

# HealthLINK

SUMMER 2023

YOUR CONNECTION TO HEALTH & WELLNESS



## THE HEART OF THE MATTER

VALLEY HEALTH'S STRUCTURAL HEART PROGRAM PROVIDES LEADING-EDGE CARE FOR PATIENTS WITH MITRAL VALVE CONDITIONS

### INSIDE:

Lifesaving screenings for colorectal cancer / Advanced care for endocrine patients / A helping hand after a hospital stay

 **ValleyHealth**

*Healthier, together.*

# WELCOME

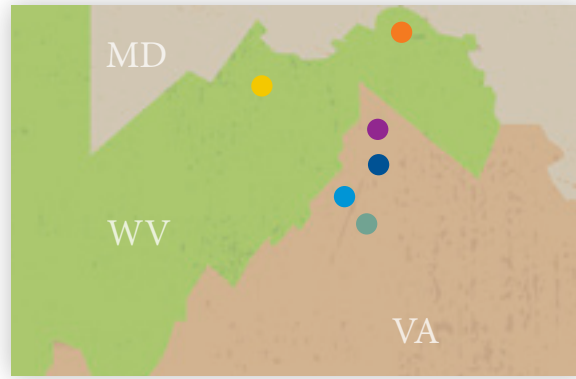
## YOUR PARTNER IN HEALTH

At Valley Health, we strive to make every experience patient-centered, compassionate and comprehensive. Our care teams are laser-focused on improving our technology, patient outcomes and overall patient satisfaction.

In this issue, you'll read about how our Structural Heart team is improving survival and quality of life for people with disease in the valves and walls of their hearts. Our Valley Health neurosurgeons are using an optical imaging agent to improve visualization during brain tumor surgery—making the result that much more precise and beneficial. In addition, our Transition Clinic helps individuals after they leave the hospital, whether finding them a primary care physician or connecting them with community resources. And our fellowship-trained endocrine surgeon can resolve conditions of the parathyroid, thyroid and adrenal glands—all right here in Winchester.

We hope this issue of *HealthLINK* offers new insight on the care available through your local health system. We would like to be your trusted health resource, whether you seek care in an outpatient location or you require hospitalization. We are confident our providers will strive to make the experience a positive one.

*On the cover: The Structural Heart Program team.*



Valley Health is a not-for-profit system of hospitals, services and providers. For more information about the many ways we serve the health and wellness needs of the community, visit [valleyhealthlink.com/community](http://valleyhealthlink.com/community).

### Valley Health System includes:

- Winchester Medical Center (Winchester, VA)
- Hampshire Memorial Hospital (Romney, WV)
- Page Memorial Hospital (Luray, VA)
- Shenandoah Memorial Hospital (Woodstock, VA)
- War Memorial Hospital (Berkeley Springs, WV)
- Warren Memorial Hospital (Front Royal, VA)

### Additional locations and services:

- Employer Health
- Outreach Lab Services
- Rehabilitation Services (Inpatient and Outpatient)
- Urgent Care and Urgent Care Express
- Valley Health Home Health | West Virginia
- Valley Health Medical Group
- Valley Health | Spring Mills
- Valley Health Surgery Center
- Valley Medical Transport
- Valley Pharmacy
- Wellness & Fitness Centers

For more information, visit [valleyhealthlink.com/locations](http://valleyhealthlink.com/locations).



### Valley Health System

Serving Our Community by Improving Health

### HealthLINK

The magazine of Valley Health System  
Serving the northern Shenandoah Valley and surrounding areas in Virginia, West Virginia and Maryland

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The information contained in *HealthLINK* is not a substitute for professional medical care or counsel. If you have medical concerns, consult a medical professional. A list of physicians, specialists and other care providers is found at [valleyhealthlink.com/physicians](http://valleyhealthlink.com/physicians).

*HealthLINK* magazine is published three times a year. Its purpose is to provide health and wellness information to the community and to connect area residents with healthcare experts within Valley Health System.

Contact [marketingmail@valleyhealthlink.com](mailto:marketingmail@valleyhealthlink.com) or 540-536-5325 to be added to our mailing list; view *HealthLINK* online at [valleyhealthlink.com/news](http://valleyhealthlink.com/news).

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## VALLEY HEALTH'S WEBSITE WELCOMES YOU WITH NEW LOOK AND FUNCTIONALITY

This spring, you may have noticed that the Valley Health website, valleyhealthlink.com, welcomed you with a refreshed look. These changes are meant to make your visit easier, quicker and more

intuitive. Key features of the redesigned site include:

- Faster page loading speed
- Updated site navigation
- A dedicated section on Valley Health careers
- Mobile responsiveness for on-the-go access
- And intuitive connectedness between services, locations, providers, and related news—so you and your family can get the care you need, when you need it most!

