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Sept/Oct 2002 • Vol. 6, No. 5

## Orthopedic Experts Keep Area Residents in Motion

*Meridian Health System  
orthopedic surgeon  
focuses on improving  
quality of life  
for his patients.* Page 2

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# Getting Back in the Game

*Major League Baseball star regains control of his life following rotator cuff injury.*

**A**s a starting pitcher on the 1986 World Champion New York Mets, Bobby Ojeda, 45, of Rumson, has enjoyed a remarkable career, although he's also endured the physical effects of his dedication to baseball.

"Playing baseball is one of the great joys of my life; however, 13 years of major league pitching has caught up to me," says Bobby, who now is the pitching coach for the Brooklyn Cyclones, a Class A minor league team affiliated with the New York Mets.

"All that wear and tear left me with an increasing pain in my shoulder that was making my life difficult."

While under the care of sports medicine specialist and orthopedic surgeon Mark M. Seckler, M.D., Bobby was diagnosed with a *rotator cuff* injury that required surgery. Rotator cuff injuries are usually strains or tears in the group of muscles that allow shoulder movement and hold the shoulder joints together. When damage is done to these muscles, the pain can become debilitating and can render the shoulder incapable of even the simplest everyday functions.

"Rotator cuff injuries are very common and definitely not restricted to just athletes," says Dr. Seckler, who also serves as an orthopedist for the New Jersey State Troopers and the U.S. Olympic team. "Of the 100 patients I see a week, about 30 of them are rotator cuff-related. Anyone who uses aggressive shoulder rotation in their daily life runs the risk of a rotator cuff injury, from doing housework, to construction, to sports — basically any repetitive motion can lead to an injury."

### When Enough is Enough

"I am not someone who runs to the doctor with every ache and pain," says Bobby. "However, my condition continued to get worse. When I couldn't golf anymore, that was bad enough. But, I knew I absolutely had to do something when I couldn't pick up my own kids."

In December 2000, Bobby underwent shoulder surgery by Dr. Seckler at Jersey Shore Medical Center. "I'm not a big fan of any kind of surgery," jokes Bobby. "But, I knew I had a



Mark Seckler, M.D., orthopedist, repaired a rotator cuff injury of former Mets pitcher Bobby Ojeda of Rumson.

great surgeon, and it was something I had to do or this injury would control my life."

A good percentage of rotator cuff injuries are treated through conservative methods, such as physical therapy, anti-inflammatory medication, or pharmaceutical injections. However, it's important to note that any medication should be accompanied by physical therapy. Even after conservative options have run their course, there are still surgical options to consider.

"Thanks to our increasing knowledge and surgical skill, patients now have several options that can help reduce the discomfort following surgery and return them to a better quality of life," says Dr. Seckler, who was fellowship trained in sports medicine at the University of Pennsylvania. "In years past, we would be required to perform traditional surgery. We are now able to repair the same type of damage in some patients with minimally invasive procedures that result in much less discomfort during the healing process."

After a successful surgery, Bobby learned a valuable lesson that he passes on to his players today. "Always complete the proper physical rehabilitation — it's the key to recovery," says Bobby. "It's very important to listen to your doctor and pay attention to your

## Message to the Community

Our body is a complex system of bones and joints that give us strength and mobility and permit us to perform a variety of physical activities that shape our daily lives. Unfortunately, our joints and bones are regularly subjected to trauma and gradual wear and tear that may seriously impede our health and well-being.



In the United States, musculoskeletal disorders are a leading cause of physical disability. Conditions such as osteoporosis, osteoarthritis, rheumatoid arthritis, back pain, spinal disorders, and fractures affect hundreds of millions of people around the world.

We have filled this issue of *Meridian HealthViews* with amazing stories about the human spirit and its ability, with the help of medicine, surgery, and rehab, to mend itself from orthopedic-related injuries and illnesses. We have featured some of the many physicians and other health care professionals who provide comprehensive orthopedic services and rehabilitation programs throughout Meridian. If you are living with any pain or immobility issues, we hope you'll call on these experts to help improve the quality of your life.

Sincerely,

John K. Lloyd, FACHE  
President

Photo: Chris Gahler

rehab team. They know what is best for you.”

### Relating to Patients

Dr. Seckler is an orthopedic surgeon who can truly relate to his patients. Having served as an alternate on the 1976 Olympic gymnastics team, played college football at Princeton University, and enjoyed a brief stint as a New York Giant, Dr. Seckler has seen his share of injuries. “I’ve always been an aggressive athlete, which unfortunately led to my first knee surgery at 15,” says Dr. Seckler. “During my life, I have had shoulder, wrist, and multiple knee surgeries, so I know what they are going through and how best to help my patients recover.”

According to Dr. Seckler, there are some proven, reliable ways to help prevent rotator cuff injuries. “If you perform repetitive overhead motions in your daily life, you can use flexibility and strengthening exercises to help prepare your body for the strain.”

Dr. Seckler says that a rotator cuff injury is not something you have to live with, no matter what age you are. “There are some injuries that would traditionally be beyond repair; however, today, we are able to treat patients well into their 70s and 80s.”

### Doing What He Wants

Since his surgery and recovery, Bobby has been living healthy and pain free. “I can’t imagine where I would be if I didn’t have the surgery,” says Bobby. “It really saved my life in the sense I can do exactly what I want to do: play baseball, enjoy my family, and live my life to the fullest. I really can’t imagine it any other way.”

↪ Michael Valentino

## The Safest Race

*One young athlete learns firsthand the importance of adding rest to his training regimen.*



Photo: Russ Seuffert

Andy Sharkey of Fair Haven now knows how to help prevent overuse injuries.

**F**or Andy Sharkey, a 15-year-old runner from Fair Haven, the thought of being injured from his training seemed impossible. Unfortunately, this “invincible” mentality eventually caused an injury that forced him to seek medical attention. “I had never really been injured before, and I did not think that anything threatening or serious could happen to me,” says Andy. “But one day I just could not even walk. I took several days off, but the pain did not get better, so I finally went to the doctor.”

### Too Little, Too Late

According to Stephen Rice, M.D., medical director of Sports Medicine at Jersey Shore Medical Center, Andy experienced difficulty walking because his sore leg muscles and shinbone had developed into a *stage four overuse injury*. “Repeating the same movement over time can cause damage and inflammation, resulting in an overuse injury. I frequently see overuse injuries in adolescents engaging in sports,” says Dr. Rice. “When athletes get into shape, they ask their bodies to do more than ever before. When an athlete experiences any type of discomfort at any stage, it should not be ignored.”

Recognizing the stages of overuse injuries is an important part of preventing further damage. The first stage of an overuse injury occurs usually during the first three to five days of training, when the athlete experiences soreness about one to two hours after physical activity. In the second stage, about 10 days into the activity, the pain begins before the activity ends and does not subside until

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# Is There a Doctor in the Ballpark?

*Team physician for the Trenton Thunder puts skills to good use both on and off the field.*

**S**teve Weintraub, D.O., sports medicine specialist, knows what it takes to succeed in sports. He's been treating athletes of all kinds for over a decade, and he applies what he learns to his many other patients. Since the 1994-95 season, he's been team physician for the Trenton Thunder, the Double-A affiliate of the Boston Red Sox, treating the players not only for their injuries, but helping them maintain their overall health and wellness.

"Being an athlete myself and working with other athletes at all levels is a personal and professional pleasure," explains Dr. Weintraub. "However, I find unique fulfillment in my work with the Thunder. These are athletes who are in their prime, trying to achieve their goals and perform at their highest potential. It's gratifying to see a new player arrive who is playing at one level, and then work with him to develop his skills to become a major league level player."

Steve Weintraub, M.D., (right) shown here with Joseph Golia, trainer, Trenton Thunder, brings his sports medicine knowledge to the Trenton Thunder minor league baseball team, where he is team physician.



Photo: Chris Gahler

Bringing the "Team Spirit" to Others  
Dr. Weintraub's work does not end at the ballpark. He is also the physician for several local high schools, runs his own private practice in Brick, and sees patients at Medical Center of Ocean County. With such a diverse group of patients, Dr. Weintraub has learned the importance of a positive attitude in the healing process.

