Spring 2021

A Publication of **ROBERT WOOD JOHNSON UNIVERSITY HOSPITAL SOMERSET**

> GIVING UP SMOKING FOR GOOD

BOUNCING BACK AFTER JOINT REPLACEMENT

altogether

COMPREHENSIVE BREAST CANCER CARE

SAVE LIVES CHOOSE VACCINATION

Let's Beat COVID-19

he development of COVID-19 vaccines is one of the greatest achievements in medical science. At RWJBarnabas Health, we're proud to be a key part of the effort to get the vaccine into the arms of all eligible people in New Jersey.

We also remain committed to fighting the spread of the disease. That's why we join with the Centers for Disease Control and Prevention in urging everyone, whether vaccinated or not, to continue with the simple precautions we know are effective in preventing the spread of the coronavirus:

- Wear a mask.
- Stay at least six feet apart from people who don't live with you and avoid crowds.
- Wash your hands thoroughly and often; use a hand sanitizer if soap and water aren't available.

The reason for this continued caution: In some cases, COVID-19 vaccines may protect against severe infection, but may not necessarily prevent mild or asymptomatic infection. If this is the case, an infected person could still spread the virus.

At Robert Wood Johnson University Hospital Somerset, vaccines were administered to front-line staff and physicians beginning in mid-December. Our vaccine clinic opened to community members in January. We are extremely grateful to the physicians, nurses and staff members who volunteered their time to support our vaccine clinic as vaccinators, observers and registrars.

To help address questions about the COVID-19 vaccine, we held educational webinars for the community in English, Spanish, Hindi and Mandarin. We have also partnered with local businesses through the Downtown Somerville Alliance to encourage community members to get vaccinated.

It will take all of us working together as a community to minimize the ongoing effects of COVID-19. Together, we can protect friends, family and neighbors and end this pandemic.

Yours in good health,

BARRY H. OSTROWSKY PRESIDENT AND CHIEF EXECUTIVE OFFICER RWJBARNABAS HEALTH



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ANTHONY CAVA PRESIDENT AND CHIEF EXECUTIVE OFFICER ROBERT WOOD JOHNSON UNIVERSITY HOSPITAL SOMERSET



HEALTH NEWS

RECOGNITION FOR HIGH-QUALITY CANCER CARE

The American College of Surgeons' Commission on Cancer (CoC), a group that establishes standards to



A QUALITY PROGRAM of the AMERICAN COLLEGE OF SURGEONS

improve outcomes for cancer patients, has granted a threeyear accreditation to the Steeplechase Cancer Center at Robert Wood Johnson University Hospital (RWJUH) Somerset. To earn a voluntary CoC accreditation, a cancer program must meet 34 CoC quality care standards, be evaluated every three years through a survey process, and maintain excellence in patient care. The CoC Accreditation Program provides the framework for the Steeplechase Cancer Center's efforts to improve the quality of care. The Steeplechase Cancer Center offers various programs focusing on cancer prevention, early diagnosis, cancer staging, optimal treatment, rehabilitation, lifelong follow-up for recurrent disease and end-of-life care.

CoC facility patients receive information about clinical trials, new treatments and genetic counseling. They also have access to many services, including psychosocial support, a patient navigation process and a survivorship plan that documents the care each patient receives. The plan seeks to improve cancer survivors' quality of life.

AN ASSET TO THE COMMUNITY



From left: Tony Cava, President and CEO, Robert Wood Johnson University Hospital Somerset, and Chris Edwards, President and CEO, Somerset County Business Partnership RWJUH Somerset was presented with the Somerset County Business Partnership's 2020 Economic Vitality Award during the group's virtual annual meeting in December. The hospital was recognized for its impact on the county's economy as one of its largest employers. It was also recognized for its efforts to care for the community during the COVID-19 pandemic.

Robert Wood Johnson RWJBarnabas University Hospital Somerset

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VACCINATING NEW JERSEY

AS AVAILABILITY INCREASES, EXPERTS HAVE ONE STRONG MESSAGE FOR THE PUBLIC: GET THE SHOT.

t the outset, we knew we would be helping with the COVID-19 vaccination effort," says John Bonamo, MD, MS, Executive Vice President and Chief Medical and Quality Officer at RWJBarnabas Health (RWJBH). "But we weren't aware just how much the state would be relying on healthcare systems to make this happen."

Just as they did when the pandemic first hit, the experts at RWJBH rose to the challenge. "We opened our first vaccine clinic the week the vaccine came out in December," he recounts. "Then we opened clinics at each of our 11 acute care hospitals."

RWJBH is also administering the vaccine at the Middlesex County megasite in Edison, which it runs; the former Sears in the Livingston Mall; RWJBarnabas Health Arena in Toms River; Brookdale Community College in Monmouth



County; and smaller clinics, including in Bayonne and in the Greenville section of Jersey City. "We're also assisting municipal efforts in four counties—Ocean, Somerset, Essex and Monmouth— by providing some or all vaccinators for their clinics," Dr. Bonamo says, "and we're partnering with the state, the National Guard and others. In addition, we've applied for more vaccination sites for physician offices."

As of mid-March, RWJBH had already vaccinated approximately 150,500 people and was vaccinating more at the rate of 2,000 a day at its hospitals and 4,000 a day at the Edison megasite. However, Dr. Bonamo says that number will increase significantly as vaccine availability does. "We're ramping up," he says. "We're in this to get it done."

By summer, Dr. Bonamo says, vaccine supplies will make it available to all who want it. The challenge will shift to making sure everyone who's eligible chooses to be vaccinated.

DISPELLING FEARS

"Many people started out with 'vaccine hesitancy'—they wanted to see how other people did with the vaccine first," says Dr. Bonamo. "As they saw others feeling good about having had the vaccine, they became more open to it." That led to the clamor for vaccination appointments the state saw in the winter.

Vaccine hesitancy persists, however. "There's understandable mistrust, especially in the black community, born of all the social inequity and healthcare injustice that has happened over the years," he says. "We're working hard to dispel that with all kinds of outreach and town halls being done by healthcare professionals of color."

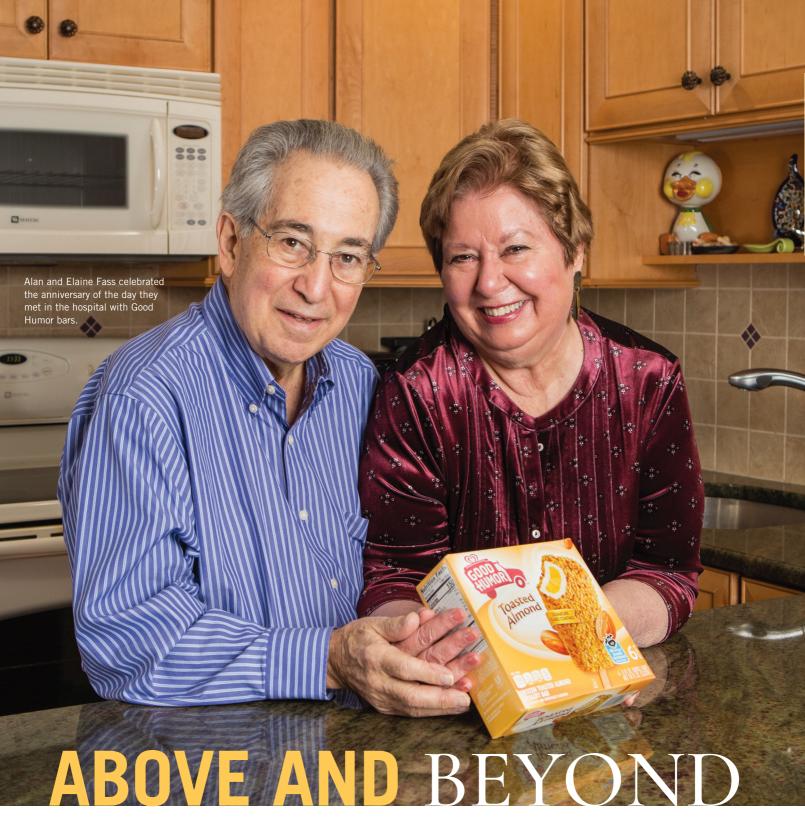
Older adults should prioritize getting the vaccine, Dr. Bonamo says. "The years they have are precious, and many seniors who got COVID-19 did not do well," he says. "Often, that's because they have at least one other comorbidity—diabetes, hypertension, heart disease, kidney disease, lung disease or obesity—that contributes to their risk."

