Contents

Cover Story
10 Protect Yourself From the Sun
  Your guide to preventing melanoma
  (Photo by Olaf Staroypinski)

Departments

Get Started
4 She’s the CRNP
  Plus: Prepare for fall sports and get the latest LVHN news

Take Charge
6 Heart Disease
  Living with complex heart disease
8 Diabetes
  How diabetes impacts cancer care

In This Issue
3 How Lia ‘Struck Out’ Stroke
  A young girl’s story
12 Nothing to Sneeze At
  Women – learn how PT can help you
13 ‘What I Did With My Extra Time’
  People who thrived after heart surgery
14 How Aliana Breathes Easier
  Guidance for children with asthma
16 Been There, Lost That
  A doctor’s personal weight-loss journey
17 Empower Yourself
  A new column straight from the doctor’s mouth
18 No More Tears
  Robotic surgery helps Ray Jones
20 Mommies on the Run
  Can you keep up with them?
21 Your Guide to a Healthy You
  New and ongoing programs

Learn more!

For more information about any of our stories, visit LVHN.org/healthyyou or call 610-402-CARE.

For more information about any of the doctors featured in this issue (such as practice name, location or hours), visit LVHN.org/find_a_doctor or call 610-402-CARE.
How Lia ‘Struck Out’ Stroke

HER FAMILY SAW THE SIGNS

As she threw out the first pitch at a recent Lehigh Valley IronPigs game at Allentown’s Coca-Cola Park, Lia Sampson celebrated the latest step in her recovery from a stroke.

The Allentown girl’s story began on the day her family celebrated her sixth birthday last June. After the celebration, Lia developed a bad headache and lay down. “We thought she was sleeping,” says her mother, Rebekah. “Then we found her having a seizure and vomiting.”

Lia was rushed to Lehigh Valley Hospital–Cedar Crest, home to the region’s only Joint Commission-certified Comprehensive Stroke Center.

“I noticed Lia’s smile wasn’t even,” Rebekah says. “I knew something was really wrong. As soon as the nurse saw it, everyone jumped into action.” An MRI at the hospital confirmed Lia had suffered a stroke.

“Strokes are rare in children, but not unheard of,” says neurosurgeon P. Mark Li, MD, with Lehigh Valley Health Network. “On average, six strokes occur in every 100,000 children.” While strokes in children often are caused by genetics, there is no family history of stroke for the Sampsons.

To treat Lia’s stroke, health network caregivers first gave her blood thinners. Yet her symptoms continued. “After two days, we saw signs that tight pressure was causing working parts of her brain to shut down,” Li says. To reverse that, Li performed decompressive hemicraniectomy, removing a piece of Lia’s skull to give her swelling brain room to expand.

That procedure helped at first, but two days later, Lia needed a second procedure called a lobectomy. This surgery successfully removed nonfunctioning parts from the front of her brain and helped her recovery.

“We realized the severity of the situation, but we had an overwhelming sense of hope,” Rebekah says. “We felt very confident in Lia’s doctors.” Lia’s medical team, family members and members from their church all offered support.

Today Lia continues to recover. “She’ll have some weakness, but the young brain has a remarkable ability to rewire itself,” Li says. “She’s doing very well intellectually.” In fact, Lia is back in kindergarten. “Her life has changed drastically,” Rebekah says, “but we consider ourselves lucky.”

—Richard Laliberte

Lia Sampson (center) and her family were guests of honor at a recent IronPigs game.
The boards of the Greater Hazleton Health Alliance (GHHA) and Lehigh Valley Health Network (LVHN) in April signed an agreement for a full asset merger pending regulatory approval.

The agreement, announced by GHHA president and chief executive officer (CEO) Jim Edwards (left) and LVHN president and CEO Ron Swinfard, MD (right), builds upon formal clinical partnerships between GHHA and LVHN. These include:

- MI Alert for Heart Attack Care at Hazleton General Hospital (HGH)
- Emergency department coverage at HGH by LVHN physicians
- TeleHealth services in the areas of obstetrics, infectious disease, burn and stroke care at HGH

GHHA includes HGH, with 150 licensed beds, and the Hazleton Health & Wellness Center, an outpatient center providing diagnostic testing, rehabilitation and ambulatory surgery. GHHA employs more than 1,000 people and has a medical staff of more than 100 physicians.

Leaders from both organizations say they anticipate the health care needs in each of their communities will continue to grow. Pending regulatory approval, they plan to do a needs assessment to determine how the merged organization can meet those needs going forward.

She’s the CRNP

Her patients sometimes call her “Dr. Martin,” but Brenda Martin is actually a certified registered nurse practitioner (CRNP) with Lehigh Valley Health Network. To become a CRNP, Martin received bachelor’s and master’s degrees in nursing, achieved certification in family medicine and has 10 years of experience in various levels of nursing.

“To develop our skills, we become expert as a registered nurse in a specific area of practice,” Martin says, “Then we expand on that expertise through advanced education and one-on-one clinical hours with a preceptor.”

A CRNP in family medicine can provide primary care, diagnose and treat people of all ages, and prescribe medicine. If you’ve never received care from a CRNP before, you likely will in the future. Martin is one of 172 CRNPs on the health network’s medical staff.

