#### Winter 2023

#### MEDSTAR GEORGETOWN MedStar Health University hospital

# MedStarGeorgetownMD

### Treating rectal cancer: A multidisciplinary

approach. By Ronna Borenstein-Levy

If a hospital can be a best friend for life, then MedStar Georgetown University Hospital has earned that distinction for Nancy Fox, 67, of Ashburn, Virginia. When Nancy was 4, the hospital restored her mother's health following a diagnosis of thyroid cancer. Nancy also credits MedStar Georgetown with saving her life and that of her newborn daughter more than 30 years ago, as well as caring for her daughters as they faced numerous health challenges over the years.

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Music teacher Nancy Fox is singing the praises of her medical team at MedStar Georgetown for her recovery from rectal cancer. Photo by Hilary Schwab



Julia Bowie is happy to be moving without pain and believes what she learned from her exceptional MedStar Georgetown nursing team has made her a better nurse. Photo by Hilary Schwab

# Fast-acting team prevents massive spinal tumor from derailing a young nurse's life. By Karen Hansen

When Julia Bowie completed her waitress shift on Saturday, Sept. 4, 2021, she looked forward to a low-key weekend. It turned out to be anything but, ending with her being transported to MedStar Georgetown University Hospital in a medevac helicopter.

It started innocently enough. After her shift, Julia noticed a tingling sensation in her feet but chalked it up to the new shoes she was breaking in. Back home in Hughesville, Maryland, Julia awoke the next morning with numbness in her extremities. As a nursing student, Julia knew this was not normal and went to the local emergency room.

After doing a full-body CT scan, the staff consulted with Faheem Sandhu, MD, PhD, the director of Spine Surgery at MedStar Georgetown. Julia was informed that she had a very large mass between her brain and spine. "No one ever expects to hear that," says Julia, "let alone at 21." According to Dr. Sandhu, "Everyone

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- 3 What you need to know about RSV.
- 4 Innovative 3D ankle implant helps Susan walk away with hope.
- 5 Support for children's mental wellbeing expands with a generous \$3 million philanthropic gift from the J. Willard and Alice S. Marriott Foundation.

# A liver transplant brings a new lease on life and a surprising new friendship. By Susan Walker

Gary Seiden, DDS, practiced dentistry in the Baltimore area and Washington, D.C., until he recently retired. Carlos Zigel, MD, chair emeritus of the Department of Medicine at MedStar Harbor Hospital, served the South Baltimore community as an internal medicine and palliative medicine specialist until he also retired recently.

"The care I received at MedStar Georgetown was so awesome that I've become an ardent advocate for the program."

-Gary Seiden, DDS

The two men never crossed paths during their careers, but they both faced the same serious health problem-hepatocellular carcinoma, a type of liver cancer. When their hepatologists recommended a liver transplant as the best treatment for their condition, they both chose MedStar Georgetown Transplant Institute for their surgery.

Although Gary was listed for transplant with both the Transplant Institute and a Baltimore hospital, his experience with the two programs was very different. "At the Baltimore hospital, I felt like I was just one of hundreds of patients the transplant team was dealing with. When I went to MedStar Georgetown, it was another universe," he says. "As a healthcare provider, I know how you talk to your patients makes a tremendous difference. The Transplant Institute team was kind, supportive, and patiently answered all my questions."

Carlos had a similarly positive experience after listing for transplant with both the Transplant Institute and a different Baltimore hospital. "The transplant team at MedStar Georgetown truly has their act together," he explains. "They're like nothing I've ever seen. They were extremely reassuring and the whole process was seamless."

## A life-changing connection made through a personal trainer.

Gary underwent transplant surgery first on July 4, 2020. The surgery was successful, and he was discharged from the hospital in just four days. Eleven days later, he was well enough to go to his summer home in Rehoboth, Delaware and was able to ride his bike about a month after surgery.

Meanwhile, Carlos' transplant team recommended that he lose some weight and increase his fitness level before his transplant to improve his outcome and recovery. He began twice-weekly training sessions with a personal trainer, and he's very glad he did. Not only did the trainer help Carlos get into his best shape in years, but he also connected him with a friend who had recently had a liver transplant and said he would be happy to share his experience with Carlos. That friend was Gary.

"Even though we haven't met in person because of the pandemic, Gary and I have developed a real relationship," says Carlos. "He became a guide for me and told me that the anticipation of the transplant was ten times worse than his actual experience with the transplant. It was extremely helpful to hear from another patient what to expect. We even talked while I was at the hospital getting ready for my transplant, and he gave me that extra boost of calm and confidence."

