‘WEIGHT LOSS SURGERY CHANGED MY LIFE’

GOLFING WITHOUT KNEE PAIN

6 QUICK TIPS TO LOWER BLOOD SUGAR

HEALING HEARTS: IT TAKES A TEAM
MESSAGES FROM LEADERSHIP

“The newly opened RWJBarnabas Health Field of Dreams in Toms River, a recreational complex for people of all ages and abilities, is emblematic of our mission: to help the people who live in our communities feel healthier and enjoy their lives to the fullest.”

BARRY H. OSTROWSKY | Chief Executive Officer, RWJBarnabas Health

“I am deeply moved by the commitment my outstanding RWJBarnabas Health colleagues have to our mission and to serving everyone in our communities with inclusiveness for all, regardless of race, age, gender, background and ability.”

MARK E. MANIGAN | President, RWJBarnabas Health

“We are unwavering in our commitment to providing every patient who walks through the doors of Clara Maass Medical Center with compassionate, world-class care. Creating an equitable patient experience is top of mind and practice for our entire healthcare staff.”

MARY ELLEN CLYNE, PhD | President and Chief Executive Officer, Clara Maass Medical Center

HEALTH NEWS

A LEADER IN HEALTHCARE EQUALITY
Clara Maass Medical Center (CMMC) has again been recognized as a Leader in LGBTQ+ Healthcare Equality by the Human Rights Campaign Foundation, the educational arm of America’s largest civil rights organization working to achieve equality for lesbian, gay, bisexual, transgender and queer people.

HEALTHCARE AND SECOND CHANCES
A novel partnership supported by CMMC, RWJBarnabas Health Medical Group and New Jersey Reentry Corporation (NJRC) is now providing NJRC clients with medical assessments that enable them to obtain healthcare. It’s the first program of its kind in New Jersey and one of the first nationally.

NJRC is a nonprofit agency with a mission to remove all barriers to employment for citizens returning from incarceration. Clients will receive their health assessments from a nurse practitioner at the new Francine A. LeFrak Wellness Center at the Governor’s Reentry Training and Employment Center in Kearny. Based on their assessed health needs, clients then are referred to a primary care physician or specialist close to where they live. A medical assistant will help with scheduling medical appointments and will work with NJRC social workers to ensure that clients receive a continuum of care.

“I am delighted that Clara Maass Medical Center is able to support NJRC clients to have access to world-class healthcare services,” says Mary Ellen Clyne, PhD, President and CEO of CMMC.
2. WELCOME LETTER.
A community update from our CEOs.

4. HOW WEIGHT LOSS SURGERY CHANGES LIVES.
Six patients share their transformation.

6. KICKING OFF HEALTHY HABITS.
A small-sided field brings soccer to local youth.

9. HEALING HEARTS.
A team approach to coronary artery disease.

10. NEW WAYS TO TREAT SKIN CANCER.
Advanced treatment options, clinical trials and greater access to expert care.

12. A PLACE WHERE EVERYONE CAN PLAY.
The RWJBarnabas Health Field of Dreams is open to kids of all abilities.

14. RETHINKING WORK.
What to ask yourself before you retire.

16. THE VIRTUAL CLUBHOUSE.
How Opportunity Project innovates to help adults recover from brain injury.

17. CLEARING CLOGGED ARTERIES.
An advanced, minimally invasive procedure.

18. BACK IN THE SWING.
Golfing without pain after a knee replacement.

20. SKIN CANCER CARE, CLOSE TO HOME.
A new program brings top experts together.

22. EATING TO BEAT DIABETES.
Six tips for lower blood sugar.

23. THE BEST OF ALL BIRTHING WORLDS.
OB/GYNs and midwives team up.
SIX BARIATRIC SURGERY PATIENTS SHARE THEIR TRANSFORMATION.

“I hope I will have a longer life now that I’m super-healthy.”

Ingrid Rivas, 40
Jersey City
Mom of twin daughters, 4, and a son, 5
Date of surgery: May 28, 2021
Pounds lost: 82
Biggest benefit: “I feel great, I have a lot of energy. I was a size 2XL, then an XL, then medium and now I’m wearing a small.”

Lifestyle change: This native of Costa Rica works out on home equipment as often as possible and follows a healthy diet with smaller portions. “My kids and my husband are my all,” she says, “and I hope I will have a longer life now that I’m super-healthy thanks to this surgery. I want to live to 100!”

“I don’t even miss sweets and junk food.”

Barbara Mesce, 59,
Bloomfield
Former crossing guard
Date of surgery: April 11, 2018
Pounds lost: 100
Biggest benefit: “I feel excellent being 100 pounds lighter—and people who haven’t seen me in a while do a double take.”

Lifestyle change: She is maintaining a weight of 150 to 155 pounds and keeping up with her two grandchildren. “I drink a lot of water, I get my protein in,” she says. “I eat a lot of fruit, bananas, grapes, oranges, a lot of vegetables. Sweets and junk food were my weakness, but I don’t even miss them anymore.”

To learn more about weight loss surgery at Clara Maass Medical Center, visit www.rwjbh.org/weightloss.
“I feel like I’m 25 again.”

