

Health Connection



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Stopping stroke

Fast action reverses patient's symptoms

Alta Vista Regional Hospital and medical staff members in Las Vegas recently reversed an active stroke in a patient in the hospital emergency department.

Jerry Williams, M.D., neurologist at High Desert Neurology and member of the hospital's medical staff, recommended implementing a tissue plasminogen activator (tPA) protocol.

"This is a great example of our medical community's commitment to providing the residents of Las Vegas and surrounding areas with advanced treatments and quality patient care," says Brian Gibbons, chief executive officer at Alta Vista Regional Hospital.

"Las Vegas and the surrounding areas should have confidence that their local healthcare providers at Alta Vista Regional Hospital have created a plan for treating stroke," says Dr. Williams. "While there are associated risks with tPA, if given exactly per protocol, it can increase the chances of significant improvement from stroke by 37 percent. In the right patients, the benefits certainly outweigh the risks."

Two weeks to the day after the protocol was put into place at the hospital, lifelong Las Vegas Edmundo Ulibarri, soon after waking, realized he could not move his left side. His family quickly took him to Alta Vista Regional Hospital, where he received tPA.

"The results were almost immediate," says Dr. Williams. "In fact, Mr. Ulibarri has recovered completely from his stroke and has no residual weakness."

"My family can't stop talking about it," says Mr. Ulibarri. "We are very grateful that the right medicine was

available for me. We feel it was a blessing from God."

Used within the first three hours of a stroke's onset, tPA can break up the blood clots that cause 80 percent of all strokes. This can restore blood flow in the brain and reduce or prevent the risk of permanent damage. However, nearly 10 years after its approval by the FDA, tPA is still used in less than 10 percent of patients eligible to receive it and in about 2 percent of all stroke patients.



Good day, sunshine!

Greet the day with an SPF

You don't have to be a sun worshipper to take sun protection seriously—even limited exposure can cause damage. Skin cancer is the most common kind of cancer in the United States, affecting nearly half of all Americans who live to age 65. Although most cancers don't appear until after age 50, skin cancer results from years of accumulated sun damage. However, you can avoid sun damage and enjoy your favorite outdoor activities by taking sensible precautions and using a sunscreen that protects your skin from damaging ultraviolet rays.

THE ABCS OF SPFS

Sunscreen products are rated according to their sun protection factor (SPF)—the length of time a product will protect you from sunburn caused by ultraviolet B (UVB) rays. But sunscreens don't provide complete protection. You still need to be cautious about timing and limiting your sun exposure.

Your best bet when shopping for a sunscreen is to choose a product with an SPF of at least 15, according to the American Cancer Society. Check the label to make sure it provides “broad-spectrum” protection, which protects against UVB rays and ultraviolet A (UVA) rays. UVB rays cause sunburns that can lead to superficial skin cancers known as basal cell carcinomas and squamous cell carcinomas. They can also lead to the more deadly skin cancer, melanoma. UVA rays penetrate even more deeply into the skin, damaging connective tissue.

SAVE-YOUR-SKIN TIPS

If you'll be outside, slather on sunscreen and find a shady spot, but keep in mind that sunlight reflects off surfaces such as water, sand and pavement. Avoid the sun between 10 a.m. and 4 p.m., when rays are strongest. To block sunlight,



wear sunglasses, a broad-brimmed hat and clothing made from tightly woven fabric, preferably long-sleeved shirts and pants. For your sunscreen to be most effective:

- Apply about 30 minutes before going outdoors.
- Use liberally. Apply 1 ounce of sunscreen to cover all exposed areas of your body, including your neck, ears and scalp.
- Reapply every 90 minutes—more often if you sweat heavily or go swimming.
- Use even on cloudy days—UV rays can still reach you.

Harmful UV rays can pass through car windows, too, so apply sunscreen to exposed skin if you'll be driving during peak sun hours.

Make applying sunscreen a habit—like brushing your teeth—but don't rely on sunscreen for full protection against skin cancer. Be sure to examine your skin each month for unusual changes and see your dermatologist if you spot any irregularities.

“When outside, apply sunscreen liberally every 90 minutes.”



Bouncing back from joint pain

With all the wear and tear we place on our joints, it's no wonder that almost 639,000 people underwent hip or knee replacement surgery in 2003, according to the Centers for Disease Control and Prevention. Knees and hips, in particular, are prone to problems—largely because they play a part in almost everything we do—but shoulder, finger, ankle and elbow joints can need replacement as well.

WHY ARE JOINT REPLACEMENTS NEEDED?

