

SPRING 2023

# Wellness Matters

Diabetes and  
Your Body:  
From your eyes  
to your feet



HOWARD COUNTY  
GENERAL HOSPITAL

JOHNS HOPKINS MEDICINE

# President's Message



*Dear Friends,*  
2023 is an exciting year for Howard County General Hospital! In July of this year, we turn 50!

An anniversary of this magnitude gives us an opportunity to reflect on how we have evolved and how medicine has changed. In doing so, we can look at how we are moving

health care forward. Over the coming months, we will share our insights into the future of caring for our community and our commitment to enhancing our services even further. In addition, we will honor many longtime partners, donors and employees and tell their incredible stories—we are so much more than a hospital and wouldn't be here today without them! I encourage you to read about our future plans as we share them through our publications and social media and celebrate 50 with us.

In this issue of *Wellness Matters*, we discuss diabetes, a disease that affects so many in our community. We hope the information helps you, whether you are newly diagnosed, struggling with controlling your diabetes or just need a little extra support. HCGH has many programs to help you understand the disease and manage it. For a complete list of classes, visit [hcgh.org/events](https://www.hcgh.org/events).

We are committed to being your partner in care.

Sincerely,

M. Shafeeq Ahmed, M.D., MBA, F.A.C.O.G., *President*

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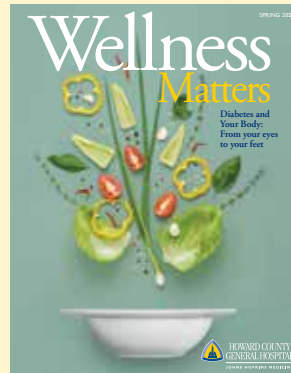
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# Wellness Matters



In this issue of *Wellness Matters*, we cover diabetes and how it impacts your body as well as what you can do to keep it in check.

## CONTENTS:

- 3 Diabetes Surprise!
- 4 Diabetes: Fact or Fiction?
- 6 Vessels, Veins and Arteries
- 7 Keeping the Beat with Diabetes
- 8 Diabetes and Your Eyes
- 9 The Path Through Pregnancy with Diabetes
- 10 Foundation News
- 12 A Vision for the Future
- 14 Hospital News
- 15 Wellness Classes

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# Diabetes Surprise!

## A PATIENT'S UNEXPECTED DIAGNOSIS

Diabetes and prediabetes are stealth diseases that can silently lurk. According to the Centers for Disease Control and Prevention, 37.3 million Americans have diabetes, and one in five of those people don't know they have it. An additional 96 million Americans have prediabetes, and more than eight out of 10 people don't know they have it.

Ellicott City resident Liang Guo was one of those who didn't know he had diabetes until he found himself at the HCGH emergency department.

"I am 47 and had recovered from COVID and for several weeks had been drinking a lot of fruit juice to take in more vitamins," recalls Liang. "I started feeling very sick, and I was always thirsty. Then I felt sharp pains in my belly and my wife sent me to the ER."

Liang's blood sugar was 1,600. Normal blood sugar is less than 200.

"His blood sugar was the highest I've ever seen," says **Andrew Demidowich, M.D.**, a Johns Hopkins endocrinologist and chief of Inpatient Endocrinology at HCGH. "His severe stomach pain was a hallmark sign of the most critical manifestation of diabetes, diabetic ketoacidosis."

"When blood sugar is at that high level, the body is no longer able to utilize sugar as a fuel and it must go to a backup generator, which is fat. When fat breaks down, it turns into fatty acids — literally acidifying the blood—which can be deadly. Mr. Guo was truly in a medical emergency."

Liang spent several days in the intensive care unit receiving insulin and intravenous fluids before being discharged with his blood sugar down to nearly 200. He was prescribed two shots of insulin daily.

"I was shocked I had diabetes. No one in my family has it," says Liang.

**Liang took the HCGH Living Well with Diabetes classes and learned about the disease and how to adapt his diet.**

"I'm Chinese and eat a lot of rice and noodles," says Liang. "My educator told me how to eat less carbs each meal and how to exercise. I love soda, but now I drink lemon water or sparkling water. I think a lot about the foods I eat and have learned what raises my blood sugar. I feel much healthier."

Liang's diligence to his health paid off. He has lost nearly 40 pounds, putting his body mass index near normal. In addition, within six months, he was not only able to decrease his insulin doses, but he actually weaned off insulin completely.

“One of the things I tell patients with a new diagnosis of type 2 diabetes is that although we may be starting diabetes medications upon discharge, be it insulin or pills or both, it is absolutely possible to come off them over time. If you make a concerted effort in your diet and lifestyle, and stay consistent with taking your meds, your body has the opportunity to heal itself, and you can put your diabetes into remission.”

— Andrew Demidowich, M.D.

Dr. Demidowich applauds Liang's efforts. "It's not always easy, but if you're committed and willing to make changes in your habits, you can do it. He's a living testament to that."



# FACT OR FICTION:

If you want to lower your risk or manage your diabetes, look no further than what's on your plate. Making good choices at mealtime can make a big difference, but it can be hard to get started. Learn the truth about diet, exercise and diabetes from **Andrew Demidowich, M.D.**, a Johns Hopkins endocrinologist and chief of Inpatient Endocrinology at HCGH.

