



ROBERT WOOD JOHNSON  
UNIVERSITY HOSPITAL

Raymond Kaszyk is back to enjoying his collection of classic cars, thanks to a minimally invasive procedure to treat colon cancer.

# BREAK throughs

## HEART TRANSPLANT

Third Time's a Charm

## COMMUNITY HEALTH

Fun in the Park

## OPHTHALMOLOGY

Seeing Eye to Eye







## WELCOME

Dear Friends,

Part of the Robert Wood Johnson University Hospital (RWJ) mission is to improve the health and well being of the patients and communities we serve by promoting and engaging in community outreach activities to enhance the health of the residents of our region.

RWJ – in partnership with St. Peter's University Hospital – recently launched a community needs assessment survey for the residents of Central New Jersey. Through a research company, residents will be contacted to help identify critical health issues and plan for future health initiatives. Our hospital serves a very diverse community and this is an extremely important opportunity for hospitals to gain a clear understanding of what our communities need in terms of health care.

The information gathered from this survey, will help RWJ better coordinate services, outreach, education and prevention efforts in all communities we serve. The community needs assessment is supported by a grant from the Robert Wood Johnson Foundation's New Jersey Health Initiatives Program.

As we take a closer look at the needs of our community, health and wellness support in the areas we serve remains strong through various ongoing programs such as the 'Prostate Cancer Screening Program,' 'The Domestic Violence Awareness Project,' the 'Latino Diabetes Project' and 'Fun in the Park' which we profile later in this issue.

We will continue to grow our outreach and education programs and we take very seriously the hospital's responsibility for improving the health of our community.

I now invite you to enjoy another exciting issue of *Breakthroughs*.

Sincerely,



Stephen K. Jones, FACHE  
President and CEO

Robert Wood Johnson University Hospital and Robert Wood Johnson Health System

## BREAK throughs

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# BREAK throughs

## CHARITABLE GIVING

Friends for Life

I



Page I

## HEART TRANSPLANT

Third Time's a Charm

3

## MINIMALLY INVASIVE COLON SURGERY

Drive to Survive

5

## EMERGENCY SERVICES

Preparing for the Unthinkable

6

## COMMUNITY HEALTH

Fun in the Park

7

## TRAUMA

A Will to Live

9

## OPHTHALMOLOGY

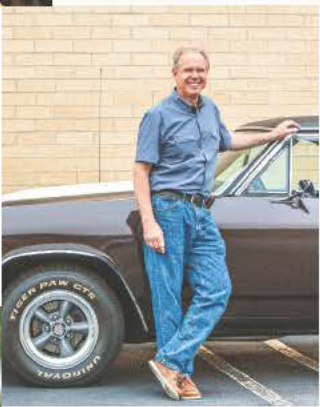
Seeing Eye-to-Eye

11

## RWJ ROUND UP

What's Happening on Campus

12



Page 5



Page 7



Page 11



# CHARITABLE GIVING

Friends for Life

*When you meet Thomas Moore, Becky Michael and Julia Forsythe, your first impression is that they're lifelong friends who have gathered for a much-anticipated reunion.*

*Shown from left: Julia Forsythe, Thomas Moore and Becky Michael bonded during treatment at the Cancer Hospital.*



The jokes come fast and furious and no one is spared a good ribbing. And no one seems to mind.

But the truth is that the three led separate lives and did not meet until a little less than one year ago when a dreaded leukemia diagnosis brought them together by chance and they had life saving stem cell transplants at The Cancer Institute of New Jersey (CINJ) at UMDNJ Robert Wood Johnson Medical School and Robert Wood Johnson University Hospital (RWJ).

Now, after a year of supporting each other through this crisis, the three can't imagine what their lives would be like today without their friendship.

"There is no such thing as TMI (too much information) between us," jokes Thomas, 52, of Princeton. "We share everything and that helps us know that what we are experiencing is normal."

"It's a unique bond; I can tell them anything" adds Becky, 42, of Avenel.

Julia was diagnosed in 2010, while Thomas and Becky learned they had leukemia in 2011 and all received stem cell transplants within days of each other. Typically, stem cell transplant patients undergo 7 day cycles of intense chemotherapy followed by a 30 day hospital stay until they achieve remission.

During a physically and emotionally draining time, the three found strength, inspiration and comfort in each other's presence. All three

credit their strong bond with saving their lives. The three met regularly in the Cancer Hospital's 4 North Unit lounge to compare notes about their treatment, share stories about their families and calm each other's fears. Thomas even coined a group mantra, "BLT" (Beat Leukemia Together).

"Every day, we would knock on each other's doors to see how each of us was doing," says Julia, 45, of Edison. "This (the lounge) was the only place that we could get together to sit and talk. There isn't anything that we wouldn't tell each other."

