

IT'S ABOUT THE POWER OF **YOU**

Winter 2022

HEALTH **U**



Hackensack
Meridian *Health*

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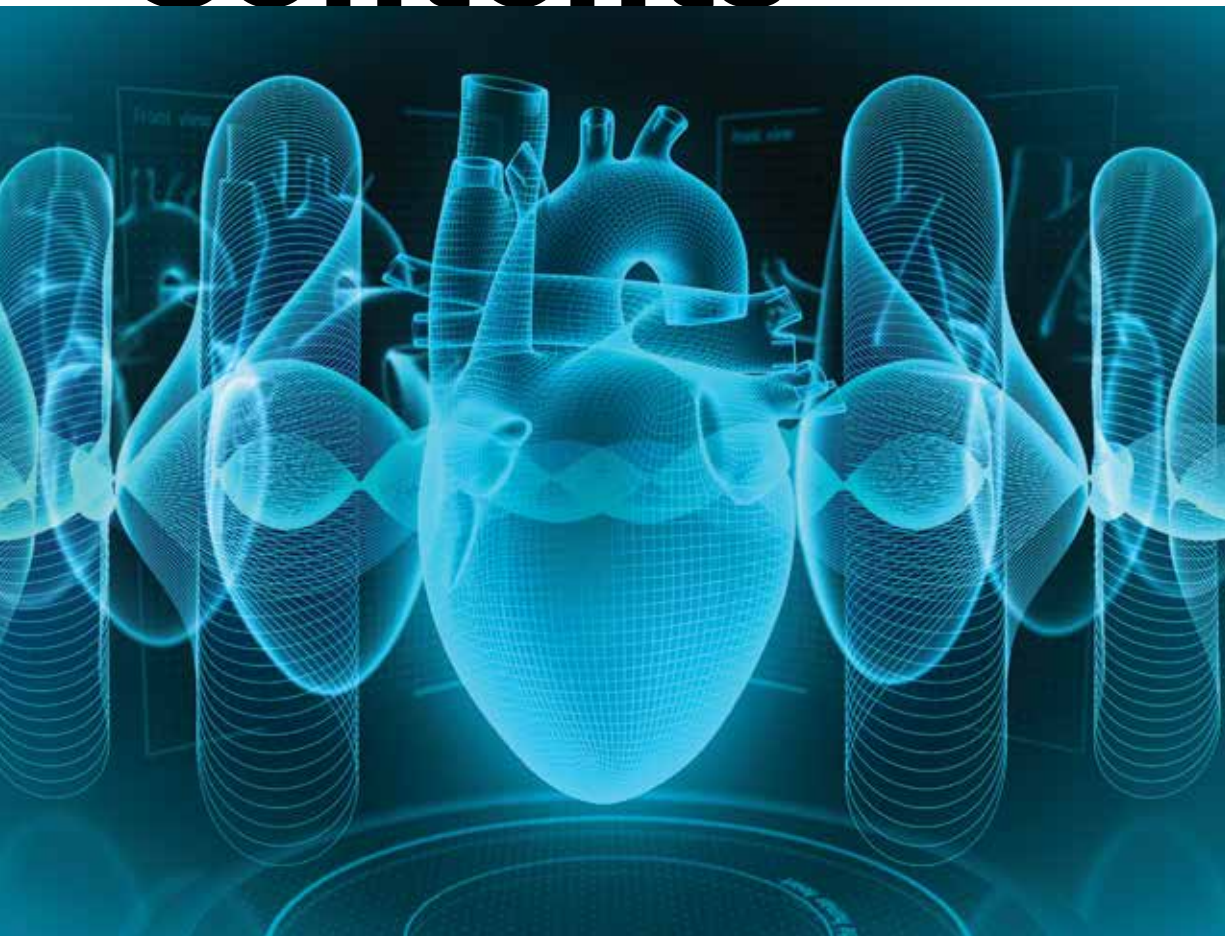
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Doctors at Hackensack University Medical Center and Jersey Shore University Medical Center have a new tool in their arsenal to prevent heart disease.



Tune in to our HealthU podcast!
For more details, visit
[HMHforU.org/Podcast](https://www.HMHforU.org/Podcast).



Learn three tips to avoid slipping on the ice this winter at [HMHforU.org/Ice](https://www.HMHforU.org/Ice).

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Our expert debunks common false claims
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What are the worst foods to eat for your health?
Find out at [HMHforU.org/WorstFoods](https://www.hmhforu.org/WorstFoods).

HealthU is a 2021 APEX
Award winner and a
2021 Content Marketing
Awards finalist



Visit [HMHforU.org](https://www.hmhforu.org) for these and other great health care stories.

What's Your Resolution?

This time of year, many of us make promises to ourselves to live healthier lifestyles in the coming months, whether through exercise or diet.

There is no denying the tremendous impact of a healthy diet and regular exercise on our overall health. If you need a little inspiration for setting some unique goals for the new year, turn to the back of this magazine for our ideas. Or, check out tips for a great workout for your heart on page 5 and what you should know about intermittent fasting on page 7.

Aside from diet and exercise, an equally important aspect of a healthy lifestyle is getting the right health screenings at the right time. Screenings are medical tests that check for diseases and health conditions, ideally before they become a problem for your health. Your health is unique to you, and many things can influence which screenings you should get and when.

Talk to your doctor about which screenings may be right for you and when you should get them. We've also created an



Bob Garrett visits with his doctor, Michael Farber, M.D., during his annual physical.

at-a-glance guide for screenings that may be right for you: [HMHforU.org/Screening](https://www.hmhforu.org/screening).

If you delayed or skipped necessary medical care because of fear of COVID-19 exposure and limited access during the pandemic, it's the perfect time to put your health first by getting caught up. If you have a chronic condition and put off care, make an appointment with your doctor as soon as you can ([HMHforU.org/FindADoc](https://www.hmhforu.org/findadoc)). If you need support managing stress, sadness or anxiety; have suicidal thoughts; or are experiencing addiction issues, take advantage of available mental health resources ([HMHforU.org/MentalHealth](https://www.hmhforu.org/mentalhealth)).

A little effort today can go far to ensure many healthy tomorrows. By making time for our health now, we can help prevent being forced to make time for later as a result of illness. ❄️

Robert C. Garrett, FACHE, CEO
Hackensack Meridian *Health*



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BetterU

quick tips to help you live your healthiest life

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5 Tips for a Great Workout

Personal advice from our cardiologist

"Before you start any exercise routine, reach out to your doctor first," says **Jacqueline Hollywood, M.D.**, cardiologist at **Hackensack University Medical Center**. "Being healthy is part of staying safe."

Dr. Hollywood shares five tips about incorporating heart-healthy exercise into your daily routine:

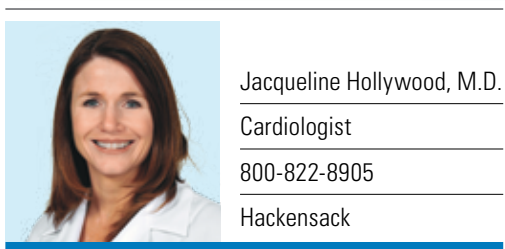
1
Try to commit to at least 30 minutes of exercise five times a week. Finding some form of exercise you actually enjoy can make it easier. You can also break up the sessions to fit your schedule, such as two 15-minute activities per day.

2
Stretching is essential. Your whole body will benefit from regular exercise, but be sure to incorporate stretching, as well, so you don't tear or injure any muscles or joints. The good news is that stretching has benefits beyond the gym. It enhances your whole body's flexibility and range of movement, which can benefit you all day long.

3
Warm up before engaging in strenuous exercise. This allows your heart rate to rise slowly and manageably, and prepares your muscles for the workout ahead, preventing injuries.

4
Two sessions of strength training a week are recommended. This could include lifting weights, using resistance machines or any form of body-weight exercise. Outside of the gym, stronger muscles help with your daily activities and prevent injuries as you continue to exercise.

5
Exercises that help you relax and unwind are also powerful ways to prevent heart disease. Yoga is a great option, training both the body and the mind. It's easy to get into—with no special equipment required—and classes and routines are available for all ages and levels of mobility.



Go Online

Ready to kickstart the year with new fitness goals? Attend a class or event near you: [HMHforU.org/Events](https://www.hackensackmeridianhealth.org/Events).

Have you ever had a “gut feeling” about a situation? Or maybe you get butterflies in your stomach when you’re nervous? You may even feel like you need to run to the restroom when your anxiety kicks in.

Our gut has a lot to say when it comes to our mental health, and it plays a key role in our overall well-being. Your intestinal wall stores 70 percent of the cells that make up your immune system. An unwell gut will lead to more health problems down the road. Stress, depression and anxiety can negatively affect our gastrointestinal system.

“Research has found that the gastrointestinal system and central nervous system are in constant communication,” says **Donald J. Parker, LCSW**, president, Behavioral Health Care Transformation Services. “This relationship is referred to as the gut-brain axis. Psychological factors can impact how your GI tract moves and contracts. Vice versa, an unhealthy GI tract can cause you to experience depression, anxiety, brain fog and more.”

How Gut Health Is Linked to Mental Health

How to Keep Your GI Tract in Top Shape

It’s important to keep your GI tract in tip-top shape. Here are tips for cleaning up your gut and, in turn, supporting your mental health:

Improve Your Diet: If you’re experiencing a great deal of inflammation and irritation of the gut, consider eliminating dairy and gluten from your diet, as well as eating more organic and colorful fruits and vegetables. These steps may help heal your GI tract. Adding high-fiber and fermented foods to your diet will be useful, too. If you want additional guidance on how you can clean up your diet, consider nutritional counseling.

Take Time for Self-Care: Stress, depression and anxiety have a huge impact on your gut health. Putting time aside to meditate and journal at some point during your day may help alleviate some of these feelings. Of course, there are times when our mental health may be too much to handle on our own. When additional support is needed, consider making an appointment with a mental health professional.

Learn more about behavioral health services at Hackensack Meridian Health at [HMHforU.org/MentalHealth](https://www.hmhforu.org/MentalHealth).



Is Your GI Tract Unhealthy?

Some signs that your GI tract is unhealthy are:

- ▶ Rectal bleeding
- ▶ Chronic abdominal pain
- ▶ Weight fluctuation
- ▶ Persistent fatigue
- ▶ Food intolerance

5 Things to Know About Intermittent Fasting

Is intermittent fasting a healthy, effective and natural way to shed some pounds?

"Intermittent fasting is a pattern of eating where you withhold food for a certain amount of time, so you allow your body to use energy more efficiently," says **Kimberly Cai, M.D.**, internal medicine specialist in Hackensack, New Jersey. "Research is still being conducted on how effective fasting is for weight loss, but the idea is that instead of using energy from intake, such as carbs, you can potentially break down fats."

Here are five things you should know about intermittent fasting:

- 1 You can drink during periods of fasting**, as long as it is a zero-calorie beverage and nothing is added, such as creamers or sweeteners. "A lot of people forget to drink water throughout the day and can become dehydrated," shares Dr. Cai.
- 2 Before fasting, eat foods high in fiber**, such as nuts, beans, fruits and vegetables, as well as foods high in protein, such as meats, fish and tofu.
- 3 Certain people should avoid fasting**, including those who are over the age of 65, those under the age of 18, people with diabetes, women who are pregnant or lactating, anyone with a body mass index below 19, cancer patients, anyone with an immunodeficiency and anyone with a history of an eating disorder.
- 4 There are potential side effects of fasting.** "Some studies have shown that people tend to overeat and binge," Dr. Cai says. "You can't fast for two days and then eat 3,000 calories a day for the other five days. You have to eat healthy foods and meals within your caloric limit."
- 5 Intermittent fasting may not be sustainable in the long run.** "There is a higher drop-out rate among intermittent fasters versus those on a calorie-restrictive diet, which suggests that fasting may not be a sustainable approach," says Dr. Cai. "It's a quick way to lose weight, but you can't really do this for more than a few weeks."
If hunger is a concern, don't be afraid to break the fast. "Listen to your body," says Dr. Cai. "If you get light-headed, shaky or low-energy from not eating enough, grab some healthy food."