Dr. Bonamo emphasizes that his message isn't just for certain groups, but for everybody who's eligible for the vaccine. "Get vaccinated," he says. "That's it. It's safe, it's smart, it's advanced science and it's the right thing to do to protect yourself and your family."

To learn more or to make a vaccination appointment, visit www.rwjbh.org/covid19.



JOHN BONAMO, MD



RWJUH SOMERSET STAFF MEMBERS GO TO GREAT LENGTHS TO KEEP PATIENTS AND THEIR FAMILIES HEALTHY AND HAPPY.

lan and Elaine Fass of Bridgewater, who have been married for 52 years, met at a college mixer on September 14, 1961. "That night, Alan bought me a Toasted Almond Good Humor bar from an ice cream truck," says Elaine, 76. Since then, they've celebrated the date every year with the frozen treat. In the fall of 2020, the grocery shortages associated with the pandemic left Elaine searching in vain for the couple's beloved ice cream bars. "I found a recipe on YouTube so we could make our own toasted almond bars," she says. She never got the chance to try, though: On the morning of September 13, Alan, 77, fell in the

"THE HOSPITAL'S STAFF MEMBERS HAD So much to do, and yet they still made this difficult day so special."

Alan and Elaine Fass

bathroom, hitting his head. Elaine took him to Robert Wood Johnson University Hospital (RWJUH) Somerset.

A POST-SURGERY SURPRISE

At the hospital, tests revealed that one of Alan's coronary arteries was mostly blocked. "Doctors believed the fall was part of a heart incident," says Elaine. He had angioplasty—a procedure in which narrowed or blocked blood vessels are opened—the next morning. A tube called a stent was inserted into Alan's blocked artery to keep it open.

Once visiting hours began, Elaine arrived at the hospital with a bag of chopped nuts and a plan to celebrate the couple's anniversary. "The day before, Alan had been given a chocolate Dixie cup [of ice cream] with his lunch," she says. "So, I asked the nurse if Alan could be served a vanilla Dixie cup with his lunch. I figured I would sprinkle the nuts on top, and that would be the closest we would get to a toasted almond bar."

What happened next amazed her. "The nurse left for a little while, and when she came back, she said, 'I looked all over and there's nothing I could find—will this do?' She had two real, honest-to-goodness Toasted Almond Good Humor bars! A lady in Food Services had managed to find them."

Alan and Elaine were delighted. "We were like two little children with our Toasted Almonds," says Elaine. After Alan was discharged, Elaine shared her appreciation for the staff's kindness in a letter to the hospital's CEO. "The hospital's staff members had so much to do, and yet they still made this difficult day so special," she says. "They took our hospital experience to the next level."

SUPPORTING PATIENTS DURING THE PANDEMIC

Words like those are music to the ears of Joanne Arico, Director of Patient Experience at RWJUH Somerset. "We've been through challenges before in healthcare, but the pandemic is something that we have never seen before, never even dreamed of," she says. "We've had to think outside the box and figure out how to best serve our patients and their families."

The hospital uses iPads to keep patients and family members connected when visitation is restricted. "Each one of our units has its own iPad that patients can use to chat with their families," says Arico. A second initiative is the hospital's nurse liaison program. "Our nurses communicate with staff members and physicians, and they keep families updated daily," says Arico.

It was a nurse liaison who orchestrated a touching moment at the hospital during the height of the pandemic's first wave. "The nurse became aware that a new mom who had COVID-19 had not seen her baby yet because the two were separated after the baby was born," says Arico. "So, we had a nurse in the maternity unit set up a FaceTime session with a nurse liaison in the nursery. The liaison held an iPad up to the baby so mom could see her. The mom was beaming from ear to ear. It was just beautiful."

Staff members have also helped connect the oldest patients with loved ones. In January, a 90-year-old patient who had COVID-19 was about to be discharged to a long-term care facility, and he hadn't seen his 85-yearold wife, who didn't have COVID-19, since early December. Hospital staff members set up a FaceTime session for the couple. When the man saw his wife, he said, "There's my honey bun."

EMS workers also go out of their way for patients. In February, four staff members were dispatched because a man was found lying in the snow without shoes on. After they brought him to the Emergency Department, they purchased warm socks, boots and a hat for him to wear when he was discharged.

In addition to addressing patients' physical needs, staff members ensure they are meeting patients' emotional needs. When employees discovered that a COVID-19 patient was spending his birthday alone in the hospital, they procured a cake for him. "They decorated it and threw a birthday party for him," says Arico.

Even in the most serious moments, the hospital strives to provide comfort for patients and their families. The hospital's former chaplain always had an iPad with her, says Arico. "She would participate in FaceTime sessions with COVID-19 patients and their families," says Arico. "She would offer prayers." It's a perfect example of how RWJUH Somerset has used technology—and the human touch—to go above and beyond for patients.

For more inspiring patient stories, visit www.rwjbh.org/somerset.



NO MORE ACHY JOINTS

HOW ONE COUPLE MADE COMPLETE RECOVERIES AFTER HIP AND KNEE REPLACEMENT SURGERY.

bout five years ago, Sandy Caliguire, 73, of North Plainfield began to notice pain and stiffness in her right knee. Before long, the same symptoms appeared in her left knee. Over time, the discomfort worsened—especially on the left side. Favorite pastimes such as gardening and cooking became ache-inducing chores. "I was in so much pain that there was no joy in anything," recalls Sandy, a retired high school English teacher.

Sandy discovered that she had arthritis in both knees. She tried conservative treatments, such as cortisone injections, but they had only fleeting benefits. Last summer, she decided to take action. On July 29, Sandy's left knee was replaced at Robert Wood Johnson University Hospital (RWJUH) Somerset. Her orthopedic surgeon was Edward Krisiloff, MD, the same doctor who performed Sandy's husband's hip replacement a year earlier.

Sandy experienced very little pain after the procedure. "I was achy for a few weeks, then I felt better," she **Left:** Sandy and Joe Caliguire with the Physical Therapy Department team, from left to right: Brendan Gallagher, PT, DPT, OCS, Deborah Fugaro and Mary Ann Hogerty.

recalls. Sandy was impressed by the precautions the hospital staff members took during the pandemic. She also appreciated the staff's attentiveness. A physical therapy aide, Vera Amin, went out of her way to check on her and her husband, Joe, after their surgeries. "She was always kind, considerate and helpful," says Sandy.

Like Joe, Sandy turned to RWJUH Somerset's Physical Therapy Services (PTS) to help her recover from the surgery. Both worked with Brendan Gallagher, PT, DPT, OCS. There was one major difference: Sandy had physical therapy three times a week for three months in the new facility, which was unveiled in early June.

A STATE-OF-THE-ART FACILITY

The new clinic features an airy, open floor plan, with occupational therapy located in the front and physical therapy in the rear. There's also a private room for patients who need specialized care, such as pelvic-floor therapy for incontinence or manual therapy for lymphedema (swelling that can occur due to cancer treatment). "We built this in a way that works best for the therapist and the patient," says Deborah Fugaro, Director of Rehabilitation Services at RWJUH Somerset.

The large space features a walking track and new equipment, including a Biodex Gait Trainer, a treadmill-like machine equipped with a harness and other features to help neurologically impaired patients—such as those with Parkinson's disease and those who are recovering from strokes—regain mobility.

COMPASSIONATE CARE

Joe credits physical therapy with his rapid recovery from hip-replacement surgery. "I was out cutting the grass



Sandy and Joe Caliguire attained above-average range of motion after they completed rehabilitation at RWJUH Somerset.

within three weeks of the operation," he says. "And now I can get in and out of the car without pain." He appreciated the way his therapist kept him informed about the progress he was making each week. "My therapist was compassionate and extremely communicative," says Joe.

