

HealthyYOU

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Visit LVHN.org/healthyyou on your tablet, smartphone or computer and find these extras:

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Videos of doctors featured in this issue

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‘I’m Not Limited by Anything’

SHOULDER
REPLACEMENT HELPS
JERRY GROSS

West Easton is
Jerry Gross’
neighborhood.

In high school, Jerry Gross played baseball. Over and over again, he tossed fastballs, curveballs and sliders. He didn’t know it at the time, but each pitch stressed his shoulder joint, eventually damaging the protective cartilage cushioning the ends of the bones.

Over the years, Gross remained active, playing and coaching basketball and other sports. With his son, he ran Jerry Gross & Son Landscaping, and he loved doing physical labor outdoors. But by his late 60s, the damage done during his years as a pitcher caught up to him, leaving his right shoulder stiff and painful. The diagnosis: osteoarthritis, the wearing away of a joint.

“My family doctor told me several times to talk to an orthopedist about a shoulder replacement, but I just kept putting it off,” Gross says.

Gross’ ability to use his right arm continued to diminish, and physical therapy and other nonsurgical solutions failed to help. Eventually, on the recommendation of a physician friend, Gross made an appointment at Lehigh Valley Health Network’s Center for Orthopedic Medicine with orthopedic surgeon Neal Stansbury, MD, of VSAS Orthopaedics.

By then it was difficult for Gross to pull the cords on the lawn mowers at work. “The pain was taking away all my enjoyment of being outdoors,” he says. “My shoulder problem was dragging me down and making me feel old. I was too young to feel that old.”

Because Gross was so limited by his near constant pain, and because other treatments failed to help, Stansbury recommended shoulder replacement surgery. “When people hear about joint replacement, they often think of knees and hips,” Stansbury says. “Most people don’t even know that shoulder replacements exist or how much they can help restore comfort.”

During a total shoulder replacement, the damaged parts of the shoulder are removed and replaced with artificial material. “It’s a very successful surgery, and can give someone 10 to 15 more years with a functional shoulder,” Stansbury says. Most patients are back to normal within three months.

It’s been several years since Gross’ shoulder surgery, and he is back to the life he loves. “I’m not limited by anything,” he says. “I’m just amazed.”

—Alisa Bowman

Next Step

LEARN MORE about care for joint pain. Visit [LVHN.org/ortho](https://www.lvhnhospital.org/ortho) or call **610-402-CARE**.

NEW TECHNIQUE FOR BREAST CANCER TREATMENT

For women with early-stage breast cancer who opt for breast conservation, radiation therapy is a common treatment. Now a new approach for breast irradiation at Lehigh Valley Health Network – called prone breast irradiation – may improve a patient’s experience by reducing the risk for certain side effects.

Traditionally, patients undergoing breast radiotherapy lie on their backs (supine position). During prone breast treatment, a patient lies chest down on a special table that allows the breast being treated to fall downward for irradiation. Allowing the treated breast to fall away from the body eliminates a skinfold between the breast and the torso.

This helps reduce the risk for radiation dermatitis (a temporary irritation of the skin from radiation), which can be more severe in women with larger breasts who are treated in the traditional supine position. The prone treatment position also may reduce the already small risk for radiation exposure to the lungs or heart.

Your radiation oncologist will discuss prone breast irradiation if you are a candidate for its use.

LEARN MORE: Visit LVHN.org/breastcancer or call 610-402-CARE.

CLICK IT

It’s the law – if you’re driving, riding in the front seat of a car or if you’re under 18 years old, you must wear a seatbelt. Yet every day, Lehigh Valley Health Network (LVHN) emergency medicine physician Jeffrey Kuklinski, DO, with LVPG-Emergency Medicine sees evidence to the contrary.

“In the emergency room I see head injuries, chest injuries, people who have hit their windshields or steering wheels – all caused because they weren’t wearing a seatbelt,” Kuklinski says.

So if you hear that “fasten seatbelt” alarm ringing in your car, don’t ignore it. “Buckling up is the best way to help you avoid injuries and a trip to the ER,” Kuklinski says.

WHY BUCKLE UP?

▶ **Seatbelts reduce serious crash-related injuries and deaths by 50 percent.**

▶ **Auto accidents send 2.3 million people nationwide to the ER each year.**

Statistics courtesy of the Centers for Disease Control and Prevention



Faster Filling in Our Pharmacies

Health Spectrum Pharmacy Services at Lehigh Valley Hospital (LVH)–Cedar Crest now features the Parata Max® high-speed medication dispensing system.

It provides automated labeling, filling, capping, dispensing and storage for up to 232 medications – tasks that previously were performed manually by technicians. Bar-code technology ensures accuracy.

What’s the benefit? Prescriptions can be filled faster – both for outpatients and for people who are being discharged from LVH–Cedar Crest. “And our pharmacists will be able to spend more face-to-face time with our customers,” says pharmacy supervisor Matthew Yost, PharmD.

LEARN ABOUT about Health Spectrum Pharmacy Services. Visit LVHN.org/pharmacy.

INCREASE YOUR ATHLETICISM WITH CROSS-TRAINING

Are you a student athlete participating in spring sports? Or are you running to get in shape for the Lehigh Valley Health Network (LVHN) Via Marathon? Cross-training – training in two or more sports at once – may help increase your athleticism.

“Cross-training benefits your mind and body by helping to work different muscles and by alleviating the monotony of engaging in just one activity,” says sports performance specialist Robert Fatz.

Fatz, who works with local athletes as part of LVHN’s sports performance program, has seen how cross-training helps. “Athletes who cross-train usually are better conditioned and more well-rounded because they train and play in multiple planes of motion. These individuals often have better movement patterns, leading to an increase in productivity,” he says.

LEARN ABOUT sports performance. Call **610-402-CARE**.



Take Charge **CANCER**

TIPS, HINTS AND SUPPORT TO HELP YOU MANAGE YOUR HEALTH

SURVIVING HEAD- AND-NECK CANCER

WHEN A SORE THROAT
MEANS SOMETHING MORE

Take Charge Now

 **WATCH A VIDEO** of
Brian Patson, MD, at
LVHN.org/Patson.

GET SCREENED for oral
cancer on May 20.
See page 21.

LEARN MORE about
head-and-neck cancer at
LVHN.org/cancer.

Late last May, Matthew Zemacke of Harleysville (left) chalked up his persistent sore throat to spring-time allergies. But when his son, a physician assistant, visited, he grew concerned. “He said my voice was hoarse, and he wanted to take a look,” Zemacke says. After doing a quick exam – and learning that his tonsils were removed in childhood – his son said, “either your tonsils grew back or something else is going on.”

