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BEATING BAD STRESS

A contentious election year, an onslaught of media headlines, job tension, and family complications. The past year has been a difficult one for most of us and feeling “stressed-out” is common.

In fact, stress is very normal, explains Philip R. Appel, PhD, FASCH, director of psychological services for MedStar NRH. There are two categories of stress: Good stress, called eustress, and bad stress, which is distress. Eustress can help keep us motivated, happy and challenged. But when good stress becomes difficult to manage, tension builds, performance suffers and we feel distress.

“We can become overloaded with stress,” says Dr. Appel. “This type of distress can have a negative impact on our emotional and physical health. It can upset the balance of mind, body and spirit that is important to our well-being and to our quality of life.”

At MedStar NRH, Dr. Appel helps patients deal constructively with the challenges they face after injury or illness. But he says his “Strategies for Stress” can be used by any of us to manage the distresses we are likely to experience in our lives:

### TIME ORIENTATION
Be present in the moment, Dr. Appel says. Don’t dwell on what was or what may happen in the future.

### PERSPECTIVE
Remember that how you perceive the world around you isn’t always shared. In simple conflicts, try to see the situation from the other person’s perspective. Ask yourself “Do I want to expend any more energy on this?” says Dr. Appel. “Be humble,” he says. Learn to let go of the little things.

### ACCEPTANCE
Face reality—resistance is futile! Instead of fighting what’s happening, find a way around the problem. “It’s like swimming in a riptide,” Dr. Appel says. “You can’t swim against the current. Instead move in a diagonal direction to reach your goal.”

### SELF-RESPECT
Trust and believe in yourself. Don’t overload your mind with doubt. “The only things we can control are our inner thoughts,” Dr. Appel explains. Our “self-talk” influences whether we experience eustress or distress. Don’t berate yourself. Praise yourself.

### SELF-CARE
Take time to care for yourself. Schedule activities you enjoy and that are comforting—read a good book, see a film, turn off social media. And share your concerns with friends and family.

### MIND-BODY CONNECTION
Distress can have a negative effect on our physical well-being. Dr. Appel advises that we exercise and eat healthy foods. Try meditation, yoga or breathing techniques to relax.

### DIS-IDENTIFY
Whatever you identify with controls your experience. Sometimes dis-identifying is the way to avoid distress and move forward. “For example, a young man who identifies as a football player has a devastating injury,” Dr. Appel explains. “He believes he has no future until he begins to see alternatives.” He “dis-identifies” with the notion that he is only a football player.

### RE-WRITE YOUR OWN PROGRAM
Our emotional responses are based on our beliefs. Next time you are about to respond in a negative way, stop and take a second look. Perhaps there are other ways to see the situation and it may be possible to see the “both/and” of the situation rather than the “either/or.” Change those thoughts and you will change your emotional experience.

While self-help is often effective, Dr. Appel says that if over time one’s distress causes sleep disturbances, moodiness and depression, ask for professional help and see a therapist.
President’s Message

Multiple Routes, Single Goal

In health care, and in much of our lives, the future is uncertain. One has only to look at the recent Presidential election to confirm this statement, regardless of whether your candidate won or lost. No matter how carefully we chart our course we can’t always anticipate what will come next.

In health care, a strategy that is grounded in doing what is safe, effective, and efficient for patients and their families is the best defense against uncertainty. While the health care landscape will change, our strategic objective remains constant: Provide the best possible care to the patients and community we serve. When barriers impede our path to that end, we simply choose another route.

Stepping Up to Innovation

For us, that flexibility means MedStar NRH is well positioned to take advantage of new opportunities and explore avenues of innovation unimagined when a multi-year strategic plan was developed. This is true of today’s digital world and its universe of information. It has revolutionized our lives—and health care delivery. By June, an integrated information system will be fully implemented throughout MedStar Health. Clinicians will have access to data about patient interactions across the 10 MedStar hospitals and affiliated physicians, including MedStar NRH. This is a tremendous boost to continuity of care and patient safety.

