

WOMEN'S healthsource

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Main Line HealthCare
Physician Network

Emily Levy

SPRING 2023 THE DANGERS OF DRIVING IMPAIRED
THE TRUTH BEHIND BLOOD PRESSURE AND CHOLESTEROL NUMBERS
CHOOSING THE RIGHT OB/GYN FOR A LIFETIME OF CARE



Main Line Health®

The dangers of driving impaired



Karen Archambo, LPC
Clinical Supervisor

Drug-impaired driving can put both the driver and others in harm's way. It's illegal in the United States to drive under the influence of alcohol, opioids, marijuana, methamphetamines or any other prescribed or over-the-counter drug that is potentially impairing.

Understanding what impaired driving is can help you stay safe and recognize if it's time to reach out for help.



Lisa Eckenrode, DNP, MBA, RN, NRP, TCRN
Trauma Injury Prevention and Outreach Coordinator

WHAT IS IMPAIRED DRIVING?

Drug-impaired driving is more common than you think, and alcohol isn't the only substance that is a concern.

Certain prescription and over-the-counter medicines might cause a person to feel drowsy or dizzy. Always read the medication's warning labels before driving. Marijuana can impair a driver's ability to multitask and make a person's coordination, reaction and judgment slower. Combined with alcohol, marijuana makes drivers even

more impaired. Methamphetamines and cocaine can cause drivers to be more reckless and aggressive.

According to the National Institute on Drug Abuse, after alcohol, marijuana is the next most common drug found in the blood of impaired drivers involved in crashes. "People don't realize how marijuana can negatively impact their driving," says Karen Archambo, LPC, clinical supervisor at Mirmont Outpatient Center in Exton, part of Main Line Health. "This is also true for people who are legally prescribed a medical marijuana card."

"Some people think there's little risk of harm from using medicinal marijuana or marijuana with alcohol or a prescribed medication," says Lisa Eckenrode, DNP, MBA, RN, NRP, TCRN, trauma injury prevention and outreach coordinator at Paoli Hospital, part of Main Line Health. "This notion can influence the decision to get behind the wheel, risking serious injury or death to the driver and others."

"When you feel different, you drive different," adds Kerry Larkin, MSN, CEN, Trauma Program manager at Paoli Hospital, part of Main Line Health. "If you don't think someone should be driving, say something. It takes courage to intervene, but one courageous voice can stop a deadly choice," she continues. Impaired drivers are not in a position to accurately judge whether they're OK to drive.

Anyone using prescription drugs may also experience unintended intoxication. If you're taking multiple medications, they can have an effect on one another, which can further impact driving.

"If you're on any kind of medication, it's important that you discuss the potential side effects and impact on your driving with your provider or pharmacist," says Archambo.

SAFETY MEASURES TO TAKE

If you've taken any drugs, prescription or not, don't get behind the wheel. Smarter choices include:

- Securing a sober driver ahead of time
- Using public transportation or a rideshare
- Stopping friends from driving if they're under the influence of drugs
- Talking to teens about the dangers of underage drinking and substance use
- Protecting yourself against other impaired drivers by wearing your seat belt

Educating yourself and spreading awareness on the risks of drug-impaired driving can save lives.

GETTING HELP WITH A SUBSTANCE USE DIAGNOSIS

For those struggling with substance use disorders, Mirmont Treatment Center has helped thousands of people on the journey to recovery and healing. It offers inpatient and outpatient care—including medically monitored detoxification and dual diagnosis rehabilitation—a partial hospital program and intensive outpatient programs designed to help patients ages 14 and older.

Mirmont Outpatient Centers in Broomall, Exton and Media also provide treatment in the form of individual counseling or group sessions. In the group environment, patients are supported by peers who are also learning to live without drugs and alcohol, along with friends and family.



HERE TO HELP

If you or anyone you know is struggling with substance use, help is available 24/7. Call our team of experts at **1.888.CARE.898 (1.888.227.3898)**.





Can you treat carpal tunnel with occupational therapy?



Beth McNeal, OTR/L, CHT
Occupational Therapist

You try to send a text, but there goes that pain in your hand again. You open your laptop to draft an email and feel numbness or tingling up your arm. These things might feel normal, but if you've been ignoring these symptoms for a while,

you may be experiencing something more serious than everyday pain.

Carpal tunnel syndrome is a condition that can be caused by pinched nerves in your wrist. The numbness and tingling sensations are triggered when your hand stays in a prolonged bent position or is used in gripping activities for a long period of time.

When it comes to hand, wrist or arm pain from carpal tunnel syndrome, you don't have to just power through it. Occupational therapy can provide customized interventions to help you perform your daily activities without pain.

