

VOL. 5, NO. 2

SAN  
DIEGO

# Health

## A FRESH START

HOW BARIATRIC SURGERY  
PUT ONE WOMAN ON THE  
ROAD TO WELLNESS

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The Ultimate Open  
Enrollment Guide

How to Get the Most Out  
of Your Workouts

Fall Flavors from Chef  
Brian Malarkey

Virtual Care is Here to Stay



Scripps

SanDiego  
MAGAZINE



WELCOME

# Your Health Matters

**H**ERE AT SCRIPPS, WE'RE FOCUSED ON YOU—and the health of all our patients every day of the year. Our emergency rooms, urgent care locations, outpatient centers and doctor's offices are here when you need to see us in person—and we have a variety of telemedicine options—if it is easier to schedule a video visit and get the care you need right at home.

The pandemic has accelerated progress and brought new innovative ways for us provide care—from added virtual care options to advanced technology that improves how we monitor and care for patients at our hospitals, clinics and in their homes. It's all designed to put your needs at the center of everything we do.

In this issue of San Diego Health Magazine, you will learn more about the increase in virtual care visits for primary and specialty care, as well as get important tips to help you prepare for open enrollment this fall. This is the time of year you have the opportunity to change your health insurance, and we hope you choose a plan that gives you access to Scripps. You'll read about one of our patients who did just that and switched to Scripps for expert bariatric care.

In addition, we'll share news about our continued growth and plans for the future, including our Here for Good capital campaign to fund innovation and expansion across the Scripps system. Read more about the addition of a new, 433,000-square-foot tower on the campus of Scripps Memorial Hospital La Jolla, which includes a comprehensive women's center to serve the needs of the community. Scripps has cared for San Diegans for nearly a century—longer than any other health system in our community—and philanthropy has helped make that possible. We're here today, and we're committed to being here far into the future.

As COVID-19 continues with new variants that can rapidly spread, we urge you to take care of yourself and your families. Please stay up to date on your COVID and flu vaccinations this fall to do what you can to stay safe and healthy. Your health matters—and remember that Scripps is here when you need us.

**Chris D. Van Gorder, FACHE**

*Scripps President and  
Chief Executive Officer*



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MAGAZINE

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619-230-9292 | [SDMagMedia.com](https://SDMagMedia.com)

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A photograph of a middle-aged man with grey hair and a mustache, smiling and looking upwards. He is wearing a black wetsuit with yellow trim and is holding a light green surfboard with both hands. The background is a clear blue sky.

# Healthy Life

THE LATEST TIPS, ADVANCES AND ADVICE TO LIVE YOUR HEALTHIEST LIFE

## *Health is Wealth*

Health is our greatest asset and it's our job to protect this gift for as long as possible. This issue is filled with tips to do just that, from choosing the right insurance plan to getting the most out of your annual physical to using technology to connect with your doctor from the comfort of your own home. We also have a behind-the-scenes look at two of San Diego's trauma centers and tips to help you care for both your children and your parents, plus a fun fall recipe from Chef Brian Malarkey. Good health is a gift worth more than gold. With Scripps as your health care partner, you're well on your way to leading a healthy life.



# An Open Book on Open Enrollment

**Determining what kind of health insurance is best for your family can be overwhelming. Here's a guide to help simplify the process.**

**IT'S THAT TIME OF YEAR:** You receive a reminder that it's open enrollment and you must decide whether your existing health insurance plan is sufficient for you and your family, choose a new plan or evaluate other plans available to you. The vast amount of information doesn't help the process, either. These tips from Anil Keswani, MD, corporate senior vice president, chief medical officer, ambulatory care and accountable care operations, Scripps Health, will help break down the open enrollment process so you can choose the best plan for your situation.

"Think about the type of care you'll need in the year ahead," advises Dr. Keswani. "When someone chooses Scripps, they'll have access to up to 3,000 affiliated physicians at 28 clinics and five hospital campuses located throughout San Diego County. Many primary care physicians offer extended hours, including mornings, evenings and weekends, and same-day or next-day appointments at many locations."



## THE CHECKLIST

*There are several items you should check before selecting a plan.*

- **Make sure your current Scripps doctors and facilities are in-network.** You can call 800-SCRIPPS or check with the health insurance carrier. The last thing you want is to switch to a plan that isn't accepted by the doctor you trust.
- **Make sure your current prescriptions are covered.** This can vary plan to plan and you could end up paying more for your prescriptions, or they may not be covered at all. Ask for the insurer's formulary—a list of

covered drugs—to see if yours are included.

- **Consider what kind of care you may need in the year ahead.** For example, if you're having a baby or have a procedure planned, you may want more coverage. If you have a chronic condition, such as diabetes, that requires doctor visits and prescription drugs, and whether you could benefit from a plan with low deductibles and copayments.
- **Add up the costs.** It's easy to compare monthly premiums, but there are other expenses, including deductibles (the amount you pay out-of-pocket for covered care before your plan begins to pay), copays (what you're required to pay at

the time you receive care) and coinsurance (the percentage of your medical costs that you pay once you hit your deductible). Be sure to check whether your deductible applies to preventive health and wellness services.



## HMO VS PPO

*HMOs and PPOs are types of health insurance plans with major differences, like cost, network size, your ability to see specialists and coverage for out-of-network services.*

**HMO (Health Maintenance Organization)** plans typically have lower monthly premiums. You will need to select a primary care physician (PCP) and request a referral to see specialists. The plan won't pay for out-of-network care unless it's an emergency.

**A PPO (Preferred Provider Organization)** is usually more expensive when it comes to premiums and deductibles, but are flexible. You can get care outside of your network, though you'll likely pay more, and you don't need a referral to see a specialist.



## WHAT'S COVERED BY INSURANCE PLANS

*Plans that comply with the federal Affordable Care Act—a requirement of every plan sold through Covered California—must cover, at minimum:*

- Outpatient care
- Emergency services



- Hospitalization (such as surgery)
- Pregnancy, maternity and newborn care
- Mental health and substance-use treatments
- Prescription drugs
- Rehabilitative services and devices
- Laboratory services
- Preventive and wellness services and chronic disease management
- Pediatric services, including oral and vision care. Note that dental and eye care coverage are not mandatory for adults.



### WHAT TYPICALLY ISN'T COVERED

- **Acupuncture**, though it may be covered by some employer group plans.
- Most health insurance plans do not cover **dental care**. You would need separate dental insurance to cover dental expenses.
- Health insurance plans rarely cover **cosmetic surgery** done solely to improve appearance. If there are medical reasons for a cosmetic procedure, it may be covered.
- **Laser vision correction surgery**
- Some employer group plans cover **fertility treatments**, but they aren't typically covered by private insurance.



### COPAYS AND PRESCRIPTION COVERAGE

Every health plan has a different list of covered prescription drugs. This list is called a formulary, Dr. Keswani says. Every formulary generally has four tiers: generic, brand-name, non-preferred and specialty. Generics tend to have the lowest copay, while specialty prescription drugs will likely cost more.

"The prescription copay is typically a fixed amount you pay for every drug in a particular tier; costs often do not vary at in-network pharmacies," Dr. Keswani says. "However, if you have coinsurance, a deductible or go to an out-of-network pharmacy, your copay could change."

If you currently have a prescription, you should double-check to see if it's covered by a plan you're considering. Your prescription might be in a different tier, and it may cost you more; or the plan may require you to try lower-tier drugs before getting authorization to move on to name-brand drugs.



### MISTAKES TO AVOID

*You can spend countless hours researching and still be surprised by a bill or change in service after you've enrolled in your new health plan. Here, Dr. Keswani explains the biggest mistakes patients make when selecting a plan and how to avoid them.*

- **Choosing a plan based only on premium cost** is a common mistake. It's easy to pick a plan with a low monthly premium that proves costly in the long run. Other costs can include deductibles, copays and coinsurance. Be sure to thoroughly consider all of the different costs before selecting a plan.
- **You use an out-of-network doctor, lab, urgent care center or hospital.** If your health plan has changed since last year, check to see if your preferred doctor, specialists, urgent care center, hospital and labs are included or else you could end up paying more.
- **If you miss open enrollment**, you won't be able to make any changes to your plan until the next open enrollment period, unless you've experienced a qualifying event, such as losing employer-provided coverage. If you have Medicare, the annual enrollment period runs from October 15 to December 7. Covered California's open enrollment is November 1 to January 31. If you get health insurance through your employer, the dates are set by the company, so you'll want to check with your HR department. Add these reminders to your calendar so you don't forget.



**If you have more questions about insurance plans, visit [Scripps.org/SDChooseScripps](https://scripps.org/SDChooseScripps).**



## PREVENTION

# What to Expect From Your Annual Physical



➔ **DOCTORS RECOMMEND AN ANNUAL PHYSICAL EXAM,** but the task can sometimes seem daunting. The more you know beforehand, the more likely it is you'll have a good experience.

Christal Landeros, DO, family medicine physician, Scripps Coastal Medical Center, San Marcos, says that annual exams are critical for anyone's well-being. They help ensure that issues are addressed as early as possible, allow you to ask any health-related questions and give you a chance to develop a relationship with your primary care provider.

In addition to checking your vital signs, examining your head, neck and abdominal areas and ordering any necessary laboratory tests, your doctor should review recommended vaccines, assess your risk for various cancers or diseases and discuss overall health goals. Your doctor will also ask you questions about your medical history, lifestyle and habits, including dental and sleep hygiene, especially important now since the pandemic may have delayed routine dental cleanings or caused some sleepless nights.

Dr. Landeros generally recommends that patients complete labs prior to their appointment to ensure the one-on-one time is as beneficial as possible.

"Prevention is key," Dr. Landeros says. "We can use this time to discuss lifestyle and dietary changes and/or medications to address any health concerns."

Certain parts of the exam will vary based on gender and age. For men over 40, doctors will begin monitoring for prostate abnormalities.

Women can expect an annual screening for cervical cancer beginning at age 21 and a screening for HPV beginning at age 30. Dr. Landeros says these annual screenings can identify precancerous lesions and can prompt more frequent screenings to monitor for any warning signs or unusual growth. Although mammograms typically begin at age 40, doctors will visually and physically exam the breasts to look for any abnormalities, such as lumps or bumps.

