Orthopedic surgeon brings latest in smaller-incision joint replacement
They taste so good, but some of those delicious drinks we love are loaded with calories, says UPMC Altoona registered dietitian Pamela Sepp.

Do you like those frozen coffee drinks? They can pack 300 calories or more. Calories often jump when you add alcohol. Frozen alcohol dessert drinks have 755-plus calories.

Think a frozen fruit smoothie is the way to go? That’s still 225 calories. “These frozen drinks really add up,” Pam says.

Even fruit juices, like grape juice and orange juice, have more calories than you’d probably think. A cup and a half of grape juice has 255 calories and the same amount of orange juice has 168. Pam says it’s better to eat the fruit instead because that way you get the fiber.

Sugar content may surprise you. If you really want the juice, make sure it’s 100 percent fruit juice that doesn’t have added sugar, and consider smaller servings.

Sweetened drinks cause most of the problems when it comes to gaining weight from drinks, Pam says. Sugar creeps into many drinks that may surprise people. When they eliminate those drinks, they lose weight. Sweetened tea at fast-food restaurants is one culprit, along with sugar in soda and sports drinks.

“Of course, everything is super-sized these days, which just makes it worse,” she says.

The solution is to make good choices and substitute better alternatives for sugary drinks.

The best way is to pick water to quench your thirst, Pam says. If you don’t like plain water, flavor it with a citrus fruit like lemon or lime. Also, think about how you take your coffee.

If you’re not someone who takes it black, try to use as little sugar as possible. For cream, try lower-fat alternatives like skim milk or 1 or 2 percent milk.

While you are planning your meals, be sure to include healthier drink choices and choose appropriate portions.

“It’s all about making good choices,” she says. “It’s about eating in a balanced, healthy way.”

Follow the ‘healthy plate’ plan

Pam likes the “healthy plate” plan, which means you start with a smaller dinner plate, 9 to 10 inches, and divide it in half. Then fill one half with non-starchy vegetables, like raw or cooked broccoli, carrots, and red peppers, and one-fourth with whole grains, like brown rice, beans, and starchy vegetables, such as corn and lima beans. The last quarter is for lean meats, like chicken, turkey, lean cuts of beef, fish, and meat substitutes.

Pam stresses the need to eat regular, well-balanced meals and get enough exercise.

“Just remember, all foods can fit as long as you practice moderation and portion control,” she says.

PROGRAM ALERT!
Don’t Put It on the Table Until You Read the Label
See calendar insert for details, dates, and times
Adrian Clayton, DO, is joining UPMC Altoona’s Elite Orthopedics and will bring with him the latest in minimally invasive hip and knee replacement and reconstruction surgery. He is skilled in practicing all surgical approaches for hip replacement — front, side, and back — and has expertise in complex surgeries as well as surgeries that require revisions.

Minimally invasive surgery (MIS) uses a smaller incision, resulting in less soft tissue trauma. Soft tissues connect, support, or surround other structures and organs of the body. Soft tissue includes tendons, ligaments, muscles, nerves, blood vessels, etc.

“With MIS, there is less tissue damage,” Dr. Clayton says. “With less tissue damage, there is the benefit of a quicker recovery time and less pain after surgery.”

Dr. Clayton will be the only fellowship-trained adult joint reconstruction surgeon on UPMC Altoona’s medical staff.

Handles complex cases

He recently completed his fellowship at the Rubin Institute for Advanced Orthopedics (RIAO) at Sinai Hospital in Baltimore. Dr. Clayton attended medical school at Lake Erie College of Osteopathic Medicine and completed his internship and residency at Memorial Hospital in York, Pa.

“My fellowship at RIAO was quite challenging,” he says. “It was a tertiary (highly specialized) joint center that received complicated cases from all over the country, even outside of the U.S. I was involved in many complex cases, including congenital hip dysplasia, severe joint deformity from previous trauma or replacement surgery, and significant joint infections.”

Dr. Clayton also treated a wide variety of arthritis (rheumatoid, osteoarthritis, post-traumatic), and osteonecrosis during his fellowship. Osteonecrosis is caused by reduced blood flow to bones in the joints. In people with healthy bones, new bone is always replacing old bone. In osteonecrosis, the lack of blood causes the bone to break down faster than the body can make enough new bone.

