

# INGALLS Progress

FALL 2011



## Unique Cancer Treatment Leads to New Life Together

'Accidental Find' Saves Park Forest Woman

Unexpected Therapy for Migraines

Record Recovery after Anterior Hip Replacement

# Letter to the Community



Kurt E. Johnson  
President and CEO  
Ingalls Health System

Assuring continuity of care is a critical function of healthcare systems, and Ingalls has made great strides in making this a seamless process for our patients.

Whether you receive services at the main hospital or at one of our comprehensive outpatient facilities, whether it's in your own home or out in the community, you can count on a consistent quality of healthcare provided by the most caring professionals.

Our outstanding nursing and support staff are dedicated to attending to all things both big and small to see that your stay with us is successful. We pay special attention to educating you on any new medications you're given, and on planning your transition back home with resources in place to avoid future problems.

Much of healthcare, however, is provided these days in an outpatient setting, and Ingalls Family Care Centers are the area's most comprehensive network of advanced diagnostic facilities. We even have the area's longest operating and most respected outpatient surgery center at our Tinley Park location.

And, for life's little emergencies, our Urgent Aid Centers can often replace a visit to a hospital emergency room.

Open 24/7/365 for the treatment of non-life-threatening emergencies, these centers serve most of a family's needs when seeing a doctor just can't wait. And now you can even wait in the comfort of your home until it's your turn, by holding your place in line, online, by visiting Ingalls' website.

At times, Urgent Aid patients are more seriously ill than they realize, and may even require inpatient hospitalization. Now, with Ingalls' new fleet of private ambulances and medi-cars, transportation can be easily arranged.

The Ingalls therapy and rehabilitation continuum is also unmatched in the Southland. From a large, accredited inpatient rehab unit, through our four convenient outpatient locations, home care therapies and relationships with area skilled nursing facilities, Ingalls patients can be assured of highly trained staff who all share the goal of getting you back to your optimal function and independence. Ingalls recently partnered with Providence Healthcare and Rehabilitation Center in South Holland to provide therapy services that are an extension of the quality you've come to know us for.

We hope you'll enjoy reading about other great examples of Ingalls' fine care and quality outcomes on the following pages of this issue of Progress. It would be our great pleasure to be of service to your family for future healthcare needs.

Welcome to wellness!

Kurt E. Johnson

**On the cover:** Newlyweds Avery and Regina Richardson celebrate love and life thanks to an innovative procedure used to treat Avery's liver tumors.

## Welcome New Doctors to the Neighborhood

**Kavitha Bathala, M.D.**, is a board-certified physician specializing in family medicine. Dr. Bathala earned her medical degree from PGS Institute of Medical Science & Research, India, and served her



residency at St. Francis Family Practice Residency. Her office is located at the Ingalls Family Care Center in Tinley Park.

**Ravi George, D.O.**, is board-certified in pediatrics and internal medicine. Dr. George earned his medical degree from Midwestern University in Downers Grove and served an internship and his



residency at the University of Illinois College of Medicine-Peoria. He joined the Family Christian Health Center in Harvey.

# Ingalls recognized for excellence

U.S. News & World Report's first-ever metro-area rankings listed Ingalls among the best hospitals in Chicagoland. We were the only South Suburban hospital to receive high marks for six different specialties: cancer, diabetes, ear, nose and throat, orthopedics, neurology and neurosurgery, and geriatrics.



Professional Research Consultants, Inc. (PRC) named the Ingalls Family Care Centers in Flossmoor and Tinley Park recipients of the 2011 National Excellence in Healthcare awards for consistently achieving "excellent" care ratings by patients. These prestigious awards are based on the percentage of patients who rate a facility "excellent" for overall quality of care.

## Ingalls Community Scholarships Helping Area Students Afford College

In the last decade, college costs have soared more than 20 percent – surpassing nearly every other sector in the economy. That's why the Ingalls Development Foundation is doing what it can to help ease the financial burden for students in or from Thornton Township High Schools District 205.

Introduced in 2005, the Ingalls Memorial Hospital Community Scholarship Program awards \$20,000 to nine students annually – five graduating high school seniors from District 205 and four returning college students. Preference is given to students pursuing a career related to medicine.

To qualify, students must fill out a detailed application, present academic transcripts and write a personal essay in addition to supplying a letter of recommendation from a counselor, principal, teacher or employer appraising the applicant's academic and personal qualities and potential. A committee then reviews each application before selecting the scholarship recipients.

"The scholarship committee is particularly interested in evidence of character, relative maturity, integrity, independence, interests and any special talents or qualities," said Joseph M. Moser, vice president for the Ingalls Development Foundation.

The 2011-12 scholarships were awarded to nine students at the Ingalls Community Leadership Breakfast in May.

One community leader who attended the breakfast was so impressed with the caliber of the scholarship recipients that he made an on-the-spot donation, enabling two additional students to receive scholarships for the 2011-12 school year.

To date, Ingalls has awarded more than \$120,000 in Community Scholarships.

For more information about applying for a 2012-13 Ingalls Memorial Hospital Community Scholarship or donating to the program, please contact the Ingalls Development Foundation at 708.915.6369.

**Wajid A. Khan, M.D.**, specializes in child and adolescent psychiatry. Dr. Khan earned his medical degree from Allama Iqbal Medical School, Pakistan, and served his residency at the University of Kansas School of Medicine. He completed a fellowship in child and adolescent psychiatry at Children's Memorial Hospital, Chicago. He is on staff in Ingalls Behavioral Health Services in Harvey.



