



Institute for Patient
Blood Management and Bloodless
Medicine and Surgery

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# The Mayareyes

# STORY

An unexpected scoliosis diagnosis couldn't slow down this aviation and outdoor enthusiast.

Maya Reyes, 15, decided to study aircraft mechanics after watching her brother and father learn to fly. A sports enthusiast who attends a technical high school on an accelerated track, Maya lives at home in Westfield, Massachusetts, with her brother, Mateo, and her parents, Andrea and Benny, who both work in health care.

Three years ago, in between her studies and sports activities, Maya noticed her right shoulder blade sticking out. Medical imaging soon revealed Maya had scoliosis, a curve in her spine.

"Her diagnosis was emotional because we didn't expect it," Andrea says. "No one we knew in our family had scoliosis."

Physicians fitted Maya for a brace she wore nearly 20 hours a day. Regular checkups and physical therapy followed, until further imaging revealed an increase in her spinal curvature. Maya would need spinal fusion surgery. Metropolitan Neurosurgery Associates, part of the Institute for Patient Blood Management and Bloodless Medicine and Surgery at Englewood Health, provided the solution.

### **Treatment at The Bloodless Institute**

Family members had introduced the Reyes family to The Bloodless Institute years ago, and Benny and Andrea had signed up to receive Choices magazine so they could know more about Englewood's bloodless medicine and surgery program—just in case someone in their family ever needed it.

"Not only does The Bloodless Institute's medical practice match our personal beliefs, but as healthcare professionals, we felt confident in their abilities," Benny says. "Being in the industry, we appreciate their dedication to continuing education."

Even though The Bloodless Institute is in Englewood, New Jersey, and the Reyes family was in Massachusetts, Maya's Englewood orthopedic surgeon, Jay Reidler, MD, ordered her initial lab work to be done in her hometown. Her testing revealed she would need treatment for anemia before her surgery.

"After a consultation, The Bloodless Institute team arranged

anemia treatment close to home," Andrea says. "The team was amazing at communicating with us and reached out to our local doctors directly to get things moving."

Maya's spinal fusion surgery was performed July 27, 2022. Doctors placed rods on either side of her spine, along with 17 screws to hold them in place. In the months following her surgery, Maya's spine would fuse with the titanium rods and screws, straightening her spinal cord.

### Free to Fly

The first three weeks of recovery were difficult for Maya, who struggled with her limited mobility. Englewood's surgical team, led by Dr. Reidler, provided close supervision.

"The surgeon came to see Maya every day, even on the weekends," Andrea says. "He changed her dressing himself and didn't wait for the nurses. You just don't see that anymore."

A month into recovery, Maya decided she was well enough to attend a group camping trip in Maine. The time spent outdoors and with loved ones helped revive her. Her surgery a success, she's as active as ever.

"I would tell others in my position how nice it is to connect with someone who has been through this before" Maya says. "Friends connected me with others who had the same procedure, and it was so nice to use social media to share our experiences, especially in the early weeks after the surgery."

Andrea and Benny appreciate that they were never treated like a "number" at The Bloodless Institute.

"For those considering care at The Bloodless Institute, I encourage them to reach out," Benny says. "Even if it seems like it's too far away, it's worth a phone call. The incredible personal care and attention is something you can't put a price on."

Interested in bloodless surgery and services at The Bloodless Institute? Visit www.bloodlessmed.org or call 888-766-2566 to be connected with a bloodless medicine provider.

# Advancements in

Breast Cancer

An interdisciplinary team uses innovative technology to provide leading-edge breast care at Englewood Health.



Jenna Gillen, DO

The Leslie Simon Breast Care and Cytodiagnosis Center at Englewood Health provides the most advanced care to patients with breast cancer. With an experienced, multidisciplinary team and the use of precise technology, our group continues to provide the highest quality diagnostics and treatment to all patients—including those for whom blood transfusions aren't an option.

"Breast cancer care has changed throughout the years," says Jenna

Gillen, DO, breast surgeon with the Institute for Patient Blood Management and Bloodless Medicine and Surgery at Englewood Health, who works at the Breast Care Center. "There's no longer a one-size-fits-all approach to patient care."

The breast care team with The Bloodless Institute is a diverse group of providers offering expertise in several areas. Your

team can include medical, radiation, and surgical oncologists, as well as genetic counselors, integrative medical providers, radiologists, and on-site pathologists. Together, they decide if you would benefit most from a traditional oncology treatment, such as chemotherapy, radiation, or surgery, or if your case might benefit more from some of the advanced treatments available at the Breast Care Center.

Englewood Health offers immunotherapy, medications that can stimulate your immune system to fight cancer cells and keep them from growing. We also offer hormone therapy that can help prevent your body from making the hormones necessary for some breast cancer tumors to grow.

