How one family found comfort and closeness during their child’s difficult treatment.
As Cohen Children’s new executive director, it is with great excitement that I present this edition of Kids First.

Every day, Cohen Children’s nurses smooth kids’ treatment and soothe parents’ anxiety. Our nurses recently got a big boost when our hospital earned Magnet status from the American Nurses Credentialing Center. Only hospitals with superior nursing and clinical services receive this honor. Page 4 is just one example of how our nurses make all the difference.

Magnet designation is a primary factor when US News & World Report assesses hospitals, and Cohen Children’s has again ranked among top hospitals in seven categories. Learn more on page 3, including how to contact our leading specialists.

We have many other reasons to celebrate.

Kids fighting illnesses like cancer are receiving new paths to hope at Cohen Children’s (see pages 12 and 14), and our Schein Oral Health Navigator Program helps to keep them smiling (see page 13). We helped Anthony (our cover story) prevail against cancer. During treatment, Anthony’s family received immeasurable support at the Ronald McDonald House of Long Island. This wonderful institution and Cohen Children’s partner is celebrating its 30th anniversary this fall. Read all about it on page 10.

Flip through this issue for other positive developments. I promise, many more are coming.

Charles Schleien, MD
Executive Director, Cohen Children’s Medical Center
Chair of Pediatrics, Northwell Health
Philip Lanzkowsky Professor of Pediatrics, Hofstra Northwell School of Medicine

For more information about making a contribution to support Cohen Children’s Medical Center, please call 516-465-2550 or visit Support.Northwell.edu/cohen-childrens-donation.
Cohen Children’s Medical Center ranks in the top 50 hospitals nationwide in seven different specialties.

Every year, *US News & World Report* ranks the 50 top performing hospitals based on availability of specialized programs, patient volume, infection rates and mortality. Cohen Children’s provides some of the highest performing pediatric services under one roof, so our patients benefit from clinical outcomes that are among the best in the nation.

This is the 10th consecutive year that Cohen Children’s is in *US News*’ top 50 hospitals. Below are our pediatric specialties that the publication rated among the best in the country.

**Neonatology** (No. 29)
Cohen Children’s has been recognized as a Regional Perinatal Center by the New York State Department of Health.

Division of Neonatal Services
718-470-3440

**Orthopedics** (No. 40)
We are equipped to handle the disorders of bones, joints, ligaments, cartilage and spine in a growing child.

*Billie and George Ross Center for Advanced Pediatric Orthopaedics and Minimally Invasive Spinal Surgery*
844-PED-ORTHO (844-733-6784)

**Neurology & Neurosurgery** (No. 39)
Five specialty neurology clinics and a team of pediatric neurosurgeons provide truly comprehensive care for children with brain and spine disorders.

Division of Pediatric Neurology
516-465-5255
Division of Pediatric Neurosurgery
516-354-3401

**Pulmonology** (No. 40)
Children with acute or chronic lung problems find compassionate care with our pediatric specialists.

*Division of Pediatric Pulmonology and Cystic Fibrosis*
516-321-8680

**Pediatric Urology** (No. 13)
All of our pediatric urologists are fellowship-trained and board-certified, and can diagnose and treat problems detected before or after a child is born.

*Division of Pediatric Urology*
516-466-6953

See the complete *US News & World Report* rankings at USNews.com/childrenshospitals.
When 19-year-old Molloy College freshman Sara Dawber felt abnormally tired and congested one morning in March 2015, she never dreamed Cohen Children’s Medical Center would become her new “dorm room” for the next five months.

That morning, Lisa Dawber, Sara’s mother, drove her to visit her primary care provider. Blood tests showed a high white blood cell count. Sara’s doctor recommended she visit Huntington Hospital, where additional tests resulted in a leukemia diagnosis. Sara was placed in an ambulance, hooked to an IV and sent to Cohen Children’s.

“My daughter was never sick a day in her life, so when we learned she likely had a life-threatening disease, our entire world turned upside down,” said Ms. Dawber. “It was the start of our journey into the pediatric cancer world.”

