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FAMILIES



COMMUNITY HOSPITAL  
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FALL 2013 \$2.95

What Is a  
Hospitalist?

GET PAST  
THE PAIN  
OF PAD

A Prescription  
for Better  
Health

JAKE  
BECAME AN  
EVERYDAY  
HERO WHEN  
HIS EMT  
TRAINING  
WAS PUT TO  
THE TEST  
page 50

## Kate *Expectations*

While her pregnancy wasn't always a  
fairy tale, the **DUCHESS OF CAMBRIDGE**  
never stopped smiling





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**SAFETY FEATURE**  
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## SPECIAL

### In Good Hands

For more than a decade, thousands of people, including Louise Thompson of Valparaiso, have come to the Hand Center at St. Catherine Hospital for relief.

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With fatigue, stress and morning sickness, pregnancy is rarely the stuff of fairy tales. Kate Middleton, the Duchess of Cambridge, can attest to that. Learn about the makings of a healthy pregnancy to give your own little prince or princess a strong start to life.



# On Staying Healthy

*Working together to help you be well*



John Gorski

**I**ndiana, unfortunately, ranks among the states at highest risk for a number of unhealthy behaviors—33rd for diabetes, 42nd for obesity, 36th for hypertension and 44th for smoking, according to 2012 America's Health Rankings®. Together we can work to change these numbers by taking action against unhealthy lifestyles and the elevated incidence of diseases.

At the hospitals of Community Healthcare System, we have the expertise of our doctors, caring medical professionals, advanced technology and facilities, and hundreds of free and low-cost screenings to provide you and your family all of the services necessary to stay healthy.

The Affordable Care Act puts in place new consumer protections, provides additional coverage options for preventive care and gives you the tools you need to make more informed choices about your health. These healthcare law reforms will continue to roll out through 2014 and beyond.

Our hospitals—Community Hospital in Munster, St. Catherine Hospital in East Chicago and St. Mary Medical Center in Hobart—offer many programs that support preventive care. We offer smoking cessation classes, screenings and information on managing blood pressure and lipids, fitness center class passes, nutrition counseling and many other programs to help you maintain a healthy weight.

In the pages of this issue, you will read about some of the services Community Healthcare System offers to address healthier lifestyles. New Healthy Me (page 6) is an incentive program that has been helping our employees stay on track with their health. Now it's being offered to businesses across the region so they can help improve their employees' health.

Community leaders are working together with St. Mary Medical Center to invest in the future of healthcare (page 50) with medical training for high school students. Area residents are walking again without pain after getting the treatment they need for peripheral arterial disease at the PAD Center of Community Hospital (page 52). To help patients make more informed choices regarding their health and their prescription medications, the pharmacy department at St. Catherine Hospital has opened a retail outlet (page 54).

These are just a few of the ways we're reaching out to the community to promote healthier lifestyles. You'll find Community Healthcare System is the place to turn to not only in times of sickness but also when you are healthy, so we can help keep you that way.

John Gorski  
Chief Operating Officer  
Community Healthcare System



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## Outstanding Emergency Team

St. Catherine Hospital's emergency medicine care ranks among the top 5 percent of all hospitals in the nation, according to a recent study released by Healthgrades®. St. Catherine Hospital is one of only 263 hospitals across the country to receive the 2012 Healthgrades Emergency Medicine Excellence Award™.

CEO Jo Ann Birdzell says the award means that St. Catherine's emergency care rivals that of the top facilities in the nation.

"Achieving this level of success requires real teamwork, from the time a patient arrives in the Emergency department to their care in the hospital following admission," says Birdzell. "Our multidisciplinary approach enables us to diagnose, triage and provide timely care. We are proud



of our professional, technical and support staff who work hard every day to give the very best care to patients. The Emergency Medicine Excellence Award is a tribute to those efforts."

## Simply the Best

Healthgrades®, the nation's leading independent ratings organization, has once again named Community Hospital among America's 50 Best. The Munster hospital is the only hospital in Indiana to achieve this distinction six years in a row.



As one of America's 50 Best Hospitals, Community Hospital has demonstrated consistently superior performance in clinical outcomes across 27 common procedures and conditions from diagnoses such as heart attack and pneumonia to procedures such as hip fracture and knee replacement.

"This extraordinary achievement demonstrates that we are focused on the things that matter most to our patients, including clinical excellence and a total caring environment," says Don Fesko, chief executive officer. "This commitment is renewed with each and every patient so that we continually deliver the right care to the right patient at the right time."



The Healthy 4 Life team at St. Mary Medical Center has earned Level 1 accreditation from the American College of Surgeons Bariatric Surgery Center Network, being recognized for excellence in care provided to all patients, including those who require the most challenging, complex care.

## Center of Excellence

The Healthy 4 Life bariatric surgery program at St. Mary Medical Center has received full accreditation as a Level 1 facility from the Bariatric Surgery Center Network Accreditation Program of the American College of Surgeons. This designation means that Healthy 4 Life has been recognized for excellence in care provided to all patients, including those who require the most challenging, complex care.

To achieve this accreditation, hospitals first undergo an on-site evaluation by experienced bariatric surgeons who review the program's structure, processes and quality of data using strict guidelines.

"I am proud of the center of excellence designation that recognizes the hard work and commitment our team has made to provide excellent and compassionate care to our patients," says Janice Ryba, chief executive officer.

The Level 1 distinction also allows Medicare coverage of bariatric surgeries for those who have been diagnosed with coexisting health conditions related to obesity.

ONLINE



## Experience Our Quality Care Firsthand

To learn more about the programs and services available at the hospitals of Community Healthcare System, visit [www.comhs.org](http://www.comhs.org).

# Dream **TE**

***Hospitalists** partner with patients and physicians to provide personalized care*

BY ELISE SIMS

**S**o many patients, so little time. To help remedy this growing dilemma for primary care physicians and their patients, the hospitals of Community Healthcare System have established Hospital Medicine programs, utilizing the services of hospitalists.

## WHAT IS A HOSPITALIST?

Hospitalists are doctors who specialize in the care of patients in the hospital as opposed to an organ (e.g., cardiology), a diagnosis (e.g., oncology) or a patient's age (e.g., pediatrics). As a growing national trend, hospitalists are not only improving efficiency and productivity but also are making a positive impact on patient outcomes and satisfaction.

Established only about a decade ago, hospitalists are currently found in about 75 percent of all U.S. hospitals. The specialty continues to experience rapid growth because hospitalists have been proven to add convenience and efficiency, enhance patient safety and address the need for more specialized and coordinated care of hospitalized patients.

Hospitalists are board-certified internal medicine physicians who have undergone the same training as other internists, including medical school, residency training and board-certification examination.

