

St. Joseph Medical Center
housecall



BACK IN THE GAME

Former Oriole Paul Blair has a new hip and a strong swing.

See page 5.

**Know and Protect
Your Heart**

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**Hard
to Swallow?**

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**Advanced
Pancreatic Surgery**

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Do You Know Your Heart?

Take the *free* HeartAware® Online Risk Assessment

EVERY HEART HAS
A STORY TO TELL.
FIND OUT YOURS AT
SJHeartAware.com

Matters of the heart are complicated—whether they are emotional or physical. When it comes to your heart health, to know your heart is to protect it! Heart disease is the number one killer in the U.S. Annually, about 1.2 million Americans suffer heart attacks, and close to a half-million of them are fatal.

To protect your heart and help prevent a heart attack, St. Joseph Medical Center's Heart Institute offers a free online heart risk assessment called HeartAware®. The quiz only takes seven minutes.

"The HeartAware® quiz helps identify risk factors that are concerning for heart disease," says R. Stewart Finney, Jr., MD, chief of Cardiac Surgery at St. Joseph Medical Center. "Screening is all about trying to identify people who have a potential problem with their hearts, and then providing something that they, along with their physicians, can do to prevent or treat heart disease."



"It's just like a car. You go to the repair shop, and the mechanic checks out your car. If your car needs repair, you need to address that right away for your safety."

R. STEWART FINNEY, JR., MD
Chief of Cardiac Surgery

Preventive maintenance

Dr. Finney calls this "preventive maintenance," and explains, "It's just like a car. You go to the repair shop, and the mechanic checks out your car. If your car needs repair, you need to address that right away for your safety."

Each participant who takes the online HeartAware® quiz receives a personalized, confidential report on their current cardiovascular health, along with recommendations to take action to reduce risk. Those who score in the medium to high risk category are offered a low-cost, \$90 calcium score CT scan at St. Joseph's Heart Institute to help detect heart disease.

Clues for coronary buildup

A CT scan with calcium scoring takes only a few minutes; results are reviewed immediately. Cardiac calcium scoring helps screen for heart disease in its early stages and helps physicians determine a person's heart attack risk. The CT scan can detect buildup of calcium on the heart's artery walls. If calcium is found, that may indicate plaque in the coronary artery. "The CT scan does involve a small amount of radiation," says Dr. Finney, "but so does a nuclear stress test—another common tool to help diagnose heart disease." The benefit of detecting heart disease outweighs this small risk, according to Dr. Finney.

Once patients receive the right diagnosis, the Heart Institute at St. Joseph can help them get on the right medications and treatment. Dr. Finney has performed bypass surgery for several patients whose severe heart blockages were diagnosed thanks to the HeartAware® quiz and calcium CT scoring.



HEARTAWARE®: A FREE ONLINE HEART RISK ASSESSMENT
Go to www.SJHeartAware.com

The HeartAware quiz takes just seven minutes. You receive a personalized, confidential report, along with recommendations to reduce your risk of heart disease. You'll also find out if a calcium scoring CT scan may be recommended for you.

The Feminine Mistake: Ignoring Heart Disease Risks

FATAL HEART ATTACKS MORE LIKELY IN WOMEN

“There’s a myth that women don’t develop heart disease. They do, and the disease is more severe in women than in men when it does develop, and the outcome is often worse,” cautions cardiologist Mahmood Alikhan, MD, of St. Joseph Cardiovascular Associates.

It’s estimated that 42 million women in the U.S. live with heart disease—but many are unaware of it. There are numerous contributing factors, such as obesity, diabetes, and family history, but a woman’s risk for heart disease increases following menopause (natural or surgical) and in women taking birth control pills.

More deadly than breast cancer

Heart disease is the number one leading cause of death in women. More women than men die of heart attacks, and heart disease kills six times more women annually than breast cancer does.

Slow to go to the ER

There are many reasons for this. “Women’s symptoms are atypical, so both they and their doctors may not recognize the symptoms right away,” says Dr. Alikhan. Women are also slow to seek treatment or go to the emergency room with symptoms, he adds, “because they are the caregivers, and they focus on others, not on themselves.” Dr. Alikhan emphasizes that women should have their hearts checked regularly by their doctors.

THINGS THAT WOMEN SHOULD KNOW TO PROTECT THEIR HEARTS:

- **The good, bad, and ugly of cholesterol:** There are two kinds of cholesterol: the bad kind, LDL (low density lipoprotein), and the good kind, HDL (high density lipoprotein). LDL should be less than 100, and HDL should be higher than 50. Low HDL seems to be a strong predictor of heart disease death in women, according to the American Heart Association.
- **High blood pressure:** This is a significant risk factor for heart attack. A healthy blood pressure for a woman is 120/80 or lower.
- **Don’t smoke.** More than 21 million women in the U.S. are smokers. These women are at higher risk for heart disease.
- Women and men can find out more about their heart health by taking the free online HeartAware® test at: www.SJHeartAware.com.



Spring 2011

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Solutions include allergy control and balloon surgery.
- 5 **Hip Replacement**
Former pro athlete back in the game.
- 6 **Hard to Swallow**
Throat and chest pain could be your digestive system.
- 8 **Delicate Whipple Surgery**
One patient’s search for treatment.



Inspired Giving: 1A–4A

A special section of the
St. Joseph Medical Center Foundation

- 9 **Inoperable Spine Tumor**
Remission through pinpoint radiation.

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➤ WOMEN’S ATYPICAL HEART ATTACK SYMPTOMS:

- Chest pain may not be present
- Extreme fatigue, shortness of breath
- Cold sweat and/or nausea
- Pressure or discomfort in both arms, jaw, upper back, or neck

Sneezin' Sinus Season

Solutions include allergy control and minimally invasive balloon surgery

Most people welcome the signs of spring—the flowering trees, daffodils, and tulips. But for people with chronic allergies and sinusitis, spring ushers in a season of sniffing, sneezing, stuffy aching sinuses, headaches, and congestion.

It's a time when allergists' and otolaryngologists' offices are busy with those seeking relief. "There are two phases to allergies. The first is immediate sneezing and a runny nose, which is helped by antihistamines and nasal steroids," says Russell Wright, MD, allergist/otolaryngologist with St. Joseph Medical Center. "But for many patients, these medicines don't hold them."

