

# HEALTH U



Hackensack  
Meridian *Health*

LATEST  
ADVANCEMENTS  
IN BREAST CANCER  
SCREENING

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Check  
Yourself

ARE BREAST  
LUMPS PAINFUL?

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HEALTH **U**  
**ONLINE EXCLUSIVES**



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Learn how “sleep divorce” can impact your relationships and health: [HMHforU.org/SleepDivorce](https://HMHforU.org/SleepDivorce).

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Find tips for easing back into exercise  
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BacktoExercise](https://www.hmhforu.org/BacktoExercise).

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Creative Awards Platinum winner  
and a 2022 APEX Award winner.



*Jersey Shore University Medical Center has been ranked in the top 10 hospitals in New Jersey by U.S. News & World Report.*

## Celebrate Your Health Journeys

Every issue of HealthU magazine—and every month on HealthU Online—our patients courageously share their personal stories of trials and triumphs to inspire others who may face similar challenges. This issue, we're spotlighting one of those brave individuals, Adriana T., and her incredible journey to sobriety.

As a busy wife, mother and professional, Adriana slowly progressed from the occasional drink to frequent use of alcohol. After years of hiding her addiction from her loved ones, she decided she wanted to reclaim her life. With help from Blake Recovery Center at **Carrier Clinic**, Adriana has found a joy in recovery that she didn't think was possible. Read her story on page 29.

It can certainly be heartbreaking to witness someone you love struggle with addiction, but there are ways to support them through it. On page 28, we include tips for helping a spouse or partner who is in recovery or taking steps toward sobriety.

If you are ready to take the first steps toward taking control of your addiction, we have addiction services across the state where you can get help. We may have celebrated National Recovery Month in September, but we all know that substance use disorder and addiction don't begin and end in a calendar month.

Speaking of months to raise awareness of critical health issues, this October, we commemorate Breast Cancer Awareness Month—celebrating survivors, remembering those we have lost and envisioning a future free from breast cancer. Learn about the latest advances in breast cancer screening on page 30.

If you are due for breast cancer screening, don't wait. Early detection provides the greatest hope for successful treatment. You can quickly and easily schedule an appointment online by scanning the QR code on this page.

We hope this fall finds you spending plenty of time with your loved ones, sharing your own brave health journeys and celebrating stories of triumph. 🌟

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

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## Ranked #6 in New Jersey

Hackensack Meridian *Health* is home to the state's #1 adult and children's hospital, and we are proud to have two hospitals ranked in the top 10 in New Jersey, according to *U.S. News & World Report*.

### **Jersey Shore University Medical Center**

Jersey Shore is ranked #6 in New Jersey and has received national recognition for its Orthopedics and Pulmonary & Lung Surgery programs.

### **Children's Health**

For the third year in a row, K. Hovnanian Children's Hospital and Joseph M. Sanzari Children's Hospital have been ranked as the #1 children's hospitals in New Jersey.

### **JFK Johnson Rehabilitation Institute**

JFK Johnson is ranked one of the top 50 rehabilitation hospitals in the country for the fifth year in a row.

### **Hackensack University Medical Center**

Hackensack is ranked the #1 hospital in New Jersey. It is home to a nationally ranked Orthopedics program, the state's best programs in Cardiology, Heart & Vascular Surgery, Geriatrics, Pulmonology and Lung Surgery, and the only nationally ranked programs in the state for Neurology & Neurosurgery and Urology.

Learn more at [HMHforU.org/Rankings](https://www.hmhforu.org/Rankings).



Online scheduling is available for breast cancer screening. Scan this QR code to make an appointment.



This free magazine is prepared by the Marketing and Communications Team of Hackensack Meridian *Health*. Inquiries or ideas can be addressed to [HealthU@hmn.org](mailto:HealthU@hmn.org).

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# BetterU

quick tips to help you live your healthiest life

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## Five Benefits of Strength Training

Strength training is for more than just serious athletes or those looking to build bigger biceps. It can be a beneficial part of anyone's exercise regimen.

"Any person can benefit from strength training, and it may be of increased importance if you have had a back or shoulder injury or are trying to manage a chronic condition like joint pain or osteoarthritis," says Tim Hill, PT, DPT, OCS, physical therapist at **Riverview Medical Center**. "Strength training is also important if you've had or are preparing for a hip or knee replacement surgery."

Tim offers five benefits of complementing aerobic exercises with strength training.

### 1 Increased muscle mass.

Strength training builds muscle and makes you stronger. "You'll be able to more easily accomplish daily tasks, whether that means playing with your kids or grandkids or carrying a heavy load of groceries into the house," Tim says.

### 2 Improved metabolism.

Strength training improves your body's ability to use fat for fuel. "Muscle mass is an important factor in helping you burn more calories even when your body is at rest," Tim says.

### 3 Improved bone health.

Strength training has been linked to an increased rate of bone formation and greater bone density. This can help prevent fractures and reduce the risk of osteoporosis.

### 4 Decreased injury risk.

Strength training helps improve your sense of balance, range of motion and mobility—all of which can help reduce the risk of injury or falls.

### 5 Reduced symptoms.

By strengthening muscles, you can help reduce some symptoms of certain chronic illnesses, such as arthritis, back pain, diabetes and heart disease.



**Go Online**

Find more tips on working out at [HMHforU.org/Exercise](https://www.HMHforU.org/Exercise).

# Curb Your Stress Eating

Stress eating happens when we experience an emotional reaction to stress and use food to cope. Here's what you should know.

Stress eating happens to many of us. "Stress or emotional eating can take several different forms, from avoiding meals altogether to overeating in response to feelings of anxiety or sadness," says **Tara Lally, Ph.D.**, supervising psychologist at **Ocean University Medical Center**. "It's not unusual for us to turn to food when we're feeling overwhelmed, but the physical and emotional consequences of chronic stress eating can be serious."

Dr. Lally provides 10 signs that you might be involving food in stress management:

- ▶ Eating a large amount of food in a short period of time
- ▶ Skipping meals due to stress or anxiety
- ▶ Snacking in the evening or when you are having trouble sleeping
- ▶ Having intense cravings for certain types of food, particularly during high-stress times
- ▶ Grazing on unhealthy snacks throughout the day
- ▶ Eating even when you realize you are not hungry
- ▶ Feeling guilty after eating
- ▶ Turning to comfort foods when feeling overwhelmed by stress
- ▶ Gaining weight unexpectedly and without decreased activity
- ▶ Feeling out of control around certain kinds of foods



Tara Lally, Ph.D.  
Psychologist  
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Neptune



## How to Relieve Stress Without Food

**Mindful food shopping:** A simple "hack" for reducing stress eating is to make good decisions in the supermarket aisle. If it's a food you are likely to turn to during times of stress, consider not buying it.

**Meditation or relaxation techniques:** Practicing deep breathing or conscious awareness of your thoughts and body can help reduce tension and regulate your emotions.

**Exercise:** Exercise releases endorphins, hormones that reduce stress and boost feelings of happiness. Regular exercise can help us manage our emotions in healthier ways rather than turning to stress eating.

**Social support:** Social support from family members or friends can provide us with an outlet to share our feelings and experiences with people we trust.

**Journaling:** Keeping a personal journal can be a helpful way to identify our emotions, process our thoughts and recognize triggers.

**Talking to a professional:** A behavioral health specialist can work with you to develop healthy stress management strategies, identify triggers and provide guidance on making positive lifestyle changes.

If you need professional support for your mental health, find a doctor near you at [HMHforU.org/MentalHealthDoc](https://www.betteru.org/MentalHealthDoc).



## Nutrition Label Red Flags

When buying food, we often assume that the ingredients are safe. But do we really know what we are eating?

**Robert Hildebrandt, RDN, CDCES**, dietitian at **Southern Ocean Medical Center**, provides five dangerous additives and chemicals to look out for:

- ▶ **Red dye No. 3:** A synthetic dye derived from petroleum, red dye No. 3 has been found to be a potential cause for cancer. It's often used to enhance the appearance of red candies, as well as in food and beverages, creating a brighter "cherry red" color.
- ▶ **Titanium dioxide:** Animal studies have shown that high doses of titanium dioxide can increase inflammation and the formation of colon tumors. Titanium dioxide is used to give foods a brighter, whiter color and help prevent ultraviolet (UV) degradation.
- ▶ **Brominated vegetable oil:** Research is limited, but the main concerns are that the substance can accumulate in the body's fatty tissue and harm your nervous system. It is most commonly found in soft drinks or beverages with citrus flavoring to add weight to the mixture of flavor.
- ▶ **Propylparaben:** This type of paraben is used in a wide variety of processed foods, as well as in skincare and haircare products. It can cause disruptions in hormone signaling and could potentially be linked to diminished fertility.
- ▶ **Potassium bromate:** This substance is an oxidizing agent used as a food additive, typically for making bread. It has been found to be carcinogenic in animal studies, meaning that it has the potential to cause cancer.

### How to Avoid These Toxic Chemicals

When in the grocery store, pay close attention to the ingredients list on your product's label to know what you are consuming.

If you come across an ingredient you are unsure of, talk to your health care provider about any health safety concerns.

Eat processed foods in moderation and instead focus on building a diet with natural foods such as fruits, vegetables, proteins and grains.

Find a healthy cooking demo or other nutrition event near you at [HMHforU.org/Events](http://HMHforU.org/Events).



## Turkey Chili Verde

Serves 4

### Ingredients

- 1 tablespoon olive oil
- 1 medium onion, chopped
- 3 garlic cloves, minced
- 1 green bell pepper, chopped
- ½ 4-ounce can whole green chiles, seeded and chopped
- 8 ounces ground turkey breast
- 1½ 14.5-ounce cans white beans, drained and rinsed
- 1 12-ounce can tomatillos, seeded and chopped, with juice
- 1 tablespoon chili powder
- 1 tablespoon ground cumin
- 1 teaspoon dried oregano
- 4 tablespoons fat-free sour cream
- 2 green onions, chopped fine with green portion
- ¼ cup low-sodium, low-fat cheddar cheese, shredded

### Steps

- ➊ Heat olive oil in large sauce pan over medium heat.
- ➋ Add onions, garlic, bell pepper, chiles and ground turkey. Sauté until turkey is lightly browned and vegetables are soft, about 8–10 minutes.
- ➌ Add white beans, tomatillos, chili powder, cumin and oregano. Bring to a boil, then turn heat down and simmer for 30 minutes.
- ➍ Serve and add sour cream. Garnish with cheddar cheese and green onions.

### Nutritional Information

Per serving: 408 calories, 31g protein, 56g carbohydrate (12g fiber), 6g fat (1g sat, 5g mono/poly), 136mg sodium

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

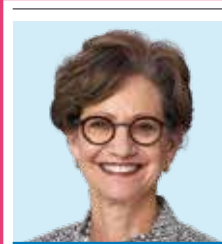
# When should I start getting a mammogram?

**Harriet Borofsky, M.D., weighs in:**

Most women at average risk of breast cancer should start mammogram screening at age 40. Frequent screening enables early detection, which can save lives. If you're at high risk for breast cancer, your doctor may recommend you begin screening even earlier.

The U.S. Preventive Services Task Force has revised its recommendations on mammogram screenings, suggesting that women undergo screenings every other year, starting at age 40, rather than waiting until age 50 as previously advised. This update aligns with expert groups like the National Comprehensive Cancer Network, American Society of Breast Surgeons, American College of Obstetricians and Gynecologists, Society of Breast Imaging and American College of Radiology. However, these groups recommend annual screening as opposed to biannual.

The recommendation to begin mammogram screenings at age 40 is not intended to cause fear but to provide protection. Statistics show that 20 percent of breast cancer cases occur in women in their 40s, and early detection means more options for treatment.



Harriet Borofsky, M.D.

