

A Publication of  
**MONMOUTH MEDICAL CENTER**

WINTER 2019

# healthy *together*



**WOMEN'S  
HEART HEALTH**

**NEW KNEES,  
NEW LEASE ON LIFE**

**LUNG CANCER  
MYTHS & FACTS**

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

## We're Focused on Community

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

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

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

At Monmouth Medical Center, we are partnering with WEforum, a volunteer organization led by women in our community whose mission is to strengthen the health and wellness of individuals within New Jersey.

Through its annual health and wellness conference and activities such as a recent assembly for Long Branch Middle School students based on the theme of the 2018 Wellness Conference, Eat for Life: How the Power of Food Can Heal Your Body (see details on page 8), WEforum is devoted to addressing healthcare disparities in our community. Like WEforum, Monmouth Medical Center is committed to the health and well-being of every single member of each community we serve and educating them about the healthcare problems that can be minimized or avoided with preventive care, including proper nutrition and an active lifestyle. It is a commitment that is directly aligned with RWJBarnabas Health's Social Impact and Community Investment Practice, where a collective impact approach is a key driver of our mission to address the social, economic and environmental conditions that contribute to poor health outcomes, reduced life expectancy and higher costs.

At RWJBarnabas Health, we believe in the greatness of the New Jersey community and are glad to help improve quality of life for everyone who, like us, calls the Garden State home.

Yours in good health,

**BARRY H. OSTROWSKY**  
PRESIDENT AND CHIEF EXECUTIVE OFFICER  
RWJBARNABAS HEALTH



**BILL ARNOLD**  
PRESIDENT AND CHIEF EXECUTIVE OFFICER  
MONMOUTH MEDICAL CENTER



## HEALTH NEWS

### A-LISTER

For the second consecutive year, Monmouth Medical Center (MMC) has been recognized as a Top Teaching Hospital by The Leapfrog Group. Widely acknowledged as one of the most competitive honors an American hospital can receive, the recognition underscores an academic medical center's commitment to patient safety and quality.



## KEEPING SAFE

MMC is also the only hospital in Monmouth and Ocean counties to receive an "A" Hospital Safety Score by The Leapfrog Group, an



independent national nonprofit organization of employer purchasers of healthcare and the nation's leading experts on patient safety, for eight consecutive rating periods. Grades are based on preventable medical errors, injuries, accidents and infections.

## Plugged In

MMC was once again named to the Annual Health Care's Most Wired® survey's list of Most Wired Hospitals. Published annually by Health & Hospitals Networks (H&HN), the survey is a leading industry barometer measuring information technology use and adoption among hospitals nationwide.



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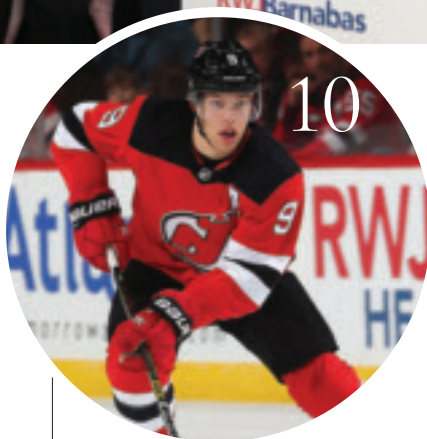
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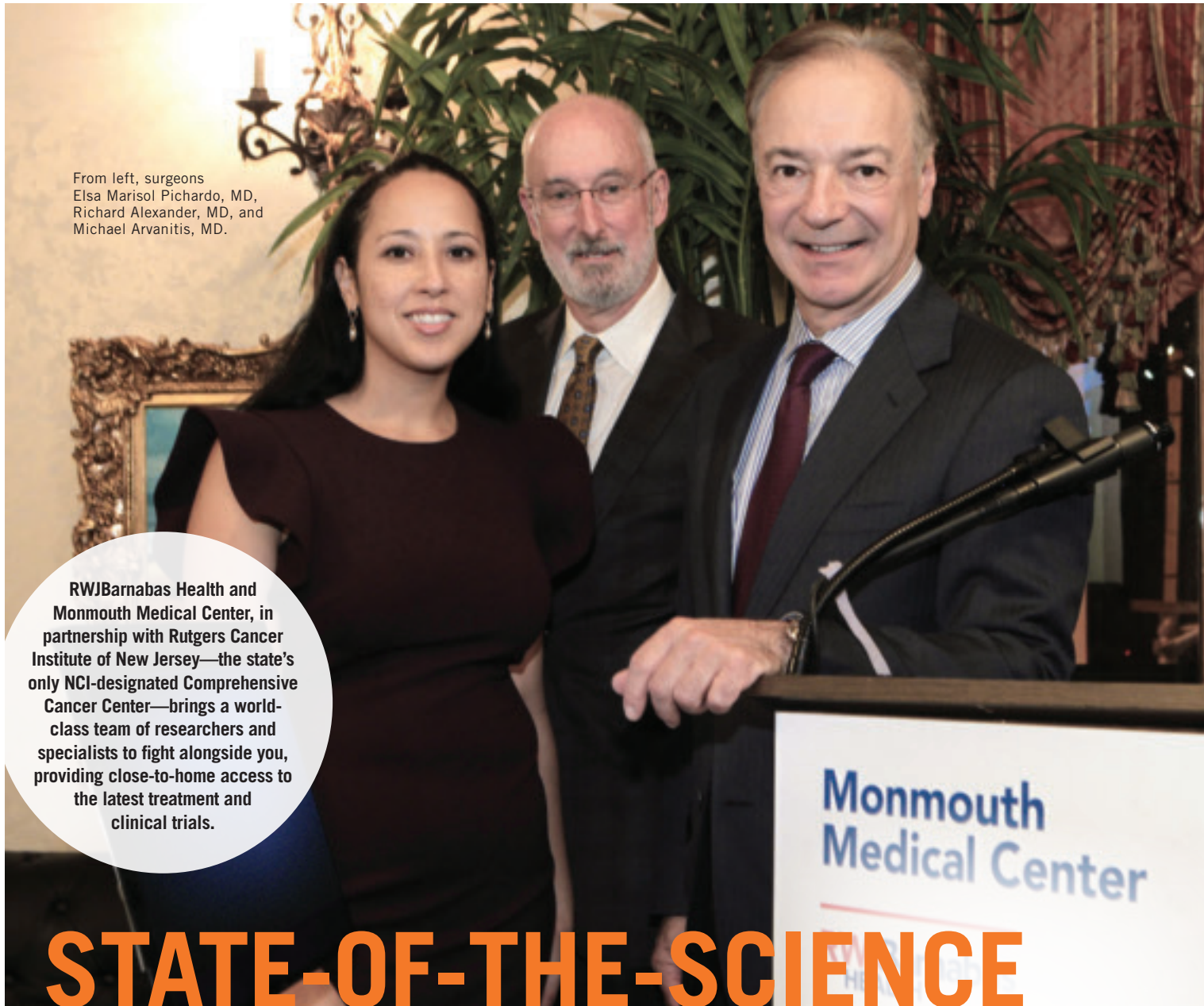
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RWJBarnabas Health and Monmouth Medical Center, in partnership with Rutgers Cancer Institute of New Jersey—the state's only NCI-designated Comprehensive Cancer Center—brings a world-class team of researchers and specialists to fight alongside you,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