LEARN MORE at LVHN.org/find_a_doctor or call 610-402-CARE.
Get Ready for Fall Sports

Ready to raise your game (or your child’s game) to a whole new level this fall? Try sports performance training at LVHN Fitness. It’s for athletes ages 8 and up.

This training can help:

- Increase power, speed and agility
- Prevent injury by correcting dysfunctional movement
- Foster leadership and accountability

**GROUP AND INDIVIDUAL SESSIONS**

(including evenings) are available. See more on page 23. To register, call 610-402-CARE.

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**LEAVE A LEGACY**

As a not-for-profit, charitable organization, Lehigh Valley Health Network relies on your generosity.

Every gift – regardless of its size – has an impact, and a bequest through your will helps ensure leading-edge care for our community for generations to come.

Ruth Ann Halteman, RN, a behavioral health nurse at Lehigh Valley Hospital–Muhlenberg, created her legacy by establishing the Behavioral Health Endowment Fund. “Many people with behavioral health challenges stop taking their medications because they can’t afford them,” she says. “My dream is to provide education and resources that will help our patients reach and maintain their highest level of functioning.”

LEARN MORE about supporting LVHN. Call 610-402-CARE or visit LVHN.org/donate.

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**NEW ROOMS FOR ORTHOPEDIC CARE**

If you are recovering from an orthopedic surgery (such as total joint replacement) at Lehigh Valley Hospital–Cedar Crest, you now can enjoy private patient rooms and new surroundings.

The new seventh floor of the hospital’s Kasych Family Pavilion includes 30 rooms, each one with a private bathroom. The unit also features a large rehabilitation gym that’s twice the size of the former space. The gym includes items like a car simulator that can help you return to full function faster.

LEARN MORE at LVHN.org/bones-and-joints.
Twenty-four hours after she was born, Lindsay Siegle made headline news in Philadelphia. She became the youngest baby ever to receive a pacemaker to control an irregular heartbeat.

Having been diagnosed with multiple heart conditions and undergone numerous procedures and surgeries, Siegle, now 26, knows how to live a productive life with complex heart disease. “When you have a chronic condition, you have to be proactive when it comes to your health,” she says.

People with complex heart disease have multiple problems with their heart. For Siegle, receiving a pacemaker was only the first step in her health journey.

► At age 2, she had open-heart surgery to fix a hole between the lower chambers of her heart (ventricular septal defect or VSD).
► At age 10, she had a second open-heart surgery to repair a second VSD.
► Her pacemaker generator, which is battery-operated, had to be changed regularly because her heart uses it on every beat. Last year, she received her eighth pacemaker.
► At age 22, she was diagnosed with mitral valve prolapse, a condition in which the valve between the heart’s upper and lower left chambers doesn’t close properly.
► Her weakened heart became unable to supply her organs with enough oxygen-rich blood, a condition known as heart failure.
► She received a biventricular pacemaker, a device that synchronizes the heart’s lower chambers so they contract at the same time.

When Siegle moved to Allen-town, she started seeing a Lehigh Valley Health Network team with experience in caring for people with complex heart disease. The team includes heart failure specialist Ron Freudenberger, MD, and heart rhythm specialist Robert Malacoff, MD.

Under their care, Siegle’s heart is stronger. “We’ve been able to reverse Lindsay’s heart failure,” Freudenberger says. “Now the amount of blood her heart pumps is near normal.”

“Understanding the complex electrical problems of the heart has allowed us to offer new therapies not available when Lindsay was born,” Malacoff says.

In October, Siegle and her fiancé, Mike, will marry. Amid the wedding plans, Siegle finds time to share her story at community health events. Her message, “It doesn’t matter if you’re young or old, a man or woman, heart disease can affect everyone.”

—Rick Martuscelli
If you’re living with complex heart disease, take Siegle’s advice to be proactive.

1 KNOW WHAT YOUR BODY IS TELLING YOU. “Young people think they’re invincible, but they can have chronic conditions too,” she says. Regardless of your age, talk to your doctor about any symptoms you experience.

2 DON’T BE AFRAID TO EXERCISE. It makes your heart muscle stronger and reverses the symptoms of heart failure. If you’re worried about how much exercise your heart can handle, consider a cardiac rehabilitation program. You’ll be constantly monitored by a specialist while you exercise. Talk to your doctor about the workout that is best for you.

3 SEARCH FOR ALTERNATIVES. “New treatments for people with heart failure are helping people live longer with an improved quality of life,” Freudenberger says.

4 LEARN ABOUT NEW TREATMENTS. Transcatheter aortic valve replacement (TAVR) is a procedure that replaces a diseased aortic valve using a catheter instead of open-heart surgery. A left ventricular-assist device (LVAD) is a small mechanical pump that helps circulate blood in people with advanced heart failure.

5 SHARE YOUR STORY. Siegle says, “It’s comforting to be with people who can relate to what you’re going through.”

Exercise and a healthy diet help Lindsay Siegle manage heart disease.
As a person with type 2 diabetes, Glenn Miller has long known the importance of keeping his blood sugar under control. But he never suspected how doubly important it is during cancer treatment until he needed chemotherapy last November.

Miller, 76, of Parkerford, Chester County, learned he had colon cancer in 2011, then learned he also had lung and thyroid cancer. Each time, doctors removed a section of the affected organ surgically, and Miller didn’t need any follow-up treatment.

