What You Need to Know About Breast Cancer

The Rest Test

Get Moving: Interval Training

HEALTHY EATING

Get in a healthy mindset this fall
DEAR FRIENDS,

For many of us, fall means getting back to work or school after vacation. In this issue of Well Aware, we see this season as a great time to get a fresh start on basic healthy habits: eating well, getting good sleep, exercising and beating stress — the lifestyle changes that can make a big difference in your quality of life.

A healthy quality of life is important to all of us at Atlantic Health System as we embark on a bold new vision: to empower our communities to be the healthiest in the nation. We need your input! Turn to Page 3 to find out how to help us. At Atlantic Health System, we aim to be on the forefront of quality health care. We’d love to hear from you. Please email us at well.aware@atlantichealth.org.

Joseph A. Trunfio
President and CEO
Atlantic Health System
Communicating With Your Doctor Just Got Easier

Atlantic Health System is working with a health information organization to make getting in touch with your doctor easier than ever. A health information organization (HIO) is a group of health care facilities established to help patients and their authorized health care providers who treat the same patient, to share — or exchange — relevant health care information. This ensures that only authorized persons, including physicians, hospitals, labs, etc. — have secure, instant access to your vital medical information. This assists your caregiver in gaining access to needed medical information to provide you with the best care possible.

Jersey Health Connect is providing this service through RelayHealth, reducing barriers to collaboration and enhancing care efficiency. These online services help save time by avoiding nonurgent office visits and managing your care more efficiently. You can also:
- request appointments
- preregister for our services
- inquire about your bill
- make a payment online

REGISTER AT: atlantichealth.org/atlantic/eservices/relayhealth

Talk to Us!

Our new vision at Atlantic Health System is to empower our communities to be the healthiest in the nation.

That’s you ... and us. It’s a big mission, and we need your help. Please answer this question:

If you could do one thing, and one thing only, to improve the health of your community, what would that be?

Tell us at atlantichealth.org/empower.

Thanks for being part of this vision.

Top Awards for Morristown Medical Center and Overlook Medical Center

U.S. News & World Report ranked Morristown Medical Center as a top hospital nationwide for cardiology and heart surgery, geriatrics and gynecology, as reported in their annual Best Hospitals list. In addition to performing more open-heart surgeries than any other hospital in New Jersey, Morristown Medical Center is a top destination for cardiovascular care in the state and the New York metropolitan area.

Morristown Medical Center also ranked regionally in the following eight specialties: cancer; diabetes and endocrinology; gastroenterology and GI surgery; nephrology; neurology and neurosurgery; orthopedics; pulmonology; and urology. Overlook Medical Center was named Best Regional Hospital in seven specialties, including gastroenterology and GI surgery; geriatrics; gynecology; nephrology; neurology and neurosurgery; pulmonology and urology.

Atlantic Health System has also received other honors. We’re ranked among the top 50 on FORTUNE® magazine’s list of “100 Best Companies to Work For®,” and we’re one of the top three companies in the nation identified by AARP as “Best Employers for Workers Over 50.” Morristown Medical Center has been recognized as a “Leader in LGBT Healthcare Equality” in the Healthcare Equality Index 2013, earning top marks for a commitment to equitable, inclusive care for lesbian, gay, bisexual and transgender (LGBT) patients and their families.
Q+A: Menopause
Dealing with weight gain? Night sweats? Poor sleep?

Q: WHY AM I GAINING WEIGHT, ESPECIALLY AROUND THE WAISTLINE? HOW CAN IT BE PREVENTED OR REVERSED?
A: Health changes contribute to this new kind of weight gain. You may have an underactive thyroid gland that’s slowed down your metabolism, for example, or you may have developed insulin resistance — when your body does not readily absorb blood sugar. Both contribute to weight gain. The more belly fat you have, the more insulin-resistant you become and the more weight you gain. This raises your risk for diabetes, heart disease and other health conditions. At the Menopause Center we measure waist size, not just weight, because it is so important. We recommend a plant-based diet with seven to nine servings of vegetables and two servings of fruit a day. Cut back on sugar and alcohol, both of which raise levels of the hormone cortisol — which can contribute to belly fat gain and to hot flashes. We also look for food allergies and intolerances that can contribute to belly fat. Exercise is also important — yoga; Pilates; a strength-training routine that will not strain your joints, tendons and ligaments; walking.

