

# PA

ISSUE 16 | Spring 2023 | Free

# HEALTH

YOUR GUIDE TO FITNESS & WELL-BEING



## Waking up to what's possible

Max Murray no longer wrestles with sleep problems



FINDING FERTILITY FIXES

PEDIATRIC VISITS WITH LESS STRESS

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**On the cover:**  
A long-overdue diagnosis got Maxwell Murray (shown with his father, David Murray) back on the wrestling mat in Mifflinburg, Pa.  
Photo by Mark Dastrup.



Spring is here, bringing some much-needed warmth and sunshine. I hope you find plenty of time to enjoy it.

This edition of *PA Health* is dedicated to our youngest patients. Children aren't just small adults — their bodies and brains are growing. As Zoë Myers' story illustrates, childhood injuries that aren't addressed properly can lead to problems later. Kudos to the team who got this young woman's life back on track.

Max Murray, a self-described "angry kid," had nightmares and sleep paralysis until his condition was finally treated. Max says he's in the driver's seat now thanks to a doctor who got his diagnosis right.

For those who don't have kids but are thinking of starting a family, we asked a fertility specialist to explain treatments that can help make it possible — even if you've waited a little longer to start trying.

All this plus a fun kid-friendly recipe, tips on keeping kids calm when it's time to see the doctor and a tribute to the donors who help make what we do at Geisinger possible. Patients of all ages benefit from their generosity, including the beautiful Miracle Kids you see on the facing page.

I hope you enjoy this edition of *PA Health*, and I wish you and your family the best of health this season.

**Jaewon Ryu, MD, JD**  
President and CEO  
Geisinger

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## CONTENTS

- 4 / Teens are fans of sleep, but for Max Murray, the Zzz's didn't come easy. He's resting better after a **life-changing diagnosis**.
- 6 / A child's bone broken in the wrong spot may not grow right, so treatment **focusing on the growth plate** is key.
- 8 / When pregnancy won't happen, a **fertility specialist** can find the issue — and smooth the reproductive path.
- 10 / Try these tips to ease your little one's next (planned or unplanned) **trip to the doctor**.
- 12 / In the healthcare world, **generous donors** don't just warm hearts. They save lives.
- 14 / Know a kid who likes to cook? They can don an apron and team up with you on this **colorful, nutritious recipe**.



## Meet Geisinger Janet Weis Children's Hospital's 2023 Miracle Kids



**Wilson Abram**  
*Mifflinburg*

A dirt bike accident left this young teen with fractured femurs and a shattered elbow — and at high risk for stroke.



**Pete Swistock**  
*Port Matilda*

A bleeding blood vessel in his brain nearly put this 11-year-old in a coma. Emergency surgery got him back on his feet.



**Mason Sharkazy**  
*Beach Lake*

Born with Down syndrome and cystic fibrosis, this feisty toddler has survived cardiac arrest and meningitis.



**Ryan Everett**  
*Lock Haven*

At 14 weeks premature, Ryan had to spend months in the NICU. Now he's 3 years old and thriving.

By Paula Franken

# Waking up from the nightmare of narcolepsy

As Max Murray and his mother pulled into the driveway, he slumped over in the car — his seatbelt was the only thing holding him in place.

“I thought he was joking because he didn’t want to take groceries out of the car,” she says.

But he wasn’t joking. Max was passed out cold.

Then it happened again in school. That’s when his family decided to take him to Geisinger. “They took him in right away,” his mother, Theresa Murray, says. “And I’ll never forget it. They said, ‘You’re not leaving until we know what’s wrong.’ For that I am so grateful.”

These episodes of cataplexy, often referred to as “sleep attacks,” began when Max was in high school, bringing on sudden loss of muscle tone when he was awake. But they weren’t the first strange symptom he’d experienced.

Max had been having intense nightmares, nighttime hallucinations and sleep paralysis since he was 9. He would wake up, unable to move, seeing shadow figures and hearing things that weren’t there. Max was always tired when he was awake, and often sick. He describes his old self as an “angry kid.”

“When I was a kid, I thought I was crazy, so I didn’t open up about it,” Max says. “I was so confused about what was going on. I was 100 percent terrified.”

He’d seen many doctors over the years, but Geisinger pediatric neurologist Anne Marie Morse, DO, was the first to order a sleep study. And finally, at age 17, Max received the diagnosis that set him on the path to successful treatment: narcolepsy.