Beth McNeal, OTR/L, CHT, an occupational therapist (OT) and certified hand therapist at Main Line Health, evaluates and treats patients with injuries to the hand, wrist and elbow using personalized care plans.

"Many people feel they can try to live with the tingling and pain or decreased strength and coordination to avoid surgery, hoping it will resolve on its own," says McNeal. "If left untreated, the muscles of the hand start to waste away and damage becomes irreversible."

Factors that can contribute to carpal tunnel syndrome include:

- Repetitive hand and wrist movements
- Certain underlying health problems, including osteoarthritis, rheumatoid arthritis and diabetes
- Wrist anatomy
- Swelling caused by trauma or injury to your wrist
- Fluid retention that can occur during menopause or pregnancy

Repetitive activities can trigger carpal tunnel syndrome. As much as you try to ignore the symptoms, they may only get worse.

Before considering carpal tunnel surgery, occupational therapists like McNeal can fit patients with custom splints to minimize symptoms. After surgery, they can also help with:

- Range-of-motion challenges
- Strength and coordination
- Scar management
- Loss of feeling and hypersensitivity
- Swelling control
- Performing daily activities

"Occupational therapy focuses on the meaningful tasks and recreational activities we perform on a daily basis," says McNeal. "It's an invaluable element to restoring function once diagnosed with carpal tunnel syndrome."

NOW OPEN: PAOLI HOSPITAL'S NEUROSURGERY LAB

Paoli Hospital, part of Main Line Health, recently opened a new, state-of-the-art Neurointervention Lab that offers the most advanced diagnostics and treatment available for patients experiencing stroke. In collaboration with Jefferson Health Neurosurgery and Tele-Neurocritical Care Services, the lab brings leading neurointervention care to Chester County.

"Stroke is the leading cause of disability in the U.S., and timely treatment is the difference maker. Now, we'll be able to provide lifesaving and life-changing stroke treatment within minutes of diagnosis. Offering these services at Paoli Hospital will have an enormous impact on patient outcomes," says Dr. Sumeet Multani, director of neurointervention services at Paoli Hospital.

The meticulously designed space includes dedicated procedure suites and well-appointed patient areas for pre- and postprocedure care. Features include the most advanced imaging equipment available to guide neurointerventional procedures, unparalleled amenities to ensure patient comfort and a collaborative environment where a dedicated team of specialists skilled in treating complex neurological conditions can interact with ease.

Learn more about Main Line Health's Neurointervention Program at mainlinehealth.org/stroke.

SAY GOODBYE TO PAIN

With the right treatment plan, you can not only ease carpal tunnel symptoms but also prevent long-term damage. To make an appointment, call 484.596.5000.



Carry your health record in your pocket with the MyChart App

Main Line Health MyChart is a secure patient portal to connect you with your health care team and information. And when you download the MyChart app, you can access it all wherever you go right from your smartphone.

The app is available on Android or iPhone—just download the MyChart app and select Main Line Health as your provider. Allow location access and enable notifications to complete check-in tasks before you arrive and be alerted when test results are available.

Whether you access MyChart on your smartphone or desktop, you can also use it to:

- ☐ **Manage your appointments:** Schedule, reschedule and cancel appointments with your providers, as well as select imaging and lab appointments.
- ☐ **Communicate with your providers:** Do you have a question about your visit or need a prescription refill? Send nonurgent messages via MyChart to a member of your health care team.
- ☐ **Pay your bills:** MyChart is a simple, safe and secure way to receive statements, review balances, pay bills and request payment plans.
- ☐ **Prepare for your visit:** Save time by completing an eCheck-in. You can update personal, insurance and health information; complete forms and pay copays prior to your visit.
- ☐ **Access your test results:** View your results and your provider's comments within days for select imaging, lab and other tests.

Main Line Health MyChart should never be used for emergency or urgent issues. If you are experiencing a medical emergency, call **911** immediately. If you need urgent medical care, go to the closest emergency room or call your doctor.

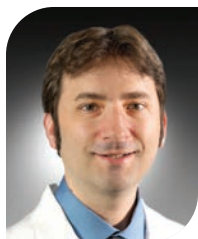


ACCESS MAIN LINE HEALTH MYCHART



Scan the QR code to visit mainlinehealth.org/mychart to log in or signup and download the MyChart app on your mobile device. Our Help Desk is open 24 hours a day, seven days a week. Please call **484.580.1080** or send a secure message at mainlinehealth.org/portalsupport.

Blood pressure and cholesterol: The truth behind the numbers



Michael L. Tobin, MD
Cardiologist

Your age, your height, your weight—there are many ways health is measured in numbers. Some are straightforward. You know what they mean. Others are more complex, like your blood pressure and cholesterol.

WHAT ARE BLOOD PRESSURE AND CHOLESTEROL?

