

A Publication of  
**CLARA MAASS MEDICAL CENTER**

FALL 2020

# healthy

*together*

**FROM  
INACTIVE  
TO FIT:  
HOW THEY DID IT**

**SELF-CARE  
FOR NEW MOMS**

**STAYING  
POSITIVE  
DURING  
CANCER CARE**

**PROTECT YOUR HEART  
FROM STRESS**

# Rising to the Challenge

During the COVID-19 pandemic, changes in healthcare have been unprecedented. Fighting a new and unpredictable virus and making it safe for patients to receive all types of care under these extraordinary conditions have become our top priorities.

We're proud of how RWJBarnabas Health has risen to these challenges, as stories in this issue show. From new mothers who need help with breastfeeding to seniors looking for advice on how and whether to have social interactions, we're here for you with support and guidance.

We offer telehealth services for children and adults through RWJBarnabas Health TeleMed®, which makes virtual visits available for many issues in both primary and specialty care. If an in-person doctor visit is required, know that all physicians in our RWJBarnabas Health Medical Group have implemented additional safety standards for their offices, including social distancing, mask wearing, intensified disinfection protocols and COVID-19 screening of patients and staff.

Of course, in the event you or a loved one need to go to the hospital, you can rest assured that each facility in the RWJBarnabas Health system has taken every precaution for the safety of patients, visitors and team members.

At Clara Maass Medical Center, we've given careful thought and consideration to ensuring the comfort and safety of our patients, visitors, employees and physicians, and have implemented a number of new protocols. For example, we diligently assess everyone who comes through our doors to ensure that they do not have a fever and that they are not experiencing symptoms consistent with COVID-19. We are also requiring every patient, visitor, physician and employee to wear a mask during the entire time that they are in the facility. We are practicing physical distancing by spacing seating and appointments to avoid crowding. In some cases, our team will personally call you at home when the physician is ready to see you.

At RWJBarnabas Health, caring for the community is our mission and our passion. Please take good care of yourselves by wearing a mask when needed, washing your hands frequently and practicing social distancing.

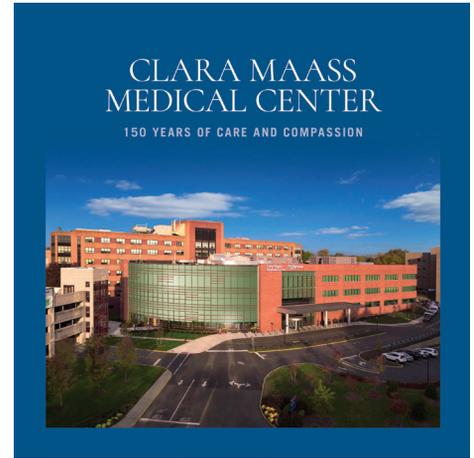
Yours in good health,

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

**MARY ELLEN CLYNE, PhD**  
PRESIDENT AND CHIEF EXECUTIVE OFFICER  
CLARA MAASS MEDICAL CENTER



## HEALTH NEWS



### 150 YEARS OF CARE AND COMPASSION

Recently, we published a new book to commemorate our timeless history, entitled "Clara Maass Medical Center: 150 Years of Care and Compassion." Our new history book captures important moments, from our founding as the Newark German Hospital in 1859 through 2019, the year in which the medical center's 150th anniversary was celebrated.

Updating our historical achievements was a major undertaking that could not have been completed without contributions from our physicians, nurses and many others. It is our sincere pleasure to devote our new history book to our entire hardworking team, which has helped to establish Clara Maass Medical Center as a mainstay and as a known, trusted healthcare resource and community partner over the past 150 years.

It is truly through the support of our entire community that Clara Maass Medical Center continues to achieve success from year to year.

**Clara Maass Medical Center** | **RWJBarnabas HEALTH**

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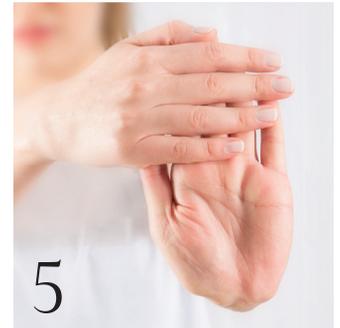
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# TAKING CARE OF YOURSELF AFTER BIRTH

**PAY ATTENTION TO YOUR BODY, AND DON'T BE AFRAID TO ASK FOR HELP.**

“For a new mother, self-care should be as much of a priority as taking care of her baby,” says Michael Straker, MD, Chairman of the Department of Obstetrics and Gynecology at Clara Maass Medical Center (CMMC). “As a new mother, you have to be a strong advocate for your own health.” Here, he shares his best advice for new moms:

## **Eat well and stay hydrated.**

After birth, your body has gone through many changes and needs good nutrition



**MICHAEL STRAKER, MD**

more than ever. That means a balanced diet with whole grains, vegetables, fruits, low-fat dairy products and lean protein such as that found in fish, beans, chicken breast and tofu. Drink extra fluids if you're

breastfeeding; keep a pitcher of water handy beside your breastfeeding chair or bed.

## **Have a support system.**

Avoid isolation. Be sure to make time to talk to your friends and family via video chat or a phone call, Dr. Straker says.

What about having people over to help? “In your home, you get to set your own boundaries,” he advises. “If you're not comfortable having Aunt Minnie come over, then Aunt Minnie has to respect that. However, if you know that someone has been adhering to all the best safety guidelines for COVID-19 and you would like that person to visit or to help you, that is your choice.”

## **Pay special attention to these symptoms:**

- **HEADACHES** that don't go away with Tylenol, spots before the eyes, swelling of hands or face, or abnormal weight gain. These could be signs of preeclampsia, a



## **A HEALTH KIT FOR NEW MOMS**

As in-person visits transitioned to telehealth virtual visits, patients in their third trimester and new mothers at Clara Maass Medical Center received “new mom kits.” These kits contain a blood pressure monitor, thermometer and masks, along with instructions and other educational information that allows mothers to monitor their health safely as they practice social distancing.

serious blood pressure disorder

- **ABNORMAL BLEEDING.** “If you need to change your sanitary napkin several times a night, or get up and have heavy vaginal bleeding, contact your doctor,” says Dr. Straker. Postpartum hemorrhage is uncommon, but it can lead to a dangerous drop in blood pressure.

- **INTENSE DEPRESSION OR ANXIETY,** or a fear that you might harm the baby or yourself. Perinatal mood and anxiety disorders (PMAD), sometimes called postpartum depression, affect one in five new mothers, but they are temporary and treatable. CMMC offers virtual support groups for PMAD. To learn more, visit [www.rwjbh.org/PMADsupport](http://www.rwjbh.org/PMADsupport).

**Speak up and take action.** “If you're worried about the way you feel, do not let anyone dismiss your pain or other symptoms as insignificant or ‘typical’ for a new mother,” says Dr. Straker. “Nobody knows your body better than you.”

Don't hesitate to call your OB/GYN with concerns, he advises. For non-urgent matters, CMMC offers a “Warm Line” (973.450.2868). You can leave a message and get a return call the next business day.

Searching online carries a risk of getting the wrong health information, but Dr. Straker says new parents can trust the patient FAQs material at the website of the American College of Obstetricians and Gynecologists ([www.acog.org](http://www.acog.org)).

By all means, if you feel you need to go to the Emergency Department, go. “Don't put off going to the hospital because of fear of COVID-19,” says Dr. Straker. “CMMC has taken every precaution to ensure the safety of patients and staff.”

To learn more about maternity services at Clara Maass Medical Center, visit [www.rwjbh.org/maternity](http://www.rwjbh.org/maternity).





Loosen up wrists before you load them with weight by doing wrist circles—one minute in one direction, one minute in the reverse. “For fingers, extend them and flex them, bending backward and then forward,” Dr. Lopez says. “Thirty seconds should be enough.”

# DON'T TAKE YOUR HANDS FOR GRANTED

## AN ORTHOPEDIC SURGEON SHARES THREE SIMPLE WAYS TO KEEP HANDS AND WRISTS HEALTHY.

“Because our fingers and hands are always in motion, we tend to take them for granted,” says Nicole Lopez, MD, an orthopedic surgeon at Clara Maass Medical Center who specializes in hand, wrist and elbow surgery and is a member of RWJBarnabas Health Medical Group. “The good news is that there are simple steps that anyone can take to keep their hands safe and healthy.” Her advice:

**1 Warm up wrists and fingers before a workout.** “Injuries often occur after people begin yoga or a new workout routine,” says Dr. Lopez. “We’re used to the idea of stretching and warming up knees and shoulders, but we don’t do the same for wrists and hands. Then a new workout can cause minor wrist and finger sprains that keep getting re-sprained and turn into a longer-term issue.”

