

# INGALLS Progress

FALL 2016



## The University of Chicago Medical Center



**Historic Partnership Begins**

## Letter to the Community



President and CEO  
Kurt E. Johnson

As Ingalls embarks on an extraordinary new partnership, we are pleased to announce several exciting initiatives that will expand access to vital services – and improve the health of our patients and the communities we serve.

Most notable is our collaborative relationship with the University of Chicago Medical Center (UCMC), a perfect fit because they share our mission and values, our commitment to quality, and our vision for healthcare in the South Suburbs. This allows us to continue to invest in our existing programs and bring innovative new technologies to you at a faster pace than before. As we officially begin joint planning for synergies with UCMC, you can be assured that we remain dedicated



Board Chair  
Eugene M. Feingold

to providing the personalized community medicine that our residents have come to expect from Ingalls.

At Ingalls, we're always looking for ways to serve you better.

That's why in Calumet City, we recently added infusion services for patients who need IV therapy for irritable bowel syndrome, arthritis, anemia, osteoporosis, multiple sclerosis and many other non-cancer conditions. We're also planning a convenient outpatient pharmacy so patients can leave a doctor's appointment with prescriptions in hand.

Other additions for 2017 include adding endoscopy services such as colonoscopy at our Flossmoor Family Care Center. There we'll also be expanding our on-site pain management program to include an even broader range of treatments.

At our Tinley Park Family Care Center, we're adding a 23-hour observation unit for Urgent Aid patients who need additional evaluation before they can be sent home – or admitted to the hospital – for conditions like low-risk chest pain, dehydration, asthma, abdominal pain, transient ischemic attack and minor infections. What's more, the unit's around-the-clock monitoring capabilities will enable us to offer more complex outpatient surgeries at our on-site Same Day Surgery Center, such as laparoscopic gallbladder removal, partial knee replacement, laminectomy and more.

We're also planning this year to replicate our popular QuickCare walk-in primary care services like those available at our Crestwood Care Center to other communities within our service area.

As healthcare here and across the nation continues to evolve in new and exciting ways, one thing remains the same: our steadfast commitment to care for you and improve the health of the communities we serve.

### Ingalls Named Best for Superior Breast Care



When it comes to their families' health, women rule the roost, making nearly 80 percent of all healthcare decisions. Their opinions and preferences are critical! That's why Ingalls is thrilled it has received the 2016 Women's Choice Award®. These evidence-based designations identify the country's best healthcare institutions based on robust criteria that considers female patient satisfaction, clinical excellence, and what women say they want from a hospital.

Ingalls has received the 2016 Women's Choice Award as one of America's Best Breast Centers.

The Women's Choice Award recognizes Ingalls' nationally accredited Richard K. Desser, M.D., Comprehensive Breast Center, and its commitment to a global mission to elevate the patient experience for women and all patients as one of more than 374 award winners.

Ingalls earned the award by having met the National Accreditation Program for Breast Centers standards from the American College of Surgeons.

As one of America's Best Breast Centers, Ingalls also carries the Seal of the American College of Radiologists as a Breast Imaging Center of Excellence, and scored above average on the Centers for Medicare and Medicaid Services patient satisfaction measures.

## In Memoriam

### Robert L. Harris, Former Ingalls President/CEO



Former Ingalls President and Chief Executive Officer Robert L. Harris played a defining role in the history, growth and expansion of Ingalls Health System. From 1967 until his retirement in 2000, his innovative approach and vision was responsible for the development of the region's most sophisticated outpatient

healthcare network. He created the area's mobile intensive care system and brought in countless clinical innovations over the years.

Mr. Harris remained on the Ingalls Board of Directors until his passing. Last September, the hospital opened its new History Atrium in the lobby dedicated to the great accomplishments of Mr. Harris.

His Ingalls family will remember him with fondness and respect.

## Better Together! Ingalls and the University of Chicago Medical Center

As of October 1, Ingalls Health System and the University of Chicago Medical Center have officially joined forces in a historic merger that combines two complementary, highly respected health systems.

Ingalls will remain a not-for-profit community hospital, with separate licensure. The University of Chicago Medical Center (UCMC) is now the parent to Ingalls, and the two organizations have merged assets.

Ingalls is the first community hospital system in the UCMC organization, which includes the main medical campus in Hyde Park, numerous outpatient facilities including the soon-to-be-opened Center for Advanced Care in Orland Park, as well as UCMC's expansive network of physicians.

When fully integrated, the partnership will provide an unmatched array of services that encompasses convenient, community-based healthcare with world-class specialty care, giving the diverse communities we serve greater access than ever before.

"Both organizations have a longstanding commitment to quality, innovation and superior outcomes," said Kenneth S. Polonsky, M.D., Executive Vice President of Medical Affairs and Dean of the Biological Sciences Division at the University of Chicago. "Our collective patients and communities will benefit from the complementary services and greater options that this union brings."

As part of the merger, UCMC will enhance Ingalls' capacity to provide superior outpatient care, medical staff growth and development, the latest technologies and support local philanthropic initiatives.