We have just implemented a new electronic health record for our thousands of therapy visits in our outpatient centers. WebPT is specially-designed software that allows our therapists to access and customize patient notes quickly and easily. The system decreases administrative red tape for patients and therapists—giving both more time to spend in therapy. Electronic medical records are available to every therapist no matter where patients have received services within our network of more than 50 outpatient centers. We could not have anticipated this type of system a dozen years ago.

We’ve featured one of our newest outpatient centers on page 7 of this newsletter. We are very proud of the pivotal role our rehab specialists play at the MedStar Health Orthopaedics and Sports Center at Lafayette Centre. The center is the flagship site for sports medicine, and includes a very sophisticated Sports Performance Lab to serve professional and collegiate athletes—and all active adults.

Expanding Exemplary Services

MedStar NRH will also be partnering with MedStar Good Samaritan Hospital to operate its 69-bed inpatient rehabilitation unit in Baltimore. Despite the growth of outpatient services in recent years, we recognize that there is still a need for exemplary inpatient rehabilitation. We are delighted to bring our nationally recognized expertise to the hospital’s busy stroke and spinal cord injury rehab programs—and we will soon be adding programs for interventional pain, concussion care and sports medicine.

We also recognize that inpatient hospital care is being transformed across the country. All private rooms will soon be the norm. At MedStar National Rehabilitation Hospital we are making this feature a reality. Our Adding Life to Years™ fund raising campaign has surpassed the $18 million mark and nearing its $25 million goal. We are now moving forward to the design phase of a hospital addition that will allow us to provide private rooms for every patient. The addition will house a state-of-the-art brain injury and stroke unit and research facility.

In anticipation of this new addition, we have already begun to invest philanthropic resources in new equipment and technology. For example, we recently received a generous gift of $125,000 to purchase a new, state-of-the-art Zero G® gait training device with wireless technology to give our patients the confidence and security they need as they relearn to walk and rehab from injury. And through the generosity of our Team Members and Board of Directors, we raised more than $70,000 from our Annual Philanthropy Campaign to purchase DIEGO, widely regarded as one of the most advanced upper extremity rehab devices available today.

This kind of cutting-edge rehabilitation care is the result of the collaboration of Team Members, patients, families and donors that has sustained MedStar NRH for three decades. It remains critical to achieving our mission—and is as unchanging as our ultimate strategic goal.

“At MedStar NRH, our strategic objective remains constant: Provide the best possible care to the patients and community we serve.”

John D. Rockwood,
President, MedStar National Rehabilitation Network;
Senior Vice President,
MedStar Health
Busy McLean Outpatient Site Adds Expertise,

Therapy services, diagnostic capabilities and our physician specialty team are expanding at MedStar NRH Rehabilitation Network, McLean, to meet growing demand. In the last year alone outpatient visits to the Northern Virginia location have numbered nearly 16,000.

“We’ve increased our therapy space to accommodate growth in rehab services, such as physical, occupational and speech therapy,” says John Brickley, vice president for ambulatory operations and network development. “We’ve expanded hours of operation for patients’ convenience and grown our capabilities with more medical specialists including physiatrists, orthopaedists, neurologists, neurosurgeons and sports medicine physicians,” Brickley adds.

Comprehensive spine care services have also been expanded to streamline the diagnosis and treatment of a variety of acute and chronic conditions. “Care now includes on-site diagnostic and treatment services, including a new procedure suite for the administration of guided interventional treatments for a variety of problems, including spinal issues,” says Curtis Whitehair, MD, associate medical director for regional physiatry. “Advanced imaging at the center features the C-Arm device, which provides high resolution x-ray images in real time. This allows physicians to quickly assess conditions and monitor progress during treatments.”

**Comprehensive Rehab Expertise**
Matthew Maxwell, MD, is among the outpatient center’s growing team of physiatrists. Board certified in physical medicine and rehabilitation and with a fellowship in sports medicine, Dr. Maxwell is providing a wide-range of physiatry services for everything including chronic pain from spine and joint problems—to sports injuries.

For every patient, Dr. Maxwell’s ultimate goal is the same: Pinpoint the problem and develop a treatment plan tailored to the individual. “For patients with acute or chronic back pain—or an athletic injury—treatment begins by getting the ‘big picture’ with a thorough assessment,” he says. “In some instances, I can help locate the source of pain prior to surgery—and we provide immediate relief so patients can then complete a regimen of therapy and exercise,” Dr. Maxwell explains.

