A patient gets relief from the pain of degenerative lumbar scoliosis.
Welcome to the Summer issue of *Connections*, a quarterly publication bringing you the latest in medical technology, research and patient care from NorthShore University HealthSystem (NorthShore). Each issue of *Connections* offers several stories about how our patient-centered care contributes to serving our communities.

I am honored and excited to be the new President of NorthShore’s Skokie Hospital. During the past several months, we have successfully transitioned Skokie Hospital to become the fourth Hospital at NorthShore, joining Evanston, Glenbrook and Highland Park Hospitals.

From day one, we found a natural alignment in the shared values between Skokie Hospital and NorthShore. First, both organizations are united in their focus to deliver exceptional patient care. Second, we have a strong commitment to the members of our communities. And third, we are dedicated to achieving excellence on the frontline and behind the scenes.

To ensure that our goals for continued excellence are met, NorthShore is investing more than $100 million to enhance core clinical services for patients on the 28-acre Skokie Hospital campus.

To ensure that our goals for continued excellence are met, NorthShore is investing more than $100 million to enhance core clinical services for patients on the 28-acre Skokie Hospital campus. Facility improvements will include the construction of new buildings, renovation of existing facilities and addition of new clinical technologies, as well as full implementation of NorthShore’s national award-winning electronic medical record system.

An acute care medical center, Skokie Hospital is well known for its expertise in cardiovascular care and orthopaedic surgery.

Our exciting plans will build on this expertise and include the expansion of key clinical services such as the Cardiac Catheterization Lab, Gastroenterology Lab, Noninvasive Cardiac Lab and Ambulatory Surgery. Other projects will be a new 100,000-square-foot Ambulatory Care Center connected to the Hospital, an expanded Emergency Department, new Radiology Department and a remodeled front entrance and lobby. Designed with the patient in mind, these facility improvements will enhance patient care and position Skokie Hospital for continued growth in the future.

A state-of-the-art Center for Laparoscopic and Minimally Invasive Surgery at Skokie Hospital allows surgeons to hone their skills for multidisciplinary, minimally invasive surgical techniques. This “Operating Room of the Future” focuses on advanced training for surgeons, residents and students. It includes an extensive Internet video library and the capabilities to record surgeries in real time.

On the community side, Skokie Hospital has a long tradition of supporting activities to improve the health of its communities. As part of NorthShore, Skokie Hospital continues its partnership with one of the most diverse communities in the United States.

We intend to build on historical areas of strength and take advantage of synergies created by our recent merger into NorthShore to grow and improve the services we provide. We have a very bright future at NorthShore’s Skokie Hospital, and I’m thrilled to be part of it.

Best regards,

Kristen Murtos, President
NorthShore’s Skokie Hospital
Perfect Again

A NorthShore University HealthSystem orthopaedic surgeon performed a surgical reconstruction of the spine for a patient with degenerative lumbar scoliosis that allowed her to be fully functional once again.

Amazing Grace

NorthShore University HealthSystem oncology patient has defied all odds and survived several bouts of metastatic breast cancer while continuing to play the French horn for the Chicago Symphony Orchestra.
Focus on Quality Care

When it comes to safety and quality for patients, NorthShore University HealthSystem (NorthShore) is at the pinnacle among the top hospitals nationwide. For the 13th time and more often than any hospital in the United States, NorthShore was named one of the nation’s 15 Top Teaching Hospitals by Thomson Reuters, a leading provider of information and solutions to improve the cost and quality of healthcare.

Mike Raymond, M.D., is accustomed to ensuring the safety and quality of care for NorthShore patients every day. Below Dr. Raymond discusses quality and safety issues for patients, why quality care is a top priority at NorthShore and how safe he would be as a NorthShore Hospital patient.

By Sara S. Patterson

Question: What are three key concerns in quality for patients at hospitals?
Answer: Given the recent increase in media attention, patients are now more aware of and focused on their risks for hospital-acquired infections. I think patients are also quite concerned about medical errors and the communication among the members of their care team.

Q: How do the four NorthShore Hospitals address these concerns for quality?
A: NorthShore Hospitals have been proactive in preventing hospital-acquired infections. We are among the few health systems nationwide that provide routine screening for methicillin-resistant Staphylococcus aureus (MRSA) colonization to all hospitalized patients. As a fully integrated healthcare delivery system, our electronic health records allow for seamless communication among all care providers for both inpatients and outpatients.

Q: What differentiates the safety and quality for patients at NorthShore’s Hospitals from other hospitals in our area and nationally?
A: During the past five years, NorthShore Hospitals have been awarded numerous national recognition awards for patient safety and quality. For 13 years, our health system has ranked in Thomson Reuters’s 15 Top Major Teaching Hospitals category—more consistent recognition than any other healthcare organization nationwide. For the Centers for Medicare & Medicaid Services (CMS), our core measurement performance is nearly 100 percent. Our award-winning electronic medical record (EMR) system allows for the reduction in patient errors in areas such as medication, transfusion and identification across the continuum of care. All of these awards, performance measurements and early implementation of EMR combine to set us apart locally, regionally and nationally.