In mid-June, that “something” – a stage 4A tumor – was removed from the base of his tongue. Nearby tissue and lymph nodes also were affected, which meant additional treatment. “My mind was spinning,” Zemacke says. “I was 65 at the time and never had a serious health problem before in my life.”

BUILDING A CARE TEAM

For additional treatment, Zemacke turned to Lehigh Valley Health Network (LVHN) otolaryngologist and head-and-neck surgeon Hilary Koprowski II, MD, of Allen Ear, Nose and Throat Association, for a second opinion. Near the same time, a friend from church recommended LVHN radiation oncologist Robert Prosnitz, MD, with Allentown Radiation Oncology Associates for radiation treatments.

“Head-and-neck cancer is very complex and requires the coordinated efforts of a medical oncologist, a radiation oncologist, often a surgeon, nurses skilled in oncology plus other health professionals,” Prosnitz says. To complete the team, Prosnitz suggested Zemacke work with LVHN medical oncologist Brian Patson, MD, of Hematology Oncology Associates-Allentown.

VOICE-PRESERVING THERAPIES AND SUPPORTIVE CARE

“When you are dealing with very delicate structures of the mouth, you cannot always remove a tumor

completely without impacting the ability to speak, chew or swallow,” Patson says. “The approach to treat remaining disease is the combined use of radiation and chemotherapy.”

That was Zemacke’s treatment plan. For seven weeks, he received a total of 35 radiation treatments plus periodic chemotherapy infusions. “We use IMRT – intensity-modulated radiation therapy – as our standard of care for head-and-neck cancers,” Prosnitz says. “It’s a sophisticated way to shape the beam of radiation to closely target cancerous tissues while limiting radiation exposure to normal tissues, thereby reducing the risk for both short- and long-term side effects.”

Although IMRT reduces the risk for treatment-related toxicity, some side effects are still common. “Both radiation and chemotherapy can make swallowing painful, as well as cause oral mucositis, a breakdown of the lining of the mouth,” Patson says. Like most head-and-neck cancer patients receiving a combination of radiation and chemotherapy, Zemacke had a feeding tube put in place prior to the start of treatment to ensure he would have adequate nutrition and hydration throughout his treatment.

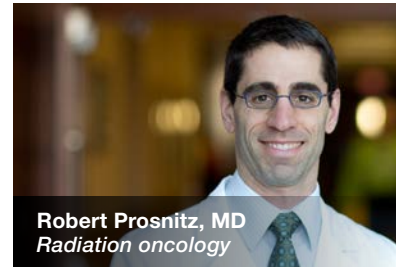
“I also received speech therapy to help me learn exercises that support swallowing,” Zemacke says. “I followed their advice, because if you don’t use those muscles or exercise them, you can lose the ability to swallow.”

PATIENT-CENTERED FOCUS

LVHN oncology patient navigator Dottie Morrone, RN, helped Zemacke weather the rigors of treatment. “Most head-and-neck cancer patients end up utilizing all of our services,” Morrone says. “To stay in tune with their needs, I go to appointments so I can hear what they are hearing without needing to call them for updates. I do this because speaking becomes physically uncomfortable after a few weeks of treatment, and I don’t want to put additional strain on them.”



Brian Patson, MD
Hematology oncology



Robert Prosnitz, MD
Radiation oncology



Hilary Koprowski II, MD
Otolaryngology

Morrone’s compassion, advocacy and education made a world of difference for the Zemackes. “My wife and I felt like we had been hit by a big tidal wave, but Dottie kept us on track and helped us deal with all of the realities and emotions of this diagnosis,” Zemacke says.

FUTURE FORWARD

After completing treatments in August 2013, recovery has been the focus. A recent PET (positron-emission tomography) scan showed no evidence of cancer, and Zemacke is now on a normal follow-up schedule.

“I am a man of faith. I trusted in God and the people he put in my life to help me through this,” he says. “I remember that sometimes I just needed to talk to someone about what I was going through, so in return I now make sure I offer a listening ear to cancer patients I see at church.”

And now he and his wife are embarking on life after cancer. “We have plans to visit my son and his family in Montana, and to take our 16-year-old granddaughter on a trip to Disney World,” he says. “It’s all about appreciating each other and the time we have together.”

–Jennifer Fisher



DIABETES DIARIES

RACHEL WEEKS AND JAYDE HOOVEN
SHARE THEIR EXPERIENCES WITH
TYPE 1 DIABETES

What does it mean to grow up with type 1 diabetes?

For Rachel Weeks and Jayde Hooven, day-to-day realities are similar: checking blood sugar, counting carbohydrates and administering doses of insulin to keep blood sugar in check. But their young journeys with diabetes were shaped by different experiences.

“I’ve never known life without diabetes,” says Rachel, 17, a 12th-grader at William Allen High School. “I was diagnosed at 14 months.” All she knows about that turning point came from her parents, Michael and Donna Weeks of Allentown: High blood sugar triggered ketoacidosis, in which cells become starved for glucose (energy supplied by food) because of a lack of insulin. “I was in a coma for a day,” Rachel says. “They didn’t know if I would make it.”

The Weeks family immediately had to learn a lot about type 1 diabetes – starting with how immune-system attacks render pancreas cells unable to produce insulin, permanently necessitating insulin therapy. “The biggest challenge for parents and young people – especially adolescents – is that type 1 diabetes is constant,” says Lehigh Valley Health Network (LVHN) pediatric endocrinologist Laurissa Kashmer, MD, with Pediatric Specialists of the Lehigh Valley, part of Children’s Hospital at Lehigh Valley Hospital. “You can’t take a break.”

Jayde Hooven and her parents, Dana and Jodi Hooven of Northampton, went through the same initial flurry of education and adjustment at diagnosis with one significant difference: Jayde was 6 years old and in first grade. “I hated it,” says Jayde, now a 21-year-old biology and premed major at the University of Scranton. “I thought I was weird because nobody else had to go to the school nurse at lunchtime or take injections with food.”

Her attitudes began to change at Camp Red Jacket,

Take Charge Now

LEARN MORE about Sugar-Free Kids and other diabetes support groups and classes. See page 22.

