


SAINT RAPHAEL'S

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March/April 2011



## The nuts & bolts of knee replacement surgery



Seniors opt for weight-loss surgery

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**About Better Health**

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**Hospital of Saint Raphael**  
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The conversation about healthcare reform rages on. The bottom line is that there will be profound changes to how healthcare is delivered, and many of those changes will benefit you – the healthcare consumer.

There are parts I find exciting because they will be extremely beneficial to patients. Provisions that expand medical, behavioral health and prescription coverage, as well as coverage for pre-existing conditions, are important. Even greater patient benefit are in elements calling for providers – hospitals, physicians, home healthcare agencies, skilled nursing facilities and others – to work together and coordinate care across the full continuum of preventive, acute, long-term and home-based care. This will require an enormous change in provider mindset – with collaboration replacing competition and care silos.

Also compelling is the increased focus on quality and patient safety. It's what healthcare should be all about, and it's my constant mantra

with Saint Raphael's staff and physicians. That focus is reflected in our work and results. Two recent examples of recognition we've received from independent, national healthcare organizations are our designation as a Primary Stroke Center and, for the fourth consecutive year, an award for clinical excellence that puts us in the top 5 percent of hospitals nationally.

Reform will require hospitals to be more efficient and provide more cost-effective care – goals many providers, including Saint Raphael's, have been working to improve. At the same time, there are enormous financial implications – from reimbursement incentives to penalties – that need more careful and thoughtful consideration for their impact on patients as well as providers.

We regularly communicate with our legislators in Washington and Hartford to make sure the revamped healthcare system works for us all. We have cared for this community for 104 years, and will make



*Attending the 2011 annual Saint Raphael/Yale-New Haven state legislative breakfast were Yale-New Haven CEO Marna Borgstrom, Saint Raphael CEO Christopher O'Connor, Sen. Joseph Crisco (in the background) of Woodbridge, and Sen. Edward Meyer of Guilford.*

whatever changes are necessary – even some that would never have been imagined by the founding Sisters of Charity of Saint Elizabeth – to ensure the continuation of that legacy well into the future.

You are why we are here.

*Chris O'Connor  
President and CEO  
Saint Raphael Healthcare System*

## *Our Vidone Birth Center delivers*

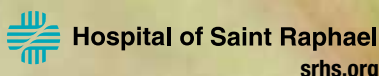
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For more information, visit [srhs.org/thebirthcenter](http://srhs.org/thebirthcenter)



## Occupational Health Plus™ services growing strong

More than 900 businesses, including staff at 52 schools, in the Greater New Haven area and beyond rely on the expansive services provided by Saint Raphael's Occupational Health Plus™ (OHP) to keep their employees healthy and their companies going strong.

Last year alone, OHP logged some 26,000 patient visits on the occupational health services side and more than 15,000 rehabilitation visits, according to Peter Amato, M.D., who has served as the organization's medical director for more than 17 years.

"We're a mature and stable organization with an excellent reputation," Amato said. "Our clinical outcomes are outstanding and we can demonstrate company and patient satisfaction."

### Wide range of services

Now entering its 20th year, OHP – with convenient locations in New Haven, Branford and Hamden – offers businesses comprehensive occupational health, physical and occupational rehabilitation services and speech

therapy for their employees.

"We offer a wide range of services and have the resources of the hospital behind us," said Linda Pettine, administrative director. "We are considered an industry leader."

Staffed by a cadre of Saint Raphael health professionals, including physicians, physician assistants, nurses, X-ray technicians and certified hand, physical and occupational therapists, OHP offers businesses many benefits.

"Our services are tailored to the needs of each company," Pettine said. "We also go on-site to assess workstations, administer vaccines and present wellness programs."

### Prevention and wellness

"We love to prevent illness in the workplace," said Amato, who is a member of the Alliance for Workers Compensation in Connecticut. "We like partnering with the community and using the time at the workplace to not only manage workers' compensation or OSHA compliance issues, but to offer businesses whatever is necessary in the way of prevention and wellness."

"On the rehab side, the majority of our patients have orthopedic or musculoskeletal issues, such as sprains and strains, arthritis and overuse syndromes, both pre- and postoperatively," Pettine said. "We also work with amputees and neurological conditions." Physician referrals are required.

### Health assessments

"Half the services we provide are in injury management," said Amato. "Our on-site programs also bring valuable health services – such as health risk assessments and hands-on, preventive screenings for blood pressure, cholesterol, etc. – to employees in the workplace. The hope is that by identifying medical issues before they become apparent, we can provide services to reduce health risks and therefore reduce medical costs and improve employee productivity.

"We're working hard to help Connecticut businesses stay strong and productive," Amato said.

**For more information, visit [srhs.org/occhealth](http://srhs.org/occhealth).**

## Office Locations – For all locations, call Client Services at 203.988.2551

### New Haven

175 Sherman Ave., New Haven, CT 06511  
203.789.3721 (Treatment Center)  
203.789.3271 (Physical, Occupational and Speech Therapy)  
Hours: Mon-Fri, 8 a.m. to 5 p.m.;  
Rehab, Mon-Fri, 7 a.m. to 5:30 p.m.

### Branford

84 North Main Street, Suite 200  
Branford, CT 06405  
203.789.5195 (Treatment Center)  
203.789.5120 (Physical, Occupational and Speech Therapy)  
Hours: Mon-Fri, 8:30 a.m. to 5 p.m.;  
Rehab, Mon-Thurs, 7:30 a.m. to 7 p.m.,  
Fri, 7:30 a.m. to 4 p.m.