Q: WHAT HELPS HOT FLASHES AND NIGHT SWEATS?
A: Hormonal changes trigger hot flashes — what health care practitioners call vasomotor symptoms. Changes in the three types of estrogen that circulate in your bloodstream, as well as changes in progesterone levels, mean your body’s temperature regulation system does not work as well. Stress or small changes in temperature can lead to hot flashes, hot flushes and night sweats as your body tries to cool off. Exercise really helps here. You need to sweat every day by exercising for a half hour to 45 minutes. Increasing the fiber in your diet, to 35 to 40 grams per day, also helps by removing toxins from your bloodstream. One way to do this is to have two tablespoons of ground flaxseed daily — mixed into a smoothie, into a protein drink, into a glass of cranberry juice or to top yogurt. It contains lignans that act as weak estrogens, binding to estrogen receptors in your body so that symptoms are not produced. Diet changes that help with weight loss will help, too. We also recommend pharmaceutical-grade herbal supplements, available in our apothecary at the center, such as black cohosh with chasteberry. It’s important to see a doctor to get the right dose for you.

Q: HOW CAN I GET BETTER SLEEP AT THIS TIME OF LIFE?
A: At menopause, women may have two different sleep issues — trouble falling asleep and/or waking up in the middle of the night with racing thoughts and palpitations. Medications you take may cause problems falling asleep. Antidepressants may deplete the hormone melatonin, which regulates your body’s sleep/wake cycle. We may recommend a melatonin supplement for that. Your adrenal glands, involved in producing stress hormones like cortisol, may be too active if you’re waking up in the middle of the night. Stress reduction can help. I recommend a breathing technique where you focus on a word or phrase as you inhale through your nose for a count of 4, hold your breath for a count of 7, and then exhale through your mouth with your tongue behind your front teeth for a count of 8. Neutraceuticals tailored to your needs can also help. We’ve gotten plenty of women off sleeping pills so that they’re getting refreshing, deep, natural sleep with solutions like these.

About MaryJo Peay, APN C
As an integrative nurse practitioner at Atlantic Health System’s Menopause Center of New Jersey in Morristown, MaryJo Peay takes a “functional medicine” approach to the health issues that arise during the years before, during and after menopause. “We look for and treat the underlying causes of each woman’s symptoms and health concerns,” she explains. Solutions may include diet changes, a new exercise routine, stress reduction, herbs and other supplements. “It’s more than just a prescription for hormone therapy,” she says. “And when we do recommend hormones, we prefer bioidentical hormones that we believe are safer and just as effective.”

To make an appointment, please call 973-971-7000. Visit us at: atlantichealth.org/morristown/menopause
GET MOVING

Interval Training

Want to lose more weight, blast more body fat, give your fitness level a boost and improve your health without adding more time to your workout? Try High Intensity Interval Training (HIIT) — an exercise strategy that alternates bursts of fast- and slower-paced exercise, with benefits for seasoned athletes and beginners alike.

“Interval training is something anyone can incorporate into their exercise routine,” says Damion Martins, MD, medical director for Atlantic Sports Health and director of internal medicine for the New York Jets. “Several studies have shown that HIIT is effective and beneficial for cancer survivors, sedentary people and those in cardiac rehab.”

An interval training workout moves at two speeds — really fast and then slower, alternating for a set period of time. Anyone can do it, because the pace and length of the workout are based on your own current fitness level, says William J. Smith, MS, CSCS, MEPD, account manager for corporate and sports health at Morristown Medical Center. “If you’re taking a walk, you could decide to walk faster than usual — at a very brisk pace for you — from one telephone pole to the next; then move at a slower pace for the next two telephone poles; then pick up the pace again,” he explains. “You’re not moving at a continuously high intensity, so you have time to recover between bursts. Doing intervals helped me improve my own recovery while running marathons, especially on courses with a lot of hills.”

**THE MAGIC OF SPEEDING UP AND SLOWING DOWN**

Studies show intervals help you burn more body fat, become fit and keep your metabolism elevated (which also burns more calories) for up to 2½ hours after a session. Interval training can improve insulin sensitivity, making it easier for cells to absorb blood sugar, and increase levels of heart-healthy HDL cholesterol.

“It utilizes two different energy systems in the body — the aerobic and anaerobic systems — which increases fitness,” Smith says. “You’ll see results faster, which will motivate you to keep going.” Interval training also lets you work harder while maintaining good form and posture, important for injury prevention.

All this in as little as 20 minutes, a couple of times per week, says Smith. “You can start a simple interval routine, even if you’re out of shape,” Dr. Martins says. “Start with just 20 minutes, including a five-minute warm-up and a five-minute cool-down, once or twice a week. Don’t perform interval workouts on consecutive days, to decrease the chance of burnout.”

**FUEL YOUR WORKOUT**

“If you’ve eaten a meal in the previous four hours, you probably don’t need to eat anything more in order to do a basic interval routine,” says Mary Finckenor, RD, CDE, BC-ADM, dietitian for the Cardiac Health Center of Morristown Medical Center. “If you had lunch at noon and are headed out for an interval walk at 5:00pm, try a small snack like a piece of fruit, crackers and hummus, or a piece of low-fat cheese.”

