

# heart to heart

WakeMed Heart & Vascular News | Winter 2016



## Structural Heart Successes

*All About Angina  
More Than Good Fortune*

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## Dear Readers,

Quality of life. It makes celebrating with friends and family, enjoying the sights and sounds of the holidays, and looking forward to the coming New Year possible and memorable.

Probably the greatest attribute of the WakeMed Heart Center team is their compassionate focus on improving quality of life for their patients. From life-extending structural heart procedures performed by such cardiologists and cardiothoracic surgeons as Drs. Wood, Boulton and Go to the welcome relief from the discomforts of angina made possible by interventional cardiologists like Drs. Kelley and Othman, our team is always on the lookout for new and better ways to treat heart and vascular disease.

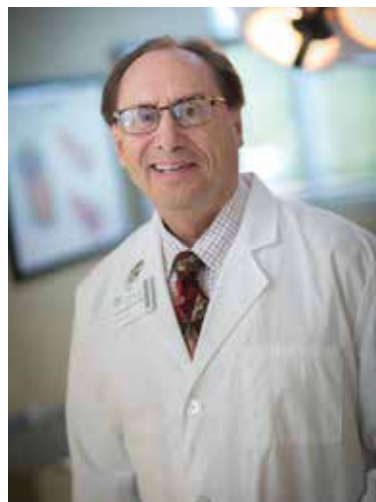
Long-time cardiologist Charles Mangano, MD, with WakeMed Heart & Vascular Physicians, is largely responsible for establishing and perpetuating that steadfast focus on enhancing quality of life. After more than 30 years of serving WakeMed patients and families, Dr. Mangano is now enjoying a well-deserved retirement, and we wish all good things for him and his family. I'm sure that our newest members of our team, cardiologists Jordan Allem, MD, and Tapan Godiwala, MD, as well as cardiothoracic surgeon Judson Williams, MD, are already aware of our team's nurturing dynamic.

At the WakeMed Heart Center, we hope you and your loved ones are enjoying the highest quality of life and many wonderful things to look forward to in 2017.

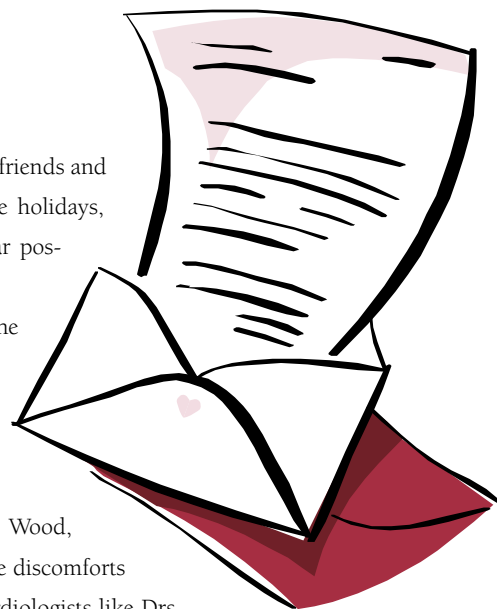
Warmest regards,

*Betsy Gaskins-McClaine,  
RN, BSN, MSN-C*

Vice President, Heart & Vascular Services,  
WakeMed Health & Hospitals



*Charles Mangano, MD*





# CONTENTS

- 4** All About Angina
- 6** A New Lease on Life
- 7** Patient Profile - Charles "Charlie" Beal
- 9** The Gift of Hope
- 9** Patient Profile - Samuel Collins
- 10** Patient Profile - Scott Stidham
- 11** News Briefs



- 12** Welcome New Physicians to WakeMed Heart & Vascular!
- 13** Happy Retirement, Dr. Charles Mangano
- 14** More Than Good Fortune
- 15** News Briefs

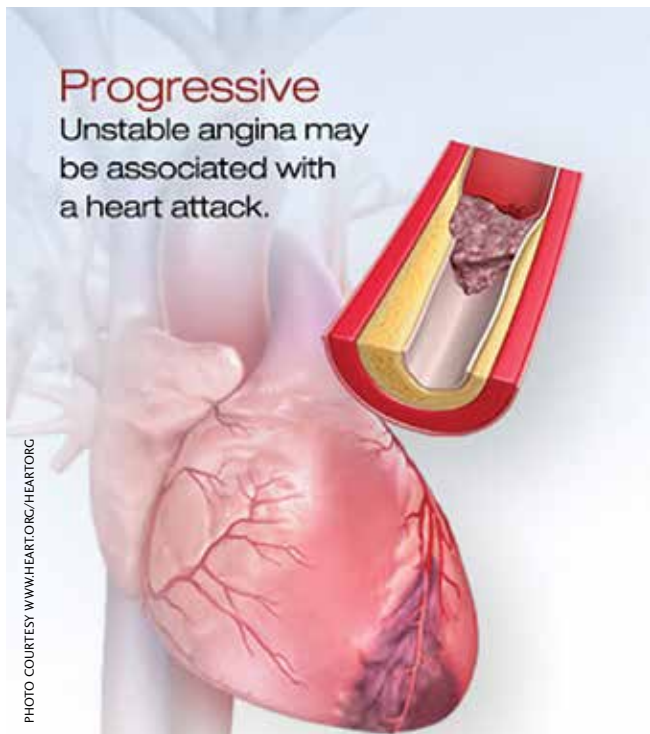
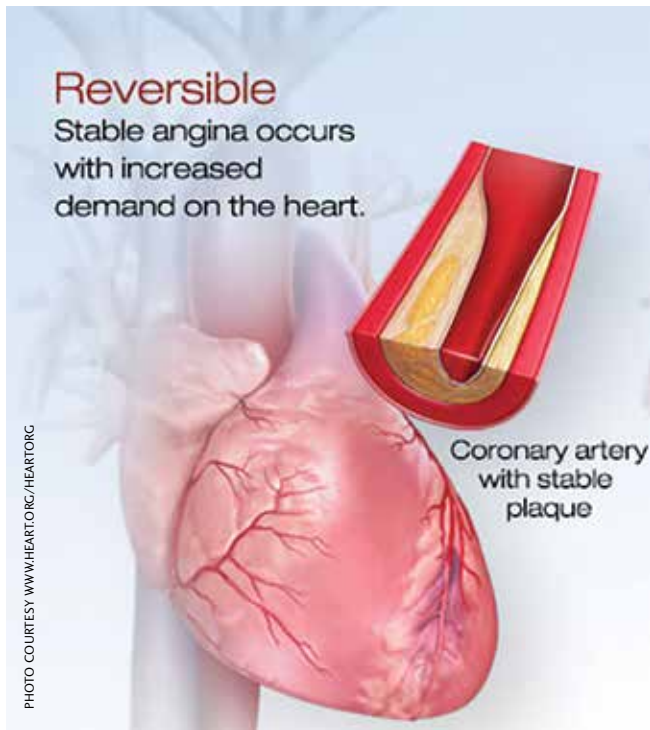
Judson Williams, MD