Anyone age 50 and older should expect to be screened for colorectal cancer as well.

During exams for children, pediatricians will review age-appropriate milestones and will evaluate the child's social, behavioral and academic progress.

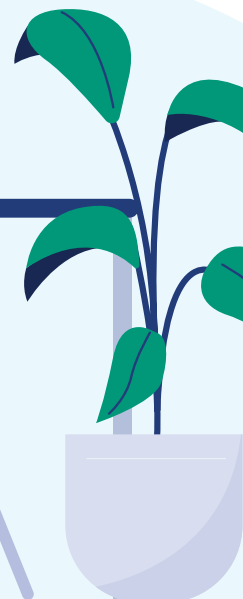
Although seeing your doctor for an annual physical exam may seem like a chore, Dr. Landeros says skipping the critical checkups can be risky.

"Patients are at risk of the development and further progression of medical issues that may require more aggressive intervention once identified," she says. "Promoting health and wellness can keep medical issues from developing and, of course, early detection and diagnosis is of equal importance to promote better outcomes."

**To find a Scripps doctor who is right for you, visit [Scripps.org/SDScrippsDoc](https://www.scripps.org/SDScrippsDoc).**



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# Get Smart About Medicare

PART A

PART B

PART C

PART D

## Tips to help navigate coverage options and choose the right plan

→ **IT CAN BE TOUGH TO DISCUSS MEDICARE WITH YOUR PARENTS**, especially if you don't understand the plans yourself. The government insurance program covers all adults 65 and older to varying degrees depending on which plan they choose. It can get complicated, but these tips from Melissa Wolinski, DO, internal medicine, Scripps Clinic, John R. Anderson V Medical Pavilion, can help you and your folks consider coverage options and choose the plan that best fits their needs.

First, familiarize yourself with the various parts of Medicare plans, says Dr. Wolinski. Then consider costs and the level of care you may need in the near future.

**Part A** is the most basic and covers hospital care, skilled nursing, home health care and hospice care. It's free in most cases.

**Part B** is more like traditional medical insurance. It covers preventive services and visits to doctors and other health care providers, such as physical therapists, lab tests and mental health services. Part B carries a monthly premium of \$170.10 or higher depending on income.

**Part C**, also known as Medicare Advantage, plans are available through private insurance companies and offer services in addition to those provided under parts A and B. They can be HMOs or PPOs, meaning your parents will have a network of doctors and hospitals to choose from. They also cover vision, dental and hearing services, and in most cases, prescriptions. Costs vary per plan and require that the patient still pay the Part B premium.

"If you're here at Scripps, then you're already part of a network that really has a multidisciplinary set of providers and specialists and you don't really need to worry about going out of network, which is the benefit of an Advantage plan," says Dr. Wolinski.

**Part D** helps cover the cost of prescription drugs. Medicare Parts A and B do not cover prescriptions, though most Medicare Advantage plans include some coverage.

Also, note important dates. The initial enrollment period starts three months before your parent's 65th birthday and extends for three months after. For those already enrolled in Medicare, open enrollment—when an individual can add or change coverage—lasts from October 15 to December 7, and changes take effect January 1.

"Most people have the opportunity to roll into something different or roll into an Advantage plan if they decide to," says Dr. Wolinski. "There is some flexibility there."

There are also plenty of resources available for people who want to find out more. It's worthwhile to discuss Medicare with your primary care provider, though note that Scripps does not sell Medicare plans. Look for videos on Medicare.gov and from official sources on YouTube and watch them with your parents.

Also, check out Scripps.org for information on why your parents' plan should include Scripps and the advantages of keeping your care within a single network so primary care doctors, specialists and various medical teams can effectively communicate and coordinate care.

"It's about taking the reins and trying to help mom and dad figure out what to do," Dr. Wolinski says.



To learn more about Medicare options and how to choose plans with access to Scripps, visit [Scripps.org/SDMedicare](https://scripps.org/SDMedicare) and download the Guide to Good Health.

# Virtual Care is Here to Stay



→ One of the most popular tech trends to emerge during the pandemic is telemedicine. The number of virtual care visits has skyrocketed, and it's not hard to see why. Not only do virtual visits help control the spread of COVID-19 and other infectious diseases, but they also allow you to see your doctor from the comfort of your home which can save precious time.

Scripps has seen a boom in virtual visits for both primary care and specialty care, and for Scripps *HealthExpress* services. Throughout the Scripps system, 16 to 18 percent of all visits are now conducted virtually, and in some specialties, such as endocrinology, where patients require frequent check-ins, that number can jump to as high as 75 percent, says David Wetherhold, MD, chief medical information officer for ambulatory systems, Scripps Health, and internal medicine physician, Scripps Clinic. Scripps also offers a free online symptom checker that can help patients determine whether to seek care immediately or later, and in person or online.

"We were just doing a handful of telehealth cases prior to March of 2020, then there was that sudden uptick," he says. "Over the course of COVID, we did see certain spikes that correlated with spikes in the virus, but we never saw numbers go down low again—this is what we call the 'new normal.'"

For individuals with chronic conditions, like diabetes, high

blood pressure or heart disease, virtual visits can be a game-changer. Many patients have purchased or been outfitted with smart medical devices, like blood pressure cuffs, heart monitors and pulse oximeters, that electronically transmit data to their Scripps care team who can monitor them remotely and be on alert for any significant changes.

As you can imagine, that's a lot of data. Readings are routed to a central command center for remote patient monitoring and telehealth where both humans and computers using artificial intelligence review them and escalate cases as needed so doctors can intervene early.

"Traditionally care was more reactive—your blood pressure's too high or your sugars are going too high or too low, and we have to do something," says Dr. Wetherhold. "This will allow us to become more proactive in catching things before they get into trouble, keeping people healthier, keeping them out of the emergency room and out of the hospital."

Telemedicine has also made primary care appointments more accessible. What used to require taking time off work, finding childcare, paying for parking, etc., can now be done from anywhere and usually in much less time. Virtual visits are great for issues like starting a new medication or following up after trying one out for a few weeks; recurring conditions, including urinary tract infections; discussing test results; treatment of an infectious illness like a cold, the flu or COVID-19; minor injuries; and mental health concerns. Doctors can also prescribe medications and order lab work or X-rays during the appointment.

Virtual visits also make it easy to loop in a caregiver or loved one, even if they live in a different part of the country.

## VIRTUAL CARE MAY BE A GREAT CHOICE FOR:



Individuals with Chronic Conditions



Parents



Full-time Workers



Starting New Medications



## THROUGHOUT SCRIPPS HEALTH:

16-18%

of all health care visits are conducted virtually ...

... and for patients with frequent appointments, can be as high as

75%

Technology also allows physicians to get a glimpse of a patient's home environment and discuss any concerns with patients and their family members or support system. For children of elderly patients, virtual discussions with a physician can bring much-needed peace of mind.

"When you move away from an elderly parent, one of the big stress factors is their health care. Making sure that they're getting the appropriate care can lead to better care for the patient because the family's going to be more involved in understanding what's going on, and also stress-relieving for the family members," says Dr. Wetherhold.

While telemedicine and virtual visits are a welcome addition for many, Dr. Wetherhold cautions that they're not appropriate for every health concern—for instance, if you're experiencing severe chest or abdominal pain. Doctors can determine during a virtual visit if a patient needs more care than they can provide online and will advise them to schedule an office visit or go straight to the hospital. Also, the prevalence of telemedicine doesn't mean your health care provider is less available to see you in-person. Staff members are still available by phone to make appointments and answer questions.

"In-person care is never going to go away, but there are a lot of people who love this new form of care," Dr. Wetherhold says. "It's really the patient's choice of which form of care they would like to use."



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Recurring or  
Infectious Conditions



Minor Injuries



Caregivers of  
Elderly Patients



## New AI Technology Documents Your Doctor Visit



### AN INTELLIGENT RECORDING

**DEVICE** is one of the latest tools Scripps providers are using to improve the patient experience. **Dragon Ambient eXperience (DAX)** allows caregivers to seamlessly record and document a visit while focusing on the patient.

Once the patient provides consent, the program securely records speech during visits, processes it, then uses artificial intelligence (AI) to transcribe the notes into the patient's MyScripps electronic health record, thus saving precious moments that can be better used for patient care.

"When I go back and see how well the note is populated and how accurate it is and how much it mirrors my own notes without adding time to my day and actually giving me time back—it's been a game changer," says Saima Lodhi, MD, internal medicine, Scripps Coastal Medical Center, Hillcrest.

Dr. Lodhi says she is often able to add additional patient visits during the day due to the time savings.

According to Dr. Wetherhold, the average Scripps physician spends 52 minutes each day typing notes in electronic medical records. Now a group of 50 doctors in a variety of specialties are the first to test the app, with the goal to expand its use to physicians across the Scripps system.

Scripps is the first health care system in San Diego County to use DAX, says Kalpit Shah, MD, orthopedic surgery, Scripps Clinic.

"Our patients are excited to see this is another way Scripps is at the leading-edge of technology and innovation," Dr. Shah says.



# Common Infant Illnesses Explained



→ **IT CAN BE DIFFICULT TO KNOW** what's considered "normal" when you're a first-time parent, especially when there is so much to learn about parenthood itself. Your child's pediatrician can help clear up the confusion and ease your anxious mind.

At Scripps, pediatricians are skilled at providing care for a range of ages and supporting parents' efforts to manage the care of their little ones, says Melissa Sprague, DO, pediatrician, Scripps Coastal Medical Center, Carlsbad.

"Our pediatricians play an integral part in providing preventive care and treatment for a wide array of diagnoses," Dr. Sprague says. "Scripps pediatricians use evidence-based medicine to ensure patients are receiving the most up-to-date treatment."

Dr. Sprague explained the most common infant illnesses and when you should take your child to the doctor:



**RESPIRATORY ISSUES:** The most common respiratory issues for infants are upper respiratory infections caused by viruses. Cold symptoms in infants typically include runny nose, sneezing, congestion, cough and fussiness. These viral infections are treated with supportive care including nasal saline, a cool mist humidifier and rest. If your child is under three months of age, it is best to be seen by a pediatrician if your child is showing signs of illness.