"Professional athletes are highly motivated people, which also makes them great patients," explains Dr. Weintraub. "A person who wants to get better as soon as possible, is willing to be honest with me, and knows he or she has to work hard, will get back in the game a lot more quickly. The same advice can equally benefit patients with numerous other conditions."

### Reducing Risk for Injury

As young athletes begin to play more high-contact sports, they need to pay more attention to their health and safety. "Education is so important," says Dr. Weintraub. "Which is why I counsel the parents, coaches, and trainers at area high schools on proper training, injury prevention, equipment use, and proper and safe play. Without these fundamentals, there would be an environment that could lead to injuries and possibly end an athletic career rather than develop one."

Dr. Weintraub's advice to all athletes is simple: "Enjoy your sport, train properly, and play by the rules. The rules are there not only to keep the game fair, but to protect the athletes as well. Proper training prior, during, and post season prevents most common injuries."

Michael Valentino

**"Education is so important, which is why I counsel the parents, coaches, and trainers at area high schools on proper training, injury prevention, equipment use, and proper and safe play."**

— Steve Weintraub, D.O., sports medicine specialist  
Medical Center of Ocean County

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# Flying High Once More

*Pilot Joe Moore returns to the skies following arthroscopic surgery on his rotator cuff.*



Photo: courtesy of Joe Moore

Joe Moore of Brielle is back to flying around the world for Continental Airlines as an airplane captain, after surgery for a rotator cuff injury.

**J**oe Moore, 46, of Brielle had no idea how seriously he had injured himself while bodysurfing with his daughters last summer. “We were having a lot of fun when I got pummeled by a wave, and my left shoulder hit the ocean floor, knocking the wind out of me,” explains Joe, who is a captain for Continental Airlines in Newark. “More than a week later my shoulder was sore, but I didn’t think much of it. However, the pain continued, so I saw my doctor.”

### More Than a Sore Shoulder

When the pain didn’t subside after two months of medication and Joe had trouble sleeping, he went to see Charles Rizzo, M.D., an orthopedist

affiliated with Riverview Medical Center. “Dr. Rizzo’s office was close to where I live, and he was confident he could take care of my shoulder,” Joe says.

Dr. Rizzo sent Joe for an MRI scan and noticed that he had torn his *rotator cuff* — a group of small muscles in the shoulder joint that help you lift your arms up and rotate them around. “Since I was reluctant to have surgery, Dr. Rizzo recommended physical therapy. But when he realized how much loss of motion I had, we decided that surgery was the best option.”

Dr. Rizzo explains: “When a young, active patient like Joe cannot get back to normal activities and remains in a great deal of pain even with medication, this kind of injury

is not going to heal by itself. It has to be surgically repaired.”

### Surgery Was the Right Answer

Dr. Rizzo performed arthroscopic surgery on Joe’s torn *rotator cuff*, making small cuts in the shoulder and inserting instruments through these incisions. “Technically, this

**“When a young, active patient like Joe cannot get back to normal activities and remains in a great deal of pain even with medication, this kind of injury is not going to heal by itself. It has to be surgically repaired.”**

— Charles Rizzo, M.D., orthopedist  
Riverview Medical Center

is a difficult procedure for physicians and requires special skills,” he says, “but it is better for the patient because he can recover faster.”

Dr. Rizzo also teaches arthroscopic surgery several times a year at the Orthopaedic Learning Center in Chicago. “There is a move toward performing the least invasive procedures possible,” he says. “And more orthopedic physicians want to learn this procedure.”

Joe was operated on in March and was back to flying Boeing 777s by mid-April. “I had excellent care. The hospital staff at Riverview was wonderful, and I started physical therapy a week later,” says Joe. “I recently went back to Dr. Rizzo for a check-up and got a clean bill of health. In fact, I started golfing again. It’s good to be back!”

 Felice Mikelberg

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# Back on Her Feet Again

After two knee replacements and a long rehabilitation journey, this Riverview patient is ready to get back to business.

**C**arol Clifton experienced knee problems for more than 10 years. In recent years, the pain was so extraordinary that she couldn't even take a walk. "My job requires me to be on my feet all day," says Carol, who is a coordinator of Environmental Services at Riverview Medical Center. "But not long ago, I couldn't stay on my feet all day."

Carol's doctors told her that she had *degenerate joint disease*, which is associated with severe arthritis, and the only way to help her live a better, more active life was to have total knee replacement. So, last October, Carol decided to have bi-lateral knee replacements. "I really didn't know what to expect, because you take for granted that something like your knees will always work," says Carol.

### Starting from Scratch

After surgery, Carol went to Riverview Rehabilitation Center to start rehabilitating her knees under the care of Harry A. Bade III, M.D., an orthopedic surgeon who is also affiliated with Riverview Medical Center — a place she was familiar with and trusted. Riverview Rehabilitation Center is Monmouth County's only fully accredited acute care comprehensive inpatient rehabilitation facility.

"I had to learn to walk again," says Carol, who spent three months in rehabilitation. "If it wasn't for my rehab and the people who worked with me, I wouldn't have been able to be back at work so quickly."

After her discharge from inpatient care, Carol returned to the Center as

an outpatient. "Rehabilitation is very important in re-obtaining your range of motion and strength, and you have to relearn how the body functions properly with the prosthesis (artificial parts)," says Dr. Bade. "We aim to have patients start their rehab within 24 hours. The sooner their rehab starts, the closer they are to reaching their established goals."

According to Dr. Bade, it is also important after surgery to maintain a good muscular-skeletal system and to stay healthy. "The surgery is life changing," he says. "And the body needs to keep moving to stay fit and healthy. Patients need to take an aggressive approach to rehabilitation and continue their rehab until they reach their goals."

### A New Lease on Life

It will be a year next month since Carol, now 49, had knee replacement. "It's like getting a new lease on life," she says. "Recently, I took a walk on the beach, and it was the first time in years that I was without pain. I'm just amazed and so thankful that I was able to get my life back without pain. I couldn't have asked for more."

— Beth Reiprich

Continued from page 3

several hours after the movement is over. However, despite the soreness, performance is not affected. The injury becomes obviously noticeable in the third stage when the pain begins to occur fairly early in the activity, and the athlete's performance is significantly affected. Finally, in the fourth stage the athlete is forced to "stop cold," because pain occurs within his or her first steps.

**"When an athlete experiences any type of discomfort at any stage, it should not be ignored."**

— Stephen Rice, M.D., sports medicine specialist  
Jersey Shore Medical Center

For patients like Andy, who wait until their injury has manifested into the fourth stage, Dr. Rice recommends that they do not take part in physical activity for several weeks until they're completely pain free. He also recommends they seek physical therapy to slowly rebuild their strength and endurance.

### A Hard Lesson Learned

Andy's prognosis looks good, and he hopes to be back to running full time after five weeks of physical therapy. Having completed the 5,000-meter cross country race in an impressive 17 minutes and 36 seconds last year, this promising runner now has a better appreciation for his body. "When I am feeling tired or run down, I take time to rest," he says. "Now I know that in order to keep on running, I have to take care of myself."

— Maria Ronan

Carol Clifton (shown here with her orthopedist, Harry A. Bade, M.D.) returns back to work after successful knee replacement surgery and extensive rehabilitation.



Photo: Russ Seuffert

### Meridian Acute Inpatient Rehabilitation

Riverview Rehabilitation Center	732-530-2368
Shore Rehabilitation Institute	732-295-6500

### Meridian Sports Medicine Services

Sports Medicine Clinic	732-776-4660
Meridian Physician Referral	1-800-560-9990



# A Positive Approach Makes the Difference

Local doctor gets firsthand experience as a patient after a sudden accident.



Photo: Russ Scuffert

After surgery to reattach his thumb, Carl Marchetti, M.D., went to Progressions Rehabilitation at Jersey Shore, where he worked with Jyo Supnekar, a certified hand therapist.