# STATE-OF-THE-SCIENCE CARE FOR COMPLEX GI DISEASES

**A MULTIDISCIPLINARY PROGRAM BRINGS  
ADVANCED SURGICAL AND MEDICAL EXPERTISE  
TO PATIENTS WITH CANCER AND DISEASES OF THE  
PANCREAS, LIVER AND GASTROINTESTINAL TRACT.**

People throughout Monmouth County have come to trust the Leon Hess Cancer Center for excellence in gastrointestinal cancer care. Through the launch of the Hepatobiliary (HPB), Pancreatic and Gastrointestinal (GI) Surgical Oncology Program, an alliance of Monmouth Medical Center and Rutgers Cancer Institute of New Jersey, patients with complex GI concerns now have an additional resource close to home.

The new HPB, Pancreatic and GI Surgical Oncology Program, an adjunct to the Colon and Rectum Surgical Oncology Program directed by Chief of Surgery Michael Arvanitis, MD, offers a spectrum of services for common and rare gastrointestinal cancers



and conditions. Services include complex diagnostic biopsy procedures, the latest surgical approaches and access to clinical research trials. Treatment plans are tailored to each patient's disease and personal needs with quality of life as the ultimate goal.

### SPECIALIZED EXPERTISE

"We provide timely, comprehensive, state-of-the-science evaluation and clinical services for individuals with benign or malignant diseases of the liver, bile ducts, pancreas, stomach or gastrointestinal tract," says surgical oncologist Richard Alexander, MD, Chief Surgical Officer at Rutgers Cancer Institute of New Jersey. In addition to cancer, the HPB, Pancreatic and GI Surgical Oncology Program cares for patients with benign diseases, such as symptomatic liver cysts and chronic pancreatitis.

Dr. Alexander leads a multidisciplinary team of dedicated specialists including surgical oncologists, medical oncologists, radiologists, radiation oncologists, pathologists and interventional radiologists. The team gathers at regular tumor board meetings to discuss each patient and develop an integrated plan. Specialized surgical care is provided by Elsa Marisol Pichardo, MD, a board-certified general surgeon who is fellowship-trained in hepatobiliary and pancreatic surgery.

She performs both traditional and minimally invasive surgeries including the complex Whipple procedure and spleen-preserving distal pancreatectomy, as well as major and minor liver resections and liver ablations. Fluent in Spanish, Dr. Pichardo is accredited in hepatobiliary and pancreatic surgery by the American Hepato-Pancreato-Biliary Association (AHPBA).

### COORDINATED CARE

Patients are assisted throughout their often complicated and stressful healthcare journey by an oncology nurse navigator. The care team extends to nutritionists, physical therapists and palliative medicine clinicians who offer help as needed. Monmouth Medical Center's partnership with Rutgers Cancer Institute connects patients to clinical trials, giving them a direct pipeline to the latest research in gastrointestinal cancers.

For individuals with a family history of gastrointestinal cancer, the Genetic Counseling Program at Monmouth Medical Center allows patients to meet with genetic counselors who offer in-depth risk assessments and recommendations for screenings.

The HPB, Pancreatic and GI Surgical Oncology Program partners with primary care physicians and gastroenterologists in the community to provide the best, most integrated care for their patients with hepatobiliary and pancreatic concerns.

"For most cancer patients, the best outcomes are achieved when a coordinated multidisciplinary treatment plan is used," says Dr. Alexander. "In that context, having expertise in complex surgical oncology and hepatobiliary surgery available here at Monmouth Medical Center will enhance our ability to achieve those outcomes close to home."



## CARING FOR YOUR STOMACH AND PREVENTING DISEASE

Lifestyle choices and the foods you eat directly impact your digestive health. By adopting a healthier approach, you'll reduce your risk for gastrointestinal cancers. For people in the midst of cancer care, a healthy lifestyle supports recovery and eases the journey by increasing energy and positivity.

### 10 STEPS FOR BETTER GI HEALTH

1. Drink plenty of water to keep your digestive system flowing.
2. Exercise regularly to speed up digestion and stimulate muscles in the GI tract.
3. Skip bad habits such as smoking, excessive caffeine and alcohol.
4. Eat a diet rich in insoluble and soluble fiber for better digestion and disease prevention.
5. Eat mindfully on a regular schedule and slowly to properly digest nutrients.
6. Limit high-fat foods which slow down digestion and promote constipation.
7. Maintain a healthy weight to reduce stomach acid and esophagus discomfort.
8. Try probiotics such as low-fat yogurt or doctor-recommended supplements.
9. Monitor the toilet for changes in bowel movements.
10. De-stress with meditation, talk therapy, yoga and other techniques.

