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FIND A DOCTOR
LVHN.org/findadoc

GET YOUR PRACTICE’S NEW NAME
LVHN.org/lvpg

READ THIS ISSUE
of Healthy You magazine online – and read extra stories – at LVHN.org/healthyyou.
This summer, the Center for Inpatient Rehabilitation will open inside Lehigh Valley Hospital–Cedar Crest in Salisbury Township. The facility will occupy the sixth and seventh floors of the hospital’s Kasych Family Pavilion. There will be a total of 34 private patient rooms on the two floors.

The center will allow adult patients (18 and older) who require intensive rehabilitation the ability to obtain these services without being transferred outside the health network. Most patients at the center will receive a minimum of three hours of specialized rehabilitation therapy per day for an average of two weeks. Services will be designed to care for people recovering from conditions such as stroke, neurological disorders, orthopedic injuries, amputations, post-surgical conditions or other debilitations.

Routine screenings may find health problems before they start, helping you to live a healthier life. Here’s an update on three screenings that may benefit you:

SCREENING MAMMOGRAM
The American Cancer Society recommends annual screening mammography (no prescription required) for all women starting at age 40. If you’re due (or overdue) for your mammogram, Lehigh Valley Health Network (LVHN) has eight Breast Health Services locations, four of which (Bangor, Bath, Bethlehem Township and Moselem Springs) accept walk-ins.

LUNG CANCER SCREENING
If you are between ages 55-80, have no sign of lung cancer, currently smoke (or have quit within the past 15 years), or if you’ve smoked at least one pack a day for 30 years, you may qualify for a lung cancer screening by CT scan. Such screenings are now covered for people ages 55-75 if you are covered by Medicare, and for people ages 55-80 if you are covered by a private insurer.

LIVER DISEASE
A new technology called FibroScan can help detect liver diseases like hepatitis C without the pain of a needle biopsy. FibroScan works like an ultrasound, using sound waves to detect scarring that could signify an underlying health condition. It’s performed at LVHN’s Hepatitis Care Center; a physician’s referral is needed.

For more information about any of these screenings, call 610-402-CARE.
Jenna and Matthew Ottinger prepared for the birth of their daughter in a typical way – by painting the nursery in their Alburtis home in soft pinks, coral and turquoise. They also prepared with help from Mary Kinek, RN, a nurse navigator with Lehigh Valley Health Network (LVHN).

Kinek contacted the first-time parents at 22, 28 and 34 weeks. As a nurse navigator, she answers questions and connects parents with resources, prenatal classes, tours, education on safe-sleep environments and a free certified car-seat check that ensures newborns go home safely. Nurse navigators also support new moms after delivery by addressing physical and emotional needs – such as stress, baby blues, anxiety and depression – that may arise postpartum.

“We add an extra layer of support by providing resources that help partners adjust to life as new parents,” Kinek says.

**THE OTTINGERS’ CHOICES**

Even though Jenna Ottinger (left) is a registered nurse, and Matthew is a certified physician assistant, they both wanted to learn as much as possible. So they attended two Saturday classes – Preparing for Childbirth and Baby Care, and are registered to attend an upcoming breast-feeding class. The couple also toured Lehigh Valley Hospital–Cedar Crest’s Center for Mother Baby Care so they would know what to expect on the big day.

“I learned so much,” Jenna says. “Umbilical cord care has changed, and experts now recommend skin-to-skin contact for all moms and infants, not just preemies. My husband discovered massage techniques to ease my delivery pain and bonding strategies for new dads.”

The Ottingers also learned the “Five S’s” – soothing techniques that calm fussy newborns by making them feel safe, including swaddling, holding baby on its side, shushing, swinging and sucking. The techniques also promote physical and emotional growth.

After their daughter’s birth, Jenna plans to attend Monday Morning Moms, a weekly program that gives new moms and their infants a chance to socialize while also getting lactation and parenting support from experts and each other.

“Knowledge is empowering,” Jenna says. “I never want to assume I know everything.”

–Sheila Caballero
7 Health Tips for New Moms

CARE FOR YOURSELF WHILE YOU CARE FOR BABY

On Mother’s Day, family and friends look out for Mom. Translation: Mothers look out for themselves the rest of the year, which is tough when you’re devoted to your newborn. Yet making self-care a priority helps you and your baby. To do so, try these seven tips, courtesy of family medicine physician Kate Agresti, DO, with LVPG Family Medicine–Nazareth:

1 LIMIT WELL-WISHING.
Everyone wants to see the new baby. But put people off for the first two weeks. That allows mom time to rest, bond with her family and start to feel a semblance of normalcy.

2 ACCEPT HELP.
Chores still can get done – by others. Tell family and friends how they can help. “When people want to visit, ask if they might be willing to bring food,” Agresti says. “Don’t be afraid to rely on others.”

3 BREAST-FEED IF YOU CAN.
Yes, it’s good for the baby – “but it also will burn an extra 500 calories a day,” Agresti says. “If you’re trying to get postpartum weight off, breast-feeding is a great way to start.”

4 HANG UP YOUR CAPE.
You’re not superwoman. “Napping when the baby sleeps is easier said than done if you think you have to keep up with laundry and cooking,” says Agresti, who recently gave birth to her first child. “Forget the chores and try to nap at least once a day.”

5 RIDE THE ROLLER COASTER.
Emotional ups and downs are normal. But a ride that only goes down is broken. “Get help if you’re not bonding, start to have negative thoughts about the baby or yourself, don’t feel safe with the baby or experience severe mood swings for more than a couple of weeks,” Agresti says.

6 DRINK WATER.
Breast-feeding increases your need to stay hydrated. Get the equivalent of eight 8-ounce glasses of water a day. Stay away from sugary sodas and caffeine that can filter into breast milk.

