# MUSC CATALYST NEWS

**JANUARY 13, 2023** 

MEDICAL UNIVERSITY OF SOUTH CAROLINA

VOL. 38, NO. 1







Photos by Sarah Pack

#### We're not quite sure what's going on above, but it appears Bryce stuck the landing.

**EDITOR'S NOTE:** This is the third in a series of regular columns by MUSC writer Bryce Donovan. "Trust Me, I Know a Doctor" takes us inside Bryce's mind as he experiences the interesting aspects of life at MUSC, all told through his own lighthearted lens.



Ah, the new year.

That wonderful time when, after 12 consecutive months of questionable decisions ...\*cut to\*

#### Bedroom

ME: "Honey, I went ahead and set a second alarm for tomorrow morning. We are NOT missing that flight." \*laughs triumphantly, closes calculator app\*

#### Pet store

ME (to kids): "You know what? Yes. Let's do it. I mean,

who ever regretted getting a ferret?"

#### Elevator

MY BRAIN: "Relax. It'll be fine. Let it rip. No way anyone hears it."

... we get a fresh start.

A chance to try new things. Eat healthier. Watch less TV. Wear pants during my, er, your Microsoft Teams meetings.

The clock striking midnight on Dec. 31 is like the ultimate do-over for adults.

And for the first few hungover minutes of that next morning, the world is your oyster. The sun is shining. The birds are singing. Endless possibilities await. And then you stub your toe on the Peloton/clothes rack in the bedroom and shout a word that, up until this point in your life, you've only heard Andrew Dice Clay utter. Your kid starts crying. You soil yourself. HAP-py new year. (\*cue "Auld

See Trust ME on page 3

# COVID update: High rate of transmission, more hospitalizations and a wild card

By Helen Adams

adamshel@musc.edu

During what the South Carolina Department of Health and Environmental Control is calling a surge in COVID cases, new number crunching gives an updated picture for much of the state. MUSC's COVID-19 tracking team just released its weekly assessment, and its leader summed up its findings this way: "There's a high rate of transmission happening."

That leader, Michael Sweat, Ph.D., also noted a couple of other factors to keep an eye on for the next several weeks during the surge: rising hospitalizations and the variant XBB.1.5.

#### New numbers

Sweat's team takes data from DHEC, analyzes it and offers perspective in weekly updates published online. This week's numbers suggest that what's been happening in North Carolina, which has high levels of COVID, according to the Centers for Disease Control and Prevention, is moving geographically into South Carolina.

The MUSC team found:

☐ The Charleston Tri-county area, which includes Berkeley, Charleston and Dorchester counties, saw a 2% increase compared with the previous week. It had 22 reported cases per 100,000 people. Sweat said the real number is probably at least six times higher since self-tests aren't included in the count.

See **UPDATE** on page 2

Heart stopper
Expert talks about NFL player's collapse.

Surgical innovation

New center embraces Al

for improved outcomes.

- 5 Meet Angie Brown
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- 9 Health & Well-Being

#### UPDATE Continued from Page One

- ☐ The Florence area, which includes Florence, Marion, Darlington and Williamsburg counties, had a 32% jump in cases. Sweat's team called that a rapid increase. It had 36 reported cases per 100,000 people.
- ☐ The Lancaster metro area, which includes Lancaster and Chester counties, dropped 5%. It had about 31 reported cases per 100,000 people.
- reported cases per 100,000 people.

  The Midlands area, which includes Fairfield, Kershaw and Richland counties, went up 23%. It had 41 reported cases per 100,000 people. Most of South Carolina has high (red) or medium (yellow) levels of COVID right now, according to the CDC.

"For red, the CDC recommends you wear a mask. And for yellow, they say it's optional. But if you're around anybody who is at risk, then you should wear a mask. I think we're going go to red soon," Sweat said, referring to the Charleston area.

"The data is speaking. It's saying we're probably at a point where it would make sense for people to take precautions for a short period of time. These peaks typically come relatively quickly. You know, it's probably six to eight weeks."

#### HOSPITALIZATIONS

Sweat said one key component of the CDC's color-coded alerts is based on hospitalizations for COVID-19, and that is what is primarily turning so many counties to red status. That's important right now because hospital numbers are on the rise again. "We had a 31% increase in hospitalizations of people with COVID-19 last week in the Tri-county area."

Nationally, hospitalizations are up, too. The CDC's most recent numbers showed a 16% increase compared with the previous week.