Drink a cup or two of water about 15 minutes before your routine to ensure adequate hydration. “You don’t need a special sports drink or special workout foods,” she notes.

For more, visit atlantichealth.org/sports.

**A SAMPLE WORKOUT**

Ready for your first interval training session? Lace up your walking shoes and try this routine, recommended by Damion Martins, MD, medical director for Atlantic Sports Health:

**WARM UP:** Walk at a slow to moderate pace for five minutes.

**HIGH-INTENSITY BURST:** Walk at a fast pace, as if you’re late for an appointment or trying to catch a bus, for one minute.

**RECOVERY PACE:** Walk at a moderate pace for two minutes.

Repeat high-intensity bursts and recovery pace bursts four more times.

**COOL DOWN:** Walk at a moderate to slow pace for five minutes.
For students, fall means back to school. For those whose school days are long past, fall still means a new start. Summer vacation days are memories, and the dog days of summer are winding down. It’s a great time to jump-start a new routine — we’ll call it a healthy mindset — starting with nutritious foods.

No matter what stage you’re in, you can earn an A+ for healthy meals you’ll love. Healthy “convenience” foods + portable meals + a few smart accessories = Good eating, fast.

“People don’t often have time to shop for or cook traditional meals,” says registered dietitian Diane Delaney, MS, of the Outpatient Nutrition and Diabetes Education Program for Newton Medical Center. For families, “often, the kids get out of school and spend the next three or four hours being ferried from activity to activity in Mom’s or Dad’s ‘taxi.’ That doesn’t mean you have to eat burgers and fries or takeout Chinese food and pizza.”

“You can make and eat meals that are good for you, even when time is short,” she notes. “It just takes a little planning.”

**Lesson #1:**
**MAKE IT A FAMILY AFFAIR**
Getting back into the school routine puts new demands on kids and their parents, says Mary Finckenor, CDE, BC-ADM, a registered dietitian for the Cardiac Health Center of Morristown Medical Center. Stress levels creep up. Mornings — and evenings — are busier. It takes energy to manage your own responsibilities while helping your kids meet their new challenges — from learning the ABCs to comprehending calculus.
No kids? The same guidelines apply.

“Every cell in your body is made up of stuff you’ve eaten,” explains Finckenor. “When you fuel yourself better, your body and mind work better, even under stress. Mental focus and concentration are better. Health is better. You may get fewer colds. Digestion improves and health markers like cholesterol, blood pressure and blood sugar improve. Once you start eating better, you just feel better.”

Parents know healthy food provides the building blocks kids need for growth and development, says Gauri Navare, registered dietitian and clinical nutrition coordinator, Atlantic Health System. Choose satisfying, nutrient-packed fruit and vegetables, whole grains, lean protein, low-fat or fat-free dairy products, and good fats to beat the obesity epidemic that threatens kids and grown-ups. “Parents set a powerful example when they eat healthy foods,” Navare says. “Kids will eat what you eat. Eating family meals together also improves emotional well-being for kids and teens.”

Lesson #2: PLAN CONVENIENT, PORTABLE MEALS

Supermarkets are packed with convenient, healthy foods that can help you put a good meal on the table in minutes, Finckenor says. When you’re on-the-go, bring along portable, nutrient-rich edibles.

Breakfast in a hurry: “Keep low-fat milk, easy-to-eat fruit like bananas or berries and whole-grain cereal on hand,” Navare says. This combination gives you plenty of protein, fiber, carbohydrates for energy and calcium for strong bones. On the run? Try a peanut butter sandwich on whole-grain bread and an aseptic box of milk (like a juice box) or even low-fat chocolate milk, Finckenor recommends. “If you or your kids don’t like regular milk, the occasional chocolate milk is OK,” she says.

Lunches they [and you] will love: Choose low-fat, low-sodium lunch meats like roast turkey or roast beef to tuck between slices of whole-grain bread. “Top with veggies (baby spinach, red pepper slices) instead of cheese,” Finckenor suggests. “Use mustard or a little mayonnaise.” Add a piece of fruit. “Once in a while, add a sweet treat like two cookies,” she says.

Dinner express: Stop at the supermarket for a rotisserie chicken (or Delaney’s favorite, a rotisserie turkey breast), bagged salad greens and a quick-cooking whole grain. It’s faster, healthier (and more affordable) than takeout or drive-thru burgers and fries. “I like quinoa. It’s a whole grain that cooks in minutes,” Finckenor says. Others are quick-cooking barley, whole-wheat couscous and bulgur.

“Keep go-to foods in the pantry for nights when you want something really easy, like low-sodium soups,” Delaney says. “Pair with a healthy sandwich and a salad. I also turn to healthy frozen entrees when I don’t feel like cooking — something low in sodium and fat. Add a salad and a glass of milk.”

