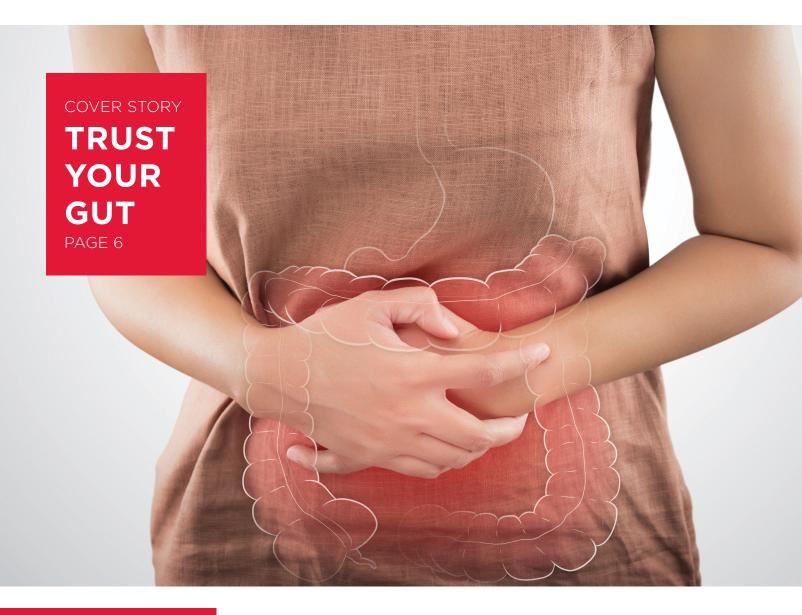
MARYLAND'S

HEALTH MATTERS



WINTER 2024

ACADEMIC MEDICINE AT WORK NOT A STROKE, A WAKE-UP CALL: A NETWORK OF CARE RESTORED A YOUNG MAN'S BRIGHT FUTURE PAGE 10 **HEART DISEASE**PREVENTION IN
4 STEPS

PAGE 15





TRUST YOUR GUT

The connections between digestive health and overall health run deep.



HEART DISEASE PREVENTION IN 4 STEPS

Your heart is your most important muscle. Keep it beating strong with these tips.

ACADEMIC MEDICINE AT WORK:

Not a Stroke, A Wake-Up Call—Emergency neurosurgery was the first step to a bright future.



STAY CONNECTED WITH

UMMC MIDTOWN CAMPUS

BERT O'MALLEY, MD

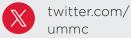
President and CEO University of Maryland Medical Center

Maryland's Health Matters is published by the Corporate
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Spotlighton

REBECCA A. **ALTMAN, RN, MBA**

UNIVERSITY OF MARYLAND MEDICAL CENTER MIDTOWN CAMPUS WELCOMES REBECCA A. ALTMAN. RN, MBA, AS ITS NEW SENIOR VICE PRESIDENT AND CHIEF ADMINISTRATION OFFICER.



Rebecca A. Altman, RN, MBA

IN HER ROLE as chief administration officer. Altman will lead the overall performance of UMMC Midtown Campus, building on the integration between UMMC's two locations as "one medical center, two campuses." Altman will be at the helm of community health initiatives and West Baltimore partnerships. She will focus on increasing efficiency and access to outpatient care and services such as diabetes prevention and management, primary care and preventive health, as well as treatment for substance use disorders and behavioral health.

Altman has more than 24 years of experience in health care management and health care reform. Her areas of expertise include health care policy and population health management. She is an advisor to the state's Health Equity Resource Communities Advisory Committee. The Daily Record recognized Altman's dedication to health care equity and her leadership, naming her one of Maryland's "Top 100 Women" in 2021. Altman, a registered nurse, earned her MBA from The George Washington University and her BA from Franklin & Marshall College.

With Altman's extensive expertise and demonstrated commitment to improving health care delivery and equity, UMMC Midtown Campus will achieve new milestones and deliver exceptional care under her leadership.

GET TO KNOW REBECCA A. ALTMAN, RN, MBA

WHY DID YOU DECIDE **TO PURSUE A CAREER** IN HEALTH CARE?

Growing up in Pittsburgh, I experienced a major accident that required me to be hospitalized for a period of time. I was impressed by the clinical team who helped me heal and became interested in the multifaceted aspects of health care. I later became a critical care nurse working on the open-heart unit and found that I wanted to impact health care from a larger, community and global perspective, hence my interest in health care policy and delivery.