7 EASE INTO EXERCISE.
Take baby steps to get back to pre-pregnancy shape. “Talk to your doctor about an exercise plan, especially if you had a C-section,” Agresti says. “Make a start date once the baby is on a schedule that’s easier to work with.”

–Richard Laliberte
Genetic testing gave knowledge to Patricia Richie and her daughters Greta Yoka, Alicia Quinn and Kimberly Richie.

Learning About Cancer Risk
In August 2011, Patricia Richie felt unusually bloated and fatigued. “I chalked it up to stress,” says Richie, who at the time was going through a divorce and in the process of moving.

Yet Richie of White Haven, Luzerne County soon developed severe pain and pressure throughout her abdomen. “I looked nine months pregnant,” she says. She received care at two hospitals but didn’t get clear direction on her diagnosis. “It was frustrating because we felt we had few options,” says her daughter Alicia Quinn, 33, of White Haven. So she requested her mom get a second opinion at Lehigh Valley Health Network (LVHN).

There, gynecologic oncologist Martin Martino, MD, with LVPG Gynecologic Oncology–1240 Cedar Crest, diagnosed Richie with ovarian cancer. He immediately performed a nine-hour surgery to remove her ovaries, fallopian tubes, appendix, bladder, half her diaphragm and most of her colon. “Without that surgery, I would have died,” Richie says. HOW GENETIC RISK IMPACTS CARE

After learning about her many different family members who’d also battled cancer, Martino suggested Richie undergo genetic counseling and testing. “I had no hesitation whatsoever,” she says.

If you’ve already received a cancer diagnosis, genetic testing helps your care team learn whether you are at a higher risk for developing other cancers. “If you test positive for a gene mutation, it means your risk for developing a new cancer – unrelated to the one you are already battling – is higher than it is for a different cancer patient without the gene abnormality,” says LVHN genetic counselor Tara Namey. This information will prompt your care team to be even more vigilant with screening so you can catch any future cancers earlier.

Another benefit: Your family members can learn whether they too should be tested. “If you have a gene mutation, each of your children has a 50 percent chance of having it too,” Namey says.

TEST RESULTS

Patricia Richie tested positive for the BRCA-2 mutation. Normally the BRCA-2 gene prevents cells from growing and dividing too rapidly, but mutated versions of this gene don’t function properly, so cells more easily grow and divide uncontrollably, leading to tumors.

A person with a BRCA-2 mutation has somewhere between a 56 and 87 percent increased risk for developing breast cancer, and a 28 percent increased risk for developing ovarian cancer. “Risk for pancreatic, prostate (in men) and skin cancer – specifically melanoma – also is higher,” Namey says.

Soon after she received her results, Richie urged her daughters to undergo genetic testing. Her two older daughters – Greta Yoka, 36, of York and Alicia Quinn – were tested right away. A few years later, in 2014, Patricia Richie’s youngest daughter, Kimberly Richie, 26, of Bowie, Md., was tested and learned she carries the same mutated BRCA-2 gene as her mother. As a result, she now gets annual mammograms, and after age 30 she’ll have frequent blood work, vaginal ultrasounds and skin tests, along with mammograms every six months.

She’ll also have the option of taking Tamoxifen to suppress hormones that may trigger cancer growth, and will have the option of preventively removing her ovaries and/or breasts. “I’m now at an advantage over the average person who isn’t getting these frequent screenings,” she says.

A GIFT OF KNOWLEDGE

Today, Patricia Richie and her family are grateful for the knowledge learned through genetic testing. “It’s a gift to know such testing is available,” Quinn says. “Knowledge is power. Because we asked for a second opinion, we learned about a gene that plagues our family. Had we known sooner, we may have prevented what she had to go through.”

–Alisa Bowman
500 Miles on Two New Knees

STEPHEN MAVIN WALKS THROUGH SPAIN, FRANCE
Stephen Mavin sat in a café in Spain last year, his 20-pound backpack by his side. He’d been hiking the Camino de Santiago, a 500-mile trail that spans across Spain and parts of France. Because he was wearing shorts, others could see the scars on his knees, the only remaining signs of the double knee replacement he’d undergone four years earlier.

“They were amazed I could do the walk with two new knees,” says Mavin, who turns 80 this summer. “I told them my knees were the best part of my body.”

TWO INSTEAD OF ONE

Although many patients with severe osteoarthritis in both knees opt to have just one knee replaced at a time, Mavin, a former marathoner, had both knees done at once. While the recovery is more challenging, there are some pluses. Most notably, there’s only one surgery to recover from rather than two.

But because of the increased risks for complications, “double knee replacements aren’t for everyone,” says Mavin’s orthopedic surgeon, Eric Lebby, MD, with VSAS Orthopaedics. “They are ideal for people like Stephen who are very healthy, active and fit.”

GETTING BACK ON YOUR KNEES

While many people undergoing knee replacements focus on the surgery, the rehabilitation and recovery are equally important. Mavin worked with a team of rehabilitation specialists at Lehigh Valley Health Network (LVHN).

Within six weeks, he returned to mowing the lawn and other chores, and felt like a new man. “I never looked back,” he says. “I’ve never had another pain since the surgery.”

If you undergo knee replacement surgery at LVHN – whether you’re having one or both knees replaced – a rehabilitation professional will meet with you prior to surgery. “We’ll suggest exercises you can do to ensure your knees are strong and ready for surgery,” says physical therapist Mike Hosak. After surgery, “we’ll have you up and moving right away,” says Hosak’s colleague, physical therapy assistant Debra Gerow.

At LVHN, people with knee replacement surgery often have rehabilitation therapy sessions in the hospital to help reduce inflammation and regain range of motion. After you leave the hospital, home-based and outpatient therapy will help you regain full function so you can walk the stairs, get up off the floor and squat down to pick up objects.

