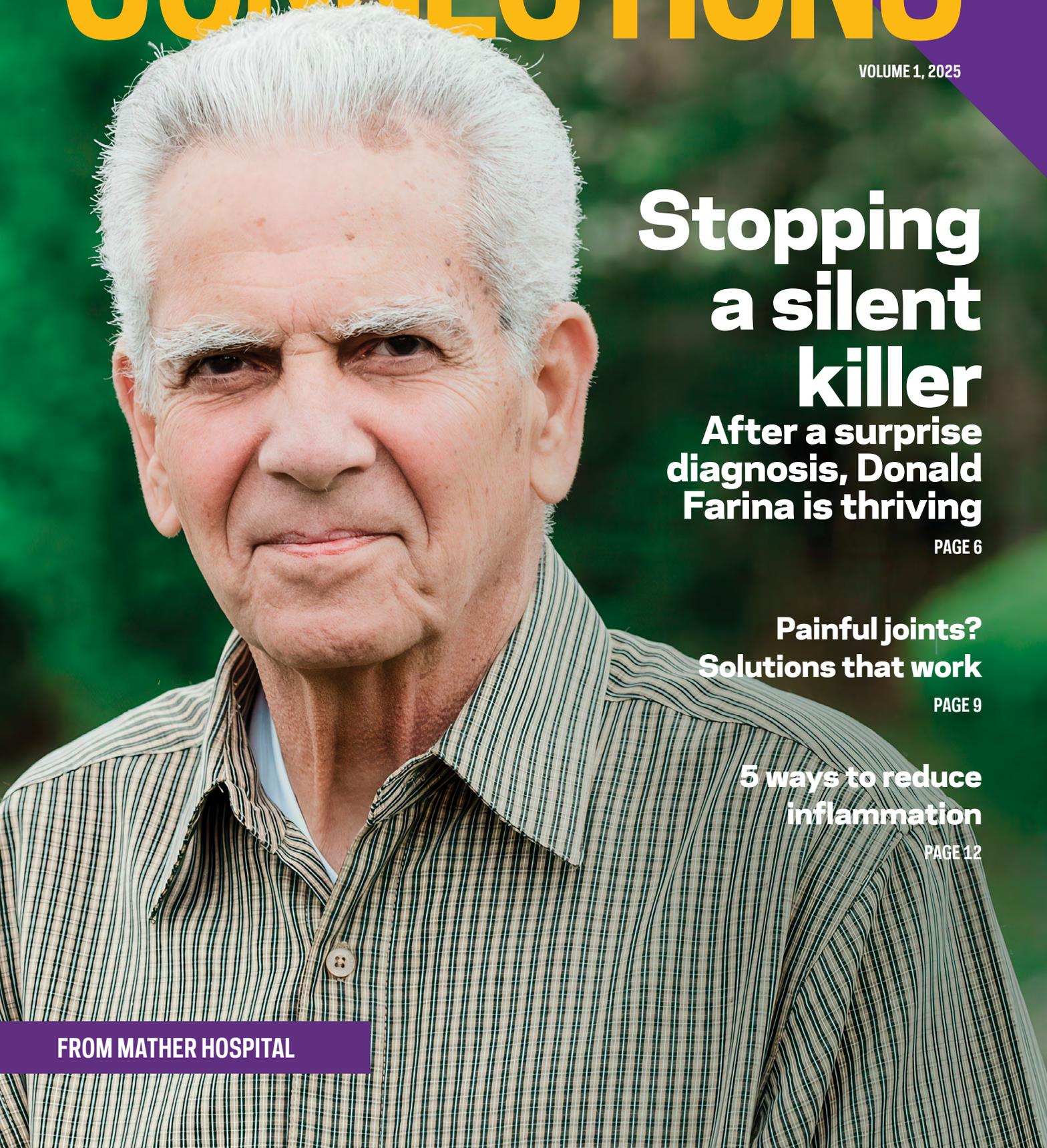


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Kevin McGeachy
SVP, President
Mather Hospital

Stephen Bello, PA
EVP, President
Eastern Market

Barbara Osborn
VP, Deputy Chief
Public Relations Officer
Northwell Health

John Hastings
Director
Public Relations

Lisa Davis
Senior Advisor
Public Relations

Anne Krueger
Editor
Public Relations

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News & notes



A ribbon-cutting ceremony in July was an early celebration of Mather Hospital's new emergency department — opening soon!

