

A Publication of Goryeb Children's Hospital

well aware kids



FALL 2013

YOUNG ATHLETES

Keep Them in
Shape – Safely

HEALTHY EATING, FAMILY STYLE

GIVING BACK

A Cancer Survivor
Helps Kids



Goryeb
Children's Hospital 
ATLANTIC HEALTH SYSTEM

DEAR FRIENDS,

We can't shield our children from all the dangers of a complicated world. But we can certainly equip them with the tools and information they need to grow healthy in body and mind. This issue of *Well Aware Kids* focuses on some of those key areas: talking about traumatic events, safety for young athletes, and making healthy eating a family project.

You'll also read about Goryeb Children's Hospital's new Farris Family Center for Advanced Medicine in Pediatrics, offering highly specialized care for children with complicated illnesses. And join us in congratulating the care team at our Pediatric Intensive Care Unit, awarded a gold Beacon Award (see page 3). They not only offer clinical excellence and expertise to every patient, but also place each family at the core of this healing environment to generate the best possible outcomes for children.

Don't forget – we're here for you! If there's a story you'd like to share, or a topic you'd like to read about, we'd love to hear from you. Please contact us at well.aware@atlantichealth.org

Walter D. Rosenfeld, MD
Chair of Pediatrics
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Talk to us

Tell us what you want to read about in *Well Aware Kids*. Email us at well.aware@atlantichealth.org. Or write us at Atlantic Health System, Attn: *Well Aware Kids*, P.O. Box 1905, Morristown, NJ 07962.

Visit our blog

Well Aware — Your Way provides an open forum for patients, employees and friends of Morristown Medical Center, Overlook Medical Center, Newton Medical Center and Goryeb Children's Hospital to foster a discussion about issues related to hospital experiences and current health topics. Check us out at atlantichealthblog.org.

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Atlantic Health System is one of the largest nonprofit health care systems in New Jersey, comprised of Morristown Medical Center, Overlook Medical Center in Summit, Newton Medical Center and Goryeb Children's Hospital. The four medical facilities have a combined total of 1,315 licensed beds and more than 2,852 affiliated physicians providing a wide array of health care services to the residents of northern and central New Jersey. The medical centers, and Goryeb Children's Hospital as part of Morristown Medical Center, are accredited by The Joint Commission. Specialty service areas include advanced cardiovascular care, pediatric medical and surgical specialties, neurology, orthopedics and sports medicine. Each of these programs has earned top ratings and recognitions in their respective fields. Atlantic Health System is the official health care partner of the New York Jets and an official health care provider of the New Jersey Devils.

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PEDIATRIC INTENSIVE CARE UNIT FIRST IN TRI-STATE AREA TO ACHIEVE **GOLD**

Goryeb Children’s Hospital in Morristown, NJ, has received a gold-level Beacon Award for Excellence on its Pediatric Intensive Care Unit from the American Association of Critical-Care Nurses (AACN) in Aliso Viejo, Calif. This award represents a significant milestone on the path to exceptional patient care and a healthy work environment. “The highly skilled PICU nurses bring their absolute best to every patient and every family,” said Fran Drigun, RN, director of women’s and children’s services, Atlantic Health System.

What You Should Know About Concussions



If your kids are in youth and high school sports like football, field hockey, ice hockey, soccer, and softball, it’s time to take a look at preventing traumatic brain injury (TBI). This includes concussion, a bump, blow or jolt to the head that shakes the brain inside the skull, says Harvey Bennett, MD, division director of pediatric neurology for Goryeb Children’s Hospital. Each year, emergency departments treat an estimated

173,000 sports- and recreation-related TBIs among children from birth to 19 years.

Recognizing concussions

“Coaches, parents and athletes can recognize a possible concussion by watching for any changes in behavior, actions or thinking after a bump to the head,” says Dr. Bennett. According to the Centers for Disease Control and Prevention (CDC), concussion victims may:

- Seem dazed or stunned
- Move clumsily
- Answer questions slowly
- Lose consciousness, even briefly
- Not remember what happened before or after a hit or fall
- Report symptoms like headache, nausea, double or blurry vision, sensitivity to light and noise, confusion, or dizziness.

If you suspect a concussion, take the player out of the game and make sure he or she is evaluated by a health care professional.

Prevention and response

The CDC has created free tools for coaches, parents, athletes and health care professionals that provide information on what to do in the case of a concussion. Visit www.cdc.gov/concussion/headsup.

For more on safety for young athletes, turn to Page 8.



5 Ways to Stay Active as a Family

Let’s Move!, the initiative to raise a healthier generation of kids, offers great tips for families to get healthy by staying active:

- 1 Give children toys like balls and jump ropes to encourage physical activity
- 2 Plan a fun outdoor activity one day a month: bike day, sports day, park day
- 3 Make a rule: No sitting still during television commercials
- 4 After meals, take a walk around the block
- 5 Take the stairs, not the elevator

→ Visit letsmove.gov for more ways families can work together for good health.





