



AT THE FOREFRONT

**UChicago
Medicine**

Ingalls Memorial

Progress

SPRING 2018



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Letter to the Community



The relationship of care between this hospital and our Southland communities has flourished for nearly a hundred years. It wasn't just lifesaving remedies but the compassion with which they were delivered that earned your trust. Throughout the years the health and well-being of those in our care has been our legacy. And so, it remains center stage.

Over the past several years we have acknowledged unprecedented change in healthcare. How we deliver and are reimbursed for services continues to evolve. We have responded and adapted to this unknown healthcare milieu by embracing a plan to optimize our resources and relationships. We have pioneered advanced clinical technology and built a robust ambulatory delivery setting with outpatient care and diagnostics, same day surgery and home healthcare to enhance value delivered in convenient community based sites. However, as we grew and expanded it became a more competitive market for specialty physicians.

The natural evolution of our plan included the foresight of a mutually beneficial partnership with the University of Chicago Medicine. This step has accelerated both the pace and scope of our progress over the past few years. Now, on top of veteran local healthcare knowledge we layered the innovative clinical talent of a highly respected academic leader at the forefront of medicine.

We know you are familiar and at ease with your personal physician. Now, he or she is backed by an array of skilled colleagues with advanced training and expertise to support care delivery from the hospital to outpatient centers via an expanded network of physicians, facilities and services. With this army of sophisticated healthcare talent comes seamless access to a world-class academic medical center's cutting-edge specialties and techniques. Our team works in tandem with UChicago Medicine experts to speed your healing process and keep you on a path of wellness. This is sophisticated medicine unmatched in the area.

The patient success stories in this edition are real life testaments of the energy and tertiary expertise a wider physician network offers. There is no doubt that lives have been saved and quality of life improved as the forefront of medicine expands to the Southland. The reality of an academic medical center in the neighborhood is a magnet when we find ourselves tasked with recruiting and retaining sophisticated health talent. Our investment in the next generation of providers has brought fresh expertise to our campus. We anticipate the depth of the physician network will continue to swell in the immediate future.

In the custom of Ingalls legacy, UChicago Medicine threads the spirit of cutting edge medicine through an expanded physician network in the Southland. The legacy lives on.

Kurt E. Johnson, President



UChicago Medicine Psychiatry Residents Now on Site

UChicago Medicine Ingalls Memorial's Behavioral Health Services adult inpatient program is now a training site for UChicago Medicine psychiatric residency physicians. Headed by Zehra Aftab, MD, the residency program at Ingalls helps address a critical shortage of behavioral health providers in the area.

"The new initiative represents UChicago Medicine's commitment to improving access to mental health services by training the next generation of doctors and establishing more resources for a growing population of patients in our area," explains Ingalls President Kurt Johnson.

"The program helps build a bridge between the emergency department in Hyde Park and psychiatric services here at Ingalls," Dr. Aftab added. "The residency program has allowed us to get patients the care they need sooner."

The new program's first two residents are Cheriece Ward, MD, a native of Hazel Crest and graduate of Homewood-Flossmoor High School; and Lala Park, MD.

Ingalls News in Brief

Blue Distinction Center® for Maternity Care

Blue Cross and Blue Shield has named UChicago Medicine Ingalls Memorial a Blue Distinction® Center for Maternity Care. The designation means Ingalls demonstrates quality care, treatment expertise and better overall patient results.

The Blue Distinction® Centers for Maternity Care program evaluates hospitals on several quality measures, including the percentage of newborns that fall into the category of early elective delivery, the level of breastfeeding support and overall patient satisfaction.



Ingalls Receives the 2018 Women's Choice Award® as one of America's Best Breast Centers

For the second time, UChicago Medicine Ingalls Memorial has been named one of America's Best Breast Centers by the Women's Choice Award, putting Ingalls in the top eight percent of American hospitals offering breast care services. The award recognizes breast centers that have met the highest standards of care as set by the National Accreditation Program for Breast Centers and carry the Breast Imaging Center of Excellence seal from the American College of Radiology.

"As a breast cancer survivor, I learned the hard way that where you choose to have your mammogram can have a profound impact on your outcome and experience," said Delia Passi, founder and CEO of the Women's Choice Award. "We empower women to make educated, confident decisions about their health," she added.

