Treating Dorothy’s Heart, With All of Ours
When she was born with half a heart, her cardiac team made it whole

RIGHT WHERE HE SHOULD BE
A nurse uses his own experience to help others make difficult care decisions

BORDERLESS COMPASSION
Memorial Hermann Medical Missions meets international needs

CURING 12 YEARS OF PAIN
A minimally invasive surgery gives a woman relief and a new outlook
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ON THE COVER:
Baby Dorothy is known for two things: her squeezable cheeks and defying the odds after being born with half a heart.
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FEATURES

CARING BEYOND BORDERS
Two countries, one mission: To provide medical care to the less fortunate all over the world. That’s what a Memorial Hermann employee and affiliated physician are doing to improve lives internationally.

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THE 12-YEAR PAIN CURE
A large bump, often mistaken for pregnancy, impacted Omonike Adewole’s energy level and self-esteem. That is, until she took a courageous step toward an innovative procedure that helped her get her life back.

2020 HEALTH HACKS
Want to get fitter faster? Simple, easy-to-achieve health hacks can be incorporated into your daily routine and keep you on target with your health goals.

A HEART ON THE MEND
How the father of Texas country music star Roger Creager overcame a failing heart valve without skipping a beat.

Photo courtesy of Cody Duty, TMC Pulse
The Value of Compassion

Think back for a minute: When has someone shown you compassion?

Chances are, you remember it well – especially if someone helped you in a vulnerable moment when you needed it most.

Those moments of compassion happen every day at Memorial Hermann – in exam rooms and in waiting rooms, in the Intensive Care Unit and on the physical therapy table. And they’re a key part of what we do for the community.

In fact, when we revised Memorial Hermann’s vision and values last year, we chose to make compassion one of our four core values. Compassion is the lifeblood – the heart – of health care. We believe that every patient we care for deserves to be treated with respect and kindness, and that compassion must be at the center of everything we do.

Our new vision, too, hinges on compassion. “To create healthier communities, now and for generations to come” means we reach out to care for our neighbors even before they walk through our doors. It means we help people with the basic resources they need to live healthy lives, whether it’s nutritious food or a medical home or a safe place in the neighborhood to exercise.

Our goal is always to offer excellent medical care – and we believe that compassion is an integral part of excellent care. We can fix your heart, but we haven’t done our job if we haven’t used ours.

In this issue, you’ll meet some moving examples of compassionate care at Memorial Hermann.

You’ll read about the pediatric heart team at Children’s Memorial Hermann Hospital who gave a second chance to baby Dorothy Burns, who was born last year with severe heart defects. Dr. Jorge Salazar, with McGovern Medical School at UTHealth, reconstructed her heart and changed her life. Now Dorothy has a fully functional heart and many years ahead of her.

You’ll meet Reid Douglas, a supportive medicine nurse who helps patients and their families make the hard decisions about care at the end of life. Seven years ago, Reid and his wife lost their 10-month-old daughter, Jamie. Now he works every day to help care for others in Jamie’s honor.

In these pages, you’ll also meet a physical therapist and UTHealth physician who have cared for people in Mexico and Guatemala as part of Memorial Hermann Medical Missions.

These stories of compassion are what set Memorial Hermann apart and make our work so crucial in the community. Compassion is one of our core values for a reason, and we plan to make it our hallmark for the patients we see and the people we serve.

Talk soon,

David L. Callender, MD
President and CEO, Memorial Hermann Health System
IN OUR LAST ISSUE, WE ASKED READERS, “Can you share a recent example of someone going out of his or her way to show you compassion?”

BELOW ARE SOME OF YOUR RESPONSES:

“I recently welcomed my first baby after hours of not-so-easy labor. Peace Lanrewaju was my nurse in the Labor and Delivery unit at Memorial Hermann Memorial City Medical Center when we checked in. For the next nine hours, she was attentive, patient, professional and compassionate. As my doctor became concerned about my lack of progress, Peace’s calm bedside manner and encouraging words put me at ease and gave me the confidence I needed. She even stayed past the end of her shift until our Sophia was born. I was so grateful to have Peace by my side.”