Jordan Allen, MD

Tapan Godiwala, MD, RPVI

## Welcome New Physicians to WakeMed Heart & Vascular!

# All About Angina



“I thought it was indigestion because the pain would start after lunch when I was taking my walk,” recalls Susan Wright when asked about her experience with angina. “I just felt a lot of pressure through my chest – like an elephant was sitting on it – and pains radiated up the sides of my neck. I also had numbness in my arms, which really made me anxious. I thought I might be having a stroke.”

“Cardiac angina results when there is a reduction of oxygen-rich blood flowing through the arteries to the heart



Islam Othman, MD

due to partially or sometimes completely blocked cardiac arteries,” explains Islam Othman, MD, an interventional cardiologist with WakeMed Heart & Vascular Physicians. “The discomfort occurs with exertion because there is a supply/demand mismatch between the amount of oxygen the heart needs and the

amount it is actually getting when a person is exercising or stressed. It’s the hallmark of coronary artery disease.”

There are two types of angina – chronic stable angina (angina pectoris) and unstable angina. “Stable angina is chest pain that comes on when the heart is stressed as

## STRESS & ANGINA

Like exercise, stress can trigger symptoms of chronic stable angina. “Stress causes an increase in adrenalin,” explains Dr. Kelley. “That increase in adrenalin increases heart rate and blood pressure, causing coronary spasm.” The heart needs more oxygen-rich blood to keep up with the workload. Blocked arteries prevent the blood from reaching the heart causing angina.

..... “ .....  
*Cardiac angina results when there is a reduction of oxygen-rich blood flowing through the arteries to the heart due to partially or sometimes completely blocked cardiac arteries. The discomfort occurs with exertion because there is a supply/demand mismatch between the amount of oxygen the heart needs and the amount it is actually getting when a person is exercising or stressed.*  
 ..... ” .....

- Islam Othman, MD, an interventional cardiologist with WakeMed Heart & Vascular Physicians

## ANGINA SYMPTOMS IN WOMEN

Women who have angina do not always experience the trademark chest pain and pressure associated with the condition. According to Dr. Othman, nausea, dizziness, air hunger, fatigue and other non-specific symptoms (like Susan Wright's neck and arm pain) that come on with exertion or stress can also indicate angina. Women who regularly experience these or any discomforts during exercise or stress should see their doctor and ask about the possibility of angina.

during exercise,” explains John Kelley, MD, who is also an interventional cardiologist with WakeMed Heart & Vascular Physicians. “It is generally controlled with antianginal medication, and people can typically enjoy relatively normal lives.”

Dr. Kelley describes unstable angina as either sudden-onset or prolonged chest pain that is not as responsive to medication as previously stable angina. “It can also be an acceleration of stable angina,” he adds. Unlike stable angina, unstable angina often occurs when a person is at rest, such as lying in bed. The typical chest pressure, tightness or squeezing feeling that people with angina experience may also be accompanied by shortness of breath, sweating and/or weakness.

Because heart disease in the form of blocked arteries is the cause of both types of angina, it is important for the cardiologist to perform tests to determine the extent of the



John S. Kelley, MD, FACC

blockage(s) and the best treatment.

“We start with a physical exam,” says Dr. Othman. Additional testing may include:

- **Stress test** – Allows the cardiologist to understand how the heart is working when under stress
- **Electrocardiogram (ECG)** – Allows the cardiologist to see how the heart is beating
- **Echocardiogram** – Gives the cardiologist a picture of the heart's arteries, chambers and valves

For very high-risk patients, whose stress test results or symptoms warrant it, a catheter-based angiogram is performed. During an angiogram, the patient receives dye intravenously and a catheter is threaded through the patient's arteries to the heart. Using X-ray technology, the

cardiologist can see where there are blockages. If necessary, the cardiologist can use the catheter to perform balloon angioplasty and place stents to open blocked arteries and restore blood flow.

“If a patient has unstable angina, we like to move to catheterization fairly soon,” says Dr. Kelley. “Studies shows that unstable angina patients who have crescendo symptoms and receive early catheter-based intervention have better outcomes than those who [are not treated aggressively].” Plaque can rupture in the artery, causing it to swell. A clot can also form, further blocking the artery, which can cause heart attacks. Early catheter-based intervention can prevent this from happening.

Treatment for that small segment of individuals who have had 100 percent blockage in an artery for three months or more is also available in the WakeMed Heart Center. Dr. Othman is highly experienced in performing complex, catheter-based interventions for these individuals. In addition to his work with patients, he also teaches providers throughout the United States how to perform the procedure.

Both Dr. Kelley and Dr. Othman agree that the goal of any treatment for angina is symptom relief. “When we can relieve symptoms and improve quality of life, we have done our job,” says Dr. Othman. ♥

## MILLENNIALS, TOO

According to the American Heart Association, approximately 3 million Americans are diagnosed with angina each year. While it may surprise you, it's not completely uncommon for a person in their 30s to experience angina. Both Dr. Kelley and Dr. Othman have treated patients in their 30s and 40s for angina and heart disease, which is often considered a condition of only the elderly.