## COMMUNITY LEADERS GET BEHIND-THE-SCENES GLIMPSE INTO HEALTH CARE



Valley Health Connect program participants learn about patient care.

In April, Valley Health Foundations celebrated the first graduates of the inaugural Valley Health Connect program, an opportunity for community leaders to gain a deeper understanding of changes in health care and their impact on individuals, families and the workplace. The program began in August 2022 and included seven classes. Through this ongoing program, members:

- Participate in discussions surrounding the ongoing needs of the region and Valley Health's role in making our community healthier, together.
- Learn about the latest medical advancements available at Valley Health by participating in healthcare simulations, talking with doctors and visiting hospitals.
- Network with other community leaders from across our region.

Topics include Healthcare Finance and Population Health; Advanced Healthcare in Our Community: Cancer Center; and Community Hospitals, Technology and Access to Care.



## SMH A TOP CRITICAL ACCESS HOSPITAL FOR SECOND YEAR

The Chartis Group, a healthcare consulting firm based in Chicago, has named its 100 best-performing critical access hospitals for 2023, and Shenandoah Memorial Hospital (SMH) once again makes the list.

This annual recognition program, which is based on the results of the Chartis Rural Hospital Performance INDEX™, recognizes outstanding performance among the nation's rural hospitals.

Top hospitals are rated using publicly available data sets scored across eight performance pillars including quality, market share and patient perspectives.

According to the firm's website: "Amidst uncertainty, transition and strain, these top performers are excelling in managing risk, achieving higher quality, securing better outcomes, increasing patient satisfaction, and operating at a lower cost than their peers. These groups serve as a benchmark for other rural facilities as they strive to achieve similar results and provide a blueprint for successfully navigating the uncertainty of the new healthcare."

SMH is one of only two critical access hospitals in Virginia that made the list.

## ORTHO TEAM CELEBRATES 100TH ROBOT-ASSISTED KNEE REPLACEMENT

This winter, orthopedic surgeon Mesfin Shibeshi, DO, and the Warren Memorial Hospital (WMH) surgical team celebrated a major milestone: the 100th knee replacement procedure performed at WMH with the precise assistance of a surgical robot.

"This milestone—completing our first 100 cases—represents the work of many people who have done such an outstanding job," Dr. Shibeshi says. "The robot has been an important addition to our orthopedic surgery program. The individualized 3D preplanning is exceptional, and the robotic arm is a very stable, precise extension of the surgeon's hands. I'm excited we are able to provide a great service to the community and am confident we'll continue to grow."

Dr. Shibeshi and team completed the first robotic case at WMH on Valentine's Day 2022.

"This surgical advance helps patients get back on their feet, faster," says WMH Administrator Jennifer Coello. "Our program is attracting residents from a wider region eager for relief from knee pain and immobility. As our Joint Commission 'Gold Seal' certification for total knee and hip replacement attests, we offer safe, high-quality comprehensive care, from pre-op through surgery and rehabilitation."



Mesfin Shibeshi, DO (front row, third from left), celebrates with members of the Warren Memorial Hospital (WMH) surgical team.

## SHEDDING LIGHT ON BRAIN TUMORS

### A revolutionary imaging agent helps improve surgical outcomes

Valley Health neurosurgeons are deploying a first-of-its-kind imaging agent that lights up high-grade gliomas, making it possible to remove significantly more of this common and life-threatening brain cancer for better outcomes.

“We give Gleolan as an oral medication a few hours before surgery,” explains Joshua Prickett, DO, FACOS, of Virginia Brain & Spine Center | Valley Health. “It makes the cancer cells glow bright pink. This allows a higher chance of removing all of the tumor, which carries with it better outcomes.”

Gliomas begin in the cells that nourish, insulate and support the brain. Fast-growing high-grade gliomas, including glioblastomas, are the most common malignant brain tumors in adults, according to the American Cancer Society. After a glioma is mapped with brain imaging, surgery is usually the first step in treatment. But under normal operating room lights, this cancer looks identical to normal brain tissue even when magnified by an operating microscope, Dr. Prickett says. It also sends tiny extensions of tumor deep into surrounding healthy tissue. Before Gleolan, this made the surgeon’s goal of removing a majority of the tumor especially challenging.

With Gleolan, “the difference is night and day,” Dr. Prickett says. Lit with a blue-light headlamp equipped with a special filter during surgery, the cancer shines pinkish-red while normal brain looks blue. “This allows our team to better differentiate tumor from surrounding brain tissue, which enables us to better preserve normal tissues while removing more of the tumor. This can improve the length of survival. One study demonstrated twice the rate of survival at six months without cancer progression with use of imaging agents for tumor removal.”

