

MARYLAND'S

H E A L T H  M A T T E R S™

UM ST. JOSEPH MEDICAL CENTER

**TURNING BACK
THE CLOCK**

PAGE 8

**HELPING
COMPLEX
PATIENTS
BREATHE EASIER**

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**Double
Delivery,
Double
Blessing**

**SPECIALIZED CARE FROM
UM SPINE NETWORK**

Comprehensive treatments
are available across the
state. For details, see pg. 15.

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Lia Young needed a double-lung transplant to survive, but doctors near her home in Texas couldn't perform the surgery. Thanks to the lung transplant team at the University of Maryland Medical Center, she's alive today.

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Maryland's Health Matters is published by the Marketing and Communications Department at the University of Maryland St. Joseph Medical Center. This publication is not intended to provide professional medical advice. It is to provide general health and wellness information.

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WE WOULD LIKE TO HEAR FROM YOU

Please send us your comments, information requests, change of address or opt-out requests to umsmatters@umm.edu or 7601 Osler Drive, Jordan Center, Suite 158, Towson, MD 21204. Or call **410-337-1700**.

New Physicians to Care for You

The University of Maryland St. Joseph Medical Center is pleased to have these new physicians join our staff

MAUREEN GRUNDY, MD, THE PERINATAL CENTER



Maureen Grundy, MD

Board-eligible maternal-fetal medicine specialist Maureen Grundy, MD, who is also a board-certified OB/GYN, joins UM SJMC from the Johns Hopkins

School of Medicine, where she completed a Maternal and Fetal Medicine fellowship and a residency in Gynecology and Obstetrics.

At Johns Hopkins, she was honored with an Excellence in Teaching and Mentorship award, Most Effective Teacher and Role Model award, and Bayview Hospital Big Picture award.

Dr. Grundy received her medical degree from the University of Chicago Pritzker School of Medicine. She belongs to the Society for Maternal Fetal Medicine and the American Institute of Ultrasound in Medicine and is nationally certified in electronic fetal monitoring.

The Perinatal Center, located on the second level of the medical center, can be reached at **410-337-4480**.

ARPITHA KALGHATGI, MBBS, WOMEN'S HEALTH ASSOCIATES



Arpitha Kalghatgi, MBBS

Board-certified OB/GYN Arpitha Kalghatgi, MBBS, joins Women's Health Associates, a combined nurse midwife and OB/GYN practice at UM

SJMC. Dr. Kalghatgi has been in private practice for four years.

She completed her residency in Obstetrics and Gynecology and Women's Health at the University of Medicine and Dentistry of New Jersey and her medical education at JSS Medical College, India.

Dr. Kalghatgi's awards include outstanding research paper at the Society of Maternal Fetal Medicine conference and Gold Medals for her medical school examinations. She is a North American Menopause Society-certified menopause practitioner.

Women's Health Associates is located at 7300 York Road in Towson and can be reached at **410-427-5470**.

LAWRENCE J. SNYDER, MD, INTERNAL MEDICINE



Lawrence J. Snyder, MD

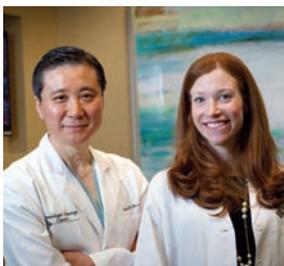
Board-certified internist Lawrence J. Snyder, MD, a member of the UM SJMC medical staff since 1989, has joined the UM SJMC Medical

Group. For the past 11 years, Dr. Snyder has been in private practice as owner of the O'Dea Medical Group in Towson.

A graduate of University of Maryland School of Medicine, he completed his internal medicine residency at University of Maryland Medical Center.

Dr. Snyder has a broad general medical practice for adults ages 18 and up. "I enjoy spending time with patients and appreciate the long-term relationships I have with them."

Dr. Snyder's office is located at 7600 Osler Drive, Suite 411, in Towson, across from the UM SJMC campus. He can be reached at **410-296-1464**.



New Collaboration with Mercy Medical Center Expands GYN Oncology Services at UM SJMC's Cancer Institute

The Cancer Institute, part of the UM Cancer Network, recently expanded its service offerings to include a GYN Oncology team of specialists, created through a collaborative partnership with Mercy Medical Center. It now provides advanced treatment options for ovarian, cervical, uterine and other reproductive system cancers. Nationally renowned gynecologic surgeon Dwight D. Im, MD, leads this newly formed team, and is joined by colleague Jennifer Ducie, MD.



Sarina's twin boys were born in July 2016.

