p. 2
Fixing Heart Valves With TAVR

p. 6
Same-Day Hip Replacement

p. 10
Pampering New Moms
When Kitty Barton needed to have her aortic heart valve replaced, she had one requirement: She needed to be able to dance her way through Aruba several weeks later—a trip she had planned with her daughter and one she considered "non-negotiable." "I told the doctor I would be happy to have heart surgery as long as it didn't get in my way," explains the 86-year-old Claremont resident, who works as a nanny for two small children, as well as at a local health club's child-care program.

Not an easy request, considering aortic valve replacement traditionally requires open heart surgery, a four-day hospital stay and months of recovery. But at St. Jude, a minimally invasive approach to valve replacement—called transcatheter aortic valve replacement, or TAVR—is changing the treatment of severe aortic stenosis.

During the TAVR procedure, St. Jude's interventional cardiac team places a collapsible artificial valve into the heart via a catheter threaded through a vein in the groin. The new aortic valve is inserted inside the diseased valve and restores normal heart function almost immediately. Since the heart never stops beating, TAVR eliminates the need for cardiopulmonary bypass. And because the 60-minute procedure is dramatically less invasive, patients typically go home the next day and resume normal activities very quickly.

"A piece of cake," Barton says. "It was unbelievable how easy the whole thing was. I went home and it was like I hadn't had surgery, except that my shortness of breath was gone."

Two weeks later she was back at work and back to searching for good places to salsa dance—which for Barton means no old people. "I feel 49, and seniors slow me down," she says.

Aortic valve stenosis is a common and serious heart problem in which the valve that helps regulate the heart's blood flow narrows and hardens, causing less blood to reach the brain, lungs and other vital organs. Resulting symptoms often include chest pain or tightness, heart palpitations, fatigue, shortness of breath and difficulty walking even short distances.

Eugene Byun, MD, the board-certified interventional cardiologist who performed Barton's procedure, says TAVR is an important and lifesaving advance, especially for those considered higher risk due to age or medical condition. "Outcomes have been outstanding, and we continue to broaden the definition of who can benefit from this minimally invasive alternative to surgery," says Dr. Byun, who is also board-certified in peripheral intervention. Unlike open heart surgery, where symptoms decrease gradually over weeks or months, TAVR patients are often surprised to find their symptoms gone within hours of the procedure ending. While TAVR offers the advantages associated with less invasive surgery—faster recovery, less pain and fewer complications—it's not the right choice for everyone. "Determining which procedure or treatment will achieve the best outcome can be complex," Dr. Byun says, "and at St. Jude we involve multiple specialties—including interventional cardiology and cardiothoracic surgery—in evaluating each patient."

As for Barton, she frequently looks through the photo album dedicated to her Aruba adventure. "Wonderful memories made possible by my favorite hospital."
Ending Acid Reflux
New treatment offers permanent relief.

Mllions of Americans deal with daily heartburn caused by gastroesophageal reflux disease, or GERD. For many, losing weight, adopting a healthy diet and taking medication are enough to control their symptoms. For others, surgery is needed to restore quality of life. While a decade ago the only surgical option was fundoplication, today patients have several highly successful choices, the newest of which is called LINX.

Nikolai Bildzukewicz, MD, a board-certified foregut surgeon with the St. Jude Comprehensive Digestive Health Center and a national expert in the LINX procedure, answered some common questions about the procedure. Dr. Bildzukewicz is widely published for his innovation in the treatment of acid reflux.

What is LINX? The LINX device is a quarter-sized ring of magnetic beads that is surgically placed around the end of the patient’s esophagus. Swallowing temporarily breaks the magnetic bond between the beads, so that food can easily enter the stomach. Magnetic attraction then causes the beads to close so stomach acid can’t flow backwards into the esophagus. With the beads reducing the acidity of the reflux, the LINX procedure eliminates acid reflux: a malfunctioning lower esophageal sphincter, or LES. The LES is a circular band of muscles that allows food and liquid to flow one way, from the esophagus into the stomach. When the LES is weak or doesn’t close completely, caustic stomach acids flow backwards into the esophagus. By increasing the strength of the LES, the small LINX device restores the body’s natural barrier to reflux.

