

Gerald J. Glasser Brain Tumor Center



Atlantic
Health System
Neuroscience

Inside Look

FALL 2020/WINTER 2021

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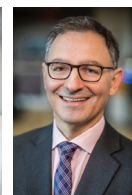
WELCOME

Welcome to the inaugural issue of the Gerald J. Glasser Brain Tumor Center newsletter. Here you will find the latest brain tumor-related news – spanning neurosurgery, neuro-oncology, radiosurgery and clinical trials – from Atlantic Health System and our partners at Altair NeuroSurgery (ANS).

Stay up to date on some of the newest advancements in the field as we continue to develop novel therapies, leverage DNA insights and outcomes-related data to design better treatment plans for our patients ... and redefine what's possible when it comes to best-in-class brain tumor care.



Co-Directors
Robert D. Aiken, MD
Neuro-Oncology



Yaron A. Moshel, MD, PhD
Neurosurgery

The science of medicine...



ABOUT THE GERALD J. GLASSER BRAIN TUMOR CENTER

The Gerald J. Glasser Brain Tumor Center brings the most comprehensive and innovative treatments to benign and malignant tumors of the brain, skull base, spine and spinal cord.

Our team of experts help our patients and their loved ones navigate the journey from diagnosis through treatment. Every patient who visits the center has access to a panel of experts. The group meets regularly during a dedicated Tumor Board Review meeting to create a personalized treatment plan for all patients based on their clinical evaluation.

All this is possible thanks to the generous donation of the Glasser family's founding gift and support.



The power of hope.



- The Gerald J. Glasser Brain Tumor Center – is at the **heart of the Atlantic Neuroscience Institute** at Overlook Medical Center.
- The institute, the flagship of Atlantic Health System's neuroscience program, has been **ranked No. 1** for neurosurgery in NY, NJ, CT and PA, and among the **top 5% of the nation's neuroscience programs** five years in a row.
- We are **nationally recognized as leaders in brain tumor treatment innovation** – which is why developers of cutting-edge solutions pursue us to participate in clinical trials.
- We participate in **clinical trials** we believe can be life-changing for patients worldwide.
- Your treatment may not require surgery. Some tumors are amenable to **CyberKnife® stereotactic radiosurgery** alone.
- If it does – and it's possible – we use cutting-edge **minimally invasive** and image-guided treatment strategies and advanced techniques.

Two New Multidisciplinary Brain Tumor Centers Now Open

Expanding our physical footprint – and extending our patient-centered approach to care – the Gerald J. Glasser Brain Tumor Center has opened two new multidisciplinary centers at Morristown Medical Center and Overlook Medical Center.

Designed to enhance the patient experience, these multidisciplinary centers provide one-stop access to neurosurgeons, neuro-oncologists and radiation oncologists at the same time, in the same location. This coordinated approach delivers convenience for patients – who don't need to travel within a hospital or to other locations to see their specialists – and streamlines collaboration amongst our experts.



Gerald J. Glasser Brain Tumor Center Joins **National Quality Outcomes Registry**

At Glasser, we have always been focused on delivering care that provides the best long-term patient outcomes. We track these outcomes – as well as complication and readmission rates – as part of our own performance and quality improvement program. Through our partnership with Altair Neurosurgery, we are taking our efforts to a national level.

Now, we are one of the few centers in the country to participate in NeuroPoint Alliance's pilot program. NeuroPoint Alliance is a nonprofit organization that transforms data into quality patient care through the collection, analysis and reporting of clinical data.

Together with a small group of university practices, we track and pool outcomes-related data from brain tumor patients and develop data-driven treatment plans. For our patients, this knowledge takes the treatment of brain tumors to the next level.

Main Offices

Overlook Medical Center
Atlantic Neuroscience Institute
99 Beauvoir Avenue, 5th Floor
Summit, NJ

Overlook Medical Center
MAC 2, Suite 180
11 Overlook Road
Summit, NJ

Satellite Office

Morristown Medical Center
The Carol G. Simon Cancer Center
100 Madison Avenue, 3rd Floor
Morristown, NJ

CLINICAL
TRIALS

Investigational clinical trials are at the heart of innovation in brain tumor treatment.

At the Gerald J. Glasser Brain Tumor Center, we have a robust clinical trial research infrastructure in place. As a member of the National Cancer Institute (NCI) Cooperative Group System – and in partnership with several biotech/pharmaceutical companies and the Translational Genomics Research Institute, we offer patients access to groundbreaking, evolving therapies.

Currently, we are developing novel treatments for:

- Low-grade gliomas
- Glioblastoma
- Other high-grade primary brain tumors
- Metastatic brain tumors
- Tumors that cause malignant cells to spread to the fluid surrounding the brain and spinal cord.

To treat these challenging tumors, we are focusing on immunotherapies, CAR-T strategies, oncolytic tumor viruses and other targeted therapies.

If you're interested in learning more about specific clinical trials that are underway and enrollment, please contact 908-522-5768.

CYBERKNIFE®:

Yesterday, Today and Tomorrow

When the CyberKnife radiosurgery program opened at Overlook Medical Center in 2004, it was considered a novel technological advancement that still needed to prove itself in the treatment of brain cancer.