THANKS FROM THE TRAIL

Three years after his surgery and rehabilitation, Mavin made his first hike along a 125-mile portion of the Camino de Santiago with a friend. Then he returned last year and did the entire trek alone, crossing a pair of 4,500-foot mountain ranges and hiking 500 miles in 32 days. “I kept thanking Dr. Lebby in my mind with each step,” he says.

3 Tips for a Safe Hike After Knee Replacement

Stephen Mavin is an inspiration. So if you’ve had knee replacement and he’s inspired you to make your own hike – whether it’s 500 miles through Spain or an 18-mile hike at Jacobsburg State Park – here are three tips to protect your knees:

1 TRAIN FOR YOUR HIKE. “You can’t sit in a chair for eight hours a day and expect to be ready to hike,” Hosak says. So go to a gym and ask an exercise physiologist to help you develop a pre-hike exercise plan.

2 PRACTICE WEARING YOUR PACK. Twenty or more extra pounds is a lot of weight on your joints, so walk with your pack many times before your actual trip. “Also, to take some of that weight off your knees, use a pack with waist straps that distribute your weight over a large portion of your body,” Lebby says.

3 ICE YOUR KNEES AFTER EVERY HIKE. “Ice is the most underused anti-inflammatory out there,” Hosak says. Ice your knee(s) for 10-15 minutes after a hike to reduce swelling.

If you have knee pain but haven’t had the surgery yet, don’t wait too long. “Don’t waste years of your life watching your activities of daily living decrease,” Hosak says.
The O’Donnell family – husband Joe, wife Kara and 5-year-old son C.J. – planned a relaxing vacation at a Pocono-area resort. Early in the day they lounged by an indoor pool. But as the day went on, Kara – who was in her third trimester of pregnancy – felt tired. Then, in the middle of the night, she vomited. “That’s when I knew we had to see a doctor,” Joe says.

At Pocono Medical Center’s Level III trauma center in East Stroudsburg, colleagues immediately took Kara’s blood pressure. Joe, an emergency medical technician, gasped. “209 – that’s a bad number,” Joe says. “I know high blood pressure in a pregnant female is not good. She was deteriorating.” A CT scan revealed substantial bleeding in the brain due to preeclampsia (high blood pressure during pregnancy).

Colleagues at Pocono knew she needed care at a higher level trauma center with a maternal fetal medicine (high-risk pregnancy) program. Joe first suggested a hospital near their Lake Hopatcong, N.J., home, but Pocono recommended Lehigh Valley Hospital (LVH)–Cedar Crest in Allentown. “They said they have the facilities, their team is waiting, and time is of the essence,” Joe says.

A Lehigh Valley Health Network (LVHN) MedEvac helicopter flew Kara to Allentown while Joe and C.J. traveled by car.

READY AND WAITING
In Allentown, once MedEvac landed, a team of neuroscience and maternal fetal medicine specialists leaped into action. Kara was unresponsive and needed a breathing tube. To help her, neurosurgeon Mei Wong, MD, with LVPG Neurosurgery, first performed a craniectomy, removing a portion of Kara’s skull to relieve pressure on her brain and evacuating the blood clot in the brain.

All the while, obstetrician/gynecologist William Scorza, MD, with LVPG Maternal Fetal Medicine, monitored Kara’s baby. “The baby’s vital signs became unstable and showed signs of distress,” Scorza says.

AN EXTRAORDINARY DELIVERY
What happened next was extraordinary: Teams coordinated to deliver Kara’s baby – her second son, Miles – via C-section as she lay on her side undergoing her craniectomy. “You occasionally talk about special cases in medicine,” says neuroscience intensive care unit nurse Patrick Keane, RN. “She’s someone everyone in our unit remembers.”

Keane had just ended his shift when Kara came through. But he stayed to meet the arriving Joe and C.J. “I couldn’t imagine what he was going through while also caring for a 5-year-old,” Keane says.

Following a whirlwind of explanations and forms, Keane took Joe and C.J. for a cafeteria breakfast. “Patrick asked if we had any questions and told us what great people were caring for Kara,” Joe says.

Noticing Keane’s backpack, Joe realized the nurse was off-duty and asked why he was still there. “Patrick told me, ‘If I were in your situation, I wouldn’t want to be alone,’” Joe says. “His caring really had an impact on me.”

The newborn was sent to the hospital’s neonatal ICU while Kara was put into a medically induced coma as her brain swelling subsided. “I was torn,” Joe says. “In one place was one of the greatest joys of my life – in another was one of the biggest horrors.”

Celebrating ‘Two Miracles’

BRAIN SURGERY, C-SECTION, TEAMWORK SAVE MOM, BABY

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FINDING SUPPORT
Because the O’Donnells live outside the area, Joe and C.J. stayed at the Hackerman-Patz House at LVH–Cedar Crest, which provides affordable accommodations for loved ones. “That was a true blessing,” Joe says. “You run into other families with their own stories and situations. A lot of prayers are shared.”

As mother and baby recovered, caregivers brought Miles to Kara in a portable incubator. Laying Miles on his comatose mother seemed calming – her intracranial pressure and pulse dropped. “There are so many factors in medicine beyond what’s in textbooks,” Wong says. “Though I don’t have scientific evidence, I’m sure bonding helped her heal.”

‘TWO MIRACLES’
After spending several weeks in intensive care and emerging from her coma, Kara transferred to a rehabilitation facility, returning to LVHN in July to have her skull repaired. Baby Miles left the hospital and is thriving. “Kara is not fully recovered but has made progress in a short time,” Joe says. “As far as I’m concerned, she and Miles are two miracles.”