"Four to six hours later, patients can suffer further congestion caused by more inflammation. A medication called Montelukast or Singular® is helpful in combating the second wave of allergic reaction," explains Dr. Wright.

Allergy injections, also called immunotherapy, are another way to decrease allergy symptoms. Patients receive an injection of a very small amount of serum, weekly or bi-monthly, made of the substance(s) to which they are allergic. The dose is gradually increased until allergy tolerance is achieved.

Allergies can also lead to a sinus infection. "Some people have sinus swelling that becomes infected and very painful," says Dr. Wright.

"Infections of the frontal sinuses cause pain between the eyes; the maxillofacial sinuses can cause pain below your cheeks, and other sinus pain can even involve the top of the head or the jaws," explains Michael Rodrigues, MD, otolaryngologist with St. Joseph.

Although most sinus infections can be treated with antibiotics and allergy therapy, Dr. Rodrigues also recommends a neti pot that irrigates the sinuses with water. This can be done at home. "It rinses out the sinuses and improves their functioning."

BREAKTHROUGH IN SINUS SURGERY

A new surgical tool can open a blocked sinus without cutting. Known as balloon sinusplasty, it uses a balloon catheter to open and enlarge the blocked sinus membranes.

"We can use this with almost any sinus patient," says Dr. Rodrigues. "We can even get more safely into the more challenging sinuses."

For more complicated cases, Carla Lawson, MD, otolaryngologist with St. Joseph, explains that the balloon is used for "hybrid" procedures, along with a lesser amount of traditional surgery. For example, "I can combine it with straightening out a crooked septum and do less shaving of sinus tissue," she says.

"Patients are surprised by how little post-operative pain they have after balloon surgery. There is less OR time and less bleeding post-operatively."

 Looking for an ear, nose, and throat specialist? Call our Doctors Directory at 410-337-1337 or go to www.StJosephTowson.com/findadoctor.

Although both surgeries are outpatient, it takes several weeks to heal after balloon surgery, and up to two months for traditional surgery.

"This is a more effective way to open the sinuses than traditional surgery in many cases," says Dr. Rodrigues.



Dr. Carla Lawson
Otolaryngologist



Dr. Michael Rodrigues
Otolaryngologist



Dr. Russell Wright
Allergist/otolaryngologist

FREE LECTURE:

Sinus and Allergy Solutions
Presented by Dr. Michael Rodrigues
and Dr. Russell Wright
Thursday, April 28, 6:30 p.m.
—See page 10 for more details.



Back in the Game

Hip replacement allows former Oriole to pursue his current passion

Paul Blair, Baltimore Orioles' outfielder from 1964–1976 and eight-time Golden Glove winner, jokes that he feels “36 years old again.” The professional athlete can be found most days pursuing his passion of golf.

But for a year, he lived with the daily pain of arthritis in his hip that cramped his golf game. “I guess it was the wear and tear on my hip from playing baseball and golf that caused the problem,” he says. “I never thought I’d need a hip replacement, but I was determined to get back to playing what I love.”

Last August, Blair had hip replacement surgery performed by orthopaedic surgeon Brian Mulliken, MD, at St. Joseph Medical Center, and by early fall, he was back on the golf course.

FAST PROGRESS

“I tell patients that it’s a big surgery, but it has a predictable recovery, and the results are very rewarding. Progress happens very quickly,” says Dr. Mulliken.

How does someone know when it’s time to consider a hip replacement? Dr. Mulliken advises, “if the pain and disability become so significant they affect your quality of life.” Diagnosis starts with an exam and x-rays performed by an orthopaedic surgeon. Patients may begin treatment with anti-inflammatory injections and physical therapy. He says, “Then, they decide when it’s best for them to have a hip replacement.”

CUSTOM FIT

Hip replacements at St. Joseph are state-of-the-art and matched to fit the demands of each patient. Orthopaedic surgeons use the most advanced implants with major components made of titanium, chrome cobalt, or a hard plastic called polyethylene.

“All the pain is gone from my hip. I can golf without pain; I can bowl without pain. I can do everything!”

PAUL BLAIR
Eight-time
Golden Glove winner



Dr. Brian Mulliken
Orthopaedic surgeon

The metal and plastic implants last at least 15 to 20 years and are the gold standard for patients 65 and older. The newer metal on metal or ceramic ball and sockets may be more appropriate for younger patients, because “the risk of wearing out is decreased,” says Dr. Mulliken. “The implant has a porous surface, and the bone grows into the stem and the socket, with the potential to last a lifetime.

TWO HIPS, ONE STAY

“It’s relatively common for patients to need both hips replaced. They usually wait a couple months or more in between operations, but it can be scheduled in one hospital stay with several days in

between surgeries. It’s an amazing phenomenon, but by ten days to two weeks, patients who’ve had both hips replaced make dramatic progress.”

For any hip replacement, physical therapy starts on St. Joseph’s dedicated Orthopaedics Unit the day after surgery and continues on an outpatient basis at home.

“Most patients can move with less pain than before the operation within a week to ten days after the operation,” says Dr. Mulliken. “It takes approximately six to eight weeks to get back to normal.” Blair says he feels, “200 percent better. All the pain is gone from my hip. I can golf without pain; I can bowl without pain. I can do everything!”

FREE LECTURE

Life is Hip: Joint Replacement for Knees & Hips

Discussion on the latest advancements. Presented by Dr. A.J. Detterline, orthopaedic surgeon. Tuesday, April 26, at 1 p.m. or 7 p.m. —See page 10 for more details.



Need an orthopaedic surgeon? Call our Doctors Directory at 410-337-1777 or go to www.StJosephTowson.com/ortho.



Hard to Swallow

WHEN CHEST PAIN IS IN YOUR GUT: HOW TO TELL THE DIFFERENCE BETWEEN A HEART ATTACK AND CHEST PAIN CAUSED BY SEVERE INDIGESTION.

