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NEW OUTPATIENT PAVILION

NEW PHYSICIAN PRACTICES

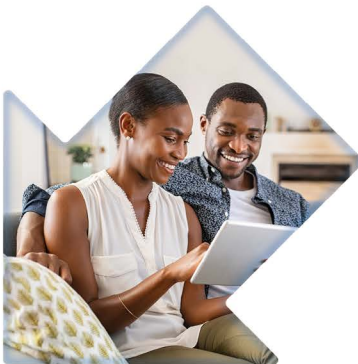
ADVANCING WOMEN'S HEALTH

TRANSFORMING PALLIATIVE CARE



# EXPANDING HEALTHCARE

## Throughout Our Region



NOW IN MORE NEIGHBORHOODS

DIGITAL HEALTH TECHNOLOGIES

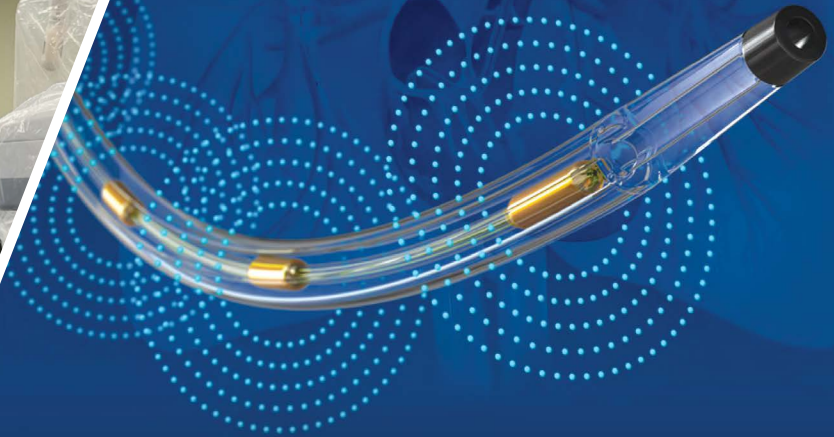
ORTHOPEDIC SURGERY CENTER

COMPREHENSIVE STROKE CENTER



Jeremy Bock, MD, FACC

## The Newest Minimally Invasive Procedure for Pulmonary Embolism



EKOS+ uses targeted ultrasonic waves to break up blood clots.

IMAGE COURTESY OF BOSTON SCIENTIFIC

A patient in his early 80s arrived at VHC Health with difficulty breathing and a worsening cough after long-distance air travel. A CT scan of his chest showed large blood clots in the arteries serving his left and right lungs. Such large clots, called pulmonary emboli, prevent the right side of the heart from effectively pumping blood to the lungs for oxygenation. Determined to be at high risk for life-threatening complications from the pulmonary emboli, the patient was a prime candidate for a minimally invasive procedure using the new EKOS+ catheter. EKOS+ uses targeted ultrasonic waves to break up the blood clots, which are then dissolved using a strong blood thinner.

“Our patient did very well,” says Jeremy Bock, MD, FACC, interventional cardiologist, VHC Health Physicians. “His clots were completely treated within a four-hour period. Not only did the patient not require admission to the intensive care unit, he was able to be discharged home the following day.”

In July, VHC Health was selected as one of the first five hospitals in the country to use EKOS+ because of its success and volume in treating large pulmonary emboli.

“VHC Health is looking to be a trailblazer, not just staying current with technology,” Dr. Bock says. “As a community hospital that is moderate in size compared to large, multi-hospital organizations, we have the technology and advanced treatments for pulmonary embolism that often exceed what larger systems have.”

Since 2016, VHC Health has successfully treated hundreds of patients with large pulmonary emboli using EKOS (EkoSonic™ Endovascular System), the first generation of this catheter-based device. “EKOS has proven to be highly reliable, effective and safe, and we still use it to treat 80 percent of these patients,”

Dr. Bock says. “The new EKOS+ is specifically targeted to help our most critically ill patients with a massive pulmonary embolism who are at greater risk of dying. Time is of the essence—they need prompt, aggressive treatment to resolve the clot. The EKOS+ is more powerful than EKOS, enabling us to better resolve more clots in a shorter time.”

Most pulmonary emboli form from a blood clot that travels up from deep veins in the legs to the lungs. Symptoms to watch for include sudden shortness of breath, a racing heart, chest pain and fainting. Swelling and pain in the legs, especially the lower back area, can be another sign.

Long plane or car rides, when people sit in cramped spaces for extended periods of time, can increase the risk of developing clots. So can illnesses such as heart disease and COVID-19.

“The number of patients with these clots is increasing, especially in the COVID era,” Dr. Bock says. “COVID causes the body to predispose to making clots.”

Dr. Bock points out that not all patients require either version of EKOS; smaller clots can be managed well with oral blood thinners. But larger clots are associated with a higher risk of long-term problems and death. For those patients, VHC Health has had great outcomes with EKOS and now with EKOS+. Not only do these advanced procedures rapidly improve patients’ clinical status, they often decrease length of stay in the hospital, particularly in the intensive care unit.

“The majority of patients I see for follow up after EKOS treatment are not having residual symptoms such as shortness of breath, chronic fatigue, strain on the right side of the heart and swelling in their lower extremities,” Dr. Bock says. “They are completely free of these long-term effects.”

**“We have the technology and advanced treatments for pulmonary embolism that often exceed what larger hospital systems have.”**

—Jeremy Bock, MD, FACC

More than 20 percent of people have patent foramen oval (PFO), a congenital heart condition they'll never know about. PFO is a type of hole in the heart.

PFO is a remnant from when a baby is in utero. In all babies, a small tunnel—the foramen ovale—allows blood containing oxygen from the mother to move from the right to left upper chambers of the heart, skipping the baby's lungs because the blood already has oxygen from the mother. When babies take their first breath, a tissue flap covers the tunnel and typically seals the opening.

However, about 20 percent of the time, the flap does not close completely, which means a small amount of blood can still pass from the right to left side of the heart. For most of these people, PFO causes no medical problems, and they have no idea they have this condition and live normal lives.

But in a small percentage of people, PFO can lead to stroke. "There are tiny blood clots in the leg veins, which the lungs filter out. With PFO, a clot could enter the left side of the heart and then possibly go to the brain, resulting in a stroke," explains **Benjamin Z. Galper, MD, MPH, FACC, FSCAI**, Director, Structural Heart Disease Program, Mid-Atlantic Permanente Medical Group, and Co-Director, Louise Sands Olmstead Cardiac Catheterization Lab, VHC Health.

That's what happened to Souhail, who was 41 years old when he suddenly fell to the ground and lost movement on his left side. "I thought it was vertigo, not realizing that I was having a stroke,"

he says. "I had no history of blood clots or heart issues." His wife drove him to VHC Health, where an ultrasound of his heart revealed PFO.

Kaiser Permanente member Rose Dezerger, 45, also had no known stroke risk. "I was in the military and never had any heart issues," she says. One day she woke up, unable to use her left hand or swallow. Her husband noticed her face drooping, a telltale stroke symptom, and immediately called EMS. After an extensive stroke workup, Rose was referred to Dr. Galper for more testing and a PFO was diagnosed.