Ingalls will not duplicate the University of Chicago Medical Center's services in Harvey, but rather work toward facilitating access for our patients to their world-class tertiary care, a wider range of physician specialists, and sophisticated consultative services like cancer geneticists. Alternately, UCMC's patients will benefit from services available at Ingalls, including inpatient rehabilitation, home healthcare and behavioral health.

Ingalls will retain our name, but UCMC and Ingalls both have powerful brand names in the communities we serve, so that combining these brands over time will certainly be pursued.

Ingalls will remain under the direction of President Kurt Johnson and our current administrative team, and will retain a local Board of Directors. Ingalls also will have representation on the UCMC Board.

There are no plans to consolidate jobs or services. There will be no immediate change to the insurance plans Ingalls accepts, our charity care and financial assistance policies, or our mission to improve the health of the communities we serve.

"This partnership underscores our joint commitment to improving health and access to quality care in our communities," said Kurt Johnson, Ingalls President. "Ingalls will continue to invest in our facilities, enhance our technologies at an accelerated pace, and sharpen our focus on providing innovative services and a strong regional network of top-rated outpatient services close to home."

Ingalls also has a 93-year history of caring for all people, regardless of their ability to pay, and remains committed to that value.

"The University of Chicago Medical Center is equally committed to serving the community and providing essential, meaningful community benefits and services," Johnson added. "That was one of the main reasons we pursued a partnership with UCMC. They share our vision for quality healthcare in the South Suburbs."



## 'I Got A Second Chance at Life' Dolton Man Praises Ingalls Heart Care

For forty years, Phil Mack of Dolton smoked a pack of cigarettes a day. Quitting was something he always wanted to do, but he never found the willpower to do it.



Dr. Vsevolod  
Tikhomirov

That all changed on April 1, when the 57-year-old husband and father underwent triple bypass heart surgery at Ingalls. "That gave me the willpower I needed," he explains.

Phil's health troubles began in March with symptoms like swollen ankles, shortness of breath and a cough that wouldn't go away.

"I'd be out of breath just getting ready for work in the morning," the machine operator explains. "Or when I walked up the stairs or after I parked the car in the church parking lot."

On Sunday, March 27, he had a hard time catching his breath all day, and when Monday morning rolled around, he couldn't muster the strength to get up for work.

That's when his wife insisted he go to the hospital.

"The crazy part is I knew something was wrong, and I knew it was serious," he adds. "I was scared to go to the hospital because of the bad news I might get. I thank my wife Penny every day that she made me go. If I hadn't, I might not be here today."

Doctors in the Emergency Department at Ingalls diagnosed him with congestive heart failure and high blood pressure, and he was scheduled for a cardiac catheterization the very next morning. The results showed three severely blocked coronary arteries.

Cardiovascular/thoracic surgeon Vsevolod Tikhomirov, M.D., told him cardiac bypass surgery was the best way to restore proper blood flow to his heart.

In many cases, coronary artery disease can be treated with medication, lifestyle changes and less invasive procedures. But for some patients, blockages are so severe that surgery is necessary to ensure adequate blood supply to the heart.

"During bypass surgery, a graft vein or artery is taken from a healthy blood vessel in the body," Dr. Tikhomirov explains. "The graft is then surgically attached beyond an obstructed or poorly functioning artery."

It's not unlike a quick detour you might take to avoid traffic or road construction.

"After surgery, the blood flows through the graft vessel, avoiding or 'bypassing' the blocked vessel, and providing oxygen and nutrients necessary to the area of tissue beyond the blockage," he added.

Following a brief stay in the hospital, Phil was back home where he made a pledge to transform his life by eating healthier, shedding extra weight and exercising.

Today, he's made good on his promises; he's down more than 20 pounds, avoids fried foods, limits his red meat intake to once a week and enjoys regular physical activity. Best of all, he hasn't smoked a single cigarette since the end of March.

"I got a second chance at life," he adds. "I can see my grandson grow up. Ingalls and Dr. Tikhomirov saved my life and treated me right. I take my hat off to them."

## Minor Heart Attack Doesn't Slow this Cyclist

Ingalls ultrasonographer Dave Stokoski is the picture of health. As founder of the Crown Point Wednesday Night Ride bicycling club, he pedals 125 miles or more a week, and he's got perfect cholesterol and blood pressure.



Dr. Francis Almeda

The health-conscious 63-year-old fuels his lean, athletic frame with fish, chicken, salad, fruits and vegetables, having sworn off fast foods, lunchmeats and soda long ago. He hasn't had a bite of red meat in 25 years.

So when he felt an uncomfortable twinge in his chest bicycling last year, he wasn't alarmed initially.

"I blasted right through it," the unflappable father of two explains. "A couple times I stopped and rested, and it would go away."

When the discomfort persisted, Dave knew he should make an appointment to see his primary care physician.

Two days before his appointment, Dave had another episode while he was getting ready for work.

"I experienced chest pain like I never had before," he explains. "But like a fool, I drove 45 minutes to the hospital. Having worked at Ingalls for over 10 years, I had complete confidence in the ER staff."

He managed to get himself to the Ingalls Emergency Department where, within minutes, he had an entire crew of caregivers around him.

"The ER staff was like lightning," he adds. "There were so many people on me."

Though his chest pain was gone, an EKG and a blood test confirmed a mild heart attack; ER staff immediately contacted the cardiologist on call, Francis Almeda, M.D.

