

News from the Nebraska Medicine Health Network | NebraskaMed.com

Spine Surgery
No Roadblock for
Triathlete | p8

New Dermatology and Epilepsy Clinics Open | p 5

Holistic Approaches to Breast Cancer Surgery | p 6

Melanoma Cases on the Rise Among Young Adults | p 12



## **CONTENTS**

Fall 2018

#### 3 advances

• Learn more about research trials

#### 4-5 news briefs

- New scheduling options
- Help for sleep problems
- Osteoporosis clinic helps prevent bone fractures
- 3-D mammography increases breast cancer detection
- Nebraska Medicine expands dermatology and epilepsy services

#### 6-9 features

- Advanced breast cancer surgery techniques
- Triathlete excels after successful spine surgery

#### 10 in the community

 Patient Assistance Fund helps families stay together during treatment

#### 11 health plus+

- Early sport specialization raises injury risk
- What treatment options are available for people with addictions and psychiatric disorders?
- Why is it important to have a primary care doctor?

#### 12 dermatology

- Melanoma is on the rise among young adults
- ONTHE COVER: Renee Spencer, spine surgery patient

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## LETTER FROM THE CEO



This is my first opportunity to write to you in my role as the chief executive of Nebraska Medicine. It is an opportune time, because this publication, *Advancing Health*, gives us the chance to share stories about what we are doing to improve the health of the communities we serve. I'd like to share with you a few examples.

Stroke and heart disease are leading causes of death and disability in our country. How quickly a person is

treated when they're experiencing stroke symptoms or chest pain will affect their prognosis. The American Stroke Association and American Heart Association recently awarded both our hospitals, Nebraska Medical Center and Bellevue Medical Center, with the Gold Plus stroke award. Both hospitals also recently achieved chest pain certification. These awards recognize that our experts are leaders in providing proven, evidence-based care quickly to minimize the effects of stroke and get potential heart attack patients the immediate care they need. This is not a singular event; the awards are based on multiple years of data. I'm also extremely grateful for our partnership with our local EMS providers and the extraordinary care they help us provide our patients. Their quick response is essential for ensuring the best possible patient outcome.

Nebraska Medicine continually works to move advancements from the research laboratory to the direct care of patients. As an academic health network, we participate in approximately 400 clinical research trials. CAR T-cell therapy was one of those trials. Nebraska Medicine was one of the first in the country to employ this therapy when it was an experimental treatment. Our physician-scientists helped establish that it could be an effective treatment option for some patients with lymphoma who had no other options. Our patient care teams, our research partners at the University of Nebraska Medical Center (UNMC) and our partners at other leading cancer centers across the country helped fast-track CAR T-cell therapy from the research laboratory, to clinical trials, to an accepted treatment option that is becoming more available nationwide.

To better serve our community, Nebraska Medicine recently announced a bigger, better home for Clarkson Family Medicine, a well-established primary care practice. This new site, near 13th and Leavenworth streets, will help us engage with the community in an area where we have not had a presence before. We are committed to offering new access points which allow us to provide care to more people, when and where they need us most.

In closing, I am grateful for the opportunity to lead Nebraska Medicine. Our statement, Serious Medicine. Extraordinary Care. is more than a slogan, it is what we believe.

Sincerely,

James Linder, MD

CEO

Nebraska Medicine

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## New Immune Fighting Therapies for Multiple Myeloma Show Promise

Several new, promising CAR T-cell therapies for multiple myeloma patients will be available at Nebraska Medicine through two clinical trials that are expected to open this year.

The therapy is part of a growing treatment option in cancer that harnesses the body's own immune system to attack a tumor. T cells are white blood cells that help the body fight infection and cancer. These clinical trials involve taking the patient's own T cells and programming them to recognize a marker on the cancer cell, leading the immune system to attack the cancer.

"These two trials use the same overall concept as the new CAR T-cell therapy that has shown so much success with our lymphoma patients," says Sarah Holstein, MD, PhD, Nebraska Medicine hematologist and medical oncologist, who specializes in multiple myeloma treatment and research.

The two studies will encompass multiple groups of myeloma patients, including newly diagnosed patients with high-risk disease, as well as relapsed/ refractory patients who are no longer responding to chemotherapy.

