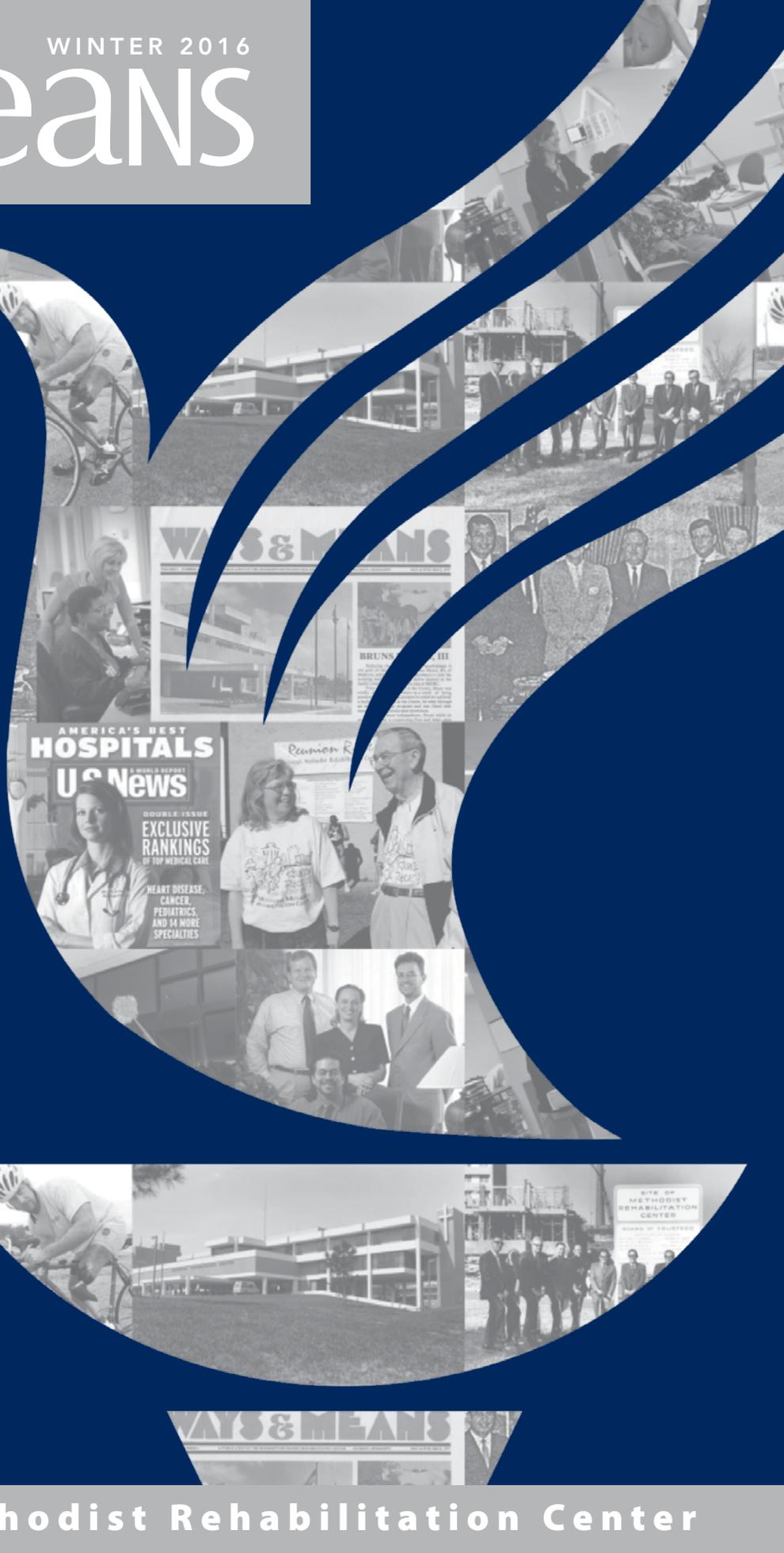


WINTER 2016

# WAYS AND MEANS

**40  
YEARS  
OF RESTORING  
ABILITY  
AND HOPE**



A Publication of Methodist Rehabilitation Center



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**40 YEARS**

Ways & Means launched in 1977 (check out our first issue at left)—just one highlight of MRC’s four decades of innovation and accomplishment.



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**THE RIGHT PLACE**

Experiencing unexplained symptoms after a car wreck, Alexa Cacibauda turned to MRC for answers—and found them.



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**BRIANNA RIDES AGAIN**

Surviving a brain-injuring fall from a horse, Brianna May’s recovery amazes family, caregivers and celebrities alike.



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**STRONGER MUSCLES, STRONGER FAITH**

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Mark A. Adams - **President and Chief Executive Officer**, Methodist Rehabilitation Center

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Methodist Rehabilitation Center provides comprehensive medical rehabilitation programs for people with spinal cord and brain injuries, stroke and other neurological and orthopedic disorders. The 124-bed state-of-the-art hospital in Jackson has twice been designated a Traumatic Brain Injury (TBI) Model System site by the National Institute on Disability and Rehabilitation Research and is also the only hospital in Mississippi twice named one of America’s best by U.S. News & World Report.

**Mission Statement** | In response to the love of God, Methodist Rehabilitation Center is dedicated to the restoration and enhancement of the lives of those we serve. We are committed to excellence and leadership in the delivery of comprehensive services.

# The Challenge

It was the year the Vietnam War ended and the United States and Soviet Union began a joint mission in space.

Ali beat Frazier in the boxing ring and Beta-max took on VHS in video stores.

The movie *Jaws* raked in record cash at the box office and New York City got a government bail-out to avoid bankruptcy.

In 1975, times were a-changing, and never more so than for Mississippians living with disabilities.

When Methodist Rehabilitation Center opened on the campus of the University of Mississippi Medical Center in May of that year, people recovering from strokes, brain and spinal cord injuries finally had in-state access to the expert care they needed.

Among our first patients was Lamar Myers, who you'll read about beginning on page 42. Like many from that time, his life had been put on hold by a paralyzing spinal cord injury. And with our help, he was able to become independent again.

"MRC promised me a new life and they came through," he said. And 40 years later, we're still helping patients regain ability and hope after life-changing injuries or illness.

In this issue, you'll read about a young father and businessman who gained the motivation and skills to return to his family and career after a disabling stroke. An adventure seeker who now goes wake-boarding with the aid of a custom-designed prosthetic leg. And a horse-loving country girl whose rapid recovery after a near-fatal brain injury was the talk of the therapy gym.

It's all made possible by the people, partnerships and projects that have helped us flourish. And as we celebrate our 40th anniversary, we want to express our gratitude to the health care, government, business and church leaders who pushed to bring top-notch physical medicine and rehabilitation services to Mississippi and the dedicated board members and staff who've continued that mission.

On our 25th anniversary, our founding chairman gave us a challenge. "Let us move forward toward the next 25 years with the same vision, mission, enthusiasm and compassion that has brought us this far," said the late Earl R. Wilson.

Today, I think Earl would be proud of our progress, particularly all the firsts listed on pages 48-49. And I look forward to a future where our expertise continues to change lives for the better.

As Earl used to say: "There are no limits."



At left, Mark Adams in 1989. At right, Adams today.

**Mark A. Adams**  
President and Chief Executive Officer  
Methodist Rehabilitation Center

# News Briefs



Dr. Stuart A. Yablon

## Welcome back, Dr. Yablon

Dr. Stuart A. Yablon of Madison has rejoined the staff of Methodist Rehab as medical director for the brain injury program. He is board certified in brain injury medicine and physical medicine and rehabilitation and was project medical director of the National Institute on Disability and Rehabilitation Research Traumatic Brain Injury Model System of Mississippi from 1998 to 2007.

Dr. Yablon received his doctor of medicine degree from the University of Texas Medical Branch at Galveston. He completed his residency training with the Department of PM&R at the University of Medicine and Dentistry of New Jersey/New Jersey School of Medicine, where he served as academic chief resident. He then completed a two-year Rehabilitation Research Center Development Fellowship at Baylor College of Medicine and the brain injury program at The Institute for Rehabilitation and

Research (TIRR) in Houston, Texas, specializing in brain injury rehabilitation.

Dr. Yablon has more than 20 years of experience as a clinician, investigator and educator in brain injury rehabilitation, with particular interest in the evaluation and treatment of individuals with syndromes of impaired consciousness following acquired brain injury. Dr. Yablon was an invited participant in the Aspen Neurobehavioral Conference Workgroup, which proposed the diagnostic criteria for the minimally conscious state.

He has served as a principal or senior investigator on numerous studies involving pharmacologic therapies for TBI rehabilitation and neuromedical complications of acquired brain injury. Dr. Yablon is an author of 75 peer-reviewed articles that have been published in scientific journals. He is on the editorial board for the journal *PM&R*, and

is an ad hoc reviewer for a number of scientific journals, including *Neurology*, *Neurorehabilitation and Neural Repair*, *Archives of Physical Medicine and Rehabilitation* and *Brain Injury and Clinical Neurophysiology*. He has given numerous invited presentations at North American and international medical conferences.

## Alliance brings urology services to MRC

In January, University of Mississippi Medical Center urologist Clint Collins began seeing patients at Methodist Rehab's hospital-based outpatient clinic, thanks in part to a recent affiliation agreement between the two health care facilities.

"The alliance encourages us to share expertise, and Dr. Collins' specialty definitely suits the needs of our patient population," said Dr. Sam Grissom,

Shameka Price of Sardis travels over two hours to benefit from urology services now being offered at Methodist Rehab by Dr. Clint Collins, a board certified urologist at the University of Mississippi Medical Center.



medical director at MRC.

“Bladder problems are prevalent among people with spinal cord injuries and can lead to life threatening complications. So it’s beneficial for our patients to have easy access to a board-certified urologist like Dr. Collins.”

People with spinal cord injuries often don’t visit urologists until they’ve experienced a urinary tract infection, but Dr. Collins says he recommends an annual check-up for SCI patients.

“I recommend looking in the bladder with a scope periodically, especially when patients are having frequent infections,” Dr. Collins said. “I need to make sure patients don’t have stones in their kidneys or bladder, as these stones can trap bacteria and lead to recurrent infections. I check for signs of increased pressure to the kidney, usually with a kidney ultrasound, and follow up with patients regarding how their bladder management is working with their lifestyle.”

“Quality of life is important, and while I cannot wave a magic wand and make everything work again, we can often help significantly using various management and treatment strategies.”

### Physical therapists earn neurology certification

Methodist Rehab physical therapists Ann Howard, Megan Glorioso and Kathleen Dobbs were recently certified as clinical specialists in neurology (NCS) by the American Board of Physical Therapy Specialties (ABPTS).

ABPTS certifies individuals who have demonstrated advanced clinical knowledge and skills in physical therapy specialty areas.



Certified as clinical specialists in neurology are MRC physical therapists from left, Kathleen Dobbs, Meagan Glorioso and Ann Howard.

MRC employs five of the 13 physical therapists in Mississippi with the NCS certification, including Lisa Indest and Boon Ong.

### Bye-bye markers, hello efficiency

Maybe someone actually longs for the scent of dry erase markers. Otherwise, staff is more than happy with a recent update of Methodist Rehab’s patient scheduling system.

Hand-lettered, dry erase boards have been replaced by high-tech video monitors in the therapy gyms and nursing stations, allowing real-time monitoring of each patient’s comings and goings.

“When a new appointment is scheduled or when a change is made, the system refreshes every 45 seconds and employees can see those updates on the wall monitors or on computers,” said Suzy Gonzalez, MRC’s director of inpatient services. “It enables us to better manage the scheduling of our busy inpatient operations and maximize the

use of therapists. It makes our entire operation much more efficient.”

Four “super users”—Gonzales, Bridgett Pelts, Misty Ferguson and Kathleen Dobbs—designed the system. And it took a month of training and data entry to set up the screens, color-coding and other features.

“The entire staff has done an amazing job learning and adapting to the system,” Gonzalez said. “And feedback from everyone, including patients, has been overwhelmingly positive.”