## FACT:

### Your diet plays an important role in managing your diabetes risks.

There are two major factors in determining diabetes risk: genetics and diet. Since you can't change your genes, adjusting your diet is your first line of defense. A great place to start is by using the "plate method" to build healthy meals. "Fill half your plate with any type of vegetables," says Dr. Demidowich. "It has to be something you enjoy otherwise it won't become a habit. A quarter of the plate should be starches or carbs, and the other quarter should be meat. Fish or poultry are best. You can also make a big impact by not drinking your calories. Swap soda for unsweetened tea, seltzer or flavored water."

## FICTION:

### Carbs and sugars have no place on a diabetic's plate.

The key to progress is sustained change. Be realistic with yourself about what that looks like. If you can't imagine a world without white rice or pasta, you don't have to — just be mindful of the portion size — try to keep carb portions no larger than the size of your fist. If cutting processed sugar out completely sounds too daunting, allow yourself to have a treat once or twice a week. Dr. Demidowich says, "Even Olympic athletes have a cheat day or two, and people with diabetes should be allowed to as well. Make them consistent, like Tuesdays and Saturdays, and mark them in advance on your calendar. Those days you splurge a little, whether it's a single scoop ice cream cone or it's a slice of cake on someone's birthday."

“If you forbid yourself from eating your favorite comfort foods, you're more likely to fall off the wagon. You have to enjoy your life too.”

## FACT:

### Reading nutrition labels will help you make healthy choices.

People with diabetes should pay close attention to how much added sugar is listed on food nutrition labels and look at the total sugars and total carbohydrates to put it into context. Your favorite orange juice, for example, may not have any added sugars, but a quick glance at total sugars and total carbohydrates will show you that it's still packed with sugar and probably a poor choice for you. Make sure to read the ingredient list as well. If corn syrup, high fructose corn syrup or cane sugar are in the first two ingredients, put it back on the shelf and look for a healthier choice.



# Diet, Exercise and Diabetes

## FICTION:

**Eating healthy is time consuming and expensive.**

Preparation is the key to success if you're on a budget or have a busy schedule. When you have time, do some healthy shopping and prepare meals for later. "It's not a sin to snack. Sometimes, you're going to hit the point where you need to eat now or you'll get hangry and make bad food choices," says Dr. Demidowich. "Stock your fridge and pantry with healthy low-carb snacks so that when that happens, you're prepared." Try to prepare several days of meals at a time, so you can grab your lunch on the way out the door or warm up an easy dinner when you get home. If you just need a snack, opt for foods that have protein and healthy fats and are low in simple sugars. Greek yogurt, sliced apples with peanut butter, cheese sticks, carrot sticks and protein bars are all great choices.

## FACT:

**Weight loss is beneficial for diabetes, but not absolutely crucial.**

Did you know that our biological systems have stacked the cards against us to prevent us from losing weight? When you start shedding pounds, your metabolism slows to prevent you from losing more weight. Dr. Demidowich encourages you not to get discouraged if you have trouble meeting your weight loss goals.

“**It is true that even losing 5% of your body weight will contribute to lowering your blood sugar, blood pressure, cardiovascular risk and improving your A1C. At the end of the day, weight loss is not the most important thing. Some people may lose five pounds of fat and gain five pounds of muscle, which is incredibly beneficial, but their scale frustratingly shows no change. Weight quality is much more important than weight quantity.**”

## FICTION:

**You need to exercise more to manage diabetes.**

When it comes to diabetes management, exercise is only 20% of the puzzle — 80% is diet. Diabetes control starts in the kitchen, not at the gym. "It takes 30 minutes to burn off 200 calories, and it can take only 30 seconds of poor snacking to put 200 calories back on," says Dr. Demidowich. That said, exercise can help lower blood sugar and play an important role toward getting healthier. However, if you have diabetes and you're going to increase your exercise regimen, talk to your physician beforehand. "Exercise naturally moves sugar into the muscles, and your muscles will start burning it like a furnace," says Dr. Demidowich. "All of a sudden, that dose of insulin that you were on when you were not very active may be too strong for you now that you are a more active individual." Patients on insulin often need to reduce their insulin doses on intense workout days.

## NEED SUPPORT MANAGING YOUR DIABETES?

HCGH offers several free programs and ongoing support groups to help you manage your prediabetes or diabetes and live a healthy life. Living Well with Diabetes is a **free** six-week workshop that teaches glucose monitoring, skin and foot care, exercise and nutrition as well as many techniques to cope with the emotions that accompany diabetes for diabetics. Caregivers are welcome. Visit [hcggh.org/classes](https://hcggh.org/classes) for a complete list of dates and times of classes and support groups.