“[Gleolan] makes the cancer cells glow bright pink. This allows a higher chance of removing all of the tumor, which carries with it better outcomes.”

—JOSHUA PRICKETT, DO, FACOS



Gleolan, the only FDA-approved product for illuminating glioma, is a naturally occurring substance in plants and animals called 5-aminolevulinic acid. Because it temporarily increases photosensitivity, patients who receive it must avoid direct sunlight for the next 48 hours, Dr. Prickett says. Studied in over 100,000 people, it has minimal risk of side effects.

A board-certified neurosurgeon with expertise in neuro-oncology, Dr. Prickett first used Gleolan during his fellowship at Swedish Neuroscience Institute in Seattle. “When I came to Winchester, I helped organize training for its safe use with the manufacturer, the hospital staff and our pharmacists,” he says. “We are one of only a few facilities in the region to use this technology. Our team has used Gleolan on several patients thus far with good results and a better resection than we could have achieved without these tools.”

Visit [valleyhealthlink.com/neuro](https://valleyhealthlink.com/neuro) to learn more.

# CHANGE LIVES. STARTING WITH YOURS.

→ AT VALLEY HEALTH, WE PROVIDE OUR EMPLOYEES WITH COMPETITIVE COMPENSATION, FINANCIAL SECURITY AND CAREER GROWTH OPPORTUNITIES. WE ARE ALWAYS ON THE LOOKOUT FOR DEDICATED INDIVIDUALS WHO WILL COMMIT TO OUR MISSION OF SERVING THE COMMUNITY BY IMPROVING HEALTH. WHETHER YOU'RE LOOKING FOR A CLINICAL PROFESSION OR YOU'RE INTERESTED IN A NONCLINICAL PATHWAY, VALLEY HEALTH INVITES YOU TO JOIN OUR TEAM.

**\$0**

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HEALTHCARE PLAN

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**\$80 MILLION**  
**INVESTED IN**  
**PAY INCREASES**  
**SINCE 2020**



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→ To learn more, visit [valleyhealthlink.com/careers](https://valleyhealthlink.com/careers).

## A HELPING HAND AFTER THE HOSPITAL

Following a hospital stay or ER visit, the Transition Clinic helps guide patients on the path to better health

When someone lands in the hospital or ER, they need quality care—even after returning home. Without follow-up care, patients are more likely to find themselves back in the hospital. But what if they don't have a regular doctor? Or they have limited resources? Valley Health's Transition Clinic can help. Donna Munsey, DO, the clinic's medical director, explains how.

**Q:** HOW DO PATIENTS COME TO BE AT THE TRANSITION CLINIC?

**A:** Most are referred by the hospital while they're an inpatient, mainly because they don't have an established relationship with an outside primary care provider, or PCP. We also work closely with the Emergency Room. If patients don't have a doctor, they often turn to Urgent Care or the ER for their healthcare needs. We're glad they're seeking help, but most of those situations could be navigated through a primary care provider or internal medicine provider.

**Q:** CAN YOU EXPLAIN HOW THE TRANSITION TEAM WORKS?

**A:** The goal of the Transition Clinic is to ensure the coordination and continuity of health care as the patient transfers between different locations or levels of care. We assist the patient in all avenues of care. First and foremost, we help them find a primary care provider. We get community referrals from

people who are moving to the area and need help getting a PCP. If the patient has complex medical and social needs, they are referred to the Complex Care Coordinator in our clinic who can help them navigate the healthcare system. Counseling services are also available. Sometimes patients need specialists or help getting insurance or Medicaid. We take care of homeless patients, so we work directly with the Winchester Rescue Mission and the Winchester Area Temporary Transitional Shelter [WATTS].

**Q:** WHAT OTHER SERVICES DOES THE TRANSITION CLINIC PROVIDE?

**A:** We work directly with the START clinic [Surgical, Testing, Assessment, Registration Team], which refers patients without a PCP to our team so we can help address medical needs such as hypertension and diabetes, as well as do medical clearance for upcoming surgery if necessary. Some patients visit the ER with concerns of finding cancer. They don't have a PCP but need help getting a diagnosis quickly, so we work with the oncology team at the ER to make that happen. The Behavioral Health unit at the hospital discharges a lot of patients for follow-up with us. Our goal is to get those patients the resources they need for mental health.

**Q:** WHO ELSE CAN BENEFIT FROM THE TRANSITION CLINIC?

**A:** Really anybody. We have a clinic within a clinic here for patients on IV antibiotic therapy. Our team nurse works closely with the University of Pittsburgh Medical Center Infectious Disease attending physicians, who see those patients on follow-up via telehealth. We don't want any patient to feel like they're out there by themselves trying to navigate the healthcare system.

For more information, call [540-536-0518](tel:540-536-0518).