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 ABOVE: The staff affiliated with St. Joseph's state-of-the-art Digestive Disease Center is specialty-trained and includes: (front row, L to R) gastroenterologists Joshua Forman, MD; Neil Goldberg, MD; and Andrew Rosenstein, MD; (back row, L to R) gastroenterologist Amin Khan, MD; Jeanette Isiminger RN; Patsy Smithwick lead tech; Debbie Schreiber RN; and Ann Meek, RN.

“Although most people who come to the ER with chest pain are not having heart attacks, sometimes, you cannot tell the difference. Esophageal spasm and reflux can imitate a heart attack,” says Neal Frankel, DO, associate director of St. Joseph’s Emergency Department. “Even worse is that a heart attack and reflux can occur together.”

“If you think your chest pain is life-threatening, call 911,” he emphasizes. At the ER, doctors diagnose—or rule out—a heart attack “through EKGs, cardiac enzyme testing, and, if needed, stress testing,” says Dr. Frankel.

UP TO 23 PERCENT OF THE U.S. POPULATION—or 69 million people—suffer from noncardiac chest pain, according to the American College of Gastroenterology. Of those, approximately 60 percent is associated with esophageal or digestive issues. “If your chest pain is associated with eating, it’s most likely not your heart,” says Amin Khan, MD, St. Joseph gastroenterologist.

“In addition to gastroesophageal reflux disease (GERD), esophageal motility disorders such as diffuse esophageal spasm and nutcracker esophagus may cause chest pain,” explains Joshua Forman, MD, St. Joseph gastroenterologist.

“At St. Joseph...we have a wealth of experience distinguishing various reasons for chest pain once the heart is ruled out.”

NEIL GOLDBERG, MD, Chief of Gastroenterology

THE IMPORTANT THING IS getting accurately diagnosed and treated. “At St. Joseph Medical Center, because of our Heart Institute, we have a wealth of experience distinguishing various reasons for chest pain once the heart is ruled out,” says Neil Goldberg, MD, chief of Gastroenterology at St. Joseph.

Chest pain after meals

“If there’s delayed pain of one to one and a half hours after eating, it could be gallbladder disease,” he says. “When weight loss is involved, we need to make sure there’s no cancer.”

“Patients with GERD and esophageal motility disorders can also experience difficulty swallowing, sometimes described as food sticking or actually becoming stuck when swallowing,” says Dr. Forman.

Ellen Hook suffered from a rare motility disorder that was diagnosed at St. Joseph’s ER. For years, she felt food sticking in her esophagus when she ate. “I had this since I was in middle school. I might have to wait an hour or a day for my sphincter (muscle in esophagus) to let my food through. I would want to eat and felt hungry, but I’d have to stop. I just thought my esophagus was very small.”

One evening, Hook felt like her swallowing issues had reached a crisis stage. “I left pressure on my lungs, and I had a lot of trouble breathing,” recalls Hook. She went to an urgent care center, where they couldn’t diagnose her, and were so concerned that they rushed her by ambulance to St. Joseph’s ER.

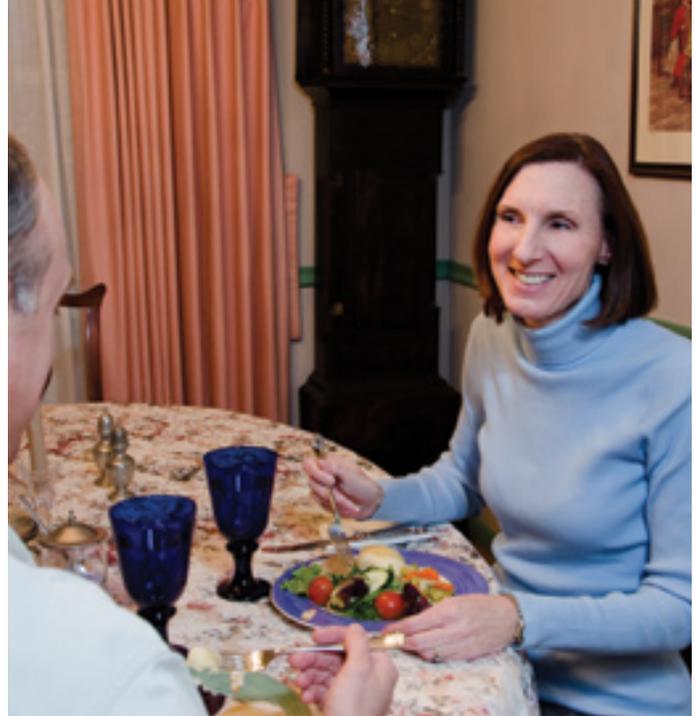
“I wasn’t in the ER very long before they did a CT scan and called a specialist—Dr. Goldberg, who came to see me very quickly,” says Hook.

Rare but treatable

Dr. Goldberg diagnosed achalasia, a failure of the lower sphincter muscle in the esophagus to open and let food pass through. Hook’s condition was so severe that she had lost weight and become very thin.

Although achalasia can sometimes be managed with medication, Hook needed surgery. Ziv Gamliel, MD, St. Joseph’s chief of Thoracic Surgery, performed an esophagomyotomy, making an incision in the sphincter to ease the passage of food. Thanks to this minimally invasive laparoscopic surgery, there were no large incisions. Hook, a teacher, had a quick recovery and returned to her classroom within a couple of weeks.

For the first time in her adult life, she now enjoys eating. “Every single meal I sit down to I think how wonderful it is to eat without stopping or waiting. Dr. Goldberg changed my life forever. I didn’t know what normal was like. Dr. Gamliel has been a godsend.”



ABOVE: Ellen Hook can enjoy mealtime with her husband after being treated for a rare esophageal condition diagnosed at St. Joseph Medical Center.

The Digestive Disease Center (DDC)

The DDC is a state-of-the-art facility specially equipped and staffed by experienced gastroenterologists, colorectal specialists, anesthesiologists, nurses, and technicians, who are trained in the comprehensive diagnosis and treatment of digestive issues. Outpatients and inpatients receive personalized care in this comfortable, convenient setting.

