

BREAST CANCER SURGERY

ALL THE OPTIONS, ALL THE SPECIALISTS, ALL IN ONE PLACE

Breast cancer surgery—mastectomy in particular—was once assumed to be permanently disfiguring. Not anymore. Through recent advances in reconstructive surgery, that fear is now largely unfounded. In fact, many women undergoing breast reconstruction today achieve results that are on par with elective cosmetic surgery.

Those same patients also have more choices at Virginia Hospital Center, which offers every available form of breast reconstruction surgery through its Reinsch Pierce Family Center for Breast Health.

“Breast reconstruction has changed dramatically in recent years,” says dedicated breast surgeon Stephanie Akbari, MD, FACS. “Many women still associate disfigurement with breast cancer, recalling the radical mastectomies of 35 years ago, but it no longer has to end with a debilitating deformity. Once patients see pictures of the latest procedures and realize the sophistication of today’s approaches, they feel better. We can do lifts for symmetry. We can do augmentation. And if a mastectomy is required, we can often save the skin and sometimes even the nipple. Obviously the priority is to eradicate the cancer, but the bar is now set much higher for cosmetic outcomes.”

Upon receiving a cancer diagnosis, a woman’s first step is to discuss treatment options, which usually starts with her breast surgeon and plastic surgeon. Choosing the right approach will depend on breast size, the size and location of the tumor, body type, and other mitigating health risks.

LUMPECTOMY AND RADIATION

Patients whose cancers are small may opt for lumpectomy, a breast conserving surgical approach that removes only the tumor and a margin of tissue around it. This option is usually coupled with post-operative radiation therapy. In some cases, the cosmetic outcome can be enhanced by oncoplastic breast surgery, a procedure in which breast tissue is redistributed following lumpectomy to avoid creating a cavity. The major benefit in this scenario is that much of the patient’s natural breast tissue is preserved. *(Continued on page 4)*



JOIN US AT LADIES FOR LIFE: Meet dedicated breast surgeon Stephanie Akbari, MD, FACS (right), plastic surgeon Mazen Bedri, MD (left) and MIX 107.3 FM radio personality Chilli Amar (center) at Ladies for Life, Virginia Hospital Center’s free breast cancer education event on October 1. See back cover for details.

WHAT WE LEARNED FROM 9/11

This fall marks the tenth anniversary of the Sept. 11 attacks. On that date, local emergency responders and Virginia Hospital Center personnel were confronted with a crisis unlike any other they had ever experienced. In the end, the Hospital treated 44 patients, most suffering from severe burns, lacerations and smoke inhalation. The Arlington Urgent Care Center, a subsidiary of Virginia Hospital Center, also received and treated 10 patients directly injured in the attack on the Pentagon. As we look back, we remember how our community came together in the face of this tragedy and how our country emerged with a strengthened resolve and an unbreakable spirit of patriotism. Today, Virginia Hospital Center is now better prepared than ever to act quickly in an emergency and uphold its responsibility as a first responder to the community.

On Sept. 11, 2001, the first patients began arriving at Virginia Hospital Center within an hour of the Pentagon attack. In response, medical staff and members of the community rallied. On a typical week day morning back then, the Hospital had 3 emergency physicians, 8 emergency nurses, and 2 emergency technicians in the Emergency Department with surgeons and other doctors on call. During the peak of activity on Sept. 11, more than 100 nurses and 50 physicians were on-site, prepared to provide added assistance to the regular Emergency Department staff in anticipation of heavy casualties. With this outpouring of support, the patients who came through our doors received immediate medical attention, without delay. Each patient was assigned his or her own personal doctor and nurse. Neighbors came in to donate blood. Hospital administrators helped local residents track down missing family members. CrisisLink volunteers manned the phones. The Hospital had a disaster plan in place, which was immediately deployed, but based on the unique and challenging circumstances, many decisions had to be made on the fly. Across the board,

Hospital employees and departments stepped outside of their usual roles and simply did whatever needed to be done. The spontaneous team effort that emerged was a miraculous feat of humanity.

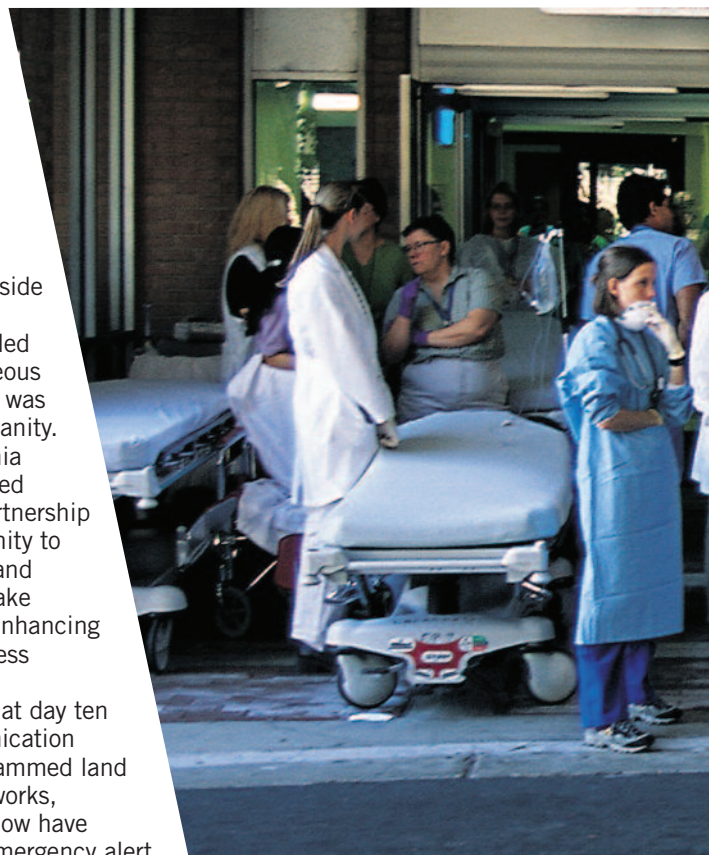
Since that date, Virginia Hospital Center has worked both internally and in partnership with the broader community to analyze the experiences and lessons learned, and to take proactive steps towards enhancing its emergency preparedness protocols.

In sharp contrast to that day ten years ago, when communication efforts were stymied by jammed land lines and cell phone networks, Hospital administrators now have software that can send emergency alert messages via email, phone and text to hundreds of employees and community leaders simultaneously.

The medical campus is designed to handle a vast array of large-scale scenarios. As a result of renovations over the past several years, Virginia Hospital Center is now equipped with an extra isolation room and negative pressure rooms, as well as decontamination suits, tents and built-in showers to handle sarin nerve gas, anthrax and other potential forms of chemical or biological warfare. The Hospital

maintains a cache of medical supplies, equipment and pharmaceuticals that would allow the facility to function without re-supply for an extended period of time.

Virginia Hospital Center, in partnership with other hospitals as well as federal, state and county officials, conducts regular drills to practice regional emergency preparedness procedures. These routine exercises allow staff to address and continually enhance the Hospital's operational readiness.





On 9/11 more than 100 nurses and 50 physicians were on-site at Virginia Hospital Center to receive casualties from the Pentagon.