# A NEW LEASE ON LIFE

*More and more, the WakeMed Structural Heart Team Makes It Possible*

Though somewhat difficult to clearly define, structural heart disease refers to defects and abnormalities in the valves and interior walls of the heart as well as the arteries and veins that carry blood to and from the heart. While some structural heart defects are present at birth (congenital), others can develop over-time, such as aortic and mitral valve stenosis and valve narrowing or leakiness. Patients who have these issues are often elderly whose hearts have endured wear and tear over the years, have other age-related health conditions and, consequently, cannot undergo open heart surgery.

The Structural Heart team at the WakeMed Heart Center is a group of talented cardiologists, cardiothoracic surgeons and support staff including advance practice providers and cardiac nurses who work together to achieve the best possible outcomes for their patients. They give patients with complex structural heart issues who cannot undergo open-heart surgery, a new lease on life that was not possible until recent years. In fact, the highly advanced treatments they provide are catheter-based and performed in the catheterization lab of the hospital. This means they are performed through a very small incision, often under local rather than general anesthesia. Less pain, less blood loss and faster recovery are all benefits of their minimally invasive techniques.

## The Symptoms

People with advanced valve conditions can experience a fast or irregular heartbeat, fainting, breathlessness, chest pain and other symptoms that make it difficult if not impossible to do daily activities. If left untreated, these structural heart problems can lead to heart failure and stroke.

## The Treatments

The WakeMed Structural Heart team is just that – a team of cardiothoracic surgeons,



*photo cutline sample*

interventional cardiologists, cardiologists and nurses, who work together to determine the right treatment for patients. This team approach is particularly important when working with delicate patients who may have other chronic health problems and cannot undergo more invasive open surgery. Some of the latest procedures the Structural Heart team offers for patients include:

### MITRACLIP®

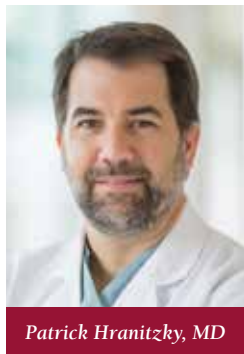
When the heart's mitral valve does not close correctly, it leaks blood back into the heart's atrium chamber. This is called mitral regurgitation and over time causes an enlarged heart, heart failure and increased pressure on the lungs. The MitraClip is a small device that is placed in the mitral valve to help it close correctly. A small incision is made in the patient's groin area where a catheter is inserted to deliver the MitraClip to the heart's faulty valve.

The surgeon and cardiologist, along with the anesthesiologist, work together as a

team to create images of the heart and guide the catheter to the faulty valve. The clip is sent through the catheter up to the heart and placed on the abnormal section of the faulty valve. After recovery, the patient experiences less shortness of breath, less fluid build-up and a better quality of life.

“It is amazing to see how much better these patients feel immediately after the clip placement and they leave the hospital after a





..... “ .....  
 With WATCHMAN, patients can  
 enjoy a higher quality of life  
 with the same stroke prevention  
 benefits as a blood thinner.  
 ..... ” .....

- Patrick Hranitzky, MD, WakeMed  
 Heart & Vascular Physicians

brief stay with only a band aid on the catheter access site,” said Frances Wood, MD, of WakeMed Heart & Vascular Physicians.

While MitraClip is a major advancement for valve repair in people who cannot undergo traditional surgical repair, it is not a replacement for valve surgery. “It is an excellent option for those who are unable to undergo traditional surgery for whatever reason,” said Dr. Wood.

The procedure’s success comes from the right collaboration between a cardiologist and cardiac surgeon, both of whom are performing the procedure together.

“MitraClip represents a merging of our fields, requiring the cardiologist to use a more invasive technique and a cardiac surgeon to take a less invasive approach – all in the interest of our

## Enjoying the Road to a Normal Life Following TAVR Procedure

For Mr. Charles “Charlie” Beal of Clayton, NC, and a Georgia native, who recently received a Transcatheter Aortic Valve Replacement (TAVR) at WakeMed, getting back to normal and enjoying the simple things in life – like walking upright – is a blessing.

Beal and his wife, known to all as Miss Polly, spent 47 wonderful years married to each other. Miss Polly suffered from Alzheimer’s disease and in their last years together he was her primary caregiver. All that care took its toll on Beal’s health. He had terrible back pain and struggled to stand upright or walk and did so with tears in his eyes. He also had a faulty heart valve causing low energy and shortness of breath. His heart was not pumping as it should.

In August 28, 2016, Beal came to WakeMed to have back surgery to ease his pain. “I have a 14 inch cut – it’s a beautiful cut – on my back where they did the surgery, and I immediately felt relief. No more pain or tingling in my legs.”

After recovering from the back surgery and having therapy to regain his strength, Beal started feeling lightheaded and almost fainted in physical therapy. He was diagnosed with a narrowed aortic valve, aortic stenosis. He met the structural heart team who felt he was an excellent candidate for the less invasive way to fix his valve. In late October, he had his TAVR procedure



photo cutline sample

to replace his faulty heart valve, which was performed by Dr. Frances Wood and Dr. Bryon Boulton of WakeMed Heart & Vascular Physicians in the WakeMed Heart Center Catheterization Lab. “All I felt was a little pressure and a pinch, which is what Dr. Wood told me I would feel.”

After three days recovery, Beal was able to walk the halls on the nursing unit – something he was unable to do weeks before due to his back pain and shortness of breath.

With additional outpatient therapy, Beal hopes to enjoy doing the simple things in life.

“I want to be able to walk standing up

straight and do things in my yard that I haven’t been able to do,” said Beal. “I’m working to get in shape and ready to enjoy a normal life.”