"When someone younger than 60 years of age has a stroke without any identifiable risk factors, such as coronary artery disease, high cholesterol, atrial fibrillation or a blood clotting disorder, we would do a thorough evaluation to determine if PFO might be the cause," says **R. Preston Perrin, MD, FACC, FSCAI**, Chief of Cardiology, VHC Health.

"That sounds ominous, but it's not," says **Charanjit Khurana, MD, MRCP, FACC, FSCAI**, VHC Health Physicians Cardiology. "Of all the people with PFO, only a small percentage would have a stroke," Dr. Khurana says.

"It's so unlikely to cause a problem that doctors do not close a PFO unless the person has a stroke," Dr. Galper adds.

But when a stroke happens, there's an effective, minimally invasive procedure to seal the opening. It involves an X-ray and intracardiac echocardiogram, a way of visualizing the cardiac chambers by passing a tiny probe up a leg vein to the heart. In a catheter procedure, two



Close-up view of wire-mesh discs

wire-mesh discs are placed on either side of the PFO to sandwich it closed. Within three to six months, the discs are covered by heart tissue. It is a permanent implant.

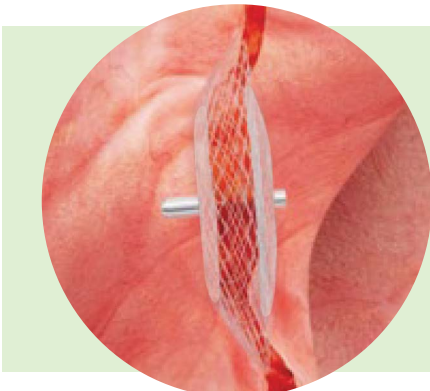
"The procedure is well tolerated and recovery is easy," Dr. Perrin says, adding that patients usually go home the same day. "No heavy lifting for five days and avoid submerging the vein puncture site in water for a week. Otherwise, it's activity as tolerated."

Plus, outcomes are good. Since Dr. Khurana performed his procedure, Souhail says he feels normal. Four days after Dr. Galper closed Rose's PFO, she was back to walking her dogs.

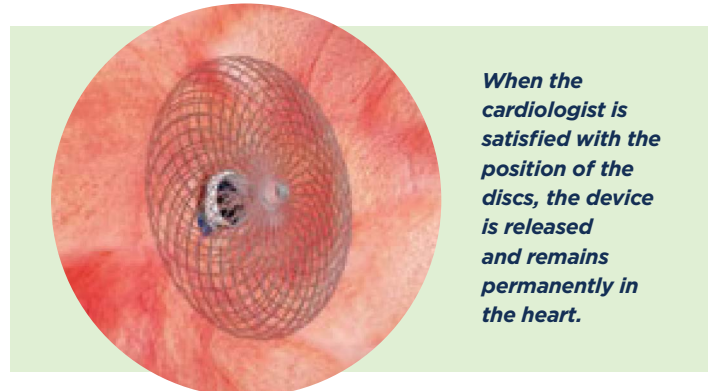
What's more, "research shows that closing the PFO opening, reduces the risk of a future stroke by 60 to 70 percent," Dr. Galper says.

"That's key," Rose says. "It's nice to know I don't have to worry about having another stroke."

## PATENT FORAMEN OVALE (PFO) PROCEDURE



*In a catheter procedure, two wire-mesh discs are placed on either side of the PFO to sandwich it closed.*



*When the cardiologist is satisfied with the position of the discs, the device is released and remains permanently in the heart.*

# WOMEN'S

# Health

## VHC HEALTH'S MULTIMILLION-DOLLAR INVESTMENT TO ADVANCE THE HEALTH OF WOMEN IN OUR COMMUNITY

In fall 2023, a comprehensive center for Women's Health will open in the new Outpatient Pavilion. Led by a team of female physicians, Women's Health will offer coordinated, accessible services with the most advanced technology and therapies in one convenient location. The center will offer OB/GYN, maternal fetal medicine, genetics, breast health, cardiology, colorectal surgery, urology and a complete spectrum of services to address women's health and wellness at any age.

### KNOW YOUR HEART NUMBERS

"Many women are surprised to learn that the leading cause of death among women is heart disease," says Preya Simlote, MD, VHC Health Physicians Cardiology. "They think it's breast cancer. There is a lot of emphasis on getting regular breast cancer screenings, but cardiovascular screening is just as important."

The three main risk factors for heart disease are diabetes, high blood pressure and elevated cholesterol levels, so it's important to know what your blood sugar, blood pressure and cholesterol numbers are. Other risks that are more specific to women include early onset of menopause and a history of pregnancy complications such as high blood pressure, preeclampsia and gestational diabetes.

"Family history is also extremely important in determining the risk of cardiac disease," Dr. Simlote says.

"We want to know about familial premature cardiac disease—before age 60 in women and before age 55 in men."

Compared to men, women experience atypical heart attack symptoms that may present as acute neck, jaw or back pain. Also watch out for changes in physical capabilities, such as being unable to

exercise at your usual level. That could be an indication of angina—chest pain caused by reduced blood flow to the heart. "If you experience chest pain or shortness of breath, especially with exertion, consider having an evaluation for cardiac disease," Dr. Simlote advises.

### STAY UP TO DATE ON COLORECTAL CANCER SCREENING

Colorectal cancer is the third most diagnosed type of cancer in the United States, according to the American Cancer Society, but only 70 percent of adults ages 50 to 75 are up to date with screening, states the Centers for Disease Control and Prevention.

"Early detection is the best protection against colorectal cancer, which affects men and women equally," says Anna Matrachisia, MD, VHC Health Physicians Colorectal Surgery. Screening should start at age 45 for people of average risk. A family history of colorectal cancer increases risk, and the age of the relative who was diagnosed dictates when you should get screened.

"Colonoscopy is the gold standard for colorectal cancer screening because I can clearly see if there is a lesion or polyp during the procedure," Dr. Matrachisia says. "There are several types of benign polyps, but certain types can progress to cancer. If I find a polyp, I can remove it and send it for further testing."

For good colorectal health, Dr. Matrachisia advises women to see their doctor if they notice anything new or any concerning symptoms, particularly rectal bleeding and a change in bowel habits, such as new diarrhea or constipation, as well as bloating, weight loss and abdominal pain. "It's important to get checked out," she says.

### KEEPING YOUR PELVIC FLOOR STRONG

"Pelvic floor issues can affect the back, abdominal muscles and hips, and increase anxiety and stress," says Sandy Austin, OTR/L, Director of Rehabilitation. "Our physical therapists are specially trained to treat any pelvic health diagnosis in patients 14 years and older."

Physical therapy can help with many conditions, including chronic constipation, urinary and fecal incontinence, and prenatal and postpartum issues. "Women don't know how effective pelvic floor therapy can be. They often think they just have to live with these issues," says Austin.

Pregnancy, labor and delivery can cause incontinence; women who have more than one pregnancy are at higher risk. Pelvic floor exercises can strengthen muscles to prevent incontinence from worsening or rectify the problem entirely. Physical therapy helps in other ways, too, including preparing the body for labor and delivery. Prenatal therapy focuses on pelvic floor coordination, mobility, birthing strategies and urinary leaking prevention.

