UM CAPITAL REGION HEALTH

MARYLAND'S

HEALTH MATTERS

COVER STORY:

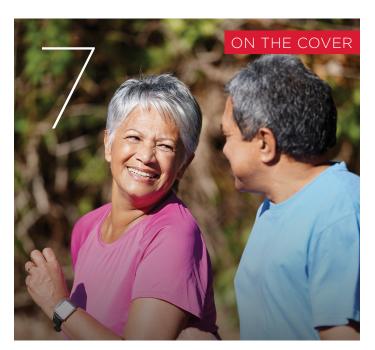
MEDICAL
FIRSTS:
DELIVERING
ADVANCES
IN HEALTH
CARE TO
PRINCE
GEORGE'S
COUNTY

PAGE 7



SICKLE CELL DISEASE CARE NEAR YOU ACADEMIC MEDICINE AT WORK
TORS TO THE RESCUE: NO INCISION
NEEDED TO REMOVE THROAT
TUMOR USING ROBOTIC SYSTEM
PAGE 10





MEDICAL FIRSTS: DELIVERING ADVANCES IN HEALTH CARE TO PRINCE GEORGE'S COUNTY

University of Maryland Capital Region Health is committed to bringing the most advanced procedures to local residents and expanding access to quality care.



SICKLE CELL DISEASE CARE NEAR YOU

The first adult sickle cell disease clinic in Prince George's County is now open.

ACADEMIC MEDICINE AT WORK:

TORS to the Rescue— No incision is needed to remove throat tumor with robotic system.



STAY CONNECTED WITH

UM CAPITAL REGION HEALTH

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WE WOULD LIKE TO HEAR FROM YOU

Please send your comments, information requests or change of address to: **thom.householder@umm.edu.**

or University of Maryland Capital Region Health, c/o Marketing, 901 Harry S. Truman Drive North Largo, MD 20774.

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NOTE: All photos were taken in accordance with the masking policies in place at that time.



IN MEDICAL ADVANCEMENTS FOR

PRINCE GEORGE'S COUNTY RESIDENTS

UNIVERSITY OF MARYLAND Capital Region Health continues to provide state-of-the-art medical care in Prince George's County. Our journey toward setting the standard for patient care includes a number of firsts for the county. I'm pleased to share some of the clinical accomplishments we have achieved thus far.

- Recognizing a need for earlier lung cancer diagnosis, our pulmonary team partnered with radiologists in the community to offer the first robotic-assisted bronchoscopy procedure in the county. A robotic arm uses precise movements, allowing the doctor to examine hard-to-reach areas of the lungs normally not accessible during a traditional bronchoscopy. The technique allows patients to receive an accurate diagnosis faster.
- Our urology team has performed the county's first ileal ureter interposition. The complex procedure helps the kidney drain to the bladder when the ureter is injured or damaged. The Prince George's County area has a high prevalence of high blood pressure and diabetes, putting patients at a higher risk of needing dialysis. This new procedure allows the kidney to function properly and patients will be able to keep both kidneys.
- UM Capital Region Health's electrophysiology team is the first in Prince George's County to offer catheter ablation for patients with atrial fibrillation. Our doctors use electrode catheters to send small electrical impulses to pinpoint the tissue causing the problem.

- Radiofrequency energy is sent to that precise area. All of this is done without using fluoroscopy—which can expose patients to radiation—and there's no need to stay overnight in the hospital.
- We became the first facility in the county to perform a "fix and replace" surgical procedure to repair a complex geriatric acetabular fracture. The combined hip procedure repairs a break that occurs in the socket of the hip joint. Our surgeons are experienced with arthroplasty and pelvic and acetabular trauma, allowing us to offer the procedure in the Capital Region.
- UM Capital Region Health opened the county's first and only adult sickle cell treatment clinic. Until this year, Prince George's County residents had to travel outside of the county for treatment. We are proud to offer these enhanced services. The clinic is open Monday-Friday from 9am to 5pm. To schedule an appointment, call 240-677-2206

There's much more to come as we continue to forge a new path in health care.

With appreciation,

Nathaniel Richardson Jr.

Nathaniel Richardson, Jr. President & Chief Executive Officer University of Maryland Capital Region Health

SICKLE CELL **DISEASE CARE**

UNIVERSITY OF MARYLAND CAPITAL REGION HEALTH HAS OPENED THE FIRST ADULT SICKLE CELL DISEASE CLINIC IN PRINCE GEORGE'S COUNTY.

