

Look North

A community and wellness publication from Mather Hospital



A new,
healthier life

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Volume 1, 2020

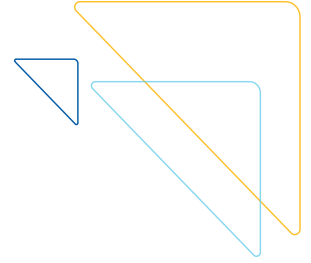


Mather Hospital
Northwell Health®

Ready, willing and extraordinary

Covid-19: Northwell answers the call

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President's message



Welcome to Mather Hospital's first issue of *Look North*, our new community publication produced with Northwell Health. *Look North* features articles on health and wellness, Mather's services and programs, and introduces our communities to all of Northwell's programs.

Our goal when we joined Northwell Health two years ago was to continue to make Mather a better hospital. We are doing just that. Over the past few months, our partnership has become even stronger, as Northwell has been invaluable in providing guidance and support in our efforts to fight and contain the spread of Covid-19.

The actions of our doctors, nurses, caregivers and support staff on the frontlines have caused a powerful ripple effect throughout our hospital and our community. I am extremely proud of our healthcare heroes and pleased with the progress our partnership with Northwell has made in such a short period of time. Look for Mather Hospital and Northwell to make additional advancements to improve the health of our communities in the near future.

As always, your feedback is welcomed. Please send us an email at matherhospital@northwell.edu with comments, questions or suggestions.

Thank you.

Kenneth D. Roberts
President
Mather Hospital



Take a tour of the new
2 South Oncology Unit at
matherhospital.org/2south.

The new look of exceptional cancer care

After an extensive renovation that was largely supported through community donations, the 2 South Oncology Unit at Mather Hospital is now open, redesigned for optimal patient care.

The unit features single-bedded oncology rooms with enlarged bathrooms and showers, offering patients a greater level of comfort and privacy. In addition to improving the patient experience, research shows that single-bedded rooms result in improved patient outcomes and a reduced risk of infection — an important consideration for cancer patients with compromised immune systems. The unit is designed with patients, family and care providers in mind. A serenity room and patient family lounge allow for rest and renewed strength when it's needed most. As an added touch, original works by local artists brighten the hallways and patient rooms.

Other updates, including a new nurses station and bedside computerized nurse charting stations with locked medication/supply cabinets enhance staff communication and teamwork.


Together, these additions create an exceptional healing environment for improved patient satisfaction.



Mather Hospital celebrates 90 years

This past December marked the 90th anniversary of Mather Hospital. The hospital was founded in 1929 through a bequest in the will of Port Jefferson shipbuilder John T. Mather and opened with 54 beds as the first general hospital in the Town of Brookhaven. Now, having expanded over the last nine decades, Mather is a 248-bed community teaching hospital and it became the 23rd hospital in the Northwell Health system in 2018.

Ready, willing and **extraordinary**



Northwell answers the call with ingenuity and compassion

When the US first heard about the novel coronavirus, it was a world away. Few could see the enormity of the health crisis that was coming. But Northwell Health was getting ready with the necessary tools and talent to meet the challenge, marshalling resources from across our service area. The health system's emergency management team quickly enacted guidelines and procedures to identify and treat potential patients, and to protect staff members.

At the forefront of New York State's pandemic response, Northwell Health has risen to the occasion — leading on the front lines and behind the scenes. We transformed areas in each of our hospitals to admit and care for Covid-19 patients, reimagining ways to deliver treatment while safeguarding those who step up to care for patients. And we're conducting research and clinical trials in search of new treatments.

At our core, we are healers and look for hope among our heroes.



Our 3 North staff typically care for patients recovering from complex surgeries, but during the height of the pandemic, the unit was transformed into a Covid-19 ICU.



Thank you to our community for your expressions of love and support for our staff. You brought smiles to the faces of our healthcare heroes during a stressful time.



Respiratory therapists played a crucial role in caring for patients requiring ventilation to help with their breathing.



Emergency Department staff continue to safely care for Covid-19 patients as well as those with life-threatening non-Covid-19 emergencies throughout the pandemic.



Our critical care units were the first to treat Covid-19 patients at Mather Hospital and continue to treat Covid-19 patients today.



3 South staff help patients communicate with their families using tablets while visitation is suspended.



Some of our nurses needed to develop higher level critical care skills in a very short time, displaying astonishing talent and compassion.