"Not only can physical therapy improve pelvic health to reduce pain and discomfort, it improves your quality of life," Austin says. "For instance, if you're experiencing incontinence, you may worry about going out and socializing. If you have pain, that could affect intimacy. Physical therapy gives you your freedom back."





## THE ADVANTAGES OF HORMONE THERAPY

“Hormone therapy is an effective preventive measure for osteoporosis, the degenerative disease that weakens bones, particularly in post-menopausal women,” says **Terri Remy, MD, FACP**, VHC Health Physicians Primary Care. “Unfortunately, many women have the impression that hormone therapy is risky for them, largely due to the 2002 Women’s Health Initiative study, which found that a combined therapy of estrogen and progesterin increased the risk of breast cancer.”

“That has come at a cost to their health,” Dr. Remy says, “because many women opted not to have hormone therapy and subsequently developed osteoporosis that may have been prevented. Now we know the risks are lower than originally thought. After five years on combined therapy, the risk of breast cancer does increase slightly—equivalent to the same risk as having a glass of red wine every day. Today, we also can give estrogen alone as a safe, effective option.”

The menopause transition (also called perimenopause) may begin in the late 40s, and most women enter menopause in their early 50s. In addition to preventing bone loss, hormone therapy can treat menopausal symptoms such as hot flashes, night sweats and disrupted sleep.

“The severity of symptoms is different for every woman,” says Dr. Remy, a board-certified internal medicine physician and Certified Menopause Practitioner. “Treatment decisions must be tailored to each patient’s unique needs.”

## GOOD UROLOGIC HEALTH AT ANY AGE

“Women who have pelvic pain, recurrent urinary tract infections, and urinary incontinence and dysfunction often tell me they should have sought help years sooner than they did,” says **Olga Povcher, MD**, VHC Health Physicians Urology. “There’s a misconception that these conditions are part of normal aging. While they are common, they are not normal. They can affect women of all ages, but can become more prevalent after menopause. Patients are relieved to know there are effective treatment options.”

Another common problem Dr. Povcher treats is pelvic organ prolapse. When non-invasive treatments do not work, surgical treatment may be the best solution. She is experienced in performing minimally invasive vaginal robotic and laparoscopic surgery. Dr. Povcher collaborates closely with gynecological and colorectal surgeons for complete, coordinated care.

“Generally, we see improvements and patients’ quality of life is better,” Dr. Povcher says. “The conditions I treat tend to be elective, not life-threatening. As a result, women don’t make getting treatment a priority. But, these issues can affect their quality of life—they often reduce social activities, travel and other outings.”

“If you suspect you have a problem, reach out to us to consider a consultation, learn about your options and decide whether to pursue treatment,” she says. “A lot of these issues can be improved, no matter what age you are.”



## ANNUAL MAMMOGRAMS THE BEST PROTECTION AGAINST BREAST CANCER

The Reinsch Pierce Family Center for Breast Health is using a new technique for breast mastectomies that spares nerves. “Technological advancements provide better material for grafting nerves that can improve feeling and sensation in the breast after surgery,” says **Molly Sebastian, MD, FACS**, breast surgeon.

The center’s plastic and reconstructive surgeons, **Marilyn Nguyen, MD**, and **Ping Song, MD**, also offer the complete spectrum of oncoplastic services—reconstructive procedures for patients with breast cancer that result in better cosmetic outcomes. “Oncoplastic techniques to achieve breast symmetry are addressed as part of their treatment plan,” Dr. Sebastian says. “For women who delayed having reconstruction at the time of their breast surgery, breast reconstruction can still be an option—even after many years.”

Good breast health starts with annual mammograms, which typically begin at age 45, but women with a family history of the disease should begin sooner.

“If your mother had breast cancer at 50, we subtract 10 years and want to screen every female relative of hers from age 40 on,” Dr. Sebastian says.

How long should you continue to have mammograms? “Guidelines say mammograms can stop at age 75, but not all women are the same,” says Dr. Sebastian. “If a woman expects to live another 10 years, then she should get her mammogram.”

# OUTPATIENT PAVILION

OPENING SUMMER 2023



## Comprehensive Outpatient Services in One State-of-the-Art Facility



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Outpatient Surgery

# PALLIATIVE CARE 'SAVES YOUR SOUL'

## EXPANDING CARE TO PROVIDE RELIEF FROM PAIN AND OTHER SYMPTOMS OF SERIOUS ILLNESS

Palliative care relieves suffering and improves the quality of life for people living and dying with chronic and incurable illnesses. It can be provided at any stage of illness.

The need for palliative care is great. The Center to Advance Palliative Care estimates approximately 6 million people in the United States could benefit from palliative care. In Virginia, there are only 2.6 certified prescribing palliative care providers per 100,000 residents. This is why **Michael Westerman, MD**, VHC Health Physicians Palliative Medicine, is leading VHC Health's initiative to develop coordinated, comprehensive palliative care services. "We need to expand the type of clinical and multidisciplinary activities in which the palliative care team is expert, and educate patients, families and the community about their options," he says.

Palliative care teams comprise physicians, advanced practice providers, nurses, social workers, therapists and others. They provide relief from pain and other symptoms of serious illness; incorporate holistic approaches in treatment; assist with financial concerns; and address spiritual questions. Most importantly, palliative care puts patients in charge of how they want to be cared for.

"In a way, we're all writing our stories. Some are at the beginning, and some are writing their final chapters.

**"In many cases, patients who have palliative care can live longer with a better quality of life."**

► David D. Lee, MD  
Medical Director of Philanthropy  
VHC Health Foundation

And it's the last few chapters of the book that I think are always the most important," says **David D. Lee, MD**, Medical Director of Philanthropy, VHC Health Foundation. "If you write a good final chapter, all those who come to read it will rejoice at a life well lived."

Think of palliative care as the editor of your book, helping you with medical, social, spiritual and emotional services. "Our providers are highly skilled in discussing people's goals in terms of medical treatment and life and what they hope to achieve with the time that they have left," Dr. Westerman says.

"With palliative care, we are transitioning from thinking about the future to focusing on better care and more comfort for today," says Dr. Lee. "In many cases, patients who have palliative care can live longer with a better quality of life. And families tend to feel less regret, anxiety and depression following the loss of a loved one who received palliative care."

