

# Health Connection



ALTA VISTA™  
Regional Hospital

THE MAGAZINE OF ALTA VISTA REGIONAL HOSPITAL

## ALTA VISTA REGIONAL HOSPITAL prepares to kick off Healthy Woman!

**W**omen make between 80 percent and 90 percent of all healthcare decisions, and they often try to balance careers, primary and secondary families, issues with parents and civic work. Alta Vista Regional Hospital's (AVRH) Healthy Woman program was created to help women achieve a healthy body, mind and spirit through monthly events and educational programs.

"There is an abundance of new research that shows that a woman's body is not simply a smaller version of a man's," says Brian P. Gibbons, AVRH's CEO. "This research is increasingly important both in recognizing and in treating diseases in women."

Heart disease demonstrates one of the most significant differences between men and women. The symptoms in women are usually different than in men and, according to the American Heart Association, more American women than men have died of cardiovascular disease every year since 1984. Yet recent surveys show that most women don't even know that heart disease is one of their top killers.

"We want the women of Las Vegas and Northeastern New Mexico to not only understand how they are different from men, but also to be able to make informed decisions about healthcare for themselves and for their families," says Mr. Gibbons. "A women's advisory council will be selected to assist us in identifying those topics the women of our community are interested in."



**HEALTHY WOMAN**  
AN ALTA VISTA REGIONAL HOSPITAL RESOURCE  
*Kickoff*

Be part of the fun from the start! Join us on Tuesday, November 13, at the Night Owl Event Center for our Healthy Woman kickoff event.

**Call today!**

**F**or more information about AVRH's Healthy Woman kickoff, call Mathew Martinez at (505) 426-3959 or register online at [www.altavistaregionalhospital.com](http://www.altavistaregionalhospital.com).

# WHEN IT'S AN EMERGENCY

Take action when every second counts

**W**hen medical emergencies arise, it's not always easy to think clearly. But, when someone is hurt or in danger and needs immediate help, calling for emergency medical assistance is the best way to get that help—for you or someone else.

A crisis demands that you act quickly rather than waste time deciding whether to call for assistance. Sometimes people have difficulty assessing the level of urgency in an emergency situation. It's better to err on the side of caution and make that phone call. Always consider a situation more serious rather than less serious, especially if you aren't sure of the medical implications.

The best time to prepare for an emergency is before it happens. Make sure you keep all emergency numbers posted near your phone where family members can see them. When you call for immediate medical assistance, be prepared to tell the dispatcher about the emergency.

## SPECIFIC QUESTIONS THE DISPATCHER MAY ASK

- **Where is the emergency?** Give your exact whereabouts such as street address, building number, apartment number, floor, nearest intersection and town.
- **What is the emergency?** Tell the dispatcher exactly what's wrong.
- **What is your name?**
- **What is the phone number** you are calling from?
- **Who needs help?** Be sure to give the approximate age of the injured and the number of people who need emergency care.
- **What is the condition of the victim(s)?** For example, is the person(s) conscious or unconscious, breathing normally, able to talk and so on.

## ADDITIONAL INFORMATION TO ASSIST WITH THE CALL

- Listen to the specific instructions the dispatcher gives you on how to care for the injured until an ambulance arrives. Your ability to communicate the facts clearly and take instruction carefully could mean the difference between life and death.
- Don't hang up! Stay on the line and remain calm until the dispatcher tells you it's OK to hang up.

Sometimes people are confused about when to call for emergency assistance. Remember, when in doubt, call for help!



## Be prepared

1. Know basic choking rescue techniques, such as the Heimlich maneuver.
2. Take a CPR class.
3. Cover burns with cool (not cold) wet cloths. Never apply home remedies (butter, ice, petroleum jelly). Never break blisters or remove burned skin.
4. Never move a person who has a back or neck injury.
5. Know how to stop a wound from bleeding. (A first-aid class can help.)
6. Keep individual medical history information handy.





# When there's no lump

## What you need to know about inflammatory breast cancer

**W**hile a breast lump is one of the classic signs of breast cancer, not every form of the disease bears this warning sign. Inflammatory breast cancer (IBC) is a rare but deadly form of cancer that often remains silent until it has spread.

IBC appears in women at an earlier average age than other forms of breast cancer—about age 52 versus 62—and accounts for up to 5 percent of all breast cancer cases in the United States. Although its prognosis has improved over the years, its five-year survival rate is still only about half that of non-IBC cases, or about 40 percent. While its cause is not entirely known, some studies have suggested family history may play a role in a woman's risk of developing the aggressive disease.