On-the-go options: “Invest in thermal lunch bags, containers, zipper-lock bags and freezer packs to keep foods cold,” Delaney suggests. Then look for portable foods when you shop. “Get some from every food group,” she says.

Lesson #3: STOCK UP FOR SUCCESS

Stock your pantry, fridge and freezer with quick-prep staples: low-sodium canned vegetables; fruit canned in juice or light syrup; whole-grain pasta; low-sodium canned red, white or black beans (great added to soup); tomato sauce; and extras to dress up a meal, such as canned dried tomatoes and capers. Stock the freezer with plain vegetables, berries, individually packaged fish filets and chicken breasts or thighs. “These defrost fast in cold water,” Finckenor says.

Look for new, good-for-you convenience foods in supermarkets, like prechopped, peeled butternut squash; prewashed, prechopped kale; presliced veggies for salads, stir-fries and steaming; microwave-ready greens; microwavable pouches of whole grains; frozen, microwavable vegetable medleys; single-serve fruit cups (packed in juice or light syrup); yogurt in squeeze tubes; or yogurt drinks. “You may pay a little more for these, but you and your kids are more likely to eat them,” Finckenor says. “They’re also easy to take with you or cook fast at mealtime.”

Super Smoothies

Smoothies are so easy to make! They’re made of fruit blended with a liquid, yogurt or even tofu. Here are some tips and recipes to get you started:

- You can use soy milk or juice instead of milk or tofu in place of yogurt.
- Frozen fruit makes thicker, frostier smoothies (chop large fruit before freezing).
- Smoothie too thin? Add bananas, yogurt, ice cubes or tofu.
- Smoothie too thick? Add juice, milk or soy milk.
- Smoothie not sweet enough? Add mango, banana, honey or maple syrup.
- Smoothies are freezable! Make them ahead and thaw when you want them, or eat them frozen like ice cream.
- Crushed ice blends better than whole ice cubes.
- To blend, try blending the liquids first; then add the solids one at a time.
- To increase calories, add a scoop of vanilla-flavored whey protein — it has a mild flavor and will add quality protein calories to any smoothie.
### Special Free Health Fairs

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<tr>
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<th>Time</th>
<th>Contact Information</th>
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<tbody>
<tr>
<td>Weight Loss Through Hypnosis, FEE: $65</td>
<td>10-11:30am</td>
<td>Monday, Nov. 4</td>
<td>1-800-247-9580</td>
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<tr>
<td>Evaluate Your Stress Level</td>
<td>2-4pm</td>
<td>Monday, Sep. 16</td>
<td>1-800-247-9580</td>
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<tr>
<td>Mammograms Save Lives</td>
<td>6:30-10:30pm</td>
<td>Saturday, Sep. 4</td>
<td>1-800-247-9580</td>
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<td>Blood Sugar/A1C Blood Testing</td>
<td>6:30-10:30pm</td>
<td>Tuesday, Sep. 17</td>
<td>1-800-247-9580</td>
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<td>Prostate Cancer Screening</td>
<td>6:30-10:30pm</td>
<td>Wednesday, Sep. 18</td>
<td>1-800-247-9580</td>
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<td>Colorectal Cancer Screening</td>
<td>6:30-10:30pm</td>
<td>Thursday, Sep. 19</td>
<td>1-800-247-9580</td>
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<td>Evaluate Your Stress Level</td>
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<td>Friday, Sep. 20</td>
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<td>Smoking Cessation Through Hypnosis, FEE: $65</td>
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### Children's Health Programs

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<tr>
<td>Weight Loss Boot Camp</td>
<td>$120</td>
<td>1-800-247-9580</td>
</tr>
<tr>
<td>Prepared Childbirth Classes, FEE: $120</td>
<td>$120</td>
<td>1-800-247-9580</td>
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### Free Health Care

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<td>Diabetes Support Group: &quot;Take Good Care of Your Feet&quot;</td>
<td>8:30-2:30pm</td>
<td>Saturday, Nov. 23</td>
<td>1-800-247-9580</td>
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<tr>
<td>Breast Cancer Support Group</td>
<td>6:30-10:30pm</td>
<td>Monday, Sep. 23</td>
<td>1-800-247-9580</td>
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<tr>
<td>Child &amp; Infant CPR &amp; AED</td>
<td>$70</td>
<td>Tuesday, Oct. 1</td>
<td>1-800-247-9580</td>
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<tr>
<td>Prepared Childbirth Classes, FEE: $120</td>
<td>$120</td>
<td>Thursday, Oct. 1</td>
<td>1-800-247-9580</td>
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### Maternal Health Programs

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<tr>
<td>Maternal Yoga, FEE: $40/5 sessions</td>
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### Behavioral Health Programs

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<td>Staying on Track, FEE: $40/5 sessions</td>
<td>$40</td>
<td>1-800-247-9580</td>
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<tr>
<td>Prepared Childbirth Classes, FEE: $120</td>
<td>$120</td>
<td>1-800-247-9580</td>
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Step into Carol W. and Julius A. Rippel Breast Center at Morristown Medical Center for your annual mammogram and you may feel you’ve wandered into a lovely spa. A friendly concierge greets you — and can help with everything from parking questions to soothing your nerves about your upcoming mammogram. After slipping into a robe in your gently lit changing room, you can enjoy coffee or tea before your screening mammogram.

