Whole healing
An infusion of integrative therapies helps kids manage pain and feel better faster—without more drugs

Megan Voss, D.N.P., walked into the room of a 12-year-old girl who was recovering from an umbilical cord blood transplant at the Pediatric Blood & Marrow Transplant Center at University of Minnesota Children’s Hospital. The girl was in intense pain, but it was difficult to determine what was causing her discomfort.

Voss’ role with patients goes beyond assessing vital signs and monitoring medications. As integrative therapies program manager for pediatric blood and marrow transplantation (BMT), Voss provides patients with additional therapies that complement mainstream traditional Western methods.

To help ease her patient’s pain, Voss used Reiki, a hands-on Japanese technique that noninvasively harnesses the energy force that its practitioners believe surrounds all living beings. Reiki has been shown to decrease stress and increase healing and relaxation. In fact, Voss’ patient fell asleep within five minutes of beginning the treatment.

When the session ended, she told her mother and Voss that not only was her pain better, she also was much less anxious.

Moments like this are becoming increasingly common at University of Minnesota Children’s Hospital.

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Hospital. Thanks to generous support from Children’s Cancer Research Fund and other benefactors, all of the roughly 90 kids undergoing blood or marrow transplants every year at the hospital will have access not only to Reiki, but also a menu of other integrative therapies, including aromatherapy, acupoint, massage, healing touch, guided imagery, hypnosis, and stress management techniques.

While the work is starting in pediatric hematology/oncology and BMT, the ultimate goal is to make these treatments available to all children at the hospital, whether they are undergoing a kidney transplant or having a tonsillectomy.

In addition to lessening stress, integrative therapies have been shown to reduce nausea and manage pain with fewer side effects than medications.

That is why University leaders hope to create one of the world’s most comprehensive and innovative integrative health programs for hospitalized children. Besides Voss, the U has hired Lynn Gershan, M.D., as medical director of pediatric integrative health and well-being and as an associate professor of pediatrics at the University of Minnesota Medical School. She already has started working with outpatients in hematology and oncology at the hospital’s Journey Clinic.

An active part of your own healing

Unlike mainstream medicine, many integrative techniques can be taught and modified so that they can be performed by even young patients or their caregivers.

“In medicine, many of the ways we care for patients are passive: ‘Take this pill and feel better,’” says Gershan, who is also board-certified in medical acupuncture. “Now we can say, ‘In addition to taking this pill, we are going to teach you some relaxation strategies that you can learn so that you can contribute to your healing.’ The evidence shows that both your resiliency and your compliance increase.”

Having a hand in your own care is empowering for all patients. But it’s especially so for children, who aren’t always able to articulate how they feel about having a very serious disease that requires invasive and often painful treatments, not to mention months of hospitalization.

“If you are 6 years old and you are in the hospital for chemotherapy and have a central line and are having surgery for tumors, your life is now dictated by your disease,” says Jason Albrecht, manager of patient/family interactive services for University of Minnesota Children’s Hospital. “Integrative therapies give patients options. And with options comes a sense that you have more control.”

That’s also true for parents and families, whose lives are completely upended not only by the shock of their child’s diagnosis but also by the major disruption to their daily lives.

“Many integrative therapy techniques can be taught to parents so that they can actively nurture their child in a positive, holistic way,” says Lyn Ceronsky, D.N.P., system director for palliative care at University of Minnesota Medical Center.

Polishing the gold standard

“Today, there is more recognition that we have to provide care and support for all aspects of health in order to get the best outcomes,” says Brenda Weigel, M.D., M.S., who directs the Division of Pediatric Hematology/Oncology and is an associate professor of pediatrics. “Well-being isn’t just physical. It also includes spiritual, mental, and emotional health.”