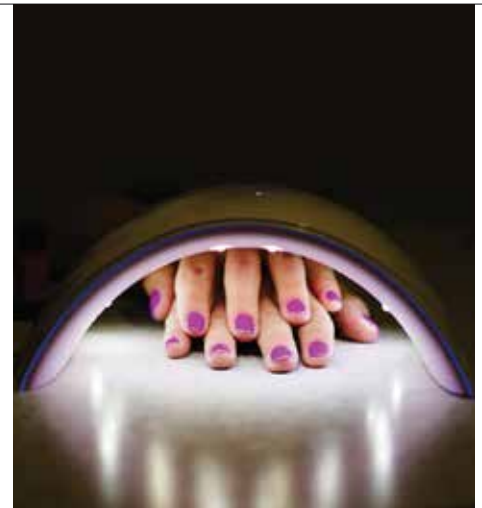
Breast imaging specialist

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Red Bank and Holmdel



Scan the QR code to schedule a screening near you.



## Are gel manicures safe?

**Kritika Khanna, M.D., weighs in:**

Gel nail polish must be exposed to ultraviolet (UV) light in order to harden. UV lamps used at nail salons emit UV radiation, which increases skin cancer risk. While there isn't a strong connection between getting gel manicures and developing skin cancer, any exposure to UV radiation has the potential to raise skin cancer risk.

People who get frequent gel manicures expose their hands to more UV radiation. Getting weekly gel manicures is riskier than going once or twice a year.

**Try these ideas to protect your hands:**

- ▶ Before getting a gel manicure, apply a broad-spectrum, water-resistant sunscreen of SPF 30 or higher to your hands.
- ▶ Wear fingerless UV protection gloves.
- ▶ Save gel manicures for special occasions or once or twice a year.
- ▶ Get a dip manicure instead that offers chip-resistant nails without UV exposure.



Kritika Khanna, M.D.

Family medicine specialist

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Eatontown

Learn more at [HMHforU.org/GelNails](https://www.HMHforU.org/GelNails).





## How do I know if I need to quit drinking?

**Michele Scasserra, LCSW, LCADC, CCS, weighs in:**

For someone who can have one glass of wine and be satisfied, perhaps alcohol isn't an issue. But for those who "chase the buzz," it can certainly snowball. It's important to look at the way you consume alcohol and how it makes you feel not just in the moment but afterward, and how it affects your life overall. That can help you decide if you need to make some changes.

**Some warnings signs to look out for include:**

- ▶ You are drinking more than you used to.
- ▶ Your periodic social drinking has become drinking at home alone.
- ▶ You aren't able to stop drinking once you start.
- ▶ You black out while drinking.
- ▶ You are drinking in secret from family and friends and are hiding liquor around your home.
- ▶ You engage in risky behavior like driving under the influence.
- ▶ Drinking has affected your daily life, including your job, relationships and school.
- ▶ You feel sick all the time and are not taking care of yourself physically or emotionally.
- ▶ You've gained or lost weight.
- ▶ You feel more agitated or irritable.
- ▶ You are sad, depressed or feel anxious.
- ▶ You have a family history of addiction.

**Everyone is different:** One person may be able to have one drink and move on. Another person can have a sip that leads to drinking to the point of blacking out. If you are genetically predisposed to substance use disorder, it's important to know that. But every person is different, and there is no universal rule.

Learn more at [HMHforU.org/QuitDrinking](https://www.HMHforU.org/QuitDrinking).



## Is it too late to get a flu shot this year?

**Kent Fung, M.D., weighs in:**

The Centers for Disease Control and Prevention recommends that all adults and children older than 6 months should get flu shots annually. The timing is important. Experts recommend getting vaccinated around late October because it should offer you protection for the entire flu season.

But even if you miss the late October window, it's not too late to get the flu shot. Cases of the flu typically peak between December and February, but the influenza virus spreads differently every year—usually beginning in November, sometimes going as late as April or May. Getting a flu shot now will offer you protection for the remainder of the flu season.

**You can get one in:**

- ▶ Your doctor's office
- ▶ A walk-in clinic
- ▶ A local flu shot clinic
- ▶ Your workplace if your employer offers them



Kent Fung, M.D.

Internal medicine specialist

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Brick

Learn more at [HMHforU.org/FluShot](https://www.HMHforU.org/FluShot).

# Doctor Spotlight

## FREDERICK ACQUAH, M.D.

### **Internal medicine doctor**

Hackensack Meridian Medical Group  
Primary Care—Toms River

Even though his parents in Ghana, West Africa, weren't medical professionals, internal medicine doctor Frederick Acquah, M.D., knew medicine was his calling. His father worked in construction, and his mother was a seamstress, whom he lost early in his life due to a fatal allergic reaction.

"My dad always wanted me to live my dream," says Dr. Acquah. "We are all on Earth for a purpose, and mine is medicine: to help my patients and train the next generation of doctors."

Dr. Acquah—whose patients call him "Dr. Fred"—knows that before he can help patients, he first must set a warm and welcoming tone that starts with his engaging smile. "Every patient is different and deserves approval irrespective of their background," he says. "When I enter the patient room, I acknowledge their presence and do my best to build trust. By doing so, they become comfortable enough to share their history or present illness."

He asks patients to tell him their story: "I follow the path they lead me on to reach the right diagnosis, factoring in pertinent positives or negatives and physical exam findings. I know that over time, that doctor-patient relationship will get even better."

### **What is your approach to patient care?**

I want every patient to have the opportunity to be themselves. It's rewarding when a patient tells me they haven't had a doctor sit down and explain things the way I do. Patient education is so important.

I follow up and call my patients to check on how they're doing. Some patients tell me,

*Frederick Acquah, M.D., likes to create videos for YouTube where he shares helpful health tips.*



"I know somebody cares about me." I want them to go about their lives in the best way.

### **Where is one place you'd really love to go?**

It would be the Maldives. The islands look so calming and have such beautiful water.

### **You obviously love your work, but what do you do in your downtime?**

I have three young children, ages 8, 4 and 1. I go to the park and play soccer with the older ones,

and that helps me stay active. I also enjoy video editing, which is how I ended up starting my own YouTube channel, where I share tips on different conditions or ailments and give a glimpse into my life and my family.

### **What's one of your major life goals?**

I want to give back medically, so I'd like to return to Ghana on a volunteer medical mission. What happened there has impacted my life, made me who I am and allowed me to follow my dreams. 🌟

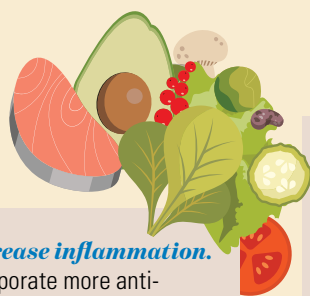
To make an appointment with Dr. Acquah or a doctor near you, call **800-822-8905** or visit our website: **HMHforU.org/FindADoc**.

# Spotlight on U

health topics that matter the most to you

## Power up Your Defenses

Four ways to boost your immune system as the weather changes this fall.



### Decrease inflammation.

Incorporate more anti-inflammatory foods into your diet, including olive oil, tomatoes, green leafy vegetables, fatty fish and berries.



### Fight stress.

Work in short meditation breaks throughout the day where you can focus on deep breathing exercises.

### Get outdoors.

Add an extra layer and hat, and spend time outdoors to soak up some fresh air.

### Get vaccinated.

Stay up to date on your flu vaccine and COVID-19 vaccine and boosters.



For more inspiration on healthy living, visit [HMHforU.org](https://www.HMHforU.org).

CANCER CARE



# Are Cancerous Breast Lumps Painful?

*Our medical oncologist and breast cancer specialist details what a cancerous lump may feel like and other symptoms to watch.*



Evgeniya Sokolovskaya, D.O.  
Diagnostic radiologist  
800-822-8905  
Red Bank and Holmdel

If a woman feels a painful lump in her breast, does that mean it's cancer? The vast majority of the time, the answer is no. But there's a caveat, says **Evgeniya Sokolovskaya, D.O.**, diagnostic radiologist at **Bayshore Medical Center** and **Riverview Medical Center**.

"Historically it's been said that if a lump is painful, it's probably not cancerous," Dr. Sokolovskaya says. "While painful lesions often aren't cancerous, rarely they can be. Any lump should be brought to the attention of a health care provider, whether painful or not."

### **What Does a Cancerous Tumor Feel Like?**

Dr. Sokolovskaya describes how a cancerous breast tumor may feel:

- ▶ Painless
- ▶ Hard mass with angular edges
- ▶ Similar to what the edge of a knuckle feels like
- ▶ A lump that remains fixed in place when you try to move it with your fingers

Additional signs of suspicious breast lumps can include:

- ▶ Swelling around the breast, collarbone or armpit, which can occur even before you feel a lump
- ▶ Redness, thickening or dimpling of the skin, which can resemble an orange peel
- ▶ A newly retracted or inverted nipple (where the nipple points inward toward the breast instead of outward)
- ▶ Discharge from the nipple, especially if it's bloody

### **When to Get Screened for Breast Cancer**

Nearly 300,000 new cases of invasive breast cancer will be diagnosed in the United States in 2023,

according to the American Cancer Society. Since most cases are detected by mammograms—a low-dose X-ray that detects changes in breast tissue—it's wise to undergo screening when you're eligible.

Annual mammogram screenings should begin at age 40, but women who are at higher risk should begin screening sooner.


### **What to Do if You Find a Breast Lump**

Most breast lumps are benign, meaning they're not cancerous. Other types of lumps can include cysts or tough, fibrous masses called fibroadenomas.

"In younger patients, most of these lumps are benign," Dr. Sokolovskaya says. "But if a woman is post-menopausal and develops a mass—painful or not—that would be more likely to be cancerous than for someone in her 20s or 30s."

Regardless of age, women should see a doctor to investigate any breast lump. Some information to prepare in advance can include:

- ▶ Additional context about the lump's size and location
- ▶ Whether the lump is growing and, if so, how fast
- ▶ Any skin or nipple changes
- ▶ If you've suffered recent trauma to the breast, such as an accident or fall
- ▶ Birth control use or fertility treatment
- ▶ Details about the lump's appearance in relation to the timing of your last menstrual period or recent pregnancy

"Don't wait to see your primary care doctor or gynecologist. Go to whomever you feel most comfortable with," Dr. Sokolovskaya says. "The most important thing is to bring it to someone's attention. No mass on the breast should be ignored." 



Scan the QR code to schedule a breast cancer screening near you.



Lauren Cranmer's daughter, now 1, was born during Lauren's cancer treatment at the start of Breast Cancer Awareness Month.

# Fighting for Two

**A former fertility nurse receives a breast cancer diagnosis shortly after finding out she was pregnant with her second child.**

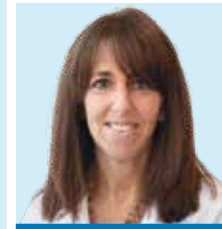
Lauren Cranmer of Manahawkin, New Jersey, spent five years as a registered nurse specializing in fertility. During those years, she witnessed truly surprising events with patients, but she never expected that one day she would be pregnant and face breast cancer at the same time.

Lauren, now 34 years old, has come out smiling—as she typically does—on the other side. She's committed to telling her story to help others feel less alone with their cancer journey. Journaling through her diagnosis and treatments, she says her story must include **Debra Camal, M.D.**, breast surgeon and breast surgical oncologist at **Riverview Medical Center** and **Bayshore Medical Center**.

"Dr. Camal sees so many patients, but every time I talked to her, I felt like I was the only one," says Lauren. "She just has that magical touch, like a fairy godmother. She took care of everything—lining up my oncologist and plastic surgeon and thinking about what we'd need to do if 'this or that happens.' She even gave me her cell phone number."

## Discovering Breast Cancer While Pregnant

Unquestionably, Lauren's road to the present tested her in ways she never imagined. With a husband, 4-year-old son and now a 1-year-old



Debra Camal, M.D.  
Breast surgeon  
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Tinton Falls and Eatontown

"healthy miracle daughter," Lauren discovered she was 7 weeks pregnant February 9, 2021.

Then, on March 8, a breast biopsy revealed stage 3 ductal carcinoma and ductal carcinoma in situ. The first invasive type starts in milk ducts but spreads to surrounding breast tissues, while the second starts in milk ducts and remains there.