ONE IN 767 babies in Maryland is born with sickle cell disease (SCD). For African American babies, that number increases to 1 in 256. The inherited blood disorder can cause serious health complications and chronic pain.

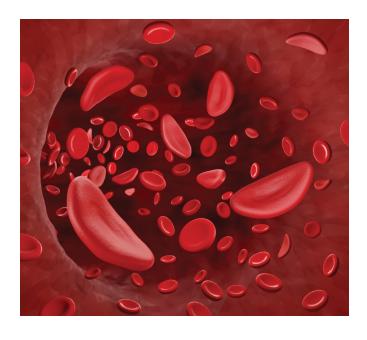
Until this year, adults with SCD in Prince George's County had to travel to Baltimore, Washington or Virginia for treatment. In March, UM Capital Region Health opened a new comprehensive sickle cell treatment clinic to provide this critical service in Prince George's County.

"Opening the first adult sickle cell clinic in the county improves access to care for those living with this chronic disease," said Sarah Larson, MS, senior director of oncology at UM Capital Region Health. "It has been proven that patients who can avoid going to an emergency room receive appropriate medicine faster and have a greater likelihood of not being admitted to the hospital."

ADVANCED CLINIC OFFERINGS

In addition to providing routine diagnosis and follow-up care for SCD, the new clinic offers the following:

 Crizanlizumab therapy, a series of injections used to reduce the number of pain crises



- Epogen infusion and injections, which are used to treat anemia caused by chronic kidney disease
- Extra intravenous fluid to help correct dehydration and electrolyte imbalances
- On-site point-of-care testing
- Pain management, including injectable, intravenous and oral medications
- Simple chronic blood transfusion
- Social service support, including community health referrals and other resources
- Telehealth appointments

Treatment is now closer to home for people in Prince George's County, and they have access to providers with specialized training in treating SCD.

"Getting needed pain medications more quickly can make all the difference for patients," Larson said.



Make an appointment with the adult sickle cell clinic at UM Capital Region Medical Center by calling 240-677-2206 or visit umcapitalregion.org/sicklecell.

SEPTEMBER IS NATIONAL SICKLE CELL AWARENESS MONTH

Sickle cell disease (SCD) is the most common inherited blood disorder in the U.S., affecting around 100,000 people. Sickle cell trait—the gene that can pass SCD to your child—is even more common. One in 13 African Americans is born with sickle cell trait.

If you have sickle cell trait and have a child with someone who also has sickle cell trait, your child has a 1 in 4 chance of having SCD. Genetic screening can help you know your risk.

University of Maryland Capital Region Health providers can test you, your partner and your children for sickle cell trait and answer questions about what this could mean for your family.

Convenience Meets Excellence:

OCAL CARE

 $F\cap R$ BONES JOINTS



HAVING ACHES AND PAINS? UNIVERSITY OF MARYLAND LAUREL MEDICAL CENTER MAKES IT EASY TO GET EXPERT ORTHOPEDIC CARE.

SINCE ITS INCEPTION, University of Maryland Laurel Medical Center has met the community's orthopedic needs.

The need for orthopedic services is growing, and UM Laurel Medical Center is growing too. New providers, buildings and equipment are coming to the Laurel campus. Why? Because residents of Prince George's County deserve to stay close to home for bone and joint care.

CURRENT SERVICES

The new UM Laurel Medical Center, which opened in June. is equipped with state-of-the-art operating and procedure rooms where orthopedic specialists currently perform a variety of surgeries and procedures, including:

- Carpal tunnel release surgery
- Hand, shoulder, ankle and elbow repair
- Joint reconstruction
- Minimally invasive surgery to diagnose and treat knee and shoulder joint issues
- Outpatient surgery following traumatic injury
- Sports medicine care

COMING SOON

This fall, a new medical office building will open adjacent to UM Laurel Medical Center. This building will house a new orthopedic clinic staffed by University of Maryland Orthopaedics specialists, providing area residents with convenient access to an expanded range of orthopedic care.

In addition to orthopedic surgeons, the new building will be home to:

- Acupuncturists
- Pain management specialists
- Physical and occupational therapists
- Podiatrists

With the new clinic in place, patients can have an orthopedic consultation at UM Laurel Medical Center. On-site, full-service imaging capabilities will allow for quick, accurate diagnoses and treatment planning.