The Mather family has come together to fight this pandemic. #TogetherWeCan

Keeping patients connected

Patients at Mather who cannot have visitors due to the Covid-19 pandemic can now connect to both their families and their caregivers using devices that allow them to teleconference and receive email and photos

NucleusCare, a healthcare electronic video intercom system, has been introduced on our 3 South and 3 East patient care units. Each patient is given a screen and caregivers at the nurses' station can see and talk directly with patients in isolation without the need for going in and out of their rooms and donning and doffing personal protective equipment (PPE). The built-in night-vision camera allows nursing to check on patients when the patient room light is off. The devices also allow patients to communicate with their families, who can also send the patient photos that can be displayed as a rotating photo screen.

According to Justin Stroker, RN, director of patient and customer experience, the idea for NucleusCare, already in use at some senior living communities, came from Information Services in response to a request from Marie Mulligan, PhD, RN, vice president for nursing and chief nursing officer, to come up with means by which patients and nurses could communicate through audio and video. The Nucleus devices allow patients to communicate with Nursing and with their family and friends.

They are just one of the electronic devices being used to help patients communicate during these challenging times. "When we received the Department of Health mandates



regarding visitor restrictions, our nursing leadership team knew that we would be combatting not only this disease, but also the psychological and emotional impacts of isolation," said Dr. Mulligan. "With visitation suspended, we really wanted to ensure that patients stayed connected to their loved ones."

"We are very excited about these devices," said Mr. Stroker. "Along with the 95 devices from NucleusCare that are being deployed, we have an additional number of tablets to

help connect patients and families. These include iPads and Amazon Fire tablets that were sponsored by community donations."

"In addition, Northwell Health has been a great help by providing over 70 Echo Shows which will also help facilitate communication among patients, nurses and physicians, and 15 iPads that will allow patients to communicate with their families," said Tom Heiman, vice president for information services and chief information officer.

Community support to Mather's Covid-19 Emergency Fund helps supply needed resources to fight the pandemic, including tablets to keep patients, their families and caregivers connected. Support Mather's Covid-19 Emergency Fund at matherhospital.org/emergencyfund.

It takes a village

Interdisciplinary prone teams aid Covid-19 patients

In the throes of Covid-19, Mather Hospital had four proning teams that work to turn critically ill patients, usually on ventilators, on their stomachs (prone position) to facilitate improved oxygenation.

The proning procedure is manual and requires staff who have the skill to safely reposition patients. The

teams have a minimum of six staff members that consist of operating room nurses, surgical technicians, surgical service aides, and physical and occupational therapists.

“It takes a village to care for these special patients, and we are made for this,” said Karen Tuzzolo, RN, director of surgical services.



At the time this issue went to print, Mather Hospital treated and released nearly 500 Covid-19 patients from the Emergency Department or discharged them from inpatient care to recover at home.

Teresa Haddon has worked at Mather Hospital for 45 years.



The nerve to relieve back pain

Two patients describe how the Intrasept procedure changed their lives

Those living with chronic back pain feel its effects not just in their muscles and spines — it impacts their entire life. With limitations and restrictions, back pain can keep them away from work or even being able to enjoy family time.

Now there's a fresh approach to address the kind of back pain caused when lumbar discs degenerate and the bones that the discs support begin to wear and tear, causing pain to flare up through the basivertebral nerve. Called

the Intracept procedure, this method targets the nerve, using radiofrequency energy to stop the pain signal from reaching the brain. Mather Hospital offers this innovative new procedure.

“The Intracept procedure offers a potential solution to many people living with chronic back pain,” said Brian Durkin, DO, pain management physician at Mather Hospital. “This is a minimally invasive technique that can be done with local anesthesia and sedation, and the patient is expected to go home shortly after it is completed.”

Here’s a glimpse of two patients who’ve had amazing results from the procedure, but they’re far from alone. According to Dr. Durkin, Mather has performed more Intracept procedures than any hospital in the Northeast.

From nurse to patient and back again

As a licensed practical nurse in the operating room at Mather Hospital, Teresa Haddon is used to standing for hours at a time and feeling stiffness in her legs as a result. But in June 2018, the 62-year-old began experiencing very different, scary symptoms.

Over a matter of weeks, numbness at the top of her left leg began spreading downward until she couldn’t feel that leg at all — necessitating the use of a walker. Due to nerve damage, she struggled with bladder control and had to take time off from work that eventually became 10 months.

“To say the situation was challenging is an understatement,” said Ms. Haddon. “It was frustrating, because I had to get epidurals to manage the pain.” That’s when Dr. Durkin suggested the Intracept procedure, which she had in January 2019.