"Dr. Almeda's young and athletic," he said, "And would understand how important bicycling is to me."

Dr. Almeda examined Dave and scheduled him for an angiogram, which revealed two blocked coronary arteries, one at 95%, the other at 70%.

"Even though I'm healthy, I have a family history," Dave adds. "At 56, my dad had a heart attack and quadruple bypass surgery. Dr. Almeda told me my healthy lifestyle saved me from a massive heart attack."

Dr. Almeda opened Dave's blocked arteries with two stents. Within three to four days, he was back home and in two weeks on the bike again – this time in Ingalls Cardiac Rehabilitation.

He completed rehab in six weeks and has been unstoppable ever since, racking up 3,000 miles on his bike in the last year, 500 more than he did the year before his heart attack.

"If you have a heart attack, and you're a super athlete like Dave, it doesn't mean your life is over," Dr. Almeda explains. "With good care, super athletes can get back to where they were before – or even better."

The most important thing, Dr. Almeda adds, is to pay attention to symptoms when you're training and get them checked out right away.

Individuals planning to embark on a rigorous training program for a marathon or triathlon should see their doctor for a complete physical beforehand, especially if they're over the age of 35 and have one or more risk factors for heart disease. "Physical activity has many health benefits," Dr. Almeda added. "When done regularly, moderate- and vigorous-intensity exercise strengthens your heart muscle and lowers your risk for heart disease."



# Health Fair Leads to Lifesaving Discoveries

Preventive medicine and early detection are the driving forces behind the Southland Health Fair since it made its debut more than 33 years ago under the original sponsorship of the Homewood Rotary Club. People have many questions about their health, and community health fairs provide a great forum to get answers. While screenings at a health fair are not meant to take the place of a primary care doctor, or actually diagnose an illness, we certainly can identify risk factors and warning signs...and provide the necessary education to do something about it. The earlier we detect a health problem, the more successful the treatment. Here are two recent examples of how early detection made all the difference.

## Ingalls Health Fair: 33 Years of Preventive Care



**thousands**  
of volunteer  
hours



nearly  
**20,000**  
blood draws



**valuable**  
screenings for cancer,  
heart disease & more



**countless**  
lives improved

## Bobbee's Story



Karen Masino

Most of the time, breast pain is harmless, caused by changing hormone levels. That's why it's most common before menstruation, during early pregnancy and in menopause.

In rare cases, however, it can be a sign of breast cancer.

Seventy-one-year-old Bobbee Brault has dense breasts and for years suffered with an inexplicable ache in her right breast. Last year – like she has for the past several years – the Harvey resident attended the Ingalls-sponsored Southland Health Fair and had a clinical breast exam performed by Advanced Oncology Certified Nurse Practitioner Karen Masino.

To Bobbee's dismay, Karen felt a tiny lump. Shortly after the health fair, Bobbee received a call from the Ingalls Breast Center to schedule a mammogram – something she hadn't done in years.

"I haven't had regular mammograms because I wasn't able to afford them," she explains.

When they learned of her need, the Breast Center connected Bobbee with *A Silver Lining Foundation*, which helped cover the cost of her initial mammogram, a second diagnostic mammogram and breast ultrasound.

Bobbee eventually received the diagnosis she was dreading: breast cancer. But it was caught early.

As she does with most things, the energetic carpenter and home rehabber handled a lumpectomy, lymph node removal and radiation therapy at Ingalls like a pro. But when radiation fibrosis and lymphedema caused pain and swelling in her right chest area and arm – and threatened her livelihood – Bobbee knew she needed special care fast. That's when her cancer specialist James Wallace, M.D. referred her to the Ingalls Rehab Program for therapy.

Highly trained physical therapists and lymphedema specialists Deanna Moody and Lata Pillai at Ingalls in Flossmoor taught Bobbee massage techniques to help soften radiation fibrosis scar tissue and drain lymphatic fluid from her swollen underarm and chest. She continues to perform them faithfully every day. Without them, she says, the pain is back! They also made her a tight-fitting foam pad to control the pain and helped her to obtain a compression sleeve for her arm.

"My Ingalls team was a godsend," she adds. "And the health fair is wonderful because it provides the ability for early detection, which is fantastic for those who can't afford a doctor."

Bobbee, who also writes autographical short stories, says her cancer story is yet to be written. But thanks to early detection and the care she received through Ingalls, it will have a happy ending.



## Arthur's Story

A colorful, full-page ad caught the eye of 66-year-old Arthur Gray as he rifled through the pages of a Chicago newspaper earlier this year. It promoted the Southland Health Fair at the Matteson Community Center and described more than 25 free health screenings from head to toe.

"I periodically take advantage of free offerings," he explains, "and this one seemed really comprehensive." So the Chicago man added it to his calendar.

On the day of the fair, Arthur was waiting in line for a blood test when he noticed the nearby line for skin checks was shorter. So he moved over.

That simple, impromptu decision proved lifesaving when general surgeon and wound specialist Michael Romberg, M.D., detected two suspicious lesions, one on Arthur's right forearm and the other on his back.

"The spot on my arm was about the size of a pencil eraser and dark in color," he explains. "I've had it for a while, but this was the first time I had it checked by a doctor."