The Hospital is also a member of the Northern Virginia Hospital Alliance (NVHA), a regional coalition of medical centers and emergency care facilities that are committed to working together in response to a large scale disaster. In the event of an emergency, the entire medical community must function as a single, unified health system. Recognizing this need, Virginia Hospital Center's clinical and administrative leaders were instrumental in the formation of the NVHA in the months following Sept. 11; the Hospital's President and CEO Jim Cole served as the alliance's first board chairman.

Should a local disaster occur today, the NVHA would activate a Regional Hospital Coordinating Center (RHCC). This entity would facilitate information sharing among NVHA members about the magnitude and nature of the event and the number of patients involved. The RHCC would also coordinate directly with fire and emergency responders on the scene to distribute patients appropriately.

Participating hospitals in the NVHA have forged a mutual agreement to share staff, resources and supplies as needed. For example, if one hospital is experiencing a critical shortage of nurses, staff from other hospitals will be deployed to that location. Protocols have also been set for emergency

issuance of privileges allowing local physicians to practice at other nearby hospitals.

All hospitals in the NVHA are networked by an advanced communication system that includes satellite phones, a broadcast radio system in each hospital's Emergency Department, and a web-based emergency alert system with built-in redundancies. Over the last ten years, \$23 million has been channeled into emergency preparedness in the northern Virginia region through support from grant funding and member contributions; a portion of this amount has been allocated toward this communication platform. With this system, every NVHA member facility can know within five minutes of an emergency broadcast how many beds are available in each hospital. Armed with this first-hand knowledge, emergency responders can evacuate and transport victims faster to appropriate locations and expedite emergency care.

In 2001, the Emergency Department at Virginia Hospital Center had 18 rooms and saw 30,000 patients over the course of a year. Today the facility has more than doubled its space, with 36 rooms, and treats an average of 60,000 patients annually.

A SPECIAL TRIBUTE

Virginia Hospital Center would especially like to recognize all physicians, nurses, staff, volunteers, neighbors, and county, state and federal organizations for their selfless and heroic efforts on Sept. 11, 2001.



Through this expansion, the Hospital is more prepared to respond to a variety of emergencies such as terrorist attacks, man-made disasters, and potential epidemics or new strains of influenza.

Said one physician, recalling the events of Sept. 11, 2001: "They say you see the best and worst in people in crisis situations. I only saw the best at Virginia Hospital Center that day. Our hope is that we never have to face that level of tragedy ever again. But you have to anticipate and always be ready." ■

REINSCH PIERCE FAMILY CENTER FOR BREAST HEALTH

BREAST CANCER SURGERY

(Continued from page 1)

Although it's a fairly common practice in Europe, Dr. Akbari is the only breast surgeon in the greater Washington, DC region with advanced training in this specialized approach.

MASTECTOMY AND RECONSTRUCTION

Some patients may require a mastectomy followed by breast reconstruction. Virginia Hospital Center offers a variety of plastic surgery options for mastectomy patients that fall into two categories. One approach uses the patient's own tissue to create a new breast. The other recreates breasts with either silicone or saline implants.

"Today, women have many options when it comes to breast reconstruction. We spend a great deal of time educating our patients about all of their possible options and then facilitate the one that is best for them," notes plastic surgeon Mazen Bedri, MD.

Dr. Bedri received his medical degree and advanced training in plastic surgery from The Johns Hopkins University School of Medicine, followed by an advanced fellowship in breast reconstruction and aesthetic surgery at Mercy Medical Center in Baltimore.

Flap Reconstruction

This procedure uses the patient's own tissue to create a new breast and can sometimes be done at the same time as the mastectomy. Flap options include the DIEP (deep inferior epigastric perforator) or SEIA (superficial epigastric inferior artery) which uses abdominal tissue to create a new breast.

Other flap options include using tissue from the back, buttocks or inner thigh, or the TRAM (transverse rectus abdominus myocutaneous) flap.

Implant Reconstruction

Implant-based reconstruction poses another option for mastectomy patients. Both silicone and saline implants offer patients a safe alternative for breast reconstruction.

Discussions with a plastic surgeon will help the breast cancer patient reach a tailored and individualized approach that is best for her.

WEIGHING PROS AND CONS

Every breast cancer scenario is unique and personal, and not all options are appropriate for all patients. Factors in the decision making process include details of the cancer, the potential need for radiation therapy, a patient's body composition, medical problems and recovery time. A woman who is very thin may not be a candidate for flap reconstruction because there is no tissue to move. Some patients need to return to work and can't afford a six week recuperation time. Individuals with other mitigating health risks may not be able to tolerate lengthy surgeries.

"Breast cancer treatment is not one size fits all," says Dr. Akbari. "Everyone has a different tumor location, breast size and body type, and these must be taken into consideration. We spend a lot of time educating patients so they can make the best choices for themselves." ■

DEDICATION CEREMONY FOR NEWLY NAMED CENTER

The Reinsch Pierce Family Center for Breast Health holds a three-year accreditation from the National Accreditation Program for Breast Centers, which recognizes breast centers upholding rigorous standards of care. In this multidisciplinary environment, specially trained breast surgeons, plastic surgeons, radiation oncologists, medical oncologists, physical therapists, breast health coordinators, and patient navigators work together to create an individual treatment and reconstructive surgery plan for each patient. All services are delivered in one central location, making the treatment and recovery process more convenient and less stressful for patients. The Center was recently renamed in appreciation of a major gift from Arlington philanthropists Lola Reinsch and Al Pierce, made in loving memory of Lola's parents, Dolores and Emerson Reinsch.



Lola Reinsch and Al Pierce (center) with their children, Gerald and Brigette Pierce at the dedication ceremony on April 26, 2011.

ROCK THAT TEST

Getting a prostate exam may not rank as high in the “fun” category as heading out for a round of golf or going out to a nice dinner, but the reality is that an exam that takes less than 15 minutes can be a lifesaver.

Prostate cancer is the second leading cancer killer in men, even though it’s one of the slowest-growing and most treatable forms of cancer. The key to beating it is early detection via routine screenings. That’s the message being broadcast to listeners of the Kirk McEwen & Mike O’Meara Morning Show, which airs 5:00 to 9:00 am weekdays on local radio station 105.9 FM The Edge. To walk the walk, each of the show’s hosts recently scheduled a standard prostate cancer screening—a blood PSA test and digital rectal exam (DRE)—with urologist Robert Mordkin, MD of Washington Urology.

“Guys fear this procedure, but honestly it was over before it started,” notes O’Meara, who is 50 and married with two daughters. “The DRE takes a couple seconds and then you have a little blood drawn. It’s very simple. We were in and out in about 15 minutes total.”

For McEwen, who is 46 with a baby on the way, the prospect of becoming a father made the screening even more of a no-brainer. “One thing Dr. Mordkin said that really stuck with me is that a lot of men will get prostate cancer if they live long enough,” he says. “I’ve lived hard and fast just like my listeners, but now I’m at a point in my life where it’s important to keep an eye on things. Even though you’re still a rock and roller, you still have to take care of your health.”

The standard screening for prostate cancer involves two parts. The first part, the PSA blood test, measures the amount of prostate-specific antigen in the blood. Elevated levels of this protein sometimes indicate the presence of prostate cancer, but they can also be an indicator of other benign conditions. That’s why the sec-



Prostate cancer screening advocates: Kirk McEwen (R) and Mike O’Meara (L) from 105.9 FM The Edge

ond part of the screening—the digital rectal exam—is equally important. This quick test allows the physician to manually check for abnormal masses in the pelvic organs. “To optimally screen, you need to have both tests,” explains Dr. Mordkin. “Some men will have normal PSA levels but still have prostate cancer that can only be detected with a rectal exam.”

