HELPING WOMEN Get Their Lives Back

As a pelvic surgeon/urogynecologist, Michael T. Margolis, MD, helps women suffering from a variety of problems involving the pelvis, including but not limited to uterine incontinence, pelvic organ prolapse and vesicovaginal and obstetric rectovaginal fistulas (small holes or tears between the rectum and vagina that can occur during childbirth)—the same type of condition that affected Sarah Benjamin (see main story this page).

“There are a number of conditions that can occur as complications and failures from previous gynecologic surgery, endometriosis, fibroids, congenital abnormalities and birth trauma,” says Dr. Margolis. “Unfortunately, Sarah’s was from birth trauma when she had her son at the young age of 16½. We used a transvaginal approach and were able to successfully correct Sarah’s fistula.”

Fistula Repair

Dr. Margolis has a high success rate for these repairs, 95 percent, which are most often accomplished through a simple, one-hour, transvaginal approach. It is considered outpatient surgery and women can return to normal daily activities quickly. Dr. Margolis is only one of a handful of fellowship-trained pelvic surgeons in the country, trained by the world-renowned Johns Hopkins surgeon Clifford Wheelock, MD. As such, Dr. Margolis has performed thousands of pelvic surgeries since completing his fellowship in 1991. In addition, he has held faculty positions and taught pelvic surgery/urogynecology at four major U.S. universities and has taught doctors internationally as well.

Surgical Mission Trips

None and dear to his heart are the humanitarian surgical mission trips to South America and Africa. He regularly participates in these missions to developing countries in cooperation with Wellbody Missions and Johns Hopkins medical schools.

“Fistulas are common in Africa due to the young age of first-time mothers and the lack of medical care during childbirth,” he says. “In 1992, I went on my first mission trip to Ghana, West Africa, to study the repair of fistulas.”

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2 Making an Impact
ValleyCare offers IMPACT concussion testing for student athletes

3 Exemplary Performance
Our hospital has been recognized for outstanding care

4 Expanded Hours
Our Urgent Care locations are now open later

Sarah Benjamin, age 26, of Santa Cruz, had lived with an obstetric fistula since the birth of her son in 2004, when she was 16½. According to Michael T. Margolis, MD, a Bay Area pelvic surgeon and urogynecologist with clinic hours at ValleyCare Health System in Pleasanton, an obstetric fistula is a small hole or tear between the vagina and rectum that can occur due to obstetric injury during childbirth.

NIGHTMARE

For Benjamin, it was a nightmare. “It’s not only embarrassing, but also causes limitations in your life,” she says. “Because gas and minute fecal matter would pass through the fistula, I always had to be near a bathroom. I love to hike and be outdoors, and it limited my ability to go places and travel.” Because of the fecal matter and irritation, cleanliness is of utmost importance. So Benjamin says she used to have lots of wipes with her to keep the area clean.

She also says it caused great psychological distress. For example, when attending UC Santa Cruz she’d be sitting in a small classroom and was always afraid of making a noise when gas would pass through the hole. “I would be so fearful of embarrassing myself and my classmates wouldn’t understand. It was awful,” she says. “I would tense up my body and pray I would get through class without making a noise. Obviously, I had a hard time in social settings.”

Knowing she had to get it fixed, she saw a colorectal surgeon in Santa Cruz who said he could repair it. A week following her surgery, it failed and the hole was worse. It was larger and fecal matter was more prevalent. The doctor tried to repair it a second time. A week later, it failed again and the doctor said he couldn’t do anything more to “help” her.

Convinced someone could help, she started doing research online and found a doctor at UC San Francisco who was experienced with fistulas and also travels to Africa to do these surgeries. Benjamin waited three months to see the doctor. On her first visit, upon learning about Sarah’s two previous surgeries that failed, this gynecologist told her she couldn’t do anything more, that it was too risky due to the prior surgeries. “I was devastated, especially after waiting three months to see her and having such high hopes that this doctor could give me my life back,” she says.

Being persistent and not one to just stand by, Benjamin continued her research and found a colorectal doctor at Stanford who addressed these issues and made an appointment. After two months of waiting to see her, the doctor told Sarah they could do surgery, but the success rate would be low. This doctor also wanted her to have a temporary colostomy bag for several months in order for the area to heal and keep it clean, along with what is called a gracilis flap (removing muscle and tissue from the inner thigh). Because of the low success rate and all that was involved, Benjamin said she would have to think about it. “I could not see myself going through all of that and being so young,” she says. “I just didn’t believe that was my last option.”