**2 Wear sunscreen on the back of hands.** “As a hand surgeon, I frequently see that people have sunspots [small, flat brownish spots] on the back of their hands, which are exposed to the sun constantly but rarely get sunscreen,” says Dr. Lopez. While sunspots are not skin cancer, they should be monitored. Rapid changes in a sunspot may indicate it should be checked by a doctor.



NICOLE LOPEZ, MD

**3 To avoid overuse injuries, pay attention to pain as it occurs.** An overuse injury is any type of muscle or joint injury, such as a stress fracture or tendinitis (inflammation of a tendon), caused by repetitive demand.

Most of us have heard about overuse



### SPEAKING YOUR LANGUAGE

“I can’t stress enough how important it is to have a healthcare provider who is fluent in your own language,” says orthopedic surgeon Nicole Lopez, MD, who is fluent in Spanish. “I see patients coming in with sons, daughters or even very young grandchildren functioning as interpreters, but often the message being sent is not the one being received.

“For example, the patient may say, ‘I have knee pain at the end of the day, especially when I go up and down the stairs,’” she says. “While translating, the relative may generalize that the person is always complaining about knee pain. That could be the difference between a diagnosis of inflammatory arthritis vs. osteoarthritis.”

If patients don’t have access to a physician who speaks their language, they can ask for a trained medical interpreter. In addition, any family member who accompanies a patient to a doctor visit should be thoroughly informed about the patient’s medical history.

Clara Maass Medical Center provides free language assistance services to people whose primary language is not English.

injuries to the hand and wrist based on extensive use of computers, smartphones and other devices. Office workers and retail workers who need to pick things up frequently are at risk of tennis elbow, a type of tendinitis caused by repeating the same motions over and over.

“People usually find a way to work around these pains by making adjustments,” Dr. Lopez says, such as changing the height of a keyboard, taking a brief rest or using a different arm to lift things.

The idea is to be mindful of a pain while it is occurring, instead of just powering through it. “Modify your activity while it’s happening, or stop doing what you’re doing,” says Dr. Lopez. “That’s much easier than dealing with an issue after it has become a problem.”

To learn more about care for joints at Clara Maass Medical Center, call **888.724.7123** or visit [www.rwjbh.org/ortho](http://www.rwjbh.org/ortho).



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**1 TEMPERATURE CHECKS:** Employees are screened as they report for work to be sure that their temperature is within the normal range.

**2 WEAR A MASK, SAVE LIVES:** All CMMC employees wear face masks while at work.

**3 4 SIGNS OF SAFETY:** Visitors are guided to safe social distancing through the use of signs and stickers.

**5 HEAD-TO-TOE PROTECTION:** Staff members use personal protective equipment for interactions with patients.

**6 UNCOMPROMISINGLY CLEAN:** Spread of infection is prevented by rigorous cleaning of all rooms, including all surfaces, equipment and air vents.

**7 WASHING HANDS:** All CMMC employees wash their hands thoroughly and frequently, following the recommendations of the Centers for Disease Control and Prevention.

**8 ROBOT CLEANER:** Advanced robotic technology uses pulsed UV-C light and high-energy photons to disinfect surfaces.

**9 MANDATORY MASKS:** Face masks are distributed to any patients or visitors who don't have them.

# SAFETY FIRST AND ALWAYS

EVERY PRECAUTION HAS BEEN TAKEN TO MAKE CLARA MAASS  
MEDICAL CENTER A SAFE PLACE FOR PATIENTS.

“At Clara Maass, we’ve always been focused on safety, and we are committed to being a high reliability organization,” says Naveen Ballem, MD, Interim Chief Medical Officer and Chief Clinical Effectiveness Officer at Clara Maass Medical Center (CMMC). “The COVID-19 pandemic has reinforced for us how important it is to be nimble, to communicate and to be able to adjust processes as needed for new diseases.”

CMMC has received national recognition for its commitment to safety, as shown by its Healthgrades Patient Safety Excellence Award for 2019 and 2020, as well as 12 “A” Leapfrog Hospital Safety Grades. Those efforts have only become more vigorous. “Recently, we increased our infection control team from two specially trained nurses to four,” says Dr. Ballem. “They round every morning and are our boots on the ground, ensuring that every unit and area is adhering to best practices for preventing outbreaks of infection.”

The Medical Center’s Environmental Services team makes sure all areas are disinfected with the best cleaning

products available and also uses state-of-the-art robots that clean with UV-C light and high-energy photons. Air flow has been carefully adjusted so that infectious particles don’t



NAVEEN BALLEM, MD

disseminate outside the patient room. “We’ve converted systems to negative air pressure, so that all particles get absorbed into special filters,” Dr. Ballem explains.

## COMMUNICATION COUNTS

As part of its ongoing drive to be a high reliability organization, CMMC prioritizes clear communication among medical staff and employees. Each day, often at the beginning of every new shift, every unit or department has a huddle that includes senior managers. “This is a time when anyone on the staff can speak about what will be happening that day and about any concerns they have. Everyone, at every level of the hierarchy, is empowered to communicate,” explains Dr. Ballem.

In addition, medication errors are now avoided by the use of the medical center’s Electronic Medical Records (EMR) program, which includes a digital version of prescribed medications that is available to every healthcare professional who interacts with the patient. The doses and types of medication can be double-checked with a scan of a barcode on a patient’s wristband.

In fact, safety measures are a major focus in every aspect of the medical center’s operation, as the photos on these pages show. “Patients should know,” says Dr. Ballem, “that Clara Maass Medical Center has gone above and beyond the Centers for Disease Control and Prevention guidelines to make the hospital as safe as possible.”



## WHAT EVERY PATIENT SHOULD KNOW

The best healthcare happens when patients as well as their doctors are actively involved, says Naveen Ballem, MD, Interim Chief Medical Officer and Chief Clinical Effectiveness Officer at CMMC.

“In the past few months, we’ve seen that some people are putting off going to the doctor or the Emergency Department because of fear of COVID-19,” Dr. Ballem explains. “People should not be putting off the healthcare they need, for two reasons: One, all RWJBarnabas Health facilities have taken every precaution to deliver healthcare in a safe and effective manner.

“And two, if you don’t see your doctor and keep up with your medications, you may end up with a bad health outcome that could have been avoided.”

In addition to seeking out preventive care and treatment, Dr. Ballem also recommends these proactive steps:

- Get the flu vaccine shot.
- Wear a mask when outside of your household. Make sure it covers both your nose and mouth.
- Keep six feet away from people outside of your household.
- Wash your hands regularly, scrubbing with soap for 20 seconds each time. If soap is unavailable, use a hand sanitizer that contains at least 60 percent alcohol.

To find a doctor at Clara Maass Medical Center, call  
888.724.7123 or visit [www.rwjbh.org/claramaass](http://www.rwjbh.org/claramaass).





## FOOTBALL FUN RAISES FUNDS

This summer, the first-ever Clara Maass Medical Center Virtual Sports Panel, held on August 17, replaced our beloved annual Golf Invitational. Hosted by former New York Giant David Diehl (pictured at left) and Mike Garafolo, NFL host and analyst for the NFL Network, the event gave participants the chance to get the inside scoop on the upcoming NFL season and have their questions answered live. Proceeds from sponsors and donors support the critical needs of our hospital's healthcare heroes.

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# HELPING NEIGHBORS STAY HEALTHY

## MAKE A MEANINGFUL DIFFERENCE FOR THE COMMUNITY WITH A GIFT IN YOUR WILL.

**M**arguerite D'Esposito, 83, of Belleville, recently had a stay in the Transitional Care Unit (TCU) of Clara Maass Medical Center following a procedure. What sticks with her most about the event is the care she received. "The TCU is wonderful because of the personalized care provided," she says. "The nurses are so caring and kind, and I know that they have a difficult job."

After she returned home, Marguerite changed her will to dedicate a portion of her estate to Clara Maass Medical Center, with some of the donation earmarked for the TCU and the rest for the medical center in general. "I wanted to support Clara Maass so it continues to have what it needs to provide comfort and care to patients," Marguerite says.