### MRC offers proven treatment for scoliosis

Methodist Rehab has begun offering Schroth therapy, a proven non-surgical treatment for scoliosis, at its Madison-Ridgeland clinic.

Schroth therapy is appropriate for patients with scoliosis of all ages at all stages of treatment (before and after surgery, and especially if no surgery is indicated).

To make an appointment, please call 601-856-5493.

# Employees of the YEAR

## Carlene BASS Support Services



“You’re everybody’s assistant.”

That’s how Carlene Bass describes the job of unit clerk, and her supervisor Lauren Dukes says Bass has the moxie to manage the role.

“To be able to do the unit clerk position, you have to be extremely organized and extremely focused,” said Dukes, nurse manager for Methodist Rehab’s brain injury program. “She’s basically my right-hand person. She keeps me in order.”

While her hard work earned Bass recognition as MRC’s Support Services Employee of the Year, a bit of genetic predisposition might have played a role, as well.

In 2012, her mother Charlene Taylor also earned Support Services Employee of the Year for her work as a MRC rehab tech. And her sisters Priscilla Gill and Melissa Burkes have both been unit clerks for the hospital.

Taylor joined MRC when it opened in 1975, so Bass has plenty of fond childhood memories of her mother’s workplace. **“I used to go to the company picnics when I was little,” she said. “I love MRC.”**

Bass joined the housekeeping staff in 2002 for about a year, then returned in 2006 to become a rehab tech.

“I miss being a tech because you really get to be hands-on with people,” she said. So when she has a break in her unit clerk duties, she still helps out with patients.

Of course, breaks are few and far between when you’re headquartered at MRC’s 5th floor nurse’s station—ground zero for a busy brain injury program.

“You have to be able to multitask,” said Bass, who answers the telephone, responds to patient call buttons, transcribes doctor’s orders and manages scheduling.

While she juggles the workplace with aplomb, Bass admits she didn’t have her scheduling nailed down the night of Methodist Rehab’s annual Employee Recognition Dinner. So she almost missed her big moment.

“The day was so crazy, I was not going,” she said. But her family convinced her “better late than never” and Bass made it in time to hear her name called.

“I was really surprised,” she said. “I called my mom and said: What if I had not come? That would look terrible.”

Several perks come with Employee of the Year, including a monetary gift and a nearby parking space. And Bass says they’re just icing on the cake when you consider how much she loves her job.

“Every day I feel rewarded,” she said. “We have a good team.”

### Conitra WALL Clinical Services



At age 12, a bum ticker got Conitra Wall interested in a career in health care.

She had two surgeries to correct a racing heart. And for a while, she thought she would become a cardiologist. "But I went to a medical convention recommended by my high school chemistry teacher. And instead of following a doctor, I ended up following a nurse at a children's hospital."

As she watched the nurse do her best to cheer up a Down syndrome child who was confined to an isolation room, Wall saw what she would miss by being a physician.

"I realized nurses have more time than doctors to get to know the patients personally. That's what set my heart on nursing."

Today, Wall hasn't lost that desire to connect. And it's one of many reasons she was chosen as Clinical Employee of the Year at Methodist Rehab.

**"Her ultimate goal is to be the best she can be in the field and to give back to the nursing profession,"**

said Lauren Dukes, nurse manager for MRC's brain injury program and Wall's supervisor. "And that's reflected in her caring and compassionate attitude toward staff and her patients."

After receiving her registered nursing degree from the University of Southern Mississippi in 2009, Wall first worked for MRC's stroke program. She liked seeing her stroke patients overcome their injuries and become more independent. But when a shift manager position opened on the brain injury floor, she decided it was time for a new challenge.

"I was nervous," she admits. "Brain injury is so different. How to manage behavioral issues was a scary thing for me. But when I became more comfortable, it became the highlight of my day. It was exciting to see patients progress from being combative and out of control to becoming calmer and getting their cognition back."

In 2011, Wall became a Certified Rehabilitation Registered Nurse. The accreditation, which is awarded by the certification board of the Association of Rehabilitation Nurses, recognizes registered nurses who have qualified for and passed an exam that tests their specialized knowledge in rehabilitation nursing.

Wall's latest project is pursuing a doctorate in Nursing Health and Administration at the University of Mississippi Medical Center. It makes for some long days, and Wall is adding another challenge to the mix. She and her husband, Willie, are expecting their first child in January.

Wall said she was surprised to be named an employee of the year. And she's grateful for the monetary rewards that come with the honor. "School is expensive," she said. But she's even more gratified to get the recognition. "It felt really rewarding to know I actually do a pretty good job," she said.

### Ronda NICHOLS Specialty Care



When licensed practical nurse Ronda Nichols started her career at Methodist Specialty Care Center, she sensed she had found her calling.

Eight years later, she's sure of it.

"I love it," she says of her role at Mississippi's only residential care facility to serve younger people with severe disabilities. "A lot goes into their day-to-day care; it's not only giving medications and treatments. Many can't do anything for themselves, so we get to be their hands and feet."

Nichols' giving nature helped her earn Employee of the Year and she said she was shocked to hear her name called out.

But Libby Lampley, director of nursing for MSCC, said Nichols definitely deserved the honor.

"Ronda is a very hard worker," Lampley said. "She genuinely cares about the residents and does whatever she can to meet their needs. She is a dedicated member of the MSCC clinical team and never fails to cover extra shifts when needed. She does this to ensure the residents' needs are met."

Ronda said she worked in a hospital for 10 years even before becoming an LPN. "I was a unit hostess at Central Mississippi Medical Center and then transferred to central supply," she said.

But nursing school kept beckoning, so the mother of three took the leap and has never looked back.

"It has been a dream of mine since I can remember," she said. **"I've always been interested in health and science. And I've always loved taking care of people."**

Nichols has had to learn a lot to serve MSCC's special population, but she believes she's found her niche caring for people with quadriplegia and other disabling conditions.

"I love seeing what modern technology has done to help whatever disability they have," she said. "They can use devices to turn on their call lights or watch TV or answer their phone."

As Ronda has become more specialized in her nursing care, residents have come to respect her expertise.

"They mostly take my advice," she says with a laugh.

But even when they don't, they know she has their best interest at heart.

"They become like family," she said. "And you want them to be happy at the end of the day."

# WANT TO WORK FOR MRC?

As our three employees of the year can attest, Methodist Rehabilitation Center is a great place to work. We offer competitive salary and benefits, and often offer sign-on bonuses for nursing positions. You can view our current open positions and download an application on our web site at

[www.methodistonline.org/career-opportunities](http://www.methodistonline.org/career-opportunities)



## Now I can...

### get back on board

After losing his right foot in an on-the-job accident, Brandon Vickers of Sturgis thought his summer pastime of wake boarding might be left high and dry.

Not so, thanks to a special waterproof prosthesis he wears that was customized by Methodist Orthotics & Prosthetics.

The Flowood clinic has the expertise, tools and technology to build whatever patients may need. So staff clinicians ask patients about which hobbies and interests they would like to get back to doing.

Now Brandon's back on the water where he belongs, doing what he loves.

"I don't like being inside just cooped up," he said. "I've always been an outdoors kind of person—I like to hunt and fish, all types of sports."

# Now we can... return to school

Quest's back-to-school patients and their proud therapists are, from left: Burnell Jackson, therapy manager and occupational therapist Julie Walker, Kanarius Harris, clinical psychologist Danny Burgess, Tony Bates, occupational therapist Allison Harris, Nikosha Anderson, physical therapist Erin Perry and Stevelyn Robinson.

Quest is Methodist Rehab's comprehensive outpatient program for people with brain or spinal injuries who wish to make a successful return to work, school or home life.

Recently five young SCI patients have done just that, going back to school to further their education.

Burnell Jackson of Hazlehurst is taking GED classes at Copiah-Lincoln Community College, and plans to enroll in college after earning his diploma.

Kanarius Harris of Mound Bayou and Nikosha Anderson of Jackson both attend Hinds Community College. Kanarius wants to coach and teach, while Nikosha is majoring in psychology.

Tony Bates of Wesson is pursuing a degree in health informatics and information management at the University of Mississippi Medical Center School of Medicine.

Stevelyn Robinson of Winona has begun classes at Holmes Community College, where he is majoring in business administration.





## Now I can... take it to the limit

George Mallory famously said he climbed Mount Everest “because it’s there.” It’s a sentiment John Adam Long of Louisville echoes when asked why he became a triathlete: “Because I can,” he said.

Paralyzed in a 2010 car accident, Long sees sports as a way to push himself to his limits while staying in shape and inspiring his family.

“I told my wife when I was in ICU after my accident that I was going to do a triathlon and she thought I was crazy,” Long said. “I have two young boys and I want them to see their dad as more than a guy in a wheelchair.”

MRC’s therapeutic recreation program director Ginny Boydston has helped connect Long with the resources and equipment necessary for the event. Now he has three half Ironman and 10 Olympic distance triathlons under his belt, an incredible accomplishment for a quadriplegic.

“Ginny has helped me a lot,” Long said. “I rode my first hand cycle at Methodist.”



MRC volunteer pastor Almetea Taylor baptizes Methodist Specialty Care Center resident Charles Ball in the therapy pool at Methodist Outpatient Rehabilitation.

## God's instruments

Volunteer pastors enrich lives of MSCC residents

By Carey Miller

**B**aptism is a sacrament and rite of passage for many people of faith.

But for Charles Ball, a Baptist, his chosen denomination's doctrine of full immersion presented a challenge.

"I had made up my mind to get baptized before I came here," said Ball, 36, who recently became a resident of Methodist Speciality Care Center, a

long-term care facility for people with severe disabilities. "But we never could figure out how to go about doing it until recently."

Ball cannot use his hands and relies on a power wheelchair for mobility, so getting into a baptismal font seemed difficult, even dangerous.

As part of its extensive volunteer program, MSCC features a volunteer ministry to see to the spiritual needs

of residents. In addition to one-on-one counseling, its dedicated volunteer pastors lead weekly worship services at the center.

Almetea Taylor of Jackson, who is also a minister at the Greater Bethlehem Temple Apostolic Faith Church, presides over Sunday services.

"Normally when I finish ministering, I ask everyone if they have any questions or anything I might be able to

help them with," Taylor said. "With all the power that God gives me, whatever I can do to meet their needs and help them I will certainly do."

When Ball inquired about baptism, she made it her mission to find a way to help.

"I told her that Sunday at church and that Friday I got baptized," Ball said.

"I asked volunteer director Robby Scucchi if Methodist had any facilities that could accommodate a baptism," Taylor said. "He said they didn't, but then he thought of the pool."

Next door to MSCC, one of MRC's outpatient facilities houses a therapy pool designed to accommodate people with disabilities. It features a motorized chair that safely lowers patients into the water, which was the answer to their prayers.

"Everything went smooth—I thought it was going to be kind of difficult," Ball said. "The chair was a big help."

"Now, if anyone else so wishes to be baptized, we can perform them on Friday afternoons," Taylor said. "God used Mr. Ball to get the ball rolling!"

Ball says in his short time as a resident he's been impressed with the dedication of MSCC's staff and volunteers.

"They do their best to help you reach the goals you want to accomplish," he said, adding that he has been taking an online course in airline dispatching through Flamingo Air Academy. "I'll be finished in October. They've helped me achieve that."

Danny Gilmore, 35, echoes Ball's sentiments. He has also been a resident at MSCC for less than a year, but he already feels at home.

"When I first came here I automatically knew I was home and in the right place," Gilmore said. "They go out of their way for us and all our needs."

One of those needs was wedding bells—Gilmore said his now wife Annie had proposed marriage to him not long after he came to MSCC, three years after the car accident that changed his life.

"We've been together for 17 years," Gilmore said. The couple has four children together, ranging in age from 5 to 15. "Back then I wasn't ready, but a lot of times it takes something like this to happen before you realize what the Lord is trying to tell you."

They were planning to get married on Danny's birthday, which was fast approaching.