**Victoria Ochoa, D.O.**, is a board-certified physician specializing in gynecology. Dr. Ochoa earned her medical degree from the Lake Erie College of Osteopathic Medicine, Erie, PA. She served her residency in obstetrics and gynecology at Mercy Hospital & Medical Center. She joined Reproductive Health Associates – Drs. Hass & Rosner in Hazel Crest.



For more information about physicians on staff at Ingalls, or to make an appointment with any of the physicians listed, please call the Ingalls Care Connection at **1.800.221.2199**, or **708.915.CARE (2273)**.

## Cover Story

# Unique Liver Tumor Treatment Provides Hope for South Side Native



*Dr. Thomas Aquisto and nurse Diane Smith with newlyweds Avery and Regina Richardson at their ceremony held at New Faith Baptist Church in Matteson.*

Avery Richardson's story begins in 2009, when doctors told him his colorectal cancer had spread to his liver and gave him 24 months to live. Out of treatment options, he began to get his affairs in order.

But nearly two years later, Avery is newly married to Regina Hendon, and has a new lease on life, thanks to an innovative procedure recommended by Thomas Aquisto, M.D., interventional radiologist at Ingalls.

"My cancer specialist, Dr. Vasia Ahmed, knew of a new liver treatment and referred me to Dr. Aquisto," he explained.

With a reason to hope, Avery made an appointment with Dr. Aquisto, who suggested the South Side native might be a candidate for a relatively new treatment called selective internal radiation therapy (SIRT) that targets liver tumors directly.



Ingalls is one of the few cancer programs in Illinois to offer this non-surgical outpatient therapy that uses radioactive Yttrium-90 microspheres to deliver radiation directly to the site of liver tumors.

SIRT spares healthy tissue while delivering up to 40 times more radiation to liver tumors than would be possible with conventional radiation. The technique uses the patient's blood supply to send the tiny spheres, smaller in diameter than a human hair, into the microscopic vessels that feed a cancerous tumor. The spheres eventually become lodged at the tumor sites where they deliver a high dose of radiation, shrinking the tumors and extending the life expectancy of patients with malignant liver tumors.

"Of the nearly 150,000 Americans diagnosed with colorectal cancer every year, at least 60 percent will see their cancer spread to the liver, and most liver tumors cannot be surgically removed," Dr. Aquisto explains. "Microspheres therapy has emerged as a novel treatment option when most other treatment options have failed."

For Avery, it was the beacon of hope he had been looking for. After two treatments at Ingalls in 2010, his tumors have shrunk and are now under control. When the happy couple was married April 16, Dr. Aquisto and his staff were there to help celebrate this major life moment.

A man of great faith, Avery believes divine intervention led them to Dr. Aquisto.

"When Regina and I met with Dr. Aquisto, he assured us he would do everything he could to make sure that the procedure was a success and leave the rest up to God," he said. "This gave us confidence. I'm more than hopeful about the future."

"I was in dire straits, and it worked for me," Avery added. "It's just amazing."

**For more information, call Ingalls Cancer Care at 708.915.HOPE (4673).**



*Dr. Ahmed*

**Ingalls Cancer Care.  
Well Respected. Well Connected.**

## Proper Nutrition Is A Must For Cancer Patients

Good nutrition is important for everyone, especially if you have cancer.

Unfortunately, the side effects of treatment can make eating right difficult. Patients often suffer with symptoms that prevent them from eating well – anorexia, nausea, vomiting, diarrhea, constipation, difficulty swallowing, dry mouth, mouth sores, and changes in sense of taste and smell.

The good news is that eating well during treatment can help you build your strength, recover as quickly as possible and stay healthy. In fact, according to the American Cancer Society, good nutrition can even boost the effectiveness of some treatments.

"To increase calories and ensure enough protein is consumed, patients should try to eat six to eight small meals a day," explains Kim Kramer, R.D., L.D.N., Ingalls Wellness Center dietitian.

Mini-meals such as cereal with 2% or whole milk, yogurt with fruit, a half sandwich, cream-based soups, smoothies and nutritional supplements are a great way to boost your nutritional intake.

"Consuming enough calories and protein, especially during radiation or chemotherapy treatments, is essential," she said.

Other tips include:

- Avoid spicy or fried foods, especially on a sensitive stomach.
- Serve foods at room temperature since hot or cold foods can be difficult to eat during treatment.
- Limit diet beverages. Replace with milk, smoothies, juice or canned high-protein drink supplements.
- Short walks are also a great way to prevent fatigue AND boost your appetite during treatment.
- Eat your biggest meal when you feel hungriest. If you feel best in the morning, eat your largest meal then.
- If treatment has left you with a bad taste in your mouth, suck on a piece of hard candy to get an unpleasant taste out of your mouth before eating.
- Be sure to handle foods safely during preparation to avoid foodborne illnesses. Wash fruits and vegetables well and use different cutting boards for meats and produce.

*For more information or to schedule a nutrition consultation with an Ingalls Health System dietitian, call the Ingalls Wellness Center at 708.206.0072.*

# Minimally Invasive Alternative to Hysterectomy: Uterine Fibroid Embolization

When Jacqueline Calhoun's monthly period started showing up more than once a month, initially she was more annoyed than concerned. But when her period started coming every week and was accompanied by worsening cramps, the energetic registered nurse became frustrated and fatigued.

Previously diagnosed with uterine fibroids – non-cancerous tumors that grow on or within the muscle tissue of the uterus – Jacqueline didn't equate her annoying symptoms to the fibroids.

"My gynecologist told me, 'If they don't bother you, we don't bother them,'" she said. For a while that strategy worked. Then she had a couple accidents resulting from the unexpected appearance of her period.