Q: How does a focus on quality influence the cost effectiveness of clinical practice?
A: As in most things, better-quality healthcare leads to cost savings due to inherent efficiencies. For example, there is less duplication of efforts and more efficient scheduling of caregivers for patients.

Q: Why would you feel safe if you were a patient at one of the four NorthShore Hospitals?
A: You can get a measure of an organization’s desire to excel by its commitment to quality. At NorthShore, it starts at the front entrance with Concierge Services, is found in our Emergency Departments and carries through to our nurses, doctors, housekeeping staff and clinicians. We have created a culture of patient safety and quality driven by continuous improvement. 

connections
Art Massa: Talented, Hard Working and Selfless

By Sara S. Patterson

Art Massa, 56, the Publisher of Connections magazine, recently passed away from pancreatic cancer. He had the vision to create our magazine featuring stories of exceptional patient care through the skill, innovation and compassion of NorthShore University Health-System (NorthShore) physicians.

“NorthShore’s Connections magazine provides us with a great framework for sharing the stories of our patients to our overall communities and our community of donors,” said John R. Walter, Chairman of NorthShore Foundation Board of Directors.

Developing the blueprint for Connections magazine was one of Massa’s many successes during his rich, varied 33-year career as a marketing and communications professional. As Senior Vice President of Corporate Communications and Advertising at NorthShore, he spearheaded the new branding campaign for NorthShore University HealthSystem. The new name reflected both the change in our integrated healthcare delivery system’s teaching affiliation to the University of Chicago and expanded geographic reach.

Massa did extensive research to devise the new name, logo design, color and typeface, and then oversaw the tough job of changing everything at NorthShore from advertising to facility signs to stationery before the re-branding became official on Sept. 15, 2008, according to Jeffrey H. Hillebrand, Chief Operating Officer at NorthShore. “Art has left a permanent mark on the corporation and a permanent mark on me,” Hillebrand said.

“Leading the name and brand change at NorthShore was a unique career opportunity for Art,” said Bill Luehrs, Chief Human Resources Officer at NorthShore. “Also, he truly enjoyed working for a healthcare organization that focused on people compared with organizations like Commonwealth Edison or NutraSweet.”

During the 1991 recession after he had been laid off, Massa started a job-counseling support group at his church, bringing in job search experts, specialists in personal finances and those from different industries.

“Art was very creative in his approach, and he shared his blueprint with other parishes to form similar groups,” Luehrs said. “But it also demonstrates how Art always cared for others. For example, one man came to his funeral because, 18 years before, Art had helped direct him to find a job. It was a situation where Art put himself aside to help secure a job for someone else because he believed this man needed the job more.”

For those who worked with him, Massa led by the example of his strong work ethic, deep understanding of communications and advertising, and caring approach for how to publicize a good story. His poker face hid his wit, sense of humor and empathy, but those shone through at opportune moments.

His melodic, baritone voice was one of his most memorable traits. Massa used it to great advantage.

Overall, Massa made a lasting impression wherever he worked and whatever he did. He will be missed by the many who knew and admired him, and who cannot quite believe they will never hear his voice again.

Notable Achievement

William Robb III, M.D., who serves as the Chairman of the Department of Orthopaedic Surgery at NorthShore, was elected Chair of the Board of Specialty Societies (BOS) of the American Academy of Orthopaedic Surgeons.

Dr. Robb’s clinical practice is devoted to adult reconstructive knee surgery with research interests in computer-assisted surgery.

The purpose of the BOS is to represent the interests of its members while promoting unity and collaboration between the specialty societies and the Academy.

“Orthopaedic surgery has 23 important specialty organizations that are critical parts of our future,” Dr. Robb said. “Recognizing this importance, the BOS will expand participation from each of its member organizations to foster unity and advance the entire specialty.”
Members of the Oncology Patient Advisory Board at NorthShore University HealthSystem have had experience with cancer—either as patients or family members.

By Susan J. White

After a 14-year battle with a rare cancer, Margi Hughes’s 37-year-old daughter, Nancy, lost her life to the disease. Nancy Hughes fought with unending grace and strength. She and her family drew support from each other and from the team of physicians, nurses and staff at NorthShore University HealthSystem’s (NorthShore) Kellogg Cancer Care Center.

Margi Hughes spent days, weeks and months at her daughter’s side at NorthShore’s Evanston Hospital. Now four years after her daughter’s death, she returns regularly to the Hospital in an effort to help others in their struggle.

“Anything we can do to improve the lives of cancer patients is important,” Hughes said. A member of the Oncology Patient Advisory Board (OPAB), Hughes joins a group of cancer survivors and patients’ family members for quarterly meetings, and a full slate of activities focused on everything from operational issues, including patient billing questions to outreach projects like Web site improvements.

Hughes and other OPAB members were instrumental in obtaining Evanston’s approval for construction plans currently under way to expand and improve the Kellogg Cancer Care Center facilities on the Evanston Hospital campus. They testified at neighborhood and city meetings.

“They were able to speak convincingly about the need for more space,” said Christine VanDeWege, Senior Director of the Kellogg Cancer Care Center. She formed the OPAB to tap into patients and family members’ insight and use their valuable hands-on experience in tangible ways.