To learn more, call University of Maryland Orthopaedics at 410-448-6400.

BEYOND ORTHOPEDICS

Orthopedic care is just one service planned on the grounds of the new University of Maryland Laurel Medical Center. In the coming months and years, the location will grow into a comprehensive health and wellness campus with expanded health care that connects Laurel and surrounding communities to advanced treatment options, patient services, local businesses and recreational activities.



UNIVERSITY OF MARYLAND CAPITAL REGION HEALTH CONTINUES TO EXPAND ITS BREAST HEALTH SERVICES.

ONE IN 8 women in the U.S. is diagnosed with breast cancer during their lives. That's why UM Capital Region Health launched its Comprehensive Breast Program in 2021. This coming spring, the Comprehensive Breast Program will move into a new medical office building adjacent to the UM Capital Region Medical Center in Largo, making it easy to get advanced care for breast cancer all in one location.

COMPREHENSIVE CARE NEAR YOU

The UM Capital Region Health Comprehensive Breast Program provides multidisciplinary care for the diagnosis and treatment of breast cancer. Services include:

- Advanced diagnostic imaging
- Biopsy
- Chemotherapy
- Clinical trials that provide access to the latest treatment options
- Oncoplastic surgery to restore breast shape

- Radiation oncology
- Specialized lymph node removal that can reduce the risk of lymphedema
- Surgery, including mastectomy and breastconserving surgery

DON'T FORGET YOUR MAMMOGRAM

Black women in Prince George's County have a higher mortality rate from breast cancer compared to other groups of women across Maryland. Annual screening mammograms can detect breast cancer early when it is often easier to treat. If you are age 40 or older, ask your provider if it's time to schedule your annual mammogram.



Schedule your annual mammogram with UM Capital Region Health by calling 240-677-0777.

Nelcome

NEW PROVIDERS



Magesh Sundaram, MD Medical Director, Center for Advanced Medicine Director of Surgical Oncology, UM Capital Region Health

MAGESH SUNDARAM, MD, is medical director of the Center for Advanced Medicine and director of surgical oncology at University of Maryland Capital Region Health and associate professor of surgery at the University of Maryland School of Medicine. Dr. Sundaram recognizes that cancer is the single most important health care issue a patient may face in their lifetime and is passionate about providing high-quality

surgical care as part of a patient's journey to a successful outcome. His expertise and leadership will drive the success of our multidisciplinary cancer care services for residents of Prince George's County and the surrounding region.

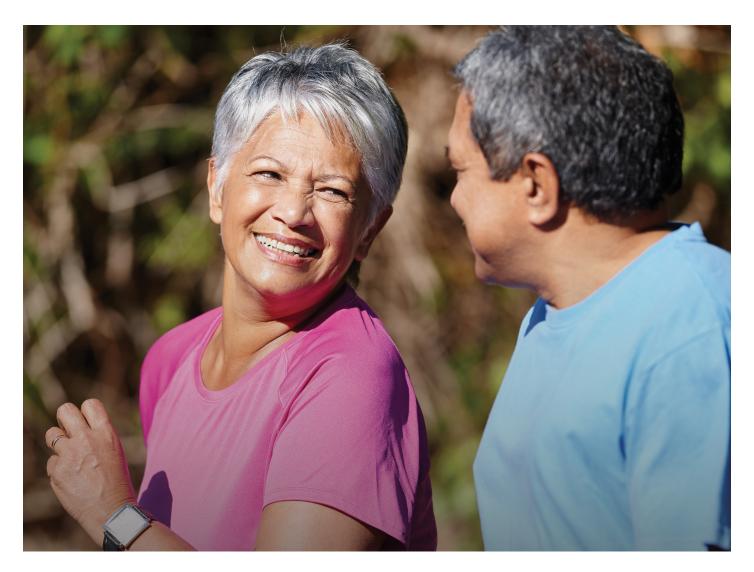


Benjamin Powers, MD Surgical Oncology, UM Capital Region Health

BENJAMIN POWERS, MD,

is a surgical oncologist and assistant professor in the Department of Surgery at the University of Maryland School of Medicine. He is board-certified in general surgery and surgical oncology. His clinical areas include cancer of the stomach, liver, bile ducts, pancreas, small bowel, colon and rectum. He also specializes in the

treatment of carcinoid (neuroendocrine) tumors and peritoneal disease.