Why should someone with GERD consider LINX? If your symptoms aren’t controlled by medications or you are concerned about the side effects of remaining on medications for a lifetime, the LINX procedure should be considered. Studies show more than 90% of patients see their reflux symptoms disappear after having this outpatient procedure.

Equally important, by eliminating the source of acid reflux, the LINX procedure can prevent further esophageal damage and halt the progression to esophagitis (inflammation), ulcers of the esophagus, strictures, pre-malignant lesions (Barrett’s esophagus) and cancer. While esophageal cancer remains uncommon, it is among the fastest-growing cancers in America, and most people are unaware of the role acid reflux plays.

If your GERD is caused or worsened by a hiatal hernia, which makes your stomach bulge up into your chest through an opening in your diaphragm, LINX offers another benefit: the hiatal hernia can be repaired during the same procedure.

What is the recovery from LINX like? LINX is a minimally invasive procedure performed through five small incisions in under one hour, and patients often go home the same day. Unlike the restrictive diets typically required with GERD surgery, with LINX we want you to eat as normally as possible as quickly as possible.

In fact, eating for LINX patients is much like physical therapy for a joint replacement—the frequent expansion and contraction of the LINX device prevents scar tissue from developing. Patients are encouraged to snack often on foods such as fruits, yogurt, eggs and crackers and, within three to four days, are back to a regular diet.

Is heartburn always a sign of GERD? No, about 20% of those with GERD don’t experience heartburn or regurgitation. Instead, their symptoms include a lump in the throat, voice changes, a persistent cough or wheezes that often mistaken for asthma. Other symptoms can include failure to thrive, sinus infections, gum erosion and chest pain. In fact, one-third of emergency department visits for chest pain are actually due to reflux.

To make an appointment or for more information about today’s best treatment options for GERD, talk to your St. Jude gastroenterologist. Call 714-444-5831 for an appointment.

Could you benefit from St. Jude’s pharmacotherapy clinic? The clinic currently focuses on a handful of chronic conditions, including IBD and rheumatoid arthritis. A physician referral is needed, so talk to your doctor about visiting the clinic. To make an appointment or find out more, call 844-391-2044.

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Some joint replacement surgeries can be performed as outpatient procedures, thanks to advances in surgery, pain control and rehabilitation.

WHEN EVEN STANDING FOR A FEW MINUTES BECAME EXCITING, MARK BECKMAN KNEW IT WAS TIME FOR A HIP REPLACEMENT. HE BEGAN RESEARCHING HOSPITAL RANKINGS, QUALITY RATINGS AND SURGEONS’ REPUTATIONS, AND ONE NAME KEPT COMING UP: ST. JUDE MEDICAL CENTER.

After having outpatient joint replacement on both hips, he says he understands why. “I did my homework and it paid off. It couldn’t have been a better experience,” says the 54-year-old father of two. “The attention to detail and expertise was phenomenal.” Beckman is one of hundreds of patients who have learned firsthand how same-day joint replacement is significantly changing care for deteriorating and painful joints—and why St. Jude is a national leader in accelerating outcomes.

“Today we know so much more about how to prevent and minimize pain,” explains Shawn Solhpour, MD, a board-certified orthopedic surgeon who specializes in minimally invasive procedures. “We use less invasive surgical techniques, better pain control with fewer side effects. A combination of long-acting local and regional anesthesia, some of which is injected into the joint during surgery, creates a synergistic effect that more effectively stops pain while allowing patients to begin physical therapy within an hour of surgery ending—an approach shown to fast-track recovery.”

