

MedStar Georgetown MD

A MedStar Georgetown University Hospital Publication



Patrick Bright, a 55-year-old veteran federal police officer at the Pentagon, receives a warm welcome home after recovering from COVID-19 at MedStar Georgetown University Hospital.

Photo by Nicole Vowell

“I Received COVID-19 Convalescent Plasma, and I Want to Help Save Others”

BY SUSAN WALKER

Patrick Bright, a 55-year-old veteran federal police officer at the Pentagon, does not give up without a fight. That tenacity may be part of what saved his life when he was recently hospitalized with COVID-19. Another part of his recovery may have been the treatment with convalescent plasma (a component of blood, collected from individuals who have recovered from COVID-19) he received at MedStar Georgetown University Hospital. Patrick, who was discharged to MedStar National Rehabilitation Hospital after three weeks in the hospital—including nine days in the ICU and a week on a ventilator—was the first patient in the







District of Columbia to receive this investigational treatment.

Patrick’s return to his Clinton, Maryland, home May 15, where he was welcomed by a parade of neighbors and family and saluted by fellow officers—all practicing physical distancing—was a welcome ending that almost didn’t happen. When Patrick was airlifted to MedStar Georgetown from MedStar Southern Maryland Hospital Center, the doctors told him and his wife, Pam, he wasn’t likely to survive. Despite the bleak prognosis, he was determined to fight.

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We Are Safe and Ready to Serve You

MedStar Georgetown University Hospital is open and ready to care for you. We want to make sure you don’t delay your care or ignore symptoms that would typically make you seek medical care. We are following guidelines from the Centers for Disease Control and Prevention to maximize the safety of our patients and staff. Your health and safety are our top priorities. The following is a list of extra precautions we are taking to ensure a safe environment:

- Safe providers:** We are using the proper safety gear to protect our team members and patients to keep everyone healthy. 
- Masking:** All patients and visitors must wear a mask during their visit, regardless of symptoms. We will provide one for you if needed. 
- Cleaning and disinfecting:** We thoroughly sanitize and disinfect all patient exam, waiting, and procedure rooms multiple times each day. 
- Hand sanitizing:** Hand sanitizer dispensing stations are available throughout every facility. 
- Staggered appointments:** We carefully manage our schedules to minimize the number of people coming through our waiting rooms at one time. 
- Screening patients and visitors:** We are screening all patients and approved visitors for symptoms upon entry. 

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Gratitude Matters: Donors Support COVID-19 Response Efforts

Feelings of gratitude are in abundance these days throughout the MedStar Georgetown University Hospital community. “Every day, our front-line healthcare heroes are keeping the community safe during this public health crisis,” says Emily A. Riffle, CFRE, vice president of philanthropy, MedStar Georgetown.

“I am deeply moved and humbled to report that our friends and neighbors have come together to support us all during this time of greatest need,” Emily shares. “Their expressions of gratitude have taken so many forms. The hospital has received thousands of donated meals, protective equipment, and much more.”



Neil and Emily Kischer generously gave to the Associate Emergency Support Fund at MedStar Georgetown and encouraged fellow board members to do the same.

Photo by Gary Landsman

The philanthropy team has witnessed many remarkable donor stories. One that stands out is Neil Kischer’s leadership role in gathering MedStar Health board members to contribute to the Associate Emergency Support Fund. Neil, a MedStar Georgetown board member and chair of the philanthropy committee, along with his wife, Emily, provided a generous gift and encouraged his board

colleagues to join the effort. The fund received an initial investment of \$2 million from MedStar Health to support non-management associates who find themselves in crisis situations due to the pandemic, with no obligation for repayment. To date, the fund has received an additional \$2 million in donations from the wider community, thanks in part to Neil’s initiative, community generosity, and the philanthropy of his colleagues.

Gathering the philanthropy committee chairs from all 10 MedStar Health hospitals on a call, Neil asked if they would use the Associate Emergency Support Fund to express their gratitude and raise awareness about front-line workers’ needs. His efforts were successful.

“It’s a challenging time, and I couldn’t be prouder of our board members, management, and community for realizing early on the need to support our associates,” Neil says.