Dr. Romberg encouraged Arthur to follow up with him at his office for biopsies. A couple weeks later, he received word that the spot on his right forearm was melanoma, the most serious type of skin cancer.

Arthur was stunned when he received the news. But the former lifeguard and competitive swimmer with fair skin and blonde hair admits he spent a lot of time in the sun when he was younger with little or no protection. Sunburns, excessive sun exposure and fair skin are leading risk factors for melanoma, which develops in the cells that produce melanin – the pigment that gives skin its color. More than 200,000 Americans will be diagnosed with melanoma this year alone.

"Fortunately, it was detected early," Dr. Romberg said. "But that's not always the case; in fact, an estimated 10,130 people will die of melanoma in 2016."



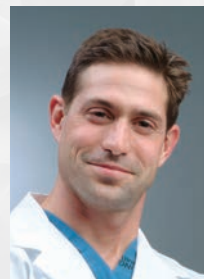
Arthur had a second surgery in June to remove the cancerous lesion and a single lymph node. Dr. Romberg completed the procedure with a skin graft to help the wound heal.

Because it was caught early, Arthur didn't need additional treatment.

"I pretty much dodged a bullet," the retired schoolteacher and father of three adds. "I'm very grateful to Dr. Romberg. He acted quickly and did a very thorough job."

# Anterior Hip Surgery Gets Oak Forest Mom Back on the Move

The average age for a hip replacement has been steadily dropping over the last several years.



Dr. Daniel Weber

In fact, the American Academy of Orthopedic Surgeons says the number of patients between the ages of 45 and 64 having hip replacements increased 123 percent between 2000 and 2009 and continues to climb. Among the youngest group — 45 to 54 — the increase has been nearly 200 percent.

At age 47, Michelle Pruitt of Oak Forest, an energetic mother of five and grandmother of three, had her left hip replaced at Ingalls Hospital in February. For several years, hereditary osteoarthritis “ate away” at her left hip, leading to an excruciating “bone-on-bone” situation that made it nearly impossible for Michelle to walk.

“At first I thought I pulled a muscle,” she explains. But the achiness persisted until Michelle developed a limp. Afraid to hear that she might need surgery, Michelle endured five months of debilitating pain before making an appointment to see board-certified orthopedic surgeon Daniel Weber, M.D.

As she feared, joint replacement surgery was the only option for her arthritis-ravaged left hip. But there was a bright side too. Michelle’s age, health and superior fitness level would make her recovery easier than most.

“I decided that I could deal with the pain from surgery,” she explains. “I knew that would be temporary.”

So Michelle put her fears aside and underwent anterior hip replacement at Ingalls in February.

“The anterior approach minimizes the pain and time from surgery to recovery, which is particularly important for patients who still work,” Dr. Weber explains. The advanced technique involves a single small incision on the front (or anterior) of the hip, allowing orthopedic surgeons to work between the muscles and tissues without detaching them from either the hip or thighbones.

Keeping the muscles intact is the key to greater hip strength and shorter recovery after surgery. And, since the incision is in front, patients avoid the pain of sitting on the incision site.

What’s more, within a couple days, anterior hip patients can bend their hip freely, bear weight, climb stairs, and

most importantly go home, where they can resume normal activities in as little as eight weeks or less.

To Michelle’s delight, she spent only two days in the hospital. Even better, she quickly graduated from walker to cane, and just 10 days after surgery, she went to her follow-up appointment with no assistive device of any kind.

“I walked in without a cane, and I jumped off the exam table,” she added with a smile.

As for exercise, Michelle was back at it within weeks — walking, using an elliptical machine, riding an exercise bike, and climbing the stairs at Swallow Cliff in Palos Hills. And since she works at a health club, she’s never more than a few feet away from the machine of her choice.

Michelle’s also made multiple referrals to Dr. Weber since then. “Don’t wait like I did,” she adds. “You’ll be surprised at how fast you can recover.”

**If you or someone you know is suffering from hip pain, call the Ingalls Advanced Orthopedic Institute at 708.915.PAIN (7246) today.**



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# Immunotherapy Shows Promise for Advanced Colorectal Cancer



Dr. Mark Kozloff

Ingalls recently became the second cancer center *in the world* to enroll patients in a new research study that uses immunotherapy to tap into the body’s own ability to fight advanced colorectal cancer.

Approximately 360 patients will take part in this study worldwide. So far, four patients have been enrolled at Ingalls, and all are tolerating the treatment well.

The Phase III clinical trial is testing three different chemotherapy regimens: regorafenib, cobimetinib plus atezolizumab, and atezolizumab monotherapy. At the American Society of Clinical Oncology (ASCO) meeting in Chicago in June, researchers reported that the combination of cobimetinib and atezolizumab was well tolerated and demonstrated promising results.

To enroll in the study, participants must be at least 18 years of age, have locally advanced or metastatic colorectal cancer, and have had at least two previous rounds of chemotherapy.

“Clinical trials like this one present more answers to beat cancer,” explains Mark Kozloff, M.D., Medical Director of Ingalls Cancer Care. “The immune system is the body’s natural defense against disease. Cancer cells have a way of inhibiting the immune system. But immunotherapy agents help unleash the immune system’s potential to fight them off in certain types of cancer.