Dr. Lichtenberg

"I talked to one of my colleagues, and she told me about uterine fibroid embolization (UFE)," Jacqueline said.

Jacqueline made an appointment with an Ingalls interventional radiologist, who specializes in minimally invasive UFE.

"He ordered an MRI and found innumerable fibrotic structures in my uterus," she recalls. "The size of a normal uterus is about the size of your fist; mine was double that size."

## Treating Uterine Fibroids Without Hysterectomy

Uterine fibroids affect up to 40 percent of women 35 years and older and are twice as common among African-American women.

Fibroids can be as small as a walnut or as large as a cantaloupe – or even larger. Symptoms include heavy, prolonged periods, pelvic pain and an abnormally enlarged abdomen.

"Fibroids are hormonally sensitive, so symptoms are usually cyclical, like menstruation," explains Richard Lichtenberg, M.D., board-certified interventional radiologist on staff at Ingalls who performs UFEs. "UFE blocks the arteries that supply blood to the fibroids, and is successful more than 90 percent of the time."

The procedure, which takes 60 to 90 minutes, is performed with local anesthesia. A small catheter is placed into the femoral artery. The catheter is steered into the larger of the uterine arteries and small particles (the size of a grain of sand) are mixed with X-ray dye and injected until the blood supply to the fibroids is blocked.

Eventually, the fibroid tumor shrivels up and is reabsorbed into the body. Benefits include a more rapid recovery and return to normal activities, virtually no blood loss and potential preservation of fertility.

"I would definitely recommend UFE," Jacqueline added. "It regulated my periods so there were no more accidents – and no more severe cramping."



If you'd like more information on uterine fibroid embolization, watch a webinar at: [www.ingalls.org/UFE](http://www.ingalls.org/UFE).



# ‘Accidental Find’ of Melanoma Saves Park Forest Woman

You might say that being in the right place at the right time saved Juli Vanderbilt’s life. Especially when the right place is the office of a vigilant, highly skilled general surgeon.

In August 2009, she accompanied a relative to an appointment with surgeon Michael Romberg, M.D.

“We were just finishing up,” Juli explains. “I had shorter sleeves on, and Dr. Romberg noticed a spot on my arm. He said I should get it checked out.”

As it turned out, the “accidental finding” by Dr. Romberg was a godsend.

The oval-shaped dark spot on her left wrist, often obscured by her wristwatch, was a malignant melanoma – the most deadly form of skin cancer.

“My daughter never liked the looks of it,” she said. “I really don’t know how long I had it. It wasn’t painful; it wasn’t raised. It was just a dark spot about a half-inch wide.”



*Dr. Michael Romberg and Juli Vanderbilt*

## Understanding Skin Cancer

According to the American Academy of Dermatology, one in five Americans will develop skin cancer in his or her lifetime. Sun exposure is the leading cause of skin cancer, and people with fair skin and light eyes are most susceptible. However, skin cancer affects people of all skin tones, including darker complexions. Indoor tanning is especially risky.

“Fortunately, most skin cancers can be detected in their early stages since skin tumors are more visible than tumors of the internal organs,” Dr. Romberg explained.

To her relief, the aggressive malignancy was caught before it had spread. Juli had the skin cancer removed, and no additional treatment was needed. “I am forever grateful to Dr. Romberg for noticing it that day in his office,” she added.

“Every individual should check his or her skin carefully for any changes,” Dr. Romberg advised. “Early detection is the key for successful treatment.”

Though she never tanned, Juli admits she never wore sunscreen while biking or gardening. Now she applies 50 SPF sunscreen every time she heads outdoors.

“Because the cancer was caught early, Juli’s prognosis should be great,” Dr. Romberg added.



## Lansing Man Speaks Clearly Again Following Stroke Rehab

Greg Ambrose with therapist Janine Alfirevic

Fifty-nine-year-old Greg Ambrose remembers Dec. 23, 2003, as if it were yesterday.

Feeling energized, the Lansing resident decided to squeeze in a workout before the hustle and bustle of the holidays began.

As he started to run on the treadmill, though, Greg started feeling funny. Then his eyes started playing tricks on him. "It was like I could see the constellations in the daytime," he recalls.

Concerned, he went home and took a nap. When his wife came home and brought in holiday cards from the mail, Greg made a startling discovery: He couldn't read a single word on any of them. None of it made sense.

"I told my wife to take me to a hospital right away," he recalls. Doctors diagnosed him with a stroke, treated him and discharged him a day or two later. Unfortunately, he suffered two more strokes at home on Christmas day.

"By this time, I was really messed up," he said. Greg couldn't read, form words or understand what others were saying. "It was so frustrating," he said.

Greg faced a long road ahead to regain his lost speech and language skills. Luckily, his wife scheduled him for a consultation at the Ingalls Center for Outpatient Rehabilitation in Calumet City. That's where he met Janine Alfirevic, MS, CCC-SLP-L, speech therapist. The clinical term Alfirevic used to describe Greg's condition was "moderately severe aphasia."

Over the next three months, Greg worked with Alfirevic to regain his lost communication skills. Steadily, his language skills returned. Before long, he was speaking as clearly as he did before the strokes.

"Janine was my angel," he gratefully explains. "She really motivated me. I'm able to do what I'm doing today because of Janine and company at Ingalls."

Nearly eight years after his debilitating strokes, Greg is still a regular participant at the hospital's Stroke Support Group. But instead of needing encouragement, now he's the one giving it.

"Greg made so much progress during therapy," Alfirevic said. "He's a wonderful mentor to our other patients."