Carlos' liver transplant, performed in February 2021, was also a success and, like Gary, he was back home just four days after surgery. He's been going for regular walks with his wife and is looking forward to getting back to his workouts and traveling with his wife.

"The care I received at MedStar Georgetown was so awesome that I've become an ardent advocate for the program," says Gary. "I plan to volunteer to help support the transplant program and help other patients like Carlos and me."

Adds Dr. Satoskar, medical director of the Liver Transplant program, "One of the benefits of our program is the true partnership between the multidisciplinary care team and the patient. Like many patients facing liver transplantation, Gary was apprehensive at first. Our model of care put him at ease by answering his questions and allowed us to proceed together to achieve the best possible long-term outcome. We are grateful that he then paid it forward and helped Carlos and continues to share his experience with others."



Gary Seiden, DDS, and Carlos Zigel, MD, connect over their shared positive experience as liver transplant recipients. Photo by Silver Ridge Productions

Visit **MedStarHealth.org/LiverTransplant** to learn more about our transplant program. To schedule an appointment with one of our specialists, call **202-444-3700.** 

#### What you need to know about RSV.

By Kerri Lyn Layman, Chief, Emergency Medicine, MedStar Georgetown University Hospital

respiratory syncytial virus.

Since July of 2022, record

numbers of

children (and

some adults) are

blocks airways in

the respiratory

falling ill, some seriously, to this

infection that

Be it at the playground, in social media, or on the news, you've probably heard about RSV or



Kerri Layman, MD

tract. Today, it is the single most common cause of hospitalization in infants, and the leading cause of infant mortality worldwide. A surge in cases is overwhelming many pediatric hospitals and emergency rooms.

#### What are the symptoms?

RSV is a seasonal illness that has been around for a long time. Nearly all children contract it before age 2, normally with mild symptoms like:

- Coughing
- Sneezing
- Loss of appetiteIrritability
- Runny nose
- Fever

#### Who is at risk?

RSV can be particularly dangerous in premature infants, babies under six months old, children with chronic lung diseases, and those with congenital heart diseases. Also at risk are adults over age 65 and anyone with a weakened immune system. The struggle to breathe can interfere with eating and drinking, leading to malnourishment and dehydration. Left untreated, RSV can cause pneumonia or bronchiolitis (inflammation of the small airways in the lung).

#### Why the upsurge?

Three years of masking and social distancing during COVID-19 caused a drop in RSV exposure and, thus, fewer cases. But it also left our



Nearly all children contract a seasonal illness called respiratory syncytial virus before age 2, normally with mild symptoms.

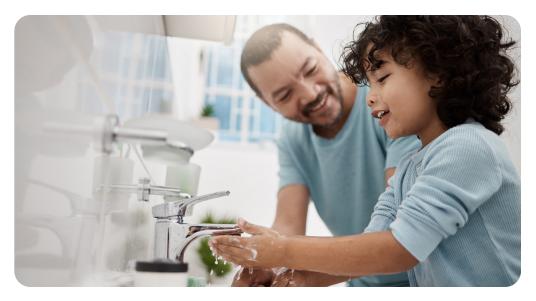
immune systems less prepared to fight. Think of it as a boomerang effect: with schools, daycare facilities, businesses, and social interactions now back to "normal," infections are on the rise. RSV is highly contagious, spreading in droplets from a cough or sneeze. The virus can survive for hours on hard surfaces such as a doorknob or crib rail. It can also survive on soft tissue, like that downy baby's cheek you love to nuzzle and kiss.

#### What you can do.

The moment you notice trouble breathing, call your primary care provider. You can manage pain and fever with over-the-counter fever reducers as directed by your primary care physician. Remember, never give aspirin to children. Drink lots of fluids to prevent dehydration; remove mucus with a nasal syringe; and use a cool-mist humidifier to keep the air moist. Do not hesitate to visit the emergency room or to call 911 if you notice these signs:

- Faster breathing than usual
- Flaring nostrils
- Puffing and contraction of the belly
- Lips, skin, or tongue turning blue

As of now, there is no RSV vaccine, though researchers are close to developing one. In the meantime, the best things we can all do are preventative: wash hands frequently; wipe down surfaces with disinfectant; avoid contact with people who are sick; don't share toys, bottles, or utensils; keep up with all vaccinations. Most importantly, don't panic. Most cases resolve on their own, and soon you will once again be nuzzling that soft, downy cheek.