**W**hen Carl Marchetti, M.D., was splitting logs on his day off of work last December, he never thought he would end up in the Regional Trauma Center that he helped to bring to Jersey Shore Medical Center. On that day he accidentally amputated his thumb. “I knew I hit it right away,” says Dr. Marchetti, who is vice president of Medical Affairs at Jersey Shore. “I tried putting pressure on the thumb to help stop the bleeding while my son, Michael, who happens to be an emergency room physician, took me to the Trauma Center.”

After seven hours of surgery, Raymond Decker, M.D., an orthopedist affiliated with Jersey Shore Medical Center, was able to successfully reattach his thumb. He spent a week in the hospital recovering from the surgery,

and then went home with his hand in a cast for a 12-week recovery period. Once Dr. Marchetti’s cast was removed, he started rehabilitation.

“The doctor initially told me that I would probably get about 50 percent of my mobility back after rehabilitation,” recalls Dr. Marchetti. “So, I wanted to get started right away.”

After 40 years in medicine, Dr. Marchetti found himself with a renewed appreciation for his profession. He says, “I’ve been in medicine all my life, and I have seen a lot of wonderful things happen. But when your own thumb is lying on the ground and you see it implanted back and functioning, that’s a miracle.”

### Specialized Patient Programs

In February, Dr. Marchetti started his rehab at Progressions Rehabilitation at

Jersey Shore Medical Center. “I go to rehabilitation three to four days a week,” he says. “They have a good series of specialized programs that help you reach your goals.”

Progressions is an outpatient rehabilitation center that provides non-acute rehabilitation services. The professionals at Progressions work closely with referring physicians to ensure each patient’s care is appropriate, progress is well documented, and individual patient goals are met. The staff also provides every patient with an individualized home program, which is evaluated and changed on an ongoing basis as the patient improves.

“Our goal is to help patients maximize their potential so they can function and interact effectively in the world around them,” says Jyo Supnekar, ORT, a certified hand therapist.

### Ahead of the Curve

Dr. Marchetti still has several months to go to complete his outpatient rehabilitation. “Once I’m finished with Progressions, I will continue on the program they develop for me at home,” he says. “I’ve already exceeded my physicians’ prognosis of 50 percent mobility. I’m currently at 70 percent, and now doctors think I will get 90 to 95 percent of my mobility back.”

Dr. Marchetti is already back to work and back to many of the activities he was doing before his surgery. “It’s amazing what they’ve done for me,” he says. “Nothing is going to hold me back; however, I’m not planning to cut any logs just yet,” he chuckles.

Beth Reiprich

### Meridian Outpatient Rehabilitation

LIFE Rehabilitation Brick	732-836-4368
LIFE Rehabilitation Point Pleasant	732-295-8215
Progressions Rehabilitation at Jersey Shore Medical Center	732-776-4558
Riverview Rehabilitation Center	732-530-2245
Shore Rehabilitation Institute	732-295-6500



# Combining Advanced Technology with Compassionate Care

*Cutting edge technology and the skills of Jersey Shore Spine Center team save 22-year-old from paralysis.*

**J**essica Asen, 22, of Manalapan, refers to herself as “the Bionic Woman” because of a tiny graphite cage inserted between the vertebrae of her spine that is essentially holding up her back. This state-of-the-art device allows her to move and walk in a normal fashion, something that Jessica didn’t think she would do again after April 16.

On that day, Jessica was driving home on Route 18 from her work as a job coach for autistic adults when she lost control of her car and went off the highway, hitting a tree. The car rolled over and Jessica, who was wearing her seat belt, wound up on the passenger side. Still conscious, she found her cell phone and called “911” while other motorists stopped to help her.

Jessica was transported to Jersey Shore Regional Trauma Center, where the trauma team initially thought that she had a head injury. But her major complaint was her back — she couldn’t move and was in terrible pain. A CT scan showed that her

vertebra was crushed — small pieces were in her chest and heart area — and the spinal cord was decompressed.

Michael F. Lospinuso, M.D., chief of Spine Surgery at Jersey Shore Medical Center, explained to Jessica that surgery was the best option to prevent her from becoming paralyzed. Foregoing the fear that she might never be able to walk again, Jessica agreed to undergo the complex reconstructive spinal surgery to treat her critical injury.

### Creating A New Vertebra

According to Jessica, her chest wall, which was full of blood, was opened up to remove the fragments of her broken vertebra. Making an incision through her side, Dr. Lospinuso also removed one of Jessica’s ribs that would be used to help reconstruct a new vertebra in a procedure called a *vertebrectomy*. The new bone was fit into a tiny, graphite cage-like device with openings that Dr. Lospinuso inserted, allowing the bone to fuse with Jessica’s other vertebrae and keep her spinal cord upright.

Dr. Lospinuso explains that an important factor in doing this technique, which was described in a July 11, 2002, segment of ABC-TV’s “Good Morning America,” is that it eliminates the need to make a separate incision to take bone from the hip for bone graft. Filling the cage with synthetic putty helps the bone to fuse more quickly, he adds.

“This technique is just one of the highly technical procedures done at Jersey Shore’s Spine Center, a regional referral center for the most complicated spinal injuries and conditions, as well



Jessica Asen of Manalapan is back to work at New Horizons in Autism in Tinton Falls, following a serious accident, spine surgery, and recovery.

as the most common back problems,” Dr. Lospinuso says. “Our team of specialists treat patients using a multi-disciplinary approach that combines the latest surgical techniques with comprehensive medical care.”

### Support for the Pain

Jessica says no one realized how severe her injury was until she underwent surgery. But she walked within three days of her surgery, without using a walker or a cane. Dr. Lospinuso referred Jessica to the Pain Institute at Jersey Shore Medical Center to help manage her pain during her recovery. She also wore a back brace for 12 weeks following her surgery.

“Words can’t describe my gratitude to Dr. Lospinuso, the Pain Institute staff, and the other staff members who cared for me at Jersey Shore,” adds Jessica. “Along with my family, they were the support system that I needed to recover. I feel great, and I’m truly grateful that I can go back to doing the work that I love so much.”

— Pat Caldwell

Orthopedic surgeon Michael F. Lospinuso, M.D., demonstrates the tiny graphite cage he inserted in Jessica Asen’s spine to prevent her from becoming paralyzed.



Photo: Chris Gahler

Photo: Chris Gahler

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## Back Surgery Revitalizes Toms River Woman's Life

*After years of suffering, a busy working mom is now enjoying life to the fullest and wishing she'd had surgery sooner.*

**W**hen Noreen Peters of Toms River goes jogging, her companion is her 110-pound rottweiler. She also takes a Jazzercise class a few times a week, and coaches her daughter's softball team. A human resources professional at DPT Lakewood, Noreen thoroughly enjoys making these activities part of her lifestyle — one that's now free of the back problems that plagued her for 11 years.

Noreen's back pain was the result of a *herniated disc*, also known as a *slipped disc*, a rather common problem that many people can manage with rest, physical therapy, or medication. But for those who, like Noreen, suffer severe pain and discomfort, the condition can be very debilitating.

A *disc* is a small pad of elastic tissue located between each vertebra in the spinal column, acting like a shock absorber for the vertebrae and preventing them from rubbing against each other. These discs can break down and bulge into the spinal canal, and sometimes the thick, jelly-like material inside them seeps out and presses against a nerve, resulting in a herniated or slipped disc.

### Many Treatment Options Available

"About 100 percent of the patients I see who have disc herniations are over 50, so age definitely plays a big factor in developing this kind of back problem," says Lambro Demetriades, M.D., an orthopedic surgeon affiliated with Jersey Shore Medical Center and Medical Center of Ocean County. "As we get older, there is more wear and tear on the discs, and even a minor strain or twisting movement can cause a disc to herniate."

In many instances the condition gets better with time, and resting the lower back area can help reduce the swelling, Dr. Demetriades says. Other treatments include physical therapy, anti-inflammatory medications, chiropractic care, or epidural

steroid injections (used in more serious cases).

Over the years, Noreen tried all these methods and more to help relieve her back pain, but nothing seemed to help. She only slept sideways on her bed because that was the only position she could get into comfortably. Her breaking point came one day last October when she couldn't get out of bed after mopping her kitchen floor the previous afternoon. Noreen knew she had to seriously consider surgery.