At Cohen Children’s, two pediatric hematology/oncology specialists — Rachel Kessel, MD, and Andrew Doan, MD — met with the family to explain Sara’s diagnosis and the treatment plan that would save her life.

“My whole world changed,” Sara said. “I knew I had to do whatever it took to ultimately survive. I channeled the energy I used to have as a cheerleader to keep my spirits up.”

Diagnosis Directly to Treatment
Sara had childhood acute myeloid leukemia, a cancer that causes bone marrow to produce unhealthy blood cells and progresses quickly. She also had a genetic mutation with a required protocol of three rounds of chemotherapy. After round one, her cancer went into remission, which is rare when a gene mutation is present. She went through the second round of treatment, just in case other leukemia cells were in hiding, and her body responded so well that the third round was deemed unnecessary. But she wasn’t out of the woods yet. A bone marrow transplant was planned next.
“Sara underwent more than 100 blood and platelet transfusions,” Ms. Dawber said. “She was hooked up to three different machines at all times, and the constant beeping became her reality.”

Throughout those five months, Sara embraced hope. “The nurses were my saviors, especially Melissa Sands [RN],” she said. “She gave me the positivity boost I needed to stay strong and hopeful.”

**Ports in the Storm**

“After three more rounds of chemotherapy that were necessary to prepare for the transplant, Sara was moved into the Bone Marrow Unit, where she would live, sleep and exist for five months,” Lisa Dawber said. “My baby lost 28 pounds and developed sores in her mouth, throat, esophagus and stomach. Her lips were swollen shut and her face distorted. Watching her go through this was truly hell on earth.”

Through the tough times, Sara’s nurses and doctors shone the brightest.

When Sara lost her hair, nurses came to the rescue and boosted her self-confidence by painting her nails, making her laugh and spending hours by her bedside during their off-hours to give her updates on the outside world. They addressed every tough question she asked with dignity and grace. Ms. Sands and Sarah Coffey, RN, became her pillars of support.

“It’s one thing to hang a bag of chemotherapy fluid for a patient and quite another to connect with her on a personal level,” Sara said. “The nursing team at Cohen Children’s is the reason I’m here today and back to my studies.”

“My husband Darrin and I entrusted our daughter to the team at Cohen Children’s, and never once did we question the outcome,” Ms. Dawber said. “These people became our lifelines.”

Committed to Care and Comfort

Cohen Children’s Medical Center recently received Magnet designation for nursing excellence from the American Nurses Credentialing Center. It is the only pediatric hospital in New York State with this recognition.

“Families entrust their most precious members to our care, and we take that responsibility seriously,” said Jennifer Simonetti, RN, nurse educator for Cohen Children’s. “This Magnet designation validates everything we do as an entire institution, not just the nursing team.”

Qualifying for the honor required the nursing team to provide outcomes for 85 different patients, along with their backstories. Sara’s story is one among many that shows why the recognition is well-deserved.

Laura Dunac-Beigay, RN, pediatric nurse for Cohen Children’s, collected stories behind the scenes. “As I gathered examples, the stories didn’t seem out of the ordinary,” Ms. Dunac-Beigay said. “Many of us are parents, so we do for these kids what we would do for our own. When we found out others deemed these stories exemplary, it was news to us in the best way possible.”

The nursing team strives to make Cohen Children’s a second home — a place of comfort during difficult times.

To learn more about our recognition for quality nursing care, visit 4healthier.me/CCMC-Magnet.
If your child must interact with a piece of hospital equipment, you want them to be comfortable, prepared to hold still, and able to understand the technician’s instructions to ensure accurate results. The new Pediatric Imaging Unit at Cohen Children’s makes that all possible by alleviating kids’ common fears.

“Depending on the imaging procedure and a child’s comfort level, the experience can be very different for each child,” said Jeanne Choi-Rosen, MD, chief of pediatric radiology at Cohen Children’s. “It takes a certain level of patience and a particular aptitude for working with kids and families. We have specialists with master’s degrees in social work who communicate with children and families to help bring down anxiety levels.”

