IN THIS ISSUE:

SURGICAL EXCELLENCE AT YOUR SERVICE
Patient needs guide success at University of Maryland Medical Center Midtown Campus.

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WE WOULD LIKE TO HEAR FROM YOU
Please send us your comments, information requests or change of address to: midtown_communications@umm.edu; or University of Maryland Medical Center Midtown Campus, c/o Marketing, 827 Linden Ave., Baltimore, MD 21201; or call 410-225-8000.

NOTE: All photographs taken during the COVID-19 pandemic were produced using appropriate prevention measures, including physical distancing and masking when distancing was not possible. Photographs without these measures in place were taken prior to the COVID-19 pandemic. During this time, we are taking extra steps to ensure your safety when you walk through our doors. According to the University of Maryland Medical System’s Universal Masking Policy, everyone must wear a mask inside at all times in UMMS facilities.
Physician Spotlight:
NEIL AGARWAL, MD

WE WELCOME NEIL AGARWAL, MD, ASSISTANT PROFESSOR OF MEDICINE AT UNIVERSITY OF MARYLAND SCHOOL OF MEDICINE AND NEPHROLOGIST AT UM MEDICAL CENTER MIDTOWN CAMPUS.

WHAT EXACTLY IS A NEPHROLOGIST, AND HOW WOULD SOMEONE KNOW IF THEY NEED TO SEE ONE?
A nephrologist is someone who helps you understand the functions of your kidneys and guides you in the best way to take care of them. Some chronic conditions like high blood pressure and diabetes can put you at increased risk of developing kidney disease and may benefit from treatment by a kidney doctor sooner than later.

WHAT IS THE BEST PART OF YOUR JOB?
Taking care of my patients. Often, patients do not realize they have kidney disease until it becomes advanced. Being able to help them understand their disease and ease their anxiety is one of the greatest joys of my job.

WHAT DO YOU DO TO UNWIND AFTER A LONG DAY OR WEEK AT WORK?
I have started to teach myself how to cook in my free time. Although I am still a very long way from my first Michelin star, I have come to enjoy trying out different recipes.

WHAT IS YOUR BEST HEALTH TIP FOR PATIENTS?
For the majority of patients, maintaining good control of their blood pressure and diabetes can have a significant impact on their kidney health. Prevention and early detection can go a long way in preserving kidney function.

To learn more or to schedule an appointment with Dr. Agarwal or one of our nephrologists at the UMMC Midtown Campus, call 410-225-8083 or visit ummidtown.org/nephrology.
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<td><strong>If food delivery makes unhealthy eating too easy,</strong> The Academy of Nutrition and Dietetics recommends plating your food instead of eating out of the to-go container. This can help you choose healthier portions.</td>
<td><strong>If you’re battling anxiety,</strong> you are not alone. The Anxiety and Depression Association of America (ADAA) reports that almost 20% of the population has an anxiety disorder. The ADAA also states anxiety disorders are highly treatable, and your provider can recommend treatment options.</td>
<td><strong>If you’re feeling isolated,</strong> the CDC suggests looking for ways to help others. Doing so can not only help lower your own stress levels, it can help strengthen your community.</td>
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<td><strong>If going barefoot has your feet aching,</strong> The U.S. National Library of Medicine recommends wearing well-fitting, supportive shoes, as often as possible. If you aren’t ready to part with your favorite slippers, try using inserts or foot pads for additional support.</td>
<td><strong>If you can’t stop scrolling through the news,</strong> the Center for Disease Control and Prevention (CDC) recommends taking breaks from reading and watching news stories if they leave you feeling upset. Instead, schedule a limited time every day to catch up on news. You’ll stay informed without feeling overwhelmed.</td>
<td><strong>If you miss loved ones,</strong> the CDC recommends connecting over the phone or online. Try finding online activities you can do together, such as watching movies or playing multiplayer video games.</td>
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<td><strong>If your home office setup gives you a sore back,</strong> the National Institutes of Health recommends taking frequent breaks throughout the day to stretch and move. Try not to sit for longer than one hour without getting up and moving.</td>
<td><strong>If stress keeps you awake at night,</strong> the American Heart Association (AHA) suggests taking a walk during the day. Not only will exercise help you sleep better at night, but it will help decrease your stress levels overall.</td>
<td><strong>If you struggle to stay positive,</strong> the AHA recommends fostering a sense of purpose, taking satisfaction from daily interactions, treasuring good memories and expressing gratitude every day.</td>
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ADJUSTING TO ANY “new normal” brings challenges, but an action plan can help overcome those hurdles. Here are some ways the pandemic may have affected your health, and what experts suggest to stay well.