"We were just going to go to the justice of the peace, but Robby and them were like, 'We'd love for you to do it here,'" Gilmore said. "I was stunned."

Alan Kolodny, pastor of New Beginnings Community Church in Natchez, performs Thursday services at MSCC and was glad to volunteer his time to officiate the wedding.

"He's a great pastor," Gilmore said.

"He likes to have fun with us. He has a great spirit."

MSCC's dining area was decorated and transformed by staff into a chapel and reception hall.

"With the Lord's help everyone made it happen in such a short time," Gilmore said.

Kolodny says that he has also performed two baptisms at MSCC himself, but they required less preparation.

"I'm Presbyterian, so we just sprinkle the water," he said.

Kolodny, who suffers from a rare liver disease and relies on a wheelchair for mobility, has volunteered at the center for over a decade.

"So many of their residents just need someone to be there for them," Kolodny said. "To have a regular pastor makes a big difference. I've known some of them for years. They're like family. And since I'm limited in my mobility as well, I fit in!"

To find out more about volunteering at Methodist Rehabilitation Center, call 601-420-7769 or email [rscucchi@mrc rehab.org](mailto:rscucchi@mrc rehab.org).



MRC volunteer pastor Alan Kolodny signs the marriage certificate as newlyweds Annie and Danny Gilmore look on.

# ask our EXPERTS

## SPORTS MEDICINE

with Dr. Philip Blount

Dr. Blount leads the team at Methodist Pain & Spine Center in Flowood. He is board certified in Physical Medicine and Rehabilitation, Sports Medicine and Electrodiagnostic Medicine. A Jackson native and a graduate of the University of Mississippi Medical Center, Dr. Blount completed his PM&R residency training at the Carolinas Medical Center and a Musculoskeletal Medicine Fellowship at the Mayo Clinic. We asked Dr. Blount about how he applies his sports medicine expertise in his practice.



### How would you define sports medicine?

Sports medicine is a popular buzzword nowadays. Technically, it is a branch of medicine that deals with physical fitness and the treatment/prevention of injuries related to sports and exercise. I have the sports medicine subspecialty from my training in physical medicine and rehabilitation.

### Is it only for serious, competitive athletes?

Certainly not. Sports medicine principles are frequently utilized for treating children, recreational athletes, mature fitness-minded participants and even injured workers. Many of my patients are involved in noncompetitive year-round sports or jobs that result in acute musculoskeletal injuries or chronic overuse symptoms. Some of our outdoor enthusiasts, hunters, fisherman and boaters, for example, can benefit from sports medicine principles that deal with environmental exposures and risks, and bites and stings.

### What are its goals?

I practice sports medicine from a rehabilitation foundation. In rehab medicine, we try to maximize people's function. In sports medicine, we try to optimize people's performance. Both are very goal-specific. After setting a specific goal, patients or athletes are placed in a rehabilitation program to either remain at or improve their level of performance.

### Why see a sports medicine specialist?

Many medical sub-specialties use pain control as the primary medical goal. Sports medicine specialists try not only

to control pain but also rehabilitate patients fully. In my approach, I like to use a baseball diamond analogy. Proper diagnosis is how to get to first base. Pain control and normal range of motion are how we get to second base. Restrengthening and reconditioning in a supervised setting gets us to third base. In order to score a run and pass home plate, we need to have the patient or athlete returning safely to a prior or higher level of function and performance.

### What are some of the common injury types you treat?

The most common sports injuries are musculoskeletal. These might be simple things like muscle strains or ligament sprains. It could be anywhere: the neck or shoulder; elbow, hand or wrist; lower back or hip; knee, foot or ankle. What a lot of people don't realize about sports medicine is that we address other medical conditions, such as pulmonary issues, gastrointestinal issues, gynecological issues and nutrition and training issues.

### What are some of your methods of treatment?

I use the PRICE principle. It stands for protection, rest, ice, compression and elevation. This is a tried-and-true formula for these types of musculoskeletal injuries. It's amazing how well it works, but unfortunate how infrequently it's used. I see a lot of work-related injuries—basically sports injuries—that have been treated with medications that are not shown to be helpful, with very little emphasis on some of the sports medicine principles that I utilize. For some injuries, it's best not to sit out. We can employ cross-training—exercising different

muscles than those injured or using a different sport that can be done safely. It keeps the individual active and allows the injury time to heal without the disadvantage of deconditioning.

### What role does prevention play?

It's always more fun to play than sit out with an injury. There are a lot of strategies we employ to prevent re-injury or future injuries. First and foremost, a proper level of fitness should be reached before participation. There is also advice on equipment, gear use and fit that is important. Examples include proper footwear for runners and hikers, proper grips for tennis players and golfers, proper size and components for cycling activities and obviously protective gear for team sports. It's fascinating to see the advances in equipment and technology and how that can impact not only injury prevention, but also sports rehab treatment. We're always learning and evolving as a field in order to keep people performing at their best.

### Sports medicine is one of the fastest-growing fields of medicine today—why do you think that is?

Our field of knowledge has grown exponentially over the past 20 years. Take concussion and training techniques, for example. There are constant advances in equipment and technology that improve performance and safety. I think the more knowledge that is acquired and the more we work together with other professionals, the practice will grow ever larger. The other thing is that the number of participants in sports and physical activity is ever increasing. More and more young people are getting involved in sports at earlier ages, and more and more adults are discovering the benefits of exercise for a

healthy lifestyle.

### What are the benefits of an active lifestyle?

There are almost too many benefits to count. Obvious changes to body composition and muscle and bone health are the first things to come to mind. Proper exercise and physical activity, however, have also been shown to lengthen your life expectancy. Proper exercise selection and adherence have been shown to improve sleep, help control blood pressure and type II diabetes, improve HDL cholesterol and even improve mood and treat depression. Exercise when prescribed appropriately is a very potent medicine and can be individualized to meet anyone's specific needs and goals.

### What sets your practice apart?

Here at Methodist Rehabilitation's East Campus, our staff works together in an interdisciplinary approach. We have interventional pain management capacity as well as non-interventional pain management physicians. Our therapists are trained in modern sports medicine taping techniques, modality and rehabilitative strategies. We also have assistive technology and orthotics and bracing to use when needed.

### How can someone make an appointment with you?

Just contact our office at **601-936-8801**. We cater to the individual's needs—if someone would like a personalized exercise prescription or to learn about injury prevention, I'd be happy to set up an office interview for that. We also accommodate emergency appointments if there are sports injuries or acute problems that need to be seen to quickly.

# O&P IS OPEN IN OXFORD

**Methodist Orthotics & Prosthetics** has expanded to serve the people of northeast Mississippi with the opening of our newest clinic in **Oxford**.

We offer a full range of orthotic and prosthetic services. We custom fit and fabricate artificial limbs, orthopedic braces, diabetic shoes, sports braces and more.

To learn more about Methodist O&P, or any of our other clinics, visit [www.methodistoandp.org](http://www.methodistoandp.org) or call our toll free number at **866-306-9933**. We also have locations in **Flowood, Meridian, Hattiesburg, Cleveland** and **Monroe, La.**

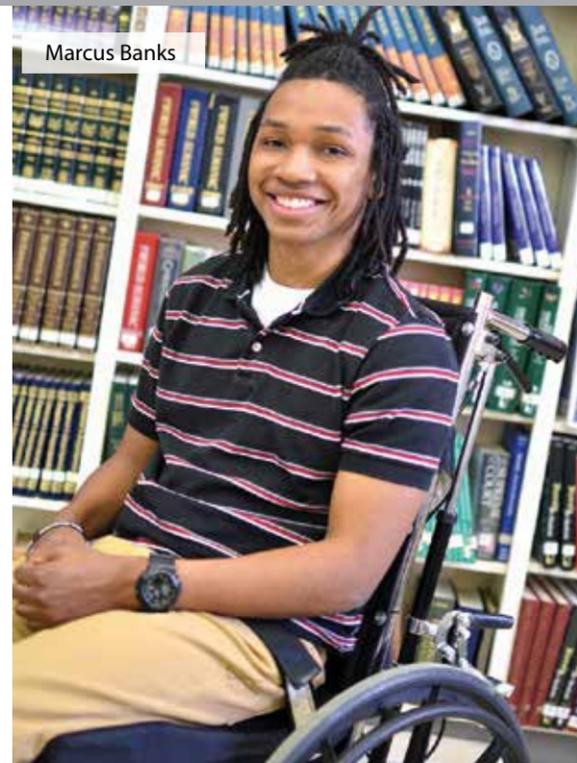


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Taylor Massengill (far right) and members of Sigma Nu present the Charity Bowl check to Marcus Banks, who is joined by his father Melvin and friends.



Marcus Banks

# A helping hand

Patient honored by Sigma Nu Charity Bowl

By Carey Miller

When the Ole Miss Sigma Nus chose Marcus Banks as the recipient of funds from their 2015 Charity Bowl, he was honored.

But his father, Melvin, knew one tiny detail should be out in the open first.

“One of the first things he said to us was, ‘Let’s go ahead and get this out front—I’m a Mississippi State fan, I graduated from State—don’t hold it against me,’” said Taylor Massengill, philanthropy chairman for the March 27 event.

Marcus, 17, was paralyzed during a 2014 spring football practice while a sophomore at Louisville High School. A helmet-to-helmet collision injured his

spinal cord at the C5 level.

Each year the Charity Bowl raises funds for a victim of paralysis. The event was started to honor Ole Miss football player Chucky Mullins, who was paralyzed at the 1989 homecoming game versus Vanderbilt.

“We try to pick someone who has suffered a similar injury, especially if it was by playing a sport, or at least someone involved in athletics in high school or college,” Massengill said. “So it was an easy choice to help out Marcus.”

“It really means a lot to me, I’m so happy,” Marcus said of being chosen. “Out of all the people, I didn’t think it would be me.”

Melvin says Marcus “couldn’t even knock a fly off his nose” after he was airlifted to the University of Mississippi

Medical Center in Jackson.

After a month in the ICU, he began physical therapy at Methodist Rehabilitation Center. There, Marcus first heard about the Charity Bowl, as the 2014 recipient was another MRC patient, Stevelyn Robinson.

It was also at MRC that Marcus began to regain some of his abilities, and Melvin says he has come quite a long way since.

“After Methodist, he could move his arms a little, like a bird raising up his wings,” Melvin said. “So we just kept focusing ... now he can get up in a walker and take some steps with assistance. It may not seem like much to some, but we think it’s a miracle to even be at that point.”

“When he first got here, he was a

lot less able to do things than he is now,” said Arash Sepehri, care coordinator for MRC’s Navigator Program.

The Navigator Program, founded in 2014 by a grant from The Craig R. Nielsen Foundation, provides support to facilitate the transition of spinal cord injured patients from inpatient rehab to the home and community. Marcus was one of MRC’s first patients to utilize the program.

“After Marcus returned home, the Navigator Program helped bridge the gap for community resources to help pay for things like a new wheelchair and bathroom modifications, as well as provide education for life after spinal cord injury,” said Sepehri.

Now, Marcus is back at school as a senior at Louisville High.

He continues to pursue his love of drawing, something he showed a talent for before his accident.

“Now he takes the pencil and puts it in between his index and ring finger, and he can still draw just as good as anybody would,” Melvin said.

“Right now, I’m taking a computer class on animation design,” Marcus said. Naturally, he hopes to attend Mississippi State after graduation.

But first he wants to get back in the driver’s seat. Marcus had earned his driver’s license barely a month before his injury.

“I’m ready to get back to the driving thing,” he said.

A specially modified vehicle that Marcus can drive on his own is one of the items on the Banks’ wish list, and it’s such expenses the Charity Bowl assists with. To date, the event has raised more than \$1.6 million.

The 2015 Charity Bowl took place



Marcus Banks works out on the weight-supported treadmill system, while MRC physical therapists Erin Perry (at left) and Kathleen Dobbs assist his stepping motion.

on an unseasonably cold March evening at Oxford High School, as the usual venue, Vaught-Hemingway Stadium, was undergoing renovations.

