

HEALTH NEWS *from*

FALL/WINTER 2017

st mary's

REGIONAL MEDICAL CENTER

Homer Holden's **HAPPIER HEART**

How specialized
treatment is helping
him stay active

Also inside:

**INTRODUCING DRY
NEEDLING**
Deeper pain relief

**OUR NEW
CT SCANNER**
Offering enhanced
imaging

Compliments of



St. Mary's
REGIONAL MEDICAL CENTER

*Homer Holden tells about
his regular visits to the
Congestive Heart Failure
Center at St. Mary's.*

FROM THE CEO

IN THIS ISSUE

4 BETTER CT IMAGING

New equipment is here

6 SPECIALIZED CARDIAC CARE

Homer Holden tells his story

10 ASK THE DOCTOR

Understanding Bell's palsy



HERE'S TO NEW BEGININGS.

I consider myself truly blessed to have known and served the St. Mary's community for the past seven years. With the support of a dedicated staff, the hospital has continued to thrive and grow and make a difference in the lives of our patients. As I now embark on my retirement, I'm honored to introduce you to the new CEO of St. Mary's, Krista Roberts.

Krista has been a key member of the hospital's leadership team for more than 25 years, most recently developing services and heading up operations as chief operating officer. She also serves on the board of directors of the local chamber of commerce. I know she will bring great leadership and commitment to this role. And she will build on the strong sense of community that we see through the stories of patients like Homer Holden, who is featured on the cover of this issue.

While I take many special memories with me, I will remember the people I've gotten to know and the inspiring stories of our patients the most. I'm grateful to have had the opportunity to serve the citizens of Enid.



Stanley Tatum

Supporting your GOOD HEALTH!

There are many components that play a part in getting and staying healthy. The new "Living My Health" page on our website features tips on eating well, getting fit and feeling good, along with healthy recipes you can incorporate into your daily living. Information is updated monthly, so bookmark this page and visit it again for the latest healthy news.

To learn more, visit stmarysregional.com/healthyliving.



Treating *chronic pain*

DRY NEEDLING COMES TO ST. MARY'S

Dry needling is a therapy that uses needles, which contain no medication, to achieve pain relief by targeting areas of restriction in the muscles and surrounding tissues. It can be used to treat patients with many conditions, such as tennis elbow, golfer's elbow, carpal tunnel syndrome, lower back or shoulder pain, headaches and migraines, plantar fasciitis and knee osteoarthritis, says Kent Keithly, PT, Cert. DN, a physical therapist for St. Mary's.

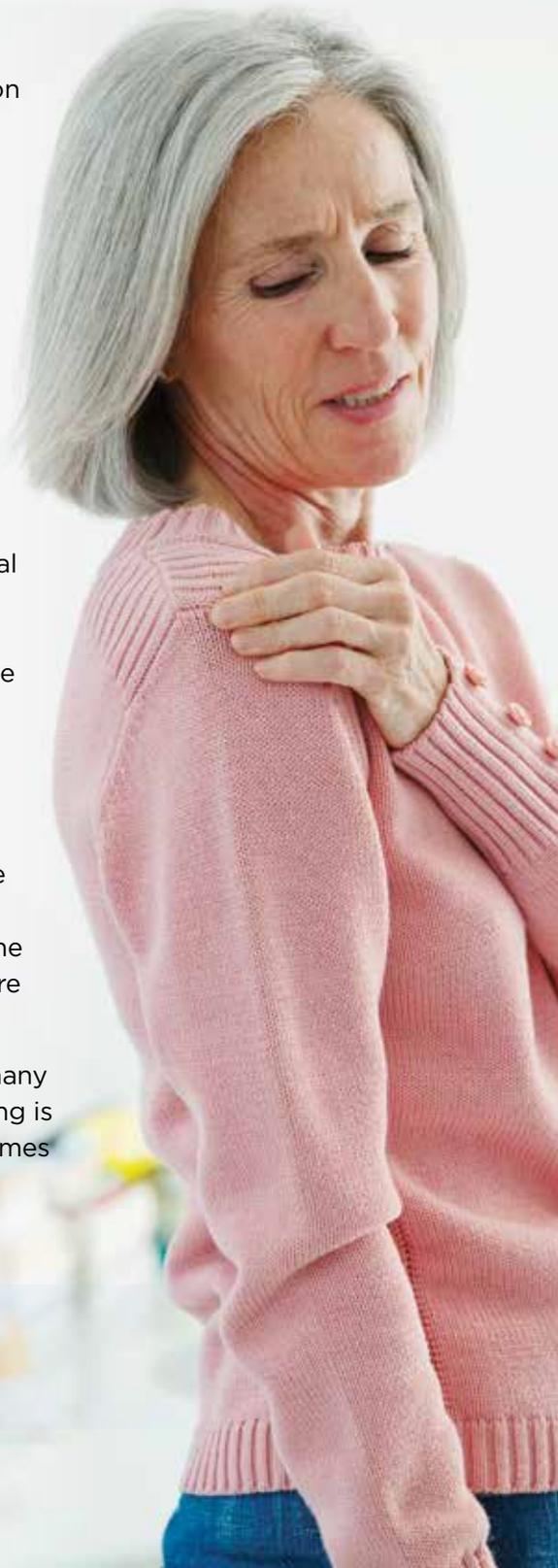
He and Chelsea Tuma, PT, DPT, Cert. DN, have earned certification from the Dry Needling Institute, American Academy of Manipulative Therapy. They perform dry needling at St. Mary's Outpatient Center for Rehabilitation in the Willow Plaza Shopping Center. Especially for people who are not finding relief with other interventions, dry needling can be a valuable tool, they say.