"The hospitalist specializes in inpatient care," says Ronda McKay, RN, MSN, CNS, chief nursing officer and vice president of Patient Care Services at Community Hospital. "All are internal medicine doctors who take care of a broad variety of medical conditions. Because they are in the hospital 24 hours per day, they have the extra time to collaborate with the patient's family and work on the transition of care to the home to put their minds at ease."

The hospitalists are an asset to the healthcare team and provide many benefits to patients at Community Hospital in Munster, St. Catherine Hospital in East Chicago and St. Mary Medical Center in Hobart. They are available during the day at the hospital to meet with family members, able to follow up on tests, answer nurses' questions and deal with any immediate issues that may arise. In many instances, hospitalists may see a patient more than once a day to ensure that care is going according to plan and to explain test findings to patients and family members.

"When a patient—a very sick patient—is in the hospital, there may be several questions that come up or occur every hour," says Fulton Porter III, MD, hospitalist at



Chief Nursing Officers (left to right) Paula Swenson, RN, MS, of St. Catherine Hospital; Ronda McKay, RN, MS, CNS, of Community Hospital; and Tammie R. Jones, RN, MS, of St. Mary Medical Center agree that hospitalists are enhancing patient safety by increasing communication between healthcare team members and addressing the need for more specialized and coordinated care of hospitalized patients.



# AM

Community Hospital in Munster. “The hospitalist assures that someone is in the hospital at all times to attend to those immediate concerns and helps streamline the care between all members of the care team.”

Hospitalists organize the communication between different doctors caring for a patient and serve as the point of contact for other doctors and nurses for questions or summarizing a comprehensive plan of care. They are also the main physician for family members to contact for updates on a loved one.

“Hospitalists ensure continuity of care by directly speaking with the primary care physician who will follow the patient on an outpatient basis,” says Paula Swenson, RN, MS, vice president of Patient Care Services and chief nursing officer at St. Catherine Hospital. “They also allow our primary care physicians to be more available to patients in the outpatient setting [their office].”



Amaka Nweke, MD, medical director of the hospitalists program at St. Mary Medical Center.

Hospitalist Fulton Porter III, MD, is in the hospital at all times attending to immediate concerns and answering questions for patients, including Keith Harper of Lake Village.

## COORDINATING QUALITY CARE

Because hospitalists are in the hospital round the clock, they are able to maintain communication between all team members, track test results and order necessary follow-up tests promptly.

“We help to coordinate care between consultants and other members of the care team,” says Amaka Nweke, MD, medical director of the Hospital Medicine program at St. Mary Medical Center. “We work very closely with the case managers, quality care coordinators, social workers, physical therapy and pharmacy teams. Then at discharge, we communicate with primary care providers and close the loop to ensure that all medical conditions are appropriately followed up.”

“With the hospitalists being on-site 24/7, the patient and their family have ongoing, direct access no matter what time of day it is,” says Tammie R. Jones, RN, MS, vice president of Patient Care Services and chief nursing officer at St. Mary Medical Center. “In addition to our ED physicians, who provide 24/7 coverage, the hospitalists

are able to assist in patient flow by discharging patients earlier than before.”

Since the hospitalist’s office *is* the hospital, they are also more familiar with the hospital’s policies and activities. Many hospitalists are involved in various hospital committees and assist in improving important areas such as patient safety, medical error reduction, effective communication between physicians and staff, and cost-effective patient care.

“Beyond clinical care, we also play an active role in enhancing the mission, vision and values of the hospital,” Nweke says. “We provide leadership on committees that directly affect patient care and can help to enhance the quality improvement initiatives within the hospital.” ●

ONLINE

## Visit Us Online to Learn More

For more information about the quality care provided by the hospitals of Community Healthcare System, visit [www.comhs.org](http://www.comhs.org)



# SPREADING

## the HEALTH

*Incentive-based program is reaping benefits for employees and employers alike*

BY ELISE SIMS



Neurology Patient Navigator Kim Sgouroudis, RN, on staff at St. Mary Medical Center, stays busy taking care of stroke patients, helping them understand and carry out their treatment plan. With little time for herself, she says she joined the New Healthy Me (NHM) employee wellness program to get back on track with her own physician visits, lab testing and weigh-ins.

“NHM has made everything extremely accessible such as the blood pressure cuff and scale near the cafeteria, obtaining health screenings, which I would not have completed had it not been so simple and quick,” Sgouroudis says. “It really helps when you are accountable to a program—to check in and receive encouragement.”

According to Mary Ellis, RN, a labor and delivery nurse at St. Catherine Hospital, the program works for her because it’s flexible and keeps participants engaged. She appreciates that there are so many possible ways to earn rewards through challenges, she says.

“This program allows you to participate at your own speed and on your own timetable,” says Ellis, who works the midnight shift. “You log in, read helpful information and feel like you are part of a group—all in the middle of the night.”

“Although I started the program to save money on my health insurance, I am now doing it for myself,” says Jacki Osenkarski, Community Healthcare System Call Center coordinator. “I have lost about 50 pounds and feel so much better physically and psychologically. I have reduced medications for diabetes and high blood pressure by 50 percent. Getting points for every healthy thing I do is an added bonus.”

### ● A LITTLE ME TIME

Healthcare employees like Kim, Mary and Jacki are known for doing things for everyone else, but New Healthy Me is something they finally can do for

themselves and it’s paying off, explains Roger Vogie, director of the NHM program.

NHM is a points-based incentive program that has been helping Community Healthcare System employees maintain healthier lifestyles. As employees participate in wellness activities throughout the year, such as exercising, losing weight, having an annual physical or joining a team walking challenge, they accumulate points that translate into rewards. Every 5,000 points accumulated means prizes such as gift cards and prize drawings and, upon discretion of the employer, money in their paycheck to offset healthcare premiums. For employers, NHM provides a tool to positively impact the rising costs associated with unhealthy lifestyle habits.

“Although we created this program for Community Healthcare System employees initially, ultimately we wanted to be able to build on this



After her husband, Arist, lost more than 75 pounds, Kim Sgouroudis, RN, says she joined the New Healthy Me (NHM) employee wellness program to get back on track with her own physician visits, lab testing and weigh-ins.





CFNI Call Center Coordinator Jacki Osenkarski has lost 50 pounds in the New Healthy Me program by exercising more and making healthier food choices.

success and share it with other companies,” Vogie says. “What we have now is a program that can be customized to fit any company’s specific needs. We’re taking NHM out into the community and offering it to other businesses so they can help improve their employees’ health, too.”

Employers can see real results, which may include a reduction in the number of reported days off work due to illness and a decrease in the number of healthcare claims filed annually, he says.

Since NHM is a HIPAA compliant program, it can be adapted easily to meet specific needs.

“If someone has a medical condition that doesn’t allow them to achieve the reward goal set for the program, we will work with them to develop another option to earn rewards,” Vogie says. “We want people to embrace their health and wellness regardless of their current health level. We don’t want people to think you have to be a marathon runner or that you have to be a vegetarian or that you need to be super-healthy. We just want them to be more cognizant of their health and their wellness and the things that they do every day.”