Double Delivery, Double Blessing

Sarina Shrestha got her wish of a natural birth of twin boys with the expertise of a certified nurse midwife and a leading maternal-fetal medicine specialist experienced in breech births

Twins are not as rare as they once were. In the U.S., the twin birth rate increased 76 percent from 1980 to 2009, according to the Centers for Disease Control and Prevention. The most recent statistics, from 2014, show a record high of 33.9 twins born for every 1,000 births, with 135,336 twins born that year. Although the increase in twin births is closely connected to the success of advanced fertility treatments, Towson resident Sarina Shrestha conceived her fraternal twin boys without fertility treatments.

She and her husband were ecstatic since they already had two girls, ages 8 and 5, and hoped for a boy. On July 20, 2016, the certified nurse midwives of Women's Health Associates at University of Maryland St. Joseph Medical Center worked closely with maternal-fetal medicine specialist Judith Rossiter, MD, to ensure the safe and natural delivery of two healthy boys. Dr. Rossiter is head of UM SJMC's Perinatal Center and the Department of Obstetrics and Gynecology.

SPECIAL NURSE MIDWIFE CARE FOR THREE PREGNANCIES

A number of things made Shrestha's twin pregnancy and delivery special: Although Shrestha developed gestational diabetes with all three of her pregnancies, she had the best of both worlds for her care. She continued the personalized care that she loved with certified nurse midwife Monique Klapka, CNM, who delivered Shrestha's daughters.

Shrestha's gestational diabetes, which made her pregnancy high risk, was also carefully monitored and treated under the watchful eye of the doctors at the Perinatal Center in partnership with Klapka.

Dr. Rossiter, who is board-certified in both maternal fetal medicine and medical genetics, is an expert in high-risk pregnancies and highly experienced in the delivery of twins—both naturally and by cesarean section (c-section).

VAGINAL TWIN BIRTH COMPARED WITH C-SECTION

“Natural twin births are not as rare as you might think at UM St. Joseph Medical Center,” Dr. Rossiter says. “All our mothers are able to have a prenatal consultation in which we discuss and plan what type of delivery she would like. Patients expecting twins have the option of a cesarean section, but there are patients, like Sarina, who would like to have a vaginal delivery. We advise them that even if the ultrasound shows that both babies’ heads are down (vertex position), once the first baby is delivered, the second baby can flip sideways or completely turn to become breech (feet first).”

However, there is an art to delivering a breech baby, and Dr. Rossiter has those finely tuned skills. “There are special maneuvers that a doctor needs to perform. The physician needs to have a lot of experience in this kind of delivery,” she explains.



THE ART OF NATURAL TWIN DELIVERY

“When Dr. Rossiter or one of the other perinatal specialists at UM St. Joseph Medical Center does a breech extraction in our delivery room, the staff are in awe,” Klapka says.



Sarina and her husband, Narayan, with their four children; inset: Monique Klapka, CNM.

In Shrestha’s situation, Klapka delivered the first baby boy, who weighed in at 8.5 pounds. Next, Dr. Rossiter stepped in to do the breech extraction.

To perform this, the obstetrician first needs to reach up into the mother’s uterus and gently pull the baby’s feet down. Dr. Rossiter explains: “I break the water and continue to pull the baby up to its armpits. Then I need to bring out the arms separately. Then I carefully tuck the baby’s chin down to the chest to bring the head out safely. For me, it’s very gratifying and fun to

perform a breech birth. I’m pleased that I was able to avoid a c-section for the patient since that’s the choice she wanted. At UM St. Joseph, this is an option that’s available.”

The second twin weighed 5.8 pounds. Although it’s optimal that both twins are similar weights, Dr. Rossiter says that if the larger twin presents first, it makes for an easier delivery.

EXPERIENCED OBSTETRICIANS IN BREECH BIRTHS

According to a twins study at Sunnybrook Research



CHILDBIRTH PREPARATION CLASSES

Classes include baby care, breastfeeding, grandparents update and infant massage classes for parents and baby. Call **410-337-1880** to register. Fees apply.



Institute in Toronto, there are no additional benefits to a planned twin c-section over a vaginal twin birth in the hands of an experienced obstetrician, whether the second twin is breech or not.

However, fewer obstetricians are trained in breech births these days. UM SJMC's Perinatal Center has three specialists who are experienced in breech deliveries.

Shrestha was grateful for the excellent co-management of her gestational diabetes by Klapka and the Perinatal Center.

"The Perinatal Center specializes in treating

gestational diabetes and works closely with UM SJMC's Nutrition and Diabetes Center," Dr. Rossiter says.