"We're beyond the point where you're going to see hospitals collapse, which parts of the country went through, more or less. And the mortality is much lower than it once was. But COVID is still killing more than 500 people a day in the United States. It's way more deadly than flu," Sweat said.

"Most people who are younger, particularly if they're vaccinated or have had an infection, will have mild cases. But they can pass it along to more vulnerable people who are really at risk."

#### XBB.1.5, "THE KRAKEN"

A new subvariant nicknamed "the Kraken" — a fearsome mythical sea monster that rises up unexpectedly — may be driving some of those hospitalizations. "It's a real wild card," Sweat said.

"That variant's parent, XBB, when it hit Singapore, it just exploded. They had higher vaccination rates than we do, and they had prior waves, too. So they were probably better off than we were. And they just had explosive — a massive outbreak occurred in the

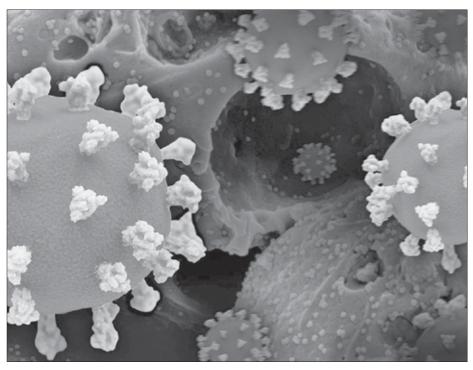


Photo by the National Institute of Allergy and Infectious Diseases An illustration by the National Institute of Allergy and Infectious Diseases of coronavirus particles.

country very quickly."

XBB's offspring, XBB.1.5, is already in the United States. "It then popped up in the New England area — in New York and New Jersey and Vermont. And now it's 27.6% of all cases in the U.S. but over 70% now in the New England area. I mean, it grew so quickly. It's growing like Omicron did. But even worse."

It's unclear if the new subvariant has arrived in South Carolina. "It's very transmissible, and it outcompeted the other variants. So that's what you would expect to see. There's no question we're going to have it. We may have it now. We just don't know because we aren't doing much sequencing."

Sequencing involves looking at the genetic makeup of COVID samples to see what strain they are.

Early studies suggest bivalent vaccine boosters should help in the fight against the new subvariant. But Sweat said unfortunately, too few people are getting them. "Just getting that one more dose would make a big difference."

## MUSC news

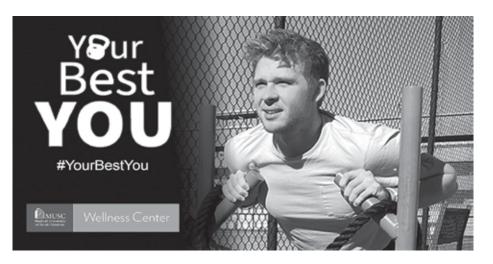
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The MUSC Catalyst News is published bimonthly. Paid advertisements, which do not represent an endorsement by MUSC or the state of South Carolina, are handled by Island Publications Inc., Moultrie News, 505 Belle Hall Pkwy, Suite 202, Mt. Pleasant, S.C., 29464; 843-958-



#### TRUST ME Continued from Page One

Lang Syne"\*)

Just kidding. Generally speaking, this doesn't happen in our house until a few days later. Which means, for most of us, there's a tight window at the beginning of each year when most of us are open to improvement. And that's where resolutions come in. This year, I've chosen what is easily the most cliched of them all: to get more exercise.

Now this isn't completely out of the blue. I mean, once upon a time, I actually used to be athletic. Growing up, I played competitive tennis, baseball and soccer. I was on my college golf team. After school, I got into longdistance running.

Then I had kids and gave up everything that gave me joy athletics.

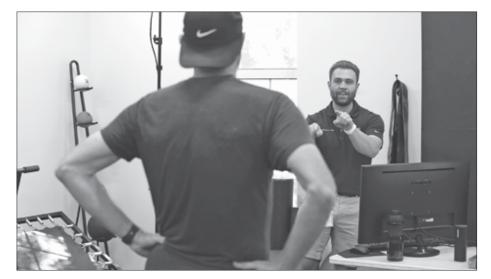
That is until recently. With my children getting a little older (they're 9- and 12-years-old) I've suddenly found myself with a bit more free time. So I've gotten back into running and tennis. And with that has come additional benefits. Like, more fresh air. More sunshine. It's even led to a few new friends. The only downside seems to be that after tennis, my shoulder hurts; after a moderate run, my knees ache. Sure, getting older has a lot to do with it, but after talking with MUSC Health human performance manager Michael

Sole, my questionable hygiene might also have something to do with, wait, no, it was technique. He said technique. That might also be part of the issue.

