

Provider Profile

Sigrid Berg, MD

Internal Medicine, Hematology, Medical Oncology

For oncologist Sigrid Berg, MD, the road from the coal fields of northeastern Pennsylvania to Waldo County General Hospital has very few straight lines.

Dr. Berg recently joined the Oncology and Infusion Therapy department at Waldo County General Hospital (WCGH). Dr. Berg previously served as the medical director of Northern Light Cancer Care at Eastern Maine Medical Center. A graduate of the Duke University School of Medicine, Dr. Berg has been caring for cancer patients for more than 20 years.

As a member of the MaineHealth Cancer Care Network, the Oncology and Infusion Therapy department at WCGH is able to provide compassionate and comprehensive care to cancer patients close to home and also tap into a network of more than 300 cancer care providers to treat patients with special needs.

To ensure patients receive the best and safest care, WCGH and the Oncology and Infusion Therapy department have put in place additional safety measures during the ongoing COVID-19 pandemic. MaineHealth encourages everyone to get vaccinated against COVID-19 as the best way to end the pandemic. Vaccinations are available at The Pharmacy at PBMC, PBMC Walk-In Care, WCGH Walk-In Care, and from our primary care providers.

To learn more about cancer care at WCGH and the MaineHealth Cancer Care Network, go to www.wcgh.org and www.mainehealth.org/cancer. To learn whether Dr. Berg actually shoveled coal, read on.

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What inspired you to go into the health care field and go to medical school?

It was a supportive high school science teacher who encouraged me to prepare for medical school or to get a PhD in bioscience. In college, I started off as a biochemistry major and took some pre-med classes.

The students there were viciously competitive and didn't seem to have their hearts in caring for people.

This turned me off and I completely changed my major, deciding instead to study Scandinavian immigration experiences in the 1800s, in part because my dad's family came over from Sweden in the 1800s.

As I prepared for graduation, the question became, what do you do with the degree in folklore and mythology? My boyfriend had moved to New York City to be an investment banker. So I moved to New York and got a job in publishing. Eventually we moved to Washington D.C., and I started working at a free clinic serving mostly immigrant and undocumented people. I felt really good about the work there and ended up going back to medical school. At first, I wanted to be a primary care provider. However, during one of my first residency rotations, I sat with a patient who had esophageal cancer and was having trouble swallowing. To see the specialist interact with this patient and his family set me on a course to work in cancer care.

Has there been an 'aha' moment that confirmed you made the right decision?

Cancer care has advanced so much in recent years, but there are still times when patients die from their cancer. And I grieve



their passing, as it feels as if we've become a part of each other's family over the time we spend together. When their loved ones reach out to thank me, it makes me realize that I'm here for a reason.

What can a patient expect when they meet you for the first time?

I never know if someone's coming in knowing their diagnosis and having done all their internet research or whether someone is coming in and saying, "They called me and said I had an appointment. Do I have

we spend time around Baxter State Park where my husband and I like to torture the kids with hiking and biking and kayaking on the lake. Watching them grow and develop is really important for me.

Can you tell me something about yourself that might surprise me?

I grew up in northeastern Pennsylvania in anthracite coal country, and as a kid I shoveled a lot of coal. My mother was born there, and her mother was the daughter of first-generation immigrants.

All the men on my mother's side of the family died from black lung disease. I attended the Mining and Mechanical Institute, a middle and high school started by the coal barons to educate the men and boys working in the mines. Eventually it became a college preparatory school. My parents couldn't afford the tuition so I got a work-study. At 10 years old I worked five days a week during the summers cleaning the school and shoveling coal. In the basement there was a room with a high window and a chute coming down from it. When the coal for

the furnace was delivered, it would come down the chute into a big pile. It was my job keep the bottom of the chute clear. After school, if I wasn't going to sports or music practice, I'd be sweeping the halls, cleaning blackboards and scrubbing the toilets.

Well, there are no coal mines in Maine. How did you come to settle here?

We visited Maine right after I graduated from medical school in 2008. We drove up the coast and all the way to Madawaska and explored the Swedish settlements in northern Maine, north of Caribou. Then drove back down through Millinocket, hiked Katahdin, and explored the Moosehead Lake region. So when I was applying for jobs, my husband and I took out a map of the United States, and we each X'd the states where we would not live. And Maine was still on the list. I feel a kindred spirit with the people in Maine. The people here are good-hearted, genuine and hard working. One of the reasons I was so excited about coming to WCGH is that it allows me to keep my family in Maine.

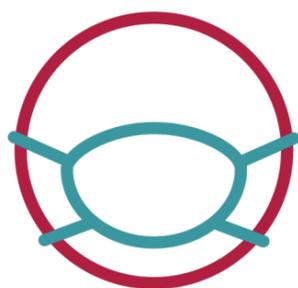
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cancer?" I always want to understand what they know about their disease so that I know how to discuss their prognosis and treatment options. I ask about their family, where they are living, how they get to appointments. I appreciate that it can be difficult to explore some treatment options – for example, someone might not be able to drive down to Portland for a consultation due to an underlying medical, financial, or family issue. Just looking at a chart and talking to patients about their illness isn't enough. You have to talk about their lives and their goals to make sure their treatment plan is going to work for them. For me, medicine is about relationships and understanding the patients' goals. Only then can I align my recommendations with what works best for them, not just what works best in a textbook.

What are your passions outside of the hospital?

I've got a 10-year-old son and a 14-year-old daughter, and I'm very focused on making sure that I am there for them, too. We really like being in the outdoors, and



Masks Required

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