### Noreen's Final Decision

Noreen asked Amy Brooks, her company's supervisor of Occupational Health Services and also her best friend, to help her find a doctor. Amy recommended Dr. Demetriades, who is with Seaview Orthopedics, the physician group that treats orthopedic cases for DPT's 750 employees.

"I was very frightened about going through surgery," Noreen recalls. "I thought I'd never be the same or that surgery might make my condition worse. But I had a lot of confidence in Dr. Demetriades and knew this was the right decision."

Dr. Demetriades performed a *microdiscectomy* (using microsurgery to

remove the portion of the disc that's herniated) on Noreen at Medical Center of Ocean County on March 1. According to Dr. Demetriades, about 10 percent of the patients diagnosed with herniated discs undergo surgery and find relief from their back pain.

"I went home the same day as the surgery and couldn't believe how much better I felt," Noreen says. "I've lost weight. I can exercise. I'm a new person. I'm just sorry I waited so long to have the surgery."

Photo: Tom Van Dyke



Noreen Peters of Toms River receives pain relief after back surgery and has returned to her favorite pastimes.

Dr. Demetriades says that the best way to prevent developing a herniated disc is to protect your back by using the proper body mechanics when lifting heavy objects, maintaining a healthy weight, and exercising to build up your muscles and strengthen your legs. Noreen says she won't be mopping her kitchen floor any time soon; her husband has hired a cleaning service instead.

 Pati Caldwell

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## A Joint Effort for Pain-free Knees

*Whether your desire is to stroll along the beach at 50 or golf at 80, orthopedic physicians can help you work through knee pain.*

**L**ike most people confronted with painful arthritis and its debilitating effects, Helen Reuter shuddered at the thought of surgery. Even though her trusted physician, Roy Mittman, M.D., recommended it after all other therapies had failed to relieve the often unbearable pain and swelling in her knee, Helen convinced herself that surgery was a last resort.

“I told Dr. Mittman I’d let him know when I was good and ready,” laughs the 80-year-old Brick resident. “That day came when I could no longer play golf.”

Arthritis affects nearly 43 million Americans, roughly one in every six. In fact, it is the leading cause of physical disability among adults over the age of 18, with osteoarthritis being the most common type. Interestingly, osteoarthritis occurs more frequently in men before age 45 and is more common in women after age 45. According to the Arthritis Foundation, more than half of us will develop arthritis in at least one knee by age 65.

Orthopedic surgeon Dr. Mittman says osteoarthritis is caused by wear and tear of cartilage with eventual loss of the cartilage altogether. “Cartilage serves as a cushion between the bones of the joints,” he says. “When it wears away, the bones rub together, causing pain, swelling, and loss of motion.”

### Non-surgical Treatments Do Work

The good news is that the best therapies to combat arthritis are inexpensive and have few, if any, side effects: losing weight and exercising. Having practiced orthopedic medicine for more than 20 years, Dr. Mittman is an advocate for non-surgical remedies first.

“Each time I lecture on the topic of arthritis, I tell the audience that the average person takes 5,000 steps a day. If that person loses 10 pounds, that would take 50,000 pounds of pressure a day off his knees. That’s more than a million pounds in a month,” says Dr. Mittman. “Exercise and weight loss have been shown to relieve arthritis pain and delay the need for surgery.”

Of course, the flip side of this remedy is that arthritis often makes it painful to exercise in the first place and easier to put on weight. Dr. Mittman admits that losing the weight is often a problem for his patients. That, and following through on an exercise and nutrition plan. “Many, many patients try a program a couple of days or weeks and then throw in the towel,” he says. “Changing lifestyle habits, exercising, losing weight — these all take time and commitment.”

Effective over-the-counter standbys such as acetaminophen, aspirin, and *ibuprofen* (an anti-inflammatory) as

Helen Reuter knew it was time for surgery when painful knees kept her from golfing.



Photo: Tom Van Dyke

Photo: Tom Van Dyke



Roy Mittman, M.D., (right) and Ken Soucek of LIFE Rehabilitation (left) are instrumental in assisting patients like Louis Sanislo (shown here) in orthopedic surgery and recovery.

well as rub-on relievers can take the edge off arthritic pain. A doctor can also prescribe stronger medication or give a local cortisone injection to provide more immediate relief of swelling and pain. All of these offer short-term solutions to a chronic condition.

**When All Else Fails**

Total knee joint replacement is the closest thing to a cure when all other efforts have failed to provide relief for the pain and limitations of arthritis.

“It’s really a quality of life issue for the patient,” explains Dr. Mittman, who says there was a time when doctors reserved joint replacement surgery for people over age 65. “Newer joints can now last 15 years or more, making total knee replacement an option for younger people. And, if a person has poor mobility at 45 and nothing else has worked, it’s just not fair to wait.” Although Helen was in her 70s when she had her first total knee operation at Jersey Shore Medical Center, quality of life was definitely a deciding factor for her. “Dr. Mittman was very encouraging,” she says. “I had all the confidence in the world in him, so much so that I went back to him a few years later to do my other knee.”

**Get the Joints Jumping**

For Helen, rehabilitation was the toughest part, but she remained motivated. “It’s painful at first, moving the joint around after it’s been so stiff for so long, but the therapists have you feeling so much better in such a short time that it is all worth it,” says Helen, who completed her most recent rehab at Shore Rehabilitation Institute (SRI) in Point Pleasant.

In addition to two acute inpatient rehabilitation units — SRI and Riverview Rehabilitation Center in Red Bank — Meridian also offers a number of outpatient rehabilitation and fitness centers called LIFE. Ken Soucek, senior manager of Rehabilitation and Orthopedics for Medical Center of Ocean County, says it is the rehab-into-fitness component that he believes helps transition patients to wellness following their surgery and acute rehab.

“Ideally, patients should start and end any surgery with some level of fitness,” explains Ken, who is working to build a program whereby physicians would refer their patients for rehabilitation *prior* to surgery in addition to after surgery. “If we can improve a patient’s level of fitness before they

have surgery, they are going to be that much stronger and resilient.”

Ken says the secret to surviving rehab, which can be painful and exhausting, is to know what you want to do when it’s all over. “If the patient wants to walk, bike ride, chase grandkids, garden, or dance, that’s what’s going to motivate him or her to work through the tough days,” he says.

**Doctor-Patient Respect Is Key**

Helen says that after years of going to Dr. Mittman at his Seaview Orthopedics practice, she has come to view the doctor like a son. “He is so personable and takes such time getting to know his patients,” she says. “He makes all the patients feel so comfortable. Everyone at the practice is so friendly.” Helen claims it’s that level of trust that got her through the tough medical decisions.

Knowing that his patients feel that way makes Dr. Mittman think that all of his extra efforts are worth it. From little league sponsorships to community lectures, sports clinics, and a scholarship program, to their recent fundraising efforts for the American Heart Association, the staff of Seaview Orthopedics has an underlying mission of community involvement. *(For information about one lucky scholarship recipient, turn to page 15)*

“We’ve been fortunate in our growth as a medical practice, and we believe in giving back to the community that places its trust in us,” says Dr. Mittman.

Helen certainly trusted them, and with both knees working like new, today Helen is golfing comfortably and enjoying the “loves of her life” — her three grandchildren and two great grandchildren.

Chrisie Scott

**Meridian Orthopedic Services**  
 Meridian Physician Referral 1-800-560-9990

## Adding Life to Your Years

*Breakthrough advances in knee and hip replacement surgeries are helping patients get back in the game of life.*

**G**eorge Sheehan, M.D., the world famous runner, noted author, and former Riverview Medical Center cardiologist, used to say that humans come with a 75-year warranty — but it wasn't age with which he was concerned. It was life. "Don't be concerned if running and exercise will add years to your life," he said, "be concerned with adding life to your years."