Mary Hyatt, 37, Staten Island
Healthcare worker, Clara Maass Medical Center
Date of surgery: August 9, 2021
Pounds lost: 90
Biggest benefit: “No more high blood pressure, no more prediabetes.” Her polycystic ovary syndrome condition, which made it harder to lose weight, is better managed now after bariatric surgery helped her break a pattern of frustratingly unproductive workouts.
Lifestyle change: “I feel like I’m 25 again,” says Hyatt, who is now in supervised training to accomplish a feat on her bucket list: run in the New York City Marathon. “I just wish I had done this years ago. This has helped me in a lot of areas in my life.”

“I like buying clothes now.”

Luciano Neves Moretti, 38, Blackwood
Translator, New Jersey Department of Health
Date of surgery: April 26, 2021
Pounds lost: 77
Biggest benefit: “I feel amazing. I can do so much more now, so many things, like working outside in the yard. I was getting out of breath just walking up the stairs. That’s when I knew I had to do something about my weight.”
Lifestyle change: “Everything changed. I like buying clothes now. I like my body. I exercise twice a week. I like working on my house and in my garden, and there’s a lot to do here.”

“AFTER
BEFORE
“Now, I’m at my full potential.”

Elaine Lyman, 44, Jersey City
Mother of two teen daughters
Date of surgery: January 12, 2021
Pounds lost: 108
Biggest benefit: “For years, I was ashamed to even go to parent-teacher conferences or other school events because I felt somewhat embarrassed for my kids. I was the fat mom. “I started out in size 20 jeans and a 3X shirt. Now, I’m a size 8 and a medium shirt. I feel incredible. I have so much energy. Now I’m at my full potential.”
Lifestyle change: “I love to walk, 30 minutes at least every other day. Where I live there are a lot of hills I use to build up muscles and a good sweat. I do squats at random during the day. I dance around the house while cleaning up.”

“I can play football with my sons.”

Lawanda Davis, 44, Newark
Assembly team worker and mother of four boys
Date of surgery: June 11, 2021
Pounds lost: 97
Biggest benefit: “I feel so much healthier. I feel amazing. I can play football with my sons. That’s what they love—just having fun outdoors—and I love to do it with them.”
Lifestyle change: “I became overweight over time through bad eating habits. I didn’t know my limits. Now, after surgery, I can’t eat as much. I control my portions and try to make healthy choices. It’s been almost a year now, and as the days go by, it gets easier. I got a gym membership, and I’m looking forward to going back and toning up.”
A SMALL-SIDED FIELD BRINGS SOCCER TO LOCAL YOUTH.
The PDA Urban Initiative, a collaboration between RWJBarnabas Health and the Players Development Academy (PDA), is bringing the beautiful game of soccer to children in underserved urban communities across New Jersey.

This past November, Clara Maass Medical Center Community Field, located at Planseson Playground on Stephens Street in Belleville, was the fifth turf soccer field in the state to open as part of the program. Sixth-grade students from Belleville public schools participated in the grand opening celebration and ceremonial first kick, officially opening the 40 x 70-foot small-sided turf soccer field.

**SOCCER FOR ALL**

Exercise is a crucial component to living healthy lifestyles and has been proven to improve mental and physical health. Clara Maass Medical Center Community Field offers a new and exciting space to promote healthy habits.

“As social determinants impact the health and vitality of urban communities, building a small-sided turf soccer field in the Township of Belleville underpins our commitment to create healthier communities,” says Mary Ellen Clyne, PhD, President and Chief Executive Officer, Clara Maass Medical Center. “Clara Maass Medical Center Community Field offers a platform to keep children in the community active, while promoting physical and mental health and keeping them away from potential distractions.”

At the opening, Gerry McKeown, PDA Boys Coaching Director; Santi Formoso, former New York Cosmos, U.S. National Team and Kearny High School player; and Michael Melham, Mayor of Belleville, also discussed the importance of the project and the opportunities the new turf soccer field offers for children in the Belleville community.

The PDA Urban Initiative is committed to providing premier turf soccer facilities, coaching and playing opportunities for children and families living in underserved urban communities. By offering greater access to the game, the project creators hope to change the landscape of soccer in the U.S. by creating greater socioeconomic diversity on the field.

To learn more about RWJBarnabas Health Social Impact initiatives, visit [www.rwjbh.org/socialimpact](http://www.rwjbh.org/socialimpact). To learn more about services available at Clara Maass Medical Center, visit [www.rwjbh.org/claramaass](http://www.rwjbh.org/claramaass).
With a single sentence, you can impact the future of health care.

By adding as little as one sentence to your will, you can impact the future of Clara Maass Medical Center. Designating the medical center as a partial beneficiary of your estate will help ensure that the next generation has access to extraordinary care, right in their local community.

For simple bequest language or further information, please contact Greg Ellmer at 973-322-4302 or Gregory.Ellmer@rwjbh.org. Information is also available online by visiting claragiving.org.
Coronary artery disease (CAD)—when major arteries to the heart are damaged and blood flow is partially or totally blocked—is the most common type of heart disease in the U.S.

However, new technology, along with a team-based approach to treatment, have greatly improved patient outcomes, says interventional cardiologist Bruce Haik, MD, Chief of the Division of Cardiology and Director of the Cardiac Catheterization Lab at Cooperman Barnabas Medical Center (CBMC), who is also a member of RWJBarnabas Health Medical Group.

“Treating CAD sometimes involves a complex decision tree requiring a Heart Team consultation,” says Dr. Haik. “When a patient and family have input from cardiac specialists with a wide array of expertise, they can feel confident in making a decision about treatment.”