"We teach patients to check their blood sugar four times a day. During a consultation with a nutritional counselor, each patient is provided with a machine to monitor her blood sugar readings, which she then communicates to the Perinatal Center. According to her blood sugars, we adjust her medications. Patients also receive recommendations about diet and lifestyle."

EXPERT GESTATIONAL DIABETES MANAGEMENT

"Gestational diabetes is a high-risk condition," Dr. Rossiter explains. "Our goal is to keep the mother's blood sugar in good control in an effort to have a normal-sized baby. If the patient's blood sugar is out of control, the baby can grow too large, which can create a higher risk of birth injury, or the baby may develop complications after delivery, such as low blood sugar or jaundice. Complications to the mother of uncontrolled diabetes

include early delivery, high blood pressure and a higher chance of needing a c-section."

Klapka says, "In addition to Sarina's regular maternity appointments with me, she, like all Women's Health Associates patients with gestational diabetes, came to the Perinatal Center for consults, growth ultrasounds and nonstress tests."

"We manage gestational diabetes in addition to a wide range of high-risk pregnancies and stay closely in touch with each patient's provider—both certified nurse midwives and obstetricians. We have a large referral base," Dr. Rossiter says.

WOMEN'S HEALTH ASSOCIATES DELIVERS

"I am from Nepal," says Shrestha. "With my first pregnancy, I didn't know anyone in Towson. The nurse midwives at Women's Health Associates and Monique Klapka were so wonderful to me. University of Maryland St. Joseph Medical Center is the number-one hospital. The staff are so good and caring. The midwife care is like being cared for by a loving friend." ♦



Judith Rossiter, MD

DR. ROSSITER RECEIVES THE FRIEND OF MIDWIFERY AWARD

Judith Rossiter, MD, head of the Department of Obstetrics and Gynecology at UM SJMC, recently received the Friend of Midwifery Award from the American College of Nurse-Midwives, Maryland. The award is designed to highlight a non-midwife professional who has been supportive of midwives and the midwifery profession.

Dr. Rossiter was recognized for working to ensure safe transport of women between midwifery practice and hospitals, helping to bring certified nurse midwives to the table in important discussions regarding maternity care in Maryland, and championing evidence-based practices at UM SJMC.



Shoulder Replacement Surgery Turns Back the Clock

The procedure can be just as effective as hip and knee replacements at relieving joint pain and restoring mobility and quality of life

Approximately 70,000 shoulder replacement surgeries are performed in the U.S. annually. “The shoulder wears out just like the knees and hips do, but at a slower rate, since you don’t carry weight on your shoulders,” explains board-certified orthopaedic surgeon Timothy Codd, MD, of UM St. Joseph Towson Orthopaedic Associates. “Repetitive activities, such as weightlifting, gardening and even housework, can wear out the cartilage in the shoulder joint so it

becomes arthritic and is bone grinding on bone. The result can be very painful.” For Bill Williamson, 61, his passion for weightlifting gradually caused painful arthritis in his left shoulder. “In my 20s and 30s, I was lifting up to 275 pounds,” says Williamson, who began seeing Dr. Codd 10 years ago for his painful shoulder. “At first it didn’t interfere with my life,” Williams recalls. “Eventually, I couldn’t lift my left hand over my head, but I could still golf and lift 55-pound dumbbells.” However, last summer, his bone loss and pain became significant



Ten weeks after surgery, Bill Williamson was back to lifting weights; inset: Timothy Codd, MD



enough that Dr. Codd advised him it was time for shoulder replacement.

TRAINING WITH THE INVENTOR OF SHOULDER REPLACEMENT

Dr. Codd, who has performed hundreds of shoulder replacement surgeries over the past two decades, originally trained with the surgeon who invented shoulder replacement, Dr. Charles Neer.

“Shoulder replacement technology has gotten so much better in recent years that patients not only get pain relief, but

gain back their strength and flexibility,” says Dr. Codd. “My oldest patient is a 93-year-old woman who belongs to a flower guild and wanted to get back to gardening. But for a lot of older patients, it’s all about the practical things of daily living, such as reaching items on a shelf.”

To perform shoulder replacement surgery, “we cut away the diseased bone and affix the new ball and socket with cement or a bolt. In the operating room, we custom fit the replacement to the size of the patient’s shoulder joint,” Dr. Codd says. The replacements, made of chrome and titanium, come in various sizes.

FROM SLING TO SWING

Most patients spend one night in the hospital and go home the next day. They wear a protective sling for six weeks. “Patients start using their arm right away to do everyday things like cut their food. Then in two weeks, they begin aggressive therapy. In about six weeks, they start feeling very good. Complete recovery takes approximately six months. Shoulder replacement turns back the clock. People can enjoy things they haven’t done in 10 or more years. I have patients who golf and play tennis,” Dr. Codd says.

