CANCER CARE: THE HUMAN TOUCH

GOODBYE TO KNEE PAIN
THE TRUE SECRETS OF WEIGHT LOSS
EMERGENCY! WHERE TO BRING YOUR CHILD
NEW WAYS TO CARE

At RWJBarnabas Health, in addition to treating medical conditions, we actively engage on a variety of levels to promote the health and well-being of our communities.

That outreach takes many shapes, including healthy living classes, educational programs for seniors, partnerships with local arts organizations, providing healthy food and much more.

Social distancing and other pandemic-related restrictions haven’t stopped these efforts, only changed their form. We’re providing virtual support for all kinds of needs, including breastfeeding, perinatal mood and anxiety disorders, arthritis, addiction recovery and more. People who want to learn about wellness techniques, such as guided relaxation or chair yoga, can find what they need through our online programs. For a full list, visit www.rwjbh.org/events.

Meanwhile, we are creatively retooling signature events such as runs, walks and galas to include virtual participation. Our annual Running with the Devils 5K will be going virtual as well (learn more at www.rwjbh.org/runningwiththedevils). Our partners are also creating new events, such as the Somerset Patriots, who hosted sold-out drive-in movies at TD Bank Ballpark with proceeds going to the RWJBarnabas Health Emergency Response Fund to help local healthcare workers. To make a donation to the fund, visit www.rwjbh.org/give.

So that we continue to follow the recommendations of the Centers for Disease Control (CDC) as they relate to social distancing to minimize or avoid the spread of disease, many of our community outreach programs are now available via a virtual environment. As the community’s medical provider of choice, Clara Maass Medical Center is continuing to engage the community and fulfilling our mission in the area of health and wellness.

From the comfort and convenience of your home or by using your smartphone, you, your family and loved ones can virtually participate in a Weight Loss Information Session offered by our Bariatric Program, groups that support new mothers, a recovery support group event and more. Registration is easy: Go to our website at www.rwjbh.org/claramaass and log in to confirm your attendance at any of our community health events.

How we meet the needs of our diverse communities will continue to evolve, but our commitment to providing a broad range of culturally competent care for our communities hasn’t changed—and never will.

Yours in good health,

BARRY H. OSTROWSKY
PRESIDENT AND CHIEF EXECUTIVE OFFICER
RWJBARNABAS HEALTH

MARY ELLEN CLYNE, PhD
PRESIDENT AND CHIEF EXECUTIVE OFFICER
CLAARA MAASS MEDICAL CENTER
2. WELCOME LETTER. A community update from our CEOs.
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HERE TO HELP
NEW OFFERINGS AT CLARA MAASS MEDICAL CENTER PROVIDE ESSENTIAL SUPPORT.

AFFORDABLE BLOOD TESTS

A small sample of blood can yield a whole lot of data about cholesterol, sugar and blood cell levels, and more—and that information is critical to helping a person stay healthy.

But for those without insurance or whose insurance has a high deductible, blood screenings can be too costly. That’s why Clara Maass Medical Center (CMMC) offers a monthly Comprehensive Blood Screening Program. Patients can have a complete blood test for just $40, and no prescription is required. Appointments should be made in advance.

“Not every medical condition presents itself as something you can see,” says Valerie Fitzhugh, MD, Medical Director, Department of Pathology at CMMC. “With our blood screening program, we’re able to let patients know, at an affordable cost, whether they are at risk for diseases they may not be aware of.”

Adults should have a blood screening test every year, Dr. Fitzhugh says. “Our bodies are changing all the time. If a patient is borderline diabetic or their cholesterol is outside a healthy range, a doctor can work with them to take care of that,” she says. “Patients have a better shot at doing well and living with certain conditions if they’re identified early.”

The Comprehensive Blood Screening Program takes place at the Cancer Center Conference Room at One Clara Maass Drive from 7 a.m. until 8:45 a.m. on the fourth Thursday of each month (except for November and December, when they are on the third Thursday). Preregistration is required; call 888.724.7123. Payment of $40 by check, cash, credit card or money order is due at the time of the screening. CMMC has taken every precaution to ensure the safety of patients and team members.

VIRTUAL HELP FOR OUR COMMUNITY

When in-person meetings aren’t possible, Clara Maass Medical Center is here to help. Below are just some of the online support groups we offer.

To learn more, visit www.rwjbh.org/claramaass.

Breastfeeding Support Group
Mondays, 12 to 1 p.m.
Do you have questions about breastfeeding? We are pleased to offer a safe place for new and expecting moms to connect online in a friendly virtual environment. Our International Board-Certified Lactation Consultants will provide guidance and answer questions about latch issues, breast/ nipple pain, milk supply concerns, pumping, supplementation, returning to work and weaning. We are here to support you along your breastfeeding journey. For more information and to be sent the link to participate in the group, please register online at: www.rwjbh.org/breastfeedingsupport.

Virtual All Recovery Meeting
Mondays, 1 to 2:30 p.m. and 7 to 8:30 p.m.
All Recovery meetings are nondenominational and offer an opportunity to focus on the hope found in recovery. Recovery does not happen alone. Join us and connect with others who are initiating and maintaining a recovery lifestyle.

All Recovery meetings are facilitated by trained and certified Institute for Prevention and Recovery Peer Recovery Specialists and provide social support for those seeking or maintaining recovery, as well as for family members, friends and supporters of those who have been influenced by substance use. To learn more, call 833.233.IFPR (4377).

Bariatric Support Group
Our online Bariatric Support Group meeting is held on the first Monday of each month at 7 p.m. and focuses on a host of topics, from yoga to plastic surgery to healthy eating, to help patients who have undergone bariatric surgery to maintain weight loss and receive support from others. For more information or to register, call 973.450.2393.
Healthy Priorities

A Mother and Daughter, Both Doctors, Share a Dedication to Serving Patients.

Nesochi Okeke-Igbokwe, MS, MD, was very goal-oriented as a girl, recalls her mother, Irene Okeke, AuD. “I can remember, one day, when we were in church when she was about 14, Nesochi turned to me and said, ‘Mommy, I am going to be a doctor.’

“I remember feeling, at that moment, that I knew she was going to make it. And I said back to her, ‘Nesochi, you are going to be a doctor.’”