This whole-person approach is now considered the gold standard of leading pediatric BMT and oncology programs.
“A bone marrow transplant is one of the most life-threatening, complex procedures we do,” says John Wagner, M.D., who directs the Division of Pediatric BMT and holds the Hageboeck Family/Children’s Cancer Research Fund Endowed Chair in Pediatric Oncology and the McKnight Presidential Chair in Hematology and Oncology. “We want to figure out ways to reduce the patient’s pain, to reduce the patient and the family’s anxiety, and to promote healthy living before and after the transplant.”

All under one roof

Voss’ and Gershan’s full-time work in BMT, hematology/oncology, and the Journey Clinic is a welcome addition to the treatments—including art and music therapy, guided imagery, and massage—that have been performed by a network of volunteers in other parts of the hospital for years. In addition to doing research, both plan to teach nurses and hospital staff integrative techniques to help them in their roles as caregivers.

“The goal is to train staff so that we can provide seamless care,” says Voss. “If a patient wakes up at 3 o’clock in the morning, a nurse can offer an integrative therapy to help them sleep.”

“This is allowing us for the first time to integrate all of these services under one roof,” adds Weigel, holder of the Lehman/Children’s Cancer Research Fund Endowed Chair in Pediatric Cancer. She and Wagner also are Masonic Cancer Center members.

Despite the hospital’s commitment, funding these treatments remains a challenge since many integrative therapies aren’t covered by health insurance.

“It’s important to get philanthropic support,” says Gershan. “These approaches can help how a body reacts to stress.” And by proving their value, integrative therapies one day could be part of the standard of care for all children.

Make a gift to the effort by contacting Elizabeth Patty at 612-625-6136 or patty@umn.edu, or visit giving.umn.edu/giveto/integrative.

About integrative therapies

**Acupoint** A Chinese medicine staple, which works like acupuncture but without needles. Acupoint stimulates points on the body that restore the circulation of Qi, or energy flow.

**Aromatherapy** The use of essential oils to promote well-being. Aromatherapy has been shown to reduce nausea and increase relaxation.

**Guided imagery** Using words and music to help a patient create imagined scenarios that promote relaxation and healing.

**Healing touch** An energy therapy that uses gentle hand techniques to help shift the patient’s energy field to accelerate emotional, spiritual, and physical healing.

**Music therapy** The evidence-based use of music interventions with a credentialed professional to promote wellness, manage stress, alleviate pain, enhance memory, or promote healing. Music also can help patients articulate their experiences in a way that they might not be able to articulate in conversation.

**Reiki** A healing technique that uses light, nonmanipulative touch to promote balance and healing. Reiki can result in increased relaxation, pain relief, decreased anxiety, and a general sense of well-being.
Comfort in a blanket

Fifteen-year-old Kendall Emfield may be busy with school and friends, but that doesn’t stop her from taking time to create comfort for those who need it most. In 2011, she started a business called “Komfy Kozy by Kendall Jan,” through which she makes fleece blankets for kids at the hospital and then hand-delivers them. So far she has donated more than 300 blankets to kids at University of Minnesota Children’s Hospital.

And she encourages others to join her. She rallies her friends and family by organizing blanket parties where everyone pitches in.

“It’s great because all of our family and friends come, and everyone is so supportive of it,” Kendall says. “Even the younger kids in our family come and learn the value of giving back.”

Many of the children at U of M Children’s Hospital choose their own blankets, which allows Kendall to meet the people she’s helping.

Kendall encourages other kids to give back to the community by pursuing their own passions.

“Do something that you are already passionate about and try to find a way that that can benefit more people,” she says.

Don’t forget the games

Following Kendall’s advice, her twin brothers, Austin and Travis Emfield, and their cousin, Kaden Starcznski, have found a way to use their passion for sports to give to the children’s hospital.

The boys decided to raise money to buy sports equipment for hospitalized children and their siblings to use at the hospital’s new Sport Ngin Sport Court.

“We love to play sports,” 12-year-old Austin says. “It’s something we love and thought it was something other kids would love, too.”

