LIFE AFTER DEATH: Advanced Care for Heart Attack

CONGESTIVE HEART FAILURE? YOU ARE NOT ALONE

FEELING BETTER WITH NEUROPATHY TREATMENT
NUTRITIONAL INFORMATION (PER SERVING)

White fish lightens up this kid-friendly entrée with grown-up taste.

INGREDIENTS

1/3 cup sour cream
1 jalapeno pepper, seeded
2 tablespoons fresh lime juice
1/4 teaspoon salt
1/8 teaspoon cumin
1/4 teaspoon chili powder
1/4 cup canola oil
1/2 cup cornmeal
1 1/2 pounds Pacific cod, cut into 1-inch strips
8 soft corn tortillas, warmed

DIRECTIONS

1. Puree sour cream, jalapeno, lime juice, salt, cumin, and chili powder in a food processor.
2. Heat the canola oil in a large nonstick skillet; while waiting, coat fish in cornmeal.
3. Fry fish in the oil until cornmeal is lightly browned—1 to 2 minutes per side.
4. Remove and drain on paper towels.
5. Top each tortilla with fish, sour cream sauce, and preferred toppings.

OPTIONAL TOPPINGS

1 avocado, halved, pitted, and cut into chunks
1 cup cherry tomatoes, chopped
1/4 red onion, thinly sliced
2 cups shredded cole slaw mix
1 bunch cilantro

Servings: 4
Calories: 294
Total fat: 8g
Sodium: 747mg
Carbohydrates: 30g
Fiber: 3g
Protein: 30g

Graded on performance in 28 categories of public data that measures patient safety, Robert Wood Johnson University Hospital Rahway is one of 29 New Jersey hospitals receiving the top grade from The Leapfrog Group, a national health-care quality organization.

“We are pleased with our grade and thank the entire healthcare team for their efforts,” says Kirk C. Tice, RWJ Rahway President and CEO. “We are constantly focused on making sure the hospital is a safe place for patients, families, and employees.”

In several measures, RWJ Rahway matched the rates of the best performing hospitals, with zero incidents, and received 100 percent in such measures as patients receiving antibiotics within one hour prior to surgery and surgery patients receiving appropriate treatment to prevent blood clots.

To see RWJ Rahway’s scores as they compare nationally and locally, visit www.hospitalsafetyscore.org, the Hospital Safety Score website, which also provides information about how the public can protect themselves and loved ones during a hospital stay.

RWJ RAHWAY FOUNDATION HONORS STEPHEN A. AND CINDY TIMONI

Summer fun was the theme with over 250 guests having a “ball” at Robert Wood Johnson University Hospital Rahway Foundation’s Rose Beach Ball honoring 2015 Guardians of the Rose, Stephen A. Timoni, Chair, Board of Governors, and his wife, Cindy Timoni, RWJ Rahway Foundation Fashion Show Committee Chair.

The successful event netted more than $122,000 to benefit the programs and services of RWJ Rahway.
You have noticed the swelling in your mom’s ankles, and she has complained of fatigue. Her shortness of breath was so severe you called 911. After an exam, the doctor diagnosed her with congestive heart failure (CHF). Will she be OK?

“**WHEN PATIENTS HEAR** the words ‘congestive heart failure,’ they think it’s the end,” says Aron Barsky, MD, FACC, cardiologist with Robert Wood Johnson University Hospital Rahway. “The truth is that CHF is not an end-stage diagnosis. People can live long lives with CHF when they have good communication with their doctors and strictly follow recommendations for diet and medication.”

**UNDERSTANDING THE DIAGNOSIS**

CHF occurs when the heart cannot effectively pump blood through the rest of the body. This may be due to damaged heart muscle, a prior heart attack, or a congenital problem, and it can cause symptoms such as:

- Dizziness, confusion, or fainting
- Fluid retention in the ankles, legs, and abdomen
- Rapid or irregular heartbeats
- Shortness of breath, either while exercising or at rest

CHF is one of the most common causes of hospital admissions and readmissions. People with diabetes, high blood pressure, high cholesterol, and heart disease are all at greater risk for CHF.