It’s a great way to reward yourself — and calm any jitters — as you take this step in the fight against breast cancer.

“The importance of early detection cannot be overemphasized,” says surgeon Leah S. Gendler, MD, FACS, of Atlantic Breast Associates, affiliated with the hospital’s Carol G. Simon Cancer Center, home to Rippel Breast Center. “We’re detecting breast cancer and precancerous cell changes earlier than ever before. That makes all the difference in being cured.”

According to the American Cancer Society, over ninety percent of breast cancers can be successfully treated — with a long-term survival — when detected early. Better detection methods, such as digital mammography, ultrasound, breast MRI and new three-dimensional mammography are available at Rippel Breast Center. Also available at Carol G. Simon Cancer Center are more effective, personalized treatment plans, which have boosted overall five-year survival rates for women with breast cancer to ninety-five percent.

Yet nearly thirty percent of women skip this important check — due to lingering fears, the mistaken belief that they don’t need mammograms, or confusion over when to start them and how often to return.

DO I REALLY NEED A MAMMOGRAM?
In 2009, the U.S. Preventive Services Task Force made headlines with a recommendation that women wait until age 50 to start breast

MAMMOGRAM GUIDELINES

**For women at normal risk:** Have a baseline mammogram in your mid- to late 30s. Begin annual mammograms at age 40. Conduct a breast self-exam monthly. See your doctor for a clinical breast exam once a year.

**If you’re at high risk (as determined by your doctor):** Begin mammograms 10 years before the age when your youngest relative developed breast cancer. Your doctor may recommend twice-yearly clinical breast exams and may alternate between mammograms, breast ultrasound and breast MRI, or employ three-dimensional mammography.

Examine your breasts monthly. See your doctor once or twice a year for a clinical breast exam. To schedule a mammogram, please call 973-971-5321.
cancer screenings. As a result, mammogram rates dropped for women in their 40s. “But we favor the recommendations of American Cancer Society, the American College of Radiology and other important, national gynecological organizations. We believe women should have an annual mammogram starting at age 40,” says Paul Friedman, DO, medical director of Rippel Breast Center.

If possible, get a baseline mammogram in your mid- to late 30s, suggests Dr. Gendler. Radiologists can compare your later breast images with it as they look for changes. If you’re at high risk, you may need earlier and more frequent checks.

“Do breast self-exams regularly and have a clinical breast exam by your gynecologist or other health care provider annually,” Dr. Friedman says. “Plenty of women and their doctors find breast cancers when they notice a lump. But most of those are bigger than the size of a nickel. Mammography can detect cancerous changes that are just one millimeter in size. These are often ‘atypias,’ cells just becoming abnormal.”

WHAT STEPS HELP PREVENT BREAST CANCER?

“Maintaining a healthy weight and exercising three or four times a week may help lower risk somewhat by keeping your body fat level lower,” says Dr. Gendler. “Body fat stores estrogen, which can fuel some breast cancers. A low-fat diet may also help, as can eliminating alcoholic beverages. Early age of first pregnancy and breastfeeding also can lower your risk of developing breast cancer. Taking combination hormone replacement therapy can raise risk,” she says. “The breast health of women who use HRT is followed closely at Atlantic Health System.”

IF I HAVE BREAST CANCER, WHAT ARE MY OPTIONS?

Carol G. Simon Cancer Center provides state-of-the-art treatments and is accredited by the National Accreditation Program for Breast Centers (NAPBC). Rippel Breast Center is also recognized as a Breast Imaging Center of Excellence by the American College of Radiology.

Management of breast disease involves surgery, followed by chemotherapy and radiation if needed. “Lumpectomy is just as effective as mastectomy when both are options for a specific cancer,” Dr. Gendler says. “Plastic surgeons are frequently involved in the operations, either to reconstruct the breast after mastectomy, or to perform a lift or reduction at the time of lumpectomy. Some mastectomy patients are candidates for nipple-sparing mastectomy, where the entire skin envelope of the breast is preserved.”

The multidisciplinary approach means that patients receive the latest, most effective and customized cancer treatment. “The genetics of the tumor are analyzed, and specific therapy is given based on each tumor’s gene pattern,” Dr. Gendler says. “The patient is involved in every decision and is equipped with all the facts so that she can make informed, confident choices about her care.”