"At Ingalls, our breast health experts offer a full range of breast care and a nationally recognized breast center right in the neighborhood," said Kurt Johnson, president of UChicago Medicine Ingalls Memorial. "This designation exemplifies our commitment to providing the most advanced breast cancer care available - from diagnosis through rehabilitation."

For more information about the 2018 America's Best Breast Centers, visit <https://www.womenschoiceaward.com/awarded/healthcare/>



First in Illinois: Wound Center Clinical Trial Actively Enrolling at Ingalls



Dr. Michael Romberg

The UChicago Medicine Ingalls Memorial Wound Center is the first in Illinois to offer a clinical trial investigating the emerging treatment of platelet-rich plasma (PRP) to heal chronic, non-healing wounds.

Led by principal investigator Michael Romberg, MD, general surgeon and wound care specialist, the study, "hopes to demonstrate that patients with chronic non-healing wounds treated with autologous PRP and standard wound care will heal faster than patients receiving standard wound care only," Dr. Romberg explains.

"An aging population, increased obesity rates, and the subsequent rise in diabetes and chronic venous insufficiency have contributed to the escalation in the number of chronic wounds," Dr. Romberg added.

All wound types have the potential to become chronic (unhealed after 90 days), but underlying factors such as diabetes, venous insufficiency or unrelieved pressure are major contributors to poor wound healing.

For more information, contact the Ingalls Wound Center at 915-5584.



A Miracle to be Alive: South Holland Woman Thankful for Neurosurgical Care at Ingalls

Louise Gouwens believes 'divine intervention' played a role in saving her life last June. A few minutes before midnight, she was on her way home from a friend's house.

Just a few blocks from her home, Louise, 80, momentarily nodded off. When she opened her eyes, she was heading straight toward the back of a semi-truck. Miraculously, Louise is still here to tell her story.

Immediately, the spritely South Holland great-grandmother of five felt a pain in her chest from what would later be diagnosed as a broken rib and a punctured left lung, but she also had a serious neck injury. "Possibly with the help of an angel, I was able to find and press an alert button that was in my purse," she explains. "I mean my purse has a zillion pockets in it, but there it was."

Paramedics rushed Louise to UChicago Medicine Ingalls Memorial, where she underwent two surgeries: the first on her collapsed lung, and a second surgery to repair two injured vertebrae high in her neck.

For a woman who visited Mayo Clinic and academic medical centers in Chicago for her healthcare, the prospect of undergoing delicate spinal surgery at a community hospital terrified her. With little information to go on, she asked her son-in-law, a former Ingalls occupational therapist, his opinion of Martin Luken, MD, the neurosurgeon who would operate on her neck.

"He told me he was very good," Louise recalls. That was all she needed to hear. Reassured, Louise consented to surgery.

Delicate Spinal Surgery

"Louise had a complex fracture and dislocation of two of her cervical vertebrae," Dr. Luken explained. "It's a miracle she survived the crash. Her guardian angel was on duty that night." To relieve the pressure on her spinal cord and nerves and prevent potential paralysis, Dr. Luken recommended a cervical laminectomy with lateral screws and rods to stabilize the spine.

Dr. Luken used the hospital's sophisticated Brainlab mobile intraoperative CT scanning system to navigate the cervical spine - a first at Ingalls. The system produces fast, three-dimensional pictures of the spine and nerves to guide surgeons as they operate.

'Best-Practice' Monitoring During Surgery

During any delicate spinal surgery at Ingalls, the surgeon is assisted by a highly trained technologist who monitors the functional integrity of the nerves, spinal cord and parts of the brain. Surgeons around the globe consider it a best-practice for spinal surgery.

Following surgery, Louise spent a month at the Center for Rehabilitative Medicine at Ingalls relearning all her motor skills. Today, she looks forward to buying a new car so she can start driving again. "Dr. Luken is outstanding," Louise says. "I'm so thankful that God used him to save my life. Jesus has been with me throughout this whole traumatic journey."



Dr. Luken (left) and neurophysiology technologist Cortez Harris, CNIM, reunite with Louise Gouwens after successful surgeries and rehabilitation.



Cochlear Implant

Transforms Chicago Heights Patient's Life

While hearing aids work for most people with hearing loss, for some individuals, a cochlear implant is the best option.