"Sometimes, with soft tissue mobilization (which is a form of manual physical therapy), you can't go deep enough to where you need to be," Keithly explains. Dry needling enables therapists to target deeper muscles and tissue. This can help stimulate blood flow to the area and restart the healing process.

The needles used for this therapy are much thinner in diameter than needles that would be used to give a shot, and they come in different sizes, notes Tuma. "We use guide tubes to guide the needle exactly where we want it," she says. Patients typically lie down for the procedure and will feel a little sting when the needle enters the skin. They may experience some discomfort during the procedure. It is done in conjunction with other therapies such as stretching, and patients are given activities they can do at home to further support healing.

"Dry needling is not for everybody," Keithly acknowledges. But for many patients, it can provide a compelling treatment option. "The neat thing is you usually get a pretty instantaneous response," says Tuma. Sometimes patients can feel a difference before they leave the clinic, she says. ■

To learn more about physical therapy services, visit stmarysregional.com/pt.



Updating our imaging with a NEW CT SCANNER

CT SCANS CAN PLAY AN IMPORTANT ROLE IN DIAGNOSING AND TREATING DIFFERENT MEDICAL CONDITIONS BY PROVIDING EXTREMELY DETAILED IMAGES OF THE BONES, BLOOD VESSELS AND SOFT TISSUES INSIDE YOUR BODY. A NEW CT SCANNER AT ST. MARY'S PROVIDES ACCURATE IMAGING WITH EVEN GREATER SAFETY, SPEED AND EFFICIENCY.

A key safety feature is reduced radiation. "We have cut the radiation dose at least in half," says Julian Dutton RT(R) (CT) ARRT, lead CT imaging specialist. "That's been a priority for us to provide to our customers optimal images with less radiation exposure." Among other features, the new scanner now produces more accurate scans of patients with orthopedic implants or artificial joints. In the past these implants made the images undiagnostic because of the metallic artifacts caused by them. Because of new

software improvements, the images can now be salvaged, making them diagnostic. Also, the new scanner can accommodate larger patients and has different accessories and positioning aids for greater comfort.

There can be many different reasons why people may need a CT scan. For example, CT images may be used to diagnose and treat conditions involving possible stroke, trauma, bone injuries, chest or abdominal issues, cancer and various other medical conditions.

