

TREATING OPIATE ADDICTION IN CUYAHOGA COUNTY

Rosary Hall is on the front lines of treating individuals with opiate addiction

233 is the number posted on the board in the group room of Rosary Hall's inpatient detox unit. It's the number of individuals in Cuyahoga County—as of July 12, 2016—who have died from a heroin or Fentanyl drug overdose.

It's a crisis that led to a visit that day from U.S. Surgeon General (VADM) Vivek H. Murthy, who came to Rosary Hall to speak to patients and providers and mobilize community partners.

How did we get to this point where people are dying daily? According to Dr. Ted Parran, addiction medicine specialist and associate medical director of Rosary Hall, the problem began when doctors and dentists started prescribing prescription opiates—Percocet, Vicodin, Oxycotin, etc.—normally prescribed to treat end-of-life and acute pain for chronic pain.

“In people with addictive brain, opiates activate the pleasure centers through a process known as the dopamine surge,” Parran said. Lots of things cause a dopamine surge—being a parent, a warm sunny day, love of another... and opiates.

“Doctors have not been very good at figuring out who should never get within 100 yards of prescription opiates—people with addictive brain,” he said. While many of the large pill mills that sprouted in Appalachia and Florida in the 1990s have been shut down by law enforcement,

international forces really provide the supply today. “The resurgence of the Taliban in Afghanistan and an increase in supply of heroin from Mexico has led to record numbers of illicit opiate users.”

When prescriptions are hard to get or too expensive, people turn to heroin.

The scope of the heroin epidemic

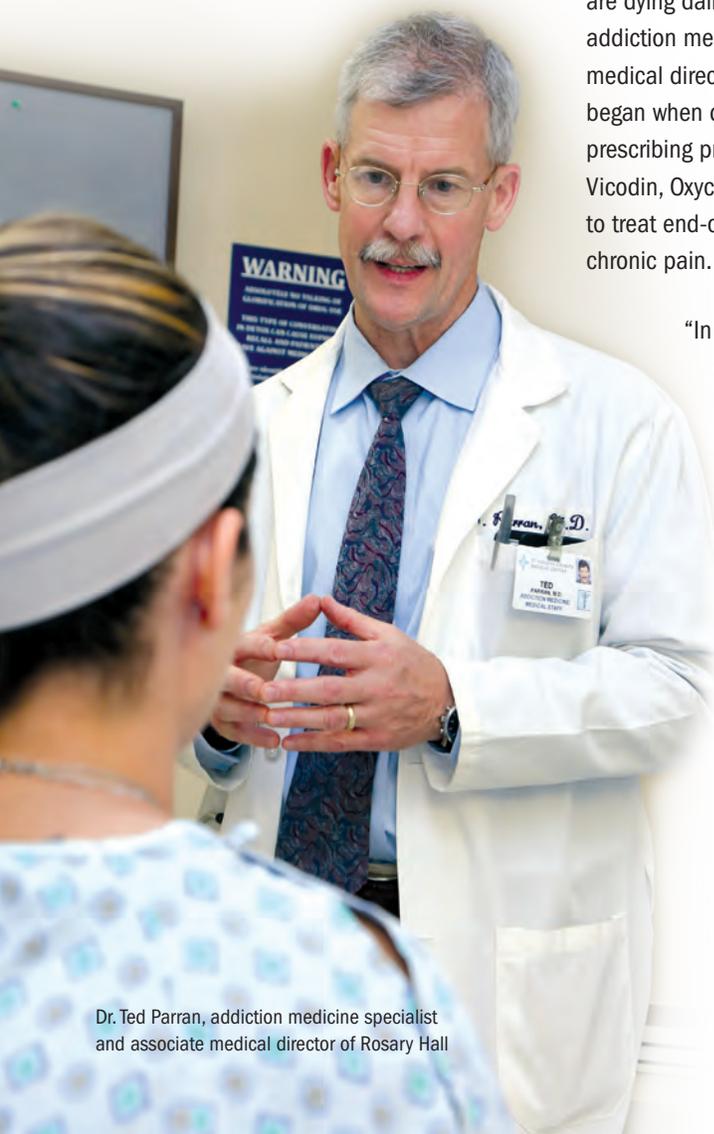
Dr. Parran explains that drugs go through cycles of use. Following the Vietnam War, people were too afraid of heroin. But 25 years later, it has made a comeback. “Currently opiates are the epidemic, but the overall rate of usage is the same. It just pushed cocaine out of the way. In the background, the rate of alcoholism remains constant.”