—Richard Laliberte
I loved chemotherapy. You probably think I’m crazy, but it’s true. For four months, I had chemotherapy every other Tuesday. To me, “Chemo Tuesday” was party time.

Was chemo hard? Definitely. But I never wanted people to feel sorry for me, a happy 27-year-old wife and mom from Green Lane. I wasn’t even mad when Adam Kotkiewicz, DO (a hematologist oncologist with LVPG Hematology Oncology), told me a mass in my chest tested positive for Hodgkin lymphoma. I considered myself lucky. Most people with Hodgkin lymphoma don’t have symptoms until it’s too late. I had chest pain when my cancer was curable.

When I’m passionate about something, I run with it full speed ahead. That’s how I viewed my fight with cancer. Step one for me was… a head-shaving party. Cancer wouldn’t take my hair. Baldness would come on my...
Dr. Kotkiewicz says chemotherapy is like a roller coaster ride. He’s right. The day of your treatment you feel fine, but a few days later it’s hard to move. (My daughter, Olivia, was my motivation to get out of bed.) Gradually you start to feel better, but by the time you’re feeling OK, it’s time for another treatment. After each treatment, it becomes harder to recover.

Chemo kills cells that grow rapidly. Cancer cells die but so do “innocent bystanders.” That’s why you can experience hair loss, brittle nails, digestive problems, mouth sores, numbness, tingling and more. Many side effects are treated with medication, but my favorite remedy was positivity. I would cry and get angry at times, but realized I would get through it by taking one day at a time.

It never sank in that I had cancer, but ringing the Cancer Center’s “finality bell” to celebrate the end of chemotherapy gave me closure. It helped me realize the good that came from the experience. It brought my family and friends closer, motivated me to raise cancer awareness and gave my husband, Travis, and Olivia extra daddy-daughter time.

It’s surreal to think I’m a cancer survivor. I hope my story inspires people fighting the fight. My advice: Stay positive, take one day at a time and lean on the ones you love. These things inspired me to make a poster for my last chemotherapy treatment that sums up my experience. “It came. We fought. I won.”
The Truth About Eggs

PUT ONE A DAY BACK ON YOUR MENU

Eggs have taken a beating in recent years. One day they’re a breakfast superstar. The next they’re a dietary no-no, too high in cholesterol and bad for your heart.

If your brain feels scrambled, here’s good news. Experts now agree that eating eggs regularly is not only OK but actually really good for you.

“Eggs have a bad rap,” says Lehigh Valley Health Network (LVHN) family medicine physician Cara Corpora, DO, with LVPG Family Medicine—Easton Avenue. “Yes, one egg contains almost 200 milligrams of cholesterol [current guidelines recommend less than 300 mg per day], but there aren’t many good studies showing that cholesterol in food raises cholesterol in your blood. It’s saturated fats and trans fats that seem to trigger the body to produce more cholesterol.”

So how many eggs are safe to eat? Registered dietitian Tara Miltenberger with Sodexo recommends one whole egg a day. “While the yolk is packed with beneficial nutrients like choline and vitamin D, moderation is still key because it also contains fat,” she says. If you adore four-egg omelets, use one whole egg and add egg whites or a fat-free liquid egg substitute for the rest.

And steer clear of saturated fats like butter and margarine when cooking eggs, Corpora says. Instead choose olive oil or vegetable oils that contain “good” unsaturated fats.

Next Step

GET FREE RECIPES for hummus deviled eggs (pictured) and “egg in a mug.” Visit LVHN.org/recipes or call 610-402-CARE.

‘EGGCELLENT’ REASONS TO PUT EGGS BACK ON YOUR MENU

1 They’re packed with protein. “Eggs are considered the gold standard for protein because they contain 7 grams’ worth, and the amino acids are easily digested in humans,” Miltenberger says. Research shows that eggs may help with weight loss. One large egg contains only 78 calories, but the higher protein and fat content keep you feeling fuller longer.

2 They’re nutrient rich. Egg yolks contain choline, a B complex vitamin that boosts brain function and limits disease-promoting inflammation in the body. Plus they are loaded with lutein and zeaxanthin that protect against age-related macular degeneration. Egg whites are rich in sulfur, which helps maintain healthy hair, skin and nails.

3 They’re budget friendly and versatile. “Eggs are inexpensive,” Miltenberger says, “and you can use them in a variety of dishes like a breakfast egg sandwich, a quiche for dinner, and even hard-boiled eggs for a high-protein snack.”
A 29-Year Battle With AIDS

LOCAL MAN SHARES HIS STRUGGLES, TRIUMPHS

When Eric* was diagnosed with acquired immune deficiency syndrome (AIDS) in 1986, it was all but considered a death sentence. “Nurses needed to wear protective gear just to bring me pain medication,” he says. “I needed to insert my own IVs. There was so much fear everywhere.”

Nearly 30 years later, Eric is living proof of the advances in care for AIDS. Today, he dog sits for friends, speaks to young people about AIDS and lives a rich life. His personal journey is one of pain, survivorship and hope.

THE ‘DARK YEARS’

Eric’s AIDS story began in 1985, when his wife contracted the disease through intravenous drug use. Eric, a chemist at the time, first thought he had a respiratory condition due to materials at his workplace, but soon he learned he too had AIDS.

At the time, AIDS was misunderstood. “AIDS became the buzzword when the focus should have been on human immunodeficiency virus infection (HIV), which causes AIDS,” says Lehigh Valley Health Network infectious disease specialist Tim Friel, MD, with the AIDS Activities Office.

AIDS is caused when HIV infects the immune system, creating dramatic increases in certain cells that fight infections. That can lead to one of 26 AIDS-defining conditions. “In the 1980s, most people didn’t survive for longer than two years after diagnosis,” Friel says.