"It's my feeling that I need to give back," Greg concluded. "Without the help I got for the speech and aphasia, I wouldn't be doing what I'm doing today."

**To determine your personal risk for stroke, visit [Ingalls.org/MyHealth](http://Ingalls.org/MyHealth) and take a simple seven-minute online assessment. You'll be eligible for our quarterly drawing just for entering, and for a free battery of health tests if you are found to be at risk.**





# Botox an Unexpected Treatment for Migraine Sufferers

Botox is famous for smoothing out wrinkles, but did you know it's also FDA approved to treat migraine headaches?

"Botulinum toxin is a bacterial protein that blocks chemicals responsible for muscle contractions and pain," explains Engin Yilmaz, M.D., board-certified neurologist who uses the treatment on migraine patients. "Since last fall, Botox has been approved to treat chronic migraine sufferers – people who suffer from headaches 15 or more days per month with headaches lasting four hours a day or longer."

Betty Ratulowski of Justice is one of them. The 39-year-old single mom has endured debilitating migraines at least three times a week for the last several years. Countless times, she has sought pain relief in a hospital emergency department.

"I have two children, and I would rather go through natural childbirth for 24 hours straight than have a migraine," she explains. "It felt like someone was beating me in the head with a hammer. I was sensitive to light. I had major nausea. I felt paralyzed."

More than 14 million people experience migraine attacks nearly every day, and attacks typically last from four to 72 hours. The causes of migraines aren't fully understood, and oral medications, while helpful for some, leave others like Betty still suffering.

One day in early 2011 while she was watching TV, she saw a commercial about Botox for migraines. She immediately made some calls, and was referred to Dr. Yilmaz at Ingalls.

"When I heard the FDA had approved Botox for migraines, I had to give it a try," she explained.

After just one treatment with Dr. Yilmaz, she immediately felt better. She will continue to have Botox treatments every three or four months – with each treatment expected to produce more effective, longer-lasting results.

"When I woke up that first morning after the treatment, I wanted to kiss the ground," she added. "It was like a miracle. Migraines controlled my life for so long. I finally feel as if I've gotten it back. I've told everyone I know about the treatment!"



**Watch an online interview of Dr. Yilmaz at [www.ingalls.org/ProgressVideo](http://www.ingalls.org/ProgressVideo) or scan this code with your smartphone.**



# Walking Can Lower Your Risk for Alzheimer's Disease

For years, we've been told there's little we can do to prevent Alzheimer's Disease, but new research shows we can help protect our brains as we age.

In fact, a recent study found that walking is one of the best ways to slow down the progression of Alzheimer's Disease if you already have it – or to cut your risk, if you don't.



Dr. Zelkowitz

“Walking just five miles a week can reduce the chances of the disease getting worse in people who already have Alzheimer's Disease,” explains neurologist Marvin Zelkowitz, M.D. “And to reduce the chance of developing Alzheimer's Disease in the future, healthy people should walk at least six miles a week.”

As it turns out, regular walking strengthens the brain's memory circuits and can help reduce memory loss over time.

Other ways to keep cognitive abilities sharp include reading

the newspaper every day, learning a second language, taking up a new hobby, or learning a new skill.

“The greater the novelty and challenge of the activity, the larger the deposit in the brain's reserves,” he added.

In other words, people who continue learning new things throughout life and challenge their brains are less likely to develop Alzheimer's Disease and dementia.

“So if you have never learned a second language, try it. If you have never learned to read music, or paint, or play an instrument, try it,” Dr. Zelkowitz concluded.

***If you're interested in starting a walking program, Ingalls Health System offers mall-walking programs at three area malls with comfortable, climate-controlled conditions: **Orland Square Mall in Orland Park, Lincoln Mall in Matteson, and River Oaks Center in Calumet City.** Programs feature blood pressure screenings, health talks and a free T-shirt for joining. For more information, call Ingalls Care Connection at 1.800.221.2199.***

## Understanding Alzheimer's Disease

As many as 5 million Americans have Alzheimer's Disease, an irreversible, progressive brain disorder that slowly destroys memory and thinking skills, and eventually the ability to carry out the simplest tasks. Symptoms usually first appear after age 60.

Alzheimer's Disease begins slowly, involving the parts of the brain that control thought, memory and language. Patients may have trouble remembering things that recently happened or names of people they know. Over time, they may not recognize family members or have trouble speaking, reading, writing or performing daily activities. Eventually, they need total care.

Alzheimer's starts when tangles begin to develop deep in the brain. As more and more plaques and tangles form in particular brain areas, healthy neurons begin to work less efficiently. They lose their ability to function and communicate with each other, and eventually they die. As the death of neurons increases, affected brain regions begin to shrink. By the final stage of Alzheimer's Disease, damage is widespread and brain tissue has shrunk significantly.

## Risk Factors

Risk factors include advancing age, lack of physical exercise, smoking, high blood pressure, high cholesterol, poorly controlled diabetes and family history of the disease. Women may be more likely to develop Alzheimer's, partly because they live longer than men.

Factors that may reduce your risk of Alzheimer's Disease include higher levels of formal education, a stimulating job, mentally challenging leisure activities such as reading, playing games or playing a musical instrument, and frequent social interactions.

If you or a loved one starts to show early signs of dementia or Alzheimer's Disease, see your doctor right away. The earlier the diagnosis, the better the chance of a longer, productive life.

# Irwin Retina Center: Landmark Macular Degeneration Study Shows Two Drugs Equally Effective

In April, the National Institutes of Health released its much-anticipated one-year results of the Comparison of AMD Treatment Trials (CATT), which compared the effectiveness of two drugs.