Becky adds, "I couldn't have done it without these two." Thomas notes, "Being able to talk to someone who knows what you're going through made a huge difference."

The lounge itself has recently undergone an amazing transformation thanks to the generosity of The Mama Mare Foundation, which led a fundraising effort to renovate and re decorate the space to provide patients and their families with a calming sanctuary at the hospital.

Led by former Monroe resident Krista Kasper, who lost her mother Mary Ellen Pernice at the Cancer Hospital following a courageous battle with breast cancer, The Mama Mare Foundation was founded in 2010 in memory of Mary Ellen to provide assistance to patients undergoing treatment for breast cancer and to advancing research toward a cure.

Now, Becky, Thomas and Julia attend support

group meetings in The Mama Mare Foundation Healing and Education Center. The Center provides a serene area for patients and families, and resources such as HP EliteBooks donated by Mama Mare to help patients research their diagnosis and treatment and stay connected to family and friends during their hospital stay. It also features "smart" furniture that allows individuals to plug in laptops or mobile devices, and a boutique to provide wigs, turbans and prostheses to cancer patients.

"When someone you love is undergoing treatment for cancer, it's an emotionally draining experience for everyone," Ms. Kasper explains. "We hope that with this room we can ease the anxiety of patients and families. I love knowing it is being used and wonderful things are happening there."

Becky, Thomas and Julia appreciate the Mama Mare Foundation's gift. They also feel blessed by the gift of life and friendship given them by their shared experience at CINJ and RWJ.

Visit [www.rwjufdn.org](http://www.rwjufdn.org)  
or call 732-937-8750.



*Shown: The newly renovated patient lounge was made possible through a generous gift from The Mama Mare Foundation.*





# HEART TRANSPLANT

Third Time's a Charm

*In 1995, a 5-minute segment of Ricardo Chapman's life abruptly disappeared.*

*Shown: Ricardo "Rich" Chapman received a new heart from the transplant team at Robert Wood Johnson University Hospital.*



A lifelong athlete, he enjoyed shooting baskets with his six sons. Then, in one stop motion moment, as he prepared to take a foul shot, he blacked out. He woke up minutes later, lying on the sidelines, surrounded by concerned onlookers.

Mr. Chapman saw a cardiologist, who diagnosed an enlarged heart and ventricular tachycardia (irregular heartbeat). An implanted defibrillator (pacemaker) and medications helped, but symptoms, including fainting episodes, continued as the aggressive disease worsened.

At his wife's suggestion, he saw a cardiologist at RWJ, who encouraged him to become a transplant candidate, but the tachycardia was so serious that he had to be admitted. The cardiologist recommended the implantation of an LVAD (left ventricular assist device) to support Mr. Chapman's failing heart while he waited for a heart transplant.

The LVAD is an implanted pump connected to the heart, powered by a pair of external battery packs worn holster style on the belt. The LVAD can be used as a bridge to support a failing heart until transplant. RWJ is also accredited by the Joint Commission to offer it as a permanent therapy for individuals who are not eligible for heart transplants.

"The LVAD changed my life. I was able to go home and could even play basketball again," says Mr. Chapman. "I didn't think about the transplant."

Instead, he focused on his son's marriage coming up that fall in Florida. The LVAD would enable him to attend, but he hoped he wouldn't be wearing the device. There was another consideration: attending the wedding would take him outside the area of the Transplant Program at RWJ. When in early spring, a call came that a new heart may be available; he refocused and began to imagine what life would be like with no LVAD, a new heart and the ultimate second chance at life. Unfortunately, that donor heart and a second one, were not matches.

Mr. Chapman was always one to count his blessings, so he refused to become discouraged. He grew up in Newark without a permanent home, staying in hotels, with friends and siblings while working and attending school. He eventually earned enough money in auto sales to get his own place and marry, but the first marriage failed. None of these challenges got him down.



"In spite of everything, I always had a positive outlook," he says. "I read stories about kids getting sick and dying when they are 10. I thought, 'No matter what happens, I'm 50 and I have been able to live a little bit. I have had a good life.'"

Later that spring, a third call came and this heart would be the charm.

The lead surgeon on the transplant team was Thomas W. Prendergast, MD, Associate Professor of Surgery at UMDNJ Robert Wood Johnson Medical School and Surgical Director of Cardiac Transplant at RWJ.

"I'll never know how to thank him," says Mr. Chapman.

"First, he worked all night to remove the donor's heart. Then he had to remove my LVAD. Finally, he implanted my new heart and stayed by my bedside until I woke up. I can't tell you what that meant to me."