Sandy also enjoyed coming to the hospital for physical therapy. "Mary Ann Hogerty, one of the secretaries, always greeted me with a cheery 'Hi, Sandy!' when I arrived," she recalls. Sandy was impressed by her therapist's attention to detail. "Before every session, he would assess the way I was walking," she recalls. "He always asked how I was feeling." Sandy also appreciated that her therapist explained why he was asking her to perform a particular stretch or exercise, and he never pushed her to the point of pain. "If I grimaced, he'd say, 'Okay, that's enough of that," she recalls, and her therapist would have her move on to another exercise. Through their hard work, both Sandy and Joe attained above-average range of motion with their new joints.

"I feel so much better," says Sandy, who completed physical therapy in November. Today, she no longer needs a stool by the stove for resting while she cooks and intends to steal lawn-mowing duty from Joe this spring. Later this year, she plans to have her right knee replaced at RWJUH Somerset.

REHABILITATION

RWJUH Somerset's Physical Therapy Department, located in the hospital, employs 15 physical therapists, all of whom have doctorate degrees. Several staff members have specialized certifications: one is an Orthopedic Clinical Specialist and two are certified to treat vestibular (balance) disorders. The therapists use the latest techniques and technology to treat adults who are coping with or recovering from a range of conditions, including chronic pain, sports injuries and strokes.

In addition to physical therapy services in the hospital, RWJUH Somerset has six other outpatient physical therapy centers in Central New Jersey. For more information, visit www.rwjbh.org/somerset.





A UROLOGIST EXPLAINS THE LATEST TREATMENTS FOR KIDNEY STONES AND CANCER.

idney-related health problems are, unfortunately, becoming more common. Kidney stones affect about 11 percent of men and 6 percent of women at least once in their lifetimes, according to the National Institute of Diabetes and Digestive and Kidney Diseases. In addition, about one in 46 men and one in 80 women develop kidney cancer, according to the American Cancer Society (ACS). No one knows why these problems are on the rise, but it may be partly because of increased detection on imaging tests like CT scans.

The kidneys are two bean-shaped organs that produce urine and hormones that control blood pressure, generate red blood cells and maintain bone strength. Nitin Patel, MD, a urologist at Robert Wood Johnson University Hospital (RWJUH) Somerset and RWJBarnabas Health Medical Group, explains the latest treatments for kidney stones and cancer.

How do you treat kidney stones?

Kidney stones are hard yellow or brown pieces of material that may pass through the urinary tract or get stuck, blocking the flow of urine and causing pain or bleeding. More than 90 percent of stones are small (less than 3 to 4 centimeters). I can remove

For more information on robotic surgery at RWJUH Somerset, visit **www.rwjbh.org/somerset**.

most of these endoscopically, in which I pass a thin, lighted tube with a video camera on the end through the urethra and bladder and break up or remove the stone. For stones that are less than 1 centimeter, I use a procedure called extracorporeal shock wave lithotripsy, in which sound waves break up stones so they can pass through your urine. If a stone is larger than 3 or 4 centimeters, I can remove it via robotic surgery.

How do you treat kidney cancer?

Kidney cancer is nearly twice as common in men as it is in women, according to the ACS. Risk factors include smoking, being overweight and having high blood pressure and a family history of kidney cancer. These tumors, which are usually smaller than 3 or 4 centimeters, tend to be found when a patient is having a CT scan for abdominal pain. Oftentimes, surgery is the only treatment that's needed. I remove the tumor, and the patient is cured.

How can robotic surgery benefit patients with kidney problems?

Robotic surgery can decrease the length of a hospital stay by more than 50 percent. The average hospital stay after open surgery is three to seven days, whereas the typical stay after robotic surgery is just one to two days. There's less blood loss and a lower chance of infection. Also, people can return to work within two weeks.

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RWJBarnabas Health and Robert Wood Johnson University Hospital Somerset, in partnership with Rutgers Cancer Institute of New Jersey—the state's only NCI-Designated Comprehensive Cancer Center—provide close-to-home access to the most advanced treatment options. Call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.



NITIN PATEL, MD

HEART RACING? IT COULD BE YOUR MEDICATION

BRIEF PERIODS OF INCREASED HEART RATE ARE COMMON AND HAVE A VARIETY OF CAUSES.

veryone experiences an increased heart rate at some point. You exercise, and your heart rate increases. You become frightened or stressed, and your heart beats faster. You might experience the increased heart rate as a skipped beat, a flutter or a pounding in your chest.

"A temporary increase in heart rate has many causes," says David Dobesh, MD, Chief of Cardiac Electrophysiology at Jersey City Medical Center and a member of RWJBarnabas Health Medical Group with offices in Jersey City and West Orange. "Emotional stress, physical stress, psychological stress, even things like caffeine, nicotine, too much alcohol or fever. Your body is performing a complex balancing act with your pulse."

DAVID DOBESH. MD

A lesser-known but common source of increased heart rate is medication, including some kinds of over-thecounter medicines and certain prescriptions. "People should be aware that some medicines do

briefly increase your heart rate," says Dr. Dobesh, "and usually those episodes are not something you should be concerned about."

POSSIBLE CAUSES

Common medications that may increase heart rate for a short period of time include:

• Decongestants, specifically those that contain pseudoephedrine, a stimulant. "If the decongestant has a capital 'D' at the end of its name, it contains this ingredient," says Dr. Dobesh.

• Some inhalers for asthma, emphysema or COPD (chronic obstructive pulmonary disease).

• Theophylline, an oral asthma medication.

• Medications for ADHD (attention deficit hyperactivity disorder).

• Diuretic medications (used to help prevent fluid retention) could result in dehydration, says Dr. Dobesh.

• Some blood pressure medications may inadvertently lower blood pressure too much.

"If your pressure is very low from either dehydration or overmedication, the body will respond by increasing the heart rate to compensate," he explains.

WHAT IS **TACHYCARDIA?**

For most people, a heart rate between 60 and 100 beats per minute (bpm) is normal. When your heart beats more than 100 bpm for reasons unrelated to physiological stress, that's known as tachycardia, from the Greek words for "swift" and "heart."

If increased heart rate is a concern, basic testing, such as an electrocardiogram or blood work, can be done to determine whether you should be referred to an electrophysiologist-a cardiologist who specializes in heart rhythms. The electrophysiologist will look for possible types of tachycardia that are caused by an abnormality of the heart itself and can affect how well the heart pumps blood.

Examples include atrial fibrillation (AFib), atrial flutter and supraventricular tachycardia (SVT). A wide range of treatments may be considered, including lifestyle changes, medications and medical and surgical procedures.

"Some medications carry warning labels about increased heart rate but in practice this side effect is unusual," Dr. Dobesh says. "These include certain antidepressants and also thyroid medications, which will not usually increase heart rate if they're taken at the recommended dose."

Similarly, herbal supplements such as ginseng, valerian root and orange bitters should not increase heart rate when taken in normal doses, he says.

While a short-term increase in heart rate from medication or emotional or physical stress is normal, increased heart rate that lasts for a long time is not. "If you're repeatedly feeling symptoms of a racing heartbeat that make you uncomfortable, tell your doctor," advises Dr. Dobesh. "Further testing may be appropriate."

Whoever your heart beats for, our hearts beat for you. To connect with one of NJ's top cardiovascular specialists, call 888.724.7123 or visit www.rwjbh.org/heart.

EXPECT OUTSTANDING CANCER CARE

THE NCI COMPREHENSIVE CANCER CENTER DESIGNATION CARRIES A WORLD OF MEANING FOR PATIENTS AND FAMILIES.

he National Cancer Institute (NCI) Comprehensive Cancer Center designation is the highest credential a U.S. cancer center can attain. But what does it mean for a patient?