One of the Board’s major projects has been helping develop the new Guided Patient Support (GPS) program, which will be funded by The Auxiliary of NorthShore at Evanston & Glenbrook Hospitals. The innovative GPS program will include patient “Navigators.” The GPS team will be composed of designated employees from the Kellogg Cancer Care Center who will be available to help individual patients sort through a full range of issues, including billing and financial questions.

OPAB Chair Barbara Wick is an ovarian cancer patient who was diagnosed in July 2003 and has been in treatment for most of the time since diagnosis. The opportunity to give back is very important, according to Wick.

“The people at Kellogg are very committed to patients’ well-being. They consistently go out of their way to make things easier and smoother,” Wick said. “The OPAB is now recognized as a viable source of knowledge, information and feelings about the cancer journey.”

For example, the OPAB’s significant recommendations have been taken into consideration in designing the new building and providing an educational binder for new patients during the initial teaching visit with their collaborative nurse. “It’s a credit to the administration and everyone at Kellogg that they care enough to listen,” Wick said.
Against All Odds

Married for 51 years, Paul and Betsy Schmitt have gone through everything together, including surgeries and treatments for sarcoma and breast cancer under the coordinated care of their NorthShore University HealthSystem physicians.

By Sara S. Patterson

Optimism comes naturally to Paul and Betsy Schmitt. Positive thinking, support for one another and excellent care from their NorthShore University HealthSystem (NorthShore) physicians have guided them through their respective cancer treatments. In 2002, the Schmitts were both diagnosed with different cancers.

Betsy Schmitt started undergoing round two for treating metastatic breast cancer after the first diagnosis, surgery and treatments in 2000. For Paul Schmitt, a magnetic resonance imaging (MRI) found an aggressive spindle-cell sarcoma—soft tissue cancer—perilously close to his spine in his lower back.

“Our long years together have helped get us through our respective surgeries, radiation and chemotherapy,” Betsy Schmitt said. They even held hands while undergoing different chemotherapy treatments at NorthShore University HealthSystem’s (NorthShore) Kellogg Cancer Care Center at Highland Park Hospital.

Remarkable Remission

When Betsy Schmitt’s breast cancer returned, she thought she had a terrible cold. Instead, the cancer had spread to her lungs. Her NorthShore oncologist Leo Dragon, M.D., decided to treat her metastatic cancer with a targeted therapy called trastuzumab (Herceptin), plus a hormonal therapy with letrozole (Femara). Fortunately, it worked, and Betsy Schmitt continues treatments every three weeks.

“Her remission is quite remarkable,” said Dr. Dragon, Senior Attending Physician of Medical Oncology at NorthShore. “She has the good fortune of having a disease that’s very sensitive to this unique therapy. Additionally, Betsy always thought something good would come from her treatments.”

“My recovery has changed my outlook on life,” Betsy Schmitt said. “I’m very thankful for the wonderful care I’ve received from Dr. Dragon and other NorthShore physicians.”

Outstanding Physician Teamwork

For Paul Schmitt, the teamwork of his NorthShore physicians has changed the course of his health. David J. Winchester, M.D., NorthShore Chief of Surgical Oncology, removed a sarcoma invading his spinal cord in 2002. Afterward, Paul Schmitt underwent 30 days of radiation followed by rigorous chemotherapy treatments of eight hours each day, for three consecutive days every three weeks for several months.

His multidisciplinary team of oncologists, Bruce Brockstein, M.D., Dr. Winchester and his radiation oncologists, Michael Lacombe, M.D., and Ranjeev Nanda, M.D., had ongoing discussions about his care at the biweekly sarcoma conference. “Collectively, our team approach provides patients with better care,” said Dr. Brockstein, Head of the Division of Oncology and the Kellogg Scanlon Chair of Oncology at NorthShore.

For the next five years, Paul Schmitt was cancer free. But in 2008, his tumor returned. Once again, Dr. Winchester removed as much of the sarcoma as possible without causing him to become a paraplegic.

“It’s been remarkable how quickly Paul has recovered after the second operation,” Dr. Winchester said. “Paul understands the gravity of his situation but seeks out solutions with a positive frame of reference.” Routine radiation for a second time after surgery would have been too dangerous. Instead, Dr. Nanda used a stereostatic radiosurgery system to deliver targeted radiation to the area to prevent recurrence of the sarcoma.

Now Paul Schmitt has resumed exercising with his wife and walking one mile every day. He recognizes NorthShore physicians as being “a real source of encouragement who have also given my wife, Betsy, and me an extension on life.”
A patient consulted four physicians at three Chicago hospitals to get relief from the pain of degenerative lumbar scoliosis without success. At last, a NorthShore University HealthSystem orthopaedic surgeon recommended a surgical reconstruction of her spine that allowed her to be fully functional again.

By Sara S. Patterson
Andi Miller is devoted to fitness and staying healthy. Here she works out at the East Bank Club near her home in Chicago.
Scoliosis: Abnormal Curvature of the Spine

Scoliosis is defined as a spinal curvature of more than 10 degrees. A perfectly aligned spine is 0 degrees. Here are some of the signs and symptoms of scoliosis:

- Uneven shoulders;
- One shoulder blade higher than the other;
- One hip raised higher than the other;
- Leaning to one side; and
- Fatigue.