And today, she is. After getting a master’s degree in Clinical Evaluative Sciences from Dartmouth College and a medical degree from Georgetown University School of Medicine, Dr. Nesochi (who uses her first name professionally) did a residency in internal medicine at New York-Presbyterian Queens. She’s currently in a private practice at Clara Maass Medical Center (CMMC). And her mother is nearby: Dr. Okeke, an audiologist, has a private practice in Maplewood and also a second private practice at CMMC.

“Both of us being doctors has united us and brought us closer, and not just professionally. It has really fortified the mother-daughter bond,” says Dr. Nesochi. “With any medical practice, there are bumps in the road, so it is very special when you have your mother to guide you. Having that support system telling you that everything will be okay makes a world of difference.”

For a referral to a Clara Maass Medical Center physician, call 888.724.7123 or visit www.rwjbh.org/claramaass.

Making an Impact

Both mother and daughter have used their medical skills to reach national and international audiences.

“Years ago, I realized I had to get out of the box and extend my services to less privileged people,” says Dr. Okeke. In 1998, she set up the Nigerian Army Audiological Centre in Lagos, Nigeria, which provides hearing health services to the military as well as hospitals, schools and a number of other organizations. She also founded the International Hearing Center in Nigeria, which includes four locations. Dr. Okeke credits her daughter with helping her in these endeavors. “She has come with me on many of my travels,” she says.

Meanwhile, Dr. Nesochi has been featured in Forbes, Vogue, Glamour and other magazines, and has also been a health resource for CNN, CBS News, Fox News and the BBC. Her goal, she says, is to correct misinformation about health trends and encourage a measured and thoughtful approach to personal health.

That’s also the goal for her private practice. “I always want to motivate my patients to make their health a priority,” says Dr. Nesochi. “I have a lot of patients who have failed to go to their doctors for routine screenings and examinations.

“Sometimes I reach out personally to let them know they are past due for certain tests. If there’s a cholesterol problem, we take time to figure out a strategy to bring down the numbers. I will create an individualized plan to bring down their weight, if needed. I believe in talking with my patients holistically to make their overall health better.”
spoiler alert: There are no real “secrets” or newly discovered tricks for losing weight.

But while there’s no classified intel to share, there is solid medical information about weight loss that can give anyone who acts on it the best possible chance for success.

For most people, these steps will lead to losing excess weight and keeping it off. For others, weight loss (bariatric) surgery, in conjunction with these research-backed practices, may be the answer to maintaining a healthy weight for a lifetime (see “Is It Time to Consider Bariatric Surgery?” on opposite page).

“The key is to make sensible and realistic changes to your eating habits that you can stick with for the long haul,” explains Silvana Blanco, RD, a member of the bariatrics team at Clara Maass Medical Center. She suggests these guidelines:

CREATE A CALORIE DEFICIT. Try to reduce the overall number of calories you eat by making small changes throughout the day. Instead of completely changing what you eat by following a highly restrictive diet, include a protein, carbohydrate and fat with each meal. This combination helps fuel the body and keep you satisfied and feeling full.

DON’T FEAR FATS. Fat can be a healthy part of a meal plan. The body takes longer to break fats down, so you
feel fuller longer and consume fewer calories. Healthy fats come from nuts, avocados, fatty fish such as salmon, and oils. Potentially harmful fats are those that come from processed foods and common snack foods (chips, crackers, cookies, cakes). Look for the phrase “partially hydrogenated oils” on the nutrition label and avoid those foods.

**EAT YOUR VEGGIES.** In addition to vitamins and nutrients, vegetables offer lots of fiber, which helps fill you up and is beneficial for gut health. Studies suggest that gut health can help take and keep off weight, and help strengthen immunity, too. Choose two to three vegetables that will be the center of your meal, and then pick the protein and carbohydrate that you will add as the sides.

**CUT BACK ON ADDED SUGARS.** Sodas, juices and packaged products are full of added sugars that have no nutritional value, but are high in calories. Even fruit smoothies, which sound healthy, may be loaded with sugar. Cutting back on obvious sources of sugar such as soda and desserts, along with hidden sugars found in processed foods, low-fat foods and sauces, are important steps for weight loss and maintenance.

**PRACTICE MINDFUL EATING.** Pay attention to what you’re eating and how you feel while you’re doing it. Consuming food while driving, talking on the phone or watching television will cause you to overeat. Consider using a notebook or an app to regularly record your weight and keep track of what you’re eating. This will aid in weight loss.

### HEALTHY AND DELICIOUS: CAULIFLOWER “ARROZ” CON POLLO

“This recipe is packed with favorite flavors and veggies, and uses skinless chicken and riced cauliflower to cut back on calories,” says bariatric dietitian Silvana Blanco, RD.

**INGREDIENTS:**
- 4 skinless drumsticks
- Salt and pepper to taste
- ¼ teaspoon garlic powder
- 4 teaspoons oregano
- 3 teaspoons olive oil
- ½ cup chopped onion
- ½ cup chopped red bell pepper
- 2 cloves garlic, minced
- 2 tablespoons cilantro, chopped
- ½ cup water
- 1 tablespoon tomato paste
- ½ teaspoon Sazón seasoning
- 12 oz. bag of frozen riced cauliflower medley
- 2 tablespoons green olives, 1 tablespoon brine

**DIRECTIONS:**
- Season chicken with salt, pepper, garlic powder and oregano.
- In a skillet, heat ½ teaspoon olive oil over medium-high heat. Sauté the chicken until browned on all sides. Remove chicken and set aside. Wipe the skillet.
- Heat remaining 2½ teaspoons oil in the skillet. Add onion, pepper, garlic and cilantro and sauté, stirring, about 2 minutes. Add water, tomato paste and Sazón and return the chicken to the skillet. Cover and cook on medium-low heat for 30 minutes, turning halfway, until the chicken is tender and cooked through. Remove chicken to a plate.
- Add the frozen riced cauliflower medley, increase heat to medium-high and stir well. Return the chicken to the skillet, add the olives with the brine from the olive jar. Cover and simmer until heated through, about 6 minutes.


### IS IT TIME TO CONSIDER BARIATRIC SURGERY?

“Most people have already tried diet and exercise programs before they consider weight loss surgery as an option,” says bariatric surgeon Naveen Ballem, MD, Interim Chief Medical Officer and Chief Clinical Effectiveness Officer at Clara Maass Medical Center. “They may have seen tremendous success for the short term but find themselves losing and gaining weight over and over—and each time they gain, they typically gain more. These people need a better alternative for sustainable weight loss. For them, surgery can be a great tool for success.”