You can manage CHF symptoms and reduce hospital readmission through lifestyle changes that include taking your medication as directed, weighing yourself daily, watching out for fluid buildup or swelling, sticking to a low-salt diet, and exercising regularly.

**CONTROL IS THE GOAL**

A cardiac rehab program, with its focus on monitored, supervised exercise, lifestyle modification, and support can help patients with CHF control symptoms as well as alert them to potential problems to avoid hospitalizations. And now, Medicare and many insurers cover cardiac rehab for specific CHF cases. Check with your plan for details.

“Medications can address fluid buildup and in some patients, improve heart function,” Dr. Barsky says. “Being careful about the foods you eat and reading labels to make sure nothing is too high in sodium—most adults should limit consumption to 2,300mg per day, and people with CHF should limit sodium to 2,000mg per day—contributes to more hospital-free days and a better quality of life.”

To learn more about health conditions from physicians and other professionals, attend one of our community education events. See page 7 for dates and times or visit www.rwjuhr.com and click on “Events.”

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**Moving for Your Heart**

Cardiac Rehabilitation at Robert Wood Johnson University Hospital Rahway brings patients together with experienced, educated nurses who work with them to improve their health status. Before patients begin rehab, clinicians create a customized exercise program for them.

“Exercise has been shown to improve blood vessel function, increase energy, and lower mortality rates for patients with congestive heart failure,” says Gary Paul, Registered Clinical Exercise Physiologist at RWJ Rahway. “Cardiac rehabilitation programs, which monitor the vital signs and progress of patients, improve quality of life.”

To learn more about Cardiac Rehabilitation at RWJ Rahway, visit www.rwjuhr.com/cardiacrehab.htm or call (732) 499-6056.
A HEART ATTACK was the last thing Mr. Maysonet—a 52-year-old husband, father of adult twin sons, and successful self-employed general contractor from Clark—expected to threaten his health. “No one in my family had ever had a heart attack,” Mr. Maysonet says. “I didn’t have high blood pressure, high cholesterol, or other cardiac irregularities. I wasn’t obese, I was active, and I ate relatively healthfully. I thought my heart would be the last thing to go. The only thing I can attribute my heart attack to is stress. I used to work a lot of hours running my business, sometimes from 7 a.m. to 11 p.m.”

On the night of March 23, Mr. Maysonet’s heart warned him it was time to slow down. At 10:30 p.m., Mr. Maysonet’s wife, Maria, returned home from dinner with her coworkers to find her husband complaining of a headache and indigestion. “I’ve suffered from migraines for most of my life, so when Maria asked me if I wanted to go to the hospital, I thought it was only a headache and indigestion, so I said we would address the problem in the morning,” Mr. Maysonet says. “After I fell asleep, she heard me gasping for air, and then realized I’d stopped breathing and turned blue. She called 911.”

LIFE IN LIMBO

When emergency medical services providers arrived, they immediately began performing CPR (see “Lending Helping Hands” for more information), used a defibrillator to shock Mr. Maysonet’s heart back into rhythm, and inserted a breathing tube. Unfortunately, Mr. Maysonet went six to 10 minutes without oxygen reaching his brain between entering cardiac arrest and the time Clark police, RWJ Rahway paramedics and the Clark Volunteer Emergency Squad arrived. “Brain cells become damaged after six minutes without oxygen; once someone passes that threshold, he or she typically suffers some amount of irreversible brain damage,” says Ghassan Chehade, MD, FACC, FSCAI, Vice Chair of Cardiology and Director of Nuclear Cardiology at Robert Wood Johnson University Hospital Rahway, and the cardiologist who treated Mr. Maysonet. “I received a call at home around midnight that Mr. Maysonet was on his way to the Emergency Department [ED] at RWJ Rahway with what appeared to be a massive heart attack. I met him in the ED, along with the entire cardiac catheterization team.