MEMBERS OF THE TEAM

CAD can be diagnosed in a variety of ways, including cardiac stress tests, which show how the heart works during physical activity; a coronary CT scan, a specialized, ultra-fast imaging test that can provide a calcium score and also provide noninvasive information about the arteries; and an angiogram, an X-ray that can accurately detect blockages. These tests are often ordered by a cardiologist, a doctor trained in finding, treating and preventing cardiac disease.

The noninvasive cardiologist may refer the patient to an interventional cardiologist. “This is a specialist in the nonsurgical opening of arteries,” says Dr. Haik. A procedure done by an interventional cardiologist is angioplasty, also known as percutaneous coronary intervention (PCI). In this procedure, a soft, flexible guide wire and various balloon catheters and devices are inserted into a narrowed blood vessel in order to open the artery with stents. The process is sometimes aided by imaging from within the blood vessel utilizing specialized imaging systems.

The interventional cardiologist will consult with a cardiac surgeon, whose specialty is open heart surgery, in which an incision is made in the chest in order to perform coronary artery bypass graft surgery, sometimes combined with valve repair or replacement.

Both of those doctors will rely on the information provided by a cardiac imaging specialist, who uses sophisticated technology to provide detailed images of a heart’s chambers, valves, walls and blood vessels. “It’s important to know the severity, location and extent of the narrowing, but also to understand whether the blockage is rigid and calcified, or is more consistent with soft plaque,” says Dr. Haik.

MAKING THE CALL

The Heart Team approaches each patient’s individual treatment plan by considering many clinical factors, including age, frailty and coexisting medical conditions like diabetes in order to achieve the best possible outcomes.

“The cardiology field has evolved so that we now have many effective ways of treating CAD and related conditions,” says Dr. Haik. “For example, the Shockwave balloon utilizes ultrasound waves to break up calcified plaque before placing a stent, allowing for more complete expansion.

“All of these options are weighed along with the particular patient’s risk profile,” he explains. “A major benefit of the Heart Team process is that sometimes a hybrid approach using both catheter-based procedures and surgery turns out to be the safest and most effective means of treatment.”
OUR PATIENTS HAVE THE BENEFIT OF ADVANCED TREATMENT OPTIONS, CLINICAL TRIALS AND GREATER ACCESS TO EXPERT CARE.

“Over the years, there’s been a revolution in the way we treat skin cancers, especially melanoma,” says Sarah Weiss, MD, Director, Melanoma/Cutaneous Oncology Program at Rutgers Cancer Institute of New Jersey, the state’s only NCI-Designated Comprehensive Cancer Center. “The important thing to know is that with skin cancer, even if it’s advanced, there are now a number of potentially effective therapies available.”

“A diagnosis of skin cancer can be scary,” says Adam Berger, MD, FACS, Chief, Melanoma and Soft Tissue Surgical Oncology at Rutgers Cancer Institute, “but when you’re treated by a multidisciplinary team, the chances of a good outcome are excellent.”
ADVANCED TREATMENTS
Although melanoma accounts for only 1 percent of skin cancers, it causes the majority of skin cancer deaths. “Physicians at Rutgers Cancer Institute and RWJBarnabas Health treat all types of skin cancers, but we worry about melanoma because it has the highest chance of spreading in the body,” says Dr. Weiss.

“The majority of patients we see will have surgery to remove the melanoma, and that will be the only treatment they’ll need,” explains Dr. Berger. However, if a lymph node biopsy reveals that the cancer has spread, systemic treatment may be given. This may include targeted therapy or immunotherapy.

“The FDA has approved many new therapies over the past 10 years, including several new ones just this year, that enable us to harness a patient’s immune system to fight melanoma as well as other skin cancers,” says Dr. Weiss.

Patients may be eligible for one of a number of clinical trials available at Rutgers Cancer Institute or one of the RWJBarnabas Health (RWJBH) hospitals. “Our goal is to offer clinical trials in every setting of the disease, for patients who’ve had prior treatments but are in need of new therapies,” says Dr. Weiss.

MANY MINDS
Multidisciplinary care means that patients at RWJBH hospitals and Rutgers Cancer Institute benefit from the expertise of a dedicated team of specialists, including surgical oncologists, radiation oncologists, medical oncologists, radiologists, dermatologists, pathologists, nurses, nurse navigators and social workers.

“We meet on a weekly basis to discuss each patient’s case,” says Dr. Berger. “We put our heads together to create a personalized plan of care for each individual.”

Physicians throughout Rutgers Cancer Institute and RWJBH coordinate care across the state at RWJBH hospitals. Their mission, says Dr. Berger, is to make top-level cutaneous oncology (skin cancer) care available for patients close to home.

Franz O. Smith, MD, MAcM, MMM, FACS, Northern Lead, Melanoma and Soft Tissue Surgical Oncology Program, RWJBarnabas Health, and Medical Director, The Melanoma Center at Cooperman Barnabas Medical Center, collaborates with the cutaneous oncology team at Rutgers Cancer Institute, attends the weekly multidisciplinary tumor board meetings and offers patients access to clinical trials. He also sees patients at Clara Maass Medical Center in Belleville.