## SCREENINGS FOR EARLY DETECTION

Routine screenings ensure cancers are caught early, when treatment is most effective. Don't forget to schedule your colonoscopy to screen for abnormalities in the colon and rectum.

## WHAT ABOUT GENETICS?

If your family has a history of gastrointestinal cancer, consult with a genetic counselor to determine your risk factors and what you can do to prevent cancer.

Consult your GI doctor for more information about gastrointestinal health or if you have any concerns. To learn more about the HPB, Pancreatic and GI Surgical Oncology Program, call our oncology nurse navigator at **732.923.6481**.

After having both knees replaced, Joy Eastmead is now enjoying a restored quality of life.

# CRUISING ALONG

**A TINTON FALLS RESIDENT ANTICIPATES SMOOTH  
SAILING ON HER NEXT VACATION CRUISE  
FOLLOWING TWO TOTAL KNEE REPLACEMENTS.**

Three years ago, Joy Eastmead and her husband, Lew, were planning their upcoming cruise to the Hawaiian Islands. They were ready to soak up the sun and had prepared carefully for the trip. Even Joy's arthritic knees couldn't dampen her excitement.

"We had a wonderful time," Joy, 72, recalls. "But it was a lot of work. The ship had several staircases and only two elevators—one at the front of the boat and one at the back. Because of my sore knees, I couldn't climb the stairs. That meant every time I wanted to get somewhere, I had to walk half the length of the boat to get to an elevator. It was exhausting."

### INJECTIONS HELP FOR A WHILE

Joy's knees had been bothering her for more than a decade. They began to feel achy and uncomfortable, and walking was harder than usual. She made an appointment with David L. Chalnack, MD, Medical Director of the Joint Replacement Center at Monmouth Medical Center. "He suggested I try physical therapy," says Joy. "I did that twice a week for two months."

When PT didn't work, Joy returned to Dr. Chalnack for X-rays. They showed Joy's knee pain was the result of bone-on-bone arthritis. This happens when the cartilage in the knee joint wears away. The joint loses its cushioning, causing the ends of the bone to rub against each other and become increasingly painful and stiff. Dr. Chalnack recommended viscoelastic injections to restore joint fluid. "The gel helped. My knees weren't perfect, but I wasn't in pain. I took anti-inflammatory medicine to reduce swelling," she says.

The years went by and Joy continued with her busy life. Eventually, as Dr. Chalnack had explained, the injection wore off and her symptoms resumed. She

returned for a second injection, knowing her Hawaii trip was on the horizon. "It helped, though not as much as the first time. I had trouble kneeling and bending," she says.



DAVID L. CHALNACK, MD

## 5 HOME REMEDIES FOR HAPPIER JOINTS

Try these at-home remedies to keep your joints healthy.

1

### MAINTAIN A HEALTHY WEIGHT.

Losing 10 pounds takes 40 pounds of pressure off the knees.

2

### EAT A MEDITERRANEAN DIET.

A diet low in processed foods and saturated fats and rich in vegetables, fruits, fish, nuts and beans has anti-inflammatory powers.

3

### LOW-IMPACT WORKOUTS.

Choose gentle-on-the-joints activities like swimming, biking, elliptical, rowing and yoga. A strong core can ease joint pain.

4

### STOP SMOKING.

Smoking affects bones, joints and connective tissue, increasing injury and disease risk.

5

### STAND UP STRAIGHT.

Align your spine by practicing good posture.

### TIME FOR TOTAL KNEE REPLACEMENT

Total joint replacement surgery removes a damaged or diseased joint and replaces it with a prosthesis that replicates the movements of a healthy joint.

"Dr. Chalnack told me, 'You'll know when it's time for knee replacement surgery.' He was right. As soon as I got back from my cruise, I was ready," says Joy. At that point, she had additional limitations. Joy

felt unsteady standing still, which made waiting in line at stores painful. "My husband was pleased because it kept me out of the mall," she laughs.

Because of Joy's increased mobility problems, Dr. Chalnack prescribed physical therapy for four weeks prior to surgery. "Pre-habilitation or 'pre-hab' is an exercise therapy program to strengthen patients before total joint replacement," says Dr. Chalnack, a fellowship-trained orthopedic surgeon skilled in minimally invasive joint replacement approaches including MAKOpasty® robotic technology. According to Dr. Chalnack, knee replacement is indicated after conservative treatment fails, diagnostic studies reveal significant disease and the quality of a patient's life warrants surgery.

Dr. Chalnack completed Joy's first total knee replacement in 2016 and her second seven months later at Monmouth Medical Center. Joy is effusive about how well both surgeries went and the extra attention she received during her hospital stays. "I have painful arthritis in the bridge of my feet and had trouble sleeping the first night. My nurse was so attentive—she used a warm compress to wrap my feet."

Joy returned home with a walker following the surgeries, but says she didn't need it. She was moving well on her own. She received at-home physical therapy for two weeks and then continued independently, well-schooled from past PT experience. Staff from the Joint Replacement Center called to check on her. "They were wonderful and treated me like I was their only patient," she recalls.

Though Joy—now gardening and shopping with pleasure and no pain—says she wishes she hadn't waited so long to have her knees done, she's not looking back. Instead, she and Lew are preparing for another ocean voyage—this one a Mardi Gras and Caribbean cruise.

Joy says she'll be happy to take the stairs.

To learn more about the Joint Replacement Center at Monmouth Medical Center or for a schedule of joint replacement information sessions, call **888.724.7123**.



# GIVING FOR GOOD HEALTH

Throughout the year, generous friends and neighbors donate time and money to help Monmouth Medical Center provide the most advanced medical treatments and compassionate care. Pictured here are just a few highlights from recent events.