Beal also believes that the Lord has plans for him and is working to literally straighten him out. “I want to travel with my brother, Wayne, and see the western U.S. We grew up watching old western movies and television shows and we want to experience the Wild West,” he said with a gleam in his eye.

For Mr. Charlie Beal, looking forward to riding off in to the sunset to enjoy the Wild West, and getting back to a normal life, certainly is a blessing.

I do like this image better. can you get the verbal consent?

patients,” says Bryon Boulton, MD, WakeMed Heart & Vascular Physicians.

### TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR)

During a TAVR procedure, a very small incision is made in the groin to access the femoral artery, at the collarbone area or in the chest. Catheters and wires are used to place the valve across the diseased valve, with the heart still beating. The new valve is deployed within the diseased valve and is secured into place, pushing the old valve out of the way. The new valve starts to work as a normal valve immediately.



In many cases, patients who have these procedures feel better soon after the procedure and see an improvement in quality of life within a week or two.

### WATCHMAN™ – A STRUCTURAL HEART APPROACH TO PREVENTING STROKE

Patients who have atrial fibrillation (irregular heartbeat) have a greater risk of stroke than people with normal heart rhythms. For these patients, the top chamber of the heart quivers rather than beats strong causing the blood to not pump out as it should. Blood that stays within the heart collects in the heart's left atrial appendage and overtime becomes a blood clot. The clot can then become loose, travel out of the heart to the brain and cause a stroke.

It is typical for a patient with atrial fibrillation to take blood-thinning medication for the rest of his or her life to reduce the risk of blood clots and stroke. If patients have a history of bleeding, falls or are unable to take blood thinners, they may be a candidate for a new device to prevent stroke.



Patrick Hranitzky, MD, and Frances Wood, MD, both of WakeMed Heart & Vascular Physicians, offer patients who have heart rhythm problems and a high risk of stroke an alternative to a lifetime of blood-thinning medications using the WATCHMAN™ technology. The WATCHMAN™, which resembles a tiny mesh umbrella, is inserted into the heart via catheter through the femoral vein in the groin. The device covers the appendage in the heart's atrium preventing a blood clot from dislodging.

In the past, patients who cannot take blood thinners for whatever reason, aspirin was the only option for stroke prevention. “For example, if a 75 year-old female patient has high blood pressure and a history of stroke, her annual risk of stroke is 9.8 percent. Aspirin alone reduces her risk to 7.8 percent while a blood thinner such as Warfarin reduces her risk to 3.4 percent,” explains Dr. Wood. “Now we have a new option in the WATCHMAN™ device where our patient's risk of bleeding is reduced by 70 percent and stroke risk reduction is comparable to Warfarin.”

“With WATCHMAN™, patients can enjoy a higher quality of life with the same stroke prevention benefits as a blood thinner,” comments Dr. Hranitzky.

### Repair Work for Patent Foramen Ovale (PFO) and Atrial Septal Defect (ASD)

WakeMed's Structural Heart team also works together to repair holes or abnormal chambers in the heart that cause cardiovascular problems. Common examples of these are patent foramen ovale (PFO) or atrial septal defect (ASD).

PFOs and ASDs are holes in the tissue

membrane that divides the two upper chambers (atria) of the heart. An ASD occurs when the membrane does not develop properly in the uterus and, thus, a baby is born with the defect. A PFO occurs when a newborn's heart does not develop properly after birth and a hole remains in the foramen ovale. Surprisingly, nearly a quarter of the population is born with this condition and most live without symptoms.

For those who do have cardiovascular issues such as a stroke with no obvious cause, a PFO is generally suspected and should be closed. These holes can be closed with a disc shape device that is delivered via a catheter leading to the heart from the groin.

“Our Structural Heart team is excited to bring patients a means of repairing congenital heart defects,” said Dr. Wood. “It's an exciting time to be a cardiologist at WakeMed and offer many procedural advances to better our patients' lives.”

While we have covered the most common structural heart problems, but there are others. Structural heart problems treated at WakeMed include aortic stenosis, aortic regurgitation, mitral stenosis, mitral regurgitation, bioprosthetic valve failure, patent foramen ovale, patent ductus arteriosus, atrial septal defect, left atrial appendage occlusion, hypertrophic cardiomyopathy, and paravalvular leak.

If the symptoms of atrial fibrillation, valve disease or congenital heart defects are impacting your quality of life or that of a loved one, it's time to take action. Call WakeMed Heart & Vascular Physicians' Structural Heart office at 919-232-5202. ♥

I left this open in case you have an image for the PFO/ASD if not I can put in another pull quote. Is there one you would like to use.



# THE GIFT OF HOPE

## *Mended Hearts Builds Relationships, Provides Encouragement*

Mended Hearts is a national and community-based non-profit organization that offers the gift of hope to heart disease patients, their families and caregivers. As the largest cardiovascular peer-to-peer support network in the world, their mission is dedicated to inspiring hope and improving the quality of life for heart patients and their families – helping people who have experienced any type of heart event understand that there can be a rich, rewarding life after heart disease diagnosis.



Volunteers go through special training to become accredited Mended Hearts visitors at WakeMed. They listen to heart patients' concerns, share their personal experiences and help patients understand what they may face ahead including lifestyle changes, depression, recovery, and treatment.

Education is also a key chapter component as Mended Hearts offers various educational sessions on subjects related to the heart from both WakeMed presenters and outside speakers. "Even though we work within the walls of the hospital, our chapter participates in community events such as Go Red for Women, the American Heart Association Heart Walk, and the Mid-Atlantic region's Mended Hearts Education & Training Conference," said WakeMed cardiovascular patient educator Hazel Covington.

In 2017, WakeMed's Mended Hearts chapter will continue to offer seminars and speakers on topics like transcatheter aortic valve replacement (TAVR), as well as a guided tour of a local grocery store to understand and promote tips for heart healthy eating. One of the most exciting projects of the new year will be establishing two scholarships for nursing students.