When it comes to treating wet age-related macular degeneration (AMD), the less costly drug Avastin is as effective as its pricier counterpart Lucentis in stopping the progression of wet AMD and improving vision.

The Irwin Retina Center at Ingalls was the only Illinois test site and was one of the country's leading enrollers in the study. Patients were randomly assigned and treated with one of four regimens for a year. They received Lucentis monthly or as needed, or Avastin monthly or as needed.

The results showed that Avastin and Lucentis were equally effective and safe to use. Further, the study showed that "as-needed" dosing does nearly as well as monthly injections.

"Lucentis was approved by the U.S. Food and Drug Administration (FDA) in June 2006 for the treatment of advanced, or wet, macular degeneration," explains David Orth, M.D., principal investigator for CATT and medical director of the Irwin Retina Center at Ingalls.

Avastin is a drug closely related to Lucentis and has been widely used off-label in Europe, Canada and the United States to treat wet macular degeneration for years.

Both therapies are manufactured by Genentech, Inc., and work by interfering with proteins needed for the growth of new blood vessels. However, the cost of the two drugs varies widely. Lucentis costs roughly \$2,000 per dose, while Avastin runs about \$50. Most patients with macular degeneration are covered by Medicare, so the federal government has been interested in findings that might reduce treatment costs.

"Patients being treated for wet macular degeneration don't see very well," Dr. Orth explained. "So they rely on someone to bring them in for treatment. If we can treat them less often with an equally effective therapy, that's a real benefit – both in terms of cost and convenience.



Dr. Orth with CATT study participants at the Irwin Retina Center in Harvey. Standing: (left to right) Frank Swan and Bob Sypniewski. Sitting: Herman D. Tieri, Glee Hibbeler and Helen Kawalski

The one-year results are quite promising."

Since 84-year-old Glee Hibbeler was enrolled in the study two-and-a-half years ago, the vision in her right eye has improved. So much so that the energetic Palos Hills woman still reads, drives and regularly socializes with friends and family, including a twice-weekly bridge game.

"I think it's wonderful," she said. "I'm so lucky this happened to me when we have this treatment available."

Eighty-year-old Frank Swan of Hinsdale agrees. Frank, who no longer receives regular injections, says the treatment has kept the condition in his left eye from worsening. Like Glee, he remains active, drives and enjoys regular games of golf.

"I do anything I want to do," he said.

**For more information regarding the treatment options for Age-Related Macular Degeneration, contact Linda Arredondo, R.N., at the Irwin Retina Center at Ingalls Memorial Hospital 708.915.6943.**



Watch an online interview of Dr. Orth at [www.ingalls.org/ProgressVideo](http://www.ingalls.org/ProgressVideo) or scan this code with your smartphone.





Marcia and Jaime Hernandez with Molly, Abigail and Samuel

## Quick Response Saves 38-Year-Old Man

The irony isn't lost on Jaime Hernandez: He suffered a heart attack last January while he and his wife were on their way to a steak dinner that was to be followed by a "bacon and beer tasting."

"I ruined date night," the Tinley Park father of three ruefully recalls.

Though he had no family history of heart disease and never experienced symptoms, Jaime says he hadn't felt well all day leading up to his heart attack.

"I started getting short of breath," he remembers. "My left hand clenched up involuntarily. Then my left arm stiffened up completely, and I was sweating."

Jaime's quick-thinking wife dialed 911 from her mobile phone. The operator told her to pull off at the next interstate exit, where an ambulance would meet them.

EMTs stabilized Jaime, gave him a baby aspirin to chew and whisked him to Ingalls Memorial Hospital, where interventional cardiologist Francis Almeda, M.D., was waiting for him.

Within minutes, he was taken to the hospital's cardiac catheterization laboratory where he underwent an emergency balloon angioplasty to reopen a severely clogged coronary artery, and received a stent to keep it open.

As part of the Ingalls lifesaving "door-to-balloon" protocol, angioplasty and stenting are performed within 90 minutes. "Research shows the faster a heart attack is treated, the lower the potential for heart muscle damage," Dr. Almeda explained.

### Back on the Road to Heart Health

While his heart attack came as a shock, Jaime admits he wasn't exactly a poster boy for good health either.

"My cholesterol was 210, and a recent blood pressure test showed that I was in the pre-hypertensive range," he said.

Jaime said he skipped the gym more than he hit it. Pounds crept on with less activity and more fattening foods. "My biggest mistake was that I didn't regularly see a doctor," he said.



Dr. Almeda

But his January 15 wake-up call has the determined husband and father back on the road to heart health.

"God bless Dr. Almeda and everyone at Ingalls Hospital for saving my life."

Jaime's advice to others who may be ignoring their health: "You don't want to reach this point to make changes in your life. See your doctor and make smarter choices."



Watch our exclusive online video of Jaime Hernandez at [www.Ingalls.org/ProgressVideo](http://www.Ingalls.org/ProgressVideo) or scan this code with your smartphone.



# Big 10 College Official Scores with Leg Vein Procedure

For severe varicose vein sufferers, walking short distances can be painful, but can you imagine running on a football field for three-and-half hours?

William “Bill” LeMonnier of Tinley Park can.

The 62-year-old retired assistant school superintendent gets plenty of running in during the college football season. He’s a Big 10 referee who has made a second career out of officiating big college games.

Except for the occasional aches and pains that come with a strenuous workout, the very physically fit Bill keeps up with athletes young enough to be his grandchildren.

But three years ago, he developed a throbbing pain in his left shin that he just couldn’t shake.

“I felt like somebody had kicked me,” he recalls. “It was really difficult with all the running we had to do.”

