Maryland’s Spotlight on University of Maryland Medical Center

Intelligent Technology, Compassionate Care

The thoracic surgery eVisit program connects mesothelioma patients to expert treatment. See page 10.

The Many Roles of UM UCH Chaplain Allen Siegel

The best ways to fight the flu this winter

Cover Story:
A Life Back in Balance

Page 6

Page 4

Page 8
IN THIS ISSUE

6 BACK IN BALANCE
After a scary fall left cancer survivor Kristi Sjoholm-Sierchio feeling unstable and afraid to go out, a specialized balance therapy helped her get back to living her life.

8 A TRUE CALLING
UM Upper Chesapeake Health’s Allen Siegel provides spiritual care services for patients, families and staff.

10 INTELLIGENT TECHNOLOGY, COMPASSIONATE CARE
The University of Maryland Medical Center’s thoracic surgery eVisit program connects mesothelioma patients to expert treatment.

DEPARTMENTS
3 A HEALTHY START
13 AT A GLANCE
15 NEWS AND EVENTS

Maryland’s Health Matters is published by the Marketing and Communications office at University of Maryland Upper Chesapeake Health. This publication is not intended to provide professional medical advice. It is to provide general health and wellness information.

STAY CONNECTED WITH UM UPPER CHESAPEAKE HEALTH

“Like” our Facebook page to learn about the latest events and happenings at UM Upper Chesapeake Health. facebook.com/UpperChesapeakeHealth

Get daily, real-time health information and updates from our experts. twitter.com/UpperChesapeake

Watch our doctors discuss spinal care, joint replacement surgeries and more. youtube.com/UpperChesHealth

WE WOULD LIKE TO HEAR FROM YOU
Please share your comments, information requests or change of address by calling 443-643-4205 or emailing ccottrell@uchs.org.
LETTER FROM THE CEO

YOUR TRUSTED PARTNER

Greetings! By now, you may have heard that we are building our newest medical campus and behavioral health program in Aberdeen, off Route 22. Pending regulatory approval by the state of Maryland, the new campus could open in 2021. Most of the current health care services from UM Harford Memorial Hospital in Havre de Grace will move to the new campus in Aberdeen. Once we receive that approval, construction to Aberdeen and to our Bel Air campus will begin, with all projects expected to be completed during the same time frame in 2021.

As we continue our journey to modernize the way we deliver health care to our community, we want to communicate why we are doing what we are doing and why it matters to you and your family. We call it Your Health. Our Mission.

Increasing your access to health care, coordinating efforts between hospital and community care providers, and utilizing innovative technology are key components of how we will improve health care delivery for our community. You and your family’s health are at the center of all that we do. Rest assured that besides the things you can see—like new facilities being constructed—there is a continual effort to improve the experience you have with us as either a patient, a friend or a family member. We want to be your trusted partner for all your health care needs, from prevention and screening to diagnosis, treatment and full recovery.

Our vision is quite simple. We will create the healthiest community in Maryland, and we are well on our way.

Stay informed on our progress by following UM Upper Chesapeake Health on Facebook (facebook.com/UpperChesapeakeHealth) and Twitter (@UpperChesapeake), and visit umuch.org/healthy for ongoing project updates.

In Good Health,

Lyle E. Sheldon, FACHE
President and CEO


While the physical address for our newest medical campus is changing, our mission is the same—to create the healthiest community in Maryland. We will provide the people of Harford and Cecil counties with convenient access to the health services used most often and assist in managing chronic diseases before they become emergencies.

This new campus is designed with our community’s health needs in mind and with the flexibility to adjust for the future.