K R I S T I N E A L E M A N V E R R I L L

“I received one of the most delightful blessings about a month ago, when a family from New Jersey made a surprise visit while I was at work. A young couple along with their 10-year-old daughter stopped by and shared that I had been their nurse during a brief stay at Memorial Hermann Greater Heights Hospital when their daughter was born, and that I had taken care of them like their mother would have. They had no family in the U.S. and have now become my God-given children. I lost my son to cancer three years ago.”

B I N D U M A L H O T R A

“My co-managers show me compassion every day at Memorial Hermann Pearland Hospital, but my friend Regina Risinger, the Respiratory Therapy Manager, and I have a special bond. She is my shoulder to cry on and the person I call to celebrate! Recently, my daughter moved to Washington, DC, for an internship, and Regina was an open ear to my worries for the weeks leading up to my daughter’s departure. I love her and our friendship!”

N I C O L E N A T A S I

“I’ll never forget the nurse at a hospital in Milwaukee, Wisconsin who showed me great compassion. It was in the early morning hour of around 2 a.m. when a nurse entered my room and noticed I was having a hard time sleeping. She asked if I was afraid of the heart surgery scheduled for later that morning. I said that I was and she reassured me that I would be OK. She saved my life by meeting me in my deepest pit. She did not have to do this, but chose compassion.”

J I M H O G G

ANSWER OF THE ISSUE

“My Memorial Hermann Memorial City Medical Center family has shown me more compassion than I could ever thank them for. On Easter Sunday 2019, my beautiful daughter, Ashley, passed away. First, we were surrounded by compassion from Ashley’s Emergency Center coworkers. To see them bravely doing their job, some with tears, spoke volumes to my heart. We have been loved by the department’s staff, and especially by my colleagues in the Neonatal Intensive Care Unit. On the day of Ashley’s service, at least 40 of my coworkers were present! They have loved me well through this darkest journey.”

G A Y L A L O W R I M O R E - G I F F E N

We Want to Know

Our May/June issue of Beyond will focus on courage. Send your answer to the following question to mthcommunications@memorialhermann.org for a chance to be featured in our next edition:

Who or what gave you courage to do something big?
Compassion in the Worst Moments

Supportive Medicine nurse Reid Douglas has a true, hard-won empathy for patients nearing the end of life.

As the nurse coordinator in Supportive Medicine at Memorial Hermann The Woodlands Medical Center, Reid Douglas spends his days having hard conversations with patients and families who often are facing a decision about end-of-life care.

Douglas started out as an intensive care unit (ICU) nurse and worked in Memorial Hermann ICUs for about 13 years. But a couple of years ago, he asked to be transferred to Supportive Medicine.

“I believe that things happen in life and that there’s a reason for it,” Douglas said. He also said he believes he’s now exactly where he’s supposed to be.

In 2013, Douglas and his wife, Rachael, lost their 10-month-old daughter, Jamie Faith.

“Her brain didn’t develop completely,” he said. Jamie’s short life was filled with MRIs and CPR, close calls and long hospital stays. At Children’s Memorial Hermann, she was seen by multiple neurologists who came back with their conclusion: Neurological devastation.

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Douglas and his family had to have the deeply difficult conversation about what their options were for Jamie, knowing she was on a ventilator and wouldn’t survive without it.

“We decided to take her home,” Douglas said.

Surrounded by hospice care, friends and family, they sat in Jamie’s room and said goodbye to her on their own time.

“It was after Jamie passed away that I started to realize: I can speak to families from a whole different place,” he said. He understands “the places that your mind goes” when death is near, and he knew he could offer a unique empathy and hard-won compassion to patients and families going through what he had already endured.

Here’s a look at what Douglas does on a typical day – visiting patients, talking to families and showing compassion through the difficult decisions.