Available imaging procedures include X-rays, computed tomography (CT) scans, magnetic resonance imaging (MRI), ultrasounds, fluoroscopies and nuclear medicine. MRIs can be time-consuming, so lively children may feel unsure about entering the long imaging tube by themselves. The Cohen Children’s imaging team is prepared for patients who might be nervous and encourages them to ask any questions and voice their concerns. Furthermore, young patients may choose to wear special MRI video goggles that engage their imagination and diminish their fear and anxiety.

If a child has trouble getting past fear, pediatric anesthesiologists can administer sedation for certain procedures.
Procedure Prep from Home
A candid conversation with your child about what to expect can smooth the experience of an imaging appointment. Dr. Choi-Rosen recommends ImageGently.org as a resource to help parents educate themselves or their child before a procedure. The information is easy to understand and highlights why the exams are important and that they will also help the child.

“We want children and parents to always feel comfortable and empowered to ask questions,” Dr. Choi-Rosen said. “The best place for a child who needs an imaging procedure is somewhere that takes care of kids all the time. At Cohen Children’s, that’s our specialty.”

Is your child apprehensive about a screening? Find information about the process to help put their mind at ease by visiting 4healthier.me/CCMC-Radiology.

A Pharmacy for the Family
Parents of children who require a hospital visit can rest easy knowing that their kids’ medication needs will be met, thanks to the dedicated pharmacy at Cohen Children’s Medical Center. The pharmacy is also convenient for kids who are outpatients and whose parents will need to pick up medicine on the way home.

“Children’s health care needs are very different from adults, and so are their medications,” said Enrico Ligniti, PharmD, director of the pediatric drugstore at Cohen Children’s. “Our new pharmacy adds another layer of clinical and operational services to all children we serve, both inpatient and outpatient.”

A spacious 5,300 square feet, the pharmacy provides the safest, most accurate and most timely medication and therapies possible for young people, from babies to adolescents.

“Our goal is to ensure that children get their medication in a manner tailored to their needs,” Dr. Ligniti said. “That makes the process much easier on parents, whether their children are inpatients or outpatients.”

The pharmacy is located in the pavilion at Cohen Children’s and is open seven days a week, 24 hours a day.

For more information, contact the Pediatric Medication Resource Center at 516-470-8915.

Have a child who doesn’t want his medicine?
Offer a degree of control — and a reward — by asking a question like, “Do you want raisins or apple slices after you take your medicine?”
Brian Demmerle left work early — Mets tickets in hand — to spend time with his 3-year-old son. He wound up helping save the life of his infant son instead.

He’s Safe!

“The Demmerle family advocated the best possible care for their child in an emergency situation. They acted as heroes for their kid — end of story.”

– MARK MITTLER, MD, CODIRECTOR OF PEDIATRIC NEUROSURGERY AT COHEN CHILDREN’S MEDICAL CENTER

Mr. Demmerle, 35, works in accounting during the week and in hotel management on weekends. Both jobs require keen observation skills. On Sunday, October 4, 2015, his detective prowess was put to the test when he noticed his son Christopher didn’t seem like himself.

“You’re probably thinking, ‘What can a parent really notice about their 12-day-old infant?’ But when you analyze every day like I do, reading people becomes ingrained,” Mr. Demmerle said. “When I arrived home to pick up my 3-year-old son Nicholas for the game, I noticed Christopher was moving around and crying loudly. His left eye deviated toward the left and his skin quickly paled. I immediately dialed 911.”

The First and Only Place

Paramedics arrived and asked Mr. Demmerle and his wife, Cathleen, which hospital they preferred. The couple chose Cohen Children’s Medical Center, since Nicholas had spent time in the Neonatal Intensive Care Unit (NICU).

Brian Demmerle cherishes the unused Mets tickets from the day his son’s life was saved.
“Cohen Children’s was the first and only place that came to mind, even though it wasn’t the closest,” Mr. Demmerle said. “As an infant, Nicholas spent a few hours in their NICU for observation, so we knew they had the doctors on staff to handle major pediatric conditions. Thankfully, the paramedic who took Christopher’s vitals and was in the ambulance with us agreed.”

Choosing Cohen Children’s saved Christopher’s life.