Considering bariatric surgery does not mean you’ve failed, nor is it an “easy way out,” Dr. Ballem emphasizes. “Patients who have bariatric surgery still need to follow a healthy food and exercise plan to help the weight come off and stay off. But obesity is a multifactorial disease. Metabolism plays a role, as does your family history,” he says. “Lack of physical activity and the easy availability and affordability of unhealthy foods are also factors we’re fighting.”

In addition, he says, with COVID-19 being especially unforgiving for people who are morbidly obese or have underlying conditions like diabetes, it may be more important for some to consider bariatric surgery.

Dr. Ballem says you may be a candidate for bariatric surgery if:
- You’ve tried to lose weight on your own in the past and were either unable to reduce or could not keep the weight off.
- Your BMI (body mass index), a calculation of the ratio of weight and height, is above 40, or you are 100 pounds overweight; or your BMI is 35 or above, with obesity-related conditions such as Type 2 diabetes, hypertension, sleep apnea and osteoarthritis.

To check your BMI, search for “BMI calculator” online and you’ll see many to choose from.
The Healthcare Foundation of New Jersey (HFNJ) has a clear mission: “We work to improve the health and wellness of low-income and vulnerable people in the Greater Newark area,” says Marsha Atkind, Executive Director and Chief Executive Officer of HFNJ.

“We work with groups that deal with these populations in a compassionate, sensitive and culturally competent way,” she continues. “Clara Maass Medical Center checks all those boxes.”

Over the past 20 years, HFNJ has had a significant impact on Clara Maass Medical Center (CMMC) and the community it serves, with grants totaling more than $3 million—$580,000 in 2020 alone. Programs funded at CMMC include:

- A Census 2020 initiative to improve response rates in underrepresented populations in the CMMC community
- The Clara Cares and WAVE (Wellness Van for Elders) programs that bring healthcare services to senior citizens at their homes
- CMMC’s Center of Excellence for Latino Health, which focuses on meeting the unmet healthcare needs of the local Latino community
- HELP (Hospital Elder Life Program), a specialized volunteer program that provides extra attention and care to senior citizens admitted to CMMC
- Renovation of the Healthcare Foundation of New Jersey Learning Center at CMMC
- Specialized equipment for obstetrics, digital mammography, cardiac rehabilitation, women’s incontinence and treatment of lung cancer
- A new hybrid operating room at CMMC, equipped with advanced medical imaging devices to enable faster, minimally invasive surgeries and give surgeons the flexibility to perform multiple procedures.

“The philosophy behind our giving the hybrid OR grant was the same as that for other grants we’ve given for advanced technology,” Atkind says. “Everyone deserves to have access to the highest-quality care, and we wanted to support that for the Clara Maass community.”

HFNJ’s most recent grants have provided essential help for needs related to the COVID-19 pandemic. CMMC was responsible for the care of an extraordinary number of complex patients who contracted the coronavirus. HFNJ generously provided $90,000 to support emergency relief efforts, and then gave a $507,050 grant for COVID-19 preparedness. “We want to help ensure that Clara Maass is prepared for any future outbreaks by helping to secure lifesaving equipment for the critically ill and state-of-the-art technologies that will improve safety for patients and staff,” Atkind says.

DElIVERING CARE

“I’ve always thought of Clara Maass as a really good hospital, and have seen it expand and modernize over the years,” Atkind says. “Beyond that, the personal, warm feeling you find there is very real. It permeates the hospital, and you feel it from everyone who works there. That’s the kind of organization we want to partner with—the kind that delivers quality care, but also deeply cares about the people that they serve.”

“We are very fortunate and thankful to have the support of the Healthcare Foundation of New Jersey,” says Mary Ellen Clyne, PhD, President and Chief Executive Officer of CMMC. “They have been a crucial part of our commitment to taking care of the diverse community we serve, both inside and outside the walls of the medical center.”

“Giving grants has its challenges, because it takes a lot of thought to do it in the most effective way,” Atkind says. “We know, though, that the harder part is actually doing the work—and Clara Maass does the work in a truly excellent way.”

A PARTNERSHIP WITH IMPACT

A STRONG ALLIANCE HAS BIG BENEFITS FOR THE COMMUNITY.
YOUR HEALTH, AT YOUR FINGERTIPS

Now you can manage your healthcare right from the Apple Health app on your iPhone. You can easily keep track of allergies, conditions, immunizations, vitals and more, and consolidate your health records in a timeline—all in one place. Here’s how:

1. If you don’t have one yet, create a username and password for the RWJBarnabas Health Patient Portal (www.rwjbh.org/patientportalenroll).

2. Download the Apple Health app from the Apple Store. (You’ll need an iPhone running iOS 11.3 or later.)

3. Be sure your iPhone is password-protected, ideally with two-factor authentication.

4. Go to the Health Records section of the Health app, search for RWJBarnabas Health, and log in.

5. After you log in once, your health records will start to appear in the Health app, and will update automatically.

Download the Apple Health app at the Apple Store and access your RWJBarnabas Health medical records at www.rwjbh.org/patientportalenroll.
Patients who seek care through the RWJBarnabas Health (RWJBH) Oncology Access Center have a big advantage: They get connected to an oncology nurse navigator who acts as their problem-solver and supporter before, during and after treatment. The oncology nurse navigator becomes an important member of the patient’s healthcare team and serves as his or her advocate while compassionately supporting their physical, emotional and spiritual needs from diagnosis through survivorship.

“When you choose RWJBarnabas Health for your cancer care, you’re not only getting quality care, but someone to walk beside you on your treatment journey,” explains Jeanne Silva, RN, Director, Nurse Navigation, Oncology Services at RWJBH. “Moreover, we coordinate all of our resources, so that if a patient has a problem—be it financial, social or medical—the navigator can help the patient get the benefit of resources from throughout the health system.”

When a patient makes an appointment with an RWJBH cancer provider, the oncology nurse navigator will follow up with the patient the next day. “The navigator asks if there are any questions about the upcoming appointment and goes through some of the specifics of what will happen,” Silva says. That’s just the beginning. Oncology nurse navigators, who are located at each RWJBH facility, also do the following:

- **Identify possible barriers to treatment.** Does the patient have financial or insurance concerns? Does the patient have family or friends who can provide support? Is there a transportation issue? The nurse navigator can identify and help with these problems right away. “In one case, we were able to get a patient to see a specialist located 70 miles away from the patient’s home,” Silva says.