Focus on hip, knee

At Elite Orthopedics, the majority of Dr. Clayton’s practice will be joint replacement surgeries and primary and revision-type surgeries for the hip and knee. Revision surgeries are often performed on hip or knee components that are worn out, infected, or causing pain due to alignment issues. Revision surgery may also be done in cases where a joint replacement surgery is difficult due to previous fractures around a joint with hardware in place.

Additionally, Dr. Clayton will fix fractures and perform partial knee replacements, shoulder replacements, knee and shoulder arthroscopy, and minor hand surgeries.

“Many of the other graduates from my fellowship enter into academic medicine, likely due to the amount of research that is done,” Dr. Clayton says. “Others opt for practices in large cities due to the comprehensive training and access to a large patient population.

“I enjoy the small community setting and look forward to bringing my training to an area that might otherwise have to travel in order to have their orthopedic needs met.”

**Elite Orthopedics**

An affiliate of UPMC Altoona

**Contact:** Dr. Clayton begins seeing patients Sept. 29 in Altoona and Bedford. Elite Orthopedics has offices in Hollidaysburg, Altoona, Bedford, and Huntingdon. Appointments can be made by calling 814-889-3600.
Transplant patients applaud Altoona clinic

Makes entire process easier, improves access to UPMC program

Compared to traveling two hours to Pittsburgh, transplant recipient Dale Barnes prefers the convenient drive and easy access to multiple services at the UPMC Altoona Kidney Transplant Clinic at Station Medical Center.

He can drive himself to the appointments in Altoona, instead of needing his girlfriend and another friend to take him to Pittsburgh.

"I can get evaluated right here," says Dale, 59, of Duncansville. "It’s a relief for me. I don’t have to travel too far."

My girlfriend hates to drive in Pittsburgh traffic, so she would drive some of the way there, and then my friend would do the inner-city driving. He was always very willing to do it, but I felt I inconvenienced him."

Dale received a new liver Feb. 10 and is on the transplant waiting list for a new kidney. While he waits, he needs four hours of dialysis Tuesdays, Thursdays, and Saturdays.

Adding liver patients soon

"Between doctor appointments and dialysis, I always have something to do. I’m busier than when I was working," the former machine technician says. "But having this clinic in town takes some worry off my mind."

UMPC Altoona opened its Kidney Transplant Clinic June 10. Patients will have the transplant surgery in Pittsburgh and can be evaluated in Altoona before and after. The clinic sees kidney and pancreas transplant patients, evaluates potential live donor kidney patients, and plans to add liver patients soon.

The clinic saves time and money for the nearly 200 people from this region who are waiting for or who have had a transplant. It is easily accessible from Interstate 99; has the testing services transplant patients require, and offers reserved parking.

“This clinic brings specialized care closer to home,” says Jerry Murray, UPMC Altoona president. “It’s a tangible example of what our relationship with UPMC means to this region, and many more advances will follow.”

Clinic improves access

The clinic answers a community need, says Deb Maurer, transplant program administrator at UPMC.

“By having the clinic in Altoona, patients who may have been hesitant to explore transplantation in the past may now be interested in learning about the procedure because the only time they have to come to Pittsburgh is for the surgery. It improves access.”

The Pittsburgh transplant team includes six surgeons, six nephrologists (physicians who specialize in kidney disorders), a patient care technician, a nurse coordinator, and a social worker. Staff members take turns coming to Altoona.

Amit Tevar, MD, surgical director of UPMC Kidney and Pancreas Transplantation, says having a clinic in Altoona is “truly a move that puts patients first.”

Eases patients’ worries

“We’re pleased to be able to offer these pre- and post-op services to patients close to home,” Dr. Tevar says. “We realize it’s often a hardship for people to have to travel to see us in Pittsburgh, and having this clinic in Altoona not only reduces that burden but also eases their fears and worries about the entire transplant process.”

At the clinics, patients receive education about the transplant process and are scheduled for testing. UPMC Altoona at Station Medical Center offers what they need, including CT scans, bloodwork, and echocardiograms. They then visit with different members of the transplant team for evaluation.

A staff member escorts patients through each step in their evaluation.