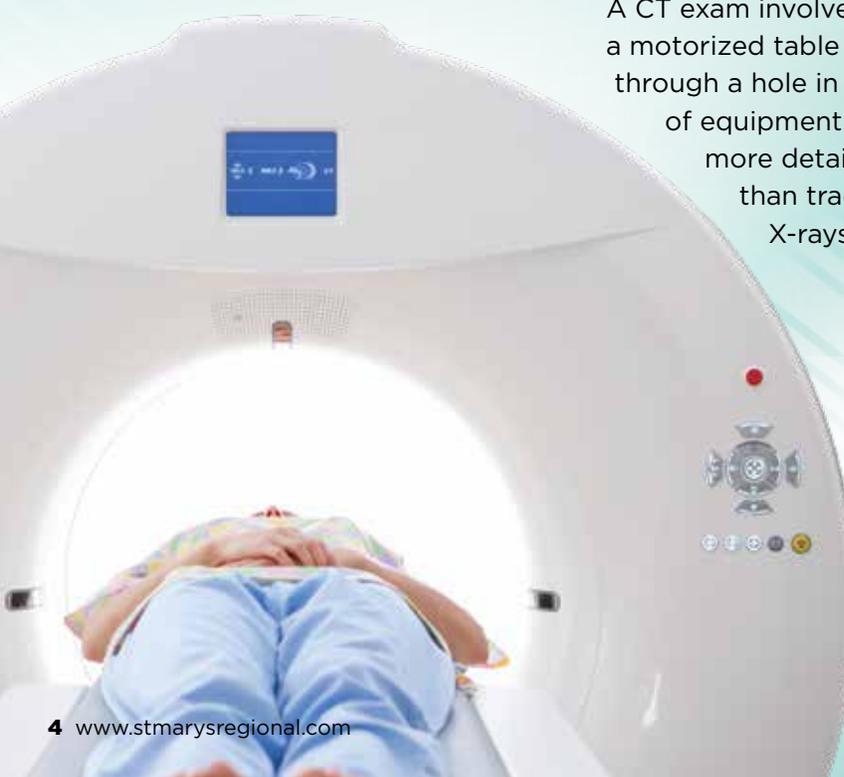
A CT exam involves lying on a motorized table that slides through a hole in a large piece of equipment. It provides more detailed views than traditional X-rays and

captures cross-sectional and, if needed, 3D images of the inside of the body.

The 80 detectors inside the new scanner at St. Mary's are able to capture 160 slices, or images, per rotation of the X-ray tube inside the scanner's large circular frame. This enables technologists to acquire scans in less time, says Dutton. "People often think they'll be here for a few hours, but most scans we do take less than five minutes," he says.

"Patients sometimes worry about testing, but if we talk with them and explain exactly what to expect, they find it's not bad at all," says Cindy Cartmill, BS RT(R)(M)(CT), ARDMS(BR), women's imaging lead technologist at St. Mary's. ■

Learn more about imaging services at stmarysregional.com/image.



When should you go to the ER?



Any time you think you have an emergency medical condition, it's best to go to the emergency room and let the professionals check you out, says Valerie Whisler, RN BSN, director of emergency services at St. Mary's. "Even if your symptoms seem vague, we'd much rather check," she says.

Call 911 right away if you experience signs of a possible stroke, such as differences in your face, arm weakness or speech difficulty, she says. Sometimes people are not sure and say they "just don't feel right." It's critical not to wait, and to get help right away.

Also, call 911 for any kind of chest pain or discomfort, which may be a sign of a possible heart attack. Symptoms for women also may include a new or sudden onset of indigestion, pain in the shoulder blades or an overwhelming feeling of nausea, Whisler notes.

If you believe you are having a possible heart attack, stroke or other serious emergency such as uncontrolled bleeding, have an ambulance take you to the hospital and don't drive yourself, Whisler advises. "The EMS team works in tandem with us so we can be

ready," she says. "For a possible heart attack, the EMS crew can sometimes get an EKG done and send it to us. For a possible stroke, we can be ready to perform a CT scan," she says. "Minutes count. We want to use those minutes to help save lives."

Other medical emergencies requiring ER care include major injury, severe headache, severe abdominal pain and serious psychiatric concerns, such as homicidal or suicidal behavior, Whisler says.

To be prepared for an emergency, keep a list of your current medications with you, including dosage information, and also keep a copy with your loved ones. This information is extremely important and can help to ensure the best possible care, Whisler says. ■

Take extra caution during the holidays

There can be a lot of stress at the holidays, and this can contribute to problems like anxiety, depression and indigestion, Whisler says. Also, as people spend more time indoors, there can be a prevalence of colds, flu, and other communicable diseases and gastrointestinal issues. Ice can lead to medical emergencies as well, especially for older people who may be more prone to falling.