### Hamden

Hamden Medical Center  
2080 Whitney Ave., Suite 150  
Hamden, CT 06518  
203.789.6240 (Treatment Center)  
203.789.6242 (Physical, Occupational and Speech Therapy)  
Hours: Mon-Fri, 8:30 a.m. to 5 p.m.;  
Rehab – Mon, Tues, Thur, 7:30 a.m. to 6 p.m.,  
Wed, 12-5 p.m., Fri, 7:30 a.m. to 12:30 p.m.

## I spent the night in the hospital – so why am I an “outpatient”?

An overnight stay at the hospital does not guarantee inpatient status for older adults on Medicare. Medicare requires your doctor to order an inpatient admission and the hospital to review and document the medical necessity. Only a qualified admission entitles you to hospital coverage benefits under Medicare Plan A (Hospital Insurance).

Odd as that sounds, Medicare Plan A only covers inpatient hospital services. If you go to the hospital and stay the night “for observation” without a doctor “admitting” you, your Medicare Plan B (Medical Insurance) – which covers outpatient services (e.g., X-rays, lab tests) and physician services – kicks in. That can mean deductibles and copayments for every treatment you receive.



### Confused?

Here’s how it works:

**Scenario 1:** You go to the ED with shortness of breath. Based on your anticipated medical needs, the physician writes an inpatient admission order, subject to review. If medical necessity is documented, you’re now covered for both emergency services and inpatient services under Medicare Plan A,

with a one-time deductible for hospital services for the first 60 days you’re in the hospital.

**Scenario 2:** You go to the ED with chest pains and the physician determines you need observation services. You’re considered an outpatient. Medicare Part A pays nothing. Part B covers ED and observation services – but you’ll have separate copayments for each outpatient service in addition to paying 20 percent of the Medicare-approved amount for doctor services. In some cases, your total copayment for outpatient services may exceed the inpatient deductible.

For overnight hospital stays, always ask your doctor if you have been admitted as an inpatient.

**For more information, visit [srhs.org/Medicare](http://srhs.org/Medicare) or call 1.800.MEDICARE (1.800.633.4227).**

*Food for the brain? Fuel for the heart? Anti-inflammatory for the joints? Some nutritionists are calling Omega-3 fatty acids a “miracle fat” essential to good health.*

*Can fat actually be good for you?*

“Yes,” says Mary Maloy, a Saint Raphael’s registered dietitian and nutritionist. “It helps protect against a number of health issues, including the management of blood sugar levels and metabolism of fats.”

Found in fatty fish (such as tuna, herring and salmon), as well as in walnuts and flaxseed, Omega-3 fatty acids have been credited with everything from keeping brain cells healthy and supporting mental alertness to encouraging the body to store carbs as glycogen – the form of blood sugar used for stored energy rather than stored fat.

Omega-3s help reduce the risk of heart attack and stroke, according to a recent report from the American Heart Association. Their research has shown that Omega-3s decrease risk of arrhythmias

(abnormal heartbeats), which can lead to sudden heart attack and death.

Other benefits of Omega-3s: They help reduce symptoms of high blood pressure; thin the blood to prevent clots; increase concentration; reduce joint pain and inflammation; improve health and the appearance of skin, nails and hair; and strengthen the immune system, lowering the risk of breast and prostate cancer.

**To learn more, visit the American Heart Association website at [heart.org](http://heart.org).**



A new trend in geriatric care:

# Seniors opt for weight-loss surgery

By Liese Klein

**From diet pills to the latest calorie-cutting plan on the market, Evelyn Kotton of Bridgeport had tried everything in her lifelong struggle to lose weight. But at 70 years old, she carried 250 pounds on her 5-foot-2-inch frame and her health was suffering.**

**“I couldn’t walk; with my weight and being so small, it was too much,” Kotton said. “I was afraid I was going to get diabetes. With all my problems I knew I had to do something, and the one thing I had to do was lose the weight.”**

Kotton’s search for health brought her to the Hospital of Saint Raphael Center for Weight-Loss Surgery. After extensive research and consultations with her primary care doctor, she chose “gastric banding,” a type of minimally invasive obesity surgery that sections off the stomach with an adjustable band.

“The surgery was the best thing that ever happened to me,” said Kotton. She’s lost more than 90 pounds since her procedure in July 2006, and she now has the energy to keep up with her niece on trips to New York.

“I have aches and pains but that’s normal at my age,” said Kotton, now 74. “I see people who are overweight and I think, ‘Why don’t you have something done? You’re hurting yourself.’”

## **A new trend**

Kotton is on the leading edge of a new trend – older patients seeking weight-loss surgery to help treat obesity and its accompanying health problems. Experts have determined that weight-loss surgery is highly effective at improving chronic conditions like diabetes, hypertension and sleep apnea



*Having shed more than 90 pounds, Evelyn Kotton’s overall health has improved since undergoing weight-loss surgery at Saint Raphael’s in 2006.*

Photo by Michael Dabiraccio

in overweight seniors. In qualifying cases, Medicare will cover the cost of weight-loss surgery for many older adults with morbid obesity and obese adults with serious health problems.

“We’re seeing more and more patients over 60 coming in,” said Murali Naidu, M.D., director of Bariatric Surgery and chief of Minimally Invasive Surgery at the Hospital of Saint Raphael. “Often, these older patients are not able to control serious conditions like diabetes or coronary artery disease, so this surgery can have real health benefits,” Naidu said. “Studies have shown significant improvement in chronic conditions.”

Weight-loss surgery can enable patients to reduce medications and increase activity, in addition to reducing the stress on the heart, lungs and joints, Naidu said.

“Although seniors often don’t lose as many pounds after weight-loss surgery as younger people, we see definite improvements in quality of life,” he added.