The cutaneous oncology team at Rutgers Cancer Institute also works closely with surgical oncologist Victor Gall, MD, who treats melanoma and skin cancer patients at Community Medical Center in Toms River, Monmouth Medical Center in Long Branch and Monmouth Medical Center Southern Campus in Lakewood.

To learn more about treatment for skin cancers at RWJBarnabas Health and Rutgers Cancer Institute of New Jersey, call 844.CANCERNJ or visit www.rwjbh.org/beatcancer.

MELANOMA: WHAT TO KNOW
Melanoma is a type of skin cancer that develops when melanocytes (the cells that give the skin its tan or brown color) start to grow out of control. It’s more likely than other skin cancers to spread to other parts of the body if not treated early.

“I advise patients to see a dermatologist for a skin check regularly, and if there’s any change in a mole, to be seen right away,” says Adam Berger, MD, FACS, Chief, Melanoma and Soft Tissue Surgical Oncology at Rutgers Cancer Institute.

The most important warning sign of melanoma is a new spot on the skin or a spot that is changing in size, shape or color. Be on the lookout for spots that have any of the following features:

A IS FOR ASYMMETRY:
One half of a mole or birthmark does not match the other.

B IS FOR BORDER:
The edges are irregular, ragged, notched or blurred.

C IS FOR COLOR:
The color is not the same all over and may include different shades of brown or black, or sometimes patches of pink, red, white or blue.

D IS FOR DIAMETER:
The spot is larger than 6 millimeters across (about ¼ inch—the size of a pencil eraser), although melanomas can sometimes be smaller than this.

E IS FOR EVOLVING:
The mole is changing in size, shape or color.

Source: American Cancer Society
A PLACE WHERE EVERYONE CAN PLAY
THE RWJBARNABAS HEALTH FIELD OF DREAMS IS OPEN TO KIDS OF ALL ABILITIES.

Gavin has no place to go. He used to have places to go, but a beer truck changed all that. And that can happen to you or someone you love in the blink of an eye.

That’s how Christian Kane explained the need for a recreational complex for people with disabilities to potential donors. In 2012, the car Christian was driving was hit by a truck, leaving his son, Gavin, just 19 months old, with a fractured skull and severe disabilities.

Since then, Kane and his wife, Mary, who also have four other children, have spared no effort to help Gavin have as normal a childhood as possible. That’s how they learned that even “inclusive” playgrounds—“with some rubber flooring and a big red swing chair”—can create an environment in which disabled children feel unwelcome. And that’s why they decided it was necessary to build a comprehensive recreational facility where children of all abilities, and their caretakers, would feel at home.

So Kane, a math teacher at Toms River North High School, became the chief organizer, fundraiser and salesperson for their dream. “To sell teenagers on the idea that math is cool, you have to know how to sell,” he says with a laugh.

Five years and one month from the day the couple had the idea, the RWJBarnabas Health Field of Dreams opened in Toms River. It features a basketball court, baseball field, nine-hole miniature golf course and a playground area specially designed for wheelchairs and adaptive equipment. The complex has a “quiet corner” pavilion for children with autism, strategically placed outlets for recharging wheelchairs and more. There’s nothing like it anywhere in the country.

“The Kanes’ passion project aligned perfectly with RWJBarnabas Health’s commitment to health equity and supporting community-based initiatives,” says Barry Ostrowsky, Chief Executive Officer of RWJBarnabas Health (RWJBH).

OUTSIDE THE BOX
The Kanes already had a connection with RWJBH through Children’s Specialized Hospital in Toms River, an RWJBH facility, where Gavin has been receiving physical and occupational therapy since the accident.

“Mind you, most of the doctors we were seeing early on told us to put Gavin in a home because he would amount to nothing,” says Kane. “We said, we’ll take him to our home, and we found help for Gavin at Children’s Specialized. The physical and occupational therapists there have basically treated Gavin like their own child. They’re always thinking outside the box, trying new things—anything to help him get better.”

Gavin is now in fourth grade in the Toms River public school system. “Through the use of a tablet, he’s able to communicate and learn,” says Kane. “Through the use of my body and my wife’s body, he’s able to walk around. He’s come a long way, but he’s still not where we want him to be. That’s our number one project.”

After that priority comes Field of Dreams, which now needs to be maintained and to grow. Adults with disabilities—who often have limited options after they age out of support provided by the public school system—will make up a large part of the staff. Sports leagues are being formed. Since the complex is a private entity and doesn’t get state funding, fundraising will be a constant need.

“This project is immensely important to individuals with special healthcare needs,” says Matthew McDonald III, MD, Chief Executive Officer of Children’s Specialized Hospital. “It gives folks an opportunity to socialize and exercise. We are so looking forward to packing this place.”

“Gavin is extremely excited,” says Kane. “Now he can play with his friends and meet new people.”

To learn more, visit www.rwjhhfieldofdreams.com.
RETHINKING WORK

WHAT TO ASK YOURSELF BEFORE YOU RETIRE
For most of the past 20 years, retirement rates in the U.S. were declining. People were staying in jobs longer, experts speculated, because of factors such as increased life expectancy, higher education levels and the rise in the minimum age to collect full Social Security benefits.

In the past two years, that trend began to reverse: Beginning with the pandemic-related economic shutdown, a significant number of U.S. adults who hadn’t necessarily planned to retire did so. It’s estimated that two and a half million “excess” retirements took place between March 2020 and the second quarter of 2021.