Donna Munsey, DO (front row, left); Susan Copsetta, NP (front row, right); and the Valley Health Transition Clinic team.

# LEADING-EDGE



## → VALLEY HEALTH STRUCTURAL HEART PROGRAM REPAIRS AND REPLACES MITRAL VALVES AND MORE

A leaky mitral valve left Rob Koenig, 86, with extreme fatigue, no appetite and a dry cough. “I would lie on the couch most of the day, feeling just terrible,” he says. After heart surgeons and interventional cardiologists at Valley Health’s Advanced Valve Center fixed his valve with MitraClip™ in December, Koenig says “all those nasty symptoms are gone. I feel like myself again.”

MitraClip is a tiny metal and polyester device implanted during a minimally invasive procedure where it is threaded through blood vessels to the heart. There’s no open-heart surgery and no need to stop the heart. It’s one of many advances in heart valve repair and replacement

now available through Valley Health’s Structural Heart Program, enabling people with valve problems and other structural heart conditions to live longer, healthier lives and get back to activities they love.

“Five or 10 years ago, a large percentage of people with structural heart problems were considered too sick for therapy,” says Ernesto Jimenez, MD, a cardiothoracic surgeon and member of the advanced valve program team at Winchester Medical Center’s Heart & Vascular Center. “Now we have effective, proven therapies right here. Patients see our



# HEART CARE



Members of Valley Health's Structural Heart Program provide patients with state-of-the-art care.

“We have effective, proven therapies right here. Patients see our excellent outcomes and the passion we have for taking care of them as our own family.” —ERNESTO JIMENEZ, MD

excellent outcomes and the passion we have for taking care of them as our own family.”

The number of people choosing Valley Health for valve and other structural heart procedures increased by 30 percent in 2022 alone—a sign that more people and their doctors are aware that new treatment options are available here, close to home, Dr. Jimenez says.

Here's what to know about structural heart care at Valley Health, including new options for repairing and replacing damaged mitral valves, which is a common problem among patients.

## HEART VALVES AND STRUCTURAL HEART DISEASE

Unlike heart disease caused by blockages inside blood vessels, structural heart disease “focuses on the actual anatomy of the heart—the muscle and other tissue that allow it to work efficiently as a pump,” Dr. Jimenez explains. This includes the walls of the heart's four chambers, along with the heart's four valves, which open and close like doors during heartbeats so blood flows in the right direction.

Many things can go wrong with the heart's structure. Aging, infections and other health conditions such as diabetes can make a heart valve floppy and leaky, or stiff and thick, which causes it to not open completely. Also, a previous heart valve replacement may stop functioning well. Meanwhile, heart wall problems include holes such as atrial septal defects, a birth defect, and patent foramen ovale, when part of the heart wall doesn't close normally early in life.

These conditions disrupt blood flow to the rest of the body and can cause overwhelming tiredness that makes working, taking care of a home, enjoying family and friends, and doing simple things like taking a walk or washing the dishes difficult or even impossible. Valve disease can also contribute to other serious conditions including heart failure, stroke, blood clots, and off-beat

## CARDIAC CARE

heart rhythms—and it can shorten life. A hole in the heart may cause similar serious problems.

At Valley Health, advanced care for structural heart problems includes:

