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## Practitioners striving for innovative options, better treatment, new hope

BY SUSAN HODARA • SPECIAL TO THE JOURNAL NEWS • MARCH 25, 2007

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It is not the medical profession as a whole that moves [health care](#) into the future, but the individual practitioners within it. It is they who explore revolutionary treatments and powerful new drugs, who ennoble patient care and increase the chances that those who are ill will be cured. Driven by personal commitment, these individuals research advances in their fields, and initiate programs and procedures that reflect their knowledge. Their efforts benefit us all.

Following are five area medical professionals whose pioneering work offers patients of all ages with a variety of health problems new treatment options and new hope.

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### Dr. Giuseppina Benincasa-Feingold

#### Owner, Valley Health, Mahopac

Ten years ago, when Dr. Giuseppina (Jo) Benincasa-Feingold, an emergency room pediatrician, gave birth to her second daughter, Elisa, her professional path veered toward where it is today. Elisa was born with cerebral palsy, and, Feingold said, "I had to find a way to help her."

After three years of physical and occupation therapies, Feingold, who by then had had triplets, enrolled Elisa in a cerebral palsy study using hyperbaric oxygen therapy. HBOT is a treatment that saturates the body with oxygen while the patient lies in a cylindrical chamber. Other than ear symptoms similar to those experienced on an airplane, the patient is comfortable, and can spend the one- to two-hour sessions napping or watching television. HBOT is traditionally used for such conditions as carbon monoxide poisoning, decompression sickness, radiation tissue damage, and burns.

Feingold was struck by the changes in her daughter. "When we started, Elisa spoke about 30 words," she recalled. "We did 120 treatments between December 1999 and April 2000, and by July, her vocabulary had grown to over 1,000 words."

In 2001, she opened Valley Health, now located in Mahopac, where she uses HBOT to treat an assortment of conditions including cerebral palsy, autism, chronic Lyme disease, chronic fatigue syndrome, migraines and cluster headaches, and brain injuries.

There are four hyperbaric tanks at Valley Health - two single (monoplace) chambers and two that hold three or four patients, called multiplace chambers.

"The kids call them spaceships," said Mary Ellen Zackaroff, Valley Health's certified hyperbaric technician. In the larger tanks, clear hoods are worn and an adult must accompany children.

Most of Feingold's patients' families are not reimbursed for the hefty cost of HBOT (between \$400 and \$1,200 per session). Feingold, however, hopes that in the future, the treatment will be accepted - and covered by [insurance](#) - for all the conditions she says she knows it helps.



Dr. Merville C. Marshall Jr. founded The Endocrine Institute in 2002. (Tom Nycz/The Journal News Joe Larese/The Journal N)



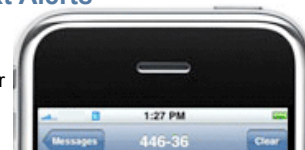
Dr. Giuseppina Benincasa-Feingold talks via microphone to a patient receiving therapy in a hyperbaric machine at Valley Health in Mahopac. (Joe Larese/The Journal News)

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## Dr. Merville C. Marshall Jr.

### Founder, The Endocrine Institute, White Plains

In 2002, after nearly 30 years as an award-winning and highly esteemed endocrinologist whose career encompassed research, teaching, administration and medical practice, Dr. Merville Marshall founded The Endocrine Institute in White Plains with two purposes. The first was to continue to educate patients, physicians and the public about endocrine-related disorders such as diabetes, thyroid disease and osteoporosis. The second, he said, "was to practice medicine the way I think it should be practiced."

Five years later, those missions are being fulfilled. "I've always had the philosophy that I could benefit more people by training other physicians to treat their patients the way I treat mine," said Marshall, who received his BA and MD from Columbia University and his advanced training at the National Institutes of Health. To that end, he conducts medical [education](#) seminars for healthcare professionals across the country. Seminars for the lay public are offered for patients, corporations and religious groups. "I tell them what they need to know and what they need to ask their doctors," he said.

Marshall's inclination to educate others is integral to his medical practice. Appointments at the Endocrine Institute are scheduled to allow ample time for doctor-patient discussion, something Marshall believes is crucial for a successful outcome. "Today, patients are given a minimum of time - sometimes just a few minutes - with their doctors," he said. "That is not enough."

According to Marshall, 80 percent of a diagnosis can be based on patient history. Rushed doctor visits frequently result in misdiagnosis, or no diagnosis at all. Patients who don't understand the scope of their conditions are more likely to be non-compliant in caring for themselves. Talking and listening in the doctor's office is dangerously undervalued.

At the Endocrine Institute, Marshall sees no more than eight patients a day. "I give my patients as much time as they need to understand their diagnosis and treatment plan," he said, "and as I need to get to know them and their disease."

## Peggy Emro

### Physical Therapist, Integrative Manual Therapist CenterIMT, Brewster And Manhattan

Mention manual healing and people think "alternative." But, said Peggy Emro, a physical therapist who practices Integrative Manual Therapy (IMT) at her CenterIMT offices in Brewster and Manhattan, "We don't consider IMT alternative, we consider it advanced."