# Vessels, Veins, Arteries and Diabetes

**Why do you have an increased risk for vascular issues when you have diabetes? Prolonged periods of higher-than-normal blood sugar levels contribute to atherosclerosis — the hardening and narrowing of arteries. This can lead to damaged and blocked arteries and greatly impact smaller blood vessels such as the tiny arteries in your feet and toes.**

## **Your Feet and PAD**

“Patients with diabetes frequently come to me with nonhealing wounds on their feet,” says **Rebecca Marmor, M.D.**, a Johns Hopkins vascular surgeon on staff at HCGH. “It is a very common and difficult problem for the diabetic population.” Known as peripheral arterial disease or PAD, it is caused by poor blood flow to the muscles in the legs and feet.

Many people with diabetes also have neuropathy — a diminished ability to feel sensations in their feet — making them especially susceptible to trauma. “If they step on something sharp, the poor blood flow to their foot compromises and sometimes prohibits their ability to heal,” explains Dr. Marmor. “Compound that with neuropathy, and a wound might go undetected for weeks or months.” She tells her patients with diabetes to examine their feet every day for cuts, blisters, red spots and swelling. For patients who have difficulty looking at their feet due to arthritis or another condition, Dr. Marmor suggests wearing white or light-colored socks, flip them inside out at the end of the day to check for blood and other signs of injury or infection. Your socks should be dry.

**Dr. Marmor recommends people with diabetes regularly see a podiatrist for routine care, and if they have a wound on their foot, they should see a vascular surgeon for an evaluation of their blood supply.**

“We typically do this with noninvasive techniques, such as ultrasound,” she says.

## **Surgical Treatments**

“**There are many catheter-based interventions such as an angiogram with a balloon or a stent that are minimally invasive and may restore blood flow, depending on the blood vessels that are impacted. Sometimes an open bypass is necessary where we surgically reroute the blood flow.**”

— Rebecca Marmor, M.D.

## **Blood Sugar Control**

People with diabetes are less likely to develop vascular issues or problems with healing when their blood sugar is controlled. In addition, should they need surgery to improve blood flow to heal a wound, good blood sugar control will decrease the risk of wound infection and increase the likelihood of a successful surgery.

**Rebecca Marmor, M.D.**, is a board-certified Johns Hopkins vascular surgeon in Columbia.

**Appointments: 410-955-5165**



# Keeping the Beat: Staying Heart Healthy with Diabetes

It can be easy to fall out of rhythm with your diet and exercise routines. You're not alone if the stairs to your office building have become more difficult to climb in the last few years. Getting winded after a flight or two might mean you're just out of shape, but it could be something more serious — especially if you are diabetic or prediabetic. Jasmin Sahbaz, M.D., a board-certified cardiologist on staff at HCGH, tells us why harmonizing your heart health and diabetes treatment is so important.

## Connecting the Dots

Diabetes is a key risk factor for cardiovascular diseases like heart attack and stroke because it increases inflammation in your body, leading to high blood pressure, high cholesterol and arterial plaque buildup. Even if your heart function is completely normal, Dr. Sahbaz says, diabetic inflammation can cause the heart to stiffen and fail. Attending routine screenings with a cardiologist can help people with diabetes identify and treat heart issues early.

## Seeing the Signs

It's not always easy to spot the symptoms of cardiovascular disease. Chest pain is obvious, but other signs can be more subtle and develop slowly. It may take years for slight issues like shortness of breath when walking, a decline in your ability to exercise, leg swelling and/or sleeping problems to build up or progress. "A lot of people will write these symptoms off as 'Well, I'm getting old, I'm out of shape,'" says Dr. Sahbaz. "But sitting in front of a cardiologist and having a discussion is very important — especially if diabetes is in the mix."

**Jasmin Sahbaz, M.D.**, is a board-certified cardiologist with Cardiovascular Specialists of Central Maryland in Columbia.

**Appointments: 410-997-7979**



## Getting Back on Track

"Diabetes is such a strong determinant of cardiovascular disease that current preventive guidelines recommend that all diabetics, even if they do not have elevated cholesterol, be on a low-dose cholesterol lowering therapy," Dr. Sahbaz says. Screening for early onset coronary artery disease is also recommended. If you have diabetes, you want to alter your risk factors by controlling cholesterol and high blood pressure and working on weight loss and exercise to reduce arterial plaque buildup.

## Staying In Sync

Your risk for diabetes and heart disease is determined by genetics to some degree, but the impact of diet, exercise, stress, sleep and other lifestyle changes should not be underestimated.

“**Taking your medication and building healthy habits go hand in hand.**”

— Jasmin Sahbaz, M.D.

"A lot of the diabetes we see is linked to diet. Try to be mindful about what you eat and how often you exercise. It plays a role in what your cardiovascular health will look like down the line." Looking for a place to start? Try to exercise four or five times a week for 30 to 40 minutes. And don't forget—walking counts!

# Seeing Beyond Diabetes:

## COMMON EYE COMPLICATIONS AND TREATMENTS

Q&A

WITH

Yassine Daoud, M.D.

Did you know that diabetes is one of the few conditions that can lead to complete blindness? Johns Hopkins ophthalmologist Yassine Daoud, M.D., explains how diabetes can harm your eyes and potentially “turn all the lights off.”