And that, in a nutshell, is the experience of many who choose to give a gift in their will to Clara Maass Medical Center. "These donors understand that in giving to Clara Maass Medical Center, they are helping to keep their neighbors healthy," says Celeste A. Oranchak, Vice President, Foundation and Development, for Clara Maass Medical Center.

Some people choose to give to an area of personal interest, such as cardiology or cancer care. Others choose to donate to nursing scholarships or awards for employee excellence. "Many programs rely on philanthropy to improve and sustain an extraordinary level of care," Oranchak explains.

Bequests of any size can make a difference. "We have seen all types of legacy gifts have a significant impact," says Greg Ellmer, Vice President, Gift Planning, for RWJBarnabas Health. "One person's gift can really make things better for a whole community."

Making a charitable bequest can be as simple as adding a line to your will. "We understand that making a bequest is not something that gets decided quickly or casually," Oranchak says. "Know that you can give us a call and we'll be happy to have a conversation about what works best for you."

To learn more about making a bequest to Clara Maass Medical Center, call **973.450.2277** or visit **[www.claragiving.org](http://www.claragiving.org)**.



# GOING OUT: WHAT'S SAFE FOR SENIORS?

**WHEN IT COMES TO COVID-19 AND SOCIAL CONTACT,  
IT PAYS TO WEIGH THE RISKS AND BENEFITS.**

A senior citizen who lives alone had become depressed. Her family said she seemed confused when they spoke to her on the phone. Should she allow visitors into her home to help her, or was the risk of contagion too great?

An elderly couple was being urged to attend the wedding of a dear family member, and they very much wanted to be there. Should they go?

These and similar questions are being debated daily by older adults, who are among the groups most at risk for severe illness

from COVID-19. "When stay-at-home recommendations began, many assumed that there would be a clear end date and kept a stiff upper lip as they socially isolated," says Jessica Israel, MD, Senior Vice



JESSICA ISRAEL, MD

President of Geriatrics and Palliative Care for RWJBarnabas Health and a member of RWJBarnabas Health Medical Group.

However, as questions about transmission and treatment persist, it's become clear that life will not be going back to "normal" anytime soon—and prolonged isolation has health risks as well.

"Today, older adults need to evaluate the risk of having an interaction vs. the risk of not having it," says Dr. Israel. "And we all need to be open to the fact that there's no one-size-fits-all answer for everybody."

## THREE QUESTIONS

To weigh out the pluses and minuses of a social interaction, Dr. Israel advises, ask yourself three questions:

**"What are the risks of what I'm thinking about doing?"** Will people be masked, will there be the ability to wash or sanitize hands, and will commonly touched surfaces be sanitized? Will the event be indoors or outdoors?

**"How am I feeling emotionally?"** Are you emotionally OK, or is staying inside affecting your ability to live your life successfully? For example, do you have a hard time getting motivated to get out of bed to begin your day? Have you lost interest in talking to people on the phone or in doing things you could enjoy, such as sitting outside?

**"How am I feeling physically?"** Is your health good, or do you have trouble with normal activities, such as walking from room to room? Have you been putting off care for a health condition?

Based on these considerations, Dr. Israel advised the family of the depressed older woman that she should have visitors. "It was becoming an unsafe situation, and when it comes to depression, you can't solve everything with medication," she says. "The family had been trying to protect her by staying away, but she needed to see them in person, with all appropriate safety measures taken, of course."

As for the elderly couple who were invited to the wedding, Dr. Israel asked them whether all guests would be masked and practice social distancing. The answer was no. "I had to tell them that I thought it would be too unsafe for them. They actually felt relieved," she says.

"People come to me all the time and say, 'Can I go to the hairdresser? Can I go to a restaurant that has outdoor seating?'" says Dr. Israel. "I tell them there may not be a great answer. No activity is without any risk at all, so you have to consider what you can do to mitigate that risk."

The one activity that's definitely off-limits for now is hugging grandchildren, says Dr. Israel. "We're still learning, but it looks like young people spread the virus very easily, even if they show no symptoms at all," she says. "I hate to say it, but hugging grandkids should be on hold for a while longer."

To learn more about healthcare for seniors at RWJBarnabas Health, visit [www.rwjbh.org/seniorhealth](http://www.rwjbh.org/seniorhealth).



A pregnant woman with curly hair, wearing a light blue long-sleeved shirt, is smiling and holding a white tablet computer in front of her. The background is a soft-focus indoor setting with a white brick wall and a white cushion.

# NEW MOTHERS, NEW CHALLENGES

VIRTUAL SUPPORT IS HELPING NEW AND EXPECTING  
MOMS GET THROUGH THE PANDEMIC SAFELY.

The experience of being pregnant and having a baby is different during the era of COVID-19.

In-person baby showers aren't happening. Pregnant women aren't seeing friends and coworkers on a daily basis, so they can't have the kind of "Is this normal?" discussions that tend to come up between expecting and experienced mothers.

After the baby is born, many women have to go without help from other family members because of travel restrictions or fears of bringing COVID-19 into a home with a newborn.

"Many families are trying to navigate the emotional, physical and social challenges often experienced after the birth of a baby without the traditional support of friends and family," says Suzanne Sernal, Vice President for Women's Services at RWJBarnabas Health (RWJBH). "We've been hearing that pregnant women feel anxious because they're isolated and not able to experience pregnancy and new motherhood as they'd imagined they would."

For many women, help has come in the form of virtual support groups, facilitated by experts at RWJBH hospitals. Specific topics vary from hospital to hospital, but two groups are open to all: virtual support for women who are experiencing perinatal mood and anxiety disorders (PMADs) and virtual support for breastfeeding.

"One of the most important things women learn in these groups is that the things they're feeling are normal and they can talk about them," Sernal says. "We've created comfortable, safe virtual spaces for expecting and new mothers."

## MANAGING ANXIETY

Women may come to a PMAD group feeling that they're alone, but in fact, PMAD—which used to be called postpartum depression—affects 1 in 5 pregnant and new moms. Though a very real illness, it is temporary and treatable, and peer support has been shown to be a powerful help.

In the group, new and expecting

mothers may express their sadness or anger, or feelings of being overwhelmed, without feeling judged.

"The conversations these women are having are so meaningful," Sernal says. "Some of them feel so isolated and sad at the beginning of a session, and by the end they're actually smiling and have been given a handful of resources they can immediately tap into as soon as the session is over."

Conversations can continue in a private Facebook community, and telehealth visits with a behavioral health specialist can be arranged. "We've been able to open the doors for more women to get support for mood and anxiety disorders because the virtual groups have eliminated geographic barriers," Sernal says.

## BREASTFEEDING BASICS

Breastfeeding is good for both mother and baby, but it comes with many challenges—from latching-on to milk supply, tongue-tie, pain, pumping, diet, weaning and more. In virtual breastfeeding support groups, women connect with other new mothers as well as International Board-Certified Lactation Consultants to get the answers they need.

Lactation consultants allow moms to take the lead by raising issues that are of concern to them and provide their professional advice and insight as needed.

"When I got home from the hospital, I missed the support of the great lactation consultants and nurses there," says Lauren Tran, 34, of South Orange, who had a baby boy in mid-June. "I wondered if it would feel silly to do a breastfeeding group virtually instead of in person. But that feeling went away quickly, and we are building camaraderie and getting to know each other just as we would if we were in person."

"Knowing I'm not alone in challenges I'm dealing with is so helpful," says Shlomit Sanders, 33, of Elizabeth, who gave birth in April. "There are breastfeeding behaviors in babies that first-time moms have no idea about—for example, a feeding position that



## PROTECTING MOMS AND BABIES FROM COVID-19

"The medical community is still learning about all of the potential effects COVID-19 may have on pregnancy and newborns," says Suzanne Sernal, Vice President for Women's Services at RWJBH. "What we do know is that all of the stay-safe recommendations—mask wearing, distancing, and frequent and thorough handwashing—that apply to us all are especially important for pregnant women and infants, and those who visit or care for them."

The Centers for Disease Control and Prevention recommends that mothers who come into a hospital for delivery be tested for COVID-19, even if they have no symptoms (cough, shortness of breath, fever or chills, loss of taste or smell). "At RWJBarnabas Health hospitals, we've put every precaution in place to ensure the safety of everyone in our facilities, including mothers and their birth partners," says Sernal. "So far, we've delivered more than 10,000 babies during this pandemic and have kept every one of those mothers and babies safe and healthy."

works great one time and not at all the next. It's so comforting to normalize these behaviors."