"Early studies have shown a remarkable efficacy for this new therapy," says Dr. Holstein. "In several studies, more than 90 percent of patients had significant responses and these were patients who had essentially run out of treatment options. The exciting thing about the studies we will be opening is they will allow patients to receive CAR T-cell therapy earlier in the course of their disease. We hope this will result in patients achieving deeper and longer-lasting responses"

Dr. Sarah Holstein, hematologist and medical oncologist

Currently, there is no cure for multiple myeloma and many patients receive multiple therapies through the course of their disease management. Treatment for many newly diagnosed myeloma patients typically starts with chemotherapy, followed by an autologous stem cell transplant, where stem cells are harvested from a donor. "Even though the transplant process can be very effective at keeping the disease under control for long periods of time, the vast majority of patients will still relapse," says Dr. Holstein. "These patients never get a break. They typically stay on one therapy until it stops working and then move to the next one. We hope that CAR T-cell therapy will change that.

"Medical centers across the country are eager to offer this therapy to their patients. The experience and expertise we have gained from our early involvement in the lymphoma CAR T-cell therapy clinical trials has enabled us to be on the forefront of these new myeloma studies."

Dr. Holstein says hope for long-term disease control for multiple myeloma has never been brighter. "There is much optimism that this may be the next big breakthrough treatment for myeloma patients," she says. 🔻

>> Learn more about Nebraska Medicine clinical trials by visiting NebraskaMed.com/Clinical-trials.



# news briefs



### New Scheduling Options Available

One Chart | Patient is making it easier than ever for Nebraska Medicine patients to schedule appointments with their providers.

Patients registered in the portal can now directly schedule appointments with established providers at all of our primary care clinics, which include Family Medicine, Internal Medicine and doctors at the Olson's Center for Women's Health.

Direct scheduling is an online tool that allows you to select the time and day you want to see your provider, including your preferred location. Available appointment times are displayed with an up-to-date view of providers' schedules.

In addition to direct scheduling, other popular aspects of the site include the ability to send your provider a personal message. You can also log in to review lab results, imaging and pathology reports, as well as request prescription renewals, review your medical history and pay bills.

## ➤ Sign Up for One Chart Patient

Not registered yet? Visit OneChartPatient.com and select "Request New Account."

## Is Sleep Eluding You? Find Out Why

If you are always tired, have trouble falling asleep or staying asleep, snore or stop breathing during your sleep, or need sleep aids, you should be evaluated to find out why. Most sleep problems can be attributed to an underlying cause, whether it's depression, anxiety, pain or sleep apnea, says Michael Summers, MD, pulmonologist and medical director of the Nebraska Medicine Sleep Disorders Center.

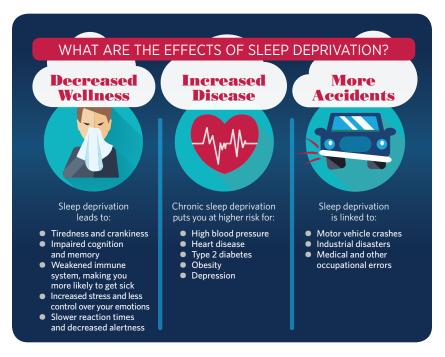
Untreated sleep apnea can lead to serious health issues, including high blood pressure, heart rhythm problems, heart attack, stroke, lack of diabetes control, Alzheimer's disease, decreased seizure threshold and exacerbation of chronic pain.

Getting evaluated for obstructive sleep apnea, the most common sleep disorder, can now be done in the comfort of your home. The home sleep apnea test requires you to wear a finger probe that measures oxygen levels, a belt that goes around the chest to measure effort of breathing and a sensor under the nose to measure airflow. This data is then evaluated and interpreted by a sleep medicine specialist. If it is determined that you may have another type of sleep disorder, you may be recommended for an overnight sleep study in our accredited sleep lab.

"Our sleep lab is staffed by medical experts specially trained to diagnose and treat multiple sleep disorders to help get you back on the road to a good night's sleep," says Dr. Summers. "After your evaluation, we will follow up and work with you to resolve or manage your sleep issue."

#### ➤ Not Feeling Rested?

To schedule an appointment with one of our sleep specialists, call us at **800.922.0000**.