Adolescent Medicine GYN Exams

Going to the gynecologist might make your teen feel anxious or awkward. The adolescent medicine physicians at the Adolescent/Young Adult Center for Health at Goryeb Children's Hospital work hard to make it as comfortable as possible.

"We take a holistic approach," says Leslie Sanders, MD, a doctor for the Adolescent Center for Health and medical director for the Eating Disorders Program at Goryeb Children's Hospital. "Dr. Jill Clark-Hamilton and I will spend an hour talking to patients about their whole life in general. It's not just a quick exam and here's your birth control pill — we will talk to them about their relationship, about whether they feel confident about the decision to become sexually active. We are looking at them as a whole person."

Why Go to an Adolescent Gynecologist?

Teen girls typically do not see a gynecologist for routine visits, so those who do go likely have a particular issue. This can include delayed onset of periods, heavy or prolonged bleeding, severe cramps, or irregular periods. Teens may also be interested in beginning birth control because they've become or are thinking of becoming sexually active. They may be concerned that they have a sexually transmitted infection. No matter what the reason, Dr. Sanders looks at it as an educational opportunity.

"If the patient needs a pelvic examination, I try to be reassuring and pay a lot of attention to a patient's body language and how they are doing," she says. "I show them the equipment, use anatomically correct language and tell people what to expect, and prepare them as we go along. I tell them, 'You are in control in this situation.' If anything feels physically or emotionally uncomfortable, I just stop."

Providing Reassurance

The visit can calm patients who are worried about things that turn out to be commonplace. Vaginal discharge, for example, is normal. It



"We will talk to them about their relationship, about whether they feel confident about the decision to become sexually active."

begins several months before a girl gets her first period. "Vaginal discharge is nature's way of lubricating your vagina," says Dr. Sanders. But when discharge is unusual, changing in color or consistency, or it feels itchy or burns, young women should consider visiting the doctor. It can be the sign of an infection, like a yeast infection, which is not sexually transmitted or a sexually transmitted infection. "Not everyone with a discharge needs a pelvic exam," says Dr. Sanders. But during an office visit, "I can reassure them this is a normal discharge or something problematic."

Cancer Protection for Girls & Boys

Dr. Sanders also talks to parents about the importance of Gardasil or Cervarix, which is a series of shots that help prevent several strains of the human papillomavirus (HPV) infection; HPV is a sexually transmitted disease that can cause genital warts and lead to cervical, vaginal

or vulvar cancer, as well as penile cancer and oral cancers. The vaccine is recommended for males and females aged 11 to 26.

"Though Gardasil is said to reduce your risk of developing cervical cancer by seventy percent, only thirty percent of eligible teens have been vaccinated," she says. **Boys should be vaccinated as well to protect themselves as well as their sexual partners.**

Choosing to receive care from an adolescent medicine physician is a way to get exactly the kind of care a teen needs. Typically, the doctor will speak first with the parent, and then with the patient privately. "Most patients come in with their parent, but this gives them the space to talk confidentially about their concerns and needs," says Dr. Sanders. Doing so helps ease the transition from a parent overseeing her teen's health to the teen taking control of her health and speaking for herself.



Talking to Kids About Traumatic Events

Hurricane Sandy. The Newtown school shootings. The death of a grandparent. Traumatic events, whether they happen in a child's own home or across the country, can bring lasting effects.

“I often get questions from parents on how to address traumatic events with kids,” says Christopher Lynch, PhD, a clinical psychologist and coordinator of the Pediatric Behavioral Medicine Department for Goryeb Children's Hospital.

“It's important to be honest,” he says. “Kids are very good at picking up when you're leaving things out — and what they imagine is often worse than reality.” Approach it as a conversation rather than a lecture, he says. The next step is to establish some context. “Assure kids that these events

are really rare. Children — and adults — overestimate how frequently events really happen.”

When an event such as the Newtown shootings is all over the news, “do your best to limit and manage media exposure,” he continues. “With older children, watch with them to answer questions and clarify information as appropriate.” If a child is a firsthand witness to a traumatic event — or a victim — “do your best to maintain a normal routine, which helps children feel safe and secure,” Dr. Lynch says. “Provide them with extra time to cope and with physical comfort such as a hug if they find it soothing.”

Each child has his or her own coping style, he says. “Some want to talk about it, and some don't. But even if they don't, they want to know that you are there for them.”

Watch for signs that a child is not coping well: nightmares, heightened anxiety, regression (thumb sucking, wetting the bed, tantrums) and difficulty concentrating. If you see these signs, contact your pediatrician, Dr. Lynch says. One very effective treatment is psychotherapy, he says.

“It is confidential and private and provides a great environment for the child to explore what happened.”

BUILDING POSITIVE COPING SKILLS

In the Pediatric Behavioral Medicine Department at Goryeb Children's Hospital, “we focus on cognitive behavioral psychotherapy,” Dr. Lynch says. “We're helping to examine a child's thoughts and develop more adaptive and positive ways of dealing with the situation.”