Rosary Hall is the only hospital in Northeast Ohio that admits opiate addicts for detox. “People need a safe, clinically excellent place to chemically withdraw in a supportive environment,” he said. While in detox, Rosary Hall patients are integrated into the recovery program.

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Rosary Hall is the only hospital in Northeast Ohio that admits opiate addicts for detox.

Dr. Ted Parran, addiction medicine specialist and associate medical director of Rosary Hall



ST. VINCENT CHARITY



A MESSAGE FROM THE PRESIDENT AND CEO

We've had an incredibly busy summer here at St. Vincent Charity Medical Center. Cleveland is coming off of an exciting week with the Republican National Convention. As the closest hospital to the convention hall, our team worked with local, state and federal officials for the better part of 18 months to plan. It was a great coming out party for the city of Cleveland and we were proud to have played a part.

As you will read on the front page of this newsletter, individuals in Cuyahoga County are dying from heroin and Fentanyl overdoses at alarming rates. St. Vincent Charity Medical Center's Rosary Hall has been on the forefront of treating this epidemic for more than 10 years.

Recently, the federal government has elevated the issue through the Obama Administration's Turn the Tide campaign. We were fortunate to have a visit with **the US Surgeon General Vice Admiral Vivek H. Murthy** as part of that campaign. Dr. Murthy's visit was an opportunity to speak with patients and providers about the challenges of treating addiction and to see how community partners work together.

Included in that visit were **Cuyahoga County Executive Armond Budish, Cuyahoga County Drug Court Judges David Matia and Joan Synenberg** and **Chief Bill Denihan**, of the Alcohol Drug Addiction and Mental Health Services (ADAMHS) Board, all of whom have a critical role in the treatment of opiate addiction.

We're gearing up for our Caritas fundraiser on October 6, 2016 at the Huntington Convention Center of Cleveland. Formerly our Pizzazz Gala, this new format is presented by **Medical Mutual** and is designed to be a celebration of St. Vincent Charity Medical Center in Cleveland. Chairing our event are **Tony and Rachelle Coyne** and **Jennifer and Zydrunas Ilgauskas**. We're putting on quite a show and we look forward to seeing you there. For information, please visit **www.stvincentcharity.com/caritas**.

Finally, after a year of orange barrels, East 22nd Street construction is complete. We have a new street with landscaping, benches, signage and new lighting.

Hope you had a safe and healthy summer,

A handwritten signature in black ink that reads "D. F. Perse". The signature is fluid and cursive, with the first letters of each name being capitalized and prominent.

David F. Perse, MD
President and CEO

TREATING OPIATE ADDICTION IN CUYAHOGA COUNTY

Continued from front cover

Being able to detox in a hospital setting is critical for opiate-dependent individuals. "When you're drinking or drugging, you're not worrying about your health," said Parran. They often require lab studies, imaging, medical or surgical consults, physical or occupational therapy and psychiatric evaluations. "We have the ability to have those people seen and get treatment started while they are being detoxed," he said. Rosary Hall is rooted in the 12-step program of Alcoholics Anonymous that worked in 1935 and works today. With these new substances, there are medications that can serve as blockers to opiates and allow for individuals to maintain sobriety. However, Parran cautions that drugs such as Suboxone only work in conjunction with a bio, psycho, social, spiritual program.

"Once you're through professional treatment, you need to maintain sobriety by having a sponsor and attending more than three AA meetings a week."



Dr. Ted Parran, associate medical director of Rosary Hall, and Dr. Chris Adelman, medical director of Rosary Hall, work hand in hand to address the opiate crisis in Northeast Ohio.