At week 12 of her pregnancy, Lauren underwent a mastectomy for her left breast and removal of 21 lymph nodes. She started chemotherapy at week 15 and continued to 35 weeks. "My daughter came at 36 weeks and five days," she says. "Ironically, she was born on October 1, the start of Breast Cancer Awareness Month."

Lauren had another month of chemo after her delivery, and her last treatment was November 4, 2021. To prevent her ovaries from making any more potentially troublesome estrogen, she had hormone therapy with an ovarian suppression injection. A month later, a positron emission tomography (PET) scan showed she was "all clear" of cancer.

A COVID-19 diagnosis at Christmas delayed her radiation therapy, but after 28 sessions ending in January 2022, Lauren says she "held up very well."

## Doing the Right Things for Herself

In May 2022, Lauren underwent a prophylactic, or preventative, mastectomy of her right breast since she carries the PALB2 genetic mutation. That puts her at higher risk for breast cancer as well as ovarian and pancreatic cancer. She'll have breast implants inserted soon.

"There's so much that goes along with having breast cancer, including being physically and mentally tough," says Lauren. "I still see a behavioral health therapist, do acupuncture, and I exercise and eat better. I try to do the right things for myself and be a good mom who's always here for my kids."

# The 411 on Mammograms

*Knowing what to expect during a mammogram can help alleviate anxiety and make the process go more smoothly.*



Roshani Patel, M.D.

Breast surgeon

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Neptune and Jackson

A mammogram is an X-ray of each of your breasts, which is used to detect early breast cancer. Here's what you should know about the screening.

## ***What Can I Expect During a Mammogram?***

- ▶ You will be asked to undress from the waist up and given a gown for covering.
- ▶ Your technician will guide you to stand in front of the X-ray machine.
- ▶ Each of your breasts will be placed between two plastic plates one at a time.
- ▶ The technician will lower the plastic plate that will flatten your breast so the breast tissue can be examined.
- ▶ The technician will guide you through the process and positioning.
- ▶ Multiple images will be taken from different positions for accurate results.

The whole process takes about 15 minutes. "While the screening itself may be uncomfortable for a few minutes, it's well worth it. A regular mammogram screening is the best test to detect early breast cancer," says **Roshani Patel, M.D.**, medical director of breast surgery at **Jersey Shore University Medical Center**.

## ***What Happens After a Mammogram?***

After your mammogram, the technician will look at your pictures to make sure they don't need to take any additional X-rays. After that, a radiologist will read your mammogram results.

At some facilities, a radiologist will review your results while you are there; at others, you'll receive the results at a later time. If you don't hear about your results within a week, call your doctor.

Don't be alarmed if you need to schedule additional imaging. It might be because you have dense breast tissue or the images weren't clear and need to be retaken.

"As with doing anything for the first time, you may be nervous for your mammogram. But just remember the team is there to support you and help you feel comfortable," says Dr. Patel. "Don't hesitate to ask questions or ask for information to be repeated. If you have concerns, feel free to voice them." ❄️



## **Tips to Prepare for Your Mammogram**

**Avoid scheduling during your period:** Schedule your mammogram one or two weeks after your period, as your breasts can be tender during your period.

**Set ample time for your appointment:** Make your mammogram appointment on a day and time when you are free to avoid being rushed.

**Skip deodorant that day:** Do not wear deodorant, powder, lotion or perfume on the day of your exam, as they can interfere with the results.

**Leave the jewels at home:** Avoid wearing any jewelry, as you will be asked to take it off before your screening.

**Don't wear a dress or one-piece:** It is recommended that you wear a two-piece outfit so you can keep your lower clothing on during the screening.

**Bring previous mammogram results:** If you've had mammograms at other facilities before, bring your records so your doctor can compare your results.

**Remember your important documents:** Bring your medical insurance card, ID and any prescription information with you to the facility where you are scheduled for the mammogram.



Scan the QR code to schedule a breast cancer screening near you.



# Clearing the Air

*What causes lung cancer in nonsmokers? Our expert weighs in.*

Lung cancer is most often associated with smoking, but nonsmokers can also be at risk. Approximately 15 percent to 20 percent of lung cancer patients are nonsmokers, according to the National Institutes of Health.

What causes lung cancer in nonsmokers? What should a nonsmoker do to prevent or detect lung cancer? We spoke with **Syed Shahzad Razi, M.D.**, thoracic surgeon at **Bayshore Medical Center**, for answers.

## **Lung Cancer Risk Factors for Nonsmokers**

Lung cancer risk factors in nonsmokers can include exposure to:

- ▶ **Secondhand cigarette smoke:** Smoke breathed in from other people's burning tobacco products leads to more than 7,300 lung cancer deaths a year in the U.S., according to the Centers for Disease Control and Prevention.
- ▶ **Cooking oil fumes:** Breathing in cooking fumes, which contain harmful gases that include carcinogens, in an unventilated kitchen may increase your lung cancer risk.
- ▶ **Asbestos:** Inhalation of asbestos fibers has been linked to lung cancer.
- ▶ **Residential radon gas fumes:** Radon is a gas that has no smell or color. It is more likely to cause lung cancer in smokers, but nonsmokers are also at risk.
- ▶ **Particulate matter air pollution:** Exposure to particle pollution may increase a person's risk of lung cancer, but this is a more significant risk in countries without air-quality regulations.
- ▶ **Diesel exhaust:** Lung cancer has been linked to diesel exhaust. Those at greatest risk have high exposure, such as toll booth workers, miners, railroad workers and mechanics.

Additionally, obesity and chronic lung disease such as asthma, COPD and tuberculosis may increase your risk.

Studies have pointed toward a relationship between nonsmokers and a family history of lung cancer, suggesting a role for genetic predisposition based on family history.

"A person's risk of lung cancer may increase if their parent or sibling has or had the disease," says Dr. Razi. "Having a parent or sibling with lung cancer doesn't mean you will get lung cancer, but talk with your doctor about your family history of lung cancer—or any health concerns."

## **When to Get Screened for Lung Cancer**

Lung cancer screening is recommended for people who meet all of the following criteria:

- ▶ Current or former smoker who has quit in the last 15 years
- ▶ Between the ages of 50 and 80 years old
- ▶ Have at least a 20-pack-year smoking history, such as two packs per day for 10 years or one pack a day for 20 years

The U.S. Preventive Services Task Force does not recommend lung cancer screening for people who have never smoked. "We have yet to develop a system to identify nonsmokers who would benefit most from lung cancer screening," Dr. Razi says. "With such scans for the general population as a whole, the current benefit may not outweigh potential risks, such as false positive results."

Instead, he recommends that nonsmokers discuss their personal risk factors with a primary care doctor while taking steps to reduce their risk by making healthy lifestyle choices and reducing exposure to cancer-causing agents. 🌱



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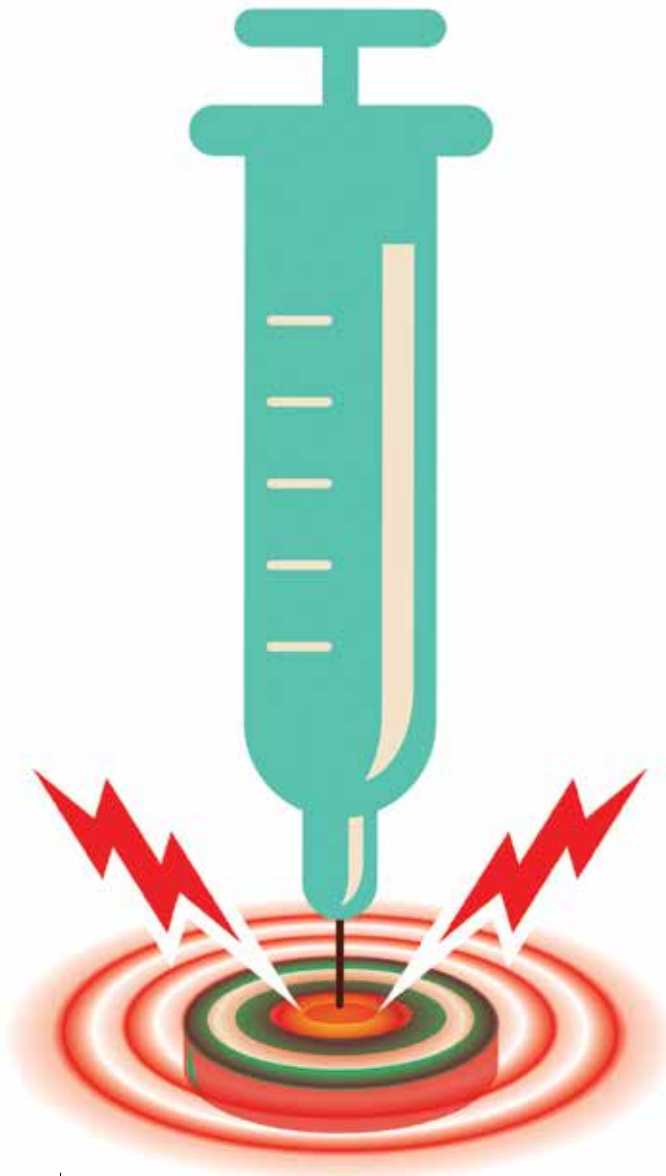
Edison, Perth Amboy,  
Old Bridge and  
Holmdel

## **Go Online**

Find out if lung cancer screening is right for you:  
**HMHforU.org/  
LungCancerCheck.**

# Give It a Shot?

*Cortisone shots can provide pain relief for a variety of conditions. Our expert shares when you should consider getting one—and when you shouldn't.*



Chronic pain can be extremely disruptive and limiting to everyday life. Thankfully, modern medicine has achieved various pain remedies and solutions, including cortisone shots, which can provide relief for a variety of conditions. When should you consider one?

**Steven Mennona, M.D.**, orthopedic surgeon at **Jersey Shore University Medical Center** and **Ocean University Medical Center**, explains what a cortisone shot is and when a doctor may recommend one.

## **What Is a Cortisone Shot?**

“A cortisone shot or steroid shot is an anti-inflammatory medication that delivers a high dose of a man-made drug that resembles the hormone cortisol directly to a problem area of the body,” says Dr. Mennona.

The injection reduces inflammation in a given area, and in case of systemic inflammation, it can dampen the body’s immune response and provide significant pain relief within 24–48 hours after the injection.

## **Who Should Get a Cortisone Shot?**

Dr. Mennona says there are many conditions that might need a cortisone shot, including:

- ▶ Joint pain in shoulders, knees, hips, etc.
- ▶ Osteoarthritis
- ▶ Rheumatoid arthritis
- ▶ Inflammatory conditions
- ▶ Nerve entrapments such as carpal tunnel syndrome
- ▶ Bursitis (inflammation of the bursae, fluid-filled pads that cushion spaces around bones)
- ▶ Trigger finger (condition that makes the fingers difficult to move)

“Generally, cortisone shots are only considered after other therapies have failed. But sometimes, steroid shots can be given as an initial treatment if the pain is really severe and we want to pinpoint the area we are treating,” Dr. Mennona says.



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Orthopedic surgeon

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Brick, Toms River  
and Freehold



# Best Foods for Managing Arthritis

There's no cure for arthritis, but it is possible to limit arthritis pain. Did you know that some foods may ease symptoms?