UM Upper Chesapeake Medical Center – Aberdeen will offer:

- Expanded, state-of-the-art, 24/7 emergency department
- Full diagnostic services, including centralized radiology, rehabilitation, laboratory and infusion
- Short stay medical beds
- Primary and specialty care physician offices
- Expanded inpatient and outpatient behavioral health services that meet the most pressing needs of our community

UM Upper Chesapeake Medical Center – Bel Air will also see some changes, including:

- Expanded parking options for both visitors and UM UCH team members
- Addition of an outpatient pavilion featuring an ambulatory surgery center
- Expansion—and an addition of beds—to the existing Kaufman Cancer Center

> Learn more about UM UCH’s future plans at umuch.org/healthy.
GUIDE TO:

OTC Pain Relievers

How do you know which over-the-counter (OTC) pain reliever is right for you? Here are the main types of pain medications, what they're good for and how to use them safely.

ACETAMINOPHEN

What it's good for: Acetaminophen (Tylenol) relieves fever and common types of pain. It does not soothe inflammation. But it’s often a good choice for people with arthritis pain because it is less likely to cause side effects such as stomach problems.

Safety precautions: Never take more than 3 grams (about six extra-strength pills or nine regular pills) within a day because large doses can harm the liver.

Alcohol can increase the risk. Acetaminophen can be present in other OTC medications, such as cold preparations.

ASPIRIN

What it's good for: A non-steroidal anti-inflammatory drug (NSAID), aspirin not only reduces pain, but also decreases inflammation from problems such as muscle injuries and arthritis.

Safety precautions: Talk to your doctor about using aspirin if you have heart disease, high blood pressure, kidney disease or gastrointestinal bleeding; if you take blood thinners, such as warfarin, clopidogrel (Plavix), apixaban (Eliquis), dabigatran (Pradaxa) or rivaroxaban (Xarelto); or if you are already on a prescription NSAID, such as celecoxib (Celebrex) or nabumetone (Relafen).

OTHER NSAIDS

What they're good for: Other popular NSAIDs, such as ibuprofen (Advil, Motrin) and naproxen sodium (Aleve, Naprosyn), also target everyday pain and inflammation.

Safety precautions: Follow the same precautions as with aspirin.

The Flu-Proof You

Safeguarding your family against influenza can seem like a daunting task, especially during the winter, when cold weather begs people to stay inside—and get into each other’s space. You can become a flu-fighting superhero by following a few simple suggestions.

Q When is the best time to start fortifying your home against the influenza virus?
A Back-to-school season typically signals the start of flu season. “Children return to school and the weather gets colder, forcing people to spend more time indoors,” says Aly Naguib, MD, of Upper Chesapeake Primary Care.

Then, when children rejoice over the winter holiday break and families come together to celebrate, they tend to swap germs as well as gifts. “The highest periods of flu activity occur in the early winter months after the viruses have had an opportunity to take hold in the general population,” Dr. Naguib says.

Q How can you stay healthy this season?
A The best way to flex your health muscles against influenza is to be vaccinated. But there are other ways to amp up your immunity, too, including eating a balanced diet with loads of vegetables, fruits, proteins and complex carbohydrates—the building blocks of proper nutrition. And wash your hands vigorously and frequently. “Wash with soap and warm water, or use hand sanitizer if soap is not available,” Dr. Naguib says.

Q Ack! The flu won. Now what?
A Stay home! You won’t win a medal for going to work when you’re under the weather. And if you do have to go out in public, cover your mouth and nose with a tissue, handkerchief or your sleeve when you cough or sneeze.

“See a health care professional,” Dr. Naguib says. “There are antiviral drugs that can dramatically lessen the effects of the flu if they’re taken within the first 24 to 48 hours after the onset of the illness.”

Also, think of everything you touch in a day, then attack those items with a germ-killing cleaner. Pregnant women, the elderly, young children and people with compromised immune systems are most at risk for complications from the flu, so steer clear of them until you’ve regained your healthy superpowers. And remember that you’re contagious for 24 hours after your flu symptoms subside, Dr. Naguib says.
A HEALTHY START

GO WITH THE HEARTFLOW

David Rubin, MD
University of Maryland Upper Chesapeake Health now offers HeartFlow Analysis, a personalized cardiac test that helps diagnose coronary artery disease. This is the first technology to use standard coronary CTA scans to provide insights into both the extent of an arterial blockage and the impact it has on blood flow to the heart. “This detailed information enables clinicians to determine the next step in the patient’s treatment plan,” says David Rubin, MD, of Upper Chesapeake Cardiology.