For these patients and others with chronic pain, injections of anti-inflammatory steroid medications in the joints and around tendons can help provide longer term relief. Dr. Maxwell always opt for the least invasive therapy to repair injury, reduce pain and improve patients’ ability to function day-to-day,” Dr. Maxwell adds.

Treatment often combines interventions including oral medications and physical therapy. “In some cases of muscle and tendon injury or pain, trigger point injections of local anesthetics can help relax muscles and provide immediate relief so patients can then complete a regimen of therapy and exercise,” Dr. Maxwell explains.

For these patients and others with chronic pain, injections of anti-inflammatory steroid medications in the joints and around tendons can help provide longer term relief. Dr. Maxwell

Matthew Maxwell, MD, MedStar NRH physiatrist, provides spinal care and sports medicine services at McLean.
is also treating patients with injections of platelet rich plasma (PRP)—spun from their own blood. “We are having very favorable results with PRP for a number of pain problems, including issues with tendons, ligaments, muscles and joints. The injections of concentrated platelets and growth factors help to speed up the healing process and can regenerate growth of new tissue,” he says.

With the new ultrasound capabilities at the McLean center, Dr. Maxwell can provide speedy diagnosis and perform ultrasound-guided injections including nerve blocks and anti-inflammatory drugs for joint, soft tissue and spinal conditions. “We can visualize the problem and develop a therapeutic plan during one visit. This speeds treatment, which can make a dramatic difference in recovery and quality of life.”

For the adolescent and adult sports’ enthusiasts he treats, Dr. Maxwell notes that “while diagnosis and treatment are paramount, I always put an emphasis on preventing a recurrence of injury.”

Dr. Maxwell works closely with the MedStar NRH team of therapists at the center—following patients’ treatment closely and providing follow-up care. “Our offices are located on the same floor as the gym so we are close at hand to consult on a regular basis.

“I also routinely confer with the other medical specialists at McLean—orthopaedists and neurosurgeons. When surgery is recommended, referral and follow-up is streamlined and convenient. It’s a very progressive approach to care.”

New Orthopaedist Joins McLean Center

MedStar Orthopaedic Institute’s Fred Mo, MD, is part of McLean’s growing team of specialists. Dr. Mo is an orthopaedic surgeon with expertise in cervical, thoracic and lumbar spinal disorders from degenerative discs to congenital spine malformations, such as scoliosis.

“Back pain accounts for millions of dollars in lost work productivity—and greatly reduced quality of life for so many Americans,” Dr. Mo says. “And spinal discs are most often the culprit. Discs weren’t made to last,” he adds.

“With every passing decade they erode a bit more. If everyone had an MRI, we would discover some degeneration of discs. As we age and discs disappear, the lack of support for the spine can cause debilitating curvature.”

Not all disc degeneration requires treatment, he adds. And still fewer patients need surgery. “We always consider the simplest solution first. For some patients, weight loss is the answer.

“Physical therapy and pain management are also first line treatment options. We work closely with MedStar NRH rehab physicians and therapists to develop treatment plans to relieve discomfort and get patients back to full functioning,” says Dr. Mo. “Still there are some instances when surgery is the right therapy choice. When patients’ lives are so disrupted by pain that they can’t work or function fully day-to-day, spinal surgery can provide relief from significant pain caused by bone-on-bone irritation and pressure on exposed nerves. Increasingly, this surgery is performed with minimally invasive techniques requiring just one or two small incisions and utilizing magnification,” Dr. Mo explains.

Maintaining mobility is a top priority for patients undergoing surgery, he adds.

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Orthopaedist Fred Mo, MD, specializes in cervical, thoracic and lumbar spine disorders, and works closely with MedStar NRH rehab experts including Kerry DeGaetani, PT, DPT, SCS, clinic director.
But in some cases, fusion of the spine with screws and rods creates stability and pain relief. I’ve had patients whose pain was so intense, sleep was impossible. Surgery gave them their lives back.

“No matter the type of surgery we perform, patients can receive their initial consultation, post-surgical follow-up, and therapy at the McLean center,” Dr. Mo adds. “That’s a convenience they really appreciate.”