Joint replacement surgery, also known as arthroplasty, becomes necessary when conditions such as arthritis destroy the cartilage that cushions and separates bones. Over time, the friction of bone against bone wears away the joint, causing it to become stiff and painful.

Additionally, sports-related injuries and falls can create the need for surgery. Generally, arthroplasty becomes an option when joint pain disrupts your daily routine.

GETTING NEW PARTS

Surgeons can create a new joint, relieving your pain and providing greater freedom of movement. During the procedure, destroyed bone and tissue are removed and replaced with prosthetics, or artificial parts. The parts are made from durable metal, plastic or ceramic and can last up to 20 years.

Newer minimally invasive techniques are being performed more often, using smaller incisions—just 3 to 5 inches, compared with 6 to 12 inches in standard procedures—and reducing recovery time. Your hospital stay may be reduced to one or two days from four or three, and some patients go home the same day as surgery. However, minimally invasive surgery is not for everyone; patients who are overweight, elderly or frail or who have bone abnormalities do not make good candidates.

With hip or knee replacement surgery, expect to use a walker, crutches or a cane initially after the procedure. As you recuperate, a physical therapist will help you perform exercises to strengthen the joint, guiding your movements so you don't accidentally dislocate the replacement. Barring the unforeseen, you should be walking unassisted two to six weeks later. And though grueling workouts like 10-mile runs may still be too tough for artificial hips or knees, make plans to resume long-lost activities like dancing or strolling on the beach within six months.



Do you need joint replacement surgery?

Your overall health and age and the condition of your joints will help you and your healthcare provider decide whether you're suitable for joint replacement. If you can answer yes to any of the following questions, you may want to consider surgery.

- Are you still in pain even after losing excess weight?
- Does your pain keep you awake nights?
- Does your pain interfere with your ability to earn a living?
- Has your quality of life suffered because of your pain—your ability to travel, perform household chores or visit with friends or family?
- Have you exhausted all other options, including anti-inflammatory drugs to relieve joint pain, walking with a cane, power-walking or swimming instead of jogging?



Keeping blood flowing

Leading-edge vascular care here in Las Vegas

Peripheral vascular disease (PVD)—disorders of the blood vessels outside the heart and brain—are a result of narrowing vessels that carry blood to the legs, arms, stomach or kidneys.

PVD is similar to coronary artery disease and carotid artery disease. In PVD, fatty deposits build up in the artery walls' inner linings. These blockages restrict blood circulation, mainly in arteries leading to the kidneys, stomach, arms, legs and feet. An early symptom is cramping or fatigue in the legs and buttocks during activity. Cramping that subsides when the person stands still is called intermittent claudication. People with PVD often have fatty buildup in the arteries of the heart and brain. Because of this association, most people with PVD have a higher risk of death from heart attack and stroke.

Alta Vista Regional Hospital's digital cardiac catheterization lab provides diagnostic and interventional services to adult patients. Techniques used to diagnose PVD include a medical history, physical exam, ultrasound, X-ray angiography and magnetic resonance imaging angiography (MRA).

Most people with PVD can be treated with lifestyle changes, medications or both. To ease your symptoms or lower your risk for PVD, stop smoking, control diabetes, control blood pressure, be physically active and eat a diet low in saturated fat and cholesterol.

Drug therapy to treat PVD may include medicines to help improve walking distance (cilostazol and pentoxifylline), antiplatelet agents and cholesterol-lowering agents (statins).

In some patients, lifestyle modifications alone aren't sufficient, making angioplasty or atherectomy necessary.

Angioplasty is a nonsurgical procedure that dilates (widens) narrowed or blocked peripheral arteries. The doctor passes a thin tube called a catheter with a deflated balloon on its tip into the narrowed artery segment. Then the balloon is inflated to open the clogged area before it's withdrawn. Often, a stent—a cylindrical, wire mesh tube—is placed in the narrowed artery. There, the stent expands and locks open. It remains in place, keeping the diseased artery open.

Atherectomy is a technique that involves inserting a catheter with a small mechanically driven cutter to shave the plaque from the arteries. The plaque is stored in a collection chamber and removed from the artery when the catheter is withdrawn.

Cardiac catheterization lab services require a doctor's order. For information, call Alta Vista Regional Hospital's Diagnostic Imaging Center at **(505) 426-3546**.



Dr. Niranjan Seshadri is Las Vegas' first full-time cardiologist. He is an independent member of the medical staff at Alta Vista Regional Hospital and can be reached at **(505) 425-6052**.