Anyone can join Mended Hearts and attend the educational activities. The WakeMed chapter meets monthly and offers support, education and activities for cardiac survivors, their family members as well as medical professionals in the cardiology field. For information about Mended Hearts of the Triangle – at WakeMed Cary Hospital, call 919-350-0875. For information about the WakeMed's Raleigh Campus group, call 919-350-6888.

To become a visitor to patients and their families, you must have had a cardiac event yourself, be a member of Mended Hearts, and go through the WakeMed volunteer program's orientation and the Mended Hearts chapter accreditation program. For further information, please contact Covington (hcovington@wakemed.org, 919-350-6888) or incoming president Bud Coggins (bud.coggins@gmail.com). ♥



*photo cutline sample*

## *A Mended Hearts Disciple*

The WakeMed Mended Hearts chapter's visitors have made more than 1575 visits to patients and their families in 2016. One of those visitors is Samuel Collins, a retired City of Raleigh worker who makes the trip from his home in Beaufort, NC, to counsel others. Following a 2013 heart attack and open heart surgery, Collins was in a dark place in his life. He didn't want anyone else to go through that, so he chose to be a light – a ministry – for those suffering.

"Modern technology gives us assurance," Collins said, "but there can still be a lot of fear. What's going on? What's going to happen? Who is in control?" He ministers to patients, sharing the love of Jesus, and providing empathy for what lies ahead.

Although each visitor has their own technique, Collins sees himself as a disciple, building relationships, taking the edge off, and sharing words of encouragement. "The patients and the families can be overwhelmed and have trouble dealing with it all. They see my countenance, that I am sensitive to them, and they begin to tell me their story."

As most surgeries are scheduled early in the week, Collins likes to do pre-operative visits on Sundays. He meets patients and families, sharing how his own surgery was a life changer, and that the Lord has brought him through. He offers support to loved ones, and is sometimes requested in the ICU following surgery.

"After my surgery I said, 'Lord, you have to give these people someone to give them hope.' He answered, 'If not you, then who?' He opened the door."

Now, Collins strives to be a light in what can be a very dark situation. He sees the road to recovery as a spiritual one.

"Everyone is fearfully and wonderfully created and has more purpose than they've ever been told. We all play a role, and we can work together for the greater good."

# 30 Years Later

## Patient Still Thanking WakeMed Physician



..... “ .....  
*He was an ideal patient, so agreeable  
and trusting in me and WakeMed.*

..... ” .....  
- Dr. Merrill Hunter of WakeMed Heart &  
Vascular Physicians Cardiovascular and  
Thoracic Surgery



*Above, left: photo cutline sample. Above right, Scott picking blueberries on his brother-in-law's farm in Wilmington, NC. One of his favorite summertime activities, 1994.*

In October 1986, Raleigh's Scott Stidham needed a coronary artery bypass. Dr. Merrill Hunter of WakeMed Heart & Vascular Physicians Cardiovascular and Thoracic Surgery remembers him as an easy-going gentleman with a positive outlook on life. "He was an ideal patient, so agreeable and trusting in me and WakeMed." That attitude served Stidham well as recently – 30 years after the procedure

– Dr. Hunter received a note thanking him for saving the patient's life.

Stidham's wife, Norma, said he continued to feel blessed, and wrote to Dr. Hunter every five years. As both families are members of Hayes Barton United Methodist Church, Dr. Hunter kept tabs on Stidham's progress: incorporating a heart-healthy lifestyle that includes diet and exercise; Norma

taking a course on how to change her shopping habits and prepare nutritious meals; and the Stidhams walking three miles per day together.

The procedure allowed him to continue to play golf as well as entertain his grandchildren with trips to the museum or walks to the park. He and his wife enjoyed their quality of life – from dinners with friends, to

## WakeMed Raleigh Campus Receives Chest Pain Accreditation

WakeMed's Raleigh Campus received reaccreditation by the Society of Cardiovascular Patient Care (SCPC). SCPC's accreditation process ensures that hospitals meet or exceed a variety of standards and undergo a comprehensive onsite review. An SCPC surveyor visited Raleigh Campus in August to review our capabilities and protocols to provide optimum patient care for chest pain and heart attack patients with final reaccreditation awarded in September. WakeMed Cary Hospital received similar reaccreditation from SCPC earlier in 2016.



"Having an organization such as the Society of Cardiovascular Patient Care in association with the American College of Cardiology come to us and validate the exceptional care and service we provide speaks volumes to the commitment and teamwork by our staff, physicians and support teams to provide our patients and families the best of care every time, every day," said Betsy Gaskins-McClaine, vice president of Heart & Vascular Services.



*Top, Norma and Scott during their trip to Egypt in May 1998. Middle, Scott and Norma going their 50th wedding celebration with their two children and their spouses and the four grandchildren, 2003. Bottom, Norma and Scott at Wrightsville Beach on their 60th wedding anniversary, 2013.*

antiquing and trips to Wrightsville Beach, to visiting six of the seven continents!

Heart surgery has a relatively short history compared to other specialties in medicine. Advancements have changed the way physicians approach cardiac surgery in more complex and older patients. Dr. Hunter says he is both humble and grateful to be able to do what he does day in and day out, alongside the highly capable staff of fellow WakeMed doctors, nurses and technologists who make it possible to save or extend a life.

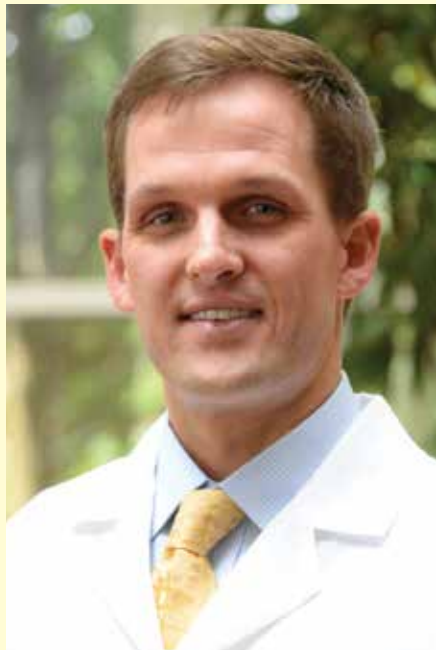
"We are offering so much more for our heart patients, and mortality and morbidity are holding with excellent results," said Dr. Hunter. "The future of cardiac surgery is bright and constantly advancing."