A state-of-the-art emergency department at Mather Hospital

No one wants to go to the emergency room. But Mather Hospital's new \$78 million Frey Family Emergency Department (ED) may change your mind. At 29,000 square feet, the new facility, which is opening later this year, will be more than twice the size of the old ED.

"This project represents a major investment in the health and safety of our community," says Kevin McGeachy, Mather Hospital president. "We've created a space that will provide faster, more efficient care in a setting that will prioritize patient comfort, privacy and safety."

The space, which is designed to help prevent the spread of infection, will include dedicated CT, X-ray and ultrasound equipment, giving clinicians the tools to make diagnoses faster.

The new ED is built to serve patients at every stage of life — with a particular focus on older adults, McGeachy says. Mather is already a designated Age-Friendly Hospital with a Gold Level 1 Geriatric Emergency Department Accreditation from the American College of Emergency Physicians; the new ED will provide enhanced geriatric care. One example is patient exam rooms that can accommodate caregivers so older patients can receive the support they need. There also will be dedicated behavioral health space, with six rooms for adolescents and adults experiencing mental health crises.

The new ED is part of a group of capital expansion projects at Mather and was made possible thanks, in part, to a generous gift from Robert and Kathryn Frey.

A Mather hero: nurse Steven Cortes

Each year, the Northwell anesthesia service line honors a physician and certified registered nurse anesthetist (CRNA) with its Lifesaver award. This time, the choice was easy. Nurse Steven Cortes (below, center) was driving home last fall after a 10-hour shift at Mather Hospital when he passed a house fire — he was the first person on the scene. Cortes called 911 and then helped rescue a 62-year-old disabled man trapped in the blaze.

After the paramedics were unable to place a breathing tube, Cortes successfully intubated the man on his first attempt. He secured the patient's airway, remaining at his side in the ambulance and aiding in resuscitation efforts on the way to the closest hospital. The award noted Cortes's extraordinary compassion and selflessness and lauded him for exemplifying the mission, vision and values of Northwell anesthesia. We agree!



News & notes

CONGRATS AND KUDOS

A sampling of awards and accomplishments



Mather Hospital was nationally recognized with the Healthgrades 2025 Outstanding Patient Experience Award for the fifth year in a row (2021–2025) for ensuring that its patients' encounters are positive. Mather is one of four hospitals in New York State to receive the award and among the top 5% of hospitals in the country for patient experience for a second consecutive year. "This award speaks directly to the dedication and compassion of our entire team at Mather Hospital," says Kevin McGeachy, Mather Hospital president. "We are honored to receive this recognition, which reinforces our mission to put patients first in every aspect of their care."



Mather Hospital earned a top "A" rating for its commitment to patient safety from the Leapfrog Group for spring 2025 — the 22nd time the hospital has achieved the ranking. Leapfrog uses up to 30 performance measures to grade hospitals on their overall performance in keeping patients safe from preventable harm and medical errors.



Mather Hospital earned The Joint Commission's Gold Seal of Approval for Advanced Total Hip and Knee Replacement Certification by demonstrating continuous compliance with the organization's performance standards. The Gold Seal reflects a health care organization's commitment to providing safe and quality patient care.



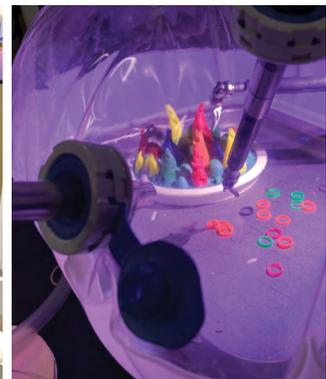
Melissa Nicosia, MD, director of OB/GYN at Mather Hospital, has been recognized as a Suffolk County Healthcare Hero. The prestigious award, presented by District 18 legislator Rebecca Sanin, honors Dr. Nicosia's outstanding contributions to women's health and her unwavering commitment to providing compassionate, high-quality patient care.

Students get hands-on robotic experience

High school students on four local robotics teams got a surgeon's view as they tested their skill with a next-generation da Vinci surgical robot in Mather Hospital's Great Robotic Challenge. The event was part of Mather's celebration of a milestone 10,000th robotic surgery.