#### You are never too young or too old to improve the health of your bones.

Eat fruits and vegetables



Avoid smoking





Eat a well-balanced diet, including foods good for bone health

Get enough calcium and vitamin D



Limit alcohol intake

Engage in regular exercise

### **Osteoporosis Clinic Helps Prevent Bone Fractures**

The numbers are staggering. Osteoporosis is responsible for 2 million broken bones every year in the U.S. and causes 75,000 deaths, according to the National Osteoporosis Foundation. It is estimated that 1 in 2 women and up to 1 in 4 men ages 50 and older in the U.S. will break a bone due to osteoporosis.

Often called the brittle bone disease, osteoporosis causes the bones to become weak and brittle with age. The problem is, most people don't know they have osteoporosis until they break a bone.

In an effort to boost the number of patients diagnosed and treated for osteoporosis and prevent secondary bone fractures, Nebraska Medicine recently opened an osteoporosis clinic at the Orthopaedics clinic at Lauritzen Outpatient Center.

"The elderly are at the highest risk for a fracture because their bone is more fragile," says Laura Graeff-Armas, MD, Nebraska Medicine endocrinologist, who specializes in osteoporosis. "Hip fractures could mean the end of life for some of these patients. Many of them go to a skilled nursing facility and never return home. We want to prevent these types of injuries."

#### ➤ Have You Had Your Bones Checked?

To schedule an appointment for an osteoporosis screening, call 800.922.0000.

## 3-D Mammography Improves Detection

The latest advancement in breast cancer screening, 3-D mammography, is available at Nebraska Medicine - Nebraska Medical Center, Nebraska Medicine – Village Pointe and Bellevue Medical Center. Three-dimensional mammography allows the radiologist to view the breast in multiple thin layers or "sliced" images, providing better detection of smaller masses.

"Three-dimensional mammography decreases callbacks by 40 percent due to the greater clarity provided by these images," says Cheryl Williams, MD, Nebraska Medicine radiologist. "Overall, it is estimated that it increases breast cancer detection by 10 to 30 percent. The smaller a tumor is when we find it, the more likely it is that we'll be able to cure it."

#### October Is Breast Cancer Awareness Month

Call 800.922.0000 to schedule your mammogram now.



## **Dermatology** and **Epilepsy Services Expanded**

Nebraska Medicine has expanded its services. A new Dermatology Program recently opened and specializes in all aspects of dermatology, including skin, hair and nail concerns.

Our team of board-certified dermatologists not only treat general dermatology issues, but also have received specialized training and expertise in areas such as Mohs micrographic surgery for skin cancers, diseases of the leg veins, high-risk skin cancers and autoimmune skin diseases, as well as reconstructive surgery of the face, head and neck.

"We are excited about bringing a very comprehensive and high level of advanced dermatologic care to Nebraska Medicine patients," says Ashley Wysong, MD, Nebraska Medicine dermatologist. "Our team is committed to providing a personalized experience with an individualized treatment plan that is designed just for you."

The Epilepsy Program at Nebraska Medicine is also growing. The program added three new fellowship-trained epilepsy specialists and opened a new clinic in the Bellevue community. "This expansion allows us to see additional patients in a more timely fashion," says Deepak Madhavan, MD, Nebraska Medicine epilepsy specialist and medical director of the Epilepsy Program.

To find out more about our Dermatology and Epilepsy programs, call 800.922.0000.

# Holistic Approaches to



# **Breast Cancer Surgery**

diagnosis of breast cancer can be both physically and emotionally draining. Even after treatment is over, the physical scars surgery can leave behind can serve as a painful reminder of that difficult time. Nebraska Medicine offers some of the most sophisticated breast reconstruction options to help women feel whole again after treatment is over.

This was welcome news for Erin Aten, who was 29 years old when she received the devastating news that she had breast cancer. Having breast reconstructive surgery following a mastectomy was a necessary step to help her move forward emotionally and still feel complete.

When Aten's doctors suggested an advanced breast reconstructive procedure called deep inferior epigastric perforator (DIEP) flap, she knew that was the procedure for her.