Dr. Lynch specializes in teaching coping skills to children on the autism spectrum. He has written *Totally Chill: My Complete Guide to Staying Cool*, the first workbook on stress and anxiety management specifically for children with autism, ADHD and related issues. “The behavioral health needs among children are great,” Dr. Lynch says. “That's why we strive to provide services that are included as a natural part of the child's overall health care plan.”

Visit Goryeb Children's Hospital's Facebook page or the hospital's site at www.atlantichealth.org/pedsbehavioral



Healthy Eating,
FAMILY
STYLE



GRANDMA GLORIA'S MEATBALLS

The family that cooks and eats well together is more likely to stay healthy together. But if your meals rely on prepared and processed foods eaten on the run, watch out. Eating poorly is more likely to cause serious health problems, such as being overweight or obese, which in turn can lead to increased risks for developing type 2 diabetes, a heart attack or a stroke.

“One of the main health issues we see in children today is obesity,” says Lindsay Schumacher, RD, an outpatient pediatric dietitian for the Kid-FIT Program at Goryeb Children’s Hospital at Morristown Medical Center. “We are now seeing so many younger children who, instead of being physically active, are much more sedentary. Along with a sedentary lifestyle, many of these kids are consuming too many calories from junk food and not enough from nutrient-dense food, which in turn is aiding in weight gain and leading to obesity. This lifestyle trend becomes a downward spiral that can ultimately lead to long-term health issues.”

Tips for Healthy Choices

- Select nutritious foods more often than not. Every time children have the opportunity to choose higher quality food, it’s better for their overall health.
- Drink healthier beverages such as water and flavored waters, flavored beverages with less than 15-20 calories per serving, or skim milk. Kids who drink soda and regular juice are often more likely to be heavy.
- Lindsay Schumacher suggests picking whole-grain-based and high-fiber snacks such as low-fat popcorn, whole-grain crackers and high-fiber granola bars. Shop for items where the first ingredient is “100 percent whole wheat”.
- Choose brown rice, whole-grain pasta, or sweet potatoes for a side dish instead of a refined starch like white rice or regular potatoes. They contain more of the healthy nutrients your body can use, including fiber.

What to Buy Choose foods from the outer perimeter of the grocery store, where fresh foods like fruits, vegetables, fish, chicken and lean meats are typically located, says Schumacher. The inner aisles tend to contain processed foods that are high in sodium, cholesterol, fat and preservatives. For healthy snacks, Schumacher prefers to include low-fat cheese and fresh fruits. If your budget can handle it, spend more on healthy convenience snack foods. For example, if you typically buy an entire melon and it tends to go bad before you can eat it all, instead buy a cut-up melon that you’ll be more likely to finish.

Eating Out Restaurant portion sizes can be huge. Cream sauces, extra butter and oils, and fried foods can increase a meal’s calorie count significantly. Lots of places offer portions that are double or triple what your body needs, so ask for a doggie bag and pack up food before you start eating, says Schumacher. Meals don’t need to be loaded with calories just because you’re eating out. “Pick something grilled or baked from the regular menu instead of something fried or sautéed from the kids’ menu,” says Schumacher. If only a kid’s meal will do, have your child eat less. “You can still have some fries or nuggets, but watch the portion size,” she says. Or pick a side order of applesauce or veggies instead of fries.

Family Meals Eat dinner together as a family and at home as often as possible so that children will learn to eat well. “Doing so can help families to have a better rapport with each other,” says Schumacher. It also lets kids know that eating means more than just running to the nearest fast-food restaurant. “When eating dinner, use portion control. Salad and/or vegetables should take

Cooking together promotes healthier eating, and kids may be more likely to eat a dish they helped create. Get the whole family involved in making this easy, nutritious dish.

Meatballs

- 2 packages ground turkey (93% lean, each package is typically 1½ pounds)
- 2 eggs
- ½ cup Italian breadcrumbs
- ¼ cup grated Parmesan or Romano cheese
- ¾ cup water
- ½ teaspoon salt
- 1 teaspoon pepper
- 3-4 tablespoons minced fresh parsley

Tomato Sauce

- 2 28-oz cans crushed tomatoes
- 1-2 bay leaves
- 1 teaspoon pepper
- 1½ teaspoon oregano
- 1 cup minced onion
- 1 clove garlic, crushed

Directions

Turn broiler on and place a sheet of foil on a cookie sheet. Gently mix meatball ingredients together with hands or a carving fork — do not overmix.

Form meatballs with wet hands or with an ice cream scoop (an ice cream scoop is quicker, makes uniform meatballs and makes the meatballs more tender).

Place meatballs on cookie sheet and broil until brown. Turn carefully to brown all sides — meatballs will be firm to the touch. While meatballs are browning, place tomatoes, bay leaves, pepper and oregano in a large pot and heat on medium heat.

Once meatballs are browned, add them to the sauce and reduce heat to simmer.

Add minced onion and garlic to the meat drippings on cookie tin; broil until translucent and soft. Add to sauce. Simmer meatballs for at least 30 minutes.

Enjoy with pasta or in a sandwich.