Medical Firsts:

DELIVERING ADVANCES IN HEALTH CARE

TO PRINCE GEORGE'S COUNTY

UNIVERSITY OF MARYLAND CAPITAL REGION HEALTH IS BRINGING THE MOST ADVANCED PROCEDURES TO PATIENTS IN PRINCE GEORGE'S COUNTY.

WHEN PATIENTS HAVE to travel to find the latest treatments and screening tools for certain conditions, it can cause added stress and expense. At UM Capital Region Health—the first facility in the area to offer several innovative procedures residents of Prince George's County have access to the highest quality care close to home.

LUNG CANCER CARE

The pulmonology team at UM Capital Region Health recognized an unmet need for earlier lung cancer diagnosis in the area. In response, the team partnered with radiologists in the community to enhance lung cancer screening efforts and brought in new technology to help patients get an accurate diagnosis faster.

"Diagnosing lung cancer at an early stage gives patients the best chance for a cure," said Ashutosh Sachdeva, MBBS, director of the interventional pulmonology fellowship program and director of the interventional pulmonology program at University of Maryland School of Medicine. "We are doing more to identify patients who might be at high risk, getting them screened and then using robotic technology for early diagnosis along with staging. Our patients are getting the best multidisciplinary care possible in a timely manner."

In March, Dr. Sachdeva and his colleague, Van Kim Holden, MD, interventional pulmonologist in the Division of Pulmonary and Critical Care Medicine at University of Maryland School of Medicine, performed the first roboticassisted bronchoscopy procedure in Prince George's County at UM Capital Region Health. The procedure is used to biopsy lung nodules that have been found in screening tests. Doctors use a robotic arm to guide a thin tube into the patient's nose or mouth, down the throat, and into the lungs.

The robotic arm uses precise movements, allowing the doctor to examine hard-to-reach areas of the lungs that may not be accessible during a traditional bronchoscopy.

"This technology makes a big difference in shortening the time between finding abnormalities and getting a tissue diagnosis," Dr. Sachdeva said. "Having that information is key before we can convene our multidisciplinary tumor board oncologists, surgeons and radiation oncologists—to develop the best possible treatment plan."

The team is determined to continue bringing the latest treatments and diagnostic tools to UM Capital Region Health as they become available.

"We want to be the champions of multidisciplinary thoracic cancer care." Dr. Sachdeva said. "We want to ensure patients in this region are getting unmatched care."

ADVANCES IN UROLOGY

When Michael Witthaus, MD, medical director of genitourinary reconstruction at UM Capital Region Health, joined the urology team in 2022, he became the first genital reconstructive surgeon at UM Capital Region Health and performed the first ileal ureter interposition in Prince George's County.

"This is a surgery done to help the kidney drain to the bladder when the ureter is injured or no longer functions," Dr. Witthaus said. "It's a reconstruction technique that allows us to save the kidney."

Before this procedure was available, the kidney would have to be removed, or a patient might have to make a choice between having one kidney or having a nephrostomy tube, which connects to the kidney and drains urine out through the patient's back.

In an ileal ureter interposition, the surgeon removes a segment of small bowel from the gastrointestinal tract and reconfigures it to replace the damaged ureter. This allows the kidney to drain normally.

"The biggest concern when you lose a kidney is that you're more at risk of developing kidney failure and requiring dialysis in the future." Dr. Witthaus said. "In our local area, there's a high prevalence of high blood pressure and diabetes, which puts our patients at higher risk of needing dialysis. We try to do everything we can to allow patients to keep both kidneys."

Dr. Witthaus will also soon begin performing minimally invasive robotic ureter reconstructions, which allow patients to recover faster than they would from open procedures.

"We want to make sure our patients have access to topof-the-line care," he said. "I'm thrilled to be able to bring these procedures to Prince George's County."

RESTORING HEART RHYTHM

Catheter ablation for atrial fibrillation (AFib), a condition in which the upper chambers of the heart beat irregularly, often requires spending the night in the hospital. The electrophysiology team at UM Capital Region Health is the first in Prince George's County to offer catheter ablation for AFib with same-day discharge.

