Robotic thoracic surgery: An “inside out” approach

Allison Skeffington is a busy, active, young adult. A senior at Kamiak High School, she also takes classes at Edmonds Community College, works at her dad’s restaurant and creates art in her spare time.

In November 2016, about a week before her 17th birthday, Allison noticed pain and swelling in her right arm. “At first we thought I must have just hit it on something, or twisted it somehow,” Allison says. But within a few days, it had swollen to twice its normal size and turned purple. Somethings wasn’t right.

A too-narrow space
Allison had a blood clot. She was eventually diagnosed with Paget-Schroetter syndrome—a rare condition that causes blood clots to form in the deep veins of the arm, often in young, healthy patients.

Thoracic surgeon Luis Alberton, M.D., Providence Medical Group, says Paget-Schroetter develops due to a variation in normal anatomy. “Most people have adequate room for the main vein to travel from the arm to reach the heart,” he says. “However, some people—like Allison—are born with a very narrow space.” Combined with repetitive arm movement, pressure where the vein travels between the collarbone and the top of the rib cage can injure the vein, resulting in clot formation.

Planning the course: A team effort
Vascular surgeon Mark Papenhausen, M.D., saw Allison in the Providence Regional

Medical Center Everett Emergency Department and continued to care for her after she was admitted to the hospital. Her initial treatment included a procedure to break up the clot and reopen the vein, along with a clot-dissolving drug and continued blood thinning drugs. Later, in the clinic, Dr. Papenhausen. Allison and her family discussed a plan to prevent future clots.

Removal (resection) of the first rib, which makes more space in this narrowed area, is the standard operation used to help relieve Paget-Schroetter syndrome. “This procedure, which is traditionally done by vascular surgery, carries some risks,” Dr. Papenhausen says. “It is a complex operation that can potentially compromise the remaining, normal veins.”

“Dr. Alberton suggested that he could do the resection robotically, from inside the chest, as opposed to my doing the normal ‘open’ rib resection,” Dr. Papenhausen says. “With this approach, none of Allison’s normal veins would be affected. In addition, the surgery is less invasive, so recovery would be faster.”

Since she was in the middle of her junior year in high school, Allison, her family and her care team decided to schedule the surgery for the summer.

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Gynecologic oncology services in Everett

Gynecology is the area of medicine that deals with women’s health, especially the female reproductive organs (cervix, uterus, ovaries, vulva and vagina). Oncology is the area of medicine that deals with tumors.

Women diagnosed with gynecologic cancer are generally referred to a gynecologic oncologist—a doctor who specializes in the medical and surgical care of gynecologic malignancies (cancers), as well as complex benign gynecological conditions (non-cancerous gynecological conditions that cause health problems).

The types of cancer that can develop in a woman’s reproductive system are:

- Cancer of the uterus (endometrial/sarcoma)
- Ovary/fallopian tube cancer
- Cervical cancer
- Cancer of the vulva
- Vaginal cancer
- Gestational trophoblastic disease (pregnancy-related tumors)

As with most cancers, catching gynecologic cancers early is key to successful treatment. The following are common symptoms of gynecologic cancers, according to the Center for Disease Control:

- Abnormal vaginal bleeding or discharge (cervical, ovarian, uterine, vaginal or vulvar cancer)
- Feeling full too quickly or difficulty eating (ovarian cancer)
- Pelvic pain or pressure (ovarian or uterine cancer)
- More frequent urination, an urgent need to urinate and/or constipation (ovarian or vaginal cancer)
- Bloating (ovarian cancer)
- Abdominal or back pain (ovarian, uterine, cervical cancer)
- Itching, burning, pain or tenderness of the vulva (vulvar cancer)
- Changes in vulva color or skin, such as rashes, sores or warts (vulvar cancer)

If you have symptoms, it does not automatically mean you have a gynecologic cancer. It is important to contact your doctor if you experience any of these symptoms to discuss your symptoms and have an evaluation.