Blood pressure is the pressure of your blood against your artery walls as it's carried from your heart to the rest of your body.

Cholesterol is a waxy substance in your blood that is used to make cells, vitamins and hormones.

When either of these numbers are high, it can cause heart disease—the leading cause of death for men and women in the United States. High cholesterol can cause high blood pressure. But what does this really mean?

Michael L. Tobin, MD, a cardiologist at Lankenau Heart Institute, part of Main Line Health, uses these numbers daily to help him understand his patients' heart health. He says these five truths can help you understand more about these numbers, too.

1 High blood pressure is always a concern. Also known as hypertension, high blood pressure (HBP) is when your blood pressure numbers are higher than normal. Normal blood pressure is lower than 120 systolic and 80 diastolic. This is written as 120/80 mmHg and read as “120 over 80.”

“Blood pressure that's high is always going to be bad,” explains Dr. Tobin. “You can always say: If we lower it, that's good.”

Over time, HBP can damage your arteries, decreasing blood flow to your heart and other organs. Eventually, HBP can lead to kidney disease, heart attack and stroke.

2 High cholesterol is more complicated. In general, ideal cholesterol levels are:

- Lower than 200 mg/dL (total cholesterol)
- Lower than 130 mg/dL (LDL)
- Higher than 40 mg/dL for men and 50 mg/dL for women (HDL)

Your target numbers vary depending on your age, health conditions and which kind of cholesterol is high. For instance, if your total cholesterol level is high because of a high HDL level, which is known as “good” cholesterol, you may not be at a higher risk. But if your “bad” cholesterol, known as LDL cholesterol, is high, it could be a problem.

“Cholesterol is a part of the picture—not a direct link,” Dr. Tobin says.

3 Black Americans have a higher risk of HBP. The rate of HBP among Black Americans is one of the world's highest, with more than 50% of the population having the condition. The risk of complications is also higher. This may be due to several factors, such as lack of access to care or medication.

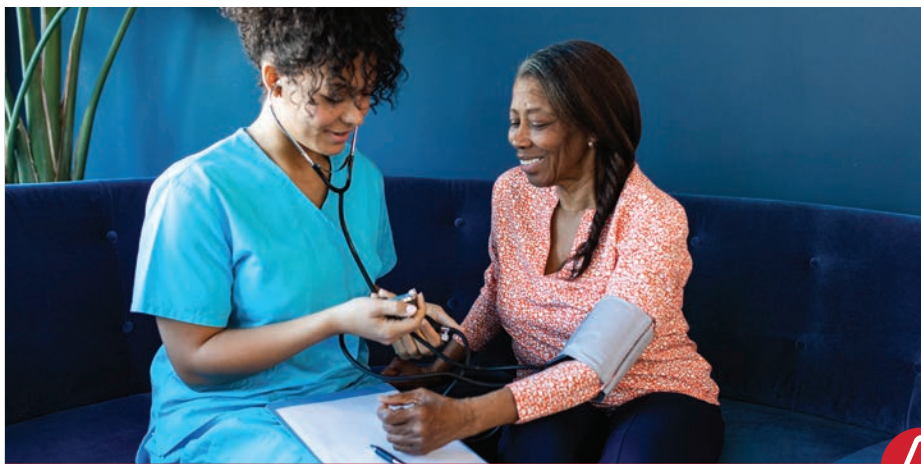
Some blood pressure control medications may also not be as effective in Black people, likely because of other health conditions and their side effects.

4 Blood pressure varies. You may have noticed your blood pressure numbers are different each time a reading is taken. This is normal. Blood pressure changes depending on the time of day, what you're doing and how you're feeling.

Rather than focusing on one blood pressure reading, Dr. Tobin looks for trends over time.

5 Genetic testing for high cholesterol may be helpful. Familial hypercholesterolemia (FH) is a genetic condition that basically means you're born with high cholesterol. This can lead to developing coronary heart disease decades earlier in life.

Although routine screening is usually enough to ensure a person with FH gets treatment, some risk factors associated with FH aren't measured in a routine blood test. If Dr. Tobin suspects a family history of high cholesterol, he may use genetic screening to get more information.



UNDERSTAND YOUR NUMBERS

Your blood pressure and cholesterol numbers are an important part of your overall health. But, you don't need to know what they mean on your own. Download Lankenau Heart Institute's heart disease prevention guide at mainlinehealth.org/heartcareguide and talk with your primary care provider about your heart risk.



Choosing the right OB/GYN for a lifetime of care



Jessica Hirsch, MD, FACOG
Obstetrician/
Gynecologist

When thinking about the care an obstetrician/gynecologist (OB/GYN) provides, you might first think of reproductive health or pregnancy care needs. But that's only a part of what this type of specialist can do for you, explains

Jessica Hirsch, MD, FACOG, obstetrician/gynecologist at Main Line Health.