Immunotherapy may be a form of targeted therapy, which means the medications attack cancer cells and ignore healthy cells, potentially leading to fewer side effects.

"Breast cancer is always mentally and physically challenging," Dr. Gillen says. "We're here to make an individualized care plan to get you through the difficult times."

To find a breast cancer specialist who is part of the team at The Bloodless Institute, call 888-766-2566.

# ADVANCED TECHNOLOGY FOR TREATMENT AND DIAGNOSIS

To provide complete breast cancer care, our providers rely on innovative technology for more accurate diagnoses and effective treatments.

Lane

"We're all very comfortable working with patients at The Bloodless Institute," says Jenna Gillen, DO, breast surgeon with the Institute for Patient Blood Management and Bloodless Medicine and Surgery at Englewood Health, who works at the Breast Care Center. "We understand their feelings, and we're willing to go forward with types of treatment and surgery associated with breast cancer care while avoiding the use of blood products."

The Cancer Center team uses advanced technology to perform breast screenings and surgery:

- 3D mammography allows for radiologists to better detect cancerous growths in women with dense breasts.
- LOCalizer™ Wire Free Guidance System uses radiofrequency to improve surgical accuracy.
- Savi Scout is a non-radioactive system providing greater surgical accuracy during the removal of breast lesions.
- The Mozart System uses 3D X-ray imaging to give surgeons in the operating room a 3D view of the specimen they're removing.

These technologies improve the success and accuracy of surgical procedures performed at the Breast Care Center. With each patient's needs in mind, we provide high quality care from a compassionate team.



Kelly Lazo and her family

# Surprise Diagnosis,

# Lifesaving Care

At 28, CT scan tech Kelly Lazo felt healthy and happy, enjoying life with her close-knit family. But a life-threatening illness stopped her in her tracks. Thanks to the care of the team at Englewood Health, Kelly is looking forward to a bright future.

When Kelly Lazo visited her primary care physician for a routine appointment in September, she had no idea her life was about to take a frightening turn.

"I felt pretty normal," Kelly says. "I didn't have a lot of energy, but that wasn't unusual for me, and I didn't feel excessively tired."

Kelly mentioned to the doctor that she had noticed she had a lot of bruises, although she wasn't particularly concerned about them.

"I'm a little clumsy, and I knock into things all the time, so I didn't think that much of it," she says. "But it was more bruising than usual, so I decided to mention it."

Kelly's doctor decided to order extra blood tests as a precaution. The next morning, the doctor's office called back, asking her to come in to repeat the test, as her platelet counts were low. After confirming the blood work results, the doctor told her she probably had a condition called immune thrombocytopenia (ITP), a disorder that prevents blood from clotting as it should.

"He told me ITP was treatable with steroids and that I should make an appointment with a hematologist in the next week to confirm the diagnosis and start treatment," Kelly says.

# **Shocking Diagnosis**

Kelly found a hematologist in a nearby town who was willing to fit her in. After having more blood work done, she received a call with the results the next day. Her platelet count had dropped even more. Kelly left work to go to the emergency room at Englewood Hospital, where she met hematologist Maxwell Janosky, MD.

"Dr. Janosky told me it could be ITP, which is fairly common, or it could be a very rare disorder," Kelly explains. "He left the room and came back to tell me he had looked at my blood under a microscope, and a few of his colleagues looked as well. It turned out I had the rare thing."

Dr. Janosky told Kelly she likely had thrombotic thrombocytopenic purpura (TTP), a serious blood disorder that causes clumps of platelets to form in small blood vessels, blocking blood flow to organs. Although the test to confirm the diagnosis would take about a week to process, he immediately admitted her to the hospital to begin treatment.

"When TTP is left untreated, it has a 90 percent mortality [death] rate," Dr. Janosky says. "So even before we had the definitive answer, we started her on treatment that same day."

### **Bloodless Treatment**

Due to Kelly's beliefs as a Jehovah's Witness, traditional treatment was not an option for her.

"The standard way to treat TTP is to do a plasma exchange by removing the patient's plasma and replacing it with donated plasma, or fresh frozen plasma," Dr. Janosky says. "But as Kelly is bloodless, we instead treated her initially with albumin, a protein. This process takes out the abnormal antibodies but doesn't replace the protein like plasma does."

After a few days, Kelly was able to receive additional treatments, all of which met her requirements for bloodless care.

"At Englewood Hospital, we have a large bloodless population, and we know how to treat people effectively while respecting their wishes," Dr. Janosky says. "Kelly had a lifethreatening condition, but we were able to identify it right away and treat the condition well while not jeopardizing her health."