Washing hands can keep you healthy and prevent the spread of respiratory infections.

### Innovative 3D ankle implant helps Susan walk away with hope. By Emily Marrs

After a car accident in 2007 left her with severe lower-extremity injuries, Susan Bonhag thought she'd never walk without the assistance of equipment.

As a result of the accident, Susan, a mother of three young children, had extensive damage to both ankles that required complicated reconstruction surgeries and tireless commitment to rehabilitation. Accustomed to living an active lifestyle, she wasn't ready to accept her new circumstances, but Susan thought she was out of options.

"Nobody was willing to listen," she recalls. Her injuries were considerable, and doctors offered few solutions. Many shook their heads at her goal of someday walking freely.

But all of that changed when, by chance, Susan's dermatologist recommended she make an appointment with Paul Cooper, MD, division chief of the Foot and Ankle Center at MedStar Georgetown University Hospital.



Dr. Cooper was able to create a custom titanium implant to address Susan Bonhag's unique ankle injury. doctor that listened to anything I had to say," she says. "He was the only one who didn't look at my case as, 'This is the end,' and I'll never forget that."

"He was the first

le Specializing in salvage and revision surgery, Dr. Cooper assessed Susan's condition and worked with her

to stabilize her injuries and personalize a treatment plan. "We discussed, realistically, what our options were," says Dr. Cooper. "I said, 'Susan, we're going to find a solution.' "



Susan Bonhag is grateful that Dr. Cooper took the time to really listen to her and help her find a way to walk on her own again.

After two traditional implant surgeries on her right ankle, she was still unable to walk with full functionality and continued to experience pain. But Dr. Cooper was determined to help her walk independently again.

Engaged in the latest research, the Foot and Ankle Center at MedStar Georgetown has a long history of improving patients' mobility through innovative technologies and treatments. Tapping into these resources, Dr. Cooper turned to a medical technique that was gaining traction in orthopaedics.

"Along came this new technology that uses titanium dust, and similar to an ink-jet printer, prints out a threedimensional object," says Dr. Cooper. "And, naturally, this method migrated to orthopaedic implants."

Susan's injuries made her an ideal candidate for the innovative procedure, and Dr. Cooper suggested they move forward with the process. "We can now make a custom implant to address any individual's unique deficits," says Dr. Cooper. "And that's what we went ahead and did for Susan."

To begin, Susan had a CT scan of her ankle, and Dr. Cooper took measurements for a customized implant. Next, the implant was created on a 3D printer and surgically inserted in her ankle during a one-hour procedure.

"These patient-specific custom implants are really the future of medicine," Dr. Cooper says. "We can have the whole process done-start to finish-in a month, which is revolutionary."

The subsequent rehabilitation was intensive. She had to wear a cast and attend physical therapy for four months. But she says it was well worth it.

"He was the first doctor that listened to anything I had to say. He was the only one who didn't look at my case as, 'This is the end,' and I'll never forget that."

-Susan Bonhag

"One year after, I went on two European river trips," she says. "I did the tours, I walked–I was thrilled."

It's been four years since Susan's implant surgery, and she credits Dr. Cooper and the team for her recovery. She expresses her gratitude for the care she received and encourages those in similar situations to take advantage of all that MedStar Georgetown offers to patients.

"They're going to take care of you," Susan says.

The Foot and Ankle Center at MedStar Georgetown University Hospital is part of the MedStar Orthopaedic Institute, with more than 45 orthopaedic surgeons at 15 locations throughout Washington, D.C.; Maryland; and Virginia. Visit **MedStarHealth.org/MGUHOrtho**, or call **202-444-8766** to make an appointment.

# Support for children's mental wellbeing expands with a generous \$3 million philanthropic gift from the J. Willard and Alice S. Marriott Foundation. By Susan Walker

Today's media paints a distressing picture of the nation's mental health crisis for children and teens, but this crisis isn't news to Matthew Biel, MD, professor and division chief of Child and Adolescent Psychiatry at MedStar Georgetown University Hospital, or Mieka Wick, executive director at the J. Willard and Alice S. Marriott Foundation. They've both been on the front line of efforts to support child and adolescent mental wellness for years.