YIELD: 18 MEATBALLS

Nutrition Information Per Serving

SERVING SIZE: 2 meatballs with sauce
Calories: 280; Carbs: 10 g; Fat: 10.4 g; Saturated Fat: 3.3 g
Sodium: 557 mg (but will vary based on what kind of tomatoes you use); Cholesterol: 80 mg; Fiber 2.4 g

up half of your plate. A quarter of your plate should contain a whole-grain starch. Use the last quarter for chicken, lean meat or fish,” says Schumacher. Fill plates with food before sitting down to eat, rather than serving yourself from the dinner table. “That way, having a second plate isn’t as much of a temptation, and you have time to eat and talk together,” she says.

KEEPING YOUNG ATHLETES IN SHAPE SAFELY

**WHAT
YOU NEED
TO KNOW
ABOUT
WORKOUTS
AND DIET**

When kids approach David Scott and say they want to start lifting weights, it's usually because they want to get better passing the pigskin.

"They come to me because they want to get bigger in football," says Scott, coordinator for exercise physiology and the Kid-FIT Program at Goryeb Children's Hospital. An expert in how the body works during exercise, Scott helped establish the Kid-FIT Program in 2009. The program helps overweight kids and teens, or those at risk of becoming overweight, make healthier decisions about eating and exercising.

Training with weights — raising barbells, dumbbells and other free weights in repetitions in order to build a variety of muscle groups — can be a way to get a stronger, more toned body. But Scott cautions against getting started too soon. "You shouldn't start thinking about it until you are in eighth grade or in high school," he says.

Kids need to grow into their bodies before picking up free weights, he says. "Normally, I say to kids, if they can pump out 50 push-ups and 20 pull-ups, they have enough muscle mass to safely use additional weight," says Scott. Until then, they can work on building up the number of lunges, pull-ups, sit-ups and push-ups they can do, because those exercises help them develop functional muscle mass.

WAIT UNTIL IT'S SAFE

There are reasons to wait before starting to lift weights. If you begin before your body has grown to a certain size, you risk getting hurt. "We're looking to avoid any stress fractures or premature bone hardening," says Scott. "It can also stunt your growth."

For kids who are the right age and height to begin working with weights, Scott recommends starting with stationary weight machines, which isolate a specific muscle or set of muscles. "Then we can talk about using the bench press or free weights," he says.

Beginning with weight machines is another way to prevent kids from getting started too early. "Most gyms don't let kids in under the age of 12 because the machines are designed for adults," says Scott. "If a kid goes on a machine they're too small for, there's no benefit. There are plenty of things they can do at home, like lunges, which are more beneficial to them than using a machine and just pushing weights."

Using the body's own weight as resistance, as it does when doing lunges, push-ups and sit-ups, helps promote more natural movement that's more likely to occur when playing a sport or exercising. So does using gym equipment like a medicine ball, a heavy ball used for physical training.

For football players, Scott's routines focus on the shoulders, legs, back, chest and abdominal core, and promote overall conditioning. He also works with teen girls who are at risk for, or have had, a torn

anterior cruciate ligament (ACL). This knee injury occurs often after playing sports with a lot of stop-start movement like basketball, soccer, tennis and volleyball. For these athletes, Scott recommends building up the leg muscles — specifically, the quadriceps and hamstrings — and the core muscles in the abdomen to help stabilize the knee joints. "Functional training is the No. 1 thing we talk about," says Scott.

SAFETY FIRST

Scott recommends these tips for young athletes:

- To avoid injury, work with an educated trainer or coach who can develop a safe weight training routine for you. This includes knowing how to properly handle weights before, during and after exercising, and how much to lift safely.
- Work with someone who will watch, or "spot" you as you lift weight, to protect against injury.
- Use caution in weight lifting and know your limits. "There are always risks to lifting too much," says Scott.

PROPER FUELING

Taking performance enhancers or diet supplements that promise to help people grow bigger muscles is a waste of time, says Scott. "That's the start of a very slippery slope," he says.

What about protein shakes and powders marketed as muscle-building aids? Just avoid them, Scott says. "If you're eating right, you are getting all that anyway. You are just wasting money and throwing off your body's balance of carbohydrates, protein and fat."