**A Serious Surgery**

“Christopher arrived at our Emergency Department and received a computed tomography [CT] scan,” said Mark Mittler, MD, codirector of pediatric neurosurgery at Cohen Children’s. “The results showed a huge blood clot in the cerebellum, or back portion of his brain. These can be extremely dangerous, because a large blood clot in a small area increases pressure on the surrounding tissue.” The increased pressure caused a dangerous drop in Christopher’s heart rate. He needed to be moved quickly to an operating room.

“I surgically removed the blood clot and then found an abnormal blood vessel that created a high blood flow state prone to bleeding,” Dr. Mittler said. “We controlled the bleeding and Christopher went home a few days later.”

It may not have been the Mets’ starting lineup, but team effort led to all the right decisions from start to finish. Mr. Demmerle can still easily and enthusiastically rattle off the first names of the nurses — Laura, Kaytlyn and Marcy — whose assistance and support in the NICU were crucial.

Today, Christopher is in good health. As for that Mets game? Mr. Demmerle still has the tickets.

“I left work early to attend a game, and those minutes ended up being critical,” Mr. Demmerle said. “When we first visited Dr. Mittler’s office after surgery, he put us in a room full of Mets photography, so I’d say we’re all fans.”

Above all, the Demmerles are fans of the Cohen Children’s team. “We could never thank and praise Dr. Mittler and every medical professional at Cohen Children’s enough for all they have done and continue to do,” Mr. Demmerle said. “I hope our story echoes throughout the community, giving confidence and hope to parents whose children have treatable conditions.”

Visit bit.ly/HeIsSafe to learn more about the Demmerle family’s story.
Wantagh residents Anthony and Brenda Avitabile expected nothing unusual during a Bronx Zoo excursion last summer with their sons, Anthony, Jr., and then 8-year-old twins Gabriel and Michael. But that day, Michael began to experience temporary but severe stomachaches.

When the pain recurred one Sunday a couple of weeks later, the Avitabiles took Michael to a local walk-in clinic for immediate care. An X-ray did not show the exact cause of Michael’s pain, but the clinicians suspected an intussusception, a common cause of intestinal obstruction in children, and recommended that Michael receive care at Cohen Children’s Medical Center if the pain persisted.

Michael’s stomachache began to subside at the clinic, but returned in full force two weeks later. His parents immediately took him to the Emergency Department at Cohen Children’s, where after careful examination, including a diagnostic ultrasound, doctors confirmed intussusception, meaning part of his intestine slid inside another portion like a collapsing telescope. They attempted to correct the issue with a therapeutic enema and then surgery to remove the abnormal portion.

Jose Prince, MD, pediatric surgeon, performed the procedure and found an unusual lymph node that he

The Ronald McDonald House of Long Island provided comfort to the Avitabile family when they needed a home away from home.
sent for biopsy. Mr. Avitabile went to work the next morning as the Cohen Children’s team took care of his son and searched for more answers.

“I received a call from my wife, crying,” Mr. Avitabile said. “Michael had cancer.”

**Care for the Whole Family**

Michael was diagnosed with Burkitt’s lymphoma, an aggressive form of non-Hodgkin’s lymphoma. Arlene Redner, MD, pediatric hematologist/oncologist at Cohen Children’s, leapt into action to administer chemotherapy to Michael. The treatment cycle would last three months and require four inpatient stays at the hospital.

To ensure the family would remain as close as possible as Michael underwent treatments, Mr. Avitabile asked for advice from friends whose children had been treated at Cohen Children’s.

“They told me about the Ronald McDonald House of Long Island, which is right next door to Cohen Children’s,” he said. “Our experience could not have been better. Staying there allowed my wife and me to be within minutes of Michael at all times. It also let us maintain some normalcy with our twins during this trying time.”

Complete with private bathrooms as well as a fitness center, kitchen facilities, laundry rooms, a meditation room and game areas for kids, the 42-room facility is staffed by compassionate specialists dedicated to creating a nurturing environment where families can recharge, restore and connect with others.