If a person’s scoliosis curve worsens, the spine will rotate or twist, as well as curve side to side. The ribs on one side of the body will stick out farther than on the other side. Severe scoliosis can cause back pain and difficulty breathing.¹

¹“Scoliosis” by Mayo Clinic staff at http://www.mayoclinic.com/health/scoliosis/DS00194.

Once Andi Miller could barely walk or touch her toes. Now she’s grown 1¼ inches and walked from dawn until dusk every day during a recent trip to Italy. A NorthShore University HealthSystem (NorthShore) orthopaedic surgeon changed her life.

When Miller was a teenager, her doctor diagnosed her with lumbar scoliosis and told her that she would outgrow it. But by the time Miller reached her early 60s, her back pain had become so intense that she had to sit down after taking only three steps. The pain in her left leg was excruciating. Her only comfortable position was lying down.

Medical Odyssey

An orthopedic surgeon at one hospital X-rayed her back and suggested physical therapy. But neither physical therapy nor the epidurals he recommended to relieve her back pain brought relief.

So she tried another orthopaedic surgeon at another medical center, who told Miller that her bones were not dense enough for back surgery. A neurosurgeon wanted to put screws and a rod in Miller’s spine but told her that she could never touch her toes after the surgery. An endocrinologist taught her how to give herself shots to strengthen bones. Miller did that every day for a year, but her pain continued.

“A friend told me that she knew about a fabulous doctor named Dr. Gary Shapiro in the suburbs. I had already tried several doctors in the city. As a last resort, I figured why not try him,” she said.

After evaluating her, NorthShore orthopaedic surgeon Gary Shapiro, M.D., told Miller, “I’ll make you perfect.” While his optimism about her outcome was heartening, Miller had one more question.

“Would you tell your mother to have this surgery?” she asked. “Dr. Shapiro answered, ‘Absolutely.’ So I knew that I could trust him.”

Physician Dream Team

Miller’s two five-hour surgeries, separated by three days, were a team effort by NorthShore general surgeon Erwin “Woody” Denham, M.D., and Dr. Shapiro. The risks involved in one 11-hour surgery were potentially more serious than scheduling the two shorter surgeries, according to Dr. Shapiro.

“Eleven hours for one surgery increases the risk of blindness, results in more blood loss and a lot more time on a ventilator for breathing, which is not healthy. Overall, it is best to avoid such a long surgery. Two separate surgeries are recommended in the interest of safety,” Dr. Shapiro said.

During the first surgery, Dr. Denham made an incision in Miller’s side, which prepared a path for Dr. Shapiro to access her spine. Next, Dr. Shapiro removed five of Miller’s cartilaginous cushions (discs) from the lower, or lumbar, area of her spine.

The X-rays show Andi Miller’s spine before and after the two surgeries. Dr. Gary Shapiro significantly straightened her degenerative lumbar scoliosis.
important than correcting her curve was re-creating her proper balance. When I was done, Andi had a curve of 20 degrees. But her spinal balance was correct again, which allowed her to regain mobility.”

Other advantages from this type of surgery to treat Miller’s degenerative lumbar scoliosis include:
• No period of bed rest; and
• No brace for her back.

From the two surgeries, Miller had a rehabilitation time of six weeks. From the moment she woke up from the anesthesia at NorthShore’s Evanston Hospital, she was up and walking through the Hospital corridors. Within weeks, Miller returned to the treadmill and could touch her toes with slightly bent knees.

“The two surgeries at NorthShore were the best thing that ever happened to me,” Miller said. “Dr. Gary Shapiro was the only physician who was positive about the outcome of my surgery and was confident that he could rebuild my spine.”

and replaced them with structural cages. These oval-shaped implants made of carbon-fiber about 1-inch high help to reconstruct vertebral column defects and correct spinal alignment. They are filled with synthetic bone graft material to allow them to fuse with the patient’s bone.

Much of Miller’s pain came from the pinching of spinal nerves from the curvature of her spine. Dr. Shapiro addressed this by realigning the spine and decompressing the nerves.

During the second surgery 72 hours later, Dr. Shapiro added two rods and 12 screws to readjust the curvature of Miller’s spine. “Andi’s spine had a 60-degree curve from her scoliosis that needed to be adjusted,” Dr. Shapiro said. “Even more

For more information about orthopaedic physicians at NorthShore, call (847) 492-5700, Ext. 1271.
NorthShore University HealthSystem oncology patient has defied all odds and survived several bouts of metastatic breast cancer while continuing to play the French horn for the Chicago Symphony Orchestra.

Alice Clevenger continues to play the French horn for the Chicago Symphony Orchestra as she battles metastatic breast cancer with the expertise of NorthShore physicians and support from her family and friends.
Alice Clevenger never set out to be an inspiration. For six years, she has fought an insidious, aggressive form of metastatic breast cancer that has spread throughout her body. Cancer has invaded her lymph nodes, heart, spleen, lungs, brain and back. She has had two brain surgeries and more chemotherapy treatments than she can count. Throughout Clevenger has maintained an almost unbelievably positive attitude, a joyful spirit and a genuine love for life.