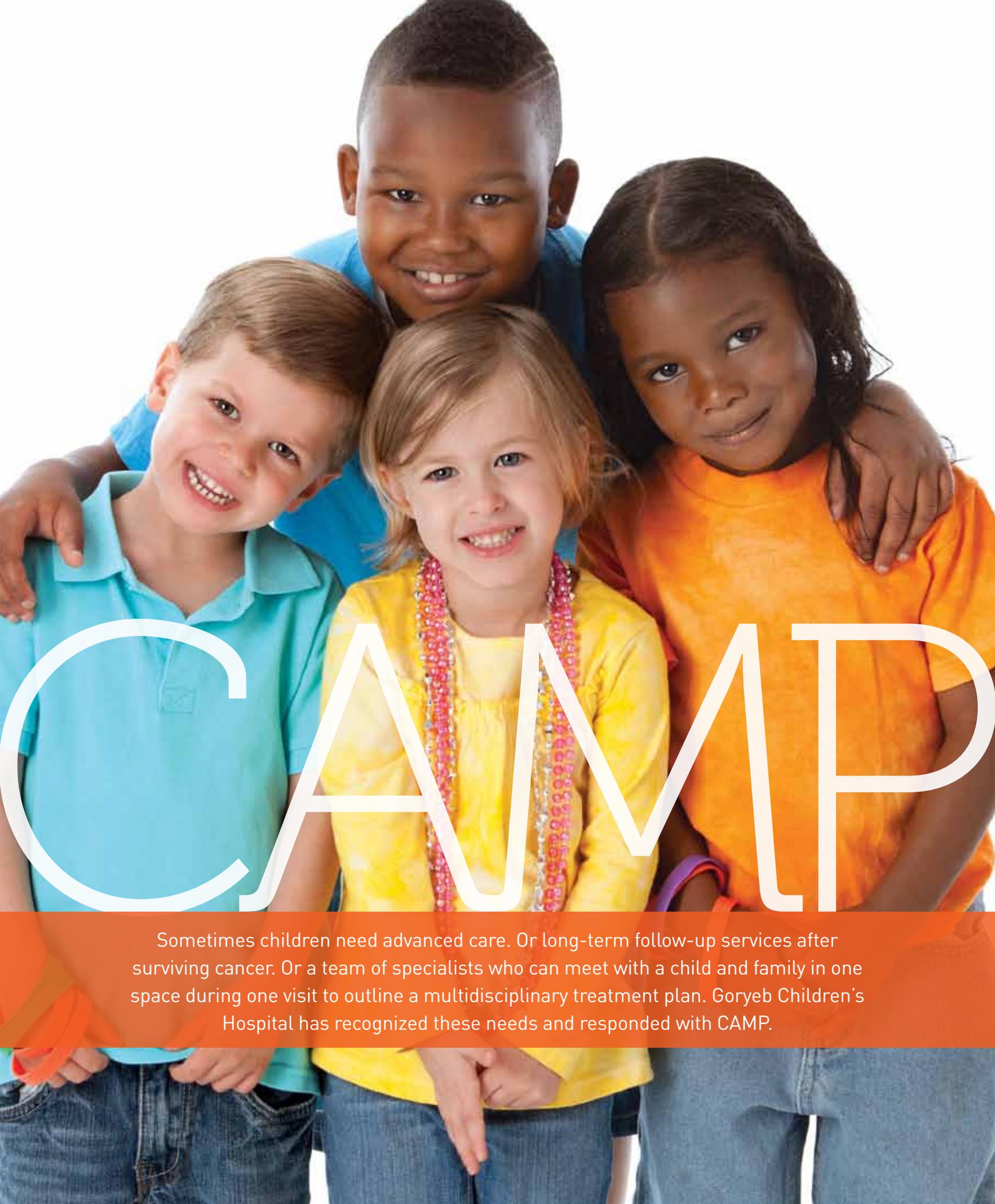
Instead, make healthy choices about what you eat before exercising. Scott recommends a balanced diet with carbohydrates such as brown rice and pasta, and proteins such as fish and chicken. "Get your vitamins and minerals from fruits and vegetables, and get plenty of fluid," he says. Diluted Gatorade is OK for football and soccer players playing in the sun but otherwise, he says drink water. "Get kids to eat healthfully so they're ready to perform," he says.

For more details about how to eat right, including picking drinks that are healthy and how much exercise it takes to burn off the calories from a drink, visit teenfitfx.com — a site that helps kids learn about portion distortion and other challenges to eating right and staying fit.

For information on the Kid-FIT program, please visit atlantichealth.org/goryebkid-fit.

To avoid injury, work with an educated trainer or coach who can develop a safe weight training routine for you.





CAMP

Sometimes children need advanced care. Or long-term follow-up services after surviving cancer. Or a team of specialists who can meet with a child and family in one space during one visit to outline a multidisciplinary treatment plan. Goryeb Children's Hospital has recognized these needs and responded with CAMP.

THIS SUMMER, Goryeb Children's Hospital opened the Farris Family Center for Advanced Medicine in Pediatrics, which offers a new approach to treating childhood disease. The only one of its kind in the state, CAMP offers highly specialized care for pediatric patients with complicated illnesses, providing both diagnostic and therapeutic interventions.

Located in a medical building adjacent to Goryeb Children's Hospital in Morristown, CAMP patients receive comprehensive care under one roof from teams of medical experts that span numerous disciplines. These teams are fully integrated with a behavioral health component that includes a psychologist, social worker, and psychiatrist to help manage a patient's psychosocial challenges, including the adjustment issues that affect both families and patients who are affected by chronic disease.

"Most centers for advanced medicine are for adult patient populations," says Walter D. Rosenfeld, MD, chair of pediatrics, Goryeb Children's Hospital. "The Farris Family Center for Advanced Medicine in Pediatrics is the only center of its kind in the state, and addresses all aspects of a child's complex disease — from cutting-edge diagnostic and treatment strategies to social issues and family support to long-term care — and does so while maintaining a warm, family-focused environment. All of our CAMP patients will be cared for in a way that we would want for our own children and families."