“Families staying at the Ronald McDonald House — whether they are thousands of miles away from home or live just around the corner — become an invaluable support system for each other,” said Matthew Campo, president. “On a daily basis, they laugh together, play together, cry together and pray together. We have had the privilege of providing a warm, comfortable place where they may rest and recuperate — a necessity when communicating with a child’s medical team and adhering to complicated treatment plans.”

Complicated plans did not dampen the outlook for the Avitabile family.

“There is always hope, even in the darkest of times,” Mr. Avitabile said. “The Ronald McDonald House of Long Island was our home away from home for three months, and everyone there helped us to see that bright side. It was our oasis in the face of difficult times. Michael is doing great, and his long-term prognosis is very good.”

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For more information about the Ronald McDonald House of Long Island, visit rmhlongisland.org or call 516-775-9231 or 718-343-5683.
For children with high-risk neuroblastoma, targeted radiation therapy that uses the synthetic hormone metaiodobenzylguanidine (MIBG) helps add precious months to their lives. Now, plans are underway to bring that advanced therapy to Long Island.

“Over the years, new options have developed for treating neuroblastoma,” said Jonathan Fish, MD, a pediatric oncologist and hematologist with Cohen Children’s Medical Center. “Unfortunately, the five-year survival rate is still just 40 to 50 percent for children with high-risk neuroblastoma. There is no treatment option that can cure children whose cancer doesn’t respond to standard therapy or comes back. But MIBG can add months or even upwards of a year to their lives.”

**Radioactive Intervention**

Neuroblastoma cells naturally absorb MIBG. When it is introduced to the system with radioactive iodine, cancer cells absorb the MIBG and the radiation therapy, effectively destroying the cells.

Therapy takes three to seven days, after which children return home. Currently, children on Long Island who need MIBG have to travel out of state to receive therapy. But that’s changing.

**Anastasia’s Legacy**

In July 2015, Christina and Angelo Kostaris lost their daughter Anastasia to neuroblastoma. As part of her treatment, Anastasia traveled out of state to receive MIBG therapy, which delivers targeted radiation directly into cancerous masses.

In an effort to help local children needing MIBG, the Kostarises started Anastasia’s Legacy to fast-track the creation of an MIBG treatment program within Cohen Children’s Division of Pediatric Hematology/Oncology and Stem Cell Transplantation. The implementation will add Cohen Children’s to the ranks of the few hospitals in the US — and the only one in tri-state New York — to offer this specialized care.

“With the generous support of the communities we serve, particularly community members such as the Kostaris family, Cohen Children’s plans to build an MIBG treatment suite on the fourth floor in our oncology unit,” Dr. Fish said. “This will reduce travel stress for families and allow us to become part of the research process to help make MIBG a frontline therapy. We will also help families facing this difficult diagnosis with Child Life programming and hands-on care from specially trained providers.”

Concerned about cancer care for a young loved one? Learn about Cohen Children’s cancer and blood disorders services at bit.ly/CohenChildrensCBD.
Youngsters with cancer are getting special help to keep their smiles bright.

The new Henry Schein Oral Health Navigator Program helps ensure dental procedures are handled at the right time and in the right way for young cancer patients — helping them to avoid oral health complications during treatment.

“It’s important to make it easier to get kids who are battling cancer into the dental office,” said Ronald Burakoff, DMD, chair of dental medicine at LIJ Medical Center. “Dental disease is essentially an infection, and these kids have compromised immune systems. We want to get rid of any existing dental disease to help them be as healthy as they can be before and during cancer treatment.”

A partnership between Cohen Children’s Medical Center and the Henry Schein Cares Foundation, the program uses an on-site navigator to coordinate care between a patient’s family, the medical team and a dental professional.

The program benefits kids with cancer and their families by making them active partners in their oral health care through education and counseling provided by the navigator. Addressing dental concerns before treatment begins makes successful outcomes more likely, and kids experience less pain and can keep their smiles healthy as they move toward adulthood.

“Our navigators are constantly making rounds, so they develop relationships with the kids,” Dr. Burakoff said. “The navigators and dentists have become a true part of the team providing care for these patients.”

