

HEARTFELT GRATITUDE



When Keisha Childs experienced mysterious chest pain, White Plains Hospital and Montefiore provided the answers—and care—she needed.

**BY DEBORAH SKOLNIK
PHOTOS BY KEN GABRIELSEN**

SOMETIMES, THE SYMPTOMS

of a health problem are so subtle, they're easily overlooked. Other times, a warning sign can be swift and severe. That's the kind of red flag that Keisha Childs of Mount Vernon experienced one evening in January 2021. "I was up pretty late working, and I felt chest pain," recalls the 48-year-old teacher, who works at Lewis and Clark School in the Bronx. "It was very, very strong."

Childs saw her doctor the next day and then underwent a battery of tests over the following week, including a chest X-ray and an EKG. To her frustration, no abnormalities were detected. "My doctor told me everything was fine," she remembers. "I didn't feel comfortable with that because it was really weird."

The next several months brought still more episodes, often after Childs had just been physically active. The flare-ups were less intense than the first one but still enough to halt her in her tracks. "I would just stop what I was doing and maybe hold on to something," she shares. By late fall, the chest pain was occurring as often as twice daily. "I would dread going up my steps inside my house," Childs says. After a particularly bad day in early November, she visited an ER but was sent home with only blood pressure pills.

ACCESSING EXPERTISE

Childs knew she needed real answers and secured a next-day appointment with Dr. Gregory Neufeld, a cardiology specialist who practices at Montefiore Medical Group-Cross County in Yonkers.

Dr. Neufeld listened carefully as Childs described her symptoms and then administered an EKG, which turned out to be abnormal. Given that information, as well as the fact that Childs was suffering frequent bouts of chest pain, he made a recommendation: Childs should go see the specialists at White Plains Hospital.

Though it wasn't good news, in a sense it was Childs' lucky day. She was about to be cared for by an extraordinary assemblage of medical professionals. The Cardiac Surgery Program Director at White Plains Hospital is the world-renowned Dr. Robert E. Michler, who holds an array of titles that reflect his leadership and astonishing mastery of his field. He is the Surgeon-in-Chief of the Montefiore Einstein Health System, as well as Chairman both of the Department of Cardiothoracic and Vascular Surgery and of the Department of Surgery. In addition, he is a professor and Endowed Chair at Montefiore Einstein.

He is also regarded as a leader in several specialties, including complex cardiac surgery, valve repair surgery, and ventricu-



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lar reconstruction for heart failure. For those needing minimally invasive cardiac surgery there is no finer expert, yet he is equally skilled in heart transplantation. In addition, he has personally performed well over 5,000 open-heart operations and has published multiple articles in the *New England Journal of Medicine* on cardiac surgery and its benefits. Dr. Michler has also been named a Mitral Valve Repair Reference Surgeon by both the American Heart Association and the Mitral Foundation for the exceptional work he has done. It's a rare commendation, one held by a mere handful of surgeons in the United States.

Well before the program began treating its first patient, in November 2021, the team went through extensive preparation, which included multiple simulation activities and the coordination of every member of the team, who were "handpicked by me as part of the process. And this includes persons who we felt were at the highest level in their personal areas of care," Dr. Michler shares.

These highly skilled professionals have a common goal: providing the highest-quality care. "White Plains Hospital has a culture that

has long focused on patients and their families. So, it is really an opportunity to combine what has been the longstanding reputation of White Plains Hospital with the excellence of care provided by this heart surgery team," Dr. Michler explains.

ESTABLISHING A CLEAR COURSE OF ACTION

Just two days after meeting Dr. Neufeld, Childs was in the cardiac catheterization lab at White Plains Hospital. Dr. Dimitrios Bliagos, Chief of the Section of Cardiology and Director of Interventional Cardiology at White Plains Hospital, performed the procedure, which showed there were 90% blockages in three of Childs' coronary arteries, which supply blood to her heart.

Dr. Michler, along with Dr. William A. Jakobleff, attending cardiac surgeon at White Plains Hospital and Associate Professor of Cardiac Surgery at Montefiore Einstein, and Dr. Bliagos all agreed on the best way to address her condition. "All three of her major heart blood vessels were critically diseased, and the only therapy that could prolong life expectancy and reduce the risk of heart attack, sudden death, and heart failure was bypass surgery," Dr. Michler says.