"Our bodies are designed to move in certain ways," he told me when we first met. "For instance, yours seems to want to move toward the couch." OK, so he didn't say the last part. But only because he's too nice. I'm sure he was thinking it. Because if there's an expert on movement, it's Sole. Though he has the face of a 25-year-old, don't let that fool you. For nearly a decade, the affable personal trainer has worked with collegiate and professional athletes, the last six years of which he spent with the New York Yankees. So yeah, the guy probably knows what he's talking about.

"But don't just take my word for it," he said. Instead, he invited me to MUSC Health's Health and Wellness Institute in Mount Pleasant to try out a new FDA-approved technology called DARI Motion. Though still relatively new, it's already being utilized by Olympic athletes, NFL players and college athletic programs across the nation. It operates by using eight high-speed cameras, proprietary motion-capture software, cloud processing analytics and lots of other really cool terms I copied from their website.

After arriving at the center in my best workout jorts, Sole put me through a



Michael Sole tells Bryce what motions to do, while he can keep tabs on himself using the display.



Photos by Sarah Pack

## Bryce is surrounded by the eight cameras and his own low self-esteem.

series of motions, jumps, lunges and balancing acts. The fancy cameras catch every single motion, and on a big display in front of you, there's a stick figure mirroring your every move in real time. After maybe 15-20 minutes, Sole - along with the DARI supercomputer and its high-powered software – were able to spit out lots of fancy analytics with names like "explosiveness" (non-lavatory) and "dysfunction," to summarize my body's flexibility and movements. Or, in my case, lack of flexibility. By delving into the data, Sole was able to highlight ways I could improve my body motion as well as areas where I might be most prone to iniurv.

And though I know I've seen better days physically, without bragging I think I can safely say I'm one or two rungs above Danny DeVito on the inferred athleticism scale. So, at the end, when the program settled on a "motion age" of 21, as compared with my birth age of 47, it was quite the ego boost.

As is typically the case with me, I handled the good news with dignity and class.

ME: "TAKE THAT, SOLE!! HA! I AM INVINCIBLE!!"

SOLE: (calmly holds up index finger, covers bottom of phone) "I'm on hold

with DARI's technical support to report a broken machine."

OK, so that didn't happen. (The second part. And the first part might have been a little longer. And I might have taken off my shirt and jumped on a coffee table in the lobby.) In fact, Sole seemed to be somewhat impressed with my abilities. At least that's how I interpreted him scratching his head and saying, "No way!"

But all of that aside, here's the best part: Sole's services and the DARI Motion experience are available to anyone. That's right, I'm talking to you, reader/Dad. You don't have to be a professional athlete — or even a middleaged medical writer — for that matter. For a small fee, you, too, can now find out why your back hurts after playing pickleball, or, if you're like me, simply getting dressed.

As for what I plan to do with this cool new data? I'm still not sure. But I do know this: I have a sneaking suspicion that 2023 might just be the year I stick with my New Year's resolution the whole way through. And if not, there's always the bright side — at least I'm finally old enough to buy alcohol. At least motion—wise.

Got an idea for Bryce's next column? Send him an email at donovanb@musc.edu.

## 'Golden two minutes': Player's cardiac arrest shows importance of immediate action

EDITOR'S NOTE: Since this story was posted, NFL player Damar Hamlin has been released from the hospital and is recovering at home.

#### By Helen Adams

adamshel @musc.edu

Like football fans across the country, cardiologist Jeffrey Winterfield, M.D.,

had settled in to watch the **Buffalo Bills** take on the Cincinnati Bengals when he witnessed an event he called extraordinarily rare, involving Bills' safety Damar Hamlin.



Winterfield

"I saw it

happen. He's a defensive player who took a helmet to the chest and stood up after the tackle and then collapsed within seconds of standing up."

Fellow athletes were stunned, fans sat in silence and Winterfield watched something he knows a lot about play out in real time on TV. What looked like an ordinary tackle had accidentally triggered support and asking for their prayers. a potentially deadly response. When Hamlin tried to take down Bengals' wide receiver Tee Higgins, Hamlin was hit hard in the chest and went into cardiac arrest.

Winterfield, who specializes in cardiac survival. electrophysiology at MUSC Health – a field focusing on the electrical activities of the heart - knew time was of the essence.