Upper Extremity Expertise at McLean

Orthopaedist Curtis Henn, MD, specializes in complex disorders of the hand and upper extremities.

Curtis Henn, MD, is adding upper extremity expertise to McLean. Dr. Henn, a MedStar Georgetown orthopaedic hand surgeon and member of the MedStar Orthopaedic Institute, completed an orthopaedic hand and upper extremity fellowship—and specializes in the treatment of disorders affecting the tendons, bones, ligaments, nerves and vessels of the hand, wrist and elbow. He cares for patients with everything from thumb arthritis and tennis elbow to carpal tunnel syndrome.

“Today orthopaedic surgeons have very specific skills for good reason,” Dr. Henn says. “The anatomy of the hand and wrist are small and challenging, and the complexities of injuries and the latest surgical techniques require very specialized care,” he adds.

“I treat a wide range of issues from chronic to acute,” Dr. Henn explains. “And in most instances, treatment will be non-surgical—sometimes simple immobilization will resolve the issue,” Dr. Henn notes. “For other problems, therapy is the answer. I work closely with Dr. Matthew Maxwell and the certified hand therapists at the McLean center—we often share patients. And because the problems I treat also often effect nerves, I consult with MedStar Georgetown neurologists at the site, as well.”

A number of disorders including trigger finger, tendonitis, and arthritis, can be treated with injections, Dr. Henn notes. “In more than half of the cases of trigger finger, for example, a single steroid injection is enough to resolve the problem.”

When surgical intervention is needed, Dr. Henn utilizes the most advanced arthroscopic, minimally invasive and microsurgical techniques. “I utilize loupemagnification to visualize the often tiny anatomy. Occasionally we use suture that is thinner than a hair. In the repair of a lacerated tendon, for example, magnification allows us to repair the tendon using highly complex techniques,” he explains.

“With every technique we utilize, the goal is to reduce pain and restore function. And most often, the procedures are performed on an outpatient basis at MedStar Georgetown University Hospital—with local or regional anesthesia. Then I can see patients at the McLean center for follow-up appointments. They can have their post-surgical therapy there, as well.

“We have a very strong group at McLean and we have seen first-hand that close team work between medical specialists and therapists is the key to success for our patients.”
Top of the Line SPORTS PERFORMANCE CENTER OPENS at Lafayette Centre

MedStar NRH is taking center stage at the new, state-of-the-art MedStar Health at Lafayette Centre, which opened in September. Primary care services; a wide range of specialty medical care, including rehabilitation; diagnostic imaging; and surgical facilities are housed in 112,000 sq. ft., in two buildings in the heart of the nation’s capital convenient to Metro and with ample parking.

Comprehensive Sports Performance Lab

MedStar Health Orthopaedics and Sports Center occupies two floors of Building One and features the East Coast’s most sophisticated Sports Performance Lab. The lab is geared to the training and rehabilitation of athletes from across the country, as well as residents of the D.C. region.

“The center has been developed as MedStar Sports Medicine’s Greater Washington region flagship site exclusively dedicated to orthopaedics, sports medicine, physical therapy, performance enhancement and sports medicine-orthopaedic evaluations,” says John Brickley, vice president for ambulatory services and network development. “We’ve created a state-of-the-art center for the prevention and treatment of sports injury—and for the improvement of athletic performance for elite athletes and amateurs.”

MedStar NRH physiatrists and sports medicine physical therapists serve as the rehabilitation arm of MedStar Health Sports Medicine and work hand-in-hand with the wide spectrum of sports medicine physician specialists across MedStar. MedStar Sports Medicine is the exclusive health care provider for several professional sports teams, as well as club teams and collegiate sports programs.

“The lab is equipped with the most advanced technology available to analyze and enhance sports performance,” says Lance Kelly, director of professional, collegiate and elite sports therapy.

Cutting-edge tools include 3D kinematic and ultra-high speed motion analysis and sports simulation testing and training on the facility’s basketball court, baseball pitching mound, and artificial turf and track.