“What we’ve been seeing is a wave of people who have rethought the contract between themselves and the world of work,” says Frank A. Ghinassi, PhD, Senior Vice President of Behavioral Health and Addictions at RWJBarnabas Health and President and CEO of Rutgers University Behavioral Health Care. “The question is whether they made the choice with a complete understanding of what the consequences would be.”

REASONS TO LEAVE
Fear was a motivator for many. Dr. Ghinassi says, “Early in the pandemic, before we had vaccinations and better medications, lots of people were dying,” he says. “People began to ask themselves, is going into work worth my personal risk? You saw this in people who couldn’t work from home, such as environmental services workers, first responders and healthcare workers.

“Also, many individuals began to experience symptoms of anxiety and depression. Surveys indicate that’s been true for an increasing number of people in the past two years. “Then, as the pandemic ground on, making decisions about vaccination and risks and new variants have all begun to weigh on people,” Dr. Ghinassi explains. “Older adults started thinking about how they wanted to spend the rest of their lives. A lot of employees began to examine whether they could make retirement work earlier than previously planned.”

For a fortunate subset of people, personal wealth grew during this time period due to a heated housing market and booming stock market. With more money came more options.

AND THEN WHAT?
“Some people have a good plan for retirement and have really thought out the budget and what they’ll do,” says Dr. Ghinassi. “But often, people have a fantasy of retirement life that’s based on their vacations: You don’t have the stress of work, you go somewhere nice and spend more money than you usually do. The reality of retirement is that you have to create a lifestyle that can fit your budget, 52 weeks a year for the next 25 to 30 years.”

Retirees also need to be prepared to find new ways of being with their families, he says. “Americans tend to be very hardworking. That means you were away from your family 45, 55, sometimes more hours a week,” he says.

“When you retire, your family members are going to see you infinitely more than they have before and that’s a big change, even in happy, well-adjusted families,” he says. “Now you have to find structured ways not only to be together, but to be apart. People deal with issues like, how do you get your alone time when your spouse is always around?”

Selling a house and downsizing to a smaller space can present challenges as well. “You’re not only spending way more time together, but now you’re doing it in a smaller space,” Dr. Ghinassi says. “That’s not necessarily good or bad, but it does require renegotiation. Ideally, retirement is based on a realistic plan.”

If it turns out that full-time retirement doesn’t suit, the current shortage of employees in the U.S. offers opportunities to return to the workforce. “Some people,” says Dr. Ghinassi, “decide to rejoin the workforce in a totally different profession and become reinvigorated about work.”

To learn about mental health services at RWJBarnabas Health, call the Behavioral Health Access Center, which is open 24 hours a day at 800.300.0628.
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, Monmouth, New Brunswick, Newark, Somerset, Toms River, Union and West Orange.

THE VIRTUAL CLUBHOUSE
A UNIQUE PROGRAM INNOVATES TO HELP ADULTS RECOVER FROM BRAIN INJURY.

When lockdowns created by the pandemic began, the staff at Opportunity Project, a program for adults with brain injury, knew they had to pivot quickly. Members of the Opportunity Project Clubhouse were relying on them as they worked to rebuild their life skills—and they were used to meeting in person at the Millburn-based facility.

“People were in a panic,” says Jacqueline Marino Rizzi, Cognitive and Community Integration Skills Counselor. “We had to think fast. Right away, we created a Facebook private group for members. But we knew our members varied greatly in technology know-how and access.”

The staff learned how to create meetings that members could join by either video or phone. They helped those without an internet connection get one. Members left their iPads out on their porches so a staffer could download the apps needed for virtual meetings. Soon, just about everyone had the appropriate technology to participate in video calls.

“Then we made sure to keep our programs very consistent, because our members are routine-oriented,” Marino Rizzi says. “We held the groups at the same times and we provided reminders to make sure people would stay engaged.”

A NEW MODEL
Now there’s a range of new services, including Mental Health Mondays, Grief Counseling Tuesdays, Wellness Wednesdays, Team-Building Fridays and an Adjustment Counseling Group on Saturdays. There’s virtual cognitive retraining, adaptive chair yoga, music therapy, team building, stress relief and more. The OP Resilience Squad, where members provide peer-to-peer support, was launched, as was the OP Caregiver Support Group.

Similarly, Melissa Moyer, Nutrition Counselor, adapted her wellness groups to the virtual world. Fitness classes became videos that groups watched together, following along at home. Opportunity Project teamed with the SPIRIT Club to connect with its online database of inclusive fitness classes. Healthy cooking classes were livestreamed from the Clubhouse.

In individual and group sessions, members discussed ways to overcome limitations related to their brain injury that hinder them from meeting their health and wellness goals.

Now, as COVID-19 health protocols permit, the Opportunity Project Clubhouse has transitioned to a hybrid model, with limited in-person activities. Counselors say, however, that a virtual component is here to stay.

“Sometimes members had transportation barriers to coming to our in-person programs,” Moyer says. “Others struggled with the amount of preparation it takes to get out of the house. The fact that they can participate from their living rooms has been a great thing for them.”

“We’ve evolved and been able to keep providing positive support,” says Marino Rizzi. “Our members are continuing to make progress!”