11:11 a.m. After checking in on one of the patients he’s scheduled to see, Douglas wants to talk to a family member. So he calls the patient’s son.

Douglas explains to the son that the team gets consulted for various reasons. They can help with symptom management, including pain, agitation, anxiety and depression. They go over code status with the family: If a patient’s heart stops, does he or she want CPR? What about intubation? Finally, he explains, they will sit down with the patient and family to discuss the goals of care. He’ll spend time finding out what each patient considers an acceptable quality of life so that the treatment provided will align with the patient’s wishes.

11:48 a.m. Back in the ICU, Douglas is meeting with a Spanish-speaking patient and her family. He rolls in the Language Line translation equipment – the “interpreter on wheels” that will help them communicate. Through the interpreter, Douglas explains why he is there and talks about what the patient’s options might be from this point forward.

1:34 p.m. Douglas heads to the cafeteria for lunch. As he eats, he explains the “Speak Less, Love More” project his family has started in recent years. Every year on New Year’s Eve, the Douglases – with help from family and friends – put together dozens of gift bags for families at Children’s Memorial Hermann and host a balloon drop. It’s their way to show a bit of support to families when they need it most.

“None of us can fix what’s going on in that room, but what you can do is just be there for somebody,” Douglas said.

2:32 p.m. Douglas drops by to visit a patient who’s leaving the hospital to go to a skilled nursing facility. She’s asleep, so he ducks out of the room and moves on to his next appointment. She doesn’t need to be interrupted. It’s more important that she rest.

“It’s not about me,” he said. “Right now, it’s about her.”

3:45 p.m. Douglas returns to his office to fill out paperwork. All day, he has met with patients and families in some of the most difficult moments of their lives. He hasn’t mentioned to any of them that he understands what they are going through because he’s been in their shoes.

“I don’t use Jamie’s story,” he said. “I think it shows without having to tell the story. My hope is that, because of our daughter, I can approach the situation differently than someone else might.”

That’s why he chose Supportive Medicine and why he spends each day having hard conversations.

“I hope what I do every day honors my daughter and her life,” he said.
In 2010, Laura Martin made a decision that changed the trajectory of her life. That moment, subtle, yet simultaneously intense, hit Martin’s heart like a lightning bolt. An opportunity that allowed her to fulfill her life’s purpose – to improve the quality of life for children – was in front of her.

“I first learned about Carrie’s Heart, a Houston-based non-profit, through the work of Carolina ‘Carrie’ Conn, who brought families with special needs together, and provided social activities and support in the West Houston area,” said Martin. “I then learned about the organization’s Valerie Project, which was named after a girl in Mexico who was born with cerebral palsy and, due to her disability and malnourishment, was dying. Her story was heart-wrenching. It was at that moment I knew I needed to do what I could to help provide even the most basic support to children like Valerie, even if pediatrics was not my area of healthcare expertise.”

A physical therapist for TIRR Memorial Hermann since 2008, Martin has been active in Memorial Hermann Medical Missions with Carrie’s Heart since first hearing Valerie’s story a decade ago. Since then, she has served on the Board of Directors and traveled to Mexico 18 times with a multidisciplinary team of professionals, including doctors, nurses, occupational therapists, speech language pathologists, special needs educators and translators.

“There is an amazing group of local volunteers who are also physical therapists, speech language pathologists and teachers, who work with the children year round,” Martin said. “It has been even more exciting for me consulting with the local teams, because I’ve witnessed the impact of weekly health and education-focused activities. They have helped more children and underserved populations, like a smaller, remote village in the Mayan jungle that now has access to the resources the medical missions provide.”

Through Memorial Hermann Medical Missions, Martin has impacted hundreds of lives in Mexico – and she’s not alone. Continued on Page 8
Memorial Hermann affiliated physician Dr. Philip C. Johnson, III also made caring beyond borders one of his life’s motivations when he began traveling with Memorial Hermann Medical Missions in 2010.