“I highly recommend finding the right surgeon like I did with Dr. Codd,” Williamson says. “Towson Orthopaedic Associates has great surgeons. He customized my care so it was right for me. Everything went perfectly.”

Ten weeks after surgery, Williamson was back to playing golf and lifting weights, pain-free. ♦



LEARN MORE

For more information about joint replacements, visit jointEDU.com.

DON'T SHOULDER THIS ON YOUR OWN

The rotator cuff is the tendon that holds the ball and socket of the shoulder joint together, and a rotator cuff tear is one of the most common shoulder injuries.

“The tear can occur from a fall or trauma, but more frequently develops slowly from overhead activities, such as racquet sports, pitching, swimming, volleyball or overhead weightlifting. It can also be due to a job that involves lifting or can just happen from everyday use,” says board-certified

orthopaedic surgeon Bruce Wolock, MD, of Towson Orthopaedic Associates, who has 27 years of experience repairing rotator cuffs. “It takes years for a rotator cuff tear to develop, so we usually see patients with this injury in their 40s through 70s.”



Bruce Wolock, MD

However, he cautions not to wait to see a surgeon until the pain is severe. Rotator cuff tears can enlarge over time, and some major tears may not be repairable. It’s best to consult a doctor when symptoms develop.

Symptoms include:

- Pain in the shoulder area or side of the arm
- Pain that worsens at night
- Difficulty reaching overhead or behind your back
- Arm weakness or stiffness

Most rotator cuffs can be repaired using minimally invasive arthroscopic surgery, which only requires three to five tiny incisions. “We use tiny surgical instruments to repair the tear,” Dr. Wolock says. “Patients go home that day wearing a sling, and I start them on an exercise program at home for the first month. Then they go to physical therapy for two to four months. Patients can regain excellent range of motion, muscle strength and flexibility.”



For Lia Young—shown here with daughters Raelyn, 7, and Londyn, 3—life is getting back to normal after a double-lung transplant 1,400 miles from her Texas home.



HELPING COMPLEX PATIENTS BREATHE EASIER

LYING IN A HOSPITAL BED NEAR HER HOME IN DALLAS, LIA YOUNG NEEDED A DOUBLE-LUNG TRANSPLANT TO SURVIVE. BUT DOCTORS THERE TOLD HER THEY COULDN'T PERFORM THE SURGERY. THANKS TO THE LUNG TRANSPLANT TEAM AT THE UNIVERSITY OF MARYLAND MEDICAL CENTER, SHE'S ALIVE TODAY.

Last fall, Lia Young was as good as dead. Lying in a hospital bed, with less than 40 percent function in both lungs, it seemed an incurable lung disease called pulmonary fibrosis had finally won. She was told that lung transplantation was her only option, but the hospital couldn't perform the surgery because of her highly responsive autoimmune system.

Her husband, Robert, was told to get their affairs in order because Lia would soon need to move to hospice care.

But Robert wasn't ready to give up. From their Texas home, he scoured the internet and contacted more than 20 high-risk lung transplant hospitals in the U.S. and Canada. He heard back from two people. One was Aldo Iacono, MD, director of consultative services and outreach for the lung healing program at the University of Maryland Medical Center (UMMC) and the Hamish S. and Christine C. Osborne Professor in Advanced Pulmonary Care.

"In Dallas, we knew there were no options. Everything centered around death. I was told to start the funeral process," Robert says. "When I met Dr. Iacono, he grabbed my shoulder and said, 'Let's speak life. We didn't bring Lia all the way to Baltimore to let her pass away.'"

Living is what Lia, 38, is doing after undergoing a lung transplant at UMMC from one of the region's top lung transplant teams.

SKILL IN ADVANCED TREATMENT

Between Dr. Iacono; Si Pham, MD, a professor of surgery at the University of Maryland School of Medicine and director of heart and lung transplantation at UMMC; and cardiac surgeon Bartley Griffith, MD, a professor of surgery at the University of Maryland School of Medicine, there are more than 75 years of experience in lung transplantation at UMMC. Also on the surgical team is Zachary Kon, MD, an assistant professor of surgery who trained at the University of Maryland School of Medicine.

Drs. Iacono, Pham and Griffith started their medical careers when lung transplantation was far less sophisticated and most patients with severe lung diseases had almost no hope of healthy futures.

"You'd see almost a 100 percent mortality rate," Dr. Iacono says. "Over the past 20 to 30 years, we've seen major advances in treatment. The stimulus and catalyst for me was to try to help these patients."