EDUCATE YOURSELF about symptoms, diagnosis and treatment for type 1 diabetes. Visit LVHN.org/type1.

a free LVHN summer day camp now held at Camp Fowler in Orefield for children ages 6 to 12 with type 1 diabetes. Campers fill their days with swimming, arts and crafts, and confidence-building games that teach coping skills – all under professional medical supervision. “I’m not exaggerating to say it’s life-changing for many children,” says Kashmer, who co-directs the camp.

“For the first time, I felt I wasn’t alone,” Jayde says. “I discovered that other people understood, and that diabetes could be normal.” She hit a turning point around fourth grade. “I decided my having diabetes shouldn’t matter, and I became very open about it” – especially with teammates on cheer teams that she was on from first through 12th grade.

“It’s important for young people to accept that type 1 diabetes can’t be cured but can be managed,” says Jayde’s doctor, LVHN endocrinologist Ram Jhingan, MD, with LVPG–Diabetes & Endocrinology. “Jayde has always been determined and motivated not to have diabetes control her life.”

Rachel attended Camp Red Jacket as well, and both girls became counselors when they reached adolescence. “It’s inspirational to work with young kids and remember when I was in their shoes,” Rachel says. “Having other kids look up to me has really meant a lot.”

The inspiration of helping others has inspired Jayde and Rachel chart their futures. “The summer after seventh grade, one of my campers and his mom asked me a bunch of questions about my life,” Jayde says. “He inspired me to become a pediatric endocrinologist so I could help others not be hindered or defined by diabetes.”

A junior in Scranton’s honors program, Jayde will take med school entrance exams in June. “Now I’m glad I was diagnosed with diabetes or I would have no clue what to do with my life or have the same passion to do it,” she says.

Rachel has decided to become an elementary school teacher. “When I realized how much I love helping kids, it was a revelation,” she says. “Kids with type 1 diabetes should know they can do anything anybody else can. Having diabetes doesn’t stop you in any way.”

–Richard Laliberte



THE RHYTHM OF LIFE

INNOVATIVE SURGERY RETURNS
JUDY LEVERMORE'S HEALTHY HEARTBEAT

Judy Levermore adores children.

It's why she chose to work as a teacher's aide, caring for children with special needs. "It is a wonderful vocation," says Levermore, who also admits the job can be stressful. Episodes of irregular heartbeat during work would interfere with her ability to do her job well. They would cause the 62-year-old Hamburg woman to faint, keep her up at night and drain her energy. The symptoms contributed to her decision to leave the profession she loves.

Levermore has atrial fibrillation (AFib), the most common heart rhythm disorder. For seven years she coped with the symptoms. She tried different medications and treatments, but they didn't work. She underwent two catheter ablations. During the procedure, a flexible tube (catheter) is inserted into a blood vessel in the groin

and guided to the inside of the heart. An electrode on the catheter creates heat, which is used to destroy the tissue that is causing the heart to beat out of sync. The procedure also was unsuccessful.

"Even after medical treatment and catheter ablation, symptoms persist in about half of patients with difficult-to-treat AFib," says Lehigh Valley Health Network (LVHN) cardiologist Gregory Altemose, MD, with Lehigh Valley Heart Specialists. However, a new and innovative surgery provided at LVHN is eliminating AFib symptoms in many more patients. It's called convergent ablation.

During convergent ablation, a cardiothoracic surgeon and heart rhythm specialist (electrophysiologist) work as a team. The surgeon inserts a device to the back of the heart through a small incision in the abdomen and uses it to destroy tissue and disrupt the electrical signal on the outside of the heart. Then the electrophysiologist threads a catheter through a blood vessel in the groin to the inside of the heart chamber. An electrode on the catheter identifies areas of the heart where the electrical signal is still very active and likely causing AFib. Tissue in these areas is then destroyed.

"Convergent ablation is successful in 75-80 percent of patients," says LVHN cardiothoracic surgeon James Wu, MD, with Lehigh Valley Heart and Lung Surgeons. Patients typically return home in 48-72 hours. Although

it often is successful, it is a last-resort treatment for patients with AFib because of the amount of lesions it creates on the heart. Patients who have had previous open-heart surgeries are not candidates for convergent ablation.

Levermore is optimistic her surgery was successful, although it may take more than three months to confirm it worked. "I did experience a few episodes following surgery," she says, "but my heart rate was not as high, and the symptoms weren't as severe."

Now that Levermore's heart is regaining its rhythm, she's giving it a workout every day. Her routine includes walking four miles or riding her stationary bike up to 15 miles. The reason she works out so vigorously is because she hopes to complete a 60-mile walk to raise awareness for breast cancer.

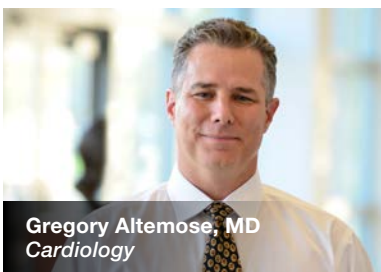
Levermore is a cancer survivor. At age 37, she was diagnosed with ovarian cancer. She had a hysterectomy and feels lucky because she didn't need chemotherapy. Today, she is driven to support other people battling the disease.

There is one more reason Levermore is taking charge of her health. She wants to be at her best for the arrival of her first grandchild. "I enjoy quilting," she says, "so I'm making little outfits for him or her." And once Levermore gets into a rhythm – whether she's exercising, quilting or living life – nothing stops her.

–Rick Martuscelli



James Wu, MD
Cardiothoracic surgery



Gregory Altemose, MD
Cardiology



The rhythm of quilting helps
Judy Levermore relax.

Take Charge Now

 **WATCH A VIDEO** of James Wu, MD, at LVHN.org/Wu.

LEARN MORE about atrial fibrillation care at LVHN.org/afib.

All About Hepatitis

SCREENING CAN PREVENT
COMPLICATIONS AND SAVE LIVES

What's the most common chronic blood-borne infection in the United States? (Hint: It's not HIV/AIDS.)

It's hepatitis C. "Infection from the hepatitis C virus is a silent epidemic, especially among baby boomers," says Lehigh Valley Health Network (LVHN) internist Joseph Yozviak, DO, with the Hepatitis Care Center. "Yet 75 percent of people who are infected don't know it." Here are the ABCs – literally – of hepatitis, all of which involve inflammation of the liver:

HEPATITIS A

Infections from the hepatitis A virus usually spread by a fecal-oral route (such as consuming contaminated food or water) or possibly sexual contact. "It's the least common form of hepatitis in our region and usually resolves on its own after a few weeks with few serious complications," Yozviak says. A vaccine has been available since 1995.