"He very likely had cardiac arrest secondary to abrupt onset ventricular fibrillation. And speculatively, given the timing of the collapse within seconds of the hit to the chest, this is something

called commotio cordis. That's a Latin phrase for 'agitation of the heart.' It's the second most common cause of sudden death in athletes. It typically occurs when a healthy heart is stopped suddenly just by a chance blow of sufficient force to the chest in between heartbeats."

If the heart isn't brought back into its proper rhythm quickly, the condition can kill. "The first two minutes are the golden two minutes," Winterfield said referring to the time immediately after cardiac arrest.

"The good news is the NFL has a rapid response program, which was executed in this tragedy. Within about eight seconds, trainers were on the field working on him. And CPR began within a minute or two, which is really critical. And if he had excellent CPR, which no doubt he did, coupled with rapid defibrillation with restoration of circulation, then the odds will hopefully be pretty good for him to survive this."

Hamlin, 24 years old, arrived at the University of Cincinnati Medical Center in critical condition. His family has released a statement thanking people around the country for their

Cardiac arrest kills an estimated 300,000 people in the United States every year, according to the American Heart Association. The association said CPR can double or triple the chances of

While cardiac arrest may sound like the same thing as a heart attack, Winterfield, an associate professor in the College of Medicine at MUSC and the Hank and Laurel Greer Endowed Chair in Cardiac Electrophysiology, said it isn't.

"A heart attack is a problem of coronary perfusion or an acute blockage of a coronary artery that results in a



Photo Provided

A Twitter post from the Buffalo Bills shows a jersey with Damar Hamlin's number on it and an update on his condition.

"And if he (Hamlin) had excellent CPR. which no doubt he did, coupled with rapid defibrillation with restoration of circulation, then the odds will hopefully be pretty good for him to survive this."

#### Jeffrey Winterfield M.D.

reduction in blood flow to the heart. It's associated with symptoms like chest pain and shortness of breath, sometimes gastrointestinal distress, left shoulder pain, jaw pain. Those are classical symptoms of a heart attack."

A heart attack can lead to cardiac arrest. But so can other factors including a hard hit to the chest, Winterfield said.

"Cardiac arrest is the presence of ventricular fibrillation, which is erratic pulsating of the heart - kind of fluttering of the heart. If the heart is fluttering, it's

not mechanically able to generate the force necessary to create a pulse. As the heart's resetting itself, if you hit the heart in between beats – at the wrong time – it can trigger that response."

Winterfield said it's a phenomenon that never fails to stun onlookers. "This is something that happens maybe 20 times a year, usually in catchers in baseball and in lacrosse. A few years ago, a St. Louis Blues hockey player, NHL player, went down when he took a hockey puck to the chest. It was the same mechanism of injury on the ice."

So people who work with athletes need to be aware of the risk, Winterfield said. "This has led, actually, to educational initiatives by the National Athletic Trainers Association. It's important to be able to recognize the signs of commotio cordis and understand the need for prompt action. It encourages athletic organizations to provide education to coaches and parents for CPR and the use of automatic external defibrillators or AEDs. And then to identify the location of those AEDs. That's available on the National Athletic Trainers Association website."

But you don't have to be a trainer or a doctor to know how to help. "I would encourage anybody interested in this to get CPR training and to learn how to use an AED," Winterfield said.

#### MEET ANGIE



Angie Brown
Department; Years at MUSC
Office of Parking Management; 15 years

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Family An 18-year old son, Jayden

#### A unique talent you have Strangely enough it would be adaptability

## Your idea of a dream job Any job that would allow me to impact someone positively every day!

#### Greatest moment in your life

Besides having my son, my greatest moment would be witnessing my son's come back from a major football injury to become a state champion in track and field!

**Words of advice** "Why try so hard to fit in when you were born to stand out."

- "What A Girl Wants"

## MLK Week @ MUSC





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Facilitated by: Tenelle O. Jones, LMFT, LAC

Human Services Coordinator, MUSC Resiliency Program, Dept. of Psychiatry & Behavioral Sciences

#### ession Topics

12/12 Creating Work-Life Harmony

1/9 Self-Care; It's not Just a Theory

2/15 Becoming Grounded and Mindful

3/13 Power of Self-Acceptance

4/10 Building Confidence and Leadership

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## SmartState chair named National Academy of Inventors fellow

#### By Reece Funderburk

funderma@musc.edu

Anand Mehta, D.Phil., the SmartState Endowed Chair of Proteomic Biomarkers and an MUSC professor in the Department of Cell and Molecular Pharmacology and Experimental Therapeutics, has been named a fellow of the National Academy of Inventors (NAI). Mehta is one of 169 distinguished inventors to be named an NAI Fellow in 2022. Election into the academy as a fellow is the highest professional distinction awarded to academic inventors.