"At RWJBarnabas Health, we've made ourselves available to all of the pregnant and parenting women in our communities, and we welcome their questions," Sernal says. "We want them to have a great experience, even as they take all the measures needed to stay safe and healthy during the pandemic."

To learn more about virtual breastfeeding support, visit [www.rwjbh.org/breastfeedingsupport](http://www.rwjbh.org/breastfeedingsupport). To learn about the PMAD group, visit [www.rwjbh.org/PMADsupport](http://www.rwjbh.org/PMADsupport). To learn more about maternity care at RWJBarnabas Health, visit [www.rwjbh.org/maternity](http://www.rwjbh.org/maternity).



# RADIATION ONCOLOGY: IT TAKES A TEAM

PATIENTS IN THE RWJBARNABAS HEALTH SYSTEM HAVE ACCESS  
TO THE MOST ADVANCED TREATMENTS FOR CANCER.



RWJBarnabas Health, together 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. For more information, call 844.CANCERNJ or visit [www.rwjbh.org/beatcancer](http://www.rwjbh.org/beatcancer).

Radiation oncology, which uses precisely targeted doses of high-energy radiation to eliminate cancer cells, is an effective treatment for a wide range of cancers.

Within the field, though, are numerous treatment options, and that leads to crucial questions. Would a patient's cancer respond best to external beam radiation therapy, in which high-energy rays are directed from the outside into a specific part of the body? Or internal radiation, which involves putting a source of radiation inside the patient's body? And within those two categories, which specific treatment is most likely to be more effective for a particular patient?

Cancer patients in New Jersey can be assured that they have the best minds in the field on their cases, thanks to the unique partnership between RWJBarnabas Health (RWJBH) and Rutgers Cancer Institute of New Jersey, the state's only National Cancer Institute-Designated Comprehensive Cancer Center.

"All of the radiation oncology doctors at the 11 hospitals in the RWJBarnabas Health system and Rutgers Cancer Institute consult with each other. We don't hesitate to pick up the phone," says Bruce Haffty, MD, FACR, FASTRO, FASCO, Chair of Radiation Oncology for Rutgers Cancer Institute and for Rutgers Robert Wood Johnson Medical School and New Jersey Medical School.

"Moreover, we all know what technologies are available throughout the system. So if a patient at one of our cancer centers needs a treatment that's available at Rutgers Cancer Institute or any RWJBarnabas Health facility,

we ensure that treatment can be offered based on the individual patient needs. If a clinical trial at any of those places could benefit a patient, his or her oncologist will know about



BRUCE HAFFTY, MD

it and the patient will have access to it," explains Dr. Haffty, who is also the Associate Vice Chancellor for Cancer Programs.

"In this way, we can provide a seamless continuity of advanced care that's of great benefit to our patients," he says.

### CONSISTENT CONNECTION

Physicians at RWJBH and Rutgers Cancer Institute represent a vast array of cancer specialties. "A physician can call a specialist at another RWJBarnabas Health hospital to consult on any case," Dr. Haffty says. "For example, I get calls all the time about cases in my specialties, breast cancers and head and neck cancers. The same kind of discussions go on among experts in gastrointestinal, brain, blood cancers—all kinds of subspecialties within radiation oncology."

Such consultations aren't left to chance. Cancer specialists at RWJBH and Rutgers Cancer Institute meet regularly to discuss their cases. "We've implemented peer-review planning sessions, where every new patient case at each facility is peer-reviewed by multiple physicians," says Dr. Haffty. "Physicians share their ideas about what treatments might best benefit the patient—perhaps Gamma Knife, CyberKnife, proton therapy or other sophisticated radiation therapy techniques. Very few health systems have all of these options available."

Physicians and patients also have the benefit of the most up-to-date national research and the latest clinical trials. As one of just 51 U.S. institutions designated a Comprehensive Cancer Center by the National Cancer Institute, Rutgers Cancer Institute is a leader in conducting cancer research and translating scientific discoveries into novel treatments.

"The partnership between Rutgers Cancer Institute and RWJBarnabas Health is unique in that it offers the latest technology available in combination with all of our subspecialty expertise," says Dr. Haffty, "and anybody who walks in the door anywhere in the system has the benefit of all of it."



### ADVANCED TREATMENTS

Radiation oncologists at Rutgers Cancer Institute of New Jersey and throughout the RWJBarnabas Health system are experts in the most advanced radiation treatments available, including but not limited to:

**BRACHYTHERAPY:** In this type of radiation therapy, the radioactive source is delivered through seeds, ribbons, catheters or wires placed within or just next to a tumor.

**CYBERKNIFE:** This robotic radiosurgery system is noninvasive and delivers intense, highly focused doses of radiation directed by a sophisticated computer guidance system.

**GAMMA KNIFE RADIOSURGERY:** This treatment uses multiple beams of radiation focused with extreme accuracy on the tumor or area to be treated. With Gamma Knife, no incision is required to treat tumors and other abnormalities of the brain.

**INTENSITY MODULATED RADIATION THERAPY (IMRT) AND IMAGE GUIDED RADIATION THERAPY (IGRT):** These therapies utilize advanced imaging and computerized radiation delivery techniques that provide high-resolution, three-dimensional imaging to pinpoint tumor sites while protecting healthy tissue.

**PROTON BEAM THERAPY:** This type of therapy uses protons (subatomic particles with a positive electric charge) to precisely target locations within tumors while protecting surrounding tissues and organs.

Your cancer care is too important to wait. Our cancer centers and our hospitals have taken every precaution as we continue to provide the most advanced cancer care. To schedule an appointment with one of our cancer specialists, call **844.CANCERNJ (844.226.2376)**.





Aiden Shanklin, left, has a custom treatment plan designed by his doctors to alleviate symptoms caused by a genetic mutation.

muscle tone or motor skills caused by damage to or abnormal development of the brain. CP symptoms often include exaggerated reflexes, floppy or rigid limbs and involuntary motions.

Aiden lived with this diagnosis for six years. Then he was taken to see Adam Aronsky, MD, a developmental and behavioral pediatrician at CSH in Mountainside. Dr. Aronsky felt that Aiden's clinical picture did not align with those of CP patients and suggested that he undergo genetic testing. That led to the discovery that Aiden actually had a GRIN2B mutation, a genetic disorder with symptoms very similar to those of CP.

"Because the symptoms of CP and GRIN2B-related syndrome are so similar, our treatment plan has not changed," Nicole says. "However, the new diagnosis has provided a lot of answers to my questions."

Aiden now sees three physicians at the CSH Mountainside location who work together to help with his treatment plan. Dr. Aronsky treats Aiden's bone and muscle function. JenFu Cheng, MD, a physical medicine and rehabilitation physician (physiatrist), provides Botox injections that assist with the parts of Aiden's body that have high muscle tone (spasticity). Neurologist Andrea Richards, MD, assesses any episodes he may have. For example, when there was concern that a laughing condition was a sign of a seizure, she was able to determine that it was just part of Aiden's personality.

"This experience has taught me that it's OK to ask questions, even if you think they don't make sense or seem silly," Nicole says.

"I encourage other families going through similar experiences to go with their gut, ask questions, research everything you can and share your experiences with others. You never know who will benefit from your story."

To learn more about Children's Specialized Hospital, call **888.244.5373** or visit **[www.childrens-specialized.org](http://www.childrens-specialized.org)**.

# EVERYDAY JOYS

**EXPERT CARE PROVIDES A YOUNG PATIENT WITH THE BEST POSSIBLE QUALITY OF LIFE.**



**Children's Specialized Hospital®**

An RWJBarnabas Health facility

At 8 years old, Aiden Shanklin is wheelchair-dependent, has a sensory processing disorder and functions at the level of a 1-and-a-half-year-old.

He also loves to laugh, listen to the acoustic guitar, ride horseback and swim or run his hands under water. Aiden is doing these things and living his best possible life, thanks to the loving care of his family and the expertise of doctors at Children's Specialized Hospital (CSH).