The procedure seemed quick, she recalls, and after two days, sensation returned to her leg. After two more days, she regained bladder control and the pain was gone. She was able to return to nursing duties in April, feeling



Carol Christensen with her husband, Keith Christensen

stronger and more mobile than ever.

“What a great feeling it was, to walk back into the operating room, ready to get back to work,” she said. “It was life-changing.”

A lifetime of pain, resolved

Because of her advanced scoliosis, back pain has been a part of 78-year-old Mount Sinai resident Carol Christensen’s life for decades. She’d grown used to having to “loosen up” her back after sleeping or sitting, and she figured that pain would continue to be her annoying, aching, constant companion for the rest of her life.

Her back pain had other plans. In the summer of 2019, the intensity ramped up rapidly, unrelated to any injury or accident, worsening day by day until she had trouble getting up from a chair or her bed, and eventually moving at all. Ms. Christensen’s world became very small very fast, as she tried to remain as still as possible to lessen the shooting pain.

“I saw a spine doctor, but he said there was nothing he could do,” she recalled. “Hearing I had no options was disheartening. I simply couldn’t live that way.”

Optimism returned when she was referred to Mohammad Bilal, MD, DABR, interventional radiologist at Mather Hospital. Dr. Bilal recommended the Intracept procedure and told her about the results other patients had experienced.

She had the procedure done in September 2019. When she woke up from the mild sedation, she felt like a whole new person.

“There was no pain. It was gone,” she said. “That instant relief, especially after months of not being able to move, was incredible. I walked out of the hospital that same day, and the pain in that area hasn’t returned since.”

Dr. Bilal said he’s seen many patients like Ms. Christensen, who have tried multiple types of chronic pain management as well as surgical options, often with only temporary or minimal improvement. Candidates for the Intracept procedure have a chance of getting their lives back.

“Given the high success rate of subjective pain relief from our patients after they have been carefully selected, the Intracept procedure may alter the algorithm for managing chronic back pain,” said Dr. Bilal.

To learn more about Mather Interventional Radiology, call **(631) 476-2767** or visit matherhospital.org/IR.



A new, healthier life

For Jennifer Shemet, a gastric sleeve procedure changed everything

Ms. Shemet, 37, of Lindenhurst had been overweight most of her life and had tried everything to lose weight. “My family all have passed away from morbid obesity. I had just got married and wanted to start a family and I wasn’t able to conceive because of my weight,” she said.

Having witnessed what she called “the phenomenal transformation” of one of her colleagues who was a patient of Arif Ahmad, MD, and Mather Hospital’s Center of Excellence in Metabolic and Bariatric Surgery™, she decided to attend one of his bariatric surgery information seminars.

“I absolutely fell in love with Dr. Ahmad and his kind manner,” she said. “I actually told my husband it felt like I was sitting on a comfy couch during the seminar.”

She scheduled an appointment with Dr. Ahmad and they decided on the gastric sleeve procedure. “I knew I didn’t want to go totally invasive. I leaned toward the sleeve,” she said. “He asked about my eating habits and helped me realize it was more of a portion control issue rather than an emotional issue. I was still working out and going to the gym, but my portion control was not in line.”

Ms. Shemet had the surgery on May 22, 2019. “I didn’t lift a finger. His staff told me what I had to do, when I had to be

there. It was just a great experience.” Since then, her weight has gone from 305 to 210.

“I feel amazing. I am now off all of my medications — blood pressure, diabetes, cholesterol, Xanax, Lexapro. Everything except my vitamins,” she said. “I feel mentally healthier than I have ever been as well as physically healthier.”