"For a cancer patient, the question of where to be treated can be terribly confusing. The NCI designation tells a layperson that the institution is among the top centers in the country for delivering cancer care and performing research," says Steven K. Libutti, MD, Senior Vice President, Oncology Services, for RWJBarnabas Health (RWJBH) and Director, Rutgers Cancer Institute of New Jersey—the state's only NCI-Designated Comprehensive Cancer Center.



Though Rutgers Cancer Institute is located in New Brunswick, the beneficial effects of its research, clinical trials and advanced treatments are felt throughout New Jersey thanks to its

Comprehensive Cancer Center

National Cancer Institute

BADGE OF HONOR

A Comprehensive Cancer Center designation from the National Cancer Institute places an organization among the top tier of cancer institutions in the country. Rutgers Cancer Institute, together with RWJBarnabas Health, is the only Comprehensive Cancer Center in the state of New Jersey. unique partnership with RWJBH.

"The beauty of our partnership is that Rutgers Cancer Institute is fully integrated with each of the healthcare system's 11 hospitals," Dr. Libutti explains. "When a patient is being treated at any RWJBarnabas facility, he or she has an entryway to an NCI-Designated Comprehensive Cancer Center and will get the same level of care and access to advanced treatments and clinical trials."

PERSONALIZED CARE

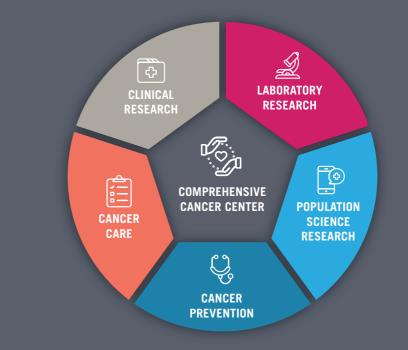
For all their mastery of technology and treatments, the healthcare providers at RWJBH and Rutgers Cancer Institute never lose sight of the human element. "Our whole goal is to provide personalized care not only for the type of cancer you have, but for you as a patient," says Dr. Libutti.

Nurse navigators "reduce the burden of diagnosis," he explains, by working with the patient throughout treatment, coordinating appointments and ensuring that specialists involved have the information they need. "We wrap the patient in a plan of care created just for him or her," Dr. Libutti says.

Patients who want to know more about their treatment options through RWJBH and Rutgers Cancer Institute can call the Oncology Access Center at 844.CANCERNJ (844.226.2376), where oncology specialists stand ready to help determine the next steps. "That number is our 'Easy Button,' our way to put you on the first step to a successful outcome," says Dr. Libutti. "We're only a phone call away."

ELEMENTS OF A COMPREHENSIVE CANCER CENTER

The designation requires the highest level of achievement in five areas:



THE DESIGNATION MADE A DIFFERENCE

These survivors are among many who have had the benefit of cutting-edge research, clinical trials and care through the RWJBarnabas Health and Rutgers Cancer Institute partnership.



A RARE T-CELL LYMPHOMA

Ling Jin needed treatment for a rare and aggressive form of T-cell lymphoma, requiring high-dose chemotherapy and radiation treatments in preparation for an allogeneic stem cell transplantation, sometimes referred to as a bone marrow transplant. As she underwent chemotherapy, a lymphoma was discovered behind her eye, which was resolved through brief and highly targeted proton beam therapy.

After an extensive database search, an appropriate donor for bone marrow cells was found, and last June, Ling had a successful stem cell transplant at Rutgers Cancer Institute.



BREAST CANCER WHILE PREGNANT

Breast cancer survivor Liz Tague found out she was pregnant—and soon after, learned that her breast cancer had recurred. After consulting with an oncologist in New York, Liz opted to have her treatment closer to home, guided by Rutgers Cancer Institute and RWJBarnabas Health.

Following a lumpectomy and chemotherapy, Liz gave birth to a healthy son. Now it was time to consider radiation therapy to prevent further recurrence. Her doctors proposed proton beam therapy, which can be precisely targeted to spare previously irradiated tissues. Three years later, Liz is back to work as a teacher and enjoying family time with her toddler.



STAGE 4 KIDNEY CANCER

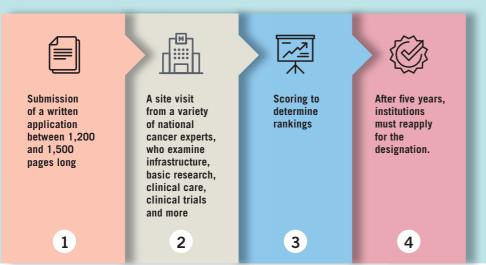
Jim Gritschke was fit and active, but weight loss and sharp pains in his right leg led him to an orthopedic surgeon. The diagnosis: a large tumor on his kidney from metastatic renal cell carcinoma, which had spread to his pelvis.

Jim required major robotic surgery to remove the kidney and tumor, followed by radiation and systemic therapy. He had the benefit of the latest technology and a multispecialty team at a high-volume center, as well as the opportunity to participate in a clinical trial for immunotherapy. Jim has now returned to his favorite activities.

"THE BEAUTY OF OUR PARTNERSHIP IS THAT RUTGERS CANCER INSTITUTE IS FULLY INTEGRATED WITH EACH OF THE HEALTHCARE SYSTEM'S 11 HOSPITALS." -Steven K. Libutti, MD

THE PATH TO A PRESTIGIOUS DESIGNATION

This year marks the 50th anniversary of the National Cancer Act, which established the NCI Cancer Centers program. Out of the thousands of U.S. facilities that have cancer programs, just 51 are NCI-Designated Comprehensive Cancer Centers. The NCI designation is a grant that brings significant dollars to the Rutgers Cancer Institute and has a positive economic impact on the state of New Jersey.





A PARTNERSHIP FOR PATIENTS

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



BRAIN ANEURYSMS: WHAT TO KNOW

bout one in 50 people in the U.S. has a brain aneurysm—a "balloon" of blood protruding from an artery. The majority of these will never burst or even require treatment.

For those whose aneurysms do burst, however—approximately 30,000 people each year—the consequences can be devastating, leading to brain damage, stroke or death.



ANIL NANDA, MD

"We want to raise awareness about aneurysms because some studies have shown that almost a quarter of people who have a ruptured aneurysm die because

of misdiagnosis," says neurosurgeon Anil Nanda, MD, MPH, Senior Vice President of Neurological Services for RWJBarnabas Health and Chairman, Department of Neurosurgery, for Rutgers-New Jersey Medical School and Robert Wood Johnson Medical School.

"We have seen an increase in ruptured aneurysms during the COVID-19 pandemic. This may be because people have been less active during this period, perhaps gaining weight or not controlling high blood pressure," he says.

People who may have warning signs of an aneurysm often neglect them, assuming they'll simply go away, he says. In addition, many people have avoided seeking care because of fear of going to a hospital during the pandemic.

"The classic symptom is a severe

BEING AWARE OF The symptoms Can keep you or a Loved one safe.

headache—one that feels like the worst headache of your life," Dr. Nanda explains. "Not every headache is an aneurysm, of course, and most of the time it's not anything serious. But if you have this terrible headache along with neck stiffness, and bright light bothers you, you should go to the Emergency Department to have it investigated."

ADVANCED TREATMENTS

Aneurysms can be diagnosed by a CT (computed tomography) scan, which uses X-rays to determine whether blood has leaked into the brain. Doctors may also order an MRI (magnetic resonance imaging), which uses computergenerated radio waves to create detailed images of the brain.

Other diagnostic tests include

a cerebral angiography, which is performed by passing a catheter (a long, flexible tube) from the groin artery to inject a small amount of contrast dye into the neck and brain arteries, and a cerebrospinal fluid analysis, which measures chemicals that indicate bleeding in the brain.

"If we do determine there is an aneurysm, whether it's ruptured or in danger of bursting, we look at the risk factors and determine the appropriate course of action. If surgery is indicated, we'll get our team together and perform it within 12 to 24 hours," says Dr. Nanda.

"For years, a procedure called clipping was the only way to fix an aneurysm," he explains. In this procedure, a craniotomy is performed to create an opening in the skull and then a small metal clip is placed on the aneurysm to stop the blood flow.