"Children's Specialized Hospital has provided us with such excellent care. I couldn't ask for a better team for Aiden," says his mother, Nicole. "They have given

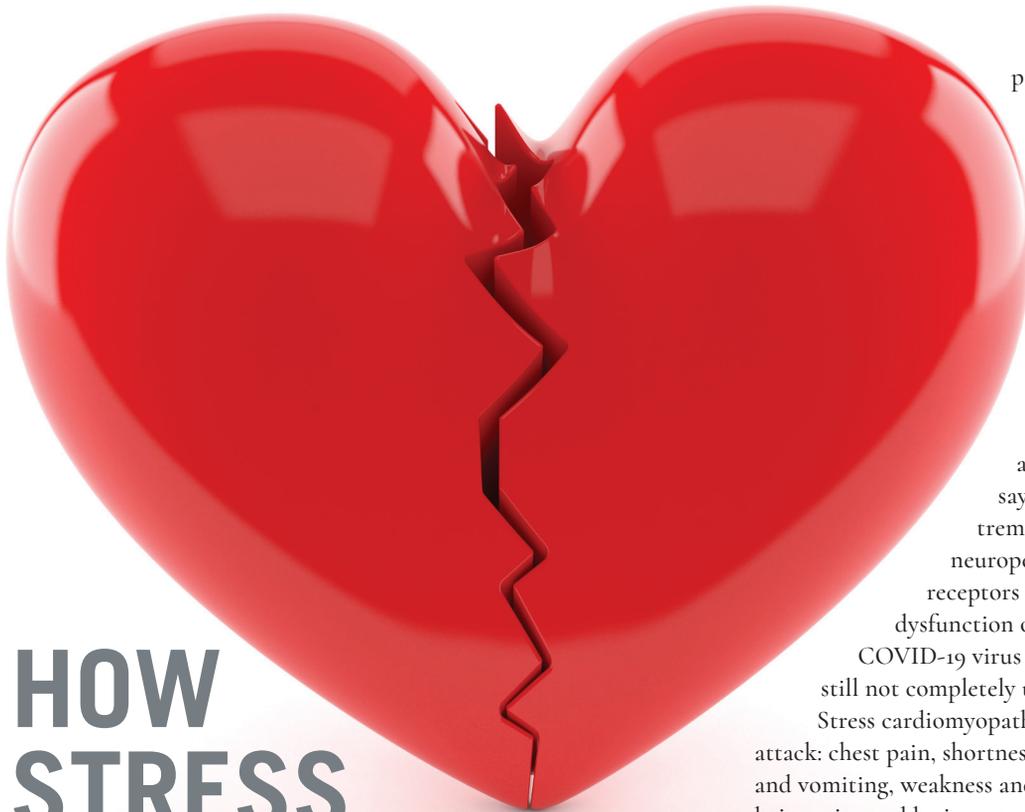
us the opportunity to provide him the best quality of life that we can."

## QUESTIONS ANSWERED

When Aiden was 9 months old, Nicole became concerned because he had trouble holding his head up and had no trunk control. "When I would go to lift him, it felt as if I were picking up a rag doll," she says.

A pediatrician diagnosed Aiden with cerebral palsy (CP), a disorder of movement,

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 developmental and behavioral issues, like autism and mental health conditions. We have convenient locations throughout the state: Bayonne, Clifton, East Brunswick, Egg Harbor Township, Hamilton, Jersey City, Mountainside, New Brunswick, Newark, Toms River and Warren.



# HOW STRESS HARMS THE HEART

**HEART MUSCLE DISEASE IS INCREASING, AND EXPERTS THINK EMOTIONAL DISTRESS IS A MAJOR CAUSE.**

If someone says their heart is broken, you instantly know what that means: The person is feeling deep grief, usually from the loss of a love relationship or the passing of a loved one.

The pain is emotional, but it can feel—and be—physical as well.



FADI CHAABAN, MD

In fact, cardiac specialists know extreme emotional stress can actually “break” a heart’s functioning by reducing the ability of heart muscles to pump, thereby depriving the brain and organs of oxygen-rich blood. This is called stress cardiomyopathy, also known as “broken heart syndrome,” and cases have been on the rise.

“Recent data show an increase of four times the number of stress cardiomyopathy cases compared to before the COVID-19

pandemic,” says Fadi Chaaban, MD, Director and Chief of Cardiology at Clara Maass Medical Center and a member of RWJBarnabas Health Medical Group.

## HOW IT HAPPENS

“The mechanism for triggering stress cardiomyopathy is not completely understood, but it’s possible that there is a link between the brain and the heart where you have a high activation of neurons in the brain stem,” says Dr. Chaaban. “These in turn secrete a tremendous amount of stress hormones and neuropeptides, which could be captured by the receptors of the heart, leading to a temporary dysfunction of an area in the heart.” However, the COVID-19 virus attacks the heart in many ways that are still not completely understood, he notes.

Stress cardiomyopathy has the same symptoms as a heart attack: chest pain, shortness of breath, sweating, dizziness, nausea and vomiting, weakness and pounding of the heart. In addition to being triggered by intense emotion, it can be caused by significant physical stress, such as a severe asthma attack or a broken bone.

“Many times, a patient comes in with what presents as a heart attack, and we discover it was actually stress cardiomyopathy only after further testing, such as an echocardiogram or angiogram,” says Dr. Chaaban.

Women, especially those over 50, seem to be more at risk of emotion-caused stress cardiomyopathy. When men have the condition, it is more often caused by physical stress.

## MANAGING STRESS

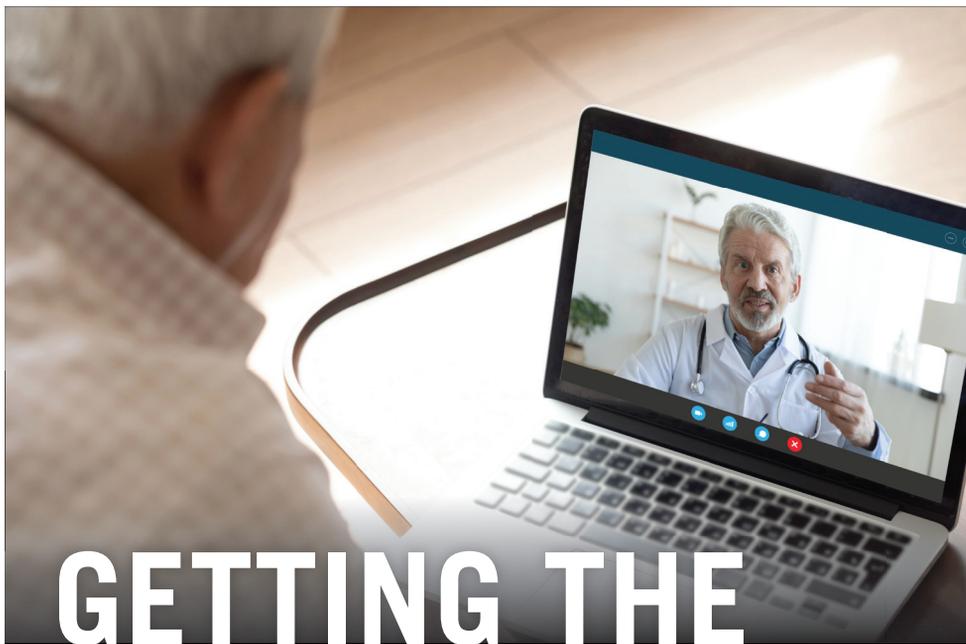
“We don’t know why some people get stress cardiomyopathy and others don’t, but what we can tell patients is that they are highly likely to fully recover,” says Dr. Chaaban. “We generally need to provide supportive treatment for several weeks, with medications to help improve blood pressure, remove fluid from the lungs and prevent blood clots.” For very sick patients, a ventilator or an intra-aortic balloon pump may be needed.

Managing stress is the most important thing anyone can do to protect the heart, he says. “The best way to de-stress yourself is to live a healthy life—stay active, eat well and maintain a healthy weight as well as a positive attitude,” he says. “Life is stress, but you can learn not to take things personally and become more resilient to whatever life throws at you.”

The most urgent message Dr. Chaaban has is for people to pay attention to their symptoms. “If you’re stressed out and suddenly feeling chest pain, don’t ignore it,” he says. “Get checked as quickly as possible. Call 911 or go to the Emergency Department. That’s a controlled environment where we can help you and support you until the stress has passed and your heart has healed.”

Your heart doesn’t beat just for you. Get it checked. To find a cardiac specialist at RWJBarnabas Health, call **888.724.7123** or visit **[www.rwjbh.org/heart](http://www.rwjbh.org/heart)**.





# GETTING THE MOST OUT OF TELEHEALTH

**VIRTUAL VISITS WON'T REPLACE IN-PERSON APPOINTMENTS, BUT THEY CAN PROVIDE SIGNIFICANT BENEFITS.**

Not long ago, virtual doctor visits—appointments conducted via video or phone—were relatively rare. Now they're commonplace, and they're here to stay. "The pandemic gave telehealth a jump-start, but I believe it will become a permanent part of the healthcare delivery system," says Andy Anderson, MD, President and Chief Executive Officer of the combined medical group of RWJBarnabas Health and Rutgers Health. "We are seeing

ever-increasing use of our RWJBarnabas Health TeleMed services."