For men who are not at increased risk for prostate cancer, the American Urology Association recommends baseline screenings at 40 and 45, followed by annual screenings starting at age 50. Establishing a baseline early on is important, as each man’s “normal” PSA levels are different. Having a baseline allows a urologist to track each patient’s PSA numbers over time and note any changes.

Men who have a family history of prostate cancer (father, grandfather, brother or uncle) should be screened every year starting at 40. The same recommendation goes for African American men, who are at higher risk for getting the disease.

“If you wait until you have symptoms it may be too late. It’s all about getting it early,” O’Meara said

recently on air to kick off the Kirk McEwen & Mike O’Meara Morning Show Listeners Prostate Screening Challenge. During the month of September, the DJs are urging listeners to schedule a prostate cancer screening with Washington Urology. ■



Virginia Hospital Center and Washington Urology has partnered with 105.9 FM The Edge on a prostate cancer awareness campaign to encourage men to get screened. Here are the prostate cancer screening guidelines.

- Men who are not at risk for prostate cancer: Baseline screening at 40 & 45, then annual screenings after age 50
- Men with a family history of prostate cancer: Age 40, and then annually thereafter
- African Americans: Age 40, and then annually thereafter

SEPTEMBER IS PROSTATE CANCER AWARENESS MONTH
Schedule a screening now by calling Washington Urology at 703.717.4200.

MAMMOGRAMS: YOUR BEST DEFENSE AGAINST BREAST CANCER

Women who are busy with career and family obligations often neglect their own health, but it's important to make time for mammograms. Recent advances in imaging technology have made it easier to find and treat even the tiniest early-stage breast cancers. The key is early detection. Molly Sebastian, MD, a dedicated breast surgeon, and Michelle Kladakis, MD, a radiologist who is fellowship-trained in breast imaging, answer some common questions about mammograms.

When should I have my first mammogram?

Annual screenings are recommended for women starting at age 40. Ideally, you should have your first baseline screening between 35 and 40. The baseline creates a snapshot of what your "normal" looks like so there is a visual point of comparison for future mammograms.

If breast cancer runs in my family, when should I be screened?

If you have a close relative (mother, sister, grandmother, or aunt) who was diagnosed with breast cancer before age 50, you should begin screenings 10 years prior to the age your family member was when first diagnosed. For example, if your mom was diagnosed with breast cancer at age 40, you should have your first mammogram at age 30.

Do I really need a mammogram every year?

Yes. Ever since the medical community began recommending annual screenings for women starting at age 40, mortality rates from breast cancer have dropped 10 to 30 percent. Breast cancers that are small are easier to treat, but they have to be detected early. In addition, women 40 years and over should have an annual clinical breast exam by their physician and perform monthly breast self-exams.

So why not start screenings even earlier?

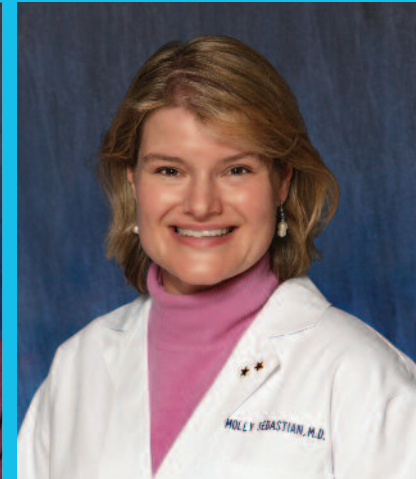
The average age for breast cancer diagnosis is 61, and a woman's chance of developing breast cancer increases with age. One in eight women who live to age 80 will develop breast cancer. Mammograms are not necessary for young women who are not high risk. However, all women in their 20s and 30s should receive clinical breast exams every two to three years, and all women should perform monthly breast self-exams as a safeguard.

What if I am asked to come back in for further imaging studies after my screening mammogram?

Being notified that you need further imaging studies does not mean you have breast cancer. In fact, about 10 percent of women are contacted to schedule a follow-up appointment after a screening mammogram and only a small percentage (5 to 10 percent) of those women end up with a cancer diagnosis. It's very common for women who had their



Michelle Kladakis, MD



Molly Sebastian, MD

baseline (first) mammogram to be contacted to schedule a follow-up appointment because the radiologist is scrutinizing every detail with no prior point of comparison. Follow-up appointments are also common among women who are switching from having their mammogram done on film to digital scans—simply because digital technology reveals more subtle nuances.

What happens at a follow-up appointment?

It's important to respond promptly to any request for follow-up. During this appointment, you will undergo a comprehensive mammogram (usually a mammogram, sonogram or a combination of the two) to ascertain whether there is cause for concern. These imaging studies are performed with same-day results. You will have the opportunity to speak with the radiologist who interprets your scans.

If the comprehensive mammogram confirms the presence of a suspicious lump, a biopsy will be ordered to achieve an accurate diagnosis. The biopsy procedure is quick, is performed using local anesthesia and requires no stitches. Approximately 80 percent of biopsies are benign. ■

HOW DO I SCHEDULE MY MAMMOGRAM?

Contact the Women's Imaging Center at 703.558.8500. When you call to schedule your appointment, be sure to have your insurance information and your physician referral with you. If you've had previous mammograms at other locations, call ahead to get copies of those imaging studies and bring them with you to your appointment. After your mammogram, the report of your results is sent immediately to your referring physician. The Women's Imaging Center will send you a letter with your results.

WHEN EVERY MINUTE COUNTS

An Arlington County Fire Department crew responds to a 911 call on the 12th floor of a high-rise building in Crystal City where a resident is having severe chest pain and shortness of breath. Paramedics evaluate the 59-year-old man, initiate advanced life support care that includes performing a 12 lead electrocardiogram (ECG) in his living room, and suspect he may be having a significant, life-threatening type of heart attack known as a STEMI (ST segment elevation myocardial infarction).

The results of the ECG are instantaneously transmitted to the Virginia Hospital Center Emergency Department and to the smartphone of the cardiologist on call via an advanced communication system called LIFENET. The emergency physician and cardiologist confirm the patient's cardiac distress is a STEMI and call a CODE STEMI. Before the paramedics have even put the man on the stretcher to leave his home, Hospital staff have been alerted and are preparing for an emergency cardiac catheterization procedure.

Time is of the essence in treating a STEMI heart attack, which occurs when an artery supplying blood to the heart suddenly becomes completely blocked, causing serious damage to the heart muscle. Fast intervention can become a matter of life and death. The key is identifying patients who are experiencing STEMI heart attacks as early as possible—before they even reach the Hospital.

At Virginia Hospital Center, the timeframe for getting STEMI patients into treatment is getting shorter, thanks to LIFENET. The first stop for a STEMI patient arriving at the Hospital is the Emergency Department, where the attending physician and staff address immediate and critical survival needs. That includes controlling breathing, blood pressure, and pain; stabilizing the heart beat; starting blood thinners; and administering nitroglycerin.