➤ DIGESTIVE DISEASE CENTER SERVICES

For a wide range of disorders including:

- Acid Reflux/Heartburn
- Chronic Abdominal Pain
- Chronic Constipation or Diarrhea
- Difficulty Swallowing
- Diverticulosis & Diverticulitis
- Gallbladder & Biliary Disease
- Gastritis
- Inflammatory Bowel Disease (Ulcerative colitis & Crohn’s disease)
- Irritable Bowel Syndrome (IBS)
- Peptic Ulcer Disease

Colonoscopy and endoscopy are performed.

Other testing and procedures include:

- Esophageal Motility (swallowing) Studies
- Esophageal Dilatation
- Hydrogen Breath Test for Abdominal Bloating & SIBO (small intestinal bacterial overgrowth)
- 24 Hour pH Monitoring Studies for Reflux
- Hemorrhoid Banding
- Gastrostomy Tube Placement
- Endoscopic Retrograde Cholangiopancreatography
- Endoscopic Ultrasound (EUS)
- Botox Injection for Anal Fissures
- Spyglass Technology for Cholangiopancreatography



LOOKING FOR A DIGESTIVE DISEASE DOCTOR? For a referral to a digestive disease specialist or a thoracic surgeon or a **FREE Fact Sheet** about the Digestive Disease Center, call 410-337-1337 or go to www.StJosephTowson.com/findadoctor.

Delicate Whipple Surgery Offers Hope and Longevity for Pancreatic Cancer

One patient's quest for treatment brings him to St. Joseph

Despite a relaxing beach vacation, Dimitri Karpodinis felt tired and thought he had a stomach flu. He might have noticed that his skin looked yellow—a symptom of pancreatic cancer—but it seemed like a suntan.

Back home, he went to his doctor, who ordered a CT scan that found a mass at the head of his pancreas. A complete work-up, including a biopsy, revealed pancreatic cancer.

FINDING THE RIGHT SURGEON

Immediately, Karpodinis set out on a mission to find an experienced surgeon and cancer team to tackle his disease. “I needed a Whipple operation. I was not going to trust the most complicated, delicate operation of my life without doing my homework,” says Karpodinis, a businessman. “Friends in the medical field helped me narrow it down to three experts, including Dr. Mark Fraiman and two university doctors. I wanted someone who had done hundreds of this operation.” Karpodinis interviewed all three surgeons.

His conclusion: “I liked the entire atmosphere at St. Joseph. I wanted doctors that I could talk to. Plus, I needed a vein resection, and Dr. Fraiman is not only a Whipple expert, but a vascular surgeon, too.”

Although pancreatic cancer is difficult to cure, the Whipple procedure is a state-of-the-art surgery for cancer located at the head of the pancreas, according to Mark Fraiman, MD, director of the Hodes Comprehensive Liver and Pancreas Center at St. Joseph Medical Center.

“With the Whipple, we’re giving patients a better quality of life and the chance for a cure. Aggressive surgery in combination with chemotherapy and radiation offers patients with pancreatic cancer the best chance for long-term survival,” says Dr. Fraiman. “The vast majority of our patients return to normal gastrointestinal function and tasks of daily living within a few weeks.”

OPERATING TIME REDUCED BY HALF

At St. Joseph, Dr. Fraiman and highly trained hepatobiliary surgeon, Richard Mackey, MD, perform the Whipple operation together, reducing what is typically a six-hour operation at many university hospitals to a three-hour surgery.

“Karpodinis’ cancer was invading the portal vein, which used to be a criterion



Dr. Mark Fraiman
Director of the
Hodes Comprehensive
Liver and Pancreas Center



Dr. Richard Mackey
Hepatobiliary surgeon

of inoperability,” says Dr. Fraiman. “We use a very aggressive approach in cases that are now considered borderline-resectable (removeable).”

This novel therapy—pioneered at MD-Anderson in Houston, Texas—involved a combination of chemotherapy and radiation, prior to surgery, to neutralize the edges of his tumor. Then, in conjunction with the Whipple surgery, Drs. Fraiman and Mackey removed the portal vein, replacing it with a portion of internal jugular vein transplanted from his neck.

Karpodinis received a new lease on life. He has even visited his native Greece. “Without surgery, he would have lived for six months,” reflects Dr. Fraiman.

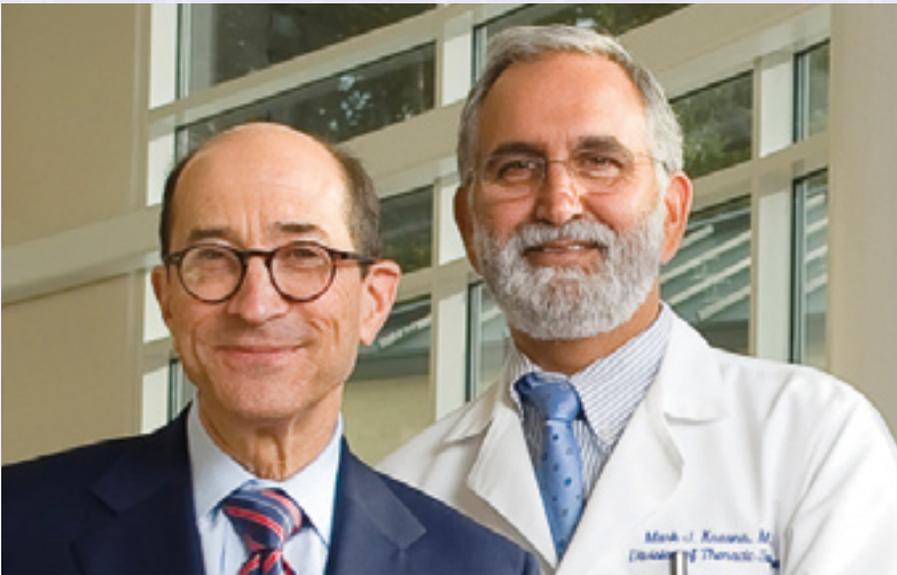
“I wanted someone who had done hundreds of this operation.”

DIMITRI KARPODINIS
Shown here with his wife
on vacation in Greece.

 For a referral to a hepatobiliary surgeon or a **FREE** brochure on St. Joseph’s Hodes Liver and Pancreas Center, call our Doctors Directory at **410-337-1337** or go to www.StJosephTowson.com/findadoctor.