Children’s Specialized Hospital partners with Opportunity Project to ensure that children in its brain injury programs can continue to have the support they need throughout adulthood. To learn more, visit www.opportunityproject.org. For more information about Children’s Specialized Hospital, call 888.244.5373 or visit www.rwjbh.org/childrensspecialized.
CLEARING CLOGGED ARTERIES

HOW AN ADVANCED PROCEDURE ALLOWS BLOOD TO FLOW FREELY TO THE HEART

Percutaneous (meaning “through the skin”) coronary intervention, commonly referred to as PCI, opens clogged coronary arteries to restore blood flow to the heart. This minimally invasive procedure, which is usually performed in a cardiac catheterization lab, allows the treatment of heart attack and chest pain syndromes.

Elie Chakhtoura, MD, Director of the Cardiac Catheterization Lab at Clara Maass Medical Center and a member of RWJBarnabas Health Medical Group, explains how a basic PCI procedure works:

A catheter (a small plastic tube) is inserted through the wrist or groin and threaded through an artery toward the heart. Contrast dye is injected so the doctor can see any blockage or plaque buildup.

The blockage is crossed with a very thin wire that will serve as a rail to deliver a balloon and stent.

A collapsed balloon holding a stent (tiny metal mesh tube) is advanced and positioned to cover the blockage.

The balloon is then inflated, embedding the stent in the vessel wall and collapsing the blockage.

The balloon is deflated and removed, leaving the stent fully deployed and working like a scaffold to keep the vessel from reoccluding (becoming obstructed).

The stent may be coated in a medication that helps prevent scarring and reocclusion.

Some patients stay in the hospital overnight after the procedure; others go home the same day. Moderate-intensity activities can be resumed in a week.

Whoever your heart beats for, our hearts beat for you. To connect to a top cardiovascular expert at Clara Maass Medical Center, call 888.724.7123 or visit www.rwjbh.org/heart.
GOLFING WITHOUT PAIN AFTER KNEE REPLACEMENT SURGERY

A. Zachary Yamba, EdD, has been a talented athlete throughout his life, but over the years his passion for sports has taken a toll on his joints. Thanks to knee replacement surgery at Clara Maass Medical Center (CMMC), the 83-year-old former president of Essex County College is now back on the golf course.

Originally from Ghana in West Africa, Dr. Yamba came to the U.S. in the early 1960s to attend and play soccer for Seton Hall University, where he was an All-American player. His time playing soccer created wear and tear on his knees that eventually led to his first knee replacement surgery, which was performed on his left knee at a different hospital in the late 1980s. That knee replacement enabled Dr. Yamba to continue the sport he enjoys after knee replacement surgery.
become an avid golfer later in life. “I’ve been playing for about 25 years and enjoy the camaraderie and the challenge,” he says. “Golf can be both frustrating and exhilarating.”

Eventually, though, pain in his right knee began affecting him both on and off the golf course. “I was having trouble walking and climbing stairs. I was lucky if I could do nine holes because I just couldn’t put any weight on my knee,” Dr. Yamba recalls. “It was excruciating.”

After medication for pain and inflammation proved unsuccessful, Dr. Yamba set up an appointment with orthopedic surgeon Frank Femino, MD, Director of the Joint & Spine Institute at CMMC.

BONE ON BONE
“Whenever patients come to me with knee pain, I ask for a detailed health history, conduct an in-depth physical exam and take X-rays,” says Dr. Femino. “For Zachary, everything indicated that he was a candidate for a knee replacement.”

An X-ray of Dr. Yamba’s right knee showed severe bone-on-bone deformity, a bowlegged deformity and severe arthritis in all three compartments of the knee. Dr. Femino says that although Dr. Yamba probably had arthritis in his right knee for many years, golfing added to the damage to the cartilage. “Especially when you’re taking a big swing, you’re pivoting your knee and it puts a tremendous amount of pressure on the joints,” he explains.

Dr. Femino performed Dr. Yamba’s knee replacement surgery at CMMC in January 2018. During the hour-long procedure, Dr. Femino carefully removed all of the arthritic surfaces along the knee joint. He then used artificial parts to cap the ends of the bones that form the knee joint, along with the kneecap.

“Calling it a knee ‘replacement’ is actually a misnomer because what I’m really doing is resurfacing the knee so that everything has a brand-new surface, almost like putting a crown on a molar,” says Dr. Femino. “We use state-of-the-art materials that are extremely durable and feel very natural.”

Dr. Yamba completed a few weeks of physical therapy at CMMC. “I got excellent care from Dr. Femino as well as the hospital staff and the outpatient physical therapy team at Clara Maass,” he says.

Three months after his surgery, Dr. Yamba was back to golfing again, and today he is still playing about three times a week. “My game improved because I didn’t have to worry about any pain and discomfort—I was able to just concentrate on my swing,” he says.

Says Dr. Femino: “I tell patients all the time—you have your new knee, go use it.”

HOW TO PROTECT YOUR JOINTS WHILE PLAYING GOLF
“Golf is a very athletic sport,” says Frank Femino, MD, Director of the Joint & Spine Institute at Clara Maass Medical Center, who sees many golfers as patients. “It requires a lot of strength and puts a lot of stress on the joints throughout the body, including the ankle, knee, hip, spine, shoulder, elbow and wrist.” His advice on avoiding injury:

• **Swing properly:** “People can get hurt if they overswing or hit the ground with their club,” says Dr. Femino. “Revisit your swing mechanics or work with a coach to make sure you’re swinging properly.”