- **Communicate constantly.** This is essential in two ways. First, the nurse navigator is the central clearinghouse for information provided from the many specialists on a cancer patient’s care team—medical oncologists, radiation oncologists, surgical oncologists, social workers, nutritionists and more. The navigator can ensure that no aspects of treatment fall through the cracks and that the patient receives the highest quality of care.

Second, the navigator can follow up to be sure a patient understands what’s happening. “Doctors do a great job of explaining, but often you can see the patient’s mind drift off as the person starts to worry about things like, ‘Who’s going to pick my kids up from school?’” Silva explains. “A navigator can talk to the patient later about what he or she understood and relay the necessary information over again in smaller bits so it’s easier to process.”

- **Set priorities.** “Sometimes what feels urgent to a patient is not clinically urgent, but our nurse navigators have the ability to know what is truly time-sensitive,” Silva explains. “For example, recently a young man needed to see a specialist as soon as possible. Based on the navigator’s intervention, he was able to get in to see the doctor in one day.”

- **Save time.** Often, a patient needs several medical procedures—for example, an echocardiogram and a port insertion before chemotherapy treatment can begin. A nurse navigator can arrange for multiple appointments to be scheduled at the same facility on the same day. “A navigator is key to making sure all the pieces fit together and to minimizing the time a patient needs to spend at a facility,” Silva says.

“An oncology nurse navigator is a critical part of a patient’s cancer care team,” she continues. “He or she is the kind of person who can anticipate what’s needed and make it happen—and who has a relentless desire to help patients.”

To contact the Oncology Access Center, call 844.CANCERNJ (844.226.2376).

RWJBarnabas Health, together with Rutgers Cancer Institute of New Jersey—the state’s only NCI-Designated Comprehensive Cancer Center—provides close-to-home access to the latest treatment options. For more information, call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.

**CANCER CARE: THE HUMAN TOUCH**

**HOW ONCOLOGY NURSE NAVIGATORS HELP PATIENTS**
July 24, 2019: a grayish, unremarkable day on the beach at Ocean Grove. Lifeguard Sam Jarmer, 16, dives into the water to cool down, but hits a hidden sandbar.

Soon after, Sam's mom, Jessica, sitting on the beach several blocks away, sees a call from Sam's boss come in on her phone. “I immediately knew not only that he was injured; I could feel that it was bad,” she remembers.

When he hit the sandbar, Sam suffered a burst fracture in the C6 vertebra near the base of the neck and lost the ability to move his arms and legs. A fellow lifeguard jumped in to lift his head above the water, and a trauma team was dispatched from a nearby hospital. Sam was strapped to a backboard, and six of his fellow lifeguards carried him to a waiting ambulance.

“He kept saying, ‘I’m so sorry, Mom,’ because we were supposed to go on vacation the next day,” Jessica remembers.

Sam was in surgery for six hours while the burst vertebra was replaced with a titanium cage. He spent the next five days recovering at the hospital. At that point, he could occasionally raise his arms a bit, but nothing more.

It was time for intensive inpatient rehabilitation and therapy at Children’s Specialized Hospital (CSH) in New Brunswick. “I remember feeling that this would be the place that would make it all better,” Jessica says.

MAKING PROGRESS

The first piece of good news came from Michele Fantasia, MD, Director of the Spinal Cord Injury Program at CSH. Her evaluation determined that Sam’s injury was “incomplete,” meaning that Sam still had some motor and sensory function below the level of injury. “As I say with all incomplete injuries, ‘The sky’s the limit,’” Dr. Fantasia told Jessica.

Four months of recreational, physical and occupational therapies followed. “The occupational therapists made modifications for everything,” Jessica remembers. “They kept constructing things in some kind of magical workshop they had.” There was a special fork to help Sam relearn how to feed himself, a device to help him brush his teeth and more.

“Everyone at Children’s really helped me when I was at one of the lowest points in my life with my injury,” says Sam. “They just showed compassion in all of the support and love that they gave me.” On November 19, Sam was discharged from CSH.

Today, Sam continues with a rigorous program of outpatient physical therapy. During the COVID-19 lockdown, he did his exercises via telemedicine for a few weeks. His older brother, home from college, was there to help.

Sam continues to work on his core muscles, arms and fingers. He now has muscle control in all parts of his legs and continues to work on walking independently. “I’m staying positive,” he says. “I know it will take time and I’ll be back to where I was, but for now I’ve just got to keep pushing forward.”

To learn more about Children’s Specialized Hospital, call 888.244.5373 or visit www.childrens-specialized.org.

‘THE SKY’S THE LIMIT’

After a traumatic neck injury, intense physical therapy helps a teenager move again.

At Children’s Specialized Hospital, we provide world-class care for children and young adults who face special health challenges across the state of New Jersey and beyond. Our locations in Bayonne, Clifton, East Brunswick, Egg Harbor Township, Hamilton, Jersey City, Mountainside, New Brunswick, Newark, Toms River and Warren treat everything from chronic illnesses and complex physical disabilities like brain and spinal cord injuries to developmental and behavioral issues like autism and mental health.
[ANYTOWN] A musical with a mission: “Anytown,” an original educational musical, tells the story of Hope, a high-achieving high school student who becomes addicted to opioids after a soccer injury. The show has toured middle and high schools in New Jersey and was developed through a partnership with George Street Playhouse in New Brunswick, RWJBH and the Horizon Foundation of New Jersey.

[BEAT BUS] They've got the beat: Students in Long Branch, Asbury Park and Neptune have experienced a state-of-the-art mobile recording studio to create their own music thanks to the Beat Bus, a collaboration between Lakehouse Music Academy and the Asbury Park Music Foundation that is supported in part by RWJBH. In addition to providing a means of creative expression and new ways to collaborate, the Beat Bus helps prepare students for success in the digital age.
SUPPORTING ARTS FOR THE HEALTH OF IT

PARTNERSHIPS WITH LOCAL ARTS GROUPS HELP PROMOTE THE WELL-BEING OF COMMUNITIES.

Research has shown that the arts stimulate creativity, ease stress, promote joy, improve memory and enhance education. That’s why RWJBarnabas Health (RWJBH), with its strong commitment to creating and sustaining healthy communities, partners with local arts organizations.

“We understand the clear and beneficial impact that taking part in the arts has on health and well-being,” says Michael Knecht, Senior Vice President of Strategic Marketing and Communications for RWJBH. “These partnerships are an important way for us to help people in our communities and also support local grassroots organizations.”