**DIAPER RASHES:** Diaper irritant dermatitis and diaper candidiasis are the two most common types of infant diaper rash. Diaper irritant dermatitis—irritation of the skin from urine or stool—causes red or pink patches on the skin covered by the diaper. This rash is usually treated with frequent diaper changes, hypoallergenic wipes and a thick barrier cream with zinc oxide. Diaper candidiasis, a fungal infection, typically causes small pink or red bumps and is usually worse in the folds of the groin. This type of rash is treated with antifungal ointment.



**DIARRHEA AND VOMITING:** The most common cause of vomiting and diarrhea in children is a virus. Other causes include travel-related illnesses or illnesses tied to foods. Symptoms are treated with supportive care, including fluids and probiotics. Children should be monitored for signs of dehydration, including a decrease in tears, wet diapers or urination or dry cracked lips.



**EAR INFECTIONS:** Ear infections result from fluid build-up in the middle ear that causes the eardrum to become inflamed and are typically preceded by a viral respiratory illness. Kids are more likely to have ear infections because the tubes that drain fluid from their ears are smaller than adults'. Symptoms typically include fever, fussiness, ear pain (ear tugging in infants) or drainage from the ear. It is best to have a pediatrician confirm an ear infection, which is typically treated with antibiotics or monitored closely with a "watch and wait" approach depending on age and symptoms.



**HAND-FOOT-MOUTH DISEASE:** Caused by a virus and typically seen in summer and fall, hand-foot-mouth disease include sores in the mouth and a rash on the palms and soles. The rash can also be generalized. You can treat the symptoms with supportive care and fluids. One of the complications of the disease is dehydration due to pain from the mouth blisters. Children should be monitored for signs of dehydration and are generally the most contagious the first week of the illness.

## WHEN TO SEEK MEDICAL ATTENTION:

When should you call a doctor about any illness symptoms? Dr. Sprague says the biggest red flags include a fever that lasts longer than three days, ear pain, signs of dehydration, difficulty breathing, lethargy or irritability.





# World-Class Trauma Care

Scripps is the only health system in San Diego County with two Level 1 trauma centers

➔ In San Diego, there are five adult trauma centers. They're staffed by multidisciplinary teams led by trauma surgeons—general surgeons with specialized training and expertise in the emergency, intensive care, and surgical management of critically ill and injured patients. Two of these busy trauma centers are at Scripps—the Barbey Family Emergency and Trauma Center at Scripps Memorial Hospital La Jolla and the Conrad Prebys Emergency and Trauma Center at Scripps Mercy Hospital, San Diego. Together, they see more than 3,500 critically injured patients each year.

"Trauma systems are designed to get the right patient to the right hospital at the right time," says Walter Biffl, MD, a Scripps Clinic physician and trauma medical director at Scripps Memorial Hospital La Jolla, which earned its designation as a Level 1 trauma center in February. "The San Diego trauma system is one of the best in the country. There is no competition between the centers—only cooperation."

To earn the Level 1 trauma center designation from the American College of Surgeons, a hospital must demonstrate that it provides the highest quality of injury care available to patients, plus conducts leading-edge research to drive innovation in trauma care and offers trauma surgery training. Scripps operates an academic training program for surgical residents from Naval Medical Center San Diego and has developed education programs for partnering health care providers.

"Scripps' integration with the Navy and the Balboa Medical Center department of surgery allows us to train not only future surgeons who will be working downrange on the battlefield, but also will eventually retire from the Navy and work in a civilian setting," says Vishal Bansal, MD, director of trauma surgery at Scripps Mercy Hospital, San Diego. "That plays a really important role in terms of what we do for trauma care not just today, but 20 years from now."

Both Dr. Biffl and Dr. Bansal agree that research and academic training improve trauma care as a whole and encourage team members to stay up-to-date on the latest developments in the field.

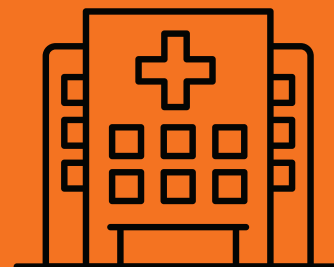
"The care is outstanding. The surgeons are outstanding. The nurses and the hospital are outstanding," says Dr. Bansal. "The research is a way to measure or underscore the commitment that the hospital has towards trauma care, because when you perform research, you're always asking questions that can improve your overall system and improve your overall management of patients."

Dr. Biffl adds that research and educating residents lead to providing the best evidence-based care for patients.

"We look at our own numbers, our own patients, and we ask questions and try to improve their care. So, we're continuously working on new, innovative ways to improve patient outcomes," he says. "That's important, but it's also a lot of resources. Not every hospital can do that. But Scripps has made the commitment and it's great for the hospital, great for the patients."

**"Trauma systems are designed to get the right patient to the right hospital at the right time."**

—WALTER BIFFL, MD; TRAUMA MEDICAL DIRECTOR, SCRIPPS MEMORIAL HOSPITAL LA JOLLA



# Double Trouble

Uncontrolled diabetes plus COVID-19 can lead to severe complications



→ **AS THE PANDEMIC LINGERS ON**, it's become apparent that some populations have been hit harder than others. People with diabetes, along with the elderly, are among those at the top of the list. It's estimated that 30 to 40 percent of all coronavirus deaths in the US have been people with diabetes.

More than 30 million Americans are living with diabetes. An estimated 5 to 10 percent have type 1, an autoimmune condition that prevents the pancreas from making insulin, a hormone that triggers cells to absorb and use the glucose derived from foods we eat. The vast majority have type 2, meaning their bodies produce insulin but cannot use it efficiently. Instead of being used for energy, glucose stays in the blood, which can cause serious health problems over time.

"COVID seems to have a dramatic effect on stimulating cytokines, which are inflammatory factors. That makes insulin resistance worse and can elevate blood sugars," says Athena Philis-Tsimikas, MD, medical director, Scripps Whittier Diabetes Institute and endocrinologist, Scripps Clinic. "High blood sugars also lower the ability of white blood cells to fight infections, therefore, again, putting you at higher risk for a worse outcome."

Not only does diabetes increase the likelihood of severe complications from COVID, but the comorbidities that often come with it can worsen the infection. Laura Nicholson, MD, PhD, a Scripps Clinic physician, and an internist and hospitalist who cares for hospital patients with COVID and diabetes, and her team studied the effects of COVID on people with one of the most common comorbidities and risk factors for diabetes: obesity.

They looked at the role obesity played in people treated in intensive care, needing a ventilator and dying in the hospital. During the initial COVID surge (before vaccines were available), obese people were at increased risk for all three things.

"The risk gets higher as the weight goes up," Dr. Nicholson says. However, the issue is complex because obesity also often presents with its own set of comorbidities, one of which is diabetes. "It's difficult to separate the effects of obesity, which affects breathing, and the effects of everything else that obesity causes—hypertension, diabetes, all of the downstream diseases, if you will—that increase the risk of dying of an infection."

Not everyone who is obese will develop type 2 diabetes and its related health problems, though obesity and inactivity are the most common triggers for the disease because the pancreas can produce only so much insulin, which can

become insufficient as the body grows larger. Genetics and many other contributing factors also play a role in why some people develop diabetes and other don't.

Diabetes can be controlled with insulin injections or medication that prompt the pancreas to ramp up insulin production. A healthy diet and exercise, as well as interventional programs, such as those offered at the Scripps Whittier Diabetes Institute, can also go a long way toward managing diabetes or even stopping it from developing.

Dr. Philis-Tsimikas notes that people with well-controlled diabetes don't face the same complications when it comes to COVID.

"If you have someone that is very well-managed, whether they have type 1 or type 2 diabetes, they don't have complications," she says. "The key to all of this is that well-managed diabetes doesn't result in as many bad outcomes or worse outcomes, whereas poorly managed diabetes does."

To prevent COVID or minimize its symptoms, getting vaccinated and keeping up to date with boosters is the best line of defense, says Dr. Nicholson.

"Obese people and elderly people do much better with COVID if they've been immunized," Dr. Nicholson says. "We can still bring you up to a much better immunity. Now something will be a bad cold instead of a very serious pneumonia."

**TO LEARN MORE ABOUT DIABETES AND DIABETES TREATMENT, VISIT [SCRIPPS.ORG/SDDIABETES](https://scripps.org/sddiabetes).**



# Switch Up Your Fitness Routine

Even small changes can reap big benefits

**T**HERE'S A SAYING THAT GOES: If you do what you've always done, you'll get what you've always gotten. And for workouts, that sentiment couldn't be more true. Doctors recommend at least 150 minutes of moderate intensity exercise or 75 minutes of vigorous exercise per week. If you're consistently hitting those marks, your commitment is admirable, but sticking with the same workout can, over time, stall progress and lead to boredom and frustration.

The secret to avoiding a pesky plateau is progressively switching up your workout by gradually adding more reps, weight or distance; using different equipment, like resistance bands or kettle bells; mixing strength training into a cardio session or trying something new altogether, says Jennifer Lee, DO, family medicine physician, Scripps Coastal Medical Center, Vista. And the increases don't have to be drastic to be effective and keep your muscles engaged.

"I get bored very easily if I just do the same workout, so I change it up with different types of exercise," Dr. Lee says. "For example, if you're doing aerobics, I would switch from running to swimming or jump roping."