In addition to Dr. Prendergast, Mr. Chapman is deeply grateful to the specially trained

team of heart transplant surgeons, anesthesiologists, nurses, social workers, dietitians and cardiac rehabilitation professionals within RWJ's Transplant Cardiology Program who kept him alive while he waited for a new heart and aided his post transplant recovery. He also struggles for words when comprehending the sacrifice made by the heart donor and his family.

"I am grateful every day for the part of him that is alive in me," Mr. Chapman says. "I want to give back and work with the Sharing Network (New Jersey's organ procurement agency) to tell my story and encourage others to become organ donors."

Visit [www.rwjuh.edu/transplant](http://www.rwjuh.edu/transplant) or call 1-888-MD-RWJUH.

*Shown: Thomas Prendergast, MD, Associate Professor of Surgery at UMDNJ-Robert Wood Johnson Medical School and Director of Cardiac Transplant at Robert Wood Johnson University Hospital.*



# MINIMALLY INVASIVE COLON SURGERY

## Drive to Survive

When he was diagnosed with colon cancer last summer following a colonoscopy and told he needed colon resection surgery, Raymond Kaszyk was overwhelmed by the possibility of a major operation, which he was told was his only option by a local area hospital.

The diagnosis was a shock to him and his family. Mr. Kaszyk had worked in construction for more than 35 years and was physically fit from the labor and his hobbies, which include riding his Harley and restoring classic cars.

Mr. Kaszyk scheduled the traditional colon resection. The procedure requires a long cut of the abdomen. A section of the colon is removed, and the remainder is stitched together. After surgery, patients typically stay in the hospital for seven to 10 days and may wear an ostomy bag for an undetermined length of time. Full recovery can take weeks.

His parents died at a young age from cancer and he worried about his future. When he learned he had colon cancer, Mr. Kaszyk's brother was already battling a different form of the disease.

Determined to have a good outcome, Mr. Kaszyk, his wife, Pat, and their son Brian, researched other options. In October, he found Robert Wood Johnson University Hospital (RWJ) to see Nell Maloney Patel, MD, Assistant Professor of Surgery at UMDNJ-Robert

Wood Johnson Medical School (RWJMS). Dr. Maloney Patel, a specialist in colon and rectal surgery, told him he was a good candidate for a newer, minimally invasive procedure.

"The major difference from the traditional approach is we perform the surgery laparoscopically or use a robotic approach," she explained. "So the incision is much smaller, the recovery times are generally shorter (about three to four days) and patients usually are back to their normal activities and feeling pretty comfortable within two weeks."

After that meeting with Dr. Maloney Patel, Mr. Kaszyk decided to have the operation. "She was optimistic and confident. The way she explained my cancer and the procedure, I felt safe with her," he recalled. "She gave me so much hope."