DO I CARRY A BREAST CANCER GENE?

Actress Angelina Jolie was in the news recently for having a preventive double mastectomy because she was at high risk for getting breast cancer. Experts believe that ninety percent of breast cancers are not caused by an inherited gene or group of genes, but “women may wonder whether it runs in the family if their mother or sister or aunt was affected,” says Jessica Rowse Heinzmann, MS, CGC, a board-certified genetic counselor at Carol G. Simon Cancer Center who specializes in breast cancer.

Clues to inherited risk include having relatives with breast cancer before age 50, a relative who had breast cancer in both breasts, multiple affected relatives, a family history of ovarian or pancreatic cancer plus breast cancer, male breast cancer and being of Eastern European Jewish (Ashkenazi) descent. “If you’re concerned that breast cancer, or any cancer, may run in your family, talk with your doctor and see a genetic counselor if recommended,” Heinzmann says.

If there are red flags for genetic risk, a counselor will discuss the pros and cons of genetic testing with you. “We test for the mutations of the BRCA1 and BRCA2 genes, but approximately fifteen to twenty percent of hereditary breast cancer is not accounted for by those,” she says. “Atlantic Health System now offers more extensive testing for other, more recently identified genes.” Knowing you carry a gene for breast cancer allows you to make choices to lower your risk, such as more intensive and frequent cancer checks, taking estrogen-blocking medications for five years or more, or double mastectomy. “We can customize your plan based on your preferences and life stage,” Dr. Gendler says.

Carol G. Simon Cancer Center sponsors an annual patient symposium on BRCA mutations and frequently offers support groups. Call 973-971-6672. Visit us at www.atlantichealth.org/rippel.
In the 1990s, interventional cardiologist Mimi Guarneri, MD, placed tiny wire scaffolds — stents — in thousands of plaque-choked hearts. She believed the procedure could one day wipe out cardiovascular disease, America’s leading killer. Until she had a wake-up call that’s changed the course of her life and of medicine.

“I realized that a 16-millimeter stent does not prevent heart disease,” says Dr. Guarneri. “If someone is having a heart attack, it’s great to be able to open an artery and restore blood flow to the heart. But we were not doing anything to stop heart disease from happening in the first place. You can’t just treat the physical body and call it medicine. We needed to care for body, mind, emotions and spirit.”

Dr. Guarneri’s epiphany led her to found the pioneering Scripps Center for Integrative Medicine in San Diego, Calif., in 1997 and 16 years later, to her new role as senior adviser for Atlantic Health System’s landmark Integrative Medicine program. Her work aims to foster a 21st-century approach to well-being that blends Western medicine with proven healing modalities from around the world, and with time-tested cornerstones of vibrant living such as healthy eating, regular physical activity and emotional/spiritual health.

“We’re not just prescribing a pill for an ill. Integrative medicine supports the whole person,” she explains. “We use every good tool at our disposal, whether it’s a sophisticated computed tomography scan to look for heart disease, guided imagery for stress reduction or acupuncture for migraine headaches or allergy relief.”

**A NEW VISION OF HEALTH**

You’ll find these services at Atlantic Health System’s three Centers for Well Being (in Morristown, Montville and Summit), and through free inpatient integrative medicine services at Morristown and Overlook medical centers. You can also visit Atlantic Integrative Medical Associates, the new integrative physician practice, at Morristown Medical Center. Coming soon: a new, state-of-the-art Center for Well Being, offering an even broader range of integrative medicine services, set to open at Morristown Medical Center in early 2014. “Most of the new center’s services are available now, even before the new building opens,” Dr. Guarneri says.

What drew Dr. Guarneri, recently elected president of the American Board of Integrative and Holistic Medicine, to Atlantic Health System? “The program here is evolving into one of the largest integrative medicine centers in the United States,” she says. “Atlantic Health System is a leader in the field. There’s a desire here to treat the whole person.”

One way to introduce yourself to integrative medicine is by taking a class at one of the Centers for Well Being. Try yoga, meditation or T’ai Chi Chih, a series of gentle movements that help circulate and balance the life force in the body. Attend a lecture about acupuncture or learn how to enhance the “energy” in your home with feng shui. Learn to cook the healthiest seasonal foods, or about the connection between diet and inflammation. Or make an appointment for a massage, an acupuncture session or a meeting with a wellness coach to develop a plan for becoming your best, healthiest self.

Atlantic Integrative Medical Associates addresses concerns ranging from allergies and depression to diabetes, digestive disorders, insomnia and heart disease. The staff also offers integrative pediatric care for kids, for ADHD, autism, developmental disorders, infant colic and more.