• **Start slowly:** “Don’t overdo it after a long period of not playing, because you likely have become a bit deconditioned and stiff,” he says. “Start slowly and gradually build up your strength.”

• **Increase endurance:** “If you’re going to play 18 holes and walk the course, by the end you’re going to be tired, especially if you carry your own clubs,” says Dr. Femino. “That can make you more prone to injury.” Dr. Femino recommends activities like biking, swimming, walking and jogging to increase endurance.

• **Strengthen your core.** “Yoga poses like the plank or downward-facing dog can strengthen your core tremendously to improve balance and stability,” says Dr. Femino. If you’re not into yoga, search for “gentle core strengthening exercises” online.

• **Warm up:** Devoting just five minutes to warming up before teeing off can help protect your joints. “Try doing some rotational exercises for your shoulders, trunk, ankles and wrists,” he says. Knee lifts, in which you lift your knee up and touch it with the opposite hand, can help protect the hips and knees.

When is it time to see an orthopedist for a golfing injury? Dr. Femino says that persistent pain is the main indicator, as well as soreness and pain while you’re playing, not just afterward.

SAVE THE DATE
The ever-popular Clara Maass Medical Center 2022 Golf Invitational, featuring former New York Giant David Diehl and Friends, is coming up!

**Monday, October 17**
Montclair Golf Club, West Orange
To become a sponsor or to learn more, visit [www.claragolf.org](http://www.claragolf.org).

To learn more about orthopedic services at Clara Maass Medical Center, visit [www.rwjbh.org/ortho](http://www.rwjbh.org/ortho).
A NEW PROGRAM AT CLARA MAASS MEDICAL CENTER BRINGS TOP EXPERTS TOGETHER TO CREATE PERSONALIZED TREATMENTS.

Patients with concerns about skin cancer can now find advanced care close to home at the Cutaneous Malignancy Program at Clara Maass Medical Center (CMMC).

The center is led by Franz O. Smith, MD, MACM, MMM, FACS, who also leads the Melanoma and Soft Tissue Oncology Program for hospitals in the RWJBarnabas Health Northern Region. “I’m committed to a multidisciplinary approach to caring for individuals with melanoma and other skin cancers,” says Dr. Smith, a board-certified, fellowship-trained surgical oncologist.

“Our philosophy of care is to provide outstanding, patient-centered care—not only medical care, but the emotional and psychosocial support patients need as they face a cancer diagnosis.”

The Cutaneous Malignancy Program’s multidisciplinary team includes:
- Surgical oncologists
- Radiation oncologists
- Medical oncologists
- Radiologists
- Pathologists
- Nurses
- Social workers
- Psychosocial support
- Nutrition
- On-site pharmacy
- Financial counselors.

TREATMENT OPTIONS

In collaboration with cutaneous oncology (skin cancer) experts at Rutgers Cancer Institute of New Jersey, the state’s only National Cancer Institute-Designated Comprehensive Cancer Center, the team creates an individualized treatment plan for each patient.

The program offers state-of-the-art evaluation, sentinel and lymph node biopsies by New Jersey’s leading melanoma surgeons, and accurate staging.

Through its partnership with Rutgers Cancer Institute, the Cutaneous Malignancy Program offers patients advanced treatment options in immunotherapy and precision medicine, including clinical trials, many of which aren’t available elsewhere in the state.

To schedule an appointment with one of our melanoma/skin cancer experts, call 844.CANCERNJ.
SLATHER ON SUNSCREEN.
Use it even on slightly cloudy or cool days. It contains chemicals that scatter sunlight’s UV rays. Apply 30 minutes before you go outside. A Sun Protection Factor (SPF) of 30 is sufficient as long as the sunscreen is reapplied every two hours.

Ultraviolet (UV) rays in sunlight are a risk factor for melanoma and other skin cancers. Franz O. Smith, MD, a surgical oncologist with a clinical trial and research specialty in skin cancers at Clara Maass Medical Center and a member of RWJBarnabas Health Medical Group, shares his best advice for protecting your skin while you’re outside.

Simple habits can drastically reduce your skin cancer risk.

To learn more about skin cancer prevention and treatment at Clara Maass Medical Center, call 844.CANCERNJ (844.226.2376) or visit www.rwjbh.org/beatcancer.
Eating to Beat Diabetes

Six Quick Tips to Help Lower Your Blood Sugar

Exercise is important. Taking medicine as prescribed is critical. But perhaps the most powerful tools you have for controlling blood sugar are your eating habits. Silvana Blanco, RD, bariatric dietician at Clara Maass Medical Center, explains.

Eat at regular times.
Don’t skip meals, especially breakfast. Irregular meal times can lead to overeating because you’re hungry or to a dangerous drop in blood sugar.

Make it a priority to control carbohydrates.
They turn to sugar quickly, causing blood sugar levels to spike. Keep portions small and switch white bread and white rice for high-fiber complex carbohydrates, such as whole-grain bread and brown rice.

Say no to sugary drinks.
Even 100 percent fruit juice has a lot of natural sugar. Swap it, as well as sodas and other sugary drinks, for water, seltzer, milk or unsweetened tea or coffee.

Have smart snacks.
Try apple slices with nut butter, a handful of pistachios or a hard-boiled egg. If you’re having crackers, pair them with some kind of protein—tuna salad or a piece of cheese, for example—to help you feel full longer and prevent your blood sugar level from rising.

