

Roper St. Francis Healthcare, MUSC plan rehabilitation hospital in Berkeley County

New 43-bed facility will support local communities

Staff Report

Roper St. Francis Healthcare and MUSC plan to build a 43-bed freestanding rehabilitation hospital on the campus of the future Roper St. Francis Berkeley Hospital.

With the continued growth and health care needs of Berkeley and Dorchester counties in mind, Roper St. Francis Healthcare and MUSC will join forces on the hospital, with RSFH serving as the managing partner.

“Health care systems across the country are finding new ways to come together to improve the health and well-being of the communities they serve, and working collaboratively on this future rehab hospital with MUSC is both a wise investment of our funds and an important step in making rehab more accessible to the community,” said Lorraine Lutton, president and chief executive officer of Roper St. Francis Healthcare.

The S.C. Department of Health and Environmental Control has identified the need for additional rehab beds in the community in its 2018-2019 South Carolina Health Plan.

“Patients always win when high-quality health care providers work together for their benefit, and this is certainly not the first time MUSC and Roper St.

Francis have collaborated on caring for our community,” said Patrick J. Cawley, M.D., MUSC Health CEO and vice president of Health Affairs, University. “We’ve

partnered for years on sharing rehab beds in downtown Charleston, so every patient seeking rehabilitation can be served, and we’ve also come together to help patients who suffered spinal cord injuries.”

Additionally, Roper St. Francis Healthcare and MUSC also collaborated on a stroke care initiative focused on sharing resources, clinical expertise and technology to improve and expand stroke care throughout the Lowcountry.

The cost of the proposed project has not yet been determined. Later in January, Roper St. Francis and MUSC plan to file a joint request to DHEC to build the rehabilitation hospital to offer comprehensive care including rehabilitation nursing, physical therapy, occupational therapy, recreational therapy, speech language pathology and rehabilitation case management.



Cawley

LUCKY BABY DELIVERED IN HORSESHOE



Photo by Son Nguyen

MUSC Health’s Patrick MacConnell delivered a bouncing baby boy at MUSC on Jan. 8 when the patient couldn’t wait.

BY JENNA LIEF

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For many, the new year brings the hope of exciting new possibilities. But for Patrick MacConnell, MUSC’s director of organizational excellence, he never could have predicted just how spontaneous those possibilities could be.

While walking to his office, he came face to face with a situation outside his realm of expertise. Nothing could have been further from his mind than delivering a baby just feet from the hospital’s doors. But on Jan. 8, during his routine early morning walk across campus, that’s exactly what MacConnell would do.

Around 8 a.m., an SUV raced

up to the entrance of the hospital, and a woman hopped right out of the passengers’ side. MacConnell thought to himself that this woman was obviously distressed and very pregnant, when right before his eyes, her water broke on the sidewalk. She actually had to use her hand to hold the baby from coming. It was clear she would not make it into the hospital, so MacConnell immediately jumped into action.

While his only real experience with childbirth was watching his wife give birth to their two children, he didn’t think twice about helping this complete stranger at one of the most important moments of her life. While a crowd of bystanders had gathered,

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Meet Stephen Betros
Why Digital Accessibility?
HCC mind-body class

MUSC first in state to test robotic bronchoscopy on peripheral lung cancer

MUSC among eight national sites to test bronchoscope

By HELEN ADAMS

adamshel@musc.edu

Lung specialist Nick Pastis, M.D., has high hopes for the new robotic bronchoscopy machine he's testing at MUSC. "This could really be a game changer," he said.

MUSC is one of only eight sites across the country taking part in a feasibility study testing whether the robotic bronchoscope can get to lung spots that are otherwise hard or impossible to reach and do a biopsy to see if they're cancerous. The device is the only one in South Carolina.

"It's a novel way to provide better access to peripheral lung nodules, which are on the outer parts of the lungs," Pastis said. "With Medicare's approval of lung cancer screening, physicians are being inundated with multiple lung nodules. We've been looking for safer ways to evaluate and diagnose. The best way to treat lung cancer is to catch it early, and this is part of that process."

Pastis, who is part of the pulmonary team at MUSC Hollings Cancer Center, said the procedure has already been approved by the Food and Drug Administration. "It has the opportunity to diagnose lesions in the periphery of

"The best way to treat lung cancer is to catch it early, and this is part of that process."

Nick Pastis, M.D.

the lungs with potentially a high success rate."

He hopes it will serve as a badly needed new option. "Other than surgical biopsy and more risky needle biopsies done with radiology, we struggle to find an alternative that's safe and effective. Bronchoscopy for peripheral nodule diagnosis has been a challenge."

While doctors have been able to use endobronchial ultrasound since the early 2000s to detect cancer between the lungs, the area called the mediastinum, spots on the periphery have been tougher to tackle. "There are a lot more airways and turns," Pastis said. "Your scope can't go through the lung. It has to follow the airways. So you're limited where you can get out to lesions."