**DEEP-DOWN GOOD HEALTH**

“Western medicine is great at diagnosing disease and treating acute problems, like heart attacks and strokes,” Dr. Guarneri says. “What I’ve learned from my patients is that it takes more to be healthy. That loneliness, depression, anger and hostility are every bit as devastating to a heart and to overall health as high blood pressure and high cholesterol. And that having a positive purpose in life can be as important as low levels of LDL cholesterol.”

Dr. Guarneri explains this new view of health to people by asking that they imagine they’re a tree. “If you had a sick tree, what would you do?” The patients always say, “I would give it more sunlight, I would give it better water, or I would fertilize the soil,’ and then I say, ‘OK, so let’s look at your soil — at your diet, activity, social connection, sleep.’ Patients realize, ‘Wow, if I strengthen my soil I can impact what’s going on with me!’ That’s good medicine.”

For more information, visit atlantichealth.org/integrativemedicine.
If you stayed up late last night binge-watching "Arrested Development," that tiredness makes sense. (It isn’t good for your health, however.) But if you regularly struggle to stay awake even after a “good” night’s sleep, there could be cause for concern. “If you wake up tired and sluggish after seven hours of uninterrupted rest, and get sleepy or even doze off in the afternoon, that can be a sign of a sleep disorder,” says Rakesh Garg, MD, pulmonologist, diplomate of American Board of Sleep Medicine and medical director for Newton Medical Center’s Sleep Diagnostic and Treatment Center.

Benefits of better sleep
Skimping on sleep is a poor decision. “Sleep improves concentration and mood, and helps reduce the risk of diabetes, stroke and other health conditions,” Dr. Garg says. Good sleep helps restore both mind and body — “just like exercise and nutrition,” he says. “When it’s cut short, the body does not complete all the phases of sleep needed for tissue repair, memory consolidation and release of needed hormones.”

Many of us are not losing sleep voluntarily, however. The Centers for Disease Control and Prevention estimates that up to 70 million Americans have sleep disorders. Obstructive sleep apnea (OSA), which affects an estimated 20 million Americans, is the most common condition seen at sleep labs, including Newton Medical Center. But most people with OSA remain undiagnosed and untreated, he says.

No room to breathe
When you lie down to sleep, the muscles around the airway at the back of your throat relax. If the airway gets too narrow, you will snore — that’s the sound of air squeezing through. But for people with OSA, the airway becomes partially or completely blocked. To restart the oxygen flow, they have to arouse or move, or sometimes they wake up gasping for breath. This wreaks havoc on the sleep cycle. People with OSA can fall asleep and wake up hundreds of times each night, even though they may never know it.

“It’s usually the sleep partner who recognizes it first,” says Dr. Garg. “They’ll hear snoring, followed by total silence, and they often have to nudge their partner to get them to start breathing again.” Sleep apnea rarely causes death during sleep.

Due to disruptive sleep, people may feel tired and sleepy during the day and often snore loudly. They also often wake up with a dry mouth or sore throat, have headaches, and can have high blood pressure that’s difficult to control. Untreated sleep apnea “increases a person’s risk for diabetes, hypertension, stroke, cardiac arrhythmia, and work- and driving-related accidents,” Dr. Garg adds.

If you feel constantly tired during the day or snore loudly at night, especially with episodes when you seem to stop breathing, talk to your doctor, recommends Dr. Garg. “In fact, it’s a good idea to discuss any issues you have with sleep with your doctor,” he says.

If your doctor suspects you may have a sleep problem, you’ll be referred for an assessment at a sleep lab, such as the one at Newton Medical Center. Patients come into the lab about 8:00 or 9:00p.m. and stay in the lab’s private, soundproof rooms overnight. Physicians then interpret the results, make a diagnosis, and a treatment plan is then created with the referring physician. This may be an effective, noninvasive treatment called CPAP, continuous positive airway pressure, which continually delivers air through a tube and a mask on the nose/mouth.

For more information, visit atlantichealth.org/newtonsleep.
The pathway to better health is in your genes. Most people know genetic testing can identify a child’s parents or a rare disease. But today’s tests are far more powerful, says Darius J. Adams, MD, clinical geneticist and director of the Jacobs Levy Equity Management Personalized Genomic Medicine Program, with locations at Morristown Medical Center and Overlook Medical Center.

According to Arnold Pallay, MD, associate director of the Personalized Genomic Medicine Program, “There are now more than 2,000 genetic tests on the market,” he says. “They can identify the best treatment for everything from early-stage breast cancer to seizure disorders and severe depression.”

“Physicians are not just using testing to refine diagnosis, but also to explore new treatment options,” Dr. Adams says. One test now routinely offered in the Personalized Genomic Medicine Program looks at a patient’s response to the drug Plavix<sup>®</sup>, often prescribed to prevent heart attacks, blood clots or stroke. But up to forty-five percent of people don’t get the full benefit from it. When these patients are identified through genetic testing as recommended by the manufacturer, doctors can prescribe alternative drugs.