Today, our center is the largest CyberKnife program in New Jersey. CyberKnife offers a non-invasive treatment that has improved the quality of life for thousands of patients. In addition to treating metastatic disease to the brain, CyberKnife has had positive results in the treatment of recurrent

glioma, – particularly in patients with glioblastoma, a difficult malignancy to treat. It also treats complex skull base lesions that envelop the optic nerves and encase the carotid arteries that would otherwise be surgically inaccessible.

As we look towards the future, we see an increasing role for radiosurgery in battling brain metastases. We are now exploring the role of pre-operative radiosurgery in the treatment of metastatic disease to help minimize risks and tumor recurrence after surgery.



Just like its futuristic design, the CyberKnife machine increasingly delivers state-of-the-art treatments. Drs. Joana Emmolo and Yaron Moshel are part of the team exploring new ways it can be used.

* NEW CLINICAL TRIAL *

NRG-BN007 (MGMT-Unmethylated Glioblastoma): Testing the Use of the Immunotherapy Drugs Ipilimumab and Nivolumab Plus Radiation Therapy Compared to the Usual Treatment (Temozolomide and Radiation Therapy) for Newly Diagnosed MGMT Unmethylated Glioblastoma
ENROLLING NOW

MEET MARK BOYLAND

Mark Boyland returned to his hobbies – white water sports – just seven weeks after brain surgery to remove a skull base tumor.

From Brain Tumor-Induced Seizures to White Water Sports in Seven Weeks

Like most people, Mark Boyland said, “I don’t have time for this,” when he first learned he had a brain tumor at the base of his skull. With a high-powered legal career, an active family and hobbies like waterskiing and paddle boarding, it was hard to imagine slowing down. Unfortunately, he began experiencing seizures that caused him to slur his words and have weakness on one side of the body – making it clear that receiving care couldn’t wait.

“I knew I needed to see a brain surgeon, and I quickly learned there are as many kinds of brain surgeons as there are lawyers, each of them specializing in treating different parts of the brain,” says Mark.

Mark’s first call was to Ronald Benitez, MD, a neurosurgeon at Altair Neurosurgery, whom he knew personally. Dr. Benitez then connected Mark with his colleague Yaron A. Moshel, MD, PhD, co-director of the Gerald J. Glasser Brain Tumor Center.

“Dr. Moshel was not only incredibly knowledgeable, but also very empathetic,” explains Mark. “Still, I made it a point to get second opinions from some of the big-name hospitals in New York City. That’s what everyone’s told to do when they get news like this, so I did my rounds in Manhattan.”

Ultimately choosing the team at Glasser, Mark sat down with Dr. Moshel, who walked him through various approaches to skull base surgery. A week later, Dr. Moshel performed an anterior skull base craniotomy to access otherwise hard-to-reach areas of the brain while minimizing disturbance to healthy tissue. The tumor, which was partly wrapped around the optic and olfactory nerves, was successfully removed.

Following a four-day hospital stay and a surprisingly short recovery, Mark was ready to spring back into action. He was cleared by occupational therapy and physical therapy on day one and returned to work just four weeks later. He was in such great mental and physical shape after the operation – which he credits in large part to Dr. Moshel’s skill – that he picked up skateboard land-paddling and surf-skiing just seven weeks after surgery and was back in the ocean in no time.

“The personalized care I received at the Gerald J. Glasser Brain Tumor Center was simply outstanding,” adds Mark. “I wouldn’t be where I am today without it.”

MOLECULAR TESTING GUIDES PRECISE TREATMENT OPTIONS

There is a commonly shared maxim in oncology: “The tissue is the issue.”

For decades, examining a biopsy under the microscope is where the diagnosis of a brain tumor began ... and ended. However – since different tumors often appear to be alike under the microscope – the precise diagnosis was often questionable, leaving doctors and patients unsettled.

Today’s current approach goes much further thanks to molecular testing. Molecular testing checks for certain genes, proteins and other molecules in a sample of tissue and detects changes in genes and chromosomes that may cause or affect a specific disease such as cancer.

After surgery, each patient treated at the Gerald J. Glasser Brain Tumor Center has his/her tumor tissue sent for detailed molecular screening. Using targeted next-generation sequencing, the tumor is tested for mutations and rearrangements involving 219 genes associated with tumors of the central nervous system. The results of the molecular testing provide information about the tumor’s history, how aggressive it may behave and how it may respond to therapy. They may also provide targets for further treatment.

While technical, these examples show the importance of molecular testing:

- Consider the IDH (Isocitrate Dehydrogenase) gene. A mutated IDH result in a patient with glioblastoma indicates this tumor is a secondary glioblastoma that arose from a lower-grade tumor over time. Conversely, a “wild type” (non-mutated) IDH indicates the tumor began as a glioblastoma with a less promising overall prognosis. This distinction is critically important because of the implication it has on tumor behavior and overall prognosis.
- For patients on alkylating chemotherapies – the oldest type of chemo that damages the DNA of cancer cells to keep them from making more copies of themselves – knowing the difference between MGMT (Methylguanine-DNA Methyltransferase) methylated and unmethylated tumors can shed light on how the tumor will respond to treatment. MGMT methylated tumor cells have less of an ability to “undo” the damage caused by alkylating chemotherapies and, therefore, respond better to these treatments.