The HeartFlow Process:

1. If a patient has suspected coronary artery disease, a clinician may order a standard coronary CTA scan to look for blockages.
2. If additional information is needed, a HeartFlow Analysis may be ordered to better understand the impact of the blockage.
3. The HeartFlow Analysis builds a digital 3D model to show how each blockage limits blood flow using advanced algorithms, artificial intelligence and computational fluid dynamics.
4. Within hours, the clinician receives the HeartFlow Analysis via a secure web interface and can assess, vessel by vessel, if sufficient blood flow is reaching the heart to better determine the best treatment path.

primary care physician? Find one now at umuch.org/healthy.

umuch.org  |  Winter 2019  5
AFTER A SCARY FALL LEFT THIS BREAST CANCER SURVIVOR FEELING UNSTABLE AND AFRAID TO GO OUT, A SPECIALIZED BALANCE THERAPY HELPED HER GET BACK TO LIVING HER LIFE

Four years ago, if you had asked Kristi Sjoholm-Sierchio, 60, to join you for dinner at a new restaurant, she would’ve said no. “I had stopped going out,” she recalls. “I was afraid I would fall.” And rightly so.

A breast cancer survivor, Sjoholm-Sierchio underwent a lumpectomy to remove a breast tumor and surrounding normal tissue in each of her breasts in February 2014. Before two follow-up surgeries that spring, however, she lost her balance while in the bathtub and fell on her tailbone. She was alone and afraid.

The fall—along with the instability that accompanied her surgeries and breast cancer treatment—left Sjoholm-Sierchio with a paralyzing fear of doing anything or walking anywhere. Even stepping on grass made her nervous.
In some cases, chemotherapy can cause neuropathies that can affect balance. Reactions may include an altered pace, unusual clumsiness, falls and vertigo.

AN OFFER OF SUPPORT
About the same time, Sjoholm-Sierchio, a former attorney, became involved with a breast cancer support group—and a low-impact exercise class—offered by Cancer LifeNet at the Kaufman Cancer Center in Bel Air. (The Cancer LifeNet program provides free support for cancer patients and families living in Harford and Cecil counties.)

It was during an exercise session that she met Kiersten Kilczewski, a physical therapist and lymphedema specialist with University of Maryland Upper Chesapeake Health Center for Sports Medicine and Rehabilitation, a member of the UM Rehabilitation Network. Kilczewski, who had been filling in as the instructor after a co-worker went on leave, noticed quickly that Sjoholm-Sierchio was extremely apprehensive using the aerobic step.

“Kristi didn’t strike me as someone who at any second was going to fall,” Kilczewski remembers. “But her obvious fear of falling stood out to me. She always had a chair close by to hold on to.”

Kilczewski took the opportunity to recommend the NeuroCom balance system to Sjoholm-Sierchio. The NeuroCom helps to assess and retrain the sensory and voluntary motor control of balance. It treats issues of poor balance that may be the result of multiple sclerosis, concussions, neurological dysfunction, peripheral neuropathy, dizziness or motion sickness. In Sjoholm-Sierchio’s case, she had a lot of instability in her hips from her multiple surgeries, and the fall in her tub really set the stage for balance issues.

ON THE ROAD AGAIN

She also relied on Kilczewski for expertise and began strengthening her core and hips with physical therapy. “My overall strength changed so much after going through surgeries, treatment and radiation,” Sjoholm-Sierchio says. “It took my energy right out of me.

I had to learn how to manage that.”

Today, Sjoholm-Sierchio doesn’t hesitate to go anywhere. In fact, she recently flew solo to visit her son, a lieutenant submariner in the U.S. Navy. She continues to exercise and participates in yoga, acupuncture and Reiki.