Participants from Longwood, Smithtown, Miller Place and Port Jefferson-Mount Sinai took turns at the robot's control panel, viewing a 3D image of a mock surgical area. Their task: to maneuver the robot's arms to pick up rubber rings and place them on a series of cones. The Longwood team had the best overall score in the challenge.

The students also got a view of the future of robotic surgery, as Arif Ahmad, MD, director of Mather Hospital's Robotic Surgery Center of Excellence, shared information on current and anticipated uses of the technology. One expected boon: telepresence — audio/video technology that allows surgeons in another location to observe and mentor colleagues in real time during robotic-assisted surgeries.



3 QUESTIONS FOR...

Mohamad Abouzeid, MD

A general surgeon talks about what motivated him to become a doctor and how Mather Hospital uses robotic surgery to help patients recover faster



Q: What inspired you to become a surgeon?

When I was growing up, I needed many surgeries. Members of my family had surgery too. I looked up to the doctors as superheroes. Seeing the difference they made in my life and in my family members' lives had a big impact on me. It made me want to grow up and be like them.

Q: What are the joys and challenges of your job?

In surgery, you build a very personal relationship with

each patient. I enjoy that human interaction. The best part of my job is fixing patients' problems through surgery, making them feel better and helping them get back to their normal activities or family life.

Recently, a patient who'd had serious reflux due to a hiatal hernia came to see me. After we operated, she didn't need any more medications. She told me she felt so much better and that it was a miracle! That was very rewarding to hear.

As a surgeon, balancing family life — I have two young children, ages 4 and 6 — with work can be challenging, but I love being in the operating room.

Q: What surgical advances are you most excited about?

Robotic surgery has revolutionized the way we perform operations. Hernia surgery is one example of that. The robot gives us a 3D view of the site and has arms with instruments attached to them that the surgeon guides through very small

incisions. The result is that patients are having better outcomes, less pain and faster recoveries. We have access to the robot 24/7 and are able to recommend robotic surgery for patients who are good candidates for it.

Northwell Health has been very supportive in providing Mather Hospital with the latest technologies. We're glad to be able to apply the latest techniques to achieve the best results for our patients.

“In surgery, you build a very personal relationship with each patient. I enjoy that human interaction.”

— Mohamad Abouzeid, MD



Scan the QR code to find out more about Dr. Abouzeid. To make an appointment with him, call 631-528-2726.





A surprise diagnosis saved his life

A routine checkup revealed Donald Farina's life-threatening heart problem — and that made all the difference

Donald Farina didn't have a lot to complain about at his annual checkup last October. He told his primary care physician, John Reyes, DO, that he'd dropped 15 pounds over the past year, and noticed he felt full soon after he began eating. Otherwise, all seemed fine.

Those two symptoms were enough to raise an alarm for Dr. Reyes. He sent Farina, a 79-year-old retired graphics engineer supervisor, for an abdominal ultrasound. Four days later Farina got a call from Kelli Summers, MD, a vascular surgeon at Mather Hospital, that would change his life.

"She said, 'Go immediately to the emergency room. And pack a bag — you're going to be there a while,'" recalls Farina, who lives in East Setauket. "I was like, 'What's going on?' I wasn't aware that I had any serious symptoms. I was nervous, but I went."

The ultrasound had revealed a large abdominal aortic aneurysm (AAA) in Farina's abdomen. The aorta is the main artery carrying blood from the heart; in the abdomen, it brings blood to the kidneys, intestines and legs. Sometimes the aortic wall can become weak, bulging like a balloon, Dr. Summers told him. "That bulge is an aneurysm," she said. "If it continues to grow, it can burst and cause severe internal bleeding. More than 80% of people who experience an aortic rupture die."

But Farina was lucky: Mather Hospital is part of Northwell's Cardiovascular Institute, a national leader in the treatment of aortic aneurysms. Dr. Summers had the expertise and the team to defuse the time bomb in his abdomen.

A SERIOUS DISORDER

Each year, 200,000 Americans are diagnosed with AAA; a ruptured AAA is the 15th leading cause of death in the country and the 10th leading cause of death in men older than 55. Farina's AAA was large — 15 centimeters, or about the length of a pencil. "There is a greater than 30% risk of rupture each year when an AAA is greater than 7 centimeters," says Dr. Summers. "The risk of rupture at 15 centimeters is unknown, but we can assume Mr. Farina's risk was extremely high."