"OB/GYNs are the experts on women's health and well-being at every age and stage," she says.

To get the most out of the relationship you'll form together, it's important to choose a provider with whom you feel comfortable and who can fit your needs for a lifetime of care.

So where do you begin?

LIST YOUR PRIORITIES

"Before you start your search, think about what's important to you in an OB/GYN and make a list," suggests Dr. Hirsch. "Then you will be prepared to make an informed decision when selecting the right provider." This list might include:

- If the provider has experience in a specific health concern you have
- If their office accepts your health insurance
- Which hospital the provider refers to
- If the provider offers telehealth services
- If the office location and hours are convenient

NARROW YOUR CHOICES

A good next step when choosing an OB/GYN to contact is to ask your family, friends and others you trust for referrals. Ask what they like about the provider they see. If you're expecting a baby, ask whether the doctor shares your birth philosophy.

ASK QUESTIONS

Call the offices of two or three providers who interest you. Find out if the provider meets your criteria, is accepting new patients and takes your health insurance. The office staff can also tell you about the provider's education, training and board certification.

MEET FACE-TO-FACE

Schedule an initial visit with the provider. You'll likely be asked to fill out new-patient paperwork, so be prepared with your medical history and a current list of medicines. After your visit, ask yourself the following questions. Did the provider:

- Spend enough time with me?
- Make me feel comfortable?
- Answer my questions?
- Explain things so I could understand?

"Remember, you and your OB/GYN are a team in your health care efforts," says Dr. Hirsch. "It's worth taking the time to ensure you can build trust."

WHAT KIND OF CARE CAN AN OB/GYN PROVIDE?

Here are some services your OB/GYN can provide:

- **Well-woman check-ups.** This type of visit promotes health and wellness through preventive care including physical exams, vaccines and advice on lifestyle changes.
- **Screening tests.** Your OB/GYN can advise you on how often you should be screened for cervical and breast cancer, as well as for high blood pressure, diabetes and osteoporosis.
- **Menopause care.** See your OB/GYN for advice on managing menopause symptoms and to discuss whether hormone therapy is right for you. They can also recommend ways to protect your heart and bone health.
- **Urinary incontinence care.** Get help for bladder control problems. Ask about exercises to help strengthen your pelvic floor muscles.
- **Sexual health care.** Your OB/GYN is your go-to expert on vulvar and pelvic floor health, birth control, safe sex practices and testing for sexually transmitted infections. They can also address issues such as painful sex or loss of sex drive.



NEW PATIENTS WELCOME

For more information about our comprehensive OB/GYN services, visit mainlinehealth.org/obgyn or call 1.866.CALL.MLH (1.866.225.5654).



Finding relief with the use of nonsurgical orthopaedic treatments



Emily Levy, MD
Sports Medicine
Physician

When it comes to orthopaedic conditions, finding a solution can be frustrating. Initial therapies may not work. And if first therapies fail to help, many people resolve to live in pain or seek more invasive care.

Thankfully, effective solutions are available without the need for surgery. Emily Levy, MD, a board-certified sports medicine physician with Main Line Health, is dedicated to providing patients nonsurgical relief.

“Although my title is in sports medicine, I treat musculoskeletal issues of all kinds and in people at every activity level,” explains Dr. Levy. “Pain affects not only how we move but our ability to do the things we love. My goal is to provide the least invasive treatment options that achieve real results.”

ACCURATE DIAGNOSIS

Dr. Levy’s success in resolving musculoskeletal pain stems from her expertise in accurate diagnoses using physical examination, medical history and ultrasound imaging. Musculoskeletal problems—which involve the muscles, bones, joints and connective tissues—can vary from low back and hip pain to rotator cuff injuries, tennis elbow, Achilles pain, ganglion cysts and more.

“Many patients come to me after years of unsuccessful treatment without ever receiving a clear diagnosis,” says Dr. Levy. “Pinpointing the problem is key.”

NONSURGICAL SOLUTIONS

Once diagnosed, Dr. Levy involves patients in the decision-making process and develops a personalized treatment plan. Treatment options range from relative rest to targeted physical therapy or more procedural-based therapies like ultrasound-guided injections, aspirations and more. Recently, Dr. Levy began offering platelet-rich plasma (PRP)



therapy—an innovative treatment that uses a concentration of the patient’s own blood platelets to speed healing.

Many patients have trusted in Dr. Levy’s orthopaedic expertise, including her fellow physicians. One Main Line Health doctor sought Dr. Levy’s care after years of worsening hip pain. Although the physician had undergone multiple imaging tests, the problem was never diagnosed. And despite extensive physical therapy, she still suffered.