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Looking to try intermittent fasting? Talk to your primary care doctor first. Find one near you at [HMHforU.org/FindADoc](https://www.hmhforu.org/FindADoc).



Stormy Weather Chowder

Serves 4–6

Ingredients

2 cups low-sodium chicken broth
1½ cups broccoli, chopped
1 large sweet potato, peeled and cubed
1 cup mushrooms, sliced
1 medium onion, chopped
1 tablespoon olive oil
2 tablespoons all-purpose flour
2 cups nonfat milk
1 15-ounce can whole kernel corn, drained
1 cup green beans
1 red bell pepper, chopped
1 tablespoon basil
½ teaspoon salt and optional dash black pepper

Steps

- 1** In a large soup pot, bring broth, broccoli and sweet potato to boil. Reduce heat. Cover and simmer for 5 minutes. Do not drain. Set aside uncovered.
- 2** Meanwhile, in a large saucepan, heat olive oil, add mushrooms and onions, and cook until tender, about 3–5 minutes.
- 3** Whisk flour into milk and add all at once to mushrooms. Turn heat to low, and whisk until bubbly.
- 4** Pour mushroom mixture into soup pot with broccoli, broth and sweet potato.
- 5** Add corn, green beans, red pepper and basil. Heat through 2–3 minutes. Add salt and black pepper to taste.

Nutritional Information

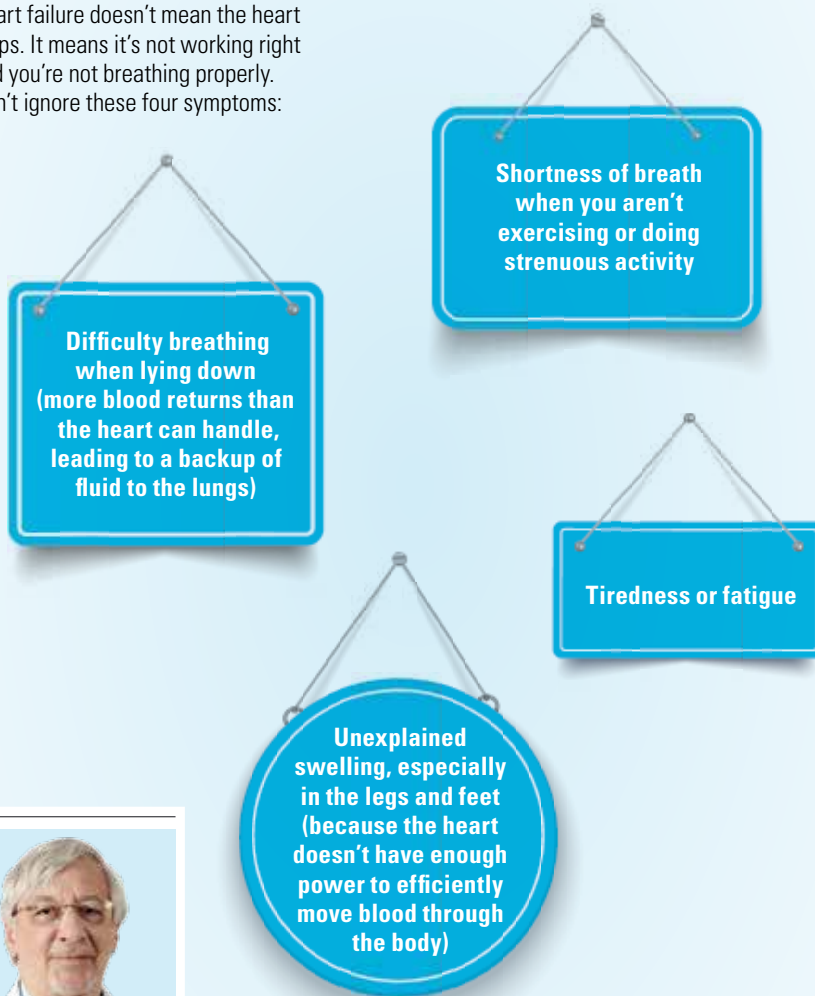
Per serving: 245 calories, 12g protein, 42g carbohydrate, 5g fiber, 5g fat (1g sat, 4g mono/poly), 253mg sodium

Find more recipes and tips for healthy eating at [HMHforU.org/HealthyEating](https://www.hmhforu.org/HealthyEating).

What are the signs of heart failure?

Robert Berkowitz, M.D., weighs in:

Heart failure doesn't mean the heart stops. It means it's not working right and you're not breathing properly. Don't ignore these four symptoms:



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In some cases, there might also be chest pain and palpitations with early heart failure. Symptoms depend on whether your heart is too weak or too stiff. Either problem can cause heart failure. If you experience one or more of these early signs of heart failure, see your primary care doctor or a cardiologist right away.

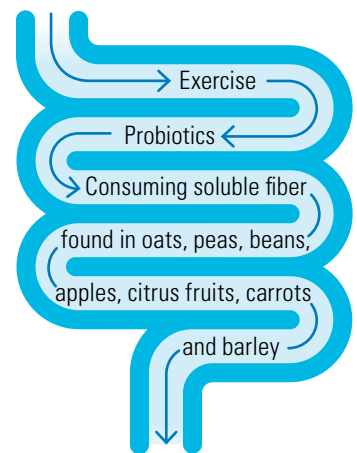
Read more at [HMHforU.org/HeartFailure](https://www.hmhforu.org/HeartFailure).

How can I stay regular?

Rosario Ligresti, M.D., weighs in:

Normal bowel movement frequency depends on the person, their diet and their upbringing. For some people, being "regular" means having a bowel movement once a week; for others, it's twice a day. Color and consistency are also unique to the individual. What you should be concerned about isn't so much regularity, but a dramatic change in what has been normal for you. When most people ask about staying regular, they really want to know how to avoid constipation.

How to avoid constipation:



Read more at [HMHforU.org/Regular](https://www.hmhforu.org/Regular).



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Should I be concerned about secondhand vaping?

Ada Lee, M.D., weighs in:

Vaping and secondhand vaping are just as dangerous as smoking and secondhand smoke. Vaping is a little different given that it doesn't burn and there is no smoke, but the process of inhaling secondhand fumes is essentially the same. Allowing vapor to enter your body—even as a bystander—puts you at risk for health concerns similar to those associated with secondhand smoking.

Aerosols generated by e-cigarettes contain potentially harmful compounds—including nicotine, volatile organic compounds, heavy metals, carcinogens and ultrafine particulates—that nonusers can be exposed to through inhalation, ingestion or dermal contact with aerosols exhaled into the environment. The long-term health consequences of secondhand aerosol exposures are still unknown.

In addition to risks from secondhand aerosols, children in the same household as e-cigarette users are more likely to start using e-cigarettes themselves and may be more likely to accidentally ingest refill liquid and experience burn injuries.

Read more at HMHforU.org/Vaping.



Should I drink apple cider vinegar?

Carla Rodriguez, M.D., weighs in:

Apple cider vinegar hasn't been shown to aid weight loss, despite what you may have read on social media, and it may be harmful if ingested the wrong way or at the wrong time of day. You may know someone who swears that apple cider vinegar has helped them curb their appetite or lose weight, but that information is not research-proven. Because apple cider vinegar is highly acidic, you may experience acid reflux after consuming it. Those prone to heartburn, acid reflux or gastroesophageal reflux disease (GERD) should avoid consuming anything acidic 30–60 minutes before bedtime.



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Read more at
[HMHforU.org/
AppleVinegar](http://HMHforU.org/AppleVinegar).



BREAST CANCER

Who Should Get Screened?

Breast cancer screening with a mammogram is one of the most effective ways to find breast cancer in a person before they experience any symptoms.

“Breast cancer is the second leading cause of cancer death in women in America,” says **Gail Starr, M.D., MS.Ed.**, diagnostic radiologist at **Hackensack University Medical Center**. “An early breast cancer diagnosis is your best hope for a cure. In addition, treatment options can be less aggressive and better tolerated when cancer is detected early, so having regular mammograms is crucial.”

While there is no concrete way to prevent breast cancer, annual mammograms have reduced the mortality rate by 40 percent. Routine breast cancer screening is important for all women because most women who get breast cancer have no family history of breast cancer or significant risk factors.

“In addition to these general guidelines, women of color have the highest breast cancer mortality rate and are more likely to receive an advanced-stage diagnosis,” says diagnostic radiologist **Rebecca Gamss, M.D.** “All women should have a risk assessment before age 30, so those at higher risk can be identified—especially women of color and of Ashkenazi Jewish descent.”

When to Get Screened

Who	When to Start	How Often to Repeat
Women at average risk of breast cancer	Age 40	Annual mammogram as long as you are in good health
Women at higher risk of breast cancer because of a BRCA1 or BRCA2 gene mutation	Age 25	Annual MRI, ages 25–30; annual mammogram alternating with MRI at six-month intervals, age 30 and above
Women with history of chest radiation therapy	8 years after the radiation, but not before age 25	Annual MRI, ages 25–30; annual mammogram alternating with MRI at six-month intervals, age 30 and above
Women at higher risk of breast cancer because of a strong family history	10 years prior to the first-degree relative’s diagnosis (mom or sister), but no sooner than 30 and no later than 40	Annual mammogram (supplemental screening with ultrasound or MRI might be indicated; risk assessment should be performed)



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Go Online

Find a breast imaging location near you at [HMHforU.org/BreastScreening](https://www.hmhforu.org/BreastScreening).

What to Know About Surgery to Reduce Risk

One in eight American women will develop invasive breast cancer during her lifetime. Certain factors can make someone at higher risk of developing breast cancer—notably, carrying a BRCA gene mutation in one’s DNA.

Is Genetic Testing Right for You?

Genetic testing is encouraged for anyone who is at an increased risk of having inherited a gene mutation. You are more likely to have a BRCA gene mutation and should seek genetic counseling and testing if you:

- ▶ Have a relative with a known BRCA1 or BRCA2 mutation
- ▶ Have a personal history of breast cancer and Ashkenazi Jewish ancestry
- ▶ Have or had breast cancer that was diagnosed before age 45
- ▶ Have a personal history of two or more types of cancer
- ▶ Have one or more family members with breast cancer and/or ovarian cancer
- ▶ Have a male relative with breast cancer

“Genetic counseling is often recommended for those seeking genetic testing to help people better understand what their results mean in regard to their health,” explains **Leslie Lopez Montgomery, M.D., FACS, FSSO**, chief of the Division of Breast Surgery at **Hackensack University Medical Center**. “A positive test result means you carry the BRCA gene mutation, while a negative result means no mutation was found.”

When to Consider Surgery

If you test positive for a BRCA1 or BRCA2 gene mutation, you may want to consider the ways you can reduce the risk

of developing cancer in the future. According to the National Cancer Institute, a prophylactic (preventive) mastectomy in women who carry a BRCA1 or BRCA2 gene mutation can reduce the risk of developing breast cancer by 90–95 percent.