Another MedStar Georgetown board member and former associate, Shelley Holt, was inspired by Emily and Neil’s leadership and made an incredible philanthropic investment, with half designated to the Associate Emergency Support Fund and half to the COVID-19 Critical Needs Fund at MedStar Georgetown.

“I was an associate at Georgetown Lombardi Comprehensive Cancer Center from 1981 until 1986 when my son was born, and I really enjoyed the patient contact,” Shelley remembers.

Once the pandemic struck the Washington, D.C., region, Shelley was compelled to offer her support. “I have a niece and nephew working on the front lines in New York City, so I knew early how bad it was,”



Shelley Holt and her husband, Allan, made a philanthropic investment, designating half to the Associate Emergency Support Fund and half to the COVID-19 Critical Needs Fund.

Photo by FotoBriceno, courtesy of the Smithsonian Institution

Shelley recalls. “My husband, Allan, and I realized we needed to act quickly. It’s full circle for me as a former associate. I’m proud to call MedStar Georgetown my hospital and thrilled to serve on the board.”

About a month into the pandemic, the hospital received a generous gift from Catherine and David Edwards of New Orleans. They are forever grateful for the care their son, Bailey, received at MedStar Georgetown, so they made a gift honoring the ICU team who cared for him.

In early April, Bailey, a high-ranking official in the federal government, was rushed to MedStar Georgetown while experiencing a severe headache. His wife, Anna, faced the serious reality of Bailey’s worsening health condition when his headache was revealed to be a cerebral hemorrhage. Eight days later, Bailey underwent a lifesaving 12-hour surgery, followed by three weeks in the ICU.

“Catherine and I are so taken by the special care that Bailey received in the ICU, especially from the nurses,”

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says David. "They functioned as his family members and were the important touch he needed, as we could not be there with him due to the hospital's visitor restrictions because of COVID-19. They kept us connected by setting up Bailey's iPhone to FaceTime with us. They went beyond their medical jobs and were loving caregivers, too, relieving our worries during a scary and uncertain time."

Anna also showed her appreciation by sending Bailey's favorite New Orleans food to the ICU team. Bailey is glad to continue his recovery at home, participating in a MedStar Health rehabilitation program via our telemedicine platform.



A month into the pandemic, David and Catherine Edwards made a generous gift to MedStar Georgetown, honoring the ICU team who cared for their son, Bailey. Photo courtesy of the Edwards Family

The philanthropy team has seen countless stories of gratitude in a time of extraordinary hardship. It is these wonderful donors and their philanthropy—their love of humankind—that inspire all of us to look with hope to the future.

To express your gratitude for our caregivers and healthcare workers, please visit [MedStarGeorgetown.org/SupportNow](https://www.MedStarGeorgetown.org/SupportNow) or call 410-772-6747.

Proton Therapy Eliminates Patient's Liver Cancer

BY JENNIFER DAVIS

Carol Marks didn't think much about the fact that she was losing weight, until routine lab work at her annual physical showed some abnormalities. Her doctor sent her for a CT scan, and it became immediately clear something was wrong.

"The results were upsetting," the 67-year-old says.

Carol was diagnosed at MedStar Georgetown with bile duct cancer and received a number of treatments over the years. Unfortunately, the tumor returned and appeared to be growing in a way that could have a serious and life-threatening impact on her body.

Carol admits she was feeling pretty low at that point, considering all the treatments she had been through. She began to feel more optimistic when she was told that she had a new radiation option for that tumor—an advanced and precise form of radiation treatment called proton therapy. MedStar Georgetown is the first and most experienced hospital in the Washington, D.C., region to offer proton therapy.

More precise than traditional radiation treatments, proton therapy targets tumors and molds to their exact size and shape. The radiation beams hit the tumor and stop without exiting the other side of the body. The pinpoint accuracy of proton therapy reduces damage to surrounding healthy tissue and reduces patient exposure to radiation by up to 50% compared to other forms of radiation treatment. This treatment offers more highly curative doses of radiation with less harm to the patient.