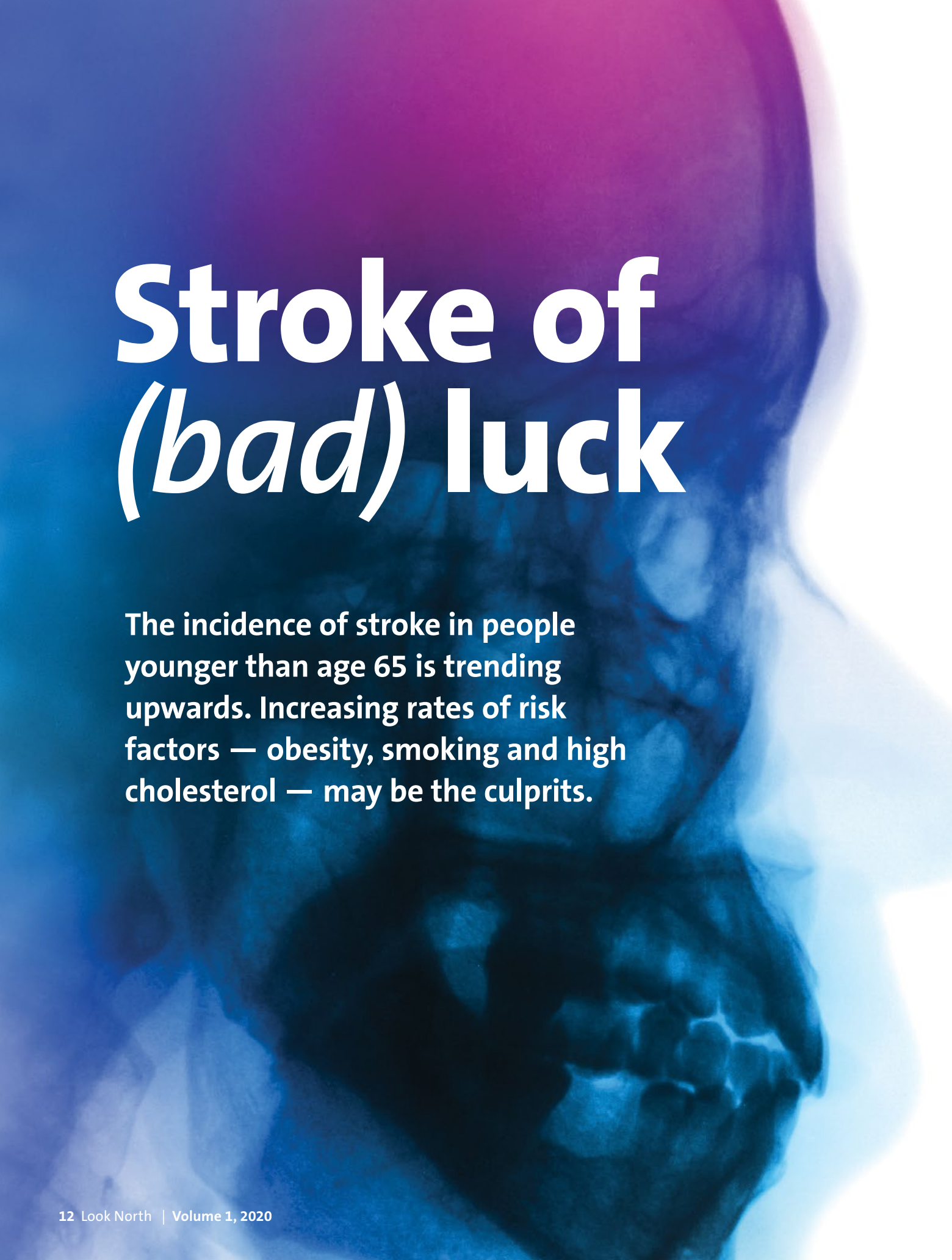
She also appreciates the little things she can do now that were so difficult at her higher weight. “Tying my shoes, crossing my legs, putting sneakers on, picking stuff up off the floor, playing with my dog.”

Ms. Shemet attends Dr. Ahmad’s bariatric support group meetings and speaks at some of his seminars. “I really try to be a support person for them because they all helped me,” she said. “I feel I should be a stand-up person and give back.”

Learn more about
Mather’s Center of
Excellence in Metabolic
and Bariatric Surgery™
at [matherhospital.org/
bariatrics](https://matherhospital.org/bariatrics).

“I feel amazing. I am now off all of my medications — blood pressure, diabetes, cholesterol, Xanax, Lexapro. Everything except my vitamins.”

— Jennifer Shemet



Stroke of *(bad)* luck

The incidence of stroke in people younger than age 65 is trending upwards. Increasing rates of risk factors — obesity, smoking and high cholesterol — may be the culprits.

Experts point to unhealthy lifestyles: Many younger Americans are less physically active than previous generations, and more likely to eat a lot of processed, high-fat, high-sodium foods. Plus, since young adults tend to feel fine, and they're less likely to get regular physical examinations, so high blood pressure, high cholesterol and diabetes go undiagnosed. It's an alarming trend — but there's hope.

Preventing stroke

The good news is that regardless of age, up to 80 percent of strokes are preventable. For younger adults, these healthy lifestyle changes are especially beneficial:

See a doctor. A yearly checkup can alert you and your physician to red flags, such as elevated blood pressure.