UMMC performed 43 lung transplants in 2015, with a survival rate above

90 percent for patients receiving transplants from early 2013 to the middle of 2015.

Age isn't a factor in the survival of patients. From 2013 through the middle of 2015, UMMC's team performed 25 transplants on patients older than 65. Everyone survived.

The high success rates can be attributed to the team constantly seeking new, improved ways of treating patients.

Techniques include ex vivo lung perfusion (EVLP), which strengthens donor lungs; extracorporeal mechanical oxygenation (ECMO), which allows a donor candidate's lungs to rest while still supplying the body with oxygen; and plasmapheresis, a technique that lowers a lung donor's antibodies and is performed at only a handful of hospitals in the U.S. Patients with high antibodies have revved-up autoimmune systems, making their bodies more likely to reject the donor lungs.

"We've been able to add several years of life to a patient who otherwise would have surely died at a young age," Dr. Iacono says.

DEDICATED TEAM

A lung transplant surgeon's role isn't solely in the operating room.

There can be limited access to transplantable lungs in Maryland, so Dr. Pham sometimes travels out of state to get donor lungs. He takes a flight to another city to make

sure a pair of donor lungs is suitable for a patient, brings the lungs back to Maryland and then performs the transplant, which can take about six hours, sometimes longer. That's all in a day's work.

"There's a lot of sacrifice," Dr. Pham says. "But transplant is my passion. It's something I love to do because you have a chance to make a difference in people's lives."

Dr. Kon frequently finds himself in the same situation, flying to retrieve lungs for a patient before performing the transplant on his return. Dr. Iacono sometimes travels out of the state to see patients and says he has been at the hospital nearly every day during the past 15 years.

"It's my passion to do this," Dr. Iacono says. "We really love taking care of patients. What we do is very

detailed, and we're proud of what we do as a center."

TREATING THE WORST OF THE WORST

In 2012, Lia Young was diagnosed with pulmonary fibrosis and scleroderma, a chronic autoimmune condition that causes the skin to harden. She never smoked cigarettes and didn't have a family history of either disease. Both seemed to pop up out of nowhere.

She eventually was using oxygen, consuming as much as 10 liters a minute. She'd get out of breath going to her children's soccer games, often watching from the car to avoid the weather, be it too cold, hot or windy.

Her condition deteriorated rapidly. She was admitted to a local hospital in Dallas and was soon put on life support.



Lia Young with pulmonologist Aldo Iacono, MD, who was part of the team that brought Lia from Texas to UMMC for her double-lung transplant.



BETTER BREATHING FOR COPD SUFFERERS

After Robert Young found the University of Maryland, he connected with Taliba Anderson, a lung-transplant administrative assistant, who quickly took Lia's medical records into a transplant meeting to start the review process.

The very next day, a doctor at the Dallas hospital walked into Lia's room and handed Robert a stack of papers. UMMC was going to take Lia with the goal of giving her a lung transplant.

Lia was put on ECMO, the machine that allows her lungs to rest, and three days later a special medical jet was used to transport Lia from Dallas to Baltimore.

"I remember cold air coming off the jet, siren sounds getting in the ambulance, then the next thing I remember is everyone in pink scrubs around me," says Lia, who was unconscious much of the time after being put on life support.

She was transported to the Lung Rescue Unit in the R Adams Cowley Shock Trauma Center, led by Thomas Scalea, MD, FACS, MCCM, the Honorable Francis X. Kelly Distinguished Professor of Trauma Surgery, physician-in-chief of the Shock Trauma Center at University of Maryland Medical Center, and UMMS system chief for critical care

services, and Jay Menaker, MD, associate professor of surgery and medical director of the lung resuscitation unit, where Lia was successfully cared for and listed for a lung transplant.

Robert and their 18-year-old daughter, Telia, took a separate flight to Baltimore and were soon in the Shock Trauma Center with Lia. With about 10 doctors and nurses treating Lia, Dr. Iacono pulled Robert and Telia into his office for a chat.

"I bought into his confidence. He was so confident in what he could do," Robert says. "It boosted my morale, because I was mentally gone."

The key for Lia was to find a donor with the same chest size and blood type, and to use plasmapheresis to work around her high antibodies. Within 24 hours of arriving at UMMC, there was a match.

The day after her transplant, Lia woke up with severe chest pain and didn't realize she had gotten new lungs. Lia used her finger to draw lungs on her chest and gave the thumbs-down sign. Robert shook his head, but Lia scrunched her face in disbelief. After reassurance that she did, in fact, have the surgery, tears rolled down her face.