"We work hard to ensure everything goes smoothly so it is safe for patients to go home the same day without having to stay overnight in the hospital," said Mohit Rastogi, MD, medical director of electrophysiology at UM Capital Region Health, "Patients don't have to be managed in an unfamiliar environment, and they can see their family members sooner and sleep in their own bed."

> "Whenever a service is local, it allows patients to feel more confident. Traveling for a procedure can be daunting and emotionally and financially difficult."

-MOHIT RASTOGI, MD, MEDICAL DIRECTOR OF ELECTROPHYSIOLOGY AT UM CAPITAL REGION HEALTH



Catheter ablation uses radiofrequency energy to destroy the heart tissue that causes irregular heartbeats without damaging other areas of the heart. This helps the heart return to its regular rhythm.

During the procedure, the doctor guides a number of wires, called electrode catheters, to the heart. These wires can deliver radiofrequency energy to cauterize the heart tissue. By sending a small electrical impulse through the catheters, the doctor can pinpoint the tissue causing the problem and send the radiofrequency energy to that precise area.

While this type of procedure often requires fluoroscopy, which uses radiation to look at the heart, UM Capital Region Health is one of the few facilities in the area to perform ablations without using fluoroscopy.

"Exposing the patient to radiation can pose significant short- and long-term risks," Dr. Rastogi said. "With the equipment and expertise we have, we can do the majority of our cases without fluoroscopy, which is unique and very beneficial to the patient."

INNOVATION IN ORTHOPEDIC TRAUMA FOR OLDER PATIENTS

An acetabular fracture, a break occurring in the socket of the hip joint, is an uncommon injury but one that usually requires surgery. In some instances, a total hip replacement is needed in addition to repairing the damaged socket. In 2023, UM Capital Region Health became the first facility in Prince George's County to perform a "fix and replace" surgery, also known as a combined hip procedure (CHP), for a complex geriatric acetabular fracture.

"This is a combined procedure for a specific injury and patient population that is at risk for failure," said Marissa Bonyun, MD, MEd, orthopedic trauma surgeon at UM Capital Region Health. "Benefits to the patient include pain relief and possibly preventing the need for a possible total hip replacement later. Some patients can walk sooner, allowing them the chance to sooner return to their pre-injury life."

This type of surgery requires either two separate surgeons or a single surgeon who is comfortable with both arthroplasty and pelvic and acetabular trauma. Dr. Bonyun is dual-trained, completing two fellowships for complex lower extremity reconstruction and trauma, allowing the procedure to be available to patients in the Capital Region.

"UM Capital Region Health leadership has partnered with University of Maryland Orthopaedics to recruit and support high-quality fellowship-trained surgeons like Dr. Bonyun," said Brent J. Bauer, MD, director of orthopedic traumatology at UM Capital Region Health. "We're committed to growing the infrastructure necessary to support patients who require complex surgeries throughout their continuum of care."

HERE FOR YOU

At UM Capital Region Health, patients come first. By increasing access to these advancements and specialized care, UM Capital Region Health provides outstanding health care to Prince George's County.



To make an appointment with a provider, visit umcapitalregion.org/doctor.



NEW RETIREE WES
MOTTER, 65, HAS A LOT
HE WANTS TO DO. A
SKILLED SURGEON AND
A MINIMALLY INVASIVE
ROBOTIC PROCEDURE
ENSURED THROAT
CANCER DIDN'T DERAIL
HIS PLANS.

TWO YEARS AGO, Wes Motter was looking forward to retiring from his job as a software engineer. The husband, father and grandfather from Annapolis wanted to spend more time playing golf and softball, participating in charitable work, and supporting his wife's career. But then a cancer diagnosis threatened to cloud his future.

In 2021, just months before Motter and his wife. Linda, moved to Annapolis from Calvert County, he noticed something strange on his neck.

"I felt a pea-sized lump on the right side of my neck that I thought might be an infected lymph node," Motter said. "I saw a local otolaryngologist who performed a biopsy and didn't find anything wrong."

After the move to Annapolis, Motter sought a second opinion. This time, the physician suspected cancer. A second biopsy confirmed that diagnosis.