“Narcolepsy is a chronic neurological disorder. Its most prominent symptom is excessive daytime sleepiness,” Dr. Morse explains. “It’s a rare condition, affecting about one in 2,000 people worldwide.”

It’s estimated that about 50% of people with narcolepsy are undiagnosed. “There’s typically a time lapse of eight to 10 years between symptom onset and diagnosis and there are other conditions that seem to be more likely for many providers — so narcolepsy is too often labeled as one of those things,” Dr. Morse says.

That was Max’s experience, too. “Over the years, I’d seen a lot of doctors and been misdiagnosed, which is actually fairly common with narcolepsy,” Max says. “At one point, they even tested me for leukemia.”

There’s no cure for narcolepsy, but once Dr. Morse diagnosed it, she could prescribe medications that help Max manage his condition. In fact, this former Mifflinburg High School wrestler is feeling so much better, he’s setting his sights on joining a college wrestling team someday.

“It’s hope,” says Max’s father, David Murray. “That’s what Dr. Morse is doing at Geisinger. They’re giving people hope. And they’re giving people their lives back. That’s exactly what they gave Max and our family.”

“Dr. Morse is a superhero in my eyes. I’m so grateful for her,” Max says. “Without her, I’d still be stuck in a state where I’m lost, confused and angry. Narcolepsy no longer runs my life. I look at it like I’m in the driver’s seat now.”

“Narcolepsy isn’t a condition that there’s a cure for at this point,” Dr. Morse says. “However, I think when we reflect on a story like Max’s, he is someone who can say he conquers narcolepsy. Why? Because he beats narcolepsy every single day. He gets out of bed. He takes on the day. And he wins.”



Watch Max and his family tell their own story: [geisinger.org/max](https://www.geisinger.org/max)

## Aaron Wey, MD Pediatric orthopaedic surgeon

As a pediatric orthopaedic surgeon, Dr. Wey cares for young patients brought to Geisinger for fractures.

While a typical fracture may seem like a simple fix, his expertise in pediatric cases helps make sure a child receives the most advanced treatment so that the fracture will heal right.

“It’s beneficial to be evaluated by someone with specialized training. I know what a normal versus abnormal growth plate looks like.”

Dr. Wey enjoys working with children. “They’re funny, they’re cute, they heal well. These are young families I can develop good relationships with. It helps kids get back to fulfilling their potential.”

He sees patients at a pediatric fracture clinic located in the new Orthopaedics and Sports Medicine facility in the Marketplace at Steamtown, Scranton. He and his teammates, Meagan Fernandez, DO, John Deegan, DO, Fred Hess,

MD, and Mark Seeley, MD, make up the only pediatric orthopaedic team in the region.



By Kimberly Adler-Morelli

# Sticks and stones and (kids’) broken bones

## Aren’t broken bones the same in kids as in adults? Not necessarily.

When a child is still growing, healing processes are happening. In an adult, the healing process has to be awakened, leading to slower healing times.

Because they’re still growing, though, a child’s bones are susceptible to a type of injury called a growth plate fracture, or physal fracture. The physis (growth plate) is an area of cartilage cells near the ends of long bones that create solid bone as the child grows. Because they’re the last part of a child’s bones to harden, growth plates are vulnerable to injury. The growth plate helps determine the future length and shape of the bone, so this type of fracture usually needs immediate attention. If not treated properly, it could result in a limb that is crooked or unequal in length when compared to its opposite limb.

## How to fix a fracture

Zoë Myers, 23, of Selinsgrove, broke both bones of her right wrist playing soccer when she was 9. She was taken to a local hospital, where they set her arm in a cast.

Unfortunately, hospital staff didn’t notice an injury to the growth

plate near the end of Ms. Myers’ arm bones.

As she grew, one of the bones, the radius, stopped growing. But the other, the ulna, continued to grow and eventually created a lump on her wrist that made it hard to rest her arm on her desk when writing. She also lost strength and mobility and had pain for years, all due to her wrist injury. She couldn’t fully bend her arm, write comfortably or play guitar.

After years of difficulties, Ms. Myers’ physical therapist recommended she visit Geisinger’s sports medicine program. New X-rays revealed that Ms. Myers should have had surgery rather than a simple cast.

Four years after the injury, Geisinger orthopaedic surgeon Joel Klena, MD, repaired Ms. Myers’ arm. “We basically realigned her forearm,” Dr. Klena says. “I shortened the ulna because it had continued to grow while there was growth arrest in the other bone. There was a mismatch.”

