

IT'S ABOUT THE POWER OF YOU

Winter 2022

HEALTH U



Hackensack
Meridian Health

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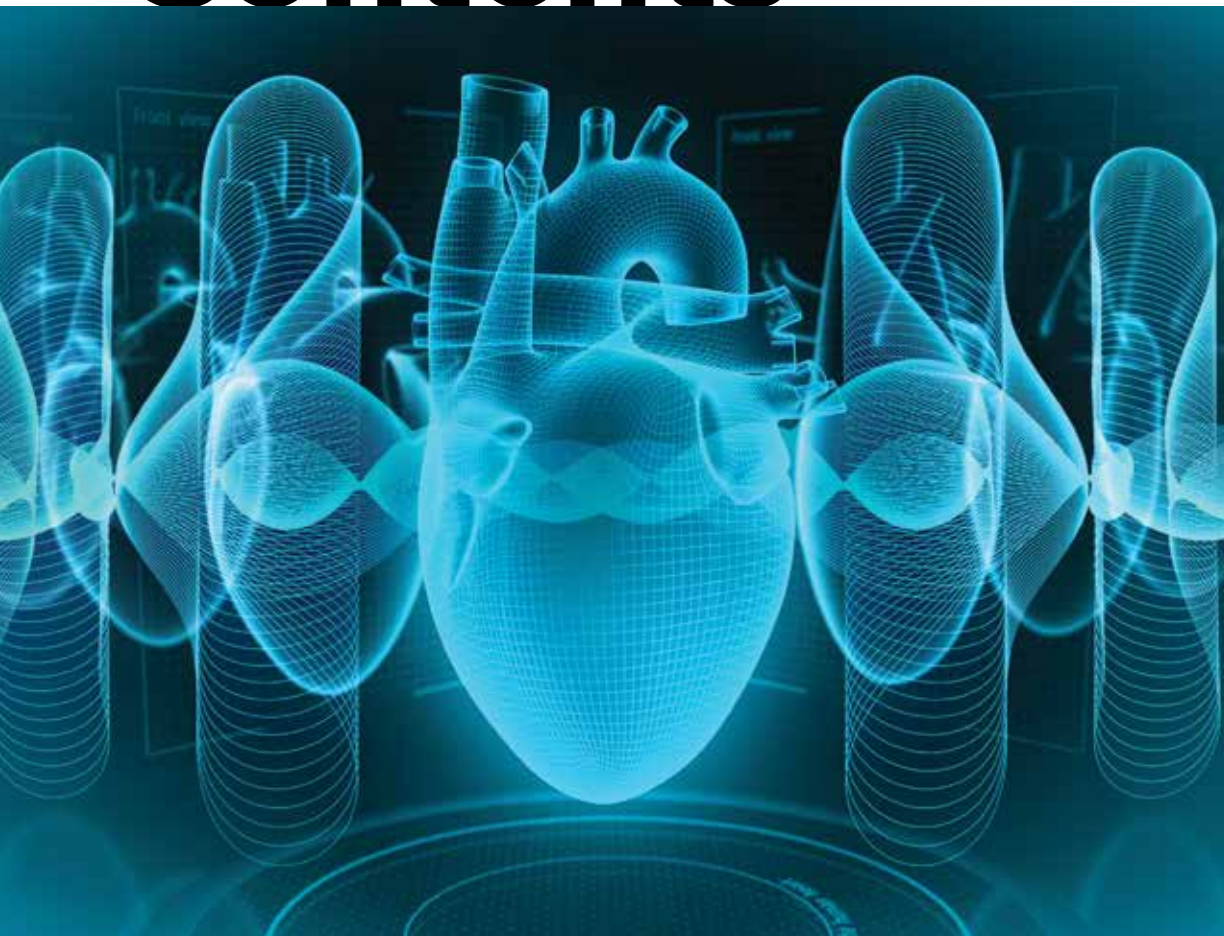
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Learn three tips to avoid slipping on the ice this winter at [HMHforU.org/ice](https://www.hmhforu.org/ice).



Our expert debunks common false claims about COVID-19 vaccines at [HMHforU.org/VaccineMyths](https://www.hmhforu.org/VaccineMyths).



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

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

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





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

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

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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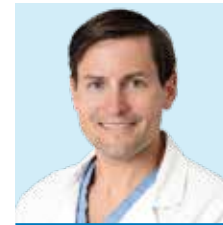
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5 Tips for a Great Workout

Personal advice from our cardiologist

"It's incredibly important to be active, but it doesn't have to be in the gym," says **Daniel Kiss, M.D.**, cardiologist at **Jersey Shore University Medical Center**. "Find what makes you happy, and get out there and do it."

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



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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 that 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 you 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.hmhforu.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.

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

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

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 **Nitin Patel, M.D.**, internal medicine specialist at **Jersey Shore University Medical Center**. “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,” Dr. Patel says.
- 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. Patel 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. Patel. “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. Patel. “If you find yourself getting 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

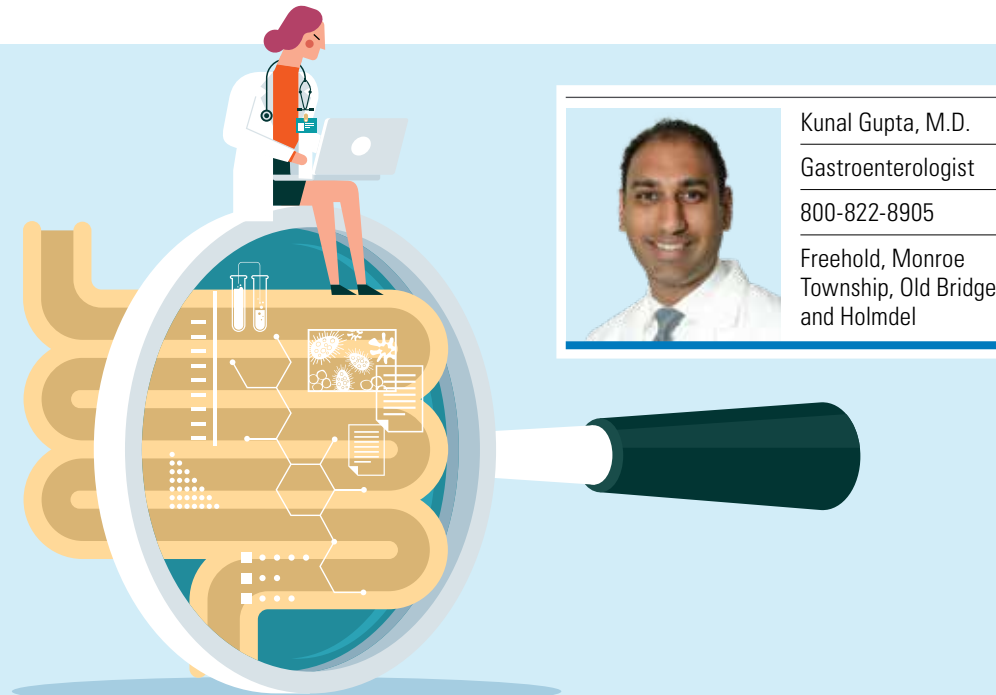
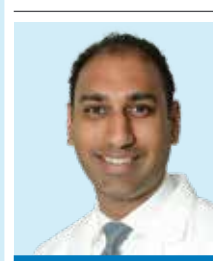
Steps