"Oh, my goodness," Lia said. "That's why my chest hurts." ♦

COPD stands for chronic obstructive pulmonary disease. "It's a major lung disease that often affects people who are smokers or used to be smokers. It's not reversible, so they need to learn how to go about living the most normal life possible," says Terence Comiskey, MBA, RRT, manager of Respiratory Care at UM SJMC. "We recently started a program to help COPD patients do that more effectively."

UM SJMC respiratory therapists visit patients in the hospital who have a diagnosis of COPD. "Our goal is to teach them the signs and symptoms of a COPD attack before it happens so they can prevent themselves from becoming sick," says Sarah Tencza, RRT, a COPD educator. "People with COPD are prone to getting pneumonia or the flu because their lungs are already compromised. The key is prevention since their lungs are susceptible."

Tencza teaches patients to recognize the warning signs and monitor their status daily. If someone is feeling more tired and needs to use an inhaler more often, Tencza calls this a yellow day and recommends the individual limit activity. "A red day is when someone is short of breath and has very low energy. They should get in touch with their doctor right away or go to an urgent care center.

"Patients need to know their triggers for an attack, such as cold air or being around smoking. If cold air is a trigger, put a scarf over your mouth before you go outside. Pace your activity level and don't overdo what you're capable of, but don't be sedentary either. Keep moving," Tencza advises. "Lazy lungs get pneumonia. Even a little exercise is very beneficial for COPD."

"Smoking is very hard to quit," Comiskey adds. "UM SJMC offers stop-smoking classes through the Baltimore County Department of Health. We are also starting a Better Breathers Club, sponsored by the American Lung Association." (See page 14.)