With help from their grandparents, the boys sent letters to their family and friends that described their goals. So far, they have raised $2,000 for sports equipment.

“Knowing that I have done something to help them feel better makes me feel better, too,” 12-year-old Travis says.

“We just really want to help the hospital and help the kids get better,” adds 10-year-old Kaden. “We want them to work their bodies normally like us.”
You scratch my back

Ethan Hoover understands what it’s like to need a little help. He was treated at University of Minnesota Children’s Hospital as a baby, and now the 10-year-old gives back by donating money he earns from selling his homemade “Golf Ball Whacker Scratchers” to the hospital.

Ethan started making the back scratchers for an event in his hometown of Willmar, Minnesota. After his first sale, he donated $10 to University of Minnesota Children’s Hospital. His invention was a huge hit at his second sale—the Champions for Children Celebrity Golf Classic, a benefit for University of Minnesota Children's Hospital—where he donated half of his sales back to the U.

“I feel really good about helping the kids and helping them not be as sick,” Ethan says. “I want to help kids get out possibly earlier than when they are supposed to.”

So far, Ethan has sold more than 150 back scratchers and plans to keep using his entrepreneurial success for good.

Mice and medicine

Thea Larsen couldn’t help but smile when she described how good it felt to donate $100 she saved from birthday and Christmas gifts to University of Minnesota Children's Hospital.

“I wanted the doctors to make better medicine,” says the 9-year-old.

Thea has grown up knowing the importance of giving back. Her mother, Holly Larsen, has been a patient at the U and donated toys to the children’s hospital.

“I always knew that Thea wanted to make the world a better place,” Holly Larsen says. “I was really proud when I found out she wanted to donate her money.”

Thea spent her last birthday at a research lab with U pediatric blood and marrow transplant physician Heather Stefanski, M.D., Ph.D., where she saw cells under a microscope and mice used in research.

“She’s a pretty amazing 9-year-old,” Stefanski says of Thea.

Stefanski believes kids see the hospital from a special vantage point that adults simply do not.

“They know what children want and what they might be missing while being stuck in a hospital room,” Stefanski says.
Summer Ostlund is a busy baby who always has a smile on her face. Like most 1-year-olds, she is on the move, crawling and pulling herself up, playing with her sister, and making her family laugh. But the last year has been a test of Summer’s strength.

In January, Summer became the 800th person—and one of the youngest ever—to receive a heart transplant in the University of Minnesota’s history.

Last November, it appeared that 2-month-old Summer had caught older sister Vera’s cold. Parents Tom and Tori Ostlund brought Summer to her pediatrician, who was worried about her heavy breathing and lack of weight gain. A chest X-ray quickly revealed a severely enlarged heart.

Within the hour, the Ostlunds were sent to the emergency department at University of Minnesota Children’s Hospital, then the cardiovascular intensive care unit, where Summer was diagnosed with idiopathic dilated cardiomyopathy. Summer’s parents were told that she needed to be placed on the heart transplant list at the highest priority. It felt surreal.

“We, like most parents, never dreamed we would be in a fight for a child’s life. The gravity of this is starting to become more clear,” the Ostlunds wrote on Summer’s CaringBridge page the day after her diagnosis.

A lifesaver

Over the next several months, Summer bravely endured four open-heart surgeries, including a 10-hour operation to implant a Berlin Heart EXCOR® pediatric ventricular assist device, an external machine designed to keep kids’ hearts strong until a donor heart becomes available. The device has FDA approval for pediatric use at only a small number of hospitals in the United States.

“The Berlin Heart saved Summer’s life,” says Tom Ostlund. “Without it, Summer may not have survived to a transplant. It afforded … her surgeon time to wait for the perfect heart.”

In January, that perfect heart arrived. Some 14 hours after Summer’s parents watched her be wheeled off to the operating room, still with a smile on her face, she returned to them with the greatest gift of all—a new heart. In late February, Summer was cleared to go home.