Once stabilized, the patient's next stop is the Louise Sands Olmstead Cardiac Catheterization Lab. This

newly named and enhanced state-of-the-art cath lab was made possible by a major gift from Marjorie and Frank Sands in tribute to Frank Sands' mother, Louise Sands Olmstead, a long time member of the Hospital's Board of Directors. Patients then undergo an emergency angioplasty where doctors use tiny catheters and balloons to open the clogged vessel, destroy the clot, and reinforce the artery wall with a stent to restore proper blood flow. The faster a STEMI patient gets to the cath lab for this procedure, the greater the chances of survival. The national standard for "door to balloon" time—meaning the amount of time that passes from arrival at the Hospital to catheterization—is 90 minutes.

"Time is muscle with a heart attack," explains cardiologist Antonio Parente, MD. "The less time your heart muscle is dying from a heart attack, the better your outcome will be. With the LIFENET system, we can shave 15 to 20 minutes off and get the patient into the cath lab quicker."

Funded by Virginia Hospital Center, LIFENET now serves all of Arlington

Arlington County Fire Department and EMS has seven ambulances in the community at all times, all equipped with LIFEPAK 15 and LIFENET. Pictured below: LT Chris Robinson, Paramedic/FTO, 21 years of service, and Vicki Squires, Paramedic, 17 years of service.

County and has become a vital tool for emergency medical responders. "Previously we could only provide a verbal phone report to the cardiologist on what we were seeing. Now the doctor can see the ECG results in real time and make decisions to expedite the process," says Captain Rob Pye of Arlington Fire Department and EMS. "The Fire Department wanted to acquire this system but didn't have the funding for it. Through a shared partnership with Virginia Hospital Center—the Hospital financed the hardware and software—we were able to make it happen, and community members are seeing the benefit." ■

LIFEPAK 15 with LIFENET software can immediately send a patient's ECG results and other vital data from Arlington paramedics in the field to Virginia Hospital Center.





Community Events

TAKE CONTROL OF DIABETES

SATURDAY, NOVEMBER 12

9:30 – 11:00 AM (DOORS OPEN AT 9:00 AM)

JOHN T. HAZEL, MD CONFERENCE CENTER

One third of people with diabetes do not know they have it. This chronic, progressive disorder, marked by the body's inability to control blood sugar, can affect people of all ages, from infancy to adulthood. Type 2, often called "non-insulin dependent diabetes," is the most common form of the disease, and is being diagnosed at increasingly alarming rates in children who are overweight and sedentary.

The good news is that diabetes can be controlled, and that control lies largely in the patient's hands. When blood sugar, body weight, blood pressure, and cholesterol are lowered, the complications of diabetes are markedly reduced. "Ninety percent of diabetes management is patient-driven care," notes endocrinologist Giang Bach, MD. "It's about knowledge and choices."

Having diabetes doubles a person's risk for heart attack and stroke. Making smart choices is the best defense. Children tend to model the lifestyle choices and eating habits of their parents. It's never too early, or too late, to take control and set a healthy example.

Join us for a special diabetes program where a panel of experts will discuss how to manage diabetes and lower your diabetes risk through healthier food choices, portion control, exercise, and avoiding smoking.

DIABETES PANELISTS

- ◆ **Massoud Saberinia, MD**, Endocrinologist
- ◆ **Dee Brown, RN, MSN, CDE**, Diabetes Education Program Coordinator
- ◆ **Amy Wyatt, RD, CDE**, Registered Dietician
- ◆ **Cathy Turner**, Director of Health Promotion



- ◆ **Free A1C screenings funded by the Christopher Carter Memorial Fund. No fasting required.**
- ◆ **Healthy refreshments will be served.**
- ◆ **Registration required. Call 703.558.6848.**
- ◆ **Complimentary parking in BLUE Parking. Handicapped parking is available in front of the John T. Hazel, MD Conference Center.**

TOTAL JOINT REPLACEMENT CLASS

If you are considering, or scheduled for, total knee or hip joint replacement, we encourage you to attend our free class. Learn about pre-operative testing, what to expect during your Hospital stay and discharge planning options. To register, call 703.558.6159.

1st & 3rd Wednesday of every month, 1:00 - 4:00 pm
1st Wednesday of every month, 6:00 - 8:00 pm
Arlington Urgent Care Center, Carlin Springs Health Pavilion
601 S. Carlin Springs Road, Arlington, VA 22204

WEIGHT LOSS SURGERY FREE SEMINARS

Learn about weight loss surgery options, such as gastric banding and sleeve gastrectomy, and how they can help you take charge of your weight and your health. To register, please call 703.717.4250 or visit www.SurgicalAssociatesVHC.com.

Saturdays, 10:00 – 11:30 am, 9/10, 10/8, 11/5, 12/3
Thursdays, 5:30 – 7:00 pm, 9/15, 10/20, 11/10, 12/15





Cardiology

WHEN THE HEART GETS MIXED SIGNALS

For 13 years, Rear Admiral Jamie Barnett's atrial fibrillation was controlled with medication. But in 2010, as the retired officer was well into a second career as a civilian, he began having intermittent heart palpitations and occasional dizziness—clear signs of a heart that is beating in and out of sync.

Atrial fibrillation occurs when abnormal electrical impulses originating from the pulmonary veins cause a rapid, irregular and chaotic heartbeat. Estimated to affect nearly 3 million Americans, the condition is diagnosed based on symptoms and confirmed with an electrocardiogram. Left untreated, it can cause stroke or heart failure.

Barnett's particular type of arrhythmia, known as symptomatic paroxysmal atrial fibrillation (PAF), is characterized by an irregular heartbeat that originates in the left atrium and starts and stops on its own. The effects can last for minutes or even days at a time.

When his condition could no longer be controlled with drug therapies, Barnett's physician advised radiofrequency catheter ablation, a minimally-invasive procedure in which surgeons use heat to create scar tissue that blocks abnormal impulses coming from the pulmonary veins. He underwent this procedure in June 2010, but the results proved only temporary and his symptoms returned.

"By January of 2011, I started questioning whether I could continue working," says the Arlington resident, now 57. "My heart would sometimes jump to 180 beats per minute, requiring some emergency visits to the hospital. There was a great deal of uncertainty, as I never knew when it was going to happen. I didn't feel well, and I couldn't predictably travel, which my job requires. Plus, I have a history of heart disease in my family, so I need to be able to exercise consistently, and I couldn't do it. Atrial fibrillation really saps your energy."



Haroon Rashid, MD, FACC

In March 2011, Barnett became one of the first patients to undergo Arctic Front® Cardiac CryoAblation, a new procedure recently approved by the FDA for patients with PAF. Virginia Hospital Center is one of only two medical centers in northern Virginia offering this groundbreaking procedure.

As with radiofrequency ablation, Arctic Front cryoablation uses catheters and tiny instruments to disconnect the pulmonary vein circuits that are sending the heart mixed signals. The difference is that it uses coolant rather than heat to block those abnormal electrical impulses.



Arctic Front® cryoablation is performed under anesthesia.

It is often curative and eliminates the need for future atrial fibrillation drug therapy.

Most patients go home the next day.

"Cryoballoon treatment offers a significant improvement over conventional ablation in that it isolates the pulmonary veins more efficiently," explains electrophysiologist Haroon Rashid, MD, FACC, who performed Barnett's cardiac cryoablation procedure. "The heat-based approach also runs the risk of damaging the esophagus. This approach eliminates that risk."