### Q. How does diabetes harm the eye?

A. Heightened levels of glucose in your blood can cause damage to the blood vessels and nerves all over your body. The eye is no exception. One of the most common conditions we see is diabetic retinopathy, a disease of the retina that damages the blood vessels in the back of the eye. People with diabetes are also at risk of developing diabetic macular edema (a swelling at the center of the retina), glaucoma and cataracts.

### Q. How common is diabetes-related vision loss?

A. About 285 million people have diabetes with resulting problems in their eye, according to the Centers for Disease Control and Prevention. Diabetic retinopathy affects almost one third of adults over 40 with diabetes. Twenty percent of those cases are vision-threatening.

### Q. What are the risk factors for developing diabetic eye disease?

A. Poorly controlled blood sugar levels and high blood pressure are risk factors. Other factors include the length of time you have been diabetic and if your diabetes is well managed by diet, medication or insulin.

### Q. What is the prognosis for people with diabetic eye conditions?

A. In the early stages of diabetic retinopathy, we can treat the condition with certain medications or laser, but as the condition advances, it becomes more complicated to treat. With cataracts or corneal scars, we can do surgery to bring the vision back. With diabetes that has advanced to the point of affecting your retina (proliferative diabetic retinopathy), unfortunately, there is not much we can do to bring your vision back. Our goal is to make sure it doesn't get to that point.

### Q. What should I look out for?

A. Because the damage is happening inside your eye, you won't be able to see the first signs of trouble in the mirror. What you will see is that your vision is blurry. You may also notice that it fluctuates, or it's just not as good as it used to be. Dry eyes are also an indicator.

### Q. How can I protect my eyes and prevent diabetes-related vision loss?

A. First, see an eye doctor. Do not let guilt over bad habits or poor blood sugar control prevent you from seeking care. Second, do whatever you can to control your blood sugar and blood pressure. When diagnosed in the very early stages, patients do incredibly well with strict control. What is good for your heart is good for your eyes. Limit sugar intake, maintain a healthy diet, stay active and exercise regularly. Your lifestyle affects the outcome of your vision and your health.

**Yassine Jamil Daoud, M.D.**, is a board-certified ophthalmologist and practices at the Johns Hopkins Wilmer Eye Institute in Howard County.

**Appointments: 410-910-2330**





# The Path Through Pregnancy

## DIABETES ON THE JOURNEY TO MOTHERHOOD

Did you know that diabetes impacts up to ten percent of pregnancies? This condition can add a layer of complexity to family planning, but with the right care, mom and baby can have a healthy journey from conception to birth.

### Preconception: Starting the Conversation

If you're thinking about starting a family, it's time to talk to your physician about it too — especially if you have diabetes. "It's important to establish care as early as possible," says **Ichchha Madan, M.B.B.S.**, a Johns Hopkins maternal fetal medicine specialist at the Center for Maternal and Fetal Medicine. "High glucose can cause birth defects as early as five weeks in the pregnancy. That's before many women know they are pregnant."

### Early Pregnancy: The Journey Begins

If you're diabetic and pregnant, your primary OB/GYN will likely refer you to a maternal fetal medicine specialist. One of their main concerns will be keeping your blood glucose levels stable. "The fasting and post-meal glucose goals for diabetic pregnant women are strict and fewer diabetes medications are safe to use during pregnancy," says Dr. Madan. "Insulin and Metformin are the best options. Because of this, diet is crucial, and our patients

work closely with our diabetic educator throughout their pregnancies." Care at the center begins with an initial evaluation, after which the care team helps patients optimize their glucose control and manage risks. Most patients visit the center frequently for follow-ups to ensure they stay on track.



### Later in Pregnancy: A New Set of Hurdles

In the final trimester of pregnancy, our monitoring is much more intense due to the increased risks for diabetic women," says Dr. Madan. "Twice a week, the care team monitors the baby and amniotic fluid levels, checks sugars and looks for signs of pre-eclampsia, and more.

“We are laser focused on keeping the pregnancy healthy as we approach term.”

— Ichchha Madan, M.B.B.S.

Additionally, women who are not diabetic before pregnancy may develop gestational diabetes around this time. After 24 weeks, every pregnant patient should be routinely tested for this condition.

### Postpartum: Planning for the Future

After delivery, the path forward depends on the type of diabetes you have. Patients with type 1 or type 2 diabetes can return to their standard medication. "If you were prescribed insulin during your pregnancy, that doesn't mean you have to stay on it," says Dr. Madan. "Once you have delivered, there are many oral diabetes medications that can be used."

Patients with gestational diabetes can expect the condition to resolve in six to eight weeks. However, Dr. Madan warns that it can be a sneak peek into your future. "Up to 70 percent of people who develop gestational diabetes will get type 2 diabetes 20 to 25 years down the road," she says. "We highly encourage our patients to continue to make healthy lifestyle and dietary choices after pregnancy. It's a worthwhile investment in your own health."

### Ichchha Madan, M.B.B.S.,

is a board-certified maternal fetal medicine specialist at the Johns Hopkins Center for Maternal and Fetal Medicine in Columbia.