Foundation Board Member Paul Mark Sandler, Esq. Sets the Bar High



Paul Sandler, Esq. (left) and Mark Krasna, MD in the Serpick Infusion Center at the medical center's Cancer Institute.

If one is going to sum up Paul Mark Sandler in a word, that word might be “passionate.” Whether he is talking about his “career” as a blues harpist, with no less than three CD’s to his credit, his trial practice that has brought him national renown, or his role on the St. Joseph Medical Center Foundation Board, the intense passion that is part of his nature unmistakably shines through.

It was Sr. Marie Cecilia, O.S.F., the former president and CEO of St. Joseph Medical Center who sparked Sandler’s longtime affinity for St. Joseph in the early 90’s. “I was constantly amazed that this lady who was the chief executive of such a large hospital not only found the time to go

around and visit patients, but would return, always remembering their names and why they were at St. Joe’s. Her presence radiated comfort to the patients. Sr. Marie Cecilia set the tone of spirituality and healing,” says Sandler.

When Sandler started a second term as a Foundation Board Member in 2006, he wanted to make a real difference. And cancer was the area he chose. “Simply put, it affects everyone and is such a scourge on so many.” “By initiating the Cancer Institute Board of Visitors, Paul, as chair, and his highly committed team have focused on tangible results,” says Mark Krasna, MD, medical director of the Cancer Institute. “They created an outstanding awareness booklet and

have raised substantial funds for cutting edge equipment like the Varian ARIA cancer electronic medical record system that will revolutionize the bedside experience.”

“We may not be able to change the world, but we can band together and change the life of our neighbor...”

Sandler sums up his feelings toward St. Joseph with the passion for which he is known: “My commitment represents a shared commitment by fellow board members and all health care providers to arrest the suffering of those with cancer. We may not be able to change the world, but we can band together and change the life of our neighbor, our friend, our co-worker, our family, our community.” And, indeed, they are.

To learn more about how you can make a difference to St. Joseph Medical Center, please call the Foundation at **410-337-1397** or visit our web site, www.StJosephTowson.com

BLESSINGS...Parents of triplets never forgot their experience at St. Joseph

Imagine it is 1973. You are a young couple, just starting out with very little means and no family in the area. You have just learned that you are expecting triplets, a risky proposition for mother and babies 38 years ago. To add to the drama, Mom will need inpatient bed rest for approximately two months to try and bring the babies safely to term. Your health insurance only covers 30 days.

St. Joseph's 'project' for several months," she laughingly adds.

Years passed in a blur as the Diamonds raised their triplets (30 bottles and 27 cloth diapers a day) and added two more children to their family. Their fortunes changed as well. Steve became a very successful businessman, but he and Jennifer never forgot the love and compassion that



From left: Kevin, Kimberly, and Alyson Diamond pose for their very first picture together in 1973.



In the same order, Kevin, Kimberly, and Alyson celebrated their 21st birthday in 1994.

This describes the lives of Steve and Jennifer Diamond nearly four decades ago. They were excited but frightened, knowing that babies born too soon in those days often had poor outcomes. St. Joseph Medical Center was determined that would not happen to them. The Diamonds were told, "We're going to take care of you. You won't see a bill. Our only focus now is bringing you beautiful, healthy babies." And that is exactly what happened on September 30, 1973 when Kevin, Alyson, and Kimberly Diamond came into the world, full-term, at St. Joseph.

"We honestly believe that our children were healthy because of the magnificent care I received before they were born," says Jennifer. "The staff took such good care of me and made so many clothes for the children since they knew we had so little. I was

St. Joseph showed to a very young couple so long ago.

Their experience at St. Joseph taught them the importance of philanthropy. As soon as they had the means to do so, they began to help others in need. In addition to their own foundation, *Hands Across the Americas*, that assists children in developing countries, the Diamonds have generously supported St. Clare Medical Outreach, St. Joseph's mission driven project to care for the uninsured.

"Jenny and I have truly been blessed. There's no other way to describe it," says Steve. "We worked hard but recognize that many of our blessings were the result of other's kindness, particularly at St. Joseph. All it takes is looking at a photo of our treasured children, happy and successful, to be reminded of the wonderful gift that was given to us."

Mrs. Alonzo G. Decker, Jr.
Neonatal Intensive Care Unit
KALEIDOSCOPE WALL

Honor a special child in your life by purchasing a 6" tile for \$150. Photos, artwork, and text can be submitted to create a one-of-a-kind commemorative tile that will be installed at the entrance of the Mrs. Alonzo G. Decker, Jr. Neonatal Intensive Care Unit.

For more information, call 410-337-3914.

Proceeds benefit the Neonatal Intensive Care Unit.



The golf foursome shown below was incorrectly identified in the Winter issue of *Housecall*:



L to R: Steven Breiter, MD, Bobbie Mickey, Sean Clarke, and Tim Snyder from RadNet.

Timeless...

A Beloved Volunteer Who Gives Time and Treasure

 Harvard University study in 2009 showed that people thought their most precious commodity was time, more important than money, ranking right there with health. Thus, we gratefully honor our nearly 300 volunteers who give us the precious gift of their time, keeping the medical center running smoothly in countless ways.

One volunteer stands out in particular, both because of her long affiliation with St. Joseph and her versatility in volunteer projects. You can't think of Rosemarie "Libby" Liberatore and not think of St. Joseph Medical Center. One would not be complete without the other. Her career, including her current volunteer work, has spanned close to 60 years.

"As a young nursing student at St. Joseph Hospital, I saw early on the values of The Franciscan Sisters and always knew this was where I wanted to be," comments Libby. Although she worked for a short time at another hospital early in her career, Libby was drawn back to St. Joseph where she served many leadership roles, including 14 years as vice-president of Nursing until her retirement in 1996. "Any time I thought about doing something else, a new challenge would open up for me at St. Joe's. While I was vice-president, we got the Open Heart Surgery program up and running, started the Little People's Program, then later, Eating Disorders and Transitional Care. It was just too exciting to leave," she laughs. "And the people I worked with were just too great!"

Even in retirement, Libby is never far from St. Joseph. From leading the department of Nursing, she moved into steering the Auxiliary (now FANS) Board and then joined the Foundation Board. But she missed her early nursing days working with patients. Now Libby volun-



As a new graduate, Libby knew the healing profession of nursing was the right choice for her.