“These are the hot drugs in cancer care right now,” he adds. “And I’m proud to say we’ve been investigating and using these treatments at Ingalls for several years now.”

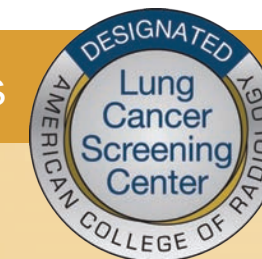
Ingalls currently offers immunotherapy treatments for malignant melanoma, certain types of lung cancer, and kidney cancer, and is investigating immunotherapy agents to treat esophageal and gastrointestinal/stomach cancers.

**For more information about this and other clinical trials at Ingalls, call 708.915.HOPE (4673).**



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# Ingalls Recognized for Early Lung Cancer Screenings



Lung cancer kills more Americans every year than any other type of cancer, including breast, colon and prostate cancers combined. Why? It’s nearly impossible to detect until the disease is advanced.

For nearly a decade, Ingalls cancer experts have been working toward increasing survival through **Lungs for Life**, an innovative screening program that uses spiral CT scanning to detect lung cancer at its earliest stages, when it is most curable.

Recently, Ingalls was recognized for its clinical quality by achieving a Lung Cancer Screening Center designation by the American College of Radiology (ACR). The designation recognizes facilities that have committed to practice safe, effective diagnostic care for individuals at the highest risk for lung cancer.



Dr. Daniel Vandenberg

Lungs for Life screenings are available at the hospital and the Family Care Centers in Calumet City, Flossmoor and Tinley Park. Eligible participants undergo a low-dose, 16-slice spiral CT that can scan the entire chest in 15-25 seconds with a sensitivity to detect tumors as small as a grain of rice.

“Research has shown that low-dose screening CT applied to the proper group of at-risk patients

saves lives,” said Daniel Vandenberg, M.D., internal medicine specialist. “I have referred many patients who meet the screening criteria for the screening. But the best way to prevent lung cancer caused by tobacco use is to never start or to quit. Quitting now will reduce your chances not only of lung problems, but also of heart disease and many forms of cancer.”

The Centers for Medicare and Medicaid Services recommends and covers the cost of the lung screening for adults who meet specific criteria:

- Must be between the ages of 55 and 77 years old.
- Must be asymptomatic (don’t have signs or symptoms of lung cancer).
- Must be a current smoker or have quit smoking within the last 15 years.
- Must have a tobacco smoking history of at least 30 “pack years” (an average of one pack a day for 30 years).
- Must obtain a written order from their physician or qualified non-physician practitioner.

**For more information, call 708.915.LUNG (5864).**

# Little Balloon Provides Big Results: Instant Recovery, Lasting Relief for Sinus Patients of All Ages

If you suffer from poor sinus drainage, you already know that antibiotics, decongestants, and steroids can do only so much.



Dr. Francis Hobson

Until recently, sufferers of chronic or recurrent sinusitis were limited to two treatment options: medication therapy or aggressive sinus surgery. Fortunately, advances in medical science have opened new doors. Now there's a treatment that can be performed in your doctor's office without the need for cutting or tissue removal – and it's available through Ingalls.

“Balloon sinus dilation is a minimally invasive office procedure, performed under local anesthesia, that delivers immediate and long-lasting relief,” explains Francis Hobson, M.D., board-certified ear, nose and throat specialist and head and neck surgeon. “We’ve treated many patients with this procedure in our office. Our patients are relieved of their symptoms immediately after the procedure, and many are back to their normal routine the next day.”

The procedure reshapes sinus pathways by inflating small balloons in key places in the nose and sinuses, and restoring drainage.

Studies show that afterwards, patients experience less facial pain, use less antibiotics, make fewer visits to their doctor, and are better able to perform day-to-day activities at home and at work. In fact, in most cases, the patient is able to resume normal activities the day of treatment.

Ear, nose and throat specialists at Ingalls can determine if your condition may benefit from office balloon sinus dilation and can help you understand the risks and benefits of this treatment.

**For more information, call Ingalls Care Connection at 708.915.CARE (2273).**

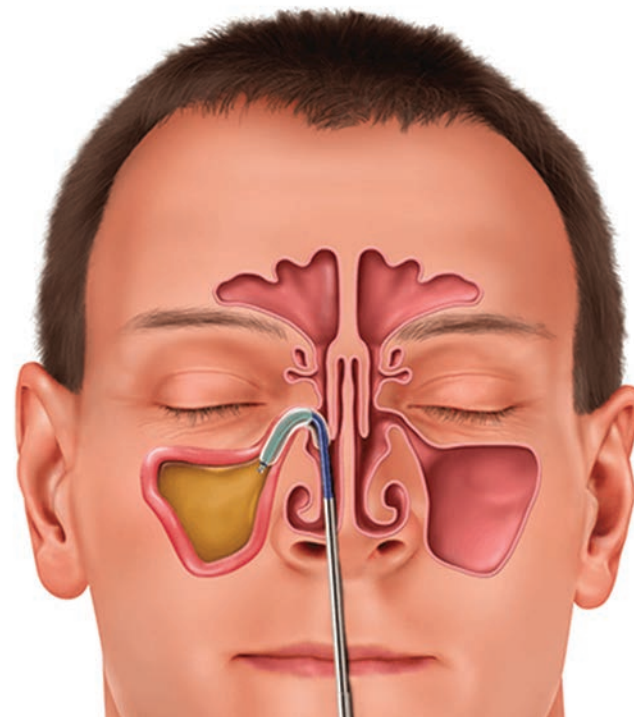
*The procedure is appropriate for children and adults.*