A professional musician, Clevenger felt a little pain in her back lifting her French horn, and the horn player sitting next to her at a Chicago Symphony Orchestra rehearsal noticed a bump on her neck. Clevenger admits she had some tiredness. But as a 42-year-old working mother of two boys, a room mother, choir parent and church volunteer who was also training for a half marathon, being tired was usual.

While her doctors weren’t immediately sure what kind of cancer Clevenger had, they knew it was very serious. NorthShore University HealthSystem (NorthShore)-affiliated primary care physician Patrick Logan, M.D., who has been one of Clevenger’s key allies in this battle, broke the daunting news to Clevenger and her husband, Dale Clevenger. The battery of tests and specialists that followed is a blur to her now.

**Joyful Outlook**

After a series of scans, consultations, biopsies and related labs, Clevenger’s cancer journey began. With Janardan D. Khandekar, M.D., Director of the Kellogg Cancer Care Center at NorthShore, spearheading her care, Clevenger fully embraced the fight for her life.

“I thought this was really bad, but I never envisioned myself dead,” Clevenger said. “I have a lot of joy in my life.”

Calling Dr. Khandekar “the smartest man on earth,” Clevenger credits NorthShore’s entire Kellogg Cancer Care Center team with “enveloping” her in the same kind of unconditional love and care her parents have always shown her. Gratitude does not begin to describe how Clevenger feels about Dr. Khandekar, Dr. Logan and so many caregivers.

“Every single nurse at NorthShore: they are gifts; they are angels,” she said. Gratitude is in fact a familiar theme for Clevenger who continually expresses thanks for her friends and family, her church, her fellow musicians, her neighbors and her medical team.

“I feel like the luckiest person on the planet. I never felt like cancer was God’s fault. I look at all the things he’s set up to save me,” Clevenger said. Deflecting praise for her persistently positive perspective, Clevenger insists it is not what she has done, but what her many friends and family members have done that is special. Among those she considers special are the members of her breast cancer support group, the Silver Lining. “They are awesome,” Clevenger said, citing their motto: “Cancer is like having a cloud following you around, and our job as smart women is to find the silver lining.”

“She has a tremendous attitude. It’s amazing that she’s been able to go through all of these treatments and keep working. Nothing can slow her down,” said Dr. Khandekar, Louise W. Coon Chair of Medicine. Encouraging her to return to music as soon as she could, Dr. Khandekar arranged for Clevenger to undergo chemotherapy around the country to accommodate her touring.

“Alice wants to live her life, and the lesson here is never give up. She really is an inspiration for everybody,” Dr. Khandekar said.

“People like Alice teach us all how to fight the good fight. She’s tenacious, she’s hopeful, she has the support of family and friends, and she’s a person of faith,” Dr. Logan said.

Clevenger’s original goal was to see her two sons graduate from high school. Now with her younger son heading off to college, she is setting some new goals. “I want grand babies,” she said. Dr. Logan and Dr. Khandekar share Clevenger’s optimism and believe her prognosis is good.

To schedule a screening mammogram at the Patricia G. Nolan Center for Breast Health, call (847) 492-5700, Ext. 1272.
Second Chance

NorthShore University HealthSystem (NorthShore) neuroradiologist and neurosurgeon see an MRI in real time of a young woman having a massive stroke and come to her rescue.

By Susan J. White

Linda Cheong believes she’s lucky to be alive. But her survival is due to more than luck. Cheong had a top neurosurgeon and a team of medical professionals who seamlessly coalesced to save her life a week after she gave birth to twins.

A seemingly healthy 39-year-old mom, Cheong delivered twins, Matthew and Melody, after an uneventful pregnancy and brought them home to join their three-year-old sister, Noelle. The day she was discharged, Cheong started having little headaches, which she said didn’t concern her very much. A few days later they were far more severe, and her pain was becoming debilitating. At the advice of her obstetrician, Cheong went to NorthShore’s Highland Park Hospital where an MRI revealed the source of her pain.

Neuroradiologist Anne Doppenberg, M.D., recognized the severity of the problem and immediately called Issam A. Awad, M.D., Director of Neurovascular Surgery at NorthShore. He was instantly able to view the MRI on his computer at Evanston Hospital.

The MRI showed a large lesion indicating bleeding in the brain due to a mass of abnormal blood vessels. The mass effect was hyper-acute, meaning that the bleeding was happening as the MRI was taken—a life-threatening emergency unfolding at that minute.

Cheong had an Arteriovenous Malformation (AVM), an abnormal network of blood vessels in her brain that she had likely been living with her whole life, and was probably exacerbated by the physical changes and stresses of pregnancy. She appeared to be relatively stable, conscious and responsive and was to be transferred to NorthShore’s Evanston Hospital for surgery. But minutes later Cheong lost consciousness, and the situation became even more dire.

Dr. Doppenberg heard the code called in the Intensive Care Unit (ICU) and quickly called Dr. Awad to inform him of the turn for the worse. Operating at Highland Park Hospital offered the best chance to save Cheong’s life. So Dr. Awad grabbed his chief resident and started driving very quickly, phoning in instructions for nurses and anesthesiologists along the way.