“The pain became so intense, I was unable to take a walk,” says the physician. “As a former college athlete and active person, it dramatically impacted my quality of life.”

LIVING LIFE

Dr. Levy diagnosed her colleague with greater trochanter pain syndrome, a common condition in women ages 50 and older that occurs due to tendon injury and overuse. The problem stems from a build-up of disorganized scar tissue in the tendon

that attaches to the lateral hip, causing tendon fibers to function abnormally. Dr. Levy recommended percutaneous needle tenotomy (PNT), a nonsurgical treatment performed in her office that works to break up scar tissue and restart the healing process.

“By pinpointing tendon abnormalities using an ultrasound, I can use a needle to disrupt the abnormal tendon and restimulate the body’s own healing capabilities,” explains Dr. Levy.

Today, just weeks after PNT treatment, Dr. Levy’s colleague is back to walking miles a day. She works out at the gym on an elliptical machine. And she has regained her quality of life.

“With just one treatment, my pain was dramatically reduced. It’s amazing,” says the physician. “As a physician myself, the condition never occurred to me, and I had a difficult time finding answers. Dr. Levy is confident, down to earth and a true expert in care.”

YOU HAVE OPTIONS

When it comes to pain relief, we are leaders in nonsurgical and minimally invasive orthopaedic care. To schedule an appointment with an orthopaedic specialist at Main Line Health, call 484.580.1070 or visit mainlinehealth.org/ortho.



5 things to know about the risk of cervical cancer



David O. Holtz, MD
Chief of Gynecologic
Oncology

Just as regular checkups and screenings can help you detect health issues as early as possible, knowing your risk factors can do the same.

When it comes to cervical cancer, there are some risk factors to note. By talking to your health care provider about which risk factors apply to you, you can work together to monitor your cervical health.

1 The HPV vaccine is your best defense against cervical cancer. There are low-risk types of human papillomavirus (HPV) that aren't frequently linked to cancer. However, there are high-risk types of HPV that are linked to many cancers, including cervical cancer.

"While HPV infections are common—and the body typically fights the infection on its own—in some women, the infection can become chronic. The combination of a chronic infection and a high-risk type of HPV can eventually lead to cancer," says David O. Holtz, MD, chief of gynecologic oncology at Main Line Health.

There currently isn't a cure for HPV infection. However, there are treatments for the abnormal cell growth that HPV can cause. That's why screening tests like Pap smears and HPV tests are so important.

You can get a Pap smear and an HPV test at the same time. Talk with your primary care doctor about when you should start having HPV tests and how often. HPV tests for those older than age 30 at average risk can be safely done every five years. Your doctor may recommend every three years between ages 21 and 29.

You can also talk with your doctor about HPV vaccines that can help prevent HPV infection and, as a result, certain cancers. HPV vaccines are now recommended for all adolescents and adults ages 9 to 45.

2 Women who smoke are twice as likely to develop cervical cancer compared with those who don't.

Harmful substances from tobacco are absorbed through the lungs and travel to the rest of the body through the bloodstream. By-products of tobacco can damage the DNA of cervical cells, and smoking weakens the ability to fight HPV infection.

All these reasons make smoking a risk factor for developing cervical cancer. Smoking is harmful to your body in many ways, including your cervical health. The best way to keep your body and cervix healthy is to not smoke. This includes traditional cigarettes and vaping.

If you want to commit to a smoke-free life, the Main Line Health Smoking Cessation Program can provide you with resources and support on your journey to quit smoking.

3 Certain pregnancy-related factors may put you at a higher risk of cervical cancer. It's important to note that pregnancy itself doesn't cause cervical cancer. However, having more than two full-term pregnancies and being younger than 20 years old at your first full-term pregnancy may put you at a higher risk of developing cervical cancer.

There are a few possible reasons for this correlation:

- Hormonal changes that occur during pregnancy may make you more susceptible to HPV infection.
- Pregnancy lowers your immune system, which may allow an HPV infection to develop.

"Developing HPV or cervical dysplasia does not affect the pregnancy timing or route of delivery, and it has no effect on the baby," says Dr. Holtz.

Regular prenatal screenings are key to a healthy pregnancy. While not all pregnant women are routinely tested for HPV, remember that Pap tests and HPV tests can be done at the same time to see if you have a type of HPV that can cause cervical cancer.

It's important to note that women who have limited contact with health care providers may get the regular care they need only while they're pregnant. Because of this, abnormalities like HPV may be detected only during pregnancy.

"It's extremely important that any abnormalities, no matter when they are detected, are followed up and treated properly," says Dr. Holtz.