For Ms. Myers, the surgery meant relief, and a return to doing what she loves. “I no longer have daily pain in my wrist — I only feel it when it rains now. Geisinger gave me use of my arm back, the ability to write, the ability to play guitar.”

## How can you tell if your child’s bone is broken?

Symptoms of a broken bone include:

- Out-of-place or misshapen limb or joint
- Swelling, bruising or bleeding
- Intense pain
- Numbness and tingling
- Limited mobility or inability to move a limb

Signs of a growth plate fracture may also include:

- Pain and tenderness, particularly in response to pressure on the growth plate
- Warmth, swelling and tenderness at the end of a bone, near a joint

## When to see a doctor

If you think your child has a fracture, take them to a doctor. And have your child evaluated if you notice a visible deformity their arms or legs, or if they have trouble being active because of persistent pain.

## How are growth plate fractures treated?

Treatment depends on the severity of the fracture. The least serious fractures usually require only a cast or a splint. If the fracture crosses the growth plate or goes into the joint and is not well-aligned, surgery may be necessary.

At the time of injury, it’s difficult to tell if a growth plate has permanent damage. Your doctor may recommend X-rays for several years to make sure the growth plate is growing appropriately. Depending on the fracture’s location and severity, your child may need follow-up visits until their bones have finished growing.

*Selinsgrove resident Zoë Myers is back to the things she loves after having an old fracture repaired properly.*

## Preventing fractures

The best thing you can do to help prevent a fracture is to make sure your child gets enough calcium and exercise to strengthen bones.

Foods high in calcium — like dairy products, grains, nuts and seeds — give bones (and teeth) a boost.

Weight-bearing exercises, such as jumping rope, jogging and walking help develop and maintain strong bones.



A microscopic view of several dark, spherical eggs and many smaller, lighter-colored sperm cells in a light blue fluid. A glass pipette is shown on the left, and a needle is on the right, both pointing towards the center of the field of view.

# *When getting pregnant the old-fashioned way isn't working.*

*If you've been trying to get pregnant for some time without success, it might be time to see a fertility specialist.*

By Paula Franken

Both men and women can have fertility issues, but for women, the risk increases with age, starting in their mid-30s. "If you're a woman under 35 and you've been trying to get pregnant for under a year, there's probably nothing to worry about," explains Geisinger reproductive endocrinology and fertility specialist Jennifer Gell, MD. "But if it's been over a year, you might want to consider fertility treatment. After age 35, try for six months first. And after age 39, give it just three months."

The first thing a fertility specialist does is try to determine what's keeping you from getting pregnant. The testing is non- or minimally invasive and may include:

- Semen analysis
- Blood work
- X-ray or ultrasound procedures

Once the cause has been determined, fertility specialists find the treatment plan that works for you.

"Sometimes the problem is hormonal," explains Dr. Gell. "In that case, medications can help stimulate a woman's egg release. Those medications can be taken orally or injected."

Blockages or other abnormalities can happen in either partner's anatomy. Simple surgery is often all it takes to correct these issues.

Intra-uterine insemination (IUI), also known as artificial insemination, makes sure everything gets where it needs to go when it needs to go there by placing sperm in a woman's uterus right as she's ovulating.

If other fertility treatments haven't worked, it might be time to try in vitro fertilization (IVF). "The IVF cycle begins with medications that stimulate your ovaries to produce mature eggs," Dr. Gell explains. "The eggs will be retrieved and placed in a special dish with sperm. Together, they create embryos that can be genetically tested for correct chromosome number. A single embryo is then placed in the uterus. Extra embryos can be preserved for future use — that way you don't have to go through the cycle more than once."

Waiting until later in life to start a family is a common trend these days — and luckily, there are plenty of ways to help make that happen. "I love my job," says Dr. Gell. "There's nothing like taking my patients on this journey toward their family. It's a truly amazing experience — for all of us."

# A fuss-free pediatric appointment?

Yes, it's possible.

Laila Mattucci of Mount Carmel has her ears checked by Geisinger otolaryngologist Jeremy Mock, MD.

*A child life specialist offers advice on helping your child have a better healthcare appointment.*

## Does the promise of a post-visit sticker fail to make your child's medical appointments calm and productive?

Tracey Craddock, certified child life specialist at Geisinger Janet Weis Children's Hospital, explains how to help your kids stay relaxed from scheduling to sticker selection.

### 1. What should I tell my child to ease their anxiety before a scheduled or emergency visit?

"You really need to consider your child's age and developmental level," advises Ms. Craddock. "Do they need a lot of information or the minimum?"