“I thought we probably had a 50-50 chance of saving her. There was so much swelling and damage already,” Dr. Awad said. Dr. Doppenberg recalled her fears, thinking the likelihood of Cheong surviving and recovering function to be able to take care of her children was very small.

“To our great surprise, she did phenomenally,” Dr. Awad said.

Amazingly enough, Cheong went home three weeks after surgery and began caring for her new babies. “I never thought at 39 I would be a candidate for brain surgery,” Cheong said. “It still seems so unreal, but I’m left with the sense of being so grateful. I’ve been given another chance at life, and I know I am very lucky to be here. I’m considering how can I make a difference in this life and not squander this gift.”

For more information about neurologists at NorthShore, call (847) 492-5700, Ext. 1273.
GASTROENTEROLOGY

On the Road Again

Buffalo Grove businessman learns firsthand that excellent care and compassion go hand in hand at NorthShore University HealthSystem.

By Kim Kurey

How often does your hospital stay mirror your own values? Barron Perl discovered the same commitment to service, teamwork and loyalty he practices during his hospital stay at NorthShore University HealthSystem’s (NorthShore) Glenbrook Hospital.

The President of his family-run specialty food business Deli Direct, Inc. based in Buffalo Grove, Perl has difficulty staying in one place for more than one day. He drives a ten-wheeler truck five days a week to visit his customers in Michigan, Ohio and Indiana, so he can personally serve them. After working all day on the road, Perl often sleeps in his truck to stay on schedule.

Joann Perl recalls that her husband was rarely sick. But after years of ulcerative colitis, he had developed a large polyp on his colon. He was referred to colon and rectal surgery specialist Joseph Muldoon, M.D., at NorthShore.

Barron Perl’s first hospital stay was for colon surgery. His medical team determined that the colon tissue looked suspicious and recommended Dr. Muldoon perform the surgery.

“We found that Barron was suffering from ulcerative colitis and had developed pre-cancerous changes in his colon,” Dr. Muldoon said. “In these situations, it is necessary to remove the colon and rectum to prevent cancer from developing. During his surgery, we needed to remove his entire colon and rectum. We then created a new rectum from his small intestine.”

When surgical complications arose after surgery, Perl’s hospital stay spanned 19 days. After recovering from a blood clot and pneumonia and being released, he was admitted one month later to treat a kidney stone. While none of Perl’s complications were related, “Barron certainly saw all sides of the hospital at work,” Dr. Muldoon said.

But along with these ups and downs came the steadfast support and service from all members of his physician team and the hospital staff. “From one specialist to the next, with every issue that came up, we found that everyone kept in touch with each other,” Joann Perl said. “Dr. Muldoon is a great surgeon with excellent bedside manner. His personal touch—calling us the night before the surgery to see how Barron was feeling—was very comforting.”

According to Dr. Muldoon, a good doctor-patient relationship hinges on two things: communication and trust. “There is no doubt that good relationships lead to better care,” he said.

Additionally, the nursing staff was always available to assist with anything the family needed. “When our family went through the stress involved with major surgery, we could always rely on the NorthShore physicians and staff to be so supportive and helpful in every circumstance,” Joann Perl said. “When Barron was released, I was provided with enough knowledge to take care of many of his needs.”

Perl is now back on the road, five days a week—as busy as ever. “Most hospital stays are not at the top of anyone’s list,” Joann Perl said. “But if you have to be in one, NorthShore’s Hospitals are the best.”
The Holy Grail

NorthShore University HealthSystem physicians are undertaking an innovative research study using light-scattering technology to develop an accurate and minimally invasive method for early detection of lung cancer.

By Susan J. White

Lung cancer is the leading cause of cancer deaths in the United States. While it is highly curable with surgical resection if detected at an early stage, there are currently no tests that can be widely recommended for population screening to allow early detection. By the time most lung cancer patients develop symptoms, the disease is already advanced. The five-year survival rate for lung cancer patients is only 15 percent.

NorthShore University HealthSystem’s (NorthShore) Hemant Roy, M.D., and Vadim Backman, Ph.D., from the McCormick School of Engineering at Northwestern University are pursuing innovative research aimed at using pioneering light-scattering technology to develop an accurate and minimally invasive screening for lung cancer. Dr. Roy and Dr. Backman have already published extensively on their work using advances in biomedical—optics related to detecting cancers of the colon and pancreas.

Now, they are applying these advances to studies of smokers since smoking is the major risk factor related to 90 percent of lung cancer patients. The basic idea is that smoking not only affects the lungs but the entire airway tract. So the research team began evaluating cells from the lining of the cheeks of smokers with and those without lung cancer. An early study of 150 patients proved promising, according to Dr. Roy, with about 80- to 85-percent accuracy in detecting the presence of lung cancer by using the optical scan on cheek cells.