The lab also features ViPerform™, a wireless sensor technology that tracks and measures how athletes move in real-time. “We can analyze a variety of movements including jumping, running and throwing as the athletes engage in the activity wearing motion and muscle activity sensors that record data at 200 frames per second,” explains Kelly.

The ViPerform™ software translates the data into meaningful results to help develop training plans that enhance performance—and prevent injury.

A unique Runner’s Clinic at the Lafayette Centre offers dual camera video gait analysis that allows therapists to review the runner’s head-to-toe biomechanics—critical information about posture, strength and flexibility that can leave runners open to re-injury. The clinic incorporates cross training and the use of the AlterG® Anti-Gravity Treadmill to decrease the force of impact, which is then increased over time as an injury heals.

Full Complement of Rehab Services

MedStar NRH at Lafayette Centre also provides the complete complement of rehab services for musculoskeletal conditions, spine conditions, concussions, pain syndromes, cancer and lymphedema. In addition to physiatrists Jason De Luigi, DO, and B. Elizabeth Delasobera, MD, the center features a cadre of physical and occupational therapists, including certified hand therapists.

“The beauty of the Lafayette Centre is that we can do all we need to help patients in one location,” Kelly notes. “I can walk down the hall to consult with a physician and make an immediate therapy decision. We have diagnostic imaging and patients can have procedures here too. This makes care easier for patients to access and that means better outcomes.”
A RECORD BREAKING
Super H 5K Walk, Run and Wheel

More than 300 runners, walkers and wheelers came together for the 13th Annual Super H 5K Run, Walk & Wheel held on Sunday, Sept. 18. The record-breaking number of participants met up at Sport & Health in Tysons Corner, Va., to enjoy the competition and companionship.

The event raised more than $45,000 to benefit the adaptive sports athletes within MedStar NRH Rehabilitation Network. Proceeds from the race assist the Network’s sports teams travel to tournaments, and purchase new equipment and uniforms. The program is among the region’s most active offering wheelchair basketball, quad rugby, hand cycling, sled hockey, adaptive rowing and more.

“We sincerely appreciate all of the generosity of our sponsors and those who attended the race,” says Joan Joyce, director of recreation therapy and community relations for MedStar NRH. “Our adaptive athletes are very grateful for all of the support they receive—and so are our fitness class clients. The generosity of all the participants helps ensure that people with physical challenges can stay fit and healthy—and enjoy the pleasure of sport.”

CONGRATULATIONS TO THE WINNERS

1st in Run
Evelyn Rabil, Falls Church, Va.

1st in Handcycle
Andre McDonald, Columbia, Md.

1st in Wheelchair
Bryce Doody, Rockville, Md.

1st in Recumbent Bike
Cathy Davis, Upper Marlboro, Md.

THANKS TO SUPER H SPONSORS

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- District Amputee Care Center
- ABC Medical
- Stein, Sperling, Bennett, DeJong, Driscoll
- Sport & Health, Tysons Corner
- MetroLogo
- Timmie Metz Band.

On that fall day, Lee was taking care of routine tasks, including tending to aircraft and receiving Jet-A fuel for a large fuel truck. “I jumped off the truck as I always do,” Lee remembers. “I felt a twinge in my back on the impact, but it wasn’t too bad.”

He was a bit uncomfortable, but he and his husband Luis still drove up to their cabin in the West Virginia woods that weekend. “I went to bed feeling ok,” Lee says. “But when I woke up during the night, my right leg didn’t work at all.”

After an ambulance ride to the local hospital, Lee was transported via medevac to Morgantown. The final diagnosis? Lee had suffered an incomplete paralysis called a cauda equina lesion. A mass of nerves that fan out of the spinal cord at his lower back were injured, which caused the loss of movement and sensation.

Surgery was performed to release the pressure on the nerves and the surgeon told Lee that with intensive therapy recovery was possible. Then Lee was referred to MedStar NRH and on September 9, he arrived at the hospital by ambulance.

“Dr. Pamela Ballard evaluated me right away. And then the next day I started a regimen of physical and occupational therapy. It was hard work, but worth it. I had such support by the entire team at the hospital. Harsh Thakkar, the spinal cord injury wellness specialist, was terrific. He got me involved in the fitness program in the gym.