But when Miller’s lung cancer returned last October, his Lehigh Valley Health Network hematologist-medical oncologist, Eliot Friedman, MD, recommended chemotherapy, along with radiation treatments under the direction of radiation oncologist Charles Andrews, MD. To keep his diabetes under control during treatment, Miller partnered with other health network experts – endocrinologist Donald Barilla, MD, and diabetes educator Cara Habeck, RN, from the Helwig Health and Diabetes Center.

THE DIABETES-CANCER CONNECTION
They are two separate conditions, but diabetes and cancer are linked. For example, diabetes causes high blood sugar, which in turn weakens the immune system, increases infections, breaks down body tissue and causes weight loss – all symptoms that also can occur from cancer, especially during treatment. “Keeping your blood sugar under control eliminates that added negative stress on your body,” Barilla says.

In addition, cancer treatment also may worsen diabetes. “We use steroids as anti-nausea therapies during chemotherapy, but one side effect is increased blood sugar,” Friedman says. “So when patients receive steroids, we work with their primary care providers to control their blood sugar.”

The team approach to cancer treatment and blood sugar control that Miller received is relatively unique. Lehigh Valley Health Network is studying how effective it is and how it might impact care in the future.

HOW THE TEAM APPROACH WORKS
Before he began therapy, Miller’s A1C (a blood test measuring blood sugar over time) was high at 9.8 percent. So his team prescribed a combination of oral medications and insulin to better manage his blood sugar during treatment.

Miller also received steroids prior to each chemo treatment to control nausea. Then his blood sugar was monitored throughout, and his insulin adjusted as needed. “When his blood sugar rose, we’d increase his insulin,” Habeck says. “Then after chemo, when his appetite was poor and his blood sugar dropped, we reduced his insulin.”

Habeck also worked with Miller’s wife, Rosemarie, who kept a food log for her husband and monitored his blood sugar at home. When Miller began losing weight, Habeck suggested ways to help him keep eating and increase his strength.

“Most people with diabetes are told to eat moderate carbohydrate portions because they increase blood sugar,” Habeck says. “But it’s different when someone is losing weight the way Miller was. I encouraged Rosemarie to watch his sugars and feed him high-protein, high-calorie foods – even comfort foods – basically anything he would eat.”

AFTER TREATMENT
With cancer treatment now over, Miller is gaining weight again. He now uses one oral medication (and no insulin) to control his diabetes, and his A1C is a healthier 7.2. He also is back tending his vegetable garden. “My grandfather and dad both were gardeners,” he says, “and I’ve had a garden since I was married.” And he’s grateful for the support of Rosemarie. “I’d be in real trouble without her,” he says.

“How Diabetes Impacts Cancer Care – Sidney Stevens
Support from his wife helped Glenn Miller during cancer treatment.

Take Charge Now

**TAKE A CLASS.** See page 21 for a list of “Living with Diabetes” classes and support groups. Call 610-402-CARE to register.

**ARM YOURSELF WITH KNOWLEDGE.**

Helwig Health and Diabetes Center has certified diabetes educators who are specially educated nurses and dietitians focused on helping you learn how to manage your diabetes. For more information, visit LVHN.org/diabetes or call 610-402-CARE.
Not only is melanoma the deadliest type of skin cancer, it's also the cancer with the fastest growing incidence. Why?

The answer may be traced back to the 1960s. Back then, people spent time in the sun without sunscreen because they didn’t know they were putting their skin at risk. Unprotected sun exposure then is causing more cases of melanoma now.

We’ve learned a lot about melanoma since the '60s. We know who is at greater risk, how to prevent it and more effective ways to treat it. Here is your guide to protecting yourself and your family.

WHERE MELANOMA STARTS
Melanoma develops in the cells of your skin that produce melanin, the pigment that gives your skin its color. “Exposure to ultraviolet (UV) light from the sun or tanning beds increases your risk,” says surgical oncologist Rohit Sharma, MD, with Lehigh Valley Health Network. “Untreated, melanoma can travel throughout the body, attack organs and be fatal.”

YOU'RE AT GREATER RISK FOR MELANOMA IF YOU HAVE:
- Fair skin, blond or red hair, light-colored eyes and freckles (although people with dark complexions can develop melanoma too)
- A history of sunburns
- Excessive exposure to UV light from the sun or tanning beds
- A family history of melanoma
- Many moles or large moles

WHAT TO LOOK FOR
If found early, melanoma is curable. “That’s why it’s important to check your skin regularly for changes in existing moles, or new and unusual growths,” says health network family medicine doctor Ken Ryder, MD. “Ask a partner to examine areas you can’t see.”

Everyone has moles. Normal moles are uniform in color (usually brown or black), round or oval, and small. When examining the skin, look for unusual moles by thinking about A-B-C-D-E:

- Asymmetrical - A suspicious mole has two halves that don’t match if a line were drawn through it.
- Borders - Look for moles with edges that aren’t smooth or even.
- Color - Be wary of moles with multiples colors or shades.
- Diameter - Cancerous moles usually are larger than an eraser on a pencil.
- Evolving - Look for moles that grow, change color or shape, or start to itch or bleed.