## CONTINUING A PROFOUND LEGACY

Monmouth Medical Center (MMC) recently honored the leadership legacy of the late Judith W. Dawkins, a longtime benefactor, by naming its newly renovated boardroom the Judith W. Dawkins Executive Board Room. “Judi spent over two decades, and countless hours—many of which took place in that boardroom—making decisions that helped lead the path to success for Monmouth Medical Center,” says her husband, Brigadier General Pete Dawkins. Pictured here with the newly unveiled portrait of Judi is Pete Dawkins, with his daughter and son-in-law, Noel and Joe Mihalow.



## HONORING A PAST PATIENT

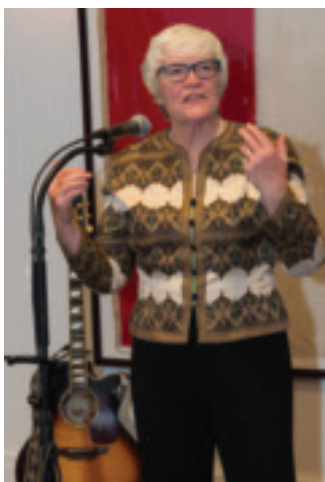
The MMC Foundation (MMCF) held a dedication ceremony for its new Zen garden at the hospital's Cheryl L. Diamond Cancer Center Pavilion on September 17. Phillip Villapiano, a former NFL linebacker and Super Bowl champion, dedicated the Susan Villapiano Zen Garden in memory of his late wife. He is pictured here with his children, Andrea Kelly, and, from left, Michael Villapiano and Phillip Villapiano Jr.

To learn more about special events or giving opportunities to support Monmouth Medical Center, visit [monmouthgiving.org](http://monmouthgiving.org).



## FOOD FOR THOUGHT

More than 400 people attended the WEforum Health & Wellness Conference held November 14 at Bell Works in Holmdel. The focus of this year's conference was Eat for Life: How the Power of Food Can Heal Your Body. The conference's keynote speakers included “Gangsta Gardener” Ron Finley, an L.A.-based food activist. Finley is shown here with WEforum founder Carolyn C. Desena.



## TO YOUR (CHILDREN'S) HEALTH

More than 150 guests joined The Unterberg Children's Hospital Leadership Council and representatives from the Monmouth Medical Center Foundation on November 9 at Rumson Country Club's Riverhouse to “toast” the health of children in the community at the fifth annual “A Toast to Children's Health” wine-tasting event. A Toast to Children's Health supports The Unterberg Children's Hospital Leadership Council's mission by raising funds to ensure the hospital's continued success. Pictured here is Meg Fisher, MD, Chair of Pediatrics at MMC and Medical Director of The Unterberg Children's Hospital.





# THE DOCTOR IS IN ONLINE

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

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

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

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

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

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

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

## HOW IT WORKS

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

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

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

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

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

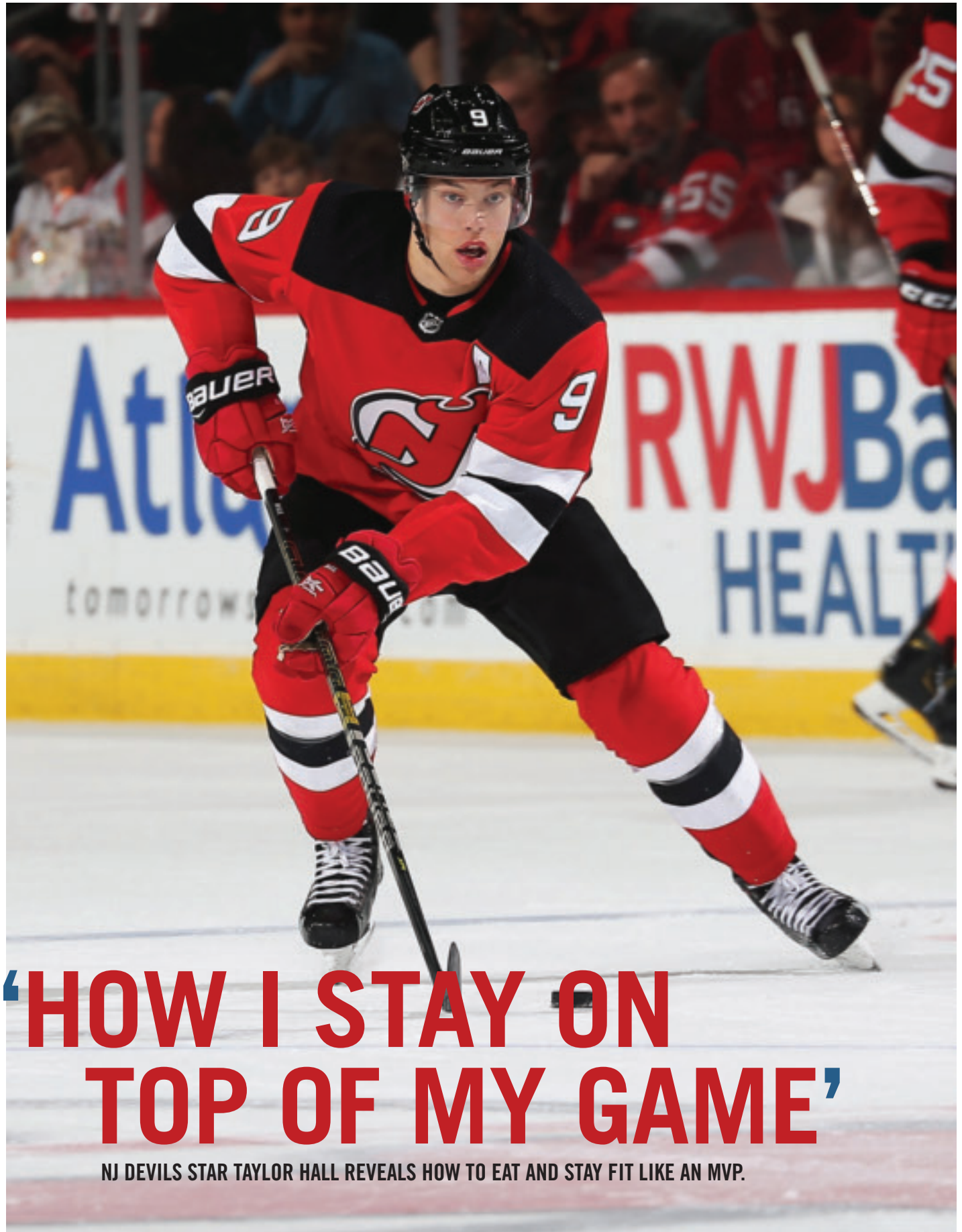
Ultimately, the goal for RWJBarnabas Health TeleMed is for physicians to be able to access, with patient permission, a patient's entire medical record in order to help make better diagnoses.