Concerned about your child’s oral health? Make a pediatric dentistry appointment by calling 855-460-0911.

Teddy Moore, the 2016-2017 New York State Champion for the Children’s Miracle Network Hospitals’ Champions Program, has a mission: to help others.

Born three months premature, Teddy experienced a brain bleed that caused hydrocephalus (also known as water on the brain). Now 8, he has undergone 30 brain-related surgeries at Cohen Children’s Medical Center.

Teddy’s positive outlook in the face of adversity made him a natural fit for recognition as New York’s Champion. The Children’s Miracle Network Hospitals’ Champions Program celebrates children who not only show great courage when dealing with a serious medical diagnosis and treatment, but who show a desire to represent and help other kids like them.

Oppportunity Knocks

“Teddy believes he was given this chance to talk about his condition for a reason,” said Andrea Moore, Teddy’s mother. “He wants to help other sick kids feel better by being an ambassador and raising money for the hospital.”

Recently, Teddy and his family participated in the Northwell Health Walk at Jones Beach. Teddy completing the walk and celebrating a full year with no surgeries are two important milestones for the Moore family — milestones he would love to help other kids with health conditions achieve, too.

To support the Children’s Miracle Network in Teddy’s honor, visit Support.Northwell.edu/cohenchildrens.
Shauna Thomas wasn’t a perfect match to be her son Tyler Gaymon’s stem cell donor, but she didn’t need to be. Thanks to a new option available at Cohen Children’s Medical Center, the future is promising for them both.

How could anyone ever express enough gratitude to the person who might have saved his life? For Ms. Thomas, a simple, heartfelt “thank you” from Tyler said it all. After everything mother and son went through in 2015, they both had plenty of reasons to be thankful.

Frightening Diagnosis
Last summer, Tyler, a 10-year-old only child who lives with his mother in Springfield Gardens, Queens, developed swelling in his neck and face and experienced such debilitating pain that he struggled to walk. Tyler’s pediatrician knew he needed a higher level of care to pinpoint the cause of the mysterious symptoms and referred him to Cohen Children’s. Weeks of laboratory testing eventually provided a diagnosis: Tyler had a type of myelodysplastic syndrome (MDS), a group of disorders that prevents immature blood cells from reaching full maturity. A lack of fully formed blood cells leaves the body vulnerable to infection, anemia and easy bleeding, according to the National Cancer Institute. MDS can also lead to leukemia.

Opening Doors for Family Donors
Joel Brochstein, MD, pediatric hematologist-oncologist at Cohen Children’s Medical Center, set a challenge for himself: to effectively prevent potentially fatal graft-versus-host disease (GvHD) for children who required stem cell transplants.

Dr. Brochstein had read of promising results at Thomas Jefferson University in Philadelphia in adult leukemia and myelodysplastic syndrome patients who had undergone haploidentical transplants, and now applies that methodology to patients at Cohen Children’s.

“During the past several years, clinical and laboratory scientists have collaborated to develop ways to remove those cells that cause GvHD, making transplants from mismatched family members a very feasible treatment.
In the past, only a stem cell transplant from a perfectly matched donor could have cured Tyler. His hope for a cure via this treatment swiftly faded — no related or unrelated donor whose tissue type matched Tyler’s could be found. Fortunately, his medical team had another option, one that had never before been attempted at Cohen Children’s: a stem cell transplant from a haploidentical (half-matched) donor. The donor would be Tyler’s mother.

Another Way Forward
Previously, haploidentical stem cell transplants weren’t an option for MDS patients because of the risk of severe graft-versus-host disease (GvHD), a condition caused by the mismatched donor cells attacking the patient’s organs, leading to severe diarrhea, skin rash and liver inflammation. If researchers could find a way to minimize the risk of GvHD, the pool of potential donors could expand. Northwell Health scientists did just that. (See “Opening Doors for Family Donors” below.)

Tyler’s prospects appeared brighter with haploidentical stem cell transplantation as an option, but fear of the unknown remained.