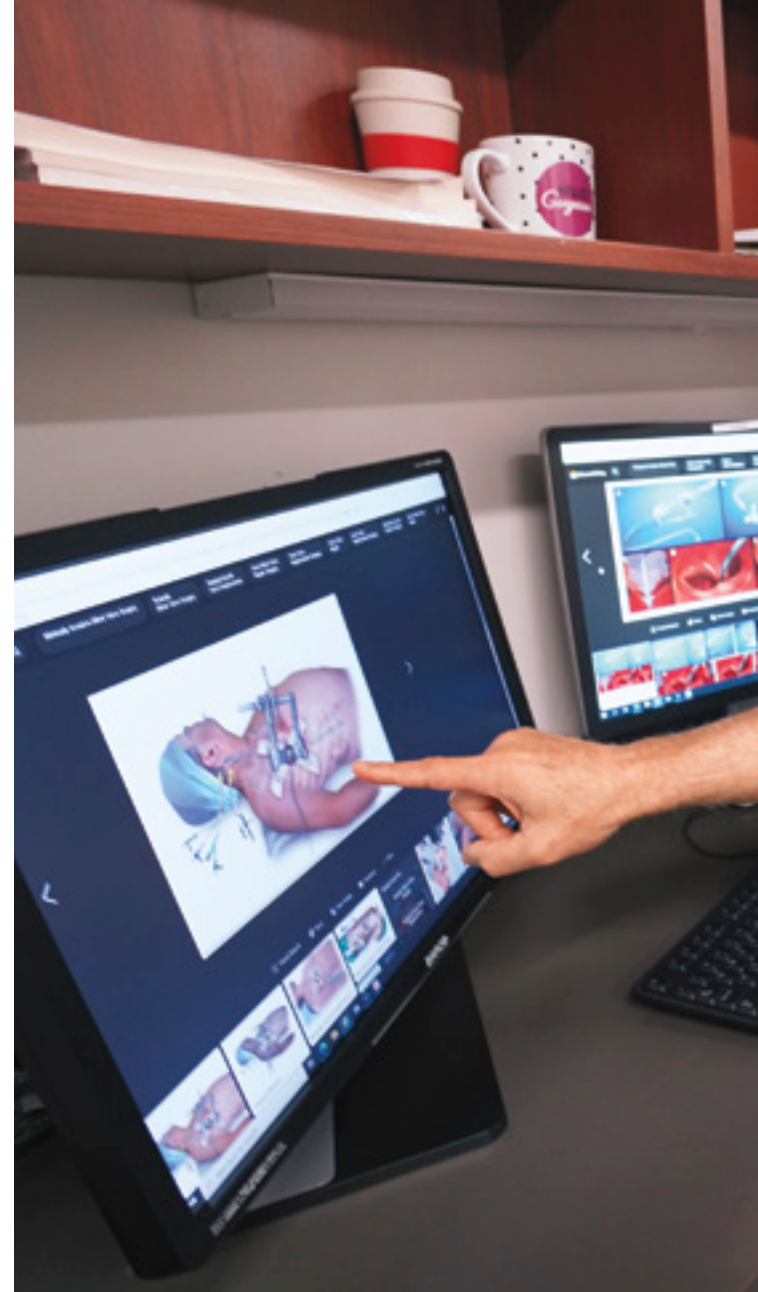
- Innovative minimally invasive heart valve replacement therapies—including transcatheter aortic valve replacement (TAVR) for aortic valve replacement and valve-in-valve transcatheter mitral valve repair (TMVR) when a previous mitral valve replacement is failing
- Minimally invasive mitral valve repair with MitraClip
- Repair of the heart's tricuspid valve
- Conventional surgical valve repair or replacement
- Medical management of heart valve disease
- Cutting-edge investigational procedures and research protocols
- Sophisticated, noninvasive imaging of the heart valves

“We have the infrastructure and expertise to deal with most if not all structural heart disease problems,” says Aref Bin Abdulhak, MD, a board-certified interventional cardiologist and structural heart specialist at Valley Health. “In the past, I don’t think anyone would imagine that we could replace heart valves, plug holes or close heart walls without open-heart surgery. Now it is an option for many people. This is a new and evolving field in cardiology that’s very exciting.”

### INSIDE VALLEY HEALTH’S STRUCTURAL HEART PROGRAM

Most people with a structural heart issue are referred to Valley Health’s program by their cardiologist or primary care physician, Dr. Jimenez says. Rob Koenig arrived for his first appointment last fall after his cardiologist—whom he sees regularly for care of other heart issues including atrial fibrillation—suggested a visit to find out more about potential treatments for his leaky mitral valve. “My cardiologist told me my

“We have the infrastructure and expertise to deal with most if not all structural heart disease problems. ... This is a new and evolving field in cardiology that’s very exciting.” —AREF BIN ABDULHAK, MD



options were open-heart surgery that comes with a long recovery time or a MitraClip operation that’s minimally invasive, where you can go home the next day if everything’s OK.”

Koenig met with members of the Structural Heart Program team. Heart imaging and other tests confirmed he was a candidate for MitraClip. “Our multidisciplinary group of cardiologists, surgeons, anesthesiologists, physician assistants, the ICU team, and our team members in our hybrid lab work together to improve outcomes in people with structural heart disease,” Dr. Jimenez says. “Team members meet every week to discuss every single patient in our clinic. We discuss their condition and test results and give an assessment of best treatment options. These are always discussed with the patient, who plays an



Cardiothoracic surgeon Ernesto Jimenez, MD (seated), and interventional cardiologist Aref Bin Abdulhak, MD, are experts in structural heart conditions.

important role in our shared decision-making about choosing the final treatment.”

MitraClip is FDA approved for people with significant mitral valve damage who would face high risks with conventional valve surgery. Koenig’s MitraClip procedure took place in Winchester Medical Center’s hybrid room, which combines cardiac catheterization and surgical capabilities and is equipped with advanced imaging and support technology to perform procedures such as TAVR and TMVR. Dr. Bin Abdulhak implanted Koenig’s clip, which helps the valve close properly, by maneuvering it through blood vessels from Koenig’s groin to his heart. “The clip holds the leaflets of the valve together,” Dr. Bin Abdulhak explains. “It comes in different sizes to fit different people’s mitral valve. The procedure is guided by X-rays and by a transesophageal echocardiogram that we watch in real time. Most people can go home the next day and are back to regular activities quickly.”