TO MONITOR A MOLE, take a digital photo of it next to a coin or ruler. Two months later, take the same photo to see if the mole has changed.

IF YOU FIND A SUSPICIOUS MOLE
Talk to your family doctor or dermatologist. If necessary, a portion of the mole will be removed and tested for melanoma. “If found early, 80 percent of melanomas can be cured by removing only the affected skin,” Sharma says. If melanoma is advanced, further testing will be done to determine if it has spread to other areas of the body.

—Rick Martusceli
PROTECT YOURSELF

AVOID THE SUN
between 10 a.m. and 4 p.m.

USE SUNSCREEN
with an SPF of at least 15.
- Apply to all exposed areas of the skin.
- Reapply every two hours (more often if you’re swimming or sweating).
- Remember the children. Preventing sunburns in children lessens their risk for melanoma as adults.

COVER UP
Dress in tightly woven clothing that covers your arms and legs. Dark-colored clothes reflect UV rays better than lighter clothing.

WEAR A HAT
with a wide brim, which provides more protection than a baseball cap.

BE CAUTIOUS
Stay protected on cloudy days, in the winter and in the shade. “The sun’s UV rays penetrate clouds, are present during every season and even affect your skin while you’re under a beach umbrella,” Ryder says.

AVOID TANNING BOOTHES
They can be just as dangerous as cigarettes, asbestos and arsenic.

Next Step
LEARN MORE ABOUT SYMPTOMS, diagnosis, treatment and follow-up care for melanoma at LVHN.org/melanoma.
FIND THE RIGHT DOCTOR.
Call 610-402-CARE or visit LVHN.org/find_a_doctor.

WHAT IS NCCCP?
LEHIGH VALLEY HEALTH NETWORK’S CANCER CENTER partners with the National Cancer Institute’s Community Cancer Centers Program (NCCCP) to deliver superior quality and coordinated cancer care, bring the nation’s newest treatments to our patients through clinical trials and decrease barriers to care in our community.
Nothing to Sneeze At

PHYSICAL THERAPY CAN HELP WITH CONDITIONS YOU MIGHT NOT WANT TO TALK ABOUT

Do you hold in your sneeze or hold back a laugh for fear you’ll “wet your pants”? Do you have discomfort during sexual intercourse? Do you experience pelvic pain when going to the bathroom or exercising? If you answered yes to any of these questions, you are not alone.

“So many women experience these problems, but they’re embarrassed to talk about them,” says family medicine doctor Jennifer Lyons, DO, with Lehigh Valley Health Network.

Yet there is help. Physical therapists who are specially educated in women’s health can evaluate and treat women with pelvic issues, including:

- Urinary incontinence – It affects 50 percent of adult women. Many symptoms are caused by pelvic floor muscle weakness and dysfunction.
- Pelvic pain – This may include pain in your lower abdomen, pelvis, lower back, tailbone or hips. Some women may feel pain while going to the bathroom or during sexual intercourse.
- Organ prolapse – When the muscles that hold the pelvic organs become weak or stretched, your organs (the bladder, uterus, small bowel or rectum) can drop from their normal positions. Although pregnancy is the most common cause of prolapse, it also can be caused by carrying extra pounds.

- Prenatal and postpartum pain and dysfunction – Fluctuating hormone levels during prenatal and postpartum months can cause stress on joints and bones. Also, some muscles tighten up, while others become stretched and weak, creating pain and possible dysfunction.

“The pelvic area includes a network of strong muscular support,” says health network women’s health physical therapist Lauren Garges. “We work to maximize your function and minimize pain through strengthening and relaxing of the muscles.”

The care you get in physical therapy may include muscle strengthening and Kegel exercises, biofeedback, stretching and relaxation exercises. It also may include manual therapy methods such as trigger point releases and soft-tissue massage. The bottom line: “The sooner you seek help, the sooner you end the embarrassment and feel better,” Garges says.

HOW CAN I SEE A PT?
To see a physical therapist, you most often will need a referral from your primary care doctor or ob/gyn. Physical therapy is covered by most insurance plans.

Yoga can help women strengthen muscles to minimize pain.

NOVEMBER 2022 VOL. 30 NO. 11

Next Step

LEHIGH VALLEY HEALTH NETWORK OFFERS PHYSICAL THERAPY at its hospital locations and health centers. Learn more at LVHN.org/rehab and LVHN.org/women, or call 610-402-CARE.
‘What I Did With My Extra Time’

PEOPLE WHO RECEIVED AN INNOVATIVE HEART PROCEDURE COME TOGETHER TO CELEBRATE LIFE

If you were given extra time in life, what would you do? People who received this special gift came together in late May to share their stories and celebrate.

All of them underwent an innovative heart procedure called transcatheter aortic valve replacement (TAVR) at Lehigh Valley Health Network (LVHN), the first hospital in the area to perform the procedure. The celebration was held exactly one year after the first TAVR procedure was performed.

Instead of doing open-heart surgery with an incision in the chest, TAVR replaces the heart’s diseased aortic valve using a catheter, which is inserted through a small incision in the groin or chest. Patients who receive TAVR aren’t healthy enough for traditional open-heart surgery. As a result, the people who came together for the celebration didn’t have many options left before the procedure.

Meet two of the 38 people who received TAVR and see how they’re using their extra time.