- 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).

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Why is staying regular important, and how can I do it?

Kunal Gupta, M.D., weighs in:

Normal bowel movement frequency depends on the patient. 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 people need to be concerned about isn’t so much their regularity, but a dramatic change in what has been normal for them, and whether managing their bowel habits effect the quality of their life. If you notice a drastic change occurring, you should contact your doctor.

To avoid constipation:

- ▶ Exercise more, even if it’s minimally increased activity
 - ▶ Take probiotics
 - ▶ Consume soluble fiber, found in oats, peas, beans, apples, citrus fruits, carrots and barley
- If exercise, probiotics and soluble fiber don’t relieve constipation, stool softeners, fiber

supplements and osmotic laxatives might be recommended.

While most people are trying to avoid constipation, some want to avoid diarrhea or loose bowel movements. Loose bowel issues usually are related to a chronic health condition such as dairy intolerance or irritable bowel syndrome, or are a result of an acute situation, such as a viral or bacterial infection.

Just like with constipation, if there is no good reason to explain your loose bowel movements, you should talk to your doctor. Treatment depends on the cause. In many acute situations, diarrhea resolves on its own in two to three days, but persistent diarrhea may require medical or dietary management.

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

Does IV hydration cure hangovers?

Mihir Patel, M.D., weighs in:

Getting IV fluids to make your headache, fatigue and nausea disappear may sound more appealing than lying in bed until the unpleasant symptoms pass, but there’s no validity to this type of treatment. If you drink too much and wake up with a hangover, there are ways to feel a bit better while your body recuperates, such as:

- Drinking water, chicken broth or other fluids to rehydrate
- Skipping hair-of-the-dog hangover remedies containing more alcohol
- Resting, if possible
- Taking non-steroidal anti-inflammatory drugs like ibuprofen for a headache
- Avoiding acetaminophen, because it’s broken down by your liver, which is focused on clearing the alcohol from your system
- Using over-the-counter anti-nausea medication as needed

If you are experiencing long-lasting symptoms of dehydration such as vomiting, diarrhea, headache, lethargy, muscle cramps and increased thirst, seek treatment from a medical professional rather than an “IV lounge” or “drip bar.”

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



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Should I be concerned about secondhand vaping?

Nader Nakhleh, D.O., weighs in:

Vaping and secondhand vaping are just as dangerous as smoking and secondhand smoke. Secondhand smoking is the process whereby a bystander inhales both the smoke that comes from burning either a cigarette or a pipe and the smoke that is exhaled by the smoker into the air. 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.



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

Vape juices can contain the following ingredients:

- ▶ Nicotine
- ▶ Ultrafine particles that can be inhaled deep into the lungs
- ▶ Flavor additives such as diacetyl, a chemical linked to serious lung disease
- ▶ Heavy metals, such as nickel, tin and lead
- ▶ Formaldehyde (embalming fluids)
- ▶ Benzene (found in car exhausts)



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Should I drink apple cider vinegar?

Marissa Winters, MA, RDN, weighs in:

Apple cider vinegar hasn’t been shown to aid with weight loss, despite what you may have read on social media, and it may be harmful if people ingest it 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 anecdotal, not research-proven. Because apple cider vinegar is highly acidic, some people experience acid reflux after consuming it. People who are prone to heartburn, acid reflux or gastroesophageal reflux disease (GERD) should avoid consuming anything acidic at least 30–60 minutes before bedtime to minimize the chances of experiencing burning and discomfort.

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



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 **Harriet Borofsky, M.D.**, breast imaging specialist and medical director of the women’s centers at **Bayshore Medical Center** and **Riverview Medical Center**. “An early breast cancer diagnosis is your best hope for a cure. Plus, 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,” Dr. Borofsky says. “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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Source: American College of Radiology

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 out genetic counseling and testing if you:

- ▶ Have a relative with a known BRCA1 or BRCA2 mutation
- ▶ Have a personal history of breast cancer or Ashkenazi Jewish ancestry
- ▶ Have or had breast cancer that was diagnosed before age 50
- ▶ Have a personal history of two or more types of cancer
- ▶ Have three or more family members with breast 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 **Catherine Campo, D.O., FACOS**, breast surgeon at **Riverview Medical Center** and **Bayshore Medical Center**. “A positive test result means you carry the BRCA gene mutation, while a negative result means that no mutation was found. However, an uncertain result means that a BRCA mutation was found, but doctors aren’t certain of its association with increased cancer risk. A genetics counselor is very helpful in explaining the significance of these test results and what steps should be taken next.”

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 0.2 percent of the U.S. population, but it is always best to identify and reduce any potential risk of cancer as early as possible,” says Dr. Campo. “Undergoing a prophylactic mastectomy is a tremendous thing to consider, but it saves lives.”

If you are at high risk of developing 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 surgery to reduce the risk of breast cancer is a major one,” says Dr. Campo.



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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.hmhforu.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 **William Baione, M.D.**, hip and knee joint replacement orthopedic surgeon at **Jersey Shore University Medical Center** and **Old Bridge 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."



William Baione, M.D.