"With heroin and opiates, the difference between intoxicated and fatal is very narrow."
— Dr. Ted Parran

One of the Surgeon General's biggest points is that we must treat addiction like the chronic disease that it is. "They will fail and lose hope, but that's where we can help. The more often they try, the better the chance they will be successful in their sobriety. As clinicians, we must demonstrate unwavering positive regard for the person and optimism for recovery. We can separate the humanity of the soul from the behaviors of the disease," he said.

Why are people dying?

The reason for the deaths is that those who use prescription opiates are using a fixed, known amount of the opiates. "When they buy heroin, they have no idea what the purity is and no idea what their tolerance is."

Complicating the issue further are the illegal pharmaceutical labs that are making prescription-grade Fentanyl, which is 200 times stronger than heroin or morphine. "Even seasoned addicts are dying because they have no idea what the dose of heroin that is cut with Fentanyl is equal to," said Parran.

So what happens to cause death and why doesn't it happen to alcoholics or abusers of drugs like cocaine?

"There are a handful of fatal overdoses from alcohol," explains Parran. "The difference between intoxicated level and fatal overdose of alcohol is very broad. With heroin and opiates, the difference between intoxicated and fatal is very narrow."

Users are in search of the nod. A nod is a Level 1 coma. In a Level 2 coma, you are sound asleep. At Level 3 coma, you stop breathing. "The difference is a minor miscalculation and it hits when you are asleep," he said.

Parran says the ways that epidemics are beat down is through broad and ongoing community awareness about the dangers, increased treatment capacity and aggressiveness of a well-rounded program, and reinforcing to people with addictive brain disease that if you have a problem with one substance, you will have a problem with all substances. ■

Watch Dr. Ted Parran give a talk on *The Addictive Brain* on our website at: stvincentcharity.com/rosaryhall.



St. Vincent Charity's addiction specialists discuss the challenges of the opiate crisis in Northeast Ohio with Dr. Murthy during his recent visit to Rosary Hall.

U.S. SURGEON GENERAL VISITS ROSARY HALL AS PART OF HIS TURN THE TIDE CAMPAIGN

Vivek H. Murthy talks about how Ohio has been hit hard and how we have to attack on several fronts

The opiate epidemic in America has become so severe that it is now getting national attention from the Obama Administration. The U.S. Surgeon General (VADM) Vivek H. Murthy visited St. Vincent Charity Medical Center's Rosary Hall on July 12th as part of his Turn the Tide campaign.

"The reason I'm here in Ohio is because of this opiate epidemic in America that has become so severe and it's claiming lives in all states and in rural and urban areas alike," he told the press gathered outside the hospital following his tour. "Ohio is particularly hard hit. We have to attack this problem on several fronts," he said.

Improving prescribing practices, access to treatment and community education about the addictive nature of opiates are a big push. He also supports getting Naloxone (Narcan) into the hands of first-responders to reverse the effects of an opiate overdose.

But there are also attitudes about addiction that need to be addressed as well. "Right now people see addiction as a character flaw. What we have to do is help people see it for what it is, which is a chronic disease much like diabetes or heart disease. It's a disease that we need to treat with the same urgency and compassion as we do with others. We do have a lot of work to do." ■

>> [Images on page 5](#)

As part of his national Turn the Tide campaign, Dr. Murthy met with Rosary Hall detox patients (top right), local healthcare and community leaders (middle) and members of the media (bottom) to discuss the growing opiate crisis in Northeast Ohio and across the country.



CARITAS

A CELEBRATION OF ST. VINCENT CHARITY IN CLEVELAND

Thursday, October 6, 2016

Huntington Convention Center of Cleveland | 6-9pm

For nearly 30 years, St. Vincent Charity Medical Center is proud to have presented Pizzazz, a signature fundraising event. This year, we are happy to announce some exciting changes to the celebration.

The 2016 event, renamed **Caritas**, Latin for **love of all people**, will celebrate St. Vincent Charity's important role in Cleveland. It will be a night of entertainment, awards and fast-moving fun, highlighting several impressive people and programs that inspire our unique brand of **Care Beyond Medicine**.