Though he managed to complete the 2008-09 season with the help of ibuprofen to mask the pain, Bill couldn’t ignore it any longer.

“I thought maybe I’d pulled a muscle or had shin splints, so I had it checked out,” he explains.

Following a screening procedure, Bill was told his pain was from varicose veins. The enlarged veins had faulty valves that were causing blood to pool in his lower leg, which were in turn pressing on a nerve and causing pain.

With the mystery solved, Bill underwent a procedure known as laser vein ablation at the Ingalls Vein Clinic in Tinley Park.

“Nearly half of Americans over age 50 have some venous insufficiency, which occurs when the valves in the leg veins have become damaged and do not return blood to the heart and upper body normally,” explained Interventional Radiologist Thomas Aquisto, M.D. “Congestion or dilatation of the veins results in swelling of the legs and may cause varicose veins.”

“Laser vein ablation is an outpatient treatment that suits today’s busy lifestyles,” Dr. Aquisto added. “After the procedure, a patient can literally walk out of the office and resume normal activities after a few days to a week.”

Bill had the procedure in July 2009 and by the start of the fall football season a month later, he was back on the field, officiating games.

This past January, Bill, who works about a dozen games a season, officiated the Bowl Championship Series final game in Glendale, AZ, in which Auburn beat Oregon, earning their first national title since 1957. He also had the thrill of officiating the 2007 Fiesta Bowl when the Boise State Broncos beat the Oklahoma Sooners 43-42 in overtime.

“I haven’t had any pain at all in my leg,” he added. “It’s a great procedure.”

**To see if you are a candidate, call the Ingalls Vein Clinic at 708.915.7518.**



# Organ Repairman Back in Tune with Anterior Hip Surgery

Chris Marshall, who repairs church organs, keyboards, digital pianos and public address systems, spends his days traveling through the Chicago area and northwest Indiana.

But in the last few years, occupational hazards have taken their toll on his left hip.

"It got to the point where every step I took, I got the jab," the 66-year-old owner of Metro Organ Service recalls.

On the advice of two acquaintances from his own church, Chris made an appointment with Daniel Weber, M.D., a board-certified orthopedic surgeon on staff at the Ingalls Advanced Orthopedic Institute, who performs a special type of hip replacement surgery called the anterior approach. "It was important to me to be up and around quickly," Chris explains.



Dr. Weber

After a consultation with Dr. Weber, Chris underwent anterior hip replacement surgery at Ingalls in February.

Unlike traditional hip surgeries, which involve a lengthy ten- to twelve-inch incision through the buttock muscles and tendons, anterior hip replacement reaches the hip joint from the front. Using a specially engineered operating table, surgeons work between the muscles and tissues without detaching them, leading to a quicker recovery and preventing hip dislocation.

Afterwards, patients can immediately bend at the hip and bear full weight when comfortable, which means a more rapid return to normal function. Other benefits include a shorter hospital stay, smaller incision and less pain.

*Ingalls Advanced Orthopedic Institute.  
Move Again. Live Again.*

Though he doesn't play a note of music, Chris Marshall of Midlothian has made a career of keeping area church-goers in song.



"By and large, individuals with hip arthritis would be candidates for anterior hip replacement," Dr. Weber said.

## A Record Recovery

Following surgery, Chris was back home in less than three days and eagerly performed his physical therapy exercises. Just two-and-a-half weeks after surgery he was back to work part-time, and five days after that, he was working full-time.

"I can't be more excited about this procedure," he says. "I didn't even have staples. I'm so grateful to Dr. Weber for getting me back to where I needed to be."

*For more information about anterior hip replacement at Ingalls, call IngallsExpress at 708.915.PAIN (7246).*

# Newer Treatments Encouraging For Patients With Psoriatic Arthritis

Golf pro Phil Mickelson's admission that he's battling psoriatic arthritis has put the national spotlight on this chronic autoimmune disease.

"Psoriatic arthritis is a chronic inflammatory disease of the joints and skin that affects as many as one million people in the U.S.," explains Majid Serushan, M.D., board-certified rheumatologist. "It affects up to 30 percent of people who have psoriasis – a common skin disease that causes cells to build up rapidly on the surface of the skin, forming thick silvery scales and itchy, sometimes painful red patches."

Fifty-four-year-old Michael Zemaitis of New Lenox knows that all too well.

The self-employed CPA was diagnosed with psoriatic arthritis when he was a child. "I would get stiff joints and have a hard time walking around," he explained. "My parents would take me to the doctor, but my symptoms would go away."



Phil Mickelson



Dr. Serushan

Michael's experience with the disease was classic: Flare-ups alternating with periods of remission. Eventually he was diagnosed with psoriatic arthritis and put on non-steroidal anti-inflammatory medications – the only treatment available at the time.

Today, Michael's condition is under control thanks to aggressive medical management by Dr. Serushan.

Like Mickelson, he takes a biologic medication (Humira) to reduce the signs and symptoms. The medication not only decreases joint pain, stiffness and swelling, it also clears up the skin lesions caused by psoriasis.

"Biologic agents like Humira and Enbrel also help prevent further damage to the bones and joints, and enable patients to perform their daily activities," Dr. Serushan explained.

"Dr. Serushan has taken great care of me," he adds. "I can't say enough good things about him. I'm able to work. I take care of my daughter, and I fish whenever I can. A positive attitude is everything."

## Don't Ignore Symptoms

Symptoms of psoriatic arthritis include warm, painful, swollen joints; sausage-like swelling of the fingers and toes; and back and foot pain.