"Clipping is still the best solution for some cases," Dr. Nanda says. "Today, however, the mainstay of treatment is coiling. We can thread the catheter through a groin artery to place a coil on the aneurysm, and there is no need to open the skull."



TEAM OF EXPERTS

Decisions about treatment are made on a case-by-case basis. "We have a multidisciplinary team at RWJBarnabas Health and Rutgers," says Dr. Nanda. "We have neurologists, neurosurgeons, a neuropsychologist, a neuroradiology team and endovascular specialists, all providing input about what will be most effective for the patient. We're like a special forces team, able to come together quickly. The patient gets 10 experts for a problem immediately, which is a huge advantage." Nurse

WHAT IS A BRAIN ANEURYSM?

A cerebral (brain) aneurysm is a weak spot on a brain artery that balloons or bulges out and fills with blood. If it bursts, it spills blood into the surrounding tissue, an event that's called a hemorrhage. Brain cells, deprived of oxygen, begin to die, and the patient may have a stroke.

practitioners, neurology nurses and neurophysiology technologists round out the care team.

"Another benefit of being part of a large system is that we have the advantage of research, clinical trials and education," Dr. Nanda says. "We can do what we call translational research, meaning we take basic research that's being done on stroke and translate it into the clinical realm. It's a bench-to-bedside approach where we can really improve the condition of patients."



RISK FACTORS

- Uncontrolled blood pressure.
- Smoking.
- Family history of aneurysms.
- Older age.
- Head injury.
- Substance abuse, particularly cocaine.
- Heavy alcohol consumption.
- Conditions present at birth, including polycystic kidney disease and cerebral arteriovenous malformation, an abnormal connection between arteries and vessels in the brain.

POSSIBLE SIGNS

ANEURYSM If you experience these symptoms,

- call 911:
- Sudden, severe headache.
- Double vision.
- Nausea and vomiting.
- Stiff neck.
- Sensitivity to light.
- Seizures.
- Loss of consciousness, even if brief.
- Cardiac arrest.

POSSIBLE SIGNS OF AN UNRUPTURED ANEURYSM

If you experience any of the following, consult your doctor right away:

- Drooping eyelid.
- Dilated pupil in one eye.
- Pain above and behind the eye.
- Changes in vision or double vision.
- Confusion.
- Weakness and/or numbness on one side of the body.

For more information about neurosurgical services available at RWJBarnabas Health, visit www.rwjbh.org/neurosurgery.

WHY CHILDHOOD VACCINATIONS **CAN'T WA**

DON'T DELAY ROUTINE VACCINATIONS THAT WILL KEEP YOUR CHILD SAFE FROM PREVENTABLE DISEASES.

he rate of routine childhood vaccinations-for diseases like measles, mumps, pertussis and more-has declined significantly during the COVID-19 pandemic, and pediatricians are worried.

"This decrease in vaccinations is a huge concern to us," says Uzma Hasan, MD, Division Chief of Pediatric Infectious Diseases at Saint Barnabas Medical Center and a member of RWJBarnabas Health Medical Group.



UZMA HASAN, MD

PATRICIA WHITLEY-WILLIAMS. MD

"We don't want to experience a resurgence of vaccine-preventable illnesses that we have previously had very good control over. We don't want to see our patients develop life-threatening issues like encephalitis from measles or meningitis from Haemophilus influenzae type B, which are prevented by safe, routine childhood vaccinations."

"Parents have been hesitant to bring their children to doctors' offices or clinics for fear of exposing them to COVID-19," explains Patricia Whitley-Williams, MD, a pediatric infectious disease specialist at the Bristol-Myers Squibb Children's Hospital at Robert Wood Johnson University Hospital and Division Chief of Allergy, Immunology and Infectious Diseases at Rutgers-Robert Wood Johnson Medical School.

"However, these offices are following all the recommended guidelines from





the Centers for Disease Control and Prevention," Dr. Whitley-Williams says. "Offices are sanitized in between patient appointments, plastic barriers are up, patients and visitors are checked for fever and masks are worn." (For children, wearing a mask is recommended over the age of two years.)

"Pediatricians' offices have protocols in place to keep well children and sick children apart," adds Dr. Hasan. "Some set aside special time periods just for vaccinations. Many places require that people check in over the phone and wait outside in their cars. Patients and families then are brought straight into the office, so there's no exposure to other people in a waiting room."

Parents who have safety concerns should contact their pediatrician's office to ensure that proper safety measures are in place, the doctors advise.

FOLLOW THE SCHEDULE

Timing is important when it comes to childhood vaccinations, Dr. Hasan says. "Please don't put off having your child vaccinated because you think it's better to space the shots out," she says. "The schedule of vaccines has been carefully determined to minimize risk and get the best response for each age." The recommended schedule for routine childhood vaccinations can be found at www.cdc.gov/vaccines.

Expectant mothers should get the Tdap vaccine to protect the baby against pertussis, sometime between the 27th and 36th weeks of pregnancy, the CDC recommends. "That vaccine has been a game changer for protecting vulnerable newborns," Dr. Hasan says.

One vaccine many parents are eager to explore for their children is the one for COVID-19, Dr. Hasan says. "I can't tell you how many calls we get about that," she says. "We're eagerly awaiting the results of trials so we have safety data for the younger age groups, particularly for vulnerable populations such as those with kidney, heart or lung disease."

In the meantime, routine childhood vaccinations should proceed as advised by your pediatrician. "Parents and guardians should be assured that these vaccines have been proven to be safe and effective," says Dr. Whitley-Williams, "and they save lives."





Hard work at the Inpatient Chronic Pain Management Program enabled Olivia to compete in triathlons again.

A RACE AGAINST PAIN

A COMPETITIVE ATHLETE ACHIEVES HER DREAMS THANKS TO AN INNOVATIVE PAIN MANAGEMENT PROGRAM.

livia Christmann, 19, had been in pain for months when she came to Children's Specialized Hospital (CSH) in New Brunswick.

A competitive athlete, Olivia had been training for the Age Group Triathlon World Championships in August 2015 when she crashed her bike while riding at 27 miles per hour. The impact of the crash left Olivia suffering from a broken nose, a torn gluteus maximus and several strains in her legs.

Though her injuries healed with time, her pain continued and got progressively worse. Finally, Olivia was diagnosed with Complex Regional Pain Syndrome (CRPS), a form of chronic pain that develops after an injury but gets worse over time. While CRPS is not well understood, it's thought that high levels of nerve impulses are sent to the affected site.

Olivia tried several outpatient therapies, but her pain persisted, leaving



An RWJBarnabas Health facility

her unable to do most social or physical activities. Even walking to the car after a therapy session was an ordeal.

After researching other avenues for treatment, Olivia learned about the four-week Inpatient Chronic Pain Management Program at CSH.

"I was searching for a way to get my life back to normal," says Olivia. "During the initial evaluation, they asked me what my goals for the program were, and the first thing that I said was that I wanted to race again." She entered the program in January 2016.

WILL TO WIN

During her time at CSH, Olivia learned techniques for moving in a way that would help her manage the pain. Her natural competitiveness came out during timed activities like learning how to step in and out of a tub, or going for a walk outside. "I always strived to beat my time from the day before," she recalls. Swimming, aquatic therapy and group and individual psychotherapy helped her learn to desensitize herself to pain and function normally.

After four weeks, Olivia was feeling more in control of her CRPS—and ready to get back to her senior year of high school. By the end of that year, she had been accepted into a prestigious university and was back to competitive sports.

In 2019, nearly four years after her accident, Olivia competed in the Age Group Triathlon World Championships, the same competition she'd been training for when she crashed her bike.

Olivia recalls the moments before the competition began: "I remember thinking, 'I can't believe I'm actually here!' And that's when it all hit me: There's no way I would have been able to do it if it weren't for my time at Children's Specialized Hospital. The treatment I got there gave me the chance to live out my dreams."

For more information about Children's Specialized Hospital, call 888.244.5373 or visit www.rwjbh.org/childrensspecialized.