Dr. Maloney Patel and Craig Rezac, MD, Assistant Professor of Surgery at RWJMS,

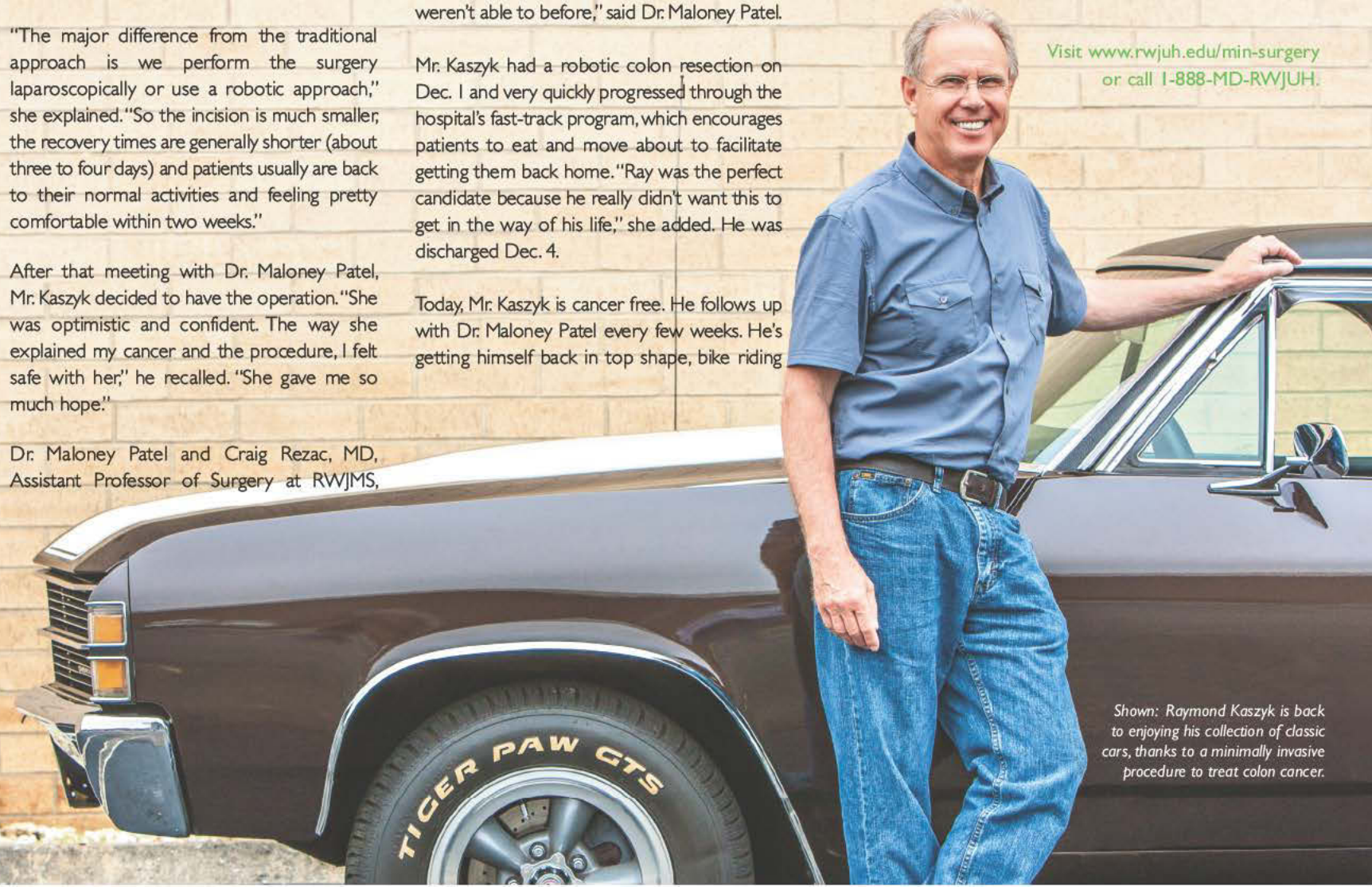
prefer using minimally invasive approaches on appropriate candidates. "You can guide and manipulate the robotic instrument through the pelvis, a confined space, and the camera allows you to see things in a way that we weren't able to before," said Dr. Maloney Patel.

Mr. Kaszyk had a robotic colon resection on Dec. 1 and very quickly progressed through the hospital's fast-track program, which encourages patients to eat and move about to facilitate getting them back home. "Ray was the perfect candidate because he really didn't want this to get in the way of his life," she added. He was discharged Dec. 4.

Today, Mr. Kaszyk is cancer free. He follows up with Dr. Maloney Patel every few weeks. He's getting himself back in top shape, bike riding

with Pat, restoring his '67 Pontiac Le Mans and riding his Harley. "Dr. Maloney Patel guided us through this with such ease and confidence. We can't thank her enough."

Visit [www.rwjuh.edu/min-surgery](http://www.rwjuh.edu/min-surgery)  
or call 1-888-MD-RWJUH.



Shown: Raymond Kaszyk is back to enjoying his collection of classic cars, thanks to a minimally invasive procedure to treat colon cancer.



# EMERGENCY SERVICES

## Preparing for the Unthinkable

What if a train packed with morning commuters derailed as it passed through the heart of New Brunswick, causing mass casualties and chaos? Or, what would happen if a suicide bomber covertly walked in among 8,000 basketball fans in a local arena and caused terror and bloodshed?

These scenarios are unfathomable nightmares, but they are also real threats to New Brunswick—a growing city halfway between New York and Philadelphia that is home to major hospitals, Rutgers University, a key NJ Transit and Amtrak transportation hub and health care giant Johnson and Johnson.

As a Level I Trauma Center located in this increased risk region, Robert Wood Johnson University Hospital (RWJ) finds itself on the frontline and is a leader in disaster and terrorism preparedness for New Jersey. Following the 9-11 terrorist attacks, RWJ along with its partner, the University Center for Emergency Preparedness and Disaster Response (UCDPER), have been working to prepare for the unthinkable through education, research, community outreach and clinical advances in emergency response with one goal in mind: keeping the public prepared and safe in the event of a horrific terrorist attack or other disaster.

"RWJ and its UCDPER partners, UMDNJ-Robert Wood Johnson Medical School and Rutgers University, are at the forefront of initiatives to prepare the state, the region, and the nation to respond to major emergencies and disasters of natural, accidental and intentional (terrorism) origin," explains Clifton R. Lacy, MD, Director of UCDPER and Clinical Associate Professor of Medicine at UMDNJ-Robert Wood Johnson Medical School. "Subject matter experts in multiple disciplines share knowledge and information to establish and disseminate best practices to improve preparedness for the communities we serve and for the nation."