“We were so scared, but everyone at Cohen Children’s, especially the Child Life specialists, were so amazing, telling me to keep faith, stay positive,” Ms. Thomas said. “I trusted their expertise. When they drew blood from me for the stem cell transplant, I prayed to God everything would work out.”

On Oct. 29, Tyler received an intravenous infusion of his mother’s stem cells at the Gambino Medical and Science Foundation Bone Marrow Transplantation Unit at Cohen Children’s. A week later, his Cohen Children’s pediatric hematologist-oncologist, Joel Brochstein, MD, started seeing positive effects.

“We saw signs of engraftment [growth of new blood-forming cells], which was very encouraging,” Dr. Brochstein said. “His white blood count normalized, and his platelet count also returned to normal within two weeks.”

Sixteen days after the transplantation, Tyler went home.

Childhood Is Calling
For patients with leukemia or MDS undergoing stem cell transplantation, the future is often bright — they enjoy high survival rates. For Tyler, however, the future can wait because the present is joyful enough. According to his mother, he is focused on his favorite pastimes, including playing video games, and looking forward to learning everything he can next school year — things Tyler and his mother could easily take for granted, if the past year hadn’t shown them how precious those things are.

Cohen Children’s recently became the first hospital to offer this treatment for kids. Visit bit.ly/StemCellsCCMC for more information.

for those patients who lack a fully matched donor,” Dr. Brochstein said. “Haploidentical stem cell transplantation removes the requirement for a perfectly matched donor, allowing us to perform transplants across tissue-type compatibility barriers.”

The most exciting thing about haploidentical stem cell transplantation is its potential to help children with a variety of blood disorders, not just MDS.

“We have an opportunity to treat more children with this innovative approach,” Dr. Brochstein said. “We plan to broaden the use of haploidentical transplantation to include children with nonmalignant, yet serious, blood disorders, such as sickle cell anemia, thalassemia and aplastic anemia.”
Many kids’ cereals contain 3 teaspoons of sugar per serving!

Dessert for Breakfast?

A healthy breakfast is important to balanced nutrition. To fuel up your kids in the morning, don’t put sugar in their gas tanks!

There are about 3 teaspoons of sugar per serving in many cereals marketed to children — and kids rarely eat only the serving amount (typically 1/2 or 3/4 cup). But there are healthy cereals that kids like — unsweetened, toasted whole-grain oats, for example.

To find the best choice, check the Nutrition Facts label. Look for cereal with:

- Fewer than 4 grams of sugar per serving;
- At least 3 grams of fiber per serving; and
- “100 percent whole grain” listed as the first ingredient.

Be wary of misleading claims about cereals that are about as nutritious as a junk-food dessert. If the front of the box says “a good source of fiber,” but the cereal is one-third refined sugar, it’s still not a healthy choice. Also, avoid cereal with faux fruit or “yogurt” clusters that are mainly refined sugar and fat with no nutritional value.

Proper nutrition along with regular physical activity are the keys to overall good health. The Kohl’s Cares Keeping Kids Healthy Program at Cohen Children’s Medical Center promotes healthier lives for youngsters and families throughout our region. Kohl’s has donated more than $4.2 million to Cohen Children’s since 2000 — including its most recent donation of nearly $211,000 to support the program. Visit KohlsHealthyKidsNY.com to learn more.

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NORTHWELL HEALTH HOSPITALS:
COHEN CHILDREN’S MEDICAL CENTER · GLEN COVE · HUNTINGTON · LENOX HILL · LONG ISLAND JEWISH (LIJ) FOREST HILLS · LIJ MEDICAL CENTER · LIJ VALLEY STREAM · NORTH SHORE UNIVERSITY HOSPITAL · NORTHERN WESTCHESTER · PECONIC BAY MEDICAL CENTER · PHELPS MEMORIAL HOSPITAL CENTER · PLAINVIEW · SOUTH OAKS · SOUTHSIDE · STATEN ISLAND UNIVERSITY HOSPITAL · SYOSSET · ZUCKER HILLSIDE AFFILIATES: BOCA RATON REGIONAL HOSPITAL · MAIMONIDES MEDICAL CENTER · NASSAU UNIVERSITY MEDICAL CENTER