WHAT DO YOU LIKE TO DO OUTSIDE OF **WORK?**

I like to spend time with my family. I love outdoor activities including running and hiking. I'm an avid reader. I typically read two books at the same time: one educational and the other purely entertainment. Historical books are my favorite genre.

WHAT IS YOUR VISION FOR UMMC MIDTOWN **CAMPUS?**

My vision for UMMC Midtown Campus includes optimizing current programs and services to meet the needs of patients wherever they are on their journey. I am exploring opportunities to bring academic medicine to the West Baltimore community through partnerships, home health visits and clinical sites embedded in the neighborhoods we serve. My vision also includes educating the future generation of health care providers about social determinants of health and their impact on one's health. As clinicians, we aren't just focused on the clinical needs but the whole person. My focus aligns with the medical system's vision to provide a better state of care, ensuring that across both UMMC campuses, patients get the right care, at the right location, at the right time and in the right setting.

Moving from Pediatrics to ADULT CARE

FROM YOUR FIRST MOMENTS WITH YOUR LITTLE ONE. YOU STRIVE TO KEEP THEM HAPPY AND HEALTHY. THOUGH THEY QUICKLY OUTGROW THE SAFETY OF YOUR ARMS, YOU CAN GUIDE THEM TOWARD A LIFFTIME OF GOOD HEALTH.

PEDIATRICIANS PROVIDE specialized care from birth through 21. While many youth transition to adult care earlier, it can be challenging to know when your child is ready. Thankfully, there are ways to tell the time is right to transition your child to adult care and skills you can teach your child to ensure they're prepared to take more responsibility for their health.

HOW TO KNOW WHEN IT'S TIME

Some teens want to stay with their pediatrician as long as they can. Others feel awkward asking their pediatrician about the changes that come with adolescence, leading to an earlier switch.

Before transitioning to adult care, your teen needs to learn several skills, including how to:

- Answer questions about personal and family health history
- Keep track of insurance cards and other essential documents
- Know what medications they take and why
- Schedule appointments

 Understand what they can do to manage any chronic health conditions, such as asthma or Type 1 diabetes Model these skills for your child from an early age. If you have questions, your child's pediatrician can provide answers and support.

MAKING THE TRANSITION

Your child's pediatrician will work with your teen to create an individualized transition plan. They can also recommend adult care providers who may be a good fit. Even if your teen's first adult care visit feels a bit stressful, with proper planning, you can both feel confident they have the tools needed for success.



If you'd like to learn more about pediatric services or transitioning your child to adult primary care, the experts at University of Maryland Pediatrics at Midtown are here to help. Visit ummidtown.org/pediatrics.



HEALTH CARE TRANSITION STAGES

Transitioning from pediatric to adult primary care begins long before your child's last pediatrician appointment. When children become preteens, it's time to start the process.

- 1. Help preteens build awareness.
 - Encourage your child to ask questions and speak up during appointments.
 - Teach them about their diagnoses and medications.
- 2. Encourage self-sufficiency in younger teens.
 - Show younger teens how to make an appointment and refill prescriptions. Let them practice with you beside them.
 - Wait in the waiting area for a portion of your child's pediatrician visit.
- 3. Support older teens' independence.
 - Encourage older teens to create a transition plan with their pediatrician.



KIM-CHI THI QUANG, CRNP

IT'S IMPORTANT THAT YOU find a primary care provider with whom you can build a relationship. Your primary care provider will help you maintain your health and decrease the risk of life-long medical conditions. Meet Kim-Chi Quang, one of the primary care providers at University of Maryland Midtown Health Center.

WHY DID YOU DECIDE TO BECOME A PRIMARY CARE PROVIDER?

I chose to pursue a career in medicine due to my fascination with science and the human body along with my desire to help others. I chose to become a primary care provider because I am able to provide comprehensive care that is individualized to each patient, while at the same time, build long-lasting relationships.

WHAT TYPES OF CONDITIONS DO YOUR PATIENTS HAVE. AND WHAT KINDS OF **PATIENTS DO YOU SEE?**

At Midtown Health Center, we see patients age 18 and older. We provide care for a wide range of medical conditions from the common cold or flu to life-threatening conditions that require more attention. In addition to preventive care, other conditions we often treat include:

- High blood pressure
- High cholesterol
- Diabetes
- Obesity
- Mental health (depression, anxiety)
- Musculoskeletal disorders

WHERE DID YOU STUDY AND RECEIVE YOUR DEGREE?