"I think it is an honor and, in some ways, a justification of the type of translational work our group has been doing for a number of years," said Mehta. "All of us are in this business to help people, and this is a recognition of that."

Founded to recognize academic

wookse Fearut Suiter Fie

inventors who have received patents from the U.S. Patent and Trademark office, the NAI fellows are expected to enhance academic innovation while also educating and mentoring students. The NAI Fellows Program spotlights academic inventors who have made a tangible impact on society through their prolific spirits of innovation. The program's 1,567 fellows represent more than 400 universities and governmental and nonprofit research institutes. Collectively, they hold more than 53,000 issued U.S. patents, and their discoveries have generated over \$3 trillion in revenue.

While the announcement comes as no surprise to those who know him, Mehta said the announcement was a surprise.

"I missed the email completely, as it came over the Thanksgiving holiday, and I was traveling. Several old colleagues of mine sent me emails

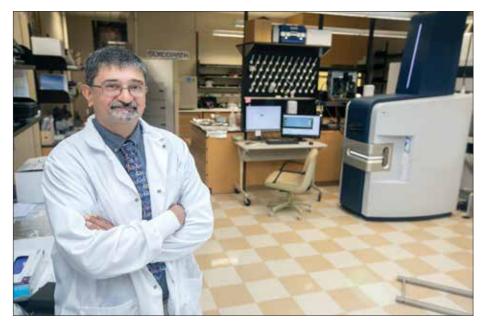
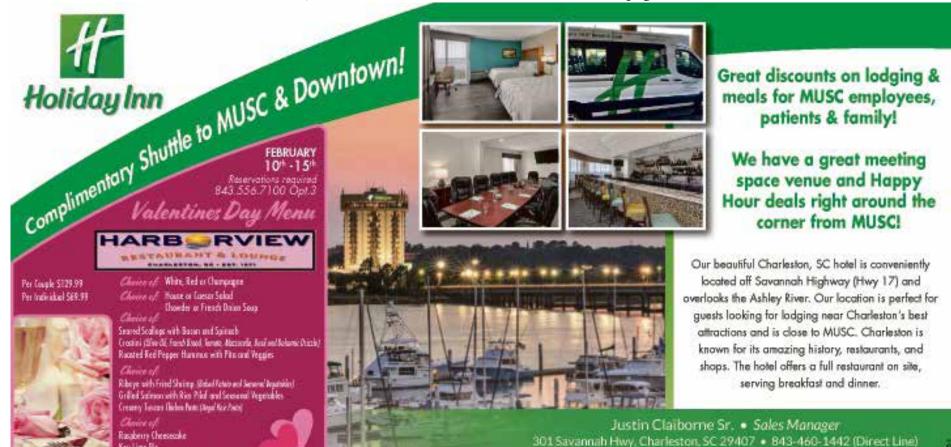


Photo by Sarah Pack

Dr. Anand Mehta has been an author on over 100 peer-reviewed publications and awarded dozens of grants throughout his career.

https://www.ing.com/holidayinn/hotels/us/en/charleston/chsrv/hoteldetail

See **Inventor** on page 11



## AI leads to better outcomes for patients

By Harrison Huntley

huntlevh@musc.edu

Imagine you just had surgery. You look down at your surgical wound, and you are unsure if it is infected or not or if you should call your doctor or go to the hospital. Soon, your smartphone might be able to help you with this decision. The MUSC Harvey and Marcia Schiller Surgical Innovation Center is working on a project that would allow patients to take a picture of a wound, then have artificial intelligence (AI) analyze the wound and recommend the best care.

This innovative center was established through a philanthropic gift to support the application of technological advances, like AI and machine learning (ML), in health care. ML is a type of AI

that learns from data, thereby allowing it to continue to improve its predictive abilities.

The connection between AI and Machine Learning and health care may not be obvious at first. But to Arman Kilic, M.D., director of the Schiller Surgical Innovation Center, AI is the key to better outcomes for patients by, as he explained, helping doctors to make more optimal care decisions and by helping health systems to operate more efficiently.

"The center's goal is to unite all the various innovation efforts that are happening within the department," said Kilic. "A large focus of that is AI and ML. We have probably somewhere in the range of 20 to 25 different AI projects that are ongoing right now in the surgical department



Photo by Sarah Pack

Dr. Arman Kilic, center, directs the Schiller Surgical Innovation Center.

through the Innovation Center with a wide variety of domains like surgical oncology, trauma, chest wall surgery, transplantation, cardiac surgery and vascular surgery."