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## Sinusitis Symptoms May Include:

- Sinus pressure and congestion
- Headache
- Facial pain
- Tenderness and swelling around the eyes, cheeks, nose and forehead
- Difficulty breathing through the nose
- Loss of the sense of smell or taste
- Yellow or green mucus from the nose
- Teeth pain
- Fatigue
- Sore throat from nasal discharge
- Bad breath



## Maurice's Story

For 13-year-old Maurice Bankston of Chicago Heights, balloon sinus dilation at Ingalls was a total slam-dunk! That's because the talented basketball player, who's suffered with chronic sinus infections most of his life, has been breathing a lot easier since he had the procedure at Ingalls in Tinley Park last November.



Maurice's pediatrician referred him to Dr. Hobson last fall, and he recommended balloon sinus dilation for Maurice's nasal congestion and ear tubes for his ongoing ear infections.

Almost immediately, Maurice's sinuses cleared up; for the very first time, he could breathe deeply through his nose. And other than sitting out of gym class for a week following the procedure, he didn't miss any school.

Today, the future forensic scientist is looking forward to another great basketball season – and football in the spring.

“I feel great,” he adds.

As for Maurice's mom, Michelle, owner of the Playhouse Day Care Center in University Park, she regularly refers clients to Dr. Hobson.

“I tell them, ‘You need to call Dr. Hobson,’” she explains. “The balloons did wonders for Maurice!”



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## Susan's Story

For more than 30 years, Susan Otiniano of Chicago battled chronic sinus problems. Nasal stuffiness, an unpleasant cough and sinus infections slowed the otherwise active 70-year-old down.

“I was on one medication regimen after another,” she explains. If she came into contact with someone who was sick, she got sick as well. “Spring pollens bothered me, too,” she explains.

Susan went to see Dr. Hobson, who recommended balloon sinus dilation. When she learned more about the procedure, Susan readily agreed. Even better, Dr. Hobson could perform it in his Flossmoor office.

Susan had the procedure in February and was able to enjoy the new blooms in spring for the first time in years. Her symptoms cleared up immediately, and she's breathing easy – something she hadn't been able to do in decades.

“I'm so grateful that I found a doctor who could perform such a procedure, and I would highly recommend it to anyone who suffers from constant sinus congestion like I did,” she said.



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Patti Dunne (left) participates in an aphasia conversation group with Beth Heise, M.S., C.C.C., S.L.P./L.

## Conversation Group at Ingalls Helps People with Aphasia Gain Confidence in a Supportive Environment

Imagine talking with a friend but you can't find the words, or scanning the headlines in the paper, but they look like they're written in a foreign language.

Every year in the United States, thousands of people are suddenly plunged into a world of jumbled communication because of a condition known as aphasia. Stroke is the leading cause of aphasia, but it can also be caused by other neurological conditions.

"Aphasia is an acquired communication disorder resulting from damage to the language centers and pathways of the brain," explains Beth Heise, M.S., C.C.C., S.L.P./L., Speech-Language Pathologist and Senior Therapist for the Ingalls Center for Rehabilitative Medicine. "Aphasia can limit listening comprehension, a person's ability to recall words and produce sentences, and hinder reading and writing. People with aphasia know what they want to say, but can't find the words to express it."

Fifty-year-old Pattie Dunne of Frankfort suffered a debilitating hemorrhagic stroke in 2008 at the young age of 43. "For one year, I couldn't speak at all," the mother of two grown sons explains. But the former accountant never gave up.

Not only did Pattie work diligently with Ingalls physical therapists to regain her strength and mobility, she spent countless hours with Ingalls speech therapists to overcome her impairment and relearn to communicate.

"For me, talking was everything," Pattie explains. "Before my stroke, I talked, talked, talked all the time; that all changed in 2008. Thankfully, I can talk again, but now, I talk more slowly and take my time."

One powerful resource Pattie tapped into is the monthly Aphasia Conversation Group hosted by Ingalls. The only one of its kind in the South Suburbs, the group provides a comfortable and supportive environment for socializing, practicing communication skills, and conversing with others who are dealing with aphasia. By sharing their personal struggles and encouraging each other, members gain confidence.

At a recent meeting, friendly conversation and laughter filled the room.

"It's been a great help to me," Pattie adds. "I really enjoy the meetings and the friends I've made there."

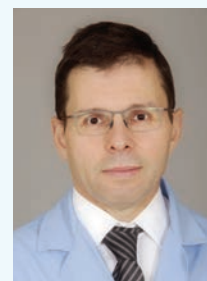
With her newfound confidence, Pattie plans to move to Georgia to join her son and looks forward to putting her budding photography skills to use.