UCDPER hosted a statewide conference entitled "9/11 – 10 Years Later" to update responders, educators, researchers, and clinicians on national and state preparedness and response efforts. The Center is planning four more conferences for 2012. In 2011, RWJ, with input from military and civilian experts in the United States and Israel, developed a comprehensive collection of best practices for responding to mass casualty incidents caused by explosions. RWJ also staged a recent experiment to test the hospital's capability to handle 300 simulated casualties resulting from a fictional explosion.

The work of UCDPER is one major, welcome change following 9-11, but Louis Sasso, Director of Emergency Preparedness at RWJ, believes that increased funding and collaboration among emergency personnel have also been critical to improving emergency preparedness efforts.

"There is better communication among all agencies. We work side-by-side now," Sasso notes.

Sasso points to the Port Security Plan that the New Jersey Emergency Medical Service Task Force developed and activated to coordinate triage and hospital destinations following the emergency landing of a U.S. Airways jetliner in the Hudson River as one example.

"When that happened, we knew exactly how to respond and first responders in the area knew who to call since they developed the plan with us," Sasso says.

Visit [www.ucdper.org](http://www.ucdper.org) or call 732-418-8486.

*Shown: Clifton R. Lacy, MD is Director of the University Center for Emergency Preparedness and Disaster Response, working to educate the local community on potential terror and disaster threats.*



# COMMUNITY HEALTH

Fun in the Park



*Shown: Volunteer youth mentors and soccer coaches Steve and Alex Lujan run a park-based fitness program aimed at reducing childhood obesity as part of the Community Health Promotions Program.*



Chips and unhealthy junk food were staples of 13 year old New Brunswick resident Joharlin Martinez's diet before he enrolled in Robert Wood Johnson University Hospital's (RWJ) Fun in the Park program last August. Less than one year later, Martinez and the program's organizers are amazed at the changes he's made. Martinez has lost several pounds and regularly completes the program's daily fitness challenges which include sit ups, abdominal crunches, push ups, stretching and competitive sports. Better still, he's having a lot of fun.

"I feel like things are getting easier the more I do," Martinez says. "I can play longer and I feel better. I'm also eating more fruit like apples and bananas, but less chips."

Launched in August 2011 with the support of the New Jersey Partnership for Healthy Kids New Brunswick, New Brunswick Tomorrow, the New Brunswick Police Department and a grant from the American Heart Association's Por Tu Corazón Latino initiative, RWJ's Fun in the Park Project is working to encourage increased physical activity and healthier eating among New Brunswick's Latino youths, who have a high obesity rate. Overall, New Brunswick children are more likely to be overweight compared to their national counterparts, according to a Robert Wood Johnson Foundation study focusing on Childhood Obesity in New Jersey. Moreover, almost all of New Brunswick's children (88%) do not meet recommendations for vegetable consumption or are not physically active for 60 minutes each day.

During the spring, summer and early fall, "Fun in the Park," meets Monday through Friday, 3:30 6 p.m. and Saturday, 9 a.m. noon, in New Brunswick's Baker Park. During the winter, the program is offered in space donated by First Baptist Church of New Brunswick. Each session begins with children taking part in several physical activities to increase strength, flexibility and stamina. The day typically ends with organized activities such as soccer, baseball or traditional dance.

While the main goal of Fun in the Park is to get kids to be more active, it also promotes a welcoming, family friendly atmosphere in Baker Park. A study by UMDNJ School of Public Health volunteers showed that park usage and children's physical activity levels increased on scheduled program days compared to non program days.

"When we first started, you could see kids circle their bikes to stop and see what was happening," says Mariam Merced, Director of RWJ's Community Health Promotions Program (CHPP). "Now, some of those same kids are part of the program. We also see a lot of parents who bring the brothers and sisters of children in our program to the park. They are happy that their families can have fun together in a safe place."

The program is led by RWJ CHPP staff and volunteers like 21 year old city resident Steven Lujan, who was recruited by New Brunswick Police Lieutenant Michael Bobadilla.

Lujan, who is currently studying Police Science at Middlesex County College with an eye toward transferring to Rutgers University after earning his Associate's Degree, enjoys giving back to his community and watching the children learn life lessons beyond diet and exercise.

"The exercises can be difficult, but they still try their best," Lujan says. "If someone is having a tough time they work as a team and help each other."

Heyti Seri, 12, is the only girl enrolled in the program, but she doesn't shy away from competing with the boys. Heyti has lost 9 pounds and is eating more fruits and vegetables, but the improvement in her soccer game is what excites her most.