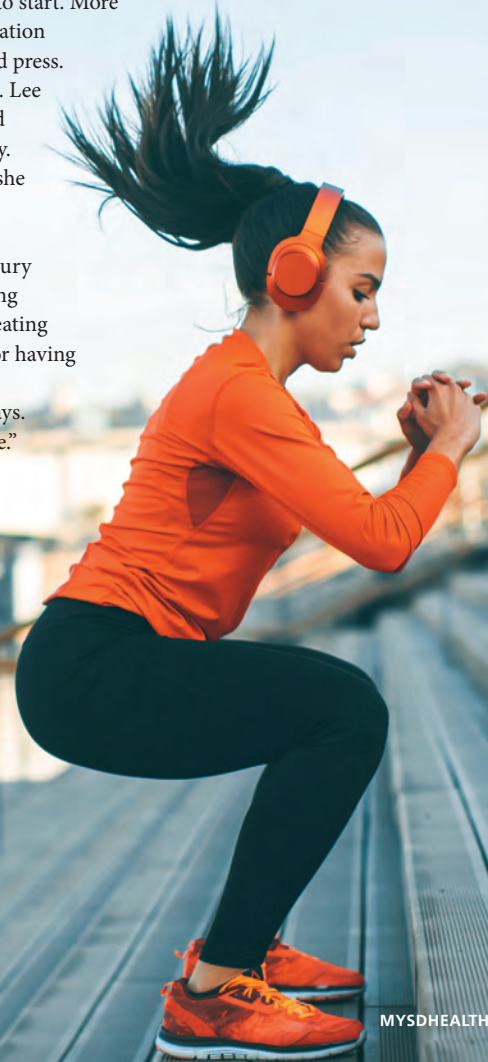
Incorporating compound movements that target multiple muscle groups can also help fitness fans rev up their workouts. Variations of squats and dead lifts are a great place to start. More experienced exercisers may benefit from adding on even more, such as combination bicep curl lunges, squats with overhead raises, barbell hip raises and a clean and press.

Adding some variety to your exercise routine can also benefit your brain, Dr. Lee says. Studies have shown that regular exercise improves memory, cognition and focus and learning new moves boosts brain power and increases neuroplasticity.

"When you're learning a new thing, you're letting your brain get used to it," she says. "Then you start to have your muscles build endurance."

Dr. Lee also stresses the importance of rest. Recovery days help alleviate inflammation, repair and build muscle, replenish energy, reduce the risk for injury and help support your immune system. Signs your body needs rest include being unable to complete your usual workout or feeling sluggish mid-routine, binge eating or craving comfort food afterward, muscle pain and either sleeping too much or having difficulty sleeping.

"Those are all signs and symptoms saying you need to rest your body," she says. "That's telling your body you're stressed out. You're in high flight-or-fight mode."





Chef Brian Malarkey cooks up a healthy, sharable side dish from Little Italy eatery, Herb & Wood.



## ENTERTAINING

# Fall Flavors

Celebrity chef Brian Malarkey shares his recipe for Herb & Wood's Spiced Cauliflower

**YOU DON'T HAVE TO LOSE OUT ON FLAVOR** while trying to eat healthy. Celebrity chef Brian Malarkey jazzes up inflammation-busting cauliflower with a fragrant blend of antioxidant-rich spice-rack staples, fresh fruit and a smooth, Mediterranean-style hummus. The result is a dish that's brimming with savory umami flavor and subtle sweetness. It's not hard to see why it's a top-seller at Malarkey's iconic Little Italy outpost, Herb & Wood.

"Any time I'm cooking, I like to think about flavors—tart, sweet, heat, all those different things—and also textures and shapes," says Malarkey. "There's so much going on in this dish. Every bite takes you to a whole other realm."

Chef Malarkey's Spiced Cauliflower is the first recipe in a new series highlighting healthy recipes from top local chefs, made possible by a partnership between Scripps Health and *San Diego Magazine*.







# Spiced Cauliflower

MAKES 2 SERVINGS

## INGREDIENTS:

6 ounces roasted cauliflower (see recipe)  
2 ounces spice blend (see recipe)  
1 apple, halved and sliced  
1/4 cup pickled golden raisins (see recipe)  
2 ounces cauliflower hummus (see recipe)  
1 lemon, juiced  
Mint, dill, lemon zest and/or sesame seeds for garnish (optional)

## ROASTED CAULIFLOWER:

1 head white, green or orange cauliflower (can substitute Romanesco broccoli)  
1 head purple cauliflower  
2 ounces spice blend  
1/4 cup olive oil  
Salt, to taste

Preheat oven to 350 degrees. Cut or break cauliflower into bite sized florets and toss in olive oil and salt. Roast cauliflower on sheet tray for 20 minutes. Finish with spice blend and lemon juice.

## SPICE BLEND\*

(makes more than required for recipe):

1 tablespoon allspice  
1 1/2 teaspoon black pepper  
1 tablespoon cinnamon  
1 1/2 teaspoon cloves  
1 tablespoon coriander  
1 1/2 teaspoon cumin  
1 1/2 teaspoon nutmeg  
\*can substitute Chinese five spice powder

## CAULIFLOWER HUMMUS:

1 head white cauliflower  
4 ounces tahini  
4 raw garlic cloves  
1 ounce chickpeas  
1 lemon, juiced  
Salt, to taste

Bring water to a boil and season with salt. Add cauliflower and cook until tender—be sure to not overcook. Reserve cauliflower water. Use a food processor to blend

ingredients together, adding cauliflower water as needed. Pass through chinois to fine strain (optional). Store in fridge.

## PICKLED GOLDEN RAISINS:

1/4 cup golden raisins  
1/4 cup sugar- and sodium-free rice vinegar

Add raisins to hot skillet. Stir in rice vinegar and bring to a boil. Boil for 3-4 minutes. Remove from heat.

## TO PLATE:

Spread 2 ounces of hummus on center of plate. Add roasted cauliflower to the center of plate over hummus. Slice apple and mix with roasted cauliflower. Sprinkle with pickled raisins. Garnish with mint, dill, lemon zest or sesame seeds (optional).

**SPICED CAULIFLOWER NUTRITION FACTS** 1 Serving, Calories: 179.2, Fat: 8.3g, Saturated Fat: 1.7g, Cholesterol: 0g, Sodium: 75.8mg, Carbohydrates: 23.8g, Fiber: 8.7g, Protein: 5.3g



Watch Malarkey prepare this dish with help from *San Diego Magazine* publisher Troy Johnson at [Scripps.org/SDHealthRecipes](https://scripps.org/SDHealthRecipes) and look for more tasty, seasonal recipes in upcoming issues.





# Losing

# to

Bariatric  
surgery put  
Elizabeth  
Mireles Riggs  
on the road  
to health

# win





**A**t 56 years old, Elizabeth Mireles Riggs is the picture of health. The petite brunette with a bubbly personality does Pilates, bicycles, walks and weight trains regularly. When she prepares meals, lean proteins and colorful vegetables take center stage. It's tough to believe that just two years ago, Riggs was 115 pounds heavier, walked with a cane and took multiple medications daily. But that was before she found Scripps.

#### THE BATTLE BEFORE

Like many people who are overweight or obese, Riggs had struggled with her weight for decades, testing out various diets with little to no success. She had joined commercial weight loss programs, cut carbs and gluten, and even went vegetarian for many years, and then vegan for a time, but nothing worked.

"I tried everything," she says.


As her weight continued to climb, Riggs' self-esteem plummeted. She dreaded social situations and felt ashamed and undeserving. Her health declined, too. She had numerous health issues, including a heart condition, hormone imbalance and painful osteoarthritis in her knee that needed surgery. The food she was subsisting on lacked nutrients, so she was routinely too tired to exercise or take the time to prepare healthy food. The cycle perpetuated until she reached 245 pounds. Riggs was unhappy and unhealthy, and she knew something had to change soon. After a stint in the emergency room, she began to seriously consider surgical options with full support from her husband, Michael, and daughter, Brianna.

"If you saw me two years ago, it's not the woman that's in front of you right now—she was like 30 years older than I am," Riggs says. "That is when I said I need to do something about my weight and health, because it's not only my arthritis, it's not only my swelling, it's something deeper."

Riggs switched her health care to Scripps. It was a decision that likely prolonged her life. Scripps' bariatric surgery program combines outstanding clinical care and experience—Scripps surgeons have performed more than 20,000 bariatric surgeries—with support services that help patients with each step of their weight loss journey. Scripps is a recognized leader in the field and prides itself on providing care that's safe and effective. People throughout the San Diego region turn to Scripps for help transforming their lives and regaining their health (read more about Scripps' medically supervised weight management program on page 22).

"That moment was when I said enough is enough. I need to be proactive because it's my health," Riggs says.



  
**“Now I’m  
understanding  
and I’m  
learning every  
single day that  
discipline and  
perseverance  
are key to my  
success.”**

- Elizabeth Riggs



#### PREPARATION IS KEY

Riggs says she immediately felt like she was being heard and her concerns were valid. One of the first people she worked with after making the switch was Janet Nash, RDN, certified diabetes educator and nutritionist, who helped Riggs establish good eating habits that would help her prepare for surgery and sustain her weight loss long term.

“We understand obesity better and it’s not just a self-control issue,” Nash says.

Bariatric surgery is considered a last resort, Nash explains. To be considered a candidate, patients must have a body mass index (BMI) of at least 40 (Elizabeth had a BMI of 44.8), or 35 or higher if they suffer from at least one obesity-related condition, such as diabetes, high blood pressure, sleep apnea, heart disease or fatty liver. They must also attend an orientation, undergo a psychological evaluation and work with Scripps’ Medical Weight Management team over the course of three to six months. They investigate causes and contributors to weight gain and develop both a medical and lifestyle intervention approach to try to counter the problem “the old-fashioned way,” without surgery. If this fails, then surgery is considered. Physicians also ensure patients are healthy enough for surgery. After surgery, patients continue to meet with members of the bariatric medical and surgical teams to identify potential challenges they might face and develop plans for reaching and maintaining their target weight.

“We do get patients who come in thinking surgery is going to fix everything,” Nash says. “Actually, the first thing we want to emphasize is that it’s going to require a lifetime commitment and it is a lot of work. It’s not the easy way out. You’re not cheating. If anything, you’re going to work harder than ever.”

Riggs had to wrap her head around a completely new way of eating following surgery. For the first five to seven days, she was allowed only clear liquids and protein drinks so her stomach could heal. She then progressed to small portions of pureed foods three to six times a day. Then with her doctor’s okay, she was able to start adding soft foods and eventually solid foods, focusing on high-protein and low sugar and fat. Portions were limited to about a quarter to half a cup at first and eventually average one to two cups—or about the same size you would serve a toddler.

“It’s her working on it before the surgery, which made her so successful,” says Nash. “She started on this new life before the surgery.”