If you believe you are having a medical emergency, CALL 911.



A program with
heart

Homer Holden has a standing date on his calendar that gives his heart and soul a lift. It's with the Congestive Heart Failure Center at St. Mary's Regional Medical Center, where he goes for infusion treatments and to spend time with people he enjoys. >

Holden, who is 80 this year, had an aortic heart valve replacement in 1999. He had been doing well until about a year ago, when he began feeling the serious symptoms of congestive heart failure (CHF). This condition occurs when the heart muscle doesn't pump as strongly as it should. "I started experiencing pretty severe breathing problems," Holden recalls.



John Bartolozzi, MD

His cardiologist, John Bartolozzi, MD, recommended he go to the Congestive Heart Failure Center at St. Mary's for infusion treatments that can

help his condition. He's now a regular there. "It just rejuvenates me," he says. "It does a wonderful job."

Dr. Bartolozzi started the hospital's Congestive Heart Failure Center about 16 years ago to provide treatment for patients like Holden, who are no longer being effectively helped by oral medications.

"If patients are on all the appropriate medications and are still symptomatic, that's when the center can benefit them," Dr. Bartolozzi says. "We give them medications that help their heart squeeze better and work more efficiently. It's only available with an IV."

For patients like Holden, this means spending four hours receiving infusion therapy, and a little extra time at the end of the treatment to be monitored by the staff. "What I like is that the staff asks you questions, and you get encouragement from the people around you," he says. "You realize, hey, I'm not the only one," he says.

The goal of the therapy is not to cure the condition, but to give patients a better quality of life, Dr. Bartolozzi explains. The center is staffed by ICU nurses who can also draw labs, monitor kidney function, listen to a patient's heart and lungs, and perform other assessments. "That enables us to treat patients effectively," Dr. Bartolozzi says. "People can live for years in the program, I think that's because of how comprehensive it is."

In order to be eligible for treatment in the center, patients must meet criteria based on American College of Cardiology/American Heart Association guidelines for the treatment of congestive heart failure. How often they go depends on their individual needs. Some patients go every month or six weeks; others go once or twice a week, Dr. Bartolozzi says. The therapy not only helps patients feel better but can also help them avoid being readmitted to the hospital for heart failure, Dr. Bartolozzi says.

For Holden, getting the therapy has given him a boost – mentally and physically. "I don't like to sit around," he says. "I'm a go getter." ■

To learn more, visit stmarysregional.com/chf.

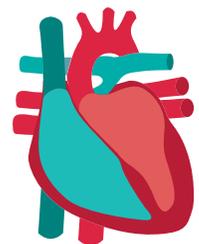
Could you or someone you love have CHF?

Congestive heart failure (CHF) affects many different people, but if you have hypertension (high blood pressure) or a history of heart disease, such as a prior heart attack, you may be at higher risk, Dr. Bartolozzi says. Knowing the signs and symptoms is important. Treatments are more effective if CHF is diagnosed earlier, Dr. Bartolozzi says.

Seek an evaluation right away if you notice these symptoms of possible CHF:

- Shortness of breath and fatigue
- Swelling of the legs and feet
- Trouble breathing when lying down

For help finding a doctor, call 580-249-3741.



WHAT SHOULD YOU LOOK FOR *when reading food labels?*

While everyone's nutritional needs can be different, some general strategies can help make eating healthier a little easier. Here, dietitian Deirdre Postier, RD, LD, offers tips to help you use food labels to your advantage.

#1. Saturated fat: Look for foods that have 2 grams or less of saturated fat per serving; try not to go over 15 grams of saturated fat per day. Helpful tip: Saturated fat in people's diets typically comes from higher fat meats and dairy products. Choosing a "low-fat," "light" or "reduced-fat" option can help.

#2. Trans fats: Keep these out of your diet altogether – any amount is bad for you. *Trans fats* are inflammatory to your vessels and contribute to problems like heart disease. Note: *Trans fats* are also known as hydrogenated oils. Read the ingredient list to identify foods containing partially hydrogenated oils.

#3. "Natural" foods: Even foods that are "natural" may have ingredients that can be problematic, like salt; also natural does not mean organic.