UMMC offers comprehensive mental health services for adult, children and adolescent patients at all stages of recovery. Visit ummidtown.org/mentalhealth to learn more or call 410-328-6231.
**Stressed Mom = Stressed Baby**

The pandemic introduced a time of increased uncertainty for everyone, including new moms.

In a recent comparative study published in a journal of neuropsychopharmacology, researchers discovered that babies were more sensitive to stress if their mothers had anxiety or depression. The study used a test to evaluate when a mother interacted with or ignored her baby. The babies who were ignored had a significant increase in heart rate and heightened stress reactivity.

Stress also can negatively affect unborn babies. When a pregnant mother is stressed, small amounts of stress hormone enter the amniotic fluid in the womb. Chronic or excessive amounts of stress hormone may accelerate the growth of a fetus, potentially raising the risk of premature birth and lack of development in vital organs.

**Quick Tips to Reduce Stress**

You cannot always avoid stressful situations. The trick is to take small steps to manage short-term stress so it does not develop into chronic stress, which can have a negative effect on your baby’s development.

Here are some ways you can start managing stress to protect yourself and your baby:

- Go on daily walks outdoors.
- Meditate.
- Prioritize good nutrition and exercise.
- Reach out to a support system.
- Seek professional help for baby blues feelings that don’t resolve after two weeks.

The women’s mental health specialists at University of Maryland Medical Center help new moms navigate postpartum depression and anxiety. Call 410-328-6091 for an appointment.

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INSIDE THE SURGICAL OFFERINGS AT UNIVERSITY OF MARYLAND MEDICAL CENTER MIDTOWN CAMPUS

STEP INSIDE THE University of Maryland Medical Center Midtown Campus for surgery, and you realize something is different. The environment is welcoming, and the people are friendly. You feel like family. This isn’t an accident.

Everyone at UMMC Midtown Campus seeks to view the patient experience through your eyes. From the moment you walk through...
the door until you head home following surgery, we treat you like a neighbor. Because that’s what you are. “Our focus is on our patients, and we do everything we can to ensure they have the right treatment in the most comfortable and accessible way possible,” said Michael Lilly, MD, professor of surgery at University of Maryland School of Medicine and chief of the Department of Surgery at UMMC Midtown Campus. “We treat every patient as a person, not as something coming down an assembly line, and our patients appreciate that.”

THE RANGE OF SERVICES

Whether injury or illness causes you to require surgery, UMMC Midtown Campus is here to help. With caring surgeons who have years of experience and expertise, our team handles a growing variety of surgical needs.

“We’ve expanded our expertise to include colorectal, surgical oncology and more,” said Jonathan Pearl, MD, associate professor of surgery at University of Maryland School of Medicine and head of General Surgery at UMMC Midtown Campus. “Broadening our offerings helps us better serve our community and allows people to get care here rather than traveling out of town.” Common conditions treated surgically at UMMC Midtown Campus include:

- Appendicitis
- Bone fractures
- Deteriorated joints
- Hearing and balance issues
- Hernias
- Kidney disease
- Peripheral artery disease
- Uterine fibroids

YOU’RE IN THE DRIVER’S SEAT

At UMMC Midtown Campus, our multidisciplinary team goes out of its way to help you make informed decisions. We want you to be confident in the care you receive, so we carefully lay out all your options before you head to the operating room.

If you’re a candidate for a less invasive therapy, we work with you to make it happen. In the event surgery is the best or only choice, we explain your procedure and answer any questions you may have.

Depending on the severity and stage of your condition, you may have multiple surgical options. We explain these in detail so you feel empowered. As the driver of your health care, you even have control over which procedure you choose.

CARING FOR PEOPLE WITH ADVANCED TECHNOLOGY

At UMMC Midtown Campus, a number of new advances enhance patient care. Virtual medicine (telemedicine) makes it possible to consult with providers from the comfort of your home. Since the arrival of COVID-19, this has become more important than ever. But telehealth isn’t the only technology we use.