RWJBH supports a broad range of arts events. Music, dance and film are high on the list: RWJBH has sponsored the Asbury Park Music + Film Festival; the Bridge Arts Festival in Bayonne; the Montclair Jazz Festival; the Central Jersey Jazz Festival; Maplewoodstock Music & Art Festival; the “Sounds of the City” free outdoor concerts presented by the New Jersey Performing Arts Center in Newark; and the SOMA Film Festival in South Orange and Maplewood.

Drama has a place as well. RWJBH is a sponsor of the New Jersey Repertory Company, a professional nonprofit theater in Long Branch with a mission to develop and present new plays. And in a proactive move to help stem the opioid epidemic among young people, RWJBH has partnered with the George Street Playhouse in New Brunswick and the Horizon Foundation of New Jersey to create “Anytown,” a one-hour musical that demonstrates how addiction can happen to anyone. The show has toured to schools throughout the state, followed by Q&A discussions with students.

“These partnerships are all part of the RWJBarnabas Health commitment to reaching out beyond the walls of our medical centers to help people get and stay healthy in all kinds of ways,” says Knecht. “And they’re wonderful examples of how meaningful collaboration with local organizations can make an impact throughout the state.”

To learn more about RWJBarnabas Health corporate partnerships, visit www.rwjbh.org/corporatepartners.
DOCTORS CAN NOW USE ARTIFICIAL INTELLIGENCE FOR A NONINVASIVE, HIGHLY ACCURATE TEST FOR CORONARY ARTERY DISEASE.

A HIGH-TECH LOOK AT THE HEART

The Heartflow Analysis FFR-CT software generates a 3D color-coded image of a patient’s heart and arteries, indicating the location and degree of artery blockages.
After the test, they told me I was a walking time bomb,” says Ray Duarte, 50.

As the Regional Director of Information Technology at Monmouth Medical Center Southern Campus and at Monmouth Medical Center, Ray had volunteered to be among the first for an advanced noninvasive technology known as Fractional Flow Reserve Computed Tomography (FFR-CT). This test evaluates how well blood flows through a patient’s heart arteries and determines whether—and where—blockages exist.

“I had upper back pain on and off, for which I was seeing a chiropractor with no relief,” says Ray. “I did have high cholesterol, which I was addressing with improved diet and exercise, and a family history of heart disease.

“However, due to my active lifestyle and symptoms that were not typical for heart disease, my primary care doctor told me he would never have recommended so much as a stress test for me,” Ray recalls. But the FFR-CT test showed that Ray’s right coronary artery was 99 percent blocked. Without the test and subsequent treatment, such a blockage could have led to a heart attack at any time.

FINDING THE BLOCKAGES

The powerful, artificial intelligence-based FFR-CT test is used to diagnose coronary artery disease (CAD)—blockages in the blood vessels supplying the heart. CAD is a leading cause of death in the U.S., accounting for 600,000 to 700,000 deaths per year. It can cause shortness of breath, chest pain (typical and atypical) and heart attack, and can lead to death.

When a patient has chest pain or suspicious symptoms, the usual noninvasive ways of detecting inadequate blood flow include an electrocardiogram (ECG), which uses electrical signals; a stress test, in which blood flow is tested while a patient exercises, via ECG or an echocardiogram (ECHO), which uses ultrasound waves; or a nuclear stress test, which uses radioactive dye and an imaging machine. In addition, a computed tomography (CT) scan can show calcium deposits that could narrow arteries.

Prior to FFR-CT technology, however, the only way physicians could see for certain whether coronary arteries were blocked was to do an invasive procedure, known as cardiac catheterization and angiogram. In this procedure, a special dye is injected through a long, thin, flexible tube (catheter) that is threaded through an artery in the leg up to the arteries of the heart.

If a blockage is found, the cardiologist can decide whether to correct it during the angiogram—for example, by inserting a small tube (stent) to keep the artery open—or to send the patient for bypass surgery.

ARTIFICIAL INTELLIGENCE

While a crucial and sometimes lifesaving technology, an angiogram often shows no significant blockages, according to Rajesh Mohan, MD, MBA, FACC, FSICA, an interventional cardiologist and Chief Medical Officer at Monmouth Medical Center Southern Campus (MMCSC).

That’s where noninvasive FFR-CT comes in. Using “machine learning,” an application of artificial intelligence, the software compares images from existing CT scans of a patient’s heart to an ever-growing database of tens of thousands of other CT images. This large database helps physicians analyze the likelihood that any specific blockage could cause harm and also provides direction about treatment.

“The FFR-CT technology creates a three-dimensional image of blood vessels and color-codes them based on the severity of the blockage,” says Dr. Mohan. “It then also shows how each blockage impacts blood flow to the heart.”

Armed with this knowledge, a physician can decide whether lifestyle changes, medication, a stent or surgery is the best course of action.

“With this information, we can give our patients a more definite diagnosis and have confidence in the best treatment plan without putting them through unnecessary invasive procedures,” says Dr. Mohan. “Its accuracy is unlike that of any other noninvasive tests available to us.”

IS FFR-CT FOR YOU?

Since CAD is a common type of heart disease, many patients can benefit from this advanced technology.

However, FFR-CT is not available everywhere. Specialists at MMCSC are among the first in the state to use it, and MMCSC is the earliest hospital in the state to utilize it in the Emergency Department and throughout the hospital, as well as for outpatients.

“The test needs to be done appropriately, according to criteria set by the American College of Cardiology,” says Dr. Mohan. “Patients need to have symptoms—for example, chest pain or shortness of breath on exertion, which a lot of people actually disregard.

“If these exist in association with some of the coronary risk factors like smoking, hypertension, diabetes, high cholesterol and family history, then I think that patient is an ideal candidate for this study.”

As for Ray Duarte, a stent procedure opened his blocked artery, his back pain has resolved and medication is controlling his cholesterol. He is back to an active lifestyle.

“Says Dr. Mohan, “We at Monmouth Medical Center Southern Campus are excited and privileged to introduce such a cutting-edge, revolutionary technology.”
A patient is found to be 35 pounds over ideal body weight. He has hypertension, and his lab results indicate prediabetes. His doctor urges him to change his diet, be more active and lose the extra weight to reduce his risk for stroke, heart disease and diabetes.

The patient acknowledges that he should. But at his next yearly physical, he's still 35 pounds overweight.