When Elizabeth started her weight-loss journey she was 245 pounds and suffered from several medical conditions. Bariatric surgery and two years of hard work gave her a new lease on life.



### THE FIRST DAY OF THE REST OF HER LIFE

Riggs demonstrated her dedication to changing her life for the healthier, and her surgery was scheduled for October 6, 2020.

She was in good hands with William Fuller, MD, Scripps Clinic bariatric surgeon. Dr. Fuller and his fellow Scripps surgeons are among the most experienced in Southern California and have lengthy track records of high success rates. They also consistently meet or exceed strict safety standards.

Surgeons typically perform one of two bariatric procedures: a vertical sleeve gastrectomy, in which the surgeon removes 80 percent of the stomach leaving only a tube-shaped pouch that can hold around two ounces of food, or the Roux-en-Y gastric bypass surgery, in which the surgeon creates a small pouch at the top of the stomach and then attaches it to the middle portion of the small intestine, “bypassing” the top part of the small intestine, which reduces the amount of calories and nutrients that are absorbed. Gastric bypass is widely accepted as the most effective weight loss surgery available and was what was recommended for Riggs.

“Many people who are overweight or obese spend years trying to take off the weight through diet and exercise, but have no success. In those cases, weight-loss surgery can be life-extending,” says Dr. Fuller.

Riggs’ surgery went off without a hitch. Scripps bariatric surgeons specialize in minimally invasive (laparoscopic) techniques, which require only a few small incisions. This means less pain and less need for pain medication, shorter hospital stays and recovery time, decreased risk of complications and better cosmetic results.

“One of the things that compels me to be a bariatric surgeon and to continue doing this is the fact that patients have great outcomes, and that is indeed typical after weight loss surgery,” says Dr. Fuller. “What Elizabeth has experienced is just one among several kinds of successes that patients have following the procedure.”

### HEALTH, INSIDE AND OUT

Patients typically begin losing weight immediately after bariatric surgery and continue to do so because the procedure works in two ways: it physically restricts how much a patient’s stomach can hold and it also recalibrates intestinal hormones that trigger appetite. Still, Riggs had to put her newfound nutrition know-how and lifestyle habits to the test. She focused on foods that are high in fiber and protein and low in sugar and carbohydrates, avoided processed foods and stuck with her gluten-free preferences. She also cooks most everything from scratch, switches up her cooking styles so she doesn’t get bored, and meal preps a week at a time so she has more time to spend with family and doing things she enjoys.

“It’s incredible how the kind of food that you eat impacts your energy. Now I know, now I’m understanding and I’m learning every single day that discipline and perseverance are key to my success,” she says.

She hasn’t had to face this new challenge alone. Scripps offers ongoing support for its bariatric surgery patients, such as support groups and classes, and she continues to work with Nash and see Dr. Fuller.

“Surgery isn’t an ending because weight loss for many of our patients will be an ongoing process that they have to continually be mindful

about after surgery and monitor very carefully,” says Dr. Fuller. “One aspect of our program that distinguishes us from other programs is that we have more of an infrastructure that allows us to maintain long-term relationships with our patients. Though many of those patients will have achieved their weight loss goals, we keep seeing our patients and keep treating them so that we can have better outcomes for our patients.”

Nash agrees and meets with Riggs regularly to help keep her on track.

“She knows that the default is weight regain and that’s why it’s so hard. She knows that unless you’re doing something every day for the rest of your life, you can’t have that continued success. You have to be on your A-game every day,” Nash says.

Regular exercise is also an important component of long-term weight-loss success. Riggs regularly walks, rides a bicycle, weight trains and does Pilates. Over time, her weight dropped from 245 to 129, her BMI fell to a healthy 24 and she went from wearing a size 18 to a size 2. She has also been able to stop all but one medication and no longer needs knee surgery.

Her health has done a complete 180, which, for many patients, is not unusual. Dr. Fuller has seen patients’ musculoskeletal problems improve after bariatric surgery—people who needed assistance with walking no longer need their canes, walkers or scooters, and certain patients with diabetes, hypertension and obstructive sleep apnea make dramatic improvements or resolve their issues entirely.

“We see this routinely as bariatric surgeons, the kind of success that Elizabeth had,” he says. “It’s been widely promulgated now about the successes of these surgeries as a treatment for

Elizabeth says she couldn’t have done it alone. She’s grateful for her Scripps care team and her support system on the home front: her husband, Michael, daughter, Brianna, and grandson, Diego.





individuals with that level of obesity as a disease. This is not unusual. This is what we expect for our patients.”

Riggs’ self-confidence has improved, too—her smile is bigger, her eyes are brighter and she’s finally able to enjoy shopping for clothing that makes her feel happy and flatters her newly slim figure.

“I’ve been dealing with my weight for so many years. I realized I’ve been buying clothes for almost 26 years, just buying for the moment. Half of my life, I’ve been dealing with that, but I did not understand,” she says. “If you asked me two and a half years ago, ‘Are you thinking about bariatric surgery?’ I would say no because it’s something very drastic. I feel very grateful and blessed that I had this change in my life.”

Riggs also feels it’s her duty to share her experience in hopes of inspiring others. She says when she discovered there was a lack of information and first-person accounts directed toward the Spanish-speaking community, she made it her mission to contribute her own and write a Spanish-language book that details her journey through childhood, marriage, starting a family, divorce, finding love again, and all the feelings that came with it—good and bad.

“It’s a lot of good memories, other ones, not too good,” she says. “But they are all part of one life that goes through so many things that at the end was what took me to health.”

She also gives special thanks to her “amazing” Scripps care team that includes Dr. Fuller and Janet Nash; as well as others including her internal medicine physician, cardiologist, orthopedic surgeon, endocrinologist, pulmonologist and weight management and nutrition specialist. It has also been important for her to have a strong support system at home—her husband, Michael, daughter, Brianna, and grandson, Diego, have been cheering her on and supporting her new way of life.

Fuller says he hopes Riggs’ transformation can show others that health is possible.

“Seeing the progress from a patient like Elizabeth and seeing the joy and hearing about all of the things that she’s doing now that she wasn’t doing prior to surgery and how it has altered her life in an extraordinarily positive way, I hope is a motivating factor for the patients out there who are struggling,” says Dr. Fuller. “Elizabeth is an inspiration. You can tell from the moment you meet her that there is a spark to her.”

To learn more about bariatric surgery and other weight loss management options available at Scripps, visit [Scripps.org/SDBariatric](https://www.scripps.org/SDBariatric).

## “Elizabeth is an inspiration. You can tell from the moment you meet her that there is a spark to her.”

- William Fuller, MD, Scripps Clinic



# Surgical Solutions for Obesity and Related Conditions

**FOR SOME PATIENTS** with obesity who have not had success with traditional weight-loss methods, bariatric surgery could be a catalyst to improved health. At Scripps, experienced bariatric surgeons regularly perform several types of surgical procedures that have the power to drastically change or even prolong a person's life.

"For patients who need to lose 60, 80, or over 100 pounds, there's no better option out there that even comes close to what weight loss surgery can provide," says Mark Takata, MD, Scripps Clinic bariatric surgeon. "When you look at benefits of weight loss surgery, you look at weight in general, improvement in medical problems and quality of life—all three are tied together. Overwhelmingly, patients say that their biggest regret is that they didn't do it sooner."

Scripps surgeons perform various procedures that reduce the size of the stomach. The most common are Roux-en-Y gastric bypass and vertical sleeve gastrectomy. Both gastric bypass and the gastric sleeve, as they're commonly known, along with the third option, laparoscopic gastric banding, work in similar ways. The amount of food the stomach can hold is restricted, so patients must eat smaller portions. Bariatric surgery also triggers hormonal changes that help reduce hunger and increase the feeling of fullness.

Roux-en-Y gastric bypass is widely accepted as the most effective form of weight loss surgery. Patients can expect to lose up to 80 percent of their excess body weight, most of which will come off in the first year or so. In a gastric bypass, the surgeon sections off a small pouch at the top of the stomach using staples, then attaches the new smaller stomach to the middle portion of the small intestine, "bypassing" the rest of the stomach and first part of the small intestine. However, the sectioned off stomach and small intestine are kept intact so they can still make and release digestive juices to help break down food. Gastric bypass works in two ways: it reduces the size of the stomach and bypasses part of the intestine that absorbs calories.

"Gastric bypass entails shrinking the size of the functional stomach and reconnecting the intestine," says Dr. Takata. "Both of those things enhance weight loss, and there's also the benefit of decreased appetite. There are physical effects, but also metabolic and physiologic effects that all work in the same direction of weight loss benefit."

In a vertical sleeve gastrectomy (also called a gastric sleeve resection), the surgeon forms a skinny, banana-

shaped pouch using about 20 percent of the stomach and removes the other 80 percent. The new stomach holds only around two ounces of food, and the shape slows the movement of food, allowing the patient to feel fuller longer. Weight loss is typically slower and less drastic than with gastric bypass (60 percent compared to 80 percent with gastric bypass), but the risk for complications is lower.

"With the sleeve gastrectomy, the stomach is stapled in a way to create a narrow conduit, a new narrow stomach, and the excess stomach is removed entirely from the abdomen," says William Fuller, MD, Scripps Clinic bariatric surgeon. "That differs from gastric bypass surgery, because in that procedure, the stomach is stapled in such a way that creates a new gastric pouch, a small reservoir, and the intestines are then reconnected to this new stomach."

One of the latest procedures available to patients at Scripps Memorial Hospital La Jolla is single anastomosis duodeno-ileal bypass with sleeve gastrectomy, also known as SADI. Scripps is one of the first bariatrics providers in Southern California to offer this option people who are considered morbidly obese with a BMI of 50 or higher.

"The SADI procedure was pioneered by surgeons in Spain," says Sunil Bhojwala, MD, Scripps bariatric surgeon. "We're thrilled to bring this procedure to San Diego. We're seeing positive outcomes and are reassured by the results in patients who have struggled with super obesity and others who have regained their weight after a sleeve gastrectomy."