"I exercise more than I used to, I don't eat as much junk food and my soccer game is much better too," says Seri, who hopes to play soccer on a club team and emulate her favorite player, Lionel Messi, the Argentine soccer superstar. "I definitely want to play on a team someday. I didn't think it was possible before this."

Visit [www.rwjh.edu/communityhealth](http://www.rwjh.edu/communityhealth) or call 732-247-2050.

*Shown above from left: Mariam Merced, Director of the Robert Wood Johnson Community Health Promotions Program and Yesenia Hernandez, Program Coordinator.*



## What: FUN IN THE PARK

When:  
Mondays, Wednesdays, Fridays from  
3:30 p.m. to 6 p.m.

Saturdays from  
9 a.m. to noon

Where:  
Baker Park  
(Corner of Ellen Street and  
Remsen Avenue in New Brunswick)

*Open to area youth, the program offers supervised outdoor activities, group games and sports programs.*

*For more information and registration please call Yesenia Hernandez at 732-247-2050.*





# TRAUMA

A Will to Live

*Nicole Bartolotti spoke to her husband, Gerald (Jerry) Bartolotti, just before 6 p.m. on Thursday, November 11, 2010.*

*Shown from left, Nicole, Cole and Jerry Bartolotti are a tight-knit family since Jerry's traumatic injury and life-changing experience nearly two years ago.*



He was working on a construction site, as usual, and assured her he would be home as soon as he was done.

Moments later Jerry called back. But this time it wasn't his voice on the other end. Instead, a police officer gave Nicole the worst news a wife can receive—Jerry was in an accident.

Shortly after speaking to Mrs. Bartolotti, Jerry noticed that his 1994 Peterbilt 18 wheel truck and trailer was rolling down a hill, unoccupied. In an attempt to stop his truck from hitting anything (or anyone), he rushed to the passenger's door and reached for the emergency air brake. But his effort was futile and the unthinkable happened.

Andrew Fitch, an EMT for the Long Hill First Aid Squad was first to arrive on the scene. "The truck rolled over into a ditch and pinned him against a tree. I thought he was dead," he recalled. "Then I heard him say, 'I'm alive' ...but there was so much weight on him I really didn't think he was going to make it."

Jerry was trapped for two hours in the bitter cold before emergency workers were able to free him from the wreckage. Eventually, he was heliported by North Star Medevac unit to Robert Wood Johnson University Hospital (RWJ) in New Brunswick. He had severe chest and arm injuries—there was little hope he would survive.

At the hospital, Jerry was placed in a medically induced coma. "All we knew was

that if Jerry could make it through the next three hours we would learn more," Nicole said.

When the doctors finally emerged, the diagnosis was grim. According to Timothy Leddy, MD, an attending orthopedic surgeon at RWJ and a Clinical Associate Professor of Orthopedics at UMDNJ Robert Wood Johnson Medical School, Jerry was suffering from a reperfusion injury—an extremely dangerous condition caused when the blood supply returns to the tissue after extensive lack of oxygen. In order to save his life, they would have to amputate.

Carlos Sagebien, MD, attending orthopedic surgeon at RWJ and a Clinical Associate Professor of Orthopedics at UMDNJ Robert Wood Johnson Medical School said, "We had a long conversation with the family to let them know we would do everything we could to save his arm, but there was no way we were going to let him pass away."

And that wasn't all. Jerry also had seven broken ribs, a collapsed lung and several of the fingers on his right hand had been severed. Later, they would find out he had severe nerve damage in his right arm and hand.

"They told us he was the sickest man in the entire hospital," his wife said. "We had no idea if he would live."

"When all was said and done, we took him to the operating room 10 times,"

Dr. Sagebien explained. Ultimately, to save Jerry's life, doctors had to amputate his entire left arm, shoulder blade and collarbone, otherwise known as shoulder disarticulation. "When he came back to visit it was incredible to see him," said Mariann Boyleston the Nurse Practitioner who cared for Jerry in the trauma unit. "You just feel so much admiration for someone who's been through all that. And his wife Nicole was his biggest advocate. She's tiny but she's very strong."

"She was an absolute champion. I don't think she left the hospital once," Dr. Sagebien said.

"You couldn't ask for a better team of people who work so well together," Nicole gushed. "If not for the amazing doctors and nurses of Surgical Intensive Care Unit West, Jerry would not be here today!"

But Dr. Leddy insists that this story isn't about the people who saved Jerry. Instead, it's about his incredible will to survive. "We were just innocent bystanders watching a guy fight for his life...and succeed. He's an amazing person."