In that all-too-common scenario lies the possibility for a new approach to healthcare, one that simultaneously provides help for behavioral as well as physical issues. "The goal is to help people make better choices—about things like what they eat, how they exercise and about alcohol and nicotine—and thereby avoid many chronic health disorders," says Frank A. Ghinassi, PhD, ABBP, Senior Vice President, Behavioral Health and Addiction at RWJBarnabas Health (RWJBH), and President and CEO of Rutgers University Behavioral Health Care.

Through integrated care delivery, we want to treat both body and mind, preferably in the same location and during the same healthcare visit," he says.

In the case of the overweight patient, for example, the primary care provider will look to determine the cause of the patient's inability to lose weight. "Is the issue genetic? Does the patient have a low metabolism?" asks Dr. Ghinassi. "Or is there a mood disorder that’s affecting energy level and motivation?"

Once barriers to a healthier lifestyle are identified, doctors and behavioral health specialists can work together to develop solutions tailored to the patient’s specific needs.

**AN INTEGRATED APPROACH**

"Often, people with behavioral and addiction disorders are treated ‘from the neck up’ and are referred to dedicated behavioral health offices," says Dr. Ghinassi.

But that approach can create roadblocks. "Maybe the patient can’t get an appointment for three weeks, or he doesn’t like the idea of walking into a building that says ‘counseling services’ or ‘psychiatry’ on the sign," he explains.

To provide coordinated care, RWJBH and Rutgers University Behavioral Health Care are bringing services closer together. "At many of our primary care and pediatric delivery sites, primary care physicians work with psychologists or social workers who are located in the same office suite or in the same building," says Dr. Ghinassi. "A patient can be offered a chance to meet the physician's behavioral health colleague even before leaving the initial appointment, find out what might be possible and perhaps find it easier to commit to following up with a subsequent call or visit.” The next evolution of care at RWJBH and Rutgers University Behavioral Health Care will be to have a clinical social worker or psychologist located right in the same office space as the primary care provider.

Integrated healthcare is the future, Dr. Ghinassi believes. “People tend to come to a healthcare system when they’re in crisis—they need coronary artery surgery, for example, or their depression makes them unable to function in daily life. Of course, we’ll always be there for those people,” he says.

"However, we’re evolving to an equal focus on early screening and intervention. Together, RWJBarnabas Health and Rutgers University Behavioral Health Care are on a mission to improve the health and life satisfaction of patients and families throughout New Jersey.’’
When Gerry Clyne started feeling unusual pain in his chest last year, he knew he needed to get to a hospital right away. "I had pain radiating out from my sternum, throughout my torso. After a while I started feeling as if an ice pick were going through my left elbow," he says. He also had shortness of breath, nausea and cold sweats.

There was no question about where he would go for help. "Everyone in my family has always been treated at Clara Maass Medical Center," he says. Gerry's two adult sons, who were visiting, immediately drove him to the Clara Maass Medical Center (CMMC) Emergency Department, where Fadi Chaaban, MD, Director and Chief of Cardiology and a member of RWJBarnabas Health medical group, was waiting.

"When Gerry arrived, he was clearly in distress," recalls Dr. Chaaban. In fact, Gerry was having a heart attack.

Elie Chakhtoura, MD, Director of the Cardiac Catheterization Laboratory and also a member of RWJBarnabas Health medical group, saw Gerry immediately. An angiogram showed an artery that was almost completely blocked. Dr. Chakhtoura performed an angioplasty by putting in a balloon to open the artery, then inserting a stent to prevent the artery from collapsing.

Four months later, Gerry had completed a comprehensive plan of care, including cardiac rehabilitation, and is back to living a full and healthier life.

'THE BEST PLACE'

In one way, Gerry was anything but a typical patient. "My wife is a registered nurse," he says. "And she’s also the President and CEO of Clara Maass Medical Center.”

Knowing her husband was at CMMC was a relief, says his wife, Mary Ellen Clyne, PhD, President and Chief Executive Officer at CMMC. "I felt very fortunate," she says, "because Clara Maass has the best medical care providers, from our Emergency Department team to the Catheterization Lab team to the cardiologists to the ICU team and intensivists.”

Throughout the situation, Mary Ellen remained calm. "I knew there was something seriously wrong with Gerry, but I didn't feel that anything bad was going to happen to him," she says. "I knew he was in the best place that he could be, getting the best care available anywhere.”

Gerry Clyne has recovered from his emergency and is grateful to the team at CMMC that cared for him. "Everyone—in the Catheterization Lab, the ICU and the Emergency Department, the doctors and nurses and technicians—was just terrific," he says. “There was skill and professionalism, and compassion as well. I felt like I mattered to them. And I felt really fortunate to have been in their care.”
Lillian Gripp is back to the everyday activities—walking, cooking, climbing stairs—that knee pain had made difficult.

KNEE REPLACEMENT IS A JOINT EFFORT

AN ORTHOPEDIC SURGEON AND HIS PATIENT ACHIEVE SUCCESS, STEP BY STEP.
After speaking to Frank Femino, MD, Medical Director of Orthopedics at Clara Maass Medical Center (CMMC) and Lillian Gripp, his knee replacement patient, you might believe that the two of them were in cahoots.

And you'd be correct. “The word ‘doctor’ comes from the Latin word for ‘teacher,’ and half of what I do is teach,” says Dr. Femino. “I tell my patients that this is a team effort, my part and their part—and I need them to embrace the procedure and do their part for it to be a success.”

As the Baby Boomers reach their 60s and 70s, joint replacement surgeries are surging. Each year, more than 700,000 people like Lillian undergo this procedure to relieve chronic joint pain and to stay active and independent.

A PAIN IN THE KNEE
Lillian, 74, a retired executive assistant, was always active. Unfortunately, she fell while taking her daily two-mile walk with friends. “My knee needed eight stitches and was never the same after that,” she says. “Dr. Femino was recommended to me by a friend. An X-ray showed osteoarthritis, and he suggested we try physical therapy and cortisone injections.”

“I like to begin with less invasive methods first,” says Dr. Femino. “Lifestyle changes, such as weight loss, along with physical therapy, can allow some patients to live with their knee arthritis and pain.”

After several years of this protocol, Lillian's knee became so painful that she had difficulty taking walks and driving. A second X-ray revealed that she had no cartilage left in her knee, a condition sometimes referred to as “bone on bone.” “That’s when I decided to bite the bullet and have the knee replacement surgery,” she says. Lillian eagerly prepared for her procedure by following Dr. Femino’s advice: “The hospital’s orthopedic navigator and team members showed me a film about exactly what would happen during the operation and gave me a binder with information about every facet of the procedure,” she says. “Most important, they provided me with exercises to begin doing before the surgery to strengthen my leg, and I did them religiously.”