Dr. Roy’s clinical team uses the light-scattering technologies developed in Dr. Backman’s laboratory to explore cell architecture to detect subtle changes that signal development of cancer. NorthShore’s pulmonary oncologist team members—Thomas A. Hensing, M.D., Daniel Ray, M.D., and John Alexander, M.D.—are key players in this research effort and will continue to recruit patients for the critical study. This multidisciplinary cancer prevention group represents a highly successful means of translating these fundamental technological advances into clinical practice.

Once data collection and analysis have been completed on this initial study, Dr. Roy plans to move to the next phase with a three- to five-year prospective study of smokers. The noninvasive, relatively inexpensive procedure ultimately serves as a pre-screening method for those at increased risk of developing lung cancer.

“If successful, this may provide a minimally invasive test that may be able to reduce the toll of lung cancer,” Dr. Roy said.

Conducting large multiyear clinical trials demands additional resources. Dr. Roy is involved in other high-profile studies and his research is backed by the National Cancer Institute and other prestigious funders, but there is currently no funding earmarked for this project. To learn more about how you can support exciting lung cancer research at NorthShore, call Jeff Pickering, Senior Director of Philanthropy, NorthShore Foundation, at (847) 492-5700, Ext. 1274.
COMMUNITY RELATIONS

Touching Lives

Community relations are a benchmark of NorthShore University HealthSystem’s overall success and reputation in the communities it serves. Community relations uphold NorthShore’s mission “to preserve and improve human life.”

By Patricia Bates McGhee

At NorthShore University HealthSystem (NorthShore), caring for our communities means more than providing our patients with quality healthcare through our four Hospitals,” said Mark Schroeder, Community Relations Director at NorthShore. “It also means extending our efforts into the communities we are so privileged to serve by touching the lives of individuals and supporting the work of organizations.”

During fiscal year 2008, NorthShore’s initiatives and partnerships provided more than $172 million in total community benefits (up 14 percent from the previous fiscal year). Over the last five years, the number of charity care unique patients increased by 3,451 (or 98.15 percent).

“Through our commitment to research and our collaboration with the University of Chicago—as part of NorthShore’s new teaching affiliation—research increased 24 percent during fiscal year 2008,” Schroeder said. “Plus, NorthShore’s long-time emphasis on education produced a 34-percent increase in physician teaching stipends and additional expenses, and reporting of all student internship programs continued to improve.”

NorthShore’s community relations initiatives are broad and encompass three primary areas—caring for the underserved, educating others and sharing resources. Here are examples of each area.

Caring for the Underserved

• NorthShore Emergency Departments cared for 95,909 patients.
• NorthShore assisted nearly 4,000 callers through its 24-hour Mental Health Access Center.
• Evanston Hospital’s Outpatient Department cared for 3,020 adults and 2,101 children who lacked insurance.
• The Eye and Vision Center treated 782 patients who received financial assistance.
• The Dental Center at Evanston Hospital had 2,153 encounters with patients who received 45% to 75-percent discounts on their services.
• The Prescription Drug Assistance Program filled more than 9,200 prescriptions at a cost of $490,000 for patients of the Evanston Hospital Outpatient Department—a nearly 125-percent increase since 2006.
• The Evanston Township High School Health Center (ETHS) had 2,680 patient visits, with 880 students receiving treatment.

Educating Others

• NorthShore presented 414 health education classes to 8,415 participants.
• NorthShore professionals conducted 199 medical screenings for 5,448 individuals.
• The NorthShore Speakers’ Bureau made 97 presentations to 3,170 attendees.

Sharing Resources

• NorthShore provided $1,109,374 in contributions to 87 charitable organizations.
• The Kellogg Cancer Care Center pledged $20,000 toward support of the Cancer Wellness Center.
• Through a partnership with the Lake County Health Department and Community Health Center, NorthShore is providing $500,000 in direct funding and $500,000 in specialty care for underserved diabetes patients in Lake County. The initiative called “Be Well-Lake County” provides these diabetes patients with multidisciplinary care and diabetes education.

“These continuing strides in community relations reflect NorthShore’s success in promoting wellness and providing compassionate care to all of our communities,” Schroeder said.
Music and Medicine
Philanthropic support helps NorthShore University HealthSystem caregivers use music in the healing process.

By Marcia Frellick

Music therapy’s widespread power starts with the simple premise. Everyone has a connection to music. Hearing or playing it at any age inspires a feeling, a thought or a reaction. A board-certified music therapist can use that connection to help a patient heal.

For Ken Oseda, 27, who is being treated for cancer at NorthShore University HealthSystem (NorthShore) after having a brain tumor removed, music is the distraction he needs from what is happening to his body. It helps him express what is hard to talk about. In beating out rhythms on hand drums or strumming a guitar, he has found a productive way to spend what can be weeks at a time in the Hospital.

“Sometimes you just don’t want to talk about anything,” Oseda said. “You want to be doing something that doesn’t involve much interaction. Sometimes I’d rather do something positive with the music.”

“In a hospital setting, you don’t often have control over when you can get a test. In music therapy, it’s all about choice and control.”

Finding a connection with patients like Oseda is the goal of the Music Therapy Program at NorthShore, which reaches more than 400 patients monthly. The program has developed from one therapist leading a pilot venture on an oncology unit to a four-therapist team that works with patients at all four NorthShore Hospitals.