The operation would involve making detours around the blockages using a vein and an artery taken from Childs' leg and the area beneath her chest wall. Blood would then flow through these new routes, allowing each coronary artery to continue to

nourish her heart muscle. “Coronary artery bypass grafting, as it’s called, is essentially very fancy plumbing,” says Dr. Jakobleff. Because three of Childs’ arteries were blocked, she would need a triple bypass.

The news that this was her best option was shocking. “She was very tearful. She has three children at home,” Dr. Jakobleff recalls. “She wasn’t prepared for that; I don’t think anybody is.”

REASSURANCE AND RESOLVE

Childs met with Drs. Jakobleff and Michler a week later to discuss in depth what the triple bypass would entail. “It’s always important to have a well-educated patient, someone who understands what’s going on, and it gives a patient an opportunity to get to know their surgeon as well,” Dr. Michler says. “We take our role very personally, and we want our patients to get to know who is going to be holding their heart in their hands.”

Though the meeting was helpful, Childs was understandably still extremely nervous. Childs’ father was apprehensive as well. Then one evening before the surgery, he made a discovery that would provide him and the rest of Childs’ family with peace of mind. “While he was sitting down at his dining room table, he picked up some mail, and there was a magazine there [*Health Matters*] from White Plains Hospital,” Childs shares. “It just so happened to be talking about the brand-new heart facility. When he opened up the magazine and went to the article, they had done a spread on Dr. Michler, sharing that he was world-renowned.”

The news made Childs’ father and the rest of her family much calmer about the upcoming operation. “He called me and said, ‘Keisha, don’t worry. You have the best medical team,’” Keisha says. “My aunt and sister were telling me, ‘You have nothing to worry about because it’s almost like this is destiny.’”

UNDERGOING AN IMPORTANT OPERATION

Childs’ surgery was scheduled for the Monday after Thanksgiving. Though the idea behind the procedure is straightforward, the operation is very demanding technically as the surgeons work to create bypasses around the clogged areas of her three coronary arteries. To accomplish this feat, Drs. Michler and Jakobleff had to use sutures that were literally microscopic.

The operation, which only took about an hour for all the suturing of blood vessels on the heart, took about five hours in total because the anesthesia team and surgical team performed much prep work. The operation was a complete success.

Dr. Michler and Dr. Jakobleff perform every heart operation together as a team, providing every patient with their combined decades of experience and skill.

Childs stayed at the hospital for five days before her release, all while remaining in the same bed and room. “It’s a concept called a universal bed,” Dr. Jakobleff shares.

“The patient remains in that same bed or in that same room for her entire stay. As the patient’s medical needs become fewer, their level of care is de-escalated. So, patients go from the ICU setting to a step-down setting while they remain in the same room.” This spares the patients the stress of relocation, another fact that makes the program a true standout in the field. “The universal bed concept is one of the unique things we brought when we started our cardiac surgery program here at White Plains Hospital,” Dr. Jakobleff says. “Not many programs are doing it.”

That wasn’t the only thing that impressed Childs. “The nurses were great—they had a sense of humor, and they explained everything,” she remembers. “By Wednesday I was up and walking. They had me doing rounds. They asked me if I had steps in my house, and I told them I had 19 steps to go upstairs to my room. Then they had me walking up steps in the hospital, so I would be ready to handle it.” Childs was grateful that Drs. Michler and Jakobleff often came by to see how she was doing and offered her encouragement. For an extra boost, she received a large number of get-well cards from her students.

Childs marveled at how little pain she experienced following the operation. Dr. Michler wasn’t surprised. “With current techniques, pain is not a major aspect,” he says. “I have had scores of patients over the years tell me that their knee replacement or hip replacement was more painful than their heart surgery.”

On December 4, Childs was discharged. She continues to see her surgeons regularly, so they can check on her chest incision and touch base about medications she was prescribed. They also offer her advice on scar-reduction techniques and on eating a healthy diet going forward.

Childs feels profound gratitude for the White Plains Hospital-Montefiore combo. “What I love is how they’ve streamlined everything,” she says. “White Plains Hospital is such a wonderful facility, and I love how I can communicate with the doctor one-to-one by sending text messages.” If others ever find themselves in her shoes, she adds, “I would definitely recommend Montefiore and White Plains Hospital.”•



Dr. William A. Jakobleff
and Dr. Robert E. Michler