“Lillian had a lot of arthritis and pain,” says Dr. Femino, “but what set her apart was her positive attitude. We worked very well together.”

CUSTOMIZED CARE
Joint replacement surgery has improved significantly over the years, with new materials extending the lifespan of implants. Dr. Femino has refined his own technique so that it’s less invasive, which minimizes blood loss and decreases pain. He has also designed and modified the precision surgical instrumentation he uses. “Both the art and science of orthopedics come into play in how surgery is performed,” he says. “Implants are now well-engineered and available in many sizes. This allows for customization according to the patient’s anatomy. I premeasure and during surgery I measure again. I find that this method results in a much better fit for the patient.”

Lillian was impressed with Dr. Femino and with CMMC’s Joint and Spine Institute in its dedicated area within the hospital. The center’s comprehensive treatment plan involves patients in every step of the program and stresses their central role in promoting a successful recovery.

“The Joint and Spine Institute had such kind, helpful staff—from the environmental and food service workers to the nurses, who were so patient and friendly in answering my questions,” Lillian says.

Total knee replacement patients at CMMC typically enjoy rapid recoveries, walking the day of surgery and driving in two to four weeks. Lillian was no exception. “The surgery went smoothly and that same day, the physical therapist got me up and had me do 30 side steps,” she says. “The next day, he walked me around the floor and people were cheering me on. Because I’d done the exercises, my recuperation was rapid. I was only in the hospital two days. Dr. Femino was just wonderful—down-to-earth, available for questions. His patients just love him, and now that I’m one of them, I see why.”

“I take great pleasure in making people healthy and happy—especially older patients who want to be active again and maintain their independence,” says Dr. Femino. “When they tell me that I’ve given them their life back, it’s so fulfilling.”

Elective surgeries are now available, and we’ve taken every step necessary to ensure the safety of our patients. To learn more about orthopedic and joint replacement services at Clara Maass Medical Center, call 888.724.7123 or visit www.rwjbh.org/ortho.
When children get a sudden illness, they—and their caregivers—often get scared and go to the Emergency Department (ED).

And that’s normal, says John Fontanetta, MD, Chairman of Emergency Medicine at Clara Maass Medical Center (CMMC). “Children get many more non-serious illnesses than adults do, because they’re constantly exposed to viruses that they haven’t yet built up immunity for. We always encourage parents to bring their children in because we don’t want them to take chances,” he explains.

While COVID-19 has affected a small number of children, medical professionals at CMMC are skilled at recognizing and treating symptoms of the coronavirus, the flu or any other related issues. “Patients should not delay care for any reason. It is absolutely safe to come to the ED,” says Dr. Fontanetta.

“However, if young patients can be made more comfortable, that makes our job so much easier,” he says. “For children, especially, environment is so important. That’s why we’ve recently renovated a section of our Emergency Department with a special focus on children.”

SOOTHING BY DESIGN

The new Pediatric ED has a separate entrance, a waiting room with a soothing undersea theme and new private observation rooms for patients and their loved ones. “We can bring a family from the reception area back to a single room where they can be together and the child can be in a parent’s arms,” says Dr. Fontanetta. Overall, the pediatrics area is quieter than the regular ED and avoids exposure to adult patients who may be dealing with serious conditions.

“If a child needs to stay in for a brief period of observation, that can now be done in the new pediatric observation rooms, rather than the child and family having to make a move to the Pediatric Unit,” says pediatric allergy, immunology and infectious disease specialist Susan Morrison, MD, Director of Pediatrics at CMMC. “It’s much smoother from the kids’ and families’ point of view.”

Unlike a walk-in urgent care location, the CMMC ED has pediatric expertise always at the ready to take care of children’s emergency needs. “We have a board-certified pediatric hospitalist available 24 hours a day to see our young patients,” says Dr. Morrison. As part of a medical center, the ED also has access to a wide array of tests or tools that may be needed for a diagnosis.

They encourage community members to take advantage of their expertise. “Certainly, call your pediatrician, see what he or she wants you to do and follow their instructions,” says Dr. Morrison. “Many times, your pediatrician may recommend that you go to the hospital.”

“We tell parents that they are never, ever bothering us,” says Dr. Fontanetta. “We want parents to be able to keep their children safe and bring any concerns at all to us.”

Clara Maass Medical Center has taken every precaution for the safety of patients, staff and visitors. To learn more, visit www.rwjbh.org/welcameback.
Gynecologic cancer is any cancer that starts in a woman’s reproductive organs. There are five main types: cervical, ovarian, uterine, vaginal and vulvar. While the incidence of such cancers is relatively rare, some—such as ovarian, endometrial and uterine cancer—are more often diagnosed in women who are perimenopausal or menopausal.

For effective treatment, early detection is the key—and that requires a woman to pay attention to her body. Noah Goldman, MD, a gynecologic oncologist at Clara Maass Medical Center, explains:

What symptoms are cause for concern related to gynecologic cancers?
Each type has different symptoms. For uterine cancer, if a woman is menopausal and having any bleeding, or is perimenopausal and having abnormal bleeding, that should be investigated.

For cervical cancer, a regular Pap smear is a must. Abnormal results will signal to your doctor that something should be looked at. Vaginal and vulvar cancers can often be observed during regular gynecologic exams.

Ovarian cancer is different because the symptoms are vague—bloating, low energy, changes in appetite. We all have those things sometimes. I tell patients that if they have symptoms that last longer than expected, such as more than five to seven days, they should see their primary care provider or gynecologist. He or she can decide whether you need to see a specialist.

If you do make an appointment, what will the doctor need to know?
If you’ve been having symptoms for a few days, start jotting down what they are and when you’re having them. That will help the doctor figure out what tests may need to be performed. That said, it is the norm for patients to be somewhat vague regarding symptoms. That’s part of our job as doctors, to figure out temporal relationships, symptoms and what we need to do.

One of my big priorities is to get women to listen to their bodies and recognize when something is different or wrong. Nobody knows what’s happening with a patient better than the patient herself.

Is there any way to lower the risk of getting a gynecologic cancer?
As with other cancers, keeping a healthy weight, staying active, eating a nutritious diet and not smoking can help lower a person’s risk. Using oral contraceptives and having a full-term pregnancy before age 35 appear to lower the risk of ovarian cancer.