Inside the operating room, an array of advances makes it easier for surgeons to do their jobs with greater precision. One of these is minimally invasive robotic technology. Guided by surgeons, this advanced technology provides high-resolution images that make more precise procedures possible. Greater precision leads to smaller incisions, reduced blood loss during surgery and faster recovery. Thanks to this robot and other advances, surgeries that once required a long hospital stay can now be performed on an outpatient basis.

Why put such technology in the operating room? For you.

“Robotic-assisted surgery is exciting because it helps us meet our mission,” said Wanda Walker Hodges, CRNA, director of Perioperative Services at UMMC Midtown Campus. “We want all our patients to have a positive experience when they come to us, and this advance helps us do just that.”

To learn more about surgical services offered at UMMC Midtown Campus, call 410-225-8000.

ANOTHER HAPPY ENDING

In 2012, Montgomery County paramedic and firefighter Bill Phelps was miserable. He was sweating excessively, felt nauseated and had terrible headaches. A local provider diagnosed him with Lyme disease.

A week later, Phelps’ Lyme disease developed into Bell’s palsy, a condition that causes weakness or paralysis on one side of the face. While doctors said it should go away in a few months, it stuck around. Then it grew worse.

When Phelps chewed food or opened his mouth wide, one eye closed. And he could smile only on one side of his face.

“I wanted another opinion,” said Phelps’ wife, Sara Phelps. That’s when they turned to University of Maryland Medical Center Midtown Campus.

Through testing, it was determined that Phelps’ Lyme disease hadn’t just caused Bell’s palsy. It had also caused synkinesis (involuntary muscle movement), a condition that wouldn’t go away without treatment.

Botox was prescribed and, for three years, offered some relief. However, it had to be administered regularly. So in 2020, the Phelpses decided it was time for a permanent, surgical solution.

In the operating room, Kalpesh Tarun Vakharia, MD, associate professor of surgery and chief of facial plastics and reconstructive surgery, got to work. Slowly and meticulously, Dr. Vakharia located and repaired damaged nerves. The procedure lasted six and a half hours, but the results will last a lifetime.

“After eight years, we didn’t think Bill would ever smile again,” Mrs. Phelps said. “When I saw him in recovery and both sides of his mouth were moving, I asked if he could smile, and he did. It was a pretty emotional moment, and it’s all thanks to the wonderful team at UMMC Midtown Campus.”
Don’t Delay

HEALTH CARE

AT-HOME CARE DOES NOT REPLACE VISITS WITH YOUR DOCTOR.

IF YOU WERE recently sick or injured, you may have skipped the hospital visit out of fear of becoming ill with COVID-19. You may have even attempted to manage the illness alone. By June 2020, as the Centers for Disease Control and Prevention discovered, approximately 41% of adults in the United States had delayed medical care due to fears of COVID-19.

However, hospitals and clinics are not a common source of spreading the virus. In fact, most facilities have strict measures in place to prevent the spread within their walls. You may be more likely to get COVID-19 from a crowded grocery store or eating out with friends.

Last year, emergency visits for life-threatening conditions such as heart attack and stroke declined, while deaths unrelated to COVID-19 increased. Delaying medical care can increase your risk of death from an otherwise preventable or treatable health condition.

SELF-CARE IS NOT MEDICAL CARE
Following self-care strategies to stay healthy during a pandemic is important. Eating healthy, getting enough exercise and reducing stress are helpful to prevent disease. However, these healthy habits don’t replace regular health care from a trained provider. The Internet can only tell you so much based on your symptoms alone, and administering your own care can be dangerous. Trust that your health care team has your best interest and safety in mind.

People should seek medical care as normal. Don’t skip:
• Annual checkups
• Emergency care for life-threatening conditions, such as uncontrolled bleeding or heart attack
• Mental health evaluations
• Necessary screenings, such as colonoscopies or mammograms
• Regular visits for chronic conditions
• Treatment for injuries, such as sprains, fractures or concussion
• Vaccinations

The team at University of Maryland Medical Center Midtown Campus has done their part to keep you safe at all health service locations. UMMC Midtown Campus has implemented guidelines for you to avoid a potential coronavirus infection at your in-person visit.

ADDRESSING COMMON CONCERNS

I’M WORRIED ABOUT BEING AROUND COVID-19 PATIENTS.
Patients with COVID-19 and COVID-19-related symptoms are treated in separate areas of the hospital.