Dr. Francis Hobson

"A cochlear implant is an electronic medical device that replaces the function of the damaged inner ear," explains ear, nose and throat specialist and head/neck surgeon Francis Hobson, MD. "Unlike hearing aids, which make sounds louder, cochlear implants do the work of the damaged part of the inner ear or cochlea to provide sound signals to the brain."

For 73-year-old Donna Counihan of Chicago Heights, the device has been nothing short of a miracle. Donna, who has struggled with progressive hearing loss for the past decade, underwent the very first cochlear implant procedure at Ingalls. Following a short recovery, Donna says her life has been transformed.

"I'm hearing sounds that I never heard before," the grandmother of three explains. "I can hear the TV, I can hear the radio in the car, I can hear what my grandkids are saying. It's amazing!"

A sound processor worn behind the ear or on the body captures sound and turns it into digital code, and transmits it through the coil on the outside of the wearer's head to the implant. The implant converts the code into electrical

impulses, and sends them along the electrode array placed on the inner ear or cochlea, which then sends the impulses to the brain, where they are interpreted as sound.

Dr. Hobson places cochlear implants during an outpatient surgical procedure at the hospital. About two weeks after the implant is placed and the area has healed, patients receive rehabilitation at the Ingalls Audiology Center to learn how to interpret the new sounds.

Cochlear implants can help people who have moderate to profound hearing loss in one or both ears, and who score 65 percent or less on sentence recognition tests done by a hearing professional in the affected ear. One study showed that people with cochlear implants achieve an average of 80 percent sentence understanding compared to 10 percent with a traditional hearing aid.

Cochlears also help the wearer focus in noisy environments; hear sounds they couldn't hear before the implant; feel safer, since they can hear alarms, people calling out and approaching vehicles; talk on the phone; and listen to music.

"Don't put it off," Donna advises. "The cochlear is wonderful!" Dr. Hobson offers convenient locations in Flossmoor and Tinley Park.

Homewood Man Experiences Breakthrough Leukemia Treatment at Ingalls

As an avid poker player, Craig Clark is well acquainted with the expression “playing the hand you’re dealt.” But it wasn’t until he was diagnosed with chronic lymphocytic leukemia (CLL) three years ago that Craig, 63, came to appreciate the full meaning of those five little words.



Dr. Mark Kozloff

CLL is a type of cancer of the blood and bone marrow, and it is the most common form of adult leukemia. “I imagined the worst,” the Homewood husband, father and grandfather of three explains. “I didn’t know what the future would bring or how the treatments would make me feel. And I really didn’t want to lose my hair.”

Thankfully, oncologist Mark Kozloff, MD, medical director of UChicago Medicine

Ingalls Memorial Cancer Care, put Craig at ease at his very first visit. “He told me I was going to live a long life, and that there were wonderful new drugs to deal with this,” he remembers.

The treatment involved a combination of three powerful cancer-fighting drugs; one of the drugs, venetoclax, is a highly targeted therapy that attacks the cancer cells only, leaving the body’s healthy cells alone.

“In clinical trials, four out of five patients achieved some level of remission, with some achieving full remission,”

Dr. Kozloff said. “What’s more, half of those on the study experienced remission in just one month.” Ingalls was one of the first hospitals in the nation to offer the CLL therapy in clinical trials back in 2014; today, the breakthrough drug is FDA-approved.

“In December 2016, Dr. Kozloff told me it was time for treatment,” the former Chicago TV news editor said. “Because I was relatively young and in good shape, he felt the treatment would offer a good opportunity to get well.”

Within months, Craig’s CLL was in remission, confirmed by a CT scan and bone marrow study. That means Craig can continue to do what he loves best...spending time with his wife Denise and his family, enjoying his second home in Michigan and playing more poker! “I’m living a full life, and I’m looking forward to the future,” Craig added.

“CLL is a chronic condition that can be managed,” Dr. Kozloff added. “And breakthrough therapies like venetoclax are showing very promising results.”

For more information about clinical trials available through **Ingalls Cancer Care**, call **708-915-HOPE (4673)**.