He said the robotic bronchoscope, which uses navigation software, could change that. "We feel like this scope has the potential to improve on what we do

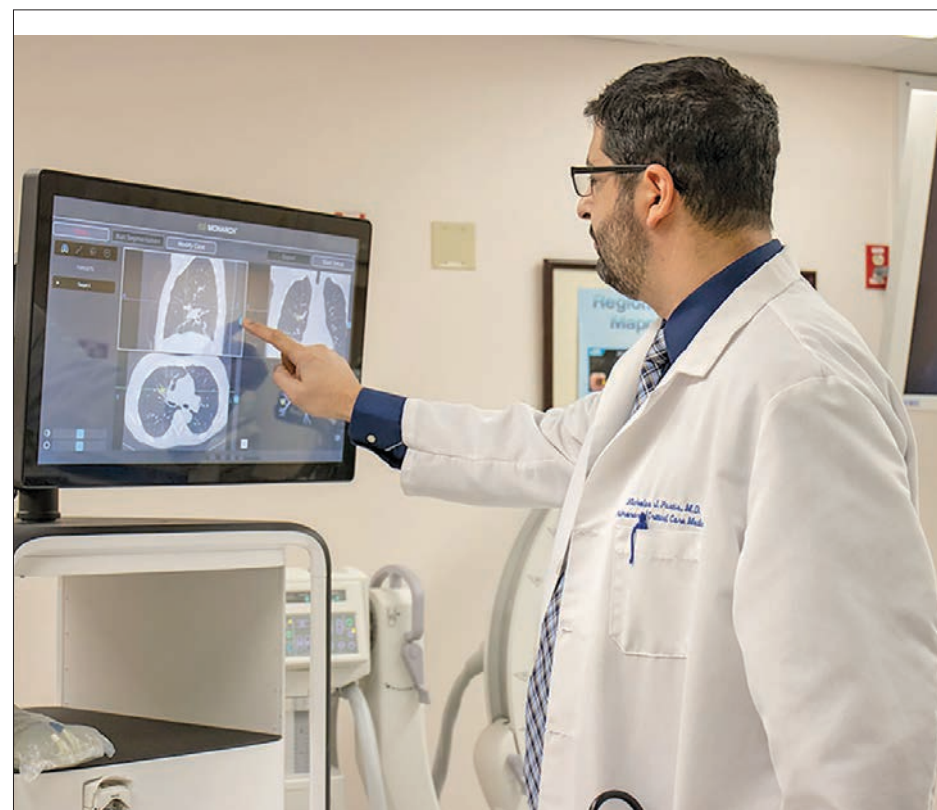


Photo by Emma Vought

Dr. Nick Pastis looks at images captured by a robotic bronchoscope, the first device of its kind in the state.

with bronchoscopy. It really anchors the scope in a distal position and it really gives fine articulation and reach out of the lung periphery that is superior to what we've seen before."

The MUSC study, led by Pastis' colleague Gerard Silvestri, M.D., is enrolling patients. "To qualify for this study, you'd have to have a lung nodule, a spot on the lung seen on a CAT scan between 1 and 5 centimeters, with suspicion that it could be cancer and not something else that would go away with antibiotics, like an infection," Pastis said.

Lung cancer is the leading cancer-related cause of death in American adults. The American Cancer Society estimates more than 142,000 Americans will die from lung cancer this year.

MUSC Health has a lung cancer screening program through Hollings Cancer Center, a National Cancer Institute-designated cancer center. Pastis encourages people who meet the criteria for screening to get checked.

For information about the robotic bronchoscopy trial, email Michael Balassone or call 843-792-6696.

MUSC CATALYST news

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RECYCLEMANIA

This February and March, MUSC is participating in RecycleMania: a friendly 8-week competition among Universities around the nation to see who can recycle more!

GET INVOLVED...

Recycle

- Learn what you can recycle visit: muscedu/gogreen
- Recycle correctly and encourage your colleagues to do the same

Trivia & Prizes

- Find these in the Catalyst, Yammer, Facebook, + Twitter
- Broadcast - Sustainability facebook.com/muscgogreen twitter.com/muscgogreen

Follow Along

- Track MUSC's ranking & progress on:
- Scoreboards around campus
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RECYCLE@MUSC.EDU



MEET STEPHEN



Stephen 'Stevie' Betros

Department; How long at MUSC
*Ambulatory Care—Patient Transportation;
 24 years*

How are you changing what's possible at MUSC

By meeting many people and providing them with friendly help

Pets

My dog, Ginger

What is your idea of a dream job

Working at a veterinarian's office

Favorite football teams

Notre Dame Fighting Irish, University of South Carolina Gamecocks and University of North Carolina Tarheels

Favorite place in the world

Hawaii

How would you spend \$1 million

I would go to the Master's Tournament at Augusta National Golf Club and attend other golf tournaments around the country.