Know your numbers. Get screened every year for high cholesterol and diabetes, two conditions that raise the risk of stroke. Nearly a quarter of a million Americans ages 18 to 64 have high cholesterol, according to the latest guidelines. High cholesterol causes fatty deposits, or plaque, to build up in the arteries. If a deposit breaks off, it can trigger a stroke-inducing clot.

Eat healthier. A diet loaded with saturated fats and sodium, like one high in red meat and fried or processed foods, can raise unhealthy cholesterol levels and blood pressure. Choose plenty of fresh fruits and vegetables, whole grains and lean protein like fish.

Kick the nicotine habit. The use of vaping devices, or e-cigarettes, has surged among young people even as cigarette use has declined. But vaping delivers nicotine, a chemical that increases stroke risk by raising blood pressure and making blood “stickier” and more likely to clot, among other changes. According to the American Stroke Association, cigarette smokers are twice as likely as nonsmokers to have a stroke, while research suggests that e-cigarette users have a 71 percent higher chance of stroke compared to non-vapers.

Maintain a healthy weight. More than a third of adults between 20 and 39 are considered obese, a condition that contributes to high blood pressure, unhealthy cholesterol levels and diabetes. An American Health Association study found an increased risk for early-onset stroke among young, overweight adults, especially for men and African-Americans.

Warning signs

Most strokes occur after the age of 65, but the American Stroke Association says that adolescents and young adults account for 15 percent of ischemic strokes — the most common type, which occurs when a blood vessel in the brain is blocked. Furthermore, hospitalizations for stroke between 2003 and 2012 increased by 30 to 41 percent for people between 35 to 44 years old, according to a *JAMA Neurology* study.

Whatever your age, getting treatment quickly for a stroke reduces the risk of brain damage, permanent disability or death. Go to an emergency department or call 911 if you or someone with you experiences shows these symptoms:

- facial drooping
- arm weakness
- speech difficulties

Calculate your risk for stroke with our free health risk assessment at hra.northwell.edu/stroke.



Harbor View Medical Services has specialists in:

- Cardiology
- Colon & Rectal Surgery
- Endocrinology
- Gastroenterology
- General Surgery
- Primary Care (Internal
Medicine and Family
Medicine)
- Neurology
- Rheumatology
- Vascular Surgery

Bringing doctors to patients

Telemedicine helps healthcare providers keep in touch with patients during the pandemic

When the Covid-19 pandemic made social distancing important, Harbor View Medical Services, Mather Hospital's multispecialty physician practice, turned to telemedicine to continue to evaluate and treat their patients.

"It's been a great thing and has given us the ability to maintain continuity of care with patients," said Joan Faro, MD, chief medical officer of Mather and president of Harbor View. "Patients are really liking it. We don't want to lose contact with our patients, so we're using Facetime, Zoom, and an application called doxy.me to have virtual patient visits."

Zach Chaudry, director of operations for Harbor View, described doxy.me as "a secure HIPAA compliant platform that is easy to use for both patients and physicians. It can be used on various devices, such as computers, tablets and smartphones, and requires no downloads or complicated sign-up processes."

Harbor View Medical Services implemented telehealth visits so that patients wouldn't avoid or delay medical care due to fears over the safety of leaving their homes and visiting the doctor's office. Telehealth visits are particularly beneficial when patients require ongoing monitoring or are homebound.

Cardiologist David Shenouda, DO, said, "It's much more efficient for patients because they don't have to drive to the office, fill out paperwork and wait. Now they just get online and they wait for us in the virtual waiting room for no more than three to four minutes."

Primary care physician Christine Fruth, DO, also uses doxy.me to connect with her patients. "Telemedicine will continue to have a role for housebound patients or for medication follow-ups, but in-person visits with the provider will continue to be necessary and we are working very hard to make those visits safe during the Covid-19 pandemic. Strong doctor-patient relationships are not built over an iPad."

Patient safety continues to be a priority

In cases where in-person visits are required, Harbor View has instituted new processes to protect the health of both patients and staff. Robert Giacobbe, DO, Harbor View's medical director, described some of the steps the practices have taken. "All staff members must

wear masks and patients are provided with a mask when they arrive for their appointment. The physician's schedules have been staggered to minimize the number of people in the office at a given time. In addition, the time between patient appointments has been increased to allow for exam rooms and high traffic or high touch areas to be thoroughly sanitized several times an hour."

"Telemedicine does have its limitations," Dr. Shenouda noted. "There are times when we need to perform a physical examination or do an EKG to properly evaluate a patient. When an in-person visit is needed, we work very hard to make the office safe."