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



AMY MANSUE

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



# ‘HOW I STAY ON TOP OF MY GAME’

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

PHOTO CREDIT © JERSEY DEVILS/ANDY MARLIN



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

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

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

## EATING TO WIN

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

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

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

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

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

## HELPING KIDS GET HEALTHIER, TOGETHER

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

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

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



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

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

## BODY AND MIND

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

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

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

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

## A WORD TO YOUNG ATHLETES

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

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

To learn more about the RWJBarnabas Health/New Jersey Devils partnership, visit [www.rwjbh.org/devils](http://www.rwjbh.org/devils).



# GOOD FOOD FOR EVERY BODY

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

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

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



**BARBARA MINTZ**

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

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

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

## HELP FOR HUNGER

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

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

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

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

## EATING WELL

### CORN AND BLACK BEAN SALSA

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

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

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



To see a video of the Wellness on Wheels inaugural outing and to learn more, visit [www.rwjbh.org/WellnessWheels](http://www.rwjbh.org/WellnessWheels).



# GETTING OLDER, GETTING BETTER

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

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

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

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

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

## ISSUES OF AGING



LINA SHIHABUDDIN, MD

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

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

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

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

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

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

## TAKING THE FIRST STEP

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

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

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



To learn more about geriatric psychiatry services in the RWJBarnabas Health system, visit [www.rwjbh.org/geriatricpsych](http://www.rwjbh.org/geriatricpsych).

## EVALUATING HEART FAILURE

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

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

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

# LIVING WELL WITH HEART FAILURE





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

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

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

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

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

### UNDERSTANDING THE TERMS

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

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



GARY ROGAL, MD

“People

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

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

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

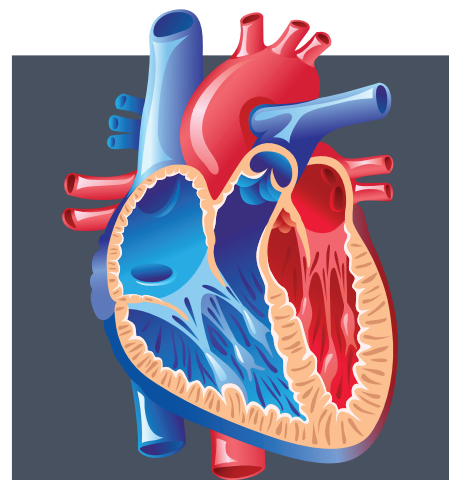
### GETTING TO GOOD HABITS

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

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

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

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



### TWO SIDES OF HEART FAILURE

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

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

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

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

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

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



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

# WORKING THROUGH THE PAIN

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

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

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

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

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



KATHERINE BENTLEY, MD

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

## UNEXPLAINED ACHES

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

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

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

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

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

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

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

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

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



To learn more about the Chronic Pain Management Program and other services at Children's Specialized Hospital, visit [www.childrens-specialized.org](http://www.childrens-specialized.org).





Gathering at the Make Some Noise reception at McLoone's Rum Runner in Sea Bright are Valerie Fund patients Evan Sookram, pictured front and center; Orion Danielson, fourth from left; and Rey Guzman, far right. They are pictured with, from left, Bill Arnold, President and CEO of Monmouth Medical Center; Meg Fisher, MD, Chairman of Pediatrics at Monmouth Medical Center and Medical Director of The Unterberg Children's Hospital; Beth and Tim McLoone; Susan Dulczak, Clinical Director of the Valerie Fund Children's Center at Monmouth Medical Center; Red Bank Mayor Pat Menna; Gerri Daneman of the Make Some Noise: Cure Kids Cancer Foundation; and Sea Bright Mayor Dina Long.

# GREAT CAUSE FOR GREAT KIDS

**MONMOUTH MEDICAL CENTER MAKES SOME NOISE TO RAISE AWARENESS OF PEDIATRIC CANCER.**

According to the American Cancer Society, approximately 1 in 285 children will be diagnosed with cancer before the age of 20.

To raise awareness of the need for pediatric cancer research, the Valerie Fund Children's Center for Cancer and Blood Disorders, part of The Unterberg Children's Hospital at Monmouth Medical Center (MMC), recently hosted a reception honoring the Make Some Noise: Cure Kids Cancer Foundation. The campaign, a joint effort of Make Some Noise: Cure Kids Cancer Foundation and Monmouth Medical Center is designed to raise awareness of childhood cancer and the need for critical research funding during the month of September, recognized nationally as Childhood Cancer Awareness Month.

The event, which took place at McLoone's Rum Runner in Sea Bright in September, opened with comments from Susan Dulczak, MSN, RN, PNP-C, CPON,

Pediatric Nurse Practitioner and Clinical Director of the Valerie Fund Children's Center. Bill Arnold, President and CEO of Monmouth Medical Center, Dina Long, Mayor of Sea Bright and current Valerie Fund Children's Center patient Orion Danielson, among others, also spoke at the event.