"If you have psoriasis, be sure to tell your doctor if you develop joint pain. There are many effective therapies available today," Dr. Serushan added. "Most people whose disease is well-managed can enjoy many of the activities they always have."

**For a referral to an arthritis specialist, call Ingalls Care Connection at 1.800.221.2199.**

# State Wrestling Champ Grapples with Torn ACL and Triumphs!



As a champion high school wrestler, Steve Congenie of Oakbrook Terrace has faced some pretty tough opponents.

But during an off-season match in May of 2010, the 17-year-old grappler met his toughest opponent ever: a torn anterior cruciate ligament (ACL), a severe injury that could have put an end to his successful wrestling career.

"I was behind my opponent, trying to lift him in the air," the two-time state champ recalls. "All of a sudden, I fell to the mat; my knee just completely gave out. I finished the match, but every time I tried to pivot, it just didn't work."

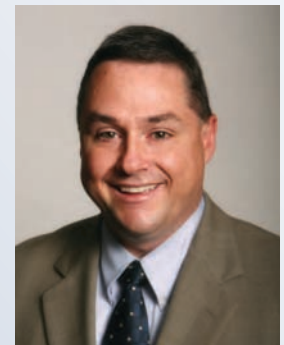
After an exhaustive internet search, Steve's mom, Kari, contacted a prominent pediatric orthopedic specialist at Boston Children's Hospital—Harvard. Though they were prepared to travel, Boston Children's recommended a highly skilled pediatric orthopedic sports medicine specialist in Chicago: Harvard-trained James Krcik, M.D., of the Advanced Orthopedic Institute at Ingalls.

The next day, the Congenies met with Dr. Krcik, who recommended reconstruction of the ACL followed by intensive physical therapy. "Dr. Krcik was very emphatic that the key to a successful recovery was following the rehabilitation protocols to the letter," Kari, Steve's mom, explained.

"The ACL is one of four main ligaments in the knee. It will not heal on its own, so the standard treatment is reconstruction surgery," Dr. Krcik added. "With appropriate treatment and rehabilitation, 90 to 95 percent of people who undergo ACL reconstruction surgery can return to full sports participation within six to nine months."

Highly motivated to wrestle again, Steve did exactly what he was told. And less than a year after his devastating ACL tear and subsequent surgery, Steve triumphed on the mat again, earning his second state championship title!

"It showed how determined I was to wrestle again," Steve said. "Dr. Krcik was extremely thorough. I always knew what I was supposed to do."



Dr. Krcik

"We're so proud of Steve, and we're very pleased with Dr. Krcik and the care Steve received at Ingalls," Kari added. "It's very reassuring to know that there's someone of Dr. Krcik's caliber so close to home."



# Back Pain a Thing of the Past Following Disc Replacement

When 38-year-old Julie Blair of Chicago recalls what life was like before she had back surgery at Ingalls, her most vivid memory is of pain. Even the simplest things, like washing the dishes, going for a walk or standing at the altar on her wedding day caused her to grimace.

“Everything was a chore for me,” she explains. “I couldn’t sneeze without bracing myself. Sometimes I’d take a step and just go down.” She tried chiropractors, exercise, massages and cortisone injections to treat her unrelenting back pain, but nothing worked for long.

“My quality of life was miserable at that point,” she said.

When she talked to her doctors about her degenerated disc, one orthopedic surgeon’s name kept coming up: George Miz, M.D., a spine specialist with the Advanced Orthopedic Institute at Ingalls.

Dr. Miz told Julie about a special procedure that involves the replacement of a degenerated disc with an artificial one. At the time, it was still considered an experimental procedure. “Dr. Miz was very optimistic about the disc replacement,” she recalls. After discussing it at length with her husband, Julie agreed to have the procedure at Ingalls.

## Understanding Artificial Disc Replacement

The procedure begins by removing the degenerated gelatinous disc between the vertebrae. A plastic spacer made of a polyethylene core is put between the vertebrae, and the patient’s own body weight compresses the spacer after the surgery is complete.



Dr. Miz

Candidates include individuals between 18-60 years of age with degenerative disc disease at one level in the lower back, who have failed at least six months of treatment such as pain medication, physical therapy, joint injections and epidural steroid injections.



“Artificial disc replacement is the first motion-preserving alternative to spinal fusion surgery,” Dr. Miz explained. “It not only relieves the underlying back pain but also may protect patients from developing problems at the adjacent level of the spine.”

The day after surgery, Julie was up and walking. Three days later, she was pain-free and recovering in the comfort of her own home. After several months of physical therapy, the energetic Chicago police officer was back on bike patrol with no problems.

Today, Julie and her husband are anxiously awaiting the birth of their first child – something she couldn’t even have considered before surgery.

“There’s no way I could have carried the extra weight of pregnancy with my back the way it was before,” she added. “I’m so grateful to Dr. Miz.”



**If you’d like more information on artificial disc replacement, watch a webinar at: [www.ingalls.org/disc](http://www.ingalls.org/disc).**

# Simple Surgical Repair Fixes Bladder Prolapse for Midlothian Woman

The first symptom that most women with a prolapsed bladder notice is the presence of tissue in the vagina that many describe as feeling like a ball.

Cystocele – the clinical name for a prolapsed bladder – occurs when the supportive tissue between a woman’s bladder and vaginal wall weakens and stretches, allowing the bladder to bulge into or protrude from the vagina. This condition can happen during different stages of a woman’s life, but many women experience bladder prolapse as they age.

Straining the muscles that support the pelvic organs may lead to a prolapsed bladder.