—Continued on page 4

From Embarrassment to CRUSADER

Fistula Repair Gives Sarah Benjamin a New Life

Sarah Benjamin with her son at her UC Santa Cruz graduation in 2013.

THE DOCTORS SHOW

One day while watching TV, she came upon an idea. “I thought maybe I could write to a medical show on TV and see if anyone could help,” she says. “I wrote to The Doctors show and much to my delight and surprise, I heard from Chelsea Wright, the producer, about a week later. She said my story was unique and one they wanted to share with the world. They would fly me down to L.A. to meet with them. Though it is such an embarrassing topic, I decided to go for it and tell my story and hoped they could find a doctor to help.”

After meeting the team and having an exam by Dr. Lisa, a gynecologist from the show, Benjamin was surprised when she learned they found a doctor from the Bay Area who would take her case. “I met Dr. Margolis a couple of weeks later, and he said he could truly help me. I was so happy I literally cried, but also had hundreds of questions for him,” she says. “He was so patient and answered every single one of them, and his confidence that he could correct my problem gave me the confidence to go ahead one more time.”

CELEBRATING THE REPAIR

In April of 2012, a time when Benjamin was attending UC Santa Cruz full time, she underwent surgery with Dr. Margolis at ValleyCare Medical Center in Pleasanton.

“I remember waking up in recovery and Dr. Margolis telling me everything looked good, but we wouldn’t know for sure for a few months yet, but I was smiling,” she says. “I had high hopes that it was going to work this time.”

After a postop visit a couple weeks later, Dr. Margolis told her that he was very
A problem of personal responsibility, but rather a chronic disease, no best treated. It also communicates to obese individuals that this is not training for medical students in what obesity is and how it should be treatment," Dr. Estakhri says. "The ripple effect should also include this complex, chronic disease is medically necessary, and care physician or nurse practitioner.

Evidence shows that health benefits improve even with modest weight loss that is aimed at skill development, motivation and support strategies, even with high-intensity counseling, along with behavioral interventions to support weight loss.

According to Mary Estakhri, MD, medical director of the ValleyCare Weight Loss Center, the good news is that obesity and being overweight can be treated. Evidence shows that high-intensity counseling, along with behavioral interventions that are aimed at skill development, motivation and support strategies, produce modest, yet sustained, weight loss in adults. Further evidence shows that health benefits improve even with modest weight loss that is sustained.

More good news is that as of January 1, 2014, most insurers will cover screening and counseling for obesity that is provided by a primary care physician or nurse practitioner.

"The clear message is that access to appropriate care for this complex, chronic disease is medically necessary, and insurance policies should no longer specifically exclude obesity treatment," Dr. Estakhri says. "The ripple effect should also include training for medical students in what obesity is and how it should be best treated. It also communicates to obese individuals that this is not a problem of personal responsibility, but rather a chronic disease, no different from type 2 diabetes, high blood pressure or heart disease. As a complex disease, impacting both physical and mental health, effective obesity care requires the coordination efforts of multiple health care providers."

VALLEYCARE’S ANSWER— NEW PROGRAM

As a result of the findings, obesity statistics and the recent designation by the AMA, ValleyCare’s Weight Loss Center has introduced the Medical Weight Loss Program, which includes the following:

1. Medical evaluation and clinical management
2. New dietary approach to weight loss
3. Behavior modification
4. Classes and support groups
5. Consideration for weight loss medication
6. Exercise guidance

The program is staffed by physicians, a nurse practitioner, registered dietitians and psychologists. They can help you lose the weight, improve your health and also help you achieve an excellent quality of life.

GETTING STARTED

If you are considering weight loss treatment, start by coming to our free information seminar. At this seminar, you will have an opportunity to learn more about medical weight loss, as well as surgical options.

ValleyCare Weight Loss Center is located at 5725 W. Las Positas Blvd, Suite 220, Pleasanton. For more information, please call us at 800-577-5030 or visit www.valleycare.com.
ValleyCare Earns **Top Performer Award**

ValleyCare was named Top Performer on Key Quality Measures® by The Joint Commission, the leading accreditor of health care organizations in America, for exceptional care of heart attack, heart failure, pneumonia and surgery patients. ValleyCare was recognized by The Joint Commission for exemplary performance in using evidence-based clinical processes that are shown to improve care for these conditions and is one of 1,099 hospitals in the U.S. to earn the distinction of Top Performer on Key Quality Measures. The ratings are based on an aggregation of accountability measure data reported to The Joint Commission.