“Some of the very first Charity Bowls were held there, so we went back to our roots in a sense,” Massengill said.

At halftime, the Sigma Nus presented Marcus with a check for \$75,000.

Today, Marcus continues to make progress at Quest, MRC’s intensive outpatient program for persons with brain

and spinal injuries.

As part of his therapy he also comes to MRC’s main campus to utilize the weight-supported treadmill system, which uses a harness, pulleys and pneumatic system to support a patient’s weight, so therapists can assist the person with a stepping motion. Many SCI patients have seen improved function with its use.

“We’re just going to keep at it,” Melvin said. “The more therapy he gets, the more he improves.”

# The Right Place

After a car wreck left her struggling, Alexa Cacibauda of Ocean Springs got her life back with Methodist Rehab

Story by Carey Miller

Alexa Cacibauda doesn't remember much about the accident.

It was December 30, 2013, and she was on her way to Wal-Mart to pick up supplies for a New Year's party. While turning onto U.S. 90 in her hometown of Ocean Springs, she was hit by a motorist who ran a red light and plowed into the left side of her car.

She hit her head so hard it smashed the driver's side window.

It was a relief when her doctors told her it was only a concussion and sent her home the same day to get some rest.

"They said to just go back to normal life," Alexa said.

But in the weeks and months after the traumatic event, strange symptoms appeared that suggested something worse. She had bouts of forgetfulness. Writing papers for college, which came easily before, became a chore. She was plagued by constant headaches. When odd sensations in her legs grew into numbness and she could no longer walk or stand, she and her family began searching for an answer.

"I couldn't understand why I wasn't able to finish my homework, why I didn't feel good, why I couldn't remember things—I almost thought I was going crazy," Alexa said.

While a student at Mississippi State University in Starkville months after the accident, Alexa underwent therapy at Oktibbeha County Hospital Rehab Services to address her issues. Her occupational therapist, Linda Maiers, recognized that her problems weren't typical of a simple concussion. So she called someone she knew could provide the Cacibaudas an answer.

"She called me and said, 'I've got this girl coming in to see me, and I don't think she ever had a diagnosis of brain injury, but she presents just like one,'" said Mol-

Photo: The Sun-Herald

lie Kinard, north Mississippi outreach nurse for Methodist Rehabilitation Center.

MRC treats patients with stroke, spinal cord injury, brain injury and other neurological injuries and illnesses. When Kinard heard Alexa's story from her mother, she knew MRC could help.

"I told them that she needs to see a brain injury rehab doctor," Kinard said. "So I called our former brain injury program director Dr. Zoraya Parrilla and told her Alexa's story, and she agreed to see her."

"Mollie's our hero," Alexa said. "She got us to the right place."

Alexa was assessed at MRC's outpatient clinic in June 2014—some six months after her accident. As part of that assessment, MRC performs a neuropsychological evaluation to document cognitive and motor functioning and plan treatment. This can often pinpoint problems traditional neurological diagnostics cannot, and was crucial in Alexa's diagnosis of post-concussive syndrome, a type of mild brain injury.

"It was in a way a relief when they told me I had a brain injury," Alexa said. "I didn't understand what was happening until I came to Methodist."

"It was hard to see her just get hurt in the first place, and then to deteriorate," said her mother, Rose Cacibauda. "And then—no solutions. But then we came to MRC, and they had all the solutions. They were like, 'Yes, we know what's going on, what's wrong with her brain, and we can fix it, we can help her.' And that was a really good thing to hear."

Dr. Parrilla referred Alexa to MRC's Quest Program, an intensive outpatient program for people with brain or spinal injuries who wish to make a successful return to work, school or home life.

Alexa had always planned to become an elementary school teacher, so her main goal at Quest was to become able to finish school and realize that dream.

"The frustration prior to that point was just phenomenal



**"IT WAS IN A WAY A RELIEF**  
when they told me I had a brain injury. I didn't understand what was happening until I came to Methodist."  
—Alexa Cacibauda

because we weren't getting any answers," said Joe Cacibauda, Alexa's father. "So once she got to Quest, you could start to see the changes little by little. It made us all feel even better because we knew something was happening."

At Quest, she worked with clinical psychologist Dr. Danny Burgess to address some psychological issues, occupational therapists Allison Harris and Jennifer Sivak for cognitive issues related to work and school, and physical therapist Patricia Oyarce to help her regain her ability to walk.

"When I first saw her, she could barely walk 200 feet with the walker," Oyarce said, but she could see that Alexa had the potential to recover.

"What was most remarkable about her walking was she had a very stiff gait," Oyarce said. This told her that her mus-

cles weren't the problem, but rather her brain's ability to communicate with those muscles and vice-versa.

"She had the range of motion," Oyarce said. "It goes both ways—the brain is communicating to the muscles, and the muscles are sending feedback to the brain."

To help with that connection and reestablish communication, Oyarce fitted Alexa with the Bioness L300. The neuromuscular electrical stimulation system is designed to help persons with neurological conditions walk more naturally.

"The Bioness is generally prescribed for foot drop—but she really didn't have foot drop, she was having problems with the timing of her muscles," Oyarce said. "It really helped her during exercises and walking to be able to turn her muscles on and off at the right time. It really made a big difference."

By the time Alexa graduated from the Quest program on April 30, 2015, she was walking normally with the help of two Bioness devices, one for each leg.

"It's the best," Alexa said. "In December, I took my first steps without my walker. They've improved my muscle memory. It's been life-changing. I've been able to drive, be independent again and go back to teaching. They've brought back my quality of life."

Alexa also utilized several other programs throughout MRC's outpatient network.

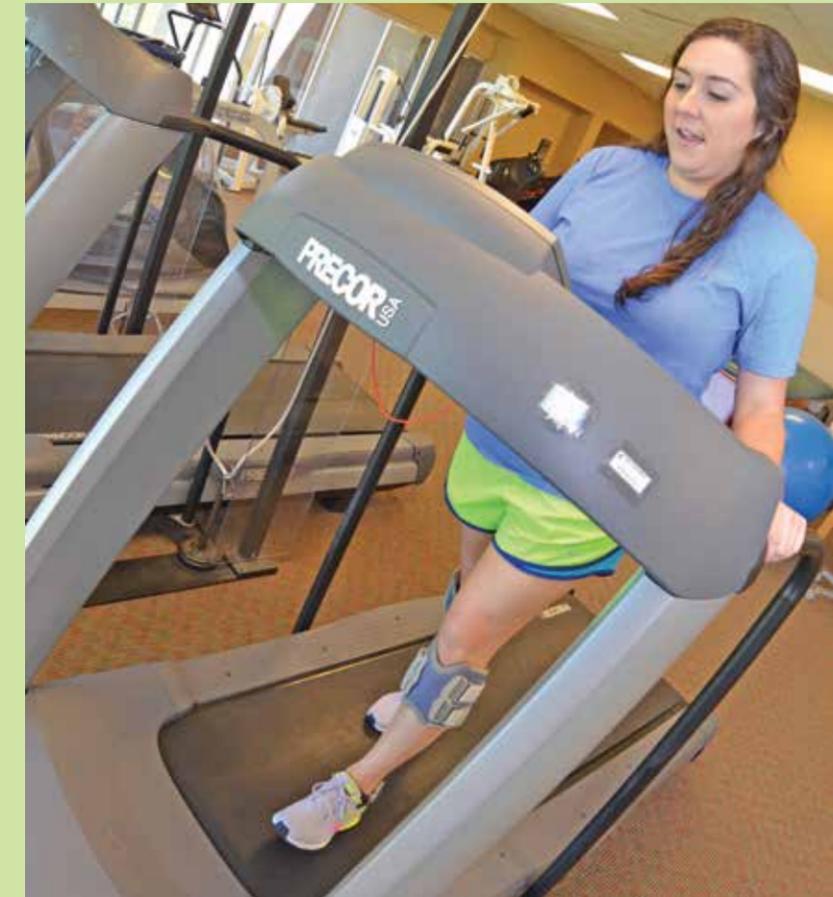
For some of her issues with neck and shoulder pain, she received soft tissue massage from physical therapist Teresa Sawyers at MRC's outpatient clinic in Flowood. She was also referred to pain management specialist Dr. Philip Blount at MRC's Pain and Spine Center for nerve treatment. She has also been treated for dizziness by physical therapist Susan Geiger, who specializes in vestibular disorders.

"I'm glad that she made it to us and that we could provide what she needed—our experience with working with people with similar types of neurological conditions," Oyarce said. "I think the nice thing about Alexa's rehab journey was she was able to really benefit from all the different disciplines of our clinic at Quest, as well as MRC as a whole."

Today, Alexa is living in Washington, D.C., where she is currently student teaching at Marie Reed Elementary School. She is set to graduate from MSU in December, and wants to teach full time and help with inner city literacy programs in the nation's capital.

"We're glad to see her get her smile back," Rose said. "She didn't smile for a long, long time."

Opposite page: Alexa with her therapy team at Quest, from left, occupational therapist Allison Harris, physical therapist Patricia Oyarce, clinical psychologist Danny Burgess and physical therapist Erin Rigby. Below, top: With the help of her Bioness L300 electrical stimulation units as well as a physical therapy regimen to improve balance and strength, Alexa regained her ability to walk while at Quest. Below, bottom: Danny Burgess presents Alexa with a certificate at her Quest "graduation," a celebration which signifies a patient's successful return to work, school or everyday life.



# stronger muscles, stronger faith

Recovering from a spinal cord injury gave veteran physical therapist Gary Heine new perspective on life as a rehab patient

Story by Susan Christensen

**E**verything in the room was familiar, yet nothing was the same.

That's how physical therapist Gary Heine felt as he entered the sixth floor therapy gym at Methodist Rehabilitation Center.

All around were the usual tools of his trade. Exercise bikes for patients to pedal. Colorful balls to lift and throw. Mat tables to stretch out on. Even a small set of stairs to climb.

Yet despite 32 years as a PT—including 18 leading Mississippi Baptist Medical Center's rehab department—Heine felt like a nervous newbie as he took in his surroundings.

This time around, he would be the one struggling to overcome a disabling injury.

"I was like everybody else—fearful because you don't know what kind of return you're going to get," he said. "But it's better not to know sometimes, and in my case that's true. If I didn't have control over certain muscles moving, I'd rather leave it up to the Lord."

### "I think I know too much here"

As a therapist for Mississippi Home Care, Heine would leave his Madison house each workday to head to the homes of his patients.

On Oct. 27, 2014, he was on his way from Yazoo City to Bentonla when his life took a detour on Highway 49 North.

"I don't really remember it, but I hit a truck that was behind a tractor," he said. "I woke up across the gear shift, and I couldn't move anything. I

thought: This is not good."

Later, the father of four would ruefully tell his pastor: "I think I know too much here."

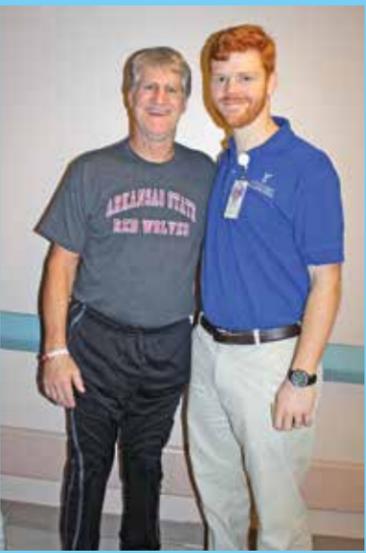
Heine was flown to the University of Mississippi Medical Center, "a very scary night for our family," said his wife Kym.

"We were all out of town anywhere from two hours to 24 hours away with the exception of our youngest child, who was a senior in high school," Kym said. "Driving for hours to get to the hospital, knowing your loved one was airlifted because he was unable to move, was the most terrifying thing any of us had ever experienced."

"Our church family, folks throughout the greater Jackson area, as well as the state and nation, instantly rallied around him, either physically or



# “I knew I had to work hard. I wasn’t going to give up.” —Gary Heine



through prayer.”

