



INNOVATIONS IN PATIENT CARE

SPRING 2017 – VOL. 2

CORE PHYSICIANS

EXETER HOSPITAL

ROCKINGHAM VNA & HOSPICE

*Exeter Hospital, Core Physicians and Rockingham Visiting Nurse Association & Hospice are at the forefront of the newest innovations in treatments and technology. Our physicians and care providers are proactive in finding the newest and most efficient, quality-driven approaches to greatly enhance patient care. We invite you to contact us to learn more about any of these new advancements in care.**

INTRODUCING THE MAKO™ ROBOTIC ARM

Thomas McGovern, MD, a joint replacement specialist, has begun using the new MAKO robotic arm for partial knee replacement. The MAKO technology allows for more precise and custom treatment of the joint, enabling Dr. McGovern to perform partial knee replacements instead of full knee replacements for appropriate patients, extending the life of the joint. For a partial joint replacement, as with a full knee replacement, Dr. McGovern starts with a 3D CT scan to map out the joint to ensure a custom fit. Using the robotic arm for the surgery allows Dr. McGovern to be much more precise and does not allow the surgeon to go “outside the lines” of the mapped out boundaries of the part to be replaced. “When patients hear ‘robotic surgery’, they often imagine a robot is now doing the surgery,” said Dr. McGovern. “In actuality, this MAKO robotic arm is a tool that I use during surgery to ensure greater accuracy and precision.” ■



SPINAL CORD STIMULATION FOR NERVE PAIN



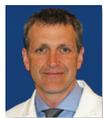
Core Physiatry has introduced an exciting therapy for chronic back and/or leg pain. “Whether it is pain related to failed spinal surgery or chronic nerve pain in the extremities related to neuropathy, spinal cord stimulation is a tested therapy that can reduce medication use, help avoid further, more invasive surgery, and improve one’s quality of life,” explained Richard Feeney, DO. Core physiatrists are working closely with Coastal New Hampshire Neurosurgeons to help patients who may benefit from this therapy. Spinal cord stimulation involves a trial period during which stimulation is provided via a minimally-invasive procedure. The patient works with the physician to assess the benefit of the system during this trial. If the patient benefits, then a minimally invasive surgery, performed by a neurosurgeon, is used to implant the stimulator system for long-term pain relief. ■

*In some cases, innovative procedures are not yet covered by insurance. Please check with your insurance company to determine what your plan will cover.

"These are exciting new procedures that can eliminate the need for patients to be on medications, and can be done quickly without the need for surgery. I work closely with each patient to determine what procedure will be the best treatment for their individual condition."

– E. William Johnson, MD, MPH

NEW TREATMENT FOR ENLARGED PROSTATE



E. William Johnson, MD, MPH is now providing a new treatment for enlarged prostate, a common condition in older men. Enlarged prostate, or BPH (Benign Prostatic Hyperplasia), is often initially treated with medications, which can have side effects or lose effectiveness over time. **Dr. Johnson is now using the UroLift® System with eligible patients, a minimally invasive treatment that lifts the enlarged prostate tissue out of the way so it no longer blocks the urethra.** There is no cutting or removal of prostate tissue, which is the traditional surgical approach. Dr. Johnson also offers GreenLight laser therapy, another minimally invasive procedure that vaporizes obstructing tissue associated with an enlarged prostate. ■

ADVANCEMENTS IN THYROID TREATMENT



The rate of thyroid cancer appears to be on the rise, and Core Physicians' Comprehensive Otolaryngology & Audiology works with Core Endocrinology to provide patients with a multidisciplinary approach to care for patients with thyroid problems. **These physicians have recently introduced genetic-based testing that can help determine whether nodules are benign or cancerous.** The first step to evaluate concerning nodules is fine needle aspiration, but one third of aspiration samples are unable to provide a clear diagnosis. Historically, all patients with such "indeterminate" biopsy results were advised to undergo thyroid surgery for definitive evaluation. However, the new genetic-based test is able to classify more than half of these "indeterminate" nodules as benign, eliminating the need for surgery. Additional new genetic tests on the horizon can provide even more detail, helping physicians determine the best treatment for each individual patient. ■



NEW TREATMENT OPTION FOR PHYSICAL THERAPISTS

Exeter Hospital's physical therapists are now using dry needling with appropriate patients to relieve pain. With this procedure, the therapist uses two to eight thin filiform needles, similar to acupuncture needles, to stimulate trigger points. Trigger points are tight bands in the muscle that cause pain, and the needles are used to relax the muscle, increase range of motion and alleviate pain. The most common location for these trigger points are the shoulders and neck. Dry needling is not appropriate for all patients, and is usually used in conjunction with other treatments to alleviate pain. Currently, three physical therapists have received certification in this innovative treatment option. ■



Exeter Hospital's Center for Cancer Care is one of the only hospitals in northern New England to offer Intraoperative Radiation Therapy (IORT), a one-day radiation treatment at the time of lumpectomy for early stage breast cancer patients. This eliminates the traditional 5-7 weeks of daily radiation treatments. The hospital has been using this innovative technology for 5 years. ■

INTRAOPERATIVE RADIATION THERAPY (IORT)

◀ *Our new breast surgeon, Dr. Rebecca Kwait, is a member of the physician team who uses IORT.*

For more information call Exeter Hospital's Information & Referral line at 603-580-6668 or visit our websites.



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