Hip and knee joint replacement orthopedic surgeon

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Wall

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.
- ▶ Then, 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.
- ▶ Once the bone reconnects, the callus breaks down, so the bone retains its original shape.

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 is healing. Because you aren't using the injured body part while it's in a cast, the bone becomes weaker. (If you've ever seen someone's arms side by side after a cast was removed from one, you know the unused arm temporarily atrophies due to lack of use.)

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.

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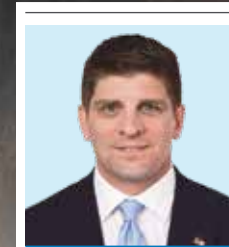
Go Online

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).



Back in the Saddle

Following a horseback-riding accident, Suzanne D'Ambrose is riding once again thanks to successful surgery and physical therapy.



Kenneth G. Swan, M.D.

Orthopedic surgeon

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Suzanne D'Ambrose was just getting back to the ranch after a delightful autumn ride in September 2019. Suddenly, her retired Standardbred racehorse, "Indy," experienced a freak stumbling accident and sent the experienced equestrian flying. Suzanne knew there was a problem as soon as she landed on her left shoulder. She told her companion, "I think I broke something."

An ambulance took her to **Jersey Shore University Medical Center**. It was a familiar place; the 65-year-old from Neptune, New Jersey, had done her EMT training there years before.

Orthopedic surgeon **Kenneth G. Swan, M.D.**, who specializes in sports medicine and shoulder surgery, was brought in. "The ball at the top of her humerus—the large bone in the upper arm—was pretty much shattered," he says. While there were several possible treatment options, her age and desire to get back to her work with horses and kids made a partial hemiarthroplasty (in which an implanted metal device replaces the ball at the top of the humerus) the best option.

During Suzanne's three-hour surgery, Dr. Swan repaired her shoulder while preserving her rotator cuff function—which was important to ensure Suzanne didn't lose range of motion or strength in her shoulder.

Two days later, Suzanne left the hospital. She healed well, and three weeks later, she began physical therapy close to her home. That therapy continued for a year.

Dr. Swan describes the process of healing from this shoulder surgery: "The standard protocol is six weeks in a sling. Suzanne's early physical therapy after three weeks began with gentle range-of-motion exercises. Strength training would begin at 10 weeks. Recovery takes a lot of time and can be painful."

Suzanne remembers that, at the time of surgery, Dr. Swan was concerned that she might only regain about 60 percent of function in her shoulder. "I can get to about 100 percent of normal range of motion with my shoulder now," she says. "Even Dr. Swan was shocked."

It's not a complete return to her pre-fall condition, though. "I know when I've done too much, and I know when it's going to rain!" she says, laughing.

While she was itching to get back into the saddle, Suzanne had to wait six months before her healing and physical therapy results made it safe for her to ride again. Now that she's healed, she is back to teaching kids about horses, including harness racing and horse massage, a specialty of hers. She's grateful for the help she received from Jersey Shore and Dr. Swan: "It's amazing what I can do with my arm because of him."

Learn more about care after a sports injury to get you back on your feet: [HMHforU.org/SportsMedicine](https://www.HMHforU.org/SportsMedicine).



Ways to Avoid Heart Disease

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

Upwards of 80 percent of heart disease is preventable, but 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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If You Smoke, Stop

People who smoke have a greater risk for heart attacks compared to those who don't. "Nicotine causes blood vessels to tighten and narrow, making it hard for blood to reach your heart muscle, and it temporarily raises blood pressure," explains **Brett Sealove, M.D., FACC, RPVI**, chief of cardiology at **Jersey Shore University Medical Center**. What's more, the carbon monoxide in cigarette smoke lessens the amount of oxygen that gets to the heart. If you smoke, talk with your health care provider about ways to quit. Medicines and nicotine replacements 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 sugars," suggests Dr. Sealove. "Instead, opt for dairy products with 'good fats,' such as feta cheese, as well as other sheep and goat milk cheeses, like pecorino Romano; lean meats and fish; whole grains; and fruits and vegetables." Choose cooking oils made with unsaturated fats, such as canola and olive oils.

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 the amount of fat in your blood. "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. Sealove recommends. Start with short sessions, such as 10-minute walks, and gradually increase the length of your workouts to at least 30 minutes, five days a week.

Track Your Blood Pressure

"Make sure your blood pressure is in the healthy range or under control. New guidelines suggest keeping systolic pressure [the first number] less than 130 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 and limiting alcohol, will decrease your risk of developing high blood pressure," says Dr. Sealove.



Grateful Heart

Thanks to cardiac catheterization, TJ Bellissimo avoided a massive heart attack after a 90-percent blockage was found.

Watch Your Weight

Being overweight and obese are major risk factors for heart disease. If you are overweight, losing weight can decrease your risk. Reaching or maintaining an ideal weight also helps lower your blood pressure and cholesterol levels.

Stress Less

"Continued and elevated stress has been consistently linked to health problems, including an increased risk for heart disease and stroke," says Dr. Sealove. Try to keep your stress level low by exercising, sharing your concerns with friends and family, 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.

Go Online

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

At 54 years old, TJ Bellissimo of Manahawkin, New Jersey, felt pretty good. Once in a while he'd get a little discomfort in his chest, but he shrugged it off as a little indigestion.

But one day while at work, the discomfort became something he couldn't ignore. "I felt a lot of discomfort in my chest and started holding my chest," he says.

TJ visited a nearby walk-in clinic, where the medical team told him he needed to get to a hospital right away. He drove himself to the emergency room at **Southern Ocean Medical Center**, where he was seen immediately.

Searching for Answers

Tests, including an electrocardiogram, chest X-rays and bloodwork, showed nothing out of the ordinary. With no indication that he was having a heart attack, TJ expected to be sent on his way, but interventional cardiologist **Jasrai Gill, M.D.**, insisted he have a cardiac catheterization.

When Dr. Gill performed the cardiac catheterization, a 90-percent blockage was found in the left anterior descending artery.

"The need for a cardiac catheterization is based on critical aspects: a history and getting a good sense of the patient's story as well as objective evidence that helps you do a baseline risk assessment," Dr. Gill says.