If the experience will be brand new — like a first trip to the ER — compare the upcoming visit to a past appointment. For example, tell your child that the nurses and doctors will listen to their heart and check their ears just like their family physician does.

Age-appropriate books on topics like getting a cast or X-ray can also break the experience down to their level.

Finally, be honest with your child. If you don't know the answer, say so. But tell your child you can ask the nurse or doctor when you get there.

### 2. How can I prep my child for a vaccine?

Again, honesty is the best policy. An injection can be described a "pinch" that will only hurt for a couple seconds.

The Centers for Disease Control and Prevention also recommends:

- Bring a favorite comforting toy, blanket or book.
- Distract your child with a silly song, story or game like "I Spy."

You can also empower your kids to give them a sense of control. Would they like to watch or not watch the

injection? Do they want to use their right or left arm? Do they want to squeeze your hand? It can also be helpful to let the child know what's expected of them, such as to be very still.

### 3. During the visit, is it better to hold a small child in my lap?

If your child is comforted by being held, do so. Be gentle but firm and don't overpower them. For an injection or procedure, ask your care team what position to use for comfort.

### 4. If I'm taking a child to the ER, they're likely upset. What's the best way to calm them?

Ms. Craddock says, "Acknowledge and validate your child's feelings. Tell them it's okay to be upset and scared, and you'll make sure they know what's going to happen." Talk about ways to make them feel less scared — maybe by reading a book, playing a game or listening to music. And bring along a comfort item — a blanket, stuffed animal or favorite toy.

### 5. After the visit, should I reward the child for good behavior? Is it okay to promise them a treat if they do well?

Sure, you can praise them for doing something that was difficult for them, whether it's just verbal acknowledgment or by letting them pick a meal, book or movie as a treat. But avoid using phrases like "Don't cry." Coping looks different for different people. If your child needs a blood test and holds still for it, praise that. Even if they cried through it, find the thing they did well and acknowledge it.

### 6. Any other suggestions for after the visit?

A post-visit recap can be a great tool. Give the child an example of what they did well. Ask them what would make the next time better. You might discover something you can work on for the next appointment.

Toy medical kits are also great processing tools for young kids. Giving them the chance to "play out" the experience helps them make sense of what happened and gives them control in a situation that was otherwise out of their control.



Geisinger Commonwealth School of Medicine Golf Classic



Ribbon-cutting at Henry Cancer Center

By Beth Kaszuba

# Better health — it's built on this foundation.

A big healthcare system like Geisinger is a business, right? Well, yes... and no.



Geisinger Commonwealth School of Medicine Black Ties for White Coats Gala



Miracle Kid Saige LaCoe

Of course, Geisinger has a CEO, financial officers and employees and facilities whose work and operations depend on payments from patients and insurers.

But many of the things that set Geisinger apart — cutting-edge research, medical education, advanced pediatric care, innovations like the Fresh Food Pharmacy® — are all supported by philanthropy. Generous gifts from major donors who contribute tens of thousands of dollars to open new buildings. Budget-friendly contributions from grateful families who want to say “thank you” for care they’ve received. Employee support for a fund to help colleagues in crisis. Even toys from kids, dropped off for young patients at Geisinger Janet Weis Children’s Hospital.

It all makes a difference, says Nancy Lawton-Kluck, chief philanthropy officer, who leads Geisinger Health Foundation, the organization’s philanthropic arm.

“Every single monetary and in-kind contribution helps Geisinger do extraordinary things,” she explains. “Many people don’t realize we’re actually a nonprofit organization — one that channels 100% of every dollar we raise into programs that keep improving healthcare right here.”

### Helping kids, treating cancer, training doctors

Donors can target gifts just about anywhere they please. But the foundation does identify a few priorities, including pediatric care. For example, philanthropy has helped expand services in rural areas. And a recent \$1 million gift from Susan McDowell, of Lewisburg, will fund projects that are improving and expanding behavioral healthcare for local adolescents — to help ease the lack of access to services in the wake of the pandemic.

Philanthropic gifts also supported the 2022 expansion of the Frank M. and Dorothea Henry Cancer Center at Geisinger Wyoming Valley Medical Center. Thirty years after its opening, thanks to generous support from the Henry family, the center now offers more personalized care, larger and more comfortable treatment spaces and leading-edge technology like CyberKnife®, a non-invasive form of radiation therapy for inoperable tumors.

“It’s inspiring to see a new generation of donors building on the Henrys’ original gift,” says Ms. Lawton-Kluck.