HEPATITIS B (HBV)

These infections can be serious and potentially fatal. The virus can spread through exposure to infected body fluids like blood, semen and vaginal secretions. Babies also can contract HBV if born to an infected mother. But new cases are uncommon in the U.S. thanks to widespread vaccination. Treatment is available for people who contract HBV, typically immigrants from Southeast Asia, sub-Saharan Africa, South America or Eastern Europe.

HEPATITIS C (HCV)

A major threat in the U.S., HCV infection has a five times higher prevalence in baby boomers who account for more than three-quarters of all chronic adult cases. That's why the CDC recommends getting screened if you were born between 1945 and 1965. Decades ago, many boomers were prone to HCV risks such as a history of injectable drug use (even once), practicing unsafe sex, and getting tattooed or body pierced in non-sterile settings. HCV also was more prevalent in the pre-AIDS era, when less rigorous standards governed medical needle use and blood screening. "Just living during that time may have put you in a situation where you were inadvertently and unknowingly exposed to infected blood," Yozviak says. Most infected patients have no symptoms. By the time cirrhosis develops and any symptoms appear – often after decades of infection – it may be too late to avoid complications such as liver failure or cancer. "But when detected earlier, new treatments can cure 95 to 100 percent of cases," Yozviak says. "We've made great strides in treatment – so it's important to identify those infected."

—Richard Laliberte



BORN 1945 If you were born between 1945 and 1965, get screened for HCV. **BORN 1965**

Next Step

**LEARN ABOUT
SCREENING FOR HCV.**

Visit LVHN.org/news or
call **610-402-CARE**.



Joseph Yozviak, DO
Internal medicine



Daniel Bitetto, MD
Hospitalist

Next Step

[READ MORE](#) “Empower Yourself” columns at LVHN.org/news.

The Role Hospitalists Play in Your Care

► **Need help navigating health care?**

The “Empower Yourself” column shares tips from a Lehigh Valley Health Network (LVHN) clinician about how you can best work together with your health care team. In this issue, Daniel Bitetto, MD, with LVPG Hospital Medicine at Cedar Crest, explains how a hospitalist supports you during a hospitalization.

When you’re admitted to the hospital, you need someone to be your advocate, coordinate your care and keep all your care providers informed. That person is

your hospitalist, an internal medicine physician or physician assistant who specializes in caring for people in the hospital.

If you were hospitalized years ago, you may have been seen by your family doctor. Today, hospitalists provide the hospital care your family doctor used to. Here are the benefits:

- **Faster admissions** – After you’re evaluated in the ER, a hospitalist can admit you. You no longer have to wait for your family doctor to do so, which often took several hours.
- **Family doctor access** – Because your family doctor doesn’t see patients in the hospital, he or she spends more time in the office. That’s helpful when you need an appointment.

- **Better communication** – Your hospitalist regularly talks to all the professionals caring for you while you’re hospitalized. Their teamwork helps ensure you receive the best care.
- **Hospital familiarity** – Hospitalists know everything about the hospital in which they work and have access to the specialists or services you need.
- **Questions are answered** – Hospitalists are in the hospital 24/7. They have time to talk with you or address any complications you may experience.
- **Smooth discharge** – When you leave the hospital, your hospitalist shares your latest health information with your family doctor so he or she can resume responsibility for your care. A hospitalist’s work schedule is designed with your care in mind. At Lehigh Valley Hospital (LVH)–Cedar Crest and LVH–Muhlenberg, each unit has its own hospitalist. Each hospitalist works seven days straight from morning until evening, including holidays. That means you’ll likely see the same hospitalist throughout your stay. There are only two occasions you would see a different hospitalist. If you need care overnight, you’ll be visited by the hospitalist who provides overnight coverage. If your hospitalist’s seven-day shift ends, you’ll be introduced to a new hospitalist. A hospitalization can be scary. If it happens to you, your hospitalist will use his or her education, experience, communication skills and compassion to guide your care.

MEET 'Team Jake'

SPECIALIZED CARE HELPS CREATE A SAFE DELIVERY

Jake Algerio's life became difficult two months before he came into the world. A routine ultrasound conducted on his mother uncovered a serious bladder obstruction that significantly limited his amniotic fluid, which is crucial to a child's growth and development in the uterus. Left untreated, the obstruction could cause renal failure, underdeveloped lungs or limbs – or worst of all – death.

"I was terrified," says Jake's mom, Brianne Algerio, 35, of Hawley, Wayne County, who was 20 weeks pregnant when she learned of Jake's problem. So Brianne turned to 'Team Jake' – the caregivers who helped her eventually deliver a healthy baby.

Through the Montage Center for Specialized Medicine in Moosic, Lackawanna County (about 45 minutes from Hawley), Brianne was able to consult with LVHN maternal fetal medicine (high-risk pregnancy) specialist Meredith Rochon, MD. In turn, Rochon worked together with neonatologist Wendy Kowalski, MD, from Children's Hospital at Lehigh Valley Hospital's neonatal intensive care unit (NICU). Together they helped Brianne through her pregnancy, all while safeguarding the health of mom and baby.

At 20 weeks, after learning of the bladder obstruction, Brianne relied on that team. "We weighed all the options, which included terminating the pregnancy," she says. "But I wanted to see it through."

The best option – inserting bladder shunts, a minimally invasive surgery where catheters are inserted through the mother's belly and into the fetus's bladder. This allows urine to drain properly into the amniotic cavity. "Without such a procedure, the prognosis for survival is very poor," Rochon says.

Brianne had the surgery at LVHN, and that procedure went well. Then, at 32 weeks came another challenge. From inside his mother's womb, Jake wiggled enough to displace one of the shunts. A second surgery replaced the shunt, but when a blockage developed two weeks later, Brianne and "Team Jake" had one more crucial conversation.

"We discussed what would happen if Jake had to be delivered prematurely," Kowalski says. "We met with Brianne and discussed what she could expect in the NICU and what Jake may face after delivery, such as the possibility of ongoing kidney problems and other issues related to prematurity."

On Sept. 21, Jake was born via Cesarean section at Lehigh Valley Hospital–Cedar Crest. His shunts were removed the next day. Then, on Sept. 24, Jake got help from pediatric urologist Michele Clement, MD, who was just joining LVHN at the time.

"When I first saw Jake, there was no way for his bladder to drain. Our first step was to create a temporary path for the urine to drain," Clement says. "Once this was done, we could let Jake grow until he was large enough for us to fix the problem that kept his bladder from emptying naturally. He's done very well through it all, but will need close follow-up care in the years to come."