Heine had damaged disks in his upper spine, causing a condition called central cord syndrome. While he had never treated the syndrome, Heine was well aware of its impact. “I thought I definitely won’t be moving my arms,” he said.

“With central cord syndrome, fibers on the inside of the spinal cord are more damaged than those on the outside,” explained Dr. Sam Grissom, director of MRC’s spinal cord injury program. “Patients tend to have more paralysis or weakness in the upper extremities.”

After surgery at the University of Mississippi Medical Center to fuse the damaged parts of his spine, Heine recovered movement in his legs. But his arms still lay limply by his side when he arrived at Methodist Rehab on Nov. 5, 2014.

Heine said he chose to rehab at MRC because he knew the staff had extensive experience treating spinal cord trauma and other neurological injuries and illnesses.

“Methodist definitely has its own niche,” he said. “And it’s a needed niche.”

**“He always wanted to do extra”**

As a long-time therapist, Heine expected to know some of the veteran MRC staff. But the most familiar face belonged to one of the younger therapists on the spinal cord injury team.

“When I was 5, we lived in the same cul de sac,” said MRC physical therapist Chris McGuffey. “I played with his kids. And when I wanted to go to PT school, I got my observational hours with him, which ultimately helped me get into PT school.”

McGuffey says treating someone with Heine’s PT experience was a bit intimidating at first. “I knew he knew what good therapy was. But his personality was so laid back, I wasn’t intimidated for long.”

Indeed, McGuffey was soon putting Heine through his paces.

“Chris busted my butt,” Heine said. “It was great, though. I knew I had to work hard. I wasn’t going to give up.”

“Working with him, you could push him as hard as you wanted to,” McGuffey said. “It was more making sure he didn’t overdo it.”

“He always wanted to do extra,” said MRC occupational therapist Eliza-

beth Hust. “He would say: Can I take some things back to my room to work on? It felt like every week there was something new he could do. He showed a lot of progress quickly.”

“His big goal was to get back to work,” McGuffey said. “And I wanted him to get back to work, too, because he’s a great PT.”

**A strait jacket of pain**

As a PT, Heine could recognize which of his muscles needed work. But he still had a lot to learn about overcoming extreme muscle spasms when he began therapy at MRC’s Neurological Rehabilitation Clinic in Flowood in January, 2015.

“Spasm is a neurological component I’m not used to,” he said. “I have to stretch and work through it because I’ve got to get range of motion. But every night when I go to bed I know I’m going to go two steps backward. I’m like a board when I wake up. Initially, I felt like I had a metal jacket all over my back. Now it feels like it’s more on my shoulders.”

Heine said several therapies have been a “saving grace” in his treatment—myofascial release (MFR), soft tissue

massage and joint mobilization. MRC physical therapist Teresa Swyers says MFR focuses on fascia, a network of stretchy tissue that encases everything in the body like a protective stocking.

“It’s like a spider web and a strain on any one area affects the body’s total alignment,” Swyers explained. “Myofascial release uses gentle sustained pressure to activate the release of connective tissue to restore normal alignment and decrease the strait jacket of pain. I’m also working to reeducate his muscles and the brain pathways to help him move in a more normalized fashion.”

Physical therapist Joe Jacobson, MRC’s director of outpatient services, also brought his expertise to the mix, using mobilization techniques to decrease the extreme stiffness in Heine’s thoracic spine.

“It’s a technique that can range from extremely gentle to fairly aggressive. And in his case we’re using the more aggressive variety,” Jacobson said. “I’m stretching his joints along the specific movement plane it’s supposed to travel.”

The maneuvering can result in some uncomfortable—if not downright painful—positioning, but Heine is not one to complain.

“He’s definitely a hard-working, motivated patient,” Swyers said. “Being a PT himself and in tune with his own body, he has been able to achieve outcomes that otherwise would be highly unlikely.”

**“I want to provide for my family”**

Heine tries to take one day at a time. But he was worried about getting back to work. “I’m old school. I want to provide for my family,” he said.

To achieve that goal, Heine turned

to Quest, MRC’s outpatient community reintegration program in Jackson.

Quest helps people with brain and spinal cord injuries return to work, school or community life. And since several PTs are on Quest’s staff, they had no trouble determining the on-the-job skills Heine would need to succeed.

He had to be physically able to position patients and demonstrate exercises. And since his Tin-Man rigidity went right down to his fingertips, he also had to work on writing and using a computer.

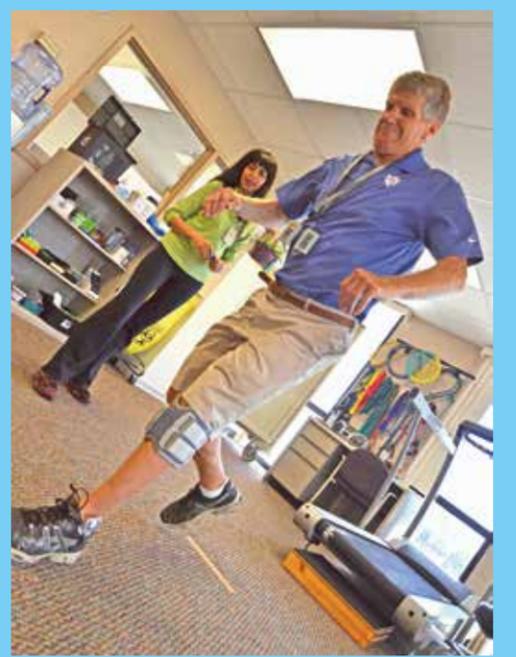
“With central cord syndrome, fine motor skills are among the last abilities to come back,” said Quest occupational therapist Julie Walker. “I would stretch his fingers, and he would just about scream. Once he gets really stretched out, he’s a lot better.”

To keep Heine limber, physical therapist Patricia Oyarce had him doing both yoga and Pilates to improve his ability to integrate core/global muscle systems as related to stability and controlled mobility. “He was real receptive to it,” Oyarce said. “I gave him one of my yoga videos, and he has been doing it once or twice a week at home.”

Outside the gym, Heine also practiced some job skills by helping a neighbor who had knee replacement surgery do her physical therapy homework.

As he readied to return to a reduced schedule at work nearly a year after his accident, Heine predicted his experience as a patient would make him a better therapist.

“I’ve always been pretty compassionate, but it makes you more empathetic for sure,” he said. “My faith is stronger, too. I’ve realized the things in life that are truly important are friends, family and faith.”



Clockwise from top left: In physical therapist Chris McGuffey, Gary Heine had the benefit of a long-time family friend who pushed him to excel. Quest physical therapist Patricia Oyarce shares the test results that quantify Heine’s remarkable recovery. Heine started inpatient therapy in a wheelchair, but was soon making dramatic strides during therapy at Outpatient Neurological Rehabilitation and Quest.

# Cutting It Close

A rare heart condition coupled with a stroke renews Jackson barber Sam Watkins' resolve to stay fit and healthy for his family

**Story by Susan Christensen**

**E**ight-year-old D.J. Watkins was at Methodist Rehabilitation Center when he saw a poster from the hospital's Now I Can campaign.

It showed once paralyzed Hollie Harvey walking along a park path with her husband and three children. And the story it told sent D.J. racing to the room where his 33-year-old father lay paralyzed from a stroke.

"It gave me hope my dad would get better," D.J. said. "I told him you're going to be OK. You're going to be like those people on the wall."

At that moment, Sam Watkins III doubted he'd ever reclaim his life as a barber, husband and father of three.

"I was paralyzed on the left side, and I thought that was the way I would be the rest of my life," he said. "I was so depressed, I didn't know what to expect."

But faced with D.J.'s simple faith, Sam knew he had to persevere.

"I came in the gym the next day with 150 percent drive," Sam said. "All the therapists said: Who is this? If they asked me to do two sets of 10, I'd do three sets of 15. One of the



Photos, left to right: A dedicated family man, Sam Watkins is thrilled to be back enjoying activities with, from left, daughter Kyla, sons D.J. and Triston and wife Kimberly. Working with a basketball was a way for Sam Watkins to improve his abilities and was a therapy activity he could share with his kids. With his career as a barber depending on a full return of hand function. Sam Watkins focused on therapies to restore his fine motor skills.



therapists even came to my room and said: Can you come talk to one of our other patients?”

### “What happened to me?”

A part-time caterer, Sam was prepping for a weekend job when he started experiencing chest pain on Feb. 6. “I thought it was gas,” he said. “But my wife said: Something’s not right.”

Kimberly, a speech therapist, called 911, and her caution may well have saved her husband’s life.

“Once they did a CAT scan at the hospital, their next words were: We have to get him into surgery immediately,” she said.

Sam had suffered an aortic dissection, a separation in the wall of the large vessel that carries blood from the heart to the rest of the body. The condition killed actor John Ritter in 2003, and there was no guarantee that Sam would survive surgery.

“They kept telling us Sam had a 50-50 chance,” Kimberly said. “Eight hours later, they said everything went better than expected and he’d be up walking by tomorrow.”

But a cascade of complications led to a stroke, and Sam spent 48 days in ICU. “Somewhere between Day 9 and 15, his left side stopped moving,” Kimberly said.

When Sam woke up, a tube in his throat kept him from talking. So Kimberly had to read his lips as he mouthed: What happened to me?

“I tried to explain,” she said. “And his eyes were telling me: Wow, are you serious?”

### “We had to get on him”

When Sam was ready for rehab, Kimberly pushed for a transfer to MRC. And he was admitted on March 31.

“I was excited for him because he had so much potential to get better,” said Dr. Alyson Jones, who leads MRC’s stroke program. So she was concerned when Sam seemed to lose motivation.

“He was one of those patients who talked a good game, yet it wasn’t translating to the therapy gym,” Dr. Jones said. “We had to get on him. Someone that young, you want them to get back to things they love to do.”

“At first, you could tell he was a little sad,” said MRC occupational therapist Lindsey Parker. But the pep talk from D.J. did the trick.

“Then he started perking up,” Parker said. “The second he would finish what I gave him to do, he’d say: What’s next?”

MRC staff said Sam benefitted from strong family sup-

port, including a nurturing mom, a health care savvy wife and a brother who provided some tough love.

He also had plenty of customers pulling for him to reopen Exquisite Hair Design in Jackson. “Their biggest thing was get well soon because we can’t find a barber,” Sam said.

But the best motivation came from his kids. As a man who used to cut hair past midnight on Fridays so he could spend Saturdays with his family, Sam was eager to stay an involved dad.

“He’d say: Whatever you do, I’ve got to make my baby’s Jim Hill graduation and help her move to her dorm at Alcorn State University,” said MRC occupational therapist Ashlee Ricotta.

“He was so motivated that I looked forward to working with him. His smile would get bigger and bigger the more he accomplished.”

### “It changed my life”

Ricotta began treating Sam after he began therapy at Methodist Outpatient Neurological Rehabilitation in Flo-wood in May. And she says he’s come a long way.

“He had very limited shoulder movement and hand func-tion and would not have been able to handle a brush, scis-

sors or comb,” Ricotta said. “He couldn’t even raise his arm to shoulder height.”

He was also unsteady on his feet and needed a walker to move safely. “He couldn’t shift weight to his left side without feeling like his leg was going to buckle and make him fall,” said MRC physical therapist Karen Klein.

After months of exercise to increase his strength, endurance and fine motor skills, Sam can tick off a long list of re-claimed abilities. “I’m walking unassisted, cutting my own hair, interacting with more family activities and getting the kids ready for school,” he said. “My next goal is to be able to jog again.”

Working out is one way Sam hopes to avoid another close call. He’s also determined to keep off the 100 pounds he lost after his surgery.

“Now, I only eat things that swim or fly—no more ribs,” he says of his protein choices. “I grill or bake—no fried foods. And I only drink water with lemon.”

It might seem a sacrifice for someone who caters on the side and often cooks fat-laden Southern favorites for his cus-tomers. But Sam says he’s done with the lifestyle that led to the sky high blood pressure that preceded his stroke.