### Special focus on seniors

With the goal of ensuring that more seniors get support in resolving their weight and health issues,

Saint Raphael’s has launched an innovative new program that brings together surgery specialists and geriatricians.

“We are seeing many more weight problems in older people as Baby Boomers age,” said Gerard Kerins, M.D., chief of Geriatrics at Saint Raphael’s. “These people have been active in the past, but as they get older, the weight goes on and that can put them at risk for all sorts of chronic conditions like high blood pressure.”

Medication can be problematic in treating obesity in older people because they often have multiple prescriptions already, Kerins said. Major lifestyle changes can also be more difficult for seniors due to limited means and abilities. Yet left untreated, obesity can have profound negative effects on a senior’s quality of life.

“The quicker the weight problem is managed the quicker we can maximize function and help people live longer, healthier lives,” Kerins said.

Saint Raphael’s geriatricians work with bariatric surgeons to identify the potential health impact of surgery and ensure the follow-up and support is in place for seniors after surgery. Bone and joint experts and social workers can also be brought in to ensure success after obesity surgery.

“Saint Raphael’s is one of only a few hospitals that offer an integrated approach,” Kerins said. “We’re treating the overall person, which makes us unique. We work as a team using our expertise in treating seniors to maximize function. It’s not just about weight loss, it’s about improving function.”

## Weight-loss surgery by the numbers

Medicare will cover weight-loss surgery for many older adults, depending on the extent of the weight problem and how excess weight has impacted a person’s health.

To find out if you qualify, first determine your “body mass index” (BMI), a scientific way to measure an individual’s weight in proportion to height. Online calculators can help you determine your precise BMI or check the sample chart below.

Once you determine your BMI, talk to your doctor about any chronic conditions that are caused or aggravated by obesity. Commonly, these conditions include diabetes, hypertension, sleep apnea and joint problems.

“Medicare also requires documentation that previous medical treatment of obesity has been unsuccessful,” said Jessie Moore, A.P.R.N., coordinator for the Center for Weight-Loss Surgery at the Hospital of Saint Raphael. The process of getting Medicare authorization for surgery generally takes about one to two months from start to finish, Moore said.

### You are obese (BMI is 35) if your height is & you weigh

5 feet 2 inches	192 pounds
5 feet 4 inches	204
5 feet 8 inches	230
6 feet tall	258

### You are morbidly obese (BMI is 40) if your height is & you weigh

5 feet 2 inches	218 pounds
5 feet 4 inches	233
5 feet 8 inches	263
6 feet tall	295



## More benefits

Seniors who opt for weight-loss surgery may benefit from the availability of short-term rehabilitation services at the nearby Saint Raphael’s Sister Anne Virginie Grimes Health Center. By remaining within the Saint Raphael Healthcare System, patients can benefit from the continuity of care that comes with easy access to their bariatric surgeon and healthcare team. Postoperative support groups are also available.

Seniors may also benefit from Saint Raphael’s CareCard program, a free health and wellness membership program for people 55 and older that offers a variety of free and low-cost programming,

including exercise classes. Call the Healthy Aging Line at 203.789.3275 to learn more.

An upcoming program, “Senior Weight-Loss Surgery Informational Seminar,” will be offered in Branford Wednesday, March 23, from 4-5:30 p.m. Call 203.789.6237 to register, and ask for the “Senior Seminar.”

### Preparing for surgery

To be a candidate for weight-loss surgery, a patient of any age must first have a body mass index (BMI) of 35 or greater. For example, a person who is 5 foot 5 inches tall would have to weigh 210 pounds or more for a BMI of 35. In addition, insurers like Medicare look for evidence that a patient has tried to lose weight and failed, and has a significant weight-related condition like diabetes or high blood pressure.

Someone with a BMI over 40 – or weighing at least 240 pounds at 5 foot 5 inches – is considered morbidly obese and would qualify for surgery with any weight-related condition.

Staff members and physicians at Saint Raphael’s then carefully screen each patient for health conditions that might add to the risk of surgery. Nutritional assessment and support begin in the preoperative stage and are an essential part of guiding postoperative lifestyle changes. Last, each patient is evaluated to be sure he/she has the emotional and social support to ensure long-term success.

Once qualified for surgery, patients must then determine with their doctors which procedure is appropriate for their condition and lifestyle. Most patients over 60 seeking bariatric surgery opt for either an adjustable gastric band or gastric bypass, in which the stomach is made smaller and then connected directly to the middle portion of the small intestine. Both procedures greatly

## Did you know ...?

- More than 4,000 patients have lost more than 340,000 pounds at Saint Raphael’s since 1995.
- More than 400 weight-loss surgeries are performed here annually.
- Saint Raphael’s is a nationally recognized Bariatric Surgery Center of Excellence.

reduce the capacity of the stomach and result in rapid weight loss (visit [srhs.org/weightlossprocedures](http://srhs.org/weightlossprocedures)).

“The results have been really exceptional,” said Geoffrey Nadzam, M.D., a Saint Raphael bariatric surgeon who performs weight loss surgery for the center. He added that some of the most dramatic results have been seen with “brittle” diabetics, those with uncontrolled Type 2 diabetes who experience dangerous swings in blood-sugar levels. Nadzam described one 65-year-old patient who came in taking 12 medications, including 100 units of insulin a day. Six months after weight-loss surgery, the woman was down to a single medication and only 10 units of insulin per day.

“We’re talking about a huge difference in quality of life for her,” Nadzam said. “For those with serious conditions like diabetes, life expectancy is improved with weight-loss surgery at every age. For those who want to live long lives and play with their grandchildren, surgery may be a very good option for weight loss.”