The main areas of CAMP include:

INFLAMMATORY DISEASE CENTER. This center clusters together distinct childhood illnesses, such as inflammatory bowel disease (Crohn's disease and ulcerative colitis), juvenile arthritis, recurrent fever syndromes and lupus, among others, that all have a common link — inflammation. Sivia Lapidus, MD, director of pediatric rheumatology, knows that being a child or adolescent with a chronic illness, whether it's arthritis, vasculitis, Crohn's disease or an unexplained fever, can be a lonely experience for the patients and their families. This will be their home away from home, a serene place where an integrated team of medical health professionals will be devoted to their healing, both physically and emotionally. By grouping these conditions together, the care team will have a collaborative, multidisciplinary environment to encourage the development of the most effective, efficient, and state-of-the-art diagnostic and treatment methods that will include access to the latest clinical trials for their patients.

The largest part of CAMP, the Inflammatory Disease Center will include an infusion center, and an outdoor healing garden, where patients can relax during their regularly scheduled infusion appointments. Near the exam rooms there are specially designed areas where physicians and

staff can discuss news and treatment plans with families in a private, relaxed setting.

"Because we are grouping disorders together that have the common link of inflammation, we will be able to make new inroads in research, diagnoses and treatment that assure the highest level of family-centered quality care," said Joel Rosh, MD, director of pediatric gastroenterology, who will also oversee the new Inflammatory Disease Center. "CAMP offers a central location where patients with overlapping symptoms are seen by teams working side by side, collaborating and learning from one another to improve outcomes and bring the very best care to our patients and families."

LONG-TERM FOLLOW-UP PROGRAM FOR PEDIATRIC ONCOLOGY.

So many advances have been made in the treatment of childhood cancers that more children are surviving cancer now than ever before. However, these strides have created their own challenges. Through the new program, these children will be tracked to quickly diagnose and treat any subsequent issues that develop either as a result of the cancer itself or the treatment. The Long-Term Follow-Up Care program will help to identify and respond to a number of issues, including problems with growth, heart, or cognitive and neurological functions. This program will also help oncology physicians discover potential ways to reduce side effects while not diminishing the effectiveness of the cancer-fighting treatments.

MULTIDISCIPLINARY PROGRAMS. This area provides space for physicians and staff from multiple disciplines to evaluate a child with a complex problem, such as a craniofacial deformity or issues that arise as a result of cerebral palsy. The space allows families to meet with multiple members of the care team to partner in providing the best possible treatment plan. Multidisciplinary programs include the craniofacial center, spasticity and gait disorders, aerodigestive, and speech and language.

With a leadership gift from David and Jill Farris, the Foundation for Morristown Medical Center worked with the community to raise more than \$3.1 million to support CAMP. Other CAMP supporters include the Women's Association of Morristown Medical Center, the Estate of Marge Goryeb, Chris and Linda Baldwin, and The Tina and Richard V. Carolan Foundation. With a goal of \$4.26 million, fund raising efforts are ongoing for CAMP.

Visit www.atlantichealth.org/camp for additional information, or call 973-593-2414 if you would like to make a donation.

The largest part of CAMP, the Inflammatory Disease Center, will include an infusion center and an outdoor healing garden.



The Diabetes Research-Treatment Connection

Beating diabetes means more than clinical treatment. Cutting-edge research and clinical trials — and a commitment to patient education — is also part of the equation.

Whether your child has just been diagnosed with diabetes or has lived with it for a while, it's essential to stay informed about new developments and advances in diabetes management. At the BD Diabetes Center and Pediatric and Adolescent Endocrine Center at Goryeb Children's Hospital at Atlantic Health System, the largest in the region, ongoing research is vital, says Harold Starkman, MD, center director. "Being cared for at a center where research is done ensures that the patient, family and diabetes care team are aware of the most up-to-date treatment," he says.

HOW RESEARCH HELPS EVERYONE The center participates in clinical research trials to learn more about different aspects of life with type 1 diabetes. "Our investigator-initiated diabetes studies focus on family functioning in diabetes, especially for families where diabetes isn't going well," he says. This ongoing project has been funded by grants from the BD Corporation, the HAPI Foundation and the Jonas Brothers Change for the Children Foundation.

Other active studies, funded by pharmaceutical and medical device companies, seek insights

into developing better devices and medications for children and adolescents with type 1 diabetes. The center also participates in two national, multicenter projects that collect data on children with type 1 diabetes and their first-degree relatives. "These include the Helmsley Foundation-funded Type 1 Diabetes Exchange Registry and the NIH funded TrialNet, which seek to learn more about the natural history of diabetes and develop new ways to prevent and treat this common disorder of childhood and adolescence," says Dr. Starkman.

QUEST FOR EDUCATION What motivates people to take part in research? "Altruism, wanting to try newer therapies and a commitment to learning more about diabetes," says Dr. Starkman, who discusses active studies with patients who qualify, when they come to the BD Diabetes Center for their diabetes care.

Often patients and their families are eager to participate in research. Some want to learn more by getting involved in a study.