Jake spent two months in the NICU, and then came home to Hawley in late November. While Jake's kidney issues may continue throughout his life, Brianne is confident in the team that has helped her and her newborn son thus far.

"Jake has come through it all and hasn't shown any signs of ailments after five months," she says. "All his wonderful doctors are happy with his progress. No matter what happens from here, I know he's a blessing."

–Ted Williams

About Children's Hospital at Lehigh Valley Hospital

CHILDREN'S HOSPITAL AT LEHIGH VALLEY HOSPITAL PROVIDES FAMILY-CENTERED CARE

for children of all ages. It includes inpatient and ambulatory care, a Children's ER, subspecialists in more than 25 pediatric specialties, and numerous child-specific services such as rehabilitation and burn care. It's the only Children's Hospital in the Lehigh Valley. Learn more at LVHN.org/children.



Michele Clement, MD
Pediatric urology




Meredith Rochon, MD
Maternal fetal medicine



Wendy Kowalski, MD
Neonatology

Next Step

LEARN MORE about care for newborns at LVHN.org/pregnancy.

 **WATCH A VIDEO** of Michele Clement at LVHN.org/Clement.

 **children's hospital**
LEHIGH VALLEY HEALTH NETWORK
a service of Lehigh Valley Hospital



Advances in Hysterectomy Surgery

ROBOTIC APPROACH GIVES LORI CIRUCCI HER ACTIVE LIFE BACK

Lori Cirucci (below) loves being on the go, enjoying the outdoors and sharing the wonders of science with her middle-school students. But at age 46, the Schnecksville resident began having extremely heavy periods (a condition called menorrhagia) that often lasted more than a week and kept her continually rushing to the bathroom. “As a teacher I couldn’t run out of class every 30 minutes,” she says. “I avoided many activities during my period. I was miserable.”

After two years of restricted living, Cirucci, now 53, decided to have endometrial ablation surgery. The procedure destroys the uterine lining and reduces or stops menstrual flow. “After surgery, my husband and I bought kayaks,” she says. “I had this freeing sense I could do everything again.”

But two years later, her heavy periods returned. Unwilling to limit herself again – and concerned she was at risk for endometrial cancer, which had taken her mother’s life – Cirucci decided to have a hysterectomy last summer. But she didn’t want to interrupt a planned month-long visit from her 18-month-old granddaughter and 4-year-old grandson.

Determined to find the least invasive surgery, she visited Lehigh Valley Health Network (LVHN) obstetrician-

gynecologist Gregory Kainz, DO, with OBGYN Associates of the Lehigh Valley & Carbon County. He recommended da Vinci® robotic surgery over other minimally invasive options, including laparoscopic surgery.

“With robotic surgery we operate through dime-sized incisions using a 3-D high-definition camera and instruments with bendable wrists,” Kainz says. “This adds precision and dexterity. By contrast, laparoscopic surgery uses non-bendable instruments and a 2-D monitor. Da Vinci patients generally have less blood loss, less pain and return to work faster.”

With robotic surgery, Kainz removed Cirucci’s uterus, cervix and part of her fallopian tubes. She went home that day and was surprised at her easy recovery. “I was up the next day doing laundry,” she says. “I was truly pain-free and never filled my pain prescription. I could have returned to work within days.”


Best of all, when her grandchildren arrived two weeks later, she had no trouble keeping up during their many day trips. “I don’t worry now about being tied down or getting the cancer my mom had,” she says. “I’m a big fan of robotic surgery and don’t know why anyone would choose another way.”

–Sidney Stevens



Next Step

LEARN MORE ABOUT DA VINCI ROBOTIC SURGERY at LVHN.org/roboticsurgery or call **610-402-CARE**. Watch the robot in action at the Robotic Simulation Olympics. See page 21.

 **WATCH A VIDEO** of Gregory Kainz, DO, at LVHN.org/Kainz.

Single-Site Gallbladder Surgery

ROBOTIC PROCEDURE HELPS ROY ZIMMERMAN RECOVER QUICKLY

Roy Zimmerman (below) loves to boat and to bowl.

So when he learned he needed gallbladder surgery, the Schnecksville man had one thought. "I wanted to recover quickly," he says.

Zimmerman, 54, had spent 10 years being treated for what he thought was reflux disorder. "Then I stopped taking the medication; it didn't seem to help," he says. But in the fall of 2013, he began getting pain under his ribs.

He searched the Internet. "I learned symptoms of gallbladder disease are a lot like those for reflux," he says. The gallbladder is a small, olive-shaped organ at the base of the liver. It stores and concentrates bile to help the liver break down fat, and over time, it can become diseased or develop gallstones.

An ultrasound showed Zimmerman's gallbladder was diseased, and he needed serious attention. "We talked about nonsurgical options, but the only viable treatment was surgery," he says.

Zimmerman put his trust in Lehigh Valley Health Network (LVHN) surgeon Paul Cesanek, MD, with General Surgical Associates. He specializes in a newer approach to gallblad-

der surgery – one that requires just a single incision thanks to use of the da Vinci® Robotic Surgical System. "We perform Single-Site™ Surgery, which is nearly scar-less because the incision is less than 1 inch long and is hidden within the belly button," he says.

During surgery, the robotic system provides 3-D, high-definition views of the surgical site within the body. "This allows us to perform delicate surgeries – such as gallbladder removal – with incredible precision," Cesanek says. "And with a single small incision, it offers patients a less-invasive surgery with a lower risk for infection." LVHN hopes to offer Single-Site Surgery for conditions like hiatal hernia and colon resection in the near future. In addition to Cesanek, LVHN surgeons Scott Beman, MD, Rovinder Sandu, MD, Guillermo Garcia, MD, and Martin Martino, MD, perform single-site surgeries.

For Zimmerman, the best benefit of Single-Site Surgery was a faster recovery. "I had my surgery on a Friday," he says. "By Sunday I could walk three miles on my treadmill, and by the following weekend I was running again. And I got back to my bowling league within two weeks."

–Jennifer Fisher

Next Step

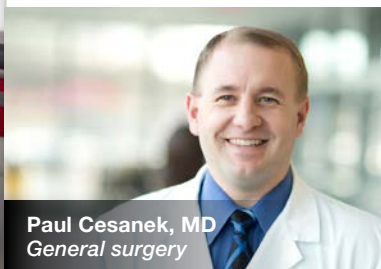


WATCH A VIDEO

Paul Cesanek, MD,
at LVHN.org/Cesanek.