## RECEIVING REWARDS

Employees like Jacki and Kim, who pay into the Community Healthcare System health plan, also may earn a cash reward (spread out over each pay period) the following year.

Andrea Newton, wellness coordinator, is quick to point out that everyone is eligible for the program whether or not he or she is on the company’s insurance plan. For those who are, it’s cash in their paycheck to offset any increase in their insurance premiums.



CALL

## Are You a Business Owner? Call to Learn More

If you’re serious about your health, sign up today! Businesses interested in creating a healthier workforce can call the New Healthy Me department at **219-934-2861** to schedule a program presentation.

The ultimate “carrot” is that participants receive rewards for being accountable and practicing good health habits, Newton says.

“In our healthcare system, we work 24/7 shifts with our employees spread out in locations from Lake to Porter County,” says Newton. “We started a program that was Web-based so we would have a platform that could be available to anyone at any time. We created a program that enables us to constantly reach out to people so that they stay engaged on an ongoing basis.”

Because of the program’s accessibility and flexibility, NHM already has had a positive impact on its inaugural company’s workforce—with a reduction in healthcare claims and improvement in employee wellness and lifestyle habits, says Vogie.

According to Vogie, measurable results gathered from the first two years of the Community Healthcare System program show tangible dramatic improvements with some 97 percent of participating employees now screening their blood pressure regularly. There also is a 16 percent increase in those who monitor their cholesterol levels and a 12 percent increase in the number of employees who screen their blood sugar levels, he says.

Over the past two years, New Healthy Me has reimbursed some \$650,000 to healthcare system employees in their paychecks—claims savings have been \$4 for every \$1 spent on the program. ●

# MEMORY KEEPERS

BY ELISE SIMS

*Special care for loved ones dealing with Alzheimer's and dementia*

Everyone has memory lapses—forgetting someone's name or where a wallet was put down—but if the lapses become routine and interfere with your or your loved one's daily activities, it may be time to seek help. Hartsfield Village Memory Support Residence in Munster may offer the solution that many seniors and their families seek when facing the challenges of dementia and dementia-related illness.

Experiencing trouble with recent memories or getting confused easily can be a warning sign of dementia, whether it is Alzheimer's disease or a related cognitive disorder. Alzheimer's is a disease that affects a person's brain and memory—how someone thinks and behaves. More than 5 million Americans have Alzheimer's disease and 34,000 of them live in Northern Indiana.

"With a growing population of seniors in need, there are a lot more choices in care than there used to be," explains Suzanne Gillette, residential care administrator, Hartsfield Village. "But we may be the preferred choice because we offer all levels of care so that we essentially have a plan in place as our residents age."

## **TAILORED TO THE RESIDENTS**

For more than 15 years, Hartsfield Village Senior Living Community has enjoyed a reputation as the premier Continuing Care Retirement Community in Northwest Indiana, meaning that residents live as independently as possible, but with increased services available as their needs



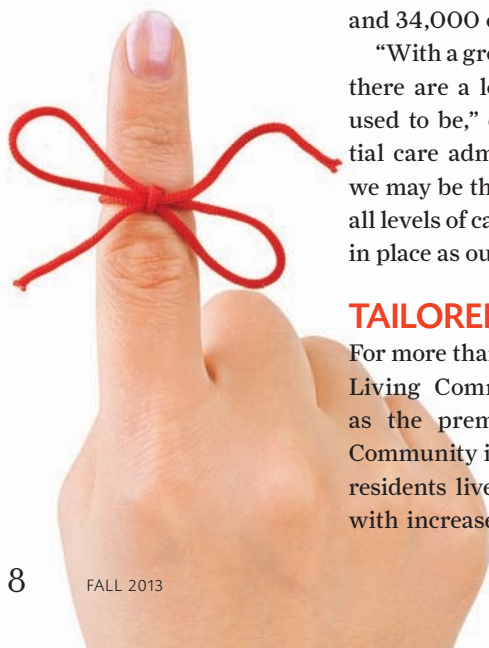
Each resident in the Memory Care Residence of Hartsfield Village has a care team that includes nursing staff, a program specialist, a dining room steward and a housekeeper. (Standing, from left) Kathryn Wood, co-director; and Brenda Obinger, co-director and activities director; and (seated) Kathryn Helfen, certified nursing assistant, welcome residents and their families to the Memory Support Residence.

change. The memory support residence opened almost six years ago as an addition to the independent living, assisted living and nursing care levels of service originally provided at Hartsfield.

According to Gillette, Hartsfield Village offers Memory Support residents dementia-specific programming to meet their daily needs as well as to stimulate brain activity. Staff share a collective dedication to assisting residents and their families with daily challenges. Residents enjoy amenities designed to enrich daily life including spacious private rooms, 24-hour nursing staff and recreational activities. Each resident has a care team that includes the nursing staff, a program specialist, a dining room steward and a housekeeper.

LOWER LEFT PHOTO BY THINKSTOCK

CONTINUED ON PAGE 49







# Bosom Buddies

*A woman's chance of having invasive breast cancer during her life is about 1 in 8.* When caught in its earliest stages, breast cancer has survival rates of nearly 100 percent. Schedule your mammogram today—and don't forget to remind a friend.