I earned my undergraduate degree from Georgetown University. I received my Master of Science in Nursing from The George Washington University School of Medicine and Health Sciences and soon after became a board-certified nurse practitioner. I have been practicing medicine for close to 10 years. I am also a member of the American Association of Nurse Practitioners (AANP).

WHAT PASSIONS OR HOBBIES DO YOU HAVE OUTSIDE OF WORK?

Outside of work, I like to spend time with my husband and young daughter. We love to explore parks and beaches. This summer, we went to several state parks and did a lot of fishing and crabbing. Most recently, my daughter has been into finding "wormies," which she calls her friends, so we spend a lot of time outside digging for "wormies."

WHAT IS THE BEST ADVICE YOU WOULD **GIVE TO YOUR PATIENTS?**

The best advice I can give to patients is to be proactive about their health. Build a good relationship with your primary care provider and get regular checkups and screenings. Preventive care is crucial in reducing the risk of developing serious health conditions. Preventive care focuses on maintaining a person's overall health and well-being.



To schedule an appointment with Kim-Chi Quang, visit ummidtown.org/primarycare or call 410-856-3660.

What's the difference between a medical doctor (MD) and certified registered nurse practitioner (CRNP)? Listen to this podcast to learn about advanced practice providers.





THE CONNECTIONS BETWEEN DIGESTIVE HEALTH AND OVERALL HEALTH RUN DEEP.

GUT HEALTH IS HEALTH. For Fairfax, Virginia, resident Fatemeh Ramezan, 69, that fact became apparent when her digestive symptoms turned out to be signs of something more serious. For years, Fatemeh lived with acid reflux symptoms that affected her diet and quality of life.

"She couldn't eat anything with spice," said Sam Ramezan, 39, Fatemeh's daughter. "Even a little pepper would upset her. She couldn't have anything acidic, and most of our foods contain tomato paste, so it was a total change to her diet. It really brought her down emotionally."

In February 2023, an upper endoscopy, which uses a flexible instrument with a camera to look for problems in the esophagus, showed Fatemeh had esophageal cancer. The diagnosis was especially troubling because her father had died of the disease. A breast cancer survivor, Fatemeh sank into sadness at the thought of having to face cancer again.

Taking out the tumor using the endoscope for surgery—a minimally invasive approach instead of surgery through the chest—offered hope. The Ramezans quickly arranged to see the nearest physician performing the procedure: Raymond Kim, MD, associate professor of medicine in the Division of Gastroenterology and Hepatology at the University of Maryland School of Medicine and head of the Division of Gastroenterology and Hepatology at University of Maryland Medical Center Midtown Campus.

"Over the last 10 years, there's been an evolution in endoscopic surgery," Dr. Kim said. "Fatemeh had squamous cell esophageal cancer that, in the past, we could only remove with surgery, such as an esophagectomy, which removes part or all of the esophagus. Now, however, we can perform endoscopic surgery instead."

Endoscopic surgery is quicker, has a shorter recovery time and causes far fewer complications than esophagectomy, according to Dr. Kim, who performed the procedure on Fatemeh in March 2023. He removed all the cancer, and Fatemeh went home the next day. She remains cancer-free.

After a follow-up procedure a few months ago to improve her swallowing ability, Fatemeh is now able to eat spicy and acidic foods in small amounts. Having greater dietary flexibility means a lot to her. Sam believes Dr. Kim saved and improved her mother's life.

"I live for my family, and my mother is the pillar of our family," Sam said. "Seeing her happy and healthy is all I could ever want in life. It's a wonderful feeling."

TAKING GUT HEALTH TO HEART

For Sam, one of the takeaways from her mother's experience with esophageal cancer is that gut health is more important than she realized. Scientists continue to learn more about how digestive system processes affect organs, patients' risk for certain diseases and other aspects of health, including heart health. A 2022 study, for example, found that high blood levels of a particular metabolite, or chemical, produced

by microorganisms in the gut after you eat red meat, may help account for why eating these foods increases the risk of cardiovascular disease.