During a prophylactic mastectomy, surgeons remove both breasts before any breast cancer diagnoses to reduce the risk of breast cancer developing in the future.

“The BRCA gene mutations are rare, affecting only 1 in 400 people, or 0.2 percent of the U.S. population,” Dr. Montgomery says. “Undergoing a prophylactic mastectomy is a tremendous thing to consider, but it could potentially save a life.”

If you are at high risk of breast cancer, talk with your medical team about all of your options, and lean on the support and guidance of a breast surgeon, medical social worker and even mental health professional to help you find the right path. “The decision to have any surgery to reduce the risk of breast cancer is a major one,” says Dr. Montgomery. 🌟



Leslie Lopez Montgomery, M.D., FACS, FSSO

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Go Online

Learn about comprehensive services for women at risk of or diagnosed with breast cancer: [HMHforU.org/BreastCancer](https://www.hackensackmeridianhealth.org/BreastCancer).

Do Broken Bones Heal Stronger?

You might have heard the often-repeated notion about broken bones healing stronger than before, but it's simply not true.

Have you ever heard someone say that when you break a bone, the healing process makes it stronger than it was in the first place? This often-repeated notion may give you the idea that after your broken bone heals, it will be tougher than ever and won't break again. But this isn't actually true.

"Having had a previous break won't protect you from breaking the same bone again, if you happen to experience trauma to the same body part," says **Siddhant Mehta, M.D.**, orthopedic surgeon at **Palisades Medical Center** and **Hackensack University Medical Center**. "Once your broken bone heals fully, it should be just as strong as the rest of your bones, so you won't be more or less likely to break it than another bone."



Siddhant Mehta, M.D.

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What Happens When Your Bone Breaks

After you break a bone, your body begins the healing process:

- ▶ At first, a blood clot forms at the site, which protects the injured spot.
- ▶ Within days, a special callus forms at the break, which gradually helps reconnect the broken edges of bone.
- ▶ Initially, the callus is soft and made of collagen, but over time, it becomes harder, due to calcium deposits that arrive to mend the bone.
- ▶ New cells form at the fracture site, connecting the broken pieces together again.

Once the bone reconnects, the callus breaks down, so the bone retains its original shape. (During the first few weeks after a fracture, avoid non-steroidal anti-inflammatory drugs like ibuprofen and aspirin, which decrease inflammation. Instead, use Tylenol or other pain relievers your doctor prescribes.)

Why the Break Site Is Briefly Stronger Than Surrounding Bone

A doctor should put you in a cast to keep you immobilized while your bone heals. Because you aren't using the injured body part while it's in a cast, the bone becomes weaker.

At the same time, the fracture site is being fortified with calcium deposits and building itself back up. For this brief period of time, the calcium-fortified region of bone may be stronger than the surrounding healthy bone, which has weakened due to lack of use. ❄️



Strengthen Your Bones

There are more reliable ways to strengthen your bones than waiting for a broken bone to heal. Try adopting these six healthy habits to help keep your bones healthy:

- 1** Eat calcium-rich foods. Include cheese and other dairy products; green vegetables, such as kale and broccoli; and fortified foods and beverages, such as cereal and orange juice, in your diet. The recommended dietary allowance (RDA) for calcium is 1,000 mg for women up to age 50 and men up to age 70; then, the RDA increases to 1,200 mg.
- 2** Eat foods rich in vitamin D. This vitamin helps your body better absorb calcium. Fish, including salmon and trout, is an excellent source of vitamin D, and some foods and beverages are fortified with the vitamin. The RDA is 15 mcg (600 IU) for adults up to age 70; then, the RDA increases to 20 mcg (800 IU).
- 3** Exercise regularly. Weight-bearing exercise is best if you're able, such as running, walking, stair-climbing, dancing, hiking and lifting weights.
- 4** Quit smoking. Smoking has been associated with weaker bones, and quitting will improve your health in immeasurable ways.
- 5** Limit your alcohol intake. When women have more than one drink per day or men have more than two drinks per day, it increases the risk of osteoporosis.
- 6** Ask your doctor if you need supplements. If your diet isn't rich in calcium and/or vitamin D, your doctor may suggest you take daily supplements to boost your intake of these nutrients.

Go Online

Learn how our orthopedic experts are committed to helping you maintain optimal health, get moving and live life to the fullest at [HMHforU.org/Ortho](https://www.hmhforu.org/Ortho).



Raise the Bar

Bill McGoey's rotator cuff was beyond repair, but innovative reverse shoulder surgery restored full range of motion.

As part of his work as a respiratory therapist, Bill McGoey often has to raise his right arm over his shoulder to hang bags of fluid. The 68-year-old from Oradell, New Jersey, had shoulder pain for years, but it progressively worsened to the point where he couldn't do any action that required lifting his arm above his head. "It was very painful," he says. "I had to use my left arm for everything."

Before the coronavirus pandemic shut things down, he met with **Frank Alberta, M.D.**, a shoulder and elbow surgeon at **Hackensack University Medical Center**, to discuss his progressively worsening shoulder. Dr. Alberta ordered an MRI. "It showed that anything that could be wrong with it was wrong," Bill says.

In Need of an Alternate Solution

When pandemic restrictions eased, Bill again saw Dr. Alberta, who ordered additional imaging studies. Determining that Bill's rotator cuff was beyond repair and his shoulder joint had degenerated, Dr. Alberta suggested reverse total shoulder replacement surgery, also known as reverse total shoulder arthroplasty (TSA).

"When you don't have a functioning rotator cuff," says Dr. Alberta, "a regular total shoulder replacement won't work to restore function, so you need to do something different. That's where the reverse shoulder surgery comes in."

The reserve total shoulder replacement surgery allows surgeons to bypass the rotator cuff. "We just work around it," Dr. Alberta says. Surgeons make an incision that's about 6 inches long on the front of the

shoulder. Ignoring the damaged rotator cuff, a metal and plastic joint is implanted that replaces the other non-functioning parts of the shoulder.

Surgeons try to make the surgery as minimally invasive as possible. The procedure time is about one hour. Recovering patients wear a sling for two to six weeks following the surgery.

Life-changing Surgery

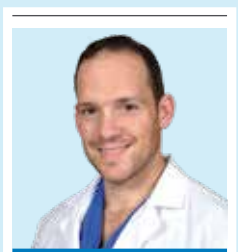
One of the benefits of bypassing the rotator cuff is that recovery begins immediately and rehabilitation is accelerated compared to rotator cuff repair or regular shoulder replacement because you don't have to wait for the rotator cuff function to return before starting rehab.

After his surgery, Bill was up and walking right away and, to his surprise, was pain-free. "It was like nothing happened," he says. "It's like I had no surgery. I had no pain at all."

He started physical therapy while in the hospital and continued it as an outpatient after he was discharged. "They're really dedicated to getting you going at Hackensack. I swear by that physical therapy program," Bill says.

Today, he has full motion of his arm, and for the first time in several years, his shoulder is pain-free. "It feels like a miracle," he says.

Adds Dr. Alberta: "It's a life-changing surgery. Patients can go from not being able to reach their face with their hand to, three weeks after surgery, getting their hand over their head. It's pretty amazing."



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HEART HEALTH



Ways to Avoid Heart Disease

You know how important your heart is. Are you treating it with the care it deserves?

Many people don't realize that their daily habits and lifestyles can overwork and damage their hearts. If you are not leading a heart-friendly lifestyle, it's time to take better care of your heart and yourself. Start with these changes.



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Saddle Brook

If You Smoke, Stop

People who smoke have a greater risk for heart attacks compared to those who don't. The carbon monoxide in cigarettes and other burning products lessens the amount of oxygen that gets to the heart, explains **William Salerno, M.D.**, cardiologist at **Hackensack University Medical Center**. If you smoke (anything!), talk with your health care provider about ways to quit. Medicines, nicotine replacement and alternative strategies can help.

Make Your Diet Heart-healthy

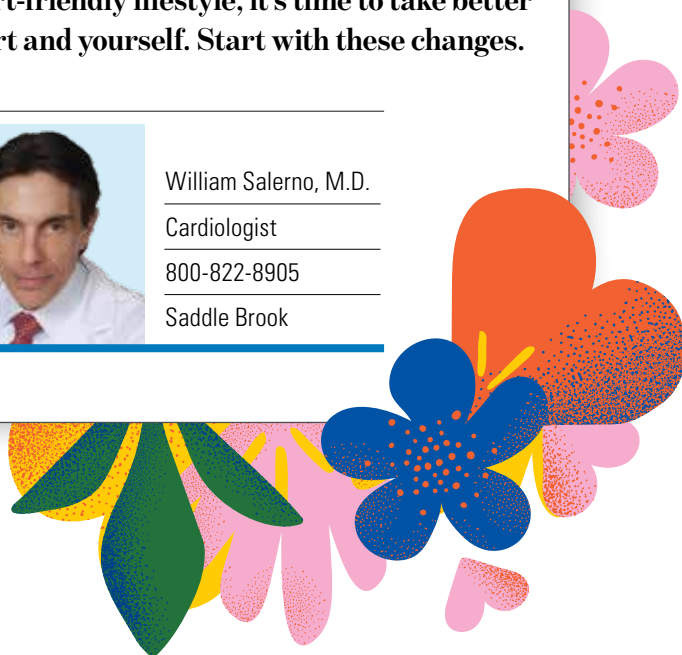
Eating fatty foods plays a part in the buildup of fat in your arteries, which can lead to blockages and increase your risk for a heart attack. "Limit red meats, salt, fried foods, sweets and added simple sugars," suggests Dr. Salerno. "Instead, opt for plant-based proteins; low-fat dairy products such as feta cheese, as well as other sheep and goat milk cheeses, like pecorino Romano; lean meats and fish (no more than once a day); whole grains; and fruits and vegetables." Choose cooking oils made with unsaturated fats, such as canola and olive oils, and try to use an oil spray rather than pouring oil on foods.

Set Exercise Goals

Exercise gets your heart pumping, helping your body use oxygen better and strengthening your heart. It can also decrease your blood pressure and body fat. "Talk with your health care provider before starting an exercise program, and begin slowly, especially if you haven't been active for a while," Dr. Salerno recommends. Start with short sessions, such as 10-minute walks, and gradually increase the length of your workouts to at least 30 minutes of moderate-intensity activity, five days a week.

Track Your Blood Pressure

Blood pressure is the force against the walls of your blood vessels as blood flows through them. The harder your heart works, the greater your risk of having a heart attack. "Make sure your blood pressure is in the healthy range or under control. New



guidelines suggest keeping systolic pressure [the first number] less than 120 and diastolic pressure [the second number] less than 80. Making smart choices, like eating a diet low in sodium, exercising regularly, avoiding tobacco, reducing stress, limiting alcohol and getting adequate sleep will decrease your risk of developing high blood pressure and heart disease," says Dr. Salerno.

Watch Your Weight

Being overweight and obese are major risk factors for heart disease. If you are overweight or obese, losing weight can decrease your cardiovascular disease risk by modifying multiple risk factors.

Stress Less

"Continued and elevated stress has been consistently linked to health problems, including an increased risk for heart disease and stroke," says Dr. Salerno. Try to keep your stress level low by exercising, sharing your concerns with friends and family, getting adequate sleep and making some quiet time for yourself each day. In addition to making these healthy changes, don't forget about screenings. The American Heart Association recommends regular screening for heart disease risk beginning at age 20 and cholesterol tests every four to six years if you're at normal risk.