Dr. Johnson and his team of healthcare professionals have cared for 7,000 people in Guatemala over the years. Dr. Johnson, professor and vice-chair for the Department of Internal Medicine at McGovern Medical School at UTHealth, has led medical mission recruitment efforts and teams of clinicians for village medical clinics since 2006 during his travels under Faith in Practice, a Houston-based non-profit, where he also serves on the Board of Directors.

Since 1999, Memorial Hermann Medical Missions has served as a liaison between the health system and underserved local and global communities, including those impacted by natural disasters within the United States. Populations who suffer from inadequate medical, dental and general health support are provided with healthcare resources by current and retired Memorial Hermann employees and medical staff.

Martin and Dr. Johnson were recently recognized for their outstanding commitment to caring for others – beyond the confines of their respective care delivery sites and past international land borders – through their work on medical missions. Martin was named the 2019 Memorial Hermann Medical Missions Exemplary Employee of the Year and Dr. Johnson was named the 2019 Memorial Hermann Medical Missions Exemplary Physician of the Year.

To learn more about Memorial Hermann Medical Missions, visit www.memorialhermann.org/give-volunteer/ or call 713.338.6555.
Repairing Dorothy’s Half a Heart
She was born with severe heart defects, but Dorothy now has a long life ahead of her.
On a sunny late-winter afternoon, Brad and Caitlin Burns brought their daughter to Hermann Park for her first trip to the Houston Zoo.

As 8-month-old Dorothy squirmed in her stroller, Caitlin pulled out a pair of red baby shoes with big red bows and slipped them onto her daughter’s tiny feet.

“Every girl’s gotta have some red shoes,” she said.

“Especially when your name’s Dorothy,” Brad added.

A few months earlier, the couple didn’t know whether they’d ever have this sort of carefree moment with their daughter.

When Dorothy was born in May 2019, she had severe heart defects: The right side of her heart wasn’t working, the left side was weakened and there was no connection from the right side of her heart to her lungs.

The Burnses had known their baby would have some heart issues; abnormalities had shown up in a four-month ultrasound. But neither they nor their physicians knew the extent of Dorothy’s problems.

“I think it was a blessing we didn’t know everything we were going into,” Caitlin said. “I had a healthy pregnancy, I stayed active and she showed no signs of distress.”

Once Dorothy was delivered, however, the situation changed. Her blood-oxygen level wouldn’t stay up, and an echocardiogram revealed that the defects were far more serious than anyone had expected. Her cardiologist recommended Dr. Jorge Salazar, a pediatric cardiovascular and congenital heart surgeon at McGovern Medical School at UTHealth affiliated with Children’s Memorial Hermann Hospital.

“Our cardiologist had worked with Memorial Hermann’s team and Dr. Salazar,” Caitlin said. “She said that if it were her child, that’s where she’d be going.”

So just hours after she was born, Dorothy took an ambulance to Children’s Memorial Hermann, where she could be seen by Dr. Salazar, co-director of the Children’s Heart Center.

“She was essentially born with half a heart,” Dr. Salazar said. “Being born with half a heart is pretty common, but her specific version of it was very, very rare.”

Dorothy would need an innovative, one-of-a-kind plan to surgically reconstruct her heart. Without that intervention, Dr. Salazar said, she would live a limited life with a half-functioning heart that would lead to a transplant or early death.

Together, her care team and the Burnses decided to intervene.
“We are probably the only center in the world where this option would have been offered to her – an outside-the-box approach,” Dr. Salazar said. “We wanted to make sure she had the opportunity for a normal life.”

It took a series of surgeries for Dr. Salazar to repair Dorothy’s heart in stages. In July, the Burnses finally took their daughter home to Lake Jackson. And in late August, she came back to Children’s Memorial Hermann for more procedures to complete the repair of her heart.

“We rebuilt her entire heart almost from scratch,” Dr. Salazar said. “We reconstructed the right side and replaced her pulmonary and tricuspid valves with new valves that wouldn’t leak.”