I’M WORRIED I WON’T REMEMBER UPDATED HOSPITAL PROTOCOLS.
Before you come in for your appointment, a staff member will update you on new safety guidelines.

I’M TRYING TO RELIEVE THE BURDEN ON HEALTH CARE PROFESSIONALS.
Your kindness is appreciated. University of Maryland Medical Center Midtown Campus currently has the staff capacity to treat all patients. Feel free to come in for your regular appointments.

I DON’T WANT TO DELAY CARE BUT AM EXPERIENCING COVID-19 SYMPTOMS.
Call your regular physician or our 24/7 Nurse Call Line if you think you may have COVID-19. You’ll be able to discuss symptoms and follow the provider’s instructions. If you are quarantining and need non-urgent medical care, you can set up a virtual telehealth appointment with a physician by logging into MyPortfolio.

To learn more about what University of Maryland Medical Center is doing to keep you safe, visit umms.org/midtown/coronavirus.
WOMEN AND ALZHEIMER’S
THE SILENT KILLER

Two-thirds of the 5 million Americans with Alzheimer’s disease are women.

The greater incidence of Alzheimer’s disease in women has long been a medical puzzle, but researchers seem to be getting closer to identifying reasons for the disparity. Differences related to hormones and brain glucose metabolism may both be factors.

A 2020 National Institute on Aging study found that brain cells may demonstrate problems metabolizing glucose for Alzheimer’s to advance. The scientists also found that men’s brain cells adapted better to the metabolic shift than those of women.

Another recent study found that menopause was the strongest predictor of brain changes that can evolve into Alzheimer’s disease. Another predictor was a history of hysterectomy or thyroid disease. Women who had taken hormone replacement therapy were less likely to show the brain changes.

While the study does not mean that menopause causes Alzheimer’s disease—otherwise every older woman would have it—it does seem to indicate that declining estrogen levels negatively affect the brain.

TAKE ACTION AGAINST UNCONTROLLED BLOOD PRESSURE.

High blood pressure, also called hypertension, harms your heart by increasing your risk of heart failure, heart attack and stroke. Recent research published in JAMA surveyed more than 50,000 adults and found that rates of high blood pressure have increased in recent years while the number of patients seeking treatment for the condition decreased. Of the 18,000 patients surveyed with high blood pressure, only 44% were actively managing the condition.

REVERSE YOUR RISK
Hypertension is a risk factor for heart disease that you can control. Here are three ways to start:

1. Check your numbers. Many adults don’t know they have high blood pressure until it’s too late. Monitoring your blood pressure at home alerts you and your physician to any potential problems and indicates if treatment is working.

2. Commit to lifestyle changes. Limiting alcohol consumption, getting enough exercise, managing stress levels and maintaining a healthy weight can all help lower your blood pressure.

3. See a provider. Adults with hypertension who had a regular health care provider were more likely to manage their blood pressure. Physicians may prescribe medication and provide guidance on ways to stay within a healthier blood pressure range.

IF YOU’RE DIABETIC, tracking your blood sugar and your blood pressure are especially critical if you drink alcohol.

Studies have long shown that heavy drinkers, whether or not they have diabetes, have a higher risk of heart disease. But a 2020 study in the Journal of the American Heart Association found that even moderate drinkers with Type 2 diabetes—who had eight to 14 drinks a week—increased their chances of getting hypertension, or high blood pressure, by more than 60%. Other studies have shown that moderate drinking not only affects your blood sugar but can also cause impotence and peripheral neuropathy.

If you have diabetes, your alcohol consumption—whether you’re a man or a woman—should not be higher than one drink a day, which is already what the Centers for Disease Control and Prevention recommends for all healthy women. If you find yourself unable to stick to this limit, you should discuss your alcohol use with your doctor.

TOO MUCH ALCOHOL CAN RAISE YOUR BLOOD PRESSURE AND HURT YOUR HEART.

THE SILENT KILLER

Want to talk with a physician about ways to reduce your heart disease risk or better manage high blood pressure? Call 410-225-8452 or visit ummidtown.org/heart.
MITRAL VALVE REGURGITATION is a common but serious heart condition. While a healthy mitral valve will open and close with each heartbeat, a patient with mitral valve regurgitation has a valve that doesn’t close entirely. Every time the heart pumps, blood flows backwards from the heart’s lower chamber into its upper chamber. This makes the heart work inefficiently. Without proper treatment, it can lead to heart failure.