AWARDS INCLUDE

St. Vincent de Paul Award—**Margaret W. Wong**

Physician of the Year—**Lloyd M. Cook, MD**

Clinical Nursing Excellence Award—**Mary Martin, RN**

Radiant Spirit Award—**Eugene Jordan**

We hope you will join us and our presenting sponsor Medical Mutual of Ohio on **October 6, 2016** as we celebrate the good work being done at St. Vincent Charity Medical Center.

EVENT CHAIRS

Tony and Rachelle Coyne

Zydrunas and Jennifer Ilgauskas

For more information or to purchase tickets, please visit stvincentcharity.com/caritas or call Emily Woods at **216.875.4624**.



GRATEFUL PATIENT

ANGELA WYATT



A rare spine surgery has a Gates Mills woman walking tall again

No one thinks when they're young and cheerleading or tumbling or tackling that the effects of those activities could become crippling as you age. But Angela Wyatt of Gates Mills knows otherwise. She developed an uncommon condition called *spondyloptosis*.

According to Dr. James Anderson, neurosurgeon with the Spine and Orthopedic Institute at St. Vincent Charity Medical Center, she probably cracked her L-5 vertebra on both sides as a teenager. Now 48, the West Geauga teacher's vertebra slid off the sacrum, pinching the nerves in her lower organs.

"It was getting progressively worse. I had numbness from the waist down," she said. After trips to many surgeons, she was referred by her neurologist to Dr. Anderson. "When I went to see him, he said he could not do the surgery I needed, but he had a colleague who could. He brought in Dr. (Lou) Keppler."

Dr. Lou Keppler, co-director of The Spine and Orthopedic Institute, had seen this before and knew the fix. The Gaines procedure is a difficult surgery and not many people have performed it because it has a high complication rate and involves a sacrum pelvic fusion. "It is rare, but I have experience with this procedure," said Dr. Keppler.

"A person with *spondyloptosis* looks as if they're ready to dive off a diving board," he explained of Wyatt's pre-surgical condition. The procedure, which lasted more than 10 hours, involves an anterior (front) and posterior (back) approach. "We take the L-5 out from the front and put the L-4 back on the sacrum from the back," he said. Using screws and rods, they were able to pull her back into alignment.

The first surgeon to do this procedure was Dr. Art Steffee in 1986. He was a surgeon at St. Vincent Charity and made his name as the inventor of the pedicle screw for spine surgery. Dr. Keppler trained under Dr. Steffee. "We used to put people in body casts and they would have to be in bed for months," he said. "Once he developed the pedicle screw, we became able to fuse the spine into a more stable state."

Sounds simple enough, except that it's not. "The deformity is obscured by anatomy," explained Dr. Keppler. He had to manage large blood vessels and required the help of a cardiothoracic surgeon to "expose" the L-5 from the front.

Though it was a long surgery, going well into the evening, Dr. Keppler was happy with the result. "Because we rearranged the nerves, her foot was weak for a while. Her muscles

need to find new alignment and her bone will take about a year to solidify. She will gradually build up her endurance, but once it's healed, it's healed for good."

It was a year in March and Wyatt is feeling strong again. She is grateful for the attention both she and her family received from St. Vincent Charity. "Dr. (John) Bastulli (anesthesiologist) talked to my family and was there all night. Once Dr. Keppler was in there, he was able to straighten my spine better than it ever was before." Wyatt now refers to Dr. Anderson and Dr. Keppler as her "dream team."

Diane Austin was the nurse in the Intensive Care Unit. "It was late, about 1 a.m. and my mom wanted to stay. Dr. Keppler assured her I would be OK but that I needed to rest. Diane told my mom that she would be by my side all night long and would treat me like I was one of her own," Wyatt says, choking up a bit.

While she was expected to stay in the hospital 10 days, Wyatt credits Ernestine Javorik, physical therapist, with getting her out in six days. "Ernestine is the reason. She got me up and moving. I firmly believe that if she had not been there, I would have been in the hospital for weeks."