One of Kilic's key projects involves modeling the risk of cardiac surgical procedures. He said that currently,

See Surgery on page 8











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### SURGERY Continued from Page Seven

doctors are working from clinical risk models based on limited data and drawing solely on prior experience without data-driven insights. "A lot of the clinical risk models done in health care have only modest performances," Kilic said. "That's because most of them either use limited data or apply relatively primitive statistical approaches."

Kilic says AI can be much quicker and more accurate when making data-driven recommendations. That's because AI can analyze a large amount of data in seconds and provide physicians with a complex risk model that takes all available information into account.

"Even if you're using the same data set, machine learning algorithms can often improve predictive performance compared with traditional approaches." Kilic believes that AI's main role in health care will come in the form of augmented or assistive technology. Kilic explained that MUSC is among a small

group of academic medical centers in the U.S. with dedicated spaces to advance surgical innovation. In addition to the center's work in AI and ML, it serves as a hub to centralize the department's Human-Centered Design program and investigator-initiated clinical trials, allowing for shared resources as well as greater collaboration and expertise to advance surgical innovation.

Today, with ongoing challenges in staffing and supply chain issues that are becoming increasingly more burdensome in health care systems, Kilic said AI can help by automating many processes in the hospital to improve efficiency and allowing physicians, nurses and other care providers to spend their time on other tasks. But Kilic is quick to point out that this will not replace critical health care professionals. More, he said, it should be seen as a resource for those working in the field – a way to help them to do their jobs better. Kilic said

it's crucial for medical professionals to embrace this type of technology, as it will have an expanding role in health care.

"We will ultimately be the gatekeepers to this technology and guide when and how it is used," Kilic said. "I don't think we should shy away from it because in my mind, it's the same thing as a new device or a new pharmaceutical. Innovation is an inherent part of what we do in medicine."

## Valet parking fee to increase at MUSC Health-Charleston

Effective Jan. 2, 2023, the valet parking fee will increase from \$10 to \$12 at the entrances of the garages listed below.

- Ashley River Tower (6 a.m. to 6 p.m.)
- Rutledge Tower (5:30 a.m. to 5:30 p.m.)
- Hollings Cancer Center (7 a.m. to 5:30 p.m.) for patients and families/visitors of patients.





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### New year, new goals: Going beyond resolutions

It's that time of year again: resolution time. Every year, millions of people make their lists of New Year's resolutions to try and make improvements to their lives in various ways. These resolutions are often health-focused, listing out goals for actions to take every day or "bad" habits to avoid. While the intention behind this resolution setting is good, it can oftentimes prove to be problematic, as it creates unrealistic expectations without strategies to support long-term behavior change.

The key to successfully setting health goals for the new year starts with realistic self-assessment and deciding what you want to work on. You don't have to change everything all at once. At one time or another, we've all made lists of new year health goals that fell to the wayside after a few weeks or months simply because they weren't properly set, but knowing how to set goals strategically can make all the difference.

The following are tactics for setting well-being goals and cultivating habits that are both evidence-based and effective.

#### USE THE S.M.A.R.T. GOAL SYSTEM

One of the most effective ways of setting health goals for the new year is to use the S.M.A.R.T. method, which is designed to create goals that will stick and is widely utilized by health coaches and behavior change experts.

S.M.A.R.T. goals should be:

- Specific.
- Measurable.
- Achievable.
- Realistic/Relevant.

• Time-bound.

Setting S.M.A.R.T. new year health goals begins with identifying a goal **specific** in number and frequency. Instead of saying you want to be more active, specify for yourself that you want to do 30 minutes of exercise, three days a week.

The category is **measurable**, which helps you to evaluate the success or failure of your project. Your goals should have some sort of objective way to measure them to gauge whether you were successful.

Your goals should be achievable. You don't want your goals to be easy to achieve - but you also want set goals that you could conceivably hit. Your goals shouldn't be totally outside the realm of possibility. This means selecting the actions you'll take to achieve your goal given your current lifestyle/routine. For example, if you want to reduce time on your electronics, set a goal where you cultivate a nightly routine where you read before bed rather than scroll on your device. This would likely be achievable rather than setting a goal to eliminate screen time altogether.

Furthermore, you want to be realistic and relevant in your goal setting, setting yourself up for success. For example, for those choosing physical activities, choose shorter milestones to start and build on them over time. Starting off running by saying you'll be ready for a marathon in a month is not realistic. Instead, start by jogging a few miles, a few times per week, depending on your fitness level, and build from there. This also gives you opportunities to celebrate successes

along the way.

