

Fighting Back FROM Brain Cancer

As a nurse with years of experience, Sukhminder Lehar knows the symptoms of serious illness. So when she began having throbbing headaches and double vision, she felt sure something was seriously wrong with her brain. But her primary care physician didn't take her seriously. Lehar had to raise her voice to be heard. "I did my training at a cancer hospital in India, so I knew my symptoms could mean cancer," she says. "Headaches like the ones I was having are not a minor matter. Fortunately I'm not shy about speaking up for myself."

B Y M A R Y A N N L I T T E L L



This fighting spirit has kept Lehar going throughout her long ordeal with cancer. But even more important to her survival, she says, was finding Shabbar Danish, MD, a neurosurgeon and chief of neurosurgical oncology at Rutgers Cancer Institute of New Jersey, and learning about the amazing technology of laser ablation, a minimally invasive approach to treating difficult brain tumors. “Dr. Danish is the best, he’s a superstar,” says Lehar. “Before I went to him I felt so alone, overwhelmed with worry. But now I’m not alone. He’s the whole reason I’m here in New Jersey.”

Gathering Clues

Lehar’s illness began in 2008. She and her husband Ranjot lived in Louisiana and were expecting their first child, conceived through *in vitro* fertilization. Throughout her pregnancy Lehar had frequent headaches, nausea and vomiting. She powered through, assuming she’d feel better after the delivery. In October her daughter Tamanjot was born prematurely at 26 weeks. The infant faced an extended stay in a neonatal intensive care unit (NICU).

Unfortunately Lehar did not get the relief she’d hoped for. Her headaches became much worse, radiating down her neck. She went for daily massages, which helped. But once she got up from the table, the headaches returned. Anxious about her baby and her own health, she went from the NICU to her primary care physician’s office. “I told my doctor there must be something in my head, a tumor or abscess, that is causing this pain. And I cannot keep any food down,” she says. “He said it was hormonal and to give it time. I asked for a CT scan but he said my symptoms didn’t warrant it.”

Lehar’s physician eventually gave her a prescription for migraine headache medication. Waiting in the car for her husband to fill it, she became so ill that she vomited and collapsed in the pharmacy parking lot. A concerned bystander asked if he should call an ambulance. “This was my breaking point,” she says. “I went back to my physician and we had a big-time argument. He told me to go to the emergency room, but I said I wasn’t leaving without a prescription for a CT scan. Finally he gave me one, but made the appointment for two weeks away. I said, ‘I will be gone by then.’”

She went straight to the hospital. “I’d worked here before and saw a technician I knew, someone from India like me. I said, ‘Please help me. I need a CT scan.’ He squeezed me in the next morning.” The CT scan confirmed her worst fears: she had a tumor in the right frontal lobe of her brain. Surgeons removed it that same day. It was a Grade III astrocytoma, a rare, serious tumor requiring aggressive treatment.

“I was terrified,” she says. “I didn’t know if I would recover. And I had a newborn.”

Lehar had a complicated recovery. In and out of consciousness, her brain swelled and she had a second operation to remove blood clots. Gradually she regained her strength. After 33 rounds of chemotherapy and five rounds of radiation, Lehar finally felt better. She returned to work and enjoyed doting on Tamanjot, who was thriving.

Unfortunately, an MRI done in June 2014 showed a recurrence of the tumor. Her neurosurgeon said a second surgery would be extremely risky and could leave her deaf, blind, and possibly paralyzed. She went for a second opinion at a cancer treatment center in Texas, where physicians told her they could safely remove the tumor in an open procedure. “They scheduled me for surgery, but I cancelled,” says Lehar. “I was too afraid.”



Shabbar Danish, MD (above), neurosurgeon and chief of neurosurgical oncology at Rutgers Cancer Institute and director of the Laser Ablation Program at Robert Wood Johnson University Hospital, performed two laser ablation procedures on Sukhminder Lehar (right).



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A Ray of Hope

Her husband's cousin lives in New Jersey and is a nurse at Robert Wood Johnson University Hospital (RWJ), the flagship hospital of Rutgers Cancer Institute. She'd frequently called to check on Lehar's health. She put Lehar in touch with Dr. Danish, who is director of the RWJ Laser Ablation Program. "I'm thankful to our cousin – she really pushed me to come here," says Lehar. She sent her MRIs and medical records to her sister-in-law, who brought them to Danish. He reviewed them with Rutgers Cancer Institute's tumor board and they agreed she would be a candidate for laser ablation.