Talk with your primary care provider for a referral to one of Providence Medical Group’s gynecological oncologists.

Providence Regional Cancer Partnership

The Providence Regional Cancer Partnership is a collaboration of four leading medical groups—Providence Regional Medical Center Everett, The Everett Clinic, Western Washington Medical Group, and Northwest Washington Radiology Oncology Associates.

The partnership offers all aspects of outpatient cancer care under one roof—including chemotherapy, radiation oncology, clinical research, integrative medicine and counseling services.

1717 13th St., Suite 300
Everett, WA 98201
425-297-5660
www.cancerpartnership.org

ROBOTIC THORACIC SURGERY
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A new way

Dr. Alberton says robotic surgery has been gaining acceptance for rib resection for about the past three years and is an effective alternative to traditional open surgery. It combines the advantages of small incisions with robotic precision, enhanced vision and improved dexterity.

Providence Regional Medical Center Everett has used the da Vinci Xi robotic surgery system for gynecology, urology and general surgery for several years. Thoracic surgery is one of the newest applications for the technology.

“For a rib resection, the robotic technique allows us to approach the rib from the inside out, and to avoid cutting through the collateral, or secondary, vein,” Dr. Alberton says. “This approach can minimize a patient’s post-surgical pain, reduce complications and shorten recovery time.”

There’s a cosmetic advantage too: Open surgery would require a large incision through the neck or armpit; robotic surgery avoids that large scar because it requires only four dime-sized incisions. Allison’s robotic rib resection surgery
Using the latest radiosurgery technology to treat tumors with speed and precision

In a promising development for cancer patients, Providence Regional Cancer Partnership recently installed the Edge™ system for high-precision radiosurgery to treat tumors of the brain, spine, prostate, lung and other body areas.

The Edge, developed by Varian Medical Systems, is a set of sophisticated, integrated technologies that uses knife-like beams to accurately target tumors without an incision or the need for recovery in a hospital. It is especially ideal for targeting tumors that are typically difficult to treat surgically. It may also be an option for cancer patients who are not candidates for surgery or traditional radiotherapy.

The Edge incorporates multiple imaging technologies to fine-tune the patient’s position prior to treatment and track tumor motion—when a patient breathes, for example—during treatment. One of the imaging technologies is the Optical Surface Monitoring System that tracks the patient’s surface area in real time using 3-D images.

“Working with the Edge system is like having an adjustable Crescent wrench or a Swiss Army knife,” says Dr. William Wisbeck, medical director of radiation oncology at Providence Regional Cancer Partnership. “There is so much you can do with it.”

The Edge machine is able to rotate around the patient to deliver treatment beams from nearly any angle. The system alerts the care team if a patient has moved in a way that could compromise treatment accuracy.

For brain tumors, the different imaging technologies make it possible for the patient to receive high-precision radiosurgery without the need for a head frame. This greatly improves comfort during treatment.

**Why speed and precision matter**

The Edge delivers radiosurgery treatments with ease, precision and speed—often in just a few minutes per day—and faster treatments are easier on patients. Radiosurgery treatments with the Edge usually require one to five sessions, compared to several weeks with traditional radiation therapy.

Additionally, a radiosurgery treatment that may normally take up to 60 minutes to complete could be done in 20 minutes or less with the Edge. Shorter treatments mean patients do not have to hold still for long periods, and they are able to continue with their daily lives.

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For information about radiosurgery at the Providence Regional Cancer Partnership call 425-297-5524.

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**Knife-like, high-precision radiosurgery**

Despite its name, radiosurgery is a non-surgical procedure that uses targeted radiation to treat tumors while sparing nearby healthy tissue and organs. The Edge’s knife-like beams are sculpted to match the three-dimensional shape of the targeted tumor.

The sculpting is done using computer-controlled mechanical “fingers” that can be moved to create apertures, or openings, of different shapes and sizes. The apertures change during treatment, to carefully target the tumor and protect surrounding tissue and organs.