#4. Percent daily value: This is based on a 2,000 calorie diet, so it may vary for different people. As a general rule, for nutrients like fat, saturated fat or sodium, look for 5 percent or less; for nutrients like fiber, vitamins or minerals, look for 20 percent or more.

When making food comparisons, make sure you're comparing similar serving sizes, Postier advises. In general, when deciding between products, try to choose the one with less calories, fat and sodium.

If you're eating on the go and food labels aren't available, consider a grilled chicken option as healthier choice, and try to avoid fattening condiments like mayonnaise, Postier says. Also, load up on fruits and veggies, and keep in mind that Americans' portion sizes tend to be big, which means there can be more of everything. ■

For more healthy living tips, go to stmarysregional.com/healthyliving.

Did you know ...

Future changes are coming to the Nutrition Facts label for packaged foods. According to the Food and Drug Administration (FDA), the changes are intended to make it easier for consumers to make better informed food choices, for instance by basing serving sizes on the amounts of foods and beverages that people actually eat, and making the type size bigger for certain categories like "calories." More about the changes and when they will be implemented can be found on the FDA website.



Keeping weight off ... FOR THE LONG HAUL



Maintaining weight loss can be challenging at any time of year. But especially now, with the holidays upon us, it can be even harder.



Daniel Washburn, MD

Daniel Washburn, MD, who specializes in internal medicine and endocrinology, works with patients who have diabetes, and also has personal experience managing the ups and downs of unwanted pounds. He says that, based on his overall experience, the programs that tend to have the most success over the long term involve eating everyday foods but controlling the portion sizes. So cake, for example, might be allowed, but it would be a very thin slice of cake, and it would be part of an overall diet that includes nutritional choices and not skipping meals.

Planning ahead can be helpful, he says. If you eat out in a restaurant, where portion sizes generally tend to be large, think about how much you're going to eat and how much you're going to take home or leave on the plate, he advises. Also, eat slowly and enjoy your food more.

Especially as you head out to holiday parties, be mindful of drinks with high calories and sugar content, such as margaritas; also, make sure you drink water to stay hydrated. Having a supportive spouse or loved one can help you be successful, Dr. Washburn notes. "Reward yourself for good work once in a while," he says, and commit to doing the best you can. "The only thing you have control over is today." ■

For more healthy living tips, go to stmarysregional.com/healthyliving.

THE IMPACT OF PHYSICAL ACTIVITY

"Exercise* is an important part of our overall health and can also make us feel better," Dr. Washburn says. To maintain your weight, the Centers for Disease Control and Prevention (CDC) recommends that you work your way up to 150 minutes of moderate-intensity aerobic activity, 75 minutes of vigorous-intensity aerobic activity, or an equivalent mix of the two each week.

*Consult your doctor before beginning a new exercise program.

**Moderate: your breathing and heart rate are noticeably faster but you can still carry on a conversation; Vigorous: your heart rate is increased substantially and you are breathing too hard and fast to have a conversation. Approximate calories/30 minutes for a 154-lb. person. Calories burned per hour will be higher for persons who weigh more than 154 lbs. (70 kg) and lower for persons who weigh less.

Here are some examples from the CDC about activities and calories burned.

<i>Activity (30 minutes)</i>	<i>Moderate: calories burned**</i>	<i>Vigorous: calories burned**</i>
Walking	140 (3.5 mph)	230 (4.5 mph)
Weight lifting	110	220
Bicycling	145 (<10 mph)	295 (>10 mph)
Jogging		295 (5 mph)

Is it Bell's palsy ... OR SOMETHING ELSE?



The most telltale sign of Bell's palsy is temporary paralysis of one side of

the face, which usually comes on unexpectedly.

Inhyup Kim, MD, a board-certified neurology specialist with St. Mary's Physician Associates, discusses questions related to this condition, and why getting immediate medical care is important.



Q. Why should I see a doctor right away?

If facial paralysis occurs, it's important to rule out a possible stroke before considering Bell's palsy or other potential causes. Doctors can distinguish between a stroke, which is caused by lack of blood flow in a part of the brain, and Bell's palsy, which is associated with damage or trauma to the facial nerve.