‘I’M GOING TO VISIT MY SISTER’

On a trip to Budapest, Hungary, John Molnar of Quakertown brought his wife to the house where he grew up. On a whim, he knocked on the door. A woman who looked familiar answered. He explained this was once his family’s house and he hadn’t returned for 56 years. The woman fainted. Molnar, 74, had just seen his twin sister for the first time in more than 50 years.

Later that year, he developed a heart valve problem and received TAVR. Molnar has big plans now that he’s feeling better. “We’re going back to Budapest to see my sister,” he says. “We’re taking my brother back home to Hungary. He has been visiting us since February.”

Heart and lung surgeon Raymond Singer, MD, has no concerns about a long trip for Molnar. “It’s phenomenal the way John has come back,” Singer says. “He should be able to make many more trips if he wants.”

‘I’M GETTING BACK INTO SHAPE’

Before TAVR, 75-year-old Ruth Sensinger of Orefield couldn’t even talk without gasping for air. Her shortness of breath was caused by a blocked aortic valve and a weak heart, which prevented her from having open-heart surgery. “Now I’m working on walking and getting back into shape,” says Sensinger, who was one of the first patients to undergo the procedure at LVHN. “The difference is like night and day.”

“Ruth is doing really great, and her heart valve is fine,” Singer says. “She is working hard.”

—Ted Williams
How Aliana Breathes Easier

NEW ASTHMA PROGRAM IMPROVES HEALTH IN ALLENTOWN

Next Step

LEARN MORE ABOUT HELPING CHILDREN WITH ASTHMA at LVHN.org/asthma-in-children or call 610-402-CARE.

WATCH AND LEARN how TeleHealth helps children in the Allentown School District at LVHN.org/healthyyou.
Sasha Caro knew it was important for her 12-year-old daughter, Aliana, to take her asthma-control medication regularly. Sasha was less familiar with steps she and her daughter could take to ease symptoms in their downtown Allentown apartment. So when she learned about a new program offered by the Lehigh Valley Hospital–17th Street Children’s Clinic and the health network’s department of community health and health studies, “I immediately signed up,” she says.

Called the Pediatric Asthma Program and funded by a grant from the Dorothy Rider Pool Health Care Trust, the initiative reaches out to children ages 5 to 11 in downtown Allentown. The city is ranked by the Asthma and Allergy Foundation of America as the nation’s 10th most challenging metropolitan area to live with asthma.

“Part of the problem is being in a valley where pollen and particulates become trapped by surrounding mountains,” says Lehigh Valley Health Network pediatrician Jarret Patton, MD. “Also, research indicates that asthma becomes worse in environments that are full of triggers.”

Such triggers may include dust, old paint and particles related to cockroaches and other pests. These triggers are particularly prevalent in areas where people have relatively few resources and often rent housing in older buildings.

HOW THE PROGRAM HELPS
To help combat these concerns, the Pediatric Asthma Program connects families with Maria Villacreses, an asthma navigator, and Jamie Santana, a promotora (community health worker). Villacreses teaches families to identify asthma triggers and how to best manage asthma. Santana visits families’ homes and recommends steps to help children breathe easier.

HELP FOR THE FAMILY
When Santana visited the apartment where Sasha Caro lives, she helped both Aliana and Sasha’s 5-year-old daughter.

“She pointed out a lot of things that I didn’t know triggered asthma,” Sasha Caro says. That included dust on shades, outside air from poorly sealed windows and mold.

Because Caro was pregnant, Santana also was concerned about chipping paint and its potential for harboring lead, which can cause neurological damage in children. So she connected the family with the Allentown Health Bureau, which did its own child safety assessment of the apartment.

The good news – the apartment had no lead paint. And thanks to the evaluation, the landlord repainted cracked areas with higher-quality paint, treated the bathtub to prevent the return of mold and installed new windows in Aliana’s room. Sasha encased pillows and mattresses with plastic and learned how to clean more thoroughly. And the health bureau provided items like electrical outlet covers and a portable playpen.

“It made a big difference,” Sasha Caro says. “Aliana coughs and sneezes a lot less, and uses her inhaler less at night.”

A TRUE PARTNERSHIP
While the Pediatric Asthma Program allows health care workers to help people in the community, it also allows Allentown residents to offer feedback. An asthma-related Caregiver Advisory Group meets six times a year, bringing together Allentown-area parents of children with asthma.

“We share things that may benefit other families,” says Rosa Gonzales, whose 13-year-old daughter, Karol Smith, benefited from the program. One example: “I’ve known of children who get worse every time their parents get into an argument,” she says. “Families don’t like to talk about it, but I think there’s emotional asthma related to domestic problems.”

That kind of feedback helps get to the root cause of hard-to-treat asthma in children. “By looking at a person’s home environment, we can get a better understanding of all potential problems, help a child’s family better manage the condition and ideally make the child symptom-free,” Patton says.

—Richard Laliberte

About Children’s Hospital at Lehigh Valley Hospital

THE CHILDREN’S CLINIC IS PART OF CHILDREN’S HOSPITAL AT LEHIGH VALLEY HOSPITAL. Children’s Hospital provides family-centered care for children of all ages. It includes inpatient and ambulatory care, a Children’s ER, subspecialists in more than 25 pediatric specialties, and numerous child-specific services such as rehabilitation and burn care. It is the only Children’s Hospital in the Lehigh Valley. Learn more at LVHN.org/children.
Been There, Lost That

ROBIN SCHROEDER, MD, SHARES HER PERSONAL WEIGHT-LOSS STORY WITH PATIENTS

Today Robin Schroeder, MD, helps people throughout the Lehigh Valley achieve their personal weight-loss goals.