Others want to see the future. "Families participating in research have an opportunity to become aware of, and try new and improved medications and technology," he says. Other projects at the BD Diabetes Center reinforce its educational mission. The BD Diabetes Center has developed and distributes national, educational video programs for children with diabetes and their families.

The center's award-winning thinklikeapancreas.com website provides educational and social support to teens with type 1 diabetes.

Find out more about research in pediatric diabetes and endocrinology at www.atlantichealth.org/kidsdiabetes.



WHAT IS DIABETES?

In type 1 diabetes, formerly called insulin-dependent or juvenile diabetes, the body does not produce insulin. People with type 1 diabetes must monitor their blood sugar and food intake, as well as inject insulin or wear an insulin pump.

In type 2 diabetes, insulin does not work effectively to allow sugar into cells, causing blood sugar levels to rise. People with type 2 diabetes may need to take insulin or oral medication to manage their blood sugar levels. Patients with both type 1 and type 2 diabetes

benefit from following a healthy eating plan and regular exercise.

HIGH BLOOD SUGAR LEVELS CAN CAUSE MANY SYMPTOMS, INCLUDING:

- fatigue
- frequent urination
- excessive thirst and hunger
- weight loss
- blurry vision

Diabetes is a complex disease to manage. Sharing insights through family education and clinical trial participation can help make it easier.



A Cancer Survivor Gives Back



"I don't remember the sickness as much as I remember the toys."

— Michael Scannella (left and his brother Matt) today and below, during treatment.

When weather experts predicted the biggest storm in years to hit the Tri-State Area last fall, Michael Scannella wondered how to handle his planned fundraiser, the Sunday Funday to Beat Cancer.

Scannella, 27, was about to hold the event at Hoboken's Arthur's Tavern, where for \$75 attendees would watch football, drink and eat. Half the proceeds would go to the Treasure Chest Fund at the Valerie Fund Children's Center at Morristown Medical Center, while the other half would support the American Cancer Society. Scannella wondered if he was going to have to issue refunds to the sixty people who had bought tickets.

As the winds picked up, Scannella emailed that group, offering to refund their money because of the impending Superstorm Sandy, which officially hit the area the next day on October 29, 2012.

"Every single one said, 'just keep the money,'" Scannella recalls. The 2012 Sunday Funday raised \$7,400, up from \$2,000 the year before and \$800 in its first year. That money, along with corporate sponsorship from Huron Consulting, where Scannella works as a financial consultant,

plus other corporate and individual donations all helped buy new toys for kids undergoing cancer treatment at the Valerie Fund Children's Center.

Repaying a Gift

It was a way for Scannella to give back for all he had received himself. At 10, Scannella was diagnosed with non-Hodgkins lymphoma after he couldn't breathe during a soccer game. He eventually underwent chemotherapy treatment over 17 months. Each round varied from days to a week at a time, but thanks to his parents and teachers, he did not miss a grade or get held back in school.

The highlights of those treatments? The toys he could pick out before beginning a new day of chemotherapy.

"I don't remember the sickness as much as I remember the toys," he says, referring to the Treasure Chest of Legos, toy dinosaurs and dolls he could choose before each round of treatment. "That resonated with me more so than being sick. I think it helped to replace that part of the memory."

Excellence of Care

Managing Scannella's care were Steven Halpern, MD, MBA, medical director for the

Pediatric Hematology/Oncology Department at the Valerie Fund Children's Center; Steven Diamond, MD, formerly of the Valerie Fund; and nurses Tricia Patterson, Eileen Rough and Annette Sinks. "They are professionals but also very personable," says Scannella. "I try to go to the hospital once a year to drop off cookies or say hi."

Halpern recalls Scannella's good sense of humor throughout his treatments. "When people ask survivors of childhood cancer about it, the vast majority say it was a positive experience, because it puts life into perspective about what's important and what's not," says Halpern. He notes that the Valerie Fund Children's Center at Morristown Medical Center offers the full breadth and depth of oncology services in the area. "People don't have to go to New York or Philadelphia to get superlative care," he says. "They can get equal to better care at places that people perceive as major cancer centers."

That was certainly true for Scannella, who has been cancer-free since 1997.

"It's good to give back to the things that have made a difference for you," he says. "Because of the Treasure Chest, it made my whole experience easier. If you can do that for one kid, or a whole handful of kids, it's outstanding."

This year's Sunday Funday to Beat Cancer is Sunday, September 29 from 1-7pm at Arthur's Steakhouse in Hoboken, NJ. Make donations through itruylucare.com/events/sunday-funday-charity-event-2013. This year's goal is to raise \$10,000.



Christine Donnelly, MD, director of the Children's Heart Center

ABOUT THE CHILDREN'S HEART CENTER

The Children's Heart Center consists of six pediatric cardiologists with more than 80 years of combined experience, along with specialist nurses, pediatric cardiovascular technologists and a social worker who aim to provide the highest quality care in a patient-friendly and minimally stressful environment.

The center evaluates over 4,000 patients per year and provides a complete array of noninvasive testing, including electrocardiography, echocardiography, Holter and event monitoring, as well as stress testing and ambulatory blood pressure monitoring.