As for Dr. Keppler, he has never been one to shy away from a difficult surgical case. He will routinely go over and over an operation in his head prior to surgery. "It's not fair to the patient to say you can't help them. You're obliged to help, even if it's a tough case. You're in it together—patient and surgeon. If it's what the patient needs, you do it," he said. ■

"It's not fair to the patient to say you can't help them. You're obliged to help, even if it's a tough case. You're in it together—patient and surgeon.

If it's what the patient needs, you do it."

— Dr. Lou Keppler

A former gymnast himself, DR. MIKE CANALES HELPS ELITE ATHLETES GET BACK ON THEIR FEET

Every single day matters in the life of an elite gymnast recovering from a major injury. Every day they are not able to practice, every time they sit on the sideline watching their teammates compete, strips away a part of their identity developed through a lifetime of long days, nights and weekends working in the gym.

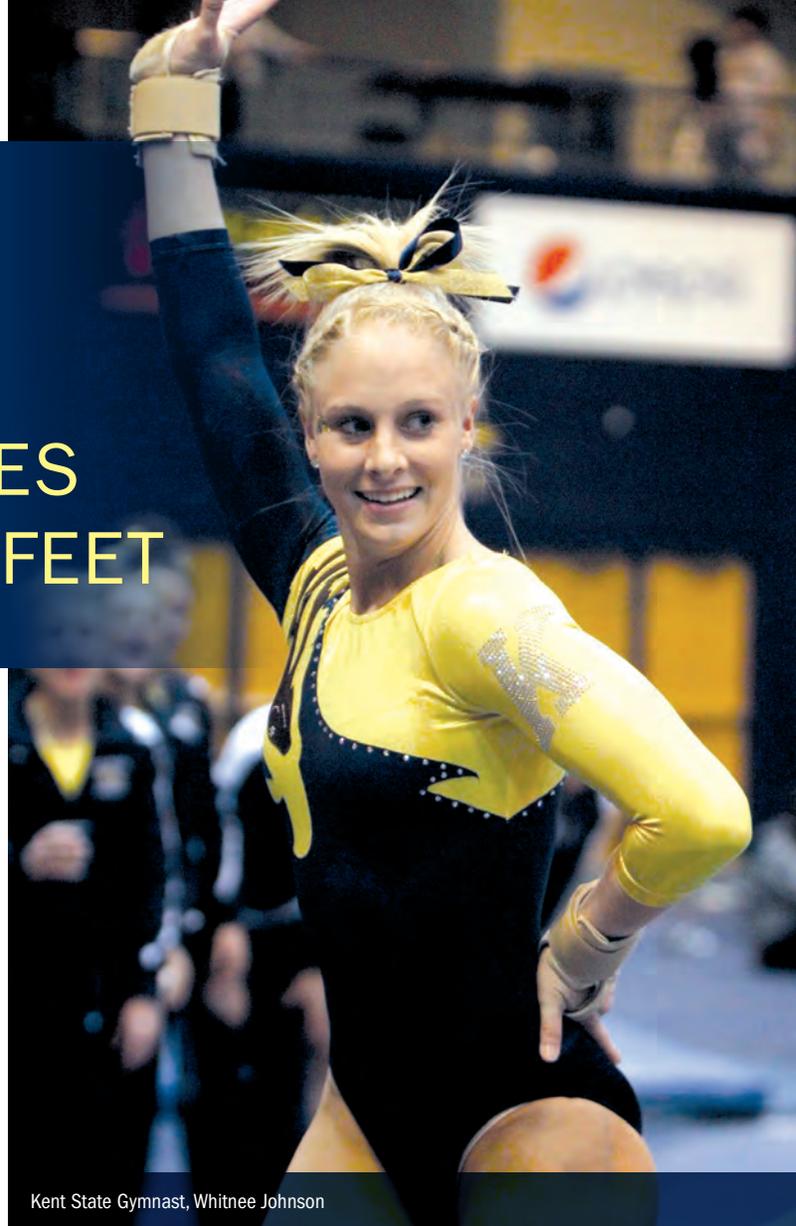


Given a 50 percent chance of recovery, Dr. Canales helped get Whitnee fully recovered in time to compete in her senior year.