Instead of implants, DIEP flap uses excess skin and fat from the abdomen to construct a new breast, which provides a more natural-feeling breast and tends to age like a natural breast, says Shannon Wong, MD, Nebraska Medicine plastic and reconstructive surgeon. The DIEP flap procedure differs from the traditional free TRAM flap approach in that it does not use abdominal muscle, making it less physically demanding on a woman; provides a quicker recovery; and carries less risk for other complications, such as abdominal hernia, says Dr. Wong, one of a few surgeons in the region who performs the procedure. DIEP flap also involves a microvascularization technique in which the surgeon carefully reattaches the blood vessels of the flap to blood vessels in the chest. This allows the patient to have feeling in her breasts.

"I wanted my breasts to feel as natural as possible and didn't want to worry about having additional breast surgeries in the future," says Aten. "I trusted my doctors completely and am so happy with my decision."

The breast cancer team at Nebraska Medicine is committed to providing each patient with a customized plan that addresses the individual's physical, emotional and spiritual needs now and in the future.

"With all the advances in breast cancer care, women are living for many years after a breast cancer diagnosis," says Jessica Maxwell, MD, Nebraska Medicine surgical oncologist and oncoplastic surgeon. "However, the results of surgery can often leave women feeling disfigured and negative about their bodies and become a constant reminder of the cancer. Today, we are looking at survivorship and how to best help women not only survive but thrive by taking a whole-person approach."

A "whole-person" approach entails the input of all the specialists involved in the patient's care, from the medical oncologist to the surgeon, radiation oncologist, radiologist, pathologist, genetics counselor, and plastic and reconstructive surgeon.

"This multidisciplinary approach allows us to develop a collaborative plan that provides the best treatment for the cancer as well as the best aesthetic outcome," says Dr. Wong.

Oncoplastic surgery is another option that improves the cosmetic appearance of the breast while surgically removing the cancer. "The goal is to return the breast to a healthy appearance, which can lead to better quality of life because it improves self-confidence, selfesteem and comfort with intimacy." says Dr. Maxwell, the only surgeon in this area who is trained to perform this unique procedure. Once the tumor is removed, Dr. Maxwell can reshape the breast to prevent contour deformities, realign the nipple and areola, and balance the breasts to provide symmetry - all during the same surgical procedure.

Dr. Maxwell also performs a nipple-sparing mastectomy, which involves maintaining the entire skin of the breast and hiding the scars in the skin lines under the breast to provide the appearance of a normal breast contour. "We can also reconstruct the nipple or refer patients for a 3-D tattoo of the nipple-areola complex," says Dr. Wong. 🔻

#### ➤ Breast Cancer Care **Designed Around You**

To schedule an appointment with one of our breast cancer specialists, call **402.559.5600**. Learn more about breast cancer care at NebraskaMed.com/Breast.



## Triathlete Back on Top

ot many people take up Ironman competitions in their late 40s, much less after having spine surgerv.

But Renee Spencer did both. And it won her a first-place spot in her age group for the USATriathlon Age Group National Championship. Two months later, she finished one person away from qualifying for the world team.

"The only regret I have is that I didn't have the surgery sooner," says Spencer. "It was instant relief from my pain."

Spencer was 46 years old when she decided to start training and competing in Ironman competitions. "I did my first triathlon and did pretty well and thought, 'Wow, I can do this.' Before I knew it, I was training for Ironmans."

An Ironman triathlon consists of a 2.4-mile swim, 112-mile bike ride and 26.2-mile run.

But then the pain started. It began in her legs and wouldn't subside, even with rest and physical therapy. After seeing several orthopaedic specialists, Spencer selected orthopaedic surgeon Chris Cornett, MD, with the Comprehensive Spine Program at Nebraska Medicine.

An MRI revealed that one of her discs was worn to the bone. Dr. Cornett recommended conservative measures first, which included steroid injections and more rest to help alleviate the pain. But it never went away completely, and as Spencer began to rev up her workouts, so did the pain.

It was time ... Spencer had to make a choice. If she wanted to continue to compete at the same level, she would need surgery. In December 2016, Spencer underwent a spinal fusion surgery.

Dr. Cornett accessed the spine by entering near Spencer's abdomen to avoid going through the back muscle. He then removed the damaged disc and thickened tissues between the two vertebrae. A bone graft and cage was

"Dr. Cornett assured me that this was the right procedure and that there was no reason why it couldn't be 100 percent successful, so that I could return to training and competing."