**Appointments: 410-740-7903**



# Philanthropy in Action

## DONORS INVEST IN WOMEN'S HEALTH



### Creating Awareness. Supporting Care.

Members of Alpha Kappa Alpha Sorority, Inc.,<sup>®</sup> Iota Lambda Omega Chapter in Howard County held a monthlong awareness campaign and series of events to observe Breast Cancer Awareness Month and highlight disparities in breast cancer and outcomes for African American women. Through chapter members' activities, including a mobile breast cancer screening unit and walk-a-thon, the Pearl Foundation donated more than \$2,000 to the HCGH Claudia Mayer/Tina Broccolino Cancer Resource Center in support of cancer patients, families and caregivers.

"We are appreciative of the previous AKA, Inc., administration's vision and commitment to supporting breast cancer prevention and women's health care. Members of ILO took this vision and made it a reality, as we are committed to our mission of Service to All Mankind" says Angela L. Williams, Ph.D., vice president and program chair of ILO.

### The Impact of Collective Giving

Driven by lifting up women and girls in Howard County through collective giving, the Women's Giving Circle (WGC) of Howard County answered the call to invest in comprehensive women's health care. Their \$6,000 gift funded a new state-of-the-art portable ultrasound machine for The Johns Hopkins Breast Center in Howard County.

"We are very proud of this gift that supports women in our community getting the care they need. During our 20th anniversary last year, the WGC underwent a study to examine the state of women and girls in Howard County. The equipment needed for the breast center aligned with the health care needs our study uncovered, so it made perfect sense for the WGC to partner with this philanthropic investment," says Jennifer Bodensiek, WGC Advisory Board chair.



### INSPIRED TO GIVE

Howard County resident and HCGH Foundation Trustee Holly Griffin was inspired to make a gift to The Johns Hopkins Breast Center in Howard County after learning about HCGH's vision to expand the center.



Holly, whose mother is a breast cancer survivor, has many close friends and family members who have been touched by the disease, so she says the decision to give was simple.

"My husband Rand and I donated \$50,000 to support The Johns Hopkins Breast Center at HCGH because, while I have not been touched by breast cancer yet, it is all around me, affecting several family members and dear friends. I would like women in our community to have access to Johns Hopkins breast surgeons, caregivers and comprehensive breast health services without having to leave Howard County. We should be able to receive top-quality breast care where we live and work."

RESPONDING TO THE NEED:

# Johns Hopkins Breast Center at Howard County General Hospital



**W**ith support from our philanthropic partners, work has begun on our new and expanded breast center. The newly envisioned breast center will include an expansion of the current space as well as an enhancement of the services currently being offered to include patient navigation, genetic evaluation and management, and a survivorship program for a more patient-centered experience. The center provides patients with the opportunity to receive care from multiple specialists in one location.

The renovation project is underway and expected to be completed in July 2023. When renovations are complete, it will be a hub for breast care in the region.

## Breast Cancer Diagnosis and Treatment Close to Home

The newly renovated breast center will offer comprehensive breast services that include diagnostics and biopsies, and a full range of treatment options for breast cancer. Our Breast Center is the only hospital-based program for breast cancer treatment in Howard County, allowing our patients to receive expert care, close to home.

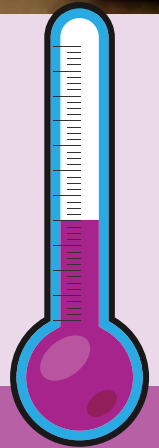
Johns Hopkins Division Chief of Breast Cancer Surgery Lisa Jacobs, M.D., leads a dedicated team that includes Dr. Olutayo Sogunro, a Johns Hopkins breast surgeon who focuses on triple negative breast cancer, male breast cancer, radiation-induced angiosarcoma and health disparities in breast cancer. Together, the team delivers compassionate care for women with breast cancer and other breast health concerns.



**Goal: \$600,000**

To realize our vision, the hospital has made an investment in developing the enhanced breast center at HCGH. We now need the support of our community and philanthropic partners to reach our goal.

**Progress: \$219,064**



## Invest in Our Future

Your gift ensures women in Howard County can get the best treatment close to home.

Make a gift at [bit.ly/SupportHCGH](https://bit.ly/SupportHCGH)



# A VISION FOR THE

## HELP US MOVE HEALTH CARE FORWARD FOR THE NEXT

HCGH is celebrating our 50th anniversary this year, reflecting on 50 years of caring for our community and looking forward to the future of health care in Howard County.

**“Our 50th birthday gives us an opportunity to honor the people who got us to where we are today and to raise the funds needed to make our vision for the future a reality. We need to develop the next generation of caregivers, create state-of-the-art healing spaces for our growing and aging population and bring new and expanded Johns Hopkins specialty care and programs of excellence here, so that no one has to leave the community to receive care. We are committed to moving health care forward in Howard County, and we need your help to get there.”**

— Shafeeq Ahmed, M.D., president,  
Howard County General Hospital

### What will the future look like?

Our vision of creating healing spaces begins with a new Behavioral Health Unit, addressing the rising need for mental health crisis services.

Maryland Hospital Association reports, “18.3% of hospital visits in 2021 were for behavioral health, up from 10.5% in 2013.”