Most people—71 percent—prefer to die at home, according to a Kaiser Family Foundation survey of Americans' views

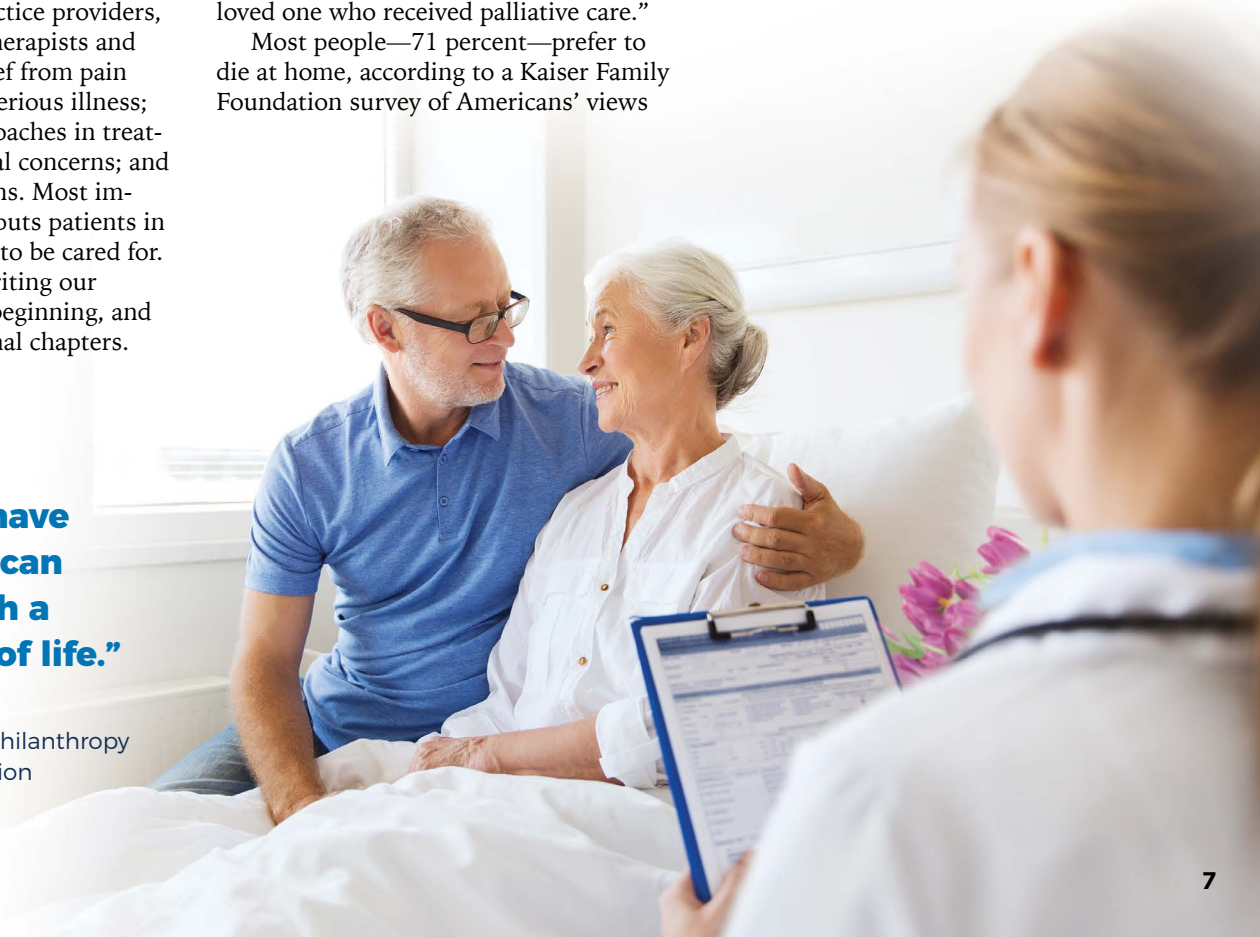
on end-of-life medical care. However, only 31 percent of Medicare beneficiaries actually do. Although palliative care isn't solely for those at the end of their lives, it does help patients dictate where and how they live—and die. "It's important to consider outcomes and preferences for care when focusing on end-of-life needs," Dr. Westerman says.

Dr. Lee did exactly that when his mother's health took a turn for the worse. She was 87 years old with dementia and Parkinson's disease when she fell and could not get up. "We were given two options: brain surgery that might not help her get her life back or make her comfortable with palliative care," he says. "We chose to take her home, where she could spend her few remaining days surrounded by family."

"That's what palliative care can do for us—let us pick the terms on how to leave this earth," Dr. Lee says. "Palliative care doesn't save a life, but it definitely saves your soul."

**A \$5 million gift from  
Suzanne Hanas to the  
VHC Health Foundation  
is transforming palliative  
care at VHC Health.**

(SEE BACK COVER)





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## Problem-Solving for Health



Family medicine was an obvious choice for **Julia Ellison, DO**, of the new VHC Health Physicians primary care practice in Vienna. “I like being able to treat my patients for anything and everything,” she says.

A focus for Dr. Ellison is preventive health and addressing contributors to chronic illnesses, such as heart disease, diabetes, high blood pressure, stress and lack of exercise. “Often patients blame work issues or family commitments when they’re not eating healthy or exercising,” Dr. Ellison says. “But there are ways to make the time to do it. I encourage patients to do what they can because small improvements can add up. I ask, ‘What’s something you can commit to 100 percent?’ That might start with taking a 10-minute walk

or drinking one more glass of water and one less of wine.”

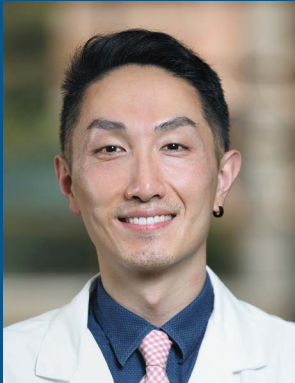
Dr. Ellison views herself as a resource to motivate, encourage and problem-solve with patients. One way she does this is by using data, facts and objective evidence. For example, when patients struggle to lose weight, she recommends they keep a food diary, which might reveal that although they’re eating greens and vegetables, they’re also having pie every day.

“My job is to show patients they’re not as stuck as they think they are. They can make changes to be healthier,” says Dr. Ellison. She received her doctor of osteopathic medicine degree from the West Virginia School of Osteopathic Medicine and completed her family medicine residency at the University of South Alabama in Mobile, where she grew up.

**For more information, visit [vhchealth.org/primarycare-vienna](http://vhchealth.org/primarycare-vienna).**



# How Plastic Surgery Supports Healing



“Plastic surgeons are sometimes referred to as the ‘surgeon’s surgeon.’ That’s because we work with other surgeons from many different specialties to reconstruct or restore the affected body part and close wounds,” says **Ping Song, MD**, VHC Health Physicians Plastic & Reconstructive Surgery.

For instance, after the colorectal surgeon resects cancerous tissue in the rectum, the plastic surgeon moves muscle and skin to fill space where the rectum was. “We bring in healthy, non-radiated skin, which lowers patients’ risk of open or chronic wounds and bowel obstructions,” he says. “That’s the standard of care, but patients often don’t realize that a plastic surgeon would be involved.”

Plastic surgeons can help promote healing after cardiothoracic operations, bringing in healthy skin with a robust blood supply to facilitate healing of a wound near the sternum. Dr. Song has a particular interest in reconstruction of cosmetically sensitive areas of the body such as the nose, cheek and ear after Mohs micrographic surgery, a common procedure for treating skin cancer. He also performs body contouring for patients who have had bariatric surgery.

“For orthopedic and podiatric procedures, sometimes it is necessary to bring in muscle for surgical procedures to the hands or feet,” says Dr. Song, who completed a fellowship in microsurgery and breast reconstruction at the University of Washington in Seattle. “There’s not a lot of muscle in the extremities, so I use microsurgery to move muscle to connect to a different part of the body, such as using muscle from inside the thigh in the foot. The same kind of microsurgery techniques are used when I do breast reconstruction surgery.”

