

NEWS AND INFORMATION FOR FRIENDS
OF MEDSTAR WASHINGTON HOSPITAL CENTER

CENTER

Scope

WINTER 2016

**Staying
Centered
Throughout
Cancer
Treatment**



MedStar Washington
Hospital Center



Calm and centered yoga instructor Youngsun Switzer takes pride in her pursuit of a healthy life. Forty-minute walks, meditation, yoga practice and body cleansing liquids are her daily routine.

Youngsun Switzer in the reverse warrior pose on her deck where she likes to begin the day.

YOGA INSTRUCTOR USES INNER STRENGTH TO AID IN RECOVERY

Beating an Uncommon Cancer

In February 2015, Youngsun Switzer's reality shifted when the Springfield, Va., woman—who never took an aspirin—was beginning a months-long fight against a rare form of cancer.

"I literally went to sleep without a problem and woke with a lump the size of a golf ball on my shoulder," Youngsun says. "At first I thought I injured myself, but when it didn't go away, I went to see my doctor. He sent me for a CT and MRI, which indicated the lump was a sarcoma. It simply blew my mind."

Sarcoma is a deadly form of cancer that, left untreated, can rapidly grow and spread. Highly specialized, intensive care is needed to ensure the best possible outcome.

Youngsun didn't waste time dwelling on the negative. Instead, research took her to Robert Henshaw, MD, an internationally respected sarcoma expert close to home at MedStar Washington Hospital Center.

Internationally Recognized Expertise

Dr. Henshaw, an orthopaedic oncologist, leads the hospital's team of specialists who have expertise treating musculoskeletal cancers, including rare sarcomas.

"These tumors arise in soft tissue, such as nerves, muscles and tendons," Dr. Henshaw explains. "They are uncommon, less than 1 percent of all cancers, or about 12,000 people in the U.S. annually. Only 2,500 people a year have the specific type of tumor Youngsun had. Very few involve the shoulder. We see more than 750 patients with sarcomas every year, with more than 350 cases treated at Washington Cancer Institute at MedStar Washington Hospital Center. Our group is one of the largest practices of its kind in the country."

Interdisciplinary Team Approach to Care

Youngsun's sarcoma developed in her shoulder muscle and had spread to her collarbone.

IN JULY, DR. HENSHAW REMOVED THE TUMOR AND PART OF HER COLLARBONE USING A SOPHISTICATED TECHNIQUE TO RE-ROUTE MUSCLES AND ENSURE SHE WOULDN'T LOSE ANY RANGE OF MOTION.

Recommendations for her treatment were made by a team of medical oncologists, interventional radiologists, diagnostic imaging experts, pathologists and surgeons who regularly gather to discuss cases and develop treatment plans. "This strong interdisciplinary clinical approach gives patients a real advantage," says Dr. Henshaw. "For Youngsun, we recommended chemotherapy first to shrink the tumor, which helps make the subsequent surgery more successful. This is followed by radiation."

In July, Dr. Henshaw removed the tumor and part of her collarbone using a sophisticated technique

to re-route muscles and ensure she wouldn't lose any range of motion.

"I admit it hasn't been easy," says Youngsun. "But I've had the strong support of my husband, Warren, my children and friends. I also tried very hard to continue my daily meditation and keep up my normal routine."

"I was back to yoga within weeks," a happy Youngsun says. "And in October, I took a break from radiation to attend my daughter's dream wedding in Majorca, Spain. Two weeks later, my husband and I celebrated the completion of my therapy!"

She and her husband are building a home in North Carolina, and she hopes to set up a yoga class specifically geared to cancer patients at a nearby hospital.

"I'm so grateful to Dr. Henshaw and the entire team," she says. "I hope to inspire others to seek help when they think something may be wrong, and understand with the right treatment, they can have a happily ever after."



Robert Henshaw, MD, leads a multidisciplinary team of specialists in treating musculoskeletal cancers.



Misaki Kiguchi, MD, vascular surgeon and vein specialist, in her Chevy Chase office.