Following the catheterization, TJ was transferred to **Jersey Shore University Medical Center** in order for cardiologist **James Orlando, M.D.**, to put stents in his blocked arteries.

"If TJ's blockage hadn't been found when it was, he could have had a significant heart attack," Dr. Orlando says.

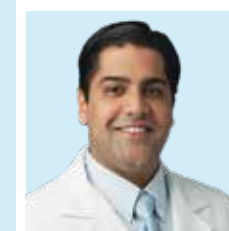
An Excellent Prognosis

TJ's blockage required two stents. But he didn't have any damage to his heart, which gave him an excellent prognosis following the stenting procedure.

TJ will be on blood thinners for about a year, and he is taking part in cardiac rehab three days a week.

"I feel like a million bucks at this point. I'm so happy to be alive. And I'm so happy that I have my hospital and my doctors around me," TJ says. "My care from all my doctors, all the nurses that touched me—it just was a great experience."

Check your risk for heart disease with a CT calcium scoring scan: HMHforU.org/CalciumScan.



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Manahawkin, Toms River and Neptune

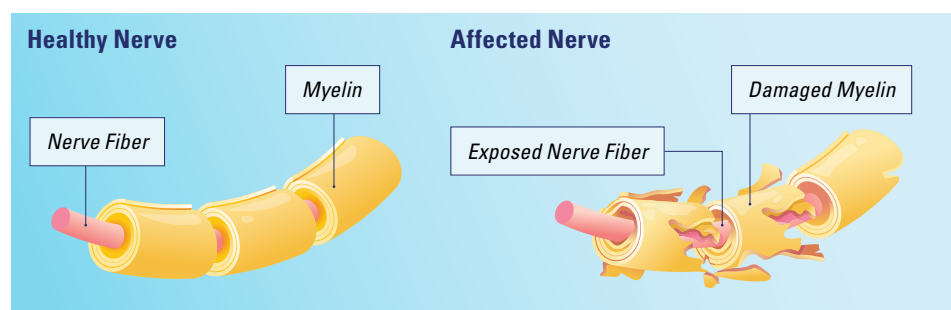


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Manahawkin, Toms River and Neptune

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 one in 100,000 people each year.

The cause of GBS is not known, says **Jan Wollack, M.D.**, adult and pediatric neurologist at **Jersey Shore University Medical Center**. "It is random," he 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. Wollack 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 body.

One theory is that part of a person's immune system mistakenly perceives the

sheathing around nerves—a fatty covering called myelin—as a threat. 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, Dr. Wollack says.

What Are the Signs?

"GBS affects all age groups and typically presents as weakness and loss of reflexes in the legs," says Dr. Wollack. 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.



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Common symptoms of GBS include:

- ▶ Tingling in the feet or hands
- ▶ Pain (particularly in children)
- ▶ 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 or chewing
- ▶ Digestive and/or bladder control problems

How Is It Diagnosed?

In addition to a physical assessment, which includes testing 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 and fewer than usual white blood cells.

How Is It Treated?

Generally, if diagnosed early, GBS is treatable with therapies such as immunoglobulin (IVIg) infusions or plasma exchange and physical therapy, Dr. Wollack says. There is no known cure for GBS.

"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."



Small but Mighty

Thanks to innovative surgeries, Israel De La Cruz has progressed from having multiple daily seizures to being able to attend school and thrive.



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Cedar Knolls

Once treatment is started, Dr. Wollack says, patients typically get better in a matter of weeks to a couple of 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. 🧠

Go Online

Learn about our complete lineup of neuroscience services available at Hackensack Meridian Health at [HMHforU.org/Neuro](https://www.hmhforu.org/Neuro).

Israel De La Cruz with his mother, Shukreeah, and sister, Khloe.

whom she had met a few months earlier at a charity event for hydrocephalus.

"I talked to the team taking care of him, and we devised a plan together," says Dr. Daniels. Shukreeah shared videos of Israel's different types of seizures, and Dr. Daniels concluded Israel also was experiencing opisthotonos, severe full-body muscle spasms that resemble seizures. "It wasn't just that he was having seizures; he was having another abnormal movement that was being mistaken for seizures."

Dr. Daniels performed successful surgery on a large cyst compressing Israel's brainstem. Over the next few years, Israel's medical team continued medications to control his seizures, but as he got older, the seizures worsened.

"Israel was exhibiting seizure activity on both sides of his brain in multiple areas. Through our multidisciplinary conferences with the teams at Jersey Shore and Hackensack, we saw an opportunity to significantly decrease his seizures," says Dr. Daniels.

In August 2020, Israel underwent two more surgeries: a radical removal of his temporal lobe and a procedure to disrupt the abnormal electrical signal in his frontal lobe where the seizures originated. The multidisciplinary surgical team, which included Dr. Daniels and surgical epileptologist **Rajesh Sachdeo, M.D.**, performed real-time monitoring of Israel's brain activity to guide the removal and disruption of the seizure-causing areas.

Finally Living His Life

Prior to the second surgeries, Israel was experiencing multiple seizures a day. Today, the number has dramatically decreased. "To control his seizures to the extent that we've done gives him an opportunity to grow, develop and have as fruitful a life as possible," says Dr. Daniels.

Shukreeah is grateful to Dr. Daniels and the team for the difference they've made in Israel's life. "Before, the only way to get him to stop seizing was to give him rescue meds and put him to sleep. He was sleeping so much that he wasn't living life at all," says Shukreeah. "Fast forward to today, Israel is in school. He has come such a long way."

Learn more about our pediatric neurosurgery multidisciplinary team of experts at [HMHforU.org/PedNeuro](https://www.hmhforu.org/PedNeuro).

Four-year-old Israel De La Cruz has already faced more challenges than many people do in a lifetime. Before he was born, he was diagnosed with hydrocephalus, a build-up of fluid deep within the brain that can damage brain tissues and cause a range of problems.

At only 2 weeks old, Israel had his first surgery to implant a shunt, a tubing system to help drain the extra cerebrospinal fluid (CSF) fluid from his brain, at **Joseph M. Sanzari Children's Hospital at Hackensack University Medical Center**.

Israel was also diagnosed with epilepsy when he was only a few months old. Despite efforts to control his seizures with medications, they continued to worsen. In spring 2018, when Israel had been experiencing about 30 seizures a day, he was admitted again to Joseph M. Sanzari Children's Hospital.