Renee Spencer, spine surgery patient

then used to fill the space between the two vertebrae. A metal plate and screws were used to hold the vertebrae in place while the bone grew together.

"Renee's procedure was so successful because a lot of thought and planning went into this before she had the surgery," says Dr. Cornett. "Successful back and spine surgery is based on selecting the right procedure for the right person. Not everyone is a

candidate for surgery, and different procedures are right for different people. I also follow my patients for two years after their surgery in case we need to tweak things along the way."

"I chose Dr. Cornett because he spent so much time explaining the procedure and showed concern for my physical and mental health," Spencer says. "He assured me that this was the right procedure and that there was no reason why it couldn't be 100 percent successful so that I could return to training and competing."

The specialists at the Comprehensive Spine Program are trained to treat spine issues from the common to the complex. This team of specialists includes physical medicine and rehabilitation (PM&R) specialists, orthopaedic surgeons, neurosurgeons, pain specialists, and physical and occupational therapists who work together to ensure patients receive the best and most appropriate care quickly

Dr. Chris Cornett discusses spine imaging results with patient Renee Spencer.



# After Spine Surgery

Renee Spencer is back to living a full, active life after her successful spine surgery.

### **Suffering from Back Pain?** We Can Help.

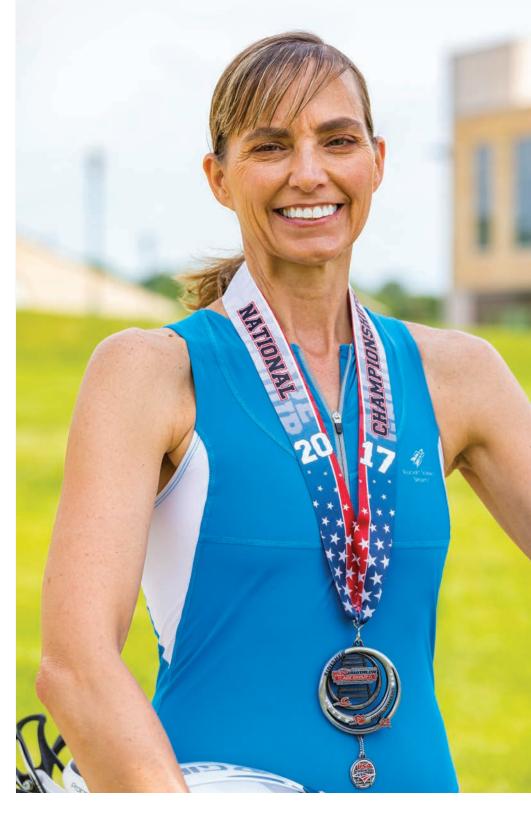
Specialists at the Comprehensive Spine Program can get you in quickly for an evaluation and treatment and ensure you are seen by the appropriate specialist. For an appointment, call 800.922.0000 or learn more at NebraskaMed.com/Spine.

and conveniently. A call to the Comprehensive Spine Program will connect patients to an experienced nurse who will listen to their symptoms and help them schedule an appointment with the most appropriate specialist.

Spencer says she was walking the hallways of the hospital the same day as her surgery and was home the next day. "I took one pain reliever the day I came home and never had to take another one again," she says.

Spencer began increasing her walking distance every day. By six weeks, she was aqua jogging; at eight weeks, she was swimming; and by 10 weeks, she was bicycling. By 12 weeks, she had returned to two to four hours daily of competition training.

Six months later, she was competing again and winning races. Today, Spencer is training for the USATriathlon Age Group National Championship and has her goal of winning. "I feel great and I have no pain now, thanks to Dr. Cornett," says Spencer. 🔻



## Patient Assistance Fund **Helps Families Stay Together**

akota Case was born with a rare heart defect. By the age of 25, he had lived through three open-heart surgeries and had been listed for a heart transplant.

But the summer of 2015 would prove to be one of the most trying periods of his life. His heart was pumping at an extremely low output - too low to provide enough blood to sufficiently supply his organs.

Dakota spent that summer in the Intensive Care Unit (ICU) at Nebraska Medical Center, and 40 days of it was on an extracorporeal membrane oxygenation (ECMO) machine to allow his lungs to grow stronger. ECMO takes over the work of a person's own lungs and/or heart by delivering oxygen to the blood. As Dakota's lungs grew healthier, he was able to receive a left ventricular assist device (LVAD), moving him closer to a heart transplant.