Luckily, there are fixes for an AAA, she says. The traditional method uses open surgery: Working through an abdominal incision, a vascular surgeon replaces the damaged part of the aorta with a stent graft, a small tube made out of mesh. In other cases, the overhaul can be done without a large incision, through minimally invasive endovascular aortic repair (EVAR) — a catheter is inserted into the aorta through a small incision in



the groin and used to carry the stent up to the trouble spot. Once the stent is deployed, it lines the aorta to cover up and reinforce the damaged portion and prevent it from rupturing.

Endovascular surgery is lower risk and requires less recovery time, Dr. Summers says — generally just a day or so in the hospital, compared to a stay in the intensive care unit (ICU) plus at least a week in the hospital after open surgery. But it's not always the right choice. "Unfortunately, not everyone's anatomy is favorable for endovascular repair, and this was the case for Mr. Farina," she says. Based on the large size of his AAA and its position close to the arteries feeding the kidneys, Dr. Summers recommended open surgery.

A FIX BEFORE THE FIX

But before Farina could have the procedure, he needed preoperative testing — done in the ICU because his situation was so precarious. There, doctors discovered another problem: His heart was skipping beats.

The condition had to do with his heart's electrical system, which governs the heartbeat. "If you have a frayed wire in the heart, the connection doesn't work right every time," says David Shenouda, DO, the director of cardiac rehabilitation at Mather and a noninvasive clinical cardiologist. "The connection gets lost, and you can miss a heartbeat." Dr. Shenouda and his



"I feel better now than I ever did!"

— Donald Farina

team worked with Eric Pagan, MD, an expert in the heart's electrical system, to insert a temporary pacemaker to ensure Farina's heart would beat normally during his AAA repair.

With his heart stabilized, Farina was ready for surgery. On November 1, Dr. Summers and vascular surgeon Michael Petersen, MD, began the repair. Carefully, they clamped his abdominal aorta above and below the aneurysm to stop the flow of blood; then they opened up the aneurysm, sewed a graft into place and released the clamps. Farina's risk of a catastrophic rupture was over.

A NEW, HEALTHIER LIFE

While Farina recovered in the ICU, doctors implanted a permanent pacemaker. His wife, Fran, and his adult twins, Don and Dawn, and their families kept him company, cheering him up with personalized videos and rosaries. "They were wonderful," Farina says. "I couldn't have done it without them." Once he was back home, he began cardiac rehabilitation and worked with a team at Mather through May to build up his strength and endurance.

Farina says that he hadn't exercised much before his AAA procedure. Today he gardens, is the Farina family handyman and takes long walks through his community. "I have more energy now, and that's because of the surgery and the therapy," he says.

The Farinas won't soon forget the Mather team. "Everyone was so caring," says Fran. "They are a true blessing. We were very fortunate that we had them to take care of him. They're the reason Donald is alive right now."

He's not just alive, Farina says: "I feel better now than I ever did!"

A leader in aneurysm repair

At its Center for Aortic Disease, Northwell Health treats more aortic aneurysms and emergency aortic dissections than any other health system in New York State. According to the International Registry of Acute Aortic Dissection, the center ranks second in the country.

That's partly because the center has a team of 30 highly skilled surgeons who specialize in aortic disease. That level of experience and a commitment to 24/7 readiness means that when an emergency room calls with a potential referral, the request is rarely turned down, no matter how complex the case may be.

"Minutes can count in these severe conditions," says cardiothoracic surgeon Derek Brinster, MD, director of aortic disease at Northwell Health. "No other hospital system in America has coordinated its emergency services and surgical resources on such a large scale to ensure that we're always ready to deal with them. We're committed to giving patients the most advanced care possible, right on the front step of their house."



Scan the QR code to learn more about Mather Hospital's comprehensive cardiac care.



A speedy fix for painful joints

What Mather orthopedic surgeons want you to know about hip and knee replacement

Do your knees lock up as you climb the stairs? How about your hips — are they stiff in the morning? Do you feel pain on the pickleball court? You're not alone. More than 52 million people in the U.S. suffer from arthritis, which occurs when the cartilage cushioning your joints breaks down over time. Knees and hips are the joints that most commonly cause trouble; they're more prone to injury as you age.