As Dorothy gets older, she will need additional, smaller operations to replace valves when they wear out, Dr. Salazar said. But despite that, she will be able to live a healthy life without limitations.

The right side of Dorothy’s heart was “like Jell-O” when she was born, he said. “Now I can tell the family she has a normal heart, because she does. It’s a vastly different future for her.”

Brad remembered the relief he felt after Dorothy’s final surgery in September.

“When our doctor came out, the first thing he said was ‘Congratulations.'”

That meant a lot, he said. “We realized we never heard that at the hospital when she was born, like most parents do.” In those first moments of Dorothy’s life, there was such a rush to stabilize the infant that the family had no time to enjoy the moment. Now, finally, they could celebrate and take their daughter home for good.

As she approaches her first birthday, Dorothy is learning that she loves to make people laugh, Brad said. “She really lights up around people.” And she’s quickly becoming known for what her mother calls “her signature giant, kissable, squeezable cheeks.”

Her first name is a family name that means “gift from God.” But to friends and family, Dorothy is usually known as Dottie, or sometimes Dot. Caitlin’s father calls her Dippin’ Dots. And, of course, the nurses in the Children’s Memorial Hermann PICU made up their own pet names for her.

“We truly believe that God gave us a miracle through the extremely skilled surgeons, doctors and nurses at Children’s Memorial Hermann,” Brad said. “We were so blessed by the many people that became so invested in caring for us and for Dottie. They helped us to find some hope in a really scary situation.”

Dorothy is now thriving following successful heart surgeries at Children’s Memorial Hermann Hospital.
Omonike Adewole’s swollen midsection dominated nearly every aspect of her life for more than a decade.

The large bump, often mistaken as a pregnancy, impacted Adewole’s energy level, self-esteem, mobility, sleep patterns and much more.

During the day, Adewole worked through pain and exhaustion to put her four children through college. The 48-year-old smiled and shrugged off jokes from coworkers about her “due date.” The tears came at night from the embarrassment, frustration and helplessness she felt.

Adewole suffered from a condition called uterine fibroids, non-cancerous growths found in and on the uterus that resulted in massive swelling, bleeding and 12 years of emotional and physical hardship.

She knew she needed help, but she was concerned about committing to a serious medical intervention.

“There was a lot of stress,” Adewole said. “I wasn’t sure how I could take the time to have the surgery because I had to support my family. I am the head of the household and I couldn’t afford to miss work. I was scared, too.”

A routine visit to her family physician proved to be the tipping point. Adewole was told she was in danger of developing life-threatening complications from the fibroids. She was referred to Dr. Bao Quoc “Core” La, an OB/GYN affiliated with Women’s Memorial Hermann Memorial City.

Understanding uterine fibroids

The exact cause of uterine fibroids is unknown, though there is evidence that genetics, hormone levels and an increase in certain cellular material are potential factors in their development.

Omonike Adewole has a new outlook on life following an innovative, life-changing surgery.

Uterine fibroids are common, but many go unnoticed because they are so small. They can become increasingly problematic depending on their size and location.

In Adewole’s case, the swelling affected her appetite, causing her to feel bloated. Her enlarged uterus pressed on her bladder, resulting in frequent trips to the restroom. The social stress, physical pain, pressure and heavy menstrual bleeding Adewole experienced for months at a time was compounded by anemia.

Dr. La was especially concerned that the extreme size of Adewole’s fibroids was putting her life in danger.
“When the uterus gets to that size, it has the potential to lay on larger blood vessels like the vena cavae, two large veins that lead to the heart,” Dr. La said. “That can lead to blood clots, which can be life-threatening.”

Allaying fear and addressing the issue
Medication and advanced ultrasound and embolization have been effective in treating uterine fibroids and sparing the uterus. But the size of Adewole’s uterus, number of uterine fibroids and potential for much more serious complications necessitated surgery. The average uterus is about the size of a pear and weighs a little more than 5 ounces. The uterine fibroids had enlarged Adewole’s uterus to 17 times that—5 pounds, 7 ounces.