### The Miracle of Partial Knee Replacement

Mary Purcell, who recently had partial knee replacement surgery performed by orthopedic surgeon Bernard Murphy, M.D., who is affiliated with Riverview Medical Center, appreciates the truth of Dr. Sheehan's words. As a former nurse manager at Riverview Rehabilitation Center and director of DayBreak, a social day care service for older adults, Mary had years of direct experience with patients who underwent joint replacement surgeries. Mary's role reversed from caregiver to patient when she developed arthritis in her left knee. Although prior arthroscopic surgery enabled her knee to function normally for more than a decade, it was time to look at other options to relieve the now constant pain. "Every step hurt," she remembers, "and sometimes my knee would just buckle and give way."

Arthritis is usually the culprit behind knee pain and problems. Many patients undergoing partial knee replacement experienced knee injuries in their earlier years, which have led to the development of traumatic types of arthritis. These conditions narrow the inside area of the joint, causing the leg to bow outwards and result in joint pain and stiffness.

The 52-year-old Middletown resident had her surgery in April followed by physical therapy, and says she feels absolutely great. Her only concern was that she be able to attend her son's college graduation in May, six weeks after her surgery. Dr. Murphy promised Mary that it wouldn't be a problem. "The graduation," Mary recalls, smiling, "was just wonderful."

"The beauty of this procedure is that it is minimally invasive," says Dr. Murphy. "That means it requires only a small incision and, like Mary, most patients go home the same day or after a night's stay in the hospital. Then they require a relatively minimal

amount of physical therapy." Mary walked up a few steps within hours of her surgery, then went home and resumed most of her normal activities over the next few weeks.

### Less Traumatic Than Conventional Surgery

During conventional total knee replacement surgery, a long incision is made to open the knee, which is then dislocated to expose its surface. Space is prepared for the total knee implant by removing bone, including some healthy bone as well as the diseased area.

In comparison, during a partial knee replacement, only a small incision is required and only the area affected by disease is removed to make way for the implant. And there's very little blood loss.

"My patients come away from the procedure with a great sense of relief and freedom from the pain associated with their knee disease," says Dr. Murphy. "My patients having this



Mary Purcell of Middletown was able to attend her son's graduation six weeks after partial knee replacement surgery.

procedure range from age 40 to 90. And while some patients may eventually need total knee replacement, this is an excellent way to delay or eliminate the need for more extensive surgery."

### Ideal for Busy People

Robert Grossman, M.D., an orthopedic surgeon with offices in Tinton Falls and Lakewood and is affiliated with Riverview Medical Center, says that many of his patients opting for partial knee replacement don't wish to commit to the more complicated surgery and lengthy rehabilitation necessitated by total knee replacement. "Whether they have hectic family lives, demanding careers on Wall Street, or want to play sports like they did when they were 35, partial knee replacement is an extremely viable solution when the demands on patients' lives or their levels of activity haven't changed, but their ability to respond and perform at the same level as in their earlier years has been compromised by joint disease — this is a good option."

Each morning, Isabella Hayward, a 55-year-old Eatontown resident,

boards the 4:45 a.m. train from Little Silver to Manhattan for her job as a labor relations specialist at New York City's main post office. "Some mornings I almost couldn't pull myself up on the steps to board the train," she recalls painfully, "and at night my leg would just throb." The lasting effects of an old knee injury compounded by arthritis made her situation intolerable. Following partial knee replacement by Dr. Grossman in June, Isabella now says she's pain-free and medication-free for the first time in five years.

Dr. Grossman is passionate about the lasting positive impact of the partial knee replacement procedure. "Partial knee replacement leaves the patient with a darn good, well functioning knee of which we're very proud," he says. "For the majority of patients, this procedure is really a breakthrough — it allows us to dramatically improve their quality of life."

It's important to note that the success of partial knee replacement procedures hasn't replaced the need for total knee replacement. For patients who do require this more complicated surgery, the future is

also positive. "There have been tremendous advances in the materials used for this procedure," says Dr. Grossman. "The joint itself is now more readily accepted by the body, so rehabilitation is faster and easier on the patient. These improvements have also extended the life of the joint, as well."

#### Groundbreaking Procedure Debuts at Jersey Shore

This month, John Tozzi, M.D., chairman of Orthopedic Surgery at Jersey Shore Medical Center and an orthopedic surgeon with offices in Red Bank, Sea Girt, and Toms River, will become the first orthopedic surgeon in New Jersey to perform a new implant procedure to relieve pain and at the same time restore the natural stability and alignment of an arthritic knee.

The procedure involves implanting a stainless steel device called the UniSpacer™ between the bones and ligaments of the knee. Because the procedure is performed arthroscopically, there is no major incision and no cutting of bone — it's even less invasive than partial knee surgery. Once the UniSpacer™ is implanted, the knee glides over it, regaining its

flexibility and range of motion. After an overnight hospital stay and minimal physical therapy, patients return to their everyday routine, now pain free. Orthopedic surgeons in other areas of the United States have begun to perform the UniSpacer™ procedure just this year.

"This groundbreaking procedure is ideal for younger patients — those in their 40s and 50s on whom we're reluctant to do partial or total knee replacements," says Dr. Tozzi. "It can delay the need for knee replacement surgery for another decade or more." Patients scheduled for this new procedure will start to have their surgeries in September. Richard Hollock, M.D., the design surgeon who created the UniSpacer™, will join Dr. Tozzi for the first day's procedures.

"The UniSpacer™ also allows patients to retain their own healthy bones and ligaments, and restores natural stability and alignment, without the impact of having to accept a larger partial or total knee implant device," he adds. Dr. Tozzi believes this new procedure will radically improve the future for people suffering from chronic knee pain.

#### Hip Replacements Relieve More Than Pain

Total hip replacement surgery is considered to be a common and fairly straightforward procedure. In fact, more than 150,000 artificial hip replacement surgeries are performed in the United States each year. "But more than relieving physical pain, hip replacement also gives new life to those individuals," says Dr. Tozzi, "especially older adults, who have been suffering with chronic, nagging pain for years, as well as younger, active people who don't want to be derailed by their condition."

*Continued on page 14*

Michael Bonventre of Point Pleasant, a high school coach and physical education teacher in Lakewood, decided to have a hip replacement procedure following years of arthritis pain.

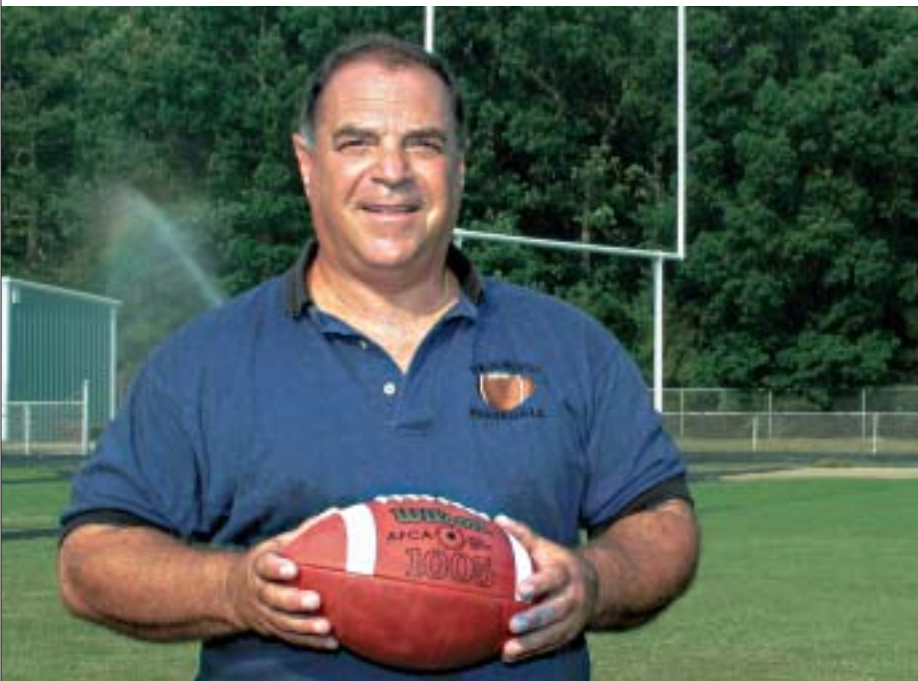


Photo: Tom Van Dyke

Continued from page 13

Like knee replacement, the lasting and painful effects of arthritis often lead to hip replacement, although injury, tumors of the hip bone, and other chronic degenerative conditions can also require the procedure.