A family medicine doctor who works at Lehigh Valley Health Network’s Weight Management Center, Schroeder knows exactly what it’s like to battle obesity.

“I struggled with my weight for my entire life, and nothing worked long term,” she says. So as she approached her 50th birthday five years ago, Schroeder took a huge step. “I decided it was time to explore weight-loss surgery.”

Schroeder encourages her patients to find support. In her own journey, Schroeder found support from Julie Kulesa, a close friend and former co-worker who went through the weight-loss surgery process at the same time. “Julie had just lost her husband to lymphoma and wanted to be as healthy as possible for her younger son,” Schroeder says.

Both Schroeder and Kulesa chose a surgery called adjustable gastric banding. During the procedure, a surgeon places a band around the top portion of the stomach, leaving a smaller pouch available for food. The two friends had the surgery on the same day in September 2008.

The two women continue to share setbacks and triumphs as they’ve learned post-surgery care is a lifelong process. “When I am struggling, Julie boosts my morale, and when she struggles, I am the motivator,” Schroeder says. In the five years since surgery, Schroeder has lost 90 pounds. Kulesa has lost more than 100 pounds. Both women have forever changed their lives.

Two years ago, they celebrated together by racing a 5K. The event raised awareness for breast cancer and carried a particular significance to Schroeder. “When I was younger I had asthma, and I had a running phobia because of it,” she says. She conquered her fear by training, running 1 mile at a time and working up to 5 kilometers. “When I crossed the finish line on race day, I burst into tears,” she says. “I hadn’t been that proud of anything I’d done since I graduated from medical school.”

Already board-certified in family medicine, Schroeder took additional classes in bariatric medicine. Now she helps others through their weight-loss journey, sharing her story on the way. “I feel great,” she says. “I love helping others feel the same way.”

—Amanda Gilmore

Robin Schroeder, MD, ran a 5K after weight-loss surgery.
One of the things I love about being a family medicine doctor is caring for people of all ages – babies, teens, parents, grandparents and great-grandparents. I love teaching people to stay healthy. Yet I also know you make the biggest changes in your health when you empower yourself. A great way to keep track of your own health is to create a “portable health record.” It’s a list of important information that will help your doctors give you the best possible care. You can type it into your electronic tablet, write it on an index card or put it in a folder inside your filing cabinet. Just be sure to bring it to your appointment. It should include:

- **Your doctors** – Most of my patients see at least one specialist. When you bring us the names and contact numbers of all your caregivers, we can enter them into our computer system so we know whom to call with questions.
- **Your insurance information** – Everyone’s insurance is different, so knowing your information helps us make sure your care is covered. We also can offer assistance if you don’t have insurance.
- **Medications** – Write down all prescription medications, over-the-counter meds, herbals and/or vitamins. It helps me to make sure I’m prescribing medication that won’t interact with what you’re already taking.
- **Allergies** – If I know you have a contrast dye allergy, for example, I can prescribe a different type of imaging test to help diagnose your condition.
- **Most recent tests or images** – A vast majority of my patients have chronic illnesses such as diabetes, heart or vascular disease. That means blood tests for things like kidney function are common. If I know you just had blood work or a chest X-ray, I don’t have to inconvenience you with more testing.

**Do you find health care intimidating? We’re here to help.** In this new column, a Lehigh Valley Health Network doctor will offer tips for how you can best work together with your health care team. In this issue, family medicine doctor Nicole Sully, DO, talks about information that’s helpful for you to bring to your appointment. Share your comments on this column and offer ideas for future columns at LVHN.org/news.

**Next Step**

**Get Your ‘File of Life.’** Stick it on your refrigerator or a filing cabinet, and keep it up to date with your name, insurance provider, emergency contacts, current medications and more. Take it with you to your doctor’s visit or give it to the EMS crew if you need immediate care. To get your File of Life for free, call 610-402-CARE.
Smiles abound for Ray Jones of Breinigsville following prostate cancer treatment.
No More Tears
A LOCAL MAN’S EMOTIONAL BATTLE WITH PROSTATE CANCER

On some days while driving home from work, Ray Jones would pull off the road and burst into tears. He had just been diagnosed with prostate cancer and was overwhelmed with fears of never seeing his wife or playing with his grandchildren again.

“I didn’t know what to do. I felt helpless,” says Jones, 52, of Breinigsville. “You hope for the best, but it still gets to you.”

So Jones looked for a plan. He told his family about his diagnosis, and his daughter then called her mother-in-law, Lynda Workman, RN, a surgical oncology nurse at Lehigh Valley Health Network (LVHN). She recommended Jones see LVHN urologist Angelo Baccala Jr., MD, who is skilled in treating prostate cancer with robotic surgery.

“He and his staff were always there for me day and night, even if it was just to talk,” Jones says. “After a time, I wasn’t pulling off the road anymore. When you have a great team like that behind you, you believe you can do anything.”