These foods may help reduce inflammation, which can ease arthritis symptoms:



Fish high in omega-3 fatty acids



Blackberries, blueberries and raspberries



Walnuts, almonds, pistachios and other nuts



Oranges, grapefruit and other citrus fruits



Yogurt and other low-fat dairy products



Spinach, kale and other leafy greens



Green tea



Olive oil



## Foods to Avoid to Manage Arthritis Pain

Try to limit or avoid eating these foods, which may contribute to inflammation:

- ▶ Sugar, including soda, candy and baked goods
- ▶ Refined white flour, which is in a variety of baked goods
- ▶ Saturated fats, including red meat and full-fat dairy products
- ▶ Fried foods
- ▶ Processed foods, including snack foods

## Downsides to Cortisone Shots

Cortisone shots are not the first line of defense for a few reasons:

- ▶ **The effects of a shot don't last forever.** Everyone responds differently, but relief typically lasts for a few weeks to a few months. For some people, the shot provides enough relief to break the inflammation cycle, allowing the body to heal. But for those with chronic pain conditions, a series of shots might be needed.
- ▶ **Shots must be limited in use.** As Dr. Mennona explains: "Most orthopedic surgeons don't like to give cortisone shots repetitively because, while it's good to relieve inflammation and pain, it can also lead to degenerative changes of the cartilage lining the joint." Doctors usually won't give a patient more than three to four shots per year.

Due to the risk of joint degeneration and the potential need for repetitive shots, in many cases, other

treatments may be considered first, such as:

- ▶ Massages
- ▶ Hot and cold presses
- ▶ Other less aggressive anti-inflammatories
- ▶ Physical therapy

## Who Shouldn't Have a Cortisone Shot?

Cortisone shots are generally safe for most people, with a few exceptions:

- ▶ People with diabetes, because steroid shots can elevate the blood sugar for a short period of time after the injection
- ▶ People who may be allergic to one of the preservatives in the shots

"While cortisone shots may not be the best option for first-line treatment, they can be a safe and effective option for people who are experiencing significant pain or who cannot find relief through other treatments," says Dr. Mennona. ❄️



How healthy are your hips or knees? Take our health risk assessment.

# Playing Through a Concussion

*If an athlete returns to play while still recovering from a concussion, they put themselves at increased risk for reinjury and more severe brain injury.*

Not long ago, a student-athlete who took a hit to the head was told to “shake it off” and get back in the game. Today, coaches and athletic trainers recognize the inherent danger of that philosophy.

But even everyday activities like falling off a bike without wearing a helmet, skateboarding or any activity that can result in a fall where the head and neck take a hit can cause brain injury.

## **What Happens During a Concussion?**

**Nicole Marcantuono, M.D.**, chief of Pediatric Physical Medicine and Rehabilitation at **K. Hovnanian Children’s Hospital at Jersey Shore University Medical Center**, says a concussion is similar to having your brain shake inside your skull like a baby rattle.

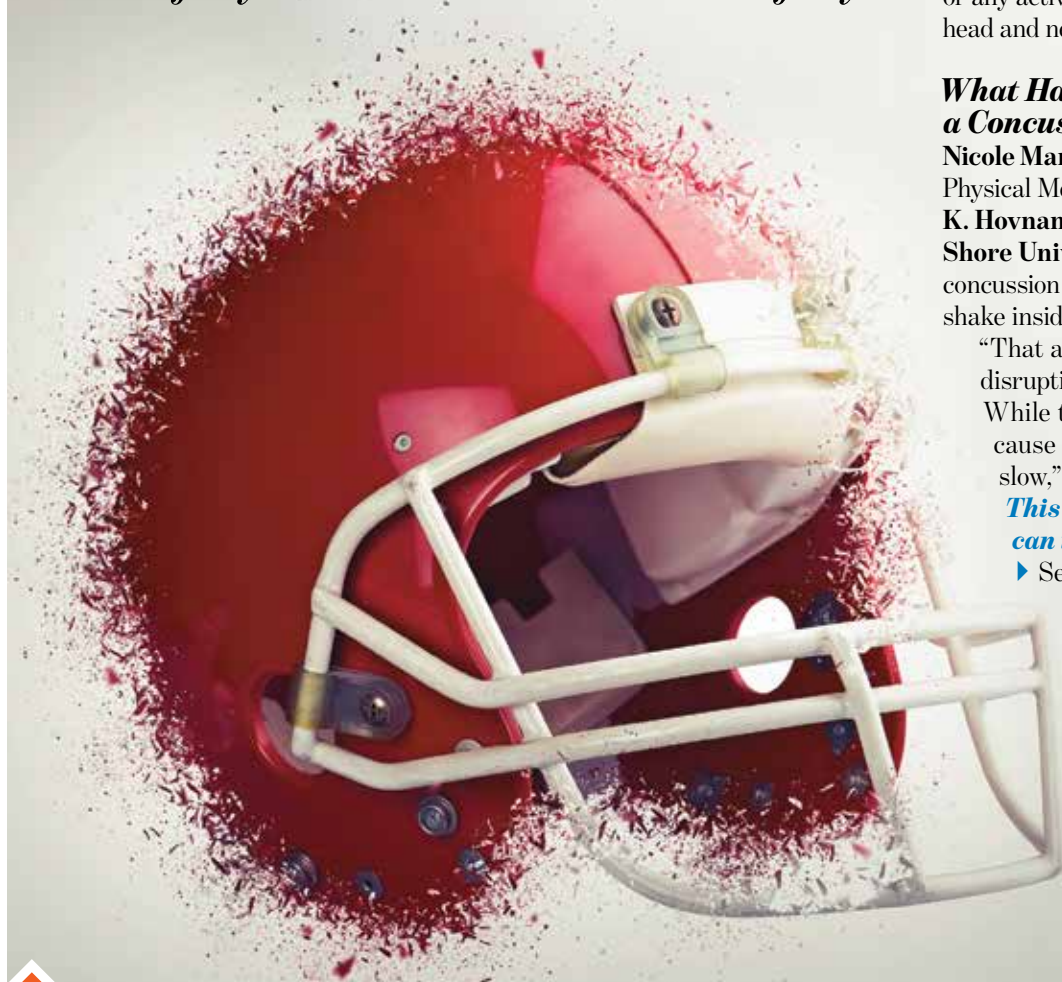
“That abrasive movement can cause a disruption in brain activity and blood flow. While the brain is in recovery, it can cause overall brain activity to be very slow,” she says.

### ***This slow down in brain activity can include:***

- ▶ Sensitivity to noise
- ▶ Fatigue
- ▶ Difficulty thinking clearly and learning new material, making school participation difficult

## **Why Returning to Play Can Be Fatal**

If an athlete returns to play while still recovering from a concussion, they put themselves at an increased risk.



## **Go Online**

Make an appointment with a concussion specialist near you: [HMHforU.org/ConcussionDoc](https://www.hmhforu.org/ConcussionDoc).

“While a person is recovering from a concussion, there is an increased risk of reinjury and the possibility of developing an even more severe brain injury. Though uncommon, that can cause long-lasting neurological sequelae [complications involving damage to the central nervous system] or even prove fatal,” says Dr. Marcantuono.

In addition, she notes that younger brains are more susceptible to malignant cerebral edema. In this condition, the brain swells so fast immediately after the blow that the flow of blood and electrical impulses in the brain are disrupted. This results in symptoms ranging from headaches and dizziness to blurred vision, nausea/vomiting, confusion, lack of awareness, unconsciousness and even death.

### What to Do for a Concussion

Treatment for a mild concussion involves rest and a slow return to normal physical and academic activities as symptoms recede. Patience is key, as this can take time—up to a few weeks.

Don’t hesitate to consult with a medical professional experienced in treating head injury to assess the injury and develop an appropriate recovery plan. 🌀



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Neptune and Jackson

## Concussion Assessment

### What are some common tests that are done to tell if you’ve had a concussion?

Unlike in team sports, there’s no doctor or trainer on the sidelines at your home to assess you after you trip over the vacuum cleaner cord, fall and hit your head.

**Alphonsa, Thomas, D.O.**, a physiatrist specialized in brain injury medicine at Johnson Rehabilitation Institute at **Ocean University Medical Center**, weighs in with some common signs of a concussion, a mild traumatic brain injury that results from a direct impact or sudden jolt to the head.

### Signs of Concussion

- ▶ Loss of consciousness
- ▶ Headache
- ▶ Eye pain and/or eye fatigue
- ▶ Nausea and/or vomiting
- ▶ Dizziness
- ▶ Light and noise sensitivity
- ▶ Changes in sleep patterns
- ▶ Changes in mood such as feeling anxious or irritable
- ▶ Neck pain or stiffness
- ▶ Imbalance (dropping things or bumping into things)
- ▶ Double vision or blurry vision
- ▶ Impaired depth perception (having difficulty seeing the distance between two items)
- ▶ Difficulty concentrating, multitasking or remembering things

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Brick

Any of these symptoms may be a cause for concern. Above all, if you don’t feel “right,” get checked out. “The earlier you seek treatment, the better,” Dr. Thomas says.

### What Will Your Doctor Do?

If you seek medical care, your doctor will do a concussion assessment. These tests assess your brain function after the head injury. Tests include but are not limited to:

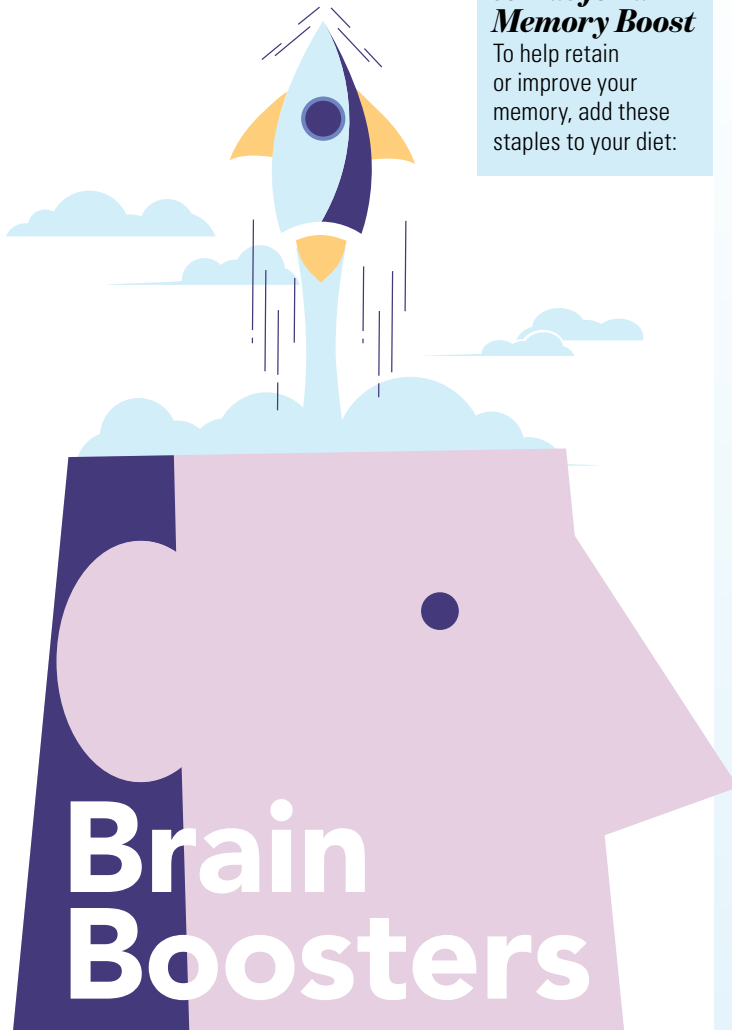
- ▶ **Balance testing:** An exam to check your balance, postural stability and coordination. Testing can involve standing with feet together with eyes closed, standing with one foot in front of the other with eyes closed and standing on one leg with eyes closed.
- ▶ **Cognitive evaluation:** Evaluating your ability to pay attention, concentrate, process information, and name and remember things.
- ▶ **Visual testing:** Checking the ability of the eyes to move together, track objects moving back and forth, move inward and process visual information.
- ▶ **Brain imaging:** Additional testing, including brain imaging, such as a CT scan.

“A mild concussion isn’t likely to have long-term effects unless there are underlying neurological issues, such as a history of strokes or repeated brain injury,” Dr. Thomas says. “But see your doctor sooner rather than later. The concussion assessment will allow your doctor to create a treatment plan tailored to your injury, which will put your brain on the road to recovery quickly and safely.”