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## Physical Medicine & Rehabilitation

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## Plastic & Reconstructive Surgery

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# Q & A

## HOW CAN YOU STAY HEALTHY THIS WINTER?

For two years, COVID has dominated health headlines, with experts concerned about a double whammy of flu and coronavirus cases during the winter months, when people are more susceptible to illness. This year, though, another threat has emerged as instances of respiratory syncytial virus, or RSV, have climbed.

VHC Health's **Michael Silverman, MD**, Chair, Emergency Medicine, and **Rohit Modak, MD, FIDSA**, infectious diseases specialist, explain what's going on—and how to keep yourself and your family healthy.

### What are the biggest concerns about keeping you and your family healthy this winter?

**Dr. Modak:** This winter is a little unusual because we are dealing with a "tripledeemic" situation. In addition to flu and COVID, we've seen a surge in cases of RSV. We have vaccines against COVID and the flu that are very effective, but there is no vaccine for RSV.

**Dr. Silverman:** Emergency departments in our area are experiencing record volumes of patients with symptoms of the three viruses. We always evaluate and care for everyone who comes into the emergency department at VHC Health. We have a triage process to identify patients who need care more rapidly.

### What is RSV and how does it affect children?

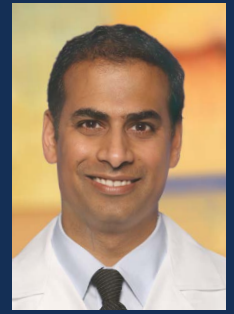
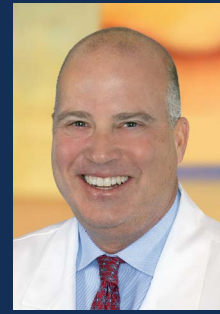
**Dr. Modak:** Generally, RSV is serious only in infants and immunocompromised adults. For most people, it presents as a cold that may last one to two weeks. We are hearing more about it this year because for the past two years, everyone was masked, which prevented the spread of RSV. This year, we're seeing more cases, especially among children who weren't exposed to it previously.

**Dr. Silverman:** The highest-risk groups are children younger than two or three years of age, infants born prematurely and kids with chronic illness. Symptoms we watch for include trouble breathing and dehydration. Sometimes these children need care that's available only in the hospital. However, most children who get RSV will only require supportive care, such as over-the-counter medications and plenty of fluids.

### How is COVID different today?

**Dr. Silverman:** We still see patients with COVID in the emergency department. In fact, the number we saw in November 2022 was higher than in November 2021. Remember that COVID cases skyrocketed last January after winter holiday travel. COVID is not gone. A high rate of positivity for COVID continues to circulate in our community.

**Dr. Modak:** I see a lot of behavior now that suggests people think COVID is like having a common cold. While we've gotten to a point where we are better prepared to live with COVID, it's still a threat and can cause problems for a lot of people. Fortunately, the COVID vaccines have proven effective in preventing hospitalization and death, and we have effective treatments for people



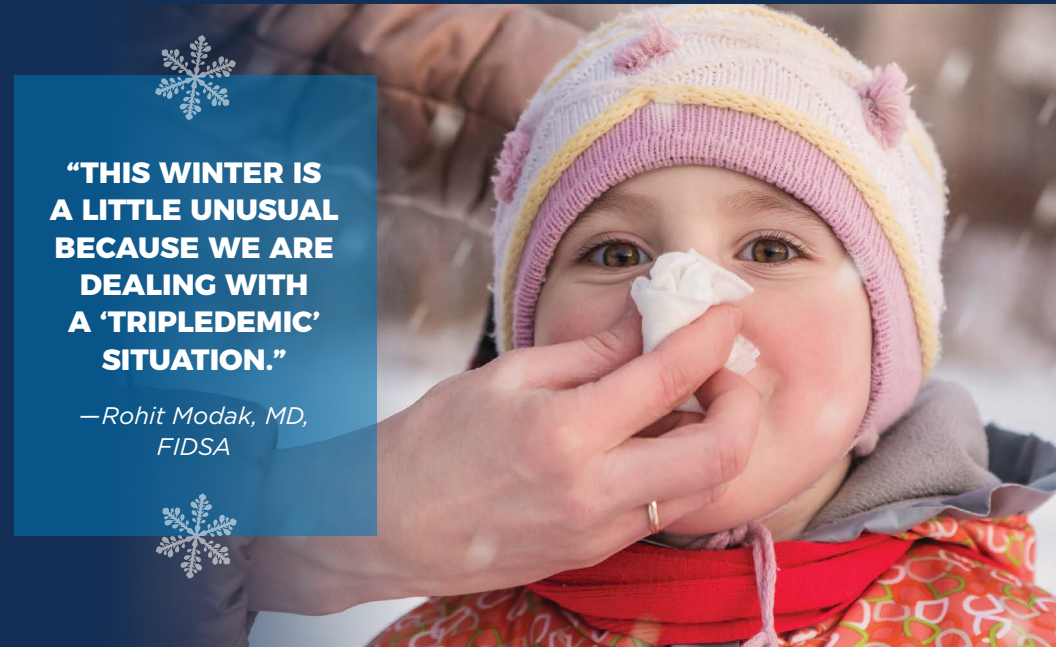
(L-R): **Michael Silverman, MD**, and **Rohit Modak, MD, FIDSA**

who get sick. Plus, we have testing to see who presents a risk to others. But, we still need to take simple precautions. Make sure the people you're with are vaccinated, and it's reasonable to wear a mask in public, especially in crowded areas, like a concert or the metro.

### How do I protect myself and my family?

**Dr. Silverman:** The good news is that protections are the same for all three viruses: practice basic hygiene. Wash your hands frequently, limit exposure to symptomatic people, wear a mask in crowds and keep your kids home from daycare or school if they don't feel well. If you get sick, remember you're contagious. Stay home and take care of yourself.

**Dr. Modak:** Get vaccinated. Anyone over six months of age should get the latest booster. Most people who get COVID will do fine if they're vaccinated and boosted, but less than 15 percent of people nationwide have had the booster.



**“THIS WINTER IS A LITTLE UNUSUAL BECAUSE WE ARE DEALING WITH A ‘TRIPLEDEMIC’ SITUATION.”**

—*Rohit Modak, MD, FIDSA*

# Oncology EVENTS



All Dewberry Cancer Resource Center events & support groups are virtual via Zoom unless otherwise noted. To register for these free programs, visit [vhhealth.org](http://vhhealth.org) & look for [classes & events](#) or call 703.558.5555.

## Weekly Yoga

A gentle class to teach cancer patients & survivors to safely build strength & flexibility.

**Fridays, 12:00 - 1:00 pm**

## Makeup & Hair Tips

Get tips to improve your self-image & appearance as you learn to manage side effects of cancer treatment on your skin & hair.

**Tues, 2/28, 12:00 - 1:00 pm**

## Mindfulness

Experience the benefits of this healing & calming practice.

**Wed, 3/1, 12:15 - 12:50 pm**

## Intro to Hospice & Palliative Care

Deepen your understanding of palliative & hospice care. Learn about benefits to which you are entitled. Followed by Q&A with nurse & social worker.

**Wed, 3/15, 12:00 - 1:00 pm**

## 15-Minute Meals

Cook alongside a dietitian as you learn how to put a healthy meal on the table in 15 minutes or less.