“UMPC Altoona has embraced this,” Deb says. “Station Medical Center is an ideal ambulatory site at which to take care of patients. It has everything we need. It’s absolutely so convenient.”

“...having this clinic in town takes some worry off my mind.”
The integration of UPMC Altoona’s Radiation Oncology Department into UPMC CancerCenter will bring world-class cancer care, backed by best practices, leading-edge treatments, and cancer clinical trials, to our region.

“UPMC CancerCenter’s partner — the University of Pittsburgh Cancer Institute — is the region’s only Comprehensive Cancer Center as designated by the National Cancer Institute,” Dr. Schocker says.

The UPMC Altoona team is one of the largest and most experienced radiation oncology teams in the area. New technology and new talent will continually be added as UPMC Altoona works toward full integration with the UPMC system.

“A great example of this is our recent recruitment of Dr. Siglin,” Dr. Schocker says. “The potential is very promising and I look forward to the future.”

Cancer doctor brings new procedure to Altoona

A new radiation oncologist has joined Jack Schocker, MD, at UPMC CancerCenter Radiation Oncology at UPMC Altoona. Joshua Siglin, MD, began seeing patients in August.

In addition to general radiation oncology, Dr. Siglin will bring stereotactic radiosurgery (SRS) treatment to the Altoona area. SRS is a precise form of radiation therapy that uses concentrated radiation beams in high doses to destroy tumors in difficult or hard-to-reach areas.

The noninvasive treatment minimizes damage to surrounding healthy tissue and organs and requires no anesthesia or incisions. SRS treatments target tumors of the spine, head, and neck, including the brain.

A related treatment, stereotactic body radiotherapy (SBRT), is used by both Dr. Schocker and Dr. Siglin to deliver radiation to other areas of the body in a similar manner. Because of the high dosage, these treatments can be completed in a short period of time, sometimes in a single day. Currently, patients who can benefit from the advanced SRS treatment must travel to UPMC Shadyside or another out-of-area hospital to find an expert.

“I am delighted that Dr. Siglin has joined me and our physician assistant, Meghan Drago, at UPMC Altoona,” Dr. Schocker says. “Dr. Siglin just completed his residency at one of the premier radiation oncology teaching programs in the country. He is trained in the treatment of all malignant diseases, and has a special interest in advanced three-dimensional and stereotactic techniques.

“This will enhance our ability to provide the most up-to-date treatments to our patients.”

Dr. Siglin is a native of Pennsylvania. He received his medical degree from Thomas Jefferson University and completed his residency at Thomas Jefferson University Hospital in Philadelphia. He completed his internship at Easton Hospital.

About UPMC CancerCenter

UPMC CancerCenter connects patients across western Pennsylvania to the integrated expertise of leading clinicians, academic researchers, specialty programs, and treatment centers.

Through its partnership with the University of Pittsburgh Cancer Institute (UPCI), a National Cancer Institute-designated Comprehensive Cancer Center, UPMC CancerCenter is working to accelerate breakthroughs in the labs into clinical practice around the world.

Backed by the collective strength of UPMC and UPCI, UPMC CancerCenter is transforming cancer research, care, and prevention — one patient at a time.

For more information about UPMC CancerCenter Radiation Oncology, or to schedule an appointment, call 814-889-2400 or visit our websites at UPMCCancerCenter.com or FocusedonYou.com.
Severe asthmatic benefits from new procedure

Severe and persistent asthma robbed Garry Kensinger of his active lifestyle, but a new lung treatment returned him to doing what he loves: tending a 14-acre farm and raising goats for the local 4-H program.

Garry, 67, raked and replanted the large yard of his farm near Williamsburg — without any breathing discomfort — after having bronchial thermoplasty (BT), a new lung treatment for severe and persistent asthma.

“I can do things again,” Garry says. “I have a better quality of life. Now, I can clean my barn, carry an 80-pound bale of hay or a heavy feed bag, walk to get the mail, and handle my goats without shortness of breath. If I do become short of breath, my recovery is better, faster. I use my rescue inhaler once every couple of days. Before, I had to use it daily.”

Typical improvement

The improvements Garry notes are typical of patients undergoing BT, says Mehrdad Ghaffari, MD, Garry’s pulmonologist and medical director of UPMC Altoona’s Pulmonary Services.