Saying ‘thank you’

Since then, the Ostlunds have fallen into many new routines dedicated to Summer’s ongoing health and are enjoying life together again as a family. While the return trips to the hospital are many, they are happy to see the nurses, doctors, and staff who helped to save Summer’s life.

So thankful is the whole family that grandparents Rich and Mary Ostlund have established the Summer’s Wish Pediatric Cardiology Innovators Fund to support University of Minnesota Children’s Hospital. Tom and Tori also have found great happiness and purpose in raising money for Summer’s fund.

“After her transplant, it seemed like so little to just say ‘thank you,’” says Tori Ostlund.

While the long-term outlook for pediatric heart transplant recipients is continually getting brighter, there is still plenty of room for improvement.

“Hearts are a very precious resource,” says Tom Ostlund. “Any research that can lead to innovation and improved outcomes is worth striving for as a community.”

To make a gift to the Summer’s Wish Pediatric Cardiology Innovators Fund, visit giving.umn.edu/giveto/summerswish14.
Living healthy with congenital heart disease

Being born with heart disease presents challenges for both babies and their families. And those challenges can last a lifetime.

Because of recent surgical advances and other treatments, most kids who have congenital heart diseases live to adulthood. But questions about the durability of surgical fixes and these children’s quality of life remain because, for some, other health issues pop up.

Lazaros Kochilas, M.D., a pediatric cardiologist at University of Minnesota Children’s Hospital, hopes to get a better picture of what these health issues are by analyzing data from the Pediatric Cardiac Care Consortium, a database that contains 30 years of health information from 47 centers across the country. Kochilas will follow patients for decades after their surgeries and find out what’s affecting their well-being. While many kids face no long-term effects after surgery, others will have issues such as arrhythmias, progressive heart failure, pulmonary hypertension, and infections.

“Ultimately, we would like to use this database not only to understand risks … 10 or more years after operation, but to look at people who have survived after surgery and find out what doctors can do to help ensure that they live long, healthy lives,” he says.

We’re close and getting closer …

Our Children’s Health Campaign is inspiring hope and improving the lives of seriously ill children and their families. We have raised $172 million so far—98 percent of our $175 million campaign goal—through private gifts and fundraising events, supporting vital advances in research and care.

Make your gift to University of Minnesota Children’s Hospital on Give to the Max Day—Minnesota’s annual online giving extravaganza—on November 13 and make a difference for children everywhere!

Cheers to 20 years!

Save the date for Wine Fest No. 20—A Toast to Children’s Health on May 15 and 16, 2015, where we’ll celebrate with the theme “Icons of the Industry, Legends of the Vine.”

Join us at 6 p.m. Friday, November 14, at the McNamara Alumni Center for this walk-around wine and food tasting, marketplace, auction, and fashion show. It’s where fun, friends, and shopping come together to support a great cause: crucial, life-changing pediatric patient services at University of Minnesota Children’s Hospital—transforming the care experience for the smallest patients and their families.

Tickets are going fast. Get yours today at rsvp.umn.edu/wws.
Children's Health Fall 2014

Help the seriously ill children we serve at University of Minnesota Children's Hospital. Your gift will support expert care and discovery of groundbreaking treatments at one of the country’s top children’s hospitals.

Honor a special person in your life, celebrate a child or parent, recognize your organization, or leave a lasting legacy in your name. Your gift of $2,500, payable over five years, will be acknowledged on a lighted tile in a beautiful, permanent installation on the hospital’s main floor.

Join your light with others in the striking Be A Light art installation at University of Minnesota Children’s Hospital and help us deliver hope and healing to children.

To make a gift, visit uofmhope.org or contact Ashley Lawson at lawson161@umn.edu or 612-626-6430.

Be a light of hope and healing

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To find out how your gift can make a difference, contact: Children’s Health Campaign 612-626-4165 childrenshealth@umn.edu

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