A FAMILY HISTORY
Even before his diagnosis, Jones knew he was at risk for prostate cancer. His mother died of colon cancer at age 52, and his sister was diagnosed with leukemia at age 50. So Jones, a lifelong fitness buff, got his prostate checked.

“My PSA level (prostate specific antigen, a blood test used to detect prostate cancer) was high, and my prostate was swollen,” Jones says. A biopsy confirmed Jones’ worst fears – cancer.

Knowing he was at risk and seeking screening likely saved Jones’ life, says Baccala’s colleague, urologist Melvin Steinbook, MD.

“When it comes to cancer risk, men are typically in denial much more than women,” Steinbook says. “Most women get annual gynecologic exams routinely, but men aren’t always as consistent. If a man sees any changes with his prostate health, he should see his physician as soon as possible.”

SURGERY AND MORE
For Jones, the next step after diagnosis was surgery. Baccala removed Jones’ prostate gland with the da Vinci® Robotic Surgical System on Dec. 12, 2012. Yet that wasn’t the end of his journey. “His cancer extended outside the prostate,” Baccala says. “Because of that, he needed radiation treatments.”

Jones underwent 44 treatments under the direction of LVHN radiation oncologist Charles Andrews, MD. Along the way, Jones endeared his caregivers with a “take charge” attitude. “He was so committed to success,” Baccala says. “He believed in us, and we were uplifted by his spirit.”

After nine weeks of radiation treatments, Jones passed his biggest test. “A follow-up in March 2013 showed his PSA levels are very minimal,” Andrews says. “All in all, it’s a great story about a great guy.”

Jones thanked his caregivers by buying pizza for Andrews and his staff, and a cake from TV’s “Cake Boss” for Baccala and his staff. “They’re like family to me,” Jones says.

“I ran into Dr. Baccala at a local store recently, and we talked for a long time. It’s hard to believe I’m saying this, but this has been a wonderful experience for me. I got to meet so many good people.”

—Ted Williams
When Christine Burke of Lower Nazareth Township joined First Strides®, the beginner walking and running program co-sponsored by Lehigh Valley Health Network (LVHN), she was working off the pounds she’d gained during her pregnancy more than two years earlier.

On that first night, she met Suzanne Moore, Jean Vincent, Dana Neuffer and Joanna de Jesus-Fenicle, all of whom had children around the same age. “At what point do you have to stop calling it baby weight?” they joked. The five became fast friends, literally and figuratively.

After the program ended, they became mentors and continued meeting for runs. Soon they were training for a 5-mile race. Then a 10-miler. After that came a half-marathon.

“Then someone had the idea to run a marathon,” Burke says.

With the marathon came the official group name “Mom-mies on the Run” as well as matching T-shirts and a Facebook page. The page, which has nearly 2,000 followers, helps motivate the women to run, especially on days when it’s too hot, too rainy or too windy.

After the marathon came more marathons – including the team relay portion of the LVHN Marathon for Via – and then triathlons. The husbands got into the act too, first by cheering on the women, then by going for group bicycle rides together.

“We truly are healthier as we move into our 40s and 50s than we were when we were younger,” says Burke, who has dropped 15 pounds and watched her cholesterol fall by 50 points since she started running. And two of the dads have dropped 20 pounds each through cycling.

Now these moms – and dads – want to motivate you. Their tips:

» **Give yourself permission.** Think of the time you spend running as an investment in your health and energy. “Many women spend the best years of their lives heavy and not healthy,” Burke says.

» **Run with friends.** They make you accountable. “If you know someone is waiting for you somewhere, you are going to show up,” says Burke.

» **Get creative.** Hire a sitter, meet at a track so your children can play in the infield while the moms run, or have the entire family meet at a park. Or have dad and the kids ride bikes while mom runs.

—Alisa Bowman

**Mommies on the Run**

**CATCHING UP WITH SOME INSPIRING WOMEN**

**Next Step**

**LEARN ABOUT THE LVHN MARATHON FOR VIA**

at LVHN.org/marathon or call 610-402-CARE.

To learn more about First Strides, see page 21, call 610-402-CARE or visit LVHN.org/firststrides.
What’s New

18th Annual Parkinson’s Symposium
For patients and caregivers, get answers to questions and learn the most current information on Parkinson’s treatment and research.
Sept. 28: 8:30 a.m.–2:15 p.m. at LVH–Cedar Crest

Fitness for the Brain
Many changes may occur to the brain with age. Learn about those changes and actions you can take to help prevent, and even reverse, them.
Aug. 20: 2-3 p.m. at LVH–Cedar Crest

Around Our Community

Community Exchange
Create a healthier community. Volunteer time and earn time by exchanging services with friends and neighbors.
Third Mon. of month: 2-4 p.m. at LVH–17th, First Wed. of month: 6-8 p.m. at LVH–Muhlenberg

First Strides®
This 12-week workshop for women of all ages helps you begin a walking or running program. The goal: participating in a 5K.
Starting July 22: 6:15 p.m. at Chipperfield Elementary School Complex, Stroudsburg
Starting July 23: 6:15 p.m. at JC Mills School, Brodheadsville

Starting July 30 or July 31: 6:15 p.m. at Lehigh Parkway, Allentown
Starting July 30: 5:30 p.m. and July 31: 9:15 a.m. at Bethlehem Twsp. Community Center
Starting Aug. 1: 6 p.m. at Hanover Twsp. Community Center

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 getoutlehighvalley.org or call 610-402-CARE.