Financial Navigator Program Helps Cancer Patients Face the Rising Cost of Treatments

In the age of \$10,000-a-month cancer drugs, managing finances becomes a whole new obstacle for patients. In fact, a 2014 article in the *Journal of Oncology Practice* found that financial problems can even lead patients to avoid or delay care or drugs.

To help address these concerns, UChicago Medicine Ingalls Memorial employs a full-time, dedicated financial navigator: 14-year Ingalls veteran Cameron Williams.

Cameron helps patients understand the financial aspects of cancer care, and can help relieve financial stress and improve patients’ access to the care they need.

“Even with health insurance, the financial impact of cancer treatment can be challenging for a patient to handle,” Cameron explains. “My role is to help alleviate some of that stress and help patients make informed financial decisions.”

Cameron starts by evaluating patients’ healthcare benefits to determine what their potential out-of-pocket costs may be, and then identifying potential resources to help them lower those costs. Then, he works to facilitate enrollment in healthcare exchange plans, Social Security and disability benefit programs if appropriate. Cameron even identifies external sources to help cover co-pays and deductibles such as foundation pharmaceutical-sponsored programs, local philanthropic organizations and more.

“People shouldn’t have to choose between buying groceries or getting their treatments.”

For more information about the new **Cancer Financial Navigator** program at Ingalls, call Cameron Williams at **708-915-6825**.



Integrated Cancer Treatment Evidence Supports Impact on Cancer Symptoms and Therapy Side Effects



Dr. Danielle Sterrenberg

At UChicago Medicine Ingalls Memorial, an effective cancer plan of treatment may include a range of surgery, chemotherapy, radiation and biological therapy.

Danielle Sterrenberg, MD, a cancer specialist on staff at Ingalls, is a fellowship-trained hematologist/oncologist who treats patients with all types of complex cancer.

One of her special interests is integrative oncology, a holistic approach

to cancer prevention and treatment that incorporates nutrition, exercise, stress management and other complementary therapies alongside standard treatment.

“I treat the whole patient in a comprehensive and personal manner, combining alternative and standard care to battle the disease and also support a high quality of life during treatment,” she explained.

Dr. Sterrenberg recommends various methods of alternative therapies at Ingalls Wellness Center, including music therapy, meditation, massage or yoga to manage anxiety and stress. Additionally, acupuncture and acupressure can help reduce pain and mitigate the side effects of some cancers, such as neuropathy or nausea. All these therapies, plus aromatherapy and reflexology, are offered at Ingalls Wellness Center.

Accordingly, lifestyle modifications including exercise and healthy eating are often prescribed to ease physical discomfort, improve stamina, enhance quality of life and help prevent cancer recurrence.

Dr. Sterrenberg is in practice with Drs. Mark Kozloff, James Wallace and Kimberly Kruczek, with convenient offices at the Ingalls Family Care Centers in Flossmoor and Tinley Park.

A Real Alternative to Life-Saving Colon Cancer Screening

Colorectal cancer is one of the most preventable cancers of all, but it usually presents no symptoms at all, which is why screening is so important. If you're 50 or older, getting screened for colorectal cancer should be high on your list of priorities. Why? Because it saves lives.

When doctors prescribe it, most patients choose colonoscopy, because it's the gold standard for screening and prevention, and it's recommended every 10 years. Unfortunately though, whether it's the inability to tolerate anesthesia or being squeamish about the long colonoscopy tube, most of us are not getting screened at all.

Here's the good news. Now there's a safe, effective, minimally invasive option called "virtual colonoscopy," and UChicago Medicine Ingalls Memorial offers it.

The technical name for this minimally invasive alternative is called CT colonography. It combines non-invasive CT scan technology with sophisticated 3-D software to give radiologists a clear visual inside the colon and rectum. This screening is recommended every five years.

That clear view does involve a similar prep as colonoscopy. Both procedures require a clean colon, meaning only clear liquids and a laxative solution the day before.

"During a virtual colonoscopy, a CT scan of the abdomen creates 3-D images to show polyps and other abnormalities inside the wall of the colon and rectum that can grow larger and develop into cancer if untreated," explained Syam Reddy, MD, diagnostic radiologist with a body-imaging subspecialty on staff at Ingalls.

Less than 10 percent of virtual exams find a polyp, and those patients will need a traditional colonoscopy to have it removed or biopsied. Conveniently, Ingalls will help facilitate a same-day treatment with a gastroenterologist, which would preclude the need for a second prep.