“Little by little I saw improvement,” he says. “When I left the hospital on November 1, I got a wheelchair but I haven’t really used it. I’m still using a walker to steady myself, but I try not to be dependent on it.”

Lee is continuing outpatient therapy at MedStar NRH, and is back to work doing mostly administrative duties. “I did taxi the field in my plane,” he says. And he is determined to be back in the air soon, where he has felt at home since he was just 18.

“This experience has been the biggest challenge in my life,” Lee adds. “But I feel encouraged and I’m so impressed with MedStar NRH. The fantastic technology like the Ekso Bionics GT™ frame and ZeroG® amazed me. And the adaptive exercise and sports programs are fantastic.

“When I heard these programs needed contributions to stay on budget I decided to donate. I also believe in it so much. I’m going to organize a benefit at the airport to raise funds,” he says.

“My personal goal is to get back 100 percent. I know the MedStar NRH team is critical to my achieving it.”
The Healing Power of Art

Creating art—and just looking at it—is more than a simple pleasure. It’s a healing experience that can boost our emotional and physical well-being. At MedStar National Rehabilitation Hospital, the walls are covered with colorful paintings to lift the spirits of patients and their loved ones, Team Members, and all who visit—gifts of a remarkable non-profit organization called Youth Art For Healing.

The program is the ingenious idea of its founder and executive director Jan Papirmeister—an artist and former nurse. “In 2008 after my son Matt joined the U.S. Army, I wanted to connect with military families,” she explains. “I became a volunteer in the Fisher Houses at Walter Reed National Military Medical Center—homes away from home for military families while a loved one is receiving treatment. I shared my concept of bringing art into the houses with the manager who loved the idea. At the time, my daughter Sara was in high school and a member of the National Art Honor Society. It seemed like the perfect pairing—healing works of art created by young people and spaces that needed comforting images on their walls.”

In just a few short years, this first volunteer project grew into a non-profit organization that has transformed spaces in more than a dozen area health care environments using art created by students from schools in Maryland and the District of Columbia. It seemed like the perfect pairing—healing works of art created by young people and spaces that needed comforting images on their walls.

In the newly renovated dining room at MedStar NRH, Youth Art For Healing’s vibrant paintings of vegetables and fruits have been installed. In the dialysis room, colorful seascape and landscape images on ceiling tiles provide comfort to patients as they lean back in their chairs during treatment and look up.

“New projects are underway,” Leone says. Some students are working on images of birds in flight and birds sitting on telephone wires to be installed in the Atrium. Others are creating paintings of butterflies, kites and sunflowers for the cardiac gym.

“Patients love it,” Leone adds. “I recently saw one patient wheel herself up to a painting and when I told her it was the work of area high school students, she was very moved. One student artist was so enthralled with the project, he created 10 paintings!”

Building Empathy

After the students complete their work, Youth Art For Healing hosts a reception for the artists, their families, art teachers, health care staff, sponsors and supporters. “The reception brings everyone together to view the beautiful works of art and celebrate the students who gave their time, talent and creativity to help others. It’s validating for the students,” says Papirmeister.

“The students have said they try to imagine how a patient feels looking at bare walls. They’re developing empathy for people who are struggling. I’ve seen students pour their hearts and souls into their works of art—not for a grade—but to create healing images to help people during difficult times.”

These healing images have a positive effect on patients, their loved ones and the health care team. “We collect surveys with comments about Youth Art For Healing and the installations,” she adds. “People tell us how comforting the images are for them. They ease the stress of coping with an illness or injury, and offer a positive distraction from their worries and health challenges.”

Learn more about the organization at youthartforhealing.org.
Updates from the MedStar NRH Network

MEDSTAR NRH BOARD RECOGNIZES EXCELLENCE

This past fall, the MedStar NRH Board of Directors celebrated and honored some very special people for their unwavering support of MedStar NRH. The Community Award recognizes someone from the community of MedStar NRH supporters who has made a significant contribution to the Network, either by deed or dollar. This year’s Community Award recipients were Mr. and Mrs. A. Wallace Moore, Jr. The late Wally Moore, a former patient, and his wife Liz have been extremely generous supporters of MedStar NRH for many years.