For Eric, managing HIV meant taking AZT, the first FDA-approved medication for HIV and AIDS. In the 1980s, life with AZT was difficult. “It cost $500 a month, and I got horrible cramping and remained in a fetal position for days,” Eric says. “I was so depressed, I turned to drugs. Those were really dark days.”

While Eric survived, his wife died in his arms in early 2000, suffering from AIDS-related cancer.

HOPE AND SURVIVAL

Eric’s survivorship – and perseverance – came through personal connections. He found strength from formal AIDS support groups and from people within the gay community. The more he learned, the more he taught others. “I found good people who helped me get my legs back under me,” Eric says. “I owe them everything.”

While there still is no cure for HIV or AIDS, today there are many medications available that are far more tolerable than in the early days of AZT. “HIV has been transformed from a fatal illness to a chronic manageable infection,” Friel says. “Recent studies show that, with good therapy and medical care, the average 20-year-old newly infected with HIV may live an additional 50 years. It’s a remarkable success story.”

Nearly three decades after diagnosis, Eric enjoys better days. “There is still a lot of ignorance about HIV, but there’s a lot more hope too,” he says.

*The patient's name has been changed to protect his privacy.
Safe Pregnancy Despite Rare Heart Condition

TEAM APPROACH HELPS BETHLEHEM WOMAN START A FAMILY
Alyssa Machain and her husband, Brandon, knew from the start they wanted three or four children. For most young couples, having a big family is well within reach. But for Machain, 28, even one pregnancy could put her and the baby at risk.

That’s because she has an extremely rare heart-rhythm disorder called catecholaminergic polymorphic ventricular tachycardia (CPVT). It often runs in families (Machain’s mother, sister and brother also have it), and causes the heart to beat abnormally fast during physical activity and emotional stress. Not everyone develops symptoms, but people who do often experience dizziness, loss of consciousness and even death.

“I was diagnosed at age 12 after passing out and was put on beta-blockers to keep my heart rate under control,” says Machain of Bethlehem. “I never had another issue after that and have lived well with my condition.”

But she also knew pregnancy could pose special risks, because both pregnancy and pain during labor naturally raise a woman’s heart rate. Either could cause Machain’s rhythm disorder to flare up, endangering her and the baby. Also, Machain’s baby had a 50/50 chance of inheriting CPVT.

Yet she remained determined to start a family – as long as she could be closely monitored by a team of doctors and nurses throughout her high-risk pregnancy.

**ALYSSA’S TEAM**

Machain contacted the Heart and Pregnancy Program at Lehigh Valley Health Network (LVHN), which offers specialty care for pregnant women with heart disease. Cardiologist Amy Ahnert, MD, and maternal fetal medicine specialist Joanne Quinones, MD, helped Machain map out her care over the next few months. “They took my CPVT very seriously and really understood the impact it would have on my pregnancy,” she says.

Ahnert and Quinones regularly monitored Machain and the baby to ensure her beta-blocker kept her heart rate under control and that it didn’t produce side effects (such as a slower heart rate) in the baby. “Working as a team – cardiology, maternal fetal medicine, anesthesia and nursing – we also developed a very detailed plan to prepare us for any possible problems,” says Ahnert, who practices with LVPG Cardiology–1250 Cedar Crest. “We even ran through scenarios in a hands-on simulation lab so we were prepared if she had a heart arrhythmia during labor.”

While the team needed to increase the dose of her beta-blocker during the third trimester when her heart rate began to climb, Machain’s pregnancy otherwise proceeded without incident.

**FAST ACTION**

At Machain’s final checkup, the day before she was due, Quinones noticed fluid on the baby’s heart. She decided to induce labor.

“Unfortunately, with every contraction, the baby’s heart rate dropped dangerously,” says Quinones, who practices with LVPG Maternal Fetal Medicine. “The baby was smaller than average and wasn’t tolerating labor, so we did a C-section the next morning. They both did well and went home a few days later.”

**ONE YEAR LATER**

Today, that baby – Afton Machain (named after Brandon’s great-grandfather) – is nearly 1 year old. He was born with CPVT, identified through genetic testing. He’s on a beta-blocker and will be until he’s older, when doctors can determine if he is likely to develop symptoms.

Now, Alyssa and Brandon Machain are hoping for another baby soon. “Doctors Ahnert and Quinones made me feel reassured,” Alyssa says. “I look forward to the day when I call and tell them I’m ready for baby number two.”

—Sidney Stevens
When Leslie Rodriguez first encouraged her husband, David, to look into weight-loss surgery, David felt resentful. “I thought she didn’t love me unconditionally,” he says. “I thought she just wanted me to look good.”

But David Rodriguez weighed 325 pounds, wore size 52 pants, and had been diagnosed with pre-diabetes, asthma and sleep apnea. Despite the CPAP machine he used for his sleep apnea, he snored loudly, so he and his wife often slept in separate rooms.

“I missed sleeping with her,” he says. “I couldn’t play with my kids. I couldn’t fit on the rides at amusement parks. I couldn’t even roll over on the floor without my lower back going into a spasm. I was in a lot of pain, and I was not losing weight, no matter how hard I tried. I felt defeated.”

‘My Wife Made Me Do It’
AND NOW DAVID RODRIGUEZ IS FOREVER GRATEFUL FOR WEIGHT-LOSS SURGERY

David dropped 130 pounds.

Next Steps
LEARN MORE about weight-loss surgery options at LVHN. Visit LVHN.org/surgicalweightloss.
WATCH VIDEOS AND READ MORE patient success stories. Visit LVHN.org/weightloss-stories or call 610-402-CARE.
PERSISTENCE PAYS OFF
Leslie kept suggesting surgery, and eventually David agreed to attend a weight-loss surgery information session at Lehigh Valley Health Network (LVHN). He liked what he learned. “The reality was, I was really unhealthy,” he says. “I realized, if Leslie can love me while I’m overweight, why not have her love me at a healthy weight?”