Living with **VIGOR**

# STEP It Up

# 27

WAYS TO  
MAKE YOUR  
WALK **ROCK**

BY BOB COOPER



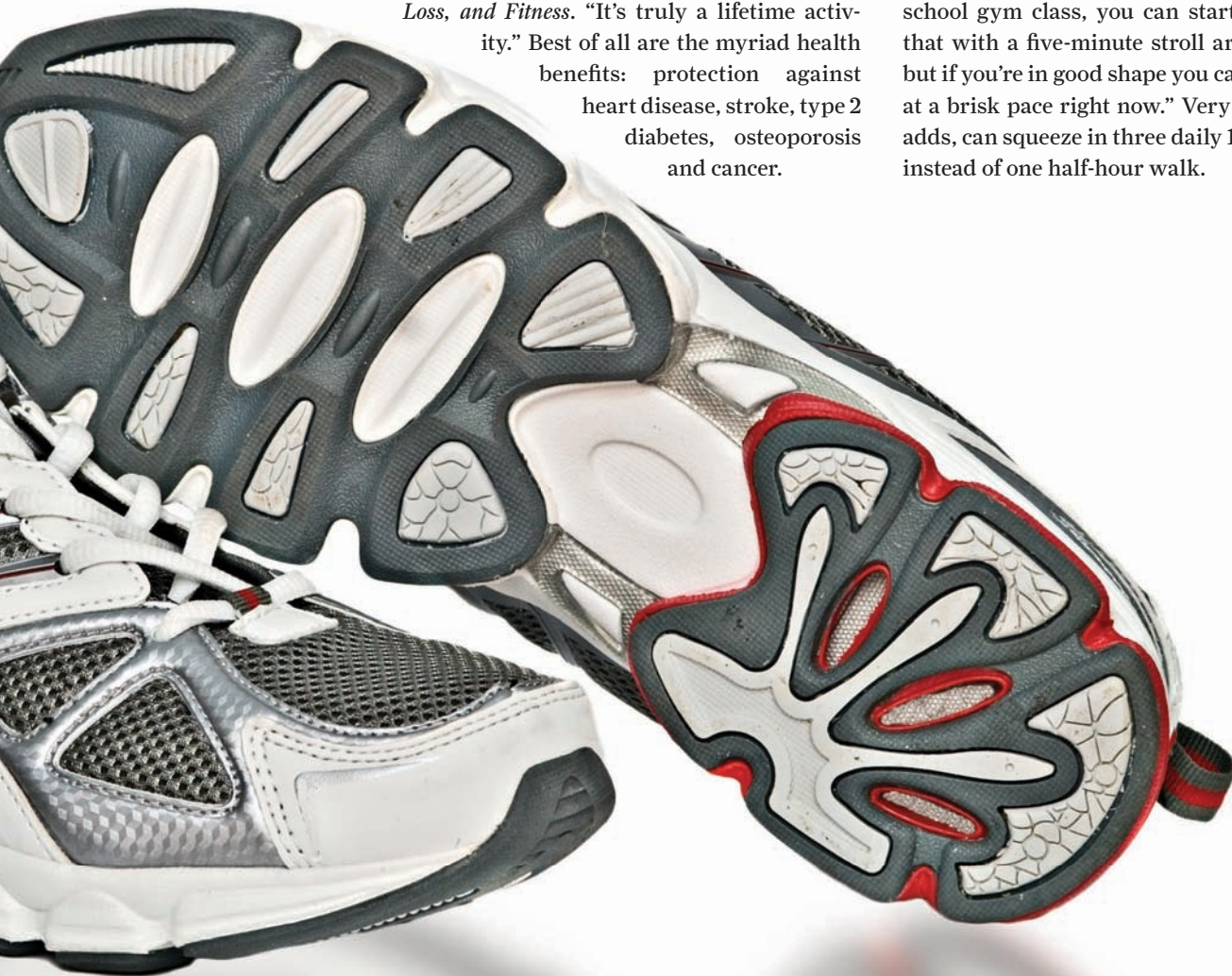


## Consider yourself a professional athlete.

After all, you mastered a superb form of physical exercise around your first birthday. It may not come with the fame and fanfare of the NFL or Wimbledon, but walking is safe, easy and a great way to stay in shape. It can be done almost anytime, anywhere, with no instruction and zero equipment except for a pair of shoes. It's also an activity with little risk for injury that can be performed at nearly any age.

"I'm a runner, mountaineer and surfer, but the one thing I should be able to keep doing when I'm 100 is walking," says Mark Fenton, author of *The Complete Guide to Walking for Health, Weight Loss, and Fitness*. "It's truly a lifetime activity." Best of all are the myriad health benefits: protection against heart disease, stroke, type 2 diabetes, osteoporosis and cancer.

"For health purposes you should do at least a half-hour of moderate physical activity, such as walking, five to seven days a week," Fenton says. "If you've done nothing physical since high school gym class, you can start building up to that with a five-minute stroll around the block, but if you're in good shape you can do hilly walks at a brisk pace right now." Very busy people, he adds, can squeeze in three daily 10-minute walks instead of one half-hour walk.





If you aren't walking more because you think it's boring or unchallenging, here are 27 ways to put a bounce in your step:

### 1 STEP OUT WITH YOUR SPOUSE.

Walks with your significant other can work wonders for a relationship because they ensure uninterrupted time to talk through problems ... or just talk.

### 2 TAKE THE KIDS.

Having children walk with you (tempt them with a destination they'll enjoy—like a smoothie shop) gives them exercise and makes you a better role model. Toddlers and babies can be pushed in sturdy strollers with bike tires.

### 3 DOG IT.

Your pooch needs exercise, too, and you'll feel safer. No dog? Your neighbor will owe you one if you regularly volunteer to walk her restless Rover.

### 4 REBOOT YOUR ROUTES.

Plodding the same route every day is a motivation killer. Vary your routes as much as possible, even if it always starts and ends at your front door.

### 5 CHANGE THE SURFACE.

A golf course fairway, a sandy beach, the shoulder of a bike path and even snow are among the soft surfaces that can make your walk more challenging—and ease the pounding on your joints.

### 6 CALL A FRIEND.

Never have the time anymore for a long chat with your neighbor or best friend? Sure you do—on your next half-hour walk.

### 7 JOIN THE CLUB.

Make new friends by joining walks organized by a local club or group. Many hospitals, YMCAs, park departments and health clubs have walking groups.

### 8 MEET A FRIEND.

Start your own walking group with one or more friends who can meet regularly on the same days and at the same times.



### 9 MEASURE THE MILEAGE.

Use a car odometer, a step-rate pedometer or a GPS watch, depending on your budget, to measure and record each day's walking distance. Then challenge yourself with goals that gradually increase your mileage.

### 10 GAUGE THE GAIT.

Strapped for time? Walk faster rather than farther. Divide the walk time by distance walked to determine your per-mile speed or average miles per hour.

### 11 ESTIMATE THE EFFORT.

Heart-rate-monitor watches make it easy to keep track of your effort level so that it's just right—and the constant feedback should motivate you to maintain or increase your pace.

### 12 TAKE THE STAIRS.

The more flights of stairs you fit into your day at home or work, the more you will challenge your heart, lungs and legs.

### 13 TREK TO THE TOP.

Striding up hills will make you fitter and stronger. Add one big climb or several small ones once or twice a week. If you live in a flat area, walk inclines on a treadmill.

### 14 GO TO THE MALL.

Do climate-controlled walks at the nearest mall, which may open early for walkers or walking clubs.

### 15 WALK ERRANDS.

Anytime you have errands within 20 blocks of home or work—the mailbox, the bank, the pharmacy—walk rather than drive.

### 16 CHANGE DIRECTION.

Walking backward strengthens your muscles in a different way and enhances your coordination. But stick to a safe and smooth surface, like a track or treadmill.

### 17 ADD INTERVALS.

Alternating between a moderate and a brisk pace every one to three minutes burns more calories and gets you fitter than steady walking.

## 18 POWER UP.

Power walking—striding with quick, compact steps and a powerful arm swing at chest height—gives you a full-body workout.

## 19 ENTER AN EVENT.

Find a fundraising walk or run/walk—such as an AHA Heart Walk, ACS Relay for Life, Walk MS, Avon Walk for Breast Cancer or Race for the Cure—to add a goal and purpose to your daily walks.