Finding Specialty Care

Israel's mother, Shukreeah De La Cruz, contacted **Lawrence Daniels, M.D.**, a pediatric neurosurgeon at **K. Hovnanian Children's Hospital at Jersey Shore University Medical Center**,

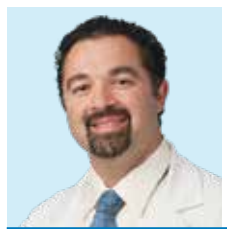
How Diabetics Should Treat Cuts and Scrapes

If you have diabetes, even a minor cut or scrape can turn into a serious problem. Here's how to treat a wound properly to protect your health.

For most people, a nick or a scrape is no big deal. But for someone with diabetes, even a minor cut or scrape can turn into a very serious problem if not treated properly.

"Diabetes impacts white blood cell function, which obstructs the body's ability to fight bacteria and close wounds," says **Asaad H. Samra, M.D.**, medical director of the Center for Wound Healing at **Bayshore Medical Center**. In addition, people with uncontrolled diabetes may develop poor circulation, making it difficult for the body to deliver nutrients to injured areas, which hinders the healing process.

That's why it's crucial for people with diabetes to correctly treat any wound, no matter how minor it seems. Here's some advice from Dr. Samra:



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Wash the wound thoroughly. Use an antibacterial soap and warm water to clean out the wound. Then pat dry with a clean cloth and apply over-the-counter antibacterial ointment.



Cover the wound. Use a bandage to keep the wound clean, moist and protected. "It's now considered old, inaccurate information to let a wound dry out," says Dr. Samra.



Redress it daily. Take off the bandage and make sure nothing has significantly changed since the last time you saw the wound. Use soap and water to wash away the old ointment, then pat dry and apply a fresh coat. If, after a few days, you feel the wound is healing well, you can stretch the redressing to every other day.



Inspect it every time you change the bandage. If you don't see improvement over the course of a week, or if any redness or foul smell develops, call your doctor. Also contact your doctor if the wound fails to heal within four to six weeks.



Check your feet daily. Diabetes can lead to neuropathy, which limits sensation in the extremities. "So someone with diabetes could have an injury on their foot and not even know it," says Dr. Samra. This, plus poor blood flow, puts you at risk for developing an infection from a foot sore. Look for any cuts, sores, blisters, swelling or any changes to the skin or nails. Don't forget to check the bottom of your feet (use a mirror). And never go barefoot, even inside your house.

Why Foot Care Is Important

Most people with diabetes understand that proper nutrition is a major component of staying healthy, but did you know that taking care of your feet can also help you avoid complications down the road?

"One in four people with diabetes will experience a foot ulcer. Forty percent of people with a healed diabetic foot ulcer will develop a new ulcer within a year. Fifteen percent of diabetic foot ulcers progress to amputation. The best way to not become a statistic is prevention, and with early intervention, complications can be avoided," says **Charles Marchese, D.P.M.**, a podiatrist at the Center for Wound Healing at **Bayshore Medical Center**.

It is important that you schedule one to two visits with your podiatrist every year and discuss nutrition and foot care options that can increase wound healing. A few minutes spent focusing on proper nutrition and foot maintenance can go a long way as you try to recover.



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What Is Proper Foot Care for Diabetics?

Because diabetes often effects circulation, neuropathy can develop, making you more susceptible to infection. Because of this, diabetics need to be more conscious of proper foot care. Here are a few things you can do to help ensure your feet are healthy:

- ▶ Inspect feet daily for any malformations.
- ▶ Wash feet daily, making sure to use lukewarm water.
- ▶ Thoroughly dry your feet after bathing.
- ▶ Moisturize feet, but not between toes.
- ▶ Never cut corns or calluses at home.
- ▶ Never use over-the-counter products without first consulting with your doctor.
- ▶ Always wear clean, dry socks and proper-fitting shoes.
- ▶ Always check your shoes to ensure that there is no debris inside before putting them on.

When to Seek Help From a Podiatrist

People with diabetes should set up recurring visits with their doctor to ensure that their feet are being properly inspected and that wounds do not develop or persist.

"All doctors can treat wounds, but not all doctors are trained to treat ulcers or other open wounds, so it's crucial that you seek guidance from a wound care specialist when a wound develops," says Dr. Marchese. "The sooner patients come in, the better the outcome."

What Helps Foot Wounds Heal Faster?

- ▶ Keep your blood glucose level under control.
- ▶ Know your HbA1c at all times.
- ▶ Keep your hypertension, cholesterol and heart disease at manageable levels.
- ▶ Maintain your blood sugar and the optimal environment at the cellular level through proper nutrition.

Learn more about the Center for Wound Healing at Bayshore Medical Center: HMHforU.org/BayshoreWound.

Go Online

Learn more about wound healing at Hackensack Meridian Health: HMHforU.org/Wound.

Pain Relief Without Prescriptions

If you are suffering from chronic pain or pain after surgery, relief is possible without risking prescription addiction.

Chronic pain or lingering pain after surgery can be frustrating. It can even affect your mental health and prevent you from living a healthy life through sleep, healthy eating and exercising.

People often turn to prescription pain medication for relief. But anyone who takes prescription opioids or narcotics runs the risk of becoming addicted to them, says **Ali Valimahomed, M.D.**, physical rehabilitation and medicine specialist at **Bayshore Medical Center, Riverview Medical Center** and **Jersey Shore University Medical Center**.

There are ways to get excellent pain relief from chronic or acute pain that avoid that risk.

How to Treat Chronic Pain

Depending on individual needs, Dr. Valimahomed may suggest one or more pain relief methods to reduce or eliminate the need for prescription opioids. For example:

- ▶ Image-guided injections to target pain sources
- ▶ Minimally invasive, same-day procedures (avoiding the need for open surgery requiring hospitalization)
- ▶ Neuro modulation to block chronic pain signals
- ▶ Physical or occupational therapy, including aqua-therapy
- ▶ Complementary techniques such as yoga, bio-feedback (a non-drug treatment in which patients learn to control bodily processes that are normally involuntary, such as muscle tension, blood pressure or heart rate) and acupuncture
- ▶ Psychological therapy because emotional trauma can impact a person's perception of pain

How to Treat Pain After Surgery

Traditionally, opioid medications have been prescribed following surgery to relieve the acute pain, especially in the first few days. **Negin Griffith, M.D.**, a breast



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reconstruction surgeon, says patients undergoing many types of surgery, including orthopedic, head, neck and abdominal, can often benefit from nerve block medications that are administered by the surgeon or anesthesiologist. These medications provide better pain control and decrease the need for narcotics and their side effects.