Q. How common is Bell's palsy and who is most at risk?

Bell's palsy is the most common cause of facial paralysis and afflicts approximately 40,000 Americans each year, according to the National Institutes of Health. Certain people may be more at risk, including women who are pregnant, people with diabetes and people with Lyme disease.

Q. What is the facial nerve, and what does it do?

The facial nerve is a pure motor nerve that controls the muscles on one side of your face and directs things like eye blinking and facial expressions. You have one facial nerve for each side of your face. Bell's palsy typically affects just one facial nerve, but it can affect both.

Q. How is Bell's palsy treated, and will it go away?

Treatment should begin within three days of the onset of symptoms and may involve steroids or antiviral medications. Eye care is very important because many people cannot close the affected eye. Typically, symptoms start to improve after about three weeks, and by six months symptoms are resolved for the majority of people. ■

To find a doctor for yourself or your family, call our free physician referral service Direct Doctors Plus® at 580-249-3741.

Do you need an antibiotic?

We all want to feel better as soon as possible when common sicknesses strike. It's important to remember, however, that antibiotics only treat bacterial infections, not viral illnesses. To offer guidance on when antibiotics may be needed, the Centers for Disease Control and Prevention (CDC) provides the following information. If an antibiotic is not prescribed, the CDC recommends you ask your doctor for tips on how to relieve your symptoms and feel better.

Common condition: What's got you sick?	Common cause			Are antibiotics needed?
	Bacteria	Bacteria or virus	Virus	
Strep throat	●			✓
Whooping cough	●			✓
Urinary tract infection	●			✓
Sinus infection		●		Maybe
Middle ear infection		●		Maybe
Bronchitis/chest cold (in otherwise healthy children and adults)*		●		✗
Common cold/runny nose			●	✗
Sore throat (except strep)			●	✗
Flu			●	✗

*In some cases, acute bronchitis is caused by bacteria, but even in these cases antibiotics still do not help.

Support Groups



CONNECT AND SHARE WITH OTHERS

Support groups at St. Mary's provide an opportunity for people who are coping with a medical condition to learn valuable information and get together with others who are going through a similar experience. If you believe you or a loved one could benefit, please join us at one of the following support group meetings.

For a regularly updated meeting schedule, visit stmarysregional.com/events.

ADULTS WITH CANCER

Meets the first and third Wednesdays of each month at noon in classroom C in the basement of St. Mary's. **For more information, call 580-249-5504.**

STROKE

Meets monthly on the second Tuesday of the month from 2 to 3 p.m. in the Rehabilitation Institute conference room on the fifth floor at St. Mary's. **For more information, call 580-249-5533.**

BRAIN INJURY

Meets monthly on the third Tuesday of the month from 6:30 to 8 p.m. in the Rehabilitation Institute conference room on the fifth floor at St. Mary's. **For more information, call 580-249-5533.**

SAFRA (SUPPORT ALLIANCE FOR RECOVERING AMPUTEES)

Meets at 6 p.m. in the Rehabilitation Institute conference room on the fifth floor at St. Mary's. **For more information and upcoming meeting dates, call 580-249-5533.**

**Connect
WITH US!**



Like our page on
Facebook



www.stmarysregional.com
580-233-6100

HEALTH NEWS FROM ST. MARY'S REGIONAL MEDICAL CENTER

Krista Roberts, FACHE
Chief Executive Officer

David Jamin, FACHE
Chief Financial Officer

Lori A. Boyd
Director of Marketing

Anthony Rodebush, FACHE
Chief Operating Officer

Rachelle Burleson, DNP, APRN-CNS
Chief Nursing Officer

Information in *Health News* comes from a wide range of medical experts. If you have any concerns or questions about specific content that may affect your health, please contact your healthcare provider. Models may be used in photos or illustrations. Any opinions expressed by an author whose article appears in this publication are solely the opinions of the author and do not necessarily reflect the views of St. Mary's Regional Medical Center or Universal Health Services, Inc. With limited exceptions, physicians are independent practitioners who are not employees or agents of St. Mary's Regional Medical Center. The hospital shall not be liable for actions or treatments provided by physicians. For language assistance, disability accommodations and the non-discrimination notice, visit our website. ©2017. All rights reserved. Printed in the U.S.A.