Despite its name, IBC isn't a product of inflammation. Rather, the disease occurs when cancerous cells block the lymphatic vessels in the breast's skin. Instead of a lump, you may notice that certain areas of the skin feel warm, appear red or bruised or look thicker. Your breast may also feel heavy. Other symptoms that develop in an affected breast include:

- tenderness or swelling
- itching
- pain
- skin texture like an orange peel
- enlarged lymph nodes under the arm, above or below the collarbone

- flattened or inverted nipple
- swollen or crusty nipple skin
- discoloration of skin around the nipple (areola)

IBC symptoms can easily be confused with a breast infection. However, it doesn't cause a fever and doesn't respond to antibiotics like an infection does. If you're experiencing any of the symptoms listed, contact your healthcare provider immediately. Because the disease spreads rapidly—changes in your breast can become noticeable in a matter of days—many women are already in advanced stages of IBC by the time they're diagnosed. If your healthcare provider suspects cancer, he or she will perform a biopsy to analyze a sample of your skin and tissue.

### TREATMENT

Chemotherapy, surgery and radiation therapy are often combined to treat cases of IBC. Removal of the affected breast is often recommended following a treatment such as chemotherapy.

The chances of recurrence for this type of cancer are high. Further chemotherapy or hormone therapy, such as tamoxifen or anastrozole, may be necessary to help prevent the cancer from returning.

IBC is a scary diagnosis, but you can empower yourself against the disease by becoming educated. Talk to your healthcare provider about what to expect before and after treatment.



Brian P. Gibbons Jr.  
Chief Executive Officer

## Dear neighbors,

**A**s you are aware, Alta Vista Regional Hospital (AVRH) has recently received considerable attention. It's important to us that you stay up to date with all of our developments. Be assured that our first and most important focus is providing quality health-care to you, our patients. We are focused on moving forward and sharing with you all the exciting and positive things that are hap-

pening at our hospital.

In this issue of *Health Connection*, I'm pleased to announce Healthy Woman, a new program to

empower women with knowledge and confidence to make informed healthcare decisions for themselves and their loved ones.

We're also pleased to welcome Joseph Brown, M.D., a gastroenterologist who will open his Las Vegas practice within the next few months.

We're honored that you trust AVRH with your family's healthcare, and we appreciate your continued support. If I may be of service, you can reach me at **(505) 426-3930**.

Wishing you good health,

BRIAN P. GIBBONS JR.  
Chief Executive Officer  
Alta Vista Regional Hospital

# Introducing our new surgeon

**A**lta Vista Regional Hospital (AVRH) welcomes our newest surgeon, Salman S. Malik, M.D., who received his medical degree from the Rawalpindi Medical College in Pakistan. Dr. Malik completed his internship in internal medicine and general surgery at Rawalpindi General Hospital and his residency in general surgery at the University of New Mexico School of Medicine in Albuquerque. Dr. Malik also completed

a fellowship in Advanced Laparoscopic General and Bariatric Surgery at Geisinger Medical Center in Danville, Pa.

Dr. Malik joins Lilibeth Sanchez, D.O., at Alta Vista Surgical Specialists, located at 108 Legion Drive, Suite A. Office hours are Monday through Friday, 8 a.m. to 5 p.m. To schedule an appointment, call **(505) 454-9499**.



Salman S. Malik, M.D.  
General Surgery

# Type 2 diabetes and cholesterol: a powerful link

## High cholesterol can hurt more than your heart



By Martin Ruiz, M.D.  
Internal Medicine

**D**on't get as much exercise as you should? Eat a lot of fatty foods?

Cholesterol levels high? If you have type 2 diabetes, be forewarned. Heart disease is responsible for the majority of diabetes-related deaths in America—and cholesterol is

a major contributing factor. Research indicates that heart disease and stroke occur twice as often in people with diabetes.

Cholesterol is not always considered a bad thing. “Good” cholesterol, also known as high-density lipoprotein (HDL), benefits your body. Red wine, soy and fiber-rich foods help build up your HDL cholesterol levels. Low-density lipoprotein (LDL), or “bad” cholesterol, narrows and clogs arteries. Foods high in saturated fat promote the buildup of LDL cholesterol.

### MANAGING HIGH CHOLESTEROL

Despite evidence to the contrary, many people with diabetes aren't aware of the connection between type 2 diabetes, high LDL cholesterol and heart disease. More than two-thirds of people with diabetes in one particular study didn't see heart disease as a major complication. The same study also found that 60 percent of patients with diabetes didn't consider themselves at risk for cholesterol problems.