"It was touch-and-go for a whole month," says his mother, Jennifer Case. Jennifer and her husband, Chuck, who live in Sioux Falls, South Dakota, left their home and business that summer so that they could be with Dakota during that tenuous time.

The following spring, Dakota's condition deteriorated again. This time he would be hospitalized until he received a heart transplant. Again, Jennifer had to leave her home and family business so that she could stay with Dakota during that threemonth period before and after the heart transplant.

None of this would have been possible without the help of the Nebraska Medicine Patient Assistance Fund, says Jennifer. The Patient Assistance Fund provides assistance to hundreds of patients and their families each year by helping them

with everyday needs, such as lodging, meals, gas cards and transportation.

The fund provided Jennifer and Chuck with a place to stay and food cards during those long, difficult months in 2015 and 2016, when Dakota's condition was the most fragile. "The first summer we had nothing coming in," says Jennifer. "I don't know how we would have done it without the extra help. But being there for Dakota was so critical for his recovery. The first week in the ICU he was literally dying. If we had not been there, he would have lost hope."

"Having their presence, comfort and that familiarity not only gave me

Jasmine Silva, social worker, provided support services to Dakota Case and his family.



hope but optimism, strength and determination to keep fighting," says Dakota.

"This fund can make it or break it for some patients," says Jasmine Silva, a licensed clinical social worker. "They literally wouldn't be able to receive the care they need here if we weren't able to use these funds to help them with some of the everyday needs of living. The Patient Assistance Fund is also another means that allows us to provide a whole-person approach to care. It helps relieve the emotional stress that financial strains can have on a patient and family so that they can

focus on getting well."

It's exactly what the Case family needed. "To me, this fund is iust as important as the facilities here," says Jennifer. "Without it, many people wouldn't be able to get the extraordinary care they need from the amazing doctors and nurses at Nebraska Medicine."

Dakota has since gotten married and works at a hospital in Sioux Falls. South Dakota, as a cardiopulmonary patient care technician. "I like being a source of strength and comfort for others who are having similar health problems."

You can make a difference. Learn how at NebraskaMed.com/Giving.

## **Early Sport Specialization** Raises Injury Risk

Many parents recognize the positive influence that sports activities can have on their young athletes. Sometimes, that passion pushes athletes into early sports specialization — the focus on a single sport at a young age with year-round training.

"Sports specialization can be detrimental due to the increased risk this poses for a different spectrum of injuries than adults because their bones are still growing," says MatthewTao, MD, Nebraska Medicine orthopaedic surgeon. "Using the same muscles and skill sets repeatedly can put too much stress on growing bones and soft tissues."

Sports medicine specialists recommend that young athletes not specialize in one sport until at least late adolescence or after high school. "Studies show that young athletes engaged in year-round training, decreased age-appropriate play and sports with a high degree of technical skill carry a much higher injury risk," says Ross Mathiasen, MD, Nebraska Medicine sports medicine specialist. "Incorporating monthlong breaks at least three times a year from a particular sport is a good rule of thumb."

There is also a performance component that cannot be ignored. "Studies show approximately 80 percent of world-class athletes were multisport athletes," says Dr. Mathiasen. "And statistically speaking, early specialization is associated with a decreased likelihood of achieving an elite level."

"Both as a medical community and particularly as parents, we must evaluate the goals we have for our kids," says Dr. Tao. "Ultimately, we hope our kids' athletic endeavors will serve as a springboard to becoming well-rounded individuals who embrace an active lifestyle."

#### ➤ Injured? Get Evaluated Fast

Our Friday Night Sports Injury Clinic offers a no-cost evaluation of your athlete's injury from 9 to 11 p.m. every Friday through Oct. 26 at the Lauritzen Outpatient Center. No appointment is necessary. For more information about the clinic, or to make an appointment with one of our sports medicine specialists, call 800.922.0000 or visit NebraskaMed.com/Friday-Sports.