MUSC WOMEN SCHOLARS INITIATIVE
 2019 EMINENT SCHOLAR AWARD RECIPIENT



**ELIZABETH
 BLACKBURN, PhD**
 NOBEL PRIZE LAUREATE

**Responses to Altered
 Telomere Maintenance
 and Regulation: from Basic
 Science to Human Health**

**Wednesday, February 6
 3:30 - 4:30 pm
 Bioengineering Building, Room 110
 68 President Street, MUSC**

Throughout her long career in science, Dr. Blackburn has been a leader in the area of telomere and telomerase research, having discovered the molecular nature of telomeres - the ends of eukaryotic chromosomes that serve as protective caps essential for preserving the genetic information - and co-discovered the telomerase enzyme, telomerase. She is also known for her championing of diversity and inclusion in the sciences. Currently, Dr. Blackburn and her UCSF research team continue their work with various cells (including human cells), with the goal of understanding telomerase and telomere biology. She and her research team also collaborate in a wide range of investigations of the role of telomere biology in human health and disease, through clinical and other human studies.

Born in Australia, Dr. Blackburn earned her B.Sc. and M.Sc. degrees from the University of Melbourne, and her Ph.D. from the University of Cambridge in England. She was a postdoctoral fellow in the Molecular and Cellular Biology Department at Yale University. Professor Blackburn has won many prestigious awards throughout her career including the Nobel Prize in Physiology or Medicine, the Albertus Medical Research Award for Basic Medical Research, and in 2007 was named one of TIME Magazine's 100 Most Influential People.

No registration necessary
 Please contact wsiinfo@musc.edu
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Kindergartners learn about community helpers at MUSC Children's Health

By LESLIE CANTU

cantul@musc.edu

MUSC Children's Health physician assistant Helen Kulseth rustled in her bag and pulled out a tool that most of the 75 or so kindergartners seated in front of her had probably seen at their doctors' offices.

"This one is a special one I use all the time," said Kulseth as she held it up for all to see. Kulseth specializes in ear, nose and throat disorders.

"It's something that's supposed to be for your ears!" a little girl piped up.

"Yes! You're so smart." Kulseth said.

"It's called an otoscope. Can you say otoscope?"

Kulseth asked the group.

"OTOSCOPE!" they chorused.

While Kulseth and colleagues from MUSC Children's Health spoke to the group on the first floor of Charleston Center, the construction headquarters for the MUSC Shawn Jenkins Children's Hospital, a construction team from Robins & Morton was upstairs talking to a second group. Almost 150 kindergartners from Midland Park Primary School in North Charleston were visiting Jan. 16. The medical and construction teams wanted to share with them how they do their jobs and what it takes to tackle a project like the new children's hospital.

"For me, the most important thing is we all work together as a team," said pediatric surgeon Robert Cina.

He said doctors, nurses, respiratory therapists, the cleaning crew, counselors and child life specialists all have a role to play to help kids get better.

"It's not just doctors and nurses," he said. "It's a huge team of people who work together."

Kindergarten teacher Chelsea Golliday said her class prepared for the visit by studying what doctors, nurses



Kindergartners from Midland Park Primary in North Charleston got to hear about the jobs of medical professionals and construction workers when they visited the site of the new MUSC Shawn Jenkins Children's Hospital.

Photos by Sarah Pack

and construction workers do. Visiting the hospital fits in with the state standards for learning about community helpers, and it also gets the kids thinking about what they might want to do when they grow up.

"We wanted to get them out into the community to start fueling that thinking and getting them ready to start thinking about their futures and the careers they want to have," she said.

It's also good for them to get a chance to talk to medical professionals outside of a doctor's visit or emergency, she said.

And the kids were ready and excited to share their knowledge. Not only did they correctly identify a stethoscope and a bottle of medicine that Kulseth showed them, but they knew they shouldn't drink any medicine unless it comes from a parent or doctor. They also knew not to stick small items up their noses or in their ears.

Radiology technologists Lakeisha Williams and Estella Smalls showed up with some X-rays of ribs, a broken arm, a broken leg and the same leg after it healed. Williams told them that if they ever needed an X-ray, all they would have to do is stay still and the technologist would quickly be done.

"It can be kind of scary, but you don't have to be scared. It's just a big camera," she said.

She also relayed a fun fact they could share with their families: From head to toe, people have 206 bones in their bodies.

Jake Thompson, a field engineer, and Hunter Picklesimer, a project engineer, both with Robins & Morton, talked about the importance of protective gear like hard hats, safety vests, gloves, safety glasses and boots.