Telehealth can be used for primary and routine medical care, as well as for some aspects of specialty care. "There's still enormous value in

face-to-face appointments and physical examinations, and that will never go away," says Dr. Anderson. "But telehealth has many uses, both for convenience and for making and maintaining the doctor-patient connection." Here, he explains why.

## **Can a wellness visit be done through telehealth?**

A good deal of preventive screening can be done this way. A doctor can ask, "Have you had your mammogram? Have you scheduled your colonoscopy? What kind of diet are you consuming? Are you sleeping well?" Patients can self-report their weight and, if they have a blood pressure cuff at home—as many patients do—their blood pressure numbers. A doctor can screen for cognitive issues, give referrals, advise on a plan for self-care and recommend future tests and appointments.

Telehealth is not, clearly, a full substitute for an in-person visit and

examination. But it is a valuable way for people to get many of their healthcare needs met.

## **Besides wellness visits, what other kinds of primary care can be conducted virtually?**

If you have an acute issue—for example, a cut or sprain, or a possible urinary tract infection—telehealth is a way to sort out the next steps, such as a doctor office visit, trip to urgent care or a prescription.

Also, aspects of care for chronic conditions like diabetes, heart failure and high blood pressure can be managed via telehealth. A doctor can ask about blood sugar levels, about symptoms and about medication side effects. The physician can see certain symptoms over video, such as swelling in legs.

Chronic disease management should be done in a combination of in-person and telehealth visits. But many patients have been very happy to have routine check-ins take place in a video visit, sparing them time they'd have to spend traveling to the doctor's office.

## **When an in-person visit isn't practical, why not just have a telephone call?**

We encourage a video visit whenever possible, and fortunately, the technology for having one has become very simple to use. There's a huge visual component to communication—body language, expression. It's important to see the patient and have them see you when you're counseling or coaching them, or asking about side effects.

## **Are there any special issues for children?**

For kids, much of their preventive care has to do with getting vaccines on schedule, so they'll need in-person visits more than most adults.

## **Can telehealth be used for COVID-19 screening?**

Absolutely. In fact, it's a very important screening tool because, ideally, you don't want a person to show up to a medical office and potentially expose other people. An initial screening can be done effectively over the phone or via a video call by asking about the patient's health history and symptoms. Then prescriptions, tests or other next steps can be arranged as needed. The same is true, by the way, for people who have a bad cold or the flu.



**ANDY ANDERSON, MD**

To learn more about RWJBarnabas Health TeleMed®, call 888.724.7123 or visit [www.rwjbh.org/telemed](http://www.rwjbh.org/telemed).



# COMFORT FOOD THAT'S DIABETES-FRIENDLY

## DELICIOUS TIPS FOR KEEPING YOUR BLOOD SUGAR UNDER CONTROL

When the weather cools down, it's natural to crave warm, hearty dishes. Fortunately, with a few simple recipe changes, your favorite comfort food can also be diabetes-friendly.

"Add fiber-rich carbohydrates, such as the beans and vegetables in this vegetarian chili recipe, to keep you feeling satisfied," advises Dorothy Palen Szast, RDN, CDCES, Diabetes Education and Prevention Coordinator at Clara Maass Medical Center. "It's also a good idea to experiment with flavors and spices, such as the balsamic vinegar and chipotle pepper in this recipe, to keep your food interesting."

Other simple swaps include switching to low-fat dairy items; choosing lean cuts of meat, such as chicken breast; and, when possible, cooking with liquid fats (avocado and olive oils) instead of solid fats such as butter, lard or shortening.

"These steps, in addition to keeping up with regular physical activity, will help control your blood sugar during the fall and winter months and holidays," Szast says.



## VEGETARIAN CHILI

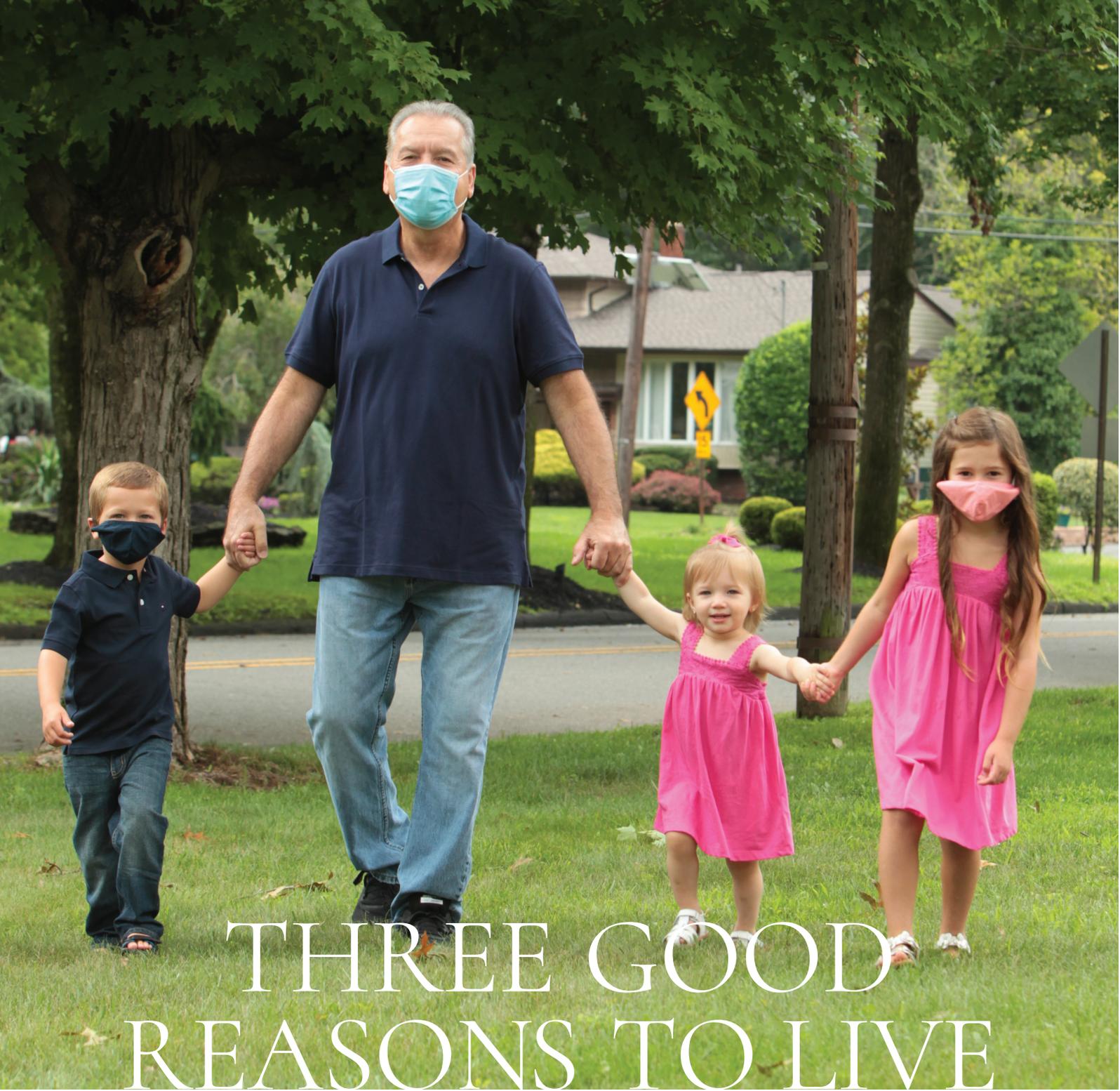
### INGREDIENTS:

- 2 cups diced onion
- 1 cup diced celery
- 1 cup diced bell pepper
- 2 cloves garlic, minced
- 2 tablespoons water
- 2 jalapeño peppers (or amount to taste), diced and seeded
- 2 quarts crushed tomatoes (no salt added)
- 2 tablespoons ground cumin
- 2 cups cooked pinto beans (no salt added; if canned, rinse under water)
- 1 tablespoon chipotle pepper (or smoked paprika)
- 1 tablespoon ground black pepper
- 1 tablespoon balsamic vinegar
- 1 tablespoon dried oregano
- Optional garnishes: chopped cilantro, sliced avocado, plain nonfat Greek yogurt

### DIRECTIONS:

- In a stockpot over low heat, cook onion, celery, bell pepper and garlic in 2 tablespoons of water until onions become translucent, about 10 minutes.
- Add the remaining ingredients. Cover and simmer for 1 to 2 hours, stirring occasionally. If chili becomes too thick, thin with a little water.
- Garnish and serve.