Dr. Tozzi says that joint pain can often cause people to become depressed and lose their positive outlook on life. "I find that many patients ask me about hip replacement surgery before I bring up the subject with them," he says. "Many patients have already tried alternatives to relieve chronic hip pain, from physical therapy and medications to aids like canes and walkers. These options may help, but the pain never really goes away."

Dr. Tozzi says that, following hip replacement surgery, most of his patients say they wish they had done the procedure years earlier. "Their pain is gone almost immediately. They typically leave the hospital after two or three days and have five to seven days of physical therapy at an inpatient rehab facility. They then do outpatient physical therapy for about 12 weeks to further strengthen their hip joint and surrounding muscles."

### Hip to a New Game

Arthritis following years of athletics led to a hip replacement procedure for Michael Bonventre, a 55-year-old high school physical education teacher and football and baseball coach at Lakewood High School. Bonventre, a Point Pleasant resident who also played football throughout high school and college, said that by late summer of last year he'd suffered long enough. "I wanted to make it through the football season, but the pain was just too great," he says. "So I went to Dr. Tozzi, and together we agreed it was time. I had my procedure in September, and spent two weeks at an inpatient rehab facility. I really worked

hard with the physical therapists because I was determined to get back to coaching."

A Meridian Home Care physical therapist then worked with Mike for a month at home. To help him incorporate normal daily activities into his therapy, Mike's therapist had him walk up the two flights of stairs in his condo and also out onto his deck. Then, several weeks of strength and flexibility training followed at Meridian LIFE Fitness in Point Pleasant Beach.

"I went back to teaching right after Thanksgiving, started coaching baseball in the spring, and then coached football in the summer," says Mike, "I have to say I feel great now."

### Now for Younger Folks, Too

According to Il Kim, M.D., an orthopedic surgeon affiliated with Medical Center of Ocean County, hip replacement surgery has traditionally only been an option for people over age 60. Why? Past hip replacement parts simply couldn't handle much stress, and older people are typically less active than younger people, so they made better candidates for the procedure. But that's not the situation anymore.

"New technology has improved the replacement parts, allowing them to withstand more stress and strain," says Dr. Kim. "So, in recent years, we've found that hip replacement surgery can be successful in younger people as well. But a more important factor in determining its success is the overall health and activity level of the patient." Equally important is the recovery period following surgery, including adequate physical therapy to help the patient regain strength and flexibility.

### How Hip Replacement Works

During hip replacement, a surgeon

removes the diseased bone tissue and cartilage from the hip joint, which is configured like a "ball and socket." Then the surgeon replaces the head of the *femur* (the ball) and the *acetabulum* (the socket) with new, artificial parts, leaving the healthy parts of the hip intact.

The new hip is made of materials that allow the joint to glide smoothly. Following physical therapy, most patients recover within three to six months. They then need to continue exercising to reduce any joint stiffness and increase their flexibility and muscle strength. "While I suggest my patients avoid high-stress activities such as tennis, basketball, or jogging, I certainly urge them to take up swimming, cross-country skiing, walking, and using a stationary bicycle," says Dr. Kim. "These exercises can increase muscle strength and cardiovascular health without injuring the new hip."

### So What's Next?

As our population ages, the incidence of joint problems will increase as well. That's why medical researchers are developing new surgical techniques, materials, and replacement joints, and studying ways to reduce the inflammatory response of the body to replacement joints. Other areas of research include physical therapy techniques and rehabilitation programs, such as home health care and outpatient programs.

Advances in prevention and diagnosis and research into new techniques for treatment and surgery will help aging bodies retain optimal performance in the golden years and in the game of life.

 Christine Burke

Meridian Orthopedic Services

Meridian Physician Referral

1-800-560-9990

## Ensuring a Full Life

*Total hip replacement and a stay at Shore Rehabilitation Institute helped Ginny Horner get back to her active lifestyle.*

**G**inny Horner, 65, of Brick, has a very busy life. Besides spending time with her family, she is actively involved in her church, walks daily on her treadmill, and helps hundreds of community members at her job with Meridian's Community and Senior Services. So, when the arthritic pain in her right hip began to get worse, she knew she needed to get help.

After several x-rays and tests, her primary care doctor referred her to Joseph Bogdan, M.D., an orthopedic surgeon affiliated with Medical Center

of Ocean County, who suggested a total hip replacement. This procedure involves replacing any diseased parts of the hip joint, such as bone tissue, with artificial parts. While Ginny was reluctant to have the surgery, she decided to go ahead with it last August. "I was very frightened before the surgery," recalls Ginny.

"Dr. Bogdan sensed this and explained everything to me so I knew what to expect. It really made a difference."

"Hip replacement is a fairly common procedure for people suffering



Photo: Tom Van Dyke

Ginny Horner of Brick was well educated about her treatment and care beforehand and following her total hip replacement surgery and recovery.

from osteoarthritis," explains Dr. Bogdan. "In most cases the surgery will eliminate pain thus increasing the mobility and functioning of the hip." The surgery usually takes two to three hours, and full recovery takes between two to six months depending on the patient and rehabilitation.

Ginny spent three nights in the hospital after surgery, and then spent two weeks at Shore Rehabilitation Institute (SRI), a 30-bed inpatient rehabilitation facility that helps patients return to optimal functioning after surgery, illness, or trauma. Located in Point Pleasant, SRI will be relocating to Medical Center of Ocean County's campus in 2003.

During her stay at SRI, Ginny worked very hard with her therapists to regain her strength and mobility. She believes that because she had some physical therapy before the surgery to strengthen her muscles, she was a step ahead on the recovery path. However, she attributes most of her success to the skilled staff at SRI. "They shared information about my recovery with me, and they really knew how to build my confidence," remembers Ginny. "They created a climate for motivation, which was the secret to my success."

 Nicole Occone

## Orthopedic Surgery

### More Than He Hoped For

*After a tragic accident, a young Island Heights man receives a scholarship for his drive and determination.*

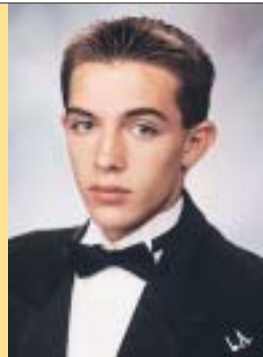
**S**eventeen-year-old David Juner of Island Heights is lucky to be alive. Earlier this year, he was involved in a serious car accident as a passenger on the Garden State Parkway that left him with severe head, chest, back, leg, and internal injuries. Today, he's not only making a remarkable recovery, but he has graduated from high school and, with a special scholarship provided by his physicians, he is planning to attend Ocean County Community College this fall. Having lived through her worst fears earlier this year, David's mom, Donna, is simply grateful for all of the doctors and health care professionals who were there for her son.

"The team at Jersey Shore Regional Trauma Center was absolutely wonderful," says Donna, referring to where David spent the first six weeks after his accident, having surgery and recovering from his injuries. "They don't just treat the patient, they treat the whole family."

#### Quick Thinking, Quicker Responses

Arthur Vasen, M.D., was the orthopedic surgeon on call the night of the accident. He was brought in to examine David's broken *femur* (thigh bone). "With a femur fracture, you have to perform surgery within the first 24 hours and get the patient walking as soon as possible to reduce further problems," says Dr. Vasen, who specializes in hand surgery but treats general orthopedic trauma cases at the Trauma Center and is also affiliated with Medical Center of Ocean County.

*Continued on page 16*



*After an amazing recovery from a serious car accident, David Juner of Island Heights looks toward his future.*

Photo courtesy of the Juner family.