That is why fellow gymnast and St. Vincent Charity Medical Center's Dr. Michael Canales has become the expert for the gymnastics community in treating and healing foot and ankle injuries. As a member of the 1996 Ohio State Men's Gymnastics National Championship Team, Dr. Canales shares these young athletes' drive to compete. He recognizes the short window open for gymnasts at the elite and collegiate levels. He understands their urgency to get back in the gym.

"This is not just a hobby for these young men and women. This is part of their identity. In a four-year college career, they can't afford to miss an entire season sitting, being sidelined with an injury," Dr. Canales said. "Having a keen knowledge of the sport and understanding the terminology allows me to fast track these athletes in a safe manner."

Will Jeffries was a member of the men's gymnastics team at The Ohio State University when he suffered a midfoot fracture in an



Kent State Gymnast, Whitnee Johnson

exhibition competition before the start of his senior year. He was delivered the devastating news by the first doctor who examined him that this was a career-ending injury. Surgery was not an option. Will went home in shock and disappointment, knowing this was not just the end of his gymnastics career, but an injury he would fight the rest of his life. Not wanting to give up, Will turned to Dr. Canales, who remains entrenched in Ohio State's gymnastics program.

"I sent a message to Dr. Canales. He called me about 30 seconds later and got me in right away,"

Will said. "Dr. Canales said 'we are going to fix you.' He pulled a complete 180 on the situation. I was even more shocked when he went so far to say I was going to compete **that** year—my senior year."

For the type of injury Will had, normal rehab time is 9 to 12 months—if surgery is an option at all. With constant communication with Dr. Canales and the help of his team trainer, Will was able to rehab in less than 3 ½ months, competing in the Big 10 Championships and then on to the NCAA Championships. The big test for the strength of his



Ohio State Gymnast, Will Jeffries, said the biggest test of the success of his surgery was sticking the dismount on the rings at the NCAA Championships.

First image below

Dr. Canales and his wife, Olympic Gymnast Dominique Moceanu (left), came to support Whitnee in her first competition back at Kent State after her surgery. Also pictured is Tammi Johnson (right), Whitnee's mother.

Second image below

Dr. Canales ensured Will Jeffries got back in the gym after suffering what could have been a career-ending injury.



back, but even more that I was able to return with so many people that I loved there to support me.”

Dr. Canales believes the key to getting these gymnasts, or any athlete, back into training quickly is the mentality to balance pushing them through rehab, while at the same time, making sure they do it safely. They also need immediate communication with and access to their doctor if a problem or injury occurs. Either by phone, text or same-day appointments, Dr. Canales works to ensure these athletes get immediate answers or treatment for their concerns.

“When you are an athlete, days matter,” Dr. Canales said. “They don’t have weeks to wait for an appointment. That delay might mean the difference between competing that season or not. Immediate access is critical to fast tracking their recovery and getting them back in the gym.”

foot was when he successfully “stuck the dismount” on the rings at the NCAA’s, ending his college career on high note.

As a junior at Kent State University, Whitnee Johnson, too, found Dr. Canales provided hope to returning to gymnastics even after other specialists gave her less than a 50 percent chance of recovery from repair of her posterior tibial tendon. Whitnee

found confidence in Dr. Canales because of his understanding of both the sport and her competitive drive to compete her senior year at Kent State.

“I was so relieved to find somebody who understood gymnastics and knew what I needed to get done,” Whitnee said. “After surgery, I would call him and ask him if I was far enough along in rehab to try

specific gymnastics skills. Other doctors would have probably just told me ‘no’ because they wouldn’t have understood the skill or landing I was talking about. He knew exactly what I was talking about and was able to guide me to get me back faster.”

With Dr. Canales’ guidance, Whitnee was able to rehab in time to compete in her senior year. In fact, her very first competition back happened to be in her hometown in Missouri with a crowd of family and friends there to support her. “It meant so much for me to be

Dr. Canales finds personal reward and a sense of accomplishment by helping these elite gymnasts get back into competition. It keeps him connected with the gymnastics family and, in a way, makes him feel he is still part of the team.