"Monmouth Medical Center is proud to work closely with our county mayors to benefit our communities, and we appreciate their support in helping us spread this important message," says Arnold. "And what's new as we celebrate this year is our partnership with Rutgers Cancer Institute of New Jersey. Not only do our Valerie Fund patients have access to the physicians of Rutgers Cancer Institute's Pediatric Hematology/Oncology Program, but as such they also have access to clinical trials available from the Children's Oncology Group, 'the world's largest research organization for the understanding and treatment of childhood cancer.'"

"Childhood cancer is the leading cause of death by disease for children under the age of 15," says Peter Cole, MD, Chief of Pediatric Hematology/Oncology at Rutgers Cancer Institute of New Jersey. "Thanks to ongoing clinical and basic research, the five-year survivorship rate for all cancers is now more than 80 percent. As New Jersey's only National Cancer Institute-designated Comprehensive Cancer Center, Rutgers Cancer Institute in partnership with the Valerie Fund Children's Center at Monmouth Medical Center is able to provide the most advanced treatment options, such as precision medicine, immunotherapy and clinical trials for children with cancer and blood disorders close to home."

The evening concluded with a moment of silence to remember those taken by childhood cancer, followed by a call to make some noise in honor of the charity and its commitment to raise awareness.

For more information about Make Some Noise: Cure Kids Cancer Foundation, visit [makenoise4kids.org](http://makenoise4kids.org). To learn more about pediatric services at The Unterberg Children's Hospital at Monmouth Medical Center, visit [rwjbh.org/uch](http://rwjbh.org/uch).

# PAYING TRIBUTE



1



2



3

1. Shown here with the bronze statue honoring longtime Monmouth Medical Center Board member General Harry Rockafeller are, from left: Greg Fromkin, who served on the Board of Trustees with General Rockafeller; MMC's Chief Operating Officer Eric Carney; MMC President and CEO Bill Arnold; and Wall Township Police Officer Michael Malone.

2. General Rockafeller's family members participated in the unveiling.

3. A vintage Army helicopter completed a military flyover as part of the dedication ceremony.

## HONORING A LEADER WHO PROUDLY SERVED THE HOSPITAL, THE COMMUNITY AND THE NATION.

Harry Rockafeller was many things to many people—husband, father, grandfather, friend, community advocate and, for nearly 30 years until his death in 2017 at the age of 100, a tireless trustee of Monmouth Medical Center (MMC). When Wall Township Police Officer Michael Malone visited Rockafeller at his home to follow up on a report of a suspicious vehicle in the area, Officer Malone learned of Rockafeller's most notable role: war hero.

Rockafeller was a two-star general who served under General Patton in the U.S. Army. "During World War II, General Rockafeller served in the 4th Armored Division and was recommended for the Distinguished Service Cross," says Officer Malone, who developed a special friendship with Rockafeller that endured over the last five years of the decorated veteran's life. "He was ultimately awarded a Silver Star with Two Oak Leaf Clusters, a Bronze Star with 'V' device,

Purple Heart, Combat Infantry Badge and several other unit citations during combat against Germany from 1944 to 1945."

After Rockafeller's passing, Officer Malone was inspired to organize the community to produce a memorial befitting his friend's accomplishments—a nine-foot bronze statue. Backed by the Wall Township Police Department and the Wall Police Benevolent Association Local 234, Officer Malone turned to MMC for additional support.

"I presented my idea to Monmouth Medical Center's President and CEO Bill Arnold prior to any fund-raising," recalls Officer Malone. "Mr. Arnold loved the idea and invited me to speak at the April meeting of the hospital trustees." Hospital leadership was delighted to help honor someone who had given so much to them, and donated \$50,000 to the Rockafeller Memorial Fund.

"During General Rockafeller's years of

service to our hospital," says Arnold, "he was extremely supportive of the Medical and Dental Staff in its efforts to keep the hospital on the cutting edge of the most sophisticated healthcare technologies and treatment approaches. It was our great privilege to celebrate, as a hospital community, the milestone of his 100th birthday on December 23, 2016, and we are tremendously honored to support this lasting tribute to his military service. He served as an inspiration to all of us and he is greatly missed."

The statue was unveiled on Veteran's Day, November 11, 2018, at the Wall Township Police Headquarters. It depicts then-Major Rockafeller in late December 1944, when his 4th Armored Division reached Bastogne, Belgium, and engaged in the Battle of the Bulge—the largest battle in the history of the U.S. Army and the turning point for World War II in Europe. "This portrayal will be a permanent reminder of the duty, honor and sacrifice of all of our World War II veterans," says Officer Malone, who notes that the memorial is designed to educate future generations who will never have the chance to meet a living World War II veteran, as Malone did.

For more information, including a video about General Rockafeller, visit [rockafellermemorial.com](http://rockafellermemorial.com).





# LUNG CANCER: MYTHS & FACTS

## WHO GETS LUNG CANCER AND HOW DOES IT DEVELOP? THE ANSWERS MAY SURPRISE YOU.

**Myth: ONLY CURRENT OR FORMER SMOKERS GET LUNG CANCER.**

**Fact:** While smoking is a major risk factor, many non-smokers also get lung cancer, often after prolonged exposure to radiation, radon, air pollution, asbestos or secondhand smoke. Certain genes also increase risk for some patients. “I’ve diagnosed many patients who have told me, ‘I’ve never smoked. How did I get lung cancer?’” says Andrew Nguyen, MD, thoracic surgeon with Monmouth Medical Center’s Comprehensive Lung Cancer Program and a member of Barnabas Health Medical Group.

**Myth: LUNG CANCER STARTS WITH SEVERE COUGHING AND HACKING.**

**Fact:** Early-stage lung cancer usually develops without symptoms. By the time coughing, wheezing, chest pain and weight loss manifest, the cancer can be advanced and more difficult to treat.

However, lung cancer treatment has

a better outcome if diagnosed early, and advances in screening technology—in particular, low-dose computed tomography (CT) imaging—have made early detection possible. “We can reduce the risk of death from lung cancer by 20 percent with low-dose CT scans for high-risk patients,” says Dr. Nguyen.

