marrow.
   - Stem cells are removed from the patient and modified to include healthy genes.
   - These modified stem cells are then returned to the patient, replacing their diseased cells.

Sickle cell disease can affect every organ in the body, including the heart, liver, kidneys, and joints.

**Pain crises** are a common symptom of sickle cell disease, often requiring hospitalization.

**Sickle cell disease can occur in people of any ethnicity.**

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

**There are potential cures for sickle cell disease.**

**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-Zenenberg.

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-Zenenberg, the principal investigator of the gene therapy study.

**Here’s how it works:**

1. The patient undergoes chemotherapy to kill off existing stem cells.
2. After that, the patient is transfused with their own genetically modified stem cells.
3. 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-Zenenberg 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.
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.

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

**Special Events**

**Stroke: How Do I Know if I am at Risk?** May is National Stroke Awareness Month. Join Spozhmy Paneza, M.D., and learn what to do if someone is having a stroke, the signs/symptoms and what to do if someone is having a stroke. The signs/symptoms and what to do if someone is having a stroke. May 19, noon–1 p.m., virtual event

**Diabetes**

**Eat Well: Living With Diabetes** Join our certified diabetes educator and learn how nutrition affects diabetes, meal planning and more. May 4, 7 a.m.–noon, virtual event

**Behavioral Health**

**Men’s Health Month** Join our men’s health experts and learn important health topics just for men, including the top 10 health and wellness considerations, the importance of strength training and why mental health should not be taboo for men! June 1, 1–2 p.m., virtual event

**Heart Health**

**Mediterranean Diet: How Does It Affect Your Cholesterol?** Join Monica Bait, M.D., and learn all about the Mediterranean diet and how it can affect your cholesterol levels for the better. June 2, 6–7 p.m., virtual event

**Can You Feel the Beat? Heart Rhythm Disorders** Speaker: Matthew Saybolt, M.D., June 22, 11 a.m.–noon, virtual event

**Cancer Care**

**Fresh Start Smoking Cessation** This four-session program is available to help you quit smoking. Attendance is required at all four sessions. May 6, 8, 13 & 18; June 3, 6, 10 & 13 and July 1, 11, 14 & 19, 10–11 a.m., Riverview Rochelle Conference Center; May 17, 19, 24 & 26, 6–7:30 p.m., Ocean, East Wing Conference Center

**Thriving and Surviving Cancer Survivor Workshop** May 11, 11 a.m.–2 p.m., and June 18, 8:30–9:30 p.m., virtual event

**Stop Smoking With Hypnosis** Kelly Fitzpatrick, M.D., May 5, 6–7 p.m., virtual event

**Neuroscience**

**Are You Getting a Good Night’s Sleep?** Join Rana Y. Ali, M.D., and learn tips on getting a good night’s sleep, as well as sleep apnea and treatment options. May 11, 11 a.m.–noon, virtual event

**Deep Brain Stimulation for Parkinson’s and Essential Tremor** May 18, 6:30 p.m., virtual event

**Advances in Multiple Sclerosis** Speaker: Krupa Pandey, M.D., June 10, 11 a.m.–noon, virtual event

**Headaches vs. Migraines** Speaker: Monte Pollmar, M.D., June 15, 11 a.m.–noon, virtual event

**General Wellness**

**Living With Arthritis** Join Sundee Prani, D.O., and learn about different types of arthritis, as well as diagnosis and treatment options. June 2, 11 a.m.–noon, virtual event

**Healthy Vision** Speaker: Ralph DelNegro, D.O., May 18, 4–5 p.m., virtual event

**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/SupportGroups.

**Pediatrics**

**Safe Sitter** Babysitter training for boys and girls ages 11–14. The class includes handling emergencies, childcare skills, CPR and first aid. Fee: $15. Visit HackensackMeridianHealth.org/Events for upcoming dates.

**Safe at Home by Safe Sitter** Speaker: med, May 19, 6–7 p.m., virtual event

**Parent/Guardian Talks:** Is Your Child Complaining of Pain? Speakers: Ami Merchant, M.D., and Paul Hayes, M.D., May 19, 6:30–7:30 p.m., virtual event

**HOSPITAL LOCATIONS**

Bayshore Medical Center
727 North Beers St., Holmdel

Carrier Clinic and Blake Recovery Center
262 County Rd. 601 Beale Mead

Jersey Shore University Medical Center and K. Hovnanian Children’s Hospital
1945 Route 33 Neptune

JFK University Medical Center
65 James St. Edison

Ocean University Medical Center
425 Jack Martin Blvd., Brick

Old Bridge Medical Center
1 Old Bridge Plaza Old Bridge

Raritan Bay Medical Center
130 New Brunswick Ave. Perth Amboy

Riverview Medical Center
1 Riverview Plaza Red Bank

Southern Ocean Medical Center
1140 Route 72 West Manahawkin

To find a seminar near you, visit HackensackMeridianHealth.org/Events. Visit Hackensack Meridian Health offers regular support group meetings. Learn more at HackensackMeridianHealth.org/SupportGroups.
Giving Back Feels So Good

After retiring from her job as a nurse in the maternity unit, Sharon Dymnioski was anything but done with her involvement with Ocean University Medical Center.

For 26 years, Sharon Dymnioski worked in the maternity unit at Ocean University Medical Center. She began in labor and delivery and later moved into the nursery, where she attended to newborn babies.

After she retired, she missed the hospital and all her old friends. So she came back to the nursery, where she attended to newborn babies and stayed with the newborns when the nurses need to run to a delivery,” she says.

But her hospital service didn’t end there. She currently serves as the president of the Guild of Ocean University Medical Center, a nonprofit organization that funds educational and other health care-related services at the hospital and throughout the community. “We raise money for the hospital for smaller pieces of equipment, we donate to Common Ground Grief Center, which provides peer support groups for kids dealing with grief after a loss, and we help the Mental Health Association, which does suicide prevention work,” she says.

The hospital is a priority for Sharon—so much so that she recently committed to a $500,000 annuity gift to Hackensack Meridian Ocean University Medical Center Foundation. “As the hospital has grown, it’s become more endearing to me,” she says. “There are so many cutting-edge, innovative things available now that simply weren’t accessible to the local community 20 years ago, and I thought, ‘We just have to keep this going.’ The donation will go specifically to the maternity unit, which offers a unique opportunity. “Sometimes, the maternity unit is the very first time a woman comes into the hospital. When she sees that it’s a place that’s warm and comforting, she’s going to remember that,” Sharon says.

As for Ocean, they are grateful beyond measure. “Sharon is an incredibly generous donor, career nurse and long-time volunteer. She embodies the community-minded ethos and generosity of spirit at Ocean,” says Jason A. Kreitner, FACHE, president and chief hospital executive at Ocean.

For 26 years, Sharon Dymnioski worked in the maternity unit at Ocean University Medical Center.
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.

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.