"Studies have shown that metabolites affect heart health," said Guofeng Xie, MBBS, PhD, associate professor of medicine in the Division of Gastroenterology and Hepatology at the University of Maryland School of Medicine and director of the Gastroenterology Motility Program at University of Maryland Digestive Health Center. "If patients have an imbalance of bacteria in their gut, leading to greater production and a higher concentration of certain metabolites, they may have an increased risk for heart attack, stroke and hardening of the arteries."

Digestive Health Center gastroenterologists work closely with UMMC cardiologists to help prevent digestive problems in patients receiving blood-thinning medications to treat heart disease.

"These medicines can cause symptoms such as dyspepsia, which is indigestion or abdominal discomfort, and bleeding from the digestive tract," Dr. Kim said. "We collaborate with cardiologists because we need to coordinate care for the most appropriate treatments."

LOOKING OUT FOR THE LIVER

Members of the same academic division at the University of Maryland School of Medicine work closely to care for patients. These include gastroenterologists and hepatologists who specialize in treating liver diseases. As one of your



Raymond Kim, MD, and Jennifer Moon, MSN, FNP-BC

body's most important organs, the liver is responsible for making bile, which helps you process fats and certain vitamins. The liver, like the heart, can be affected by high levels of gut metabolites.

"Imbalanced gut microorganisms can increase exposure to toxins and other metabolites from the gut, causing injury and inflammation in the liver," Dr. Xie said. "More inflammation can lead to fibrosis and cirrhosis of the liver, and liver cancer."

A high-fat diet can lead to nonalcoholic fatty liver disease, an accumulation of fat in the organ and a common reason for liver transplant, according to Dr. Kim. Hepatologists, transplant surgeons and gastroenterologists form the core of a multidisciplinary transplant team at UMMC that performs more liver transplants than any other hospital in Maryland.

DIABETES AND THE DIGESTIVE SYSTEM

Another important digestive organ, the pancreas, plays a key role in the development of Type 2 diabetes. This relationship requires close coordination between gastroenterologists and endocrinologists, specialists who care for people with diabetes.

"The pancreas produces a digestive enzyme and releases it through the pancreatic duct," Dr. Kim said. "This release of pancreatic juice with digestive enzymes mixes with digested food, which your body absorbs. The pancreas' other important function is to produce the hormone insulin. When your blood sugar level is high, insulin helps the body store sugar. If your blood sugar level is low, the pancreas produces a hormone that converts stored energy back into sugar form."

In Type 2 diabetes, Dr. Kim explained, chronic exposure to high blood sugar levels causes the pancreas to lose its ability to sense when sugar levels are elevated. High blood sugar levels can cause nerve damage to the stomach muscles that can slow the movement of food through the stomach. As a result, patients can develop stomach pain, heartburn, nausea and reduced appetite. At UMMC Midtown Campus, gastroenterologists and endocrinologists team up to manage diabetes and related digestive health conditions in one convenient location.



To listen to a podcast about digestive health and download a guide to digestive and liver disorders, visit umms.com/Gut-Podcast.

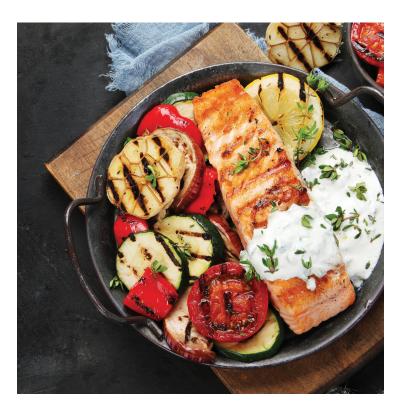


KEY TERMS

Gut microbiome—The community of bacteria and other microorganisms in your digestive tract that makes substances that enter the bloodstream and can affect your organs

Metabolites—Small molecules involved in or the by-products of metabolizing food, or turning food into energy

Upper endoscopy—A procedure in which a gastroenterologist sends a scope down the throat to look for problems in the upper digestive tract



"Diet is mostly responsible for gut health. A great example of a healthy diet is the Mediterranean diet, which features less red meat, more fiber, fruit and vegetables, and a moderate amount of fish rich in omega-3 fatty acids. This diet not only helps maintain a healthy bacterial balance in the gut but also decreases the risk of colon cancer."