Dr. Biel and his division's work had been supported by philanthropic investments from the Foundation since 2015, helping to bring mental health resources into schools and other community sites in Washington, D.C. Recently the Foundation expanded their support of these efforts, pledging a \$3 million philanthropic gift to establish the Marriott Endowed Chair in Child, Adolescent, and Family Mental Health. This is the first endowed chair in the Department of Psychiatry at MedStar Georgetown.

The endowed chair will set the stage for MedStar Georgetown to expand its role as a leading provider of mental health services for children and adolescents in the region, with a focus on holistic care that supports the entire family, as well as a strong emphasis on taking steps to reduce disparities in access to mental health care for children and families.

The endowed chair reflects a paradigm shift championed by Dr. Biel in approaching child and adolescent mental wellness. "When a child with a mental health issue sees a doctor or a counselor at school, the information in their record is solely focused on the child. But we know from research that the whole family's health, stressors, and challenges are critically important. This family-focused approach provides the best and most effective care, not just to the kids, but to the entire family," Dr. Biel explains. "We're exceptionally grateful to have the Foundation and Mieka and her team as philanthropic partners. Their trust in us is vital to the success of all our work."

"Philanthropy plays a critical role in the launch, acceleration, and illumination of bold solutions to some of society's most pressing problems," explains Wick. "Dr. Biel and his team's work certainly



Dr. Biel (right) with Phyllis Wilson and her son Jayden, provides a family-focused approach to deliver the most effective care for child and adolescent mental wellness. Photo by Silver Ridge Productions

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falls into that category and is vital to our region and the nation."

"For years, our division has been focusing on bridging the gap in communities in the Washington, D.C., region who are experiencing significant disparities in health outcomes, particularly mental health outcomes, which are related to solvable problems like access to care, affordability, appropriateness of available interventions, and stigma about mental health," says Dr. Biel. "All these factors impact the likelihood of kids and families getting access to timely mental health care. We've been working to place clinicians and mental health educators where children spend time-Head Start programs, schools, pediatric offices, family care clinics, and community organizations. Through these channels, we provide coaching and training for staff and multigenerational support for families."

The division's approach covers the entire life cycle of the programs. Dr. Biel, his team, and their partners identify the need for resources, create programs, test them, implement them, and engage and empower the community to own these programs so they become self-sustaining.

"As a funder and partner, it is critical that we ask for input and listen to those in the community about what they need as opposed to assuming we have the answer," Wick says. "Dr. Biel and his colleagues have always put community voice at the center of their work.

"Supporting the Marriott Endowed Chair in Child, Adolescent, and Family Mental Health was an easy yes for us, " adds Wick. "It is a privilege to support this work and continue to strengthen our trusted relationship with Dr. Biel. This is an opportunity to build on the success of work that the Foundation has long supported, to scale programs that are serving the community, and to provide support to ensure their longevity and sustainability."

### Treating rectal cancer: A multidisciplinary approach. continued from page 1



Nancy Fox is grateful for the whole-person approach of her medical team at MedStar Georgetown University Hospital. Photo by Hilary Schwab

So, it was not surprising that Nancy immediately turned to MedStar Georgetown when she began to experience troubling symptoms, including severe constipation, in the fall of 2020.

Gastroenterologist Thomas Loughney, MD, performed a colonoscopy that revealed a significant mass blocking her rectum. Since he is part of a multidisciplinary team at MedStar Georgetown, Dr. Loughney immediately referred Nancy to his associate team members, including a medical oncologist, radiation oncologist, and surgeon.

Nancy's MRI results revealed that the tumor had not metastasized to other organs. Still, she says she was in despair until she met with her medical oncologist, Benjamin Weinberg, MD. "His demeanor was optimistic and decisive as he outlined each step we would take to learn more about my tumor and create a treatment plan. That gave me great hope."

Dr. Weinberg determined that Nancy would benefit from a combination of chemotherapy, radiation therapy, and surgery. Nancy subsequently met with the other physicians on her team. "I found it comforting to meet each of them and learn how they would work together," she notes.

"Having all my doctors work together as one team made a big difference for me emotionally and physically."

-Nancy Fox

"For most people with a fairly localized rectal tumor, the recommended process is to do the chemotherapy and radiation therapy before surgery," explains Dr. Weinberg, "and that's what we did for Nancy." She received both oral and IV chemotherapy as well as five and a half weeks of radiation to her pelvis five days a week.