**Wed, 4/19, 5:00 - 6:00 pm**

**Outpatient Rehabilitation Dept.**

## Forest Bathing Meditative Walk

Take a gentle meditative stroll to de-stress & deepen your connection with nature.

**Thurs, 4/20, 10:30 am - 12:00 pm, Lubber Run Park, 200 N. Columbus St., Arlington, VA 22203**

## What to Know about Genetics & Cancer on DNA Day

A Certified Genetics Counselor will broaden your understanding of genetics & risk assessment counseling options. An RN will share risk reduction tips & screening guidelines

**Tues, 4/25, 12:00 - 1:00 pm**

## Contain Yourself: Grow Vegetables in Containers

Reap the benefits of gardening in a hands-on session growing vegetables in containers led by Master Gardeners.

**Wed, 4/26, 3:00 - 4:30 pm, VHC Health Healing Garden, 16th Street**

## Book Club Discussion

Join Dewberry Cancer Resource Center staff for tea & snacks to discuss the inspiring book *Then Came Life: Living with Courage, Spirit, and Gratitude After Breast Cancer* by GERALYN LUCAS.

**Thurs, 5/4, 2:00 - 3:00 pm**

## Caring for the Caregiver

Meet with other caregivers to discuss self-care & coping techniques.

**Tues, 5/9, 4:00 - 5:00 pm**

**Cancer Resource Center Library**

## Bon Air Rose Garden Tour

Take a guided stroll with the landscape manager & learn about the Rose Garden's history as well as gardening tips.

**Tues, 5/23, 10:30 - 11:30 am**

**850 N. Lexington St., Arlington, VA 22205**

## Equine (Horse)

### Facilitated Workshop

Participate in a blend of qi-gong, therapy & mindfulness to create increased awareness of your natural environment, body, emotions & energy to help with the healing process.

**Sat, 5/13, 9:00 - 11:00 am**

**Call Mirian Campos for more information & to register at 703.558.5566.**

## SUPPORT GROUPS

Call 703.558.5555 or email [cancersupport@vhhealth.org](mailto:cancersupport@vhhealth.org)

**Opening Windows** • For individuals with recurrent or metastatic cancer.  
**1st Thursday, 2:00 - 3:30 pm**

**Breast Cancer Patients with Children**  
**2nd Friday, 1:00 - 2:30 pm**

**Breast Cancer**  
**3rd Tuesday, 5:00 - 6:30 pm**

**Prostate Cancer**  
**4th Tuesday, 7:00 - 8:30 pm**

**C.H.A.N.C.E. Head & Neck Cancer**  
**4th Wednesday, 6:00 - 7:30 pm**

**Young Adults with Cancer**  
**1st Wednesday, 7:00 - 8:30 pm**

**Reiki** • Free half-hour session for cancer patients. **3rd Wednesday, 7:00 - 9:00 pm. Appointment only**

**Write Away Group** • Patients share writings about their cancer journey.  
**Call for more information.**

## SAVE THE DATE FOR OUR ANNUAL SURVIVORS CELEBRATION!

Please plan to join us for dinner & fun with fellow survivors & members of your medical team.

**Fri, 6/2, 6:00 - 8:00 pm**  
**VHC Health Healing Garden**





# Women & INFANT HEALTH

## Genetic Testing and Care for High-Risk Pregnancy

**M**eghan Carmody always planned to undergo genetic testing when she became pregnant. In her family, there is a history of spina bifida, a birth defect in which the spine and spinal cord don't develop properly.

Her obstetrician, Lynsey Owen, MD, FACOG, referred her to Kelly Orzechowski, MD, FACOG, and Kyla Patek, MS, CGC, a board-certified genetic counselor, at VHC Health's Maternal Fetal Medicine practice for high-risk pregnancy care. They cared for Meghan through all three of her pregnancies, but it was the second one, in 2019, that gave them pause.

The results of her amniocentesis, a test that involves the removal of amniotic fluid for evaluation, showed a large portion of identical DNA on one pair of chromosomes. "It could mean my daughter was going to be fine—or not," Meghan says. "It was so stressful for all of us."

Meghan leaned on Kyla to walk her through the intensive genetic testing needed to determine her baby's health. It took two months to get a clear result, but it was worth the wait. Kyla called her the day after Christmas to say that the baby was fine.

When pregnant or thinking about becoming pregnant, patients can benefit from genetic counseling to learn about genetic testing options, particularly if they have a family history of a genetic condition or if they've experienced recurrent miscarriages. Genetic counselors are healthcare professionals who empower patients and their families to understand their family history, learn about testing options and make informed choices.

What's more, the Maternal Fetal Medicine team works with patients before pregnancy when they have pre-existing medical conditions such

as diabetes and high blood pressure. "We can optimize medication and do full risk assessments in addition to genetic testing before they become pregnant," Dr. Orzechowski says.

"Our practice caters to a personalized patient experience," she adds. "Patients are understandably anxious with high-risk pregnancies. A lot of what we do involves patients in decision-making. We really listen and go through details of their health history, develop a plan and give them options. The team takes the time to call patients simply just to check in and see how they are doing. We deliver test results on time, even on weekends and evenings, because we know they're waiting for really important results."

"They helped my husband and me get through this complicated time," says Meghan. In total, Dr. Orzechowski performed four amniocenteses for Meghan—one each for her first and third children and two for her second. "I had no problems with the procedures and felt extremely safe and confident," Meghan says. "Working with Kyla and Dr. Orzechowski through all my pregnancies was amazing, but with the second, I required so much more from them—and they were there for us."

"Kyla is patient and very easy to talk to," Meghan says. "She walked us through things that are very complicated in a kind and open way where we could ask questions."



Genetic counseling is a must when it comes to testing. “Kyla works hand in hand with patients, my partners and me,” says Dr. Orzechowski. “That coordination results in better patient care.”

“Our goal is to facilitate what makes sense for individuals and prenatal couples to get them information they’re interested in without being overwhelming,” Kyla says. “Every person is unique and every pregnancy is unique. Some people want all the information, while others do not. We work with you to tailor your pregnancy and healthcare toward your needs.”

Advances in genetic testing have led to noninvasive options that don’t put pregnancies at risk. “Today, we can learn about fetal genetics with a blood test from the mother,” Kyla says.

“Used together, the words ‘high risk’ and ‘pregnancy’ can be scary,” Dr. Orzechowski says, “but seeing a high-risk pregnancy specialist means you’re going to get appropriate monitoring, medication and intervention to have a healthier pregnancy.”

Learn more about Maternal Fetal Medicine at [vhchealth.org/maternal-fetalmedicine](http://vhchealth.org/maternal-fetalmedicine).



## BABY’S FIRST YEAR

All classes & support groups are online via Zoom. For class times & to register, visit [vhchealth.org/objourney](http://vhchealth.org/objourney).