New ways to stay dry

Continence Center opens on the Alta Vista campus

Urinary incontinence is the involuntary loss of urine at a time that is neither convenient nor socially acceptable. It's a symptom, not a disease or an inevitable part of growing older, and anyone can suffer from it, regardless of age. There are many types of incontinence—some are temporary, some are more permanent. The bright side is that even the more “permanent” forms of incontinence can be managed, improved significantly or cured. Receiving appropriate diagnosis and treatment of incontinence is important to help prevent complications such as skin breakdown or urinary tract infections.

Temporary causes of incontinence include:

- urinary tract infection
- constipation
- certain medications
- increased intake of caffeine, alcohol, artificial sweeteners or carbonated beverages

Some causes of incontinence, though permanent, can often be treated, including:

- weakness of the muscles holding the bladder in place
- weakness of the bladder and/or the sphincter muscles
- overactive or underactive bladder muscles
- decreases in certain hormones, especially estrogen
- neurological disorders, such as multiple sclerosis and Parkinson's disease
- blockage of the urethra, such as in prostate enlargement

Alta Vista Urological Specialists is pleased to announce the opening of the Continence Center at their new location at the one-story medical office building at 108 Legion Drive, Suite D, on the Alta Vista Regional Hospital campus.

“The relocation of our office is a benefit to our patients, allowing convenient access to the hospital and its services,” says Aaron Geswaldo, D.O., urologist at Alta Vista Urological Specialists. “We are committed to providing high-quality evaluation and compassionate treatment for all types of urinary incontinence.”

Urodynamic studies are performed at the Continence Center. The study, a series of tests and X-rays that provides a detailed look at bladder, urethra and sphincter function, helps diagnose problems with storing urine or



voiding. The study takes approximately 30 to 45 minutes. When it's finished, the physician will discuss the results with you and recommend several treatment options unique to your needs.

For an appointment, call Alta Vista Urological Specialists—the office of Akhil Das, M.D., and Dr. Geswaldo—at **(505) 454-4000**.

HEALTHWISE QUIZ

How much do you know about ADHD?

Take this quiz to find out how much you know about attention deficit hyperactivity disorder (ADHD).

- 1 Which of the following is *not* a symptom of attention deficit hyperactivity disorder?
 - a. hyperactivity
 - b. obsession
 - c. impulsivity
 - d. inattention
- 2 ADHD is thought to be caused by:
 - a. poor parenting
 - b. a genetic disorder
 - c. rheumatic fever
 - d. all of the above
- 3 Other disorders may accompany ADHD in as many as one in three cases. These include:
 - a. Tourette's syndrome
 - b. learning disabilities
 - c. bipolar disorder
 - d. all of the above
- 4 Most children who have ADHD begin to show signs and symptoms of the disorder between ages:
 - a. 1 and 2 years
 - b. 4 and 6 years
 - c. 9 and 12 years
 - d. 13 and 15 years
- 5 Adults can also suffer from ADHD. To be diagnosed with the disorder, a person must:
 - a. have shown symptoms of ADHD in childhood
 - b. have suffered from a serious illness as a child
 - c. have trouble holding down a job
 - d. be a reckless driver

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



STROKE SMARTS

How to spot a stroke

A stroke is similar to a lightning strike—it can happen suddenly and without warning. However, there are sometimes warning signs that lightning is imminent, such as storm clouds, rain and thunder.

Warning signs can signal a stroke, too. If you spot them and act quickly, you may prevent severe disability or death. If you or someone around you show any of these symptoms, seek emergency medical treatment immediately:

- sudden numbness or weakness in the face, arm or leg, especially on one side of the body
- sudden confusion, trouble speaking or understanding
- sudden trouble seeing in one or both eyes
- sudden trouble walking, dizziness, loss of balance or coordination
- sudden, severe headache with no known cause

These signs point to a stroke in progress. Blood and oxygen are not getting to a part of the brain as a result of a burst blood vessel or a blood clot, and that portion of the brain begins to die. Speedy medical care may minimize brain damage.

RISK FACTORS

Lifestyle factors and other health conditions that weaken blood vessels or contribute to blood clots increase your risk for stroke. You can control or treat some of them, such as high blood pressure, smoking, diabetes, carotid or other artery disease, abnormal heart rhythm, transient ischemic attacks (mini-strokes), certain blood disorders, sickle cell disease, high blood cholesterol, high triglycerides, physical inactivity, obesity and substance abuse.

Factors you can't change include increasing age, gender (more men suffer strokes), family history, race (African-Americans face greater risk) and having had a prior stroke or heart attack. Talk to your doctor about ways to reduce your risk for stroke and be prepared to act quickly if warning signs appear.