REMOVING TUMORS ROBOTICALLY

Motter had throat cancer caused by human papillomavirus (HPV). HPV-related throat cancers are increasing, according to the American Cancer Society. Fortunately, Motter's tumor was small, and the diagnosis was relatively straightforward. At his physician's recommendation, Motter met with Kyle Hatten, MD, associate professor, director of head and neck robotic surgery, director of the Head and Neck Multidisciplinary Clinic, Otorhinolaryngology-Head and Neck Surgery, University of Maryland School of Medicine.

Dr. Hatten is one of several surgeons at University of Maryland Marlene and Stewart Greenebaum Comprehensive Cancer Center who perform transoral robotic surgery (TORS), a minimally invasive procedure to remove head and neck tumors, including those of the throat. Bert O'Malley, MD, president and CEO of University of Maryland Medical Center, the academic flagship of University of Maryland Medical System, coinvented and developed TORS during his time at the University of Pennsylvania.

TORS is a minimally invasive alternative to other forms of head and neck cancer treatment, including open surgery. With TORS, the surgeon, controlling a robotic camera and surgical arms, removes the tumor through the patient's mouth instead of an incision.

"TORS is a great option because it provides patients with the opportunity to significantly reduce or eliminate radiation therapy," Dr. Hatten said. "Compared to open surgical techniques, TORS is almost always preferred so patients can avoid the more invasive head and neck procedures that often result in significant speech and swallowing impairments."

CLOSING THE DISTANCE TO COLLABORATIVE CANCER CARE



When oncologists and otolaryngologists at University of Maryland Medical Center need to treat patients with complex cases of head and neck cancer, they gather with other

called a tumor board to develop a treatment plan. Now, a UMMC surgeon is bringing this type of collaborative care to UMMS community oncologists throughout Maryland with a virtual head and neck cancer tumor board. Patients are reaping the benefits.

"We developed the virtual head and neck cancer tumor board in the context of the COVID-19 pandemic," Dr. Hatten said. "We were trying to limit the need for patients to travel across the state for consultations when they could, potentially, receive treatment closer to home. We eventually realized patients would benefit from this service all the time."

ON THE CASE

Every two weeks, Dr. Hatten cohosts virtual tumor boards with community oncologists in which they review the cancer specialists' complex head and neck cancer patients via telemedicine.

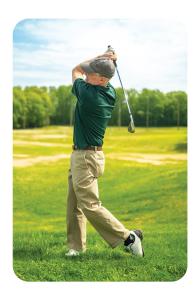
"These team meetings include not only Dr. Hatten said. "They offer critical input when reviewing images of a patient's cancer that help us better understand the disease. The virtual tumor board meetings also include dietitians and nurse navigators who partner with patients to help guide

The team develops care plans that allow patients to remain in their local communities for treatment or receive specialized therapy at UMMC, when appropriate. The virtual head and neck cancer tumor board has proved to be popular—more than 100 oncologists and other cancer providers have joined the program.

IN THE **RIGHT HANDS**

Like Motter, many patients with throat cancer are candidates for TORS, according to Dr. Hatten.

"We perform TORS using the only robotic system approved by the FDA for this purpose," he said. "This single-port robot can bend around corners to access hardto-reach areas. Inserted through the patient's mouth, it can be guided down the throat. Once



the robotic camera visualizes a tumor, it deploys the surgical instruments that I control to remove the cancer."

Dr. Hatten proposed using robotic surgery to treat Motter's throat cancer. Their discussion provided the reassurance he needed to move forward with that plan.

"Dr. Hatten was very upbeat and positive," Motter said. "In addition, he took all the time in the world with me. I felt like I was in good hands. I was battling the fact that I had cancer and didn't know what was going to happen, but I had a good feeling after visiting Dr. Hatten."

SAILING ON

In November 2021, Dr. Hatten performed TORS to remove the tumor from Motter's throat. Immediately afterward, like most patients who have TORS for throat cancer, Motter had conventional surgery to remove lymph nodes from his neck, a common place for cancer to spread. He went home after three nights at UMMC.

Fortunately. Motter didn't need additional treatment. After the procedure, he experienced a sore throat and some pain when swallowing, both of which proved to be temporary. Other than coughing a bit more than he did before, he said he's back to being "a normal kind of guy." Now cancer-free, he looks forward to spending more time on the links. He's joined a league as a way to meet new people and improve his game. He's ready for any adventure life has in store for him!



To learn more about cancer care and other health services at University of Maryland Medical System facilities, visit umms.org/health-services.