ValleyCare Health System and each of the hospitals that were named as a Top Performer on Key Quality Measures must:

1. Achieve cumulative performance of 95 percent or above across all reported accountability measures
2. Achieve performance of 95 percent or above on each and every reported accountability measure where there are at least 30 denominator cases
3. Have at least one core measure that has a composite rate of 95 percent or above, and within that measure all applicable individual accountability measures have a performance rate of 95 percent or above. A 95 percent score means a hospital provided an evidence-based practice 95 times out of 100 opportunities.

“ValleyCare Health System and all the Top Performer hospitals have demonstrated an exceptional commitment to quality improvement and they should be proud of their achievement,” says Mark R. Chassin, MD, FACP, FMP, MPP, president and chief executive officer, The Joint Commission.

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**Giving Birth at ValleyCare**

When you deliver at ValleyCare, your health and comfort and the health of your baby are our top priorities. ValleyCare Medical Center is the only hospital in the area to offer a laborist on-site 24/7. In an emergency, even a brief wait can sometimes feel like hours. Having a highly skilled obstetrician on-site means you will always have direct attention until your doctor arrives.

**NICU**

ValleyCare also provides a level II neonatal intensive care unit (NICU) equipped with the latest technology and advanced treatment modalities for newborns who need extra care. Our affiliation with UCSF Benioff Children’s Hospital brings neonatologists and pediatric specialists who are specialists in caring for these babies to our maternity unit. Our NICU nurses also have specialty certification in caring for these little ones. Our nurses, physicians and specialists are dedicated to helping parents through an unexpected turn in the journey of their baby’s birth.

To get a glimpse of our NICU and to preview ValleyCare’s labor/delivery/recovery suites and postpartum rooms, sign-up for the Maternity Tour, offered every Sunday at 1 pm and Monday evenings 7:30 to 9pm. To register, please call 800-719-9111 or visit valleycare.com/maternity.

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**Upcoming Events Benefiting ValleyCare**

**20TH ANNUAL LIVERMORE VALLEY WINE AUCTION**

May 10, The Barrel Room at Wente

The Barrel Room at Wente’s Tasting Cellars, 5565 Tosta Road, Livermore, is the site of the 20th Annual Livermore Valley Wine Auction. Enjoy a beautiful evening of gourmet food, celebrated local wine, remarkable auction lots and live entertainment. For more information, visit: www.valleymare.com or call 925-321-8338.

**VALLEYCARE CHARITABLE FOUNDATION 30TH ANNUAL GOLF TOURNAMENT**

June 6, The Course at Wente Vineyards

Play through the scenic rolling hills and lush Wente vineyards during the ValleyCare Charitable Foundation’s 30th Annual Golf Tournament. Golfers will tee off to an 11 am shotgun start and enjoy a boxed lunch on the course. A cocktail reception and dinner will follow. For more information, visit valleycare.com/charitablefoundation or call 925-373-4560.

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**ValleyCare Health System – Pleasanton**

5555-5575 and 5725 W. Las Positas Blvd. Pleasanton, CA 94588

**ValleyCare Health System – Livermore**

1111-1131 E. Stanley Blvd. Livermore, CA 94550

**ValleyCare Health System – Dublin**

4000 Dublin Blvd., Suite 150 Dublin, CA 94568

The mission of ValleyCare Health System is to assume the leadership role for the health of the communities of the Tri-Valley. ValleyCare Health System: 925-847-3000, www.valleycare.com

HealthWays is published three times a year by the Marketing and Public Relations Department for friends of ValleyCare Health System. Information in HealthWays comes from a wide range of medical experts. If you have concerns or questions about specific content that may affect your health, please contact your health care provider. Models may be used in illustrations.

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optimistic, but still needed to wait a couple of months to be 100 percent sure. “At the three-month visit, he told me it was time to celebrate, as the fistula was gone forever,” Benjamin says. “I was so thrilled that my life could be normal again. But also knew there were thousands of women out there suffering the same way I did and just too embarrassed to talk about it. Through the blog I started after my failed surgeries, I now had a message of hope in Dr. Margolis.”

Because she was on MediCal at the time, Benjamin was unsure about costs. That is also another reason why it took so long for her to get help, as many doctors don’t accept MediCal. However, as she explains, “I paid nothing.” It turns out that Dr. Margolis and ValleyCare donated the surgery, and The Doctors program did air a program on it. “I’m so grateful to all who were involved and helped to change my life for the better,” she says.