Outward bound

10 play-safe tips for your kids

What's one of the best things to say to your child? Go outside and play! Close supervision, proper protective gear and these simple precautions will help your kids safely enjoy the great outdoors:

- 1 Apply a sunscreen with an SPF of at least 15 every day—even on cloudy days—and reapply every 90 minutes, especially after swimming or sweating.
- 2 Outfit kids with brimmed hats and don't forget the sunglasses.
- 3 Keep babies under age 6 months out of direct sunlight and in the shade.
- 4 Avoid using swimming aids such as "floaties." They don't substitute for a life vest and can give kids a false sense of security.
- 5 When kids are swimming, keep a portable phone and rescue equipment like a shepherd's hook and life preserver nearby.
- 6 Supervise kids at all times near water and stay within arm's length of babies and toddlers. If you have to step



away even for a moment, get everyone out of the pool area and take little ones with you.

- 7 Insist kids wear proper protective equipment, especially a helmet, wrist guards and knee and elbow pads when bicycle riding, skateboarding and in-line skating.
- 8 Teach kids to bike skillfully. Enroll your children in a class to practice basic skills, such as balance and braking, on a smooth surface away from traffic.
- 9 Visit playgrounds that have soft surfaces like wood mulch or chips, shredded rubber tires or sand to lessen the impact of falls. Avoid play equipment on asphalt, concrete, packed dirt and grass.
- 10 Don't let kids wear helmets, necklaces, backpacks, scarves or clothing with drawstrings while on playgrounds.



Fire up the grill!

But read these food-safety tips first

For many people, summertime fare means fresh, fast, no-fuss meals cooked outdoors. However, warm temperatures can set the stage for a nasty bout of food poisoning. Take these

precautions to make sure your meals are safe:

- **Defrost thoroughly.** Place frozen foods in the refrigerator for safe thawing. If meats are out too long, bacteria can produce illness-causing toxins that remain active even during cooking.
- **Marinate right.** Keep foods refrigerated while marinating.
- **Transport safely.** When traveling, use an insulated cooler with enough ice or cold packs to maintain a temperature of at least 40° F. Wait until you're ready to leave to

pack refrigerated foods in the cooler. Then place it in the coolest part of the car—not the trunk. When you arrive at your destination, move the cooler into the shade, avoid opening it frequently and replenish ice as needed.

- **Bring extra plates and tools.** Use one

platter and spatula, tongs and sauce brush for raw foods and a different platter and utensils for cooked foods.

Don't use a fork to turn meats since puncturing can introduce surface bacteria into the meat.

- **Keep clean.** Bring paper towels and disposable wipes or a sanitizing gel for convenient hand washing and surface cleanup.

- **Prepare the grill.** Light the coals and allow the cooking surface to heat up to kill microorganisms before putting on the food.

Is it done?

Use an instant-read meat thermometer to test meat's doneness. Grill precooked meats such as hot dogs to 165° F until steaming hot. Refer to the chart at right to determine when cooked meat is safe to eat.

Meat product	Safe temperature
poultry	180° F
pork	160° F
beef, ground	160° F
beef, steaks or roasts	145° F
veal	145° F
lamb	145° F

ALTA VISTA WELCOMES NEW INTERNIST



JASMIN BREITUNG, M.D.

Jasmin Breitung, M.D., is Alta Vista Regional Hospital's newest medical staff member. Dr. Breitung is an internal medicine and psychiatry physician.

As an internist, Dr. Breitung looks forward to providing long-term, comprehensive care in the office, managing both common and complex illnesses of adults and the elderly. Internal medicine is the practice of diagnosing and treating internal diseases—those that affect internal organs or the body as a whole. In addition, she practices psychiatry, a branch of medicine that studies and treats mental and emotional disorders.

Dr. Breitung completed her medical degree at Ross University School of Medicine in the Commonwealth of Dominica, West Indies. She finished her training with a dual residency in internal medicine and psychiatry at Rush University Medical Center, Department of Internal Medicine and Psychiatry, in Chicago, Ill. She is board eligible in internal medicine and psychiatry.

"I am happy to be in this close-knit community," says Dr. Breitung. "I look forward to having a positive impact on health and illness here in Las Vegas and the surrounding areas."

"We are pleased to have Dr. Breitung join the community," says Brian Gibbons, chief executive officer at Alta Vista Regional Hospital. "Her capability of providing internal medicine and psychiatry medicine is a welcomed addition to our medical staff."

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