Another surgical option is to restrict the size of the stomach with a device known as a gastric band. Sometimes referred to as lap-band, short for laparoscopic gastric banding, this procedure gives patients an option that is adjustable and reversible. A band that contains saline is placed around the upper stomach, dividing it into a small upper pouch and a larger lower pouch. Though Scripps surgeons no longer implant gastric bands, for those who already have the device, they can adjust the opening between the sections to increase or decrease how much and how quickly food gets through. Patients who are struggling to lose weight with their gastric band may also have the device removed then receive a gastric sleeve or bypass procedure.

Scripps bariatric surgeons employ the latest minimally invasive techniques. By using a few small incisions during surgery instead of making one large incision, patients may experience less pain, shorter hospitalization, decreased risk of complications, shorter recovery time and better cosmetic results.

"In many of these cases, the risks of surgery are tenfold less than what they used to be," says Dr. Fuller. "It's clear that these techniques are superior to the open techniques. Surgeries done minimally invasively have tremendous benefits to our patients."

To learn more about these and other leading-edge surgical solutions, visit [Scripps.org/SDSurgicalWeightLoss](http://Scripps.org/SDSurgicalWeightLoss).



# Medically Supervised Weight Management at Scripps

**Specialists give patients the tools to lose weight and keep it off—with or without surgery**



**ACCORDING TO THE CENTERS FOR DISEASE CONTROL AND PREVENTION**, nearly 42 percent of American adults are affected by obesity, which puts them at risk for numerous health conditions, such as type 2 diabetes, heart disease, stroke, hypertension, osteoarthritis and several types of cancer. While the potential consequences of carrying excess weight are well-known, many people still struggle to shed the extra pounds—even in a city as fit as San Diego. People affected by increased body weight may face numerous physical, emotional and social challenges. But Scripps has many options for patients who need help achieving their weight loss goals.

Scripps Clinic Center for Weight Management and Bariatric Surgery is one of the most comprehensive weight loss programs in the region. The center's specially trained, compassionate, multidisciplinary staff has empowered thousands of patients to lose weight, maintain their weight loss, and adopt healthy and sustainable lifelong habits safely and effectively.

"When I first meet somebody, my job is to figure out why they're unable to lose weight, talk about their weight history, figure out if there's a medical condition or medication that is contributing to their weight and then figure out the best plan for them moving forward. For some people, that does involve bariatric surgery, but for a lot of people, it doesn't," says Samantha Harris, MD, a Scripps Clinic endocrinologist who specializes in weight management and diabetes care.

Dr. Harris and her colleagues at the Scripps Clinic Center for Weight Management and Bariatric Surgery design individualized weight loss programs based on leading research and evidence-based approaches. The center focuses on what Dr. Harris calls the five pillars of weight loss: diet, exercise, mental health, medication and surgery. Physicians craft personalized plans that address patient needs. For instance, many patients undergo resting metabolic rate testing and have a registered dietitian build a meal plan that accurately addresses their caloric needs. Their metabolism may be retested as they lose weight, and their diet is adjusted accordingly. A patient's plan may also include weight loss medication, or medication that targets an underlying condition that can cause weight gain—such as depression, anxiety,

stress or comfort eating, or a binge eating disorder. There is also behavioral support, one-on-one nutritional counseling, professional life and health coaching and support groups, all of which may be beneficial regardless of how many weight loss methods a patient has tried before. For patients who are considering, or have already undergone bariatric surgery, the center offers a wealth of supportive services, such as bariatric surgery support groups to help patients share their experience with others in the same position.

"It really just depends on what the patients need," says Dr. Harris. "Most people who try to lose weight are experts in weight loss—they've read so many books, they've tried so many things. It's not necessarily about the knowledge; it's accountability and support."

Dr. Harris notes that the Scripps Clinic Center for Weight Management and Bariatric Surgery and its medically supervised weight loss programs are world-class. Scripps' center is among the largest insurance-based weight loss clinics in the country and its offerings are based on research and best practices. The center is staffed by endocrinologists; surgeons; certified diabetes educators and other highly trained staff who specialize in weight management, obesity and bariatric surgery; and advanced practice providers. Scripps Clinic Center for Weight Management and Bariatric Surgery also collaborates with the Scripps Clinic Nutrition and Metabolic Research Center to explore new methods to help people with weight issues and conduct clinical trials for possible new treatments for obesity, diabetes and hypertension.

"The key word is 'individualized,'" Dr. Harris says. "There are so many one-size-fits-all clinics out there. We're treating this disease and all of its associated medical conditions. It's not just a quick fix. I'm so proud of how our clinic is different."

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- Samantha Harris, MD,  
Scripps Clinic

Find out more. Visit [Scripps.org/SDWeightManagement](https://www.scripps.org/SDWeightManagement).



# A Weight Loss Game Changer

**WHILE THERE IS NO “MAGIC BULLET”** when it comes to weight loss, new pharmaceutical drugs on the market are giving hope to people who struggle to maintain a healthy weight. Medications, such as Wegovy, available by prescription only, contain an injectable form of a gastrointestinal hormone known as GLP-1. The hormone is a semaglutide that was formerly used in lower doses to treat diabetes, which helps to regulate appetite. When combined with diet and exercise, they can help patients who are overweight or obese lose up to 15 percent of their body weight over time.

The medication is approved for adults with a body mass index of 30 or more, or 27 or more if they have at least one coexisting weight-related medical problem, such as type 2 diabetes, high blood pressure or high cholesterol. It—and similar drugs that will soon be on the market—are a “game changer” in the battle against obesity, says Ken Fujioka, MD, director of the Nutrition and Metabolic Research Center at Scripps Clinic.

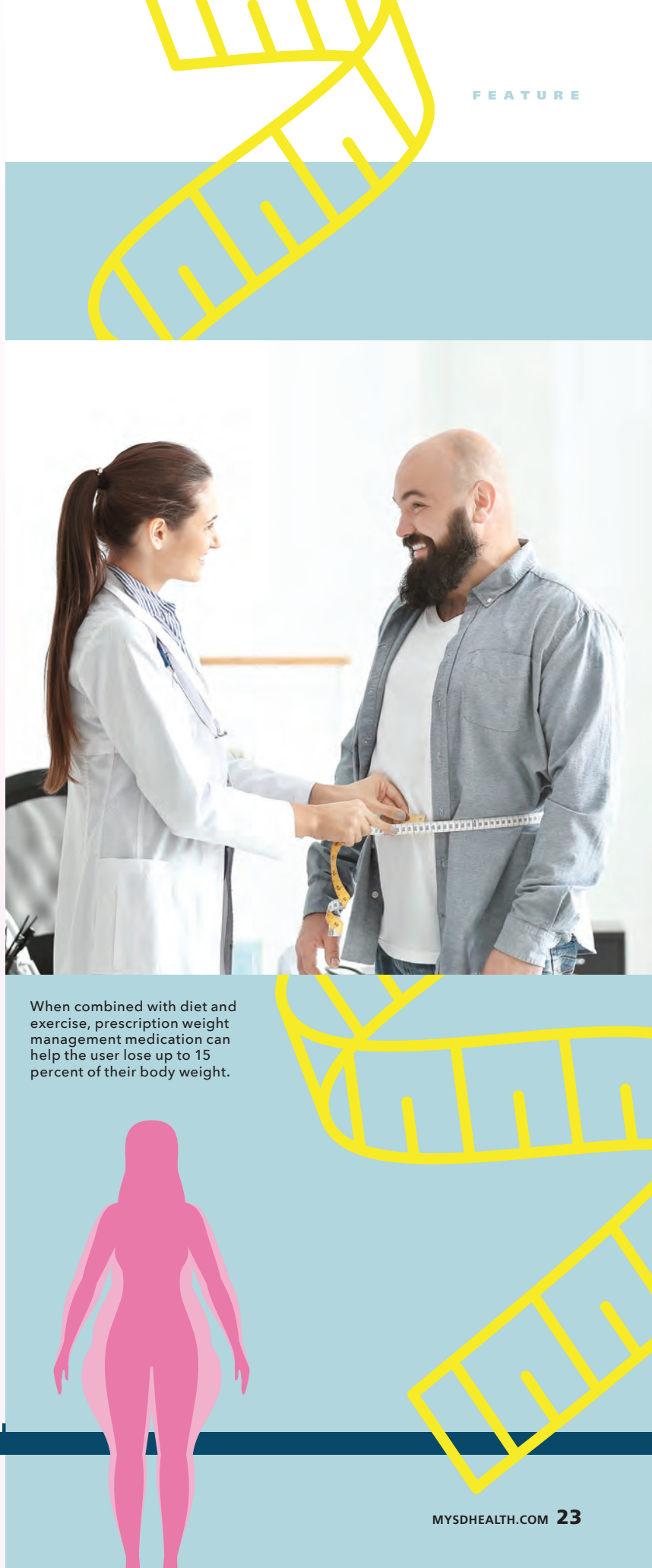
“Forty percent of the US population is truly obese,” he says. “That means their lifespan is clearly shortened because of their weight.”

For many, losing weight and keeping it off takes more than will power. Our bodies are hard-wired to hang on to excess fat to avoid starvation and can’t tell the difference between an intentional diet and legitimate famine. Once the pounds start coming off, your body will slow down your metabolism to compensate. The real kicker is that your metabolism won’t ever bounce back. For every 2.2 pounds you lose, your metabolism permanently lowers by 30 calories, Dr. Fujioka says. This makes it harder to maintain weight loss and much easier to gain it back—and then some—which prompts a new problem. When you gain more weight than you lost, your body will establish a new set point and will think that higher weight is the normal weight, continually trying to stay at that higher weight. The semaglutide helps override that response.

“When we get food into our small intestine, we release a hormone called GLP-1 and a couple other hormones that go to the brain and tell us to stop eating and tell the brain it’s okay to lose weight. We copied that hormone,” Dr. Fujioka explains.

The medication could mean weight loss success for a lot of people, with few, if any, side effects. But there’s a catch: it is pricey and not always covered by insurance. It’s also not yet available in generic form. However, Dr. Fujioka says that it will actually save money in the long run when it comes to health care costs helping patients avoid weight-related medical problems that end life prematurely.

For more information, consult your primary care physician or an obesity medicine specialist. Learn more at [Scripps.org/SDWeightMed](https://www.scripps.org/SDWeightMed).