Dr. Reddy and technologist Heather Hinton, RT, work with gastroenterologist Darren Ballard, MD.

"The newer procedure is less invasive, there are fewer complications, and the accuracy is comparable to colonoscopy for patients at average risk," said Dr. Reddy. "Those with higher risk, such as African Americans or those with a family history of colon cancer, may need to be screened earlier."

If you're getting close to 50, start the colorectal screening discussion at your next check-up. Talk to your doctor, call **708-915-COLO (2656)**, or go to Ingalls.org/COLO for more information.



Urinary Control a 'Game-Changer' for Homewood Executive

The urinary sphincter is a muscle that controls the flow of urine. When it's closed, it blocks the opening of the bladder so urine doesn't leak out. But if it's been damaged by surgery or radiation to the prostate gland, urine loss can happen anytime...anywhere, during activity or rest.

Leonard Johnson of Homewood struggled with urinary incontinence for three years after prostate cancer. Though he survived the cancer itself, he was left with a whole new set of problems and complications.

"I had urinary incontinence for the first time in my life," the 66-year-old fundraising executive explains. "I used four to five pads a day - sometimes as many as six or seven. The problem limited where I would go and put a damper on my lifestyle."

An avid fitness buff, Leonard started skipping the gym because it was too much of a hassle. He tried Kegel exercises to no avail. For three years, Leonard lived with the inconvenience and embarrassment. Then he met with urologist Vikas Desai, MD.

"Normally, the urinary sphincter stays contracted until you choose to relax it to urinate. When you do, urine leaves the bladder and flows through the urethra and out of the body," explains Dr. Desai. "But male patients who have undergone radical prostatectomy, transurethral resection of the prostate, pelvic trauma or pelvic radiation are particularly susceptible to urine leakage."

Dr. Desai told Leonard and his wife about an artificial urinary sphincter (AUS) that could do the work of his damaged one. "An AUS is a device that works like your natural urinary sphincter," Dr. Desai explains. "It's made up of three parts: a urethral cuff, a pump and a balloon."

"The pump moves fluid from the cuff to the balloon," he adds, "allowing the cuff to expand and your urethra to open. Your urethra stays open for a short time so that you can urinate. Then, the cuff will close automatically."

Leonard had the surgery last March and was back in the gym by summer. "It has really exceeded my expectations," he adds. "Dr. Desai told me I would regain 90 percent of my urinary control, and it looks like I have. Instead of five to seven pads, now I use maybe one."

"Before surgery, there were times I didn't have any control," he remembers. Leonard's incontinence had even progressed to the point that he struggled to continue working, but the care he received at Ingalls was, "a game-changer both personally and professionally," he explains. "I work a full-time job and I run a part-time business, and this procedure has made it possible for me to confidently travel all day, meet with people and maintain my career. I'm proud to be an active 67-year-old, and I finally have my life back."





Nurse Gets Back on Her Feet After Knee Replacement

Katherine Krol is a lady who has a lot to keep up with. In addition to her 92-year-old mother living across the street, Katherine's sister lives next door. Her adult children and four grandchildren keep her busy, too.

Recently widowed, Katherine also works as a registered nurse, so when her right knee started hurting nine years ago, she powered through the pain. "Every time I walked, I had pain," Katherine said.

She continued working, spending long hours on her feet. When the pain worsened, Katherine consulted her primary physician, who injected steroids into her knee.

"I had no pain. It was great," she said. "I even went to Pierogi Fest with my husband and walked around all day."

Eventually the effects wore off, and a second injection was ineffective. The pain in Katherine's knee became intolerable. "I didn't even want to walk down the hallway if one of my patients needed something," she said. "My grandkids would say, 'Nana, come do this,' and I couldn't."

A friend recommended Phil Nigro, MD, an orthopaedic surgeon affiliated with UChicago Medicine Ingalls Memorial.

Dr. Nigro said Katherine's knee was bone-on-bone, meaning the cartilage had completely worn away between the bone ends. Katherine was ready to get the problem solved. "I hemmed and hawed, and finally said, 'I'm done,'" Katherine said.