## 20 DO A CIRCUIT (INDOORS).

After every few minutes of walking on your gym or home treadmill, step off to do a different exercise, such as crunches or dumbbell lifting, then immediately resume walking to keep your heart rate up.

## 21 DO A CIRCUIT (OUTDOORS).

Try doing a nonstop cardio/strength “circuit” outside. Find a park or bike path with parcourse or Fit-Trail equipment, or improvise by doing midwalk exercises using lampposts, lawns and logs.

## 22 GET SMART.

Listen to audiobooks by downloading them to your MP3 player or streaming them to your smartphone. You could even learn a foreign language.

## 23 YOU BET.

Plunge into the new phenomenon of “social betting” by staking money on achieving your walking goals on sites like stickk.com or gym-pact.com.

## 24 TAKE A HIKE.

Don't wait for your next vacation or road trip; explore the trails at nearby county and state parks. Consider using hiking poles to engage your upper body and enhance your balance on hikes.

CALL

### Get Moving

Learn more about how you can live a healthier life. For information about joining a Well Walker's Club, locations, meeting times and upcoming free seminars, call the St. Catherine Hospital Community Outreach department at **219-392-7135**.



# Get Well Walking

Caring staff at St. Catherine Hospital knows every step counts when working toward wellness and has helped to coordinate several Well Walker's Clubs. Walkers meet on a regular basis to learn about healthier lifestyles and improve health through increased exercise. Locations:

Roberto Clemente Center  
3616 Elm St., East Chicago  
First Friday of the month,  
10 a.m.  
**219-391-8485**

Wicker Park Social Center  
2125 Ridge Road, Highland  
First Tuesday of the  
month, 1 p.m.  
**219-313-3934**

Whiting Community  
Center  
1938 Clark St., Whiting  
Second Thursday  
of the month, 1 p.m.  
**219-659-0860**

## 25 PREP FOR A TRIP.

Plan a trip with your spouse or family that's focused on walking or hiking, or book a walking or hiking vacation.

## 26 TRY RACEWALKING.

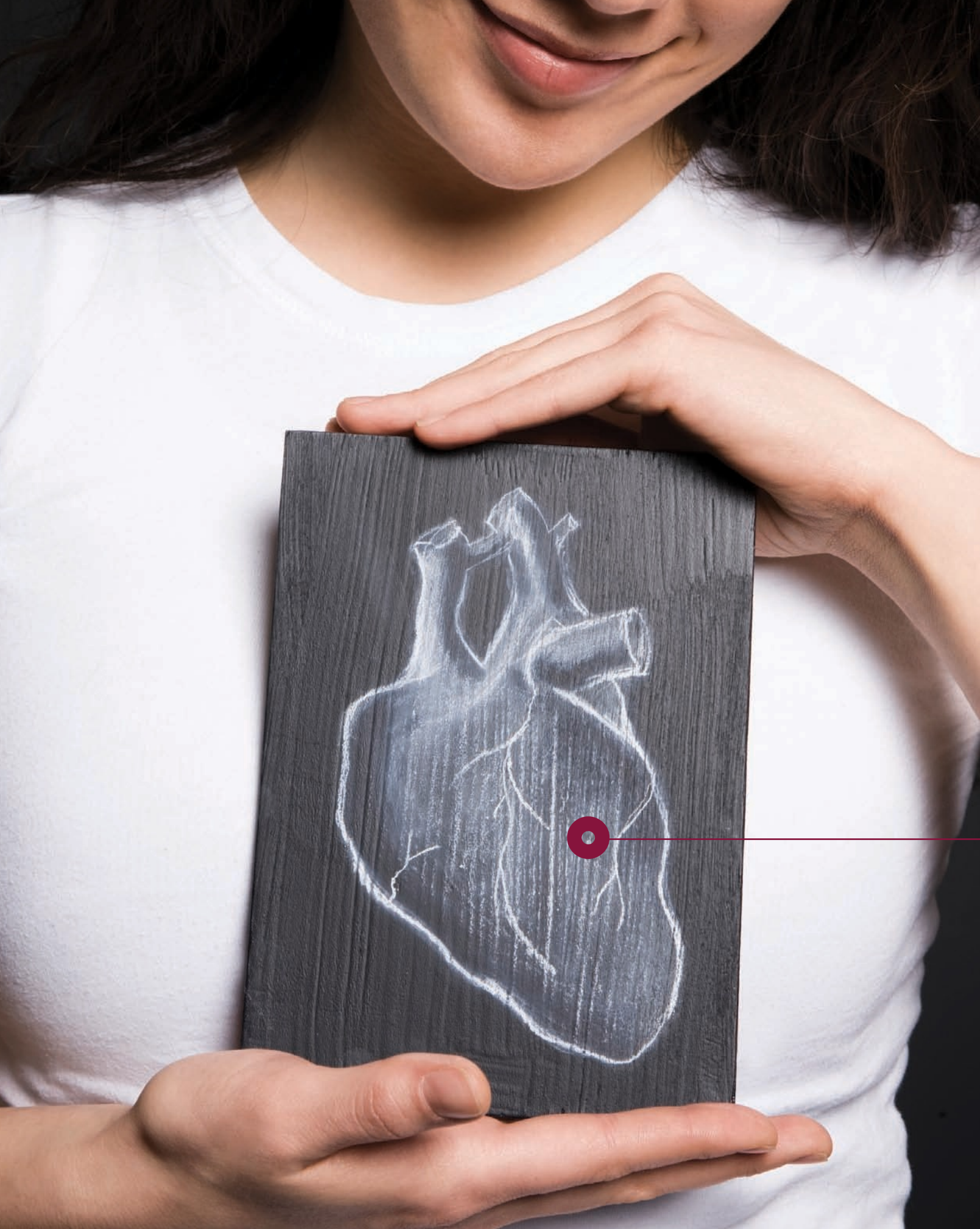
If brisk walking becomes too easy, switch to racewalking form—you'll go even faster and get a great workout. Learn how in a beginners clinic (check racewalking.org).

## 27 WALK + RUN.

If walking at any speed feels too easy, gradually phase in short segments of jogging (wear running shoes). ●









*These three conditions can threaten your heart.  
Learn how to avoid them* ● BY STEPHANIE R. CONNER

# YOUR Mightiest MUSCLE



**T**he heart beats. It pumps. It pounds. And it races. This mighty muscle works hard for you. Are you doing all you can to make its job easier? To keep your ticker in shape, start by better understanding the different conditions that can affect your heart.



## Condition 1 HIGH CHOLESTEROL

When your doctor is worried about your cholesterol levels, there is a reason: People with high total cholesterol levels have nearly twice the risk of heart disease as those with optimal levels, according to the Centers for Disease Control and Prevention (CDC).