The program depends on philanthropic support to sustain its growth and has received a variety of gifts from individuals, foundations and businesses. In recent years, an anonymous donor gave $1 million to help the program reach more patients over 10 years, including the addition of an intern to the program.

The Rev. Nancy Waite has witnessed the difference music can make throughout a patient’s care. “I’ve been at the bedside as a chaplain while a music therapist is with a patient and family members as a patient is dying,” said The Rev. Waite, Director, Pastoral Care and Healing Arts at NorthShore. “I have seen the ways in which music can enhance a peaceful dying process.”

Music therapy’s effects are well-documented in areas such as pain and anxiety management, gait training, cognitive stimulation and motor movement, according to Heather Hodorowski, MT-BC, Music Therapy Coordinator at NorthShore. Referrals to the program can come from a physician or other healthcare professionals.

Patients do not need musical talent to benefit from music therapy, according to Hodorowski. Just choosing particular lyrics can reveal something about how a patient is feeling, even if they can’t put it into words.

“In a hospital setting, you don’t often have control over when you can get a test,” Hodorowski said. “In music therapy, it’s all about choice and control. Music is a powerful medium neurologically, as well as emotionally.”

To learn more about philanthropic opportunities at NorthShore, call Jeff Pickering, Senior Director of Philanthropy, NorthShore Foundation, at (847) 492-5700, Ext. 1275.

American Craft Exposition Celebrates 25 Years
The American Craft Exposition (ACE) presented by The Auxiliary of NorthShore University HealthSystem (NorthShore) at Evanston & Glenbrook Hospitals celebrates its 25th year of promoting fine craft and fund-raising for NorthShore. This year’s Benefit Preview Party and Collectors’ Hour takes place on Thursday, Aug. 27, at the Henry Crown Sports Pavilion at Northwestern University. Proceeds benefit an Endowed Chair in Cancer Research to honor Stephen Sener, M.D., Vice Chairman of NorthShore’s Department of Surgery, and a Breast Cancer Research Fellowship. The general exposition runs from Friday, Aug. 28, through Sunday, Aug. 30. For more information, call The Auxiliary at (847) 492-5700, Ext. 1276 or visit www.americancraftexpo.org.
Changing Your Lifestyle to Be Healthy and Fit When You’re Middle Aged

By Patricia Bates McGhee

Middle age is the period of life from about 45 years to about 64 years, according to Merriam Webster’s Dictionary. For those in their mid-forties to mid-sixties, the range may seem too young. But, remember, they’re just numbers.

Regardless of how long we’ve lived, middle age brings with it the opportunities to achieve a healthy lifestyle and to improve some not-so-healthy habits, according to NorthShore University HealthSystem (North Shore)-Affiliated Primary Care Internist Danny Lazar, M.D.

Question: What special nutrition and exercise tips do you recommend for middle-aged patients?

Answer: No “special” tips apply exclusively to middle age. Instead, it becomes more important for us to pay attention to the healthy lifestyle habits that benefit us at any age—like eating healthy foods and getting enough exercise—and avoiding sudden changes in diet and activity. The “everything in moderation” adage certainly applies in middle age.

Q: What is the best way to achieve or maintain a healthy weight in middle age?

A: The “age”-old formula is the same as in any other life stage. If the calories we burn—including those burned during physical activity—are less than the calories we eat or drink, we gain weight. Plus, as we age, our metabolism tends to slow down. That means to lose weight we have to eat fewer and burn more calories than we did in our youth. People—especially middle-agers—vary greatly in how much physical activity they need to manage their weight.

To get the most nutrition out of the calories you eat, the U.S. Department of Health and Human Services (HHS) recommends a regimen that emphasizes fruits, vegetables, whole grains and fat-free or low-fat milk products; includes lean meats, poultry, fish, dry beans (legumes), eggs and nuts; and is low in saturated fat, trans fat, cholesterol, salt (sodium) and added sugar.

Q: Are some types of exercise more appropriate in middle age?

A: Most middle-aged patients respond best to low-impact, muscle-strengthening, balance-enhancing and flexibility exercises. Generally, the older and more frail we get, the more important it is to perform these exercises. I advise patients to decrease exercise intensity in middle age. If you lift weights, lift fewer pounds; if you run marathons, consider walking, bicycling or swimming.

For adults up to 64 years of age, HHS recommends two hours and 30 minutes a week of moderate-intensity—or one hour and 15 minutes a week of vigorous-intensity—aerobic physical activity (or equivalent combination of both) in at least 10-minute episodes, spread throughout the week.

Q: What symptoms during exercise need immediate attention?

A: Chest pain during exercise or a sudden decrease in the amount of exercise you can do requires immediate medical attention. For example, if you always jog three miles a day and one day you’re exhausted at just one mile, call your physician right away.

For a listing of NorthShore community events, visit northshore.org/events.
NorthShore University HealthSystem

A Teaching Affiliate of the University of Chicago Pritzker School of Medicine

OUR HOSPITALS
Evanston
Glenbrook
Highland Park
Skokie

Over 2,000 Doctors
	northshore.org

© 2009 NorthShore University HealthSystem