NOT SIMPLY SHORTER, BUT A WHOLE NEW APPROACH
Less invasive surgical techniques, better pain management and advanced rehabilitation protocols have all played a role in transforming what was a three-day hospital stay into an outpatient procedure. “We had used today’s best evidence-based protocols to transform conventional approaches about what happens before and after surgery,” explains Stewart Shanfield, MD, the board-certified orthopedic surgeon who performed Beckman’s hip replacements. “The result is: patients are happier, do better and typically recover faster at home.”

LESS PAIN MEANS BETTER OUTCOMES
A “multimodal” approach to pain management allows the hospital’s surgeons and anesthesiologists to target multiple pain pathways in the body, offering far better pain control with fewer side effects.

“Prehab,” to increase strength and improve recovery, and continues almost immediately after surgery. A series of home visits from St. Jude physical therapists typically start the next day. “By continuously refining our therapy protocols to reflect new research and improvements, we have turned each step of recovery into a national best practice,” says Dr. Solhpour. The result: St. Jude patients exceed national averages and benchmarks in every measure. Carefully matching the patient with the procedure—relatively healthy individuals without serious medical conditions—and turning patients into experts on maximizing their recovery are key. From comprehensive pre-op education and a unique digital app that surgeons use to communicate with patients, to ongoing support from a joint replacement nurse navigator, the result is more confident and knowledgeable patients.

Getting Back to Life Sooner
At St. Jude, rehabilitation often begins before surgery, with an innovative approach called “prehab,” to increase strength and improve recovery, and continues almost immediately after surgery. A series of home visits from St. Jude physical therapists typically start the next day. “By continuously refining our therapy protocols to reflect new research and improvements, we have turned each step of recovery into a national best practice,” says Dr. Solhpour. The result: St. Jude patients exceed national averages and benchmarks in every measure.

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Recognized by U.S. News & World Report and Healthgrades as one of the top-performing orthopedic programs in the nation, St. Jude offers more than a dozen fellowship-trained orthopedic surgeons, including experts in hand and wrist, shoulder, hip, knee, and foot and ankle. St. Jude is also one of an elite group of hospitals to earn recognition as a Center of Excellence in Joint Replacement by The Joint Commission.

For more information, please call 844-925-0944.

Arrive in the Morning, Back Home in Just Hours

Why outpatient joint replacement is many patients’ first choice.
When Radoslav Raychev, MD, a neurointerventionalist, saw that the patient's angiogram was negative for a brain aneurysm, he kept looking. The extra effort paid off. Dr. Raychev located a small "blister" aneurysm, a highly fragile weakness in the artery wall that was likely to re-rupture.

Blister aneurysms are an uncommon and notoriously difficult-to-treat type of hemorrhagic stroke, in which a weakened blood vessel ruptures and bleeds into the brain. Outcomes are daunting: Nationally, the mortality rate is close to 50%, and among those who survive, many live with permanent and serious disabilities. But for a stroke team recognized as one of America’s 100 best by Healthgrades, national averages and benchmarks are often simply a starting point.

Dr. Raychev and other St. Jude stroke experts, including specialists in neurosurgery and neurocritical care, discussed the patient’s options. The two traditional approaches for treating blister aneurysms—surgically wrapping the aneurysm or attempting to “coil” it and remove it via catheter—were not optimal choices for the 43-year-old patient. Magnifying the risk was the aneurysm’s location, inside an artery that supplies blood flow and oxygen for the brain’s most critical functions. However, another option, the subject of recent research, was using “flow-diverting” stents. The technique isn’t used on small vessels, but Dr. Raychev considered it the best choice.

“I knew the same advantages we are seeing with larger vessels could be realized with these smaller, fragile aneurysms—and that it represented the best chance for his full recovery,” explains Dr. Raychev.

While recent research had made clear the benefits of using “flow-diverting” stents to treat aneurysms, the technique isn’t used on small vessels. A new flow-diverting stent, compatible with a smaller microcatheter, had just gained Food and Drug Administration approval in the U.S., making the innovative approach possible. During the 30-minute procedure, the stent was placed via catheter inside the aneurysm, reconstructing and strengthening the artery. Three days later, the patient, Lance Polland, a writer and director, went home and returned to his life.