The traditional way to treat mitral valve regurgitation is to replace the damaged valve through open-heart surgery. But for a patient with complex health conditions, undergoing such an invasive procedure may not be safe. This is what makes the minimally invasive HARPOON mitral valve repair system so revolutionary. Physicians may soon have this option to treat mitral valve regurgitation in a patient whose frail condition or complex health concerns may have prevented them from receiving treatment at all.

INNOVATIVE RESEARCH IN ACTION

Currently designated an investigational clinical device, the HARPOON system was developed by research clinicians at the University of Maryland School of Medicine (UMSOM). In December 2020, it was used as part of the RESTORE clinical trial sponsored by Edwards Lifesciences on a patient at the University of Maryland Heart & Vascular Center (UM HVC), located at the University of Maryland Medical Center (UMMC) in Baltimore. The device operates in stark contrast to traditional mitral valve replacement surgery.

“Currently, when the valve is replaced through surgery, the doctor needs to make a large cut in the patient’s chest, open the ribcage, and put the patient on a cardiopulmonary bypass machine,” said Murtaza Dawood, MD, Assistant Professor of Surgery at UMSOM and a cardiac surgeon at UM HVC. “A cardiopulmonary bypass machine takes over the heart and lungs’ functions and supplies blood and oxygen to the body. The surgeon can then operate while the heart isn’t beating.”

Using the HARPOON device, the surgeon reaches the patient’s heart through a minimally invasive incision in the left chest and repairs the leaky valve. (See “How the Harpoon System Works” to learn more.)

PATIENTS WITH SEVERE HEART PROBLEMS CAN ACCESS ADVANCED CARE, INCLUDING LEADING-EDGE RESEARCH AND INNOVATIVE PROCEDURES, THROUGH THE UNIVERSITY OF MARYLAND MEDICAL SYSTEM.

A Higher LEVEL OF HEART CARE

Since the heart is beating throughout the operation, the mitral valve repair is adjusted in real time, allowing us to achieve the perfect result.” — MURTAZA DAWOOD, MD, ASSISTANT PROFESSOR OF SURGERY AT UNIVERSITY OF MARYLAND SCHOOL OF MEDICINE

“When a patient’s mitral valve is healthy, two separate clusters of cords limit the movement of the valve flaps when the heart squeezes or contracts,” Dr. Dawood said. “Those flaps, or leaflets, keep the blood from flowing backward. When a patient’s cords stretch or break, mitral valve regurgitation results. Mitral valve repair replaces those natural cords with artificial ones to help the mitral valve remain closed during contraction.”

The HARPOON system is designed to allow the surgery to be performed while the patient’s heart is still beating, with no need for a cardiopulmonary bypass machine. When the heart remains active throughout the operation, the surgeon can make adjustments in real time.

“Repairing the mitral valve is the most important factor in determining a patient’s long-term prognosis,” Dr. Dawood said. “Those benefits increase when surgeons can repair mitral valves without the potential health risks involved in open-heart surgery.”

HOW THE HARPOON SYSTEM WORKS

Using image-guided technology, the surgeon inserts the device into the heart near the leaky mitral valve. The device uses a specially designed needle that makes a tiny hole to send new polymer cord material through the leaflet. The needle then withdraws the cord and secures it to tighten and close the valve. Several cords may be repaired in this manner to help the mitral valve function properly again.
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Continued on page 12

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THE WAY OF THE FUTURE
The HARPOON device is one of more than 40 clinical trials available to cardiovascular patients at UM HVC at UMMC. The academic flagship of the University of Maryland Medical System, UMMC is driving innovation to provide advanced treatments for serious health conditions.

“Our cardiovascular specialists are dedicated to advancing patient care through a variety of novel methods and techniques,” said Dr. Dawood. “By participating in clinical trials, we hope to develop new technologies to provide our patients with safe, effective treatments.”

Clinical trials are a vital part of furthering medical research. UM HVC cardiac surgeons have participated in numerous clinical trials that include new minimally invasive surgeries, new devices and new ways to treat valve disease.

The UM Heart & Vascular Center has also been a clinical trial site for the MitraClip, another minimally invasive procedure developed to potentially repair a damaged mitral valve for patients who are not good candidates for traditional open-heart surgery. At this point, the MitraClip has been approved for two indications, with an extension for a third indication now being studied. These clinical trials are a necessary step to receive approval from the U.S. Food & Drug Administration.

