

Johns Hopkins Bayview

health & wellness



JOHNS HOPKINS
MEDICINE

RACE *to* HEALTH

How weight-loss surgery
helped one woman
become a runner

inside this edition

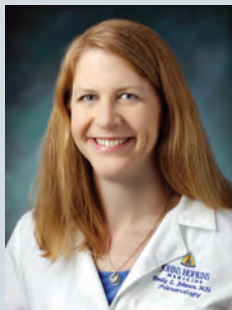
Reaching a Buried Tumor

Deep-set brain tumor removed through
minimally invasive surgery *(page 6)*

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Welcome New Physicians



Emily L. Johnson, M.D., *Neurologist*

Emily L. Johnson, M.D., joins the Department of Neurology. She treats patients with epilepsy and specializes in women with epilepsy.

To schedule an appointment, call
410-550-2339.



Joy Feliciano, M.D., *Oncologist*

Josephine (Joy) Feliciano, M.D., joins the Kimmel Cancer Center as the medical director of the Thoracic Oncology Program and the co-director of the outpatient oncology clinic. She specializes in thoracic oncology and has a special interest in population health.

To schedule an appointment, call
410-955-LUNG (5864).

Are You 'Kidney' Me?

Top 5 Things Your Kidneys Do For You

Did you know that your kidneys play an important role in keeping your body functioning properly? Nephrologist Daphne Knicely, M.D., offers the top five jobs healthy kidneys perform.

1 Remove waste and extra fluid. The kidneys act like a high-powered filter for about 120 to 150 quarts of blood each day to make one to two quarts of urine. This prevents buildup of waste products and fluid to keep your body healthy.

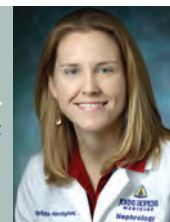
2 Control blood pressure. Kidneys maintain blood pressure by managing the volume of blood in the body. When there is too much blood in the body or the blood flow to the kidneys is reduced, it can cause high blood pressure.

3 Make red blood cells. Healthy kidneys produce a hormone that prompts the bone marrow to make red blood cells, which carry oxygen from the lungs to the rest of your body. Having a low number of red blood cells can result in anemia or other blood disorders.

4 Keep bones healthy. The kidneys make an active form of vitamin D, which absorbs calcium and phosphorus—important minerals for making bones strong. The kidneys also balance the amount of calcium and phosphorus in the body.

5 Control pH levels. The foods you eat can either increase or decrease the amount of acid in your body. Your kidneys balance the pH (measure of acids and bases) by either removing or adjusting the right amounts of acid and buffering agents.

Daphne Knicely, M.D.
Nephrologist



Free Educational Class Dialysis and Transplantation: *Making the Best Decision for You*

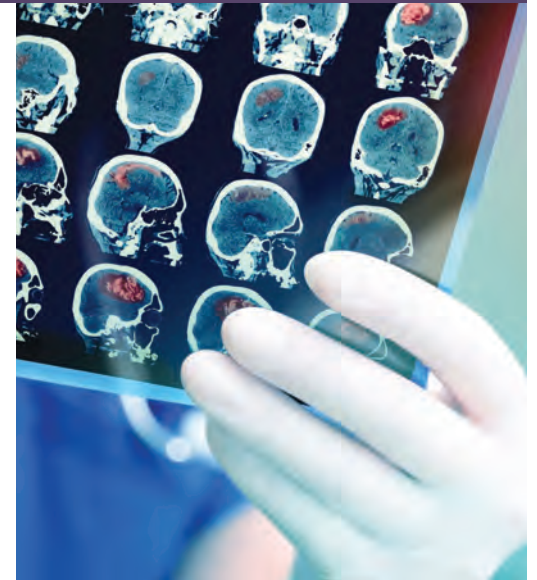
For patients with chronic kidney disease who want to learn about treatment for kidney failure, types of dialysis, dialysis access options and kidney transplant workups. Drs. Daphne Knicely and Sumeska Thavarajah will lead the discussion along with dialysis and transplant patients.

Tuesday, March 14

5 to 6:30 p.m.

Johns Hopkins Bayview Medical Center

To register, call 410-550-KNOW (5669).



Behavior Change Linked to Alzheimer's Disease Onset

Nearly 5.3 million Americans live with Alzheimer's disease, a progressive disorder that impairs memory and judgement.