They also talked about how math plays a part in their

jobs. The buildings they construct are all based on drawings, Picklesimer explained. To know what goes where, they have to add, subtract, multiply and divide numbers that are included on those drawings, he said.

Probably nothing about the visit topped seeing a forklift up close, though. But not just any forklift —

See VISIT on page 8



Radiology technologist Estella Smalls, left, holds up an X-ray while her co-worker Lakeisha Williams explains to the children what they're looking at.



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Digital accessibility: What you need to know now

BY CINDY ABOLE

aboleca@musc.edu

On Sept. 6, 2017, MUSC announced its new web accessibility policy to communicate the importance of ensuring accessibility for all the lives MUSC touches both internally and externally. The news was communicated in a letter emailed to employees by MUSC President David Cole, M.D., FACS.

Digital accessibility refers to providing anyone using or visiting MUSC's web pages or utilizing our materials electronically with as similar an experience as possible, regardless of the person's specific needs. This follows both state and national requirements for web accessibility, as described by the Web Content Accessibility Guidelines (WCAG 2.1) of the World Wide Web Consortium, applying to all content developed and used on the web.

In this issue of The MUSC Catalyst News (pages 6–7), employees, faculty and students who create and manage content on MUSC's webpages can learn about the institution's commitment to digital accessibility and inclusion and discover valuable tools and resources to help them follow and maintain these standards.

MUSC is committed to serving people with disabilities and maintaining a diverse and engaged community. Lisa K. Saladin, Ph.D., PT, executive vice president for Academic Affairs and provost, joins Cole and the executive leadership team in supporting the institution's commitment to accessibility in all enterprisewide communications. "MUSC values diversity and strives to provide the same experiences to a person with a disability as to a person without a disability. Senior leaders at MUSC fully support all efforts to make our digital products and services accessible to all of our stakeholders," said Saladin.

To ensure accountability throughout this process, MUSC established a campuswide accessibility task force to address priorities, discuss issues, explore best practices, create trainings and resources and provide