**GIVING BACK**

When meeting with Dr. Margolis, Benjamin found out that he makes a trip each year to Africa, where obstetric fistulas are very common due to the young age of these mothers and lack of medical help these women have during childbirth. In February 2013, with scholarship funds, Benjamin joined his team in Uganda to help in any way she could. “It was an amazing experience that gave me a new perspective on life,” she says. “The lack of basic necessities and conditions of the hospital was an eye-opener for me. These people have nothing, yet they are very, very happy, and that taught me something about life. I became very close with many of the women because we shared a common bond and I understood what they were suffering.”

Benjamin says that Dr. Margolis was surprised she actually made the trip, as many women say they are interested in going, but end up not following through. “I told him I wasn’t going to pretend I didn’t have a fistula and move on. I know there are women out there suffering and believe I had this for a reason,” she explains. “I’d like to believe that I am a voice for all women suffering with fistulas and that this is part of my life calling. Although I am healed, I am not done with fistulas.”

After returning from Africa, Benjamin wrote her exit paper on fistula statistics in America. In doing her research in American medical journals, she learned that women with fistulas were hard to find. She found that so little research has been done because there is a misguided belief that fistulas are eradicated in the U.S. “That is not true, and I am out to change that thinking,” she says. After graduating from UC–Santa Cruz in June 2013, she started working full time for the Santa Cruz Police Department and has applied to become a police officer. She also hopes to be able to make more trips back to Africa to help Dr. Margolis and his team.

Feeling so alone and knowing firsthand what it’s like to have a fistula has made Benjamin a crusader. In addition to her blog, Benjamin is part of a Facebook group for women with fistulas and continues to share their message of hope. “So many women are affected by this condition yet too embarrassed to talk about it,” she says. “What makes it even worse is that any normal person has no idea what a fistula is, and many doctors don’t know how to make a successful repair. So, we absolutely have to speak out in order to get the needed attention.”

She further explains: “It is physically, emotionally and psychologically draining and affected my life for a long time. I want to make sure people here in America, especially in the medical profession, know that fistulas still exist and that the correct treatment needs to be made available to all women suffering from this horrible condition. And I want these women to know they are not alone and treatment is available.”

Today, Sarah Benjamin is healthy and happy. “I am so thankful for the support of the women on the Facebook page and especially to Dr. Margolis, who is more than a surgeon. He is an amazing man, a real hero who has a heart for these women and what we suffer. He gave me my life back,” she says, smiling.

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**Urgent Care EXPANDS HOURS**

When your doctor’s office is closed and you need immediate—but not emergency—care, our urgent care centers can help.

Consider urgent care for:

- A cold or cough that doesn’t get better in several days or is accompanied by fever
- A minor cut that may need stitches
- A rash, especially with fever
- Vomiting or diarrhea that lasts for more than a few hours
- A severe sore throat or problem swallowing
- A minor bone fracture
- An insect or animal bite
- Earaches, bladder infections or migraine headaches

**Helping Women**

Dr. Margolis helps women with a variety of pelvic disorders, including urinary incontinence and pelvic organ prolapse. “This is a problem that affects thousands of women today,” he says. “It’s embarrassing, and most women don’t wish to talk about it. But the good news is that there are some very simple outpatient procedures we can do to correct this issue that have a high probability of success.”

Dr. Margolis will be conducting an education seminar on the topic of Urinary Incontinence and Pelvic Prolapse at ValleyCare Medical Center on Wednesday, May 28.

Dr. Margolis has clinic hours at ValleyCare Medical Center, Medical Office Plaza East, 5575 W. Las Positas Blvd., Suite 330, Pleasanton. For an appointment, please call 650-373-1644.

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**Urgent Care Location and Hours**

**ValleyCare Medical Plaza—Livermore**

1133 E. Stanley Blvd., Livermore

925-373-4018. 10 am to 8 pm daily

**ValleyCare Health System—Dublin**

4000 Dublin Blvd., Suite 150, Dublin

925-479-3773. 10 am to 8 pm daily

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**From Embarrassment to Crusader**

—Continued from front page

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**Helping Women**

—Continued from front page

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**Help for Urinary Incontinence**

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**Free Education Seminar**

**Urinary Incontinence and Pelvic Prolapse**

**DATE:** Wednesday, May 28

**TIME:** 7:30 pm

**SPEAKER:** Michael T. Margolis, MD

**LOCATION:** ValleyCare Medical Plaza, 5725 W. Las Positas Blvd., 2nd Floor Conference Room, Pleasanton

**RSVP:** Register online at valleycare.com/educationseminars or call 800-719-9111.