Adewole dreaded the thought of surgery, spending days or weeks in the hospital recovering from a large surgical incision that was sure to scar.

“I told Dr. La that I was scared and didn’t want to die,” Adewole said. “Dr. La said he would take care of this and that I would be fine.”

Dr. La presented Adewole with a minimally invasive laparoscopic procedure as an option. Adewole’s uterine fibroids would be removed through small incisions in her abdomen and she would also be able to leave the hospital the same day of the procedure.

One large removal through two small holes
A few years ago, Adewole likely would have undergone a laparotomy, a surgical incision from the pubic bone to mid-abdomen, to remove the uterine fibroids. But advancements in equipment, technology and surgical expertise have given patients the option of minimally invasive procedures that can reduce recovery time and risk of pain, bleeding and infection.

“A laparotomy would have taken so much longer to heal and there was higher risk of pain, infection and the wound re-opening compared to a minimally invasive laparoscopic procedure,” Dr. La said. “A laparotomy is an easier surgery to perform, but it is not nearly as convenient for the patient.”

Instead, Dr. La made two small incisions in Adewole’s abdomen and maneuvered instruments to remove the uterine fibroids in pieces through the small opening in the belly button.

The procedure took five hours and Adewole was able to return home that day.

Returning to work and life refreshed
Because of the physical requirements of Adewole’s job as a nurse assistant, Dr. La recommended she rest for six weeks before returning to work to allow her body to completely heal. But she immediately noticed at home that she was able to move around much easier than before. There was a noticeable difference when Adewole returned to work. She could move, lift things and bend over to pick up items with ease.

Adewole sleeps better now. For the first time in years she is able to wear clothes that fit her. Her mobility has increased and she is losing excess weight caused by the uterine fibroids.

“I put my faith in God and my trust in Dr. La,” Adewole said. “I am so happy now.”
Top Health Hacks for 2020: Tricks You Can’t Afford to Not Know

MAKE PEACE WITH YOUR PLATE
“Forget measuring cups, scales and figuring out the latest pyramid scheme. Create a peace sign with a wide avenue between portions: a quarter each for lean proteins (not fried), and another for carbs (no sauce) and the remainder for vegetables,” said Dr. Giridhar Vedala, a cardiologist with Memorial Hermann Medical Group in Conroe and The Woodlands. “Or measure with your hand for serving sizes: your palm for meat or fish; your thumb for cheese and your fist for pasta, rice or cereal.”

Time is precious – even when seeking great health. Memorial Hermann dietitians and affiliated doctors share their personal must-heed health hacks to be fitter, faster.
SKIRT SUPERMARKET TEMPTATIONS
“Shop the periphery of the store, where you’ll find whole, fresh produce, fish and dairy,” Dr. Vedala said. “Avoid dry goods aisles, where sugary, fattening, packaged snacks and sweets seduce.”

MIND YOUR MIDDLE
If a woman’s waist exceeds 35 inches or a man’s waist exceeds 40 inches they’re vulnerable to Alzheimer’s disease in their 70s, as reported in the Journal of the Geriatrics Society. “Generally the larger the waist size, the greater the risk of dementia,” said Dr. Paul Schulz, a McGovern Medical School at UTHealth neurologist and director of Memorial Hermann’s Memory Disorders and Dementia Clinics at Mischer Neuroscience Institute at Memorial Hermann-Texas Medical Center. “That’s independent of other risk factors.”

RAISE DESKS TO RAISE HEART RATES
“It’s a great way to accomplish tasks while getting steps,” Dr. Schulz said. “I know a radiologist who raised his desk so he could walk on a treadmill. He gets fit and feels better while reading X-ray and MRI films.”