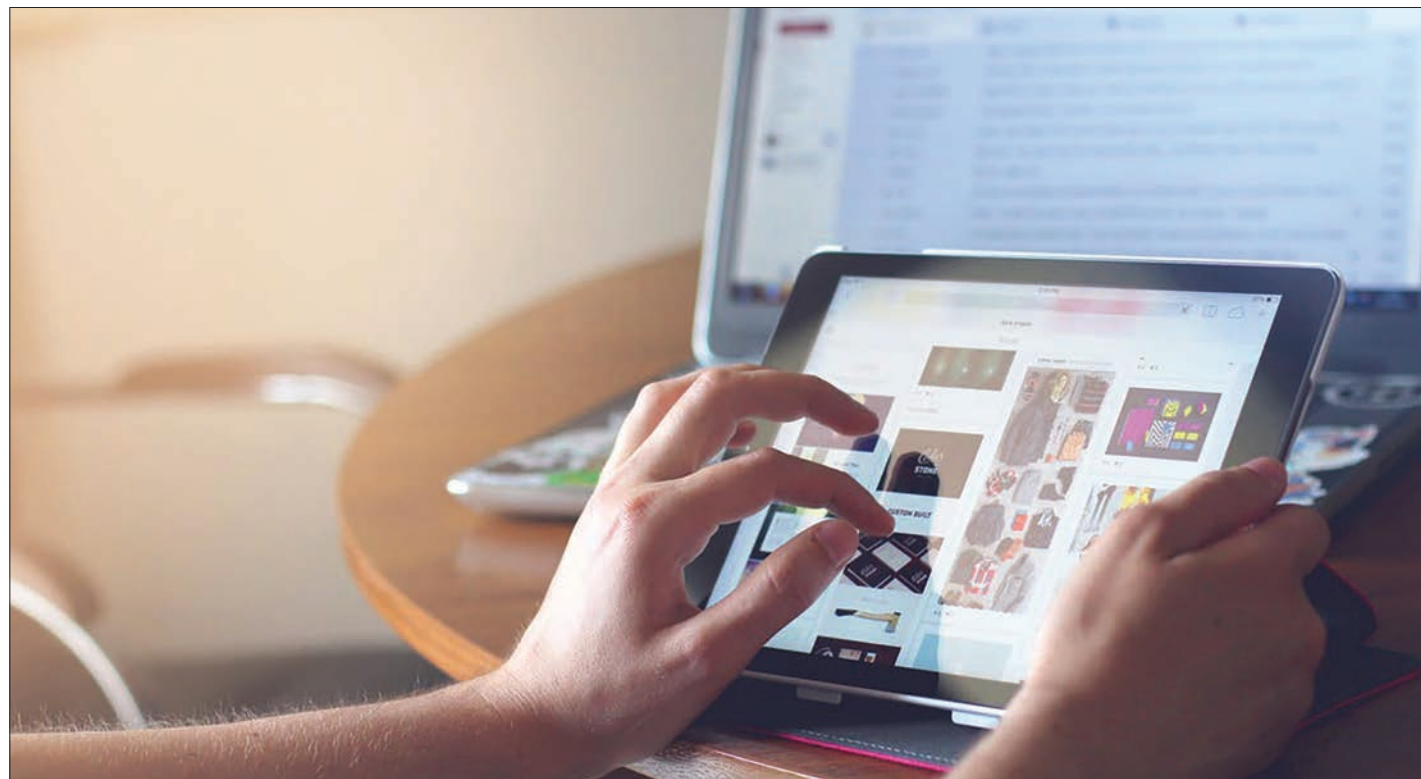


Photo provided

recommendations to leadership to ensure all communications are consistent with the institution's commitment to respect — one of the five core values of Imagine MUSC 2020, the institution's strategic plan.

Willette Burnham-Williams, Ph.D., University chief diversity officer, Department of Diversity, Equity and Inclusion, and Mary P. Mauldin, Ed.D., executive director, Office of Instructional Technology and Faculty Resources, are co-leaders on MUSC's accessibility task force and are committed to MUSC's focus on inclusion. "MUSC is creating an inclusive experience for the lives we touch," said Burnham-Williams. "Demonstrating and affirming our commitment to our core values includes removing barriers to access for community members with disabilities. Every MUSC experience — including the digital experience — must provide individuals with the opportunity to easily navigate in the digital world and experience all that we offer, while at the same time, bringing their full selves to experience it effortlessly."

MUSC's dedication to ensuring our

digital assets are available for everyone is the perfect example of the intertwining of our values and goals of Imagine MUSC 2020. "I am so proud to work where everyone is truly walking the walk and not just talking the talk, said Mauldin.

It is the responsibility of South Carolina state government agencies, including their web designers and developers, to be familiar with these accessibility guidelines and apply these principles in designing and creating content on state websites. That includes online training, electronic communications, social media, videos and printed materials created for MUSC.

Melissa Hortman, Ed.D., assistant professor and director of Instructional Technology and an accessibility task force member, believes that MUSC, as an institution, must be prepared to create content that can serve multiple audiences and needs.

"In today's digitally transforming world, content must be able to be consumed by a wide range of people with a wide range of abilities and disabilities. Although accessibility issues

revolve around the disabled population, users in general may benefit from it, too, as they enjoy a better experience," said Hortman, as she described two potential scenarios. First, a new mother is watching a lecture with the captions turned on, because there is a sleeping baby next to her. Second, a student with very low Wi-Fi bandwidth at home is accessing an instructor's digital presentation that possesses a lot of images that won't load. So, instead, the student reads the alt text, a word or phrase that appears in a blank box that would normally contain an image and that describes to the viewer the nature or contents of an image.

"As technology and people evolve, so must we in making our digital content accessible to all," she said.

In an effort to be compliant with the web accessibility policy, MUSC has been actively revising web pages to meet the WCAG 2.1 guidelines.

The Digital Strategy and Web Resources team is responsible for making MUSC website templates accessible.

*See **DIGITAL** on page 8*

DIGITAL ACCESSIBILITY FOR ALL PEOPLE | FOR ALL DEVICES

MUSC is committed to providing information that is accessible to everyone:

- › To offer equal access to information.
- › To make opportunities available to people with disabilities.
- › To ensure compliance with federal standards.

According to the World Health Organization, 1 billion people, or 15 percent of the world's population, experience some form of disability. The World Wide Web Consortium's international standards are a simple starting point to more meaningful change to documents and websites.



- › Digital accessibility is a journey, not a destination.



- › Set aside time each day to make small improvements.



- › Partner with others on campus to solve issues you uncover.



- › Make new content accessible before posting.



- › Invite users to give you feedback for improvements.

FOR MORE INFORMATION:

- › Tips and training are available in the Digital Accessibility catalog in MyQuest.
- › More tips and tricks on the Horseshoe accessibility intranet site: horseshoe.musc.edu/everyone/web-accessibility.
- › Contact diversity@muscd.edu for questions or concerns.

START WITH SMART DESIGN

- › Use good color contrasts and a readable, consistent font.
- › Use more than **color**, **bold** or *italics* alone to convey meaning.
- › Reading order should follow a linear, logical layout.
- › Use formatting like heading styles, sub-headings and bullets to break up information.
- › Write descriptive and meaningful headings and hyperlinks.
- › Add alternative (alt) text to all images, tables and graphs to explain what they are and why they are there.
- › Provide closed-captioning for videos.
- › Post on multiple social media channels since assistive technology works better on some than others.
- › Use limited acronyms, hashtags and abbreviations.
- › Write in plain language and design for varying levels of background knowledge so the reader can quickly identify, understand and use the message.
- › Not all Library content is digitally accessible so contact the Library for more information.