Mark Maysonet will always think of March 23, 2015, as the day he “died.” Now, he has a new perspective on life and a fresh approach to living.

“I want to thank all those at RWJ Rahway for the excellent service and treatment I received, as well as my family and friends for their love and support.”
—Mark Maysonet
“Mr. Maysonet’s heart attack involved three arteries simultaneously: a blockage in his left anterior descending artery known as the widowmaker, the ramus intermedius artery, and the obtuse marginal I branch,” Dr. Chehade continues. “The severity of his heart attack makes his case almost unrivaled. Very few collapse at home and make it to the hospital.”

In the cardiac catheterization lab, Dr. Chehade performed an angioplasty, a procedure that uses a balloon delivered by a catheter to reopen the artery. He used a different type of catheter to suction the obstructing plaque out of the vessel, and then placed a stent—a hollow mesh cylinder—in the artery to keep it open. A temporary balloon pump took over blood circulating duties while Mr. Maysonet’s heart recovered.

Next, Dr. Chehade turned his attention to reducing the brain damage he expected Mr. Maysonet to sustain.

“I consulted the neurologist around 4 a.m. and recommended we place Mr. Maysonet in therapeutic hypothermia for 24 hours,” Dr. Chehade says. “By artificially cooling his body to 91°F, we hoped to minimize the long-term damage that might have occurred due to lack of oxygen reaching the brain. When we gradually warmed his body back to normal temperature, he began improving by the hour.”

**EYES WIDE OPEN**

Nearly three days after flirting with death, Mr. Maysonet opened his eyes in the Critical Care Unit—the first time he’d done so since going to bed before the heart attack. He went home on April 3 with no neurological damage. Cardiac rehabilitation at RWJ Rahway helped him regain energy and stamina. Currently, he’s focused on establishing a new normal.

“First and foremost, I’m working my hardest to not overwork,” Mr. Maysonet says. “In the past, I would take a break in the evening, have dinner with my wife, and then return to the office and continue working. Now, when I stop at 5 p.m., I stop. I’ve also cut salt out of my diet and am making even more of an effort to avoid fatty foods.”

Dr. Chehade still marvels at his patient’s recovery.

“Mr. Maysonet received a great combination of cardiac and neurological care,” Dr. Chehade says. “He’s a walking miracle.”
IT WAS DECEMBER 2012 when his journey began, the experience that left Mr. Velloso with no sensation in his feet or hands. Diagnosed with cancer of the appendix, Mr. Velloso had surgery to remove the affected area and endured grueling rounds of chemotherapy as follow-up treatment.

More than two years later, Mr. Velloso’s cancer is in remission and he is back to his full-time job repairing medical equipment. But everything is not 100-percent normal. The chemotherapy treatment, though effective in treating Mr. Velloso’s cancer, came with the side effect of peripheral neuropathy—numbness in his hands and feet, making work difficult and his favorite pastime of playing the guitar nearly impossible.

“A year past chemotherapy, there was no improvement,” Mr. Velloso says. “I was constantly dropping tools and parts. I felt very discouraged.”

PART OF THE SOLUTION

Not the type of man to shrink from a challenge, Mr. Velloso trained himself to rely more fully on his sight when performing his work. He also tried adding certain vitamin and mineral supplements to his meals and tirelessly sought answers from medical professionals.

“When I heard about the opportunity to participate in a program that could restore the sensation in my hands, I was right there,” Mr. Velloso says. “I liked MicroVas treatment. It was a noninvasive option—and it worked!”

MAKING A COMEBACK

For 36 weeks, Mr. Velloso received 45-minute sessions of MicroVas treatments, three times a week, which involved a machine that uses electrical currents to stimulate circulation in his capillaries.