Make a Difference

IN HEALTH CARE IN LAUREL

THE NEW UNIVERSITY of Maryland Laurel Medical Center is delivering outstanding health care to Laurel and the surrounding communities. Join us and make a lasting impact with your one-time or recurring contribution to University of Maryland Capital Region Health Foundation's Comprehensive Naming Opportunities campaign. Your donation supports increased community access to high quality, transformative care through emergency, primary, specialty and outpatient health services.



To make a donation or to learn more about the naming campaign, visit umcapitalregionfoundation.org.



WHAT IS MINIMALLY INVASIVE SURGERY?

MINIMALLY INVASIVE SURGERY USES SMALL OR NO INCISIONS TO PERFORM A MEDICAL PROCEDURE, UNLIKE TRADITIONAL OR OPEN SURGERY, WHICH OFTEN REQUIRES LARGER CUTS.

BENEFITS OF MINIMALLY INVASIVE SURGERY



Decreased time spent in the hospital



Faster recovery time



Shorter operation time



Less bleeding, scarring and pain

COMMON TYPES OF MINIMALLY INVASIVE SURGERIES

Endoscopy uses an endoscope (camera) to enter through the body's natural openings or a small incision if one is required. This surgery is often used to operate on joints, lungs, the large intestine, the urinary system, the throat and the stomach.



Robotic-assisted surgery uses tiny surgical tools attached to a robotic arm that is directed by a surgeon for a variety of procedures. Robotic surgeries may be used for hip and knee replacements, hysterectomies, gallbladder removals, and heart and kidney surgeries.





Laparoscopy is a type of endoscopy that uses a laparoscope (tube with a camera) inserted into a small cut on the body. Surgeons often use laparoscopy to diagnose or examine the digestive, urinary and reproductive systems.



Transoral robotic surgery (TORS) uses a robot directed by a surgeon to operate on hard-to-reach tumors in the head and neck. TORS reduces or eliminates the need for radiation or chemotherapy.



Learn more about minimally invasive surgery options at umcapitalregion.org/surgery.



Why **INVASIVE** SURGERY?

QUICKER RECOVERY IS ONLY ONE OF THE BENEFITS OF MINIMALLY INVASIVE SURGERY AT UNIVERSITY OF MARYI AND CAPITAL REGION HEALTH.

IF YOU NEED surgery, one of your first questions is likely to be, "When can I get back to doing my favorite activities?" With minimally invasive surgery (MIS) at UM Capital Region Health, the answer is, "Soon!"

Because MIS calls for one or more tiny incisions instead of a large, open cut, you're likely to experience less blood loss, less postoperative pain, a shorter hospital stay and a quicker return to your regular life.

ADVANCED CARE CLOSE TO HOME

Choosing MIS at UM Capital Region Health means you are selecting a facility with the latest robotic technology. Our fellowship-trained physicians are often the first in Prince George's County to perform these advanced procedures. Our surgeons offer MIS in the following areas:

- Interventional pulmonology. We perform roboticassisted bronchoscopy, a procedure that involves using a controller to precisely navigate a scope to biopsy lung nodules to detect lung cancer in hard-toreach areas of the lungs.
- Urogynecology. We offer MIS options for the treatment of uterine fibroids, pelvic organ prolapse and other conditions that affect the pelvic floor, a complex group of muscles and tissues that support the bladder, uterus and bowel.
- **Urology.** We offer procedures to treat cancerous and noncancerous urinary tract conditions, as well as prosthetic and reconstructive surgeries.



Find out more about surgical options at UM Capital Region Health at umcapitalregion.org/surgery.

----→ Brush Up on **BRUISES**

CONTUSIONS, COMMONLY CALLED BRUISES. HAPPEN WHEN BLOOD VESSELS UNDER THE SKIN BREAK. BUT THE SKIN ISN'T CUT.

BUMPS, FALLS, COLLISIONS—ALL can lead to colorful and sometimes tender bruises, especially for active kids and teens. Most of these discolored areas disappear in a week or two. Try these tips to speed the healing process:

- Ice. Apply a cold compress of ice wrapped in a thin towel for 15 minutes at a time several times a day. Cold treatment of this type can be helpful during the first 48 hours after an injury.
- **Elevate.** If you can, keep the bruised area propped up above the level of your heart to help reduce the size of the swelling.
- Wrap. If the bruise is swelling, you might benefit from an elastic compression bandage around the area-but not too tight!