**The First Year** • Important information for first-time parents about parenting, safety, communication & sleep. **\$60/couple**

**The Art of Pumping** • Learn more about breast pumps & pumping strategies for the early weeks. **\$45/person**

**Breast Pump Rentals** • Rent a hospital-grade breast pump. For information & pricing, call 703.558.6744.

### SUPPORT GROUPS FREE

**Breastfeeding** • Get support & tips from others.

**Breastfeeding for Working Moms** Learn breastfeeding & work-life balance strategies.

**Moms4Moms** • Get support for the stresses of COVID-19.

**Postpartum** • Group support for feeling anxious, angry, irritable or sad.

## Labor Support Volunteer Program

VHC Health is looking for [volunteers](#) to provide compassionate, knowledgeable, in-person support to patients throughout their birth experience on the hospital’s inpatient Labor and Delivery unit. To apply, scan this code. For more information, email [LSVprogram@vhchealth.org](mailto:LSVprogram@vhchealth.org).



## PREGNANCY & BIRTHING CLASSES

Plan to take childbirth classes in your second trimester. Most classes are online via Zoom, with a limited number of in-person classes (masks required). For times & to register, visit [vhchealth.org/objourney](http://vhchealth.org/objourney).

### What to Expect When Having a Baby at VHC Health

Engage in a live chat with former Labor & Delivery nurses who review what to expect from admission to discharge. **FREE**

### Advanced Comfort for Unmedicated Birth

Prepare for a natural, low-intervention birth that promotes comfort & support for you, your partner & baby. **\$80/couple**

### Childbirth Preparation: 2-Week Series

In-depth childbirth preparation course offered over two evenings for your convenience. **\$115/couple**

### Childbirth Preparation: Full Format

This in-depth “Preparation for Childbirth” course is a great introduction for first-time parents or women planning for an unmedicated birth. 4 hours. **\$115/couple**

### How to Prepare for Your C-Section

Starting with the third trimester, we explain how you can help your body prepare for delivery & recovery after Cesarean delivery. **\$75/couple**

### Breastfeeding Basics

Get breastfeeding off to a good start, including making milk, positioning, latching & feeding. **FREE**



### Infant Care Skills

Caring for your newborn during the first two weeks, including infant safety, sleep, diapering & bathing. **\$80/couple**

### Grandparenting

Learn the latest evidence-based infant care practices to prepare for caring for your new grandchild. **\$40/person**

For questions about class availability or what to expect when giving birth at VHC Health, email [childbirtheducation@vhchealth.org](mailto:childbirtheducation@vhchealth.org).



# Fitness & HEALTHY LIFESTYLE

## DETAILS & REGISTRATION

- All sessions are 7 weeks unless otherwise noted.
- Dates listed are start dates for each session
- Drop-in & pro-rated registration available for classes that are underway

\*Classes may change from in-person to virtual. For updated information, please check [vhchealth.org/healthy](http://vhchealth.org/healthy).

## LOCATION KEY

- V** = Virtual Class Online Via Zoom
- H** = VHC Health
- M** = McLean Baptist Church
- F** = Faith Lutheran Church

## Body Sculpt

Tone & strengthen your upper, lower body & abs. All levels welcome. \$54  
**Mon, 5:30 - 6:15 pm 1/9 & 3/13 H**  
**Tues, 5:30 - 6:15 pm 1/10 & 3/14 V**  
**Wed, 5:30 - 6:15 pm 1/11 & 3/15 V**  
**Fri, 7:30 - 8:15 am 1/13 & 3/17 V**

## Core Challenge

Strengthen your abs & back. \$54  
**Thurs, 5:30 - 6:15 pm 1/12 & 3/16 V**

## Cardio Kickboxing

Pump up your strength & stamina in this higher intensity class. \$54  
**Tues, 5:30 - 6:15 pm 1/10 & 3/14 F**  
**Thurs, 5:30 - 6:15 pm 1/12 & 3/16 H**

## Cardio Strength Circuit

Intermediate level class featuring faster paced cardio & strength exercises. \$54  
**Sat, 8:10 - 8:55 am 1/14 & 3/18 V**  
**Thurs, 6:30 - 7:15 pm 1/12 & 3/16 H NEW!**

## Fitness Fusion

Combine cardio, strength & stretching. \$54  
**Tues, 6:30 - 7:15 pm 1/10 & 3/14 F**

## Functional Fitness **New!**

Mechanically correct strength & cardio training to enhance stamina, mobility & bone health. \$54  
**Tues, 1:00 - 1:45 pm 1/10 & 3/14 F**  
**Sat, 9:00 - 9:45 am 1/14 & 3/18 V**

## Zumba

Dance your way to fitness! \$64  
**Mon, 6:30 - 7:30 pm 1/9 & 3/13 F**

## Low-Impact Cardio **New!**

Safe & fun movement to a variety of music. Class also includes balance & range-of-motion exercises. \$64  
**Tues, 11:00 am - 12:00 pm 1/10 & 3/14 M**

## Tai Chi

Class follows the 37-posture Yang short form. \*10-week sessions. \$120  
**Level 1: Mon, 4:10 - 5:10 pm 1/23 F**  
**Level 2: Mon, 5:15 - 6:15 pm 1/23 F**

## Adaptive/Seated Yoga

For those with limited mobility, chronic pain or neuropathy. All ages & ability levels welcome. \$85  
**Tues, 11:00 am - 12:00 pm 1/10 & 3/14 V**

## Hatha Yoga

Classic yoga style combines postures & breathing techniques to improve the mind/body connection. \$85  
**Mon, 5:00 - 6:00 pm 1/9 & 3/13 H**  
**Tues, 12:00 - 1:00 pm 1/10 & 3/14 V**  
**Thurs, 4:00 - 5:00 pm 1/12 & 3/16 V**



## Prenatal Yoga

Stretch muscle groups essential for efficient labor & delivery. Physician approval required. \$85  
**Mon, 7:00 - 8:00 pm 1/9 & 3/13 V**  
**Wed, 7:00 - 8:00 pm 1/11 & 3/15 H**

## Postpartum Yoga

Rebuild strength as you bond with baby (age 6 weeks to almost crawling). \$85  
**Tues, 10:30 - 11:30 am 1/10 & 3/14 V**

## ONE ON ONE ASSESSMENTS

To make an appointment, call 703.558.6740. Screenings are held at the VHC Health Shirlington Campus—Health Promotion Office.

**Body Fat Analysis** • Assess your percentage of fat, muscle & water. \$15

**Bone Density Screening** • Osteoporosis risk assessment screening using ultrasound of the heel bone. \$35

**Resting Metabolic Rate Screening**  
 This is an important measure in assessing nutritional needs & helping you achieve weight management goals. \$55

**Dermascan** • Non-invasive scanning examines head & neck for potential or existing sun damage. \$10

**Cholesterol Screening\***  
 Full Lipid Profile plus Glucose. \$25

**A1-C Diabetes Screening\*** \$25

**Hemoglobin\*** \$15

**Thyroid Function (TSH)\*** (mailed results) \$35

**Vitamin D\*** (mailed results) \$50

**High Sensitivity C-Reactive Protein\*** (mailed results) \$35

*\*All blood tests are finger stick.*

### Gentle Yoga

Reduce stress as you increase strength & flexibility. \$100

Tues, 9:30 - 10:45 am 1/10 & 3/14 **V**  
Thurs, 9:30 - 10:45 am 1/12 & 3/16 **V**  
Fri, 10:00 - 11:15 am 1/13 & 3/17 **H NEW!**  
Sun, 4:15 - 5:30 pm 1/15 & 3/19 **V**