The day after Koenig’s procedure, he was up and walking the medical center hallways. He went home shortly after that—and recently helped spread a delivery of mulch in front of his Moorefield, West Virginia, home. “I go to cardiac rehab three times a week,” says the retired U.S. Army computer center manager. “And I swim laps at a local pool. I couldn’t have done that last fall.”

#### REPLACING A WORN-OUT PROSTHETIC VALVE

Her mitral valve damaged by childhood rheumatic fever, Judy Eye received a replacement valve about nine years ago—after living for years with fatigue and breathing problems that made it challenging to work full time in a food processing plant and raise two children with her husband, Ronald. But the replacement valve eventually failed, leaving Eye, 76, of Old Fields, West Virginia, more tired than ever. “My husband had to cook dinner, but I’d still do the dishes sitting on a stool,” she says.

In January of this year, Eye received a new mitral valve at Valley Health’s Heart & Vascular Center. It was installed through a minimally invasive procedure, guided through her femoral vein to her heart from a small incision at her groin. The new valve is implanted in the place of the old valve, which is moved to the side. Until recently, valve replacements like this could be done only with open-heart surgery, Dr. Bin Abdulhak says.

“Afterward, I could breathe without feeling all that pressure in my chest from fluid backing up,” Eye says. “I walk around easily. And on the telephone my friends say how good I sound—I’m not breathing heavy and coughing anymore.”

A few weeks after the procedure, Eye was able to go to her great-granddaughter Hartley’s second birthday party. “I couldn’t have done that before the new valve,” she says. The birthday decorations included plenty of hearts—a tribute to Hartley’s name, but a quiet reminder of her great-grandmother’s new valve and new lease on life.

“That brings us the most joy,” Dr. Jimenez says. “Our patients tell us that they’re enjoying a marked improvement in their quality of life. They’re not homebound any longer, unable to walk. They’re living their lives.”

To learn more, visit [valleyhealthlink.com/heart](https://valleyhealthlink.com/heart).

# SPOTLIGHT

## LIFESAVING SCREENINGS FOR COLORECTAL CANCER

Early detection can make all the difference for patients with this all-too-common cancer

Colorectal cancer—America’s second-leading cause of cancer deaths—isn’t just a concern for older adults. Rates are rising quickly in people younger than 55, says Grace Shih, MD, a board-certified gastroenterologist with Valley Health and Winchester Gastroenterology Associates. Your best move: Start colorectal cancer screening at age 45 and talk with your doctor about earlier checks if you’re at high risk.

“The earlier we catch colorectal cancer, the better,” Dr. Shih says. “The five-year survival rate for stage 1 colorectal cancer is over 90 percent, but it drops to 70 percent or lower for more advanced stages. We can catch this cancer earlier with a colonoscopy, by finding and removing growths called polyps before they make a malignant transformation into cancer.”

### WHEN TO START SCREENING

In 2021, the U.S. Preventive Services Task Force lowered the recommended starting age for screening to 45 for all Americans at average risk for colorectal cancer. (Before that, it was age 50 for most.) “A lot of people don’t know the screening age has changed,” says Sophia Villanueva, MD, a fellowship-trained colorectal surgeon at Valley Health Surgical Oncology. “Many think this is a disease of the elderly, but right now one in five people diagnosed with colorectal cancer are between 20 and 54.”

If you have a family history of this cancer, your doctor may suggest screening at whichever comes first: age 40, or 10 years before the age when a first-degree relative, such as parent or sibling, was diagnosed with colorectal cancer, Dr. Shih says. Adults age 76 and older should discuss their need for screening with their doctor.



Colorectal surgeon  
Sophia Villanueva, MD.

Don't wait for symptoms before getting tested. "Colorectal cancer usually has no symptoms in its early stages," Dr. Shih notes. "Everyone should be screened." However, if you do notice changes in your bowel habits, blood in or on your stool, abdominal aches and pains, or unexplained weight loss, see your doctor. "The problem with colorectal cancer is that the symptoms are very vague and can mimic other conditions," Dr. Villanueva says. "Some people assume that their bleeding is from hemorrhoids or that their bloating and constipation are from irritable bowel syndrome and do not get checked. This is a mistake. It is important to tell your doctor about your symptoms and ask about a colorectal cancer screening."