New treatments for brain tumors are being proposed every year. A common approach in developing new treatments is to use a drug that targets a specific mutation found in a subset of tumors. Each patient’s personalized molecular report helps determine which of these potential cutting-edge therapies may generate positive outcomes.

Since the typical molecular report is comprehensive, mutations that do not yet have treatments may be seen. This intelligence is critically important as future studies may tell us more about the mutation’s significance, and new drugs that focus on that mutation may become available.

Molecular reports drive our understanding of tumor behavior and treatment. They enable us to treat each individual patient’s signs and symptoms using their molecular results as a guide.



Meet Our Team

Working together to make the inoperable, conquerable

Co-Directors

Robert D. Aiken, MD – Neuro-Oncology

Yaron A. Moshel, MD, PhD – Neurosurgery

Joana S. Emmolo, MD – Radiation Oncology

Nicholas R. Metrus, MD – Neuro-Oncology

Fabio A. Frisoli, MD – Neurosurgery

Byung-Han “Andrew” Rhieu, MD – Radiation Oncology

JP Bouffard, MD – Neuropathology

Brian D. Beyerl, MD – Neurosurgery & Integrative Care

Elizabeth Gold, APN – Neurosurgery

Patricia Eagan, RN – Neuro-Oncology

Jacqueline Chapkowski, RN – Neurosurgery

Angela Davis, APN – Neuro-Oncology

Janet LeMonnier, LSW, MSW – Social Work & Care Navigator

Patrice Light, RN – Research and Clinical Trials

Fabio A. Frisoli, MD



Dedicated to the art of neurosurgery and patient care, Dr. Fabio A. Frisoli – a neurosurgeon with Altair Neurosurgery – has joined the Glasser Brain Tumor Center team.

Dr. Frisoli received his undergraduate degree from Georgetown University and his medical degree from the University of Pennsylvania's Perelman School of Medicine. There, he earned the Judi Marvel Charities Upperclassman Research Award from the Children's Hospital of Pennsylvania.

Dr. Frisoli completed his residency in the Department of Neurosurgery at New York University School of Medicine and his fellowship in brain tumor and skull base surgery at Barrow Neurological Institute.

Byung-Han “Andrew” Rhieu, MD



Committed to the highest standards of compassionate patient care, Dr. Byung-Han “Andrew” Rhieu, a radiation oncologist, has joined Glasser's CyberKnife radiosurgery program, the largest of its kind in the Tri-State Area.

Dr. Rhieu received his undergraduate degree from University of Washington and his medical degree from the University of Pittsburgh School of Medicine. He completed his residency at the Johns Hopkins Hospital, where he received extensive training in the multidisciplinary management of brain and spine tumors and utilization of the CyberKnife radiosurgery system.

Our Newest Members

Janet LeMonnier, MSW, LSW



Driven by a passion for supporting patients and family members facing chronic or life-limiting illnesses, Janet LeMonnier is a licensed medical social worker who helps patients navigate every step of their journey.

With more than 20 years of experience, she focuses on raising awareness of vital mental health and life-planning issues. She provides social support services and guides individuals and families, empowering them to make informed choices that enhance their quality of life.



OVERLOOK FOUNDATION

**"We are grateful for each and every day.
As we have become more conscious of living in
the present, it has also made us more cognizant
of what is required for the future."**

– Michael Azares

The Gerald J. Glasser Brain Tumor Center is made possible because of this inspiration and vision. Patients and families often ask how they can support it and help make a difference in the lives of others.

To date, more than \$4 million has been raised to provide a state-of-the-art – and state-of-the-heart – comprehensive program for any patient in need of diagnosis, treatment and support. Gifts large and small enable advances in research, access to the world's best technology, world-class leadership and compassionate programming that supports patients and their families through a very difficult time in their lives.

Every gift matters.

If you are interested in making a gift ... honor a loved one or a caregiver... or raise funds in your community to support our program, please contact Lorie McDonald, director of Strategic Development at the Overlook Foundation at 908-522-2855 or lorie.mcdonald@atlantichhealth.org.

The Center for Hope Foundation

At the Center for Hope Foundation, we believe in the **power of hope**.

Our caring environment brings patients and caregivers together to relax, talk, listen, share, laugh – and learn. Once a month, patients, family members and professionals – including nutritionists, neurosurgeons, oncologists, acupuncturists, financial resource planners, social workers and massage therapists – meet to discuss the challenges and successes of living with a brain tumor. We provide a supportive place where the compassion, education and community that are critical to maintaining hope in the face of a difficult diagnosis abound. A guest speaker or special activity brings each member hope. These meetings are open to all community members.

For information about The Center for Hope Foundation – or to attend a meeting – please contact the Foundation at 908-522-5914 or visit overlookfoundation.org.

Gerald J. Glasser Brain Tumor Center