Keep a log of what you eat.
You can take it to your primary care doctor to discuss when you go for a checkup. Keeping track of what you eat has been proven to help with weight loss, and even a loss of five to 10 percent of your body weight can significantly improve your blood sugar level.

Balance your plate.
Use the Diabetes Plate Method recommended by the American Diabetes Association to create balanced meals—no weighing, counting or calculating required. Using a 9-inch plate, fill half of it with non-starchy vegetables; one quarter with lean protein; and one quarter with carbohydrates such as beans, whole grains, fruits, dairy products or starchy vegetables such as potatoes, squash, green peas or plantains.

A Cool, Healthy Meal: Taco Salad

Serves 4

INGREDIENTS:
For the dressing:
• 1/3 cup light sour cream
• 1/3 cup low-fat plain yogurt
• 1/2 cup chopped cilantro
• 2 tablespoons lime juice
• 1/8 teaspoon garlic salt

For the salad:
• 1 teaspoon olive oil
• 1 medium red bell pepper, diced
• 3/4 pound lean ground beef or ground turkey
• 1/2 teaspoon chili powder
• 3/4 cup salsa
• 6 cups chopped romaine lettuce
• 2 green onions, sliced
• 3/4 cup reduced-fat Mexican-blend cheese

DIRECTIONS:
• Combine all ingredients for dressing in blender until smooth.
• Heat oil in large nonstick skillet over medium heat. Add diced pepper and sauté 3 to 4 minutes or until slightly softened. Add the beef or turkey and chili powder and sauté 5 to 6 minutes, or until meat is well browned. Stir in the salsa and cook for one minute to combine.
• Place 1 1/2 cups chopped lettuce onto each of four plates. Top with 1/4 of the meat mixture. Sprinkle on 1/4 of the green onions, 3 tablespoons cheese and 3 tablespoons dressing.
• Optional: Garnish with your choice of avocado, crushed reduced-fat tortilla chips, green chilies, black or pinto beans.

To learn more about Diabetes Self-Management at Clara Maass Medical Center, call 973.450.2126 or visit www.rwjbh.org/claramaass.
THE BEST OF ALL BIRTHING WORLDS

TOGETHER, OB/GYNS AND CERTIFIED NURSE MIDWIVES DELIVER SATISFACTION FOR PATIENTS.

When Clara Maass Medical Center (CMMC) added midwifery to its services two years ago, the medical center enhanced its well-rounded approach to maternal care. How do the two types of professionals work together? Michael Straker, MD, Director of the Department of Obstetrics and Gynecology, and Suzette Gray, CNM, explain:

TWO KINDS OF TRAINING
OB/GYNs are medical doctors. The midwives at CMMC are all Certified Nurse Midwives (CNMs), which means that each holds a master’s degree or higher in the field.

Like OB/GYNs, CNMs are trained to care for women throughout pregnancy, labor and birth, as well as to handle gynecological needs, including prescribing medication and contraceptives.

Midwives can manage and deliver babies for low-risk maternity patients, while OB/GYNs handle high-risk cases. “A patient is considered high-risk if they have had previous abdominal surgery, previous cesarean section, or have a condition like hypertension or diabetes. In that case, the patient must be seen by an OB/GYN,” Dr. Straker says.

However, the two types of providers are always available to step in for a patient if needed. “For patients who choose delivery by a midwife, a physician is always on hand, ready to be involved in case the need develops for an operative delivery, such as the use of forceps or a cesarean section,” says Dr. Straker.

DELIVERY TIME
Midwives are specially trained to help women have a vaginal birth and avoid a cesarean section.

“The midwife is going to be a little more hands-on during the labor process,” Dr. Straker says. “Our midwives are excellent in that when a patient is in labor, they can offer specialized help in things like positioning the patient and giving them advice on how to manage labor pain.”

“During labor, the midwives are there to educate patients,” Gray says. “For example, with pain management, some patients don’t know if they should get an epidural or IV medication, and we take a good amount of time explaining what options would benefit them. If a patient doesn’t want Pitocin, we will offer alternative options, like breast pumps to stimulate contractions.”

The midwife’s focus is on providing the birth experience the patient desires. “We’re also accommodating if they want to eat—we’ll sometimes allow a small meal. Or, for patients who are interested in a water birth, which we do not perform at the hospital, we’ll allow the patient to sit in the shower and let the water run down their back,” she explains. “Patients are so appreciative.”

Together, the complementary types of care add up to the best of both worlds for the maternity patient. “We have a very collaborative relationship between OB/GYNs and CNMs,” says Dr. Straker. Concurs Gray, “There’s a lot of communication between us.”

For information about maternity services at Clara Maass Medical Center, visit www.rwjbh.org/maternity.
Skin cancer is the most common type of cancer. At Clara Maass Medical Center, we take a coordinated approach to treating it in all its forms, including melanoma, with a multidisciplinary team of experts including surgical oncologists, medical oncologists, radiation oncologists, nurse practitioners and navigators. In partnership with Rutgers Cancer Institute of New Jersey, the state’s only NCI-designated Comprehensive Cancer Center, we offer the latest clinical trials, complex surgical procedures, and sophisticated radiation therapy techniques to treat your type of skin cancer.

Visit rwjbh.org/beatcancer or call 844-CANCERNJ.

Let’s beat cancer together.