"Having this treatment as an option is just wonderful," Carol says. "There was no surgery, and receiving it was painless. It didn't hurt at all."



Carol Marks, 67 (center, with her daughters), was treated with proton therapy at MedStar Georgetown. Photo courtesy of Carol Marks

Carol's doctor, Keith Unger, MD, a radiation oncologist and director of the Gastrointestinal Cancer Service at MedStar Georgetown, says proton therapy works well for a variety of cancers and is an especially helpful treatment option for liver and bile duct cancers like Carol's.

"The liver is very sensitive to the effects of radiation therapy, so it is critical that we are careful to spare as much of the liver as possible when treating those tumors," Dr. Unger explains. "Proton therapy is an ideal option for many liver tumors because it allows us to increase the dose of radiation therapy to be more effective and improve outcomes."

One year later, Carol's scans are still clear. She no longer has jaundice or any other negative side effects, and her strength has returned.

Carol and her husband of 34 years can now gratefully enjoy life together.

"Proton therapy really helped me, and I'm grateful to Dr. Unger," Carol says with a smile. "I'm feeling really good, and I'm living."

If you or someone you love has cancer, visit us at [MedStarGeorgetown.org/AdvancedProton](https://www.MedStarGeorgetown.org/AdvancedProton) or call 202-444-4639.

COVID-19 Preparedness: We All Have a Role

BY BRENDAN FURLONG, MD, CHIEF OF SERVICE, EMERGENCY DEPARTMENT, MEDSTAR GEORGETOWN UNIVERSITY HOSPITAL

All of us have a role in being prepared for emergencies.

These emergencies can come in all forms, from severe weather to disasters, terrorism, and now, pandemics. At MedStar Georgetown University Hospital, we have an important role in making sure health-related emergencies are managed well to ensure safe and immediate care for our patients.

It is true that the thought of planning during a major pandemic often stops people in their tracks, and thinking about disasters can become overwhelming. There are many ways to care for your family's physical and mental health during stressful times. Here are some simple steps to help you and your family manage life during the pandemic:



Discussing the pandemic and being well-prepared can ensure your family is ready to cope with the challenges you face together.

By participating in training, simulations, and other exercises regularly, and staying grounded amid challenges we have faced, including SARS, MERS, anthrax, and 9/11, our clinical teams are able to better anticipate needs and care for our community in any emergency situation. This current pandemic is no exception. Remaining nimble, being part of an extremely strong and organized healthcare system like MedStar Health, and making adjustments as things were progressing with the global rise of COVID-19 helped us manage our resources to meet community needs.

Our neighbors and those of us who live in the D.C. region have been playing important roles in preparing for emergency situations for themselves; their loved ones, coworkers, and neighbors; and our university community.

- **Develop a family meeting plan:** Assuming that direct communication is not possible (or is sporadic at best), develop a plan in case communication channels break down. Create both an emergency contact list and a list of local support organizations for your family members.
- **Take proper precautions with shared spaces:**
 - o Keep your distance and stay at least six feet from others outside your home.
 - o Do not share dishes, drinking glasses, cups, or eating utensils with others.
 - o Continue to clean and disinfect all commonly shared surfaces and sinks to prevent spread of the virus.
 - o Make sure everyone washes their hands frequently.

- **Maintain a healthy body and mind:**

- o During stressful times, offer a little extra kindness to those around you.
- o Make allowances when your family members make mistakes that might be caused by increased anxiety.
- o Ensure your family is getting adequate sleep, which can improve everyone's resilience and mental health.
- o Eat well and take time for physical activity to help keep you and your family stronger and more upbeat through the pandemic.



Brendan Furlong, MD

- **Be informed:** Stay current with COVID-19 updates from public health officials and the materials offered on our website (listed below) to understand what preparations are in place in our region and ways you can prepare your family.

- **Care for others:** Try hard to think what you can do for others in the spirit of *cura personalis*—care of the whole person. Helping others can be fulfilling to you and contribute to your well-being.

There are many additional advanced planning resources available for emergency preparedness and instruction during the crisis through your state department of health. By adopting a caring philosophy of preparedness and understanding the importance of being informed, all of us can be ready to cope with the challenges we face together.