"When you have aphasia, it's really hard to communicate," she said. "It's taken a lot of work – and I'm still working on it – but I'm proof that you can regain your communication skills."

**For more information about the Ingalls Aphasia Conversation Group, call Beth Heise, M.S., C.C.C., S.L.P./L., Speech-Language Pathologist and Senior Therapist for the Ingalls Center for Rehabilitative Medicine, at 708.915.4232.**

## Ingalls Stroke Center Research: Clinical Trial Shows Second Stroke or Heart Attack Stopped By Diabetes Drug

There's good news for the nearly 14 million people worldwide who suffer a stroke or transient ischemic attack (TIA) every year: a diabetes drug can help prevent repeat strokes and heart attacks.



Dr. Engin Yilmaz

A recent clinical trial investigated the type 2 diabetes drug Actos and its role in preventing recurrent stroke or heart attack in non-diabetic patients with insulin resistance who recently suffered a stroke or TIA.

The results of the landmark IRIS Stroke Prevention Study were published in the *New England Journal of Medicine* and sponsored

by the National Institutes of Health.

Our very own Ingalls Stroke Center, headed by Medical Director Engin Yilmaz, M.D., played an important role in the five-year investigation by actively recruiting and enrolling patients that fit the study's very specific criteria. In fact, Ingalls was the only hospital in the South Suburbs, and one of only 100 hospitals nationwide, to participate in the IRIS trial.

"The study results were presented at the International Stroke Conference in February and offer a promising new approach," Dr. Yilmaz explains.

Researchers from the Yale School of Medicine, who led the investigation, say it's the first time a drug used to treat type 2 diabetes has been effective in patients with insulin resistance, which signals an increased risk of stroke and heart attack.

"Over time, insulin resistance may lead to atherosclerosis, the same blood vessel disease that causes most strokes and heart attacks," Dr. Yilmaz said. "Preventing these events was a major goal of the study."

IRIS researchers found that Actos reduced the risk of stroke by nearly 25 percent when added to standard preventive care. What's more, it cut the risk of diabetes in half, reduced blood sugar and inflammation, and helped manage fats within the body.

### Know the Warning Signs of Stroke

Do you know the warning signs of a stroke? You can spot a stroke F.A.S.T. by knowing these signs:

- Face drooping
- Arm weakness
- Speech difficulty
- Time to call 911

A stroke occurs when blood vessels carrying oxygen and other nutrients to a specific part of the brain suddenly burst or become blocked. When the oxygen supply is cut off, brain cells begin to die.

### Learn Your Risk of Stroke

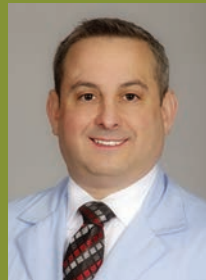
There are several unavoidable risk factors for stroke, including age, heredity, race and gender.

Stroke risk factors you can change, control or have treated include high blood pressure, cigarette smoking, diabetes, high blood cholesterol, physical inactivity and obesity, artery disease in the neck, arms and legs, atrial fibrillation, a heart rhythm disorder and other heart disease such as cardiomyopathy, valve disease and congenital heart defects.

**For more information or to calculate your risk of stroke, visit [Ingalls.org/MyHealth](http://Ingalls.org/MyHealth) and click on StrokeAware.**

# Midwest's First Scarless Robotic Gallbladder Removal Using the da Vinci Xi

This year, Ingalls invested in the da Vinci Xi, the most advanced robotic surgical system currently available.



Dr. Gary Peplinski

"Scarless" surgery made its debut at Ingalls Hospital when general surgeon Gary Peplinski, M.D., performed the very first single-site gallbladder removal with the da Vinci Xi robotic surgery system. And because he used the latest-generation da Vinci system to do it, the revolutionary surgery was also a first for the entire Midwest.

The patient, a 60-year-old woman, successfully underwent surgery in the morning and went home the very same day.

Traditional laparoscopic gallbladder removal, introduced in the early 1990s, involves four small incisions, through which the surgeon inserts instruments to remove the gallbladder. Robotic-assisted surgery enables the same operation through one small incision.

"Single-site robotic gallbladder removal is performed as an outpatient surgery," Dr. Peplinski explained. "The procedure involves a single one-inch incision in the patient's umbilicus (belly button) through which the gallbladder is removed." When the tiny incision heals, the area looks like a normal umbilicus, leaving virtually no scars from the surgery. And with only one incision, other potential advantages include less pain after surgery and less risk of infection.

Surgeons at Ingalls already have years of experience and are now using the robot to perform procedures in the areas of gynecology, urology and general surgery, including hysterectomy, prostate removal, kidney surgery, adrenal surgery, gallbladder removal, hernia repair, colorectal resection, gastroesophageal reflux surgery and more.

Single-site surgery is available for select patients with gallbladder disease. Dr. Peplinski said other single-site surgeries at Ingalls are on the horizon, including single-site hysterectomy.

## Double Hernia Diagnosis is an Answered Prayer



Dr. Carl Johnson

Pam Moore of South Holland was having trouble getting an effective diagnosis. "I had pain on both sides of my lower abdomen for several months," the 60-year-old certified nursing assistant explains. "It was a sharp, burning pain, mostly on the left side. I honestly thought I might have ovarian cancer. I was beyond relieved when I found out it wasn't."