The Comprehensive Lung Cancer Program at Monmouth Medical Center (MMC) offers low-dose CT scans, which are recommended annually for persons aged 55 to 80 years who smoked one pack



ANDREW NGUYEN, MD



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

a day for 30 years and have quit within the past 15 years. Consult your primary care doctor to obtain a referral for a CT scan if you suspect you’re at risk, Dr. Nguyen advises.

**Myth: LUNG CANCER SURGERY IS INVASIVE AND DEBILITATING.**

**Fact:** Although open-chest surgery is still widely performed, many patients with lung cancer can be successfully treated with minimally invasive thoracic robotic surgery, which is offered at MMC’s Comprehensive Lung Cancer Program.

With robotic surgery, “arms” equipped with a camera and surgical instruments are inserted into the patient through small incisions. The surgeon manipulates the arms first to get a detailed 3-D image of the tumor, and then to remove it. Because incisions are minimal, patients recover more quickly.

The Comprehensive Lung Cancer Program specializes in the early detection, diagnosis and treatment of lung cancer. An expert team of physicians and nurses offers the full range of advanced diagnostic, treatment and rehabilitative services. The program’s supportive staff also provides patients both emotional comfort and practical assistance, such as helping patients navigate insurance-coverage issues.

To learn more about the Comprehensive Lung Cancer Program at Monmouth Medical Center, call **732.923.7966**.

# One of the nation's Top Teaching Hospitals

One of 53 hospitals to earn national  
distinction for quality and safety.



Monmouth Medical Center (MMC), a RWJBarnabas Health facility, has been named a Top Teaching Hospital by the Leapfrog Group, joining 53 elite hospitals across the nation with this distinction.

Monmouth Medical Center (MMC) also earned its eighth consecutive A grade from Leapfrog this fall for its extraordinary commitment to delivering safe, high-quality patient care.

**Monmouth  
Medical Center**

**RWJBarnabas  
HEALTH**

Let's be healthy together.

[rwjbh.org/monmouth](http://rwjbh.org/monmouth)





# Healthy Resolutions FOR 2019

## LOOKING BACK ON 2018, WHAT WERE YOUR RESOLUTIONS? HOW ARE YOU DOING SO FAR IN 2019?

It's never too late to start the journey to a healthier you. Set new goals or continue previous ones with help from Monmouth Medical Center—and let's be healthy together!

### ACHIEVE MY WEIGHT-LOSS GOAL

Have you considered weight-loss surgery? Find out if it is right for you at our next Center for Bariatric Surgery informational seminar. For details or to register, call 888.724.7123.

### LEARN MORE ABOUT MY GENETIC RISKS FOR CANCER

Some people have genetic factors that make them more likely to get certain forms of cancer. Our genetic counseling program pairs patients and families with a board-certified genetic counselor to learn more about possible risks. For more information, call 732.923.6513.



### IMPROVE MY SLEEP QUALITY

Going to bed earlier, cutting back on caffeine and minimizing late-night time on your phone, computer and tablet are great ways to help you sleep better. If you've taken steps to improve sleep quality but aren't seeing results, our experts in the Center for Sleep Disorders can help. Call 732.923.7660.

### HAVE BETTER CONTROL OF MY DIABETES

Managing diabetes means healthy food choices, exercise and routinely testing your blood sugar. Controlling diabetes can be complicated, but you're not alone. The Center for Diabetes Education offers self-management classes and support groups with new topics every month to help you manage your diabetes and enjoy life. To contact the Center for Diabetes Education, call 732.923.7550.

### IF YOU SMOKED, CONSIDER A LUNG CANCER SCREENING

Lung cancer often does not cause any symptoms until it has reached an advanced stage. Tobacco is associated with 87 percent of all cases of cancer of the lung, trachea and bronchus. When lung cancer is diagnosed at an early stage (Stage IA) and treated, the survival rate increases to more than 70 percent. The best way of increasing the chances of curing lung cancer is to find it early. To find out if you are a candidate for a free lung cancer screening, call 732.923.6564.

### TAKE STEPS TOWARD TAKING STEPS WITHOUT PAIN

Joint pain can have a massive impact on your mobility and quality of life, but there are solutions to help manage and treat the pain. Learn more about our Joint Replacement

Center by attending a new patient lecture. Call 888.724.7123 for a schedule.

### KEEP MYSELF HEALTHY

Wellness checkups are an important part of maintaining good health. Find physicians and schedule an appointment through our Physician Referral Service at 888.724.7123.

### HAVE A POSITIVE IMPACT ON MY COMMUNITY

Monmouth Medical Center is dedicated to the health and wellness of our community. Help us care for others—become a volunteer by calling 732.923.6670, or donate to the Monmouth Medical Center Foundation by visiting [monmouthgiving.org](http://monmouthgiving.org).



# A HEART-TO-HEART

**A CANDID CONVERSATION ABOUT HEART DISEASE IN WOMEN—WHAT YOU NEED TO KNOW.**

**H**ear disease is the leading cause of death for men in the United States, but did you know it's the leading cause of death for women, too? The reality is that 1 in 4 people of both genders dies from heart-related problems. But because heart attacks and cardiovascular disease have historically been considered a "man's problem," proper treatment, diagnosis and prevention in women is often overlooked.

In honor of National Heart Month in February, we spoke with Monmouth Medical Center cardiologist Julie Master, DO, a member of Barnabas Health Medical Group, about heart disease in women.

**From your experience, do you see any progress in changing beliefs and raising awareness about women and heart disease?**

**A.** I think it's been changing a bit, absolutely. We've seen the mortality rate for women dying of heart disease start to improve. Women were actually dying from heart disease more than men at one point, maybe 10 years ago, but now the prevalence is about equal.