Growing evidence suggests that psychiatric (behavioral) symptoms can be Alzheimer's predictors. "For many years, we've been working backward—treating Alzheimer's as a purely cognitive disease," says Paul Rosenberg, M.D., associate director of the Johns Hopkins Memory and Alzheimer's Treatment Center. "But behavioral changes can be widespread and disabling," and pose the greatest challenge to caregivers.

"So, when I hear a spouse say, 'My husband has never been a worrier, and now he frets over everything,' I have good reason to think Alzheimer's is involved."

Johns Hopkins scientists have coined the term "mild behavioral impairment" (MBI) to describe

neuropsychiatric symptoms that can accompany, and possibly even predate, Alzheimer's cognitive lapses. In recent clinical studies, Dr. Rosenberg, Memory Center director Constantine Lyketsos, M.D., and colleagues found newly irritable or apathetic seniors were 30 to 40 percent more likely to develop Alzheimer's.

As for therapy, present research hopes to shed light on how behavioral interventions work. For now, to alleviate symptoms, Rosenberg favors lifestyle changes, like stress-reduction programs, yoga and exercise, over traditional psychiatric approaches.

Rosenberg's "big-picture dream" is to nail down who's at risk for Alzheimer's. "Our best chance of making a difference," he says, "is to assess as early as possible."

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Johns Hopkins Bayview Designated as Comprehensive Stroke Center

Johns Hopkins Bayview has been issued a full designation as a Comprehensive Stroke Center by the Maryland Institute for Emergency Medical Services Systems (MIEMSS).

This designation recognizes that the Medical Center offers the critical elements for long-term success and improving outcomes for stroke patients. The five-year designation comes after the Medical Center's successful completion of a MIEMSS site survey. The surveyor found that Johns Hopkins Bayview was committed to this designation, demonstrated efforts to sustain the commitment, and possessed the necessary facility, equipment and staffing resources.

To schedule an appointment at the Johns Hopkins Memory and Alzheimer's Treatment Center, call 410-550-6337.



RACE *to* HEALTH

How weight-loss surgery helped
one woman become a runner

For years, Laura Gavin struggled to lose weight, creeping up and down on the scale. Despite being active, exercising and playing sports six days a week, Gavin had health issues, including pre-diabetes and sleep apnea. She wanted to stop the negative direction her health was heading, so she began researching bariatric weight-loss surgery.

Even before surgery, Gavin started holding herself accountable. She added lean protein and protein shakes for meals and continued exercising. Gavin, from Abingdon, Md., met with bariatric surgeon Michael Schweitzer, M.D. He

educated her about surgical options for weight loss, and what she would need to do before and after surgery to be successful in losing weight. Gavin opted for a sleeve gastrectomy, a minimally-invasive procedure leaving her with a smaller stomach and a decrease in appetite.

Quick Recovery, Long-Term Commitment

“The sleeve gastrectomy was a good choice for Laura. Compared to other weight-loss surgery options, the sleeve procedure allows the patient to maintain the natural curve of the stomach

with the normal pathway to the small intestines. The sleeve has less risk for nutritional deficiencies than the gastric bypass, and most patients lose 60 percent or more of their excess weight,” explains Dr. Schweitzer, director of the Johns Hopkins Center for Bariatric Surgery.

After a sleeve gastrectomy, most patients stay overnight in the hospital for one night and remain out of work for about two weeks. During that time, a specific liquid diet is followed. “It won’t work if you don’t do what the doctors and nurses advise,” adds Gavin. “You have to change your habits and lifestyle.”

Dr. Schweitzer suggests, “Weight-loss surgery allows you to eat healthier in smaller quantities so that you feel fuller longer. To keep the weight off in the long run, you need to eat the right foods to feel full—healthy proteins and carbohydrates that have fiber.”

Gavin recognized that surgery was one tool to help her lose weight. Nutrition and exercise have to be part of the plan. “After surgery, I had to find a routine to fit in my exercise. I started jogging, and hated it at first, but it got easier over time,” remembers Gavin.

Training for a Half Marathon

Now, Gavin enjoys running races and benefits from the stress relief that running brings her. She began running this past summer and quickly built

situations, and I feel more confident. I’m no longer tempted by junk food, so I don’t crave it. My pleasure doesn’t come from food. Nothing I eat feels as good as this healthy life feels.”