Recommended for patients whose symptoms from PAF cannot be controlled effectively by medication, Arctic Front cryoablation is performed under anesthesia. It is often curative and eliminates the need for future atrial fibrillation drug therapy. Most patients go home the next day.

For Barnett, the procedure meant a significant and immediate boost to his quality of life. He was back at work three days later and resuming his normal exercise routine within a week.

"I have not had one episode since the procedure," he says. "I felt better almost instantly and left the hospital feeling refreshed. I am off medications for the first time since 1996. I feel the way I did before I ever developed atrial fibrillation." ■





Oncology

LOOKING GOOD CAN MAKE YOU FEEL BETTER

Women undergoing cancer treatment face a host of new fears about health, family and work, not to mention the sheer stress of integrating treatments into daily life. Who has time to worry about hair and makeup?

The volunteers who run Virginia Hospital Center's Look Good...Feel Better® program do. Designed for women undergoing any kind of cancer treatment, the program acknowledges a connection between positive self-image and healing. Each two-hour workshop addresses concerns that are common to women undergoing cancer treatment, such as skin damage and discoloration, dark under-eye circles, and hair loss.

"Chemotherapy and radiation affect patients differently. We demonstrate for each person how to use corrective makeup as camouflage," explains Look Good...Feel Better volunteer and hairstylist Gretchen Lund. Patients also have the opportunity to experiment with turbans, scarves, hats, accessories and wigs. Each attendee leaves with a tote bag of free beauty products provided by the Personal Care Products Council Foundation, all of which are approved for use by cancer patients by the American Cancer Society. Goodies range from facial cleanser to foundation to mascara, to name a few.

For cancer patients, beauty regimens are not as frivolous as one might assume. "There is an emotional component to healing," says medical oncologist Neelima Denduluri, MD. "A boost in self-esteem can help patients maintain a more positive mindset, and this gives them the will to keep going when it gets tough. Positive attitude can also translate into higher activity levels, which helps to counteract fatigue. It also gives patients the confidence to reach out to other people instead of closing themselves off."

In short, she says, patients who feel better about their appearance are more likely to go out and do normal things. And maintaining a sense of normalcy promotes recovery.

Breast cancer survivor Alma Kasulaitis, who attended her first Look Good...Feel Better support session 21 years ago, has served as a volunteer helping other women ever since. "Across from me in that first workshop was a 14-year-old girl who had lost her hair, eyebrows and eyelashes. She was skeptical about being there until they found the right wig, applied eyebrows, and showed her how to apply



COURTESY OF THE AMERICAN CANCER SOCIETY

eye makeup to look like eyelashes. It was an amazing metamorphosis. She left a new person."

As just one of the many cancer support services the Hospital offers, Look Good...Feel Better has made a difference for hundreds of women over the past two decades. "I encourage all my patients to try it, and they inevitably come back and tell me what a fabulous experience it was," says Dr. Denduluri. "When they meet other women in the same position, they feel less alone. It helps them to see where others are in the process and to realize that treatment doesn't necessarily last forever."

And in the interim, it helps them feel more like themselves as they finish treatment. "The program is aptly named," says Lund. "Patients do look and feel better. Before the workshop starts, women may feel a little leery and are not sure what to expect. Some of them may have never worn makeup before. Afterwards, they walk out with smiles on their faces, feeling transformed, not just physically, but mentally. Many of the women bond with others during the sessions and come away with new friends." ■

CELEBRATING 20 YEARS OF LOOK GOOD...FEEL BETTER®

Hundreds of women have attended Look Good...Feel Better workshops at Virginia Hospital Center the past 20 years. The American Cancer Society recently recognized volunteers Alma Kasulaitis and Gretchen Lund for their many years of service. Look Good...Feel Better is a free public service program sponsored jointly by the Personal care Products Council Foundation, the Professional Beauty Association/National Cosmetology Association and the American Cancer Society. (See next page for workshop dates and times.)



All lectures and events are held in the Community Classroom of the Cancer Resource Center in the Rose Benté Lee Ostapenko Outpatient Oncology Center unless otherwise noted. Please use Green Parking. To register for these free programs, visit www.virginiahospitalcenter.com or call the number indicated. For more information, call 703.558.5555.

Fall Lectures & Events

Lymphedema Awareness

Learn about lymphedema from certified lymphedema specialists. To register, call 703.558.0911.

Tuesday, 9/8 or 11/10, 5:00 – 6:00 pm

Friday, 10/14 or 12/9, 11:00 am – 12:00 pm

Pre-Operative Class for Breast Surgery Patients

Jean Sullivan, RN, BSN, Breast Health Coordinator, reviews surgical procedures. To register, call 703.558.6908.

Thursday, 10/27 or 11/10, 6:00 – 7:00 pm

Friday, 9/23, 10/14 or 12/9, 10:00 – 11:00 am

Look Good...Feel Better®

Learn makeup & hair styling tips to manage changes in appearance that may occur during cancer treatment. To register, call 703.558.5555. Group Room.

Monday, 10/3 or 12/5, 2:00 – 4:00 pm

Breast Cancer Q&A

Breast surgeon Negar Golesorkhi, MD discusses the BRCA mutation, new research & answers questions.

To register, call 703.558.0924.

Tuesday, 10/4, 7:00 – 8:00 pm

Bereavement Workshop

Receive emotional support for grieving the loss of a loved one at this 6-week workshop facilitated by a Palliative Care nurse & a social worker. To register, call 703.558.0901.

Thursdays, 10/6, 10/13, 10/20, 10/27, 11/3 & 11/10, 6:30 – 8:30 pm

Just Dance

Join a fun-filled class of Latin, Persian & jazz dancing that will make you forget the "work" in "workout". To register, call 703.558.0915.

Thursday, 10/6, 7:00 – 8:00 pm

Financial Planning

Shak Hill, Certified Financial Planner, discusses ways to consolidate & simplify financial matters, along with important estate planning. To register, call 703.558.0918.

Tuesday, 10/11, 7:00 – 8:00 pm

22nd Breast Cancer Awareness Conference

The focus of this year's conference is the effect of a breast cancer diagnosis on the family. Marc Silver, author of the *Breast Cancer Husband*, & Neelima Denduluri, MD, medical oncologist, are the keynote speakers. John T. Hazel, MD Conference Center.

To register, call 703.558.0913.

Saturday, 10/15, 9:00 am – 12:00 pm

Lesbians Living with Cancer

Catherine Sumner, a journalist, historian, lobbyist for gay rights & breast cancer survivor, addresses the unique concerns lesbians face during & after treatment.

To register, call 703.558.0925.

Tuesday, 10/25, 7:00 – 8:00 pm

16th Annual Cancer Survivors' Day

Celebrate life with other cancer survivors, family members & staff. Entertainment, door prizes & food. National Rural Electric Cooperative Association (NRECA) Building.

To register, call 703.558.0914.

Friday, 11/4, 6:00 – 8:00 pm

Pink Ribbon Program: Post-Operative Workout Enhancing Recovery

Michelle Logsdon, a certified cancer exercise trainer leads a 4-week workshop for breast cancer patients who are at least 6 weeks post-surgery. Promote a healthy lifestyle & positive body image through exercise training. Physician approval required. To register, call 703.558.0902.