"When patients need to come to the office, no one sits in the waiting room. We bring them directly into the exam room," said Dr. Shenouda. "If a patient must wait, they go out to their cars and we call them on their cell phones."

More information at harborviewmedicalservices.com



Serving those **who serve**

Every military veteran and service member in our community counts. Find programs and services at Northwell Health to address your well-being and your family's, plus employment assistance and other vital resources.

Career services

- **Barracks to Business.** Vets return home with valuable skills, but often have difficulty translating their experience into civilian employment. Barracks to Business workshops provide assistance with resume writing, career development, interview prep and communication skills.
- **VALOR (Veterans and Allies: Liaisons of Reintegration).** A veteran-focused business employee resource group, VALOR connects current Northwell employees who are veterans with those returning to civilian life, providing companionship, insight and advice. The VALOR Navigator Program pairs newly hired vets at Northwell with mentors in the health system to offer encouragement.

For more information on jobs, workshops and veteran-focused career services, go to jobs.northwell.edu/veterans, or call (516) 881-7020.

Health services

- **Florence & Robert A. Rosen Family Wellness Center.** Serving overseas or being exposed to trauma via a career as a first responder or law enforcement officer can affect people and their families in ways that aren't always visible. Staff at the Rosen Family Wellness Center address stress and trauma, bereavement and service member reintegration, and offer counseling, referrals, training and workshops, among other services. For more information, call (516) 562-3260.
 - **Unified Behavioral Health Center for Military Veterans and Their Families.** This partnership between Northwell and the Northport Veterans Administration provides behavioral health services for military service members and their families.
 - **VA Women's Referral Program.** This joint effort between the health system and the Northport VA refers women vets for mammography, breast ultrasound and biopsy, and obstetrical care at Northwell locations in Manhasset, New Hyde Park, Huntington and Islip.
- Call (631) 647-2530 to learn about care from these VA-Northwell collaborations.



Side by Side: A Celebration of Service, Northwell Health's tribute to military and health care heroes, is ready to stream. Visit sidebysidenyc.com to enjoy performances by our special guests Gavin Degraw, DJ Questlove and Meghan Trainor, and much more.



Care that can keep up with Richie

Richie Cheatham wanted his prostate cancer treatments the way he likes his cars — fast and efficient

When the 74-year-old street rod enthusiast was diagnosed with prostate cancer, he opted for Precision CyberKnife of New York and five, 45-minute radiation treatments as opposed to 28 traditional radiation treatments or surgery. “I chose CyberKnife because I don’t have the time to come every day for two minutes over 28 days,” said Mr. Cheatham. “I need to get up and go.”

Mr. Cheatham, a highly energetic go-getter, learned he had prostate cancer after going for his annual physical with his primary care physician in September 2018. His doctor discovered that his prostate was quite enlarged and, after further testing, diagnosed him

with prostate cancer. He recommended that Mr. Cheatham see a urologist, who subsequently prescribed monthly Lupron shots to shrink his prostate.

The urologist also recommended that Mr. Cheatham research his options for prostate cancer treatments. He interviewed three doctors and after meeting Joseph Cirrone, MD, of Precision CyberKnife, Mr. Cheatham felt comfortable that he was an expert in his field. Dr. Cirrone offered an alternative to surgery. He recommended Precision CyberKnife advanced radiosurgery, a nonsurgical cancer treatment that pinpoints high doses of radiation directly at the tumor, carefully avoiding nearby healthy tissue.