White lettering on some background colors can be difficult to read on monitor screens. Accessibility requirements call for certain sizing of fonts when using certain colors.



Screen reading devices can easily speak the content of any page, but care must be taken to ensure page content is spoken in the proper sequence.

Headline
Subhead
Body Text

Properly formatted and tagged content helps viewers using screen reading devices to easily skip to areas of interest within a page.



Adding alt text to page elements ensures viewers with low visibility are able to access descriptions of images on their screen reading devices.



Providing closed-captioning is essential for those with hearing difficulty to access video content.



Target your messaging to be easily accessible to a wide range of viewers, accounting for differing levels of knowledge or education.

DIGITAL *Continued from Page Five*

This team reviews color templates using brand-appropriate colors, font sizes and tabbing order of pages and forms. Team members also serve as resources for others to use the recommended tools and resources to maintain files, PDF documents, videos, social media posts, podcasts and other links in their departments or college websites and pages.

Christine Gainer is also a member of the accessibility task force. Gainer is a web content quality and training expert in Information Solutions. “While we can put a rough dollar value on having accessible websites, as evidenced by the many multi-million dollar lawsuits that are going through the courts, that’s not the reason to ensure our sites are available to everyone,” said Gainer. “Our purpose is to serve the public by providing innovation, education and health care services, and one of our strengths at MUSC is inclusion. Given that our websites are viewed by approximately 27,000 visitors per day, how many hundreds or thousands of them should we be willing to exclude from receiving our content? I believe the answer is none.”

For information about MUSC’s commitment to digital accessibility, visit the MUSC intranet site at horseshoe.musc.edu/everyone/web-accessibility or contact the MUSC Office for Diversity and Inclusion at diversity@muscd.edu.

BABY *Continued from Page One*

there he was by himself, crouched down on the sidewalk, about to bring a baby into this world. It was quite a scene, he said. Very special.

The mom gave one push, and seconds later, on the chilly MUSC sidewalk, he was holding a healthy baby boy. Quickly, medical assistance arrived, and they whisked the woman away in a wheelchair while she hugged her newborn. MacConnell took a deep breath and continued his walk to his office, as if it were any other day.

While the entire experience lasted less than seven minutes, it’s not something he will soon forget. MacConnell has lasting impressions, not the least of which was the responsibility that comes with working on such a large medical campus, where anything can happen at any time. This gave him a new perspective on what it means to work at MUSC.

“You have to be ready,” he said, “because on a campus this big, where the patient population is so diverse, at any

time you could encounter someone who is in need of something. And even if you are not the one to be able to help them, you do have to be ready to point them in the right direction to get the help.”

Many hailed MacConnell as a hero for singlehandedly saving the day. He acknowledges his lack of experience, but others saw nothing but commitment. “My background is clinical – I’m a therapist by training – but certainly no obstetrician,” he laughed. “As an employee at MUSC, I believe it is my responsibility to help those in need and hope my co-workers and I will be ready to do so in the future.”

VISIT *Continued from Page Four*

Robins & Morton’s 5-ton forklift has a boom that can raise up 45 feet into the air. The kids – and the adults – oohed and aahed and craned their necks as the boom went up and up and up.

The MUSC Shawn Jenkins Children’s Hospital and Pearl Tourville Women’s Pavilion is scheduled to open in the fall, though construction should be complete in May.

Five Questions About Digital Accessibility

1. What is digital accessibility?

Just as we strive to make our physical world accessible to everyone by including wheelchair ramps on buildings and providing sign language interpreters at public events, we need to design technology so that our content can be accessible to everyone.

2. Why do we have to do this if we don't have students/employees with disabilities?

We actually do have students, employees and visitors with disabilities. While some people disclose their disabilities to MUSC, they are not required to do so. However, MUSC is required to be accessibility compliant whether or not we are aware of people’s disabilities.

3. Is there an MUSC policy on accessibility?

There is not a formal policy, but there are approved guidelines. MUSC has aligned its guidelines with the federal Web Content Accessibility Guidelines (WCAG) 2.1 AA and is updating existing pages and files to bring them into compliance with these guidelines. For more information on the guidelines, please see the World Wide Web Consortium’s WCAG 2.1 document at <https://www.w3.org/TR/>

WCAG21/. This is a guide to understanding and implementing web content accessibility guidelines.



4. Where can I find self-serve resources?

A great place to start is the Accessible Technology Horseshoe Intranet page, which is located at <https://horseshoe.musc.edu/everyone/web-accessibility>. Here you will find information and links to help you create accessible documents, web content, videos, social media posts and a variety of other things. You will also find a link to the MUSC color palette.