Now in Chevy Chase

Fast, Effective Outpatient Treatment for Varicose Veins

For years, Tammi Bricker was one of the more than 30 million Americans suffering from enlarged, rope-like and often painful varicose veins. While she didn't hesitate to seek treatment for her much smaller spider veins, she stopped short of tackling her bigger problem.

"Frankly, I was a little afraid about having work done on them," says the art director and graphic design consultant, "so I just put up with my condition."

But then Tammi learned that today's newer, less invasive treatments can often take care of varicose veins in one single, two-hour-long session. And that Misaki M. Kiguchi, MD, a vascular surgeon at MedStar Heart & Vascular Institute (MHVI), specialized in treating venous disease with these improved techniques. She booked an initial consultation at MHVI's new outpatient varicose vein center in Chevy Chase right away.

Improved Techniques, Results

Vein ligation or stripping was once the only long-lasting treatment for varicose veins. But for the right patients, today's improved, minimally invasive outpatient procedures are just as effective at relieving pain, addressing the root cause of the problem and improving appearances.

Chief among them are sclerotherapy and radiofrequency ablation.

With sclerotherapy, a chemical is introduced into spider or varicose veins that lie just under the skin's surface, sealing them off. The approach may require several injections over time to achieve the desired result.

Radiofrequency ablation (RFA) is the treatment of choice for larger varicose veins or those deeper in the legs. RFA works much like sclerotherapy but uses heat instead of chemicals to reach its goal.



"Knowing that Dr. Kiguchi is a vascular surgeon, with specialized skills, gave me the confidence to have RFA. In addition to being a top surgeon in her field, she is warm and friendly."

—Tammi Bricker

During the outpatient procedure, a vascular surgeon first places a small catheter into the malfunctioning vein, followed by a fiber that is then heated. The thermal energy collapses the vein, which is eventually reabsorbed by the body as other veins take over. RFA is most often a one-time treatment and completed within an hour or two. Thanks to its effectiveness, RFA has largely replaced vein stripping, yielding the same results.

"RFA and sclerotherapy are both well tolerated, with less pain and a faster return to normal activities than vein stripping, which was popular decades ago," Dr. Kiguchi concludes. "Most patients are surprised by how quick and easy treatment is today."

That was certainly the case for Tammi. After receiving a thorough examination, ultrasound and explanation of her options, Tammi agreed to RFA, in part because of Dr. Kiguchi's background.

Within three weeks of her outpatient procedure, Tammi could already see and feel a difference. Based upon her experience and the results, she's glad she finally took the plunge.

"We have a swimming pool," she says, "and for the first time in years, I won't feel self-conscious about my legs this summer. I am so thankful and happy."

To schedule an appointment with Dr. Kiguchi, call 202-877-DOCS (3627). Or visit [MedStarHeartInstitute.org/HealthyVeins](https://www.medstarheartinstitute.org/HealthyVeins).

RADIOFREQUENCY ABLATION PROCEDURE



Understanding Varicose Veins

About 55 percent of women suffer from some sort of venous disorder, with varicose veins topping the list.

Varicose veins occur when damaged or weakened valves fail to do their job: keep blood flowing back to the heart. Healthy valves accomplish this task, even against gravity, by opening and closing tightly. But when valves aren't working correctly, some blood leaks backward and pools in the legs, straining the walls of the veins.

Results range from the merely unsightly to the uncomfortable, including feelings of pain, cramping, leg heaviness and fatigue. In some cases, changes in the skin, and even leg ulcers, may develop. Family history, multiple pregnancies, occupations requiring long periods of standing, obesity and age can all contribute to the condition.

While rarely a threat to your health, varicose veins will not go away by themselves and, left untreated, generally worsen over time.

Fortunately, a variety of approaches and therapies are available.

"At the most basic level, compression and elevation can reduce symptoms," says Dr. Kiguchi. "Compression hose work, by providing extra support and pressure. But wearing compression hose is like wearing prescription eyeglasses: You're not really fixing the problem—just correcting the symptoms."