She also credits Kilczewski for her progress. “I was really fortunate that Kiersten saw firsthand that I had balance issues,” Sjoholm-Sierchio says. “I was really afraid. That fear will keep you home and keep you from living your life to its fullest.”

For more information about the NeuroCom balance system, visit umuch.org/healthy.
A TRUE CALLING

UM UPPER CHESAPEAKE HEALTH’S ALLEN SIEGEL PROVIDES SPIRITUAL CARE SERVICES FOR PATIENTS, FAMILIES AND STAFF

When you think of a hospital chaplain, you think of someone who offers a hand to hold or a comforting voice during a time of need. Allen Siegel, chaplain and director of spiritual care services at University of Maryland Upper Chesapeake Health (UM UCH), does just that. And even more.

Allen, who lives in Abingdon with his wife, Susan, came to Maryland in 2015 from Long Island, New York, where he was born and raised. A board-certified chaplain, he began his career in health care in 1978, running an ambulance as a firefighter. By 1983, he was an orderly (the previous name for a male nursing assistant) in a hospital and soon became a paramedic working in New York City. It was only natural that he then chose to become a nurse. By 1990, Allen was working in the pediatric intensive care unit.
A SERIOUS ILLNESS
In 2004, however, Allen was faced with a significant event. “In October, God came to me in a prayer vision and told me that my nursing career was coming to an end,” he says. He was incredulous—even more so when, soon after, he was diagnosed with a serious case of Epstein-Barr virus that ended his career.

After nearly a year of recovering from the illness, Allen became interested in spiritual care and eventually went to seminary from 2006 to 2009. This was truly his calling. With a master’s degree from Seminary of the Immaculate Conception and a background in nursing, it was no surprise that he began serving as chaplain of a New York hospital.

Fast forward to 2015. Allen, who was dating Susan at the time, was looking for a change. He wanted to relocate to Maryland, but he needed an opportunity to present itself.

“I left it up to God,” he remembers. That’s when Allen became aware of an opening at UM UCH. And the rest is history.

“When I first came [to UM UCH], I needed to sit back and learn what our struggles were,” he says. “What types of issues were our team members dealing with? What were their pain points?”

CALM IN A CRISIS
Team member wellness was and is Allen’s first focus. Through interviews and observation, he created U Matter, a wellness program focused on team member emotional and spiritual wellness. Included in the program are workshops, seminars and resources for coping, wellness, psychological first aid, second victim support, domestic violence and much more.

Allen is also a major contributor to the health system’s emergency management committee. In his volunteer life, he has been a U.S. Department of Health and Human Services chaplain for eight years. He is also an American Red Cross chaplain/disaster spiritual care supervisor. Allen was most recently deployed to Houston to assist in the aftermath of Hurricane Harvey in August 2017. He takes his experiences and best practices from these horrific events and brings them to his emergency management colleagues at UM UCH to learn from and expand upon.

One of Allen’s most significant contributions to both UM UCH and the community is his fine-tuning of the family reunification process during crises and major incidents. He has done such an impeccable job that he—along with faith-based partners—has supported Harford County when requested to assist with makeshift family assistance centers. Sadly, he has been called upon more than once after the shootings in Edgewood and Aberdeen in the past two years.

Another one of Allen’s accomplishments lies in his meticulous coordination of nearly 100 spiritual companions and volunteers. These ministers, priests, deacons and even armed forces veterans are on call and available for emergencies or just simple conversations with patients.

When Allen is not dedicating his time to the community, you can find him running, biking or engaging in his biggest passion: photography.

Allen says he credits the Lord, Spiritual Care Services volunteers and UM UCH team members for the success of Spiritual Care Services.
For people diagnosed with rare diseases, finding quality care is a challenge. This is certainly the case for patients with mesothelioma, a rare and aggressive cancer that affects about 3,000 Americans every year. Asbestos exposure is the most common cause of mesothelioma. The disease usually appears in the lining of the lung, but it can also occur in the lining of the abdomen, heart and testes.