As the only hospital in the area that can treat patients with emergent psychiatric needs, our emergency room is a frequent destination for patients who are experiencing a mental health crisis and who need our help.

In 2020, HCGH opened a new inpatient psychiatric unit which offers a healing space to patients requiring hospitalization. There are some patients, however, who do not meet the criteria for inpatient admission but do require supervised care. In these cases, they remain in the Emergency Department (ED) while waiting for placement at a facility specializing in their needs, which can limit the capacity for other emergency patients who also need to be treated in the ED.

## WHY I GIVE:



HCGH construction, 1973



Nursing newborns, circa 1970s

# FUTURE

50 YEARS **50**<sup>TH</sup>  
**ANNIVERSARY**  
**FORWARD**  
*for all of us*



HCGH has proposed construction of a new Behavioral Health Unit outside the ED that would increase our overall capacity for care of behavioral health patients while providing that care in a safe healing environment.

Additional projects include taking the lessons learned from the COVID-19 pandemic and creating a new inpatient unit designed to treat those who require hospitalization due to the next pandemic and renovating the Neonatal Intensive Care Unit (NICU) to build a family-centered environment featuring the latest advancements in technology and equipment.

## MAKE A GIFT

Your gift fuels innovation and drives health care forward in Howard County.

Visit [hcgf.org/50Forward](https://hcgf.org/50Forward) or scan the QR code to help fund the future.



## SUPPORTING HEALTH AND HOPE

“A favorite proverb of mine says, ‘He who has health has hope, and he who has hope has everything.’ As chairman of the HCGH Foundation board and co-chair of the 50th Anniversary Committee, I recognize the need for supporting the only hospital in Howard County and ensuring that my friends, family and neighbors have access to the best care, right here in our community. I have chosen to make an investment in the health of Howard County through personal and corporate giving, and it is my hope that these gifts will inspire others to invest as well.”

— Zack Shariff

**Allen & Shariff Engineering**, headquartered in Columbia and founded by Zack Shariff, recently made a gift commitment to become an inaugural Corporate Partner. **Corporate Partnerships** are available at several giving levels, and Howard Hospital Foundation staff can customize an engagement program to meet your company’s goals and advance HCGH’s mission.

To learn more, visit [bit.ly/HCGH-CorporatePartner](https://bit.ly/HCGH-CorporatePartner).

COMING SOON:

# Johns Hopkins Community Physicians New Columbia Location

This spring Johns Hopkins Community Physicians (JHCP) is opening a new Howard County office at 8820 Columbia 100 Parkway, Suite 400, in Columbia that will provide adult primary medical care.

JHCP, a part of Johns Hopkins Medicine, offers comprehensive patient- and family-centered care, patient education initiatives, and convenient open scheduling and video visits.

To schedule an appointment, call 443-393-9600. Learn more at [jhcp.org/ColumbiaNorth](http://jhcp.org/ColumbiaNorth).



**50<sup>TH</sup>**  
**ANNIVERSARY**  
**FORWARD**  
*for all of us*

## HCGH Turns 50

On July 17, 1973, what was then known as the Columbia Hospital and Clinics Foundation opened as a 59-bed, short-stay hospital. Fast forward 50 years to today and Howard County General Hospital has grown into a comprehensive acute care medical center with 226 licensed beds, and in 2022 served 142,122.

Visit [hcgh.org/50Forward](http://hcgh.org/50Forward) to hear about our past that established our foundation, the present and those who brought us here, and our future that moves health care forward for all of us!

## HCGH doctors serving you

These HCGH physicians have recently relocated or established new offices in Howard County.

### DENTISTRY

Terri Ambrose, D.D.S.  
Terrific Smiles  
Pediatric Dentistry  
5850 Waterloo Road, #220  
Columbia, MD 21045  
443-393-2181

### ENDOCRINOLOGY

Mahfuzul Khan, M.D.  
Howard County Endocrinology  
2850 N. Ridge Road, #203  
Ellicott City, MD 21043  
410-770-2793

### ENDOCRINOLOGY

Sergio Lizama-Hernandez, M.D.  
Maryland Endocrine  
10710 Charter Drive, #410  
Columbia, MD 21044  
301-953-2080

### GASTROENTEROLOGY

Xu Dabo, M.B.B.S., M.M.E.  
Gastro Center of Maryland  
7120 Minstrel Way, #100  
Columbia, MD 21044  
410-290-6677

### GENERAL SURGERY

Raul Sebastian Laines, M.D.  
Johns Hopkins Community Physicians  
11085 Little Patuxent Parkway, #103  
Columbia, MD 21044  
410-997-1508

### INTERNAL MEDICINE

Steven Eversley, M.D.  
Crossroads Medical Associates  
4801 Dorsey Hall Drive, #201  
Ellicott City, MD 21042  
410-997-7660

### PEDIATRICS

Debra Lee, M.D.  
Howard County Pediatrics  
9501 Old Annapolis Road, #101  
Ellicott City, MD 21042  
410-992-9339

Veronica Wang, M.D.  
Klebanow and Associates  
8821 Columbia 100 Parkway  
Columbia, MD 21045  
410-997-1700

(continued in next column)

To find a specialist, visit [hcgh.org/findadoctor](http://hcgh.org/findadoctor).