#### Meridian Acute Inpatient Rehabilitation

Shore Rehabilitation Institute	732-295-6500
Riverview Rehabilitation Center	732-530-2368



# Addressing Curvature of the Spine

*The earlier a diagnosis of scoliosis is made the better the condition can be treated.*

**S**coliosis, a condition characterized by an abnormal curvature of the spine, varies in its symptoms, which can include a shoulder or hip being slightly higher than the other. However, according to Joseph Marsicano, M.D., a fellowship-trained, board certified spinal surgeon affiliated with Medical Center of Ocean County, because most people naturally have a slight degree of spinal curvature, the condition is not considered scoliosis unless the variation is greater than 10 degrees. "Scoliosis is fairly uncommon, occurring in approximately 25 out of 1,000 people," says Dr. Marsicano. "Of those diagnosed, even less (1 to 3 out of 1,000) require aggressive treatment, such as surgery."

Usually there is little or no pain associated with scoliosis, but in its most severe form, such as a curvature of 60 degrees or more, or a condition in which the curvature progressively worsens, it can eventually effect the pulmonary and cardiac systems. One form of scoliosis, called *adolescent idiopathic scoliosis*, develops most often in children and teens, and occurs more often in girls.

"I generally see about 50 to 60 children a year for scoliosis," says Dr. Marsicano. "The treatment we provide depends on the degree of curvature, how young the patient is, and whether the scoliosis is progressive. Since scoliosis can be affected by growth, we follow the condition until the child's bones have stopped growing."

In mild cases, such as 20 degrees of curvature or less, a patient is observed over time and clinical assessed regularly. A back brace may be recommended for children where the curvature is

approximately 25 degrees, and significant growth is still expected. For 30 degrees or more expected growth, a back brace is usually a definite. And in the severest of cases, of 40 degrees of curvature or more, a physician may suggest surgery.

Although surgery, which entails a spinal fusion where vertebrae (back bones) are fused together, does not make the back perfectly straight, it does correct an extreme curvature as much as possible as well as prevent the condition from progressing further.

A form of the condition called *degenerative scoliosis* occurs in adults, usually as a result of *osteoporosis* (weakening of the bones) or *osteoarthritis* (arthritis that effects the joints). In these cases, treatment can range from simple exercises, taking anti-inflammatory medication, and minor bracing to spinal fusion surgery, depending on the severity of the condition.

"The earlier scoliosis is detected the better it can be treated, especially where it concerns children," says Dr. Marsicano.

Diane Gribbin

Meridian Orthopedic Services

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## Orthopedic Surgery

*Continued from page 15*

Following treatment for internal injuries performed by the trauma team and six fractured vertebrae performed by Lambro Demetriades, M.D., a spine surgeon who is Dr. Vasen's partner, David was moved to the brain trauma unit at JFK Johnson Rehabilitation Institute for several weeks. He later recuperated at home, endured physical therapy, and now walks without any assistance.

"With all that David and our family has gone through, we are fortunate that he has had so much support from his physicians and the hospital staffs," adds Donna, who is a mother of five. "It has not been an easy time, but we have persevered thanks to all involved in his care."

### A Surprise Ending

Another area where Dr. Vasen and his colleagues at Seaview Orthopedics are giving back to the community is establishing a scholarship program for employees, patients, and anyone who is affiliated with the practice. "The key criteria for the scholarships, which are given out each spring, is that the money

be used to pursue advanced education," says Dr. Vasen. There was one other winner this year besides David: patient Cheryl Cerminaro who plans to attend Temple University.

"Part of my training involved trauma centers, and I feel it's important to continue to give back to the community," continues Dr. Vasen, who was fellowship trained in orthopedic surgery at Harvard University Brigham & Women's Hospital.

David's scholarship came as a complete surprise to his whole family. "We saw the scholarship application forms during one of David's follow-up visits, and we filled it out, never dreaming that he would even graduate because of his condition, but he made it," adds Donna. "Initially, David did not want to accept the honor. He didn't feel that he had accomplished anything special. What he didn't realize, and probably still doesn't, is how far he has come in such a short period of time."

Felice Mikelberg

Meridian Orthopedic Services

Meridian Physician Referral 1-800-560-9990

## Serious Help for Herniated Discs

*When other options aren't effective, surgery can alleviate severe back pain.*

**M**ost people would consider Denise Martin-Masi too young to have suffered from severe back problems. But painful experiences with a herniated disc have caused the 40-year-old Fair Haven resident to endure not just one, but two separate spinal procedures to eliminate the problem.

### Disc Trouble

"For about two months I had pain in my right hip that radiated down my leg and caused numbness in my leg and foot. I couldn't play softball or exercise at all," says Denise. After an MRI revealed a disc problem, her physician recommended that she meet with Cary Glastein, M.D., an orthopedic surgeon affiliated with Riverview Medical Center. Dr. Glastein, who specializes in spine surgery, recommended that Denise have a *laminotomy*, a surgical procedure used to alleviate a herniated disc.

There are several common conditions of the spine, one of which is a herniated, ruptured, or bulging disc. It can cause great discomfort, ranging from back spasms or a tingling and numbness in the legs and arms to muscle weakness and even localized paralysis. *Discs* are small pads of elastic tissue between each vertebra in the spine. They act as shock absorbers, cushioning the spine during normal physical activity, like walking, running, and jumping. When a disc herniates, additional pressure is placed on the spinal cord and nerves, resulting in pain and other problems. When the pain gets to be too much and other avenues of treatment such as epidural blocks and physical therapy no longer work, many patients opt for a surgical remedy.

Laminotomies and laminectomies are two of the most frequently performed surgeries used in treating herniated discs, and are also used to remove spinal cord tumors, correct aneurysms, or treat spinal trauma. Both procedures involve making an incision and creating an opening by removing a small portion of the *lamina* (bone of the vertebrae). This exposes the spinal cord and the discs that separate one vertebra from another. Then the damaged or bulging portion of the disc is removed through the opening. A laminotomy only requires a small incision. Laminectomies are more involved and are usually performed on older patients where there may be bone or nerve problems.

### Once and Again

After her first laminotomy, Denise was out of bed and home by the next day. She then did a month of physical therapy. Unfortunately, the herniated disc reoccurred several years later, with even greater pain. Denise tried physical therapy and epidural blocks with no relief, and then decided with her surgeon that she needed more surgery.

Because a fragment of the disc had broken off and imbedded in the nerve root of her spine, her second laminotomy was more complicated than the first, requiring two days in the hospital and a longer period of follow-up physical therapy. Denise says it was all worth it. "I remember waking up from the anesthetic and right away being able to feel my foot that had previously been numb," says Denise.

According to Dr. Glastein, who performs more than 300 spinal surgeries each year, both laminotomies and laminectomies can be

performed as day-stay procedures. However, most patients opt to stay in the hospital overnight. "Because the surgical incision is small and therefore causes less pain, most patients are up and out of bed, walking, and eating the same day of the surgery," says Dr. Glastein. "Patients also do physical therapy for four to six weeks post-op to increase flexibility and build up muscles — all of which strengthen and support the spine."


*"Because the surgical incision is small and therefore causes less pain, most patients are out of bed, walking, and eating the same day of the surgery."*

— Cary Glastein, M.D., orthopedic surgeon  
Riverview Medical Center

### No Guesswork Today

Dr. Glastein says there is a big difference is the way spinal surgery is performed today compared with years ago. "Since the introduction of sophisticated imaging services such as CT scanners and MRI, the whole field of spinal surgery has changed," he says. "Today's spinal surgery is state-of-the-art, highly technical, and scientifically oriented. There is no surgical exploration. The problem and its location are identified before surgery even takes place."

Dr. Glastein recommends that patients requiring spinal surgery seek out an orthopedic physician who specializes in spinal surgery and is fellowship trained and board certified.

"You have to have real trust and faith in your surgeon," says Denise. "I felt comfortable because I knew Dr. Glastein was highly skilled and confident in his abilities. Now I'm Jazzercising and playing softball — all without pain and without any medication."  Diane Gribbin

### Meridian Orthopedic Services

Meridian Physician Referral 1-800-560-9990

Meridian Web site [www.meridianhealth.com](http://www.meridianhealth.com)

## At Home as American Nurses

*Filipino nurses are proudly joining Meridian's workforce to ease the growing nursing shortage.*

**E**dwardo Iway, 29, dreamed of coming to America. In fact, he says he became a nurse specifically to fulfill that dream. But 30-year-old Carol Fainsan's motivation was a little different. After receiving her master's degree in nursing, she had reached a plateau in her career and wanted to work in a more challenging environment. For Carol, that place turned out to be Jersey Shore Medical Center's Pediatric Intensive Care Unit.