NEUROSCIENCE

**Best Foods to Eat for a Memory Boost**

To help retain or improve your memory, add these staples to your diet:



*If you want to improve your memory, incorporate these foods into your diet.*

The food you eat can do much more than satisfy hunger. If you want to improve memory, eat things that are good for your brain.

“Think of food as the fuel that helps your brain and body run,” says **Casey Parker**, clinical nutrition manager at **Ocean University Medical Center**. “If you select healthy choices, you’ll help your brain be at its best.”

**Go Online**

Find a healthy cooking demo or other nutrition event near you at [HMHforU.org/Events](https://www.hmhforsu.org/events).



**Berries**, which are rich in antioxidants, including flavonoids, the pigments that give berries color. These colorful substances may help protect the brain from age-related memory loss. Enjoy blueberries, blackberries, raspberries and strawberries whenever they’re available.



**Fatty fish**, such as salmon and tuna, which are rich in omega-3 fatty acids. Research has shown that they increase blood flow to the brain, improving cognition.



**Whole grains**, such as quinoa, brown rice and oatmeal, which contain complex carbohydrates. Complex carbohydrates release glucose more slowly, supplying your brain with a steady energy source. Fiber also keeps our digestive tract healthy and a balanced environment for managing the gut microbiome.



**Eggs**, which contain B vitamins and the nutrient choline. B vitamins may ward off cognitive impairment, and choline is linked to memory improvement.



**Avocados**, which contain healthy monounsaturated fats. These fats help reduce the risk of hypertension, which is associated with cognitive decline.



**Nuts**, particularly walnuts, which contain healthy fats, including omega-3 fatty acids. Nut consumption has been associated with healthy brain function in older adults.



**Caffeinated beverages**, which help you stay alert and focused. Some research suggests that caffeine consumption may help the brain process more information. Opt for coffee or tea, but skip store-bought drinks with added sugar.



**Sunflower or sesame seeds**, which contain omega-3s and vitamin E, an antioxidant that’s brain-healthy. Some seeds contain tyrosine, an antioxidant linked with mental sharpness.



**Leafy green vegetables**, which are rich in antioxidants that fight cognitive decline. These salad staples contain vitamin E, folate and vitamin K, which promote memory.



**Dark chocolate**, which contains more cacao than milk chocolate. Cacao, or cocoa, is rich in antioxidants that stimulate blood flow in the brain.



**Olive oil**, which contains healthy monounsaturated fat and antioxidants. Research has shown that olive oil helps reduce brain inflammation, protecting memory. 🌿

# CPR 101

*Knowing CPR can save lives. Here are five simple steps to remember if you find yourself in an emergency situation.*



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Toms River

CPR—or cardiopulmonary resuscitation—is a fundamental part of basic first-aid training. Luckily, the average person doesn't need to use it in their everyday routine, but knowing CPR can save lives.

## What Is CPR?

CPR is a lifesaving technique that can be used when someone's breathing or heartbeat has stopped. "It helps keep oxygen-rich blood flowing to vital organs until medical treatment can restore the heart pumping," says **Matthew Schoenfeld, M.D.**, interventional cardiologist at **Jersey Shore University Medical Center**. "A lack of oxygen to the brain can cause damage in a matter of minutes."

To learn CPR correctly, you should take an accredited course. However, even untrained individuals can help in emergency situations.

## Hands-only CPR

There are two versions of CPR. The first version is for health care providers and those who are professionally trained. This method uses chest compressions and mouth-to-mouth breathing. This is generally performed at a ratio of 30 compressions to two breaths.

The second version is for the general public or bystanders: hands-only CPR.

According to the American Heart Association, approximately 90 percent of people who suffer a cardiac arrest outside a hospital setting die. But CPR, especially if administered immediately, can significantly improve the victim's chance of survival. Hands-only CPR has been shown to be as effective within the first few minutes as normal CPR.

## 5 Steps to Remember CPR

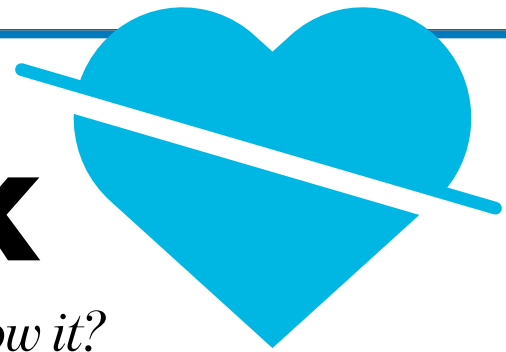
- 1 Check for safety:** Before starting CPR, check the environment to see if it's safe for the person and yourself.
- 2 Check for responsiveness:** If the person is not responsive, check their breathing. Attempt to wake the person by tapping their shoulder and asking loudly if they are OK.
- 3 Call 911:** If the person doesn't respond and is having difficulty breathing or is not breathing, call 911 immediately.
- 4 Get the person in position:** Place the person on their back on a firm and flat surface.
- 5 Apply chest compressions:** Put the heel of one hand in the center of the person's chest and the other hand on top. Push hard and fast at 100–120 beats per minute. "Try doing compressions to the beat of a song such as 'Stayin' Alive,' 'Walk the Line' or 'Hips Don't Lie,'" says Dr. Schoenfeld.

"Hopefully, you will never find yourself in a situation where CPR is needed, but it can save lives," says Dr. Schoenfeld. "While it's best to take a certified course, in the heat of the moment, it's better to do something than nothing." 🌟

## Go Online

If you're ready to become CPR certified, there are many classes available. Find one near you at [HMHforU.org/Events](https://www.hmhforu.org/events).

# Silent Attack



*Is it possible to have a heart attack and not know it? Learn about silent attacks and how they differ from typical heart attacks.*

A silent heart attack—also known as a silent myocardial infarction—is a type of heart attack that often goes unrecognized. That’s because its symptoms are mild enough to be nearly undetectable by a person.

“More typical heart attacks come with a host of well-known and sometimes dramatic symptoms,” says **Arthur Okere, M.D.**, interventional cardiologist at **Ocean University Medical Center**. “Silent heart attack symptoms lack this intensity and can be mistaken for a minor chest discomfort, indigestion or other less serious problems.”

## ***Silent Heart Attacks vs. Typical Heart Attacks***

“Silent heart attacks involve blockage of blood flow to the heart and damage to the muscle,” Dr. Okere says. “In this sense, they are no different from any other heart attack. Their differences lie in how they manifest through noticeable symptoms.”

### ***Typical heart attack symptoms include:***

- ▶ Pain in the back or belly
- ▶ Stabbing sensation in the left arm, neck, jaw or teeth
- ▶ Sudden shortness of breath
- ▶ Sweating
- ▶ Dizziness or lightheadedness
- ▶ Nausea or vomiting

### ***Symptoms of silent heart attacks are much more subtle—if they exist at all:***

- ▶ Feeling as if you have a sore or strained muscle in your chest or upper back
- ▶ Fatigue or stress
- ▶ Indigestion
- ▶ Flu-like symptoms
- ▶ Discomfort that doesn’t go away when you move around



**Are you at risk of a heart attack? Schedule a heart screening near you.**

## ***Risk Factors of a Silent Heart Attack***

Silent heart attacks account for about 20 percent of all heart attacks, according to 2022 data from the American Heart Association. Risks of any heart attack include:

- ▶ Being overweight or obese
- ▶ Lack of exercise
- ▶ Diet high in cholesterol, salt and unhealthy fats
- ▶ High blood pressure
- ▶ High cholesterol
- ▶ Tobacco use
- ▶ High stress

“Identifying and treating risk factors is crucial to reducing the chance of having a heart attack,” says Dr. Okere.

Additionally, certain genetic factors increase your risk of having a heart attack. “Cardiovascular risk, in general, can be inherited from one generation to the next,” Dr. Okere says. “If your parent or sibling is affected by a heart attack, your risk is increased.”

## ***How to Tell if You’ve Had a Silent Heart Attack***

Only a diagnostic test, such as an electrocardiogram (ECG), echocardiogram or CT scan, can identify a silent heart attack. “An ECG can show where the heart muscle is damaged,” says Dr. Okere.

A heart attack of any kind is an emergency. Even if you aren’t confident that you’re having a heart attack, it’s important to call 911 right away. 🌀



Arthur Okere, M.D.

Interventional cardiologist

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Neptune, Freehold and Brick

# Heart of the Matter



*Dan Reiss was walking his dog, Jake, when he had a heart attack. Today, he is back to enjoying those walks.*

## After experiencing a “widowmaker” heart attack, Dan Reiss had a multi-step medical journey that required six procedures.

In May 2022, Dan Reiss was enjoying a walk with his dog, Jake, near his home in Colts Neck, New Jersey, when he heard an unrecognizable female voice in his head tell him distinctly, “You’re having a heart attack.”

Incredibly confused, Dan, who was 68 at the time, spotted a police station under construction and a temporary office trailer nearby and went up the stairs to knock on a window. Someone opened the door as he asked for a glass of water and proceeded to fall over. His heart stopped from a severe “widowmaker” heart attack, dubbed this name because it’s unusual for people to survive them.

Police used an automated external defibrillator (AED) to electrically shock his heart three times

before re-establishing an effective rhythm. He was then transported by ambulance to **Jersey Shore University Medical Center** in cardiogenic shock. His heart couldn’t pump enough blood and oxygen to the brain and other vital organs, which is considered a life-threatening emergency.

So began Dan’s challenging multistep medical journey in heart failure that required six procedures.

### State-of-the-Art, Lifesaving Devices

First, Dan received an intra-aortic balloon pump in the hospital’s cardiac catheterization lab. The cardiac team used the pump to support Dan’s



Deepak Singh, M.D.

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Neptune

circulation while they opened the blocked artery with a catheter. Dan also received a cardiac stent, a small mesh tube to hold open passages such as weak or narrowed arteries. However, he continued to deteriorate because blood couldn’t move freely through that artery.

The interventional cardiologists then implanted an Impella CP heart pump through Dan’s right groin. The mechanical circulatory support treats cardiogenic shock and is considered a temporary measure that requires the patient to lie flat all the time.

Dan recovered for a brief time, enough for the first Impella CP to be removed. But he crashed, requiring implantation of a second device, this time through his left groin. “Dan demonstrated he could not stay off a device and was in multisystem organ failure that also required a ventilator,” says cardiothoracic surgeon **Deepak Singh, M.D.**

The team needed a long-term strategy, which was determined to be an Impella 5.5-liter pump. Dr. Singh positioned it under Dan’s right collarbone to connect it to the axillary artery, the principal artery of the upper limb.

## ‘On the Bridge’ to a Heart Transplant

After spending 33 days in the intensive care unit, Dan still needed one more device as a “bridge” to a heart transplant. Dr. Singh chose a durable left ventricular assist device, or LVAD, placed through the breastbone during surgery.

Within three weeks, Dan could walk with assistance for 1,000 steps, and in four weeks, on his own. “Time with the LVAD allowed his organs to recover completely so he could be listed for a transplant,” Dr. Singh says.

On May 7, 2023, Dan received his new heart, and within a day of surgery, his new heart was beating successfully and he was breathing on his own and even speaking a bit.

After knocking on the trailer, Dan doesn’t remember much about what transpired, but today, he’s looking forward to many more years of walks with Jake.

PEDIATRICS



# Right on Track

Now 2 years old, Marcel runs boisterously through his home, with a scar so minimal that his mothers marvel that he ever had skull surgery.

## Head Start

*Learn why a baby might be prescribed helmet therapy and how this treatment works.*

Not every baby's head shape looks exactly the same. But as babies grow, a misshapen head could be a sign of a condition that requires helmet therapy to correct.

We spoke with **Lawrence Daniels, M.D.**, a pediatric neurosurgeon at **Jersey Shore University Medical Center**, about how helmet therapy—also known as cranial remolding therapy—can help.