Lastly, S.M.A.R.T. healthy lifestyle goals are time bound. What's a reasonable cadence for your new healthy habit? What date would you like to achieve your first milestone? Adding this consideration to your goals makes you more likely to keep up with them and continue them in the long term for a healthier lifestyle all year long.

## ACKNOWLEDGE SETBACKS AND "FAIL FORWARD"

Remember when setting health goals for the new year to acknowledge that slip-ups will happen. The important thing is to recognize that you're off track and to start back once again. Instead of feeling down about yourself if you skip the gym for a few days or indulge in a treat you were trying to cut back on or eliminate from your diet, simply know that tomorrow is another day and the perfect time to start back on your goals again.

## CREATE AN ACCOUNTABILITY NETWORK

Build a support system of people who will cheer you on and hold you accountable. Not many people can make and sustain changes on their own. We work best in some form of community. Each person's need for support and accountability will look different. Here are some examples of how you might foster an accountability network in pursuit of health behavior change:

- Join a group of people working on the same goal (i.e., a race training group).
- Tell trusted family, friends or colleagues / utilize MUSC's

MUSC Health & Well-Being

By Susan L.Johnson, Ph.D., MUSC Office of Health Promotion



employee well-being program, Imagine U, on Microsoft Teams.

• Create visual cues in your environment like Post-it notes on mirrors or in the car or alarms on your phone.

#### CELEBRATE YOUR WINS

Celebrate small wins and build in rewards to create momentum. We will always do better if we acknowledge what we're doing right. And if you build in little rewards as you hit milestones, you are more likely to keep going. You can be creative with your celebrations and rewards. It's common to reward milestones with something that will help you to continue to take action moving forward.

## 2023 Lowcountry Heart Walk scheduled for Feb. 25

Join friends, family and coworkers to support the annual 2023 Lowcountry Heart Walk on Saturday, Feb. 25. Event check in is 8 a.m., at Brittlebank Park. Sign up to participte with the MUSC stroke program's team "Smart About Stroke SC" or other MUSC teams to support people with heart disease and others who have survived a stroke.

For information about the "Smart About Stroke SC" team, email Christina Blake, R.N., at cloxton@ musc.edu or visit the Heart Walk website at https://www2.heart.org/site/TR/?fr\_id=7825&pg=entry.

# Number of kids getting sick from cannabis edibles hits new high

By Helen Adams

adamshel @musc.edu

New research shows the number of children under the age of 5 accidentally poisoned by cannabis edibles has soared 1,375% since 2017, a high doctors are not happy to see.

"It's becoming more and more common. It's important for people to understand that it's a danger; it's something that we're really having to deal with," said Christopher Pruitt,

M.D., medical director of the MUSC Shawn Jenkins Children's Hospital Emergency Department.

"The worst is where they're very minimally responsive, and we are worried.



Pruitt

I've had a number of these cases where we're worried that we might have to place an artificial airway and put them on a ventilator."

The study appears in the Journal of the American Academy of Pediatrics. Marit Tweet, M.D., an emergency medicine doctor at Southern Illinois Medicine, led the research. Her team looked at reports to the National Poison Data System involving cannabis edibles in children under the age of 6 from 2017 to 2021. It found more than 7,000 cases. Of those, 2-year-olds had the highest rate of exposure, followed by 3-year-olds.

The substances that made the kids sick were usually found in settings their parents probably considered safe, Tweet said. "One important thing

we hope people take away from this study is that the vast majority of these ingestions occur in a home, either the patient's own home or another home setting. This should raise awareness that edible cannabis products should be stored away like other possible harmful substances in the home, like medications or cleaning chemicals."

One key difference is that unlike most medications and cleaning chemicals, cannabis edibles can look pretty enticing to a child. Some are in the form of gummies, chocolate bars or salty chips. What kids usually don't realize is that many edibles contain THC – the chemical in marijuana that affects a person's mental state.

Another issue: Cannabis edibles are designed for much bigger bodies. Pruitt said that in his experience, the smaller the child, the larger the risk. "We see it some in older kids, but they're more likely to have a reaction like a young adult versus a younger kid. Little kids can end up unresponsive."

Unresponsive can mean the child has trouble breathing. That's just one of the problems cannabis edibles can cause in children, according to the National Capital Poison Center. Kids may also feel dizzy, have trouble walking, act confused and have a rapid heart rate. In severe cases, they may suffer from hallucinations, a slowed heart rate and low blood pressure.