TRY YOUR HAND AT A

SURGICAL ROBOT at the
Robotic Simulation Olympics.
See page 21 or visit LVHN.org/simulationolympics.



Paul Cesanek, MD
General surgery





‘WHY I RUN’

THREE LVHN VIA MARATHON PARTICIPANTS
SHARE THEIR INSPIRATION

For one weekend each September, the excitement stretches from Allentown to Easton. More than 3,500 runners compete in the Lehigh Valley Health Network (LVHN) Via Marathon, and thousands more spectate, support and celebrate. Last year’s event raised more than \$200,000 to benefit Via, which provides services for children and adults with disabilities. This year’s marathon weekend is set for Sept. 6 and 7. Here, three runners share their motivation for competing:

Next Step

REGISTER TO RUN, WALK OR VOLUNTEER in the 2014 LVHN Via Marathon. Visit LVHN.org/marathon or call **610-402-CARE**.

READ WEEKLY BLOG POSTS by a veteran runner and a first-time half-marathon hopeful on the Lehigh Valley Health News blog at LVHN.org/news.



**KATHLEEN
 JOBES**

‘IT’S IN MY BACKYARD.’

A 43-year old marketing director for Runner’s World and Running Times magazines, Kathleen Jobses of Bethlehem (above and at left) has run competitively for more than 20 years, and was even a 2008 Olympic trials qualifier. So to her, a local race like the LVHN Via Marathon is like home. “We have so much diversity in the Lehigh Valley in terms of places to run – parks, roads, mountains and tracks,” she says.

There’s also diversity in the events offered on marathon weekend – a full- and half-marathon, a team relay, a 5K run, a Via walk and a kids’ race. In 2013 Jobses ran the relay as part of an all-female team. Her team came in first place and is ready to defend its crown this year. Yet Jobses’ real joy was getting to experience the race course with other runners. “The camaraderie of our running community is amazing, and everyone comes out to support all these great causes,” she says.



**JEANNA
 MOFFETT**

‘WE WANTED TO QUALIFY FOR BOSTON.’

The LVHN Via Marathon is a Boston Marathon qualifier, which led Jeanna Moffett and her running buddy, Dawndy Plank, to travel 650 miles one-way from Columbia, S.C., to Bethlehem in order to run in the 2013 event. Moffett, 53, has already run the Boston Marathon twice, and prior to the Via Marathon last year, she and Plank made a deal – “We both had to qualify or the other wouldn’t go,” Moffett says.

On race day, Moffett, 53, finished just under the four-hour time limit, but Plank, who was fighting a cold, fell short. Even so, the two women enjoyed competing. “The LVHN Via Marathon has a distinct personality,” Moffett says. “The bulk of the course is along the river, which is beautiful and scenic, and the race feels small and personal.” During the weekend the two women also visited local restaurants, a roadside farm-stand, “and got a real sense of community,” Moffett says.



**BRIAN
 NGUYEN**

‘I RAN FOR MY BROTHER.’

Last year while on rotation at LVHN as a medical student, Brian Nguyen signed up for the LVHN Via Marathon. Like Moffett, Nguyen wanted to qualify for Boston. Yet he had a more important motivation – supporting his younger brother, an Illinois resident who has Down syndrome.

A student at Lake Erie College of Osteopathic Medicine in Greensburg, Pa., Nguyen suffered a pre-race knee injury that forced him to walk for eight of the 26.2 miles. Yet the 27-year-old never gave up. “I was fighting a lot of pain and teetering between taking care of my body and finishing the race to raise money,” he says. “The thought of helping others inspired me to finish.” His perseverance paid off – he raised more than \$600 for Via, making him among the top 10 individual fundraisers. “It didn’t turn out exactly how I’d hoped from a personal standpoint, but I am really close to my brother, and I was happy to help others like him by raising money for Via.”

–Sidney Stevens



3 Tips to Prevent Stroke

OUR EXPERTS WEIGH IN



David Winand, MD
Vascular surgery



Yevgeniy Isayev, MD
Neurology

It's caused when a blood vessel becomes blocked or starts to bleed. It starves your brain cells of nutrients. It's a stroke. Someone in America dies from a stroke once every four minutes. "Yet many strokes can be prevented," says Lehigh Valley Health Network (LVHN) neurologist Yevgeniy Isayev, MD, with Lehigh Neurology. Here are three tips to prevent stroke:

1 Keep blood pressure under control. Like Teflon® on a nonstick frying pan, the insides of your blood vessels are covered by a protective coating. When blood pressure is high, it causes damage to this protective lining and may injure it. "If you have a healthy frying pan, nothing sticks to it. It's the same with your blood vessels," Isayev says. Once the lining has been damaged, plaque is more likely to build up, clots are more likely to form, and vessels are more likely to break open and bleed.

This is why taking control of your blood pressure is so important. "See your primary care doctor regularly to keep it in check," says LVHN vascular surgeon David Winand, MD, with Peripheral Vascular Surgeons of LVPG. Weight loss, exercise and a low-salt, high-produce diet all can help lower blood pressure and two other stroke risk factors: high cholesterol and blood sugar.


2 Don't smoke. Remember that nonstick coating? "Irritants in cigarette smoke scrape the protective surface of your arteries in the same way a metal spatula scrapes the Teflon off a frying pan," he says. So if you smoke, quit today.

3 Get help immediately. If you notice any signs of a stroke – numbness, tingling, blindness in one eye, loss of speech, confusion, inability to move an arm or part of the face – call 911. "Every couple of minutes during a stroke, hundreds of thousands of brain cells are dying from lack of blood flow," Isayev says. "If you go to bed thinking you might feel better in the morning, you may wake not being able to talk or being paralyzed and not able to move." And by then, the damage may be irreversible.

Even if symptoms are mild and transient, still seek care. "Minor, short-lived symptoms are often the tip of the iceberg," Winand says. "They are a warning of a stroke to come. Even if they last only a couple of seconds, act now."

—Alisa Bowman

Next Step

 **WATCH VIDEOS** of Yevgeniy Isayev, MD, at [LVHN.org/Isayev](https://www.lvhn.org/Isayev) and David Winand, MD, at [LVHN.org/Winand](https://www.lvhn.org/Winand).

LEHIGH VALLEY HOSPITAL is a Comprehensive Stroke Center. Watch a video of how LVHN experts remove clots and learn more at [LVHN.org/stroke](https://www.lvhn.org/stroke) or call **610-402-CARE**.

Calendar CLASSES AND SUPPORT GROUPS

REGISTER BY CALLING 610-402-CARE OR VISIT US ONLINE AT LVHN.ORG/HEALTHYYOU.