He first used standard-of-care medications to help Garry, but Garry suffered repeated bouts of breathlessness, bronchial infections, and stays in the intensive care unit.

“The best candidates for BT are those that manage their asthma,” says Dr. Ghaffari. “They take their medications regularly, but they are still having significant problems. BT can have a significant, positive role in improving a patient’s quality of life.”

Garry’s asthma worsened in May 2012. Unable to do much of anything without triggering an attack, his life and his family’s lives revolved around his illness. Asthma changed the life of a man who had missed only one day in 30 years of working two jobs. In addition to farming, Garry worked in the quality control lab of the Sproul Specialty Plant yard until he retired in 2012. For the next two years, severe, persistent asthma required “dozens and dozens” of ambulance calls and trips to the intensive care unit.

Married for 48 years, Mary tears up when describing Garry’s limitations before the procedure.

Struggled to breathe

“Just taking a shower and getting ready in the morning would leave him struggling to breathe. After he showered, he’d have to rest before he finished getting ready. He couldn’t walk 10 feet without becoming breathless.”

The couple’s four daughters, sons-in-law, and eight grandchildren pitched in to help keep the farm going, says Mary, who also has two great-grandchildren. Garry recalls how he and his wife were moved to tears when they first learned of BT.

“I was so excited; I had hope again,” he says. The couple had no concern about Garry being the first patient treated with BT at UPMC Altoona.

“BT was our only option. We had no life before,” Mary says. “We had hope again where before we had none.”

Since his BT treatment ended in April, Garry’s symptoms continue to lessen and his asthma medications work better.

“He tells me every day that he feels better than the day before,” says Mary. “I thank God for Dr. Ghaffari; he’s an angel.”

What to expect with BT

“Asthma is a potentially deadly disease that needs to be taken seriously,” says Mehrdad Ghaffari, MD. “Most asthma deaths occur in younger patients who don’t take their medications regularly and then they have a sudden event.”

BT is an outpatient procedure that reduces excessive amounts of smooth muscle in the airway. Asthma attack frequency is reduced because the muscle’s ability to constrict is lessened.

BT treatment is appropriate for 5 percent to 10 percent of adult asthma patients with moderate to severe asthma, Dr. Ghaffari says.

But BT isn’t a quick fix, he adds, and requires patient commitment. Ultimately, BT can reduce the frequency of asthma attacks, help asthma medications work more effectively, and improve quality of life.

During the nine-week treatment process, a patient works closely with the pulmonologist and respiratory therapists to manage asthma symptoms and maintain breathing at optimal levels. BT is performed in three separate treatment sessions, three weeks apart — lower right lung, lower left lung, then both upper portions. One session lasts about 45 minutes to an hour.

Complications post-procedure are rare, Dr. Ghaffari says, but asthma symptoms are aggravated and require treatment immediately afterward.

This is why asthma must be managed well beforehand so breathing is adequate before BT treatment, says Stacy Hufman, a registered respiratory therapist. Baseline breathing measurements and treatments are taken the day before, and before and after the BT treatment.

A respiratory therapist makes wellness phone calls one, three, and seven days after BT treatment to watch the patient closely.
News from the UPMC Altoona Foundation

United Way awards grant to clinic

The United Way of Blair County has awarded a $12,000 grant to the UPMC Altoona Partnership for a Healthy Community. The grant is designed to enable patients of the clinic to learn about and purchase healthy foods through its market bucks program. Clients are given nutritional information and special market bucks to redeem at local farm markets for healthy dairy products, fruits, and vegetables. The aim is to encourage healthy lifestyle choices, reducing the need for medications and medical treatments made necessary by the complication of unhealthy eating.

“Improving one’s health through diet and avoiding the complications of weight gain and high blood pressure is a better outcome for patients than taking meds when the conditions are already present,” says Michelle Adams, clinical manager and author of the successful grant application.

“Clinic Medical Director Dr. Zane Gates and Michelle have been wonderfully effective in garnering grants in support of the clinic, which has served thousands of patients well,” says Tim Balconi, foundation president.