### Leader in obesity procedures

As with any surgery, experienced and skilled physicians are the key to success. Saint Raphael’s has long been a leader in weight-loss (bariatric) surgery and has been

designated as a Bariatric Surgery Center of Excellence by the American Society for Metabolic & Bariatric Surgery.

Patients at Saint Raphael’s also have access to some of the region’s top cardiologists, often called in to consult on heart health before weight-loss surgery, said Ursula McMillian, M.D., a bariatric surgeon at the hospital.

“Especially with older people, we do consultations with cardiologists and multiple tests to make sure that the patient is healthy enough for surgery,” McMillian said.

### “I wish I did it years ago”

Diabetes brought Stephen Sevigny of Waterbury to the Center for Weight-Loss Surgery at Saint Raphael’s at the age of 59. He had struggled with his weight since the age of 13 and finally sought help at the urging of his doctors. Nearly 6 feet tall, he weighed 335 pounds and was gaining weight steadily as his diabetes progressed.

“It was getting out of hand,” Sevigny said. “I was sick and had become less active, so the weight went on.”

At first Sevigny didn’t think he would be eligible for insurance coverage, but his health problems qualified him for adjustable gastric banding surgery last year. So far, he has lost 80 pounds after the surgery.

“The whole procedure was the best thing I ever did,” Sevigny said. “I wish I did it years ago. It improved my life; I am more active and did things I haven’t done in years like mowing the lawn and walking. It was like I was reborn.”

*To learn more about senior weight-loss surgery services, call 203.789.6237 or visit [srhs.org/seniorweightloss](http://srhs.org/seniorweightloss). For information about outpatient and community services for seniors, call the Healthy Aging Line at 203.789.3275.*

For names of Saint Raphael weight-loss surgeons, visit [srhs.org/weightlosssurgeons](http://srhs.org/weightlosssurgeons) or call 203.789.6237; for Saint Raphael geriatricians, visit [srhs.org/geriatricians](http://srhs.org/geriatricians), or call 203.789.3972 for a listing.

## Shaw appointed chairman of Women's and Children's Services



Howard Shaw, M.D., M.B.A., has been appointed chairman of Saint Raphael's Department of Women's and Children's Services. Dr. Shaw has extensive hospital and residency program leadership experience. He has held positions as interim vice-chair and vice-chairman in the Department of Obstetrics and Gynecology at the University of Oklahoma and, most recently, served as chairman and program director in the Department of Obstetrics and Gynecology at St. Francis Hospital in Hartford. He is also former chief quality officer and vice president of the St. Francis Medical Group. Dr. Shaw earned his medical degree from the University of Kansas and his M.B.A. degree from the Isenberg School of Management at the University of Massachusetts.

He is nationally recognized as an American Board of Obstetrics and Gynecology Examiner and serves on the Accreditation Council for Graduate Medical Education's Milestones Committee. He assumes his new duties at Saint Raphael's March 7.

## New trustees, chairman take seats on Foundation Board

Four new trustees have joined the Saint Raphael Foundation Board, which oversees the fundraising activities of the Saint Raphael Healthcare System.



*Hedy S. Bush*



*Kevin G. Dougherty*



*Glenn I. MacInnes*



*John Soto*



*Michael F. Giordano*

*Hedy S. Bush* of Hamden, *Kevin G. Dougherty* of Trumbull, *Glenn I. MacInnes* of New Haven and *John Soto* of Orange have all been appointed to three-year terms, beginning in 2011. In addition, *Michael F. Giordano* of Branford has accepted a two-year term as chairman of the Foundation Board.

Bush is chief operating officer at Roebic Laboratories, Inc., in Orange. She has served on numerous community boards and is a former member of the Foundation Board.

Dougherty is employed as growth manager and first vice president at People's United Bank, where he is responsible

for the growth and operations of all New Haven County retail locations. He currently serves on the board of directors for the New Haven Chamber of Commerce and Better Business Bureau of Connecticut.

MacInnes, who has an extensive career in banking, is executive vice president and chief financial officer at NewAlliance Bank in New Haven. He has been responsible for the NewAlliance Bancshares Inc. financial operations since 2009.

Soto, president and chief executive officer for Space-Craft Manufacturing, Inc., in New Haven, is a founding member of the Progreso Latino Fund.

He has devoted countless hours to a variety of causes, including those aimed at helping Connecticut youth. He currently serves on several community boards, including the Community Foundation for Greater New Haven, and is the recipient of numerous awards.

Giordano, president of Giordano Construction and its affiliates, has served on the Foundation Board since 2004. He has been active on multiple community and construction industry-related boards and serves regularly as an arbitrator in dispute resolutions for the American Arbitration Association.

# The nuts & bolts of knee replacement surgery

By Karen Pasacreta

*It was a gorgeous day, the sun was shining, and Pamela Pitcher was keeping up with her routine: walking along the West Haven beach with her Labrador retriever. The sun may have been too bright that day, because Pitcher could hardly see what was coming next. “Two golden retrievers were running loose and hit me so hard that it dislocated my knee,” she said. “And there I was, lying there in absolute pain, and I couldn’t move.”*

Although Pitcher, now 58, had been experiencing trouble with her knees, this was the catalyst for more serious injury. “I used to do a lot of aerobics and had always been active, but my knees kept getting worse, and I did less and less,” she said.

Pitcher tried alternative therapies associated with knee pain, like cortisone shots, but the pain was pervasive. The last straw was a weekend wedding. “I danced a lot and had fun,” she said. “But I couldn’t walk for days after.”