# Wellness Classes

## CHILDBIRTH AND PARENTING EDUCATION

**Childbirth and Parenting Education** classes costs are per couple and are offered virtually via Zoom and in person. **Childbirth Preparation, Breastfeeding and Infant Care** include an online course and an instructor-led class. For information, dates and to register, visit [hcg.org/babyclasses](https://hcg.org/babyclasses).

- **Childbirth Preparation: Virtual**  
Our certified childbirth instructor will provide an overview of childbirth preparation and demonstrate breathing and relaxation techniques. Does not include Birthing Center Tour. \$80.
- **New: In-Person Childbirth Preparation**  
Topics are the same as Childbirth Preparation: Virtual but offered in a small group, in-person setting with hands-on demonstrations. Includes an in-person tour of the Birthing Center. Limit six couples per class. \$100.
- **New: Individual Childbirth Preparation and Tour**  
Meet individually with a certified childbirth educator to prepare for the birth of your baby and take a personal tour of the Birthing Center. Instructor will address childbirth topics that are of most importance to you in an in-person, private setting. Limited to expectant mother/birth partner. \$150.
- **Breastfeeding**  
Mothers and their partners will learn to navigate breastfeeding during the first 6 to 8 weeks after birth and have their questions answered. \$40.
- **Infant Care**  
Learn about the care of your newborn including crying and comforting, feeding, bathing, sleeping and newborn safety. Our nurse will discuss infant care and newborn behavior, safety and health. \$70.

## ADVANCE CARE PLANNING HELP

Our staff can help you complete an advance directive, which is a legal document that assigns a health care agent who would speak for you should you be unable to communicate. It can also include a living will that communicates your health care wishes. Having your advance directive on file at the hospital allows providers to follow your wishes if you are in the hospital and unable to communicate. Learn more at [speakeasyhoward.org](https://speakeasyhoward.org). To schedule an appointment call **443-518-6684** or email [HCGH-ACP@jhmi.edu](mailto:HCGH-ACP@jhmi.edu). Third Thursday of the month, 1:30–4:30 p.m. (masks required). Free.

## ADULT MENTAL HEALTH FIRST AID

Learn to support an adult experiencing a mental health or substance-use crisis. 6/2, 8:30 a.m. – 3:30 p.m. Free to community/ \$25 per person for businesses.

## YOUTH MENTAL HEALTH FIRST AID

Learn to support youth who may be experiencing a mental health or substance-use crisis. 4/21, 8:30 a.m.–1 p.m. Free to community/ \$25 per person for businesses.

**Classes and support groups are offered virtually via Zoom and in person when possible.**

**To register, visit [hcg.org/events](https://hcg.org/events). For more information, call 410-740-7601 or email [HCGH-J2BH@jhmi.edu](mailto:HCGH-J2BH@jhmi.edu).**

- **Infant and Toddler Safety and Childproofing**  
Learn about car and sleep safety, childproofing, injury prevention, consumer-product safety and emergency preparedness. \$50.
- **Breastfeeding Support Group**  
Meet with other breastfeeding mothers and a lactation consultant. For more information, email [bmadera1@jhmi.edu](mailto:bmadera1@jhmi.edu). Wednesdays, 12:30–1:30 p.m. Free.
- **New: Pregnancy Support Group**  
For expectant couples up to 36 weeks pregnant, this support group includes presentations on pregnancy and parenting, community resources and an opportunity to share experiences. Saturdays, 4/1-5/20, 10–11:30 a.m. Virtual via Zoom. Free.
- **New Mom's Support Group**  
Meet for support, referrals, guest speakers, discussion of parenting topics and an opportunity to connect with other new mothers of babies up to 5 months old. Virtual via Zoom: Tuesdays, 4/3-5/22 or 6/20-8/15, 10–11:30 a.m. Free.
- **Birthing Center Tour: Virtual**  
Our nurse will answer your questions and discuss hospital services, preregistration, COVID-19 policies for Labor and Delivery and Maternal Child units and more. Virtual via Zoom and does not include a live video tour. Free.
- **Empower: Supporting Positive Parenting for Substance-Exposed Newborns: Virtual**  
Mothers will learn to console their baby experiencing neonatal abstinence syndrome in this instructor-led course. Free.

## LIVING WELL WITH CHRONIC DISEASE: Virtual

In this 6-week self-management program learn skills to manage chronic health conditions. Book included. For dates and to register, visit [bit.ly/startlivingwell](https://bit.ly/startlivingwell). Free.