### **When Is Helmet Therapy Needed?**

A baby may be prescribed helmet therapy for a number of conditions, including:

**Flat Head Syndrome:** Helmet therapy may be needed to resolve two types of flat head syndrome: positional plagiocephaly (partial flattening of one side of the head) and positional brachycephaly (flattening of the back of the head). “These conditions most commonly represent normal development and rarely require helmet therapy,” Dr. Daniels says. “On occasions where the deformity is extreme and severe, or the babies have other medical conditions that prevent them from repositioning on their own, helmet therapy may be required.”

### **Flat head syndrome may be caused by:**

- ▶ Sleeping on the back
- ▶ Baby position in the womb
- ▶ Premature birth
- ▶ Torticollis (Neck muscle tightness)

**Craniosynostosis:** Craniosynostosis is a rare genetic condition where a baby's bones in the skull join together too early. That abnormality can limit brain growth and lead to intellectual



## With successful surgery for craniosynostosis, Baby Marcel's skull—and future—were expertly pieced together by surgeons at K. Hovnanian Children's Hospital.

Margaret Lacy and Verdell Wright were understandably terrified to learn that their baby, Marcel, would need intricate surgery to break his skull and place it back together so his brain could grow normally. But the Runnemede, New Jersey, couple found both assurance and unparalleled expertise at **K. Hovnanian Children's Hospital**, where doctors were able to perform the procedure in a single step, allowing their rough-and-tumble boy to develop on pace.

Marcel was born in April 2021 with craniosynostosis, a genetic condition that leads the bones in the skull to join together too early. The abnormality can limit brain growth and lead to intellectual disabilities. Marcel's unusual subtype, called metopic synostosis, made his forehead appear pointy and his eyes slanted.

Before coming to the Children's Hospital, Margaret and Verdell felt discouraged and dismissed by specialists from other hospitals, who told them Marcel would require two separate surgeries to repair his skull defect and need to wear a helmet 24/7 for the six months between surgeries. "It didn't sit right with us," Margaret recalls. "With major surgery like that, we wanted multiple opinions and needed someone to explain to us what was actually wrong in full detail."

### Comfort and Education

The mothers found exactly who they needed in **Lawrence Daniels, M.D.**, division chief for pediatric neurosurgery and director of the Craniofacial Clinic at the Children's Hospital. His approach to craniosynostosis treatment involves educating parents with multiple detailed conversations and videos explaining the diagnosis and surgery. Dr. Daniels even connected Margaret and Verdell with other families whose children had the same procedure.

"The goal of my first meeting with families is not to convince or persuade them on one treatment or another. The goal is to inform, educate and comfort," Dr. Daniels says.

Marcel's parents were ecstatic to learn that Dr. Daniels and colleagues could perform the surgery in one session rather than two. The single-step procedure, which essentially opened Marcel's skull and pieced it together again like a puzzle, also "immediately accomplishes what we want, allowing the space needed for the developing brain without delay," Dr. Daniels says. "We can do the more aggressive and thorough surgery with the same amount of risk or, in many cases, less risk than other surgeons who perform a two-step operation."

### Recovery on Track

Marcel's surgery took place in October 2021, when he was 7 months old. Margaret and Verdell were put at ease by their rapport with Dr. Daniels and his team, who also arranged to ensure their every comfort, including housing at a local Ronald McDonald House. As expected, the infant couldn't open his eyes just after surgery due to intense swelling, but the baby could hear and respond to his mothers' voices, which was a tremendous relief and comfort for the family.

Within days, Marcel was sent home, where he quickly resumed his daredevil ways. "We were scared that he might bump his head or fall, but Marcel didn't care," Margaret recalls. "He still lunged after his toys. After two days at home, we knew he'd be fine."

Now 2 years old, Marcel runs boisterously through his home, with a scar so minimal that his parents marvel that he ever had skull surgery. Regular monitoring with Dr. Daniels indicates that he's recovering and developing normally, and he is learning the alphabet and how to count.

"He's a tough little guy," Dr. Daniels says. "He has grit and spunk. The reconstruction we performed was durable enough that you don't have to treat him any differently than before surgery. That's the whole reason we did this."

disabilities when not corrected. When two separate surgeries are needed to address craniosynostosis (which is the case at many hospitals), a helmet is worn during the time between the two surgeries.

"At Hackensack Meridian Children's Health, we are successfully performing craniosynostosis surgery in a single procedure," Dr. Daniels says. "This not only avoids 24/7 helmet therapy for these children but also decreases the risks associated with multiple surgeries."

### How Does Helmet Therapy Work?

Helmets are made with a hard outer shell and foam inner lining. "They are custom-fitted so that they inhibit growth in prominent areas and allow growth in flat areas," Dr. Daniels says. "Adjustments to fit are made frequently as a baby's head grows."

Helmets need to be worn about 23 hours a day, taken off for bath time but left on for all other activities, including sleeping, playing and feeding. "The duration of helmet therapy depends on the child—their age and the severity of their condition," Dr. Daniels says. "Therapy should begin around 4–6 months and is usually ineffective after age 1 since the skull starts to fuse together by then."

### When Other Treatment Is Needed

For the majority of plagiocephaly and brachycephaly cases, the conditions don't affect brain development or growth. Most cases improve as the child gets older and spends more time standing and sitting.

"But if a baby's flat head is caused by stiff neck muscles, that can slow early development," says Dr. Daniels. "If your doctor recommends physical therapy exercises, it's important to follow that guidance."

Craniosynostosis, on the other hand, likely requires surgery to relieve the pressure in the skull and allow the brain to grow normally. "Surgery can reduce the risk of complications such as developmental delays, seizures and even blindness," Dr. Daniels says. "This isn't a condition you can take a 'wait and see' approach about." ❄️



Lawrence Daniels, M.D.

Pediatric neurosurgeon

800-822-8905

Cedar Knolls

### Go Online

To make an appointment with a pediatrician near you, visit [HMHforU.org/Pediatrician](https://www.HMHforU.org/Pediatrician).

# The Truth About Fat Freezing

*Is fat freezing a safe and effective weight-loss treatment, or is it simply too good to be true?*



Karl Strom, M.D.

Bariatric surgeon

800-822-8905

Holmdel, Manahawkin  
and Glen Ridge

In recent years, fat freezing has emerged as a popular cosmetic procedure to remove body fat. But is this treatment safe and effective, or is it simply too good to be true? Our expert, **Karl Strom, M.D.**, medical director of Bariatrics at **Bayshore Medical Center** and **Southern Ocean Medical Center**, lays out what you need to know about fat freezing.

## **What Is Fat Freezing?**

“Fat freezing, or cryolipolysis, is a noninvasive procedure where fat cells are frozen and then die,” Dr. Strom says.

The procedure, which lasts 30–50 minutes, does not require anesthesia or medication and is meant to target specific areas of stubborn fat such as:

- ▶ Under chin
- ▶ Upper arms
- ▶ Thighs
- ▶ Abdomen
- ▶ Flanks (“love handle” area)
- ▶ Back
- ▶ Beneath the buttocks

## **What Results Can I Expect With Fat Freezing?**

Since the procedure kills fat cells instead of removing them, it can take several weeks for the cells to completely break down and for you to see results. Depending on how large the target area is, you may need a series of sessions.

Fat freezing can reduce fat in a specific area by 20 to 80 percent. “The results will last up to six to nine years,” says Dr. Strom. But this process does not prevent new fat cells from forming, so the results aren’t

necessarily permanent. Theoretically, they could last longer with proper diet and exercise.

## **Is Fat Freezing Safe?**

Cryolipolysis is an FDA-approved procedure and is considered safe. Dr. Strom says there may be a few temporary side effects from the treatment process such as:

- ▶ Swelling
- ▶ Skin sensitivity
- ▶ Bruising
- ▶ Discoloration of the skin
- ▶ Localized pain

This procedure does not have a recovery period. You can return to your daily life and activities immediately.

## **Who Should Consider Fat Freezing?**

This procedure is meant for people looking to lose 5–10 pounds in a stubborn target area. This is not a weight-loss solution.

“For someone who needs to lose significant weight and needs help with exercise and diet modification, this isn’t a good option,” Dr. Strom says.

Fat freezing is not intended for people who need to lose a significant amount of weight because, ultimately, this is a cosmetic procedure that doesn’t address systemic issues or incite behavior modification that is needed for true, maintainable weight loss, Dr. Strom says.

Fat freezing can be an effective quick fix for small trouble areas that need some toning, but the results will not be permanent without behavior modification. Plus, since this is an elective procedure, it won’t be covered by insurance. ❄️



Take our health risk assessment to find out if you are a candidate for weight-loss surgery.

# The Weight Loss and Fertility Connection

*Learn how obesity can affect fertility and pregnancy, and when bariatric surgery can help.*

For many people who hope to become pregnant, being obese or overweight can hinder that goal. “Obesity has been linked to fertility issues,” says **Seth Kipnis, M.D.**, medical director of Bariatric and Robotic Surgery at **Jersey Shore University Medical Center**. “It can also increase a pregnant woman’s chances of conditions such as gestational diabetes. For those who can’t lose weight through diet and exercise alone, bariatric surgery may provide a solution.”

## **How Obesity Impacts Fertility and Pregnancy**

**Stephanie Scianni, D.O.**, obstetrician/gynecologist at Jersey Shore, says obesity has been linked to several fertility issues, making it difficult for some people to conceive:

- ▶ **Irregular ovulation:** A woman needs a regular menstrual cycle to ovulate and release eggs for fertilization. Excess weight can lead to hormone imbalances that can affect ovulation cycles.
- ▶ **Anovulation:** Obesity also increases the risk of anovulation, when the ovaries do not release eggs.
- ▶ **Polycystic ovarian syndrome (PCOS):** Obesity can increase the risk of PCOS, a hormonal disorder that affects the ovaries and can lead to infertility.

Women who are overweight or obese also face increased risks during pregnancy. Risks include:

- ▶ Gestational diabetes
- ▶ Preterm birth due to macrosomia (large baby size)
- ▶ Preeclampsia (high blood pressure during pregnancy)
- ▶ Cesarean delivery
- ▶ Stillbirth



Seth Kipnis, M.D.

Bariatric surgeon

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Stephanie Scianni, D.O.

Obstetrician/  
gynecologist

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Eatontown, Jackson  
and Freehold

“All of these factors can put both mother and baby at higher risk for complications during pregnancy,” Dr. Scianni says.

## **Weight-loss Surgery as a Solution**

“By helping women lose excess weight, bariatric surgery can help address the problems that may be leading to infertility, as well as decrease some of the increased risks in pregnancy,” says Dr. Kipnis.

The first step is talking to a specialist to see if bariatric surgery is right for you. Many factors determine if you’re a candidate for surgery. Weight-loss surgery might be a good option if you:

- ▶ Have a body mass index (BMI) of 40 or higher
- ▶ Have a BMI of 35 or higher plus a serious medical condition such as high cholesterol, high blood pressure, sleep apnea, type 2 diabetes, arthritis or PCOS
- ▶ Had unsuccessful attempts at controlling your weight using other methods
- ▶ Are unable to perform routine daily activities

The American College of Obstetrics and Gynecology recommends that women wait 18–24 months after weight-loss surgery before getting pregnant. This gives the body time to adjust to the changes and allows the woman to become as healthy as possible for a successful pregnancy.

“Weight-loss surgery has been shown to be the most effective and long-lasting treatment for morbid obesity, but it is not an ‘easy way out,’” says Dr. Kipnis. “Surgery isn’t a cure for obesity but rather a tool to help patients successfully achieve long-term and significant weight loss. Patients have to commit to eating healthy and exercising to lose weight.” 🌟

# Support System

*Our addiction specialist offers six ways to support a spouse who is newly sober or taking steps toward sobriety.*

It can be heartbreaking to witness someone you love struggle with alcohol addiction. “Alcohol has become an increasingly common part of so much of society and social gatherings, which makes it even more difficult to effectively support a loved one facing an alcohol addiction,” says **Aakash Shah, M.D.**, chief of Addiction Medicine at **Jersey Shore University Medical Center**.

It’s important to understand that while your loved one’s alcohol addiction is a serious issue, there are ways you can support them through it.