Tuesdays, 11/8, 11/22, 11/29 & 12/6, 6:00 – 7:00 pm

Coping with Chemobrain

Donna Hafner, RN, OCN discusses symptoms of chemobrain & methods for coping with cognitive deficits associated with chemotherapy treatment. To register, call 703.558.0910.

Monday, 11/28, 7:00 – 8:00 pm

Managing the Side Effects of Radiation Therapy

A radiation oncology nurse addresses ways to deal with side effects, such as fatigue & skin reactions. To register, call 703.558.0922.

Thursday, 12/1, 7:00 – 8:00 pm

Healing & Renewal through Centering Prayer

Edward Bauman, chaplain, shows how contemplative prayer can be a source of healing renewal. To register, call 703.558.0909.

Wednesday, 12/14, 7:00 – 8:00 pm

SUPPORT GROUPS

Support groups are held in the Group Room of the Cancer Resource Center unless otherwise noted.

C.H.A.N.C.E. Head & Neck Cancer

Oncology professionals discuss special challenges & concerns for anyone diagnosed with head & neck cancer.

4th Wednesday / 6:00 – 7:00 pm, Community Classroom

Breast Cancer Patients with Children

Join other mothers to discuss living with a breast cancer diagnosis & raising a family.

4th Friday / 1:00 – 2:30 pm

Support Sisters Early Stage Breast Cancer

Women share concerns & learn new coping techniques.

1st & 3rd Tuesdays / 5:00 – 6:30 pm

Write Away Group

Patients share their writings about cancer diagnosis. Call 703.558.6913 for dates & times.

Healing through Art

Learn how to use art to cope with cancer diagnosis. To register, call 703.558.6913.

3rd Wednesday / 7:00 – 8:00 pm

Prostate Cancer

Discussion group for men & their significant others.

4th Tuesday / 7:00 – 8:30 pm

Reiki

Enjoy a free half-hour of Reiki. By appointment only. Call 703.558.6284.

2nd Friday / 7:00 – 9:00 pm

Lesbians Living with Cancer NEW!

Facilitated by a woman who is a breast cancer survivor and lobbyist for gay rights, this group addresses the unique concerns lesbians face during cancer treatment.

To register call, 703.558.6913.

1st Thursday
7:00 – 8:00 pm





SUFFERING FROM PELVIC PROLAPSE? THERE'S NO NEED TO.

Pelvic organ prolapse occurs when a woman's pelvic floor muscles and ligaments become weakened and lose their elasticity, causing bladder, uterine or rectal tissue to shift out of place. This displacement can result in vaginal bulging, feelings of pressure or discomfort, or incontinence. Many women avoid seeking treatment out of embarrassment, even when their condition is affecting their daily lives to the point that they are afraid to leave home for long stretches of time.

If this scenario sounds familiar, you're not alone. It's estimated that some 30 to 40 percent of all women develop pelvic organ prolapse at some point in their lifetime. It can affect new moms, as well as older women who have gone through menopause. But there's no reason to suffer.

"It's important for women to know that this is a common condition that affects more of their peers than they might think," says urogynecologist Maria Canter, MD, MSc, FACOG. "And there are multiple treatment options, so if one doesn't work, there are alternatives."

Prolapse may occur for many reasons, including trauma to the pelvic floor muscles from childbirth, chronic straining (due to heavy lifting or constipation), obesity, or previous pelvic surgeries such as hysterectomy. It can also progress as certain pelvic tissues begin to atrophy through menopause. Although it can affect anyone, the condition is slightly more prevalent among Caucasians than women of other ethnicities. Studies have also confirmed the presence of genetic risk factors. A woman with a first degree relative with prolapse is four times more likely to develop the same condition.

When is it time to seek help? "If you have a vaginal bulge and are feeling pressure, you should be evaluated to make sure this is due to prolapse and not something else. You should also see a doctor if you are experiencing recurrent urinary tract infections, incontinence, or a feeling that you can't completely empty your bladder," Dr. Canter advises. "If it's starting to affect your lifestyle—for example, if you're skipping exercise because of discomfort or declining invitations to social occasions—there are treatments that can help you get your life back."

Prolapse can be treated with minimally-invasive surgeries that use either the patient's own tissues or synthetic grafts to reinforce and strengthen weakened pelvic tissues. The gold standard for pelvic floor prolapse repair is sacrocolpopexy, a procedure in which synthetic mesh is used to reconstruct and support damaged muscles and ligaments. At Virginia Hospital Center, this procedure is performed laparoscopically through tiny abdominal incisions using the da Vinci® Robotic Surgical System. With robotic-assisted surgery, there is less trauma at the incision site, less blood loss during the procedure and less pain during recovery. Most patients spend one night in the Hospital and usually only have to take over-the-counter pain medications once they are home.

"My patients say they can't believe they've had major reconstructive surgery—they feel so good so quickly," says Dr. Canter. "Most are back at work within three weeks; some within just one week."

There are also non-surgical approaches. For mild prolapse, pelvic floor physical therapy can be effective. Patients who are not good surgical candidates may also see improvement with the help of a pessary, a plastic support mechanism that fits snugly into the vagina, much like a diaphragm.

"Without treatment, pelvic organ prolapse doesn't get better," Dr. Canter advises. "It may stay the same, but it can also get worse and become a problem that begins to affect quality of life. I've seen patients who reach a point where they are declining to participate in activities that make them happy, such as a girls' night out, or a date night with their husbands. They become afraid to leave their homes, not realizing there are solutions. Prolapse is nothing to be ashamed of. All patients have treatment options, regardless of their age. And once they undergo treatment, most say they wish they had done it sooner." ■

If you are suffering with symptoms similar to those mentioned in this article, help is just a phone call away. To schedule an appointment with the Urogynecology & Pelvic Floor Center, call 703.717.4000.



Childbirth Education Classes

Preparation for Childbirth (6-Week Class)

This 6-session class for expectant parents covers pregnancy through the postpartum period, including nutrition; breathing & relaxation techniques; Cesarean deliveries; medication during labor; signs of labor; postpartum changes. Includes infant care skills & a tour of the Women & Infant Health Center.

Mondays, 9/12 – 10/17 or 10/24 – 11/28
Tuesdays, 9/6 – 10/11, or 10/18 – 11/22
Wednesdays, 9/7 – 10/12 or 10/19 – 11/30
7:30 – 9:30 pm (C) \$180

One Day Preparation for Childbirth Class

This one-day class for expectant parents covers pregnancy through the postpartum period, including nutrition; breathing & relaxation techniques; Cesarean deliveries; medication during labor; signs of labor; postpartum changes. Tour the Women & Infant Health Center.

Sunday, 9/11, 10/9, 11/13 or 12/11
Saturday, 9/24, 10/22, 11/19 or 12/17
9:00 am – 5:30 pm (C) \$165

Infant Care Skills: The First Two Weeks

Learn what to expect & how to care for your newborn during the first 2 weeks. Topics include when to call the pediatrician, infant safety, sleep, diapering, swaddling & how to bathe until the umbilical cord comes off. Class includes a lecture by a pediatrician.

10/27 or 12/7 7:00 – 9:30 pm (C) \$60

Sibling Class

The sibling class helps children, ages 2-6, adjust to their mothers' stay in the Hospital and the addition of a new sibling. Children have an opportunity to properly hold & diaper a life-like doll & tour the Postpartum Unit & Nursery.