That leaves some people wondering why the government doesn't require cannabis edibles to be in childresistant packaging. The reason: While a growing number of states have legalized marijuana use, the federal government hasn't. That means no federal regulations on how edibles are packaged.

Marijuana is currently illegal in South



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Cannabis edibles come in forms that may look pretty enticing to a child.

Carolina, but that doesn't keep some people from ordering it or bringing it home from states where it's legal. Pruitt

encourages parents whose children unwittingly consumed cannabis edibles

See **EDIBLES** on page 11

## Buyer's Advocate...100% of the time

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#### INVENTOR Continued from Page Six

congratulating me, and I was not sure what it was about! Once I was told exactly, I found the email and was very surprised and honored."

To date, Mehta has been an author on over 100 peer-reviewed publications and awarded dozens of grants throughout his career. As a member of the International Society for Antiviral Research, American Association for the Study of Liver Disease and Society of Glycobiology, he continues to innovate in the field of proteomic biomarkers.

Jesse Goodwin, Ph.D., chief innovation officer at MUSC, pointed to Mehta's remarkable capabilities and contributions. "Many of Dr. Mehta's greatest qualities cannot be so easily quantified: his pragmatism, ability to problem-solve and his experience and vision in how to pull together industry and academicians in a way that meaningfully makes both parties better. His fellowship acceptance is welldeserved."

A reflection of his research success, Mehta holds nine issued U.S. patents in the field of liver pathology, with several more patent applications currently pending. As an academic inventor who has published numerous peer-reviewed manuscripts, mentored dozens of students and commercialized technologies with multiple companies, Mehta has greatly contributed to the increase in quality of life, economic development and the welfare of societal.

"I have always believed in the value of translational science and the potential for 'lab work' to have a more meaningful clinical impact. I would not say that I ever set out to necessarily invent something but often you end up doing things because of curiosity or necessity."

The 2022 class of fellows will be honored and presented their medals at the NAI's 12th annual meeting on June 27, 2023 in Washington, DC.

#### Edibles Continued from Page Ten

to take action.

"They shouldn't wait and watch. because kids can change and things can change. You either want to bring them immediately to medical care or contact a medical professional. You can always call the National Poison Center. That number is 800-222-1222. The National Poison Center can advise you as to what you should do, whether you need to seek medical care. And they're pretty good about communicating with local emergency departments to let us know that kids might be coming in."

The good news is that researchers found no cases of a child dying after consuming cannabis edibles in the time they looked at. That jibes with what Pruitt has seen. He said most kids who get sick after eating a cannabis concoction stay in the hospital for about 24 hours while they recover, then they're ready to go home.

His team has plenty of expertise

in helping them deal with a type of poisoning that's unfortunately on the rise. "We're specially trained at the MUSC Shawn Jenkins Children's Hospital to deal with kids in emergencies. Each of us has a vast amount of experience in dealing with these kinds of things."

#### 2023 Dr. Martin Luther King Jr. Lecture set for Jan. 18

Join us for the noonday virtual lecture commemorating the life and legacy of Dr. Martin Luther King Jr. from 12 to 1 p.m., Jan. 18. This year's theme is "It starts with me: Cultivating a beloved community mindset to transform unjust systems" and will be delivered by Rev. Herman Frank Harris, chaplain and manager, MUSC Pastoral Care Services.

Register via Microsoft Teams (earn 1 hour of D&I credit). Event is sponsored by the Department of Diversity, Equity and Inclusion.



Find the words hidden vertically, horizontally, diagonally, and backwards.

#### ROLE MODEL

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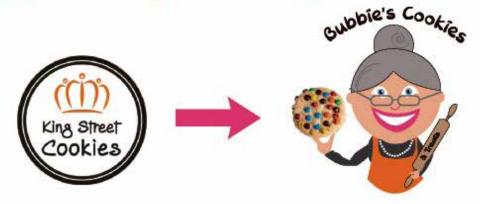
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Join us on Wednesday, January 11, for our ReLaunch Party at both of our locations!

Downtown Charleston (10am-6pm) | Mt. Pleasant (11am-6pm)

Featuring samples, prizes, giveaways, loads of fun, and these great specials from Wednesday, January 11 to Sunday, January 15:

- 20% off half-dozen and dozen boxes of cookies (limit of one dozen cookies per person per day)
  - 50% office cream and milkshakes
  - 10% off gift cards (limit \$100 in gift cards)



**PLUS,** one lucky winner will take home a grand prize of a free dozen cookies each month for a year (in the form of a gift card each month).