After six months of pre-surgical nutritional and lifestyle counseling, Rodriguez chose a type of surgery called laparoscopic sleeve gastrectomy, better known as “gastric sleeve.” During the surgery, LVHN weight-loss surgeon T. Daniel Harrison, DO, with LVPG General and Bariatric Surgery, made several tiny incisions in Rodriguez’s abdomen, inserted narrow surgical instruments and removed 75 percent of Rodriguez’s stomach. Harrison then stapled the remaining stomach back together, creating a narrow stomach “sleeve” about the size of a banana. The now-smaller stomach holds one-tenth of the food it did before, which is important for weight loss, and the added benefit of lower levels of the hunger hormone ghrelin aids in appetite suppression.

“This surgery is as safe as having your gallbladder removed,” Harrison says. “Most patients lose 70 percent of their excess weight. Time and time again, this and other weight-loss surgeries have been compared to medicines and lifestyle, and they’ve proven more successful for long-term health. Afterward, most people ask, ‘Why didn’t I do this sooner?’”

NO MORE ‘HUNGER PAINS’
Rodriguez spent one night in the hospital and was back at his job as a housing manager within one week. Some of the first things he noticed: He was no longer hungry 24/7, and his body quickly shrunk. His confidence soared, and so did his energy. During a follow-up visit four months later, Rodriguez stepped on the scale. He was already 60 pounds lighter. “He was so happy,” Harrison says. “He was energetic and upbeat.”

And the weight kept dropping. Now, more than a year since his surgery, Rodriguez has dropped 130 pounds. His entire body has shrunk, including his head, fingers and feet.

His back pain and headaches are gone too, allowing Rodriguez to play basketball and chase his children up and down the steps. His blood sugar and asthma have normalized, and so have his sleep apnea and snoring. As a result, he and his wife are now sleeping together in the same bed.

“I thank her all the time,” he says. “Without her encouragement, I might not have gone through with it, and I don’t know where I would be right now if I hadn’t had the surgery.”

—Alisa Bowman
Pain-Free Burn Care

BENEFITS TO BODY AND MIND FOR BURN SURVIVORS

If you’ve ever been burned – even if you’ve just tapped your wrist against the oven door – you know how painful it can be. Severe burn injuries are among the most serious trauma a human can endure. New advances in sedation and anesthesia now allow for something once thought impossible – pain-free burn care.

“Burn wounds are so painful that historically patients have sometimes experienced post-traumatic stress during treatment,” says Lehigh Valley Health Network (LVHN) burn surgeon Daniel Lozano, MD, with LVPG General and Trauma Surgery–1240 Cedar Crest.

“By using pain management techniques during burn treatment, we now have the unique ability to remove the trauma and improve healing.”

LVHN’s Regional Burn Center is the only one in the nation providing this pain-free treatment for inpatient and outpatient burn care.

HOW IT WORKS

After an initial injury, patients once ran the risk for reliving the trauma during wound cleaning, debriding (removal of dead skin tissue), staple removal or daily dressing changes. The pain-free approach includes using different levels of sedation and anesthesia to provide treatment with minimal pain. These include:

► For people with minor burns, oral medications to reduce the level of pain are administered 30 minutes before the burn is cleaned and dressed.

► For people with burns that cover a large portion of their body, anesthesia is administered. This allows a patient to verbally respond during treatment but not retain any memory of the procedure being performed.

► For people with very serious burns, deep sedation is administered.

“A patient’s response to pain and the size of the burn determine the type of sedation he or she receives,” Lozano says.

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A ‘COOL’ APPROACH

Another pain-reducing technique used at LVHN for both inpatient and outpatient care is a technology called Snow World. Using a set of virtual reality goggles, a patient enters an imaginary arctic world with snowball-throwing snowmen and penguins. Initially designed to help wounded Iraqi war veterans, Snow World helps distract people with burns during dressing changes. “It takes their focus elsewhere and relieves anxiety,” Lozano says.

Next Steps

LVHN’S REGIONAL BURN CENTER cares for nearly 900 patients a year. Learn more at LVHN.org/burn.

READ A STORY about laser treatments to remove scars from serious burns. Visit LVHN.org/healthyyou or call 610-402-CARE.

—Sheila Caballero
Calendar

CLASSES AND SUPPORT GROUPS

REGISTER BY CALLING 610-402-CARE OR VISIT US ONLINE AT LVHN.ORG/HEALTHYYOU.
Registration is required and must be received at least one week prior to class start. You’ll get a refund if a class is canceled due to low enrollment.

What’s New

20th Annual Parkinson’s Symposium
For patients and caregivers, learn the most current information on Parkinson’s treatment and research.
Sept. 26: 8:30 a.m.-2:30 p.m. at LVH–Cedar Crest

Osteoporosis Awareness Health Fair
Learn about ways to improve your bone health and prevent osteoporosis. Free heel screenings and osteoporosis prevention and treatment information.
June 15: 9 a.m.-2 p.m. at LVH–17th Street

Survivors of Suicide Support Group
After losing someone to suicide, you may experience a multitude of emotions. Join fellow suicide loss survivors in a confidential setting to share experiences, feelings and to know you are not alone in your journey toward healing.
Meets first Tue. of month: 7-8 p.m. at LVH–Muhlenberg
Sponsored by Greater Lehigh Valley Chapter, American Foundation for Suicide Prevention

Women and Heart Disease
What have we learned and what are the advances? Meet female cardiologists who specialize in women and heart disease and are there for you in all stages of life.
May 12: 6-7:30 p.m. at LVH–Cedar Crest or LVH–Muhlenberg

Around Our Community

Community Exchange
Create a healthier community by becoming a member of our TimeBank. Give and earn time by exchanging services with friends and neighbors. All community members welcome. To get involved, call 610-402-CARE.