Registration is required and must be received at least one week prior to class start. You'll get a refund if a class is canceled due to low enrollment.

What's New

LVHN Via Marathon

Now is a great time to begin training for a marathon—or consider a half marathon, form a relay team, walk a 5K or volunteer your time to a good cause that provides services for those with disabilities.

Sept. 6: 5K–7:30 a.m.; Via walk–9 a.m.; Kids' Race–10:30 a.m.

all at ArtsQuest Center, SteelStacks, Bethlehem

Sept. 7: Marathon and relay–7 a.m. at LVH–Cedar Crest; Half marathon–7 a.m. in Bethlehem

Osteoporosis Awareness Community Event

Join us to learn ways to improve your bone health and prevent osteoporosis. Free heel screening, vendors, guest speakers and more,

May 18: 1-4 p.m. (registration 12:30-1 p.m.) at LVH–Cedar Crest

Robotic Simulation Olympics

Be America's next top doctor. See the da Vinci® Robotic Surgery System and try your hand at the robot. Learn more at [Facebook.LVHN.org/roboticolympics](https://www.facebook.com/LVHN.org/roboticolympics).

June 4: 3-7 p.m. at Da Vinci Science Center

Finals June 28: 5-8 p.m. at Coca-Cola Park

Strike Out Stroke

Come out to a night at the ballpark to raise community awareness of the signs and symptoms of stroke while you cheer on the IronPigs. General admission fee applies.

May 9: 7:05 p.m. at Coca-Cola Park

Around Our Community

Community Exchange

Create a healthier community. Volunteer time and earn time by exchanging services with friends and neighbors.

Third Mon. of month: 2-4 p.m. at LVH–17th, First Wed. of month: 6-8 p.m. at LVH–Muhlenberg

First Strides®

This 12-week program, offered in spring, summer and fall, helps you comfortably progress from the couch to walking, jogging or running at a pace that's right for you. Visit firststrides.com for details.

Get Out! Lehigh Valley

This healthy outdoor activity program with a Wild-lands Conservancy guide connects you to parks, trails, gardens, rivers and more in your community.

For details and new dates, go to getoutlehighvalley.org or call **610-402-CARE**.

Hawk Mountain Walk

May 24: 10 a.m.

Ringing Rocks County Park Adventure

June 7: 10 a.m.

Monocacy Way Walk

June 21: 10 a.m.

Lehigh River Bike and Boat Trip

July 12: 10 a.m., \$15 per person fee

Would a Support Group Help?

Dozens of different groups provide comfort and support.

Caring for Mind and Body

Massage Therapy

Medical therapists offer different massage options at various sites.

Mindfulness-Based Stress Reduction

Internationally recognized program uses meditation and group support.

Information sessions

May 27, June 3, June 9 at LVH–Muhlenberg, Banko

Class sessions

Starting June 10 at LVH–

Muhlenberg, Banko

Retreat

July 19

Aging Well

APPRISE Medicare Counseling

For an appointment, call

610-402-CARE.

Tue.: 9 a.m.-1 p.m.

Aqua New

Water exercise for posture, balance, strength and confidence.

Dr. Salerno's Geriatric College of Knowledge

Caregiving Q&A

May 14

Why Do I Feel Lightheaded and Dizzy?

June 11

Acute Confusion: What Does It Mean?

July 9

All events 11 a.m.-noon at LVH–17th Street

Protecting Your Health

Cessation, What Works?

How to succeed in beating tobacco addiction.

June 9 at 1243 S. Cedar Crest Blvd., Suite 2200

Tobacco Free Northeast PA

Tobacco treatment referral services available for individuals and businesses.

CPR

- Adult Heartsaver AED
- Heartsaver Adult First Aid
- Heartsaver CPR – Pediatrics
- Heartsaver Pediatric First Aid

Screenings

Clinical Breast Exams and Pap Tests for Uninsured Women

Appointment is necessary.

Call **610-969-2800**.

Sponsored by Community Health and Wellness Center in collaboration with Allentown Health Bureau.

Weekly 8:30 a.m.-4 p.m.

Rapid HIV Testing

Free, anonymous and confidential.

Mon.-Thu.: 9 a.m.-3 p.m., Fri. by appointment at LVH–17th Street

Lung Cancer Screening

Call **610-402-CARE** for more information.

Oral Cancer Screening

Call **610-402-CARE** to register. May 20: 6-8 p.m. at LVH–Cedar Crest

Raising a Family

Free! **Welcome Pregnancy 101**

May 22

Free! **Tours Expectant Parent Tour Sibling Tour – My Baby and Me**

New! **Preparing for Childbirth and Baby**

Combination Class

Getting It Done in One

Designed for those committed to pre-class reading. Prepare for labor, birth, caring for your newborn and what to expect in the days after birth.

Six-week series

Preparing for Childbirth

Weekend: Fri.-Sat., Sat.-Sun.

One-Day: Sat.

On the Internet

Teens Only

Preparing for Baby

Baby Care

Breast-feeding Baby

Becoming New Parents Workshop

Staying Safe

Babysitting – Safe Sitter

CPR – Safe Sitter Student

CPR – Family and Friends

Free! **Free Safe Ride – Car Seat Safety**

Certified technicians show how to correctly install car seats and secure children.

After-Delivery Support

Monday Morning Moms

Free! **Postpartum Support**

Understanding Emotions After Delivery

Free! Stroke

Stroke assessments, blood pressure screenings, stroke prevention information, non-fasting cholesterol and glucose assessments.

Call **610-402-CARE** for information.

May 19: 10 a.m.-2 p.m. at

LVH-Muhlenberg

May 21: 10 a.m.-2 p.m. at

LVH-Cedar Crest

May 28: 10 a.m.-2 p.m. at

LVH-17th Street

Living With Diabetes

Our team will work with you and your health care provider to design a program to fit your needs.

We provide education for:

- Prediabetes
- Type 1 and type 2 diabetes
- Gestational diabetes

We will help you learn more about:

- Healthy eating
- Being active
- Testing your blood sugar
- Taking medication
- Reducing risks
- Problem-solving and healthy coping

We also offer:

- Insulin pump training
- Continuous glucose monitoring system training
- Support groups for adults and children
- Medical nutrition therapy

Free! Insulin Pumps

Support and information for adults with diabetes using insulin pumps and continuous glucose monitors (CGMs).

Meal planning and virtual supermarket tour

May 22: 6- 7:30 p.m. at 1243 S.