Patients who enroll in clinical trials have access to groundbreaking procedures before they are available nationwide. Participants may also take pride in being able to help further medical research and identify new ways to treat heart disease and other conditions.

Minimally invasive surgeries offer multiple benefits for patients, among them less time in surgery, shorter hospital stays, faster recovery time and reduced pain.

WHO QUALIFIES FOR THE RESTORE CLINICAL TRIAL?
Possible candidates have been diagnosed with severe degenerative mitral valve regurgitation and meet other specific eligibility criteria.

Those who have had prior heart valve repair or replacement surgery or are scheduled for a cardiac or peripheral vascular procedure are among those who do not qualify.

To learn more about the RESTORE clinical trial, call 410-328-8209.

Learn more about UMMC’s advanced heart and vascular program and specialists at umm.edu/heart.

Studies of the HARPOON device are funded by Edwards Lifesciences (IDE G200067). The device inventor and three others on the research team report ownership of stock and/or options to purchase stock in Harpoon Medical. At the present time, the U.S. Food & Drug Administration has not approved the HARPOON device for patients in the United States. Limited by federal law to investigational use.

IS VASCULAR DISEASE THE SAME AS Heart Disease?
WE ANSWER A COMMON QUESTION ABOUT ISSUES THAT AFFECT THE HEART AND VASCULAR SYSTEM.

A LOT OF terms are used to describe diseases of the heart, and they can be confusing.

Cardiovascular disease is a broad term that refers to all of the diseases that affect the heart or blood vessels. Cardiovascular disease can refer to a number of conditions such as peripheral artery disease (PAD), stroke, high blood pressure or heart disease. Vascular disease refers to conditions that affect the blood vessels.

Heart disease is any kind of disease that affects the heart’s structure and function. Heart disease is the leading cause of death for both men and women in the United States. While risk factors and age are uncontrollable, there’s a lot you can do for your health, including stopping smoking, staying active, eating healthy and keeping up with wellness visits so your doctor can monitor your blood pressure, cholesterol and blood sugar.

Regardless of the type of cardiovascular disease, they all have common risk factors which include:

- Being overweight or obese
- Family history
- High blood pressure
- High cholesterol
- Lack of physical activity
- Smoking

Want to talk with a physician about ways to reduce your heart disease risk or better manage high blood pressure? Call 410-225-8452 or visit umms.org/ummce/health-services/heart-vascular to learn more about UMMS heart and vascular services and specialists.
Where Heart Problems Happen

The heart is resilient, but it can also be sensitive to injury and change. A variety of problems may affect this hard-working muscle. Let’s explore some of them and where they occur.

**Coronary Arteries**
These blood vessels bring blood into the heart after the blood has picked up oxygen in the lungs. Over time, plaque can accumulate in the arteries’ walls, causing the blood vessels to narrow and increasing the risk of a heart attack.

**Atria**
These are the heart’s two upper chambers, which pump blood out of the heart. Atrial fibrillation—one of the most common types of arrhythmia, or irregular heartbeat—occurs in the atria. Also known as AFib, this condition causes the heart to beat abnormally fast and can increase your risk for stroke.

**Ventricles**
These are the heart’s two lower chambers, which are responsible for maintaining blood flow. Arrhythmias can develop in the ventricles, including ventricular tachycardia—a fast heartbeat—and ventricular fibrillation, which is an erratic heart rhythm and, potentially, a medical emergency.

**Heart Valves**
Four valves keep blood flowing on a one-way path through the heart. Problems with blood flow can occur if the valves weaken and allow blood to leak backward or don’t open or close properly.

12.1% of adults in the United States are diagnosed with heart disease

—From the Centers for Disease Control and Prevention National Center for Health Statistics
Common Myths About QUITTING SMOKING

LEARN MORE ABOUT THINGS YOU MAY HAVE HEARD THAT MAY NOT BE TRUE.

THE TOBACCO HEALTH ASSESSMENT & TREATMENT CLINIC (THAT Program) at the University of Maryland Center for Pulmonary Health, located at the University of Maryland Medical Center Midtown Campus, works with adults who are interested in stopping smoking. The team of tobacco treatment experts works closely with each patient on a case-by-case basis to create a customized treatment plan that works best for them.