Years ago, Lehar had lived in New Jersey and worked at RWJ. "I know it's an excellent hospital," she says. "I started feeling more optimistic." She came to New Brunswick to meet with Danish, who offered the options of open surgery or laser ablation. "I asked him what he would recommend for a family member. He said laser ablation. I told him, just give me a date and I'll be there."

Recurrences are common in many types of brain cancer and are difficult to manage, says Danish, who is also an associate professor of neurosurgery at Rutgers Robert Wood Johnson Medical School. "We know that if you remove the tumor, patients do better," he explains. "But that is complicated when a patient has already had open brain surgery, plus radiation and chemotherapy. There are only so many times you can open the skull before you have issues with wound healing and infection. The advantage with the laser is that the tumor is removed through a minimally invasive procedure."

The laser emits light energy that destroys tumors with heat, which can be pinpointed so it will not damage healthy tissue. "With new

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technology, we can watch the process in real-time," Danish notes. "We're very experienced in using this technology. Since the laser was approved in 2009 we've done almost 250 laser ablation procedures, more than any other center in the U.S. We are the only center in New Jersey offering it on a regular basis."

Lehar's laser ablation was performed in August 2014. "The procedure begins with a navigational MRI – putting the patient's brain images into a GPS system," explains Danish. "In the operating room we place the laser into the part of the brain we are targeting. All it requires is a two millimeter opening in the skull. The patient moves back to the MRI, where the tumor is ablated with real-time MRI guidance. Recovery is quick and patients usually go home the next day."

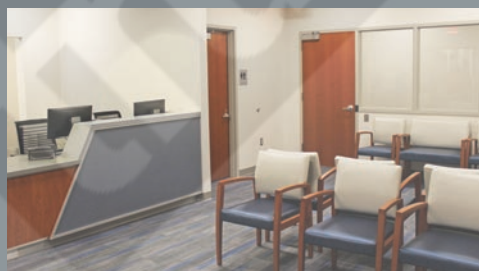
Amazed at how good she felt after the surgery, Lehar returned to Louisiana. She was back to work in two weeks and no further treatment was required. She had regular MRIs and Danish reviewed them. "He said if something happened, we would address it," she says. The thought of a recurrence was never far from her mind. So in November 2015 the family relocated to New Jersey, accompanied by Lehar's mother, to be closer to her care team.

A New Location for Busy Clinical Programs

Rutgers Cancer Institute of New Jersey's Brain and Spine Tumors Program, Head and Neck Program, Advanced Neurosurgery Program and Neuropsychology have a new home. Patients now have access to inno-

vative care at a new campus location at nearby 10 Plum Street in New Brunswick. The programs that specialize in the treatment of cancers, as well as non-cancer diagnoses, feature experts including neurosurgeons, neuro-oncologists, otolaryngologists, head and neck surgeons, radiation oncologists, neuropsychologists, nurses, and rehabilitation specialists all in one location. ■

For additional information, visit: cinj.org/plumstreet.





In Good Hands

In June 2016 an MRI showed another recurrence of the same tumor. In August she had a second laser ablation. The surgery was followed by chemotherapy, which is being administered by Robert Aiken, MD, the director of neuro-oncology at Rutgers Cancer Institute and associate professor of medicine at Rutgers Robert Wood Johnson Medical School. A great advantage of Rutgers Cancer Institute is the team approach to coordination of care across multiple disciplines.

Lehar is on a regimen of temozolomide, an oral chemotherapy that has been effective in treating some brain cancers. She takes the drug for five days every four weeks. "The chemotherapy is hard," she ad-

"For all physicians to be in one location means that patients can see more than one involved doctor at the same visit, thereby making more efficient use of their time and energies," notes Robert Aiken, MD (left), director of neuro-oncology at Rutgers Cancer Institute and another member of Sukhminder Lehar's care team.

mits. "I am very tired and somewhat nauseated while I'm taking it, but once the cycle is over I feel pretty good – well enough to be working two days a week."

"Laser ablation is new, so there is much we don't know about its long-term impact," says Danish. "What we do know is that it has made a tremendous impact on the quality of life for patients with difficult or recurrent brain tumors. They can come to the hospital, have laser ablation, and stay just one day. They quickly return to their normal life, whatever that may be. If they had to have open surgery, the hospital stay would be longer, the recovery much more difficult, and we deal with other potential complications." Danish continues to monitor Lehar for recurrence. "She is doing very well and the tumor is under control. If something else happens, we'll address it."

"I'm thankful I'm here to raise my daughter," says Lehar. "I'm in very good hands and just taking things one day at a time. I have tremendous trust in Dr. Danish, Rutgers Cancer Institute of New Jersey, and Robert Wood Johnson University Hospital." ■