For more information, visit www.atlantichealth.org/kidshheart



Matters of the Heart When Does a Child Need to See a CARDIOLOGIST?

We often think heart disease occurs in adults as a result of the wear and tear of life. But heart problems occur in children as well, says Christine Donnelly, MD, director of the Children's Heart Center at Goryeb Children's Hospital. These problems can range from congenital heart defects (CHD), which always require evaluation by a pediatric cardiologist, to common complaints seen in the pediatrician's office: heart murmur, chest pain, syncope and palpitations. These complaints may or may not require cardiology evaluation, depending on the circumstances.

Heart Murmurs

"Heart murmurs are common throughout childhood and are usually caused by the flow of blood from the chambers of the heart to the blood vessels," says Dr. Donnelly. These "innocent" heart murmurs are a normal part of a child's physical examination and rarely require treatment. Abnormal heart murmurs, on the other hand, result from a heart defect

or valve problem and can be associated with symptoms such as fatigue, poor feeding or dizziness. If the murmur appears to be very prominent or occurs with other symptoms, a pediatrician may refer the child to a pediatric cardiologist.

Chest Pain

Most chest pain in children is not cardiac in origin. More common causes are muscle strain from overuse, inflammation of the rib cartilage, asthma or even gastric reflux. However, chest pain that happens when the child exercises, or accompanies other symptoms such as palpitations or dizziness, "always merits evaluation to be sure there are no underlying cardiac causes, such as coronary artery anomalies or functional abnormalities of the heart muscle," says Dr. Donnelly.

Syncope

Syncope is the medical term for fainting. "This usually occurs in the older child and



adolescent and often in the child who is mildly dehydrated and in situations such as prolonged standing, especially in hot weather,” she says. “It typically responds to increased fluid and salt in the diet, but some cases may require more detailed evaluation and treatment, including medication and muscle training.” On the other hand, syncope can occur during exercise, can be preceded by an abnormal heartbeat, or can occur suddenly. In these situations, syncope should be taken seriously and requires a cardiac evaluation.

Palpitations

The sensation of a “skipped” beat happens commonly. But when it occurs frequently or is associated with dizziness or chest pain, it may indicate a more serious rhythm abnormality and also require a cardiac evaluation.

When a child should be referred to a pediatric cardiologist for a particular symptom often depends on “the company that symptom keeps,” says Dr. Donnelly. “We can usually determine if a symptom, such as chest pain or syncope, is serious by performing a thorough history and physical examination. But knowing the right questions to ask and what to look for on examination comes with experience, which is key,” she adds.



LIAM'S ROOM was donated by the McNamara family in loving memory of their son, Liam Hayden. A comforting element of pediatric palliative care, the home-like environment is used for patients requiring frequent hospitalization.

Specialty Referral Info

GORYEB CHILDREN'S HOSPITAL

Adolescent Medicine	973-971-5199
Brain Tumor	973-971-6720
Cardiology	973-971-5996
Child Development Center	973-971-5227
Craniofacial Program	973-971-8585
Eating Disorders Program	908-522-5757
Endocrinology/Diabetes	973-971-4340
Gastroenterology and Nutrition	973-971-5676
Hematology/Oncology – Valerie Center	973-971-6720
Infectious Disease	973-971-6329
International Adoption	973-971-4252
Kid-FIT	973-971-8824
Nephrology and Hypertension	973-971-5649
Neurology	973-971-5700
Physical Medicine and Rehabilitation	973-971-6505
Pulmonary/Respiratory Center	973-971-4142
Rheumatology	973-971-4096
Spasticity and Gait Disorder Center	973-971-5901
Surgery	908-522-3523

KEY PHONE NUMBERS

ADMISSIONS
973-971-6718

EMERGENCY ROOM
973-971-6102

LABORATORY
973-971-7805

RADIOLOGY
973-971-4163

EEG
973-971-5124

For a referral to a
Goryeb Children's Hospital
doctor, call **1-800-247-9580**
or visit atlantichealth.org.



NEW JERSEY

Goryeb Children's Hospital **Locations**

- 1 Goryeb Children's Hospital at
Morristown Medical Center**
100 Madison Avenue, Morristown, NJ 07960
- 2 Goryeb Children's Center at
Overlook Medical Center**
99 Beauvoir Avenue, Summit, NJ 07901
- 3 Newton Medical Center**
175 High Street, Newton, NJ 07860
- 4 Goryeb Children's Hospital
Subspecialty Office at
Sparta Health & Wellness**
89 Sparta Avenue, Sparta, NJ 07871
- 5 Goryeb Children's Hospital
Subspecialty Office at Collins
Pavilion, Chilton Hospital**
97 West Parkway, Pompton Plains, NJ 07444
- 6 Goryeb Children's Hospital
Subspecialty Office at Raritan**
34 East Somerset Street, Raritan, NJ 08869
- 7 Goryeb Children's Hospital
Subspecialty Office at East Brunswick**
579 Cranbury Road, Suite H,
East Brunswick, NJ 08816