There are several ways to manage cholesterol levels:

- **Watch your diet.** Avoid foods high in saturated fat and cholesterol and seek out fruits, vegetables, poultry and foods high in fiber.
- **Maintain a healthy weight.** Being overweight increases cholesterol levels and is also a risk factor for heart disease.
- **Exercise regularly.** Experts recommend 30 minutes of exercise five days a week, if possible.

If, despite these lifestyle changes, your cholesterol levels still aren't low enough, certain prescription medications have been proven to help. However, these medications



are most effective when *combined* with healthier lifestyle changes.

People with type 2 diabetes aren't the only ones who should monitor their cholesterol. Studies suggest that as many as one-half of all Americans have elevated levels of cholesterol, and those who are 50 or older, post-menopausal and/or have a family history of heart-related illness are especially at risk.

### Learn more!

**F**or more information about the type 2 diabetes and cholesterol connection or to schedule an appointment, please contact the office of Martin Ruiz, M.D., at Alta Vista Internal Medicine at (505) 454-7300.

## HEALTHWISE QUIZ

### How much do you know about the flu?

Take this quiz to find out.

1

#### Flu season runs from:

- a. November to April
- b. October to February
- c. January to December
- d. December to March

2

#### About how many Americans die each year from complications of the flu?

- a. 900
- b. 5,600
- c. 15,600
- d. 36,000

3

#### The best thing you can do to avoid getting the flu is:

- a. take a daily multivitamin
- b. get vaccinated
- c. exercise at least five days a week
- d. avoid intimate contact with people

4

#### Flu is most often spread by:

- a. mosquitoes
- b. doctors and other healthcare providers
- c. people who cough or sneeze virus-infected droplets into the air
- d. the flu vaccine

5

#### Which of the following statements about the flu is not true?

- a. It's useless getting vaccinated after the season begins.
- b. Getting the flu can lead to pneumonia and other life-threatening complications.
- c. People who are allergic to eggs should not get a flu shot.
- d. You can spread the flu to others before your symptoms show.

# The weakest link: Understanding abdominal aortic aneurysm

**A**s the body's largest blood vessel, the aorta has the important job of carrying blood from your heart throughout the rest of your body. When the aortic wall in your abdomen weakens or becomes damaged by plaque buildup, it enlarges, causing an aneurysm, or bulge. Aneurysms that grow too large can burst, causing potentially fatal internal bleeding.

Three out of four people with an abdominal aortic aneurysm (AAA) have no symptoms, although some patients may feel back pain; intense, intermittent abdominal pain; or a pulsating sensation in the abdomen.

#### WHO'S AT RISK?

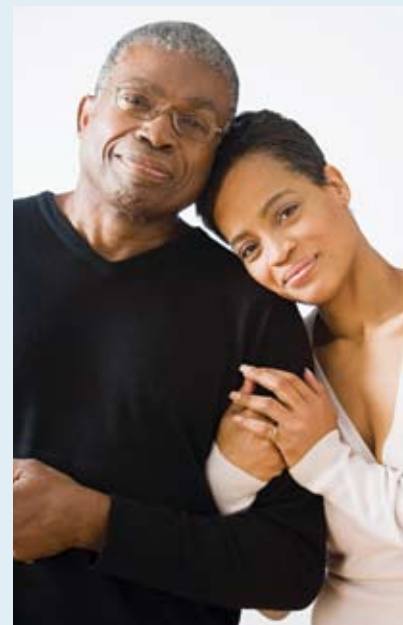
AAAs occur most often in men older than 65. Most aneurysms are caused by atherosclerosis—hardening of the arteries, which can result from a fatty, high-cholesterol diet. Other conditions that increase risk are smoking, high blood pressure, diabetes, congenital defects and a family history of aneurysms.

Decrease your chances of developing an aneurysm by not smoking; eating a low-fat, low-cholesterol diet; exercising regularly; and controlling blood pressure.

#### HOW IS AAA TREATED?

Treatment depends on the aneurysm's size and whether it's life-threatening. Most aneurysms are less than 2 inches in diameter and seldom rupture. If you're diagnosed with this type of AAA, your doctor will likely monitor it and prescribe blood pressure-lowering medicine. But if you have an aneurysm that leaks, is small but grows quickly, expands to greater than 2 inches or seems about to burst, your doctor can surgically repair the damaged part of your aorta.

When an aneurysm ruptures, the results can be fatal, so immediate medical attention is needed. Symptoms of a ruptured aneurysm include sudden, severe pain with rapid pulse, sweatiness or clamminess, anxiety, nausea and vomiting, low blood pressure, dizziness, fainting, dry mouth and paleness.