There are temporary solutions for hip and knee pain and decreased mobility — physical therapy, anti-inflammatory

medicines, “gel” injections and steroid shots, to name a few — but when the cushioning in the joint gets so worn that bone is grinding on bone, joint replacement may bring the most relief.

Michael Fracchia, MD, director of the department of orthopedic surgery, and orthopedic surgeon Brian McGinley, MD, have each performed thousands of hip and knee replacement surgeries at Mather Hospital, a nationally recognized leader in orthopedic care. Here’s what they want patients to know about these potentially life-changing procedures.

YOU’LL GET CUSTOMIZED CARE

Mather’s team is set up to handle your care from the doctor’s office to the operating room, and on through the end of rehab, says Dr. McGinley.

“Based on your X-rays and how you describe your pain, your surgeon will pinpoint what’s causing your symptoms,” he says. After that, you can expect a lot of discussion with your doctor about the best treatment for your specific issues. Patients don’t always need a joint replacement.

Education is an important part of the process at Mather. Surgeons often use a model knee to illustrate exactly what surgery entails and how it will relieve symptoms. You’ll learn how long the surgery and recovery will take, Dr. McGinley says.

“These discussions allow you to time the surgery so that it fits your schedule,” he says. “We know it’s important for you to have a plan that fits your life.”

Mather’s orthopedic surgeons will work with other members of your health care team to ensure the best possible experience and outcomes. Based on your medical history, they’ll recommend appropriate tests and medications beforehand, so things go smoothly on the day of your procedure.

“On operation day at Mather, your surgery will be done by a surgeon, not a resident or a fellow,” says Dr. Fracchia. “And your surgeon is going to take care of you for the entire time that you’re in the hospital.”



“We make a plan with all the data. Then our robotic system helps us enact that plan within a millimeter of accuracy.”

— Brian McGinley, MD

Mather recently earned The Joint Commission’s Gold Seal of Approval for Advanced Total Hip and Knee Replacement Certification. “That speaks to the success of our program and the quality that we provide,” Dr. Fracchia says.

INNOVATIONS MAKE SURGERY LESS DAUNTING

“We’re at the forefront of state-of-the-art orthopedics, and we’re nimble, so we can offer our patients the most advanced care,” says Dr. Fracchia. “Mather has always been a leader in computer-assisted and robotic surgery.” That includes using virtual reality technology to map out your anatomy during preoperative planning. Often, the team will create a 3D model of a patient’s joint, and use it to find the least invasive and most accurate way to place the implant.

“We make a plan with all the data,” Dr. McGinley says. “Then our robotic system helps us enact that plan within

a millimeter of accuracy.”

Thanks to the precision of robotic surgery, today’s knee replacement is kinder to your bones, taking only 9 millimeters — a little more than 1/3 of an inch — from your thigh and lower leg bones, he says. That’s done to smooth damaged bone and cartilage surfaces and make room for the new knee joint implant. Hip replacement takes more bone, but it is simpler, removing only the ball and socket.

Robotic technology also allows surgeons to preserve more of the muscles, ligaments and other tissues that keep your joints balanced and aligned. Minimally invasive surgery results in smaller incisions — typically 4 to 7 inches — that hurt less and heal faster, Dr. McGinley says.

Implants are also much improved today, says Dr. Fracchia: They’re smaller and made of sturdier materials, which move more naturally and better withstand wear and tear. That’s resulted in remarkable durability. Newer joints often last 20 to 30 years.

A STAY THAT’S SHORT AND SWEET

Most joint replacement procedures last about an hour. Patients typically have spinal anesthesia, which numbs the lower half of the body. They may also receive a nerve block — an injection that interrupts pain signals for several days after the procedure and decreases the amount of painkilling medication that’s needed. But thanks to less invasive surgical approaches, even patients who *don’t* get a nerve block frequently find they need only a short course of narcotic pain relievers after their procedure, or none at all. This reduces the risk of drug side effects and dependence, Dr. Fracchia says.

More than 92% of joint replacement surgeries at Mather are either a same-day outpatient operation or what’s known as a 23-hour procedure, where you arrive in the afternoon and leave the same day or the next morning. In either case, you’re back to the comfort of home sooner, with less risk of infection, Dr. Fracchia says.