4 Certain sexual activity factors can increase the risk of cervical cancer.

Sexual activity by itself doesn't cause cancer. However, a few sex-related risk factors can increase your risk of developing cervical cancer, including:

- Becoming sexually active at a younger age (especially in your teenage years)
- Having at least one sexual partner who is considered high-risk

Any sexual contact—including oral sex, penetrant sex, genital rubbing and shared sex toys—can result in HPV infection, which increases your risk of cervical cancer. Practicing safe sex by using protection and having open conversations about your and your partner's past sexual activity can help you reduce your risk of an HPV infection.

5 You can take action to lower your risk of cervical cancer. There are several ways you can lower your risk, including:

- Getting the HPV vaccine
- Keeping up with regular screenings, such as Pap tests and HPV tests

PREVENTION IS KEY

Talk with your health care provider about each of the ways to support your cervical health. Together, you can create a plan to reduce your risk of cervical cancer. To make an appointment, call 1.866.CALL.MLH (1.866.225.5654).



Calendar of events

With you through your cancer journey

SUPPORT GROUPS: Information, support, connections

BREAST CANCER SUPPORT GROUP

First Tuesday of each month, 5:30 pm
Contact: 484.227.3141 or mantegnad@mlhs.org

CAREGIVER SUPPORT GROUP

Second Wednesday of each month, 5:30 pm
Contact: 484.565.1253 or powersv@mlhs.org

COLORECTAL CANCER SUPPORT GROUP

Second Thursday of each month, 1:00 pm
Contact: 484.476.8503 or bidasg@mlhs.org

COPING WITH CANCER A TO Z

Second Monday of each month, 4:30 pm
Contact: 484.227.3794 or stolberg@mlhs.org

METASTATIC BREAST CANCER SUPPORT GROUP

First Tuesday of each month, 4:30 pm
Contact: 484.565.1253 or powersv@mlhs.org

CANCER SURVIVORS SUPPORT GROUP

Third Thursday of each month, 4:00 pm
Contact: 484.337.3594 or resnickm@mlhs.org

BLOOD PRESSURE SCREENINGS

Free screenings at locations across the region. Visit mainlinehealth.org/events for a current list.

COMMUNITY CPR

These American Heart Association courses teach CPR and AED use and relief of choking in adults and children, and CPR and relief of choking in infants. Participants receive an AHA card upon completion (valid for two years). Cost: Heartsaver course \$75, BLS course \$60. Preregistration with payment is required. Go to mainlinehealth.org/events for class dates and to register.

FREE WIG PROGRAM

For female cancer patients preparing to undergo or currently undergoing chemotherapy or radiation treatment. For information or to schedule a free wig fitting, call 484.337.5215.

HEALTHY STEPS FOR OLDER ADULTS

This program is designed for PA residents ages 60+ to raise awareness of falls. Includes tips on how to reduce falls and improve overall health and provides referrals and resources. For dates, times, locations and registration, please call 484.337.5212 or email kanem@mlhs.org.

MLH KING OF PRUSSIA TEACHING KITCHEN

Our King of Prussia Community Health and Outreach team offers a variety of health-related educational programs and cooking demonstrations. For upcoming events and how to register, please visit mainlinehealth.org/kopevents.

QUESTION. PERSUADE. REFER® (QPR)

Free virtual or in-person evidence-based program provides practical and proven suicide awareness and prevention training. Appropriate for any adult. For registration questions or to schedule this program for your organization, call 484.565.8328 or email eckenrodel@mlhs.org.

STOP THE BLEED®

Severe bleeding injuries left unattended can result in death. When individuals learn the skills to stop uncontrolled bleeding during an emergency situation, lives can be saved. For questions, individual registration or to schedule this free program for your organization, call 484.565.8328 or email eckenrodel@mlhs.org or call 484.476.8494 or email krousem@mlhs.org.

THE DEAVER HEALTH EDUCATION CENTER AND THE WELLNESS FARM

Offering in-person and virtual health and education classes to schools and community or church organizations. Classes are for school-age or adult groups. To schedule, call 484.476.3434 or email lhhealthcenter@mlhs.org.

VIRTUAL PAIN SEMINAR: HIP AND KNEE

Keep the spring in your step with this one-hour webinar! You will learn about the anatomy of the hip and knee, common causes of joint pain, and some simple steps you can take to lessen the chance of a hip or knee injury. Upcoming classes on May 15, June 19 and July 24. Register at mainlinehealth.org/orthoclasses.

WOMEN'S HEART INITIATIVE'S HEART OF LIFE: AN EVENT TO SUPPORT MATERNAL CARDIAC HEALTH

Enjoy an afternoon devoted to all women—mothers, daughters, sisters, spouses—while supporting heart-health initiatives in pregnancy and beyond. Sunday, May 7, 2023, 1:00–4:00 pm, Waynesborough Country Club. Visit mainlinehealth.org/heartoflife for details.