*Shortly after sending his 30-year thank you note to Dr. Hunter, Mr. Scott Stidham passed away at age 90. The WakeMed Heart Center staff extends their sympathies to the Stidham family and thanks Mrs. Stidham for speaking on behalf of her husband and sharing what their thirty years following heart surgery meant to them both. ♥*

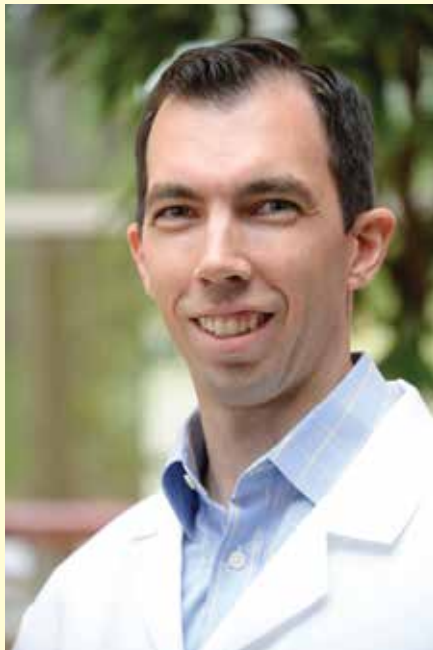
Also, we just received Primary Stroke Center certification for Cary Hospital and I'm looking for details about that. It will be about the same length as what's below and include a Joint Commission gold seal art. Hope to send that to you shortly....







Judson Williams, MD



Jordan Allem, MD



Tapan Godiwala, MD, RPVI

## Welcome New Physicians to WakeMed Heart & Vascular!

*WakeMed Heart & Vascular Physicians recently welcomed new physicians to the WakeMed family.*

### **JUDSON WILLIAMS, MD**

Dr. Judson Williams joined WakeMed Heart & Vascular Physicians – Cardiovascular & Thoracic Surgery practice in July. As a cardiothoracic surgeon, Dr. Williams has expertise in transcatheter aortic and mitral valve replacements (TAVR, TAVI) and other minimally invasive approaches to structural heart abnormalities as well as performing coronary artery bypass graft (CABG) surgery. Dr. Williams performs endovascular repair of the thoracic aorta (TEVAR) and well as complex repairs for aortic aneurysms in the chest including the aortic root, ascending, and arch. “As a cardiac surgeon, the operations I perform are designed to help my patients both feel better and live longer; that is, to improve not only the duration of their life, but also the quality.”

Dr. Williams is internationally known for cardiovascular clinical research. He has published more than 60 articles on the subject including studies published in prestigious medical journals such as *JAMA*, *Circulation*, *NEJM*, and the *Journal of the American College of Cardiology*. He completed his undergraduate degree at Princeton University in New Jersey; his medical degree from Vanderbilt University in Nashville, Tennessee; and his residency and fellowships at Duke University Medical Center and Duke Clinical Research Institute in Durham.

A North Carolina native, Dr. Williams believes in the mission of providing the best cardiovascular care that can be found in the world right here in his home state. He feels fortunate to be part of the WakeMed Heart Center because of the unique way he and his colleagues including anesthesiologists, physician assistants, surgical and heart center nurses, physical therapists, and many others commit to individual patient care.

“I enjoy getting to know each of my patients as a person. When I see a patient, I join their team and commit to the best solutions for that patient and his/her family.”

Dr. Williams and his wife Margaret have three children.

### **JORDAN ALLEM, MD**

Dr. Jordan Allem, a general cardiologist, joined WakeMed Heart & Vascular Physicians – Cardiology Raleigh Campus office in August. Dr. Allem specializes in treating coronary artery disease, cardiac arrhythmias such as atrial fibrillation, congestive heart failure, syncope and valvular heart disease such as aortic stenosis. He has a particular interest in preventive cardiology as a means to prevent heart diseases, focusing on exercise and healthy aging in addition to lifestyle changes. He comes to WakeMed with a training background in echocardiogra-

phy, nuclear cardiology and stress testing as well as vascular imaging.

“I believe the best care comes from not only being able to treat and heal the patient’s heart, but from building lasting relationships with patients and their families,” Dr. Allem said.

Dr. Allem is originally from Georgia and a graduate of the Medical College of Georgia and received his undergraduate degree from Berry College in Rome, GA. He went on to complete an internship and residency in internal medicine at Wake Forest Baptist Medical Center in Winston Salem, NC, where he was selected to serve as chief resident. He completed a fellowship in cardiovascular diseases at the Scripps Research Institute/Scripps Clinic in La Jolla, CA, serving as chief fellow for cardiovascular disease in his final year. In addition, he has been elected to Alpha Omega Alpha Medical Honor Medical Society.

Dr. Allem and his wife fell in love with North Carolina during his residency, and they are happy to call North Carolina home. They enjoy spending time with their two young children, watching the Atlanta Braves, playing tennis, hiking and traveling.

#### **TAPAN GODIWALAL, MD, RPVI**

Dr. Tapan Godiwala joined WakeMed Heart & Vascular Physicians – Cardiology in September and is based at the WakeMed North Healthplex office in Raleigh. He is a non-invasive cardiologist who specializes in the management of coronary artery disease, valvular heart disease, cardiac arrhythmia, congestive heart failure, and the medical management of vascular disease.

Dr. Godiwala is a North Carolina native who received his undergraduate and medical degrees from East Carolina University. He is returning to his home state after practicing cardiology in Albuquerque, New Mexico. He completed his internal medicine residency in New York City at Mount Sinai and cardiology fellowship in Baltimore at the University of Maryland.