She had knee replacement surgery in November, in a procedure called kinematic alignment, which Dr. Nigro brought into his practice in the last two years. It allows the knee joint bones to be resurfaced without cutting ligaments around the knee.

"This is a more natural knee replacement that allows people to recover more quickly," Dr. Nigro said. Katherine went into surgery prep at 7 am, and was back in her room by 10 am. "They had me up and walking at 2:30," she said.

Dr. Nigro released Katherine the next day. Though she wasn't able to host Thanksgiving like normal, she gave up her walker the next day, urged by her daughter. "I needed that scolding," she said. "It was scary."

The first day Katherine returned to work, she had to park on the garage's second floor. She cringed, remembering the pain she used to have climbing the stairs. Not anymore, though.

"It was so nice not to have any pain," she said. Dr. Nigro practices at convenient offices in Flossmoor, Tinley Park and Calumet City.

The Best of Both Worlds: University Park Woman Relies on Experts at UChicago Medicine and Ingalls to Help Her Heal



Dr. Michael Marinko

After a brief stay at UChicago Medicine for treatment of near-crippling neuropathy in her legs and feet, Lalita Isbell, a 65-year-old University Park woman, was referred to the Ingalls Center for Rehabilitative Medicine to complete her treatment.

"Initially I was feeling kind of washed out. I couldn't imagine my next step," she remembers. "I cried myself to sleep the first night." But that all

changed the next morning when the Ingalls Rehab team greeted her with a smile.

"Everybody was so pleasant," she said. "It was a really good first morning, and things continued like that throughout my stay."

Lalita's problems began in May when she started falling in her home. "I had a lot of weakness in my legs and feet." When she fell and hit her head, she went to see a specialist at UChicago Medicine, where she'd undergone a kidney transplant in 2015.

Though the transplant saved her life, complications after surgery can include peripheral neuropathy – or weakness, numbness or pain in the extremities – in Lalita's case, her legs.

At Ingalls, rehabilitation specialist Michael Marinko, MD, developed a treatment plan that included daily exercise and

leg braces to help her regain the ability to walk. "Dr. Marinko was great," she said. "The entire team was great. I can't even begin to tell you. They pushed me forward, and kept me going."

Her goal is to regain even more independence, start driving again and pick up where she left off. "I can't say enough good things about UChicago Medicine or Ingalls," the retired youth counselor explains. "I'm getting stronger every day."

Why Choose Acute Inpatient Rehabilitation?

Inpatient rehabilitation is designed to maximize a patient's physical function after illness, trauma or injury and differs from skilled nursing rehabilitation. "The goal is to have patients be able to perform everyday tasks to the best of their abilities before they go home," Dr. Marinko said.

At Ingalls, an interdisciplinary team of rehabilitation experts design treatment programs tailored to meet your specific rehabilitation needs. These include physical, occupational and speech therapies, specialized rehab nursing services, nutritional and psychological counseling and care coordination.

Patients at skilled nursing facilities stay up to twice as long as patients at an acute care facility like Ingalls. What's more, patients who participate in an acute rehabilitation program achieve their goals quicker and can return home sooner.



Brother and sister doctors join their father on UChicago Medicine Ingalls Memorial staff

By Marilyn Thomas, for *The Homewood-Flossmoor Chronicle*

Looking for Dr. Rahmani at UChicago Medicine Ingalls Memorial? That search is a bit more complicated these days, since Dr. Akbar Rahmani has been joined by his son, Dr. Kaveh Rahmani, and daughter, Dr. Solmaz Rahmani.

Solmaz, 33, started as a general practice physician at the Ingalls Family Care Center in Flossmoor last month, where her desk is next to her dad's. Kaveh, 34, who came on the Ingalls staff three years ago, is also a general practice physician, but he works primarily at Ingalls' Care Center in Crestwood.

Akbar, an endocrinologist, has been on staff at Ingalls since 1980. He came to the United States as an exchange student from the University of Tabriz in Iran. When he started his fellowship in endocrinology and internal medicine in 1977 at Cook County Hospital, he was a "fill-in" physician at Ingalls, making \$12 an hour.

The children remember their father's dedication to the relationships he established with his patients; that is what they want to emulate in their practices. "Even though my dad is a specialist, he did a lot of primary care as well," said Kaveh. "He had some patients for 30 years, and you become part of these people's families. That's part of the draw."