Polland’s first symptom, the sudden onset of an agonizing headache, is typical of aneurysms and hemorrhagic strokes. Anyone with a severe headache or any of the more common stroke symptoms—including changes in balance, speech and vision, and muscle weakness—should seek immediate emergency care. Other, less frequent symptoms include nausea, disorientation and sudden drowsiness.

“I feel so blessed to benefit from this technology and from the skill of a doctor who not only saved my life but gave me the chance to resume my life exactly where I left off,” says Polland, who ordered a celebratory pizza after waking up from the procedure. “It’s unsettling to think about what would have happened if I had not gone to St. Jude and had ended up at another hospital.”

Dr. Raychev says the stroke team at St. Jude was built for such challenging cases.

“"This is exactly why we bring together the entire spectrum of stroke expertise at St. Jude, from advanced diagnostic protocols in the emergency department to an award-winning team of board-certified neurointensivists,” he says, “so we can continue to elevate outcomes.”

To learn more about St. Jude’s stroke program, please call 844-925-0944.
Complimentary Concierge Service for Expecting Parents

Welcoming a baby into the world is one of life’s greatest experiences. We will work with you to learn your preferences and concerns regarding childbirth. Our goal is a pregnancy journey that addresses your head and heart.

St. Jude Medical Center offers a complimentary concierge service for expecting parents that can take care of tasks such as purchasing gifts for siblings, arranging a photographer, hiring a night nurse, setting up a diaper delivery service or arranging a celebratory mani-pedi for Mom.

The concierge service at St. Jude Medical Center is a perfect complement to the exceptional clinical care provided by our physicians and caregivers. Here are just a few things that we can help you with in order to free up your time to focus on what matters most. There is no fee for the concierge service—you only pay for the cost of goods and services requested.

**DURING YOUR PREGNANCY**
- Pregnancy planning and birth preferences
- Coordination of appointments
- Finding a pediatrician
- Registering for parent classes
- Pre-admission registration and a personalized hospital tour
- Purchasing baby gear such as a car seat, breast pump, stroller and any other items you need
- Home services

**PAMPERING FOR MOM**
- Stress relievers: massage, aroma therapy, healing touch, acupuncture
- Blow dry/style
- Pedicure/manicure

**CELEBRATIONS**
- Family and newborn photos
- Sibling gifts and dinner celebrations
- “Push” present for Mom
- Flower or balloon bouquets
- Special celebratory meals

**LABOR & DELIVERY AND POSTPARTUM**
- Unloading and delivering items to your hospital room
- Valet parking and automobile relocation
- Retrieving forgotten items from your home
- Special blessing by the hospital’s spiritual care staff or making baby footprint imprints as a keepsake
- Personal shopping or errands
- Coordination of photography
- Picking up or arranging delivery of to-go food
- Technology needs and business center support
- Stress relievers: aromatherapy, healing touch, acupuncture
- Gifts for siblings
- Coordination of cord blood banking, placenta preparation/transport

**AFTER DISCHARGE**
- Prescription pickup
- Car fueling
- Travel planning
- Shopping for the return to home
- Coordinating home equipment delivery such as a breast pump rental
- Help arranging services such as hiring a night nurse, lactation consultant, diaper delivery service, finding “Mommy and Me” classes

For more information, visit stjudemedicalcenter.org/maternity, call 714-992-3000 ext. 4881 or email us at stjudematernityconcierge@stjoe.org.
The national recognition, the clinical excellence and the patient satisfaction all happen for one reason — our people. Our doctors, nurses and caregivers are focused on delivering outstanding primary and specialty care and industry-leading research for all we serve. It’s why we recommend you select a Providence physician during open enrollment.

Together, we are One Extraordinary Team.

ChooseProvidence.org