“It’s not hard now because this was such a scare,” he said. “It changed my life.”

# Brianna Rides Again!

Brianna May is back in the saddle after an incredible recovery from a near-fatal fall from her horse

by Susan Christensen

**T**he question came two days after Christmas and it sent Shanna Cumberland to her knees.

“Would you like to donate your daughter’s organs?”

It had been seven days since 20-year-old Brianna May had fallen headfirst off her horse, and Cumberland thought her comatose daughter was holding her own.

But Brianna was showing signs of brain death, said her doctors. It was time for family and friends to say good-bye.

“We thought we had lost her,” Cumberland said. “We were planning for her funeral.”

But as doctors prepped for tests to declare Brianna legally dead, her condition changed. A dilated pupil—a possible sign of severe brain damage—began to shrink. “And she started having brain waves every 15 minutes,” said Cumberland.

Finally, there was a flicker of hope, and Cumberland turned to her Caring Bridge journal to rally the “prayer war-

riors” back home in Sebastopol.

“We are now asking for prayers for a miracle,” Cumberland wrote. “All I know is she is still with us and fighting. I’m not going to sugar-coat it and say there is much hope. But THERE IS hope. I’ve still got my faith in God.”

## “Nobody has gotten close to Bri’s story”

Today, only some bristly hair where her head was shaved indicates Brianna once lay clinging to life in a neuro-ICU bed at the University of Mississippi Medical Center in Jackson.

So her team of caregivers almost didn’t recognize the bubbly blonde when she returned to UMMC for a visit. “They cried,” Brianna said. “I walked for them and their jaws dropped.”

Cumberland won’t ever forget the caring UMMC staff that kept her daughter alive, but the time in ICU is all a big blank to Brianna.





Top: Brianna May married long-time boyfriend Josh Trippe on Oct. 17 in a wedding that reflected her country girl roots. Left: Larry Thrash, aka Poppy, is delighted with granddaughter Brianna's recovery. He says seeing her hurt was "the awfulest thing I've ever been through." Above: Brianna May's wedding was a day of celebration for, from left, her mother Shanna Cumberland, stepfather Scoot Cumberland and sister Skylar May.

Her first memories are of rolling into Methodist Rehabilitation Center on Jan. 20, a pitiful replica of her former self. The country girl who loved to mud-ride and barrel-race was as weak and wobbly as a newborn filly.

"It was hard for her to even get her spoon to her mouth," said her grandmother Bobbie Thrash.

Still, Brianna was ready to test her limits and her MRC therapists didn't disappoint.

"They were so good, they really pushed me," she said of physical therapist Alex Touchstone and occupational therapist Chuck Crenshaw. "Even dur-

ing device. Patients are timed as they touch flashing targets on the device's light board, and Brianna quickly became MRC's undisputed Dynavision champ.

"A week into therapy, she broke our patient record by hitting 91 targets in a minute while standing on a balance ball," Crenshaw said.

The ball was added when the exercise got too easy for Brianna. And it wasn't the only time therapists got creative to keep Brianna progressing.

"At one point, we were getting her into yoga positions on a platform swing," Crenshaw said.

about it.

But their grandfather Larry Thrash, aka Poppy, saw the tragedy start to unfold as the two sisters raced toward a curve on a country road.

Just before Brianna went out of sight around the bend, Thrash watched in horror as her saddle started sliding left. Unable to stop her horse, Brianna hit the ground at a gallop.

"I heard her sister scream, and I knew something was bad wrong," said her grandfather. "I saw her lying on the ground, and I could not do anything. I just froze."

Brianna was fading in and out of

## "By the end of rehab, it was hard to believe where Bri was medically at the scene of the accident."

—MRC physical therapist  
**Alex Touchstone**

ing their off periods, they would come and get me."

As therapists for MRC's nationally recognized brain injury program, Crenshaw and Touchstone are used to helping patients make dramatic recoveries. But they say Brianna's was a breed apart.

"Nobody has gotten close to Bri's story," said Crenshaw.

As an example, Crenshaw points to her performance on the hospital's Dynavision visual and neuro-motor train-

"She made such quick progress, we had to think of new things to challenge her," said Touchstone. "By the end of rehab, it was hard to believe where she was medically at the scene of the accident. I'm really happy she got her life back and humbled to be a part of it."

### "I knew something was bad wrong"

Fifteen-year-old Skylar May was the only one to witness her sister's skull-fracturing fall, and she can't bear to talk

consciousness and spitting up blood as her stepfather, Scoot Cumberland, and other first responders did what they could until EMTs arrived.

"I thought the ambulance never would get there," said her grandfather. "It's the awfulest thing I've ever been through."

Brianna was taken to Lackey Memorial Hospital in Forest, then air-lifted to UMMC. And as word got out of the tragedy, Scott County's faithful began bowing their heads on Brianna's behalf.



As a TV cameraman captures the action, Brianna May and physical therapist Alex Touchstone demonstrate therapy challenges devised just for her. Animal lover Brianna May loved working with MRC facility dog Puma.

“Half of Sebastapol was in the emergency room and half was at home praying,” said her grandmother.

“And all the kids at school were saying: I’m a Bri-liever,” said her mom.

A Nashville cousin with country music connections spread the news online, and soon country stars like John Rich were popping up on social media holding #PrayingforBri posters.

“And Reba McEntire and Blake Shelton sent a care package,” said Cumberland.

On Jan. 31, Brianna’s fellow horse lovers delivered their own get-well wishes via a benefit ride and the sale of some 450 Pray for Bri bracelets. “The ride started at the coliseum in Forest and it was over a mile long,” said Brianna’s grandfather.

When Brianna came home on Feb. 6, another parade of well-wishers greeted her arrival. “We drove through town, made a loop, and the whole elementary was lined up,” Cumberland said. “She got out and hugged the little kids.”

### “God has a big purpose for me”

Brianna’s life since her accident has been momentous by any measure.

On Valentine’s Day, she got engaged to long-time boyfriend Josh Trippe. In March, she returned to work at Community Bank in Forest and has since received a promotion. And on Oct. 17, she enjoyed a country girl’s dream wedding, complete with cowboy boots on her feet and a barn roof over her head.

“While our family has been so

blessed, I can’t help but to think back to the first of the year when we had started the early stages of planning Bri’s funeral,” mused her mom that morning on the family’s Pray for Bri Facebook page. “Now we have been planning her wedding, and today is the BIG DAY. All this has happened within ten months. Emotional year can’t begin to describe it.”

Josh and Brianna now have a home on the family’s 300-acre spread, just across the way from her parents and grandparents. “I wasn’t leaving this hill,” she said.

Brianna isn’t giving up horse riding either, but she has made some concessions. She now owns a riding helmet and has agreed to temper her taste for high-spirited horses.

“I wanted them prancing,” she said. “But Poppy said he was going to send all my horses to training, and I was going to be bored.”

When people talk about her accident, Brianna says: “I don’t even think they are talking about me. It’s hard to believe I went through that.”

Now that she’s on the other side, Brianna said she sees her unlikely recovery as a reason to give back.

“I think I was used as an example of what God can do,” she said. “I feel like I’ve realized God has a big purpose for me.”

And Job One is to encourage others who face difficult comebacks.

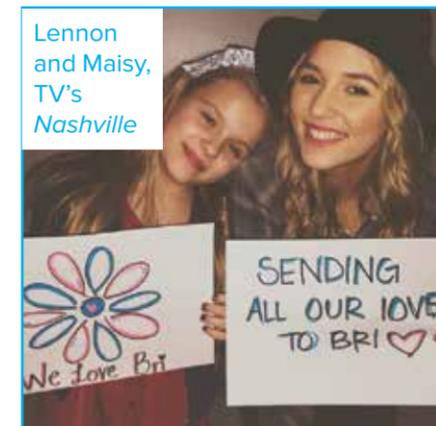
“That’s why I go back to rehab,” she said. “People would come back and visit while I was there and I would think: They are doing good, I can, too.”

## Social Media Support

Following her accident, there was an outpouring of support for Bri via social media. Friends and several celebrities shared their well wishes on Facebook, Twitter and Instagram using the #prayingforbri hashtag. A Facebook page, facebook.com/prayforbri, and a CaringBridge journal were also established to share news of her recovery.



Randy Houser, musician



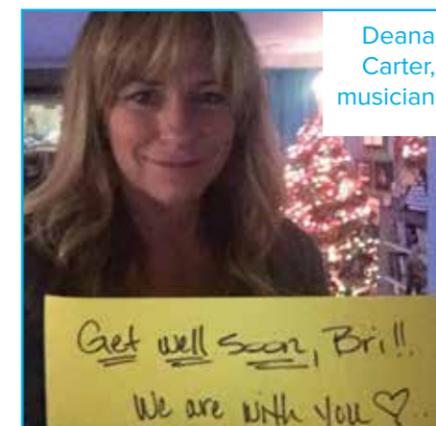
Lennon and Maisy, TV's Nashville



photo of the #rideforbri



Reba @reba



Deana Carter, musician



Chase Bryant, musician



Lauren Alaina, TV's American Idol



John Rich of Big & Rich



Joey Paul Growdy, producer/actor

# 40 YEARS OF RESTORING ABILITY AND HOPE

As hospital celebrates, 58th patient recalls MRC's impact on the life of a 20-year-old quadriplegic

by Susan Christensen

**W**hen Methodist Rehabilitation Center opened four decades ago, no one was more ready for the moment than Lamar Myers.

A quadriplegic since age 16, the 20-year-old Morton native had been languishing in the "rehab" wing of a Vicksburg charity hospital for two years.

"It was really just a place to put you," he said. "The rehab part was making souvenir plaques and ceramics. I even had to share a wheelchair until I got my own. One guy would use it the morning, and I would use it in the afternoon."

Myers knew he needed a center designed for people with spinal cord injuries. And he heard that one was in the works. "My doctors kept saying just be patient. We're going to get a rehab hospital in Jackson and it will be state of the art."



MRC's groundbreaking ceremonies were held on December 8, 1970.

# LAMAR MYERS THROUGH THE YEARS



1979



1988



1999



2005



2015

## FAMILIAR FACE

For almost 40 years, MRC visitors have gotten their first greeting from a smiling Charlotte Fitzgerald.

She became the hospital's second PBX operator way back in June 1976. And in the years since, she's come to think of the lobby's information desk—and the center as a whole—as her second home.

"I love the family atmosphere," she said. "It's like we all look after each other as well as the patients."

A patient herself on occasion, Charlotte says there's no place better to heal. "I've seen patients come in on stretchers and oxygen and all kinds of equipment hooked up to them and they walk out on their own two feet."



On May 5, 1975, that prediction came true. MRC began accepting patients who previously had to go out of state to receive advanced rehab for stroke, brain and spinal cord injuries.

Myers well remembers the thrill of being the 58th patient admitted to the three-story, 60-bed hospital. "My new life was about to open up," he said.

After eight months in therapy, Myers regained the ability to live alone, to hold down a job and to eventually become a husband, father and an advocate for people with disabilities.

So as MRC commemorates its 40th anniversary this year with the theme "a legacy of caring," Myers will be among those celebrating the center's far-reaching influence.

"The rehab promised me a new life and they came through," said the 60-year-old Madison resident. "It was a dream come true."

### THE VISION BEHIND THE DREAM

As early as the 1950s, state leaders recognized the need for a facility like MRC. But it wasn't until the mid-'60s that the Mississippi Methodist Conference named Dr. Jesse Wofford, Earl R. Wilson, Frank E. Hart, Sr. and Hilton L. Ladner to a temporary board to shepherd the project.

"They're considered the ideological architects of MRC," said Methodist Rehab CEO Mark Adams. "They were determined to bring first-class rehab services to Mississippi. And their leadership has given generations of disabled Mississippians the ability to lead productive lives."

The Methodist laymen visited rehab facilities across the country and their input formed the framework for MRC's

In response to the love of God, Methodist Rehabilitation Center is dedicated to the restoration and enhancement of the lives of those we serve.