It's been more than a year since Jerry's accident. He's adjusting to his new life and getting stronger every day. His wife Nicole continues to thank the RWJ team for saving her best friend's life.

Visit [www.rwjtrauma.org](http://www.rwjtrauma.org)  
or call 1-888-MD-RWJUH.



*Shown: Marianne Boyleston, RN, APN, was just one of the many team members who were instrumental in Jerry's long recovery at Robert Wood Johnson University Hospital.*



# OPHTHALMOLOGY

## Seeing Eye-to-Eye

James Tressitt was concerned when his two older sisters were diagnosed with macular degeneration, the leading cause of blindness among persons over age 60. He learned it could be hereditary. The straight lines that sometimes appeared wavy to him were curious. Still, he put off getting an eye exam.

"My one sister wasn't responding well to treatment and had serious vision problems. Then an optometrist I saw about my eye glasses told me I have macular degeneration and should see a retina specialist," Mr. Tressitt recalled. "It hit me that I just didn't want to lose my vision."

Mr. Tressitt saw Jonathan Prenner, MD, Clinical Assistant Professor of Ophthalmology at UMDNJ-Robert Wood Johnson Medical School with the Retina-Vitreous Center (RVC) at Robert Wood Johnson University Hospital. "If caught early and managed carefully, macular degeneration is now a very treatable condition," Dr. Prenner said.

Mr. Tressitt was diagnosed with wet macular degeneration in his left eye. "He had bleeding and fluid in and under the retina," Dr. Prenner explained. "If not attended to quickly, that can lead to growth of blood vessels, additional leakage, hemorrhaging and eventual scarring. Once this disease gets to a form where scarring becomes the predominant feature, we don't have a whole lot of options."

Mr. Tressitt was treated initially with Lucentis, a medication that blocks VEGF (vascular endothelial growth factor), which causes new blood vessels to grow. The RVC was a clinical trial center for the development of Lucentis from phase one through Federal Drug Administration (FDA) approval in 2006. The medication is injected directly into the eye. With anesthesia, it's a painless

procedure. "My only discomfort is a little irritation after the injection, but that was gone after about a day," Mr. Tressitt said.

There was some improvement, but the disease remained active. And it was frustrating that Mr. Tressitt needed to come in frequently from Westfield for treatment. So Dr. Prenner offered Mr. Tressitt a new alternative. In December, Mr. Tressitt became among the first patients offered Eylea, a new drug that the RVC helped research for more than five years. It gained FDA approval in November.

"In many patients, although not all, we've seen improvement in their anatomy and function when using Eylea," Dr. Prenner explained. "One week after Mr. Tressitt's first treatment, the fluid went away and his vision became 20/20. That's very impressive."

Mr. Tressitt noticed the effects almost immediately. "There are no wavy lines, no dark spots. I only wear sunglasses and glare-reducing glasses when I drive at night. Other than that, my vision is quite good."

Dr. Prenner has progressively given Mr. Tressitt more time between injections based on his response to Eylea. High-resolution imaging tests performed each visit show the eye's status and drive decision-making regarding treatment. Now, Mr. Tressitt is at 10 weeks between treatments and he may ultimately be able to extend that to once a quarter.

"I am relieved," Mr. Tressitt says. "I have no illusions that I will be cured, but Dr. Prenner has helped me preserve my vision. I'm so thankful for the treatment options at the RVC at RWJ."

Visit [www.rwjuh.edu/eye](http://www.rwjuh.edu/eye) or call 1-888-MD-RWJUH.



# RWJ ROUND-UP

## What's Happening on Campus and Beyond

### UPCOMING EVENTS!

**Children's Health 14th Annual Golf Outing**  
Monday, August 6  
The Ridge at Back Brook  
Ringoes, NJ  
732 937 8750 or email [events@rwjuh.edu](mailto:events@rwjuh.edu)

**Prostate Cancer Screenings**  
Tuesday, September 18  
Wednesday, September 19  
Thursday, September 20  
The Cancer Institute of New Jersey  
5 to 8 p.m.  
1 888 MD RWJUH

**National Child Passenger Safety Week**  
September 16th - 22nd  
A variety of programs will be available as well as free on site car seat checks and installation  
732 418 8030

**53rd Annual Auxiliary Autumn Ball**  
Saturday, October 20  
The Heldrich  
New Brunswick, NJ  
[events@rwjuh.edu](mailto:events@rwjuh.edu)

**Tied to the Cause:  
Breast Cancer Awareness Event**  
Wednesday, October 10  
The Arline and Henry Schwartzman  
Courtyard  
New Brunswick, NJ  
1 888 MD RWJUH

**Girl Chat about Puberty**  
Information classes by appointment  
732 418 8110

### PROM NIGHT

There are many rites of passage for a young person, including attending prom. When undergoing cancer treatment though, youths sometimes miss out on these milestones. Together, The Cancer Institute of New Jersey (CINJ), the Embrace Kids Foundation, the Beauty Foundation and Beauty Foundation Friends (BFF's), recently hosted the "Hem/Onc" Prom for teen cancer survivors and youngsters receiving treatment at CINJ or its flagship hospital, Robert Wood Johnson University Hospital (RWJUH) in New Brunswick.