SAGE (SEXUALITY AND GENDER EXPANSIVE) INTENSIVE OUTPATIENT PROGRAM

Open to adults 18+ who identify as LGBTQ+ and live with a primary mental health diagnosis. This group, held at Mirmont Outpatient Center Broomall, includes mental health psychoeducation, DBT-informed therapy, mindfulness and a culturally responsive and strengths-based approach. To schedule an assessment, call 888.227.3898.

GRIEF AND LOSS OUTPATIENT GROUP

This outpatient group, located at Mirmont Outpatient Center Broomall, is open to anyone 18+ who is currently in an outpatient or intensive outpatient program. The group will offer a balance of psychoeducation, open process and experiential activities designed to help members move through the complicated and often overlooked experience of one's grief. Call 888.227.3898 for more information.

For a comprehensive list of all the community programs offered at Main Line Health, visit mainlinehealth.org/events.

Research brings autoimmune disease treatment closer



Laura Mandik-Nayak, PhD
Researcher

When Laura Mandik-Nayak, PhD, arrived at Lankenau Institute for Medical Research (LIMR), part of Main Line Health, in 2006 as a young scientist devoted to exploring the causes of autoimmune disease, she found the

institute's president and CEO immersed in efforts to find a way to turn on the immune system to fight cancer. The relevance to her area of study became immediately clear.

George Prendergast, PhD, president and CEO, and LIMR researcher Alexander Muller, PhD, felt stopping an enzyme believed responsible for shutting down the immune system held promise for cancer patients—but could leave those also suffering from autoimmune disease out in the cold.

"The immune system of someone with an autoimmune disease, such as rheumatoid arthritis (RA), is already on overdrive, attacking the body's healthy cells as well as foreign bacteria and viruses," Mandik-Nayak says. "If you have an autoimmune disease and you're waking up the immune system, you would expect that to make it worse."

But when they experimented on mice with RA, she says, "We found it was the reverse. It was turning off the arthritis."

The surprise marked the beginning of Mandik-Nayak's journey to find a drug targeting the enzyme indoleamine 2, 3-dioxygenase 2 (IDO2) to treat RA patients. That journey, she believes, will extend to numerous autoimmune diseases. "I think the underlying causes of autoimmune diseases are probably pretty similar," Mandik-Nayak says. "They may be using common pathways. With type 1 diabetes, the immune system is attacking your pancreas. In the case of RA, it's attacking your joints and possibly other body systems, such as the skin, eyes, lungs and heart. With lupus, the attack is most widespread. The disease can



potentially damage most of the body's tissues and organs."

Mandik-Nayak's reasoning about the similarities among autoimmune diseases is shared by the Myasthenia Gravis Foundation. She has received a pilot grant to determine if the lessons learned from RA apply to myasthenia gravis as well. In patients with myasthenia gravis, communication between nerves and muscle is destroyed, resulting in weakness of the skeletal muscles and affecting the eyes, mouth, throat and limbs in particular.

Progress with RA remains the primary thrust. RA affects around 1% of the world population and can begin at any age, although the chance of onset is highest for those in their 60s. Women are two to three times more likely to develop the condition than men.

Of course, blocking the IDO2 pathway to treat RA is not as simple as turning off a switch. Mandik-Nayak and her team continue to search for an approach that's practical for treatment.

Initial studies with LIMR colleagues Lisa Laury-Kleintop, PhD, and Lauren

Merlo, PhD, used a monoclonal antibody to target IDO2 that appears effective in preclinical RA models. However, the antibody's mechanism remains difficult to explain and efforts to obtain funding for further research have been challenging.

Mandik-Nayak's team also saw success with genetic material called small interfering RNA (siRNA), using a novel delivery system to protect and direct the siRNA used by retired LIMR professor Janet Sawicki, PhD, to inhibit the expression of proteins involved in cancer.

"However, even the protected siRNA has a short half-life," Mandik-Nayak says. "So you would need repeated injections. That means it might be difficult to translate into a feasible therapy. We need a better approach."

INTERESTED IN INNOVATION?

Learn more about the research happening at Main Line Health at mainlinehealth.org/limr.



Signs of depression in men



Stephen Mechanick, MD
Chairman of the
Department of
Psychiatry

Mood swings and anger in men can be concerning for many reasons and may, in fact, be signs of depression. And while depression in men may show up at any time in life, male depression peaks in midlife—perhaps due to challenges that are common at this stage

of life. Signs of midlife depression in men may also include:

- Irritability
- Increased risk taking
- Loss of control
- Use of alcohol/drugs
- Impaired work functioning
- Social withdrawal

“Culturally, men are conditioned to be more aggressive, to focus on fighting things and not to talk about feelings, which may be seen as a sign of weakness,” says Stephen Mechanick, MD, chairman of the Department of Psychiatry at Bryn Mawr Hospital, part of Main Line Health.