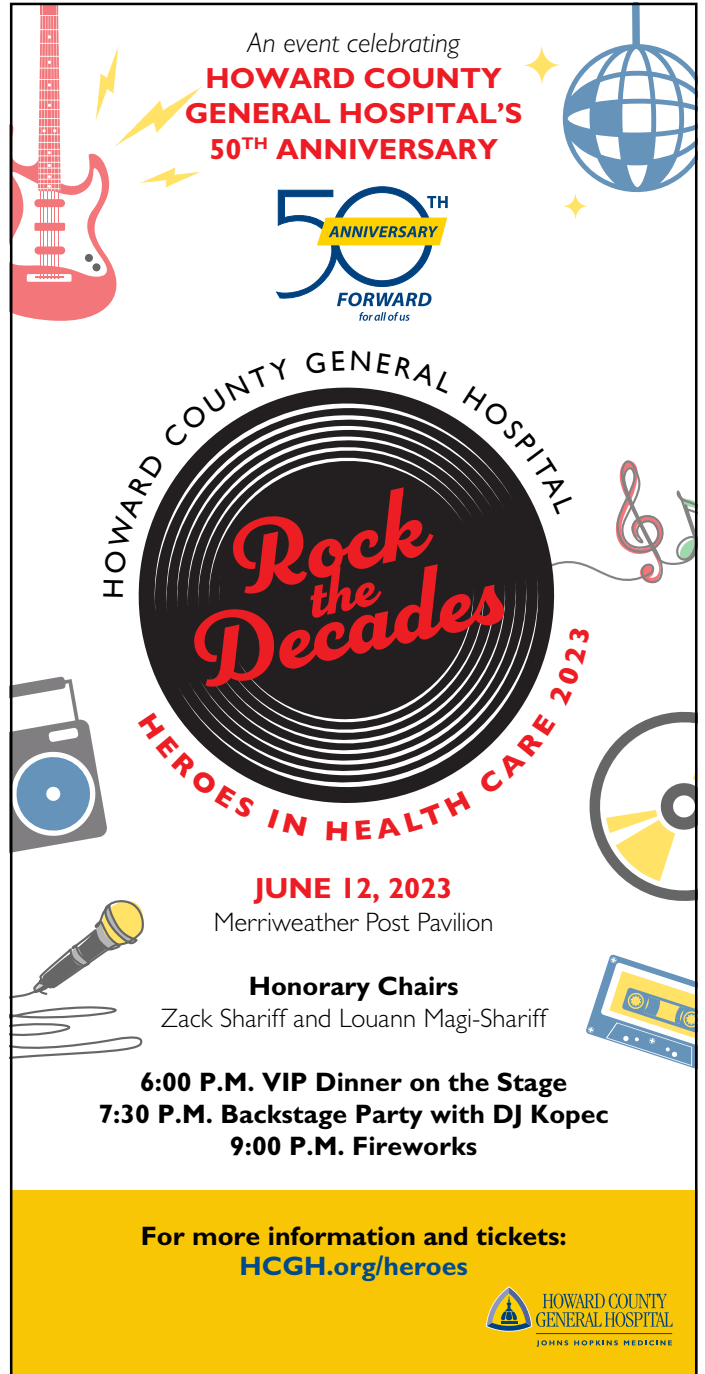
## LIVING WELL WITH DIABETES: Virtual

In this 6-week workshop, learn self-management skills such as goal setting and stress management strategies; appropriate exercise and nutrition for diabetics; understand glucose monitoring; and skin and foot care. Book included. For dates and to register, visit [bit.ly/diabetes-virtual](https://bit.ly/diabetes-virtual). Free.

## DIABETES SUPPORT GROUP: Virtual

This group provides social and emotional support of your experience with diabetes as well as educational resources. First Thursday of the month: 6–7 p.m., and third Thursday, 10–11 a.m. To register, visit [bit.ly/VirtualDiabetesGroup](https://bit.ly/VirtualDiabetesGroup). Free.

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An event celebrating  
**HOWARD COUNTY  
GENERAL HOSPITAL'S  
50<sup>TH</sup> ANNIVERSARY**

**50<sup>TH</sup>  
ANNIVERSARY**  
FORWARD  
for all of us


HOWARD COUNTY GENERAL HOSPITAL  
**Rock  
the  
Decades**  
HEROES IN HEALTH CARE 2023

**JUNE 12, 2023**  
Merriweather Post Pavilion

**Honorary Chairs**  
Zack Shariff and Louann Magi-Shariff

**6:00 P.M. VIP Dinner on the Stage**  
**7:30 P.M. Backstage Party with DJ Kopec**  
**9:00 P.M. Fireworks**

**For more information and tickets:**  
[HCGH.org/heroes](https://HCGH.org/heroes)



# Calendar 2023 ..... of Events:

## Medicare 101: What You Can Expect

Free

April 11/6 - 7:30 p.m.

June 13/1 - 2:30 p.m.

May 10/10 - 11:30 a.m.

*Held virtually via Webex*

Learn about Medicare Part A (hospital), Part B (medical) and Part D (prescription drug). How does Original Medicare work? What are the benefits? What is your share of the costs? When should you make decisions regarding your coverage? Registration required: **410-313-7392**.

## Medicare 102: Why Medicare Isn't Enough

Free

April 18/6 - 7:30 p.m.

June 20/1 - 2:30 p.m.

May 17/10 - 11:30 a.m.

*Held virtually via Webex*

Learn about Part C (Medicare Advantage), other Medicare Health Plans and Medicare Supplement Policies (Medigap Plans). Learn how the two paths work, what they cost and when you can enroll. Registration required: **410-313-7392**.