Dr. Shah offers six tips to help a spouse who is newly sober or taking steps to get sober.

- 1** **Create an alcohol-free shared space.** “For someone who is newly sober or seeking treatment for alcohol addiction, it can be incredibly helpful to live in an alcohol-free home, and spouses, partners and friends can facilitate creating a temptation-free and less stressful home environment,” says Dr. Shah.
- 2** **Anticipate your spouse’s triggers.** “Triggers, or situations and feelings that lead to an urge to drink, can be a common occurrence for someone in recovery,” says Dr. Shah. Common triggers may include:
  - ▶ Stressful situations
  - ▶ Watching others drink alcohol
  - ▶ Feeling alone or isolated from others
  - ▶ Being around certain people or in certain places
- 3** **Know that medications can help.** “There are medications like naltrexone that can help curb alcohol use,” Dr. Shah says. “These can be most effective when they are combined with therapy and support groups.”
- 4** **Celebrate your spouse’s progress.** Help your spouse or partner celebrate milestones toward sobriety. For example, celebrate with a special meal, a trip or a sweet treat to mark the occasion.

**5** **Have patience.** “Remember that recovery takes time and patience, and it doesn’t always happen in a linear fashion,” says Dr. Shah. “Be prepared to be generously patient and supportive throughout a process that may include two steps forward and one step back.”

**6** **Prioritize your self-care.** When supporting a loved one with any medical condition, it’s easy to put aside your own needs. “Remember that self-care is essential for everyone,” says Dr. Shah. Take time each day to focus on yourself and do something that brings you joy or makes you feel relaxed and refreshed.

If you think your spouse or partner is relapsing, avoid accusation. Instead, approach them with honesty and without judgment. “There may be moments of concern and even doubt when you see behaviors that seem familiar from prior to recovery, calmly express your concern in a loving way,” says Dr. Shah.

## **When Your Spouse Is Reluctant to Get Sober**

If your spouse or partner is reluctant or unwilling to take steps to get sober—or even unaware of their addiction—an intervention led by a professional might be an option. “Interventions can be effective, usually as a last resort, with loved ones sharing how the addiction is affecting the individual and family. But interventions typically come with specific consequences, so they should be carefully considered and planned as a family,” says Dr. Shah.

He continues: “It is important to understand that most people with an addiction want to change but do not know where to begin and find endless reasons to delay or avoid the topic. Rather than demand they get treatment and give ultimatums, patiently ask if they are truly happy. If not, calmly ask what is preventing them from going into rehab. The reasons they give for not ‘being ready’ are often distractions but show they know they need treatment. That can be a reason for hope.” 🌟



Aakash Shah, M.D.

Emergency medicine doctor and addiction specialist

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Neptune

## **Go Online**

For information about Blake Recovery Center at Carrier Clinic inpatient detox and rehab services, call **800-933-3579**.



After successful addiction treatment, Adriana T. now pays it forward as a frequent speaker at Blake Recovery Center.

# A New Leaf

## Adriana T. says she's gotten "her wings back" and has been given a second chance after alcohol addiction treatment.

At the height of her alcohol addiction, Adriana T. felt like two women. One insisted she didn't need to drink, while the other whispered, "Yes, but I want more."

The Somerset, New Jersey, wife and mother was painfully aware of her alcohol dependence. The problem crept up gradually: Adriana had been a social drinker for years, sipping wine at parties before realizing in her late 40s it was no longer "doing the job." She then switched to vodka, hiding bottles around her home so they would be readily accessible yet out of sight for her husband and family.

Adriana maintained a full-time job, never missed family commitments and believed she was successfully hiding her increasing alcohol use from her family and friends. But by late 2021, she saw dramatic changes in the mirror that she could no longer deny. Her hair had thinned significantly, she saw a gray paleness on her face, and she used heavy concealer to cover bruises from bumping into things while intoxicated.

The toll on her body was more than external. Routine health tests such as blood pressure and cholesterol revealed her body was going haywire. "I wanted to change my life because I had no life," recalls Adriana, now 57.

### Seeking the Help She Needed

On Christmas Day 2021, Adriana told her husband, John, that she was packing a bag and would check in the next morning at nearby Blake Recovery Center, an addiction treatment center at **Carrier Clinic**.

Adriana's first phase of her 28-day inpatient treatment protocol involved a medically monitored detox process. After her physical dependence began to ebb, Adriana participated in structured daily group and individual counseling sessions. In the evenings, people in recovery attend Alcoholics Anonymous, Narcotics Anonymous or Smart Recovery meetings—the latter an alternative to higher power-based group paradigms.

"We tailor everyone's plan to the individual because everyone is different," explains Michele Scasserra, LCSW, LCADC, CCS, director of substance abuse counseling services at Blake Recovery Center.

The caring, supportive staff made a lasting impression on Adriana, which Michele says is the norm. "I've had patients tell me this is the safest they've felt," she says. "After feeling so alone and isolated in their addiction for so long, when people arrive here, they are instantly welcomed

into a caring community that knows what they are feeling and going through."

### Reveling in Everyday Moments

After she went home, Adriana continued to attend 12-step recovery program meetings, along with one-on-one counseling sessions. "I sacrificed years of my life and health for a drink," she says. "Now, I've put that chapter behind me to get back my life. I got my wings back, and I am able to fly again."

Adriana now "pays it forward" in any way she can. As a frequent speaker at Blake Recovery Center, welcoming people newly entering treatment, she helps others find their wings. She revels in ordinary moments that she previously missed out on, spending time with her husband and grown daughter and enjoying hobbies that include needlepoint and photography.

"I now feel fulfilled with the everyday moments of joy, peace and beauty that I was missing when I was consumed by thoughts of the next drink, and I got a second chance to enjoy them," she says.

Watch Adriana share her story of overcoming alcohol addiction: [HMHforU.org/Adriana](https://HMHforU.org/Adriana).

# Breast Cancer Break

We've long been told that mammograms save lives. And it's true: Compared with no screening, mammograms reduce breast cancer death rates among women ages 40 and older by 40 percent, according to the National Institutes of Health. The imaging test, which uses specialized X-rays, remains the gold standard for detecting smaller, more treatable tumors.

But there's always room for improvement, and Hackensack Meridian *Health* leads the field in incorporating new technologies, guidelines and personalized approaches into its already robust offerings.

"Since early detection is the key to survival, and finding cancers at early stages permits less-aggressive and better-tolerated treatments, we employ the best technologists and use the latest technology for our patients," says **Gail Starr, M.D., MEd**, chief of Breast Imaging, Diagnostic Radiology, at **Hackensack University Medical Center**.

Adds **Harriet Borofsky, M.D.**, medical director of Breast Imaging at **Riverview Medical Center** and **Bayshore Medical Center**: "Breast cancer is a disease that impacts a large number of healthy, vibrant women, and early detection is our best way to halt the natural progression and save lives."

# When to Get Screened

In May 2023, the U.S. Preventive Services Task Force updated its guidance on breast screening, recommending that women undergo mammograms every other year starting at age 40 instead of waiting until age 50, as previously advised. The advice only reinforces Hackensack Meridian Health's approach all along. Our experts had been advising patients to start mammograms at age 40 and continue annually long before the new guidelines, Dr. Starr and Dr. Borofsky note.

But the newly revised guidelines offer a benefit: They may prompt even more women to get screened at age 40 instead of 50. "This helps ensure cancers will be detected earlier, when treatments are less aggressive and more effective," Dr. Starr says.

*Breast cancer screening technology is improving every day. Here are three recent advances that have the potential to save lives.*

# throughs

Dr. Starr and Dr. Borofsky spotlight three recent breast cancer screening innovations and advances.

## **Contrast Enhanced Mammography**

Available at Hackensack and Riverview, contrast enhanced mammography (CEM) is an alternative to highly sensitive breast MRI imaging for women considered at high risk of developing breast cancer due to:

- ▶ Personal or family history of the disease
- ▶ Genetic mutation
- ▶ Abnormal mammogram result
- ▶ Suspicious symptoms

CEM combines high-resolution 3D mammography with functional imaging. After a contrast agent is administered to the patient through an IV, the imaging test delivers information about blood supply, improving breast cancer detection.

"Because breast cancers generally have more blood flow, the contrast makes the cancers much easier to see than on a regular mammogram," Dr. Starr says. "CEM also has fewer false positives, which means fewer additional views and biopsies are needed."

## **Artificial Intelligence**

At Riverview and Hackensack Meridian Health and Wellness Center at Eatontown, radiologists can get a "second read" on mammogram images using artificial intelligence (AI). After using computer-aided detection technology for decades, these facilities added AI capability in spring 2023, taking it to the next level.

After evaluating a woman's 3D mammogram images, radiologists need only press a button to add an extra layer of sensitivity and specificity to their interpretation using AI. The technology is able to highlight and rank areas of concern in the breast while also detecting distortions in breast tissue that might otherwise be difficult to notice.

"These findings can be very subtle to the human eye, but AI is taught to recognize patterns," Dr. Borofsky says.

## **Personalized Risk Assessments**

Hackensack Meridian Health established a unique Breast Imaging Council in 2022 that meets monthly with the goal of "making sure all women placing their trust in our care are getting that high level of care," Dr. Borofsky says.

One of the Council's key initiatives is developing a personalized assessment of each woman's breast screening needs that accounts for factors such as age, breast density, pregnancy history, personal and family history of breast and gynecologic cancers, and biopsy history.

"Not all women are the same in terms of their risk for breast cancer and what type of imaging—or combination—is needed for their screening," Dr. Borofsky says. "If we're able to report that risk, we can use it to help a woman and her doctors know the best imaging modality for her—if she needs ultrasound in addition to mammography, needs CEM or needs to see a genetic counselor. When we do this, it will be hugely innovative and impactful for women in our community." 🌟

Scan the QR code to schedule a breast cancer screening near you.



Harriet Borofsky, M.D.

Breast imaging specialist

800-822-8905

Red Bank and Holmdel



Gail Starr, M.D., MSED

Diagnostic radiologist

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Hackensack



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 [HMHforU.org/Events](https://www.HMHforU.org/Events) or call 800-560-9990.

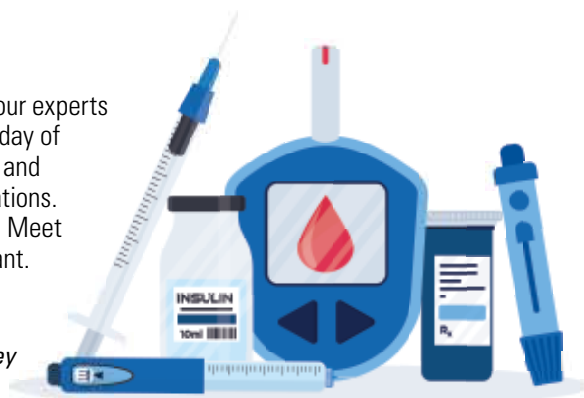
# SchedUle

Here are just a few of the events & classes this October 2023 through January 2024

## Special Events

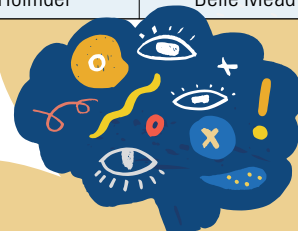
**Diabetes Awareness Month** Join our experts in diabetes management and nutrition for a day of education and discussion on the risk factors and how to manage diabetes to reduce complications. Screenings and light refreshments provided. Meet special guest Ottis Anderson, former NY Giant. Speakers: Jennifer Cheng, D.O., Soemiwati Holland, M.D., and Kate Florio, DPM

Nov. 10, 8:30 a.m.–noon, HOPE Tower at Jersey Shore, 10th fl., 19 Davis Ave., Neptune



**Bayshore Medical Center**  
727 North Beers St.  
Holmdel

**Carrier Clinic and Blake Recovery Center**  
252 County Rd. 601  
Belle Mead



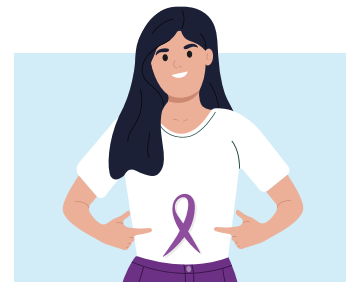
## Behavioral Health

**Managing Stress** Learn effective coping skills and relaxation techniques you can do to reduce stress.

Nov. 8, 7–8 p.m., virtual event, speaker: Amrita Solanky, M.D.