“There were no side effects,” says Mr. Velloso, who has regained roughly 80 percent of the sensation in his fingers. “Everything you can recover from your experience as a cancer patient is worth going after.”

Working with Paul Abend, DO, FAAPMR, Medical Director of Rehabilitation Services at RWJ Rahway, Mr. Velloso is on a mission to reclaim the sensation in the ring and pinky fingers on both hands as well as the feeling in his feet. An avid classical and folk guitarist, he is not willing to compromise his passions, and thanks to MicroVas treatment at RWJ Rahway, he may not have to.

“Mark continues to regain sensation as a result of the MicroVas treatments,” Dr. Abend says. “For many people who are suffering from conditions such as restless leg syndrome, chronic pain, or peripheral neuropathy caused by diabetes and other conditions, MicroVas promotes the flow of oxygen in the body, delivers nutrients, and promotes healing. In Mark’s case, MicroVas improved the damaged peripheral nerves.”

Talk with your physician about how MicroVas might help you manage or eliminate neuropathic pain. To make an appointment, call (732) 499-6012.
Healthy Resolutions

This is just a sample!
For a complete listing of events at both RWJ Rahway Fitness & Wellness Center locations in Scotch Plains and Carteret or to register, call (732) 499-6193, or visit www.rwjuhr.com and click on “News & Events.”
Cancellations or changes to the programs do occur. Please call ahead to make sure the program you want is taking place.
To arrange a tour of the RWJ Rahway Fitness & Wellness Center in Scotch Plains, call (908) 232-6100.

SUPPORT GROUPS
Two Care for the Caregiver groups meet the first Wednesday of each month, one from 3:30 to 5 p.m., and the other from 7 to 8:30 p.m.
Breast Cancer Support Group meets the first Wednesday of each month at 5:30 p.m.
Bariatric Support Group, offering peer-to-peer support, meets the first Saturday of each month at 10:30 a.m. Open to pre- and postoperative patients. Not affiliated with any physician or medical group. For more information, call (908) 654-3369 or email firstsaturdayupport@gmail.com.
Fibromyalgia Support Group, a professionally facilitated group, meets the first Thursday of each month from 6:30 to 8 p.m. Those newly diagnosed are welcome.
Adult Bereavement Support meets the first Wednesday of each month from 1:30 to 3 p.m. at the Fitness & Wellness Center. For more information, call Jane Dowling, RN, at (732) 247-7490.

Save the Date!
Caregiving: Legal Issues and Next Steps
Wednesday, September 9, 7–9 p.m.
Attorney Harold Grodberg and Elder Care Advisor Antonette Koshykar discuss trusts to handle a range of expenses, including funeral expenses. Seating is limited. Please call (732) 499-6193 to register.
Health Education programs are free, open to the community. Non-Fitness & Wellness Center Members are welcome to attend. Please call ahead to let us know you are coming — (732) 499-6193.

RWJ Rahway Fitness & Wellness Center at Carteret is located at 60 Cooke Ave., Carteret.

**Diabetes Support Group**
Meets the first Tuesday of each month from 7 to 8:30 p.m. at RWJ Rahway, 865 Stone St., Rahway. For more information, call (732) 499-6109.

**Parkinson’s Support Group**
Meets the second Wednesday of each month at 1 p.m. at RWJ Rahway, 865 Stone St., Rahway. Group is for those with Parkinson’s disease and their caregivers. For more information, call (732) 499-6193.


The information in this magazine is intended to educate readers about pertinent health topics; the information is not intended to replace or substitute for consultation with a physician or professional medical care. Please see your physician if you have health problems or concerns. Robert Wood Johnson University Hospital Rahway is a proud member of the RWJ Health System, which includes Robert Wood Johnson University Hospital New Brunswick, Robert Wood Johnson University Hospital Hamilton, Robert Wood Johnson University Hospital Somerset, and Children’s Specialized Hospital.