Another foundation priority is medical education. Philanthropy supports scholarships for students at Geisinger Commonwealth School of Medicine — an institution devoted to fostering the next generation of primary care doctors who are encouraged to practice in Geisinger’s geographic footprint to ease shortages of this type of care providers.

### Putting the “fun” in fundraising

Fundraising can be about more than writing a check, Ms. Lawton-Kluck says. It can be a way to bring the community together for engaging, face-to-face activities, like golf tournaments, galas and food-and-wine pairings.

Last year’s main event, the Emerald City Ball, raised nearly \$300,000 for pediatric programs — and kicked off a “Beyond the Bricks” campaign that continues to raise funds for kids’ care.

“As our campaign’s theme suggests, we’re committed to seeking ways to go ‘beyond’ by being even more impactful and patient-centered and bringing care closer to home for every child and family we serve,” explains Sandra Culbertson, MD, chair of the Geisinger Women and Children’s Institute.

Philanthropy at Geisinger is part of a cycle of care, adds Ms. Lawton-Kluck. “Each day, our doctors, nurses, learners, researchers and staff throughout the system invest their time, talent and compassion into caring for our communities. And our generous donors repay that, so together we can do even more.”

### The power of care, gratitude and giving

“If it wasn't for the Geisinger community and the care they provide, I would not have the privilege of standing in front of you all today. In addition to saving my life... they spent hours combing and detangling my long, debris-filled hair and then braiding it. They picked the dirt and grass out of my braces. They cleaned the dirt from under my nails... then painted them while I was in a coma. It's hard for me to stress how important this was to me and my family. It took away the pain of seeing their daughter almost unrecognizable and allowed them to see me as the girl they know.”

– Trauma patient Ryan Brouse, Lewisburg, a featured speaker at the 2022 Emerald City Ball

By Kimberly Adler-Morelli

# Put some 'Zing' in your step with a healthy recipe

The Zing543210 project has an easy-to-follow formula you can use to start living a healthier life.

Aim for these goals every day:

 5 servings of fruit and vegetables

 4 positive affirmations

 3 belly laughs

 2 hours or less of recreational screen time

 1 hour of outdoor activity

 0 sugar-sweetened beverages



Having trouble eating enough veggies? Or maybe your kids aren't fans? Consider letting your children help in the kitchen. Cooking with kids teaches them to make healthy choices. And when they help prepare foods, they're more likely to eat and enjoy them. Look for healthy recipes that are fun to assemble and include several types of vegetables.

Check off some veggie servings and join our Zing543210 challenge by showing us your spin on these garden stuffed potatoes (details on next page). You don't have to cook with a child — it's fun for adults, too!

# Garden stuffed potatoes

Younger kids could chop the green onions with a plastic knife, mix the potato and sour cream together and stuff the potato halves. Kids 5 and older can use the cheese grater, too.

## Ingredients:

- 2 large russet baking potatoes
- 1 to 2 green onions (the white and part of the green), finely chopped
- ¼ cup nonfat or light sour cream
- 1 tablespoon whipped butter or lower-fat margarine
- Black pepper to taste
- ½ teaspoon parsley flakes
- ½ teaspoon Italian herb blend
- ½ cup reduced fat, shredded sharp cheddar cheese
- 3 tablespoons shredded Parmesan cheese
- 1 teaspoon minced garlic (or 1/4 teaspoon garlic powder)
- 1 cup cooked, chopped vegetables such as broccoli florets, bell pepper, cauliflower, etc. — the more colorful, the better!

## Instructions:

*(all completed with adult supervision)*

1. Pierce potatoes with a fork and microwave or bake until tender. Meanwhile, combine the remaining ingredients (except vegetables).
2. Cut potatoes in half and scoop out the center. Add the scooped-out potato and the vegetable pieces to the mixture then spoon into potato halves.
3. Microwave each half for about 1 minute or broil halves until lightly browned on top.

If you complete our challenge and send us your name and address, we'll send you a small reward for taking charge of your health. This is open to everyone — you don't need to be a Geisinger patient to participate. Send a photo of your completed dish to [pahealth@geisinger.edu](mailto:pahealth@geisinger.edu), or mail it to Zing543210 Challenge, 100 N. Academy Ave., Danville, PA 17822-4020. You can also post images to Facebook and tag Geisinger.

We might include your photo in a future edition of *PA Health!*

Adapted from [webmd.com/a-to-z-guides/features/cooking-with-your-children](https://www.webmd.com/a-to-z-guides/features/cooking-with-your-children)



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