After diagnosis, patients must quickly seek treatment recommendations from health care teams that specialize in mesothelioma. But finding these specialty teams can be difficult for patients and their families.

Mesothelioma usually doesn’t cause symptoms until its later stages, so it often goes undetected and in some cases is misdiagnosed. This delays treatment until the disease becomes difficult to manage. Treatment can also be expensive, especially for patients who need to travel for care.

University of Maryland Medical Center’s (UMMC) Division of Thoracic Surgery and the University of Maryland Greenebaum Comprehensive Cancer Center (UMGCCC) are addressing these problems with the thoracic surgery eVisit program. This telemedicine program allows patients from across the country to meet with some of the nation’s top mesothelioma and thoracic oncology experts without having to travel to Baltimore. Patients can do this from the comfort of their homes using video on a desktop computer, tablet or smartphone.

Mesothelioma patients can especially benefit from eVisits for diagnosis and treatment of the disease. “We base almost all of our decisions on what the patients tell us and what their X-rays and laboratory studies show. It’s unusual that a patient’s physical examination changes our treatment recommendations,” says Joseph S. Friedberg, MD, Charles Reid Edwards professor of surgery and chief of the Division of Thoracic Surgery at the University of Maryland School of Medicine. He is also thoracic surgeon in chief at the University of Maryland Medical System.

Other UMMC services that rely on imaging and laboratory studies, such as the UMMC Transplant Division, also lend themselves well to eVisits. For instance, eVisits allow liver disease patients to sign up for a transplant at more than one institution, which increases their chances of getting transplanted faster. Overall, the program has increased access to liver transplants for patients across the country. UMMC’s Division of Thoracic Surgery hopes its eVisit program will similarly improve access to care for patients with mesothelioma and other thoracic conditions.

Dr. Friedberg says eVisits also improve the patient experience. “We’re able to offer the same level of care and attention without the hassle of the physical visit for a patient. There’s no compromise in what we do,” he says.

Here are some of the ways the thoracic eVisit program makes life easier for mesothelioma patients.

EXPERT TREATMENT

Mesothelioma is a complex condition that is usually treated with a combination of surgery, chemotherapy and radiation therapy. UMMC’s Division of Thoracic Surgery has a team of mesothelioma specialists, including surgeons, oncologists, pathologists, oncology nurses, interventional pulmonologists and radiologists. The team meets every Monday to discuss their patients’ treatment options. “We are one of only a handful of true multidisciplinary centers in the United States that specialize in mesothelioma,
and eVisits allow patients to have access to a level of expertise that is really quite scarce,” Dr. Friedberg says.

Mesothelioma can progress quickly, so having access to an expert team can make all the difference. The sooner the disease is diagnosed and treated, the better the patient’s health will be. In addition, eVisits are ideal for second opinions. The American Cancer Society recommends that patients with rare cancers get a second opinion to reduce the chance of misdiagnosis.

“To have patients be able to visit with experts who deal with mesothelioma on a daily basis is a great opportunity. It enhances the care that is available to them far beyond what we’d be able to do otherwise,” Dr. Friedberg says.

### CUTTING-EDGE THERAPIES

Remote access to UMMC’s Division of Thoracic Surgery and UMGCCC helps connect patients to some of the world’s most promising mesothelioma treatments. As the hub of the University of Maryland Cancer Network, UMGCCC gives the team a larger network of resources than many other hospitals can provide. “We collaborate with researchers nationally and internationally for mesothelioma,” Dr. Friedberg says.

Instead of patients finding cutting-edge treatments and clinical trials on their own, the mesothelioma multidisciplinary team of experts assesses a patient’s options and makes recommendations.