You can also find another resource for accessibility compliance in a MyQuest learning platform catalog called Digital Accessibility Resources. Visit muscd.netdimensions.com and type in Digital Accessibility Resources into the catalog search on the left side of the web page.


5. Who is responsible for content owners' adherence to guidelines and implementation?

All digital content owners and producers bear the responsibility for ensuring their content complies with federal accessibility guidelines. The Digital Strategy and Web Resources team will notify owners of materials not in compliance and give them a deadline to make corrections.

MUSC & MUSC Health 2019 Employee Survey

January 14 – 28




- **Date:** January 14 – 28, 2019 (survey closes at 5:00 pm on the 28th)
- **Time:** At your convenience
- **Location:** Check your @muscd.edu email on January 14, 2019 for an email from Press Ganey with the link to the survey
- **Who:** Survey is open to the entire MUSC enterprise

**Your opinions are important.
Take a few minutes to tell us what you think.**

If you have questions, ask your Manager or any Survey Ambassador for more information!

Visit <https://www.musc.edu/employeesurvey> for more information

Version: v2019 – updated 121718



MUSC offers free virtual health care visits to furloughed federal workers

Free online medical visits for S.C. federal employees

Staff Report

As the federal government shutdown continues past the 30-day mark, health care providers at MUSC are offering online medical visits at no charge to all South Carolina-based federal government employees through the duration of the shutdown. The MUSC Virtual Care program can address approximately 80 health issues.

Employees affected by the federal government shutdown who need care are encouraged to use the promo code MUSCCARES4WORKERS to access virtual care services at <http://www.muschealth.org/virtual-care>.

No matter how old the patient is, MUSC Health Virtual Care is for non-emergency, non-life threatening conditions only, when the illness, injury or issue does not require an in-person visit.

To use MUSC Health Virtual Care:

Go online, register and get an email confirming the registration. You'll see a form asking if you have a serious problem such as chest pain or excessive bleeding. If you do, you will get a message saying Virtual Care is not right for you, and a doctor needs to see you in person. If you don't have a serious problem, you will then see a list of categories.

Choosing from the list of categories, you will decide if you want to do an online interview, which involves

Virtual Care Categories

- ☐ Respiratory infections and allergies
- ☐ Eye, ear and mouth problems
- ☐ Skin and nail problems
- ☐ Insect issues such as lice and tick bites
- ☐ Medication to help you stop using tobacco
- ☐ Stomach problems
- ☐ Injuries and pain such as sunburn and lower back pain
- ☐ Medication refills
- ☐ Sexually transmitted diseases

answering basic questions about your symptoms and uploading photos if needed, or a video visit that lets you see the doctor on your computer screen for a live consultation. Either way, at the end, if you need a prescription, you'll get one.

MUSC Health Emergency Department doctors, nurse practitioners and physician assistants handle all virtual care visits. The service is available 24 hours a day, seven days a week.

Service of Remembrance Event planned Jan. 27, St. Luke's Chapel

An interfaith Service of Remembrance to honor patients who died at MUSC between April 1 and Oct. 31, 2018 will be held at 3 p.m., Sunday, Jan. 27 at St. Luke's Chapel. All are welcome.

UNFURNISHED RENTALS



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HCC rolls out new mind-body class to help cancer patients

By DAWN BRAZELL

brazell@musc.edu

This month the MUSC Hollings Cancer Center will be rolling out a new mind-body class customized for cancer patients and cancer survivors to enhance their health and wellness.

The first class will be held Monday, Jan. 28 at 4 p.m., and then they will be held the third Monday of the month at Hollings Cancer Center on 86 Jonathan Lucas Street.

Gail Corvette says she was thrilled when she was asked if she would teach the class. A yoga instructor at the MUSC Wellness Center, Corvette already offers mind-body classes for the Survivors' Fit Club, a wellness program for breast cancer survivors that Hollings Cancer Center offers in partnership with the Wellness Center.

Corvette says the feedback she gets from participants is gratifying. Understandably, cancer can generate

fear and anxiety for many people. This one-hour class focuses on easy movement patterns and meditative practices to help participants become centered and feel a sense of calm, she says.

"We teach them how to breathe consciously, observe their thoughts and calm their minds. I think mind-body classes can really help in their healing journey. It's one great tool in their tool kit that we can use to heal this disease. It can help them feel more at ease and be better able to accept what is happening. It can help them cultivate hope."

Spearheading this pilot class is Tara Lock, administrator for the Oncology Integrated Center of Clinical Excellence at Hollings Cancer Center, which is one of 70 NCI-designated cancer centers in the nation. The class is the latest addition to other support services already being offered, including pet and art therapy, psychological consults and financial counseling. What drew Lock to offer this class is the need she sees in the community.



Photo by Emma Vought

Gail Corvette, a yoga instructor at MUSC Wellness Center, will be leading a new mind-body class at Hollings Cancer Center.