Get Out! Lehigh Valley
This healthy outdoor activity program with a Wildlands Conservancy guide connects you to parks, trails, gardens, rivers and more in your community. For details and new dates, go to get-outlehighvalley.org or call 610-402-CARE.

LVHN Via Marathon
Now is a great time to train for a marathon – or consider a half-marathon, a 5K run, a walk, form a relay team or volunteer your time to a good cause that provides services for those with disabilities.
May 12: 6-7:30 p.m. at LVH–Cedar Crest or LVH–Muhlenberg

Would a Support Group Help?
Dozens of different groups provide comfort and support.

Aqua New
Water exercise for posture, balance, strength and confidence.

Screenings

Clinical Breast Exams and Pap Tests for Uninsured Women
Appointment is necessary. Call 610-969-2800. Sponsored by Community Health and Wellness Center in collaboration with Allentown Health Bureau.
Weekly 8:30 a.m.-4 p.m.

Rapid HIV and Hepatitis C Testing
Free, anonymous and confidential.
Mon.-Thu.: 9 a.m.-3 p.m.; Fri. by appointment at LVH–17th Street

Lung Cancer Screening
Call 610-402-CARE for more information.

Clinical Diabetic Foot Care
Free
We will help you learn more about:
• Healthy eating
• Being active
• Testing your blood sugar
• Taking medication
• Reducing risks
• Problem-solving and healthy coping

We also offer:
• Insulin pump training
• Continuous glucose monitoring system training
• Support groups for adults and children
• Medical nutrition therapy

Caring for Mind and Body

Massage Therapy
Medical therapists offer different massage options at various sites.

Mindfulness-Based Stress Reduction
Internationally recognized program uses meditation and group support.
Free information sessions
June 2, June 4, June 9 at LVH–Cedar Crest
8-week sessions
Starting June 16 at LVH–Cedar Crest
Retreat
Aug. 1 at LVH–Muhlenberg

Living With Diabetes
Our team will work with you and your health care provider to design a program to fit your needs.
We provide education for:
• Prediabetes
• Type 1 and type 2 diabetes
• Gestational diabetes
We will help you learn more about:
• Healthy eating
• Being active
• Testing your blood sugar
• Taking medication
• Reducing risks
• Problem-solving and healthy coping

We also offer:
• Insulin pump training
• Continuous glucose monitoring system training
• Support groups for adults and children
• Medical nutrition therapy
Raising a Family

Expectant Parent Tour

Tours

Sibling Tour

Preparation for Childbirth and Baby

Combination Class—Six-week series

Covers labor, birth, caring for your newborn, breast-feeding and what to expect in the days after birth.

Preparing for Childbirth

Three-week series

Weekend: Saturday one-day

On the Internet

Teens Only

Preparing for Baby

Baby Care

Breast-feeding Baby

Staying Safe

Baby-sitting—Safe Sitter

Babysitters ages 11-13 will learn essential life skills in one session for safe and responsible babysitting.

CPR—Family and Friends

Learn rescue skills for infants, children and adults, and what to do for an obstructed airway.

Safe Ride—Car Seat Safety

Certified technicians show how to correctly install car seats and secure children.

After-Delivery Support

Monday Morning Moms

Free!

Postpartum Support

Understanding Emotions After Delivery

Meets second and fourth Thu. of month: 6:30 p.m.

Parenting Workshops

Keeping Calm

May 19

Coping With Illness

Amputee Support Group

Meets third Mon. of month: 5-6:30 p.m. (includes dinner) at LVH–Cedar Crest

Insulin Pumpers

Support and information for adults with diabetes using insulin pumps and continuous glucose monitors (CGMs). For details, call 610-402-CARE.

June 4: 6-7:30 p.m. at 1243 S. Cedar Crest Blvd., suite 2200

Sweet Success

Monthly support group for adults with type 2 diabetes. For details, call 610-402-CARE.

May 21: 8 p.m. at LVH–Muhlenberg Foot Care

Sugar-Free Kids

Monthly support group for children with type 1 diabetes. Call 610-402-CARE to register for events.

Camp Red Jacket

Summer day camp

Watch your mailbox for more information.

Pre-diabetes Self-Management Classes

Offered periodically throughout the year. Call 610-402-CARE for information.

Protecting Your Health

Cessation, What Works?

How to succeed in beating tobacco addiction.

June 4: 5-6 p.m. at 1243 S. Cedar Crest Blvd., suite 2200

Tobacco Free Northeast PA

Tobacco treatment referral services available for individuals and businesses.

Bereavement Support Services

Bereavement Care Workshop

Grief Process Groups

Individual, Family and Couples Counseling

Ladies Lunch Club

Spiritual-Based Adult Grief Support Group

Stepping Stones for Children

Brain Warriors Stroke Support Group

For survivors and caregivers, share emotional and physical issues to help deal with life after stroke.

Meets third Mon. of month:

11 a.m.-noon at LVH–Cedar Crest

Huntington’s Support Group

Meets second Sat. of month at LVH–Cedar Crest

Joint Replacement Prep

What to expect for knee or hip replacement.

May 27, June 24: 1:30-3 p.m.;

June 2, July 7: 9-10:30 a.m. at LVH–Cedar Crest

June 22, July 19: 9-10:30 a.m. at LVH–Muhlenberg

Kidney/Pancreas Transplant Information Session

If you would like more information about kidney and pancreas transplants, attend one of our information sessions. For details, call 610-402-CARE.