...And that philosophy has never changed as Libby volunteers in St. Clare Medical Outreach, helping our neediest patients.

teers one day a week at St. Clare Medical Outreach, caring for our uninsured patients, including the homeless.

Cheryl Slaski, manager of Volunteers, perfectly sums up Libby's importance to St. Joseph: "I don't think there's one person in this hospital who ever uses her last name when referring to her. They just say "Libby" and absolutely everyone knows who they're talking about." Adds Cheryl, "And they're always smiling."

For more information on becoming a volunteer at St. Joseph Medical Center, please contact Cheryl Slaski at 410-337-1492.

PINK with a PURPOSE

A family member has a unique way of giving back



Joanna Fridinger stands in front of her limo. Every passenger who uses the pink limo benefits St. Joseph's Cancer Institute.

On September 26, 2009, the staff in the Serpick Infusion Center worked nine hours straight, staying past their shifts, to try to get Janice Horner's potassium levels under control. They were on a mission. Horner, a terminal patient, was due to be the maid-of-honor in her niece's wedding the following day and nothing was going to prevent this from happening. The determination of Horner and

the Cancer Institute staff made her dream come true, and on September 27, Horner stood up for her niece in a ceremony that was about the power of love.

After Horner passed away in January 2010, her sister, Joanna Fridinger, wanted to do something to honor Horner that would be meaningful for other patients. Fridinger, "The

Limo Lady," has her own limousine rental company and says, "Limousine rentals are about celebrations. But I wanted to do something that would be 'over the top' and help people suffering from cancer at the same time." Thus, *Pink With A Purpose* was born.

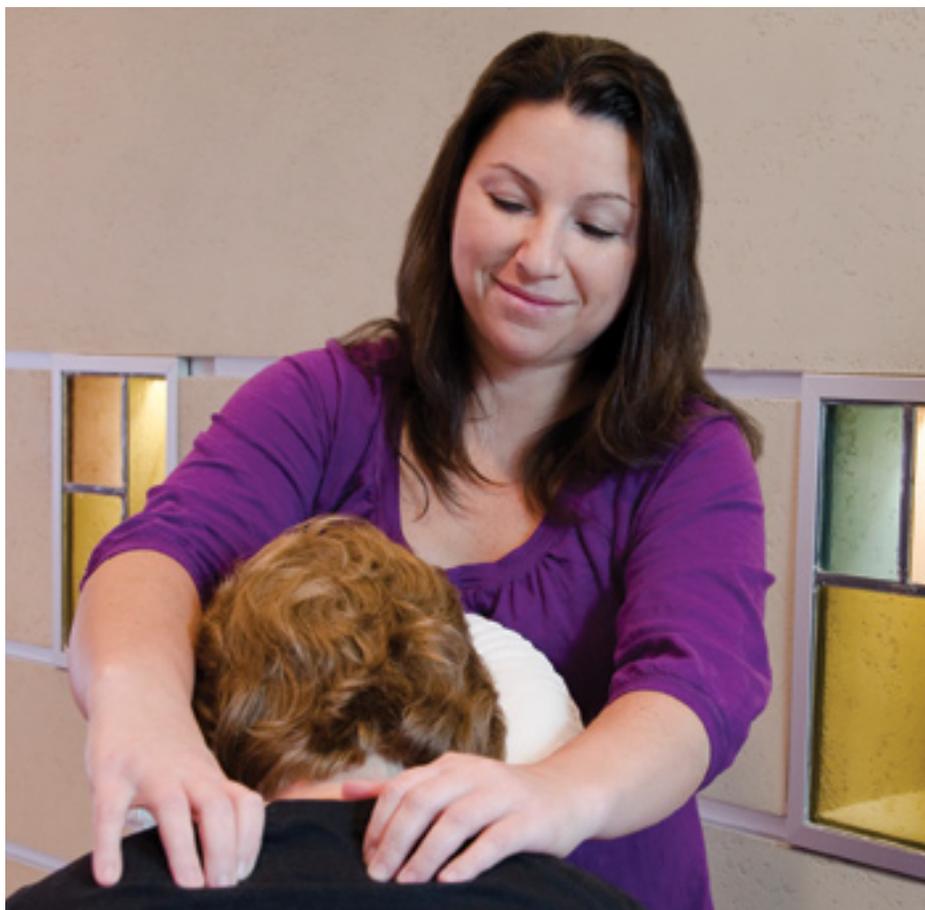
Fridinger acquired a stretch limo and had it sent to a specialty house in Missouri to have it painted bright pink—"the happiest color I can think of"—she adds. A portion of the proceeds from each Pink Limo rental go to the Cancer Institute. Debuting in December 2010, the Pink Limo has been a smash hit. When clients find out their celebration ride is helping others, they invariably change their mind from black or white and go straight to pink.

"The people at the Cancer Institute were amazing," says Fridinger. "Janice spent three years there, and they became our family. Not only do I want to honor Janice, but I also wanted a way to pay tribute to other patients and the unbelievable staff that gave such quality to Janice's last years."

So when you are on the highway and see the Pink Limo—and you *will* see it—give a wink and a wave, knowing that, in this case, celebration and hope are one and the same.



Maid-of-honor Janice Horner poses with her beloved niece on her wedding day.



LEFT: Elina Segel continued working as a massage therapist throughout cancer treatment.

Advanced Weapon for Cancer

A new tool destroys patient's inoperable spine tumor

Elina Segel was 36 years old and the picture of good health when she was diagnosed with metastatic breast cancer in late 2009.

Not only is she a personal trainer and a masseur, but, she explains, “I have no family history, no risk factors. I go to my doctors regularly, and I breastfed my children.”

Segel, a former pre-med student, knows that studies show that pregnancy and breastfeeding reduce estrogen levels, which in turn reduce breast cancer risk.

So, she calls her diagnosis “a complete shock.” She discovered the lump in her breast because it made her uncomfortable at night when she tried to sleep.

STARTLING DISCOVERY

For treatment, she chose the Breast

Center at St. Joseph Medical Center, where doctors discovered her cancer had spread and was inoperable. Fortunately, St. Joseph has an advanced cancer weapon called SRS (stereotactic radiosurgery) that uses high, pinpoint doses of radiation to destroy inoperable tumors.