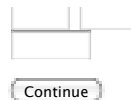
IMT practitioners use their hands to diagnose conditions by gently pressing the patient's body, not only where pain is felt, but in other areas. Treatment involves placing each hand in a specific location on the patient's body that corresponds to restoring health. They are trained to "read" the natural rhythms in the tissues. "We use varied techniques to palpate for normal health rhythms," said Emro, who earned a bachelor's degree in physical therapy, and a master's in ergonomics and occupational biomechanics. "Where there is aberrance, we know there is dysfunction."

Between 1990 and 2000, Emro was director of Rehabilitation Services at Northern Westchester Hospital Center. While studying various orthopedic and alternative therapies, she was introduced to IMT, and, she said, "I realized how powerful it was. It can cause profound changes in a patient's structure and alignment that as a physical therapist I'd been taught were impossible." She became IMT-certified, and left the hospital to open her practice.

Her [clients](#) have a spectrum of diagnoses, from chronic muscular-skeletal pain; to neurological disorders including multiple sclerosis, stroke, and facial paralysis; to medical problems such as Lyme disease and allergies; to infertility and incontinence; to pediatric concerns including autism, developmental delays, learning disabilities, and ADD/ADHD.

There are numerous IMT treatment methods, Emro said, some addressing specific structures like fascia, others using body rhythms to improve physiology. "I'm not doing something to the body. I am communicating with the body, asking it what it needs, what its dysfunction is, and I'm facilitating the healing in that structure."

Emro often finds that the symptom is not the primary problem, but a secondary effect of something else. "Two patients with identical knee pain might have entirely different dysfunctions," she maintained. "We find the underlying problem and treat that."



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The power of IMT to improve a range of conditions makes it, Emro said, "a paradigm for wellness. It can be considered a healthcare process that moves someone towards optimal health."

## **Dr. Kuo Chao**

### **Interventional Neuroradiologist Westchester Medical Center**

When Dr. Kuo Chao was a child, his grandmother had a stroke that paralyzed her left side. "She survived, but she was greatly affected," he recalled, "and I was, too." Chao went on to become a radiologist, and is now a pioneer in the field of interventional neuroradiology. "Interventional neuroradiology involves catheter-based treatments for cerebral vascular diseases like aneurysm and stroke," said Chao, who has worked at Westchester Medical Center for the past two years. He performs two such procedures that are unavailable anywhere between Manhattan and Albany.

One is coil embolization, called coiling, used to prevent brain aneurysms from rupturing, a devastating event that often results in death. The traditional method of achieving this is craniotomy, or clipping, which involves removing a portion of the skull and inserting a clip around the base of the aneurysm to separate it from the rest of the artery. Coiling is a less invasive endovascular alternative in which a platinum-based wire is coiled inside the aneurysm to block blood flow into it. Using fluoroscopy, which is X-ray technology designed to capture movement, the physician inserts the wire via a catheter that [travels](#) through the vascular system from the femoral artery in the groin into the brain, and then conforms the wire to the shape of the aneurysm.

The second procedure, called Merci (for Mechanical Embolus Removal in Cerebral Ischemia) Retrieval, enables physicians to treat stroke victims by snaring the clot and extracting it. Stroke occurs when a clot prevents blood flow to the brain, producing neurological symptoms such as language and sensory loss and limb weakness. Traditional treatments require high dosages of medication injected into the clot to dissolve it, but these must be administered within hours of the stroke, and can result in hemorrhaging. FDA-approved in 2004, Merci Retrieval uses fluoroscopy and a catheter inserted through the femoral artery to deliver a small corkscrew-shaped tool into the clot, and then remove it.

Chao was involved in Merci research trials. "It was invented by a French man who told me he got the idea while opening a bottle of wine," he said.

## **Dr. Joli Yuknek Pediatrician, Director, Pediatric Emergency Medicine, White Plains Hospital Center**

Thanks to the efforts of Dr. Joli Yuknek, director of Pediatric Emergency Medicine at White Plains Hospital Center, pediatric patients there are benefiting from two new programs.

The first is the hospital's pediatric hospitalist program, which Yuknek instituted in July 2005. The concept of hospitalist practice is about 10 years old, said Yuknek, who is director of the program at WPHC. "It consists of physicians who specialize in in-patient management," she said. "They don't have private practices; they work for the hospital caring for hospitalized patients."

WPHC's pediatric hospitalist program includes four full-time and three part-time pediatricians, caring for up to nine hospitalized children as well as patients in the hospital's emergency room, well-baby nursery, and [Family Health](#) Center clinic. The hospitalist communicates daily with the hospitalized patient's pediatrician, creating continuity at discharge. "The private pediatrician has 24-hour access to his patient," Yuknek said, "but he knows his patient is being cared for, so it frees him to treat his other patients."

And traditionally, a hospitalized patient can expect a short visit from her doctor at the beginning or end of a day, but hospitalists are available 24 hours a day, so, Yuknek said, "The patient doesn't feel abandoned."

In January, Yuknek started The Open Book, a literacy program for patients ages 6 months to 5 years that is based on the national Reach Out and Read program started in 1989 by Dr. Perri Klass in Boston. The program is housed in the Family Health Center. "At well-care visits, volunteers in the waiting room introduce age-appropriate books to patients, and encourage reading between caretaker and child," Yuknek said. "And during the examination, the physician chooses a book to give to the child to take home." The program offers books in English and Spanish. "Its goal is to raise awareness about the importance of early literacy, and to promote literacy growth in children," she said.

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