LVHN Via Marathon
Now is a great time to begin training for a marathon. Or consider a half-marathon, form a relay team, walk a 5K or volunteer your time to a good cause that provides services for those with disabilities.

Sept. 8: Marathon and Relay: 7 a.m. at LVH–Cedar Crest
Half-Marathon: 7:15 a.m. in Bethlehem

Free!

52nd Annual Muhlenberg Summer Festival
Special attractions, crafts and art show, kiddieland, attic treasures, rides, games, book, plant and bake sales, and free nightly entertainment.
Aug. 14-17 at LVH–Muhlenberg

Free!

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

Living With Diabetes
Our team will work with you and your physician 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
• Using a meter to test your blood sugar
• Medication
• Reducing risks

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

Free!

Protecting Your Health
Cessation, What Works?
How to succeed in beating tobacco addiction.
July 29

Tobacco Treatment Program
12-month program of individual counseling and ongoing support.
**Calendar**

### CLASSES AND SUPPORT GROUPS

#### Partnership for Tobacco-Free Northeast
- Tobacco treatment services available for individuals and businesses.

#### CPR
- Adult Heartsaver AED
- Heartsaver Adult First Aid
- Heartsaver CPR – Pediatrics
- Heartsaver Pediatric First Aid

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

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

#### Lung Cancer
- Appointments necessary. Call 610-402-CARE.

#### Coping With Illness
- **Amputee Support Group**
  - Meets third Mon. of month: 5-6:30 p.m., includes dinner at LVH–Cedar Crest
- **Bereavement Support Services**
  - Bereavement Care Workshop
  - Grief Process Groups
  - Individual, Family and Couples Counseling
  - Ladies Lunch Club

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

#### Lung Cancer
- Appointments necessary. Call 610-402-CARE.

#### Spiritual-Based Adult Grief Support Group
- Stepping Stones for Children

#### Brain Warriors Stroke Support Group
- Share emotional and physical issues to help deal with life after stroke.
- Meets third Mon. of month: 11 a.m.-noon

#### Crohn’s Disease and Ulcerative Colitis Support Group
- From the Crohn’s and Colitis Foundation of America.
- Meets second Sun. of month at LVH–Muhlenberg

#### Heart Failure Support Group
- Successful living with heart failure support group for patients and families.
- Meets every two months

#### Huntington’s Support Group
- Meets fourth Tue. of month at LVH–Muhlenberg

#### Joint Replacement Prep
- What to expect for knee or hip replacement.
- July 24, Aug. 18: 1:30-3 p.m.
- Aug. 6, Sept. 3: 9-10:30 a.m.

#### Transplant Support Group
- Meets first Sun. of month 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.
- Mon. and Thu.: noon-1 p.m.
- 1770 Bathgate, Bethlehem

#### Raising a Family
- **Welcome**
  - Pregnancy 101
    - Sept. 5
- **Tours**
  - Expectant Parent Tour
  - Sibling Tour – My Baby and Me
- **Getting It All**
  - Six-week series includes
    - Preparing for Childbirth
    - Baby Care and Breast-feeding Your Baby
- **Preparing for Childbirth Weekend**
    - On the Internet
    - Refresher
    - Teens Only
- **Preparing for Baby**
  - Baby Care
  - Breast-feeding Baby
  - Becoming New Parents Workshop
    - Sept. 21

#### Staying Safe
- Babysitting – Safe Sitter
- CPR – Safe Sitter Student
- CPR – Family and Friends
- Free Safe Ride – Car Seat Safety
  - Certified technicians show how to correctly install car seats and secure children.

#### After-Delivery Support
- **Monday Morning Moms**
- **Postpartum Support**
  - Understanding Emotions After Delivery

#### Parenting
- **Five-week Series**
- **Resumes Oct. 22**
- **Workshops**
- **Resume Sept. 19**

#### 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.

#### For Cancer Patients
- **Adolescent Support Group**
  - Lehigh Valley Chapter of the National Ovarian Cancer Coalition
  - **Look Good...Feel Better**
    - Makeover to understand and care for changes to skin during cancer treatment and to boost self-confidence.
    - July 15, Aug. 19: 6 p.m. at LVH–Cedar Crest with the American Cancer Society.

#### Men Facing Cancer
- **Men Facing Breast Cancer Support Group**
- Meets second Mon. of month
You’ve lost weight with your new diet. But it’s one month in and you’re craving those cheese fries. Stop – and instead stay on track with these tips from registered dietitian Joan Troutman with Lehigh Valley Health Network:

▶ **SET SPECIFIC GOALS.**
Instead of saying, “I want to eat better,” say, “I will have a salad for lunch twice this week.” But don’t get too ambitious; limit yourself. If you can meet one goal, it’s better than failing at too many.

▶ **POST REMINDERS.**
Hang up a written note about your goal in a visible place, and then take immediate action to follow through with it.

▶ **REMEMBER YOUR INITIAL MOTIVATION.**
Why did you start this diet? Think about your initial motivation while reaching into the fridge. It will positively influence your choice.

—Amanda Gilmore