“With eVisits, not only is the experience and expertise available to the patients, but also the facilities that they might not have access to, like the Maryland Proton Treatment Center,” says Dr. Friedberg. “A patient or even their doctors might not know about many of these clinical trials because it is such a cumbersome system to navigate.”

### NO NEED TO TRAVEL

Patients living in rural areas can have trouble finding care. “It is not unusual for the thoracic surgery team to see mesothelioma patients from out of state, or even from across the country or internationally,” Dr. Friedberg says.

Unfortunately, traveling to receive care can be time-consuming, expensive and stressful. Between driving on

---

**Your eVisit: Easy as 1, 2, 3**

You can access internationally renowned experts from the University of Maryland Medical Center’s Division of Thoracic Surgery from the comfort of your own home in three simple steps:

1. **CALL 1-888-754-6631**
   Within 24 hours, a team member will reach out to schedule your videoconference and request any CAT scans, X-rays or other imaging that is needed for the appointment.

2. **CHECK YOUR EMAIL**
   Once your eVisit is scheduled, a secure link will be sent to your email with instructions for use on the day of your eVisit.

3. **JOIN YOUR EVISIT**
   Meet with the surgeon and nurse navigator to discuss your medical history, condition and treatment options through video on your desktop computer, tablet or smartphone.

Participating in an eVisit does not commit a patient to treatment.

eVisit program, go to umuch.org/healthy.
Today, most people rely on their smartphones and other electronics to manage communications in their lives. Telemedicine is a natural progression of sharing health care information securely over our digital devices.

Telemedicine includes services such as:

- Patient-provider consultations via videoconferencing
- Transmission of still images like X-rays or MRI studies
- Increased use of secure patient portals for patients to keep track of chronic conditions
- Remote monitoring of vital signs for congestive heart failure patients
- Virtual visits with a family physician
- More uses developing every day

Benefits for providers, patients and families:

- **Patient Satisfaction**
  Patients, their families and their communities can use telemedicine technologies to help reduce travel time and related stresses for the patient.
- **Improved Access**
  Telemedicine allows physicians and hospitals to expand their reach far beyond a physical location.
- **Efficiencies**
  The practices lead to improved efficiency for patients, their families and their care teams.

**PUTTING PATIENTS FIRST**

The thoracic eVisit program provides mesothelioma and other thoracic patients all over the world access to internationally renowned experts without leaving their homes. Ultimately, the thoracic eVisit program is about putting patients first.

“If there’s something we can do for our patients that makes their lives easier or less stressful without compromising care, then we do that. This goes for every aspect of our practice—not just eVisits,” Dr. Friedberg says.

**MAKING CONNECTIONS**

Coping with a cancer diagnosis is emotionally taxing, but mesothelioma can be particularly difficult. The disease usually appears 30 to 40 years after asbestos exposure, so the diagnosis can be shocking to patients and their loved ones. The cancer’s rarity can also cause patients to feel alone.

It is important for patients to have a trusting relationship with their doctors. An eVisit allows patients to make a more personal connection with providers. “To be able to read someone’s body language and see their face, that’s something you don’t have on the phone that you do have with virtual visits,” Dr. Friedberg says.

Even after treatment, Dr. Friedberg and the team’s work is not done. Follow-up appointments are key in keeping patients healthy after treatment. Many patients show concern about symptoms they experience after surgery, such as swelling.

Melissa Culligan, RN, MS, director of clinical research for the Division of Thoracic Surgery, says eVisits allow patients to recover comfortably from their treatment. “Right now, we spend a lot of time having patients describe things over the phone. We have some patients that send us pictures, but not every patient can do that. This provides an even better way to care for our patients once they go home,” Culligan says.
Ways to Avoid the ER This Winter

1. **Steer Clear of the Flu**
   - Get a flu shot if you haven’t already (it’s not too late!)
   - Wash your hands frequently
   - Avoid touching your eyes, nose and mouth