### WE ARE COMMITTED TO EXCELLENCE

and leadership in the delivery of comprehensive services.

— MRC'S Mission Statement

design. Workers began constructing the facility in 1970 after the Methodist Church and the Mississippi Division of Vocational Rehabilitation secured funding for the project and the state offered a building site on the University of Mississippi Medical Center campus.

Within 10 years of opening, a steady uptick in demand led the private non-profit to add four floors and 64 licensed beds for a total of 124.

The center now averages about 50,000 patient visits a year, with an extensive network of inpatient and outpatient services.

### RESTORING ABILITY AND HOPE

Over the years, MRC has garnered international acclaim for its West Nile virus research, earned a nine-year designation as a Traumatic Brain Injury Model System site and was twice named one of America's Best Hospitals by *U.S. News & World Report*.

It's hardly the fledgling hospital that Myers remembers, but Adams says MRC hasn't strayed far from its roots.

"What sets our focus and fuels our growth is still our mission to restore ability and hope," Adams said. "Whenever we recognize a need in our patient

population, we do our best to provide services. And while we'll be looking back this year at our accomplishments, we'll also be moving forward to find new ways to serve those who have come to rely on our expertise."

One of the latest endeavors involves a partnership with UMMC. The two entities signed an affiliation agreement in 2014 that promises to provide a powerful new model for neuroscience research, education and clinical care in Mississippi.

"We're working to bring our complementary strengths and capabilities together to form a neuroscience institute that will pave the way for expanded specialized services, stronger educational programs and more nationally competitive research," Adams said.

Already, the affiliation has fostered collaboration between MRC and UMMC physicians and researchers. UMMC urologist Clint Collins recently began offering services at MRC's hospital-based outpatient clinic and scientists from both facilities have teamed up to study West Nile virus infection.

As a passionate advocate for people with disabilities, Myers is excited about such advances. He knows what the right services at the right time can mean to someone struggling to overcome a disability.

In 1971, Myers was an unwilling passenger in a car packed with five teens when a wreck derailed his promising future. "The driver was racing and I begged him to let me out," he said.

Myers got the worst of it in the crash and believes he was further injured after his friends "crammed me into the back of a '68 Camaro" for the ride to a hospital.

"I went from a high school starting

# “WHAT SETS OUR FOCUS

and fuels our growth is still our mission to restore ability and hope.”

—Mark Adams,  
MRC CEO



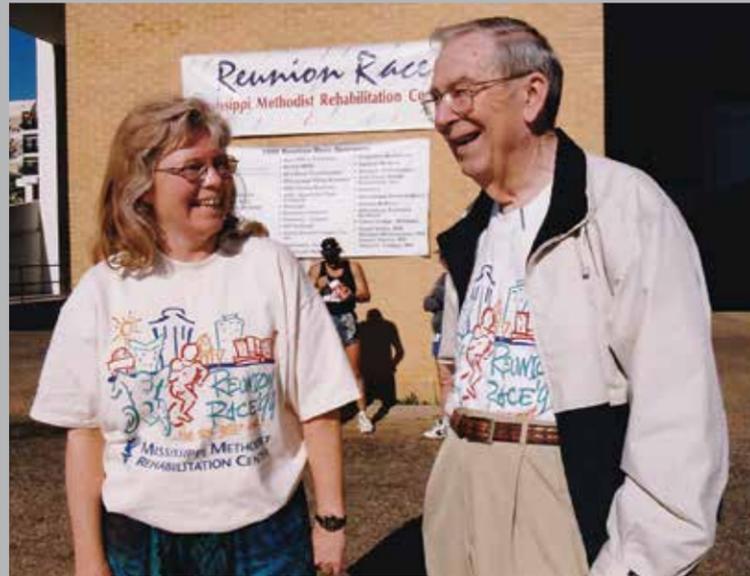
Clockwise from top left:

Therapeutic recreation director Ginny Boydston chats with MRC founding chairman Earl R. Wilson at the 1994 Reunion Race.

When MRC opened in 1975, it had one large therapy gym.

MRC’s grand opening was held on November 16, 1975.

In 1968, Mississippi Governor John Bell Williams signed the legislation that paved the way for the founding of MRC. Standing, left to right, are: MRC founders Hilton Ladner, Frank Hart and Earl R. Wilson; Rep. Charles Mitchell; Rep. John Neill; Sen. Hayden Campbell; and MRC founder Dr. Jesse “Bud” Wofford.



center for a winning basketball team to a quadriplegic overnight. It was like a nightmare I couldn’t wake up from,” Myers said.

“My family loved me and did everything they could, but I couldn’t move anything but my eyeballs. The only time I got up was when they changed my bedding. And the neighbors had to come over and help do that.”

Encouraged by his family to “stay strong,” Myers was primed to “make the best of it” when he finally entered MRC in the fall of 1975.

“When I started therapy, it was rough—like an eight hour a day job on the railroad,” he said. “But I loved it. I was learning to be independent.”

Myers also was learning to be a PBX operator and the training won him a spot answering the phone for MRC. “I’ll never forget it,” he said. “They discharged me on a Wednesday and they told me: ‘By the way, you have to come back Monday. You got the job at the front desk.’”

Myers rented an apartment nearby and rolled to work in his wheelchair every day, no matter the conditions. “I would come whether it was raining or snowing, I didn’t let it stop me. I had a job, and I had to get there,” he said.

Myers retired from MRC in 2003. But he still does fill-in work when needed. And it’s a given he’ll be a central part of the hospital’s anniversary celebrations.

“People like Lamar are the living examples of the importance of our work,” Adams said. “Whenever he comes around to encourage patients, it’s a reminder that rehabilitation does change lives for the better.”

## EXPANDING TO SERVE



In 1982, MRC added four stories to its original facility (above) to create dedicated floors for brain injury, spinal cord injury and stroke patients. Over the past 40 years, MRC’s services have expanded greatly to include:

**METHODIST PAIN & SPINE CENTER** in Flowood.

**METHODIST OUTPATIENT REHABILITATION** Centers in Flowood and Ridgeland.

**QUEST** in Jackson, a community re-integration program for people with brain and spinal injuries.

**METHODIST SPECIALTY CARE CENTER** in Flowood, the state’s first residential care facility for younger people with severe disabilities.

**METHODIST ORTHOTICS & PROSTHETICS** clinics in Flowood, Meridian, Hattiesburg, Cleveland, Oxford and Monroe, La.

**THE CENTER FOR NEUROSCIENCE AND NEUROLOGICAL RECOVERY** in Jackson, an in-house research program.

**WHEELCHAIR ACCESSIBLE APARTMENT COMPLEXES** in Jackson, Hattiesburg and Meridian.

# 40 YEARS OF FIRSTS

When Methodist Rehab opened in 1975, we became Mississippi's first rehabilitation hospital. Our expertise and depth of services remain one-of-a-kind in the state.



In 2001, MRC partnered with the U.S. Department of Housing and Urban Development to open the state's first fully accessible apartment complex for people with physical disabilities. Additional complexes were built in Hattiesburg in 2006 and in Meridian in 2008.



MRC is an early adopter of therapies and technology that benefit patients. Our list of Mississippi firsts include introducing Body Weight Supported Treadmill Training, the Otto Bock Reciprocating Gait Orthosis, Ossur Propio Foot, iBot 4000 Mobility System, Alter G Anti-Gravity Treadmill, the ArmeoSpring Therapy System and becoming the first center among four southern states certified to fit the ReWalk wearable robotic exoskeleton.



Our 1983 installation of the nation's only clean-air surgical suite gave patients unparalleled protection against infection. The suite circulated air 600 times an hour, rather than the standard 25 times per hour.

In 1998, MRC began what would become a nine-year tenure as one of only 17 Traumatic Brain Injury Model System sites in the nation. This first for Mississippi brought in \$3.1 million in federal funding and the chance to collaborate with some of the most prominent researchers in the rehabilitation field.



MRC prosthetist and above-the-knee amputee Brad Kennedy was among the first amputees in the nation to be fitted with Otto Bock's revolutionary C-Leg. And he later showcased the leg's superior functionality via a 2,800-mile bicycle trek across Europe.



Begun in 2014, MRC's one-of-a-kind Navigator program helps people with traumatic spinal cord injury transition from inpatient rehabilitation to the home and community setting.



# 1975 2015



In 1989, the Wilson Research Foundation (named after MRC founding chairman Earl R. Wilson, above) became the only foundation in the state dedicated to supporting rehab-centric research and education.

Steve Jobs once said that innovation distinguishes a leader from a follower. By that measure, Methodist Rehabilitation Center surely belongs among Mississippi's trailblazers. Our patients know they can trust us to embrace the breakthroughs that make life better for people with disabilities. Consider the many firsts recorded at MRC over our 40-year history.

In 2000, MRC became the first hospital in the state recognized as one of America's best by *U.S. News & World Report* and was honored again in 2003.



In 2002, MRC researchers were the first in the world to report that West Nile virus can attack the grey matter of the spinal cord, causing a polio-like paralysis, and the first to confirm the findings via autopsy results. Most recently, they were the first in the world to suggest a link between the virus and later development of myasthenia gravis.



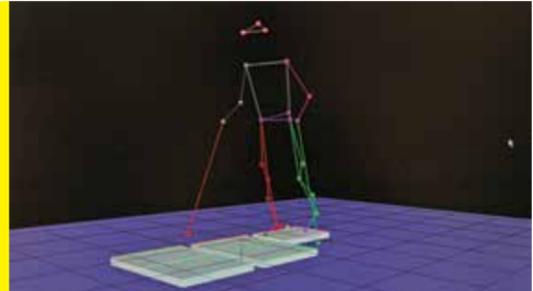
In 2001, MRC opened Quest, the state's first comprehensive community reintegration program for people with brain injuries. Today, the program also serves people with spinal cord injuries.



MRC researchers were the first in the world to develop a sensitive and patient-friendly method to evaluate the integrity of intrathecal baclofen delivery for the treatment of spasticity.

As home to the state's only hospital-based adaptive sports program, MRC has launched a number of team sports—including the nation's largest wheelchair fencing squad. Two members were the first Mississippians to make the U.S. Paralympic Fencing team and MRC therapeutic recreation director Ginny Boydston was the first state resident to serve as the U.S. squad's manager. In 2012, Shaquille Vance became the first MRC athlete to bring home a Paralympic medal when he placed second in the Men's 200-meter, T42 classification in the London games.

Founded in 1997, MRC's Center for Neuroscience and Neurological Recovery is the state's first and only rehabilitation research center. MRC's motion analysis lab, the first of its kind in the state, is used to quantify the effectiveness of different therapies on a patient's mobility and is a valuable tool for research.



In 2003, Methodist Specialty Care Center became the state's first residential care facility designed especially for the complex medical needs of younger people with severe disabilities.

As the first private hospital in Mississippi to install ceiling lift systems in all patient rooms and therapy areas, MRC is a state leader in reducing staff injuries related to patient lifting.





# Center for Neuroscience and Neurological Recovery

# UPDATE

## MRC collaborates with UMMC, USM on West Nile virus research

Twelve years after reporting a link between West Nile virus and polio-like damage to the spinal cord, Methodist Rehab researchers continue making groundbreaking discoveries through the West Nile Virus Research Network, which includes collaboration with basic scientists from the University of Mississippi Medical Center and the University of Southern Mississippi.

Thanks to a lead gift by Jorge Leis of Houston, Texas and three other generous donors, the Wilson Research Foundation has received commitments totaling \$615,000 for promising new research to elucidate how West Nile virus affects the nervous system.

The USM team, led by Assistant Professor Fengwei Bai, PhD, has been investigating how the immune system responds to West Nile virus attack and which defensive mechanisms are involved. They found that Interleukin-17A, a protein naturally secreted by a certain type of white blood cell, is critical for helping other white blood cells kill the virus.

“Mice deficient in Interleukin-17A die at a much higher rate after West Nile virus infection than typical mice,” said Bai, who oversees the only lab certified for working with live West Nile virus in Mississippi.