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took place in July 2017. Dr. Alberton was assisted by Dr. Papenhausen and thoracic surgeon Kimberly Costas, M.D.

**“Better than ever”**

Allison says she remembers experiencing pain right after her surgery, but her recovery was relatively smooth.

“Every single day following my surgery, I began to feel a little better, slowly returning to my regular life. I bounced back fairly quickly and now I’m better than ever! It feels amazing to not have to worry about my condition. I was taken care of so well.”

Allison says all her previous symptoms are gone, and she no longer has to take blood-thinning medication to protect her from developing blood clots.

Dr. Alberton says he is pleased to be able to offer this advanced technology in Everett. “Conditions that involve the lungs and chest wall are complex,” he says. “Robotic technology offers the precision we need for even the most delicate thoracic surgeries.”

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For information or to make an appointment, call the Providence Medical Group Cardiac & Thoracic Surgery clinic: 425-261-4950.
Arteries, vessels and veins

Endovascular surgeries keep blood flowing

Vascular surgeons have access to a wide variety of procedures and non-surgical therapies to treat damaged blood vessels. Vascular surgeon Peter Brant-Zawadzki, M.D., Providence Medical Group, says that more and more, as technology advances, patients benefit from minimally invasive, endovascular approaches.

“Endovascular” means the treatment is done from within the blood vessel. Endovascular procedures use a catheter threaded into the arteries, through small incisions, to diagnose and treat vascular disease. Dr. Brant-Zawadzki says he routinely uses endovascular techniques to treat patients who have peripheral vascular disease and abdominal aneurysms.

Peripheral vascular disease

Peripheral vascular disease (PVD) is a slow and progressive circulation disorder caused by narrowing or blockages in a blood vessel. It is most common in the lower extremities, and can eventually cause walking problems. In advanced cases, patients are at risk for tissue loss and amputation. (Peripheral vascular disease is also called peripheral arterial disease.)

Dr. Brant-Zawadzki says that for patients with mild PVD, he recommends conservative treatment, such as medication and lifestyle changes, but when PVD is advanced, surgery is usually needed. “We often see patients who have tissue loss and gangrene, which puts them at risk for losing a limb,” he says. “In those cases, we have to be more aggressive.”

Dr. Brant-Zawadzki says a common approach for these patients is to perform an endovascular procedure known as angioplasty, where the surgeon inserts a catheter inside the artery that can “balloon” to open narrowing or blockages to restore blood flow. The surgeon may use a laser to “shave” away the blockage, or insert a stent in the artery to hold open the blocked blood vessels.

Abdominal aortic aneurysm

An abdominal aortic aneurysm (AAA) is a bulging or ballooning area in the lower part of the aorta, the major blood vessel that runs from your heart, through the center of your chest and into your abdomen. This vessel is about as thick as a garden hose, and it provides your body’s main blood supply. If an aneurysm is present in the aorta, and it ruptures, it can cause life-threatening bleeding.

Dr. Brant-Zawadzki says endovascular repair of an AAA is the preferred strategy for many patients, and can offer benefits over open surgery. In this procedure, the surgeon makes small incisions in each side of the groin, exposing the arteries. Under X-ray guidance, a stent device is inserted into the aorta and aneurysm. Once in position, this stent reinforces the abnormal section of the aorta from within.

The right tool for the job

Dr. Brant-Zawadzki says endovascular treatment for these conditions, compared to open surgery, avoids large, painful incisions and results in less operative stress, less blood loss, a shorter hospital stay and faster recovery.

“Endovascular technology is evolving at a brisk pace, and we’re moving forward toward more-and-more minimally invasive techniques,” Dr. Brant-Zawadzki says. “These approaches are easier on the patient, so we use them whenever it’s right for their circumstances.” However, even with the most advanced technology, it comes down to anatomy.