### GOOD NEWS ABOUT COLORECTAL CANCER CHECKS

Colorectal screening is easier than ever, with more options and simpler bowel prep. What to know:

- **Colonoscopy is the gold-standard screening test.** During this procedure, a doctor carefully examines your colon with a light and camera while you're under mild sedation. "Colonoscopy is the only screening check that visualizes the colon," Dr. Shih says. "And it's the only screening that can detect and remove precancerous polyps during the procedure." If your colonoscopy finds no signs of cancer or precancers, you'll most often need your next one in 10 years. **What to know:** "Bowel preparation for colonoscopy doesn't require drinking as much liquid as in the past," Dr. Shih explains. "There's even a pill form if you don't like the taste of prep fluids. You'll still have to drink water with it so that it's effective, of course."
- **Stool tests are a noninvasive alternative.** If you can't or are unwilling to have a colonoscopy, several stool tests—which you take every one to three years,



Grace Shih, MD



Dr. Villanueva consults with a patient.

depending on the type—are options recommended by the U.S. Preventive Services Task Force. These include the multi-target stool DNA test (mt-sDNA) Cologuard, the guaiac-based fecal occult blood test (gFOBT) and the highly sensitive fecal immunochemical test (FIT). **What to know:** "People should understand that if you have a positive result on a fecal test, you will still need a colonoscopy," Dr. Shih notes.

### PREVENTING AND TREATING COLORECTAL CANCER

If you are diagnosed with colorectal cancer, treatment options at Valley Health include minimally invasive robotic surgery, possibly in addition to chemotherapy, and radiation for some advanced colon and rectal cancer. "We perform the surgery through small incisions resulting in less pain and blood loss, resulting in a faster recovery," Dr. Villanueva says. "Patients go home from the hospital two to three days after surgery and return to normal activities in as little as two to four weeks. Our patients have very good outcomes. Winchester Medical Center has been recognized in 2022-2023 as a high-performing hospital in colon cancer surgery by *U.S. News & World Report*. This reflects significantly better than the national average for patient outcomes. For rectal cancer, Valley Health Winchester Medical Center is one of the few centers in the U.S. that has a rectal cancer program accredited by the American College of Surgeons. This means we have achieved high standards set by ACS for the comprehensive multi-disciplinary care of rectal cancer."

Meanwhile, you can lower your risk for colorectal cancer with a healthy lifestyle. "Getting regular exercise, not smoking, and eating less animal protein and less processed food all help," Dr. Shih says. Combined with screening, it's a powerful package for preventing a common cancer. "I tell my patients, getting screened for cancer is not only a gift to yourself," she says, "it's also a gift to your family."

Visit [valleyhealthlink.com/colorectalcancer](https://valleyhealthlink.com/colorectalcancer) to learn more.

### ENDOCRINE SURGERY, CLOSE TO HOME

USING THE LATEST SURGICAL TECHNIQUES, VICTORIA LYNESS, MD, OFFERS VALLEY HEALTH'S ENDOCRINE PATIENTS STATE-OF-THE-ART CARE



Victoria Lyness, MD, Valley Health's fellowship-trained endocrine surgeon.

Inside our body are glands that make up our endocrine system. These glands might be small, but they play a large role in our overall health.

"If there are changes within a gland or in the level of hormone produced by that gland, there can be disruptions in the proper function of our cardiovascular, musculoskeletal, gastrointestinal, and nervous systems," says Victoria Lyness, MD, Valley Health's fellowship-trained endocrine surgeon.

Changes in function of the thyroid, parathyroid or adrenal glands can result in weight changes, increased heart rate and high blood pressure, tiredness, and mood and sleep changes.

To piece together this puzzle of symptoms, a primary care provider might start with checking routine lab tests. "Discussing your symptoms and concerns with a primary care provider is always a

great first step," Dr. Lyness says. "A good primary care provider should be able to initiate testing and then refer you to a specialist as needed in order to interpret and expand upon your results. This specialist will then guide you through additional testing and treatment."

While medication is sometimes the first line of treatment, in some cases surgery is necessary to remove part or all of a gland, especially when there is abnormal anatomy or concern for cancer.

Most endocrine surgeries are performed in the outpatient setting. Although all surgeries are conducted under general anesthesia and have associated risks, many patients go home the same day and recover within one to two weeks. "Most surgery for thyroid and parathyroid disease only requires a small incision at the front of the neck," Dr. Lyness explains. "In surgery for the adrenal gland, I routinely perform a robot-assisted laparoscopic approach. This spares patients from larger incisions associated with 'open surgery' and can result in less pain and bruising in early recovery."

After surgery, Dr. Lyness performs surveillance in cases of cancer and schedules additional testing and treatment as needed. With a robust practice in Winchester, she encourages patients to consider local care before traveling for surgery. "Patients sometimes feel they have to go to Baltimore, Charlottesville or Washington, D.C., for high-quality specialty care, when in reality we are prepared to take care of them here in Winchester," she says. "Diagnosis and treatment of these conditions is pretty straightforward for most individuals, and I can save them the logistics of traveling far by providing comprehensive care close to home."