After graduating from Homewood-Flossmoor High School, Kaveh went to Indiana University, and Solmaz went to the University of Illinois at Urbana-Champaign. They are both graduates of Midwestern University, having earned master of science degrees in biomedical sciences and then earning their doctor of osteopathy degrees. The siblings appreciated that they were in medical school at the same time; they created a support system for each other.

"I told them when they were growing up, that I don't know anything about you being an anchor woman, football player. The only thing I know is medicine," he said. These days Akbar jokes that he'll cut back on his hours when his youngest son, Rodd, a 2007 graduate of H-F, finishes medical school in a few years. Solmaz isn't so sure because, "he'd be bored."

Akbar and his wife, Goli, a 1978 graduate of H-F, have lived in Flossmoor for 34 years. The Flossmoor Rahmani doctors are part of an extended family of doctors. Akbar's brother is a doctor, Goli's brother and sister-in-law are doctors, and the three children of his sister are doctors.



A Homeopathic Approach May Be Just What the Doctor Ordered



Dr. Rita Oganwu

If you've got a condition that hasn't been helped by traditional therapies or treatments, you might have considered nutritional and homeopathic medicine. Brenda Jepperson-Vervlied of St. John, Ind., did, and she couldn't be happier with the results. A busy wife, mother of four and avowed vegetarian, 46-year-old Brenda has long been committed to a natural lifestyle, including homeopathic remedies. Though she considered

herself to be in "great health," she admits she rarely slept well, was a few pounds overweight and struggled with achy joints and headaches.

Then she made an appointment to see Rita Oganwu, MD. "Dr. Oganwu is very natural-minded like I am," she explained. "I made an appointment, went to see her and absolutely fell in love with her!"

"Homeopathic medicine is among the most widely practiced medical disciplines in the world; it has been in clinical use for over 200 years," explains Dr. Oganwu, integrative, geriatric and bariatric medicine specialist on staff at UChicago Medicine Ingalls Memorial.

Dr. Oganwu suggested Brenda might have allergies to things like corn, wheat, gluten, soy and dairy - which can cause symptoms like the ones she had been experiencing - and recommended eliminating those from her diet. Dr.

Oganwu also prescribed a high-quality vitamin regimen and melatonin to help Brenda sleep better.

Within weeks, Brenda was sleeping through the night, no longer suffering through headaches, and her joint pain had all but vanished. By fall, she had lost 15 pounds and felt like a new person.

"What I love best about Dr. Oganwu is that you get a lot of personal attention; she really cares about you," she said. "I'm a busy person; I burn the candle at both ends, but I've never felt better."

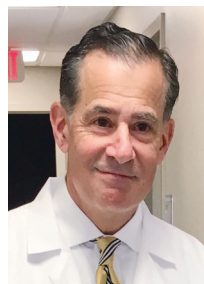
"Alternative medicine provides successful tools for treating acute, complex and chronic conditions, including skin issues, chronic fatigue, rheumatoid arthritis and fibromyalgia," Dr. Oganwu added. "Alternative therapies can help to optimize your overall health and well-being, especially if you've been searching for safe, natural alternatives without the side effects of prescription medications.

Dr. Oganwu's practice, located in Olympia Fields, includes non-surgical weight management and functional, integrative and metabolic medicine. She treats a wide range of conditions. Anti-aging treatments include bioidentical hormone replacement therapy to naturally restore the body's hormonal balance and eliminate aches, pains, low energy, fatigue, sleep problems and decreased libido.

For more information, visit HealthierShape.com or call 708-922-9170.

Tenacious Team Mends Man's Troubled Heart

Working in construction, Michael Sachell is used to lifting heavy loads and climbing flights of stairs. So, in early 2017, when the 55-year-old found he could barely walk up a few steps without getting short-of-breath, he was worried.



Dr. Daniel Ciaburri

"It just got worse and worse as time went on," said the Lansing resident. Michael finally went to UChicago Medicine Ingalls Memorial and soon cardiologist Abed Dehnee, MD, diagnosed him with congestive heart failure and identified a blood clot in his lung.

"His heart was weakened, working at 35%," Dr. Dehnee said. "He had severe leakage of the mitral valve. We

couldn't send him to surgical repair at that time because of his congestive heart failure and blood clot in his lung."