Not relying on narcotic pain medication provides multiple benefits:

- ▶ Patients are able to be more physically active sooner after surgery.
- ▶ Patients have less constipation.
- ▶ Quality of sleep after surgery can be improved.
- ▶ Patients can return to activities, like driving, sooner.

Depending on the medical situation, the surgeon can choose a nerve block that will work anywhere from a few hours to a few days. Once the block wears off, Dr. Griffith says most patients can get pain relief with non-narcotic pain relievers and muscle relaxers, allowing them to return to their normal activities, like driving, sooner while avoiding the potential of narcotic addiction. Speak with your surgeon about options for pain management to determine what's best for you.

Stop Suffering

If you are dealing with pain, there is help if you reach out for it. If fear of risking addiction has held you back from dealing with chronic pain or from having needed surgery, talk with your doctor about newer techniques for pain control that are safe and avoid narcotics. ⚙️



Find a doctor near you that meets your needs at [HMHforU.org/FindADoc](https://www.hmhforu.org/FindADoc).

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.

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." ⚙️



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

Losing Weight to Increase Life Expectancy

Can extreme obesity shorten life expectancy? Here's what you should know.

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 **Dena Arumugam, M.D.**, bariatric surgeon at **Jersey Shore University Medical Center** and **Riverview 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 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. Arumugam 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.

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



Dena Arumugam, M.D.

Bariatric surgeon

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Neptune

“Losing that much weight doesn’t just require a few changes to your diet and routine,” Dr. Arumugam says. “It requires you to overhaul your entire life and way of doing things. It’s not easy to do this 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 bariatric surgery or you lose it on your own, it’s never too late to start the weight loss journey.

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



Interested in weight-loss surgery? Attend a seminar near you: [HMHforU.org/WeightLoss](https://www.HMHforU.org/WeightLoss).

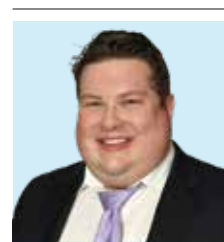


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General and bariatric surgeon

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James Nangeroni, D.O.

General and bariatric surgeon

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Holmdel, Iselin and Manahawkin



When Ashley Dearing was scheduled for bariatric surgery, little did she know that she would be the first patient to experience robotic-assisted surgery at Southern Ocean Medical Center.

Ashley Dearing, a 28-year-old from Forked River, New Jersey, has battled weight problems her entire life. Coping with years of dieting and exercise, combined with a feeling of low self-esteem, convinced her to turn things around. She also knew she had to make a serious lifestyle change after watching her mother suffer in a nursing home for years due to hip problems caused by her weight.

The Start of a Weight-loss Journey

In April 2021, Ashley started her weight-loss journey with the bariatric team at the Center for Bariatrics at **Southern Ocean Medical Center**, where she received medical, nutritional and exercise counseling prior to surgery.

“As a young woman with a bright future ahead, bariatric surgery was the right decision

to help guide Ashley to a new lifelong plan of healthy living,” says **James Nangeroni, D.O.**, general and bariatric surgeon. “With gastric sleeve surgery, 80 percent of the patient’s stomach is removed to reduce their appetite and capacity for food, which typically results in excess weight loss.”

After more than two months preparing for her surgery, Ashley was scheduled for a laparoscopic sleeve gastrectomy. A week before her surgery, she received a call from the perioperative services team at Southern Ocean to let her know that robotic-assisted surgery was now available to her. After consulting with Dr. Nangeroni and the surgical team, Ashley agreed this was the best option and was grateful to be the first patient to undergo robotic-assisted bariatric surgery at the hospital.

“While laparoscopic surgery offers many advantages to open surgery by using smaller

incisions, robotic-assisted surgery brings minimally invasive surgery to the next level as a new standard of care,” says **Richard Greco, D.O.**, general and bariatric surgeon. “Robotic-assisted surgery enables the surgeon to operate with more precision, steadiness and enhanced magnification across all body types and weight ranges with less strain on the patient’s abdominal wall, which reduces pain and length of stay.”

Less Pain and Shorter Stay

Ashley’s surgery went phenomenally well. She was able to leave the hospital after an overnight stay with very little pain and no complications. After a few weeks, she was back taking care of and playing with a child she watches as a nanny.

A month after surgery, Ashley has dropped 35 pounds and continues to lose weight with a low-carb, protein-rich diet and regular exercise.

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 **Habib Khan, M.D.**, vascular surgeon at **Bayshore Medical Center** and **Jersey Shore 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 veins or spider veins
- ▶ Pregnant women
- ▶ People who are obese
- ▶ Older adults, including menopausal women

Spider and varicose veins are usually a cosmetic issue. They don't typically cause health problems, but they may cause discomfort or make legs feel heavy or tired.



Habib Khan, M.D.

Vascular surgeon

800-822-8905

Holmdel and Neptune

Ways to Minimize Spider and Varicose Veins

If you're bothered by varicose or spider veins, ask a doctor about 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, these veins sometimes develop again in people who are susceptible to them, regardless of the treatment.

Common Treatments for Varicose and Spider Veins

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. 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 wearing compression stockings after the injections to encourage healing. This minimally invasive treatment requires little to no downtime.

Laser treatments. For small veins near the skin's surface, laser light makes the veins fade over time. Repeat treatments are often necessary. Minimal discomfort and downtime are associated with this treatment.

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. Full recovery may take one to two 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.



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 don't do anything to help increase the function or health of that joint," says **David Rodricks, M.D.**, hip and knee orthopedic surgeon at **Ocean University Medical Center**. Here is how you can treat joint pain beyond medication.



David Rodricks, M.D.

Hip and knee orthopedic surgeon

800-822-8905

Brick and Forked River

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 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. Rodricks.
- ▶ 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.
- ▶ 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 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. ❄️

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 Protein Help?