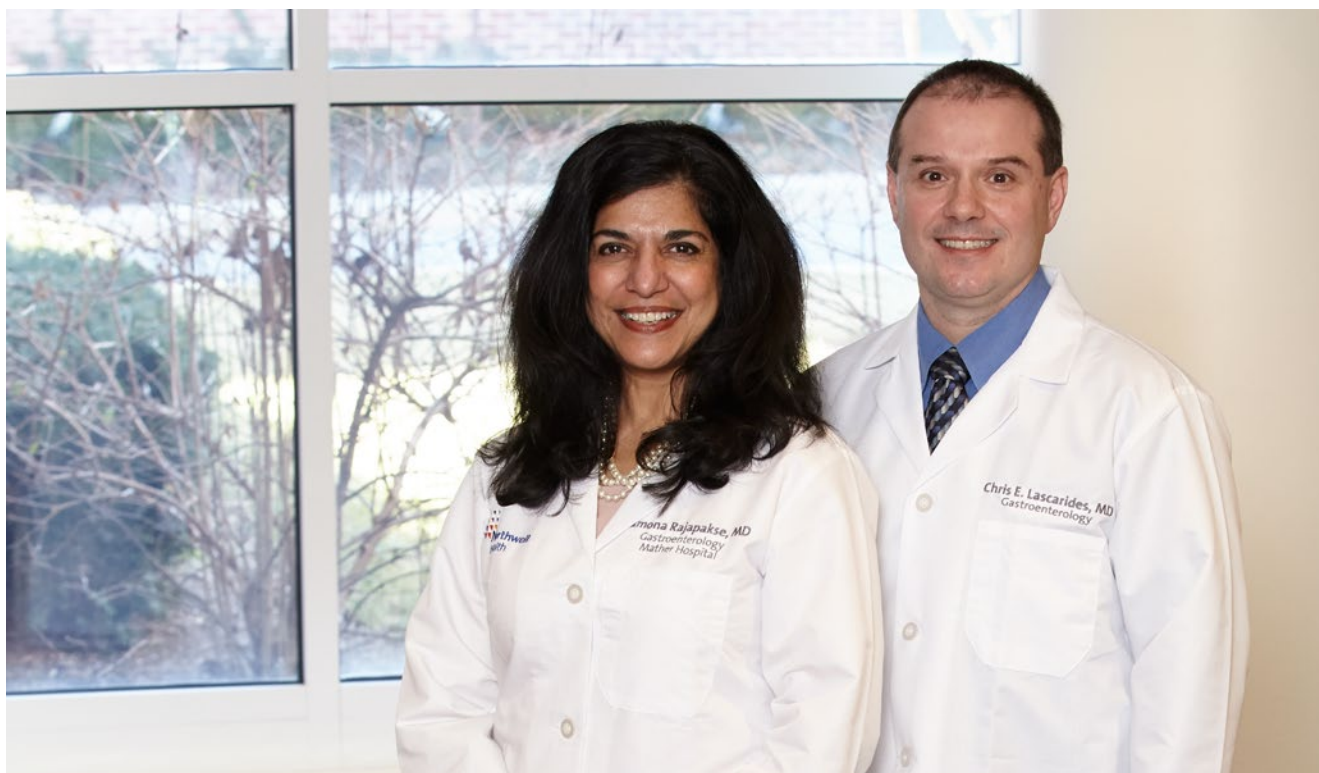
“I’d sooner take a gamble with CyberKnife than surgery because I could wind up being somehow incapacitated,” said Mr. Cheatham. “I have got to be able to get up every day and go to work.” He heard about CyberKnife from TV commercials. “I figured I’d have to travel west every day. But then when I found out I could get it done 20 minutes from home, my decision was made.”

Dr. Cirrone showed him the CyberKnife unit, patiently described how it works and explained any possible side effects. “I did fear becoming incontinent or even impotent following these treatments as these can be some of the side effects. But for me, the side effects were minimal,” Mr. Cheatham said.

During treatments, Mr. Cheatham relaxed on the CyberKnife table and listened to the music of his choice through headphones. “At my third treatment, I actually fell asleep on the table and the staff had to wake me up,” he recalled. The treatments were painless and following each one, he drove to work. “I am completely satisfied that the CyberKnife treatments worked,” he said. “As long as I’m upright and mobile, you can’t stop me. I’ve been very fortunate and blessed that no matter what comes my way in life, I’m able to deal with it and conquer it.”

Mr. Cheatham finished his treatments more than a year ago and he continues to be happy with the outcome. He was also happy that he was able to get to the Barrett-Jackson car auction last January in Arizona.

For more information about CyberKnife, visit matherhospital.org/cyberknife or call (631) 407-2709.



Facts about colon cancer screenings

The when, what and why of this important screening tool

If you haven't had a colorectal cancer screening yet, it can seem like an intimidating procedure. That's why we asked gastroenterologists Ramona Rajapakse, MD, FRCP (UK), FACP, and Chris Lascarides, MD, of Mather Gastroenterology for some clarity. They offer these facts on what you need to know:

1 Screening is also a prevention tool

Colon cancer screening doesn't just reveal signs of cancer; it also allows a gastroenterologist to remove any polyps that might be present. Since polyps can develop into cancer, that means screening is essentially preventing cancer as well. Because of this, colon cancer is one of the few preventable cancers, but that only happens if you stick to a screening schedule.

2 Not enough people are getting screened

About 30 percent of people who should be getting colorectal cancer screenings are skipping the procedure. That's one of the reasons colon cancer is the second most deadly cancer in the US — and it doesn't need to be.