To learn more about Dr. Lyness, visit [valleyhealthlink.com/Lyness](https://valleyhealthlink.com/Lyness).

# IMPROVING HEALTH THROUGH COMMUNITY PARTNERSHIPS

## Valley Health supports local nonprofits to maximize quality care for area residents

Serving the community by improving health is Valley Health’s mission, but we can’t accomplish this all on our own. Across our region there are many organizations that are tackling key health and wellness issues.

“We increasingly understand that health and well-being is impacted by factors outside the traditional definition of healthcare,” says Jeffrey Feit, MD, Valley Health’s chief population and community health officer. “For Valley Health to make our community healthier, we must work with other organizations to deploy all available resources in a way that they create the strongest impact.”

Valley Health’s Community Partnership Grant program provides eight one-year grants totaling \$200,000 to area nonprofit organizations that address critical health needs. One organization receives the top grant award of \$100,000, two receive \$25,000 awards, and five receive \$10,000.

This year, Morgan County Partnership (MCP) in Berkeley Springs, West Virginia, is the recipient of Valley Health’s top grant award. MCP is a coalition of local citizens who have a vision of creating a safe, healthy and drug-free community. MCP includes area nonprofits,

### COMMUNITY PARTNERSHIP GRANT RECIPIENTS

#### \$100,000

- Morgan County Partnership

#### \$25,000

- Page Alliance for Community Action
- Winchester Area Temporary Transitional Shelter

#### \$10,000

- Child Safe Center
- Concern Hotline
- Literacy Volunteers Winchester Area
- Wheels for Wellness
- Winchester Rescue Mission

government agencies, volunteer organizations, Morgan County Schools, churches, businesses, parents, and youth.

Morgan County is designated a behavioral health provider shortage area by the federal government, and like many rural counties across the nation, it lacks resources to adequately address the behavioral health needs and substance use issues of the county’s youth. The need for additional behavioral health services in the area was confirmed by Valley Health’s 2022 Community Health Needs Assessment.

Through the grant program, MCP will fund four part-time school-based counselors who will work with students in Morgan County schools to promote healthy decision-making strategies and to identify and strengthen factors that contribute to well-being and reduce substance use.

“Morgan County Partnership is based on the idea that by working together we can make a difference in our own communities,” says Executive Director Kristen Gingery. “We believe this new initiative in our public schools will positively impact our young people. We’re excited that Valley Health sees the value in partnership and the importance of investing in Morgan County’s students.”

Visit [valleyhealthlink.com/community](https://valleyhealthlink.com/community) to learn more about the 2022 Community Health Needs Assessment and how Valley Health is addressing these needs.



Morgan County Partnership provides substance use prevention and mental health support to students.



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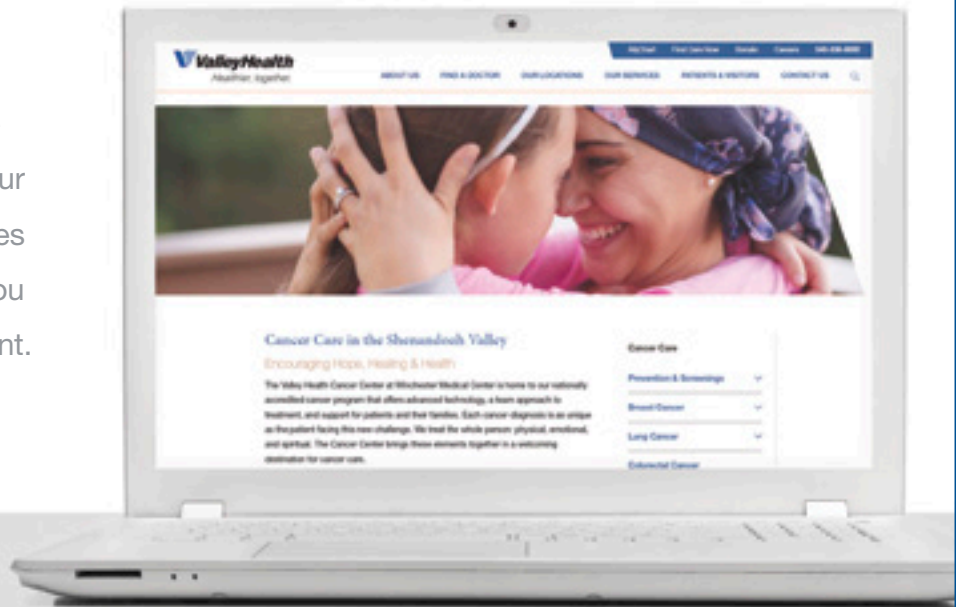
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