A few months later, she woke up in a hospital bed at the Hospital of Saint Raphael, recovering from right knee replacement surgery.

## Who’s a candidate?

According to Vincent Williams, M.D., a Saint Raphael orthopedic surgeon, doctors typically try to exhaust every non-invasive procedure before making the decision to operate. A patient will first start with over-the-counter pain relievers, then move on to stronger prescription medication, and if that doesn’t work, injections. “When all of those things don’t work and the patient is still having pain and no relief, he or she is a candidate for surgery,” he said.

Although it is more typical for knee replacement patients to be older, doctors have seen a growing segment of younger patients, like Pitcher, whose knees have worn out due to overactivity from sports and damage from injuries.

“I usually tell people it is not their chronological age, but their physiological age,” said Williams,

who operated on Pitcher in 2009. “There is no such thing as being too old for joint replacement – but there is such a thing as being too sick.”

People with risk factors, such as those who are morbidly obese with a Body Mass Index (BMI) greater than 40, or those who have poorly controlled diabetes or significant cardiac lung disease prohibiting the anesthesia required for surgery, are not good candidates. The most successful are those in good physical condition.

## Did you know ...

- Saint Raphael’s Bone and Joint Center is a regional leader, performing more than 1,000 joint replacement surgeries each year.
- Saint Raphael’s performs more bilateral replacements (both knees or hips) than any other Connecticut hospital.

## The surgery

The surgery itself involves removing the damaged part of the joint and shaping the bone surfaces to hold the artificial joint. An artificial material replaces the damaged cartilage that joins the shin bone (tibia) and thigh bone (femur). Also, a small, plastic prosthesis covers the back of the kneecap (patella). This process generally takes about 45 minutes to an hour and a half and is considered routine – with an average

hospital stay of two to four days.

Anesthesia plays an important part in helping patients cope with pain and inflammation. “One of the key things that sets Saint Raphael’s apart is a regional anesthetic,” said Williams. “Instead of sedation, we administer a spinal epidural. This minimizes drugs during surgery and controls pain after.” The goal is to get patients up and moving on the first or second day following surgery.

## The recovery

Saint Raphael’s takes a team approach with nurses, physician assistants, physical therapists, anesthesiologists and surgeons committed to the patient’s recovery. “We have a collegial relationship at Saint Raphael’s,” said Saint Raphael orthopedic surgeon Philip Minotti, M.D. “Everyone works together to keep the recovery on track.”

“In general, the goal is to get back to daily activities and improve range of motion,” Minotti said. “But the priority is pain relief and restoration of quality of life.”

Minotti noted that Saint Raphael’s has long been a leader in joint replacement, including being the first hospital in New England to offer patients a new revolutionary material made from oxidized zirconium. This artificial material lasts significantly longer than traditional knee implants made from cobalt chrome or titanium, and it is strong enough to withstand heavy loads.

While there are no guarantees, a new knee can typically last 10 to 20 years, depending on an individual’s activity.

*Today, Pitcher works out regularly with personal fitness trainer, Linda Frost.*



Photo by Michael Dabiraccio

### **Good results require therapy**

Good results take dedicated physical therapy and, like Pitcher, patients will immediately require either inpatient or outpatient therapy to restore muscle strength. For patients who don't have good support at home and need additional therapy, inpatient rehabilitation allows them to receive daily intensive therapy for a brief period of time, setting the stage for a speedy recovery.

The Saint Raphael Healthcare System is equipped with a new orthopedic postoperative recovery unit, an Intensive Rehabilitation Unit, the Sister Anne Virginie Grimes Health Center and three outpatient therapy sites.

"Patients who choose to remain within our system can benefit from several distinct advantages," said John Tarutis, assistant vice president, Rehabilitation Services. "First, the patient remains at a convenient location where their surgeon or other clinicians

can easily access them and their most current medical data. This medical oversight is not found outside of our system. Secondly, the patient can often be followed by the same therapy staff, which improves continuity, the quality of their experience and hastens recovery.

"We have shorter lengths of stay than national benchmarks and our satisfaction surveys tell us nearly 100 percent of our patients would recommend our services," Tarutis said.

While patients of any age can benefit from joint replacement therapy at the Grimes Center, a new program for seniors brings together orthopedic surgeons and geriatricians to ensure that care is seamless and focused, according to Gerard Kerins, M.D., Saint Raphael's section chief of Geriatrics and medical director of the Grimes Center. "We look at the whole person and maximize their function in that context," Kerins said.

### **A positive attitude**

Pitcher has kept a positive attitude and has worked hard since undergoing knee replacement surgery. "The best results are achieved when people adopt a can-do attitude," said Minotti. "The amount of work a patient puts into recovery pays dividends in their results."

Since her surgery, Pitcher works out twice a month with her trainer and is able to do things she couldn't do before. "I had a lot of limitations before," she said. "I couldn't bend or squat or anything like that and I can do that now. It's really improved my life."

***To learn more, visit [srhs.org/boneandjoints](http://srhs.org/boneandjoints) or call Saint Raphael's Bone and Joint Center at 203.789.4140. For more information about Saint Raphael's outpatient and community services for older adults, call the Healthy Aging Line at 203.789.3275.***

**For names of Saint Raphael orthopedic surgeons and geriatricians, visit [srhs.org/orthopedicphysicians](http://srhs.org/orthopedicphysicians) or [srhs.org/geriatricians](http://srhs.org/geriatricians), or call 203.789.3972 for listings.**

## *Honoring Lena:*

### Newly renovated Vidone Birth Center opens its doors

More than 46 years ago, doctors helped former Pathology Chairman Romeo Vidone, M.D., and his late wife, Lena, start a family. Now, Dr. Vidone is honoring his wife's memory and helping future mothers who choose to have children at Saint Raphael's.