Cholesterol is a fatlike substance that our bodies create and use naturally. But we also take in cholesterol through food that's animal-based, and it can build up inside your artery walls. Eventually, this buildup can cause atherosclerosis, which occurs when substances accumulate along the artery walls and form plaque. As the arteries narrow and stiffen from the buildup, the flow of blood slows or even stops, which is what happens during a heart attack. (If this occurs in arteries to the brain, it causes a stroke.)

"Atherosclerosis is what causes the majority of heart attacks and strokes," says Janet Bond Brill, PhD, RD, author of several books on heart health, including *Blood Pressure Down: The 10-Step Program to Lower Your Blood Pressure in 4 Weeks—Without Prescription Drugs*.

A simple blood test can tell you whether you have dangerous cholesterol levels.

## Condition 2 HIGH BLOOD PRESSURE

Nearly one-third of American adults have high blood pressure (also called hypertension), a major risk factor for both heart attacks and strokes. Blood pressure is the force with which blood pushes against the walls of the arteries.

While your blood pressure might change throughout the day—for example, it will increase temporarily when you exercise or when you're feeling especially stressed—the concern is when blood pressure is consistently high. That's because constantly elevated blood pressure causes the heart to work harder to pump blood to the rest of the body.

High blood pressure also "fuels inflammation and the process of atherosclerosis," Brill says. "Anything that contributes to inflammation is not good."

Common risk factors for high blood pressure include family history, being overweight, not getting enough exercise, smoking, stress, drinking too much alcohol and consuming too much salt.

You should have your blood pressure tested as part of regular checkups. If you're at risk, you also may want to purchase a blood pressure monitor so you can check your levels at home.



Your Heart,  
BY THE NUMBERS

**4** NUMBER OF  
**CHAMBERS**  
IN THE HEART

Average adult  
resting heart rate  
(beats per minute)

**72**

**35**  
million  
NUMBER  
OF TIMES  
your heart  
beats in a year

**6**  
Number  
of quarts  
of blood in  
the body



## Condition 3 DIABETES

Diabetes can have a profound effect on the heart. In fact, people with diabetes are two to four times more likely to develop cardiovascular disease than those who don't have diabetes.

"Blood sugar affects the lining of the arteries and leads to much more buildup of plaque and accelerates atherosclerosis, especially in women," says Jennifer Mieres, MD, a physician spokeswoman for the American Heart Association's Go Red For Women movement.

The resulting diminished blood flow, she adds, leads to some of the serious complications of diabetes, such as nerve damage. Risk factors for type 2 diabetes (the preventable kind) include being overweight, not getting enough exercise, and having low HDL (good) cholesterol and high blood pressure levels.

## What You Can Do

We've covered the major risks. Now, here comes the good news.

"Eighty-two percent of all heart disease can be prevented by knowing your risk and controlling your risk with lifestyle changes," Mieres says.

Eating a diet high in fruits and vegetables is the perfect place to start. Then, try to eliminate processed foods—think of anything that comes in a package—and reduce your sugar intake, Mieres says.

Regular exercise is also essential. "Exercise increases HDL and lowers LDL (the bad cholesterol) and also helps control diabetes or prevent the development of type 2 diabetes," she says. "It lowers blood pressure and ultimately cuts your risk of heart disease."

Yet another powerful step is to quit smoking. And if you have diabetes or high cholesterol or high blood pressure levels, talk to your doctor about medication.

With each improvement in your lifestyle, over time, your heart will thank you—and you'll reap the benefits of a healthier (and longer!) life.

"The most important message is that heart disease is a largely preventable disease," Brill adds. "You don't have to die of a heart attack or stroke if you take simple measures to lower your risk." ●



CALL

## Know Your Numbers

Find out your risk for heart disease and ways to prevent it by calling **219-836-3477** or **866-836-3477** to register for a reduced-cost coronary health appraisal. Free educational classes are also offered to learn about decreasing your risk of heart and vascular disease. For more information, visit us online at [www.comhs.org](http://www.comhs.org).

## Get to Know Your Heart

Some things in life are unavoidable, but developing heart disease may not be one of them.

By taking ownership of your heart health, you can prevent or better manage heart disease. Community Healthcare System hospitals—Community Hospital, St. Catherine Hospital and St. Mary Medical Center—offer a coronary health appraisal to help determine your heart health. The health appraisal is a series of tests including blood pressure, blood draw to test for total cholesterol, HDL, LDL and blood sugar as well as waist circumference and questionnaire to determine risk of heart disease.

Take steps to decrease your risk of developing more serious conditions such as diabetes, advanced heart disease and stroke by living a more active and healthy lifestyle. With proper education and screenings and by adapting a healthy lifestyle, you can be in control of your heart health.








# Where does your family tree lead?

*It's about more than tracing your roots.*

Children of parents with heart disease are more likely to develop the condition themselves. Talk to your parents about their health histories—and talk to your doctor about starting heart screenings earlier.