At Children's Specialized Hospital, we provide world-class care for children and young adults who face special health challenges across the state of New Jersey and beyond. We treat everything from chronic illnesses and complex physical disabilities, like brain and spinal cord injuries, to a full scope of developmental, behavioral and mental health concerns. We have convenient locations throughout the state: Bayonne, Clifton, East Brunswick, Egg Harbor Township, Hamilton, Jersey City, Mountainside, New Brunswick, Newark, Somerset, Toms River and Warren.



THERE'S NOTHING MINOR ABOUT THE PARTNERSHIP BETWEEN RWJBARNABAS HEALTH AND THE SOMERSET PATRIOTS.

hen two powerhouse organizations combine forces, the result is a big win for the community. Fans and friends of the Somerset Patriots not only get to see great baseball—the team was recently selected as a Double-A affiliate for the 27-time world champion New York Yankees—they also learn new ways to stay healthy.

"Baseball players work at their craft every day to be the best that they can be. Their exercise routines and nutritional habits are rooted in the principles of living healthy. Like our community, they rely on experts to help guide them along the way. That's why our partnership with RWJBarnabas Health is so important and works so well," says Steve Kalafer, Somerset Patriots Chairman Emeritus and RWJBarnabas Health (RWJBH) trustee.

Over the 22-year history of the partnership, RWJBH has hosted regular health fairs, blood drives and food drives, and has provided information on how community members can get access to key health services and screenings. Somerset Patriots players have benefited, too: RWJBH provides sports medicine services to keep players on the field of play.

For kids, the Somerset Patriots, in partnership with the health system, created the Hit a Home Run Program. Featuring former pitcher Nate Roe, the education program for schools (delivered virtually this school year) is designed to teach young children how to eat healthier, make smarter lifestyle choices, be a good teammate and friend and understand the importance of exercise.

FRIENDS IN NEED

The Somerset Patriots team has been a stalwart supporter of RWJBH. Last summer, the organization raised more than \$16,000 for the RWJBarnabas Health Emergency Response Fund to help support healthcare professionals as they served communities during the COVID-19 pandemic. The money was



At left, the Somerset Patriots and RWJBarnabas Health have recently enhanced their longtime partnership. Above, former pitcher Nate Roe delivers health information for area students (photo taken pre-pandemic).

raised in a variety of ways, including online auctions, merchandise sales of T-shirts and face masks, a pop-up shopping event and drive-in movies at TD Bank Ballpark.

"We are so grateful to the Somerset Patriots for their continued support of our hospital and our community throughout the COVID-19 pandemic, from donations of food for our staff to hosting blood drives and holding events to benefit our Emergency Response Fund," says Tony Cava, President and CEO of Robert Wood Johnson University Hospital Somerset, a pillar of healthcare throughout Central New Jersey. "Their ongoing support helps ensure that our community has access to the comprehensive healthcare services they need."

A SOURCE OF PRIDE

RWJBH employees, many of whom live locally, take great pride in the partnership, attending games and participating in group events. Players feel that spirit as well.

"We pride ourselves on being active in our community to help make a difference," says Somerset Patriots President and General Manager Patrick McVerry. "Our fans are always there for us at the ballpark and for all of our efforts. We know that through our partnership with RWJBarnabas Health, we are able to make sure our fans and community are always in good hands where their health is concerned."

To learn more about the Somerset Patriots and the RWJBH partnership, visit **www.milb.com/somerset** and **www.rwjbh.org/partnerships**. To donate to the RWJBH Emergency Response Fund, visit **www.rwjbh.org/giving**.

ESP. 1833 BILLING BILL

WHY ONE COUPLE DECIDED TO MAKE A GENEROUS DONATION TO RWJUH SOMERSET.

ast August, Mike McCarthy, 61, of Hillsborough became ill with a fever of around 103. He assumed he had COVID-19, so his wife, Nancy, took him to an urgent care clinic. It took six days to get the results, which were negative, and during that time, Mike became sicker. Nancy drove him back to the urgent care clinic, and tests showed he had pneumonia. The doctor advised that he go to the Emergency Department at Robert Wood Johnson University Hospital (RWJUH) Somerset.

Mike, who works in research and development for an information technology company, was admitted Mike McCarthy and Nancy Stober-McCarthy were pleased with the care Mike received at RWJUH Somerset when he was hospitalized last summer for double pneumonia.

and given intravenous fluids and an antibiotic. A pulmonologist and cardiologist examined him and recommended that he be moved to the Intermediate Care Unit, where blood work showed that the pneumonia was worsening. It turned out Mike had double pneumonia, so he received a breathing treatment—in which he inhaled a medication mixed with oxygen—every four hours. He was put on a BiPAP (bilateral positive airway pressure) machine for a night to help him breathe better. Mike also received a steroid treatment.

A RAPID RECOVERY

Toward the end of the week, Mike's condition had improved. "The nursing staff was fantastic," recalls Mike, who had never been hospitalized before. "They constantly checked on me, and they made sure I didn't fall when I stood up." After six days, Mike was discharged.

At home, Mike took several different medications, including a drug to regulate his heart rhythm, which had been thrown off by the pneumonia; and steroids, which were tapered each day. After about a week, he was able to return to work fulltime. "He was better than expected," recalls Nancy. "His lungs were clear, and his heart was strong."

Nancy and Mike were so grateful for the care he received at RWJUH Somerset that they donated \$10,000 to the hospital. "I believe in the competence of the staff," says Nancy. "They saved his life. Mike's stay in the Intermediate Care Unit resulted in a better outcome and a faster discharge. It also gave me hope that more could be done to help him get better in a shorter period of time. I wouldn't hesitate to recommend the hospital to other families."

For more information on how you can support Robert Wood Johnson University Hospital Somerset, call the Somerset Health Care Foundation at **908.685.2885**.



GOING THE EXTRA MILE

HOW ONE BREAST CANCER PATIENT BENEFITED FROM COMPREHENSIVE AND ATTENTIVE CARE AT THE STEEPLECHASE CANCER CENTER.

Breast cancer patient Judith Murray with her medical team. From left: Simona Schneider, APN; Judith; Lindsay Potdevin, MD; and Yolonda Sims, Office Coordinator. RWJBarnabas Health and the Steeplechase Cancer Center at Robert Wood Johnson University Hospital Somerset, in partnership with Rutgers Cancer Institute of New Jersey—the state's only NCI-Designated Comprehensive Cancer Center—provide close-to-home access to the most advanced treatment options. Call 844.CANCERNJ or visit www.rwjbh.org/beatcancer. hen Judith Murray, 78, of Sayreville learned she had breast cancer last year, she was grateful to discover that she could receive all of her care in one convenient place: the Steeplechase Cancer Center at Robert Wood Johnson University Hospital (RWJUH) Somerset. The Steeplechase Cancer Center offers the full spectrum of breast cancer care, from diagnosis to treatment. "I'm familiar with the hospital, so I didn't need anyone to come with me to my appointments," she says.

CONVENIENT CARE

After a routine mammogram turned up a suspicious finding in early 2020, Judith had a biopsy. She was diagnosed with the earliest stage of breast cancer, known as ductal carcinoma in situ, or DCIS, in her left breast. The cancer hadn't spread, so in March 2020, Judith had a lumpectomy at the Steeplechase Cancer Center. It was performed by Lindsay Potdevin, MD, a breast surgeon at the Steeplechase Cancer Center and Assistant Professor of Surgery at Rutgers Cancer Institute of New Jersey. Judith didn't need radiation or chemotherapy, but her medical oncologist advised that Judith take the estrogen-blocking pill anastrozole for five years to help prevent a recurrence.

Many patients enjoy the convenience of receiving all of their cancer care at the same hospital, says Dr. Potdevin. "It makes a big difference because they don't have to worry about where they need to go," she says. "I have found that once patients come here, they often say, 'You know what,



I live a little further away, but I'd rather just come to the Steeplechase Cancer Center because it's familiar and comfortable.' They like the



atmosphere, and they know that all of the physicians communicate well."