### What treatment options are available for people with addiction and psychiatric disorders?

John Franzen, MD, psychiatrist, medical director of the Intensive Outpatient Program



A new Behavioral Health Intensive Outpatient Program (IOP) is now available at Nebraska Medical Center to provide support to those suffering from addictions and psychiatric disorders. Mental illness and addiction can go hand in hand for many individuals. This program helps support the needs of individuals with

co-occurring disorders who require more support than weekly or monthly outpatient services, provided they do not require detoxification or other inpatient treatment.

Treatment entails a combination of individual and group therapy and may also include medication offered by a multidisciplinary team of providers, which involves a board-certified addiction psychiatrist, licensed therapists and a registered nurse. An individualized treatment plan is developed to address addiction and psychiatric disorders and teach coping skills, such as managing emotions, mindfulness, medication use, relapse prevention and values exploration. Family members are also encouraged to participate in the program to assist their loved one with recovery. >> For more information on the Intensive Outpatient Program, call 800.922.0000.

### Why is it important to have a primary care doctor?

Alberto Marcelin, MD, family practitioner, Chalco



There are many benefits to having a primary care doctor. Think of your family doctor as the quarterback of your care team. We know your whole history and not only diagnose, but also treat many acute and chronic conditions. We are the champions of your health care maintenance - like annual exams,

immunizations and preventive screenings. These are things that can easily fall by the wayside if no one is keeping track of them. We want to not only keep you healthy, but also catch potential problems before they become more serious or life-threatening.

A good family doctor can take care of 85 to 95 percent of your health care needs. We can refer when appropriate and coordinate care between multiple specialists. In fact, according to the American Academy of Family Physicians, studies suggest that access to primary care through family doctors is associated with improved health outcomes, lower mortality rates, reduced emergency department use, decreased rates of preventable hospital admissions, less invasive and lower cost care and higher patient satisfaction.

>> To find a primary care doctor, call 800.922.0000.

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## Melanoma on the Rise Among Young Adults

early everyone has moles. Whether it's a mole you've had since childhood or an age spot that recently appeared, it's important to keep an eye on skin spots and new growths. In many cases, it will likely be nothing to worry about. But moles, particularly those that are growing or changing, can also be a sign of melanoma, the most serious of all skin cancers.

While melanoma accounts for just 1 percent of all skin cancers, it is responsible for the majority of skin cancer–related deaths.

The incidence of melanoma has been steadily increasing for the past 30 years, and that increase has been greatest among adolescents and young adults.

"The majority of melanoma cases are due to a combination of genetics, ultraviolet exposure from the sun and artificial UV through tanning beds," says Ashley Wysong, MD, Nebraska Medicine dermatologist and Mohs surgeon. Some research has shown that people who use tanning beds are 74 percent more likely to get melanoma than those who don't use them.

One or more blistering sunburns in childhood also appears to boost your risk. But you don't have to burn to damage your skin. Tanning in and of itself, as well as freckles and sunspots, are signs of ultraviolet damage to the skin, says Dr. Wysong.

If you can't stay out of the sun during peak hours, sunscreen or photoprotective clothing is your next best protection.

Choose sunscreen with an SPF of at least 30 that is "broad-spectrum," which means you'll be protected from both cancercausing UVA and sunburn-inducing UVB rays. Three of the most common mistakes people make when applying sunscreen include not picking the appropriate sunscreen, not applying enough and not reapplying often enough. (Apply every two hours and more frequently if sweating or in water.)

Early detection is key when it comes to melanoma. "When caught in the early stages, melanoma very rarely goes outside of the skin and is highly curable with surgery," Dr. Wysong says.

Remember, melanoma can occur anywhere on the body, even those areas that have not been exposed to the sun.

Dr. Wysong suggests following the Skin

Cancer Foundation's ABCDEs for detecting the warning signs of melanoma:

- A = Asymmetry Oddly shaped or asymmetrical
- **B = Border** Uneven and irregular in shape or has a faint edge
- C = Color Multicolored, red, white or bluish-black
- D = Diameter They start small but grow larger than the diameter of a pencil eraser
- **E = Evolving** Changes in size, color or shape over time. They may also bleed, itch or crust over. **♥**

#### ➤ Suspicious Mole?

Call **800.922.0000** to schedule an appointment with one of our dermatologists or visit **NebraskaMed. com/Dermatology**.

Dr. Ashley Wysong, dermatologist and Mohs surgeon, examines a patient's face for skin damage.



920MA