Whether you have a hip or knee

replacement, you'll almost certainly be up and walking the day of surgery. After that, you may go to outpatient physical therapy for about three months, or receive a couple of weeks of in-home physical therapy followed by outpatient physical therapy. You'll work with your physical therapist to set goals and achieve them.

PATIENTS FIND THE RESULTS TO BE LIFE-CHANGING

Each year, Medicare reaches out to thousands of patients to find out about their surgery outcomes. "Hip and knee replacements are always ranked number one as the surgery that patients are glad that they had," Dr. Fracchia says. He himself frequently hears the rave reviews: "Patients give me a hug and say, 'You gave me my life back.'"

Some of his patients are overjoyed simply because they can go through their day with less pain. Others are



"Patients say that if they knew how much relief they were going to get and how easy it was going to be, they would have done it sooner."

— Michael Fracchia, MD

more ambitious. "I have a picture on my wall of one of my patients windsurfing in Hawaii after a hip and knee replacement," Dr. McGinley says. "The waves have to be 20 feet tall. It's inspiring." Others play hockey, hike or complete triathlons. Many return to active jobs after surgery; Dr. Fracchia has operated on plumbers, electricians, police officers and even other surgeons, he says.

The surveys do reveal one common regret. "A lot of patients report that they waited too long," Dr. Fracchia says. "They say that if they knew how much relief they were going to get and how easy it was going to be, they would have done it sooner."



Scan the QR code or call 631-986-4073 for more information about joint replacement or to make an appointment.





5 WAYS TO REDUCE INFLAMMATION

Chronic inflammation is common — and can lead to serious health problems. Here's how to put out the flames.

Everyone experiences inflammation now and then. When you sprain your ankle or get the flu, your immune system responds by releasing a flood of helpful white blood cells to repair what's hurt. That process is known as acute inflammation, and it eases once you've recovered. But conditions like stress, obesity or autoimmune disorders, such as rheumatoid arthritis, can also trigger inflammation — and in those cases, it doesn't ease up. It becomes chronic inflammation, which has been linked to serious health problems like diabetes, heart disease, Alzheimer's disease, inflammatory bowel diseases and cancer. Luckily, everyday actions can keep chronic inflammation under control or prevent it completely. Here are five things you can do today.



1. FOCUS ON FIBER

You've heard that fiber is good for digestion, but you may not realize how it helps tamp down inflammation. Researchers have found that beneficial bacteria in your gut microbiome — the trillions of good and bad bacteria that live in your digestive system — actually help train the immune system and keep it from overreacting. And many of those good bacteria thrive on dietary fiber.

The typical Western diet, which leans on processed foods, meat and added sugar, doesn't provide much of this crucial nutrient. In the U.S., 90% of women and 97% of men don't get the recommended 22 to 34 grams of fiber a day. On the other hand, the Mediterranean diet, which features plenty of fruits and vegetables, beans, whole grains, nuts and olive oil, gives the desirable microbes in your gut the fuel they need to flourish. Following a vegetarian or vegan diet can help reduce inflammation, too.

Boosting fiber in your diet is easier than you think:

- Switch to whole-grain cereal with fruit for breakfast, and whole wheat bread for sandwiches.
- Add a serving of vegetables to lunch and dinner.
- Snack on things like berries, nuts, baby carrots and hummus or popcorn (yes! It's a whole grain).
- Go meat-free at least one day a week.
- Read nutrition labels on packaged foods and choose options with at least five grams of fiber per serving.

2. MAINTAIN A HEALTHY WEIGHT

Being overweight or obese raises the risk of deadly conditions such as type 2 diabetes, heart disease, fatty liver disease, certain cancers and more. Why is extra weight so dangerous? The culprit may be fatty tissue and its connection to chronic inflammation, studies suggest.

Experts don't yet understand precisely how obesity leads to inflammation, but researchers have found one key mechanism: When a person becomes obese, their fat tissue doesn't just store energy — it also becomes active in the body's immune response. Fat cells produce and release pro-inflammatory cytokines, proteins that act like messengers in your immune system.

Those cytokines signal that something's not right, which triggers inflammation. Because the fat cells keep releasing cytokines, you wind up with low-level inflammation that doesn't go away.