Clara Maass Medical Center offers Diabetes Self-Management Education classes, both in person and through telehealth, tailored to individual patient needs. Topics include counting carbohydrates, dosing insulin, monitoring blood sugar levels and much more. A physician prescription is required. To learn more, call **888.724.7123**.



# THREE GOOD REASONS TO LIVE

**THANKS TO TIMELY  
CARDIAC CARE,  
A COLONIA MAN  
IS HERE FOR HIS  
GRANDCHILDREN.**

Last year, Mark Christian, 62, of Colonia, knew something was wrong. He'd long had high blood pressure, but recently he had begun to have dizzy spells and weakness. Mark went to his primary care physician, who did a nuclear stress test, put him on a Holter monitor (a portable device that measures heart activity) for a time and prescribed a new blood pressure medicine.

During the week before Easter 2019,

he and his wife, Mary Jane, went to the supermarket one night to buy food for the family's holiday dinner. Mark felt so lightheaded that he had to leave the supermarket and go sit in the car. He figured he simply had to wait for his new medicine to begin to take effect.

Mary Jane Christian, RN, BSN, MS, wasn't so sure. She works as Administrative Director of Compliant Documentation for the northern region of the RWJBarnabas

Health system, of which Clara Maass Medical Center (CMMC) is a member. Mary Jane told CMMC cardiologist Frank Iacovone, MD, about Mark's symptoms. "I'd like to see him here right away," said Dr. Iacovone.

Two aspects of Mark's condition concerned Dr. Iacovone: "Mark had been given water pills [diuretics] to take, but when I examined him, his lungs were clear and there were no signs of excess water volume," he says. "The fact that he was passing out and also experiencing shortness of breath indicated a blockage in his arteries."

Mark was scheduled for a cardiac catheterization the very next day. In this procedure, a long tube is inserted in an artery, either through the leg or arm, and threaded to the heart.

Mark's procedure indicated three major blockages in the right coronary artery. On the afternoon of Good Friday, Dr. Iacovone placed three stents (small tubes) in Mark's heart and adjusted his medications. Mark was admitted to the Intensive Care Unit for monitoring.

"The morning after the stent procedure, I felt relief in my chest—as if somebody had had their arms tightly around me, and that was gone," Mark remembers. "I wasn't dizzy or short of breath. It had been so long since I'd felt that good."

"The right coronary artery supplies the electrical system of the heart," Dr. Iacovone explains. "If the heart is not getting enough oxygen-rich blood through the artery, the heart rate slows down, and the patient passes out."

By Monday, Mark was experiencing dizziness again. Joaquim Correia, MD, an

electrophysiologist and cardiologist at CMMC, walked him around the ICU, but Mark's heart rate continued to be low—a sign the heart's electrical system was not yet working properly.

## TURNING THE CORNER

Dr. Correia and Dr. Iacovone agreed that Mark should have a pacemaker implanted.

This small device, implanted in the chest, uses electrical pulses to help the heart beat at a normal rate.

The procedure was done on the Tuesday after Easter, which happened to be Mark's 61st birthday. The cath lab staff made sure to sing "Happy Birthday," a simple song that now carried much greater meaning for him.

In cardiac rehab, Mark was nervous about doing something that would hurt his pacemaker, but the cardiac rehab nurses talked him through it.

"Throughout this whole ordeal, I've been saying that Clara Maass is the place I want to be for treatment," Mark says. "I was adamant that I did not want to be transferred anywhere else. Everybody there was incredible—the doctors, the people in the cath lab, nurses, physical therapists, cardiac rehab nurses, pharmacists, security guards. Everybody communicated clearly about what was going on, provided excellent care and made me feel comfortable. I knew I was in good hands and would be fine."

"My background is in critical care, so I understood what was happening," Mary Jane says. "But it's very different when your husband is the patient and is faced with a life-threatening situation."

"The staff at Clara Maass did everything right, from admission to discharge, the entire time Mark was an inpatient. That," she says with a smile, "is a big compliment, coming from a nurse."

Mark is now back to his job as a supervisor in global logistics. He is eating healthier, has lost weight and continues



Opposite page, Mark Christian with his grandchildren, Jackson, Charlotte and Emilie. At left, with his wife, Mary Jane.

to exercise. He completed a follow-up stress test in June 2020 and was grateful for excellent results.

## LESSONS LEARNED

"If Mary Jane hadn't scheduled me for the appointment with Dr. Iacovone, I would have waited until my next appointment with my regular doctor, which would have been on June 8th, 2019," Mark says. "But my new doctors tell me I probably wouldn't have lasted for another week."

The Christians have taken important lessons from this close call. "From now on, I wouldn't hesitate to go for a second opinion. I was a good patient, doing what I was told and going along with the program," Mark says. "But now I realize that my body was telling me something major was wrong, and the medicines I was taking weren't helping."

"Listen to your body, speak up for yourself and don't be afraid to go for a second opinion," advises Mary Jane.

"If it wasn't for Mary Jane's action, I wouldn't be here today," says Mark. "I'm so grateful to be here for my wife, my children and my wonderful grandchildren."

"When we got married, I told Mary Jane that I wanted to be sure my grandchildren would have grandparents around, because I never had them," he says. "I love my three grandchildren with all of my heart, and now there's another one on the way. I want to be here to spend time with them and make memories, whether it's running around with them, getting down on my knees to play or making them laugh. Now it's all good. We have a lot of life ahead of us, thanks to a second opinion leading to a second chance."



JOAQUIM CORREIA, MD

FRANK IACOVONE, MD

Your heart doesn't beat just for you. Get it checked. To find a cardiac specialist at Clara Maass Medical Center, call **888.724.7123** or visit **www.rwjbh.org/heart**.





Bedzamba in Branch Brook Park, not far from her Belleville home

# 'I'M GOING TO EMBRACE EVERY MOMENT'

A BREAST CANCER SURVIVOR SHARES HER ADVICE FOR STAYING POSITIVE DURING TREATMENT.

**B**edzaida Concorso, 55, of Belleville, has been through a lot. A breast cancer diagnosis. Chemotherapy. Surgery during the COVID-19 pandemic, when no one in her family was allowed to visit her in the hospital. More chemotherapy and radiation therapy that led to her skin blistering and peeling.

Throughout, she has fought to stay upbeat. “I love to dress cute. My doctor told me she loved how I came into the office so positive, with lipstick and earrings,” Bedzaida says. “A lot of people see a cancer diagnosis as a death sentence, but it really doesn’t have to be. You have to have the mindset of, ‘I’m gonna get up and fight every day.’”

“I know that’s not easy, and no one with cancer can be positive all the time. But I hope what I’ve learned through my experience can help somebody else.”

## TREATMENT CHOICES

Bedzaida first felt a lump in her left breast while on vacation in Puerto Rico in May of 2019. Because she was in the middle of a transition with her health insurance, she didn’t have a biopsy until August of that year. The test confirmed that the lump was stage 2 cancer.

“It was a shock, and it was hard for me to tell my parents and three adult children,” Bedzaida recalls. “I wasn’t sure what to do. I even asked the doctor, ‘What if I don’t do anything?’ She told me it was my choice to make.”

“Every breast cancer patient has a journey ahead that’s not going to be easy,” says Bedzaida’s doctor, Maria Kowzun, MD, a surgical oncologist at Clara Maass Medical Center (CMMC). “In treatment of breast cancer, there is room for individual preferences to be accommodated, especially now, with so many more treatment options available. As doctors, we make our best recommendations, but at the end of the day, every decision is up to the patient.”



MARIA KOWZUN, MD

Bedzaida opted to go with Dr. Kowzun’s plan. Because the cancer was triple-negative and aggressive, Dr. Kowzun recommended neoadjuvant

chemotherapy, a type of treatment in which chemotherapy medications are given before a decision is made about surgery.

“If the tumor responds, simpler surgery may be possible, and an extensive surgery like a mastectomy or a complete axillary dissection may not be necessary,” Dr. Kowzun explains. “If it doesn’t respond, surgery will give us a better idea of what kind of regimen she might respond to post-surgery to prevent the cancer’s recurrence.”