Dec. 6, 6–7 p.m., virtual event

► **Relieving Stress and Anxiety**  
Jan. 10, 5–6 p.m., Red Bank YMCA, 166 Maple Ave.



## Cancer Care

**All About Fibroids** Karim ElSahwi, M.D., will discuss the symptoms and signs as well as the workup and treatment options for fibroids.

Jan. 17, 6:30–7:30 p.m., virtual event

► **Is Lung Cancer Screening Right for Me?** Nov. 8, 10–11 a.m., virtual event

► **Stop Smoking with Hypnosis**  
Nov. 8 & Jan. 10, 7–8 p.m., virtual event

► **Fresh Start Smoking Cessation**  
Four-session program: Nov. 13, 15, 22 & 29 and Jan. 9, 11, 16 & 18; 6–7 p.m.; Ocean East Wing Conf. Center

**The Holidays Are Coming! How Do I Cope?** Learn how to navigate the holiday season, family dynamics, the stress of everything needing to be done and how to get through it happily and with less stress.

Oct. 25, 7–8 p.m., virtual event



**Walk With an Expert: The Importance of Exercise** Join our rehabilitation experts for a short discussion on the importance of moving your body, then take a stroll on the boardwalk for a Q&A session as we exercise.

Nov. 12, 10 a.m.–noon, Bradley Beach Boardwalk (meet at the Gazebo), 5th Ave. & Ocean Ave., Bradley Beach



**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

## HOSPITAL LOCATIONS



## Heart Health

**All About Your Heart** Learn how heart disease affects women differently than men, including risk factors, signs, symptoms, treatment options and prevention.

*Oct. 10, 10–11 a.m., Stafford Library, 129 North Main St., Manahawkin*

- ▶ **Living with Heart Failure** *Nov. 1, 11 a.m.–noon, virtual event*
- ▶ **Angioscreen** *Special rate: \$49.95, registration required. Call for dates, times and locations.*

## Neuroscience

**What's New with Parkinson's Disease** Join Alphonsa Thomas, D.O., and learn the latest in diagnosis, treatment options, coping skills and rehabilitation.

*Nov. 14, 11 a.m.–noon, virtual event*

- ▶ **Memory Loss vs. Alzheimer's Disease** *Memory screenings available, Dec. 7, 11 a.m.–noon, Community Outreach Conference Center, 1686 Route 88, Brick*
- ▶ **Stroke: Am I at Risk?** *Dec. 12, 2:30–3:30 p.m., Stafford Library, 129 N. Main St., Manahawkin*

## Diabetes

### Take Control of Your Health: Diabetes

This six-week evidence-based program developed by Stanford University will show you how to manage diabetes and live your best life. FREE exercise classes will be offered during the program in partnership with the YMCA.

*Beginning Jan. 18, 10 a.m.–noon, Freehold Family YMCA, 470 East Freehold Rd.*

- ▶ **Pre-Diabetes** *Nov. 21, 2–3 p.m., Upper Shores Lavallette Library, 112 Jersey City Ave., Lavallette*



## General Wellness

**Free Wellness Screenings** Get your blood pressure, cholesterol, blood sugar, and Stroke Risk Assessment done. Non-fasting, immediate results.

*Nov. 11, 9–11 a.m., Red Bank YMCA, 166 Maple Ave.*

*Dec. 5, 8:30–10:30 a.m., Freehold Family YMCA, 470 East Freehold Rd.*



- ▶ **Strength Training** *Oct. 19, 2–3 p.m., Upper Shores Lavallette Library, 112 Jersey City Ave., Lavallette*
- ▶ **Living with Arthritis** *Nov. 14, 1–2 p.m., Stafford Library, 129 N. Main St., Manahawkin*
- ▶ **Sepsis: What You Need to Know** *Nov. 15, 7–8 p.m. virtual event*
- ▶ **Eating Healthy Around the Holidays** *Nov. 16, 7–8 p.m., virtual event*
- ▶ **Osteoporosis and Exercise** *Jan. 11, noon–1 p.m., Upper Shores Lavallette Library, 112 Jersey City Ave., Lavallette*
- ▶ **Weight-loss Surgery** *To learn more about weight-loss surgery, attend a free seminar. Find a seminar near you at [HMHforU.org/WeightLoss](http://HMHforU.org/WeightLoss).*
- ▶ **Support Groups** *Hackensack Meridian Health offers regular support group meetings. Learn more at [HMHforU.org/SupportGroups](http://HMHforU.org/SupportGroups).*

## Pediatrics

### Parent/Guardian Talks Common Digestive Issues

Learn from our pediatric GI experts about the common digestive issues in children of all ages, what tips can help and when it is time to see a specialist.

*Nov. 30, noon–1 p.m., virtual event*



- ▶ **My Child Can't Concentrate** *Speaker: Harshasu Barot, M.D., Jan. 25, noon–1 p.m., virtual event*
- ▶ **Safe Sitter** *Visit [HMHforU.org/Events](http://HMHforU.org/Events) for upcoming dates, or for groups of six or more, email [COeventinquiries@hmhn.org](mailto:COeventinquiries@hmhn.org) for more information. Fee: \$40, virtual event*
- ▶ **Safe at Home by Safe Sitter** *Visit [HMHforU.org/Events](http://HMHforU.org/Events) for upcoming dates, or for groups of six or more, email [COeventinquiries@hmhn.org](mailto:COeventinquiries@hmhn.org) for more information. Fee: \$15, virtual event*



# Small but Mighty

*Maddie Troeller's mom calls her an "old soul" who brings kindness and compassion to everything she does.*

## *Four-year-old Maddie Troeller demonstrates compassion and generosity in raising money for the ALS Center at Jersey Shore University Medical Center.*

When Maddie Troeller, age 4, learned she'd be participating in a fund-raising "Hop-A-Thon" at her pre-kindergarten, Home Away from Home Academy in Aberdeen Township, New Jersey, she was all in. She learned that proceeds would benefit the ALS Center at **Jersey Shore University Medical Center**.

On May 19, 2023, her mom, Lindsay Rubin-Troeller, dressed Maddie in her favorite sports jersey, since the theme was "Strike out ALS" in honor of late baseball superstar Lou Gehrig. Amyotrophic lateral sclerosis (ALS), also known as Lou Gehrig's disease, is a rare, progressive neurological condition affecting nerve cells in the spinal cord and brain, causing muscle weakness.

"The students hop and dance for a half-hour to music, and every hop earns a dollar for the cause," says Carmine Visone, founder and owner of the academy for 30 years. "We do lots of charity work, and our curriculum teaches children that giving is better than receiving."

This most recent Hop-A-Thon raised \$2,000 to support ALS patient care, but someone wanted to increase that number.

Maddie knew her mother had already donated to the event, but before the child left for school, she took \$2 from her piggy bank, then went back to retrieve another dollar to make sure she was personally giving enough.

"She's really an old soul who's so sweet, compassionate and good to her little sister," Lindsay says. "She told me she needed money to help people who can't move well."

Adds Carmine: "Maddie has a heart of gold and is very motivated and caring. To see a child who understands what she was doing with her donation, that's pretty incredible."

Paul Huegel, vice president of development, Southern Region, for Hackensack Meridian Health Foundation, believes that no gift is too small—and no donor either.

"Even at her young age, Maddie's support of our ALS Center exemplifies the spirit of selflessly helping other people," he says. "We're also grateful for the support of her classmates and families, and we're proud that ours is one of only two Certified Treatment Centers of Excellence in New Jersey. It's designated by the ALS Association's National Office and the Greater Philadelphia Chapter." ❄️

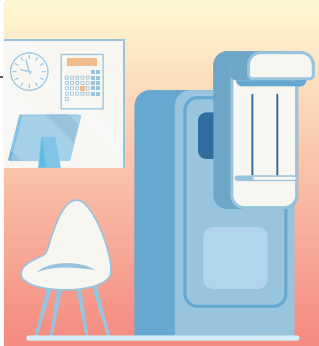
**Every gift helps. To learn more,  
contact Hackensack Meridian Health  
Foundation at [giving@hmhn.org](mailto:giving@hmhn.org)  
or 848-308-5000.**



# Screen Savvy

What to know about breast cancer screening and when to start it.


**Screening Saves Lives**  
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.







Annual mammograms have reduced the breast cancer mortality rate by

# 40%

## When to Get Screened



- Who:** Women at average risk of breast cancer   
**When:** Age 40  
**How Often:** Annual mammogram as long as you are in good health
- Who:** Women at higher risk of breast cancer because of a BRCA1 or BRCA2 gene mutation   
**When:** Age 25  
**How Often:** Annual MRI, ages 25–30; annual mammogram alternating with MRI at six-month intervals, age 30+
- Who:** Women with history of chest radiation therapy   
**When:** Eight years after radiation, but not before age 25  
**How Often:** Annual MRI, ages 25–30; annual mammogram alternating with MRI at six-month intervals, age 30+
- Who:** Women at higher risk of breast cancer because of strong family history   
**When:** Ten years prior to first-degree relative (mom or sister), but not sooner than age 30 and not later than age 40  
**How Often:** Annual mammogram (supplemental screening with ultrasound or MRI might be indicated; risk assessment should be performed)



Talk with your doctor about which screening is right for you and when you should begin annual screening. Scan this code to schedule a breast screening at a location near you.



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Online scheduling is available for breast cancer screening. Scan this QR code to make an appointment.



# Knowledge Is Power

Breast cancer screening saves lives. Regular screening is one of the most effective ways to catch breast cancer in its earliest stages, when more treatment options are available and chances of survival are highest.

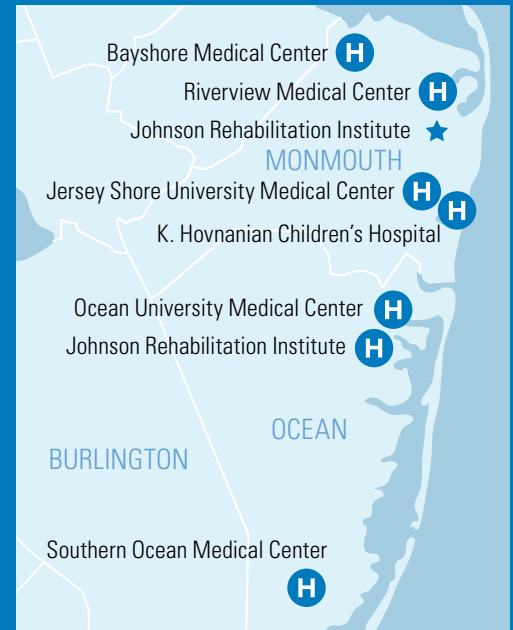
Breast cancer screening should begin at age 40, or possibly earlier if you have a family history of breast cancer. Schedule your screening today.

**What to Do When You Find a Breast Lump** Our expert shares what you should do if you spot a lump on your breast. Learn more at [HMHforU.org/BreastLump](https://www.hmhforu.org/BreastLump).

**5 Things an Oncologist Would Never Do** Our radiation oncologist shares how she helps reduce her own cancer risk at [HMHforU.org/CancerRisk](https://www.hmhforu.org/CancerRisk).

As the state's largest, most comprehensive health network, Hackensack Meridian Health is made up of 7,000 physicians, 18 hospitals and more than 500 locations.

## Our hospitals near you:



★ An acute comprehensive inpatient rehabilitation facility at Riverview Medical Center

For a complete list of our hospitals, services and locations, visit [HMHforU.org/Locations](https://www.hmhforu.org/Locations).



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KEEP GETTING BETTER