When combined with diet and exercise, prescription weight management medication can help the user lose up to 15 percent of their body weight.



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# Spotlight

SCRIPPS HELPS HEAL, ENHANCE AND SAVE LIVES

## Innovations in Orthopedic Surgery

Scripps has always been on the leading edge of orthopedic medicine and is now making innovative surgical care more convenient and accessible. Advanced technology and expanded capabilities in the orthopedics field are making invasive procedures and extended hospital stays things of the past for many patients. Their surgical needs can be better met through outpatient procedures that allow them to receive the same world-class care but recover in the comfort of their own homes. Orthopedics is changing for the better, and Scripps is at the forefront.

Technology is changing the field of orthopedic surgery, leading to faster recoveries and increased patient satisfaction.



Scripps Clinic orthopedic surgeon Tianyi (Tim) Wang, MD, in one of the surgical suites at Scripps' newest outpatient surgical center, the Ambulatory Surgery Center at Scripps Medical Center, Jefferson.

*"We've got a qualified, experienced team at Scripps that's on the leading edge of orthopedic care."*

—TIANYI (TIM) WANG, MD, SCRIPPS CLINIC

# OUTPATIENT ORTHOPEDIC EXCELLENCE

**Scripps delivers innovative surgical care to patients on an outpatient basis throughout the region**

Delivering quality care to the community is at the heart of Scripps' mission, and its orthopedics program is a pillar of that excellence. In fact, Scripps' program earned U.S. News & World Report's top spot for the San Diego region for 2022-2023\*. The rankings, which evaluated 1,660 hospitals across the nation, also named Scripps among the best orthopedics programs in California and the entire U.S.

Scripps' orthopedic surgeons see patients with a wide range of conditions, many of which can now be treated on an outpatient basis thanks to advances in technology and technique. This includes both common and complex procedures, such as hip and knee replacements; spine surgery; hand, wrist and elbow surgery and treatment for sports-related injuries. Outpatient surgery allows patients to spend less time in the hospital and recover in the comfort of their own homes, without sacrificing safety or quality of care.

Scripps' ambulatory surgery centers are equipped with state-of-the-art technology, including specially designed operating rooms, microscopic and robotic support for surgical care and comfortable patient recovery rooms. Scripps' centers are also equipped with advanced diagnostic tools, such as computed tomography and magnetic resonance imaging, as well as X-ray capabilities. The availability of a wide range of outpatient surgeries boosts patient satisfaction, says Steven Copp, MD, chair, Scripps Clinic Department of Orthopedic Surgery.

"This is the apex of specialty care, says Dr. Copp. "Many procedures can now be performed in a minimally invasive way and we can control pain, which allows us to get patients up the same day of surgery allowing them to recover quickly.

## LEVERAGING TECHNOLOGY FOR BETTER OUTCOMES

Tianyi (Tim) Wang, MD, a Scripps Clinic orthopedic surgeon who specializes in sports medicine, says repairing damaged cartilage is just one area that sets Scripps apart. The cartilage in joints doesn't have much healing capacity on its own and, until recently, was thought of as unfixable. The traditional course of action was to allow it to deteriorate until it reached the point a joint replacement was warranted. However, the skilled orthopedic surgeons at Scripps favor early intervention and have the ability to replace damaged cartilage using tissue grown with advanced bioengineering techniques from the patient's own cells or from a donor.

"These are procedures that didn't exist 10, 20 years ago, and are procedures that not very many surgeons perform," says Dr. Wang. "Fortunately, we've got a qualified, experienced team at Scripps that's on the leading edge of orthopedic care."

Procedures like this and new muscle-splitting techniques used by Scripps surgeons are at the forefront of orthopedics, and in many cases allow patients to return to their active lifestyles sooner. Scripps' multidisciplinary care model also plays a role in getting patients back on their feet faster. Although the surgery may be same day, the care team crafts a comprehensive plan with every detail from the weeks leading up to the surgery through the patient's recovery. That can include administering medication to control pain and inflammation prior to a joint replacement, using a numbing agent, such as an epidural or regional anesthesia during the procedure (as opposed to general anesthesia), and coordinating physical therapy afterward.

"In collaboration with our research team at Shiley Center for Orthopaedic Research and Education (SCORE), we're at the leading-edge of innovations in joint health, joint preservation and cartilage repair—and our patients benefit from these advancements," says Dr. Wang.

## EXPANDING SURGICAL CARE OPTIONS IN NORTH COUNTY

Throughout the Scripps system, ambulatory surgery centers give patients access to an array of services all under the same roof. The newest, at Scripps Medical Center, Jefferson, in Oceanside, is a comprehensive surgical center for a variety of specialty areas. For patients who need orthopedic care, there is a full staff of specialists, including a hand surgeon, sports medicine surgeon, foot and ankle surgeon, non-operative podiatrist, a joint replacement surgeon and a pain management physician. The surgical team is supported by specially trained nurses and surgical staff members who assist as needed.

The scope of surgeries includes hip and knee replacements, ankle replacements, cartilage transplants, shoulder surgery and ligament reconstruction. With advanced technology in the outpatient setting, surgeons can treat complex joint issues.

## HAPPIER, HEALTHIER PATIENTS

Outpatient procedures allow patients to avoid many of the risks that come with an extended hospital stay.

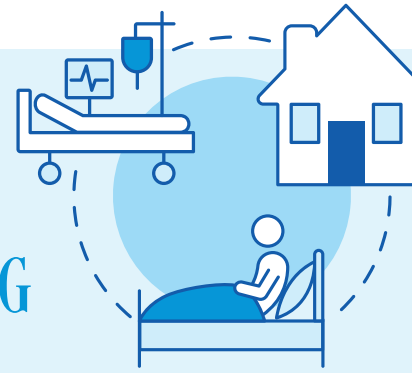
"When you think of hospitalizations for elective surgeries, patients risk exposing themselves to hospital-based diseases," Dr. Copp says. "With outpatient procedures, patients can return to the environment that they are most comfortable. In many cases, it's their home, which is conducive to healing."

Being able to easily access surgical care while having the option to recover at home also means patients are more likely to address their health care challenges sooner rather than delaying treatment because of the inconvenience.



**TO LEARN MORE ABOUT OUR INNOVATIVE  
ORTHOPEDIC CARE THROUGHOUT SAN DIEGO,  
VISIT [SCRIPPS.ORG/SDORTHOCARE](https://scripps.org/sdorthocare).**

# INCREASING ACCESS TO OUTPATIENT CARE



Outpatient surgical care isn't just for orthopedics. The latest technology and advancements in medicine combined with clinical expertise can benefit patients in a wide array of specialties, including gastroenterology, gynecology, dermatology, ophthalmology and general surgery. Scripps ensures that patients get the right care close to home with outpatient surgery centers conveniently located throughout the region.

Outpatient surgery allows patients to go home sooner and recover in the comfort of their own homes.





# Here for Good

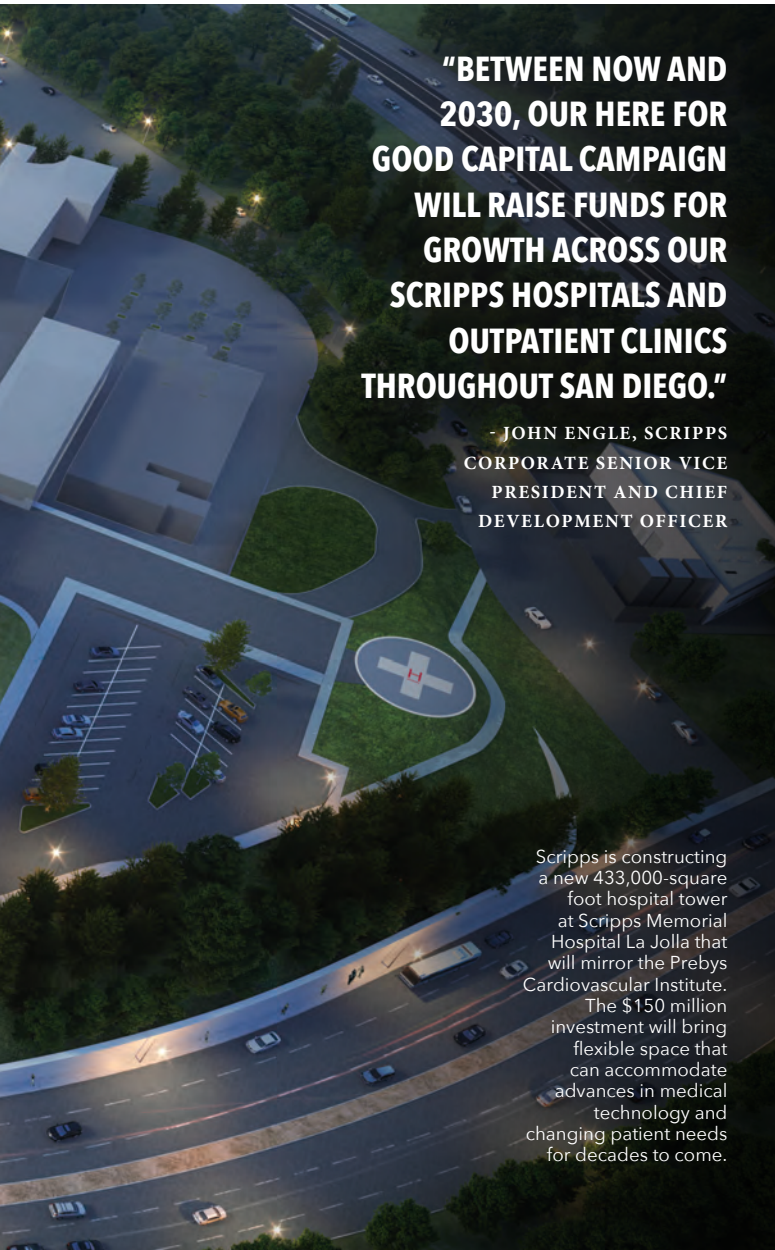
Community Support Helps Fund a New Hospital Tower at Scripps Memorial Hospital La Jolla





➔ **BIG CHANGES ARE UNDER WAY AT SCRIPPS MEMORIAL HOSPITAL LA JOLLA.** The campus is expanding, and a focal point is construction of a new, 433,000-square-foot hospital tower, which is part of the master plan for the campus during the next decade. Philanthropy is at the heart of the Scripps legacy since the organization was founded by an extraordinary philanthropic gift from Ellen Browning Scripps nearly a century ago—and continues today thanks to generous donors who support medical excellence and help meet the changing needs of the community.