Living with **VIGOR**



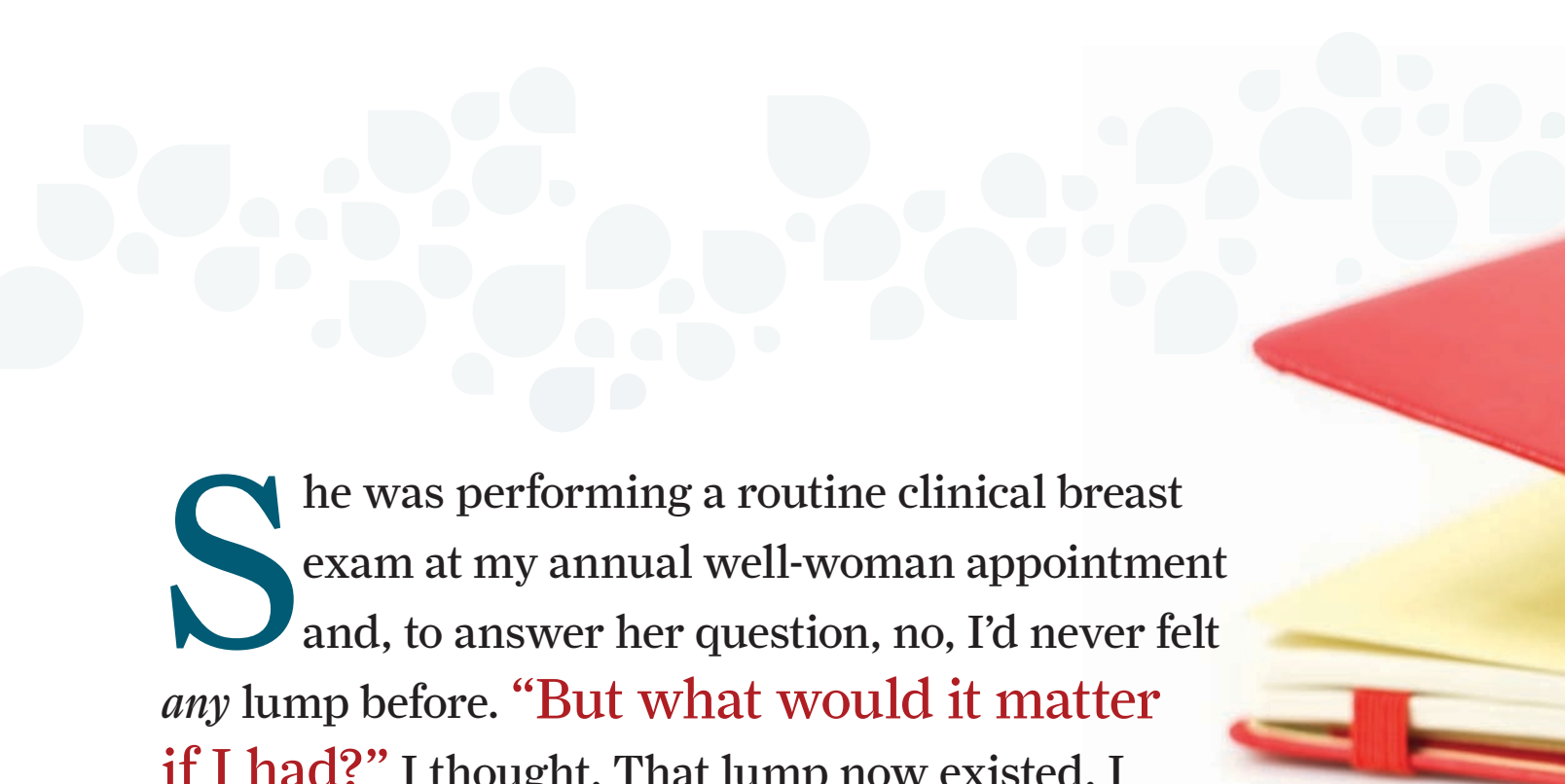


*How your  
once-a-year  
exam can  
save your  
**LIFE***

# Well, Well, Well.

BY AMANDA  
KIPPERT

**S**ix years ago, when I was just 26, my gynecologist asked me a question that made my heart leap into my throat: “Have you felt this lump before?”



**S**he was performing a routine clinical breast exam at my annual well-woman appointment and, to answer her question, no, I'd never felt *any* lump before. **“But what would it matter if I had?”** I thought. That lump now existed. I obviously had breast cancer. **I was panicking.**

“I’ll schedule you for an ultrasound first thing tomorrow morning,” she said briskly. I asked her, point blank, whether it was cancer, even though I knew she wasn’t able to assess that through touch alone. I just wanted to hear her say, “No, don’t worry. It can’t possibly be.” But she replied, “This lump is the size and shape consistent with cancer.”

Needless to say, I endured a sleepless night. The next day, my ultrasound revealed I could breathe easy—it was a harmless cyst, not cancer. I practically danced out of the doctor’s office.

Still, the experience rattled me. How could I have missed a lump that was the size and firmness of a jelly bean when I was (most always) diligent about performing monthly breast self-exams? What if I’d blown off my annual exam and the lump *had* been cancer? Would it have been found in time?

### Early Detection Saves Lives

An annual exam, or well-woman exam, as it’s typically called, is a chance to review your overall health, including your weight, body mass index, blood pressure and any changes in lymph nodes. There also are a clinical breast exam, a pelvic exam and possibly a Pap test. And it’s a good time to talk to your doctor about changes in your health that you may have noticed in the past year.

This is also a time to talk to your provider about your cancer risk factors. Do you need help to quit smoking? Are you in the correct weight range? Do you have a family history of cancer?

“It’s good to alleviate any concerns you have,” says Debbie Saslow, PhD, director of breast and gynecologic cancers for the American Cancer Society (ACS). And if you’re unsure of how to perform a breast self-exam, this is the time to ask for a tutorial.

The importance of an annual exam is confirmed when you consider the continuous decrease in breast cancer deaths over the past 15 to 20 years. “About half the explanation is that the treatment is better ... and about half of it is us catching it early,” Saslow says.

### Every Year or Every Three Years?

It should be noted that the *annual* part of an annual exam is up for some debate. For younger women without a family history of breast cancer, the ACS recommends clinical breast exams every three years, then every year starting in your 40s. Similarly, if you’ve had normal results on recent Pap tests, the society says you can go three years until your next one. The U.S. Department of Health and Human Services, Office on Women’s Health, recommends these tests at least every two years for women younger than 30





and every three years after that. Plenty of women, however, choose to do these tests every 12 months. Whatever screening schedule you and your doctor decide upon, you should still visit him or her for a checkup every year. And taking a proactive approach to your breast health helps you stay alert to any potential problems in between visits.

“It’s important, should a woman ever detect a lump, that she see a health professional very quickly,” Saslow says. “Most of the time, it’s not breast cancer, but it’s important she gets checked out.”

Lumps often are simply cysts, which are fluid-filled sacs that can come and go on their own or follow your menstrual cycle. “They can get larger and be painful, and doctors can aspirate them with a very thin needle,” Saslow says. Other causes of lumps are benign, or non-cancerous, tumors. “If they’re not bothering you and they’re small, you might leave them in place.”

The point is, you shouldn’t be scared to get something checked out. Most of the time it’s nothing. And in the case that it is something, having it treated early is best for your health—and your peace of mind. ●