Certain foods can help fight inflammation, which can exacerbate joint pain. Here's what you should know.

If you experience chronic joint pain from arthritis, different lifestyle habits, like maintaining a healthy weight, exercising regularly and quitting smoking, can help improve your discomfort.

"Patients often ask why they continue to have some joint pain after completing a new exercise program," says **Gregory Roehrig, M.D.**, hip and knee orthopedic surgeon at **Jersey Shore University Medical Center**. "I tell them exercise is only half the battle. As somebody who specializes in treating joint pain, I've certainly come to recognize how patients can help themselves by changing their diet."

Your diet can help minimize joint pain in part because a healthy diet can contribute to weight loss. But certain foods can also help fight inflammation, improving overall health.

"I recommend consulting with a nutritionist about a comprehensive diet or program that considers pro-inflammatory or anti-inflammatory food types," Dr. Roehrig says.



Gregory Roehrig, M.D.

Hip and knee orthopedic surgeon

800-822-8905

Manasquan, Red Bank, Freehold and Toms River

To help support overall health, consider these protein-rich foods:

Fish rich in omega-3 fatty acids. Omega 3s have been research-proven to reduce inflammation, so including omega-3-rich fish in your diet may lead to less inflammation-related joint pain over time. Try eating salmon, tuna, sardines, trout or mackerel at least twice a week.

Nuts. Almonds, walnuts and other nuts are high in protein, fiber and healthy fats, and they've also been shown to fight inflammation in the body. Choose unsalted, unsweetened varieties rather than smoked, honey-roasted or chocolate-covered options.

Beans. They're rich in antioxidants, which may help lower inflammation. Beans are also high in fiber, which is helpful if you're trying to lose weight; fiber helps you feel full for longer periods, encouraging you to eat less often.

Dairy products (for some people). There are advantages to consuming low-fat dairy products, which are rich in protein, calcium, vitamin D and other nutrients. Some people experience inflammation and joint pain when they eat dairy, while others don't. If you have joint pain, try an elimination diet with your doctor's assistance to see if dairy products are linked to your discomfort. If they aren't, you can continue to enjoy them.



Consider limiting these protein-rich foods:

Red meat. Foods that are high in saturated fat, such as beef, may cause inflammation in the body, which can lead to joint pain. Consider other options when you're choosing what to eat with your joint pain in mind—especially if you cook your steak with butter, another food that's high in saturated fat.

Dairy products (for some people). Because dairy products may cause inflammation and joint pain in some people, it's best to limit or avoid them if you've confirmed that they're triggering your discomfort. Don't avoid low-fat dairy products without asking your doctor for help. Try an elimination diet first.

Gluten. The term "gluten" may make you think of bread, but it's actually a protein found in wheat, rye and barley. There isn't a direct link between gluten consumption and arthritis, but many people feel better on a gluten-free diet. Ask your doctor if you should try a gluten-elimination diet.

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:



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 **Javier Soares-Velez, M.D.**, physical medicine and rehabilitation specialist at **Bayshore Medical Center** and **Riverview 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. Soares-Velez adds.



Safe and effective use of assistive devices

Assistive devices, such as canes, walkers, crutches 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.



Javier Soares-Velez, M.D.

Physical medicine and rehabilitation specialist

800-822-8905

Tinton Falls

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," says Dr. Soares-Velez. "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," says Dr. Soares-Velez. "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, depending on the nature and course of the disease. Always seek guidance from your doctor about the best timing and 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).

Doctor Spotlight

MEHA HALARI, M.D.

Family Medicine

Southern Ocean Medical Center

Although she left briefly for medical school in Chicago, New Jersey native Meha Halari, M.D., always knew she'd come back to the Garden State.

"I'm a Jersey girl, and I've always known I was going to stay a Jersey girl," says Dr. Halari, who is now a family medicine physician with Hackensack Meridian Health Medical Group in Forked River, New Jersey. Her older brother, Vijay Halari, M.D., also practices family medicine with Hackensack Meridian Health Medical Group; his practice is based in Brick, New Jersey.

It's fitting, because family is what most defines her. "The most important thing to me in the entire world is my family, hands down," says Dr. Halari, who decided to pursue medicine in honor of her late grandfather. "My mother's father dreamed that one of his grandchildren would become a doctor. Unfortunately, he passed before my brother and I became physicians, but that's what initially got us into medicine. We wanted to fulfill that dream."

While her grandfather inspired her career, what keeps her in it is her patients. "It's a blessing to do what I do because I get to help people make it through difficult times," says Dr. Halari, who makes it through her own difficult times with the help of family, music and motivational speakers.

You live in a multi-generational household. What's that like?

My grandma currently has her own apartment, but until recently it was her, my parents, my brother, my sister-in-law, me, my two nephews and our puppy—all living together. It's been that way on and off for about five years. I love it. It's a very nurturing atmosphere. We have our ups and downs. We have to compromise and work through family dynamics. But at the end of the day,



Meha Halari, M.D., loves living in a multi-generational home with her parents, brother and brother's family.

you never walk into an empty household. On week-ends, especially, we work like a well-oiled machine. There's somebody doing laundry, somebody doing dishes, somebody making food. We all help each other out. You don't get that kind of love and companionship when you're living on your own.

You love music—listening to it and singing. Where did that come from?

I have listened to Bollywood music almost since I was born. My parents have always been fond of music, so we always had it playing in the house or whenever we drove somewhere in the car. I did a few performances when I was younger at

family gatherings because I enjoy singing. It's near and dear to my heart. Also, it's a way for me to find release. I drive 50 minutes to get home from work every day, and oftentimes I'll turn on music and sing the whole way home.

If you could have dinner with any celebrity, dead or alive, who would it be?

Eric Thomas. He's a motivational speaker, and I've listened to his videos online for years. He says to put 120 percent into every single day. Whenever he talks, it really pumps me up. I would love to meet him in person and tell him how much he's inspired me. 🌀

To make an appointment with Dr. Halari or a doctor near you, call **800-822-8905** or visit [HMHforU.org/FindADoc](https://www.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

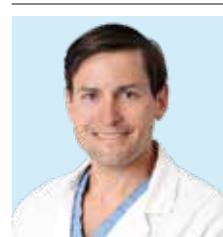
Until now, doctors had two ways to open up narrow, hardened arteries supplying blood to the heart:

- ▶ **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.
Cardiologist
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Eatontown and Freehold



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



Cancer Care

Fresh Start Smoking Cessation This four-session program is available to help you quit smoking. Attendance is required at all four sessions.