ANSWERS: 1. A; 2. D; 3. B; 4. C; 5. A



# Take steps now to prevent diabetes in your child

**A**bout 15 percent of children and teens are overweight—double from 20 years ago. This has led to a surge in the number of children with type 2 diabetes, the form more commonly found in overweight adults over age 40. According to

experts, one in three American children born in 2000 will develop diabetes if we don't take steps now to address their fatty diets and poor fitness habits.

Talk to your family doctor about diabetes testing if your child seems to be gaining too much weight or is already overweight and has any of these risk factors:

- a family history of type 2 diabetes, particularly among first- or second-degree relatives
- being of African-American, Hispanic/Latino, Native

American or Asian/Pacific Islander descent

- signs of insulin resistance or conditions associated with insulin resistance such as high blood pressure, poor cholesterol and triglyceride levels and *acanthosis nigricans*, a condition where the skin around the neck or in the armpits appears dark, thick and velvety

## WHAT YOU CAN DO

- **Eat at home.** Avoid super-sized fast-food meals on the run. Make the time to cook and eat healthy family fare.
- **Limit screen time.** The sedentary nature of modern play-time—TV, video games and using the computer—has contributed to overweight kids.
- **Exercise together.** Make physical activity a group event. Go on a family hike or bike ride. Join a gym together or enter family fun walks.
- **Don't use food, sweets or candy as rewards or gifts.** Try activity-minded presents such as jump ropes, kites, pogo sticks or scooters.

## Give your fridge a health makeover

**W**hen it comes to wellness, we are what we eat. To benefit your heart, food choices must be low in saturated fat, the number-one dietary contributor to cardiovascular disease. Culprit foods include those from animals—primarily meats and whole-milk products—and from certain plant-based oils—coconut, palm and cocoa butter. Evict those and other artery-clogging foods from your icebox and replace them with the foods on this heart-smart guide from the American Heart Association:

- **Fruits.** Buy fresh, frozen or canned—but select fresh if you have a choice. Check labels on canned fruits, especially those packed in syrup, for calories.
- **Veggies.** Again, fresh is best. Frozen or canned are good choices, too, but watch salt content. Avoid sauces and other gimmicks, like flavor pouches.
- **Meat, poultry and fish.** Buy skinless poultry and lean beef, veal, lamb and pork with all fat trimmed away. Canned tuna and salmon packed in water are excellent low-fat choices.
- **Meat substitutes.** Try dried beans, lentils and soybean items like tofu and tempeh.



- **Drinks.** Store orange, grapefruit, prune, apricot or grape juices or low-salt tomato or vegetable juices. Stash a pitcher of cold water in your refrigerator, too.
- **Dairy.** Stock up on low-fat favorites like low-sodium cottage cheese, mozzarella, ricotta and Neufchâtel, along with yogurt and either skim or 1 percent milk.
- **Fats and oils.** Go with unsaturated oils—canola, olive, corn, cottonseed, peanut, safflower, soybean and sunflower. Buy unsalted, low-fat margarine and low-fat, low-sodium mayonnaise and salad dressing.
- **Sweets.** Enjoy (in moderation) gelatin, cocoa, frozen juice bars, sorbet, sherbet, jelly, jam, preserves, apple butter, maple or cane syrup, honey, molasses or fig bars.

# Hearing problems? Come to us

## Audiology Services Open at Alta Vista Regional Hospital



Kathleen McLeroy, M.S., FAAA  
Audiologist

**A**udiologists diagnose and treat hearing loss or balance problems in people from birth through adulthood. They are trained to inspect the eardrum, remove ear wax, conduct hearing tests and check for medically related hearing problems; audiologists also dispense and fit hearing aids and, when necessary, refer patients to ear, nose and throat specialists.



### CAN YOU HEAR ME?

More than 28 million Americans have some type of hearing problem. Unfortunately, the people who have hearing difficulties don't always realize they have them. Children and teenagers seldom complain about hearing loss symptoms, and adults may lose their hearing so gradually they don't realize it's happening.

Good hearing is essential to the development of infants and young children. Audiologists are trained to identify hearing loss even in newborns and infants and can fit hearing aids for babies.

### LIFESTYLE SUPPORT

Audiologists don't just treat hearing problems. They also offer counseling to help people cope effectively with hearing loss in their social, educational and occupational environments.

It's a fact of life that, as we grow older, we lose hearing acuity. Hearing problems are commonly associated with the elderly. Audiologists are committed to helping senior citizens hear better and teaching them how to use assistive listening equipment, amplification comfort monitors and personal alerting devices.

### Hearing loss?

**T**o schedule an appointment or for more information, call Kathleen McLeroy at Alta Vista Ear, Nose and Throat at (505) 426-3742.



Alta Vista Regional Hospital  
104 Legion Drive  
Las Vegas, NM 87701

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# Health Connection

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