Get Good Sleep

Sleep and, just as important, sleep quality are critical to good heart health. Poor sleep quality and short sleep duration are associated with high blood pressure, high cholesterol, diabetes, obesity and even stroke or heart attack. Most adults need at least seven hours of sleep every night. 🌟

Go Online

Learn more about loving your heart with our informative classes: [HMHforU.org/Events](https://www.HMHforU.org/Events), or learn more about cardiovascular services at Hackensack Meridian Health at [HMHforU.org/Heart](https://www.HMHforU.org/Heart).

Like Brand New

Barbara Colella, from Park Ridge, New Jersey, benefits from a new, innovative heart procedure for multiple heart blockages.



For several months, Barbara Colella hadn't been feeling well. "I own a restaurant and sell real estate, so I'm always on the go," she says. "But I was constantly huffing and puffing, and never felt like I could do all that I wanted to do."

Then things took a turn for the worse. "I felt like a horse kicked me in the chest," she says.

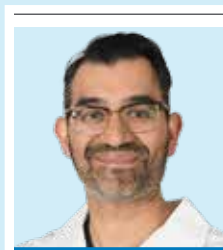
Barbara knew something was wrong, so she called an ambulance and went directly to **Hackensack University Medical Center**. Tests revealed that two of her arteries—the main lifeline of the heart—were 99.9-percent blocked. There also was calcification in another artery.

"Usually with multiple heart blockages, the treatment of choice is open-heart surgery," says **Haroon Faraz, M.D.**, interventional cardiologist at Hackensack. But Barbara had several comorbidities, and the multidisciplinary team involving cardiothoracic surgeons and interventional cardiologists came to the consensus that open-heart surgery would be a prohibitive risk.

"The decision was made to fix the blockages in the two main arteries, then let her body rest and bring her back to tackle the third," says Dr. Faraz, who performed a high-risk angioplasty with a mechanical circulatory support device to fix the left main bifurcation disease and inserted stents on the two front blockages.

Candidate for a New Option

While Barbara recuperated from the first procedure, the Food and Drug Administration approved intravascular lithotripsy (IVL). IVL uses



Haroon Faraz, M.D.

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Teaneck and North Bergen

sonic pressure waves, or shock-waves, which create a series of micro-fractures to break up built-up calcium without affecting the healthy vessel. "We are among the first sites for using this technology," says Dr. Faraz.

The minimally invasive procedure is done in conjunction with angioplasty and stenting.

- ▶ First, the doctor guides the catheter into the heart through a small incision in the patient's arm or leg.
- ▶ Then, IVL emits pressure waves to break up the calcium deposits.

Dr. Faraz felt Barbara was a great candidate for IVL and

asked her if she was interested. "He said I'd be one of the first in the state of New Jersey to get it, and the very first person in Hackensack to get it," she says.

Barbara felt uneasy at first. "I think anybody would feel some nerves knowing they were getting a brand-new procedure," she says. She texted Dr. Faraz whenever a question popped into her head. "He answered every one of my texts," she says.

She finally decided to proceed. "I figured if it helps other people and helps me avoid open-heart surgery, the answer had to be 'yes.'"

A few weeks later, Barbara had the procedure and was back home the same night. For the first time in months, she had no shortness of breath. She is thrilled that doctors were able to use this new technology on her. She's back to her normal hectic schedule and feels like her old self again—actually, better. "Now I feel like I could run a marathon!" she says.

How Does Guillain-Barré Syndrome Happen?

Learn more about this rare neurological disorder, including common symptoms and treatment options.

Guillain-Barré syndrome (GBS) is a rare neurological disorder in which a person's immune system attacks their own peripheral nervous system. According to the National Institutes of Health's National Institute of Neurological Disorders and Stroke, GBS is estimated to affect about 1 in 100,000 people each year.

What causes GBS is not known, says **Yelena Roshchina, D.O.**, a pediatric neurologist at **Joseph M. Sanzari Children's Hospital at Hackensack University Medical Center**. "It's random," she says.

How Does It Happen?

GBS is not genetic or contagious. Typically, it will start within a few days or weeks of a respiratory or gastrointestinal infection, Dr. Roshchina says. What appears to happen is the immune response to a bacterial or viral infection—or very rarely vaccination—triggers a more aggressive response that causes the immune system to attack the peripheral nerves.

One theory is that part of a person's immune system mistakenly perceives the sheathing around nerves—a fatty covering called myelin—as foreign to the body.

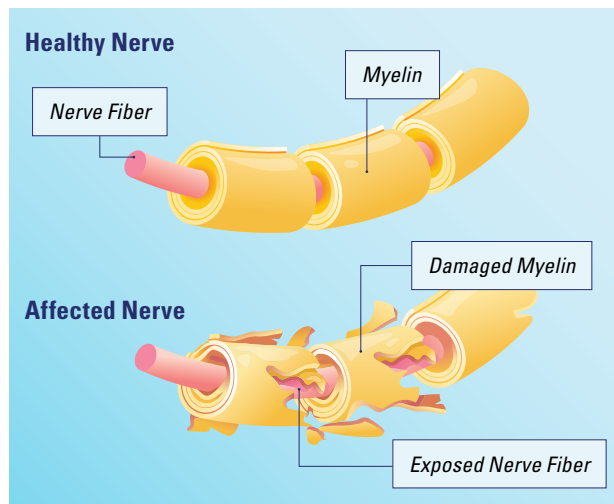
To counter this "threat," the immune system produces antibodies that attack the myelin, which leads to nerve damage that causes muscle weakness, paralysis and, in some cases, nerve pain, says **Ariel Sherbany, M.D., Ph.D.**, a pediatric neurologist at the Children's Hospital.

What Are the Signs?

GBS affects all age groups, says Dr. Sherbany, and typically presents as weakness and loss of reflexes in the legs. Mild cases may resolve on their own, but severe cases can lead to paralysis of the respiratory muscles, which can be a life-threatening situation.

Common symptoms of GBS include:

- ▶ Tingling in the feet or hands
- ▶ Pain (particularly in children), which sometimes precedes weakness
- ▶ Weakness on both sides of the body (frequently noticed as having trouble climbing stairs or, especially in children, difficulty walking)
- ▶ Unsteadiness or coordination problems
- ▶ Difficulty swallowing, speaking, chewing or moving the facial muscles
- ▶ Digestive and/or bladder control problems



How Is It Diagnosed?

In addition to a thorough neurological assessment, which includes testing muscle strength and reflexes in the limbs that are experiencing weakness, key diagnostics are an MRI and a spinal tap (also called a lumbar puncture) to get a sample of spinal fluid. Those with GBS tend to have more protein than usual in their spinal fluid.

How Is It Treated?

Generally, if diagnosed early, GBS is treatable with therapies such as immunoglobulin (IVIg) infusions and physical therapy, Dr. Sherbany says, and frequently may completely resolve.

"The goal of treatment is to prevent things from getting worse," he says. "IVIg has been shown to shorten the length of a period of disability and also may avoid the need for a ventilator."

Once treatment is started, Dr. Roshchina says, patients typically get better in a matter of weeks to a few months and make a full recovery, especially if GBS is diagnosed early. More severe cases can take longer to heal, with some patients still experiencing varying degrees of weakness years later. 🌟



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New Hope for Her Future

Juliette Stellan began experiencing symptoms of Guillain-Barré syndrome at age 3. Doctors subsequently diagnosed an incredibly rare neurological condition.

At 3 years old, Juliette Stellan would often get distracted while walking and talking, bump into a wall and take a tumble. So in November 2019, when her parents, Amy Vargas-Stellan and Al Stellan, began noticing her falling more, they weren't overly concerned—until Juliette began complaining that her legs hurt, and caregivers at her preschool began noticing she was having trouble walking.

Tests taken during an emergency room visit near the family's hometown of Oak Ridge, New Jersey, didn't reveal anything unusual, except for some inflammation in one leg. Juliette was taken to see an orthopedist, who took X-rays, but those, too, came back normal.

A few weeks later, at a 1-year checkup for Juliette's younger brother, Vincent, the family pediatrician tickled the bottom of Juliette's foot to check her reflexes. Juliette didn't respond. Their pediatrician suspected Guillain-Barré syndrome (GBS), a condition in which the patient's immune system attacks their peripheral nervous system, and told them to get to the emergency room at **Joseph M. Sanzari Children's Hospital at Hackensack University Medical Center** right away.

A Surprising Diagnosis

At the Children's Hospital, Juliette was assessed by the attending doctor and underwent tests, including a lumbar puncture and MRI. Test results suggested GBS, which has an incidence of 1 to 2 in 100,000 and can be initially mistaken for other conditions. Standard treatment for GBS—immunoglobulin therapy (IVIg), in which immunoglobulin is infused into the veins—began immediately, followed by outpatient physical therapy.

Initially, Juliette's symptoms improved, only to return worse than before. "Most kids need one round of

treatment with immunoglobulin and get better in a few weeks with rehabilitation," says **Yelena Roshchina, D.O.**, Juliette's primary pediatric neurologist.

When Juliette stopped walking and complained of pain, her parents brought her back to the ER. "Since it is so unusual for patients to get worse after responding to initial treatment for GBS, it was key to determine why she was getting worse," says pediatric neurologist **Ariel Sherbany, M.D., Ph.D.**

Drs. Sherbany and Roshchina performed additional tests, which revealed a new diagnosis for Juliette: chronic inflammatory demyelinating polyneuropathy (CIDP), an incredibly rare neurological condition that is caused by damage to the sheathing that protects nerves.

CIDP is so rare in children that Dr. Roshchina had never seen it in a patient. She recommended that Juliette's parents get a second opinion from a pediatric neuromuscular neurologist at a hospital outside of the state that specialized in treating pediatric patients with the condition. "For Dr. Roshchina to say that just shows what an outstanding doctor she is," says Juliette's mother, Amy.