Indeed, the doctors at the Steeplechase Cancer Center collaborate on patient care. Every week, they have multidisciplinary conferences during which they discuss all new patients. The providers determine how best to treat each patient.

The Steeplechase Cancer Center also offers convenient services, such as the Sanofi US Wellness Boutique, which helps patients look and feel their best. The shop offers wigs, head scarves and hats, breast prostheses, cosmetics and more. "We try to facilitate all aspects of patients' care," says Dr. Potdevin. "I think they are appreciative."

ADDRESSING MEDICAL AND NUTRITIONAL NEEDS

Judith was surprised by how the hospital's staff members went out of their way to ensure her treatment went smoothly. Since she no longer drives much, the hospital sent a car to bring Judith to and from her appointments. When she was afraid to go to the grocery store last spring during the early months of the pandemic, the hospital stepped in to assist her.

"I live alone, and I was scared," she says. "I was afraid to go to the supermarket. So, when my surgeon's office called to see how I was doing and if I needed anything, I said, 'I'm a little short on food.'"

Nurse practitioner Simona Schneider sprang into action to arrange for food delivery to Judith's home. "It was incredible," says Judith. "I received all of the necessities—milk, fruit, butter and cheese."

Dr. Potdevin says she's happy her office was able to help Judith with her nutritional needs. "We hate to hear that our patients are having a tough time," she says. "So, we try to help any way we can."

Judith says her care has been so outstanding that she feels "at home" at the Steeplechase Cancer Center. "I love Dr. Potdevin and her staff," says Judith. "It's not easy having cancer, but it meant a lot to me that they were so caring."

For more information about breast cancer services at the Steeplechase Cancer Center at Robert Wood Johnson University Hospital Somerset, visit **www.rwjbh.org/beatcancer** or call **844.CANCERNJ** to schedule an appointment with a breast specialist.

GOODBYE, CIGARETTES

AN INNOVATIVE PROGRAM HELPED ONE WOMAN KICK HER SMOKING HABIT FOR GOOD. ast year, Tye Brown of Bound Brook had a habit of smoking whenever she drank. In the summer of 2020, she decided to have weight-loss (bariatric) surgery, and she discovered she had to quit smoking. "My doctors said it can interfere with the healing process," says Tye, 40. Her bariatric surgery team referred her to the Nicotine and Tobacco Recovery Program at the RWJBarnabas Health Institute for Prevention and Recovery (IFPR). The free program offers a comprehensive approach to quitting tobacco and nicotine, including counseling and an array of nicotine replacement products. Tye made an appointment

I DON'T THINK I COULD HAVE QUIT SMOKING WITHOUT THE HELP OF THE NICOTINE AND TOBACCO RECOVERY PROGRAM.

Tye Brown

says Kristopher Novak, MPA, NCTTP, CTTS-M, Assistant Director of the program. "We ask about their smoking history, how many cigarettes they smoke, what products they use and whether they would be willing to quit smoking within 30 days of entering the program. If they're ready to quit within 30 days, that means they're prepared."

Tye was given the choice of individual or group counseling. She chose individual counseling, but many participants opt for the camaraderie of group meetings. (Both group and individual counseling sessions are currently held via phone or Zoom sessions due to the pandemic.) "My counselor said she would call me every week for eight weeks," recalls Tye.

On average, people try to quit smoking five to seven times before they successfully kick the habit, according to the IFPR. Studies show that people are four times more likely to accomplish their goal when they participate in a structured program versus attempting to quit cold turkey.

STRATEGIES THAT WORK

One of Tye's first tasks was to establish a "quit date." Tye chose to stop smoking during the first week of counseling, which was roughly six weeks before her surgery. (Those who aren't ready by the second week typically choose to quit by the fourth.) Tye was given nicotine patches, lozenges and gum. "I had the whole arsenal," says Tye, who relied primarily on the gum. Though the products can be expensive, the program offered them for free.

During their 15-minute phone calls on Friday afternoons, Tye and her counselor explored a range of subjects related to smoking cessation, including her triggers, which were primarily "relationship issues and stress," she says. Other topics included weight management and strategies for reducing the temptation to smoke. "We talk about how to change your environment so you're less inclined to smoke," says Novak. "We encourage people to get rid of ashtrays and anything else that reminds them of smoking."

Tye was grateful for her counselor's tips. "Now, if I feel like smoking, I walk my dog instead, or I work out and punch the [punching] bag," she says. "I'm a musician, so I play piano as well." Tye also enjoys playing pool, and she recently took up meditation, which has proven effective in reducing her cigarette cravings.

SMOKE-FREE AT LAST

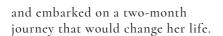
By the time she graduated from the program in June 2020, Tye had shunned cigarettes for seven weeks. "I got a certificate," she says proudly. "My counselor also gave me information on how to deal with relapses or situations in which you have the urge to smoke. She told me I can always call if I need help."

Since quitting, Tye has noticed an improvement in her asthma symptoms, and she has lost more than 100 pounds since her weight-loss surgery. Her advice for others considering the program? "Make sure you're mentally prepared," she says. "If you're doing it because someone told you to, it's not going to work. You have to change your mindset." But for those who are willing to commit, the program is a lifesaver, she says. "I don't think I could have quit without the help of the program."

For more information or a confidential assessment, call **833.795.QUIT** or visit **www.rwjbh.org/nicotinerecovery**.



Tye Brown plays pool when she feels the urge to light up.



PREPARING TO QUIT

Soon after Tye contacted the program, an intake specialist from the Quit Center called her for an initial screening. "During that first call, we assess the person's readiness to quit,"



Community Education

All webinars, health screenings and support groups are offered free of charge. To register or for more information, visit **www.rwjbh.org/events**. All events are offered in collaboration with Friends' Health Connection unless otherwise noted.

APRIL

Mouthing Off on Oral Cancer

During this webinar, learn about oral cancer, the various types, risk factors, signs and symptoms, causes, diagnostic tools, stages of cancer, treatments and prevention strategies. Mena Abrahim, DO, otolaryngologist

Thursday, April 1 12 to 12:30 p.m.

To register, visit www.rwjbh.org/events/event/?event=20476

Corona Consumption: The Use of Alcohol to Cope

During this webinar, discover the impact of the COVID-19 pandemic on mental health, the underlying reasons individuals consume alcohol, signs of overuse and the risks of substance abuse. Also, learn about treatment options, such as medication and therapy. Angela Cicchino, NCPRSS, Manager, Peer Recovery Program, RWJBarnabas Health Institute for Prevention and Recovery Ruth Palacio, MS, CASAC, Clinical Health Educator, RWJBarnabas Health Institute for Prevention and Recovery **Tuesday, April 13**

6:30 to 7:30 p.m.

To register, visit www.rwjbh.org/events/event/?event=20373

Kidney Culprits and COVID Complications

During this webinar, learn about the role of the kidneys in the body, risk factors for chronic kidney disease (CKD), causes, how COVID-19 affects the kidneys, signs of kidney problems in patients with COVID-19, diagnosis, treatment, actions individuals with CKD can take during the pandemic and prevention strategies. Sunit Kabaria, MD, nephrologist

Thursday, April 22

12 to 12:30 p.m. To register, visit www.rwjbh.org/events/event/?event=20374

Losing the COVID-19

In this webinar, understand the reasons individuals have gained weight during the pandemic, barriers to maintaining a healthy body mass index (BMI), socially distanced exercises that will shed unwanted pounds, healthy diets and snacks recommended during quarantine, recommended daily caloric intake and common comfort foods to avoid.

Jatirah "JT" Diggs, MS, ATC, athletic trainer Tia Hagins, RD, community nutritionist **Tuesday, April 27 1 to 2 p.m.**

To register, visit www.rwjbh.org/events/event/?event=20375

MAY

Nutrition Dialogue with America's Grow-A-Row

During this webinar, learn how local, freshly harvested foods can boost your health and reduce your risk of cancer. Includes healthy recipe demonstrations. Evelyn Fuertes, NDTR, Rutgers Cancer Institute of New Jersey Michelle Jansen, MS, MAT, Rutgers Cancer Institute of New Jersey

Shauna Alvarez, Chef, America's Grow-A-Row

Tuesday, May 4 2 to 3:30 p.m.