Cervical cancer is caused by some kinds of human papillomavirus, or HPV, which are spread through skin-to-skin contact, mainly sexual activity. It can be prevented by the vaccine for HPV, which is recommended for people from ages 11 or 12 up to age 45.

No matter the type of cancer, regular health checkups and screenings are key to early detection and successful treatment.

What else should women know about gynecologic cancers?
My big push is always to listen to what your body’s telling you. Women tend to push forward with their lives when they notice symptoms, because they have family and work obligations and they don’t have time to get to the doctor. You have to make the time to take care of yourself.

Don’t put off the healthcare you need. We’ve taken every precaution for the safety of our patients, visitors and employees. To find a gynecologist at Clara Maass Medical Center, call 888.724.7123 or visit www.rwjbh.org/claramaass.
Asking in sunshine is good for the soul—but not always for the skin, particularly if you’re taking medication. That’s because many drugs, including common over-the-counter ones, can intensify the effect of sun on skin by causing a reaction to UV (ultraviolet) light. The risks: sunburn, rashes or even blistering, and aggravation of existing skin conditions, such as eczema.

“In the case of a medication that causes sun sensitivity, you should see a sticker on the bottle or package notifying you that taking this might increase your risk,” says Lucio Volino, PharmD, a clinical pharmacist with RWJBarnabas Health and Clinical Associate Professor at Rutgers University. That sticker, or a similar warning on a package insert, means you need to be especially vigilant about applying and reapplying sunscreen, whether you’re going to spend a day in the sun at a family barbecue or are heading out to do a little yard work. The time it takes for your skin to get sunburned will be greatly reduced, so use a product with SPF (sun protection factor) and reapply it according to the instructions on the label. (The lower the SPF number, the shorter the length of its protective benefits.)

In addition, wear sunglasses and protective clothing, and try to avoid the sun between the peak hours of 10 a.m. and 4 p.m. “People should also be conscious of staying well hydrated in the heat,” Volino says. Although the sun’s rays are less intense in the fall and winter seasons, these precautions should be followed year-round, he says. They also apply to all skin tones.

YOUR PRESCRIPTION MAY MAKE YOU MORE PRONE TO SUNBURN AND OTHER EFFECTS.

A wide range of drugs can cause sun sensitivity, including some medications in the categories below. Ask your pharmacist about any concerns you have about a medication.

• Antibiotics
• Allergy medications (oral antihistamines)
• Antidepressants
• Cholesterol-lowering drugs
• Diuretics
• Oral contraceptives
• Non-steroidal inflammatory drugs, such as ibuprofen and naproxen
• Retinoids

Barnabas Health Retail Pharmacy at Clara Maass Medical Center participates in the nationwide Dispensary of Hope program to distribute certain generic medications, free of cost, to low-income and uninsured people who need them. “In this program, pharmaceutical manufacturers donate generic medications, and they are sent to pharmacies across the nation,” explains Joe Voelkel, RPH, Assistant Vice President, Barnabas Health Retail Pharmacies. “At RWJBarnabas Health, we’re proud to participate in this program, and give vulnerable community members the access to medications they need, without charge for our services.”

Currently, only oral medications are available, but the program is seeking to expand into other medications, including injectables. To be eligible, patients must be uninsured and have an income that is at or less than 200 percent of the Federal Poverty Level.

To learn more, visit www.dispensaryofhope.org or call your local Barnabas Health Retail Pharmacy.

The Barnabas Health Retail Pharmacy is located on the ground floor of Clara Maass Medical Center at One Clara Maass Drive in Belleville. For more information, call 973.450.2581.
There’s a highly effective treatment for severe depression, mania, catatonia and even the agitation of dementia—but many patients and their families don’t know it’s available.

The treatment is electroconvulsive therapy, known as ECT, in which a patient under anesthesia receives a small electrical stimulation of the brain that results in a brief, controlled seizure. The treatment alters brain chemistry and connections in ways that often bring about rapid relief for the patient.

ECT is now available at Clara Maass Medical Center as part of a new initiative headed by Robert Greenberg, MD, Electroconvulsive Therapy Medical Director for the RWJBarnabas Health (RWJBH) system and a member of RWJBarnabas Health medical group.

“I like to tell people if ECT were invented today, it would be considered a miraculous treatment and far more widely used than it is today,” Dr. Greenberg says. “Unfortunately, a stigma has become attached to it. It’s our job to break through that stigma.”

A FIRST-LINE TREATMENT
ECT has shown dramatic results since it was introduced in 1938, but the early forms of the treatment produced severe side effects. “It was unmodified, meaning that patients would have vigorous motor seizures,” explains Dr. Greenberg.

Those side effects contributed to a negative view of ECT. As psychoanalysis and pharmacology became popular front-line treatments for depression, ECT moved down the priority list of options. That evolution, in addition to phrases like “shock treatment” and Hollywood dramatizations, led to a stigma against ECT.

But research has continued to improve ECT treatment. Motor seizures, for example, were eliminated. “We don’t want or need the physical motor seizure that you typically think of with a seizure,” Dr. Greenberg says. “We just want the electrical activity going on in the brain.”

Today, patients are given sleeping medication and a muscle relaxant to limit body movement during the procedure, and individualized brief pulses of electrical stimulation are delivered through the scalp.

Patients typically undergo a course of six to 12 treatments, two or three times a week, and may feel benefits after just one or two. Side effects can include headaches immediately after the procedure and the loss of some memories formed around the time of the procedure.

The process can be done in a few hours, on an inpatient or outpatient basis. ECT is generally covered by insurance, including Medicare.

“ECT is reserved for serious depression and related disorders, especially among the elderly or those who prove resistant to drug therapy,” says Dr. Greenberg. It can also be used on a less-frequent or tapering basis by patients to maintain their improved condition, he says.

“It should never be considered a treatment of last resort,” says Dr. Greenberg. “ECT is a treatment that should be, and is, a first-line treatment whenever rapid, definitive treatment is needed.”

For information or to schedule an appointment with Dr. Greenberg, call 973.322.0220.
You’ve taken every precaution. So have we. Welcome back.

If you’ve put off any medical care due to COVID-19, please don’t delay it any longer. As a high reliability organization, we’ve taken every precaution and continue to provide health care services. We have initiated a resumption of services in adherence to all public health guidance and regulatory policies. Learn more at rwjbh.org/WelcomeBack