“During her work up, we found a suspicious mass in her sacrum—the tail bone,” says radiation oncologist Stephen Ronson, MD, director of SRS at St. Joseph’s Cancer Institute.

“Surgery on the sacrum would be catastrophic to her lifestyle. It would have meant removing one-half to one-quarter of her pelvic bone. SRS has the ability to

bend the high doses of radiation around normal healthy tissues, like the spinal nerves,” says Dr. Ronson, who works closely with orthopaedic spine specialists to precisely target spinal tumors.

TOTAL TEAM APPROACH

First, Segel’s breast cancer was addressed. At St. Joseph’s Cancer Institute, an entire team cares for the patient, recommending one comprehensive treatment plan and guiding her through the journey, with all services provided under one roof. Segel had surgery performed by Michael Schultz, MD, medical director of the Breast Center. Next, Dr. Ronson used radiation therapy to eradicate the cancer from her chest wall and lymph nodes.

Then, she had SRS, which is painless, non-invasive, and she describes as a “a piece of cake.” Patients lie under a machine for about 30 minutes per session and receive one to five treatments.

RESTORED HOPE AND YEARS

“SRS allows us to cure people we previously couldn’t even mention the word cure to. With stage IV disease, like Elina’s, it gives us potential to put the cancer in remission, and potentially keep it that way for years,” says Dr. Ronson.

Because her particular cancer is estrogen-driven, and in order to strengthen her bone health, Segel is receiving Zometa infusions and hormone therapy under the care of Rima Couzi, MD, St. Joseph oncologist. Segel also had surgery performed by gyn oncologist Hyung Ryu, MD,* to remove her ovaries, which produce estrogen.

“I am very happy with all my doctors,” says Segel. “They are very well informed, and stay in touch with each other.”

“Elina has done very well,” says Dr. Ronson. “I can say that her cancer is in remission.”

SRS is quickly becoming the new standard of care for many inoperable tumors including the brain, lung, liver, and spine.



LOOKING FOR A CANCER SPECIALIST? For a referral to a cancer physician or a **FREE Cancer Institute brochure**, call our **Doctors Directory** at 410-337-1337 or go to www.StJosephTowson.com/findadoctor.

*Dr. Ryu’s gynecologic oncology services are made possible through a collaborative agreement between Mercy Health Services and its Gynecologic Oncology Center and St. Joseph Medical Center.

Unless otherwise designated, call **410-337-1337** or register at **www.StJosephTowson.com**. All activities are **FREE** and held at St. Joseph Medical Center unless otherwise designated.



Find us on **facebook!**



St. Joseph Medical Center is now on Facebook.

Stay current on the latest St. Joseph information, health offerings, and events.

Facebook.com/StJosephMedicalCenter

DIABETES WELLNESS

Call the Diabetes Management Center at 410-337-1382.

Diabetes Self-Management Education Program

Individual assessment plus multi-disciplinary-taught group classes. Fee: May be insurance reimbursable. ADA nationally recognized. **Call for dates.**

Diabetes Information Exchange

Monthly meeting—varied topics. *First Tuesday every month, 1 p.m.*

NEW Diabetes Type I Toolbox

For ages 18 & up with Type I diabetes—to provide self-care tools and meet peers. *Second Monday evening of every month, 7 p.m.*

For more information, e-mail ellenwallace@catholichealth.net

Diabetes Mini-Expo Community Screening

*Saturday, March 26, 8:30 a.m.–12 noon
Noppenberger Auditorium*

Call 410-337-1337.

Join physicians, nurses, diabetes educators, and nutritionists. Talk with endocrinologists, podiatrists, ophthalmologists, and nephrologists.

Registration required for screenings that include:

Blood glucose by point of care testing, blood pressure, weight, BMI, and a comprehensive risk assessment

HEALTH SCREENINGS

Appointments required for all screenings. Call 410-337-1479.

Bone Density for Osteoporosis

Quick, painless ultrasound test of the heel bone for anyone over age 18 with risk factors or who wants to know if their lifestyle is impacting bone density. Must not have had a Dexascan or ultrasound bone test in the past year. Held monthly.

*Thursday, March 24,
and May 26, or Thursday,
June 23, 10 a.m.–12:30 p.m.*



Breast Cancer

For women 40 years & older, who have not had a mammogram within the past year and do not have breast disease.

Includes clinical breast exam, screening mammogram, and risk assessment. *Saturday, April 16, begins at 8:30 a.m.*

Skin Cancer

For detection of melanoma and other serious skin cancers. Screening includes full body visual examination.

Tuesday, May 3, begins at 4 p.m.

Cervical Cancer

For women 18-65 who have not had a Pap test within the past year and no history of cervical cancer. Screening includes pelvic exam, Pap test, and education. *Saturday, May 21, begins at 9 a.m.*

Sensory Wellness Event Hearing, Vision, and Balance

For adults 45 & up who want to learn how impairments could be impacting their lives. Interactive lecture. Opportunity for screening and consultation. Refreshments. *Wednesday, May 18, 9 a.m.–3 p.m.*

Varicose Veins

For ages 20-70 with elongated, rope-like, bulged and thickened veins. Screening includes visual inspection of legs and treatment recommendations. Varicose veins can be a sign of an underlying disorder, and, if left untreated, can lead to a chronic, debilitating, and limb-threatening condition. Risk factors include pregnancy, family history of varicose veins, and personal history of phlebitis. *Tuesday, May 10, 4–7 p.m.*

HEALTH SEMINARS

Life is Hip! The Latest in Hip & Knee Replacement & Treatment

Presented by A.J. Detterline, MD.

State-of-the-art joint replacement offers hope for people whose quality of life is affected by severe hip or knee arthritis. Learn about the advances and what may be an option for you.

Choose an afternoon or evening seminar: *Tuesday, April 5, 1 p.m. or 7 p.m.*

Da Vinci Bariatric Weight Loss Surgery Information Sessions

Presented by David von Rueden, MD, bariatric surgeon. *Wednesday, April 6 or June 1, 6:30 p.m.*

Nothing to Sneeze At! Sinus and Allergy Solutions —From Balloons to Neti Pots

Presented by Michael Rodrigues, MD, otolaryngologist, and Russell Wright, MD, allergist/otolaryngologist.