Dr. Vidone donated \$1 million to the renovation of the hospital's maternity unit in honor of Lena, who passed away in August 2010. The state-of-the-art facility, known as the Dr. Romeo A. and Lena B. Vidone Birth Center at the Hospital of Saint Raphael, welcomed its first patients in January.

"Over the years, life has been very good to us," Dr. Vidone said. "We were looking for something as a memorial to my wife. The Birth Center fit very well."

#### Life-changing

The birth of her children was a life-changing experience for Lena Vidone. After she experienced infertility problems for the first nine years of their marriage, Lena was successfully treated and went on to have three children, Debra, Linda and Marc.

"It really is a very appropriate gift for my mother, given her history," said Debra Vidone Levin, R.N., a longtime registered nurse at Saint Raphael's and a current member of the Family Health Center staff.

"My mother gave me a doctor's appointment card from her infertility treatment in 1964. It was the start of another life for her. I had my two children at Saint Raphael's. I've always been a part of the Saint Raphael family. This is our way of giving back."

#### Family-centered

The \$2.2 million Vidone Birth Center was constructed with a "family-centered" design utilizing soothing colors and lighting. The new center features a welcoming lobby with a concierge desk, and a comfortable waiting room with television and refreshment bar. The design of the postpartum unit is family-focused with tables and chairs in patient rooms to accommodate visitors and includes an area in the main unit for families to meet outside of patient rooms. Other features include spa-like services for new moms.

Patients of the renovated unit may also benefit from Saint Raphael's advanced services for premature and



Members of the Vidone family, including (from left) Linda S. Vidone, M.D., Joseph Romeo Levin, Romeo Vidone, M.D., Marc H. Vidone, Debra Vidone Levin and the Honorable Bruce Levin, attended a reception for the new Vidone Birth Center in January.

at-risk babies, including the Newborn Intensive Care Unit and special testing and care for high-risk patients in the Maternal Fetal Medicine Unit.

"We are thrilled to have the support of Dr. Vidone and his family as we complete this important project," said Saint Raphael President and CEO Christopher O'Connor. "The Vidone Birth Center is a wonderful tribute to a family that has exemplified the mission of Saint Raphael's for many years."

Dr. Vidone joined Saint Raphael's in 1977 as a chairman of the Pathology Department. Prior to that, he had served in the U.S. Navy, was an assistant professor of pathology at Yale University School of Medicine and chairman of pathology at Charlotte Hungerford Hospital in Torrington. He left the chairman post at Saint Raphael's in 2003 but still works part-time as an attending pathologist.

"This gift makes a lot of sense professionally and personally," Dr. Vidone said. "I think it's important for the city to have another fine birthing center like this, and Saint Raphael's is at the forefront of medical care."

*Saint Raphael's offers a full range of sophisticated and compassionate healthcare for women and children. For more information, call 203.789.3661 or visit [srhs.org/womenandchildren](http://srhs.org/womenandchildren). To learn more about the Vidone Birth Center, visit [srhs.org/thebirthcenter](http://srhs.org/thebirthcenter).*

## Magical gala raises funds for patient care



Three hundred and eighty-five was the “magic number” for Saint Raphael’s Crystal Ball, held Dec. 4th at Woodwinds in Branford. That’s a record number of guests for this annual fundraiser, which featured a magical evening of food and entertainment

and generated more than \$103,000 to benefit patient care at the Hospital of Saint Raphael and the Sister Anne Virginie Grimes Health Center. Diane Wishnafski, a Saint Raphael Foundation trustee – pictured here with Saint Raphael President and CEO Chris O’Connor – served as chair of the black tie event. Anthem Blue Cross and Blue Shield of Connecticut was the Diamond Sponsor and an additional 25 New Haven-area companies were event sponsors. Playing off the “magic” theme, local magicians joined live musicians and celebrity “Mind Illusionist Manlow” to provide the evening’s entertainment.

## Walter Camp Football Foundation honorees visit Saint Raphael’s

Walter Camp Football Foundation honorees visited the Hospital of Saint Raphael Jan. 14, as part of the 44th annual Walter Camp Weekend. Players visited and signed autographs



for patients in the hospital’s inpatient Children’s Psychiatric Emergency Services unit as well as an inpatient surgical unit. The visit was part of Walter Camp Weekend, which celebrates college football’s top players with events in New Haven. Here, honorees visit with Luis Valez of Hamden, a patient on one inpatient surgical unit. From left are Tarek Saleh, formerly of the Carolina Panthers; Chas Henry, Florida University (in back); Jake Kirkpatrick, Texas Christian University; Jim Dombrowski, formerly of the New Orleans Saints; TeJay Johnson, Texas Christian University, and Aaron Beasley, formerly of the New York Jets.

## More frequent dialysis shows benefits

More frequent dialysis treatment improves outcomes for some patients with kidney failure, according to a clinical research project chaired by Alan Kliger, M.D., senior vice president, chief medical officer and chief quality officer at Saint Raphael’s.



Dr. Kliger, a nationally known expert on kidney function and diseases and chairman of the Frequent Hemodialysis Network, presented the findings of the National Institutes of Health-sponsored project with his colleagues at the American Society of Nephrology meeting in Denver in November. The results were published in the Dec. 9, 2010, issue of *The New England Journal of Medicine*.

The multi-center project involved two studies, both randomized controlled trials, each one year in length. One study compared daily (six times a week) in-center hemodialysis to conventional three-times-per-week, in-center dialysis. The more frequent treatments showed a clear positive effect with improvements in the size of the heart muscle and quality of life, although patients needed more repairs to the shunt in their arms.