-GUOFENG XIE, MBBS, PHD, ASSOCIATE PROFESSOR OF MEDICINE IN THE DIVISION OF GASTROENTEROLOGY AND HEPATOLOGY AT THE UNIVERSITY OF MARYLAND SCHOOL OF MEDICINE AND DIRECTOR OF THE GI MOTILITY PROGRAM AT THE UNIVERSITY OF MARYLAND DIGESTIVE **HEALTH CENTER**

YOU SNOOZE, YOU LOSE

WORRIED ABOUT YOUR WEIGHT? GET A GOOD NIGHT'S SLEEP.

EATING NUTRITIOUS FOODS and exercising are not the only keys to a healthy weight. Sleep also plays a significant role.

"When we don't get enough sleep, our hormones change in ways that make us crave calorie-dense foods high in sugars and fats," said Emerson M. Wickwire, PhD, professor of psychiatry and medicine at University of Maryland School of Medicine and section head of sleep medicine at the University of Maryland Medical Center Midtown Campus. "Not getting enough sleep makes us more susceptible to stress, which can also trigger unhealthy eating."

SLEEP IS GOOD MEDICINE

Adults need at least seven to eight hours of sleep per night. Studies have shown sleep can impact physical, mental and emotional functioning.

"Not sleeping well—quantity, quality and duration—can undermine your healthy weight management efforts," Wickwire said. "Maintaining a consistent sleep-wake schedule is also important. Going to bed late and sleeping in, or sleeping and waking at inconsistent times, can make it more difficult to maintain a healthy weight."





Talk to your provider about getting a good night's sleep. Visit ummidtown.org/sleep for more information about comprehensive sleep medicine or listen as Dr. Wickwire shares more insight about sleep here: umms.com/Sleep-Podcast.



→ Know Your Risk for ← LIVER DISEASE

AS MANY AS 70% OF PEOPLE with

Type 2 diabetes develop liver disease. The most common type is nonalcoholic fatty liver disease (NAFLD), which means you have fat buildup in your liver.

NAFLD often causes no symptoms, but when symptoms occur, they can include fatigue and pain in the upper right part of the stomach. While NAFLD affects up to 30% of all adults, estimates range from 50% to 90% in people who are obese.

"There are no approved medications to treat NAFLD, but the condition can be reversed in some cases," said

Kashif M. Munir, MD, professor of medicine at University of Maryland School of Medicine and medical director of the University of Maryland Center for Diabetes and Endocrinology at University of Maryland Medical Center Midtown Campus. "Lifestyle intervention and weight loss can be very helpful."

ON YOUR CASE

Dr. Munir and a multidisciplinary group of providers manage patients through a new program, which streamlines care, diagnosis and treatment of NAFLD.

"We treat many people who go undiagnosed because other providers A NONINVASIVE LIVER SCAN CAN HELP YOU LEARN ABOUT AND MANAGE YOUR RISK.

don't screen for NAFLD." Dr. Munir said. "Screening with routine blood tests is a good first step. Then, we perform a noninvasive liver scan to give us further information about your liver's condition and your risk for developing more severe liver disease."



For more information about the Fatty Liver Disease Program and other endocrinology services at the University of Maryland Center for Diabetes and Endocrinology, visit ummidtown.org/endocrinology.



A MOTA STROKE-A Make-Up Call

A NETWORK OF CARE BROUGHT KASEY TRENT FROM EMERGENCY ASSESSMENT THROUGH SPECIALIZED CEREBROVASCULAR NEUROSURGERY, RECOVERY AND INTENSE REHABILITATION TO A BRIGHT FUTURE.

KASEY TRENT, 27, has the sort of vibrant, independent life many 20-somethings crave. The Freeland, Maryland, native lives and works in San Diego, California, where he spends his free time playing sports and hanging out with friends. Given his youth, the best, it would seem, is yet to come. Two and a half years ago, however, Trent's bright future was clouded by a rare brain condition.

During the summer of 2021, not long after moving to California, Trent began experiencing strange symptoms an uncharacteristic loss of balance while snowboarding and tingling in his face, tongue and fingertips while eating a piece of cake. Something was wrong, but Trent assumed it was minor.

"I thought I was having an allergic reaction to something," he said. "When you're my age, the idea there might be an issue with your brain is the last thing vou think about."

RECEIVING A RARE DIAGNOSIS

During visits home to Maryland in November and December 2021, Trent's mother, Zhanna, could tell her son didn't feel like himself. The difference was especially apparent during the December trip. The left side of his body seemed weak, and his speech wasn't quite right.

"He was talking as if something was in his mouth," Zhanna said.