By contrast, the outpatient procedures sclerotherapy and RFA, both offered at Chevy Chase, can relieve pain safely and effectively and restore a healthier appearance, more quickly and easily than ever before.

Wide Range of Expertise at MedStar Pituitary Center



Ronald (Artie) Tekel enjoys a beautiful fall day after MedStar physicians diagnosed him with acromegaly and successfully removed his tumor in May 2015.

"WE FOCUS ON DEVELOPING LONG-TERM RELATIONSHIPS WITH OUR PATIENTS. THIS ENSURES THE BEST RESULTS."

—EDWARD AULISI, MD

Several years ago, when marketing analyst Ronald (Artie) Tekel went to his doctor in Arizona for a routine checkup, a blood test revealed a high calcium level. An endocrinologist conducted further tests, which showed an irregularity in a hormone called human growth factor.

When Artie relocated to Bethesda, additional tests confirmed that other hormone levels were abnormal, indicating a problem with the pituitary gland. He was referred to MedStar Washington Hospital Center, where a team of pituitary specialists could examine him and develop a unique treatment plan.

Edward Aulisi, MD, a neurosurgeon who specializes in endocrine tumors, confirmed an unusual condition: acromegaly, a benign pituitary tumor in the base of the skull. "The signs had been there all along," Artie says, "but they were subtle." He had a jutting jaw and his shoe size was increasing, both characteristics of acromegaly.

The tumor needed to be removed. In the May 2015 surgery, Stanley Chia, MD, Otolaryngology, created a small tunnel under Artie's upper lip into his nasal cavity, and opened the sinus where the tumor was located. Dr. Aulisi then removed the tumor without opening his skull.

"The surgery was on a Monday, and I went home on Thursday," Artie, now 59, recalls. After two weeks, he was enjoying all the activities of daily living, and had more energy. "I was very happy with the care and direction I received," he says. "The doctors took a wider view of my body and me to come up with the right diagnosis."

This case highlights the expertise of the MedStar Pituitary Center, the region's only such program, located at the Hospital Center. The center integrates care in one place to diagnose and treat the full gamut of pituitary conditions.

The Pituitary Gland and Tumors

The pituitary gland produces hormones that travel around the body directing specific processes. The size of a pea, it is located at the base of the brain. Several kinds of tumors can occur, and almost none are cancerous. Some tumors secrete too much hormone, others secrete too little; either condition may require medical treatment or surgery. Pituitary tumors also can press on other areas of the brain, causing headaches, vision problems and other side effects.

That's why a pituitary tumor requires the expertise of several different kinds of specialists. An endocrinologist manages hormone irregularities; a neuro-ophthalmologist addresses vision problems; a neuroradiologist interprets imaging results; an otolaryngologist (ear, nose and throat specialist) focuses on the specialized surgical approach through the nasal cavity; and a neurosurgeon specializes in removing the tumor from the base of the brain. Together, these specialists can diagnose precisely what is going wrong and devise the best treatment plan.

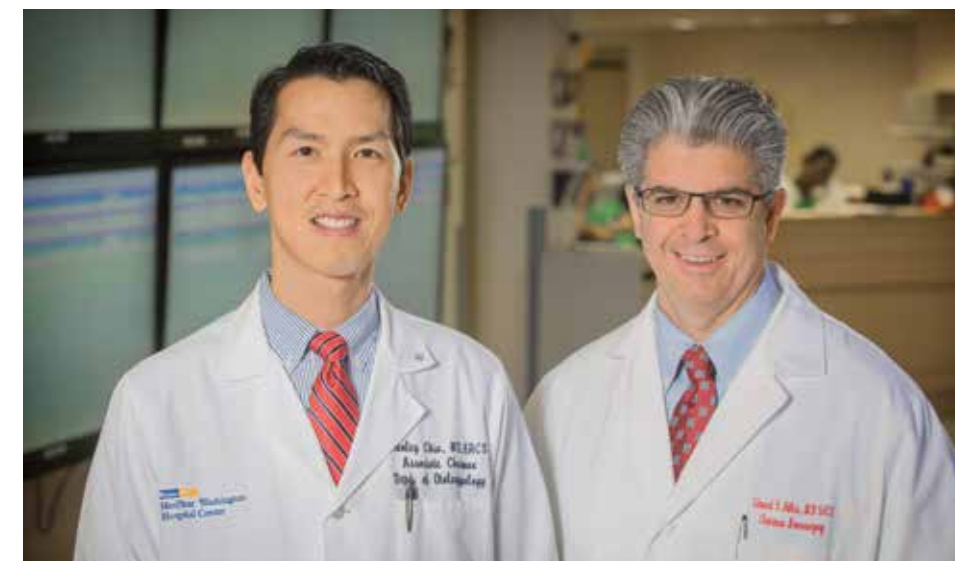
"We provide one-stop shopping for patients with all kinds of pituitary disorders," says Dr. Aulisi, medical director of the center. "We offer first opinions, second opinions, and we treat the most complicated cases."