Hope for Tomorrow

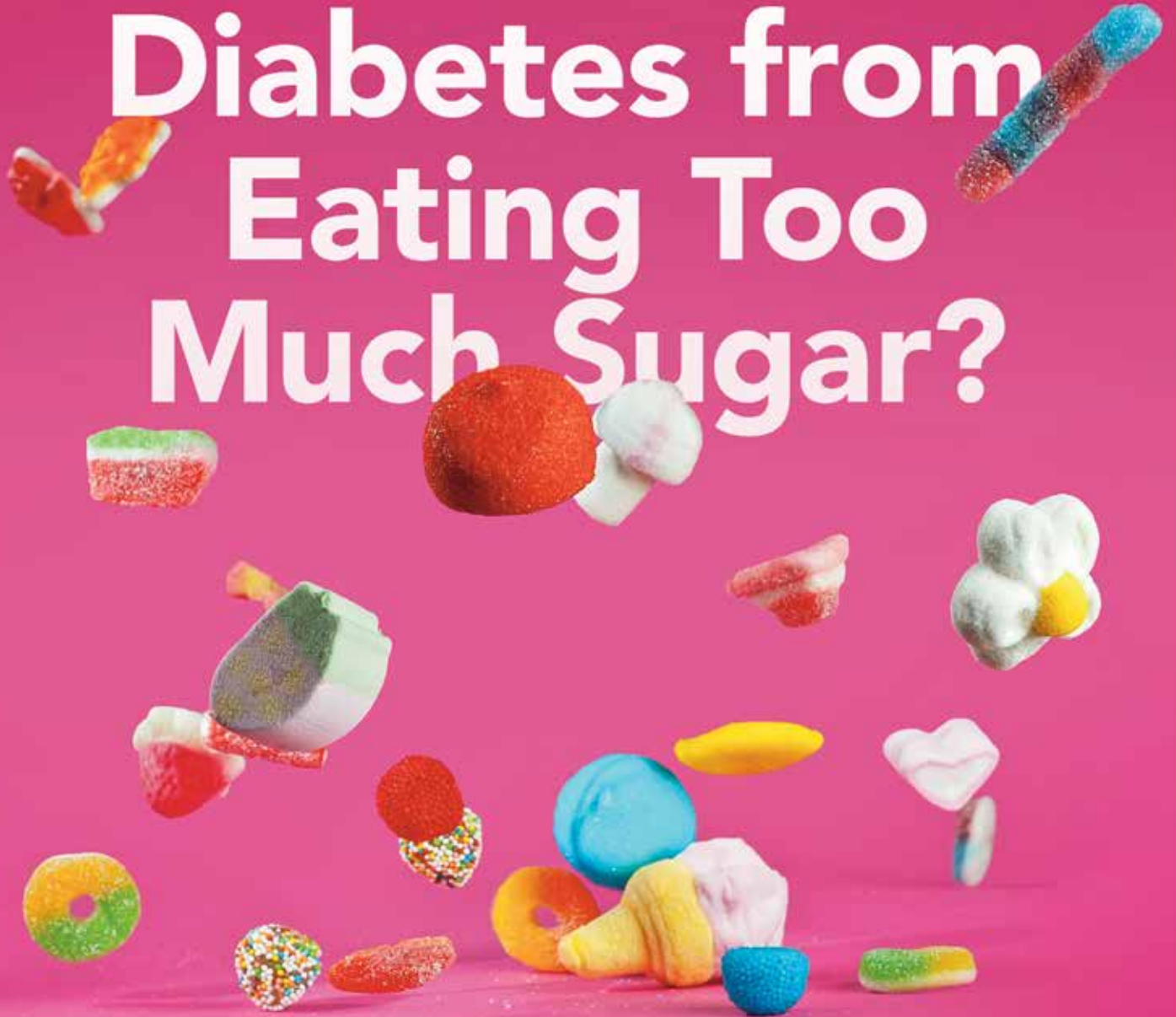
The CIDP diagnosis and treatment plan were confirmed by the doctor at the out-of-state hospital. Since then, Juliette has received regular treatments of IVIg and physical therapy at the Children's Hospital, and aquatic and equine therapies at private facilities, to help strengthen her muscles.

While it is still not known how long she will have to receive regular treatments of IVIg, today she is healthy, pain-free and having adventures, including paddle boarding and kayaking.

Go Online

Learn how our pediatric specialists manage children's neurological conditions and improve their quality of life at HMHforU.org/PedNeuro.

Can You Get Diabetes from Eating Too Much Sugar?



Debunking the common belief that eating too much sugar can give you diabetes.

How does a person get diabetes? One common belief is that you can develop diabetes from eating too much sugar.

“It’s not as simple as that,” says **Ayushi Dixit, M.D.**, an endocrinologist at **Pascack Valley Medical Center**. Since glucose levels are elevated in diabetes, it is assumed that eating sugary foods causes the disease. However, type 2 diabetes, the most common form, is a combination of insulin resistance and pancreatic failure.

What to Know About Glucose and Diabetes

“Type 2 diabetes is a disease in which your body has difficulty responding to its own insulin production [insulin resistance]. To try to overcome insulin resistance, your pancreas will produce more insulin, and when it can no longer keep up, your blood glucose rises,” says Dr. Dixit.

Glucose is an energy source that our body needs and that we get through the food we eat. In people with diabetes, elevated glucose levels can affect other organs. The most common complications of uncontrolled diabetes include heart disease; nerve damage or peripheral neuropathy; diabetic retinopathy, which can lead to blindness; and chronic kidney disease, which can lead to kidney failure or dialysis.

“For people who don’t have diabetes, glucose levels usually remain stable,” says Dr. Dixit. A person who does not have diabetes should not experience a sugar spike after having soda or a piece of cake. “This is because your pancreas is working normally and is able to effectively manage it.”

The majority of diabetes medications act by trying to keep blood glucose levels within specific ranges. In type 1 diabetes—where the pancreas does not make insulin at all—since the defect is in insulin production, patients are treated with insulin. Patients with type 2 diabetes have several options for therapy since most of them are still producing insulin. They are often started on oral medications before being placed on insulin. 🌟



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How to Avoid Developing Type 2 Diabetes

“To avoid type 2 diabetes, the best thing you can do is keep your weight within a normal range and eat a clean, balanced diet,” says Dr. Dixit. What’s normal depends on your height and age. It’s important to keep your body mass index within a healthy range, which is between 18.5 and 24.9, according to the National Heart, Lung and Blood Institute.

As far as nutrition, there is no specific diet solution, but it’s important to maintain a healthy weight and watch your carbohydrate intake. “If you are concerned about your risk for diabetes and are overweight, changing your diet can help you lose weight and lower your risk for developing diabetes,” Dr. Dixit says, offering these tips for lowering your risk of type 2 diabetes:

Lose weight if you are overweight or obese. Just a 5–10 percent weight loss can make a big difference in your diabetes risk and overall health.

Avoid foods that are high in sugar and refined carbohydrates. Instead, prioritize non-starchy fruits and vegetables, whole grains, lean proteins and lots of water.

Exercise regularly. Work with your doctor to figure out what might work best for you.

Don’t smoke. According to the Food and Drug Administration, smokers are 30–40 percent more likely to develop type 2 diabetes than nonsmokers.

Keep your food portions in check. In today’s world, food portion sizes are bigger than ever, making it easy to overeat. Pay attention to how much food you consume at each meal. Invest in a food scale, measuring cups and spoons to help you figure out appropriate food portions.



Go Online

Learn how we are committed to helping people with diabetes manage their disease, so they can enjoy an improved quality of life and avoid the debilitating complications caused by diabetes: [HMHforU.org/Diabetes](https://www.hmhforu.org/diabetes).

Best and Worst Things for Hemorrhoids

Hemorrhoids are as uncomfortable as they are common. Here are ways to better manage them and find relief.

Near the top of the list of health issues people avoid talking about is hemorrhoids—even to doctors. They're uncomfortable, they're unattractive, they bleed, and they make going to the bathroom a challenge. They're also very common. In fact, about half of the population has had a bout with hemorrhoids by age 50.

What Is a Hemorrhoid?

“A hemorrhoid is essentially an engorged or swollen blood vessel,” says **Sameet Shah, D.O.**, a gastroenterologist at **Mountainside Medical Group**.

Hemorrhoids can be inside or outside your body. With external hemorrhoids, you can see them and they tend to hurt. With internal hemorrhoids, you don't see or feel them, but a symptom might be bleeding during a bowel movement.

The most common cause of hemorrhoids is due to constipation or straining while using the toilet. Women are prone to hemorrhoids during pregnancy and after giving birth because of the increased pressure on the pelvic floor and hormonal changes that can lead to constipation. Children and adolescents can also get hemorrhoids.



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At-home Hemorrhoid Remedies

“I tell my patients that the most important thing they can do for a hemorrhoid is to let it heal by not straining when having a bowel movement and avoiding constipation,” Dr. Shah says.

To deal with the underlying problem of constipation and straining, **Kulvir S. Nandra, M.D.**, a colorectal surgeon at Mountainside, offers a few tips:

Eat foods high in fiber, such as bananas, pears, strawberries, avocados, carrots, beets, broccoli, spinach, legumes, lentils, oats, nuts, seeds and sweet potatoes.

Increase your water intake.

Consider taking an over-the-counter fiber supplement.

Fill a bathtub with a few inches of warm water and sit in the water for 15–20 minutes.

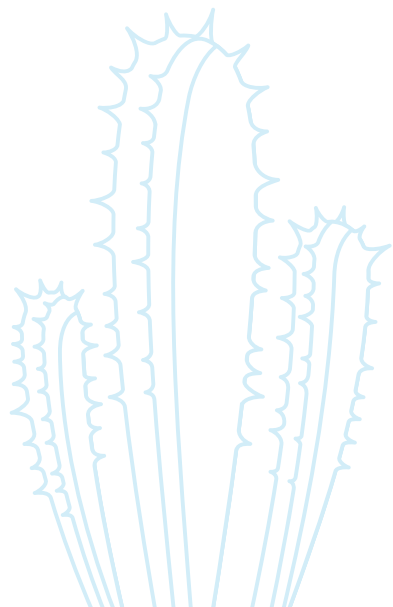
If you see a doctor for hemorrhoids, they might prescribe hydrocortisone that can be applied directly to the site or in the form of a suppository. “For most of my patients, a high-fiber diet plus warm baths and hydrocortisone works,” says Dr. Shah. The bleeding stops, the sensation goes away and that’s usually the end of it.

The Three Worst Things You Can Do

1 Spend too much time on the toilet. “Having good bowel habits means eating a healthy diet and spending no more than five minutes on the toilet,” says Dr. Nandra.

2 Over-wipe or wipe aggressively. Use plain, unscented, hypoallergenic wipes; wet tissue; cotton balls; or a bidet to clean yourself.

3 Ignore your symptoms when it could be something serious. “Any kind of rectal bleeding should be checked out by a doctor, especially if it is associated with unintended weight loss or anemia,” says Dr. Shah. These symptoms could be a sign of something more serious. It’s important to listen to your body, and if something doesn’t feel right, it’s best to get evaluated by a medical professional.



Surgical Options

If you’ve exhausted at-home remedies and medical options, and still have issues related to hemorrhoids, the next step may be to see a colorectal surgeon. Many procedures can be performed in the office, such as what’s called hemorrhoid banding or hemorrhoid sclerotherapy.

Banding involves wrapping a small rubber band around the hemorrhoid, which causes it to shrink and fall off. “This procedure is painless, quick and done in the office,” says Dr. Nandra.

Sclerotherapy is similar but involves a special injection that cuts off blood supply to the hemorrhoid, which causes it to fall off.

If hemorrhoids are severe and keep coming back, several outpatient, same-day procedures are available that involve undergoing sedation similar to a colonoscopy.

Hemorrhoid ligation is similar to rubber-banding but with a suture.

Hemorrhoidectomy is where the hemorrhoid is cut out.

Stapled hemorrhoidectomy involves using a stapler device for larger hemorrhoids.

Transanal hemorrhoidal dearterialization (THD) is an ultrasound-guided minimally invasive technique to target the blood supply to a hemorrhoid.

Your medical team will work with you to decide which procedure is right for you.

The Bottom Line

“The sooner we treat the issue, the sooner you will feel better,” says Dr. Nandra. It is possible to treat hemorrhoids with simpler methods, but waiting too long could lead to surgery. ❄️

Go Online

Learn more about comprehensive gastrointestinal services at Mountainside Medical Group at [HMHforU.org/MountainsideGI](https://www.HMHforU.org/MountainsideGI).

Losing Weight to Increase Life Expectancy

Consequences of obesity include high blood pressure, diabetes, high cholesterol and heart disease. Here's what you should know.



Two years after weight-loss surgery, Andrew Truong has lost almost 150 pounds and is training for a marathon.