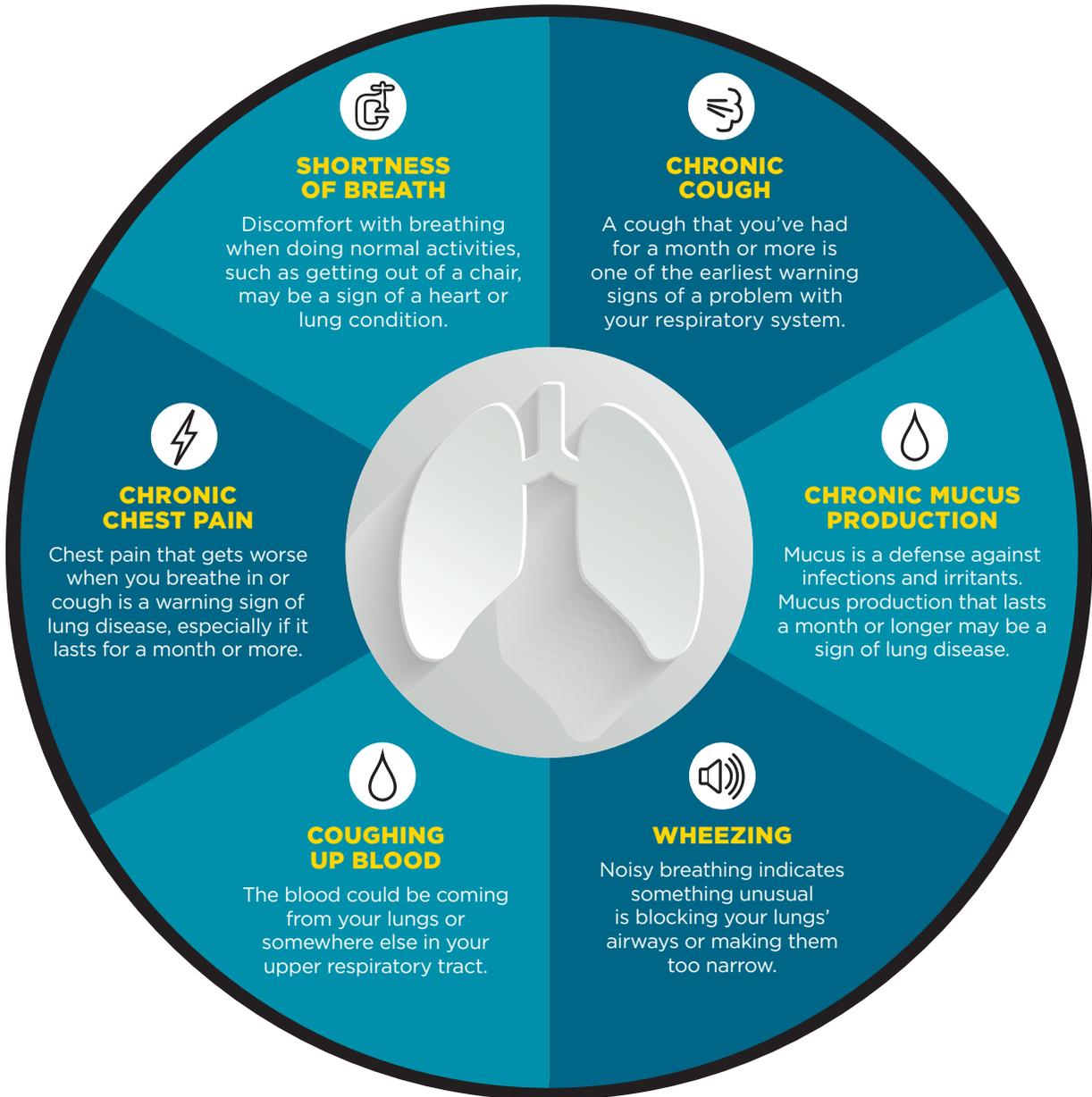


LEARN MORE

For more information about COPD, the Better Breathers Club or quitting smoking, call **441-337-1302**.

6 Lung Symptoms You Shouldn't Ignore

It's normal to cough occasionally or feel out of breath every once in a while. But if lung-related symptoms persist, it could be a sign of a lung disease, such as asthma, chronic obstructive pulmonary disease (COPD) or lung cancer. If you experience any of these lung disease warning signs, make an appointment with your health care provider.



SOURCE: AMERICAN LUNG ASSOCIATION

ALL ABOUT COPD

- ▶ More than 11 million Americans suffer from COPD, the third-leading cause of death in the U.S.
- ▶ In addition to the symptoms above, other signs of COPD are frequent respiratory infections, fatigue, and blueness of the lips and fingernail beds.
- ▶ Smoking causes roughly 90 percent of COPD cases.
- ▶ There is no cure for COPD, but the condition can be prevented and treated.

NEWS AND EVENTS

HEALTH SCREENINGS AND CLASSES

BONE DENSITY SCREENING

For adults who want to know how their lifestyle affects their bone density and for those with certain risk factors (family history, small body frame, inactivity, smoking, excessive caffeine or alcohol, low calcium and vitamin D intake). Consists of a quick, painless ultrasound of the heel bone (not diagnostic). For those who haven't had a DEXA scan or an ultrasound bone test in the past year.

Appointment required. Call **410-337-1337** or visit stjoseph.towson.com/events.

■ **Friday, June 9, 2 to 4 p.m.**

■ **Friday, Aug. 4, 11 a.m. to 1 p.m.**

BODY COMPOSITION ANALYSIS

To identify your unique body makeup and associated health risks. The Tanita SC-331S professional scale uses bioelectrical impedance analysis (BIA) to determine weight, body fat, body mass index, total body water, muscle mass, metabolic rate and more. **Appointment required.**

Call **410-337-1337** or visit stjoseph.towson.com/events.

■ **Monday, July 10, 4 to 6 p.m.**

■ **Friday, Sept. 1, 11 a.m. to 1 p.m.**

BETTER BREATHERS CLUB

Sponsored through the American Lung Association, this is a support group for people living with a chronic lung disease like COPD. The meetings are free. Call **410-337-1302** to register.

■ **Friday, May 19, July 21 and Sept. 15; 2 to 3:30 p.m.**



WEEKLY YOGA CLASSES

Mondays, 4:30 to 5:30 p.m.

Thursdays, 4 to 5 p.m.

Irwin Center.

No registration required.

Call **410-337-1479** for questions and directions.

UMMS MENTAL HEALTH CONFERENCE

University of Maryland Medical System will host "A Community Conversation About Mental Health & Substance Abuse," a free event for the community to learn more about mental health and wellness, at the SMC Campus Center, 621 W. Lombard St. **Registration required.** To RSVP, call **800-492-5538** or visit umms.org/communityhealth.

■ **Tuesday, June 27, 9 a.m. to 5 p.m.** (Lunch will be provided)



80% BY 2018—

COLON CANCER SCREENING

Approximately 5 percent, or 1 in 20 Americans, will be diagnosed with cancer of the colon or rectum in their lifetime. Throughout 2017 and 2018, UM SJMC is partnering with the American Cancer Society on an initiative to encourage those age 50 or older, or who have a family history of colon cancer, to get screened. If you or someone you know needs a referral, call **410-337-1337**. For more information visit stjoseph.towson.com/getscreened4coloncancer.

