

Health

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MEDICAL MARVEL KIDNEY TUMOR REMOVED

Beating the odds



Earlier this year, Kelly Tobin, 46, underwent an intensive surgery to remove a large tumor that had wrapped around her kidney and snaked through a major blood vessel into her heart. BRADLEY J. PENNER/STAFF PHOTOGRAPHER

Patient survives risky procedure

By Susan Bloom :: For NJ Press Media

Last November, Kelly Tobin experienced what she thought was a very heavy menstrual period, different than her norm. When Tobin's gynecologist suggested it was symptomatic of perimenopause, the 46-year-old Sea Bright resident had no reason to doubt him. Soon enough, the bleeding went away.

But the condition returned in February, and worsened. Though gynecologists and other doctors she met with kept insisting that her bleeding was related to perimenopause, Tobin was passing blood in her urine and suspected that the bleeding was connected to her bladder. By March, "I had cramping, extreme discomfort, and was up three to four times per night, practically hemorrhaging," she said. "It felt like nobody was listening."

On March 11, in excruciating pain, Tobin went to the Monmouth Medical Center Emergency Department in Long Branch and, after receiving pain medication, a battery of tests and a CAT scan, she was rushed to the oncology ward, where she was met by an attending urologist "who told me I had a tumor attached to my kidney and heart and that I needed to have major surgery," Tobin said. She was informed of an affiliate hospital with highly experienced cardiac and vascular surgeons, where complex heart and abdominal surgery on the malignant tumor could be performed.

Tobin's urologist immediately reached out to the St. Barnabas Heart Center at Newark Beth Israel Medical Center, where Dr. Ravidra Karanam took the call.

"Kelly's tumor had wrapped itself around her kidney and pushed through the inferior vena cava, the large vein that brings blood back to the heart," said Karanam, a cardiothoracic surgeon. "I was told that her tumor was so large that it was potentially inoperable."

But having successfully operated on several similar cases in his career, Karanam wasted no time in making his decision. "Absolutely it's operable," he advised the urologist, and immediately had Tobin transferred to Beth Israel for the surgery.

According to the National Cancer Institute, more than 58,000 Americans were diagnosed with kidney cancer in 2010.

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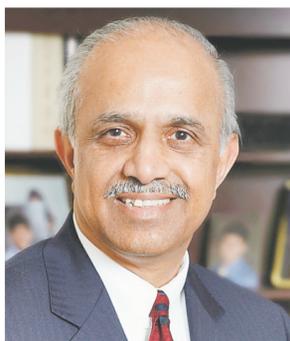


PHOTO COURTESY PETER RICHTER

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DR. RAVIDRA KARANAM, cardiothoracic surgeon

People's Pharmacy

By Joe Graedon & Teresa Graedon

Sunscreens block vitamin D

Q. Does sunscreen interfere with vitamin D levels? My doctor diagnosed me as seriously deficient in vitamin D even though I take calcium with D every day. I wear sunscreen whenever I go outside and wonder whether that could be a factor.

A. Sunscreen hinders the skin's ability to help create vitamin D. The amount you get from your supplement (typically 400 IU) is probably not adequate to overcome a deficiency. You will either need to spend 10 to 15 minutes in the sun without sunscreen a few times a week or take a vitamin D supplement that provides a higher dose (closer to 2,000 IU of vitamin D-3).

One reader reported the following: "I moved from the sunny Mediterranean region to overcast Washington state. I gradually started to fall apart, with body aches and pains and depression. Since starting 2,000 to 4,000 IUs of vitamin D daily, I feel a lot better. The aches and pains are much less of a problem, and my mood is much better."

Q. I've been reading about a study of niacin for cholesterol. The study was stopped after several people had strokes. I could not find out what dose was given.

I take 1,500 mg daily of non-flush, over-the-counter niacin. Should I stop taking it? Any information you have would be extremely helpful.

A. The study you refer to was called AIM-HIGH. It involved roughly 3,500 people with heart disease who had high levels of triglycerides (bad blood fats) and low levels of good HDL cholesterol.

All the subjects in the trial were taking simvastatin (up to 80 mg) to lower their cholesterol. About half also received extended-release niacin at a dose of either 1,500 or 2,000 mg/day. There was no benefit from adding niacin to simvastatin, and there was a slightly increased risk of stroke. Since you are not taking a statin, the findings of this study may not apply to you.

The investigators emphasize that people taking niacin should not stop without consulting their physicians.

Q. The generic form of Xanax, alprazolam, does not work for me. It is, at best, 50 percent effective.

A few years ago, I was given alprazolam in place of Xanax. My panic attacks came back with a vengeance. I kept thinking I had missed a dose. After three refills over three months and a visit to my doctor, I asked him if other people had complained. He said yes and wrote the prescription for Xanax only. It made a noticeable difference.

My insurance company recently stopped allowing this, and now I can only afford alprazolam. My anxiety is back. What's going on?

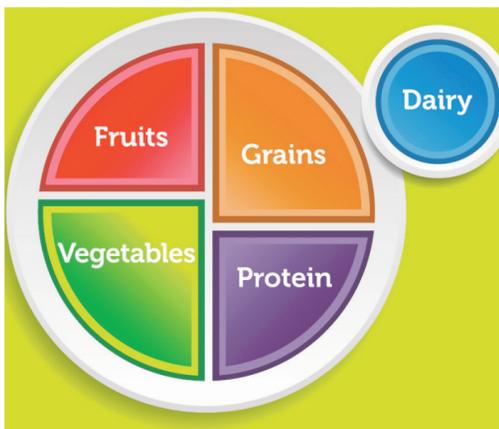
A. Whenever a benzodiazepine drug like alprazolam, clonazepam, diazepam or lorazepam is stopped suddenly, the patient can experience withdrawal symptoms. These include anxiety, panic, insomnia, muscle spasms, shock-like sensations, dizziness and headache.

It seems as though you may have had a withdrawal reaction when you switched to the generic alprazolam. That suggests that the generic is not truly equivalent for you. Perhaps your doctor can intervene with the insurance company on your behalf.

Write to the Graedons via their website, www.PeoplesPharmacy.com.

BALANCED EATING SIMPLIFYING CHOICES

Food pyramid out, 'My Plate' in



The Agriculture Department says its new healthy-eating symbol, "My Plate," will show Americans that nutrition doesn't have to be complicated. ASSOCIATED PRESS

The Associated Press

The Agriculture Department says "My Plate," its new healthy-eating symbol, aims to show that nutrition doesn't have to be complicated.

"My Plate" — a simple circle divided into quadrants that contain fruits, vegetables, protein and grains — will replace USDA's food pyramid, which has been around in various forms since 1992. It comes with an accompanying website.

USDA officials say the pyramid was tired out, overly complex and tried to communicate too many different nutrition facts at once. The new symbol, unveiled earlier this month at the department with first lady Michelle Obama in attendance, is simple and gives diners an idea of what should be on their plates when they sit down at the dinner table.

"It's grabbing the consumers' attention, not making it so complicated that perhaps it is a turnoff," said Robert Post of USDA's Center for Nutrition Policy and Promotion. "There is something really inviting about this familiar setting for meal time."

The department is planning to use social media as one way of grabbing attention, posting advice every day on Twitter, for example. The accompanying website, choosemyplate.gov, will be written on the chart. It eventually will feature interactive

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