"There are several approaches for treating rectal cancer with radiation therapy," says Keith Unger, MD, director of the Gastrointestinal Cancer Service

Visit **MedStarHealth.org/RectalCancer** to learn more. To schedule an appointment with one of our specialists, call **202-444-2223**.

for the Department of Radiation Medicine at MedStar Georgetown. "No one approach is right, and our goal is always to customize a plan that meets each patient's needs."

By the time Nancy had surgery, the chemotherapy and radiation therapy had shrunk the tumor significantly. "Although most patients do go on to surgery, in select cases, the chemotherapy and radiation are so successful that the tumor completely melts away and we can avoid surgery," explains Zhifei Sun, MD, a colon and rectal surgeon at MedStar Georgetown.

"Our goal is always to customize a plan that meets each patient's needs."

-Keith Unger, MD

Using small incisions, the surgical team performed a minimally invasive rectal resection, removing the diseased portion of Nancy's rectum along with some lymph nodes, and reconnected the healthy colon to the healthy portion of her rectum. No tumor cells were identifiable after the surgery.

While Nancy's prognosis is very good, her doctors will continue surveillance, including periodic exams and scans, for the next five years.

"Having all my doctors work together as one team made a big difference for me emotionally and physically," says Nancy. "All medical care should be managed that way, and, for me, it's become the gold standard that I will expect from all my healthcare interactions in the future."



nurse's life. continued from page 1

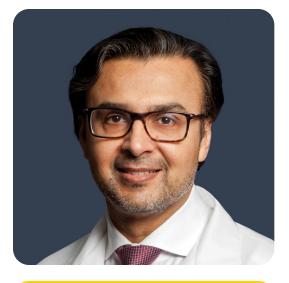
knew this was very serious and that it needed to be treated at a tertiary hospital." So, within the hour, Julia was airborne.

"[My nursing team] would personally call and update my family to keep everyone included."

–Julia Bowie

The grade and class of Julia's tumor were unclear. But its sheer size (between 6 and 7 centimeters) was cause for concern, along with the fact that it had created a syrinx (a fluid collection inside the spinal cord) in the thoracic, upper cervical, and brain stem regions. Though Dr. Sandhu specializes in minimally invasive neurosurgery, the extent of Julia's tumor precluded this.

"The procedures we performed were a laminectomy and intradural removal of the spinal cord tumor," says Dr. Sandhu. This entailed first removing the bone in order to access Julia's spine. Then, using a microscope, Dr. Sandhu painstakingly dissected normal spinal cord from tumor tissue. He noted that



Meet Faheem Sandhu, MD, PhD, at **MedStarHealth.org/Sandhu.** 



After the successful removal of her spinal cord tumor, Julia Bowie is back to enjoying her passion of working under the hood. Photo by Hilary Schwab

the use of the operating microscope, along with electro-physiological monitoring of the motor functions, helped protect the spinal cord. Since the tumor had grown inside the spinal cord, it was a very delicate procedure. At the conclusion of surgery, Julia's bones were reassembled with plates and screws.

Julia's tumor was a benign astrocytoma. According to Dr. Sandhu, its cause is inconclusive. "Sometimes they're random, sometimes there's a genetic predisposition, or sometimes it can be environmental."

Since her tumor was not malignant, Julia didn't need radiation or chemotherapy, but she did undergo weeks of rehabilitation. "I pretty much had to learn how to be a human again," she says. "I had to relearn how to walk on my own. I learned patience."

As an aspiring nurse, Julia appreciated learning from her MedStar Georgetown nursing team, who freely shared their clinical expertise and modeled the importance of patient advocacy. "They would personally call and update my family to keep everyone included," she says.

Today, Julia works as a nurse in an ICU unit, and the only side effect she experiences is a slight weakness in her right hand. Julia credits Dr. Sandhu's surgical skill and the fast response of her MedStar Georgetown team for her successful outcome. "Given the extent of the surgery, I consider myself very lucky," says Julia. "And, I gained an important perspective from the other side of the bed."

Visit **MedStarHealth.org/ SpineSurgery** to learn more. To schedule an appointment with one of our specialists, call **301-856-2323.** 



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# **MedStarGeorgetownMD**

### Meet our breast medical oncology team.



Seated: Elaine Walsh, MD; Beth Strand, NP Standing from left: Theresa Harrington Stukus, NP; Candace Mainor, MD; Miriam Jacobs, MD; Joyce Slingerland, MD; Nadia Ashai, MD; Claudine Isaacs, MD

Our nationally recognized breast cancer specialists are here to diagnose and treat your cancer, offering a variety of treatment options that address your specific cancer.

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