Dr. Schweitzer credits Gavin’s success to her embracing a healthy lifestyle. “She eats right and exercises. Laura is a very enthusiastic patient, and follows the recommendations of her care team. Surgery

was the tool she needed to help her lose weight and keep it off,” he says.

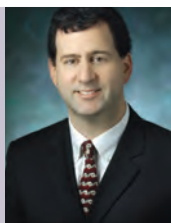
Gavin, who is in her mid-30s, is hopeful for the future. “I wish I had surgery sooner. I’m so glad to be healthier.”

—Karen Tong

Laura Gavin confidently runs races after losing more than 75 pounds.



Michael Schweitzer, M.D.
Director of the Johns Hopkins
Center for Bariatric Surgery



up her endurance. In November, she completed her first 10K race, running 10-minute miles. That race time qualified her to run a half marathon in Walt Disney World this month, where her sister will join her.

After losing more than 75 pounds since having surgery in May 2016, Gavin is also able to bike, and play football and softball. “Even walking my dog is easier,” adds Gavin. She’s enjoying other benefits, too. “I’m more comfortable in social



Information Session Online Video

Learn about program requirements, surgical weight-loss options, and how to navigate the insurance approval process. A free, 20-minute information session video is available at Hopkinsmedicine.org/jhbmcl/bariatrics-online-info-session.



For more information or to register for an online seminar at the Johns Hopkins Center for Bariatric Surgery, call 410-550-0409 or visit hopkinsmedicine.org/jhbmcl/bariatrics.

Reaching a Buried Tumor

Deep-set brain tumor removed through minimally invasive surgery



Sue Moore is happy to be spending quality time with her family. (L-r) Trevor, Garret, Bob, Sue, Carson and Riley.

Sue Moore was adrift.

She'd successfully balanced a 65-hour-week career, marriage and raising four children for decades, but in May 2016, she could tell something was wrong. It began with an unsteady walk that felt like she was on a boat. She didn't think too much of it until she woke up in her Eldersburg, Md., home with the right side of her face completely numb, "like someone had put a menthol rub on it."

Moore's primary care provider sent her to get an urgent CAT scan, then called her before she reached the center's parking lot to send her to her local emergency department. A quick MRI confirmed the presence of a growth next

ing or swelling. She was told to keep an eye out for nausea, headaches and vomiting, which might be a sign of something worse to come. A week later, she woke up with a skull-splitting headache and vomited.

Seeking Treatment

Unfortunately, Moore's cavernoma was buried so deeply in her brain the risk of surgery was deemed too high without an immediate threat of rupture. After she spent several days in her local hospital for observation, she went home hoping that things would calm down. Less than a week later, she was back in the hospital with more vomiting. She turned to her husband Bob and said, "If I feel this bad when I wake up, take me back to Hopkins."

Back at Johns Hopkins Bayview, Moore was assigned to Kaisorn Chaichana, M.D., director of brain tumor surgery. After reviewing her case, he delivered the bad news. "He said it was trying to kill me," recalls Moore. The tumor had bled twice since her diagnosis, and there was a high risk of more bleeding, which could cause permanent disability or death. Despite the risks involved with surgery, especially due to the tumor's location, Dr. Chaichana felt it was the only option to restore her quality of life.

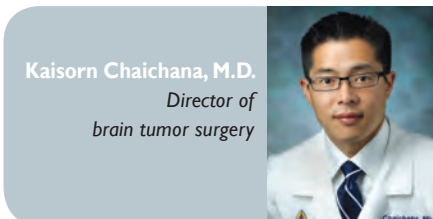
Luckily, new technology was on Moore's side. Dr. Chaichana has extensive experience with a cutting-edge device that allows skilled surgeons to remove deep-set brain tumors that could not otherwise be reached safely, all without damaging the brain. He spent over three hours removing Moore's tumor through a small tube the width of a nickel. As her entire family crowded into a private room, Dr. Chaichana told them the good news. Just two days after surgery, Moore was able to return home.

New Outlook on Life

Moore's family was by her side throughout the recovery process, even when that meant her children and husband unanimously agreed she needed to slow down. With their support, she realized "life's short," and decided to take some time off work for herself before ultimately taking a new position.

Looking back on her experience at Johns Hopkins Bayview, Moore remembers how surprisingly at ease she felt. "The nurses went out of their way to make my visiting friends feel comfortable. Everybody's bedside manner was impeccable. Dr. Chaichana's all the things you'd hope for. He made what should have been a horrible experience seamless, and I felt like I was the only patient he had."