Numerous studies have shown that losing a few pounds — even just 5% to 10% of your weight — leads to reduced inflammation. And it doesn't matter whether the weight loss occurs thanks to diet, exercise, bariatric surgery or the new GLP-1 agonist weight-loss medications: However you lose the weight, shedding those extra pounds should lower inflammation.



Easy changes can reduce chronic inflammation — and just might lower your risk of problems like diabetes, Alzheimer's disease and more.





3. GET MORE SHUTEYE

The link between inflammation and sleep may not seem obvious, but numerous studies have found that people who snooze less than seven hours each night are more likely to have chronic inflammation. Researchers have pinpointed multiple inflammatory markers in the body that soar in response to sleep deprivation.

One reason may be that sleep deprivation is linked to obesity. In one large study that followed almost 70,000 nurses for 16 years, participants who slept less than five hours a night had a 15% higher risk of obesity than those who slept seven.

Lack of sleep also messes with your gut microbiome. In one small study of healthy young men, just two nights of sleep deprivation changed the balance of bacteria in their guts.

So sleep matters — but, unfortunately, almost 37% of American adults don't get the recommended seven hours of sleep each night.

If you're among them, adjusting your sleep hygiene can help reduce inflammation:

- Follow a set sleep schedule, and give yourself at least 30 minutes of screen-free time to wind down before bed.
- Establish a nightly ritual of putting on PJs and brushing teeth, which helps signal your brain that it's bedtime.
- Set the bedroom thermostat to be comfortably cool, around 65 degrees.
- Keep any daytime naps short and limit them to the early afternoon.

4. FIND YOUR BALANCE

We're living in stressful times, which is no fun — and not very healthy. Chronic stress can lead to inflammation in several ways.

For example, stress triggers your body to release the hormone cortisol. A short-lived burst of cortisol actually decreases inflammation. But if your agitation doesn't go away, like when you're worried about how you'll pay the mortgage each month or are caring for a sick loved one, cortisol can trigger your body to produce more of those pro-inflammatory cytokines.

Reassuringly, stress reduction is an effective way to help lower markers of inflammation. In one study, 95 healthy adults attended a mindfulness retreat. Half were put into a group that practiced mindfulness meditation throughout, while the others just relaxed. After three days, both groups reported feeling less stressed — but testing found the meditation group had significantly lower cortisol levels, while the control group's levels didn't change much. Studies have also found that practicing yoga reduces levels of inflammatory cytokines.



5. GET MOVING

Regular exercise helps you maintain a healthy body weight and sleep better, and it reduces stress, so it's no surprise that research shows it also lowers inflammation.

In the last decade, researchers compared the effects of different kinds of exercise. They studied aerobic exercise (like jogging or swimming) versus resistance training (like push-ups and squats) versus combined training (both aerobic and resistance) versus high-intensity interval training (alternating bursts of more intense exercise, like running, with milder movements, like walking). Other studies assessed different kinds of workouts for post-menopausal women and for middle-aged, overweight or obese men; yet another looked at water aerobics for elderly people.

The results of all that research: No one kind of workout helped everyone — but in every study, exercise reduced inflammation. So pick the kind of exercise you like best, and aim for at least 150 minutes total each week. Include both aerobic and muscle-building moves.

Worried about inflammation?

Connect with a primary care doctor at Mather Medical Group. For more information or to make an appointment, call 631-616-8916 or scan the QR code.





Earlier this year, robotic surgeons and perioperative staff at Mather Hospital celebrated the care they've delivered to thousands.

A major milestone: 10,000 robotic surgeries

If you're having general surgery at Mather Hospital, there's a good chance your surgeon will be using a da Vinci robot during the procedure. Robotic surgery offers numerous benefits, including smaller incisions, reduced pain and scarring and faster recovery times. The most common robotic surgeries at Mather are bariatric and general surgery, followed by gynecologic, thoracic and urologic. "We are incredibly proud of the profound impact our robotic surgery program has had on more than 10,000 lives in our community," says Arif Ahmad, MD (center, left), director of Mather Hospital's Robotic Surgery Center of Excellence. "This milestone motivates us to continue pushing the boundaries of surgical innovation and providing the highest quality care for years to come."

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