At 35 years old, Andrew Truong had a list of health conditions typically seen in much older people. In addition to weighing 300 pounds, he had high blood pressure, sleep apnea, diabetes, sciatic pain and fatty liver.

"I've been heavy my whole life," Andrew says. "I'd lose some weight, then gain it back plus some. No matter what I did, I just couldn't keep it off."

In fact, in 2015, Andrew lost more than 60 pounds through diet and exercise but eventually gained it all back.

"That can be absolutely devastating to patients," says bariatric surgeon **Hans Schmidt, M.D.** "There's a reason only about 5 percent of morbidly obese people can lose the weight and keep it off for two years: It's really, really hard."

There are quite a few consequences of obesity, including conditions such as high blood pressure, diabetes, high cholesterol and heart disease. But did you know that being obese could also shorten your life expectancy?

According to a 2014 study by the Intramural Research Program, a subsidiary of the National Institutes of Health, extreme obesity may shorten life expectancy by up to 14 years.

“The effects of obesity on life expectancy have been very well studied,” says **Hans Schmidt, M.D.**, chief of Bariatric Surgery at **Hackensack University Medical Center**. “There’s no question that it can shorten your lifespan, and by large numbers. If you can get the weight off before there’s major damage done to your organs, that will tremendously prolong your life.”

The Numbers Behind Obesity

Worldwide, obesity has nearly tripled since 1975, and at least 2.8 million people die each year due to being overweight or obese, according to the World Health Organization (WHO). The WHO also found that 39 million children under the age of 5 were overweight or obese in 2020.

Globally, 44 percent of diabetes, 23 percent of ischemic heart disease and as much as 41 percent of certain cancers can be attributed to being overweight or obese, according to the WHO.

“What’s devastating about numbers like this is that obesity is treatable,” Dr. Schmidt says. “It doesn’t have to be this way.”

How Much Weight Do You Need to Lose?

Losing weight, even just 5–10 percent of excess weight, can add years to your life. Not only will you live longer, but you’ll also feel better and deal with fewer health complications.

Though it’s possible to lose weight on your own, losing 100 pounds or more can be extremely difficult, says Dr. Schmidt.

“Losing that much weight doesn’t just require a few changes to your diet and routine,” he says. “It requires you to overhaul your entire life and way of doing things. It’s not easy to do it without help.”

It’s proven that help in the form of bariatric surgery can extend your lifespan.

A study, published in *The Lancet* in May 2021, found that bariatric surgery was associated with increases in life expectancy among severely obese patients. “If metabolic-bariatric surgery rates were increased worldwide to 3.5 percent among patients with diabetes and 2 percent among those without diabetes, more than 19 million life years could be gained,” the study states.

Whether you lose weight with the help of surgery or on your own, it’s never too late to start the weight-loss journey.

“A lot of people wait until they’re over 60 years old to lose weight, and by then, they’ve already done so much damage to their body and bones,” Dr. Schmidt says. “If you wait until your body is damaged, it’s hard to put it back together again. Start now.” 🌟

Wasting No Time

In early 2019, Andrew, a high school math and computer science teacher, traveled with his students to Spain.

While there, he questioned his colleague about her husband’s recent gastric sleeve operation.

“The last time I saw her husband, he looked amazing,” Andrew says. “I had to know all about it. I knew I wanted to do it, so I asked her everything.”

Upon his return to New Jersey, he met with Dr. Schmidt for a consultation. There, he mentioned to Dr. Schmidt that he was planning to take his students on a trip to London in July. Rather than wait until he got back, they booked his gastric sleeve surgery right away.

“To lose 100 pounds on your own, you have to make more than a slight modification to your diet,” Dr. Schmidt says. “It’s a restructuring of everything you do, and it’s really hard to do that without help.”

On June 21, 2019, Dr. Schmidt performed a one-hour procedure called a laparoscopic sleeve gastrectomy, which removes a large portion of the patient’s stomach and changes their relationship to food.

“I was really scared, but everyone at **Hackensack University Medical Center** was so friendly,” Andrew

says. Before the surgery, a nurse put on some music and started dancing with me. It’s so silly, but that moment of kindness calmed me down.”

A New Chance at Life

The morning after the surgery, Andrew was determined to get up and moving. He slowly walked the halls of the hospital knowing that movement would help speed his recovery. Later that day, he was discharged and given a liquid diet for the following two weeks.

More than two years later, Andrew has not only kept off the weight—he now weighs 165 pounds—he’s training to run a marathon.

“I feel really good now,” he says. “I never thought I’d look or feel this way. I just thought I was dealt this card in life, and that’s what I had to deal with.”

Today, he regularly runs and exercises, eats lots of eggs and green smoothies, and indulges in the occasional treat from time to time. But his focus remains on his new body and weight.

“My number one fear in life is gaining the weight back,” Andrew says. “I refuse to go back to that place. I’m thankful for Hackensack, especially Dr. Schmidt, for giving me a new chance at life.”



Hans Schmidt, M.D.

Bariatric surgeon

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Go Online

Attend a weight-loss seminar near you. Learn more at [HMHforU.org/WeightLossSeminar](https://www.HMHforU.org/WeightLossSeminar).

What to Know About Blue Light

Blue-light therapy for varicose and spider veins may not provide the benefits you hope to achieve.

Some people with spider or varicose veins may wish for an easy solution to make the lines or bulges on their legs fade or disappear. Doctors offer a variety of effective treatments, but some people may be intrigued by blue-light therapy, which may be available in spas or for at-home treatment.

Although some individuals may have positive experiences with it, blue-light treatments may not be effective and won't be as effective as other therapies that doctors can offer.

"People may try to do something inexpensive at home or go to a spa, but they shouldn't expect much from an inexpensive blue-light pen that's available online, and a spa technician doesn't have the equipment or expertise to provide effective medical treatments," says **Massimo Napolitano, M.D.**, vascular surgeon at **Hackensack University Medical Center**. "People with spider or varicose veins should trust a doctor to find a solution that works best for them."

Understanding Spider and Varicose Veins

Spider veins are thin lines that can be seen through the skin, and they're often reddish. Varicose veins are thicker, ropier veins, which may be bluish or purple, or they may appear as bulges beneath your skin. Both may develop when blood doesn't flow through leg veins efficiently.

Blue-light therapy may be more likely to work on smaller spider veins than larger varicose veins, but it may not have a noticeable effect. However, blue-light therapy has been shown to work as an acne treatment, so it may help people with other issues related to the appearance of the skin.

Varicose and spider veins are more common among women than men. They're also more likely to develop in:

- ▶ People with a family history of varicose or spider veins
- ▶ Pregnant women
- ▶ People who are obese
- ▶ Older adults, including menopausal women

Spider and varicose veins don't typically cause health problems; they're usually a cosmetic issue, although they may cause discomfort or make your legs feel heavy or tired.



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Ways to Minimize Spider and Varicose Veins

If you're bothered by varicose or spider veins, ask a doctor about your options for minimizing or eliminating them. You'll have better results with a medical professional than at a spa or through an online purchase. However, spider and varicose veins sometimes develop again in people who are susceptible to them, regardless of the treatment.

Common treatments for varicose and spider veins include:

Lifestyle changes. People who sit or stand for long stretches are more likely

to develop spider and varicose veins. To reduce your chances, break up long periods of sitting or standing, and take time every day to be physically active—go for walks or do other exercise. If you're overweight, losing weight will put less pressure on your legs, which may help blood flow through them more easily.

Compression stockings. Your doctor may recommend that you wear special compression stockings during the day, which may help blood flow through your legs more efficiently.

Sclerotherapy. Your doctor can inject a chemical into varicose veins, which makes them collapse and close. People often need the treatment more than once for veins to fully shut. Within weeks, the veins should fade and disappear. Doctors usually recommend that people wear compression stockings after the injections to encourage healing.

Laser treatments. For small veins near the skin's surface, laser light is powerful and effective enough to make the veins fade over time. Repeat treatments are often necessary.

Endovenous thermal ablation. For larger varicose veins deep within the legs, doctors can insert a catheter into the vein, then heat the tip either by laser or radiofrequency energy. When it's slowly removed, the heat causes the vein to collapse, closing it permanently. It should fade within weeks. ⚙️

Go Online

Learn about vascular treatment options available at Hackensack Meridian Health: [HMHforU.org/Vascular](https://www.hmhforu.org/Vascular).

Treating Joint Pain Without Medication

Pain medication can only temporarily ease joint pain. Here are other ways to treat it more effectively.



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Hackensack

It's common to feel pain and discomfort in any number of our joints, especially as we age. While medication can temporarily ease the pain caused by achy joints, it won't heal it.

"Pain medications mask the pain for a little while, but they don't do anything to help increase the function or health of that joint," says **James W. Cahill, M.D.**, an orthopedic surgeon who specializes in joint replacement and sports medicine at **Hackensack University Medical Center**.

Here is how you can treat joint pain beyond medication.

Ways to treat joint pain at home:

- ▶ Apply ice to your joints for 15 minutes several times a day to relieve pain and swelling.
- ▶ After a day or so, try a heating pad to address any muscle spasms around the joint.
- ▶ Rest the joint during the first day and avoid activities that cause you pain. After the initial inflammation goes away, you will need to strengthen that joint through exercise.
- ▶ Look into taking supplements, such as glucosamine and chondroitin. "Glucosamine sulfate has been shown to reduce pain in patients suffering from arthritic joint pain. However, there is not enough evidence to show that it decreases inflammation," says Dr. Cahill.
- ▶ Joint pain is common in people who are overweight, so losing weight could relieve some of the pressure on your joints. Swimming and cycling are two ways to work out without putting too much stress on your joints.

Ways your doctor may treat your joint pain in an office setting:

- ▶ Doctors can administer a corticosteroid injection or a targeted nerve block, which can decrease inflammation and ease the pain.
 - ▶ Patients suffering from joint pain can benefit greatly from physical therapy. A physical therapist will use heat and cold therapy and a wide variety of other modalities to ease the pain, strengthen and stabilize the joint, and improve range of motion.
 - ▶ A type of lubricant (visco supplementation), commonly referred to as gel shots, may be used to alleviate joint pain. It is a concentrated component of natural joint fluid.
 - ▶ There have been many advancements in the field of regenerative medicine to help heal damaged or injured tissue, including the lining of your joints. These therapies include injection of substances found in your blood, growth factors and stem cells, or other compounds into specific locations to strengthen tissue and decrease the effects of long-term arthritis.
- Whatever your treatment plan, if the pain in your joint becomes too intense or it suddenly becomes inflamed or swollen, get medical help right away. These treatments may be able to decrease inflammation and promote some degree of healing.



Go Online

Learn how our musculoskeletal and orthopedic experts are committed to helping you maintain optimal health, get moving and live life to the fullest at [HMHforU.org/Ortho](https://www.hmhforu.org/Ortho).

Can Physical Therapy Help Your Arthritis?

Depending on your diagnosis and treatment plan, physical therapy can help manage certain arthritis symptoms.

While there's no cure for arthritis, physical therapy may help you manage your symptoms related to mobility and activity, depending on your diagnosis and individualized care plan.

Though there are more than 100 different types of arthritis with their own causes, symptoms and treatments, the most common types of arthritis include:

- ▶ Osteoarthritis
- ▶ Rheumatoid arthritis
- ▶ Psoriatic arthritis

If physical therapy is prescribed for you to better manage your arthritic condition, some benefits may include:



Roger Rossi, D.O.