WHEN MORE HELP MAY BE NEEDED

Because bruising can be a sign of a serious medical condition, call your primary care provider if you notice:

- Bruises appear without known injuries or you have unusual bleeding, such as from your gums or nose or in your urine.
- Bruises don't go away after two weeks.
- Bruises show up after you start a new medication. Seek urgent care if a bruise shows signs of infection, such as pus or swelling in the joint, if you have a fever, or if a bruise causes difficulty with moving or walking.



To locate a University of Maryland Medical System urgent care center near you, visit umms.org/ urgentcare. If you need a primary care provider, visit umcapitalregion.org/doctor.





UPCOMING PROGRAMS & EVENTS FALL 2023

DINE, LEARN & MOVE VIRTUAL COOKING DEMONSTRATIONS

Get active, learn simple everyday tips for making healthy choices and engage with a chef while watching a cooking demonstration.

For more information, visit wellness.pgparks.com or call **301-699-2255**; Maryland Relay 7-1-1 for those who are deaf, hard of hearing or have a speech disability. To register to attend, email wellnessInfo@co.pg.md.us.

Wednesday, Sept. 27, 2023, 6pm-7:30pm Wednesday, Oct. 25, 2023, 6pm-7:30pm Wednesday, Nov. 15, 2023, 6pm-7:30pm

MAMA AND BABY MOBILE **HEALTH UNIT**

The UM Capital Region Health Mama and Baby Mobile Health Unit helps uninsured and under-insured women throughout Prince George's County receive quality health care. We see women of childbearing age. pregnant women and babies ages 0 to 24 months.

Please call 301-437-5788, Monday-Friday from 9am to 4pm to schedule an appointment.

SENIOR DINE AND LEARN—PREVENT AND MANAGE TYPE 2 DIABETES

Learn how to prevent and manage Type 2 diabetes from UM Capital Region Health board-certified physicians and other health professionals. Enjoy a healthy meal and mingle with other residents from the community.

Wednesday, Nov. 1, 2023 **UM Laurel Medical Center** 7150 Contee Road Laurel, MD 20707 Noon-1:30pm

To register, please call 240-677-2130 or email umcapitalcommunityhealth@umm.edu by Oct. 25.



HAS BINGFING ON COMFORT FOOD BECOME YOUR "GO TO" SOLUTION WHEN YOU FEEL DOWN OR OVERWHELMED? YOU CAN BREAK THE CYCLE.

ONE BITE OF a favorite family recipe can release a flood of happy memories, showing that food has an emotional connection. But food can bite back when emotion-triggered eating turns into a habit that leaves you feeling unsatisfied and unhappy. Responding mindfully to negative thoughts and emotions that trigger the urge to indulge can help.

If you feel stuck in an emotional eating pattern, try these four steps:

1. Determine what comfort food does for you. After you eat, do vou feel better or worse? Do you want more? Mindful eating can help you tune in to your body and assess what would really help you feel better, which may be something other than the comfort food you thought vou craved.

2. Know your triggers. Keep a food diary and write down what you eat and how much, as well as your feelings when you eat. For instance, if you realize that you're eating because you had a stressful day, find a different way to deal with stress, such as meditation.

3. Distract yourself.

Focusing elsewhere for just five minutes can interrupt your thought process. Try taking a short walk, calling a friend or putting on a favorite song and dancing.

4. Seek help. If these strategies don't work for you, consider talking to a therapist. Cognitive behavioral therapy can help you replace negative thinking patterns with more productive ones.



Check out our University of Maryland Medical System Live Greater podcasts or find behavioral health services near you at umcapitalregion.org/behavioralhealth.

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As part of the **University of Maryland Medical System**, we work alongside some of the most innovative minds in the country. And this year, our academic medical center, **University of Maryland Medical Center**, is celebrating 200 years of medicine.

It was the first hospital in the nation for medical teaching and training. Now, physician researchers are advancing artificial intelligence to diagnose, prevent and treat disease. In partnership with University of Maryland community hospitals, they bring integrated, personalized, complex cancer care to the forefront. And they are developing ways for physicians to see inside a patient's body before surgery. These and other innovations make medicine safer and more effective for everyone.

Please join us in celebrating University of Maryland Medical Center on 200 years of saving lives and reimagining medicine — for all of us!