“Traditionally, we have started a patient on one treatment, and if that doesn’t work we have moved on to the next, and so on,” says Dr. Adams. “Today, we can look at specific mutations in genes. If patients have those genes, we can tailor therapy more quickly. Genetics offers a shortcut.”

**A TREATMENT JUST FOR YOU**

The possibilities are expanding rapidly, and they’re coming too fast. “With every generation, these tests get better,” he says. “Primary care physicians have a lot on their plates, and they may have difficulty keeping up with what’s available in the latest genomics arrays.”

Keeping tabs on which tests are covered by insurance companies is another tall order. That’s where the Personalized Genomic Medicine Program comes in. “We are a resource for the community,” Dr. Adams says. In addition to testing services, “we also help primary care doctors understand what’s out there and what’s covered,” he says. “We can also explain test results to patients and then provide details directly to their own personal physician.”

The Personalized Genomic Medicine Program has five genetic counselors. Three specialize in obstetrics and gynecology, one focuses on cancer genetics, and a new counselor works with Dr. Adams on pediatric tests and other areas. Dr. Adams’ research focuses on finding new therapies for genetic diseases. These include enzyme therapy for children with phenylketonuria — a promising option for a disease that is now only controlled with strict diet.

**WHAT IT ALL MEANS**

The need for expert advice on genetic testing is growing, Dr. Adams says. Companies such as 23andMe market tests directly to consumers. “Although the results may actually be easy to understand, it can be difficult to comprehend clinical usage in daily care,” he says. “People are starting to bring these reports into their doctors’ offices, expecting a full explanation in a brief appointment.” Doctors are not necessarily prepared to absorb all the information, but they can refer these patients to the Personalized Genomic Medicine Program for a complete evaluation, Dr. Adams says.

“Direct-to-consumer companies aren’t directly reading the genes,” he says. “They’re looking at chemical markers that are associated with those genes. These are screening tests, not diagnostic tests. That’s where we can come in and either confirm or refute the findings.”

**MORE TO COME**

Genetic tests will continue to increase in power and precision, Dr. Adams says. That means even more possibilities for patients — especially children with genetic conditions and their parents. “We’ll be able to be much more precise,” says Dr. Adams. “For conditions like autism, there are hundreds of different therapies out there. Families become exhausted testing each one through trial and error. We’ll be able to tell them which treatments have a better chance of working, and which ones won’t. That will open up a new world of possibilities and remove so much frustration.”

**For more information on the Jacobs Levy Equity Management Personalized Genomic Medicine Program, visit atlantichealth.org/genomics.**
Leading the Way

Clinical Trials Let Patients Participate in Research

In health care, the state of the art is always changing. Every year, newer, better treatments and devices arrive. But before they’re widely available in hospitals and doctors’ offices, researchers test these advances in studies known as clinical trials. Atlantic Health System is a regional leader in community-based research, says Linda DiMario, RPh, RN, MSN, director of Atlantic Center for Research. At any one time, “we have about 400 active studies in many areas, from cancer and heart care to pediatrics, neurology and wound management,” she says.

In one ongoing nursing study, for example, investigators in the Wound Healing Program at Overlook Medical Center are trying to find out whether an individualized educational program can help patients with a condition called venous insufficiency avoid having repeat venous leg ulcers—and further trips to the hospital. The seven-week study is open to patients with venous insufficiency and at least one new venous leg ulcer. To learn more, call Concetta Lamore at 908-522-6156.

In another trial, the Atlantic Melanoma Center is treating patients with recurrent melanoma (skin) cancer that cannot be surgically removed. Tumors are injected with a virus that not only kills the local cancer cells but may also teach the immune system to find and eliminate the cancer throughout the body. For additional information, contact Rachelle Senzon, RN, at 973-971-7484.

There is often no cost to the patient to participate in a clinical trial, DiMario adds. In many trials, in fact, participants are paid for their time. Everything that will happen in a study, including any costs, potential risks and other considerations, is “made very clear before you take part in any clinical trial,” DiMario explains.

“When a patient enrolls in a trial, they have access to the latest devices and treatments,” DiMario continues. But they are also helping other patients all over the world gain access to new, potentially lifesaving therapies, she adds. “In oncology, only three percent of people who are eligible for trials participate,” mainly due to lack of awareness, she says. “To advance medicine and bring new drugs to the market, it’s very important to have patients take part in trials.”

Ask your doctor if you’re eligible for any trials at Atlantic Health System. Or you can visit our website, atlantichealth.org/research.

You can also hear about new studies and keep up with the latest medical research nationwide, with a new Twitter feed from Atlantic Health System. Follow @NJResearch.

Our medical center foundations will help you make a gift online, via mail or by phone.

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