Suspecting a stroke, Zhanna took her son to the Emergency Department at University of Maryland St. Joseph Medical Center in Towson. Scans revealed something far less common than a stroke: a cavernous malformation—a tightly packed bundle of abnormal blood vessels (See page 12 for more information.) Located within Trent's brainstem, the cavernous malformation caused a bleed, and the group of vessels was so large it was putting pressure on structures within the brainstem that help regulate movement, heart rate and other vital functions.

When Mohamed A. M. Labib. MD. an assistant professor of neurosurgery at the University of Maryland School of Medicine, learned about Trent's case, he knew he was perfectly positioned to help. A cerebrovascular neurosurgeon who specializes in treating cavernous malformations of the brain, Dr. Labib contacted Zhanna and advised her to bring her son to University of Maryland Medical Center, the academic medical center of University of Maryland Medical System, in downtown Baltimore. There, he could receive the highest level of neurosurgical care. Zhanna followed Dr. Labib's advice.

MISSION: POSSIBLE

Surgery to remove the brainstem cavernous malformation was the best treatment option for Trent, but challenges abounded. Sitting at the base of the brain, the brainstem is difficult for neurosurgeons to access. Its roles in various vital functions mean any unintentional harm during surgery could be especially damaging.

"Few neurosurgeons will operate on the brainstem because of the inherent risks," Dr. Labib said.

Two factors worked in Trent's favor: his youth and Dr. Labib's specialized training. During the February 2022 surgery, Dr. Labib needed to reach Trent's brainstem while minimizing the effects of surgery on other parts of the brain. Instead of relying excessively on surgical instruments to move the cerebellum, a part of the brain that sits behind the brainstem, the team placed Trent in a sitting position for the surgery, which allowed gravity to shift the cerebellum and provide better access to the cavernous malformation.

After making an incision behind Trent's right ear, Dr. Labib used magnification to delicately navigate around key structures of the brain and reach the brainstem. Stains from the brainstem bleed and navigation confirmed he'd found the site of the cavernous malformation. Dr. Labib carefully opened a groove in the brainstem and removed the tangle of abnormal blood vessels.

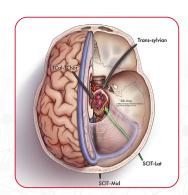
The threat of further damage was gone. Trent's tingling sensations and weakness vastly improved. Still, he faced a long road to recovery. His mother and surgeon were there for him every step of the way.

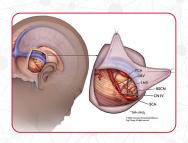
UP TO THE CHALLENGE

The brainstem cavernous malformation had taken a toll on Trent's functional abilities. During the year after his surgery, he had to relearn some of life's most basic skills, from walking to opening jars. Right from the start, he refused to accept limits.

"I don't want to hear anyone tell me I might not be able to walk again," he recalled thinking when he was still in the hospital after the operation. "Everyone knew what had happened to me and didn't want to give me false hope, but Dr. Labib was confident he could fix me."

Throughout Trent's rehabilitation, through moments of despair and doubt, Dr. Labib offered encouragement and reassurance, and Zhanna provided unwavering support. Slowly, Trent achieved small victories. Strength and muscle mass returned. He was able to pour himself a bowl of cereal and fill his dog's water bowl.







He started walking again, and walking led, eventually, to running.

Having painstakingly regained his strength and mobility, and with his cognitive abilities unaffected, Trent is once again enjoying life in California—and not taking any part of it for granted. Both he and his mother are grateful for the surgeon who helped them through some of the most difficult moments of their lives.

"Dr. Labib was amazing," Zhanna said. "He was there for me and my family, reachable and kind, and he explained everything. He's a very, very good doctor and human being."

CAVERNOUS MALFORMATIONS

A cavernous malformation is a bundle of small blood vessels called capillaries that have become irregular and dilated. Capillaries, the body's tiniest blood vessels, connect arteries and veins. Kasey Trent had a cavernous malformation in his brainstem, but these abnormal groups of blood vessels can form anywhere in the body. Here are three things to know about cavernous malformations:

- 1. Cavernous malformations in the brain and spinal cord **are the most serious.** These are the ones most likely to produce symptoms. Cavernous malformations in the brain, called cerebral cavernous malformations, can cause seizures, bleeding, headaches and more.
- 2. Cerebral cavernous malformations can run in families. Most people who develop these types of malformations don't have a family history of the condition. Some, however, inherit genetic mutations that can cause cerebral cavernous malformations from their parents.
- **3. Surgery isn't always necessary.** Some symptoms, such as seizures, are treatable with medications. Surgery may be appropriate for patients with worsening symptoms that can't be controlled with medication, but patients and surgeons should weigh the risks and benefits of the procedure.