—Martin Fisher



to her brain stem. She was transferred to Johns Hopkins Bayview Medical Center on the advice of the emergency department physician. After an angiogram revealed a cavernoma—an abnormal blood vessel tumor next to her brain stem, she was kept overnight to watch for increased bleed-



For more information or to schedule an appointment, call 410-550-0465.

Ask the Expert:

Complex Contraceptive Services

According to the Centers for Disease Control, 62 percent of American women of child-bearing age are currently using contraception. However, for women with certain medical conditions (see sidebar), traditional birth control methods may be dangerous to their health or have an increased risk of failure, leading to unwanted pregnancy. Jenny Robinson, M.D., MPH, from the Division of Family Planning at Johns Hopkins Bayview, explains how some women may benefit from complex contraceptive services:



What are complex contraceptive services?

Complex contraceptive services are for women who cannot use certain birth control methods due to health problems, who have had a bad reaction (i.e. persistent bleeding) to a particular contraceptive, or who may have had difficulty with IUD (intra-uterine device) or implant placement.

Many women think that the birth control pill is their only option. What they don't realize is that there are so many other options that won't interfere with their health and can also help them meet their family planning goals.

What can I expect when I see you for an appointment?

The first thing we do is go over your medical history. Do you have any health conditions that may make getting pregnant difficult or dangerous to your health? Are you on any medications that may make contraceptives less effective? Have you had any issues with birth control methods in the past?

Then, we talk about your goals for family planning. How long do you want to prevent pregnancy? When do you think you would like to become pregnant? What are your most important considerations in choosing a birth control method? For example, some women prefer to have a regular period each month, while other women prioritize how well a method works to prevent pregnancy, regardless of the effects on bleeding.

Once we get to know you and what you are looking for, we can talk about your options.

How is this different from an appointment with my Gyn/Ob?

Gynecologists and obstetricians are able to provide contraceptive counseling for most women; however, family planning providers are specially trained in addressing potential interactions between medical problems and birth control methods. The selection of a safe contraceptive is more challenging for women who have a history of a blood clot, are taking medications to control seizures, or who have uterine fibroids. Family planning providers also have extensive experience placing IUDs and implants, especially for women who may have had an unsuccessful attempt at placement.

—Meghan Rossbach



What are my options?

Dr. Robinson explains who benefits from certain types of birth control.

To view this short video, visit hopkinsmedicine.org/jhbmcl/familyplanning.



Women who may benefit from complex contraceptive services include those with:

- History of cancer or current cancer
- Cardiovascular disease
- Migraines
- Seizure disorders
- Obesity
- Clotting or bleeding disorders
- History of difficult IUD or implant removals or insertions
- Tilted uterus, fibroids or a history of surgeries that have changed the position of the uterus

These services also may benefit adolescents.



For more information or to schedule an appointment, call 410-550-9840.



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Your Child's Mental Health: *Myths and Facts*

As a parent, you know your child better than

anyone else. If your child starts to exhibit concerning behaviors, or if you suspect that they are struggling with a mental health problem, it's important to know the facts. The Community Psychiatry

Program at Johns Hopkins Bayview Medical Center has providers who specialize in treating children and adolescents. They work closely with families to dispel common myths and to provide accurate information about effective treatment. Below are a few of the most common myths.

Myth: Children don't experience mental health problems. They are either moody or "going through a stage."

Fact: While there is some crossover between symptoms of mental health disorders and the stages of pre-adult development, a parent should not assume that "moodiness" or other signs of distress are benign. Mood, anxiety and attention-related disorders can affect children, and the



symptoms can be severe. "Left untreated, children may suffer unnecessarily and are at greater risk for additional health disorders over time," says Ryan Moore, a licensed clinical social worker.

Myth: Taking a child to therapy is a waste of time.

Fact: Many effective forms of therapy exist. Moore advocates for a strong alliance between provider and family to help everyone cope more effectively and feel better.

Myth: My child just needs a prescription medication to take care of the problem.

Fact: Medication can be helpful, but is not always part of a treatment plan for children. Moore advises that the best plan may include medicine, but will also involve attention to the quality of relationships, coping patterns, environmental stressors and other factors influencing your child's ability to function.

—Kristin Mears

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If you think your child would benefit from mental health services, call 410-550-0104.