State renews black lung funding

The UPMC Altoona Foundation is pleased to announce that the Health Resources and Services Administration has renewed the funding to UPMC Altoona for the Pennsylvania Black Lung Coalition. The coalition will receive $750,000 over three years for services to patients suffering with pulmonary disease.

The coalition is a partnership with Windber Hospital and Blue Mountain Health System in Lehighton and has been serving patients in central Pennsylvania for over 10 years.

“We are pleased that our application was successful given that nearly 50 percent of the programs receiving funds for this type of disease were defunded in this highly competitive funding environment,” says Tim Balconi, foundation president.

Renee Henry, coordinator of cardiopulmonary and bronchial services at UPMC Altoona, cares for patients and directs the Black Lung Coalition. Her supervisor is Greg Madison, manager of UPMC Altoona’s respiratory and cardiology services. Both are respiratory care therapists.

Employees support foundation

Brittany Cunningham, a surgical technologist in the Operating Room, is a first-time donor to the employee giving campaign, It Starts with Us.

“Giving back to the place where I work makes sense. I know the money will benefit patients and our whole community,” the seven-year employee says.

New contributors to the campaign raised $4,598, which, combined with recurring gifts pledged, raised the gift amount to $19,002.

The campaign now has the largest number of employees giving through payroll deduction since it began.

“The foundation uses the funds for patient care items and to fund nursing scholarships,” says Tim Balconi, foundation president. “Our patients and staff benefit greatly from the generosity of our employees.”
In your new position at UPMC Altoona, what will be your duties and will you see new patients in Altoona?

As director of UPMC Altoona Ear, Nose, and Throat, my main responsibilities will be patient care and I welcome new patients. From the administrative side, I will assist UPMC Altoona in recruiting qualified physicians and physician assistants.

The goal is to develop a well-rounded, fully operational program in ear, nose, and throat, head and neck surgery, and facial plastic surgery for Altoona and surrounding communities.

Will you still see patients in your other offices?

Yes, I will remain in all of our present sites and will still provide consultation at HealthSouth Rehabilitation Hospital of Altoona. I will have to reduce the amount of time that I spend at these sites, however, to some degree. But I hope to add staff, including more doctors, to create a premium regional health care presence in the area that our offices serve.

What surgeries will you perform at UPMC Altoona?

Head and neck cancer surgery, minimally invasive thyroid surgery (which I have been doing for more than six years), advanced sinus surgery, minimally invasive surgeries in vocal restoration and esophageal disorders — those are some examples.

I am listed on the balloon sinuplasty website of Acclarent, which is the manufacturer of a balloon sinuplasty device, as proficient in both the operative and office environments for adults and the operative environment for pediatrics. Balloon sinuplasty surgery is similar to the technology used in balloon angioplasty.

In addition, my joining the UPMC Altoona staff will increase trauma care for the community as I will be able to help with facial trauma cases.

What would you like to say by way of introduction to the Altoona community?

I have had the opportunity over 19 years coming from Philadelphia to create centers of excellence in the field of ear, nose, and throat, head and neck, facial plastic surgery in several communities that did not have many of these services.

I hope with this experience and strong and committed staff we will be able to create an environment of excellence in Altoona and an atmosphere where patients will feel welcome and receive the best care.

Dr. Bilofsky is board-certified in adult and pediatric ear, nose, and throat conditions, head and neck surgery, and facial plastic surgery.

Originally from Philadelphia, he graduated from the Philadelphia College of Osteopathic Medicine (PCOM) and completed his residency in otolaryngology, head and neck surgery, and facial plastic surgery at PCOM. He trained at Buffalo General Hospital in New York for head and neck surgery. He also trained at Shadyside Hospital in Pittsburgh for advanced sinus surgery and facial nerve reconstruction surgery.

In 1995, Dr. Bilofsky left his private practice in Bucks County when Bedford Memorial Hospital recruited him. He has performed a wide range of surgeries there, including minimally invasive/endoscopic esophageal surgery, facial plastic/cosmetic surgery, sleep disorder surgery, and other innovative surgical procedures.

He received his board certification in 1995 and fellowship in 1999 from the American Osteopathic College of Otolaryngology-Head and Neck Surgery.

Dr. Bilofsky lives in Hollidaysburg with his wife, Kara, and their three children.