9/10, 10/8, 11/12 or 12/10
9:30 am for 2-3 years or 10:30 am for 4-6 years
(L) \$30

Hospital Tour for Expectant Parents

Tours of Labor, Delivery & Recovery, Nursery & Postpartum Units are offered for adults only. Registration required.

Sundays, 9/11, 9/25, 10/2, 10/9, 10/23, 10/30, 11/6, 11/13, 12/4 or 12/11 2:00 pm (L) FREE

Preparation for Breastfeeding

Learn about nipple & breast care, sleep & awake states of the baby, breastfeeding for working mothers & breast pumps. Coaches welcome.

9/22, 10/3, 11/3 or 12/5 7:00 – 9:30 pm (C) \$60

Breastfeeding Support Group

A weekly support group to provide encouragement & education to the newly breastfeeding mom. Share your concerns with a registered nurse. An infant scale is available for weight checks. Registration is required.

Wednesdays, 12:00 – 1:00 pm (L) FREE

Breastfeeding Support Group for the Working Mom

Working moms share strategies for breastfeeding success after returning to work. This group is designed for moms who have already established successful breastfeeding—it is not for the expectant or newly breastfeeding mom. Babies welcome! Registration is required.

Sundays, 9/11, 9/25, 10/2, 10/16, 11/6, 11/20, 12/4, 12/18
7:00 – 8:30 pm (L) FREE

New Parents Support Group

Join other new parents to share your parenting experiences. Babies welcome! Registration is required.

Wednesdays, 9/7, 9/21, 10/5, 10/19, 11/2, 11/16, 12/7, 12/21
10:30 am – 12:00 pm (L) FREE

Postpartum Support Group

Talk with other new mothers who are finding the postpartum weeks overwhelming. If you are feeling sad, anxious, angry or irritable, group support can help. Babies welcome! Registration is required.

Wednesdays, 9/14, 9/28, 10/12, 10/26, 11/9, 11/23, 12/14, 12/28
10:30 am – 12:00 pm (L) FREE

Prenatal & Postnatal Massage/Acupuncture

Specially-trained massage therapists & acupuncturists support you throughout your pregnancy from conception to labor & delivery, & after your baby has arrived. Services are available in the Teal Center's suite located on the Hospital's campus, at the bedside in your private patient room, & also during labor & delivery. For an appointment, call 703.558.5454.



SIGN UP FOR CHILDBIRTH EDUCATION CLASSES IN YOUR FIRST THROUGH FOURTH MONTH OF PREGNANCY

To register, visit www.virginiahospitalcenter.com or call 703.558.2468.

CLASS LOCATIONS

(C) = John T. Hazel, MD Conference Center

(L) = Women & Infant Health Lobby Classroom, 1701 N. George Mason Drive

Heart Saver CPR

The American Heart Association Heart Saver CPR Course explains how to give CPR in a safe, timely & effective manner to an adult, child or infant. This class is recommended for expectant parents & new parents. To register, call 703.558.6970 or visit www.virginiahospitalcenter.com.

Saturday: 9/10, 10/1, 11/5 or 12/3

9:00 am – 1:00 pm

Monday: 9/19, 10/10 or 11/14

6:00 – 10:00 pm

(C) \$60 per person



Health Promotion

To register, please fill out the registration form or visit www.virginiahospitalcenter.com and click on "Programs & Classes".

ALL SESSIONS ARE 6 WEEKS UNLESS OTHERWISE NOTED. For more information on Health Promotion classes, call 703.558.6740.

Body Sculpting

Tone your upper, lower body & abs using a variety of fitness tools. All levels welcome.

Mon 6:00 – 6:45 pm begins 9/12 & 10/31 (H)
Tues 6:30 – 7:15 pm begins

9/13 & 11/1 (H) **NEW!**

Wed 6:00 – 6:45 pm begins 9/14 & 11/2 (H)
Sat 10:00 – 10:45 am begins 9/17 & 11/5 (CS)
\$42

Cardio Strength Circuit

A faster-paced cardio & strength class for those with an intermediate fitness level.

Tues 5:30 – 6:15 pm begins 9/13 & 11/1 (H) \$42

Nordic Walking

Adding poles burns 20 percent more calories without added exertion & takes stress off the joints. Poles provided.
*4-week session.

Thurs 7:30 – 8:30 am begins 9/15 (CS) \$50

Gentle Yoga

Restore flexibility, regain strength & ease tensions.

Tues 9:30 – 11:00 am begins 9/13 & 11/1
Thurs 9:30 – 11:00 am begins 9/15 & 11/3
(CS) \$66

Adaptive/Seated Yoga

For older adults with limited mobility, chronic pain or neuropathy. Adaptive yoga emphasizes breathing, gentle stretching & going at your own pace. All ages & ability levels welcome.

Tues 11:15 am – 12:15 pm begins 9/13 & 11/1
(CS) \$66

Yoga for Everybody

Reduces stress & increases strength & flexibility.

Wed 6:30 – 8:00 pm begins 9/14 & 11/9
(CS) \$66

Hatha Yoga

Tues 12:00 – 1:00 pm begins 9/13 & 11/1
Thurs 6:00 – 7:15 pm begins 9/15 & 11/3
(H) \$66

Hatha Vinyasa Yoga

Energetic, flow yoga class that matches breath to pose. Intermediate level.

Sun 10:00 – 11:15 am begins 9/18 & 11/6
(H) \$66

Prenatal Yoga

Stretch muscle groups essential for efficient labor & delivery. Physician approval required.

Mon 7:00 – 8:15 pm begins 9/12 & 10/31 (H)
Tues 6:15 – 7:30 pm begins 9/13 & 11/1 (CS)

Tues 7:30 – 8:45 pm begins 9/13 & 11/1 (H) **NEW!**

Wed 7:00 – 8:15 pm begins 9/14 & 11/2 (H)
Thurs 7:30 – 8:45 pm begins 9/15 & 11/3 (CS)
Sat 10:00 – 11:15 am begins 9/17 & 11/5 (H)
Sun 11:15 am – 12:30 pm begins 9/18 & 11/6 (H)
\$78

Prenatal Partner Yoga

Learn support techniques & restorative postures designed to help with the discomforts of pregnancy & labor. Physician approval required. *1-session.

Sun 9/25 or 10/16, 1:00 – 2:30 pm (H) \$40/couple

Postpartum Yoga **NEW!**

This class is for mom and baby. Relax and rebuild strength as you bond with baby (age 6-weeks to almost crawling).

Tues 10:45 – 11:45 am begins 9/13 & 11/1
(H) \$78

Itsy Bitsy Yoga® for Babies

Created by founder Helen Garabedian; learn yoga postures to support baby's developing body (6-weeks to almost crawling).

Fri 10:00 – 10:45 am begins 9/16 & 11/4
Sat 2:30 – 3:15 pm begins 9/17 & 11/5
(H) \$78

Itsy Bitsy Yoga® for Tots

Fun-loving yoga class for parent & toddler (active crawling to 24 months).

Mon 10:00 – 10:45 am begins 9/12 & 10/31
Sat 3:30 – 4:15 pm begins 9/17 & 11/5
(H) \$78

Gentle Pilates

A non-traditional mat Pilates class with modifications to suit all abilities.