** This information was current at the time of printing.*

Visit [MedStarHealth.org/Coronavirus](https://www.medstarhealth.org/coronavirus) for the latest information on COVID-19.

IBD Patient on the Mend Without Surgery BY JENNIFER DAVIS

When a team of gastrointestinal experts helps avert surgery, the relief is palpable.

Ashlee Payton was only 21 years old when she suddenly experienced terrible stomach pains while on antibiotics for a tooth infection. She had never experienced severe gastrointestinal (GI) problems before, and she even saw blood in her stool.

“Something clearly wasn’t right—beyond my tooth,” the Southern Maryland resident says.

A colonoscopy revealed mild ulcerative colitis, and she was treated with low-dose oral anti-inflammatory medications.

“It was very frustrating and scary. I had to use the bathroom a lot,” Ashlee says. “I was uncomfortable, and I just wanted answers.”

I AM SO GRATEFUL THE TEAM AT MEDSTAR GEORGETOWN TOOK ANOTHER LOOK AND FOUND A WAY TO HELP ME LIVE A NORMAL LIFE AGAIN. I FEEL VERY LUCKY.

ASHLEE PAYTON

Her symptoms continued on and off for several months, so her doctor decided to do another colonoscopy. While waiting two weeks for the results, Ashlee’s colitis went from mild to severe. She developed fevers, and her stomach pain intensified, making it difficult for her to eat and sleep. Walking was also challenging, as it made her dizzy.

Her family rushed her to a local ER, where doctors discovered she had lost so much blood that she needed two transfusions. Another colonoscopy led to a diagnosis of inflammatory bowel disease (IBD), which causes inflammation of the digestive tract.

Ashlee’s severe case prompted her local doctors to transfer her to MedStar Georgetown University Hospital, where she met Mark C. Mattar, MD, director of the Inflammatory Bowel Disease (IBD) Center. His team immediately started discussing treatment options with her family, and they opted for a high-dose, biologic infusion to help reduce inflammation in her digestive tract.

“While one dose is generally enough to control the inflammation, Ashlee’s symptoms were so advanced that she required a second dose while still in the hospital,” says Dr. Mattar.

He gathered his team of IBD experts, including Mohammed Bayasi, MD, colorectal surgeon, and Michele Barnhill, MD, GI fellow, for Ashlee’s care. With her condition still not responding to aggressive medical management, the IBD team agreed to schedule Ashlee for surgery to remove her colon and replace it—first with a temporary ostomy bag and then a permanent internal ileo-anal pouch, or J-pouch, to allow her to have somewhat normal bowel movements again.

The day before her scheduled surgery, Ashlee had pre-surgical blood work completed, and something happened that surprised everyone: her blood work came back normal.

“Everyone was shocked,” Ashlee says. “Doctors suddenly put the brakes on everything and said—hold on. We should do another colonoscopy.”

Amazingly, that procedure showed Ashlee’s colon had finally healed. With surgery called off, she felt tremendous relief.

“Surgery is a necessity and can save people’s lives when inflammatory bowel disease is acute, severe, and not responding to medication,”

At 21, Ashlee Payton experienced terrible stomach pains that led to a diagnosis of mild ulcerative colitis. Fortunately, the IBD team at MedStar Georgetown was able to help her manage her condition after three colonoscopies—and without surgery.

Photo by Bret Littlehales

Dr. Mattar says. “But this type of deep pelvic surgery can double the risk for infertility in young patients. We’re very pleased that in Ashlee’s case, this shared decision-making approach and extra colonoscopy saved her colon and, potentially, her fertility.”

Ashlee is now in remission and successfully managing her condition with infusions every eight weeks, which help to avoid further flare-ups and complications from inflammation. The treatment is an immunosuppressant, which weakens the immune system and increases the chances of infection. But, she says, she is doing well. She’s even returned to her job.

“I am so grateful the team at MedStar Georgetown took another look and found a way to help me live a normal life again,” Ashlee says. “I feel very lucky.”