Even better, she discovered that general surgeon Carl Johnson, M.D., could perform minimally invasive inguinal hernia repair using the da Vinci Xi robotic surgical system at Ingalls. For Pam, that meant smaller incisions, less pain after surgery and a quicker return to normal activities like exercise, gardening and helping to care for her aging mother.

"An inguinal hernia occurs when tissue, such as part of the intestine, protrudes through a weak spot in the abdominal muscles," Dr. Johnson explains. "The resulting bulge can be painful, especially when you cough, bend over or lift a heavy object."

And while a hernia isn't necessarily dangerous, it doesn't improve on its own and can lead to life-threatening complications.

"If your hernia is small, your doctor might recommend watchful waiting," he explains. "But when it's painful or enlarging, surgical repair is the recommended treatment."

In fact, hernia repair is one of the most common surgical procedures performed today. There are two types — open hernia repair, which involves a single long incision, and minimally invasive hernia repair, which consists of several tiny incisions.

"Minimally invasive surgery with the da Vinci robotic system is particularly effective for people with bilateral hernias (on both sides of the body like Pam)," he adds.

In either procedure, mesh patches are then sewn over the weakened area in the abdominal wall after the hernia is pushed back into place. The patch decreases the tension on the weakened wall, reducing the risk that a hernia will recur.

Following surgery at Ingalls in March, the active wife and mother was back to doing what she loves within weeks, including power walking with hand-held weights.

"I feel terrific," she adds, "There was no pain, no suffering. Dr. Johnson is wonderful!"



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## Less Pain, Quicker Recovery for Prostatectomy Patient

Prostate cancer is the second most common cancer in American men; fortunately, with early detection and proper treatment, the five-year survival rate is almost 100 percent.

"The gold standard treatment is prostatectomy, or surgical removal of the prostate gland," explains board-certified urologist Rajesh Patel, M.D.

Patients at Ingalls now have the added option of minimally invasive prostatectomy using the da Vinci Xi robotic surgical system.

"Not only does da Vinci prostatectomy result in a quicker recovery, fewer complications and less blood loss, it means much less time with a catheter following surgery," he adds, "it also helps preserve erectile function, an important consideration for young men."

Clinical studies have shown that robotic prostatectomy provides superior clinical results over other forms of surgery because of its improved vision and the dexterity of the surgical instruments.

The da Vinci's sensitive electronics and one-centimeter diameter surgical arms allow the surgeon to make highly precise movements. "This greater precision reduces the likelihood of cancer recurrence," Patel adds.

"In general, the higher a man's PSA level, the more likely it is that he has prostate cancer," he explains. Dr. Patel recently performed da Vinci prostatectomy on a 67-year-old Chicago man whose PSA (prostate-specific antigen) level had been climbing for the past two years.

"Initially, I wasn't concerned about my PSA level," the retired teacher explains. "But when it continued to rise, I knew something was wrong. The prospect of surgery and a large, painful incision was unsettling. I was very thankful when Dr. Patel told me I could have the surgery



Dr. Rajesh Patel

done using the da Vinci." The patient had the procedure in March and was relieved to learn the cancer was confined to his prostate gland and wouldn't require radiation or chemotherapy afterwards.

Today, the energetic retiree is back to doing what he loves best: cooking, reading and spending time with his family.

**For more information about da Vinci surgery at Ingalls, visit [Ingalls.org](http://Ingalls.org).**



## We bring quality care to your neighborhood

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

- > **Ingalls Memorial Hospital, Harvey**  
(156th and Wood Streets)  
708.333.2300
- > **Ingalls Family Care Center, Calumet City**  
(170th and Torrence Avenue)  
708.730.1300
- > **Ingalls Family Care Center, Flossmoor**  
(Governors Highway between Kedzie and Vollmer)  
708.799.8400
- > **Ingalls Family Care Center, Tinley Park**  
(159th St. east of Oak Park Avenue)  
708.429.3300
- > **Ingalls Care Center, Crestwood**  
(Cal Sag Road at Cicero)  
708.915.ASAP (2727)
- > **Ingalls Center for Outpatient Rehabilitation (ICOR)**  
(Rt. 6, just west of I-94)  
South Holland  
708.915.4700
- > **Ingalls Home Care**  
708.331.0226
- > **Ingalls Cancer Care Center**  
708.915.6620
- > **Ingalls Same Day Surgery**  
Tinley Park  
708.429.0222
- > **Ingalls Care Connection**  
Information and Referral Line  
708.915.CARE (2273)
- > **TTY for hard of hearing:**  
1.800.526.0844



# Quick Care

## FLU SHOTS NOW \$15

Getting the flu vaccine is your best bet for avoiding the flu. Everyone six months and older should get a flu vaccination every year, so stop in to Ingalls today!

### Ingalls Care Center

Northeast Corner of Cicero at Cal Sag Road in Crestwood

### Hours

Monday-Friday: 8 am to 8 pm  
Saturday-Sunday: 8 am to 4 pm  
(offer expires 12/31/16)



**708.915.ASAP (2727)**

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

**WALK-INS  
WELCOME**