Thurs 2:00 – 3:00 pm begins
9/15 & 11/3 (CS) **NEW!**

Sat 9:00 – 10:00 am begins 9/17 & 11/5 (H)
Sat 11:15 am – 12:15 pm begins 9/17 & 11/5 (H)
\$78

Pilates

A mat-based class to balance your body by strengthening core muscles that support the spine.

Mon 7:30 – 8:30 pm begins 9/12 & 10/31 (CS) \$78

Pilates Plus

A fun, challenging Pilates mat class incorporating the use of bands & other equipment for added resistance while performing classic Pilates exercises.

Mon 6:15 – 7:15 pm begins 9/12 & 10/31
(CS) \$78

Pi-Yo

Tone & energize with this blend of Pilates strengthening & Yoga movement. Classes may incorporate stability balls & other equipment to enhance your core strength.

Tues 7:30 – 8:30 pm begins 9/13 & 11/1 (CS)
Thurs 7:30 – 8:30 pm begins 9/15 & 11/3 (H)
\$78

Postpartum Pilates

Get back into shape after childbirth! Class is designed for mom & baby.

Mon 11:00 – 11:45 am begins 9/12 & 10/31 (H)
Fri 11:00 – 11:45 pm begins 9/16 & 11/4 (H)
\$78

Tai Chi

Slow, flowing movements help foster a balanced mind & body. Class follows the simplified, 24-form Yang style. Suitable for all ages. *8-week session.

Thurs 6:15 – 7:15 pm begins 9/15
(CS) \$80

Discover the New Plate

Learn how you can use the new USDA MyPlate to develop healthy eating habits.

Wed 11/9 7:00 – 8:30 pm (H) \$15 **NEW!**

Food for Life

4-class series presented by The Cancer Project, a non-profit dedicated to nutrition education & cancer prevention. Classes include a lesson, cooking demo & samples of each meal.

Wed 6:30 – 8:30 pm, 9/21, 9/28, 10/12, 10/19
(H) \$80 **NEW!**

"Quit for Good"

Smoking Cessation

Conquer the 3 aspects of smoking: addiction, habit & psychological dependency. *5 sessions.

Mon & Wed 7:15 – 8:15 pm begins 10/10
(H) \$50



(H) = Virginia Hospital Center
(CS) = Carlin Springs Health Pavilion at 601 S. Carlin Springs Road, Arlington, VA 22204

SENIOR HEALTH PROGRAMS

For more information, call 703.558.6859.

Mindful Meditation

Learn how meditation can lead to clarity & peace of mind. *2 sessions.
10/25 & 10/27 6:30 – 8:00 pm (CS) \$30

Massage for Couples

Learn the benefits & techniques of massage in this hands-on workshop.
Sat 10/29, 9:30 am – 12:00 pm (CS) \$45/couple

HealthWorks

Bring customized health promotion programs, health fairs & wellness classes on-site to your business.

One on One Assessments

To register, call 703.558.6740 or visit www.virginiahospitalcenter.com

Body Fat Analysis

Using high-tech equipment, we assess your percentage of fat, muscle & water. \$15

Dermascan

Non-invasive black-light scanning device examines head & neck for potential or existing sun damage. \$10

Bone Density Screening

Osteoporosis risk assessment screening using pDEXA scan of the forearm. \$35

Resting Metabolic Rate Screening

Determine the number of calories you burn at rest, using the MedGem® indirect calorimeter. This is an important measure in assessing nutritional needs & helping you achieve weight management goals. \$55

Fingerstick Cholesterol Screening

Total Cholesterol & HDL. \$19
Total Cholesterol, HDL, LDL & Lipids. \$23
Total Cholesterol, HDL, LDL, Lipids & Glucose. \$25

Hypothyroidism Screening

Fingerstick blood test. \$25

A1C Diabetes Screening

Fingerstick blood test. \$25

Strength and Stretch for Seniors

Improve range of motion, muscle strength & bone health.
Mon 1:00 – 1:45 pm begins 9/12 & 10/31
Thurs 1:00 – 1:45 pm begins 9/15 & 11/3 (CS) \$42

Alzheimer's Caregiver Support Group

3rd Wed of every month 10:30 – 11:30 am (CS)

Seniorcise

Maintain & regain strength & flexibility. Classes start 9/26. 10-week sessions.
Mon/Wed/Fri, 9:00 – 10:00 am. Carlin Springs Health Pavilion or McLean Baptist Church. \$70
Mon/Wed, 10:30 – 11:30 am. Calvary Methodist Church, Crystal City. \$47

Memory Screening Day

Call to schedule an appointment 703.237.9048.
Tues 11/15, Walter Reed Community Center

Lifeline Emergency Response

A 24-hour medical alert system personally overseen by Hospital staff.

Mall-Walking Program

A free fitness program featuring walking, stretching & blood pressure checks
Tues & Thurs 8:30 – 9:30 am, Ballston Common Mall

Healthy Aging Lecture Series*

Fridays, 11:00 am – 12:00 pm (CS)

- 9/16 **DENTAL HEALTH**
Michael B. Rogers, DDS
Fairlington Dental
- 10/21 **MAXIMIZING YOUR DOCTOR VISIT**
Medical Associates of Arlington
Arlington Urgent Care Center
- 11/18 **DEALING WITH CHANGE & TRANSITION**
Rebecca Harrison, LCSW
- 12/16 **HOLIDAY STRESS MANAGEMENT**
Jessica Mack, MS, CHES
Virginia Hospital Center

*Registration required.

Health Promotion & Senior Health Registration Form

Complete this form and mail to Health Promotion Department, Virginia Hospital Center, 1701 N. George Mason Drive, Arlington, VA 22205-3698; or fax to 703.558.2456. Checks should be made payable to Virginia Hospital Center. You will receive a confirmation with directions. Parking tokens provided. For more details, call 703.558.6740.

Program Name

Program Date

Amount Enclosed

Name

Daytime Phone

Email Address

Address

Credit Card #

Visa Mastercard
 Amex Discover

Exp. Date

Signature

YOU'RE INVITED TO

Ladies for Life

A FREE Breast Cancer Education Event for Women of All Ages

SATURDAY, OCTOBER 1 ♦ 9:00 – 11:00 AM

John T. Hazel, MD Conference Center at Virginia Hospital Center
Free parking in Blue Parking / Doors open at 8:30 am

PANEL AT 9:00 AM

There are many state-of-the-art options available to find, treat and beat breast cancer. Still, the best protection is early detection. We are all 'ladies for life' and should teach, support and engage our mothers, daughters, grandmothers, sisters and girlfriends about this beatable disease. Please join us at Ladies for Life where a panel of specialists will address:

- ◆ Breast cancer prevention
- ◆ Breast cancer surgery
- ◆ Breast reconstruction
- ◆ Tools and tips on living stress-free

EVENT HIGHLIGHTS

- ◆ Host: MIX 107.3 FM's Chilli Amar
- ◆ Receive special giveaways
- ◆ Visit health and wellness booths
- ◆ Schedule your mammogram
- ◆ Enjoy complimentary refreshments
- ◆ Enter to win free prizes

GRAND PRIZE DRAWING

Attend Ladies for Life and enter to win the grand prize courtesy of Tiny Jewel Box—a beautiful David Yurman sterling silver bracelet with a heart charm set with pink rhodonite and pavé diamonds (pictured right).



TINY JEWEL BOX

REGISTRATION REQUIRED: CALL 703.558.6848