“Each patient is an individual, and there’s no ‘one-size-fits-all’ way to treat vascular conditions,” he says. “Different disease, different blood vessels, different tools—we put them all together to figure out what’s right for each patient.”

For information or to make an appointment, call the Vascular Surgery & Vein Center: 425-297-5200.

March of Dimes March for Babies raises money for healthier babies

Babies born early or with special circumstances need extra help at the start of their lives. The Level III Neonatal Intensive Care Unit (NICU) at Providence Regional Medical Center Everett provides these special babies with the complex care and monitoring they need. Our NICU, operated in partnership with Seattle Children’s Hospital, offers the most intensive level of care for critically ill or unstable newborns north of Seattle.

Providence staff will be walking—and raising funds—to fight against birth defects, premature birth and infant mortality at this year’s March for Babies on April 21. This March of Dimes signature event raises money to support programs that help moms have healthy, full-term pregnancies and funds research to find causes and preventions.

Can you help?

Join our NICU and pediatric team to walk, or make a donation: www.MarchForBabies.org/Team/ProvidenceNICU

Walk with us!

March for Babies

Saturday, April 21
Registration: 8:30 a.m.
Walk: 9:30 a.m.
Legion Memorial Park
144 Alveryon Blvd.
Everett, WA 98201
www.MarchForBabies.org
EventInfo?EventID=18937
Approximately six million people in the U.S. suffer from congestive heart failure (CHF), and the number of Americans diagnosed with CHF is expected to increase to nearly eight million by 2030, according to the American Heart Association.

CHF occurs when your heart becomes too weak to pump blood efficiently through your body.

Usually, it develops after something else weakens the heart, such as a heart attack, uncontrolled blood pressure, diabetes or narrowed blood vessels. Left untreated, CHF can cause fatigue, shortness of breath, weight gain, wheezing or coughing, loss of appetite and, for some, an abnormal heart rate.

CHF can also lead to fluid buildup in the lungs, causing congestion. (This is why it’s called “congestive” heart failure.)

Cardiologist Vivek Bhatia, M.D., Providence Medical Group, says patients with CHF make up a large part of his practice, both in the clinic and in the hospital. “Heart failure is one of our country’s biggest health problems,” Dr. Bhatia says. “And it’s one of the conditions most likely to land patients in the hospital—repeatedly.”

Management is key

Exercise, reducing sodium, managing stress, losing weight and taking medication can improve CHF patients’ length and quality of life. Careful management is critical.

“All patients are different,” Dr. Bhatia says. “What they eat and drink and how closely they follow their treatment plan will impact their condition. We try to be proactive, always watching for problems before things get bad.”

Out of sight, not out of mind

Dr. Bhatia and other Providence cardiologists have recently added a new device to their CHF treatment toolkit: the CardioMEMS™ HF System. This system features a small device implanted directly into a patient’s pulmonary artery (the blood vessel that moves blood from the heart to the lungs).

The device measures changes in pulmonary artery pressure, which can signal fluid retention in the lungs from worsening heart conditions. Readings are transmitted wirelessly, from the patient’s home to the doctor’s office.

Dr. Bhatia says his clinic has a heart failure coordinator—a nurse trained to monitor alerts and incoming data from remote devices—who notifies the physician when a patient’s readings are out of normal range. “If we get an alert, we can address it in the office, even before a patient notices symptoms,” he says. “We’ll schedule an office visit to adjust the treatment plan and medication, hopefully avoiding hospitalization down the road.”

“This is one of many tools Providence cardiologists use to help CHF patients manage their health and avoid the hospital,” Dr. Gardner says. She notes that a recent trial showed that, when the device was used correctly, hospital readmission rates decreased by 35-40 percent.

“Repeated hospitalization takes a toll on patients and their family members. Aside from the financial hardship of a significant co-pay and loss of work for the patient and partner, hospitalization brings health risks, such as hospital-acquired infection,” Dr. Gardner says. “We have to avoid it when we can.”