The Board Award recognizes a member of the Board who has demonstrated outstanding leadership. The recipient of the 2016 Board Award was Candy Somerville, a civic leader and events planner who has served on the Board for many years and has been a long-time supporter of the MedStar NRH mission.

COMPREHENSIVE AMPUTEE CARE: Surgery through Recovery

The newly-developed MedStar Amputee Recovery Program is a system of care to help amputees reach the fullest possible recovery by providing multidisciplinary services that begin before surgery—and continue throughout their rehabilitation. The program pulls together multiple resources to provide patients with seamless and comprehensive care tailored to their individual needs.

MedStar NRH plays a critical role in the program. Members of the MedStar NRH team provide evaluation of each patient’s rehabilitation needs and begin the process of prosthetics’ fitting before and immediately after surgery. The Amputee Recovery Program also includes comprehensive inpatient rehabilitation at MedStar NRH and specialized therapy at outpatients centers throughout the region.

A very important element of the program is the Prosthetic Amputee Care Coordinator who serves as a personal guide to patients and families during the first 90 days after amputation. The coordinator serves as a link to services and health care providers, and helps patients successfully navigate through every level of care from surgery—to prosthesis fitting and training.

MedStar NRH is one of 60 sites nationwide participating in the largest clinical trial of its kind to test the use of stem cells to restore motor function in stroke patients. Adult stem cells harvested from bone marrow are injected through burr holes in their skulls in three areas near the stroke-damaged brain tissue.

It’s thought that the stem cells create a process that triggers the brain’s ability to repair itself. “We believe that new neuro pathways are developed,” Richard Zorowitz, MD, principal investigator at MedStar NRH says. “The brain develops ways to compensate for injury and to facilitate recovery,” he adds.

MedStar NRH has begun recruitment for patients who suffer from some motor limitations, but they can be anywhere between six months to five years post-stroke. Participants will be divided into three groups: One group will receive a high dose of stem cells, a second will receive a lower dose, and the final group will undergo a simulated surgical procedure, but receive no stem cells.

“Patients will undergo careful evaluation and receive the stem cells during an in-and-out brain procedure conducted at one of the study’s designated centers. Then we will follow them during five visits after surgery taking blood and measuring motor function,” Dr. Zorowitz explains. This large study is based on a small investigation that showed stunning positive results and “no serious side effects from the procedure or the treatment,” he adds. The new nationwide investigation should provide adequate data to clarify the value of the intervention.

For more information about the research, contact Study Coordinator Kathy Brady, PT, at 202-877-1022.
By his own assessment, he hadn’t done anything too special. But readers of his memoir published posthumously earlier this year will likely come to appreciate Drew, who in 46 years lived a life filled with achievement following an accident at age 16 that resulted in a spinal cord injury.

His book Wisdom from a Chair: Thirty Years of Quadriplegia recounts Drew’s impressive resume that includes a law degree from Harvard, a White House fellowship, and years of work as an internationally respected disability rights advocate.

Along the way, he spent nearly five years (1986-90) at MedStar National Rehabilitation Hospital under the tutelage of Gerben DeJong, PhD, the hospital’s founding director of research. Drew came on board as a research fellow. He and Dr. DeJong became a successful tandem writing team publishing more than two dozen articles and developing successful proposals to fund disability and rehabilitation research.

MedStar NRH was the beginning of his professional life as a disability advocate, which included work at the Department of Justice where he helped to draft the regulations implementing the ADA. As his brother Mitchell Batavia notes, “The ADA had many fathers, but Drew, for sure, was its midwife.”

On the book’s cover is a drawing Mitchell created at Drew’s request decades ago—a picture of Don Quixote like the famous image by Pablo Picasso. “But Drew wanted Don Quixote mounted on a wheelchair rather than a horse, sporting a spear and facing his mortal enemy, the windmills of injustice,” Mitchell wrote.

Unlike Don Quixote, the windmills of injustice weren’t imagined. Drew was a tireless fighter for the rights of individuals with disabilities. But through his memoir readers will understand that he was also a man with a wife and children, personal failures and idiosyncrasies. “He would never want to be idealized,” says Dr. DeJong. “He wanted people to treat him as they treated anyone else.”