After receiving treatment daily during her week-long hospital stay, Kelly was discharged. However, after a few weeks, her platelets were up, but her blood protein was not normalizing the way it needed to. Kelly then began a weekly outpatient antibody therapy called rituximab.

Following treatment, her blood counts normalized, and now she visits Dr. Janosky monthly for blood work. While TTP has about a 40 percent chance of recurrence during a patient's lifetime, Dr. Janosky is optimistic.

"TTP is sometimes associated with other autoimmune diseases, but Kelly is otherwise healthy," he says. "That may mean it's less likely to come back. Being treated with rituximab also reduces the risk of recurrence."

# **Compassionate Care**

Kelly is extremely grateful to Dr. Janosky and the team at Englewood Health for the exceptional care she received.

"Dr. Janosky and everyone I interacted with were kind and considerate," Kelly says. "The doctor and the nurses really cared and checked on me constantly. My family and I asked a lot of questions, and they explained everything in a way we could understand."

Her family agrees.

"It was very difficult to see Kelly go through this, but we have more trust at Englewood than at other hospitals," says Jose Angel Lazo, Kelly's dad. "We were very fortunate to find Dr. Janosky. He listens and has a lot of compassion for patients, and he made us feel very comfortable. We're so happy with the care Kelly received."



Maxwell Janoksy, MD

"DR. JANOSKY
RESPECTED MY
BELIEFS AND
WAS VERY KIND
AND PATIENT.
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Visit www.bloodlessmed.org to learn more about The Bloodless Institute. For a referral to a bloodless physician, call 888-766-2566.

—Patient Kelly Lazo

# 1000

Marilyn Milord, APRN-BC, FNP, MSN, MPA-HA

# Treat Anemia to Lower the Risk of

# SURGICAL COMPLICATIONS

People with anemia are more likely to have serious complications during or after surgery. Because of the high risks, taking proactive steps to treat anemia before scheduled surgeries is essential.

# FOODS TO FIGHT ANEMIA

What you eat or don't eat has a significant impact on your risk of developing anemia. Here are 10 iron-rich foods that can help reduce your risk for the condition:

- 1. Beans
- 2. Beef
- 3. Chicken
- 4. Fish
- 5. Lentils
- 6. Peas
- 7. Prunes8. Raisins
- 9. Spinach
- 10. Tofu

Vitamin C can help your body absorb more iron. To get the most out of iron-rich foods, pair them with fruits and vegetables high in vitamin C, such as broccoli, citrus fruits, red peppers, and

strawberries.

Anemia is diagnosed when your body has fewer red blood cells than usual or a low level of hemoglobin, an iron-rich protein in red blood cells. Hemoglobin and red blood cells carry oxygen around the body. They are vital for brain and heart function.

"Anemia is not routinely treated unless patients have symptoms, other co-morbidities, underlying disease, or become compromised with something like heart failure. Treatments also depend on how anemic the patient is," says Marilyn Milord, APRN-BC, FNP, MSN, MPA-HA, pre-anesthesia nurse practitioner at Englewood Health. "But when a patient is going to have surgery and anesthesia, it becomes critical for patients to be optimized to ensure safety and the best patient outcomes."

Many other hospitals pay little attention to pre-surgical anemia and rely on blood transfusions for anemic patients. However, at Englewood Health, all patients are tested for anemia prior to planned surgeries. This allows us to treat anemia before surgery and ensures patients are safe to proceed.

# **Anemia Symptoms**

Many people, especially those with chronic anemia, are unaware they have the condition.

"Our body is very good in compensating," Milord says. "It can adapt to symptoms of anemia such as fatigue, so patients may not realize they are anemic."

Fatigue and weakness are some of the most common symptoms of anemia. Others are:

- Dizziness
- · Headaches
- Muscle cramps
- Nausea
- Pica, or cravings to eat ice or non-food items, such as dirt

### **Risk Factors for Anemia**

Anyone can have anemia, but some conditions place you at greater risk, including:

- · A family history of anemia
- Cancer
- · Chronic medical conditions
- · Gastrointestinal conditions, such as Crohn's disease
- · Menstruation or pregnancy
- Poor diets

# **Pre-surgical Treatments for Anemia**

Several treatment options are available if you are anemic and have a planned surgery.

Ideally, treatment should start two to four weeks before surgery and may include:

- · Erythropoiesis-stimulating agents
- Folate
- Injectable iron supplements
- Iron infusions
- Multivitamins
- Oral iron supplements
- Vitamin B-12
- Vitamin C

You can also help treat anemia by eating a balanced diet with iron-rich foods. This is especially important if you have a known history of anemia

At Englewood Health, patients are re-evaluated before surgery to ensure treatment was successful.