The team also identified the pathway and the specific type of white blood cells activated by Interleukin-17A.

“Our next step is to find ways to develop treatment strategies based on this new knowledge,” Bai said.

The group has submitted an application to the National Institutes for Health to continue this line of research.

Two recent studies by Methodist Rehab researchers found that the protein S100B is produced in higher amounts by the nerve cells of people infected with West Nile virus.

“We asked our colleagues from UMMC to help us find out if this protein is involved in neurological damage,” said Dr. Dobrivoje Stokic, Network Co-Director.

The UMMC team, led by Professor Parminder Vig, PhD, confirmed that West Nile virus increases the production of S100B, but more importantly blocks clearing out of a compound known as glutamate. Normally, glutamate makes communication between nerve cells possible, but too much glutamate is toxic and kills the nerve cells. The results of this study were published in the *Journal of the Neurological Sciences*.

“These results call for more work to be done to find out how long S100B remains increased after infection, and if this has something to do with long-term symptoms reported by many West Nile survivors,” Stokic said. “We will continue studying ways to limit the production of these proteins and hopefully prevent damage.”

## Study demonstrates benefits of computer-controlled prosthesis

### *Can amputees benefit from wearing a more advanced prosthesis?*

This simple question prompted a year-long study conducted by Methodist researchers in collaboration with MRC’s Orthotics & Prosthetics division, with funding from Ossur Inc, Reykjavik, Iceland and the Wilson Research Foundation. In the study, seven amputees used a prosthesis with a built-in microcomputer for controlling knee joint motion, rather than their prescribed prosthesis with a mechanical knee joint.

The participants were examined weekly for three months in Methodist’s Motion Analysis Lab directed by Methodist Rehab scientist John Chow, PhD, with assistance from research engineer Bonnie Perry and research associate Charla Howard, who led the project.

“After swapping the two devices back and forth in different ways, we documented clear benefits of a computer controlled knee,” Howard said. “The participant walked better, faster and longer distances with less effort.”

Improvements in walking and stability noted by the participants largely agreed with the objective evaluations.

“More advanced prosthetic devices are often declined by



A scene from the 2015 Walk & Roll.

the payers under the assumption that the higher cost does not justify potential benefits. But the results of our study suggest that those assumptions may not be grounded in evidence,” said Chris Wallace, director of Methodist Orthotics & Prosthetics. “Such decisions should not be made prematurely and without performing a comprehensive assessment as done in this study.”

## Events raise funds for research

The sixth annual Walk & Roll raised a total of \$57,021 for the Wilson Research Foundation. In six combined years, the Walk & Roll has raised \$274,580.

“Our 2015 Walk & Roll was the best yet,” said Chris Blount, foundation director. “It was a chance to reunite past patients and MRC caregivers, and I want to thank our 22 corporate sponsors, hard working employees and volunteers for raising funds for research that changes lives.”

The next Walk & Roll will take place on April 2, 2016. Past patients and friends of MRC are encouraged to form teams, join teams or walk individually.

And for the second year, The Bike Crossing in Ridgeland named the Wilson Research Foundation at MRC as its charity. The June 20 event, “100 Miles of Mayhem—a Century Ride,” raised \$17,000 and was designated for stroke rehab research. The next Mayhem ride will take place on June 11, 2016. For more information on these events, visit [www.wilsonfoundation.org](http://www.wilsonfoundation.org).

## Navigator Program keeps growing

The Navigator Program was established in 2014 after MRC was awarded a quality of life grant by the Craig H. Neilsen Foundation. The purpose is to facilitate the transition of persons with traumatic spinal cord injury from inpatient rehabilitation to home and community.

Program care coordinator Arash Sepehri, working with a multi-disciplinary team, now serves 51 newly injured persons and 20 with previous injuries.

The program provides assistance for basic services, such as referrals to community resources, assistance with obtaining prescription refills and helping making clinic appointments, as well as more challenging goals such as identifying financial assistance, finding accessible and affordable housing and facilitating return to school.

The Navigator team is working to integrate services with Methodist’s Quest program, CORE Clinic (a comprehensive multi-disciplinary evaluation clinic), and MRC’s monthly SCI support group.

“By utilizing systems already in place, we are reaching individuals injured before the inception of The Navigator Program and those who had never received inpatient care at Methodist,” Sepehri said.

Sepehri presented the latest findings at the 2015 meeting of American Spinal Cord Injury Professionals in New Orleans.

# Research

## Publications 2014-2015

(Methodist Rehab researchers' names are in blue type)

### 2014

**Chow JW, Stokic DS:** Variability, frequency composition, and complexity of submaximal isometric knee extension force from subacute to chronic stroke. *Neuroscience* 2014; 273: 189-198.

Lee SP, **Chow JW**, Tillman MD: Persons with reconstructed ACL exhibit altered knee mechanics during high-speed maneuvers. *International Journal of Sports Medicine* 2014; 35: 528-533.

**Leis AA**, Kofler M: Silent period. In Daroff RB, Aminoff MJ (Eds), *Encyclopedia of the Neurological Sciences (2nd Edition)*. Academic Press 2014: 164-168.

**Leis AA**, Moore AR: Keep an eye out for myasthenia gravis patients with an eye out. *Frontiers in Neurology* 2014; 5: 112.

**Leis AA**, Szatmary G, Ross MA, **Stokic DS:** West Nile virus infection and myasthenia gravis. *Muscle & Nerve* 2014; 49: 26-29.

Otzel DM, **Chow JW**, Tillman MD: Long-term deficits in quadriceps strength and activation following anterior cruciate ligament reconstruction. *Physical Therapy in Sport* 2015; 16: 22-28.

Nakase-Richardson R, **Evans CC:** Behavioral assessment of acute neurobehavioral syndromes to inform treatment. *Handbook of Neuropsychology of Traumatic Brain Injury* 2014: 157-172.

### 2015

**Chow JW, Stokic DS:** Intersegmental coordination of gait after hemorrhagic stroke. *Experimental Brain Research* 2015; 233: 125-135.

**Chow JW, Stokic DS:** Intersegmental coordination scales with gait speed similarly in men and women. *Experimental Brain Research* 2015; 233: 3175-3185.

**Chow JW, Yablon SA, Stokic DS:** Effect of intrathecal baclofen bolus injection on ankle muscle activation during gait in patients with acquired brain injury. *Neurorehabilitation & Neural Repair* 2015; 29: 163-173

Knezevic T, Konstantinovic L, Rodic S, Foti C, Drulovic J, Dackovic J, Nikolic D, Petronic I, **Stokic DS:** Validity and reliability of the Serbian version of Patient-Reported Impact of Spasticity Measure in multiple sclerosis. *International Journal of Rehabilitation Research* 2015; 38: 199-205.

Kuwar RB, **Stokic DS, Leis AA**, Bai F, Paul AM, Fratkin JD, Vig PJS: Does astroglial protein S100B contribute to West Nile neuro-invasive syndrome? *Journal of the Neurological Sciences* 2015; 358: 243-252.

Holcomb EM, Towns S, Kamper JE, Barnett SD, Sherer M, **Evans C**, Nakase-Richardson R: The relationship between sleep-wake cycle disturbance and trajectory of cognitive recovery during acute TBI. *Journal of Head Trauma Rehabilitation* 2015 (in press).

Szatmary G, **Leis AA:** Concurrent West Nile virus infection in pneumococcal meningitis: clinical and MRI features. *Journal of Neuroimaging* 2015; 25: 312-315.

## No limits

Help restore ability through the Wilson Foundation

By Chris Blount

"With your help – there are no limits."

—Earl R. Wilson

This has been year of milestones for Methodist Rehab and the Wilson Research Foundation. 2015 marks the hospital's 40th anniversary and the year our foundation surpassed \$6 million in grants awarded for important research, advanced education and state-of-the-art technology. This includes a \$687,474 grant to Methodist in 2015.

This was made possible by 527 donors this past year that included major gifts and support for our events, including the Walk & Roll for Research and 100 Miles of Mayhem, a benefit hosted by The Bike Crossing of Ridgeland. Gifts to the foundation are an investment in our patients through excellent clinical services and patient-focused research that drives innovation. We are grateful to everyone who supports this work.

Our donors understand that being a research center makes Methodist Rehab incredibly distinctive. It allows us to collaborate with other top rehab centers so that we may bring best practices back to our center. And we are making significant research discoveries, with 255 peer-reviewed studies accepted and published in major medical journals since we established the research program 16 years ago.

The impact of Methodist Rehab is also very personal, especially when you have a loved one here. I wish you could see



A ceremonial check for \$687,474 was presented at the September board meeting of the Wilson Research Foundation. This grant is for 2015 research, education and technology related to recovery from stroke, brain injury, spinal cord injury, loss of limb and West Nile virus infection. From left, Mark Adams, Juanita Lester, Sam Lane, Dr. Dobrovoje Stokic, Matt Holleman, the Honorable Virginia Wilson Mounger, Roger Muns, Dr. Marion Wofford, Dean Miller and Chris Blount.

what I see, how our talented research team works side by side with physicians, therapists, nurses, biomedical engineers and patients. Together, they solve problems, overcome obstacles and help these patients get back to their lives. That's our purpose and it is such a privilege to witness.

These are exciting times as we are able to harness emerging technologies that give Methodist Rehab patients unprecedented hope. We need your continued support to discover new ways to help patients recover the ability to walk, use their arms and hands, or use assistive technology.

We hope you will make an annual gift, and consider a planned gift, to the Wilson Research Foundation. With your help, there truly are no limits.



### In Memory of Mary Ann McCarty

1923-2015

The Wilson Research Foundation at Methodist began in 1988 with a seed gift by Mary Ann McCarty and her husband, the late H.F. (Mac) McCarty. Mary Ann, who has served faithfully for many years as a board member of the Wilson Foundation, passed away in June, 2015. Medical research and rehabilitation services in Mississippi will forever be enhanced due to Mr. and Mrs. McCarty's vision and legacy.

Mary Ann McCarty with granddaughters Leslie Wells Baskin, Ashley Wells Hullender, Elizabeth Stevens Buyan, Mary Helen McCarty Griffis and Angela Flynt Hernandez.



## Wilson Research Foundation Honorarium

Our donors help our patients recover ability and hope through research and education at Methodist Rehab Center. 'Research Fellows' are those who have given \$1,000 or more to this life-changing work. Gifts listed below are those received since the last published list that appeared in the Winter 2015 issue of Ways & Means. We strive for accuracy, so please let us know if we have neglected to recognize your contribution.

To make a tax-deductible donation or to learn more about The Wilson Research Foundation, contact us at (601) 364-3598 or email [wfgift@wilsonfoundation.org](mailto:wfgift@wilsonfoundation.org). Or, make a secure online donation at [www.wilsonfoundation.org](http://www.wilsonfoundation.org).

### RESEARCH FELLOWS

Gina and Mark Adams  
Ameristar Casino Vicksburg, Inc.  
Anonymous  
Gary Armstrong  
Atmos Energy Corporation  
BankPlus  
Barefield Workplace Solutions  
Linda and Robert Bartley  
Bay Street Corp.  
Elton G. Beebe  
Charles Berry  
The Bike Crossing  
Anne Andrews Black Charitable Lead Unitrust  
Lori and Chris Blount  
Blue Cross Blue Shield of Mississippi  
Melissa and Si Bondurant  
Jean Turner Brewer  
Estate of Barbara Clark  
Estate of Lillian Bottrell Simpson  
Estate of Mary Ann Henry McCarty  
Estate of Maxine Stone Tullos  
Andrew Burton  
Capitol Street Corporation  
Joc Carpenter  
Canizaro Cawthon Davis Architects  
Danyelle and Wayne Carroll  
Danny Cawthon  
Betsy Creekmore  
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Elizabeth Daniels  
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Ergon Foundation, Inc.  
Charles B. Felder  
Keith Ferguson  
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Susan Greco  
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International Business Machines  
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John S. McIntyre, Jr.  
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Methodist Rehabilitation Center  
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