Dr. Dehnee instructed Michael to begin a regimen of the blood-thinning medication coumadin, along with a heart failure medication regimen to help his heart cope with the mitral valve leakage. However, his mitral valve continued to weaken, leaking blood that moved into his lungs.

"I was in and out of Ingalls every few months, and I got tired of that," he says. "So I said, 'OK, sign me up.' They were ready for me. You should have seen all the nurses and people they sent in!"

One of those people was renowned cardiothoracic surgeon Daniel G. Ciaburri, MD. "In a community hospital setting, it is unique to have a surgeon who is skilled in mitral valve repair," Dr. Dehnee said. "It's a very delicate valve and the successful repair depends on surgical expertise."

This immediate access to advanced specialists and techniques is the result of the Ingalls partnership with UChicago Medicine, a highly respected academic medical force on the forefront of healthcare.

"Multiple health issues combined with a weak heart muscle increased the stakes for this complex surgery," Dr. Ciaburri said. "He had class four heart failure, which is the highest. That made the surgery riskier for him."

Dr. Ciaburri successfully repaired Michael's heart valve during the delicate procedure. Michael was up and walking around two days after surgery and back home within the week. While he recovered, Michael said Dr. Ciaburri checked in with him over the phone several times.

Michael says he feels blessed by the care he received, adding, "If I hit the lottery, I'm going to donate a couple million to Ingalls. They saved my life."



Michael Sachell discusses his recovery with Dr. Abed Dehnee

Welcome New Doctors to the Neighborhood

Cardiology



IMAD AHMADO, MD, specializes in cardiovascular diseases, interventional cardiology and nuclear cardiology, and is clinically skilled in novel devices for treatment of coronary artery disease.

Cardiothoracic Surgery



DAN CIABURRI, MD, FACC, FACS, MBA, clinical associate of surgery, is a renowned cardiothoracic expert in the surgical management of heart and vascular disease, including high-risk and complex cases and leads the open heart, thoracic and vascular surgery program at UChicago Medicine Ingalls Memorial.

Family Practice



SOLMAZ RAHMANI, DO, is a board-certified family physician with a comprehensive approach to family medicine and proactive disease prevention. She has a special interest in women's health and wellness.

Gastroenterology



DARREN BALLARD, MD, is board-certified in internal medicine (gastroenterology) and specializes in the expert diagnosis and treatment of digestive disorders.

Oncology-Hematology



ANDREA AMICO, MD, MA, clinical associate of medicine, joins the award-winning cancer care team at Ingalls from UChicago Medicine, and specializes in the management of gastrointestinal and breast malignancies and neuroendocrine tumors.



MURTUZA RAMPURWALA, MD, clinical associate of medicine, is a medical oncologist and hematologist focused on breast, lung, gastrointestinal and genitourinary cancers.

Plastic and Reconstructive Surgery



DAVID CHANG, MD, professor of surgery and chief of the Section of Plastic and Reconstructive Surgery at UChicago Medicine, specializes in complex microsurgical reconstructive surgery in cancer patients, and is a leading authority on surgical treatment of lymphedema.



PATRICK REAVEY, MD, assistant professor of surgery and orthopaedics, is a skilled plastic and reconstructive surgeon specializing in complex hand surgery, general plastic surgery and reconstructive surgery.

Podiatric Surgery



MORGAN ZELLERS, DPM, is a podiatrist specially trained in reconstructive foot and ankle surgery, sports medicine, diabetic limb salvage and wound care.

Psychiatry



ZEHRA AFTAB, MD, assistant professor of psychiatry and behavioral neuroscience, works to improve access to mental health services by leading the UChicago Medicine residency program at Ingalls, and is board-certified in both psychiatry and neurology.

Surgery



KRUNAL PARDIWALA, MD, is a general surgeon with a special interest in the surgical care of gastrointestinal/colon, skin and soft tissue, and breast disease.

The physicians at UChicago Medicine Ingalls Memorial are independent medical practitioners and are not employees or agents of Ingalls Memorial or the University of Chicago Medical Center ("UChicago Medicine").



Progress

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This publication is created to provide healthcare information to the residents of Chicago's South Suburbs.
Susan Fine, *Director*
Marketing Communications

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