Physical medicine and rehabilitation specialist

800-822-8905

Edison



Increased range of motion

Stiff joints are a common complaint with arthritis and can make it difficult to bend and straighten. "Gentle stretching and range-of-motion exercises can help maintain the flexibility necessary for daily tasks, such as getting in and out of chairs or reaching overhead," says **Roger Rossi, D.O.**, physical medicine and rehabilitation specialist at **Hackensack University Medical Center**.



Strengthened muscles

If the muscles around your joints are weak, they will be under extra stress and can hurt. "Strong muscles can help stabilize a weakened joint and decrease pain," Dr. Rossi adds.



Safe and effective use of assistive devices

Assistive devices, such as canes, walkers, crutches, braces and splints, take stress off your joints and muscles, and make it easier to perform certain activities.



Pain management

Physical therapists can teach you the best ways to relieve acute and chronic pain, as well as how to adjust your activities to prevent pain.

What to Expect From Physical Therapy

Your physical therapist will work with you to develop a treatment plan based on your history and goals. This is likely to include:

- ▶ Program of customized exercises
- ▶ Pain relief, using heat or ice packs, electrical stimulation and ultrasound
- ▶ Hands-on joint and soft tissue massage and mobilization
- ▶ Assistive devices

"A critical element of physical therapy is education," Dr. Rossi says. "Your physical therapist will help you understand, for example, how to reduce stress on your joints, how to do the exercises in your treatment plan and how to manage pain on your own."

You may need to see your physical therapist weekly to start, or even multiple times a week during a period of acute pain. But as you learn to manage your arthritis, you'll likely see your physical therapist less often, checking in with them every few months to set new goals and update your treatment plan as needed.

"Patients will achieve a better and more sustained outcome when they commit to performing their exercises daily and consistently as part of a home exercise program," Dr. Rossi shares. "Living with arthritis is not always easy, but certainly incorporating the learned benefits of physical and occupational therapy into one's life is an important part of management.

"Physical and occupational therapy may not always be prescribed for treatment of arthritis in some instances. It depends on the nature and course of the disease. One should always seek guidance from their physicians as to the best timing and indications, as well as precautions, when receiving a therapy program." ❄️

Go Online

Learn more about physical therapy and rehabilitative services at Hackensack Meridian Health at [HMHforU.org/PhysicalTherapy](https://www.hmhforu.org/PhysicalTherapy).

The Facts on ALS

Here are answers to some of the most common questions about ALS, otherwise known as Lou Gehrig's disease.

ALS, or amyotrophic lateral sclerosis, is a debilitating disease that affects motor nerve cells in the brain and spinal cord. This causes a wide variety of symptoms, but most commonly and universally, people with ALS experience progressive muscle weakening and paralysis. As many as 30,000 people in the United States have ALS, and about 5,000 new cases are diagnosed every year.

You may have heard of ALS due to the Ice Bucket Challenge, or even as its previously common name, Lou Gehrig's disease. Here are answers to some of the most common questions asked about ALS.

Can You Prevent ALS?

"Unfortunately there is no way to prevent ALS," says **Mary Sedarous, M.D.**, neuromuscular medicine specialist and co-director of the ALS Center at **Jersey Shore University Medical Center** (one of only two centers in New Jersey to become a certified treatment center by the ALS Association), and assistant professor, Department of Neurology, Hackensack Meridian School of Medicine. "For many people with ALS, there is not a clear cause of the disease." Researchers have studied numerous potential causes, such as diet, lifestyle and environment, but no clear reason has been identified.

For other patients with ALS, the cause is genetic. For about 5–10 percent of people with ALS, there is a clear genetic line to a family member with ALS. This is called familial ALS.

"Genetic testing can be done for ALS," says Dr. Sedarous. "I recommend discussing your options with a genetic counselor before undergoing the testing process."

Who Is at Risk of ALS?

"Because there is no clear cause for many cases of ALS, it is difficult to pinpoint risk factors," says neurologist **Florian Thomas, M.D., Ph.D.**, co-director of the ALS Center, and professor and founding chair, Department of Neurology, **Hackensack University Medical Center** and Hackensack Meridian School of Medicine. The clearest risk factor is having a family history of ALS.

That being said, Dr. Thomas points to some additional factors to consider:

- ▶ ALS is more common in older people, and your risk of getting ALS increases as you age. It is most common between ages 40 and 70.
- ▶ ALS is 20 percent more common in men than women.



Mary Sedarous, M.D.
Neuromuscular medicine specialist
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Neptune and Red Bank



Florian Thomas, M.D., Ph.D.
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Hackensack

Will ALS Ever Be Cured?

It's hard to say. Currently there is no cure for ALS, but that is not due to lack of effort from doctors and researchers.

"Research is ongoing, and treatments and medications that help slow the effects of ALS are continually being discovered," says Dr. Thomas. "Today, ALS treatment is an interprofessional undertaking that includes respiratory support, medication, physical therapy, speech therapy, assistive devices and other forms of treatment and support. And at Hackensack, we are pursuing a small phase 1 study that seeks to show that re-educating the bone marrow to produce less neuro-inflammation may be helpful in treating ALS." 🧠

Go Online

Learn more about our interdisciplinary care for ALS patients at [HMHforU.org/ALS](https://www.HMHforU.org/ALS).

Doctor Spotlight

ANNE PARK, D.O.

Internal Medicine

Hackensack University Medical Center

From an early age, Anne Park, D.O., understood the power of medicine. A child of immigrants, she grew up in the Bronx, New York, helping her parents run their family-owned drug store.

“My father was a pharmacist back in Korea,” explains Dr. Park, an internal medicine doctor at **Hackensack University Medical Center**.

“There were a lot of immigrant communities in the Bronx, and the immigrants didn’t have insurance to go to the doctor. So if they were sick, they would come to the drug store. They didn’t know where else to go. My dad would help them. It was really nice to grow up in that kind of community and witness my parents being so giving.”

The fact that Dr. Park eventually ended up in medical school is thanks in large part to her drug-store upbringing. “I love being at the bedside and talking to my patients, and that comes from being in the store,” she says. “It’s where I learned to speak to people—manning the cash register and taking cues from my dad. As I look back on it now, that was my apprenticeship.”

When she’s not at patients’ bedsides, Dr. Park can be found pulling weeds and preparing nutritious meals.

Where does your interest in nutrition come from?

I noticed I was entering a really skinny, lethargic phase in my life. I had no muscle, and I was tired and fatigued all the time. So I started researching and became interested in metabolic health, which looks at insulin resistance and how many carbohydrates your body can tolerate—eating in a way that’s kind to your liver and your pancreas. It’s a more holistic approach to medicine that includes medication where appropriate but also looks at food. For me, that means a low-carb, Mediterranean diet. I’ve been living that way for about six years.



Anne Park, D.O., has adopted a low-carb, Mediterranean diet and loves cooking healthy meals at home.

Have you adapted any of your favorite Korean dishes to your healthy lifestyle?

Shirataki noodles are low-carb noodles that you can find in the refrigerated section of the supermarket. They’re extruded from the root of the konjac plant, which has been used for a long time in Korean and Japanese cuisine. I make a popular Korean dish called chapchae using those instead of typical yam noodles, which are very starchy. For sweetness, I use a sugar alternative—all-natural erythritol—instead of granulated sugar or honey.

What is something you like to do to relax when you’re not working at the hospital?

I love to spend time weeding my garden. It is therapeutic to me. I have three teenaged children, so being able to go outside and have some quiet time to myself is huge. I like to listen to podcasts while I’m out there. It’s a great way to decompress. Plus, it’s useful. It’s not a waste of my time because it actually helps my house. 🌱

To make an appointment with Dr. Park or a doctor near you, call **800-822-8905** or visit **HMHforU.org/FindADoc**.



Doctors at Hackensack University Medical Center and Jersey Shore University Medical Center have a new tool in their arsenal to prevent heart disease.

Heart disease kills more than 600,000 people in the U.S. every year. Now, doctors at **Hackensack University Medical Center** and **Jersey Shore University Medical Center** can offer a new procedure to help prevent this disease.

Previous Options for Heart Disease

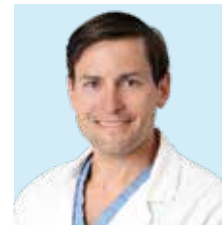
Until now, doctors had two ways to open up narrow, hardened arteries supplying blood to the heart:

- ▶ **Angioplasty**, where a balloon is inflated to help open a blocked artery
- ▶ **Atherectomy**, in which tiny rotating blades open the artery through scraping and drilling

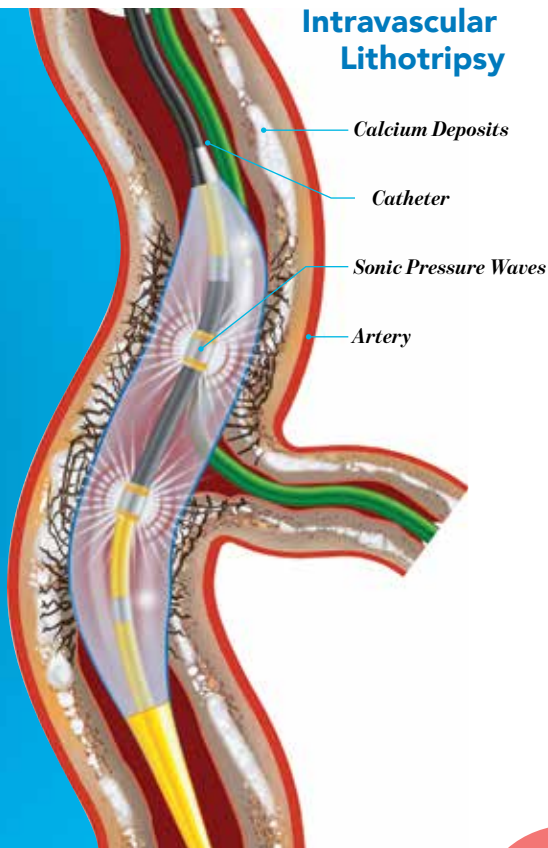
After one or both of these procedures are done, a stent—a metal tube that helps keep the vessel open—is usually inserted.

Unfortunately for some patients, neither of these methods is ideal. “Sometimes fatty plaque that has been there for so long goes from being soft and squishy to being hard as a rock,” says **Daniel Kiss, M.D.**, a cardiologist at Jersey Shore. “Because the calcium is hard, plaque can’t move back against the arterial wall, the balloon can’t expand properly and the blockage remains.”

Atherectomy comes with its own difficulties. “When you scrape the wall of the artery, the debris that falls out goes downstream into the microcirculation,” says **Haroon Faraz, M.D.**, interventional cardiologist at Hackensack. Doctors have to scrape enough calcium to unblock the artery—but not so much that they’ll clog the system with the debris.



Daniel Kiss, M.D.
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Haroon Faraz, M.D.

Interventional cardiologist

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Teaneck and North Bergen

A New Option Emerges

“[Before,] there really wasn’t a great treatment to clear the way for the stent in patients whose calcium had gotten hard and built-up,” Dr. Kiss says.

Doctors at Hackensack and Jersey Shore now have intravascular lithotripsy (IVL) as a new tool in their arsenal. IVL uses sonic pressure waves, also known as shockwaves, which create a series of microfractures to break up the calcium without affecting the healthy vessel. “The beauty of this technology is that it attacks the calcium but leaves the healthy vessel wall alone,” Dr. Faraz says.

It’s based on the same technology that has been used for decades to safely break up kidney stones.