The second study compared six-times-per-week, overnight at-home dialysis with conventional three-times-per-week at-home dialysis. Results were not as clear, although some positive changes were observed.

This is the first randomized controlled trial of daily dialysis and only the second such study for nocturnal home hemodialysis. To access the article, visit [nejm.org](http://nejm.org).

# a survivor's story

Thyroid cancer survivor enjoys new lease on life

Mark DiGrazio's parents had complained about Mark's increasingly loud snoring for two months. But when DiGrazio sought medical care for snoring and weight issues two years ago, he didn't expect to be diagnosed with thyroid cancer. *Better Health* writer Tricia Stuart recently spoke with DiGrazio about his surgery at the Hospital of Saint Raphael and how he got through a cancer diagnosis with the help of support groups at Saint Raphael's Father Michael J. McGivney Center for Cancer Care.

DiGrazio, a Hamden resident, had a family history of hypothyroidism – or underactive thyroid – a condition that upsets the normal balance of chemical reactions in the body and, over time, can cause a number of health problems ranging from obesity to heart disease. He decided to have his thyroid checked – but he didn't expect the outcome: An ultrasound revealed two tumors in his thyroid, and a third was confirmed later during surgery.

DiGrazio, who was 24 at the time, was diagnosed with papillary thyroid cancer, a common type of thyroid cancer that can occur at any age but generally affects those between the ages of 30 and 50 and occurs more frequently in women than men. While early thyroid cancer often has no symptoms, they may eventually include a lump in the front of the neck, hoarseness, swollen lymph nodes, trouble swallowing or breathing, or a pain in the throat or neck that does not subside.

"Thyroid cancer can cause airway problems," said Craig Hecht, M.D., a Saint Raphael ear, nose and throat surgeon. "If the cancer has spread to other vital organs, then the cancer cannot be treated, so it's best to stop it in the early phase. Surgery can save lives," he said.

DiGrazio, who was referred to Hecht by his primary care physician, underwent a thyroidectomy – or removal of the thyroid – on March 30, 2009.

"The thyroid is shaped like a butterfly," Hecht explained. "Since cancer was found in both wings, the entire thyroid gland was removed."

According to Hecht, DiGrazio was in good hands at Saint Raphael's. "I believe Saint Raphael's has the best anesthesia department to manage the airway and it has advanced technology for treating this kind of cancer, one of the most common cancers in young adults," he said.

After surgery, some patients, like DiGrazio, receive radioactive iodine, which is usually taken by mouth. Radioactivity treats cancer cells outside of the thyroid that might not have been detected. "It's a safety measure," Hecht explained.

Today, thyroid hormone is given to regulate DiGrazio's metabolism – something the thyroid gland used to control – and the dosage is rechecked every one to two months.

According to DiGrazio, cancer and recovery have made him more aware, and he has learned not to put things off. "Cancer makes you a little paranoid," he said. "You think any symptom can be more



For 26-year-old Mark DiGrazio, life is back to normal thanks to surgery and support groups at Saint Raphael's.

cancer. You don't take things for granted."

DiGrazio, an avid reader and photographer who returned to his sales job at Home Depot a month after surgery, is now cancer free. He said he feels closer to family and friends and enjoys spending time with them and helping others who are going through cancer treatment.

The weekly support that DiGrazio gets from other patients at Saint Raphael's Father Michael J. McGivney Center for Cancer Care has helped tremendously. "Without them I'd be lost," he said. "They've become a second family for me. They know what you're going through because they've been there. I probably wouldn't have gotten through this without them."

*Saint Raphael's offers comprehensive cancer services at its Father Michael J. McGivney Center for Cancer Care, including a new Head and Neck Cancer support group. Call 203.789.3131 or check out available support groups at [srhs.org/lookingforwardcalendar](http://srhs.org/lookingforwardcalendar).*

For names of Saint Raphael otolaryngologists, visit [srhs.org/earnoseandthroatphysicians](http://srhs.org/earnoseandthroatphysicians), or call 203.789.3972 to request a listing.

The Saint Raphael Healthcare System is pleased to provide readers of *Better Health* magazine with a bi-monthly listing of Saint Raphael-sponsored activities. All are open to the public and are free of charge, unless otherwise noted.

### Classes/Workshops/Lectures

#### Look Good, Feel Better Workshop

*Women currently being treated for cancer*

First Monday of Every Month, 11 a.m. - 1 p.m.

Father Michael J. McGivney Center for Cancer Care, New Haven  
Call Patty Perry, B.S., 203.789.5904 or e-mail [pperry@srhs.org](mailto:pperry@srhs.org).

#### Diabetes Healthcare Program

*Anyone with diabetes; a significant other may attend with person with diabetes. Physician referral necessary.*

Four Tuesday afternoons from 3-5:30 p.m. or

Four Wednesday mornings from 9-11:30 a.m.

Hospital of Saint Raphael; Cost: Covered by most insurance  
To register, call 203.789.3391.

#### Preparing for Spinal Surgery

*Patients scheduled for spinal surgery at Saint Raphael's and their family member or friend*

Second Thursday of each month from 11 a.m. - 12:30 p.m.

Orchard Medical Building, Rm 315, Saint Raphael's.  
Snack provided, free parking; Register online at [srhs.org/spinaleducation](http://srhs.org/spinaleducation), or call the Healthy Aging Line at 203.789.3275.

#### Weight Loss Surgery Informational Seminars

Wednesday, April 6, 5:15 p.m.; Saturday, April 23, 10 a.m.