Vaginal childbirth and chronic constipation can contribute to pelvic muscle weakening. Women are also at added risk for prolapsed bladder after menopause, when estrogen levels decrease.

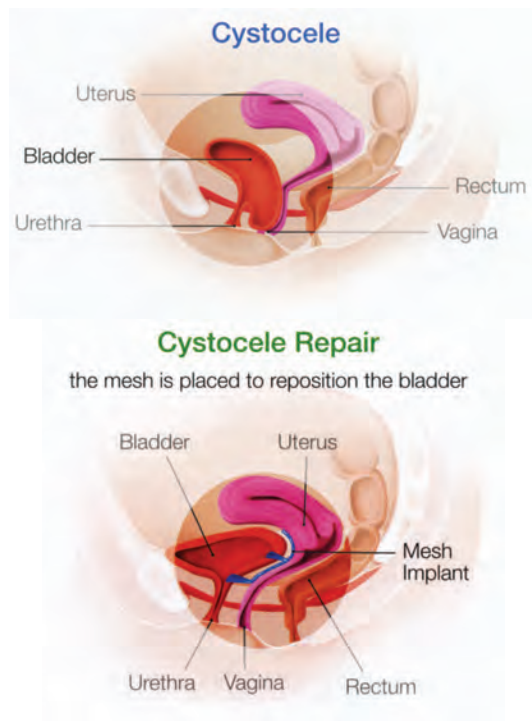
Symptoms include a feeling of pressure in the pelvis or vagina, especially after standing for long periods; increased discomfort when you strain or lift; a bulge of tissue that, in severe cases, may protrude through the vaginal opening, or recurrent bladder infections.

For mild or moderate prolapse, non-surgical treatments including medications and/or special muscle-strengthening exercises are usually effective. However, in more severe cases, surgery may be necessary to keep the vagina and other pelvic organs in place.

Beverly Williams of Midlothian put her severely prolapsed bladder on hold until her husband recovered from heart surgery earlier this year. The 71-year-old wife and mother of two grown sons had struggled with the growing discomfort for several years.

“It was very painful,” she explained. “My bladder was not supported at all. I felt like I had to go all the time.”

In early 2011, Beverly met with a board-certified urologist at Ingalls who recommended a procedure called anterior vault prolapse repair to put her drooping bladder back in place and keep it there. Beverly had the procedure done at Ingalls in May.



## How the Procedure Works

A small incision is typically made through the front wall of the vagina. The bladder is then moved back to its normal location. Depending on the severity of the prolapse, the vaginal wall may be folded, or part of it may be cut away. Stitches are made in the tissue between the vagina and bladder, which will hold the walls of the vagina in the correct position. A mesh sling (made of synthetic or biologic material) may also be used to keep the bladder in place.

General anesthesia is used, and patients usually go home the next day.

Because the surgery involves a small incision, post-operative pain is reduced, and recovery is quicker than with traditional open surgery: one week compared to several. This highly-effective procedure is much less invasive than it was in the past, and if the repair works, it should hold for the long term.

After a one-day stay in the hospital, Beverly was back home. By the next day, she was cooking and doing light housework. “I’m back to normal again,” she added.

## Healthy Baby Network Invaluable for Expectant Women and Adolescents

When 18-year-old Terika Taylor discovered she was pregnant last year, she immediately informed her mother – then she talked to her high school counselor. It was one of the best choices the Dolton teen could have made.

That's when she discovered the Healthy Baby Network (HBN), an outreach program that addresses the healthcare needs of economically disadvantaged pregnant women and adolescents. Managed by Ingalls Memorial Hospital, the HBN connects expectant mothers with a unique network of local healthcare providers, retailers, government agencies, schools and community organizations that work together to coordinate prenatal care, education and social services for pregnant women.

“Research shows that mothers-to-be who receive prenatal care throughout their pregnancy are less likely to have premature or low-birth-weight babies – and are less likely to encounter serious health problems related to their pregnancy,” explains Shanice Graham, R.D., HBN coordinator.

Since its inception in early 2008, enrollment is at an all-time high of more than 750 members. Low-birth-weight deliveries have declined nearly 70 percent from 2008, and nearly 70 percent fewer pregnant women arrive in the hospital emergency department to deliver without any previous prenatal care.

Additionally, more than 80 percent of the program's active participants, like Terika, now have medical insurance and an established relationship with a doctor, which is good for her baby boy – Prince Armani – who was born at Ingalls April 12, weighing a healthy 6 lbs., 10 oz.

And when Terika was ready to bring her baby home, the HBN presented her with a brand-new infant car seat (thanks to a generous grant from ArcelorMittal in Riverdale) so she could safely transport her precious new bundle by car.

The motivated teen plans to attend college, major in mathematics and one day become a college professor.

“The Healthy Baby Network can be that stepping stone for expectant mothers and let them know it's really not as overwhelming as it seems,” Graham added. “We're here for them.”

***If you or someone you know is in need of prenatal care, and would like to enroll in the Healthy Baby Network, call Shanice Graham, R.D., HBN coordinator, at 708.915.3825 for more information.***



Ingalls Progress is created to provide healthcare information to the residents of Chicago's South Suburbs.

Shelia Porter, *Editor*  
Susan Fine, *Director*  
Marketing Communications

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Ingalls has the most extensive network of outpatient care centers in the South Suburbs. Wherever you live or work, you'll find an Ingalls facility nearby:

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- > **Ingalls Family Care Center, Flossmoor**  
(Governors Highway between Kedzie and Vollmer)  
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# THE END OF ER WAITING.

[Ingalls.org/InQuicker](http://Ingalls.org/InQuicker)



## Ingalls Family Care Centers:

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