To learn more about how UMMC is leading the way in neurosurgery, visit umm.edu/neurosurgery, or call 410-328-6034 to schedule an appointment.

Constant Headaches? FOR CONCERN

HEADACHES, ONE OF THE MOST COMMON HEALTH COMPLAINTS. CAN BE A SIGN OF A MORE SERIOUS NEUROLOGICAL CONDITION

THERE ARE MANY TYPES of headaches with different symptoms and causes. Some require medical attention, while others can be treated with over-the-counter medication or home remedies.

The most common types of headaches that cause people to seek medical care are migraines, tension-type headaches and cluster headaches.

- Migraines can be disabling and usually involve sensitivity to light and noise, nausea, and loss of appetite.
- **Tension-type headaches** are generally milder than migraines and don't cause sensitivity to light and noise.
- Cluster headaches, as the name implies, typically occur in clusters—often on a seasonal basis—and usually happen at the same time daily with severe pain behind one eye.

Stress, sleep disturbances and dietary factors are common migraine triggers. A family history of migraine is common although specific genes associated with migraine have not been identified.

Treatment options vary depending on other medical factors, the frequency and the intensity of your headache. Lifestyle modifications, such as quitting smoking, reducing or eliminating alcohol consumption, implementing a consistent sleep schedule, exercising regularly, engaging in mindfulness and meditation activities, and reducing stress can limit the number and severity of headaches. Over-the-counter pain relievers can help treat occasional headaches.

If you have any type of headaches consistently, ask your primary care physician to refer you to a headache specialist or neurologist. Seek immediate medical attention if you experience loss of vision or consciousness, have uncontrollable vomiting or if your headache lasts longer than 72 hours, with less than four hours pain-free.



To schedule an appointment with our headache specialist call 410-225-8290 or visit ummidtown.org/neurology for more information.

Driven by SYMPTOMS



WONDERING WHERE TO TURN FOR MEDICAL ATTENTION? LET YOUR SYMPTOMS BE YOUR GUIDE.

GOING TO THE right place for medical care helps ensure you get the right care at the right time. If you can wait for an appointment, your primary care provider (PCP) is your first choice. After hours, consider an urgent care clinic. For life- or limb-threatening injuries, going to an emergency department (ED) or calling 911 connects you to the specialists you need to see. Here's where a few symptoms should take you:

PCP/URGENT CARE

EMERGENCY DEPT



Happens when eating certain foods, occurs only when lying down, feels sharp, lasts only a **few seconds**, and is not accompanied by shortness of breath, vomiting or sweating

Feels like pressure or tightness in the chest, is accompanied by shortness of breath, sweating or vomiting, and may radiate to the neck, back, shoulder(s) or jaw



You're younger than 65 and hit your head or suspect you broke a bone or sprained a ligament. Those 65 or older who've hit their head should go to the ED.

Results in frequent vomiting, loss of consciousness, a bad headache that medication can't help, seizures, slurred speech, extreme pain or bone poking out of the skin



Doesn't improve with medication or makes sleep, work or daily activities difficult

Sudden and severe, and may be accompanied by confusion, difficulty speaking or walking, fever, numbness on one side of the body, or a stiff neck



If you need a primary care provider, visit **ummidtown.org/primarycare**.

UMMC IN THF

COMMUNITY

UMMC THANKSGIVING DRIVE

A special thank you to all our staff and departments who participated in the Thanksgiving Food Drive! The University of Maryland Medical Center Midtown and Downtown campuses were able to give out 957 turkeys to households in West Baltimore and four bundles of fresh produce to our partners City View at McCulloh for Thanksgiving.