### SPOTLIGHT ON THE COMMUNITY HEALTH PROMOTIONS PROGRAM

The Community Health Promotions Program at Robert Wood Johnson University Hospital helps the community get healthy and stay healthy through a variety of programs and events. Here are some of the highlights:

- **Artist Mentoring Against Racism, Drugs and Violence: Healing Through the Arts Summer Program**

Monday, July 16th through Friday, August 17th  
8:30 a.m. to 4:30 p.m.

Douglass College Student Center, Rutgers University  
100 George Street, New Brunswick, NJ

*Limited spaces available, income and residential guidelines apply.  
For more information contact Yesenia Hernandez at 732 247 2050.*

- **Project Inspire: Inspiring Young People to Live a Healthy and Active Life**

Monday, June 25th through Friday, June 29th  
9 a.m. to 1 p.m.

The First Baptist Church of New Brunswick  
226 Hale Street, New Brunswick, NJ

The goal of Project Inspire is to "inspire" children ages 10 to 14 and their families to live more healthy and active lives through hands-on educational activities as well as fitness and cooking demonstrations.

*Limited spaces available, income and residential guidelines apply.  
For more information contact Leslie Malachi at 732 247 2050.*

- **The Latino Diabetes Wellness and Education Program  
Programa de educación en español para diabéticos**

Two Saturdays a month from 9 a.m. to 12:30 p.m.  
Eric B. Chandler Health Center at UMDNJ-Robert Wood Johnson Medical School  
277 George Street, New Brunswick, NJ

This program addresses the critical need for diabetes education and outreach in New Brunswick's Latino population.

*Limited spaces available, income and residential guidelines apply.  
For more information and registration contact Leslie Malachi at 732 247 2050. Se habla español.*



# CONGRATULATIONS!

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## HEALTHY RECIPE FROM OUR FOOD AND NUTRITION DEPARTMENT

### FRUIT SALAD WITH YOGURT HONEY-LIME DRESSING

#### Dressing:

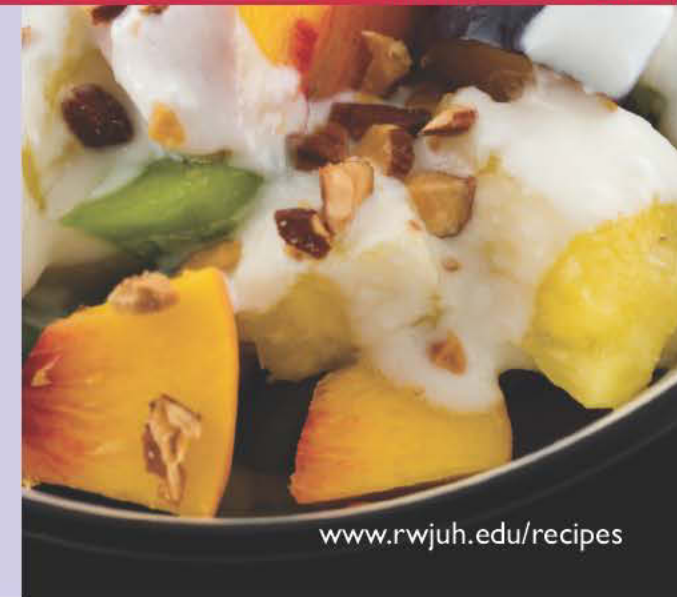
1/2 cup plain low fat or nonfat yogurt  
1/4 cup lime juice  
1/4 cup honey  
1 tsp. lime zest  
Dash of nutmeg

#### Salad:

2 cups of pineapple, cut in bite size pieces  
1 cup red or green seedless grapes  
1 cup sliced strawberries  
1 1/2 cups peeled, diced mango  
1 cup blueberries  
1 cup mandarin oranges  
1/3 cup chopped walnuts

Combine pineapple, grapes, mango, blueberries, mandarin oranges and strawberries. Spoon onto salad plates lined with salad greens. Combine yogurt, honey, lime juice, and nutmeg. Spoon dressing over each salad and top with nuts.

Serves 4



[www.rwjuh.edu/recipes](http://www.rwjuh.edu/recipes)