2. **Use Caution with Heaters**
   - Check that all smoke detectors and carbon monoxide detectors are working properly
   - Always keep a safe perimeter around electric space heaters
   - Turn off space heaters before leaving the room or going to sleep

3. **Avoid Falls on Slippery Surfaces**
   - Keep driveways and walkways clear of snow and ice
   - Wear flat shoes with good traction
   - Take slow, careful steps when walking

4. **Shovel Carefully**
   - Lift with your legs and not your back
   - Stretch before you begin, and take frequent breaks
   - Don’t shovel without your doctor’s OK if you have heart issues

5. **Stay Safe in Cold Temperatures**
   - Bundle up in layers to avoid hypothermia and frostbite
   - Keep your head covered, and wear mittens instead of gloves
   - Change out of wet clothes promptly

It’s peak flu season, and there are a bunch of other cold-weather health hazards to contend with. Here’s how you can boost your chances of staying out of the ER during the winter months.

**AT A GLANCE**

**39 MILLION**
ER VISITS EVERY YEAR ARE RELATED TO INJURIES

**Sources:** American College of Emergency Physicians, Centers for Disease Control and Prevention, National Safety Council
Under the Weather

Why does winter exacerbate so many health concerns, from dehydration to heart attacks? Blame the weather: When you’re cold, blood vessels constrict to retain body heat, raising blood pressure. Also blame those coughing co-workers: A compromised immune system makes you susceptible to other health issues.

1 HEART ATTACK
THE PROBLEM: Heart attacks are 53 percent more common in winter than in summer—in all climates, not just snow-shoveling zones.
THE CAUSE: Cold weather narrows arteries, increasing the risk of heart attack.
THE SOLUTION: Maintain an exercise routine and eat plenty of fruits, vegetables and whole grains.

2 STROKE
THE PROBLEM: Every 5-degree temperature drop correlates with a 6 percent increase in stroke hospitalizations.
THE CAUSE: Narrowed blood vessels, more common in winter, can block blood flow to the brain, triggering a stroke.
THE SOLUTION: If you’re at risk for stroke, stay indoors during extreme weather, and manage risk factors like high blood pressure, diet and smoking.

3 JOINT PAIN
THE PROBLEM: Up to two-thirds of arthritis sufferers say they experience more pain when the weather changes.
THE CAUSE: Research is conflicting, but one study links joint pain with lower temperatures and changing barometric pressure. Movement stimulates the production of joint fluid, so less exercise can mean stiffer joints.
THE SOLUTION: Stay active with low-impact exercise like swimming, and protect your joints by building muscle.

4 SEASONAL AFFECTIVE DISORDER
THE PROBLEM: Symptoms dismissed as the “winter blues” can be signs of seasonal affective disorder, a serious mental health issue marked by lasting sadness, low energy and trouble sleeping.
THE CAUSE: The shortened daylight hours of winter alter the body’s biological clock, disrupting sleep patterns and the balance of brain chemicals.
THE SOLUTION: Talk to your doctor about options such as light therapy, which can be effective for 70 percent of patients, and medication.

5 DEHYDRATION
THE PROBLEM: Thirst, fatigue, headache—the symptoms of dehydration can occur just as easily in winter as in summer.
THE CAUSE: You’re less likely to feel thirsty in winter, not only because you don’t need to cool down but also because the cold inhibits your ability to sense thirst.
THE SOLUTION: Carry a water bottle to ensure you drink at least eight 8-ounce glasses daily.

6 SKIN CONDITIONS
THE PROBLEM: Cracked, itchy and irritated skin.
THE CAUSE: Low humidity. Add the impact of flu season, and winter is especially tough for people with psoriasis, an autoimmune disease.
THE SOLUTION: Use a humidifier and apply lotion immediately after bathing to trap in moisture. Avoid hot baths, which wreak havoc on dry skin.
Winter Wellness

Unless noted otherwise, all events are FREE. Call 800-515-0044 to register if a number is not provided below.