Spring pollen can bring allergy attacks and sinus infections. Learn the latest solutions ranging from allergy medications to neti pots and a new minimally invasive sinus surgery called balloon sinuplasty. *Thursday, April 28, 6:30 p.m.*

FreshStart Smoking Cessation Class

Free six-week course held by the Cancer Institute. Registration required.

*Mondays: April 4–May 9, 12 noon
Wednesdays: April 6–May 11, 6 p.m.
Wednesdays: May 4–June 8, 4:30 p.m.*

SPECIAL DIET & NUTRITION PROGRAMS

To register, call 410-337-1337 or go to www.StJosephTowson.com

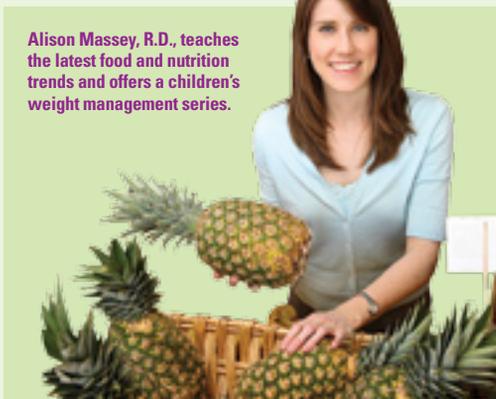
Delicious and Nutritious: **Dine with the Dietitian**

Join our registered dietitian and an executive chef at our nutrition and culinary demonstration series! See how easy it is to transform simple ingredients into healthy meals that are delicious and affordable! Taste the results!

Wednesday, April 28, 11 a.m. –12 noon

Cost: \$10 covers meal.
Registration required.

Alison Massey, R.D., teaches the latest food and nutrition trends and offers a children's weight management series.



Classes forming for spring.
Call for dates, times,
and to register.

Cost: \$175 for the
eight-week series.
Includes a healthy snack.

Children's Weight Concerns? **Create Your Weight: Pediatric Wellness & Weight Management® Program**

Engaging, interactive, eight-week nutrition education series for children ages 7–12 and their families. Learn the fundamentals of healthy food, behavior, and lifestyle choices. Customized, individual nutrition assessment included. Based on American Dietetic Association's Certification for Pediatric and Adolescent Weight Management guidelines.

"The class was fun. Our son couldn't wait to go each week, and has changed his food choices." — Mom of 9-year-old participant

SUPPORT GROUPS

Baltimore Ostomy Association

Sundays, May 15, 2–4 p.m.
Call 410-337-1845.

Breast Cancer SOS (Survivors Offering Support)

Call 410-427-2513.

Caregivers Group

First Thursday evening month,
7 p.m. Call 410-337-1109
to register.

Crohn's Disease & Colitis

Tuesday, May 10, 7 p.m.
Call 410-337-1537.

LUNGS Cancer Support

Call 410-337-4543.

Pregnancy Loss Hotline

Call 410-427-5440.

TRAINING

Registration required. Call 410-337-1479.



Calling 911 and doing CPR
are part of the Chain of Survival
if someone's heart stops.

Heartsaver CPR

Instruction on adults, infants, child CPR and relief of airway obstruction. For lay rescuers requiring credentialing documentation. Fee \$50.
Saturday, April 2, 9 a.m.–1 p.m.
Saturday, May 21, 9 a.m.–1 p.m.

Infant and Child CPR for Friends and Family

Course provides instruction on infant and child CPR, management of obstructed airway, and general safety issues. Recommended for general public, parents, grandparents, and unlicensed babysitters. Fee \$50. Saturday, June 4,
9 a.m.–1 p.m.

Family Programs

Taught by registered nurses with maternal-child health experience in their fields.
Call 410-337-1880.

Breastfeeding Class

\$20 per couple.
Saturday, April 9, May 14, or
June 11, 1–3:30 p.m.

Childbirth Education

\$60 per couple. (\$75 for non-St. Joseph patients.)
Tour included. Evening series.
Call for dates. One-day program
Saturday, May 21 or June 4.

Childbirth Review Class

\$20 per couple.
Call for dates.

Grandparents' Class

For those expecting a first grandchild at St. Joseph. \$10 per person.
Thursday, April 14, May 12, or
June 16, 6–8:30 p.m.

Infant Massage

NEW EVENING TIME!
For parents and newborns through six months. Benefits include bonding, relaxation, and stress reduction. Two classes. \$30 for both. Fridays, April 29
& May 6, 6:30–8:30 p.m.

Kangaroo Kapers

For children ages 3–7 expecting new siblings. \$10 per child.
Saturday, April 9, May 14, or
June 11, 10:30–11:30 a.m.

Mothering Matters

Free support group for new moms.
Every Thursday, 10:30 a.m.
–12 noon. Call for location.



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See pages 10 & 11.

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Comments, requests, change of address?

Contact us at 410-337-1337

or housecall@catholichealth.net.



THE CANCER INSTITUTE AT ST. JOSEPH MEDICAL CENTER



one team.

one plan.

one

place.

The Cancer Institute at St. Joseph Medical Center is more than multiple centers of medical excellence. It's a world that revolves around each patient, guiding them through the challenges of cancer.

Multidisciplinary teams of highly skilled professionals combine cutting-edge technologies with compassionate care — setting new standards in cancer treatment.



Chosen by the National Cancer Institute (NCI)

as the only Maryland hospital to belong to the NCI Community Cancer Centers Program (NCCCP), the Cancer Institute delivers multidisciplinary care and collaborates with NCI to provide access to sophisticated NCI clinical trials.

St. Joseph is one of the 16 original pilot sites in the NCCCP network, which has grown to 30 hospitals nationwide. Additionally, St. Joseph's Cancer Institute was awarded a \$2.9 million stimulus grant through NCI to increase participation in clinical trials, increase minority outreach concerning clinical trials, and to expand the institute's nurse navigator staff.

To learn more about the Cancer Institute, visit www.StJosephTowson.com or call 410-337-1338.