PULL THE PLUG
“Shut down phones, computers and TVs two hours before bed to avoid their screens’ light. Your brain reads it as daylight, thus messing with your circadian rhythm,” said Dr. Katherine Holzman, a family practice physician with Memorial Hermann Medical Group Cypress. “You’ll not only sleep better but lose weight easier since you won’t crave mid-day sugar jolts to stay alert. Plus, the longer you’re awake, the more time you have to be hungry.”

CHECK OUT TAKE OUT
“Look for calorie counts, which restaurant chains are required to provide. When you order, ask that half be boxed. You limit your portion size without feeling like you’ve sacrificed,” said Dr. Sanjay Maniar, a cardiologist with Memorial Hermann Medical Group Cardiology Southwest.

GRAB AND GO
Each night blend the following for a high-protein, high-fiber breakfast: a half cup of dry rolled oats, half cup of milk of choice, half cup of Greek yogurt or one scoop whey protein powder, 1 teaspoon chia or flax seeds and ¼ cup of fresh, frozen or dried fruit to taste. Refrigerate it and you’ll wake up to 25-30 grams of protein, 10 grams of fiber and 420 calories (or less, if you go with skim or low-fat milk). “It’s one of my favorite no-fuss breakfasts,” said Christina Curry, MS, RD, LD, Sports Dietitian at Memorial Hermann IRONMAN Sports Medicine Institute in Sugar Land. “Both fiber and protein keep you feeling fuller longer.”

GO NUTS
Eating two handfuls of unprocessed, unsalted nuts weekly helps cardiovascular health, Dr. Vedala said. The reason? Walnuts, pecans, almonds and peanuts have an ideal ratio of mono- and poly-saturated fats that thwart artery hardening. “Not all fat is bad.”

MOVE IT
If you’re not willing to walk around the block after dinner, then park farther away from your destination or get off the elevator or bus early. “Those steps count in the battle to lose weight – and might clear your head, too,” Dr. Vedala said.

BE A GREEN GOD OR GODDESS
Just one cup of leafy greens (raw spinach, kale, collards, lettuce) keeps memory fails at bay, noted Dr. Schulz, citing a new American Academy of Neurology study in the medical journal Neurology. Leaf eaters’ minds were crisper, equivalent to people 11 years younger than those of veggie shunners. Struggling with how to incorporate them? Throw frozen vegetables into your pasta – better yet, buy or make zucchini pasta.
If you have spent any time in Texas, you’ve heard the jokes and probably told a few of them yourself.

“How many Aggies does it take to change a lightbulb?” The list goes on and on.

Don’t worry, Aggies, this isn’t that kind of story. It’s quite the opposite.
Bill Creager (yes, Creager, as in father of Texas country music star Roger Creager) started feeling sick last year and that feeling didn’t stop.

“I just had a whole lot of trouble breathing. I didn’t have much energy and I couldn’t walk very far,” Creager said.

Creager went to see a doctor near Corpus Christi. There, doctors told him his heart valve, which was replaced in 2009, was failing.

“The guy there scared the hell out of me,” Creager said. “He told me the thing was bad enough that he wasn’t going to try [the surgery], and he said, ‘If I do it, you’ve got about a 10 percent chance of surviving it.’"
A Second Opinion
Creager was stunned. But, his family and six children demanded a second opinion. That second opinion led Creager to a doctor’s appointment in Houston with McGovern Medical School at UTHealth cardiologist Dr. Richard Smalling, the director of interventional cardiovascular medicine at Memorial Hermann Heart & Vascular Institute-Texas Medical Center.

“When I came and I visited with Dr. Smalling, I wasn’t sure he could fix me. The words that I didn’t want to hear were, ‘I can’t help you,’” Creager said. “But then pretty soon he started talking to me – we were just kind of visiting for a little bit – when he said, ‘OK, well, here’s what we’re going to do.’”

Dr. Smalling recognized that Creager’s prior heart valve was failing because it was too small for his heart size and it needed to be replaced. The type of procedure Creager needed is known as a TAVR, something Dr. Smalling had performed more than a thousand times.