“Between now and 2030, our Here for Good capital campaign will raise funds for growth across our Scripps hospitals and outpatient clinics throughout San Diego,” says John Engle, Scripps corporate senior vice president and chief development officer. “At Scripps Memorial Hospital La Jolla, an additional \$150 million in community support is needed to build the new, state-of-the-art hospital tower adjacent to the Prebys Cardiovascular Institute, and reimagine the entire campus. It’s about providing the best care for our patients and in the best setting—and our donors help make that possible.”



**“BETWEEN NOW AND 2030, OUR HERE FOR GOOD CAPITAL CAMPAIGN WILL RAISE FUNDS FOR GROWTH ACROSS OUR SCRIPPS HOSPITALS AND OUTPATIENT CLINICS THROUGHOUT SAN DIEGO.”**

— JOHN ENGLE, SCRIPPS  
CORPORATE SENIOR VICE  
PRESIDENT AND CHIEF  
DEVELOPMENT OFFICER

Scripps is constructing a new 433,000-square foot hospital tower at Scripps Memorial Hospital La Jolla that will mirror the Prebys Cardiovascular Institute. The \$150 million investment will bring flexible space that can accommodate advances in medical technology and changing patient needs for decades to come.

## NEW HOSPITAL TOWER ADDS INNOVATION AND CONVENIENCE

With expected completion in 2025, the new tower will feature 96 medical/surgical rooms, 12 “flex” rooms that can be used for medical/surgical or intensive care, nine operating rooms with two for robotic surgery, 51 pre- and post-surgery beds and 12 observation beds. The plan focuses on patient-centered care with private rooms, designated family areas and nurses’ stations near patients, as well as investments in making the hospital a “smart” facility with the latest digital technologies.

“Technology and medical science are rapidly advancing,” says June Komar, Scripps corporate executive vice president and chief of staff. “This tower will incorporate elements to continually enhance patient outcomes, quality and safety, through investment in state-of-the-art medical equipment and innovative information tools for care support and clinical predictive analytics. Digital technology will also enable patients to easily connect with their care team, view their medical information, review education materials customized to their treatment, and enjoy a broad range of hospitality and entertainment features. It’s exciting to be able to provide exceptional patient care and patient experience for years to come, in this advanced care setting.”

Komar adds that the new tower is designed with maximum flexibility to accommodate changes as technology and trends in health care continue to advance.

## COMPREHENSIVE WOMEN’S CENTER FOR SPECIALIZED NEEDS

Another anchor of the new tower will be a three-floor dedicated women’s center, which will include a labor and delivery floor with private rooms, operating rooms, antepartum rooms and a family waiting area with an outdoor patio. In addition, there will be an expanded, 18-bed neonatal intensive care unit capable of providing specialized care for premature babies and those with health concerns at birth.

“The women’s center is such an important addition to Scripps La Jolla,” says Lily Tsai, MD, a Scripps Clinic obstetrician and gynecologist, and minimally invasive gynecologic surgeon. “The idea is that we really want to be able to take care of women in all phases of their lives and having that ability in one comprehensive center helps meet that goal.”

Designed to promote health and healing, the women’s center will feature private rooms, calming colors, large windows and natural lighting, sitting alcoves, a nursery overlooking a rooftop garden and a boutique.







↑ The new hospital tower will be home to a dedicated women's center that will house numerous specialists and services, including a state-of-the-art NICU. The women's center is designed with patient comfort and convenience in mind, and will feature spacious private rooms, wireless technology, calming colors and ample natural light.

\*Scripps La Jolla Hospitals and Clinics, 2022-2023

The center will also be equipped with state-of-the-art amenities to increase patient comfort, such as remote fetal monitoring technology, labor tubs, birthing balls, candles, aromatherapy and natural lighting. There will also be enhanced space for caregivers, which will allow for more educators and lactation consultants onsite. Plus, there is added space for an array of specially trained staff, including obstetricians and maternal-fetal medicine specialists, who provide preconception counseling to women, as well as handle high-risk pregnancies and deliveries.

"A lot of thought was given to how the family will experience that environment and what it means to have more of a holistic, comprehensive, connected, coordinated approach to their care," says Amy Meier Foundos, RN, Scripps director of women's and newborn clinical services. "That played out in not only in the design, but in thinking through what kinds of patients we are going to see. We can offer customized, comprehensive services to any mom who is anticipating a delivery at Scripps La Jolla."

## HERE FOR MEDICAL EXCELLENCE. HERE FOR GOOD.

Scripps is recognized as one of the top 15 health systems in the nation by Merative, formerly known as IBM Watson Health, for quality care, operational efficiency and patient experience in 2022-2023. U.S. News & World Report also ranks Scripps as one of the nation's best hospitals in five specialty areas.\*

Scripps has invested in the community and has a trusted legacy of caring for San Diegans longer than any other health system in the region. As part of a nonprofit health care system, philanthropic support will ensure that Scripps Memorial Hospital La Jolla will continue to be a premier destination for a full range of patient care needs in a state-of-the-art healing environment.

The campaign includes naming opportunities for the new hospital tower and the women's center, in addition to individual floors, units, waiting rooms, gardens, exam rooms and operating rooms, plus general donations can be made to help fund the tower's most pressing needs. Generous donors have already made gifts to fund a surgical pavilion, patient rooms and cafeteria meeting rooms.



TO LEARN MORE ABOUT WAYS YOU CAN GIVE FOR GOOD TO THE HERE FOR GOOD CAMPAIGN AND SUPPORT SCRIPPS MEMORIAL HOSPITAL LA JOLLA, VISIT [SCRIPPS.ORG/SDHEREFORGOODLJ](https://scripps.org/sdhereforgoodlj).



# A Party with Purpose

Spinoff benefits  
Scripps MD Anderson Cancer Center

**S**CRIPPS' 29TH ANNUAL SPINOFF July 21 raised \$800,000 for Scripps MD Anderson Cancer Center. The elegant, Tavern on the Green-themed rooftop event at Scripps Memorial Hospital La Jolla featured a three-course dinner, live entertainment and cocktails, plus a silent and live auction that included unforgettable trips and unique experiences. The funds raised support recruiting world-class specialty care clinicians, as well as fund Scripps MD Anderson multidisciplinary clinics, infusion centers and radiation therapy centers with some of the most advanced technology available to detect and treat cancer. Spinoff honored visionaries John Trombold, MD, William Stanton, MD, Charles "Skeets" Dunn and Karen Gabsch, who made a profound impact during their lifetimes to support Scripps cancer patients and cancer care throughout the San Diego region.

Continued on page 32 →



Rapid COVID-19 molecular testing provided to all event attendees prior to entry.

**From top:** Scripps President and CEO Chris Van Gorder welcomes Spinoff attendees; the Scripps Memorial Hospital La Jolla rooftop adorned with Tavern on the Green-themed decor; Scripps supporters enjoy the early evening event.



29TH ANNUAL  
*Spinoff*



→ Continued from page 31



**Clockwise from top:** Mark Zangrando, Lisl Stanton, Lois Stanton and Craig Smith; Sharon Daly, Jessica May and Marcia Trombold; Gauree Konijeti, MD, Scripps Clinic; Lynda and Fred Allen; Patra Glavin, Sharon Dunn and Suzanne and Brad Livingston; Suzanna Gabsch, Jason Gabsch, Orrin Gabsch, Tracy Leigh Frederick and Clint Kruger.



TO FIND OUT ABOUT UPCOMING SCRIPPS EVENTS, VISIT [SCRIPPS.ORG/SDEVENTS2022](https://scripps.org/sdevents2022).



# A Superhero for Patients

**T**OLUWALASE AJAYI, MD, a palliative care physician at Scripps MD Anderson Cancer Center, says she had three career options as a young girl: a superhero, a stand-up comedian or a pediatrician.

Today, she holds at least two of those titles (though some may argue all three). The Nigerian-born mom of two recently became the first Black woman and the youngest president of the San Diego County Medical Society.

Her passion for medicine is rooted in her upbringing as an immigrant and the work ethic and tenacity of her parents. Dr. Ajayi hopes to use the honor of leading the San Diego County Medical Society to highlight disparities in the health system that she and countless others have experienced.

“When I emigrated from Nigeria at the age of about 7, I went through a public health system that made me feel less than human,” she says. “It made me feel dirty and unwanted. I told my mom then that I wanted to be a doctor for children, so they always feel cared for.”

Dr. Ajayi also plans to work with various health systems to focus on physician wellness, which was impacted significantly by the pandemic.

“COVID-19 heightened the burnout that so many of our colleagues were already feeling and compounded an already significant workforce shortage,” she says. “I want to highlight how the physician experience truly goes hand-in-hand with patient wellness.”

When Dr. Ajayi is not leading the local health care industry, she is spending time with her husband, a physician with another local health care system, and her children, ages 4 and 15 months, and 12-year-old stepson. She enjoys taking the kids to dance classes, swimming, tennis and their other hobbies, and in her free time, she runs and cooks. To juggle life as a busy working parent, she remembers to give herself grace.

“I know that it’s okay that I sometimes have to either prioritize work or family first—they can’t both be first all the time. This allows me to focus on one aspect and lean on my support systems for the other part. I do the best I can, and so far, it’s been working,” she says.

Dr. Ajayi also hopes her presence and purpose will inspire others.

She may be the first Black woman to lead the San Diego County Medical Society, “but I opened the doors for so many more to come after me,” she says. “I helped show how much we can truly accomplish for the betterment of others, when we work together.”



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\*The Economist. "The Employer Imperative: Driving US Economic Vitality through a Healthy, Productive Workforce." Survey conducted by the Economist Intelligence Unit (EIU), commissioned by Cigna, in January and February 2021 among 1,200 consumers and 600 executives. <https://healthyworkforce.economist.com/infographic/> last accessed January 7, 2022.

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