The immediate gratification of treating acutely ill patients with cardiac disease in the hospital, while simultaneously preventing and managing heart disease as an outpatient attracted Dr. Godiwala to cardiology.

Dr. Godiwala is excited to return to North Carolina and work to improve the cardiovascular health in our community. In his spare time, he enjoys traveling, exercising, and spending time with his two young boys and wife. ♥

# Happy Retirement, Dr. Charles Mangano



On October 1, Charles Mangano, MD, retired from WakeMed Heart & Vascular Physicians after serving patients in Wake County for more than 37 years. Dr. Mangano got his start at WakeMed as a resident in 1975 and later became one of the founders of Raleigh Cardiology (now WakeMed Heart & Vascular Physicians) in 1979. As a leader in our heart and vascular services, Dr. Mangano has touched the lives of many patients and staff members over the years. Before he hung up his white coat and ID badge, Dr. Mangano shared a few words about his career and legacy with Heart to Heart.

*When we formed Raleigh Cardiology, there were no cardiology-specific practices in Wake County. From the beginning, we were supported by WakeMed’s administration to develop a program that was technologically advanced and would meet the needs of our patients. Our approach has always been that if you take good care of the patient in front of you, the rest will fall into place. I’ve always enjoyed the challenge of staying current with medicine and delivering excellent, evidence-based care, but to me the magical part of medicine is connecting with people. Learning who they are and what is meaningful to them; that’s the most fun I have. In all these years, one thing that has not changed is the commitment of our WakeMed staff to excellence and to making a difference in somebody’s life, however small. I see it in action all day long, from staff who hand out trays and clean our rooms, therapists of all disciplines, secretaries and nursing staff, other physicians and advanced practice providers and our administrators. It was so comfortable for me as a physician to enter into this world every day and to embrace this culture. To all of you who have inspired me, I am forever grateful.*

Best wishes to Dr. Mangano and we hope you enjoy your new-found time with family and working on your farm in the mountains. ♥



# More Than Good Fortune

## *The Health Benefits of Collards & Black-eyed Peas*

“Peas for pennies, greens for dollars” is an association that leads to wealth and good luck according to southern tradition. After the Civil War, Union soldiers feasted on southern crops but left behind the greens and black-eyed peas because they considered them feed for livestock. These hardy crops provided much-needed nutrition during Reconstruction in the South, literally saving families from starvation. Thus, eating this humble produce on the first day of the New Year is synonymous with bringing new hopeful beginnings and good fortune in the coming months.

Black-eyed peas and collards offer more than the promise of luck and wealth. When prepared without salt or salty pork products, they offer health benefits too.

Black-eyed peas, also known as cowpeas, are actually beans. These legumes are low-fat and packed with soluble fiber, which helps block the absorption of cholesterol and stabilize blood sugar levels. B vitamins, which help break down carbohydrates and protein to produce energy, and vitamin A, which is good for your vision, are also part of black-eyed peas’ makeup as are vitamin K and potassium. Black-eyed peas are considered low oxalate too, which makes them a good source of protein for people who have kidney stones.

Collard greens are also rich in vitamins A and K as well as the B vitamin folate. Folate helps the body produce new cells and supports nervous system health. It can help reduce the risk of birth defects, including heart defects, in unborn children. The soluble and insoluble fiber found in collards may help prevent certain cancers in addition to warding off cholesterol absorption.

A note to those who take blood-thinning medications such as warfarin: Vitamin K is present in both black-eyed peas and collards. When it is consumed inconsistently and/or in large amounts, it may interfere with the effects of blood thinners. This does not mean you have to avoid foods that are high in vitamin K – foods like collards and black-eyed peas that contain it usually have many other vitamins and minerals that are essential to a healthy diet. The important thing to do is to be consistent with your vitamin K intake. When you consume a lot more or a lot less, make sure to tell your doctor.



## Greens & Beans

Serves 2-3

### INGREDIENTS:

- 2 lbs collards, mustard greens, baby spinach or kale (remove stems, tear in bite-size pieces)
- 2 Tbsp olive oil or canola oil
- 1 medium red onion, finely chopped
- 5 cloves garlic, minced
- 1 large tomato, diced
- 1 19-ounce can black-eyed peas, drained and rinsed, no salt added if possible
- 1/2 tsp cayenne pepper or black pepper
- 1/4 tsp cinnamon
- 1/4 tsp dried ginger
- 1/2 cup unsalted chicken broth, or vegetable broth

### DIRECTIONS:

In a skillet, over medium-high heat, heat the olive oil. Add the onion and sauté till translucent. Add the garlic and tomato. Cook till tomato is soft. Add greens, a small batch at a time. Cook till wilted. Add in all the other ingredients. Cook for about 5 minutes till everything is mixed well. Serve warm over a bed of cooked brown rice.



## WakeMed Heart & Vascular Physicians Cardiology – Cary Office Moves



In August, WakeMed Heart & Vascular Physicians Cardiology in Cary moved its offices to 600 New Waverly Place, Suite 201, in Cary. Down the road from their old office, their new space is in an office building at the corner of Tryon Road and New Waverly Place drive located within the Waverly Place shopping center. Office hours are Monday through Friday 8 am to 4:30 pm, and their office phone number, 919-350-2580, remains the same.

## Mended Hearts of the Triangle at WakeMed



The Mended Hearts of the Triangle meets monthly at WakeMed and offers support, education and activities for cardiac survivors, their family members and medical professionals in the cardiology field. Upcoming meetings include:

### February 20, 2017 – 11:30 am to 1 pm

Come help us celebrate American Heart Month and hear all about what's new in the world of cardiology.

### March 20, 2017 – 11:00 am to 1 pm

Join us for a "location" meeting as we tour a local grocery store to understand heart healthy options and what's really in our food.

### April 17, 2017 – 11:30 am to 1 pm

Spring is here and it's time to release your stress. Join us for an outdoor meeting at Millbrook Baptist Church in Raleigh as we enjoy walking their labyrinth.