Bedzaida’s hair began to fall out from the chemotherapy, so she shaved it off. Unfortunately, the tumor did not shrink. Surgery was scheduled for March 16. “It turned out to be the first day that COVID-19 precautions said no visitors were allowed,” Bedzaida recalls. “My mom had flown in from Puerto Rico, my kids and my niece were all ready to stay with me, but they couldn’t. That was a heartbreak.”

Dr. Kowzun removed the tumor in a lumpectomy procedure and also removed 12 lymph nodes to which it had spread. Bedzaida was prescribed a course of radiation therapy through June. “The radiation oncology team was so nice and so good that they made things easier, even though my skin peeled and was raw,” she says. Bedzaida was also given an oral chemotherapy treatment, which will end in November.

“Bedzaida basically required everything possible in terms of treatment options,” says Dr. Kowzun. “But she never gave up hope.”

## MOVING AHEAD

“It’s been an experience and it’s been mind-draining,” Bedzaida says, “but I had to shift my thought process because thinking negative wasn’t going to help me heal.”

As soon as she could, she went back to her job as a freight forwarder dealing with U.S. Customs. Because everyone else in her office was working at home, she could easily practice social distancing. “I’m not going to lie, it was hard, and I was so tired at night. But I love getting up in the morning, getting dressed, putting on



## A NEW BREAST CENTER

The Center for Breast Health and Disease

Management at Clara Maass Medical Center is now open at 36 Newark Ave., Suite 132, in Belleville. “We are located next door to a radiology treatment center and are providing coordinated care for our patients with the help of an oncology nurse navigator,” says Maria Kowzun, MD, surgical oncologist. “We’ll be creating support groups and a virtual community as we provide comprehensive care for breast cancer patients.”

lipstick and going to work,” she says. “This way, my home remains my sanctuary.”

Having breast cancer, Bedzaida says, has changed her thinking. “You don’t realize how precious life is until you think you might lose it,” she says. “Was it traumatic? Yes. Would I wish this experience on anybody? No. But it has opened my eyes. I’m going to embrace every single moment.” Bedzaida acknowledges that she’s gone through times of anger, fear and self-pity. “That’s normal,” she says. “But

I’ve always been a little tough, hardheaded.”

Her family, she says, has been her support group. “You need somebody you can call and cry to and say ‘I’m scared,’” Bedzaida says. “My sister has been my anchor and so have my mother and kids.”

She hopes that other cancer patients who hear her

story are encouraged. “Keep your soul healthy as well as your body,” Bedzaida says. “And music—you’ve gotta have music!” For Bedzaida, that means staying tuned to her Spanish-language Christian music radio station.

“I’m determined to appreciate every single day I have on this earth, whether I’m sick or not,” Bedzaida says. “I’m never going to be the same—and I don’t want to be.”

**\***  
RWJBarnabas Health and Clara Maass Medical Center, 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 latest treatment options. For more information, call 844.CANCERNJ or visit [www.rwjbh.org/beatcancer](http://www.rwjbh.org/beatcancer).

# FINDING FITNESS

AFTER BARIATRIC SURGERY, THESE MOTIVATED PATIENTS DISCOVERED A NEW ZEST FOR EXERCISE.

Prior to her bariatric (weight loss) surgery, Joaly Sanes, 53, of Belleville, weighed 225 pounds and was often asked by slender friends, “Why don’t you just exercise?”

“That made me feel guilty,” she remembers. “At my size, I couldn’t do much. I was in such pain from arthritic hips and sore feet. I wasn’t even able to get on a bike.”

“Weight gain is a real catch-22. The more pounds you add, the less ability you have to exercise,” says Naveen Ballem, MD, Interim Chief Medical Officer and Chief Clinical Effectiveness

Officer at Clara Maass Medical Center. “Bariatric surgery is a tool that can help people lose weight. As they take the weight off, patients feel great, have less pain and are more mobile. They become more active and make better food choices, and they snowball into a good place.”



NAVEEN BALLEM, MD



## WALKING AND WORKING

Jacqueline Rettschlag, 44, of Kearny, was a stay-at-home mother of three who had reached 400 pounds when she decided to have bariatric surgery.

“I basically did no exercise,” she says. “I didn’t even leave the house. I began to feel I wasn’t giving my kids the life they deserved.”

Post-surgery, Jacqueline slimmed down to 198 pounds. She began walking a half hour daily, often with her two daughters.

With her new energy, she did volunteer work and also found a job at her children’s school that keeps her on her feet for four hours a day.

“That’s exercise, too,” she says. “I could’ve accomplished none of this before. Surgery was the best thing I’ve ever done.”



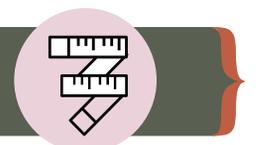
## ROLLERBLADING AND BIKING

Exercise, once out of reach, becomes a source of energy and pride for post-bariatric patients like Joaly Sanes. Down to 140 pounds after surgery, Joaly joined a gym. But, like many others during the COVID-19 pandemic, she has had to find other methods to remain fit.

“I have a teenage daughter, but I couldn’t do many activities with her when I was heavy,” Joaly says. “Now we exercise together, with daily walking or rollerblading. And I can ride my bike like when I was a kid.”

“Exercise has given me so much energy, and my arthritis pain is gone. My daughter now says she wants to be a nutritionist in order to help people like me.”

To learn more about bariatric surgery at Clara Maass Medical Center, visit [www.rwjbh.org/weightloss](http://www.rwjbh.org/weightloss).



## A PASSION FOR RUNNING

For Joseph Rosania, 33, of Morristown, regular exercise ended at the same time as his education. After graduating from college, where he was active in sports, Joseph embarked on a busy career. “I was on the road all the time, in hotels, eating in restaurants,” he says.

Over the years, his weight continued to increase, from 250 to over 400 pounds. When his father, a chiropractor, suggested he see a bariatric surgeon, Joseph met with Dr. Ballem and committed to losing weight.

Joseph went down to 190 pounds, and he became involved in daily circuit training. Now he is a runner. “I’ve been doing 5Ks and half-marathons regularly. I never liked running before. So I think maybe they gave me a lobotomy along with the bariatric surgery, because now I find it fun!”



## EXERCISE AFTER WEIGHT LOSS SURGERY

Bariatric surgery alters the digestive system and metabolism, but it’s not the end of the weight loss journey. It’s a first step toward a new way of life that includes healthy eating and exercising.

Often, it’s a necessary step. Many people who are severely obese (over 50 pounds overweight or with a BMI, or body mass index, over 35) find that their bodies are resistant to long-term weight loss through diet and exercise. In fact, the National Institutes of Health Experts Panel has stated that in such cases, long-term weight loss is nearly impossible by any means other than bariatric or metabolic surgery.

“There’s no one-size-fits-all exercise regimen for after surgery,” advises bariatric surgeon Naveen Ballem, MD. “Work closely with your bariatric surgeon and team to find the right exercise plan for you.”

## EXERCISE EVERYWHERE

Jenifer Felix, 44, of Bloomfield, weighed 197 pounds when she opted for bariatric surgery. A single mother of four, Jenifer works two jobs and has a hectic life. However, she makes time for exercise to maintain her 60-pound weight loss after bariatric surgery.

“Before COVID-19, I used to go to the gym, but now I use whatever I can in the house: the kitchen chair or my exercise ball,” she says. “I do push-ups, squats, and sit-ups. I have four daughters, and we make exercise a fun, competitive activity. We walk to the park or jog regularly together. There’s so much you can do if you remain positive and motivated.”



## CRUNCHES AND PUSH-UPS

Marissa and Thomas Patti of Belleville gained weight together during their marriage and lost it together last

year, when they both underwent bariatric surgery. Amazingly, they both weighed almost exactly the same—just over 310 pounds—pre-surgery and ended up in the low 190s afterward.

Neither Marissa, 35, a manicurist, or Thomas, 38, a police officer, had exercised before, but that changed immediately after surgery. When the gym they were going to had to close, they began a regular walking regimen: two to three miles at least five days a week, as well as sit-ups, crunches and push-ups.

The results are remarkable. “I can run up the stairs now without losing my breath—which is important for a police officer,” Thomas says.

But according to Marissa, it’s their 6-year-old son who most reminds them of their progress. “When he sees old photos of me, he says, ‘That’s a big lady, that’s not Mommy,’ and I tell him, ‘No, that once was me.’”



# Clara Maass Medical Center: Ranked among the top 5% of safest hospitals in the nation two years in a row.



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