CANCER SURVIVORS DAY

On Sunday, June 25, UM SJMC Cancer Institute will host a survivors day celebration. Festivities will include food, music, crafts, face painting, games, a dunking booth and a speaker on integrated health. Join us from 1 to 3 p.m. Please call **410-427-5402** for more information.

SMOKING CESSATION CLASSES

The spring class to help smokers kick the habit will be held Tuesdays, beginning May 16 through June 20, from 6:30 to 7:30 p.m. Funded by the Baltimore County Department of Health, classes will consist of six 60-minute sessions. Participants who attend all six classes will be eligible to win a \$50 gift certificate. Call **410-337-1337** for more information.



The UM Spine Network Offers Specialized Care

Debilitating, burning, throbbing, shooting, stabbing—no matter how you describe it, the pain caused by ongoing back and spine issues can be unbearable.

So can the stress of finding a qualified provider for relief.

With its board-certified and specially trained surgeons and convenient locations throughout the state, the University of Maryland Spine Network makes finding effective and comprehensive spinal treatment easy.

The network, made up of the area's leading orthopaedic surgeons and neurosurgeons, provides the full spectrum of care to pediatric and adult patients.

EXCELLENT CARE: Surgeons throughout the state from the Eastern Shore to Baltimore City to Harford County are affiliated with the University of Maryland Medical System hospital within their communities and follow time-tested, evidence-based treatments to ensure optimal recovery. That means no matter when and where you enter the UM Spine Network, you will receive the same excellence in care.

CLOSE COLLABORATION: The network also allows surgeons to collaborate on everything from diagnosis and treatment to rehabilitation and patient education. If treatment plans call for additional expertise, patients are seamlessly connected within the network to surgeons who provide highly specialized care.

"Patients can be assured they are getting the highest quality, safest care with all of our network practitioners," says Steven C. Ludwig, MD, head of the Division of Spine Surgery at the University of Maryland Medical Center and professor of orthopaedics at the University of Maryland School of Medicine. "We care for a whole bandwidth of different patients with different complexities. The more doctors involved, the better it is for the patients."

ADVANCED TECHNIQUES: In addition, patients receiving care through the UM Spine Network have access to advanced technology and the latest techniques, including minimally invasive procedures that reduce pain and prompt a speedy recovery.

"The University of Maryland Spine Network is like your own personal all-star team for spine care," says Paul McAfee, MD, chief of Spinal Reconstructive Surgery at UM St. Joseph Medical Center. "You have access to the best spinal surgeons in the region, starting in your own backyard." ♦



SPINE AND NECK CARE AT UM SJMC

The spine surgeons of Towson Orthopaedic Associates at UM St. Joseph Medical Center have your back when it comes to spine and neck care. Board-certified orthopaedic surgeons Paul McAfee, MD, Ira Fedder, MD, and Michael Dabbah, MD, (above) are leaders in the care and treatment of spinal and neck disorders. They have extensive training and years of experience delivering a comprehensive array of the most advanced care, as well as utilizing the leading minimally invasive techniques.

Their specialties include:

- Degenerative disk disease
- Fractures
- Herniated disks and radiculopathy/myelopathy
- Rheumatoid arthritis
- Spinal stenosis
- Spondylolisthesis
- Spondylolysis
- Adult and pediatric scoliosis
- Spinal tumors



LEARN MORE

Visit umms.org/spine to find more information about the UM Spine Network.

When the unexpected happens... Urgent Care or Emergency Room?

For illnesses or injuries that are not life-threatening but still need immediate medical care ChoiceOne Urgent Care Centers see individuals of all ages. **When in doubt, call 911.**

When to Visit Urgent Care



Rash



Tooth Pain



Sprains & Strains



Cuts
Needing
Stitches



Sore
Throat



Lower
Back Pain



Pink Eye



Animal or
Insect Bite



Cold & Flu
Symptoms

When to Visit Emergency Room



Stomach or
Chest Pain



Allergic
Reactions



Eye or
Head Injuries



Serious
Burns



Stroke Symptoms
(Numbness, Can't Move,
Slurred Speech, etc.)



Trouble
Breathing



Heart
Skipping Beats
or Heart Attack
Symptoms



High
Fever



Possible
Drug Overdose
or Poisoning


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UM St. Joseph Medical Center
 Emergency Department
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 Towson, MD 21204
 410-337-1000

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 1220A E. Joppa Road, Suite 109
 Towson, MD 21286
 410-296-0018

ChoiceOne Urgent Care Dundalk
 1730 Merritt Blvd
 Dundalk, MD 21222
 410-650-4730

ChoiceOne Urgent Care Phoenix
 14237 Jarrettsville Pike
 Phoenix, MD 21131
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