“Of course, the patient has to be engaged as part of the plan,” Dr. Gardner adds. “Without weight management, diet adjustments, consistent medical care and proper use of medication, the device might not be enough to keep anyone out of the hospital.”

For information or to make an appointment, call the Providence Medical Group Cardiology clinic: 425-316-5490.
Circle by Providence:
Free app answers all of your pregnancy and parenting questions

Did you know women make most of the health decisions for their families? Nearly 90 percent of moms oversee the health of their children, as well as their spouse, parents and in-laws. That’s a lot of responsibility, considering 70 percent of U.S. women with children under age 18 also work.

It’s no wonder that many women don’t do what they know they should do to keep themselves healthy because they lack time. The Circle by Providence app is a personalized tool that helps pregnant women and moms manage their health and the health of their children.

The next time you have a question about pregnancy or motherhood, simply reach for your phone. Circle is a handy resource that offers:

- Expert articles about childbirth, babies, pregnancy and parenting.
- Answers to your breastfeeding questions with videos, articles and a guide to local resources.
- Information about classes and groups for new moms and moms with older children.
- A to-do checklist from Providence experts to guide you through every stage of pregnancy and motherhood.
- Health-tracking tools so you can update providers about your pregnancy and growing child.
- Appointment reminders when you connect to MyChart through Circle.

Circle recently added pediatric features for parents with kids ages 18 and younger.

They include:
- Support for users with more than one child.
- More than 1,000 articles to answer questions and support kids’ health through age 18 from best-in-class sources: American Academy of Pediatrics, Nemours Children’s Health System, StayWell and Bright Futures. Topics include everything from acne and asthma to STDs, warts and Zika. Parents can also get advice on tricky situations, such as sexting, single-parenting and how to help a child cope with death.
- To-do items listed in a users’ home feed for each child and moms-to-be, along with individual trackers for themselves and each child.
- If a mom has connected her Circle account to MyChart while she’s pregnant, her new baby’s information will automatically import into Circle so she can get timely reminders and information.

Circle also has a vaccine tracker for kids that follows guidelines from the Centers for Disease Control (CDC). The tracker offers reminders when a new set of vaccinations is due. Moms can easily export a summary for sharing and work with their providers to change due dates if they have concerns.

Get the Circle by Providence app
It’s easy to download Circle to your smartphone, and it’s free. Go to the App Store to download to an iPhone, or Google Play to download to an Android device.

Childbirth and family education classes

When it comes to starting—or growing—your family, you can count on Providence for the most current and comprehensive birth and family education. We offer a wide variety of classes taught by certified childbirth educators.

From pregnancy and labor, to caring for your newborn and helping you through the toddler years, we’re here for you. Below is a sample of the classes we offer.

- Breastfeeding Basics
- Car Seat Class
- Childbirth Refresher
- Conscious Fathering
- Grandparents Class
- Infant Safety and CPR
- Living with Baby, Toddler and Learning with Pre-schooler Group
- Newborn Care
- Practical Skills for Labor
- Your Planned Cesarean Birth

For a complete list of classes, dates and times, or to register, go to www.Providence.org/NWBirthandFamilyClasses.
Know where to go when you need care NOW

Injuries, colds and the flu don’t always keep a 9 to 5, Monday through Friday schedule. Do you know where to go when you need care quickly and your primary care provider isn’t available?

When the unexpected happens and you can’t get to your doctor, your first thought may be to go to the nearest emergency room. But unless you have a serious or life-threatening problem, you may not be seen right away and could spend hours waiting while those with more critical conditions are seen first.

An unnecessary trip to the ER could also cost you. The average cost of an ER visit is $1,200. Compare that to the average cost of $150 for an urgent care visit or $49 for a Providence Express Care Virtual appointment.

Save time and money by getting the right care at the right place

Emergency Room
You should use a hospital emergency room for serious or life-threatening problems. If you experience any of the following symptoms, don’t wait! Call 911 or get to your nearest emergency room.