If you suffer from IBD or have other GI symptoms, visit [MedStarGeorgetown.org/GISupport](https://www.MedStarGeorgetown.org/GISupport) or call **202-444-8541** to make an appointment with one of our specialists.



Artificial Disc Replacement Gets Golf Pro Back in Play BY JENNIFER DAVIS

Fifty-year-old Mike Kenny has spent most of his life on a golf course. He started as a caddie when he was 12 and played at least five times a week through college. Then, he became a golf professional.

However, when his back pain became so bad that he couldn't swing a club, it was devastating for this Montgomery County golf director of instruction.

"I did not play for three years because when I would try to swing, I would get this really sharp pain down my left leg, from my hip to my foot," Mike explains. "It was so bad, it turned my leg numb and I would not be able to stand or bear any weight for about 20 minutes until it went away."

Mike tried physical therapy and other treatments, but the pain persisted. Then, through chance encounters, he met two people who referred him to the same doctor. Both of Mike's acquaintances credited Faheem Sandhu, MD, PhD, director of spine

surgery and co-director of the Center for Minimally Invasive Spine Surgery at MedStar Georgetown University Hospital, with resolving their long-standing back problems.

IT IS SO AMAZING GETTING UP EVERY MORNING PAIN-FREE AND PLAYING GOLF WITH NO PAIN.

MIKE KENNY

"The first time I heard his name, I did not think much about it," Mike says. "But then I met another gentleman who told me how amazing Dr. Sandhu is and, at that point, I decided I should go see him."

Dr. Sandhu told Mike he was a good candidate for lumbar disc arthroplasty, or artificial disc replacement. Deciding factors included the fact that Mike had single-level degenerative disc disease, with no other major medical problems and that past conservative treatments had failed him. Degenerative disc disease is a very common condition resulting in the breakdown of disc material in the spine that, in turn, can lead to herniated discs and back or neck pain.

Still, Mike had reservations. "Back surgery was extremely daunting for me. I'd heard bad stories, and a friend of a family member had an issue at another hospital," he says. "But finding out how different Dr. Sandhu's process was made me feel a little more comfortable."

Dr. Sandhu had suggested Mike undergo a replacement procedure

called lumbar arthroplasty using an artificial disc made of cobalt-chromium with a plastic core of polyethylene. He explained the third-generation device is the best on the market and far superior to a fusion, as it preserves motion and helps prevent significant progressive degeneration of segments above and below the impaired disc. This approach decreases the need for secondary surgeries.

The surgery is also minimally invasive, requiring only one small incision in the lower abdomen to access the spine, rather than entry through the back, which involves cutting through muscle and tissue.

"This procedure can be transformative for patients," says Dr. Sandhu. "It restores function and motion and gets rid of the pain generator—the bulging disc that is compressing nerves and causing chronic back pain."

The typical patient spends two to three days in the hospital, is limited to light activities for four to six weeks, and is cleared for more rigorous physical activities after three months, when the replacement disc starts bonding to bone.

That was the case for Mike—who says six weeks of recovery, followed by physical therapy, was worth it. Six months after his surgery, he was pain-free and cleared to return to his dream job.

"It is so amazing getting up every morning pain-free and playing golf with no pain," Mike says. "I can now do everything I used to do. It is life-changing."

To learn more about the range of minimally invasive spine surgeries available, visit [MedStarGeorgetown.org/Lumbar](https://www.MedStarGeorgetown.org/Lumbar) or call 301-856-2323 to schedule an appointment.

Mike Kenny, 50, was thrilled to get back to being a golf pro after a minimally invasive procedure that helped correct his long-standing back problems. The spine surgery team at MedStar Georgetown performed lumbar disc arthroplasty, or artificial disc replacement, and Mike is now pain-free.

Photo by Bret Littlehales



“I Received COVID-19 Convalescent Plasma, and I Want to Help Save Others” *continued from page 1*



Patrick Bright receives a heartfelt send-off from associates, doctors, and nurses at MedStar Georgetown after spending three weeks recovering from COVID-19. Photo by Ernest A. Fischer, MD

Patrick remembers lying in his hospital bed, holding his fist up like a boxer, and telling his family via a Zoom call arranged by the medical staff, “I’m a fighter. I’m not going anywhere.”