TAKE ACTION, GET SCREENED

Screenings can help doctors find diseases early, when they are easier to treat. Getting screening tests is one of the most important things you can do for your health.

MEDICAL MOBILE VAN HEALTH SCREENINGS
Free blood pressure, body composition and sleep apnea screenings; cholesterol and A1C screenings for $10. (Cash or check.)

- Harford Mall, Macy's parking lot
  - Feb. 27, March 27, April 24, 4 to 7 p.m.

SPECIAL EVENTS

THE UPPER CHESAPEAKE HEALTH FOUNDATION 12TH ANNUAL RED PUMP BALL
More than 350 guests will attend the black-tie-optional event, which features assorted hors d’oeuvres, gourmet dinner, top-shelf open bar, silent auction and raffles, and dancing to the music of The Klassix. To date, the Red Pump Ball has raised $260,000 for UM UCH Heart and Vascular Institute over the years. For ticket and sponsorship information, please contact Donna Tower Lenzner, CFRE, at 443-643-3469 or dtlenzner@uchs.org.

- Saturday, Feb. 9, 6 to 11 p.m.
  - Richlin Ballroom, just outside of Bel Air

WEIGHT-LOSS SURGERY INFO SESSIONS AND SUPPORT GROUPS
Attend an information session and learn more about your options for lasting weight loss. Offered monthly at UM Harford Memorial Hospital and UM Upper Chesapeake Medical Center. For dates and locations, visit umuch.org/healthy.

- Food Addicts in Recovery
- Heart Club
- Lupus
- Overeaters Anonymous
- Stroke Club
- Weight Loss Surgery

GAIN’S ANNUAL CAREGIVER AND SENIOR RESOURCE CONFERENCE: LIGHTENING THE LOAD OF CAREGIVING
- Saturday, April 6, 8 a.m. to noon
  - Chenowith Activity Center in Fallston

FAMILY BIRTHPLACE
Family Birthplace services don’t end after the hospital stay is over. Follow-up home care visits, breastfeeding consultation and support and parenting seminars are offered. Lactation experts are available to help moms with breastfeeding. Visit umuch.org/events for more details, or call 800-515-0044 to register.

- Car Seat Safety Checks
- Childbirth Refresher
- Expectant Parent Classes
- Infant CPR/Infant Safety

RED DRESS PINK RIBBON
Learn how to focus on your personal well-being during treatment for heart disease or breast cancer. Shop with our vendors and enjoy great exhibits, interactive activities, refreshments and much more. Grab a friend and join us for a morning of fun!

- Saturday, Feb. 9, 8 a.m. to noon
  - Kaufman Cancer Center
  - Registration is required by calling 800-515-0044. Inclement weather date is Feb. 23; for updates, please check facebook.com/UpperChesapeakeHealth or call 800-515-0044.

WEIGHT-LOSS SURGERY INFO SESSIONS AND SUPPORT GROUPS

SUPPORT GROUPS

- Alcoholics Anonymous
- Amputees
- Behavioral Health

CANCER LIFENET SUPPORT
Visit umuch.org/healthy for a full schedule, or call 866-393-4355 for information.

FREE BLOOD PRESSURE SCREENINGS
(Educational materials also provided.)

- Harford Mall in Bel Air
  - Feb. 14, March 14, April 11, 11 a.m. to 2 p.m.
- Walmart in Abingdon
  - Feb. 9, March 9, April 13, 10 a.m. to 1 p.m.

MAKE A DATE FOR BETTER HEALTH!
Find schedule information for these and other events, screenings and support groups at umuch.org/healthy.
Your health. Our mission.

University of Maryland Upper Chesapeake Health is transforming health care in Harford and Cecil counties with easier and more convenient access to care. Through wellness checks, preventive screenings, and chronic disease management, our goal is to help keep you healthy. Simply put, we’re changing your health care experience for the better, by providing the best care at the right time in the best place.

Be a part of something greater umuch.org/newcampus