BUILDING UP THE HEALTH OF THE **COMMUNITY WITH RADIO ONE**

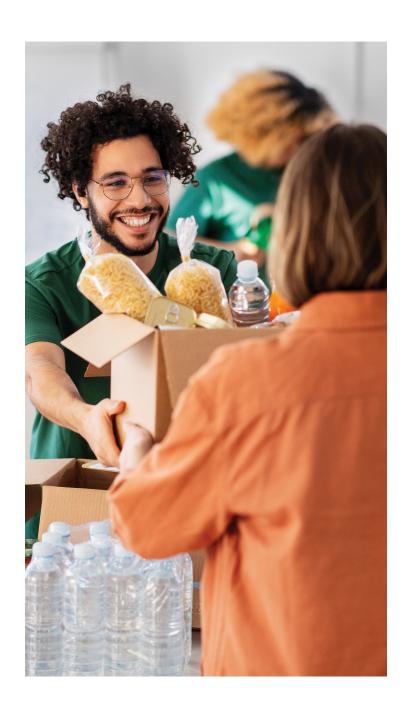
Join the University of Maryland Medical Center Midtown Campus and Radio One as we build up the health of the community through a series of virtual events that will help you on your journey to better health. Hear from experts from the University of Maryland School of Medicine, ask questions, and learn about the healthcare resources and programs available to keep you and your family healthy. Events will be livestreamed on all Radio One social media platforms.

- Staying on Top of Your Heart Health Wed., Feb. 21 7-8pm
- Tools to Prevent and Manage Ongoing **Conditions** Wed., April 24

7-8pm

SAVE THE DATE FOR THE B'MORE **HEALTHY EXPO**

Join the University of Maryland Medical System at the B'More Healthy Expo on Sat., Feb. 10. The FREE event taking place at the Baltimore Convention Center includes diabetes prevention resources, blood pressure and body mass index (BMI) screenings, fitness and exercise sessions, and more.





LIFESTYLE CHOICES FOR BETTER HEART HEALTH CAN IMPROVE YOUR MENTAL HEALTH, TOO.

PEOPLE WITH DEPRESSION, anxiety or trauma may be at higher risk for developing heart disease.

"When we're not feeling our best mentally, we often resort to health-sabotaging habits," said Stephanie Knight, MD, chief of psychiatry at University of Maryland Medical Center Midtown Campus. "For example, someone who is depressed might skip their regular exercise routine or eat fatty foods."

According to the Centers for Disease Control and Prevention, changes in the body that occur with mental health conditions also make developing heart problems more likely. People who experience a heart attack or stroke are also at higher risk for mental health conditions.

CARING FOR YOUR MIND AND HEART

Dr. Knight suggests following these tips to support both your heart and mental health:

- Eat a diet of vegetables, fruits, grains, fish, beans and nuts.
- Aim to take at least 5,000 steps per day.
- If you smoke, cut down or quit.
- Practice mindfulness techniques.

"Lasting change takes repetition," Dr. Knight said. "Be kind to yourself and start by changing one habit 30% of the time and build from there."



UMMC Midtown Campus offers a full range of programs and services to help you care for your mental and heart health, from free nutrition and exercise classes at the Community Health Education Center (CHEC) to access to cardiologists and mental health specialists. For more information or to schedule an appointment, visit ummidtown.org.



YOUR HEART IS YOUR MOST IMPORTANT MUSCLE, KEEP IT BEATING STRONG WITH THESE TIPS.

WHILE GENETICS PLAY a role in your heart health, they don't get the final say.

"There are more important things than genetics in your risk of heart disease," said Reyaz Hague, MD, assistant professor of medicine at University of Maryland School of Medicine and division chief of cardiology at University of Maryland Medical Center Midtown Campus. "Fortunately, you can address these other risk factors with lifestyle changes."

4 HEART-FRIENDLY CHANGES

To protect your heart against heart disease, Dr. Haque recommends the following lifestyle changes:

- 1. Eat right. Aim for fewer carbs and less salt and cholesterol.
- 2. Get regular exercise. Together, diet and exercise make you less likely to be obese, which helps prevent heart disease, arthritis and more. The Community Health Education Center (CHEC), located on the lower level of the Midtown Campus Outpatient Tower, offers free nutrition and exercise classes.
- **3. Stop smoking.** For help in the process, UMMC Midtown Campus offers a successful tobacco cessation program.
- 4. Manage other health conditions. Diabetes and high blood pressure increase your risk for heart disease. Schedule yearly primary care appointments and work with your primary care provider to keep these under control to better protect your heart.



Call **410-225-8301** to connect with a heart specialist at UMMC Midtown Campus or visit ummidtown.org/ heart for more information.

University of Maryland Medical Center Midtown Campus

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