Dr. Mechanick is quick to caution against generalizations, however. Anger, he says, “doesn’t necessarily mean depression. Anger is a symptom of something, just like fever is a symptom of something. It’s not always depression.”

WHY DO MEN GET DEPRESSED?

While some men are attuned to what may be causing anger and upset in their lives, others may not realize how stress and environmental factors are impacting their physical and emotional health and affecting their behavior. Common causes of depression in men include:

- **Life disappointments:** By midlife a man may be assessing his achievements and failures. A man susceptible to depression may internalize loss, failure and grief related to this.
- **Mortality:** For a man coming to terms with death as a fact of life, thoughts of sadness and loss may fuel feelings of anger and frustration.

- **Financial stress:** Fear and the constant strain of not producing enough to cover expenses can be mentally and emotionally draining.
- **Partner/relationship strife:** Lack of fulfillment in a relationship may erode self-confidence and feelings of masculinity over time and can lead to deepening depression.
- **Medication side effect:** Medications, including some blood pressure medicines, proton pump inhibitors and pain relievers, may have depression as a side effect.
- **Health changes:** Such challenges may trigger feelings of anxiety and concern. Erectile dysfunction may also contribute to these concerns.
- **Behavior/lifestyle:** Weight gain, addiction or a lack of attention to well-being and physical exercise can all lead to a depressed mood.

TREATMENT FOR DEPRESSION IN MEN

Treating depression starts with recognizing there’s a problem. Some men may realize

certain aspects of their lives are not working as well as they should but may still be in denial about the need for help.

“If symptoms of depression are causing enough distress to themselves or to another party, it makes sense to seek assistance,” says Dr. Mechanick. Depending on the severity of the symptoms, treatment options may include:

- **Counseling,** including individual counseling and support groups.
- **Medication,** such as an antidepressant or antianxiety medication.
- **Inpatient or partial hospital psychiatric treatment,** when extra care and oversight may be needed.
- **Drug and alcohol treatment.** For men with both mental health and addiction issues, getting help for addiction is critical.

“We encourage people to seek help early, while it’s potentially easier to correct and when there has been less suffering,” adds Dr. Mechanick. “You don’t get a prize for suffering.”

WE ARE HERE TO HELP

To access any of our behavioral health services across Main Line Health, or to talk with your primary care physician or a mental health or substance use disorder specialist, call us directly at **1.888.CARE.898 (1.888.227.3898)**.



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Excitement builds for opening of new Riddle Hospital Pavilion



Shelly Buck, DNP, MBA
*President,
Riddle Hospital*

This summer, Riddle Hospital, part of Main Line Health, is opening a new five-story patient pavilion. It is the cornerstone piece of the largest facility improvement in the hospital's history. We talked to Riddle Hospital's president,

Shelly Buck, DNP, MBA, to find out what to expect from the updates.

Q: What are the biggest differences once the project is complete? The hospital looks much larger than it did. People will notice that it's a modernized facility. Inside they'll find 76 new private rooms, new operating rooms, a new birthplace maternity center, a renovated Intensive Care Unit and much more.

Q: What will the patient rooms be like? The new private rooms are all designed to promote a healing environment. Windows allow for a lot of light to come in and there are neutral colors, tones and textures. There is enough space in the rooms to move around and have loved ones join you in your healing process. On the fourth floor, patients will see a green roof covered in plants, another nice healing touch that adds to the natural and restorative environment.

Q: What's changing in the maternity unit? There will be five labor rooms, 15 postpartum rooms and a newly designed Level 2 Neonatal Intensive Care Unit (NICU). The bays will be much larger, so families can sit comfortably with their babies.

Q: Is there any new technology? The fifth floor of the pavilion is equipped to be a negative pressure unit for all or half the floor. As we learned with COVID and the virus being airborne, we need to have the capability to isolate a large number of rooms

or single rooms. We want to be even better prepared to manage care and operations if we are faced with another pandemic.

Q: Is there an aspect of this project that's particularly meaningful for you? Shortly after we broke ground in 2020, we began an engagement initiative called Project S.N.A.P. We invited members of the community to create artwork of what Riddle Hospital means to them—they drew things like hearts, doctors and nurses, and they wrote words that resonated with them. We collected thousands of these artwork tiles, which will be part of a mosaic displayed in the atrium. The end result is a mural, but really it is the community's voice of what Riddle Hospital is to them.



SAVE THE DATE

14 Join us on June 14, 2023, for a celebration of Riddle Hospital's new patient pavilion. Take a tour, enjoy activities, have light refreshments and get a first peek at the Project S.N.A.P. mosaic! To learn more and RSVP, visit mainlinehealth.org/riddleevent.