**For more information about our Mended Hearts meetings, please visit [www.wakemed.org](http://www.wakemed.org) or call Mended Hearts Coordinator Hazel Covington at 919-350-6888.**



## Join Us to Celebrate American Heart Month Coming Soon

### Go Red For Women!

**Saturday, February 4, 2017**

**11 am to 2 pm**

**Crabtree Valley Mall, Raleigh**

Save the date and help us celebrate National Go Red for Women Day with the American Heart Association. The first Friday in February is designated as a day to raise awareness that women suffer from heart disease and steps can be taken to reduce their risk. On Saturday, we go out in to the community to celebrate heart health for all. Enjoy free heart health screenings and activities and be a part of the movement to make a difference in the heart health of our community. For more information, please visit [wakemed.org/heartsandvascular](http://wakemed.org/heartsandvascular)

## Love Your Heart As Much As We Do!

**February 1–14, 2017**

**Cameron Village,  
Raleigh**

Cameron Village and WakeMed Heart Center are partnering to increase awareness among women

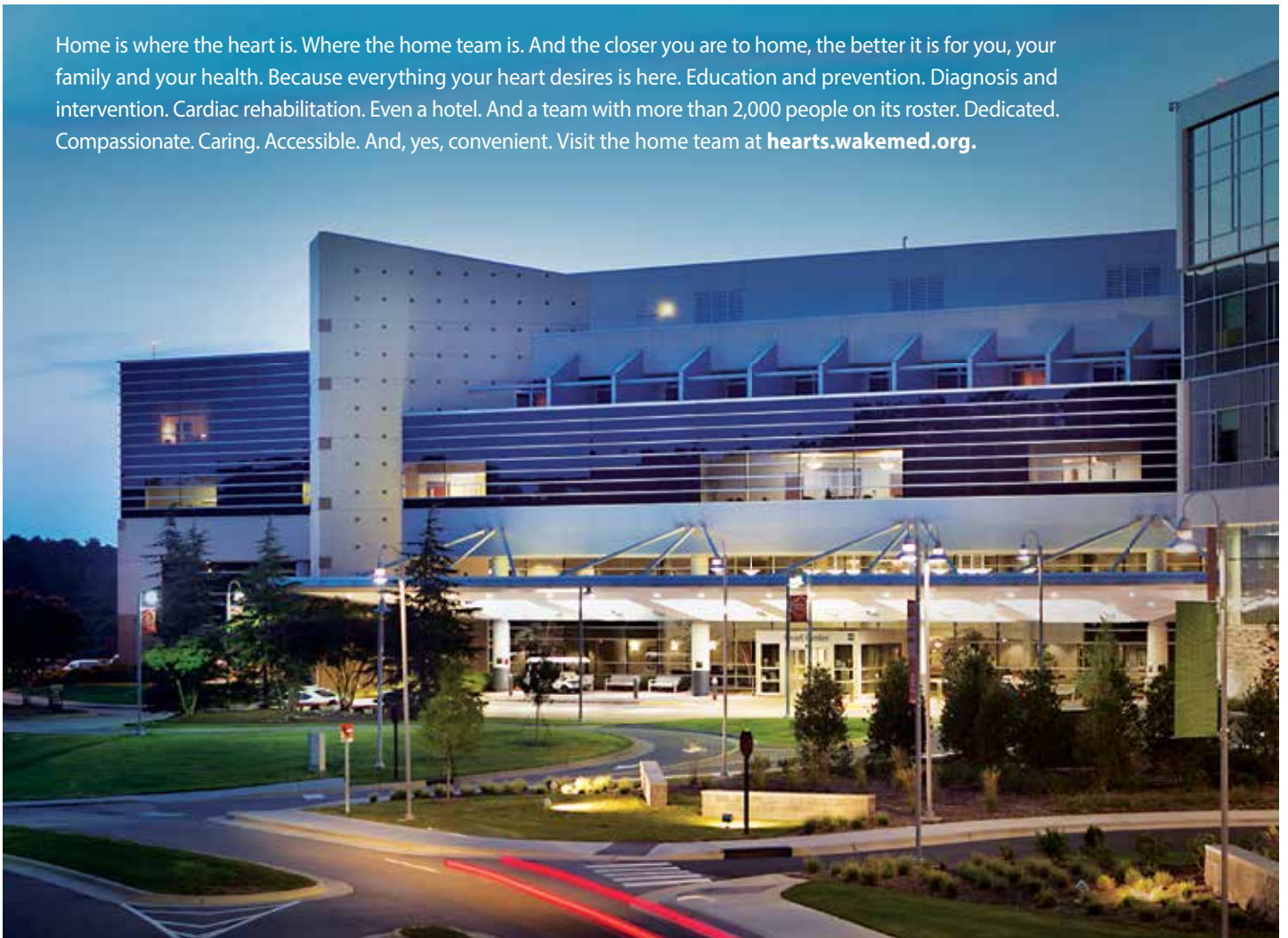
that heart disease is their biggest risk and that shopping can be a great cardio exercise. Pick up a heart healthy information card from participating Cameron Village stores and if \$250 more is spent in a single day from February 1–14, shoppers can choose from three free gifts. Qualifying shoppers also receive a certificate for a free Total and HDL cholesterol test and blood pressure check from WakeMed. Visit [wakemed.org/heartsandvascular](http://wakemed.org/heartsandvascular) to learn more.



## Home.

When it comes to your heart and your health, there's no place like it.

Home is where the heart is. Where the home team is. And the closer you are to home, the better it is for you, your family and your health. Because everything your heart desires is here. Education and prevention. Diagnosis and intervention. Cardiac rehabilitation. Even a hotel. And a team with more than 2,000 people on its roster. Dedicated. Compassionate. Caring. Accessible. And, yes, convenient. Visit the home team at [hearts.wakemed.org](http://hearts.wakemed.org).



Exceptional people. Exceptional care. For every heart.