"With any treatment plan, it's important to personalize the patient's care, empower patients, and make them feel they are in control of their care," Milord says. "It's also important to educate the patient about their anemia and treatment options so they can advocate for themselves and make choices that are best for them."

Visit www.bloodlessmed.org to learn more about The Bloodless Institute or call 888-766-2566 for a referral to a bloodless physician.





# When Time Is of the Essence

Leslie Martin trusted the Institute for Patient Blood Management and Bloodless Medicine and Surgery at Englewood Health for surgery when time was not on her side.



Nimesh Nagarsheth, MD

After months of heavy menstrual cycles, Leslie Martin's brother, George, insisted she go see her gynecologist. Leslie's blood work and pelvic ultrasound were alarming—she was severely anemic and had a golf ball-size fibroid, a non-cancerous tumor that grows on the uterine wall.

"My gynecologist said that by the time my next period started, my red blood cell count would likely drop to a point where I would need a blood transfusion," Leslie says. "Since I am

one of Jehovah's Witnesses, a blood transfusion was not an option. My next period was supposed to start in 13 days, so my gynecologist was very nervous."

# **A Second Opinion**

Leslie sought out a second opinion from a different gynecologist in New York City, who recommended she reach out to The Bloodless Institute at Englewood Health.

"The gynecologist in New York City, who was not affiliated with The Bloodless Institute at Englewood Health, had only wonderful things to say about them," Leslie says. "In fact, that doctor trusted Dr. Nagarsheth and Englewood Hospital so much that she sent her own mother there for a gynecological procedure! She told me that those are the best hands I could possibly be in, and for me, there was no greater endorsement than one from a doctor who entrusted

Englewood Hospital with the care of someone she loved and had nothing to gain from praising them. At that point, I knew I had nothing to fear."

# **The Bloodless Institute Intervention**

Leslie met with Nimesh Nagarsheth, MD, gynecologic oncologist at The Bloodless Institute, to learn about her options. Dr. Nagarsheth decided to start Leslie on an intravenous iron treatment to build up her blood count prior to her surgery, which is a common practice at The Bloodless Institute.

"Leslie was significantly anemic and symptomatic, and the source of her bleeding was the uterus," Dr. Nagarsheth says. "The best way to correct that was a total hysterectomy. We were able to alleviate Leslie's symptoms efficiently and quickly."

For Leslie's hysterectomy, Dr. Nagarsheth used Englewood's robotic surgical system to assist during the intricate surgery. Because the robot helped Dr. Nagarsheth perform the surgery with unprecedented precision, Leslie lost less blood than she might have with a traditional procedure.

Today, Leslie is back to living life to the fullest with more energy than she's ever had before.

"I have been able to do more physically and enjoy different foods and traveling," Leslie says. "My hope is that other women will not be afraid to seek help from the right people and ultimately get their lives back, too."

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Institute for Patient **Blood Management and Bloodless** Medicine and Surgery

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Margit Kaufman, MD Anesthesiology and Critical Care Medicine Practitioner/ Medical Director of The Bloodless Institute

The 2022 SABM Annual Meeting was held in Las Vegas, Nevada, where hundreds of healthcare professionals and patient advocates gathered to learn about the newest information about patient blood management. The theme for 2022 was the new global definition of patient blood management.

## **The New Definition**

Blood is now considered the body's liquid organ, and a big theme of the annual meeting revolved around caring for blood health the way you care for all other organ systems and expecting healthcare providers to do the same.

Highlights From the Society for the Advancement of Patient Blood Management 2022 Annual Meeting

By Margit Kaufman, MD, and Sherri Ozawa, RN

During the 2022 Annual Meeting of the Society for the Advancement of Patient Blood Management (SABM), a new definition of patient blood management emerged.

> While the concept of blood health is a new one, the SABM 2022 Annual Meeting focused on moving the medical field away from blood transfusions, instead making efforts to take care of a patient's blood health.

> In other words, the new definition of patient blood management is a coordinated approach between an individual and their healthcare team to manage and preserve the individual's own blood.

### **News from around the World**

This year, a speaker from Turkey reported on the development of a successful national initiative in patient blood management across the entire country of Turkey, which

encompasses over 86 million people.

There was also a speaker from Portugal who described their implementation of patient blood management based on SABM principles.

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From Greece, a speaker reported on the implementation of patient blood management in a cardiac surgery hospital during the height of COVID-19.

The SABM 2023 Annual Meeting will be held October 4-7 in Nashville, Tennessee. The conference theme will be Patient Blood Management and Blood Health: They Top the Charts!

For more news and updates, visit www.sabm.org.