Edwardo and Carol are two of many Filipino nurses who recently started working for Meridian. They will be joined by 152 other nurses from the Philippines over the next two years to work at Meridian.

### America's Need for More Nurses

Rachel Riback, manager of recruitment for Meridian, says foreign recruitment is part of Meridian's workforce strategy to deal with the severe nursing shortage. Rachel says that even though Meridian's nursing vacancy rate (7.7 percent) is well below the state's average (15 percent), recruiting nurses from a diminishing pool of local prospects has forced hospitals to look outside the country.

According to Meridian's vice president of Human Resources, John Sindoni, the demographics of America are changing. In particular, the nation is aging. John

explains that as baby boomers age, retire, and live longer, they will put an increased demand on health care services. "This comes at a time when there are fewer people in the pipeline to come into the health care work force," he says. "Recruiting nurses from the Philippines is just one of more than a dozen short-term strategies designed to address today's immediate recruitment needs."

### Why Go to the Philippines?

The Philippines is known as the world's largest exporter of nurses. Filipinos frequently travel to countries such as Great Britain, Singapore, Saudi Arabia, and Australia. Rachel says the nurses are bright and well-suited to work in America because they are educated in English at nursing schools that use the same curricula as American universities.

In fact, nurse Lawrence Aizon's inspiration to come to America can be traced back to reading textbooks in nursing school. "The books were written by American authors, and the technology described was different from the equipment being used in our country's hospitals," he explains. "I wanted to come to the States to practice what I had read in the books."

Lawrence was also motivated by the stories of fellow Filipino nurses who'd returned to tell of their adventures in America. "They are like heroes in our country," says Lawrence.

According to the new recruits, that's because the nurses who come to the United States send home money to their families to improve the quality of their living.

Christine Cucio says she is pleased with her decision to move to the United States for professional growth and higher wages — in the Philippines nurses make less than \$200 a month — hardly enough to

Four of the Filipino nurses who are now working at Jersey Shore Medical Center are, from left, Edwardo Iway, Christine Cucio, Edna Evangelista, and Carol Fainsan.

Photo: Chris Gahler





## Full Speed Ahead: Cardiac Cath Labs Upgrade

*Medical Center of Ocean County and Riverview Medical Center are now licensed to accommodate high risk patients.*

**H**as your doctor ever sent you to have a procedure done at an unfamiliar hospital because that was the only place you could get it done? Well, if you're a high-risk heart patient who needs a cardiac catheterization, now you can stay close to home. The Cardiac Catheterization Laboratories at Medical Center of Ocean County (MCOC) and Riverview Medical Center have both been licensed and upgraded to full risk diagnostic catheterization laboratories.

"The convenience for our higher-risk patients is remarkable," explains

Joseph Clemente, M.D., director of the Catheterization Laboratory at Riverview.

MCOC cardiologist Todd Cohen, D.O., adds, "With this certification, we can extend the existing high quality care that we offer to more of our patients."

### What Is Cardiac Catheterization?

The cardiac catheterization procedure involves taking x-ray pictures of the main pumping chamber and arteries of the heart to determine if there are any blockages in the blood vessels that supply the heart. Physicians also learn more about the patient's heart valves and the heart itself. While the total length of a patient's stay depends on the procedure, the estimated hospital stay for a cardiac catheterization is about four to five hours, with the patient's procedure taking about an hour.

MCOC's lab opened in December 1996 as a low-risk cardiac catheterization lab, as did Riverview's lab in June of 1997. Jersey Shore Medical Center is already a full-risk laboratory and offers the only open heart surgery program in the two counties.

"We are very proud of this certification," says Kim Pheifer, nurse manager of Cardiac Services at Riverview. "The DOH only grants these upgrades to laboratories that have high patient satisfaction rates, low complication rates, and provide high quality service."

Robin Krippa

## Nursing Recruitment

support themselves or a family. And, since more new nurses are graduated than the country's hospitals can employ, they are pleased to be in a country where their skills are so valued and needed.

In order to get their visas, the foreign nurses had to pass written and spoken English tests and nursing exams. Then they needed to go through the immigration process that took more than 18 months. But the nurses say it was all worth it, and they already feel at home in New Jersey. They especially like the area shopping and the friendliness of the people.

"It's up to us to make Meridian and our new country proud," adds Christine. Christie Scott

### Meridian Employment Opportunities

Meridian Web site [www.meridianhealth.com](http://www.meridianhealth.com)

Meridian Hotline 1-866-JOIN-MHS

### Meridian Cardiac Services

Meridian Health Line 1-800-560-9990

## Reaching a "Consensus" on Breast Cancer

*Innovative process at Riverview helps reassure patients that they're making the right treatment decisions.*

**C**onsensus treatment planning has become a critical component of Riverview Medical Center's breast services. Each patient's case is presented to a multi-disciplinary medical panel who provide input into decisions concerning the patient's treatment.

## Come See How It Works

### Mock Consensus Treatment Planning

October 15, 2002, 5:30 p.m.

Riverview Medical Center  
Women's Diagnostic Services  
Conference Room

*Please join us to observe physicians and other members of the consensus treatment planning panel as they review real (but anonymous) breast cancer cases. Open to everyone!*

Every aspect of the case, from the mammography films to the pathology slides, is reviewed and discussed by the experts present until a "consensus" is reached on the type of surgery and follow-up care that patient should receive. Reviewing any family history of cancer, especially ovarian or breast cancer, is also part of the consensus conference, as it may impact treatment.

*Meridian HealthViews will feature a firsthand experience regarding consensus treatment planning in the next issue.*

Diane Gribbin



# Stay in the Game with Meridian

*Our new partner helps us provide more orthopedic and rehab-related services — especially for those involved in sports.*

If you have attended one of Meridian's recent running, golfing, or skiing clinics, sat in on our lower back seminars, or received literature about joint replacements, the name Human Motion Institute (HMI) may sound familiar to you. This Pittsburgh-based firm specializes in the coordination and delivery of care related to bones, muscles, and joints

and has teamed up with Meridian to help us expand our orthopedic and rehabilitation services, improve clinical outcomes, and achieve exceptional patient satisfaction.

"HMI has had a tremendous amount of success working with health care facilities around the country," says Jeff Brickman, executive vice president of Meridian. "This

collaboration will enable us to bring more orthopedic and rehab information, education, and special events to our area residents like golf and running clinics and youth sports seminars."

"We are excited about the opportunity to team our physicians and caregivers more closely with the community," adds Jeff.

If you have any orthopedic or rehabilitation questions, please call Meridian Health Line at 1-800-560-9990.

Felice Mikelberg

## FREE Sports Clinics and Seminars

### Youth Sports

#### JSMC

Tuesday, Oct. 15  
Lance Auditorium  
5:30 p.m. - 8:30 p.m.

#### MCOC

Wednesday, Oct. 9  
Atrium/Life Rehab/  
Community Room  
5:30 p.m. - 8:30 p.m.

#### RMC

Tuesday, Oct. 3  
Blaisdell Auditorium  
5:30 p.m. - 8:30 p.m.

### Pick Your Sport

#### Tennis

Thursday, Dec. 5  
Lance Auditorium  
5:30 p.m. - 9:00 p.m.

#### Skiing

Wednesday, Dec. 4  
Atrium/Life Rehab/  
Community Room  
5:30 p.m. - 9:00 p.m.

#### Swimming

Tuesday, Dec. 10  
Blaisdell Auditorium  
5:30 p.m. - 9:00 p.m.



This free community bi-monthly magazine is prepared by the Communications Team of Meridian Health System. Please call 1-800-560-9990 with any questions or comments. Inquiries or ideas can also be addressed in writing to:

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*Meridian HealthViews™ and Health Lineup™ are designed by Creative Strategy Group, Inc., prepress by Innovation Printing & Lithography, PA and printed by Concord Litho Group.*

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