What we're seeing now, regrettably, is that younger women's risk of dying from heart disease is rising and is now higher than for older women. This is because heart disease isn't being recognized or diagnosed in them. Also, because of the rising rates of obesity, hypertension, diabetes and metabolic syndrome, we're

starting to see heart disease developing earlier, especially in the African-American and Hispanic populations.

**Does heart disease present differently in women than in men?**

**A.** In terms of signs and symptoms, with women you don't usually have that sort of typical Hollywood grabbing-at-your-chest chest pain and crashing to the floor. Pain may go to the arms or abdomen, or there could be shortness of breath and more generalized fatigue instead.

**What about risk factors?**

**A.** What we're realizing right now is how important pregnancy complications are. Pregnancy complications, such as preterm labor, hypertension or diabetes, triples your risk of developing heart disease in the future, so it's important that women who've experienced such complications be monitored and evaluated. At Monmouth Medical Center, we have a program where the cardiologists and gynecologists are working together to pick this up early. Breast cancer is another risk factor unique to women. We've learned that



**JULIE MASTER, DO**

many of the treatments for breast cancer are cardiotoxic. At Monmouth Medical Center, our radiation oncologists use advanced techniques to minimize these side effects in women being treated for breast cancer. Also, a lot of rheumatologic and autoimmune diseases have been shown to increase risk for women.

**What are the most important steps women can take to reduce their risk of heart disease?**

**A.** Just getting a physical makes a huge difference. With women, often when they're in the hospital to deliver a baby, the pregnancy becomes a gateway to getting screened and evaluated for other conditions that may be present. It's important to get a handle on your numbers—blood pressure, cholesterol, blood sugar—and seek appropriate treatment to keep those numbers under control.

**What's the one thing you most wish women knew about heart disease?**

**A.** That 80 percent of heart-related deaths are preventable.

Your heart doesn't beat just for you. Get it checked. To learn more about the full range of cardiac services at Monmouth Medical Center or to schedule an appointment with one of New Jersey's top cardiac specialists, visit [rwjbh.org/heart](http://rwjbh.org/heart).



# STRENGTH THROUGH DIVERSITY

**BY CELEBRATING CULTURAL DIFFERENCES, MONMOUTH MEDICAL CENTER STAFFERS BECOME MORE SENSITIVE CAREGIVERS.**

As a system, RWJBarnabas Health has been on the path of identifying, reducing and eliminating health disparities among our diverse patients and communities. At Monmouth Medical Center (MMC), we understand that health is often shaped by factors such as language and cultural barriers, lack of access to preventive care and lack of health insurance. As a community-focused institution, we are committed to increasing access to high-quality healthcare for all of our area's diverse groups, according to Sylvia Jacobs, MMC's Director of Diversity and Inclusion.

At the same time, Jacobs says that employee-targeted educational and social events at MMC are increasing staff members' awareness of each other's cultural differences, which ultimately translates to a more culturally sensitive approach to patient care.

Nearly every MMC department, spearheaded by the hospital's Employee Business Resource Group and its Diversity and Inclusion Office, is contributing to the diversity awareness effort and creating educational programs for MMC staff, including:

**DIWALI CELEBRATION.** MMC staff celebrated India's "Festival of Lights" with a display of traditional South Asian fabrics, samples of Indian foods in the cafeteria and a presentation on the meaning behind Diwali.

**VETERANS' DAY BREAKFAST.** Staff members who served in the armed forces shared their service experiences with colleagues during an informal breakfast hosted by the Diversity and Inclusion Office with MMC's senior leadership in the employee cafeteria on November 12. Many who attended gained a greater understanding of the sacrifices veterans have made. "It was a very meaningful event for staff, and everyone in the room was really touched, including our CEO, Bill Arnold," Jacobs says.

**HISPANIC HERITAGE MONTH.** MMC hosted a panel discussion with MMC officers and community leaders that focused on overcoming language and other barriers to healthcare typically faced by Hispanic patients.



In partnership with Community Medical Center, RWJUH New Brunswick and RWJUH Somerset, staff members from MMC walked in Garden State Equality's annual Equality Walk in Asbury Park to show support for Central New Jersey's LGBTQ community.

**STORY TIME AT SCHOOL.** Organized by MMC's HR Director Gail Russell for Hispanic Heritage Month, MMC volunteers hosted a reading program at Gregory Elementary School in Long Branch, during which they read stories to children about notable Latin Americans.

**MEALS FOR THE HUNGRY.** Seven MMC volunteers assisted in the serving of meals to people from Long Branch neighborhoods during the community feeding event at St. James Episcopal Church.

**EQUALITY WALK.** To show support for Central New Jersey's LGBTQ community, MMC staff members walked in Garden State Equality's annual Equality Walk in Asbury Park. Lolita Jacob, NP, from MMC's DSRIP Program, walked with her family on behalf of MMC at the Equality Walk in Atlantic City.

**COMMUNITY SURVEY.** Under the direction of Director of Community Health Education Jean McKinney, MMC surveyed Long Branch and other area residents about their health needs. Surveys were distributed through local public schools, municipal and ethnic organizations, churches, senior citizen and housing offices, and many other local businesses, and were posted online in English, Spanish and Portuguese, in an effort to reduce language barriers. MMC staff also manned tables at community events to assist residents with the survey one-on-one to increase participation by a wide range of ethnic groups. "We wanted to broaden the engagement," McKinney says. "We wanted to hear everyone's voice."

To learn more about diversity and inclusion at Monmouth Medical Center, call **732.923.7687**.

# Your heart doesn't beat just for you.

**Get it checked.** It beats for your husband or wife, your children and grandchildren. It beats for your brothers and sisters, your friends and lovers. It beats for everyone who cares deeply about you. So please, get your heart checked. For them. For you. For more information and to make an appointment with one of New Jersey's top cardiologists, **visit [rwjbh.org/heart](http://rwjbh.org/heart)**.

**Monmouth**  
**Medical Center**

**RWJBarnabas**  
HEALTH

Let's be healthy together.