The minimally invasive procedure, which is done under local anesthesia, is performed in conjunction with angioplasty and stenting.

▶ **First**, the doctor introduces the catheter to the heart through a small incision in the patient’s arm or leg.

▶ **Then**, IVL emits pressure waves to break up the calcium deposits.

“One big advantage of the shockwave is that you’re not throwing the debris anywhere,” says Dr. Faraz.

After the IVL creates fractures in the calcium, the artery can successfully be expanded at low pressure with the angioplasty balloon. Then the stent can be implanted. “This procedure allows us to use the biggest stent we can the first time. And that should prevent patients from having to come back to the catheterization lab in the future. It’s really about getting the right result in the right patient the first time,” says Dr. Kiss. ❄️



What’s Your Risk for Heart Disease?

A coronary calcium scan is a specialized test that uses a computed tomography (CT) scan to get a detailed picture of your heart and measure any calcium buildup in the coronary arteries. Make an appointment to get your scan at [HMHforU.org/CalciumScan](https://www.hmhforu.org/CalciumScan).

Go Online

Learn more about comprehensive cardiac care, close to home, at [HMHforU.org/Heart](https://www.hmhforu.org/Heart).



We offer a number of programs to help keep our communities healthy. Topics range from general wellness to heart health, stroke, cancer care, women's health and more. View some featured events below.

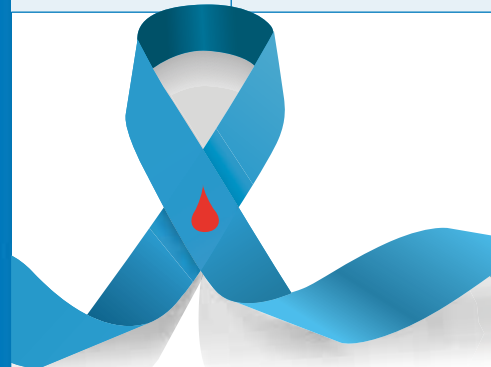
For a full listing or to register, visit HackensackMeridianHealth.org/Events or call 800-560-9990.

SchedUle

Here are just a few of the events & classes this February through April 2022

Hackensack University Medical Center
30 Prospect Avenue
Hackensack
800-560-9990

Mountainside Medical Center
1 Bay Avenue
Montclair
888-973-4674



Diabetes

Diabetes Alert Day Learn about this silent killer of which more than 34 million Americans are at risk. Colette Knight, M.D.
Mar. 22, noon–1 p.m., virtual event

Special Events

Healthy Hearts: Make Every Bite and Move Count
Cooking and exercise demonstrations included.
Feb. 15, 5–6 p.m., Mountainside



Cancer Care

HPV and Cancer Join Merieme Klobocista, M.D., to learn how HPV infection can cause cervical and associated cancers, and what to know about the HPV vaccine.
Feb. 8, noon–12:45 p.m., virtual event

► **Understanding Cancer**
Cancer affects all of us. This #WorldCancerDay, let's come together and take action for a cancer-free world. Feb. 4, 1–2 p.m., virtual event

HOSPITAL LOCATIONS

**Palisades
Medical Center**
7600 River Road
North Bergen
800-560-9990

**Pascack Valley
Medical Center**
250 Old Hook Road
Westwood
877-848-9355

General Wellness

Weight-loss Surgery

To learn more about weight-loss surgery, attend a free seminar.

To find a seminar near you, visit HackensackMeridianHealth.org/WeightLoss.

► **Teaching Kitchen** Are your New Year's health resolutions still on track? Join our registered dietitian-led seminar to find inspiration for your diet and workout regimen. Mar. 1, noon–1 p.m., virtual event

Heart Health

Women and Heart

Disease Join this seminar to be inspired to make lifestyle changes to decrease your risk of cardiovascular disease. Lucy Safi, D.O.

Feb. 4, noon–1 p.m., virtual event



Neuroscience

Matter of Balance: Managing Concerns About Falls Free eight-week fall prevention program designed to reduce the fear of falling and increase the activity levels of older adults.

Mar. 10, 17, 24 & 31 and Apr. 7, 14, 21 & 28, 10 a.m.–noon, virtual event

► **Integrative Medicine and Parkinson's Disease: Facts and Fiction** Feb. 10, 11 a.m., virtual event



Health Screenings

Cervical Cancer Month Pap smear referrals; routine screenings, including blood pressure, pulse and pulse oximetry; and diabetic screening: HgbA1c.

Jan. 25, 26 & 27, 10 a.m.–noon, North Bergen Senior Housing

- **Healthy Heart Month Stroke Seminar** Know the signs; routine screenings, including blood pressure, pulse and pulse oximetry; and diabetic screening: HgbA1c. Feb. 17, 9–11 a.m., Cliffside Park Senior Center
- **National Sleep Awareness Month** Sleep wake assessment; women's health seminar; general screenings, including blood pressure, pulse, pulse oximetry and BMI. Mar. 10, 10 a.m.–noon, Guttenberg Senior Housing
- **National IBS Month** Food and nutrition information; sepsis education; general screenings, including blood pressure, pulse and pulse oximetry. Apr. 7, 10 a.m.–noon, Union City Senior Housing

Childbirth/Maternity

Infant Care and Safety Class Expectant parents learn about the care, safety, growth and development of infants.

Feb. 9, Mar. 9 & Apr. 6, 7–9:30 p.m., virtual event

- **Breastfeeding Class** Basics of breastfeeding. Feb. 23, Mar. 23 & Apr. 27, 7–10 p.m., virtual event
- **Prepared Childbirth Class** This class prepares the expectant mother and her support person for the birthing experience. Feb. 12, Mar. 12 & Apr. 9, 9 a.m.–4:30 p.m., virtual event

Parent/Guardian Talks:

- **Rheumatology** Join Anna Gironella, M.D., and learn the signs, symptoms and treatment options of different rheumatic diseases. Feb. 10, 12:30 p.m., virtual event
- **Helping Kids of All Ages Sleep Better** Join Stacey Elkhatib Smidt, M.D., and learn about the importance of sleep for kids' health and tips for a better night's rest. Mar. 24, 12:30 p.m., virtual event



Tony Varughese with Susan Zabransky



Building the Health Care Pipeline

Scholarships help students like Tony Varughese bolster the ranks of tomorrow's doctors.

Even without the added pressure of a pandemic, the U.S. health system faces a shortage of doctors. According to the Association of American Medical Colleges, the shortage could be as steep as 124,000 doctors by 2034. Hackensack Meridian *Health* believes that curbing this crisis—and keeping pace with the rapid rate of change in health care—is dependent on building a strong pipeline of health care providers.

"It's an exciting time in the field of medicine as we continue to make new discoveries so rapidly that, at times, it's almost impossible to keep up," says **Bonita Stanton, M.D.**, dean of Hackensack Meridian School of Medicine. "It is important that we have a robust group of younger doctors in the field who understand the technology leading to these changes, are at the peak of their ability to absorb knowledge and bring curiosity to the medical field."

That's why in 2018, Hackensack Meridian School of Medicine opened its doors to its first class of aspiring physicians. Students of the medical school have the opportunity to spend their fourth year doing research, earning another degree, completing a specialty immersion program, doing community advocacy work or graduating in three years and starting their residency with Hackensack Meridian *Health*.

Tony Varughese is one of the first graduates of the medical school. An avid runner who raced from California to New York raising money for cancer research, he earned a scholarship sponsored by the Susan Zabransky Hughes Memorial Fund. Each year, the Run for Sue Committee works closely with

Hackensack University Medical Center Foundation to host the Annual Susan Zabransky Hughes Memorial 5K in Saddle River to raise crucial funds for various initiatives at Hackensack, including a respite camp for pediatric patients.

"We were so happy to learn Tony had done so many runs for cancer research," says Susan Zabransky, chair of the memorial fund and mother of Susan Zabransky Hughes, who battled cervical cancer. The Zabranskys have been donating to Hackensack for decades and have been focusing on cancer-related giving since the loss of their eldest daughter 10 years ago.

Tony is a first-year resident in internal medicine at **Hackensack University Medical Center** and plans to do a fellowship in oncology. His father, a brain cancer survivor, inspired his focus.

"When I was deciding on a medical school, I wanted to stay in New Jersey because I've been here my whole life and my family is here. Hackensack Meridian *Health* has great hospitals, so I felt confident the medical school was going to be great, too," Tony says.

Adds **Jeffrey Boscamp, M.D.**, vice dean of the School of Medicine and co-chief academic officer for Hackensack Meridian *Health*: "Scholarships are a powerful way to attract superb students to our school—and then Hackensack Meridian *Health* hospitals—who otherwise might not have been able to afford it. We are developing a whole continuum, from medical students to residents to practicing physicians, who are trained in our mission and community-based curriculum." ❄️

Start your virtual fundraiser today at Give.HackensackMeridianHealth.org/HostYourOwn

<i>Select your fundraiser type and sign up</i>	<i>Customize your page: Tell your story and add a personal photo</i>	<i>Start fundraising: Email and share your page with family and friends</i>	<i>Feel good about making a difference</i>
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Need help getting started? Email giving@hmhn.org or call 551-996-3451.  Use your smartphone or tablet camera to scan me 

New Year, New U

It's the time of year when many of us make promises to ourselves for the coming year. Here's how you can set goals for the new year to achieve a healthier, happier life.

44%
SAVE MORE
MONEY

21%
PURSUE A
CAREER AMBITION

Most Popular Resolutions

Getting healthy tops the charts when it comes to New Year's resolutions.

50%
EXERCISE MORE

48%
LOSE WEIGHT

39%
IMPROVE DIET



Try Something New

Here are five goals for a healthier you that you might not have considered before.

Make your bed every morning

Kicking off your days with a freshly made bed is a good way to transform your space and start your days off on the right foot. Accomplishing small tasks in the morning can also help you to be more productive throughout your day.

Be a more adventurous eater

Instead of cutting out certain foods from your diet, broaden your horizons and expand your palate this year. Trying a new cuisine once a month can be a fun way to introduce yourself to different flavors and cultures.

Find someone to mentor

Consider finding a young person to mentor. You can gain new perspectives and reinforce the lessons you've learned in life while feeling good about having a positive impact on a youth's life.

Sanitize your phone weekly

Your cell phone is one of the most germ-infested items that you own. Unplug your device before cleaning and use a lint-free cloth that's slightly damp with soap and water. Avoid using cleaning solutions that contain bleach and aerosol sprays on your touchscreen surfaces.

Take time each week to stretch

Healthy adults should do flexibility exercises for all major muscle-tendon groups at least two to three times a week. Try stretching, yoga or tai chi. Spend a total of 60 seconds on each stretching exercise, breaking your repetitions down into 15- or 20-second intervals.

Go Online

For tips and resources to help you live a healthier life in 2022, visit HMHforU.org.



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What to Know About Kids and COVID Vaccines

Our experts answer six of the most common questions parents are asking about COVID-19 vaccines for kids. Learn more at HMHforU.org/KidsVaccine.



Which Booster Should You Get?

As more Americans become eligible to receive the COVID-19 booster, you will be faced with a choice: Which booster should you receive? Understand when you should consider the mix-and-match approach and when it doesn't make sense at HMHforU.org/BoosterMix.

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Hackensack
Meridian Health

As the state's largest, most comprehensive health network, Hackensack Meridian Health is made up of 7,000 physicians, 17 hospitals and more than 500 locations. For a complete listing of our hospitals, services and locations, visit HackensackMeridianHealth.org/Locations.