- Severe chest pain/heart palpitations
- Difficulty breathing
- Ingestion of objects or poisons
- Major/significant trauma or injury
- Seizures
- Severe burns
- Severe diarrhea
- Uncontrollable bleeding/vomiting blood
- Animal bites
- Fainting/unconsciousness

Walk-in Clinic (urgent care)—Mill Creek and Monroe
If you need care right away— but your condition is not life-threatening—an urgent care clinic may be your best option. Our walk-in clinics are open extended hours on weekdays and weekends. No appointment is necessary.

Use urgent care for:
- Common illnesses (flu, colds, fever, sore throats, headaches, skin irritations)
- Minor injuries (minor cuts/burns, sprains, minor broken bones)

We also offer:
- IV hydration and IV antibiotics
- Splinting
- X-rays and diagnostic imaging
- Lab tests for strep throat and flu

TWO CONVENIENT LOCATIONS:

Mill Creek Walk-in Clinic
12800 Bothell-Everett Hwy
Everett, WA 98208
Monday-Friday,
7 a.m.-9 p.m.
Saturday, Sunday and holidays
8 a.m.-8 p.m.
425-316-5150

Monroe Walk-in Clinic
19200 N. Kelsey St.
Monroe, WA 98272
7 days a week, 8 a.m.-8 p.m.
360-794-7994

Providence Express Care at Walgreens—Everett, Mill Creek and Mukilteo
Our Express Care clinics treat common conditions and all exams are conducted in private rooms. If it turns out you need more than what we can offer, we can refer you to our network of providers.

Use Express Care for:
- Cold, flu and allergies
- Cough, congestion and asthma
- Ear, nose and throat issues
- Eye irritations
- Urinary tract infections
- Skin conditions
- Sprains and strains
- Cuts and scrapes

CONVENIENT LOCATIONS:
Our three Providence Express Care at Walgreens clinics are open from 8 a.m.-8 p.m., seven days a week.

Schedule a same-day appointment at www.ProvidenceExpressCare.org.

Murphy’s Corner/Mill Creek
13110 Bothell Everett Highway
Everett, WA 98208
1-888-227-3312

Everett Broadway
2205 Broadway
Everett, WA 98201
1-888-227-3312

Mukilteo
10200 Mukilteo Speedway
Mukilteo, WA 98275
1-888-227-3312

Express Care Virtual—Anytime, Anywhere
Our Express Care Virtual service allows you to have a live, on-demand video visit with a Providence doctor or nurse practitioner on your own time using your computer, smartphone or tablet. It’s an easy, convenient way to get a diagnosis and treatment, including any needed prescriptions.

No appointment is needed and wait times average less than five minutes. Visits are $49 or less and many insurance plans are accepted. Simply visit virtual.providence.org from 8 a.m.-midnight, seven days a week.

Use Express Care Virtual for:
- Sinus, ear or eye infections
- Cough, cold and flu
- Rash and joint issues
- Prescription refills
Have you thought about weight loss surgery?

For many of us, losing weight on our own is a losing battle. Whether it’s your gene pool or a busy life that makes it hard to exercise and eat right, you’re not to blame for weighing more than you’d like. But, you can be in charge of taking the next step.

Learn about surgical weight loss at a free seminar
Join us at a free educational seminar to learn about surgical weight loss. You’ll hear from a surgeon about the latest techniques and have a chance to ask questions in a non-judgmental setting.

Providence Regional Medical Center Everett
Medical Office Building, Cascade Room
1330 Rockefeller Ave. • Everett, WA 98201

Wednesday, April 18 • 6:30pm - 9:00pm
Wednesday, May 16 • 6:30pm - 9:00pm
Wednesday, July 18 • 6:30pm - 9:00pm
Wednesday, Aug. 15 • 6:30pm - 9:00pm

Reserve your spot today: Visit Providence.org/WeightLossSurgery or call 1-800-979-8986.