A TAVR, a transcatheter aortic valve replacement, is a minimally-invasive surgery used to repair an aortic valve that has narrowed or does not open properly.

Creager had surgery on Dec. 3 and he says he immediately started feeling like himself again. His son, Roger, was in town for the surgery.

“Dr. Smalling came out and the first thing he said was, ‘The surgery is over and it went perfectly,’” Roger Creager said. “And that’s exactly what you want to hear. Shortly after the surgery, my dad’s color changed. He was lying in bed still loopy from the medicine, but he looked great, immediately. We were all pleasantly surprised by that. I think once the blood begins flowing to all the parts of your body, everything else improves—not just your heart, but your kidneys improve and your lymph nodes clear—everything seems to function better.”

25 Days After Surgery
By Dec. 28, Creager was back on stage next to his son. They amazed a sold out audience at the Goode Company Armadillo Palace in Houston that night.

Turns out, Roger Creager is a good friend of Greg Haralson, Senior Vice President and CEO of Memorial Hermann-Texas Medical Center. Both went to Texas A&M University. Haralson is the one who recommended he call Dr. Smalling for that second opinion.

“Shortly after surgery, my dad’s color changed. He was lying in bed still loopy from the medicine, but he looked great, immediately.”

— Roger Creager

So, to come full circle, how many Aggies does it take to mend a heart?

Two to make the right call. And one UT physician to make it happen.
SAROFIM PAVILION: A NEW ERA IN CARE
Five years ago, Memorial Hermann-Texas Medical Center, part of the Memorial Hermann Health System and the first hospital to open in the world-renowned Texas Medical Center, embarked on a $700 million renovation and expansion project to provide for Greater Houston’s growing healthcare needs. The Susan and Fayez Sarofim Pavilion is the new home of the Red Duke Trauma Institute at Memorial Hermann-Texas Medical Center, and is a testament to Memorial Hermann’s legacy of care and innovation for the community.

The new 17-story patient care tower is a beacon of hope for the city of Houston and the growing surrounding communities. At times over the past several years, Memorial Hermann-TMC has operated at or near capacity; the Sarofim Pavilion provides the opportunity to expand services in a state-of-the-art space to serve patients needing the most critical and complex care. The expansion includes a 76,000-square-foot Emergency Center that will increase the number of treatment bays from 48 to 63 by 2021, 186 patient beds (including 38 new HVI patient beds by Fall 2020), 24 new operating rooms (including three hybrid ORs), 900 new parking spaces and a 335-seat café. In addition, six shelled or unfinished floors will accommodate future growth as needed.

“The Sarofim Pavilion is a reflection of how far Memorial Hermann has come and allows our community, employees and affiliated healthcare professionals to experience the progress we’ve made in living out Memorial Hermann’s vision - to create healthier communities, now and for generations to come,” said Greg Haralson, SVP and CEO of Memorial Hermann-Texas Medical Center.

Construction of the Sarofim Pavilion began in 2015. Each building block placed during the course of the project built upon a rich legacy which began 95 years ago when the estate of George Hermann made possible what is now Cullen Pavilion. Founded in 1925 as the first hospital in what would become the now world-renowned Texas Medical Center, Memorial Hermann-TMC’s original facility was only 200,000 square feet. As Memorial Hermann’s flagship hospital, and the primary teaching hospital for McGovern Medical School at UTHealth, the Campus will grow to 3.84 million square feet with the expansion of the Sarofim Pavilion.

James J. Postl, chairman of the Memorial Hermann Foundation Board; Susan Sarofim, key donor and fundraiser for the Susan and Fayez Sarofim Pavilion; Greg Haralson, SVP and CEO, Memorial Hermann-Texas Medical Center; and Anne Neeson, EVP and CEO, Memorial Hermann Foundation, attended the ribbon-cutting ceremony of the Susan and Fayez Sarofim Pavilion.

After a five-year, $700 million expansion project, Memorial Hermann’s new 17-story Sarofim Pavilion opened in February in the Texas Medical Center.
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