Lock says, "It's about quieting the mind and helping patients and survivors lose some of the fear that can surround a cancer diagnosis. We want to bring more

See CLASS on page 11



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CLASS *Continued from Page Ten*

of a mind-body element to a patient's treatment."

Corvette says her hope is that participants will take what they learn in class and practice the skills at home at least once a week to reduce the stress they may be feeling. "What we're doing is giving them a taste and giving them the tools. We're also building community, allowing people to meet others going through the same thing. There's a different energy when you're in a group doing this mindfulness practice."

Part of teaching a mindfulness practice is creating space for participants to more easily tap into what's going on in their bodies. "It's important to get out of the past of why did this happen to me or feeling like a victim. You can feel more empowered and have more hope when you are feeling more centered in your being."

The class also will incorporate gentle strengthening and stretching movements and will be accessible for all fitness levels. "It's important to keep moving in whatever way you can. Motion is lotion as they say in the arthritis field. I will really tailor the class for whomever shows up," said Corvette.

There's a growing body of research that shows that this type of practice can help. Corvette refers to a study on prostate cancer and lifestyle changes by researcher Dean Ornish, known for similar work on reversing heart disease, that found intensive lifestyle changes may affect the progression of early low-grade prostate cancer.

The American Society of Clinical Oncology, a professional organization of cancer doctors, endorsed guidelines last year supporting certain integrative therapies like meditation and yoga as evidence-based ways to manage symptoms and side effects of conventional breast cancer treatment.

Laura Beck, who was diagnosed with breast cancer last spring, is glad to see Hollings Cancer Center offer a mind-body class. She took one of Corvette's mind-body classes as part of Survivors' Fit Club. "The program was great because it surrounded me with like-minded survivors who became friends and because it got me moving again,"


Beck says.

"Gail's class was positive and uplifting. She understood that we might have individual limitations and helped make sure we were comfortable with the yoga positions. It wasn't too strenuous, so we could all participate. She talked about mindfulness and helped lead us to better understand what that means. She could relate to what we had all been through with the range of emotions that accompanies this kind of illness."

Though she really enjoyed the stretching, Beck says one of her favorite parts was learning the tools to cope with the anxiety. It's hard not to dwell on the what-ifs and the whys with a diagnosis like cancer, she says.

"Being able to learn to live life despite the diagnosis can be a challenge. Not letting it consume you, especially early on, is hard. Learning to relax, to breathe, to control your thoughts, to focus on the now, to move your body healthily is tough under any circumstances. I think being surrounded by other cancer patients and survivors in a class such as Gail's is a great thing because you know everyone there is dealing with something, and no one is judging you."

For more information, email corvette@musc.edu. To register, visit: hollingscancercenter.org/patient-care/patient-resources/mind-body.



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Jan 28 — Segment #1

Topic: Parkinson's Disease & Exercise

Guest: Dr. Marian Dale

Neurologist Dr. Marian Dale talks about specific exercise routines to help patients with Parkinson's disease. Dale is an assistant professor of neurology and is a practitioner in MUSC's Movement Disorders Program.

Jan. 28 — Segment #2

Topic: Addressing Mental Health Care Needs of Children Following a Pediatric Traumatic Injury

Guest: Dr. Leigh Ridings

Clinical psychologist and postdoctoral fellow Dr. Leigh Ridings addresses mental health care needs of children (and their caregivers) following a pediatric traumatic injury and hospitalization.

Feb. 4 — Segment #1

Topic: Research Related to Epigenetics and Substance Use Disorder

Guest: Dr. Christopher Cowan

Neuroscientist Dr. Christopher Cowan will discuss research that he's doing to understand the role of epigenetics in substance use disorder and relapse. Cowan is the William E. Murray SmartState Endowed Chair in Neuroscience.

Feb. 4 — Segment #2

Topic: Immunizations for Older Adults

Guest: Dr. Elisha Brownfield

Division of Internal Medicine associate professor Dr. Elisha Brownfield will talk about the importance of specific vaccinations that are recommended to prevent infectious diseases and complications in older adults.



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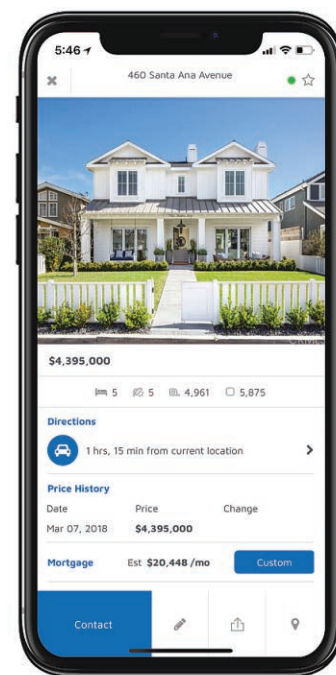


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