After five days on the ventilator, Patrick received the convalescent plasma. This treatment uses an IV to slowly infuse the plasma into the patient’s bloodstream. A week later, he was off the ventilator and his condition improved.

While his doctors can’t yet say definitively that it was the plasma that made the difference because clinical trials are still needed, researchers believe that the antibodies in convalescent plasma can lead to more positive outcomes. Anecdotal evidence suggests that a

patient’s ability to recover is due, in part, to antibodies in blood that can fight viruses. While use of convalescent plasma for COVID-19 was just recently approved by the FDA for clinical trials and expanded clinical use, it has been successfully used to treat diseases such as hepatitis B, influenza, and Ebola.

“When you’re treating a patient facing such a new and serious illness, it truly takes a village of physicians,” says Craig Kessler, MD, a hematologist on Patrick’s treatment team at MedStar Georgetown.

“We do all we can and give every patient the full benefit of our medical knowledge and experience. The convalescent plasma was just one part of the total therapeutic package,” explains Dr. Kessler. “The decision to use it was made by a very skilled team of intensive-care physicians who provided hour-by-hour decisions on how best to care for this patient.”

As he continues the process of recovering at home, Patrick is looking forward to being able to donate his own plasma to help others diagnosed with COVID-19. “Someone saved my life and I want to help save someone else’s life and give them the same opportunity I was given,” Patrick says. His wife, who also had the virus, has already donated her plasma and encourages others who’ve recovered from COVID-19 to do the same.

IT WAS THE BEST CARE ANYONE COULD POSSIBLY GET.

PATRICK BRIGHT

Patrick says he and his family are grateful for the lifesaving care he received at MedStar Georgetown. “The doctors and the nurses were so in tune with me and my family, I want to go back just to give my thanks to them,” he says. “It was the best care anyone could possibly get.”

Recovered from COVID-19? Your plasma could save a life!

If you’ve recovered from COVID-19, you have a unique opportunity to help save the lives of critically ill patients currently battling the disease. You need to have proof you’ve had the virus, a positive lab test, and no symptoms for at least 14 days to donate. Find out more by emailing MGUHDDonatePlasma@medstar.net

We Are Safe and Ready to Serve You *continued from page 1*

- **Physical distancing:** We’ll help you practice physical distancing with floor markers, signage, and reconfigured waiting areas.



MedStar Georgetown is here for you. The health and safety of our patients and community are always our top priorities. Thank you to our community for the outpouring of support you have shown to our front-line healthcare workers. Your

selflessness and generosity are forever a reminder that human goodness is still prevalent.

When you are ready to see us, know that we are prepared to safely offer the same high-quality care you expect from MedStar Georgetown. Get the care you need, now.

Visit [MedStarGeorgetown.org/SafetyVideo](https://www.MedStarGeorgetown.org/SafetyVideo) to learn more about our safety measures.

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Video Visits Offer Easy and Safe Access to Care

We've made it easier for you to get the care you need, all from the comfort of your home, using **MedStar Health Video Visits**.

MedStar Health Video Visits are similar to an in-person office visit, except you see your provider using a tablet, smartphone, or computer (with a camera and microphone) from your home.



MedStar Health Video Visits are scheduled the same way as an in-person appointment, by calling your provider's office. At the time of your appointment, your provider will send a link through email and/or text message. Clicking on that link starts your video visit.

Be sure to check with your health insurance about coverage for video visit services.

Don't delay your care! Visit [MedStarHealth.org/MyVideoVisit](https://www.MedStarHealth.org/MyVideoVisit) for more information.

MedStarGeorgetownMD, published quarterly, shares the latest health news with our community. To start or stop receiving this newsletter, please call **202-444-6815** or email torneyd@gunet.georgetown.edu.

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The photos in this newsletter were selected prior to the COVID-19 pandemic. All patients and providers are expected to follow current MedStar Health guidelines for safety, including proper masking and physical distancing.

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