The Treatment Plan

A patient coordinator schedules appointments and manages all facets of care. The patient sees all the doctors who may be involved in his or her care in one place at one time. The first step is evaluation and diagnosis. After a thorough physical exam, the team can order blood tests and sophisticated imaging scans that confirm the diagnosis.

After diagnosis, the team decides on the best course of action. For some patients, a "watch and wait" approach is best. Others may benefit from medication to control the tumor's growth. Some, like Artie, need the tumor removed surgically.

The MedStar Pituitary Center performs the most appropriate treatment that offers the best outcomes with the least invasive surgery. Like Artie Tekel, some patients have tumors removed through tiny incisions under



Stanley Chia, MD, and Edward Aulisi, MD, worked together to remove a benign pituitary tumor at the base of Artie Tekel's skull.

their upper lip. Other patients may have tumors removed through their nasal cavity. A few patients need more extensive surgery through the skull.

Drs. Aulisi and Chia have years of experience working together and perform this kind of surgery every week in a specially equipped operating room with image-guidance technology.

Some tumors can recur, so long-term follow-up is required. Some recurrent tumors may respond to a special kind of intense, focused radiation, delivered by the hospital's Gamma Knife®. "We focus on developing long-term relationships with our patients," Dr. Aulisi says. "This ensures the best results."

Symptoms of Pituitary Tumors

- Headaches
- Blurred or double vision
- Sexual dysfunction
- Unintended weight loss or gain
- Body hair loss or excess growth
- Menstrual irregularity
- Infertility
- Milky discharge from breasts
- Coarsened facial features
- Enlarged hands and feet

PITUITARY PROGRAM TEAM

The MedStar Pituitary Center, the region's only such program, is located at the Hospital Center. The center integrates care in one place to diagnose and treat the full gamut of pituitary conditions.

Edward Aulisi, MD, *Neurosurgery*
Stanley Chia, MD, *Otolaryngology*
Martin Kolsky, MD, *Ophthalmology*
Susmeeta Sharma, MD
Endocrinology
Joseph Verbalis, MD
Endocrine Research

For more information about the MedStar Pituitary Center, please call 202-877-DOCS (3627).



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What's New

The Gift of Being There for Patients Compassionate Volunteers Needed

"It's so good to be able to tell relatives who cannot get here that their loved one is not alone," says Father Anthony Akinlolu, assistant director, Spiritual Care.

MedStar Washington Hospital Center's Spiritual Care Department is looking for volunteers to be companions to our critically and terminally ill patients who have no family by their side. You don't have to be a professional, clinical or pastoral care provider. A good volunteer simply offers a supportive presence. Expectations may be as simple as sitting with a terminally ill patient, or you can bring spiritual readings, music or books to share.

Dot King, a senior administrative assistant in Facilities at the Hospital Center, is a transition companion volunteer. She says she cherishes her new duty. "We are all going to leave here one day," she says, "and no one should be left alone."

If you have a passion for caring and would like to offer support, please call the Department of Spiritual Care at 202-877-2045 for more information or email WHC-SpiritualCare@medstar.net



Dot King

CENTER Scope

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