“I always wanted to be the guy that gets the ball at the end of the game and wins it all,” Dr. Canales said. “To be the surgeon that enables these young gymnasts to come back and compete in the sport they love, makes me feel like I just scored that game-winning basket.” ■

“This is not just a hobby for these young men and women. This is part of their identity.” — Dr. Mike Canales

BLANK CANVAS IS A PATHWAY TO HEALING FOR BEHAVIORAL HEALTH PATIENTS



“Come on in, you’re welcome to join us” is the friendly greeting heard over and over as patients trickle into the group therapy room on the adult behavioral health unit at St. Vincent Charity Medical Center. Heather Lindsay, Art Therapist, is about to begin one of her art therapy sessions with a group of patients who are eager to start. “Grab a seat and some supplies, we’re about to get started.”



Art therapy has been found to be extremely beneficial to those suffering from illness, particularly individuals with mental health issues. Art therapy allows individuals to explore and express feelings in a new way and also provides them with a creative experience that most have not had since their youth. Through creating art pieces and analyzing their deeper meaning, the process becomes the therapy.

Heather joined the St. Vincent Charity Medical Center team earlier this year through a grant from the Cleveland Foundation. She received her Master’s in Art Therapy from Ursuline College and is also a licensed counselor. Since joining us, Heather has helped the creative arts program at St. Vincent Charity flourish.



Patient artwork on display in the group therapy room.

In a typical day Heather will hold numerous art therapy sessions in different areas of the hospital. She works closely with St. Vincent Charity's behavioral health inpatients in geropsychiatry, Rosary Hall's addiction detoxification unit, the adult acute stabilization unit and the adult psychiatric unit. An art therapy session will usually last around an hour and in that time patients are able to create one piece of artwork, but they also leave with a lot more than that. Talk therapy is very much a part of each session she holds.

"While we are creating a piece of art, there is more to it," says Heather. "Every project we do has a purpose behind it and we usually will have in-depth talks as we dive into our pieces more. Whether it's helping patients explore coping skills, discussing goals for the future, taking a look at our past and thinking about where we want to go in our future, there is always a meaning behind what we do."

Heather uses a number of different art techniques and activities in her sessions including collages, painting, stamping, ink blots and more. Throughout the session, Heather will integrate questions and discussion topics that will get the patients thinking and talking with her and one another.

"I know that they can do art any time they want, but I want to give them a new experience and get them thinking about art in a different way," she says. "For example, we'll do an activity and then I will ask them to identify what they see in their piece, how they relate to it or maybe it relates to a past experience in their life."

"My goal is to see growth in a patient or when I see them respond in a different way that shows they are comfortable and feel safe," Heather says. "I see success for my patients in a number of ways. If a patient says, 'I never

thought of that before' and can explore new ways to look at themselves, that is a success to me. Or, if they are vulnerable and share a private, painful memory, that is success. But, I also see success happen when the room is full of laughter and the group creates a wonderful bond!" ■





ST. VINCENT CHARITY MEDICAL CENTER

2351 EAST 22ND STREET
CLEVELAND, OHIO 44115

www.stvincentcharity.com

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East 22nd Street Roadway & Streetscape Project Complete

After a year under construction, East 22nd Street construction is now complete with new pavement surface, median construction, curbs, sidewalks, drive aprons, drainage, bike lanes and traffic signals. It also includes streetscaping elements like signage, benches, brick pavers, bike racks, trash receptacles, trees and shrubs.

EDITOR

Wendy A. Hoke
*Vice President, Marketing
and Communications*

ASSISTANT EDITOR

Lauren Wilk
*Marketing and
Communications Specialist*

WRITERS

Terri Jankowski, Lauren Wilk
and Wendy Hoke

PHOTOGRAPHY

Barney Taxel, Rob Wetzler and
William Rieter

DESIGN

Oreng Creative Group
orengcreative.com

Send your feedback to
svctoday@stvincentcharity.com

Join our email list

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