Cedar Crest Blvd., Suite 2200

Free! Safe at School Workshop

For parents and health care providers of children with type 1 diabetes, learn about resources and health plans in the school setting.

Free! Sweet Success

Monthly support group for adults with type 2 diabetes.

Diabetes and neuropathy

May 15: 6:30-8 p.m. at LVH-

Muhlenberg

Virtual supermarket tour

June 19: 6:30-8 p.m. at LVH-Cedar

Crest

Topic to be determined

July 17: 6:30-8 p.m. at LVH-

Muhlenberg

Sugar-Free Kids

Monthly support group for children with type 1 diabetes.

IronPigs Family Night

July 17: 7:05 p.m. at Coca-Cola Park

Coping With Illness

Amputee Support Group

Meets third Mon. of month:

5-6:30 p.m. (includes dinner) at

LVH-Cedar Crest

Bereavement Support Services

Bereavement Care Workshop

Grief Process Groups

Individual, Family and Couples

Counseling

Ladies Lunch Club

Spiritual-Based Adult Grief

Support Group

Stepping Stones for Children

Brain Warriors Stroke

Support Group

Share emotional and physical issues to help deal with life after stroke.

Meets every third Mon. of month:

11 a.m.-noon at LVH-Cedar Crest

Free! Heart Failure Support Group

Successful living with heart failure support group for patients and families.

Meets every two months

Huntington's Support Group

Meets second Sat. of month

at LVH-Cedar Crest

Free! Joint Replacement Prep

What to expect for knee or hip replacement.

May 28, June 25: 1:30-3 p.m.

June 3, July 1: 9-10:30 a.m.

Free! Kidney/Pancreas Transplant Information Session

If you would like more information about kidney and pancreas transplants, attend one of our information sessions. For details, call

610-402-CARE.

Parkinson's and Multiple Sclerosis Get Up and Go

Balance, stability and fall prevention exercises; group games, lectures and more to enhance movement outcomes.

Mon. and Thu.: 10:30-11:30 a.m.

and noon-1 p.m. at 1243 Cedar Crest Blvd.

Mon. and Thu.: noon-1 p.m.

at 1770 Bathgate, Bethlehem

Parkinson's Support Group

Meets fourth Tue. of month

at LVH-Muhlenberg

Free! Preoperative Spine Class

Information to help you prepare for hospital care and recovery.

May 7, May 20, June 4, June 17

For details, call 610-402-CARE.

Transplant Support Group

Meets first Sun. of month at

LVH-Cedar Crest

Cancer Survivor Celebration

Join us for this year's celebration on June 28. For more information, call **610-402-CARE**.

Cancer Survivorship Education Series

Nutrition
May 5, 12, 19 and June 2:
 6:30-8 p.m. at LVH-Cedar Crest

Legacy Project

A seven-week cancer survivorship program open to men and women who have completed active treatments.
Meets Thu.: 6-8 p.m. at LVH-Cedar Crest

Look Good...Feel Better

Makeover to understand and care for changes to skin during cancer treatment and to boost self-confidence.
May 19: 2-4 p.m. at LVH-Cedar Crest
With American Cancer Society

Men Facing Cancer

Meets first Mon. of month:
 7:30-9 p.m. at LVH-Cedar Crest

Metastatic Breast Cancer Support Group

Meets second Mon. of month:
 7-8:30 p.m. at LVH-Cedar Crest

Support of Survivors

Breast cancer helpline
610-402-4SOS (4767).

Managing Your Weight

Drop 10 in 10

Group-based 10-week weight management program to help you lose 10 pounds (or 10 percent) of body weight through nutrition, exercise and behavior.
Starting June 26: 5:30-6:30 p.m.

Free! **Monthly Support Group**
 Support and information on weight-loss surgery.

Exercise physiology
June 4: 6-7:30 p.m. at LVH-Cedar Crest

Plastic surgery after weight loss
July 2: 6-7:30 p.m. at LVH-Cedar Crest

Free! **Weight-Loss Surgery Information Night**

What to expect.
Evening sessions
May 22, June 3, June 17, July 3, July 15: 6-7:30 p.m. at LVH-Cedar Crest
Day sessions
June 6: noon at LVH-Cedar Crest

Weight Management Services

INDIVIDUAL Nutrition Counseling
 Assessment, body-fat analysis and goal-setting.

Nutrition Counseling/Metabolism Body Composition Test
 Counseling plus personal metabolism test and interpretation.

Six-Month Supportive Weight Loss Program

Individualized expert-level care for nutrition, behavior and fitness.

GROUP Eat Well for Life

Learn healthy food choices for weight management.
Part 1 starting June 9: 10:30 a.m.-noon at 1243 S. Cedar Crest Blvd., Suite 2200
Part 2 starting July 7: 10:30-noon at 1243 S. Cedar Crest Blvd., Suite 2200

10 Steps to Less Stress

This lifestyle management program helps you manage everyday stress through practical relaxation techniques and stress management strategies.
Starting May 20: 10:30 a.m. at 1243 S. Cedar Crest Blvd., Suite 2200

Sports Performance Classes

Youth Program
 For young athletes ages 8-11, two sessions/week for eight weeks concentrate on proper weight-lifting technique, flexibility and movement skills.

Junior Varsity Program

For athletes ages 12-14, two or three sessions/week for eight weeks emphasize gaining flexibility, strength and power.

Varsity Program

For athletes ages 15-18, advanced two or three sessions/week for eight weeks work on proper mobility, stability, increased strength and power.

LVHN Fitness Group Classes

Being an LVHN Fitness member allows you to partake in a variety of classes. Call **610-402-CARE** for more information. See a list of class locations and descriptions at **LVHN.org/fitness**. Classes are offered at four locations.

- Age-Proof Workout**
- Boot Camp**
- Cardio Cross-Training**
- Chisel**
- Core Synergy**
- Cycling**
- Get Up and Go**
- Energizing Yoga**
- Exercise for Life**
- Kettlebells**
- Relaxing Yoga**
- Rip 'n' Ride**
- R.I.P.P.E.D.**
- Staying Strong**
- STAT**
- Very Gentle Yoga**
- Yoga Basics**
- Yogalatte**
- Zumba**
- Zumba Gold**



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 Susan Hoffman
Vice president, marketing and public affairs
Editorial Manager
 Kyle Hardner
Medical Editor
 Mark Wendling, MD
Creative Manager
 Teresa Colbaugh
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 Erin Parrish
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 Alyssa Young
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