To register, visit www.rwjbh.org/~/ events/event/?event=20392 Offered in collaboration with Rutgers Cancer Institute of New Jersey and America's Grow-A-Row

COVID-19 Strokes: A Dual Connection

Discover the connection between stroke and COVID-19; risk factors for each; causes, signs and symptoms; types of stroke; diagnostic tools, including the role of telemedicine; treatment options and prevention strategies. Srinivasa Potluri, MD, neurologist Laura A. Smith, BSN, RN, CNRN, Neuroscience Program Manager

Thursday, May 6

12 to 12:30 p.m. To register, visit www.rwjbh.org/ events/event/?event=20376

Post-Acute COVID Syndrome (PACS): It PACS a Punch!

During this webinar, discover post-acute COVID syndrome (PACS), who experiences this condition, the signs and symptoms, the short- and longterm side effects of COVID-19, the impact to the respiratory system, variables affecting recovery and recommended treatments.

Stephen Mahler, BS, RRT, Director of Respiratory Care and Sleep Services

Wednesday, May 12 12 to 1 p.m.

To register, visit www.rwjbh.org/ events/event/?event=20377

Holy Moley...Could It Be Skin Cancer?

Understand the difference between skin cancer and moles, the different types of skin cancer, classifications of moles, how to determine a normal versus abnormal mole, risk factors, symptoms, diagnostic tools and available treatments. Smita Agarwal, MD, dermatologist **Thursday, May 27**

6 to 7 p.m.

To register, visit www.rwjbh.org/ events/event/?event=20378



JUNE

Youth Mental Health First Aid Training

Children face many stressors, including bullying and peer pressure to vape or consume other substances. Discover how you can help your children or youth who are experiencing challenges or addictions by learning about typical adolescent development. You'll receive a five-step action plan on how to help young people in both crisis and non-crisis situations. Topics covered include anxiety, depression, substance use, disorders in which psychosis may occur, disruptive behavior disorders (including ADHD) and eating disorders. This includes a two-hour online course to be completed by May 26 and an instructorled portion, which will be hosted on Zoom on June 2.

Katie Hoben, Certified Youth Mental Health First Aid instructor

Aarti Patel, MPH, Certified Youth Mental Health First Aid instructor **Wednesday, June 2**

9 a.m. to 2 p.m.

To register, visit www.rwjbh.org/events/ event/?event=20379 Registration closes on May 10 Offered in collaboration with EmPoWER Somerset

Is COVID-19 Giving You a Splitting Headache?

Discover the various types of headaches, the difference between headaches and migraines, common causes, the significance of location, risk factors, diagnosis and treatments.

Srinivasa Potluri, MD, neurologist Laura A. Smith, BSN, RN, CNRN, Neuroscience Program Manager **Tuesday, June 15**

12 to 1 p.m.

To register, visit www.rwjbh.org/events/ event/?event=20380

Adult Mental Health First Aid Training

First Aid Training Mental Health First Aid teaches you how to identify, understand and respond to signs of mental illness and substance use disorders in adults ages 18 and older. This training gives you the skills you need to provide initial support to someone who may be developing a mental health or substance use problem and connect them to the appropriate care. It also offers a five-step action plan on how to help people in both crisis and non-crisis situations. This includes a two-hour online course to be completed by June 21 as well as an instructor-led portion, which will be hosted on Zoom on June 23. Radhika Patel, MPH, Certified Mental Health First Aid instructor

Joshua Wolf, Certified Mental Health First Aid instructor

Wednesday, June 23 9 a.m. to 4 p.m.

To register, visit www.rwjbh.org/events/ event/?event=20381 Registration closes on June 1 Offered in collaboration with EmPoWER Somerset

COMMUNITY HEALTH SCREENINGS

Stroke Risk Screening

Includes blood pressure, total cholesterol/ HDL, glucose, carotid artery, heart rate checks and counseling, if needed. Fasting is not required.

Saturday, May 1 9 to 11 a.m. Steeplechase Cancer Center, 1st Floor Conference Room Tuesday, May 11 1 to 4 p.m. Steeplechase Cancer Center, 1st Floor Conference Room Call 908.685.2814 for an appointment.

SUPPORT GROUPS

Eating Disorders: Family Support

This is a parent-facilitated discussion. Every Tuesday 7:30 to 8:30 p.m. https://global.gotomeeting.com/join/501486981

https://global.gotomeeting.com/join/501486981 You can also dial in using your phone. United States: +1 (408) 650-3123 Access Code: 501-486-981

Eating Disorders: Patient Support

This is a staff-facilitated discussion open to anyone suffering with an eating disorder. Every Tuesday 7:30 to 8:30 p.m.

https://global.gotomeeting.com/join/355332573 You can also dial in using your phone. United States: +1 (571) 317-3122 Access Code: 355-332-573

Living Well with Diabetes Support Group

"Ask the Diabetes Educator" Welda Joseph, APN, and Amy Walsh, MS, RD, CDE Tuesday, May 11

6 to 6:30 p.m. https://global.gotomeeting.com/join/597623981

Skin Cancer Screening

For those who have not seen a dermatologist in the last two years and have not been diagnosed with skin cancer.

Smita Agarwal, MD, dermatologist Saturday, June 12 9 to 11 a.m. Somerset Family Practice Call 908.685.2814 for an

appointment.



You can also dial in using your phone. United States: +1 (571) 317-3122 Access Code: 597-623-981

Stroke Support Group

Thursdays: April 1, May 6 and June 3 2 to 3 p.m.

https://global.gotomeeting.com/join/563630877 You can also dial in using your phone. United States: +1 (408) 650-3123 Access Code: 563-630-877

Better Breather's Club

Promotes the management of COPD and other chronic lung diseases (such as asthma, pulmonary fibrosis and lung cancer); offers a sense of belonging and hope; and aims to improve quality of life. **Thursdays: April 8, May 13 and June 10** 10:20 a m

10:30 to 11:30 a.m.

https://global.gotomeeting.com/join/742429301 You can also dial in using your phone. United States: +1 (646) 749-3122 Access Code: 742-429-301



BARIATRIC PROGRAMS

Weight-Loss Surgery Seminar

Have you been unsuccessful at keeping the weight off? Weightloss surgery may be the right choice for you. But how do you know if you qualify and which procedure is your best option? Join bariatric surgeons at Robert Wood Johnson University Hospital Somerset for free seminars to learn about your weight-loss surgery options, including detailed information about gastric banding, gastric sleeve and gastric bypass. Tuesday, May 18 (Ajay Goyal, MD) 6:30 to 8 p.m. To register, visit www.rwjbh.org/events/event/?event=20387

Thursday, April 15 (David Ward, MD) 6:30 to 8 p.m. To register, visit www.rwjbh.org/events/event/?event=20384

Thursday, June 17 (David Ward, MD) 6:30 to 8 p.m. To register, visit www.rwjbh.org/events/event/?event=20386

Robert Wood Johnson RWJBarnabas University Hospital Somerset

110 Rehill Avenue, Somerville, NJ 08876

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Whoever your heart beats for, our hearts beat for you.

Comprehensive care and patient comfort.

Robert Wood Johnson University Hospital Somerset has a passion for heart health. Among our many services is one of the highest volume elective angioplasty programs in New Jersey. Our state-of-the-art facilities include private rooms and newly renovated cardiac treatment and recovery areas. We also offer cardiac rehabilitation, prevention and wellness programs through the RWJBarnabas Health network of heart centers. And a partnership with Rutgers Health guides our research and innovation. It's all part of our dedication to every heart in our community. Learn more at rwjbh.org/heart

Robert Wood Johnson University Hospital Somerset



Let's be healthy together.

We've taken every precaution to keep you safe. So if you've put off any medical care due to COVID-19, please don't delay it any longer.