Myasthenia Gravis Support Group

July 23: 5:30-7 p.m. at LVH–Cedar Crest

Parkinson’s and Multiple Sclerosis Get Up and Go

Balance, stability and fall prevention exercises; group games, lectures and more to enhance movement outcomes.

Mon. and Thu.: 10:30-11:30 a.m. and noon-1 p.m. at 1243 S. Cedar Crest Blvd.

Tues. and Fri.: 11 a.m.-noon at 1770 Bathgate, Bethlehem

Parkinson’s Support Group

Meets fourth Tue. of month at LVH–Muhlenberg

Preoperative Spine Class

Prepared for surgery, postoperative care and aftercare.

May 19, June 3, June 16, July 1, July 21

FOR CANCER PATIENTS

Annual Cancer Survivor Celebration

For details, call 610-402-CARE.

July 2

Frankly Speaking About Cancer Treatment

Taking Control of Side Effects With Medicine, Mind and Body*

May 20: 6-8 p.m. at LVH–Cedar Crest

*In collaboration with Cancer Support Community of the Greater Lehigh Valley

Legacy Project Reunion

Open to survivors who have completed the Legacy series, meet new and old friends for a day of scrapbooking and socializing; lunch provided.

June 27: 10 a.m.-3 p.m. at LVH–Cedar Crest
Look Good...Feel Better
Makeover to understand and care for changes to skin during cancer treatment and to boost self-confidence.
June 15: 6-8 p.m. at LVH–Muhlenberg
July 13: 6-8 p.m. at LVH–Cedar Crest
With American Cancer Society

Melanoma Survivor Event
For details, call 610-402-CARE.
May 29

Men Facing Cancer
Meets third Mon. of month:
6:30-9 p.m. at LVH–Cedar Crest

Support of Survivors
Breast cancer helpline
610-402-4SOS (4767)

Managing Your Weight
Monthly Support Group
Support and information on weight-loss surgery.

Panel Discussion
June 3: 6-7:30 p.m. at LVH–Cedar Crest

Plastic Surgery After Weight Loss
July 1: 6-7:30 p.m. at LVH–Cedar Crest

Motivational Therapy Group
6-week program
Starting June 2: 4-5 p.m. at 1243 S. Cedar Crest Blvd., suite 2200
Starting July 14: 9-10 a.m. at 1243 S. Cedar Crest Blvd., suite 2200

Weight-Loss Surgery Information Events
What to expect.

Evening sessions
May 19, June 2, June 18, July 7*: 6-7 p.m. at LVH–Cedar Crest
Day sessions
June 8*: noon-1 p.m. at LVH–Cedar Crest
*Simulcast to LVH–Muhlenberg

Weight Management Services
INDIVIDUAL
Nutrition Counseling
Assessment, body-fat analysis and goal-setting.

Nutrition Counseling/Metabolism
Body Composition Test
Counseling plus personal metabolism test and interpretation.

Six-Month Supportive Weight-Loss Program
Individualized expert-level care for nutrition, behavior and fitness.

Sports Performance Classes
Youth Program
For young athletes ages 8-11, two sessions/week for eight weeks concentrate on proper weight-lifting technique, flexibility and movement skills.

Junior Varsity Program
For athletes ages 12-14, two or three sessions/week for eight weeks emphasize gaining flexibility, strength and power.

Varsity Program
For athletes ages 15-18, advanced two or three sessions/week for eight weeks work on proper mobility, stability, increased strength and power.

LVHN Fitness Group Classes
Being an LVHN Fitness member allows you to partake in a variety of classes. Call 610-402-CARE for more information. See a list of class locations and descriptions at LVHN.org/fitness. Classes are offered at five locations.

Boot Camp
Cardio Cross-Training
Chisel
Core Synergy
Cycling (30-, 45- and 60-minute classes)
Get Up and Go
Energizing Yoga
Exercise for Life
Kettlebells
Pilates
Relaxing Yoga
Staying Strong
STAT
Very Gentle Yoga
Yoga Basics
Yogalatte
Zumba
Zumba Gold

For information or a referral to any of the professionals featured in Healthy You, call 610-402-CARE or visit LVHN.org/HealthyYou.

Information appearing in this publication is not intended for self-diagnosis and/or treatment. If you have a health problem and need help finding a physician, call 610-402-CARE (2273) for further assistance.

If you have received an extra copy of this publication, please share it with a colleague or friend. If the mailing information is incorrect, please notify us by calling 610-402-CARE or toll-free 888-584-2273.

For more information, please visit LVHN.org/HealthyYou.
5 Freebies for Better Health

THE BEST THINGS IN LIFE ARE FREE. THAT INCLUDES GOOD HEALTH.
BELOW ARE FIVE FREE WAYS YOU CAN TAKE A STEP TOWARD
BETTER HEALTH IN MAY AND JUNE:

1. **SAFEGUARD THOSE BONES.**
   Calcium builds strong bones. You can learn other tips – and get a free heel screening – on June 15 at our Osteoporosis Awareness Health Fair in Allentown. See page 21.

2. **PREVENT STROKE.**
   Free assessments on May 13, 20 and 26 in Allentown and Bethlehem will measure your blood pressure, non-fasting cholesterol and blood glucose. See page 21.

3. **PROTECT YOUR CHILD.**
   Learn how to correctly install a child safety seat and get support for postpartum depression. And if you’re expecting, get a free parent-and-sibling hospital tour. See page 22.

4. **VISIT LVHN.ORG.**
   Get free health news, learn about conditions and treatments, sign up for the Healthy You email Tip of the Week, and find the right health care provider for you.

5. **LACE UP THOSE SNEAKERS.**
   Exercise and meet new friends at Get Out! Lehigh Valley events in Schnecksville, Emmaus and Salisbury Township. See page 21.