“It can be hard to accept help with stopping smoking,” said Janaki Deepak, MD, a pulmonologist and assistant professor of medicine and director of the THAT Program. “But nicotine addiction is just like any chronic condition—such as diabetes or asthma—that needs treatment.”

We interviewed Dr. Deepak about several common myths concerning stopping smoking.

MYTH: IT’S TOO LATE FOR ME TO QUIT. THE DAMAGE IS ALREADY DONE.
It is never too late! Stopping smoking helps you feel better, even if you already have smoking-related conditions. It also makes your treatments work better. Stopping smoking is an achievable goal when you have the right tools: medicines and coaching.

MYTH: LIGHT CIGARETTES ARE LESS TOXIC.
That is a story made up by greedy cigarette companies who want you to be addicted. Light cigarettes may actually be MORE toxic because you need to take deeper breaths to get the nicotine you crave.

MYTH: SMOKING HELPS TO RELIEVE STRESS, SO QUITTING WILL ACTUALLY MAKE ME MORE STRESSED.
Nicotine changes your brain to make you feel unsafe if you are not smoking. Since it is hard to quit “cold turkey,” we recommend using FDA-approved medicines to trick your brain into thinking it’s getting nicotine. These medicines are safe and help you with the cravings. Many people never feel ready to stop smoking, and that is OK! Thinking about quitting creates stress, and stress leads to more smoking. Do not focus on quitting—focus on taking the medicines correctly.

MYTH: THE MEDICATIONS TO STOP SMOKING ARE EXPENSIVE AND DON’T ACTUALLY WORK.
Studies show that the best way to stop smoking is with help from medicines and coaching. Many people think that you have to stop smoking in order to start these medicines, but that is incorrect. When taken correctly, the medicines will help you not want to smoke.

If a medicine is not covered by your insurance, there are programs to get them for free. A great benefit of the THAT Program is that a tobacco treatment expert can help find a plan that works for you.

To learn more or schedule a virtual or in-person appointment, please call 410-328-8141.
COMING SOON: OUTPATIENT TOWER

We are very excited about the progress that has been made on the Midtown Campus Outpatient Tower that will open this fall. This new facility will enhance our ability to continue providing high-quality primary care, as well as specialty care to those with diabetes, asthma, obesity, HIV and cardiovascular, kidney and lung diseases.

To learn more about the services offered, please visit ummidtown.org/outpatienttower.

GIVING BACK TO THE COMMUNITY:

UNIVERSITY WAY CAMPAIGN

During our month-long virtual drive in December, the University of Maryland Medical Center and University of Maryland Midtown Campus raised nearly $80,000 for Marylanders experiencing hardships. The United Way of Central Maryland can now provide childcare services, education assistance, housing assistance and more to Baltimore residents.

ANNUAL NUTRITION MONTH FOOD DRIVE

Thank you to all staff who participated in our 2021 Nutrition Month Food Drive in March. We are happy to announce that we have raised over $7,500 for food-insecure Marylanders. All funds were donated to Maryland Food Bank, a non-profit organization serving as a safety net for people who struggle to get enough healthy food, especially during times of crisis and uncertainty.

As we continue to address the COVID-19 outbreak, we hope that our donation will provide the Maryland Food Bank with the additional resources needed to support the influx of families who look to the organization for assistance.

BLOOD DRIVE

To help the Red Cross overcome a severe blood shortage, University of Maryland Medical Center will host blood drives in the coming months. You can sign up today by going to redcrossblood.org and typing in the sponsor code: UMMS.

UMMC MIDTOWN CAMPUS RECEIVED AN ‘A’ SAFETY GRADE AWARD

The University of Maryland Medical Center Midtown Campus has been awarded an ‘A’ in the Spring 2021 Leapfrog Hospital Safety Grade, a national distinction recognizing UMMC Midtown Campus’ achievements protecting patients from harm and providing safer health care.

“We are extremely pleased to once again achieve The Leapfrog Group’s highest safety grade,” said Alison G. Brown, MPH, BSN, president of the UMMC Midtown Campus. “This national award reflects the tremendous dedication and commitment of our doctors, nurses and other team members to provide the highest-quality medical care to our patients and to keep them safe—even as we continue to cope with the challenges of the COVID-19 pandemic.”
POP QUIZ:
When was your child’s last checkup?

ummidtown.org/StayUpdated