Wednesday, May 4, 5:15 p.m.

Cronin Auditorium at Saint Raphael's

#### Online Webinar – Saturday, March 19, 10 a.m.

Register online at [srhs.org](http://srhs.org) (Select "Obesity Services," then "Where to Start"), or call 203.789.6237.

#### Cholesterol Screening

*For the general public*

Wednesday, March 9, 7-9 a.m.

Our Lady of Victory Church, West Haven, CT; Cost \$15  
This is a fasting screening; no food or drink after midnight the night before. Registration required. Call 203.789.3275 to register or for more information.

#### Heartsaver CPR Classes

*For the general public*

Adult, Child and Infant CPR and Use of AED

March 24, 6-9 p.m.; March 26, 9 a.m. – 12 p.m.; April 9, 9 a.m. – 12 p.m.; April 12, 6-9 p.m.; May 5, 6-9 p.m.; May 14, 9 a.m. – 12 p.m.

All classes to be held in the Hospital Cafeteria Conference Room  
Cost: \$65 per person; pre-registration is required.  
Call 203.789.3278 or e-mail [jcunneen@srhs.org](mailto:jcunneen@srhs.org).

#### Care for the Caregiver

*An Educational Program for Family Cancer Caregivers*

Thursday, April 14 and 21, 5:30-8 p.m.

Father Michael J. McGivney Center for Cancer Care  
659 George Street, New Haven, CT  
Dinner will be provided; free parking. Call 203.789.3121 or 203.789.3946 to register.

#### Oral, Head and Neck Cancer Screening

*For adults over 40, history of tobacco/alcohol use*  
Wednesday, May 11, 3-6 p.m.

Father Michael J. McGivney Center for Cancer Care  
New Haven, CT  
Call 203.789.3275 for more information or to register.

### Spine Lecture Series

*Presented by Saint Raphael Spine Physicians*

Call 203.789.5997 to register for:



#### Minimally Invasive Spine Surgery

Shirvinda Wijesekera, M.D.

Wednesday, March 9, 6 p.m.

3 Corporate Drive, Scinto Auditorium,  
Shelton, CT

#### Low Back Pain

Jeffrey Sumner, M.D.

Thursday, April 7, 6 p.m.

New Haven Public Library, 133 Elm  
Street, New Haven, CT

#### Advances in Spine Care

Kenneth Kramer, M.D.

Wednesday, May 11, 6 p.m.

Milford Public Library, 57 New Haven  
Ave., Milford, CT

#### Spring Bereavement Seminar

Saint Raphael's Bereavement Office is offering the following two-part educational seminar to provide comfort and information to those who are bereaved:

##### Part 1: Journey of Grief

Wednesday, April 27, 5:30-7 p.m.

##### Part 2: Tools for the Journey

Wednesday, May 4, 5:30-7 p.m.

Call 203.789.3247 for more information and to register.

#### Spring Bereavement Support Group

*Professionally facilitated small groups. Attendance in two-part Bereavement Seminar (above) is required.*

Wednesdays, 5-6:30 p.m.: May 11 and 18; June 1, 8, 15, 22, 29.

Group size is limited. Call 203.789.3247.

*continued on back cover*



Wellness Corner & Healthy Living Calendar – continued from page 15

### Support Groups

#### Head & Neck Cancer Support Group

*For patients with head and neck cancer*  
**Second Tuesday of each month, 5-6:30 p.m.**  
Father Michael J. McGivney Center for Cancer  
Care Conference Room  
For more information, call 203.789.3131.

#### Stroke Support Group

*Patients who have had a stroke and their caregivers*  
**Last Tuesday of each month, 1:30-3:30 p.m.**  
Hospital of Saint Raphael, Cafeteria Conference Room  
To register, call Katie Novak at 203.789.3362.

#### General Cancer Support Group

*For patients and their caregivers*  
**Every Wednesday, 6-7:30 p.m.**  
Father Michael J. McGivney Center for Cancer Care  
For more information, call 203.789.3131.

#### Prostate Cancer Support Group

*For patients and their caregivers*  
**First Thursday of Each Month, 6-7:30 p.m.**  
Father Michael J. McGivney Center for Cancer Care  
For more information, call 203.789.3131.

#### Breast Cancer Support Group

*For women living with breast cancer*  
**First and third Tuesday of every month, 5:30-7 p.m.**  
Father Michael J. McGivney Center for Cancer Care  
659 George Street, New Haven, CT  
For more information, call 203.789.3131 or  
203.789.3946.

### Health Fair Sessions

#### For Your Health

*Open to the general public as well as hospital employees*  
*Sponsored by the Hospital of Saint Raphael Apothecary*  
*and Wellness Center; pharmacists will focus on a*  
*different health topic each month:*

**Thursday, March 17, 12-2 p.m. (Asthma Education)**

**Thursday, April 27, 12-2 p.m. (Cancer Awareness)**

Hospital of Saint Raphael Cafeteria

For more information, call the Apothecary and Wellness  
Center at 203.789.4076.

### “Humor and Health”

A funny and inspirational lecture for the public that  
examines the relationship between humor and the health  
of the individual, community or society.

*Presented by:*

**Patch Adams, M.D.**

*World-Renown Physician and  
Clown*

**Thursday, March 31, 6 p.m.**

John Lyman Center for the  
Performing Arts, SCSU  
501 Crescent Street,  
New Haven, CT



Sponsored by the Saint Raphael Healthcare System and  
Southern Connecticut State University Department of  
Nursing. Admission is free. Call 203.392.6154 for tickets, or  
visit [tickets.southernct.edu](http://tickets.southernct.edu).

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