Feb. 4, 11, 18 & 25, Mar. 4, 11, 18 & 25, Apr. 1, 4, 8 & 11, 10–11 a.m., Riverview Rechnitz Conference Center, 5th floor

Mar. 15, 17, 22 & 24, 6–7:30 p.m., Ocean Conference Room B, East Wing Conference Center

- ▶ **Thriving and Surviving Cancer Survivor Workshop** Stanford University six-week, evidence-based cancer support. Feb. 3, 10, 17 & 24 and Mar. 3 & 10, 1–3 p.m., virtual event
- ▶ **Stop Smoking With Hypnosis** Mar. 9, 7–8 p.m., virtual event
- ▶ **Prevention, Screening and Surveillance of Colon and Rectal Cancer** Learn the risk factors, prevention and treatment options for colon cancer and how early detection can save your life. Free colorectal take-home kits available during registration. Speaker: Steven Tizio, M.D. Mar. 9, 11 a.m.–noon, virtual event
- ▶ **Optimizing Well-being for the Patient With Cancer** Achieving a high level of well-being can be challenging for cancer survivors. David Leopold, M.D., will examine how nonpharmacologic interventions can play a role in improving well-being and quality of life for patients with cancer, at any stage of treatment, and for cancer survivors. Feb. 28, noon, virtual event

Bayshore Medical Center 727 North Beers St., Holmdel	Carrier Clinic and Blake Recovery Center 252 County Rd. 601 Belle Mead	Jersey Shore University Medical Center and K. Hovnanian Children's Hospital 1945 Route 33 Neptune	JFK University Medical Center 65 James St. Edison	Ocean University Medical Center 425 Jack Martin Blvd., Brick	Old Bridge Medical Center 1 Hospital Plaza Old Bridge	Raritan Bay Medical Center 530 New Brunswick Ave. Perth Amboy	Riverview Medical Center 1 Riverview Plaza Red Bank	Southern Ocean Medical Center 1140 Route 72 West Manahawkin
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HOSPITAL LOCATIONS



Behavioral Health

Letting Go of Stress: How to Adapt, Cope & Thrive

Join Kelly Briggs, MBA, RN, NE-BC, and learn about types of stress, effective coping skills and relaxation techniques you can do to reduce stress.

Mar. 10, 6 p.m., virtual event

Heart Health

Joyful Heart Tea Join us for a cup of tea as we discuss ways women can keep their hearts healthy.

Feb. 15, 11 a.m.–noon, Brick Community Outreach Conference Center

▶ **Cooking with Heart** Join the food and nutrition team at Riverview, and learn all about keeping your heart healthy, as well as how to cook a heart-healthy meal! Live cooking demo. Feb. 17, 11 a.m., virtual event

▶ **Angioscreen** Learn your risk for heart attack and stroke. Includes carotid artery ultrasound, heart rhythm, blood pressure and screening for abdominal aortic aneurysm and peripheral artery disease (PAD). Receive a color report of your findings, educational material and a consultation with a registered nurse. Special rate: \$49.95. Registration required.



Pediatrics

Safe Sitter Virtual Program Babysitter training for boys and girls ages 11–14. The class includes handling emergencies, childcare skills and first aid. Must attend both sessions. Fee: \$25.

Virtual event. Visit HackensackMeridianHealth.org/Events for upcoming dates

▶ **Safe at Home by Safe Sitter** Prepares students in grades 4–6 to be safe when they are home alone, including how to prevent unsafe situations and what to do when faced with dangers. Fee: \$10. Virtual event. Visit HackensackMeridianHealth.org/Events for upcoming dates

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 Elkhatab 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



Diabetes

Complications of Diabetes Join our certified diabetes educator and learn how to manage your diabetes to prevent complications.

Feb. 10, 2 p.m., Riverview Booker Cancer Building, Community Room



Neuroscience

Stroke: How Do I Know if I am at Risk? Join Tayla K. Fleming, M.D., FAAPMR, to learn what to do if someone is having a stroke, the signs/symptoms and special risk factors associated with communities of color.

Mar. 16, 2–3 p.m., virtual event

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

Priscilla Oscilowski with Dr. Wasib Malik



Supporting the Future of Health Care

Scholarships help students like Wasib Malik become the much needed doctors of tomorrow.

According to the Association of American Medical Colleges, the health care field could be short 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—depends on building a strong pipeline of 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 can spend their fourth year doing research, earning another degree, completing a specialty immersion program, doing community advocacy work or graduating after three years and starting their residency with Hackensack Meridian Health.

Wasib Malik is one of the first graduates of the medical school and earned a scholarship sponsored by pharmaceutical company Hoffmann-La Roche. “What a conventional medical school does in four years, Hackensack can make

possible in three,” says Wasib. “Being able to save a whole year doing my residency in what I was passionate about was quite advantageous.”

Wasib, who is in the middle of his first-year residency program and training to be a psychiatrist, became interested in medicine in high school. But after witnessing the mental health challenges his younger brother faced in a culture where talk of mental health is taboo and underrepresented, he decided to become a psychiatrist.

“It’s important to Roche to support the achievements of our future medical leaders,” says Patricia Oscilowski, Roche Innovation Center New York site head and operations leader. “We hope our legacy will inspire discovering truth by building on previous discoveries and utilizing the understanding gained by major thinkers who have gone before to make intellectual progress.”

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

Select your fundraiser type and sign up

Customize your page: Tell your story and add a personal photo

Start fundraising: Email and share your page with family and friends

Feel good about making a difference



Need help getting started? Email giving@hmhn.org or call 551-996-3451.

Use your smartphone or tablet camera to scan me

By the Numbers *a snapshot view of an important health issue*

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.

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

44%
SAVE MORE MONEY

21%
PURSUE A CAREER AMBITION



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.

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.

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.

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.

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.

Go Online

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

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Source: YouGov



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More Tools for a Better U!

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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.