### Yin Yoga

A still & calm practice for body & mind. Postures are held to strengthen connective tissue for bone health, increased mobility & self-calming. \$85

Fri, 6:00 - 7:00 pm 1/13 & 3/17 **V**  
Sat, 10:00 - 11:00 am 1/14 & 3/18 **V**

### Pi-Yoga

Tone & energize with this blend of Pilates strengthening & Yoga movement. \$85

Thurs, 6:30 - 7:30 pm 1/12 & 3/16 **V**

### Gentle Pilates

A mat-based class with modifications to suit all abilities. \$85

Tues, 6:30 - 7:30 pm 1/10 & 3/14 **H**  
Sat, 11:15 am - 12:15 pm 1/14 & 3/18 **F**

### Feldenkrais: Awareness Through Movement

Learn how directing attention to gentle movement can enhance functioning & provide better balance. \$85

Tues, 12:15 - 1:15 pm 1/10 & 3/14 **V**

### Skillful Sleeping **New!**

Learn how to go to sleep & get back to sleep, more easily, while practicing stress reduction movements that will help you all day long! \*4-week session. \$75

Thurs, 6:30 - 7:30 pm 3/2 **V**

### Stress Management & Healing **New!**

Learn & practice valuable skills to enhance your health & well-being. Class may include movement, self-massage, meditation & other relaxation tools.

\*2-week workshop. \$30  
Fri, 12:00 - 1:00 pm 2/24 & 3/3 **H**

### Boost Your Balance

Reduce your fall risk by improving balance & stability. \$64

Wed, 11:00 am - 12:00 pm 1/11 & 3/15 **V**  
Thurs, 2:00 - 3:00 pm 1/12 & 3/16 **F**  
Sat, 9:00 - 10:00 am 1/14 & 3/18 **V**

### Senior Strength & Stretch

Improve range of motion, muscle strength & flexibility. \$54

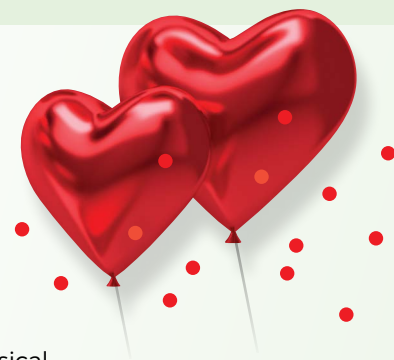
Thurs, 1:00 - 1:45 pm 1/12 & 3/16 **F**

## HAPPY HEARTS SOCIAL

Tuesday, February 14, 1:00 - 3:30 pm  
Faith Lutheran Church  
3313 Arlington Blvd., Arlington, VA 22201  
**Free to Senior Associates!**

Join us to celebrate friendship, love and kindness at the Happy Hearts Social! The Senior Health and Health Promotion Departments are hosting this festive Valentine's Day party with musical entertainment, refreshments, bingo, socializing and dancing. Enjoy a performance by Helping Hearts Dance, a group of passionate dancers that delight audiences throughout our area. Bring your comfortable shoes—audience participation is welcome! Play a few rounds of bingo and sample some sweet and savory treats.

**\$10/person. Register today by visiting [vhc.memberclicks.net/happy-hearts-social](http://vhc.memberclicks.net/happy-hearts-social).**



## SENIOR HEALTH

### Senior Associates

Join today to take advantage of exclusive hospital benefits for adults 60 years and older. \$65/year for single; \$90/year for couple. Register at [vhc.memberclicks.net](http://vhc.memberclicks.net) or call 703.558.6970.

### Walk-Fit

A free fitness program featuring walking, stretching & blood pressure checks.

Tues, 8:30 - 9:30 am, Fashion Centre at Pentagon City, 1st Floor by Nordstrom Café  
Thurs, 8:30 - 9:30 am, Ballston Quarter, Level M1

### Alzheimer's & Dementia Caregiver Support Group

2nd Wed of every month 10:00 - 11:00 am

### Seated Senior Fitness

Strengthens muscles, improve cardiovascular fitness, increase muscle power & enhance overall physical function while seated on a sturdy chair. \$98

Mon & Fri, 10:30 - 11:30 am 1/9 & 3/13 **V**

### Seniorcise

Class includes light cardio & exercises to maintain & regain strength & balance. 10-week sessions begin week of 1/9.

M/W/F with Azita, 9:00 - 10:00 am (\$210) **V**  
T/Th with Azita, 9:00 - 10:00 am (\$140) **V**  
M/Th with Robin, 9:00 - 10:00 am (\$140) **V**  
T/F with Robin, 9:00 - 10:00 am (\$140) **F**

To register or for information, contact 703.558.6859 or [seniorhealth@vhchealth.org](mailto:seniorhealth@vhchealth.org).

### Lifeline Emergency Response

A 24-hour medical alert system personally overseen by VHC Health Senior Health Department staff.

### Healthy Aging Lecture Series

Lectures are hosted online. Register to receive log-in information.

**Jan. 27 | 11:00 am - 12:00 pm**  
From Clutter to Calm—Organizing & Downsizing 101 with Lisa Geraci Rigoni & Rachel Helmich Cheng

**Feb. 24 | 11:00 am - 12:00 pm**  
Inflammation & Nutrition with Jennifer Primeggia, MD, FIDSA, Infectious Diseases





Arlington Health System  
1701 N. George Mason Drive  
Arlington, VA 22205-3610

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The information offered in this magazine is general in nature. Your personal healthcare provider is your best source of medical advice. To be added or removed from the mailing list, call 703.558.6595.

[vhchealth.org](http://vhchealth.org)

# A \$5 Million Donation Is Transforming Palliative Care at VHC Health

**A** generous gift of \$5 million from Suzanne Hanas, Founder and CEO of Premier RN Geriatric Care LLC®, will accelerate the expansion of palliative care at VHC Health to meet an urgent community need.

“The field of palliative care has grown tremendously as people live longer with chronic conditions and as technology advances prolong life,” says **David D. Lee, MD**, Medical Director of Philanthropy, VHC Health Foundation.

Everyone who has a serious or life-limiting illness should have access to palliative care to relieve pain and other symptoms in a setting where they are most comfortable. Building upon the existing inpatient palliative program at VHC Health, Ms. Hanas’ donation will extend palliative care to include outpatient services in the community, as well as educational resources and advanced care planning.

“Philanthropy and giving back have been priorities throughout my career,” says Ms. Hanas. “Having a community health system like VHC Health in the Washington, DC, metropolitan region depends on support from the community.”

“While VHC Health is proud to have the foundation of a growing palliative care program with highly skilled clinicians, this gift will help us better meet the demand for palliative care services and information in the community,” says **Chris Lane**, President & CEO, VHC Health. “Philanthropy plays a strategic role in helping make VHC Health’s vision a reality.”

*“I’m honored to support the reimagining of a world-class palliative care program at VHC Health.”*

—Suzanne Hanas



(L-R): **Chris Lane**, President & CEO, VHC Health; **Suzanne Hanas**; **David D. Lee, MD**, Medical Director of Philanthropy; **Michael Westerman, MD**, Palliative Medicine.



Navigate Your Way to Better Health with the VHC Health App!