3 When you start may depend on family history

The standard recommendation is to start at age 50 for colon cancer screenings, and if no polyps are present, you don't have to come back until age 60. But if you have a first-degree relative — mother, father, sibling — with a history of cancer or polyps, you'll need to start at a younger age. For example, if your mom was diagnosed with colon cancer at age 50, you should start screening at age 40.

4 Your risk levels go up with any family history of cancer

Obviously, your risk of colorectal cancer is higher when a first-degree relative is diagnosed, but there's some elevated risk from other cancers as well, especially esophageal, stomach and ovarian cancer.

5 Screening itself takes about 10 to 15 minutes

In half the time of a standard sitcom, you could be preventing cancer. The procedure does involve some prep the day before, but the procedure itself is done under sedation — not general anesthesia — and takes under 15 minutes, even if polyp removal is necessary.

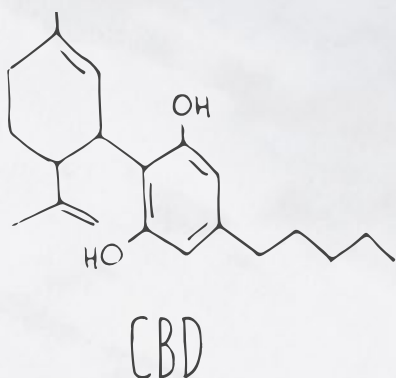
For more information, or to make an appointment at Mather Gastroenterology, call (631) 978-7700.



CBD:

*hope
or
hype?*

It's everywhere, but the jury is still out on whether cannabidiol is the cure for what ails you



You're not imagining it: CBD creams, lotions, oils, tinctures and pills are everywhere, promising relief from everything from anxiety to acne. Judging from the sheer abundance of products, you might think that the extract is good for whatever ails you. It's no wonder that a 2018 survey published in *Cannabis and Cannabinoid Research* found that more than 60 percent of CBD users buy it to manage medical conditions. But is CBD living up to the hope people have placed in it — or is it just a lot of hype?

The ABCs of CBD

CBD stands for cannabidiol, one of the active ingredients in marijuana. Unlike marijuana's other well-known active ingredient, tetrahydrocannabinol (THC), though, CBD doesn't get users high. Beyond that, researchers are still establishing exactly what CBD does in the brain and throughout the body.

The upside: CBD appears to be safe, although it can cause side effects like nausea, fatigue and irritability, and can interact with some medications. Researchers haven't found any signs that people abuse it or become dependent on it.

The down side: CBD products are regulated like supplements, which means that there's little oversight or quality control. Among other things, that means you can't count on products containing what the label promises. A 2017 report in the *Journal of the American Medical Association* found that 43 percent of CBD products sold online contained more CBD than advertised, while 26 percent contained less. Only a third of the products were labeled correctly.

Can CBD help you?

For now, preliminary evidence suggests CBD may help with these problems:

Anxiety: Some people swear that CBD helps calm everyday worries, while others rely on it to manage more serious issues like post-traumatic stress disorder (PTSD). They may be on to something. A 2015 report in *Neurotherapeutics* looked at findings from laboratory research, clinical trials and other studies. The collected evidence strongly suggests that CBD may indeed have soothing properties for people with generalized anxiety disorder, social anxiety disorder, obsessive-compulsive disorder and PTSD.

Pain: There are many studies in the works examining CBD's role in easing chronic pain and inflammation. Early findings are encouraging. One study found that CBD gel reduced joint inflammation and signs of pain in arthritic rats. Researchers are also exploring whether CBD can help people beat addictions to opioid painkillers or other narcotics.

Seizures: CBD holds a good deal of promise against seizures. In one large study of CBD in children with epilepsy, the compound reduced the frequency of seizures by more than half. And in 2018, Epidiolex became the first cannabis-derived drug to earn approval from the US Food and Drug Administration. Studies show that the oral medication, made from purified CBD, helps control seizures in children who have rare, severe forms of epilepsy. (The drug manufacturer, GW Pharmaceuticals, is currently working to obtain FDA approval for another CBD medication, Sativex, which is already used outside the US by people with multiple sclerosis to manage muscle spasticity.)

The bottom line: Talk to your doctor before trying any type of CBD product, since it could potentially interact with other medications. Keep in mind that you can't necessarily trust that the product you buy contains what's on the label — but if it does contain CBD, short-term use appears not to be particularly risky. More research is needed to clarify long-term effects.

Look North

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