ONLINE

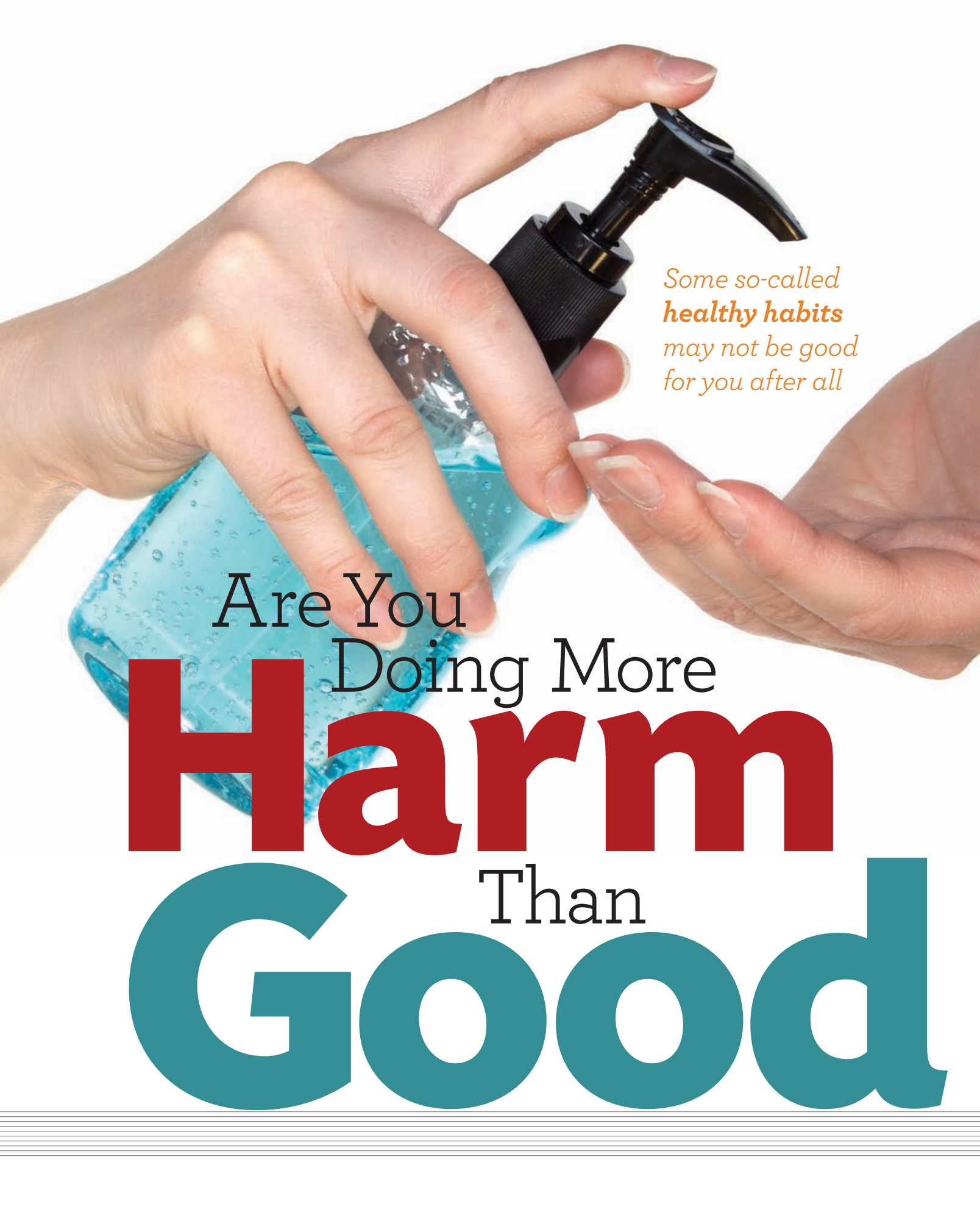
## Just for Women

For more information about specialized women’s care, the programs and services and advanced technologies offered by the hospitals of Community Healthcare System, visit our website at [www.comhs.org](http://www.comhs.org)



## SEEING CANCER MORE CLEARLY

**M**ammography can be an anxious experience for many women. The healthcare professionals at the Women’s Diagnostic Centers of Community Healthcare System understand these concerns and have created a less stressful environment that encourages women to undergo this lifesaving test. Community Hospital, St. Catherine Hospital and St. Mary Medical Center offer same-day results of screening and diagnostic services to help detect breast cancer at its earliest stages. Community Hospital has added a dedicated 3-D breast imaging high-resolution positron emission mammography (PEM) system to its comprehensive breast cancer services. PEM scanners are high-resolution breast positron emission tomography (PET) systems that show the location as well as the metabolic phase of a breast mass or growth. This view allows the physician to make the optimal cancer care decision for masses as small as the size of a grain of rice by distinguishing between benign (noncancerous) and malignant (cancerous) masses. St. Mary Medical Center’s Valparaiso Health Center offers advanced imaging 3-D mammography that combines a process known as tomosynthesis to produce a 3-D mammogram. This technology takes multiple images of the breast in a few seconds. The images allow physicians to examine the breast tissue layer by layer and see fine details more clearly.



*Some so-called  
**healthy habits**  
may not be good  
for you after all*


Are You  
Doing More  
**Harm**  
Than  
**Good**

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Sitcoms are riddled with story lines involving well-intentioned characters whose actions wreak havoc on the rest of the cast. Remember when Lucy tried to go a whole day without lying on *I Love Lucy*? She ended up alienating everyone around her with her good-natured honesty.

Fortunately for Lucy, she realized the error of her ways in just 30 minutes. But in real life, we don't always find clarity so easily. And sometimes our best intentions lead us to do more harm than good when it comes to our health.

"It's hard to separate out all of the recommendations that are coming out these days, with the 'You should do this and shouldn't do that.' It's overwhelming," says Deb Kiley, a nurse practitioner and former board member and active member of the American Association of Nurse Practitioners.

Here are nine ways you might be sabotaging your health.

## 1 OVERUSING HAND SANITIZER

The use of hand sanitizer has exploded in recent years. And why not? It's portable and easy to use. But it's not the best way to keep your hands clean, Kiley says. "In flu season especially, you want to make sure you're keeping your hands clean. But antibacterial everything everywhere will not foster resistance," she says.

### WHAT YOU SHOULD DO INSTEAD:

The single most effective way to prevent the spread of disease is hand washing, according to the Centers for Disease Control and Prevention (CDC). Wash your hands with soap and warm, running water for at least 20 seconds. Use hand sanitizer only when washing isn't an option.

## 2 BRUSHING AFTER YOU EAT

You may think that brushing your teeth after a meal will help reduce your risk of cavities, but that's not the case. In reality, many foods contain acids that break down teeth's protective enamel. Brushing right after a meal can loosen enamel particles and wash them away.

### WHAT YOU SHOULD DO INSTEAD:

Your body has its own way of cleaning the mouth and fighting plaque after meals. It's called saliva. To increase saliva production and also give you a fresh, clean feeling, dental experts recommend chewing sugar-free gum for 20 minutes after eating.

If you must brush after a meal, wait at least an hour. Otherwise, brushing twice a day—once in the morning and once at night—and flossing once a day will keep your pearly whites sparkling.



BY SHELLEY FLANNERY



## 3 TAKING A DAILY ASPIRIN

You've probably heard that taking an aspirin a day can help lower your risk for heart attack, and you'd be correct. The problem arises when people start themselves on an aspirin regimen without consulting their doctor. That's because there are conditions that aspirin can adversely affect, namely hemorrhagic stroke (burst blood vessel), tinnitus (ringing in the ears) and gastrointestinal bleeding, according to Mayo Clinic.

**WHAT YOU SHOULD DO INSTEAD:** Most people at average risk for heart disease don't need to take aspirin daily. Ask your doctor about what's right for you. If you're already on a self-prescribed aspirin regimen, don't quit—it may increase your risk for heart attack—but do consult your doctor.

## 4 HITTING THE GYM HARD ON WEEKENDS

The health benefits of exercise are numerous: weight maintenance, reduced risk of heart disease and cancer, improved mood, better sleep. And good for you for making time to work out. But if you hit the gym or playing field only on weekends, you could be setting yourself up for danger.

"If you push too hard for just one day, you greatly increase your risk of injury," Kiley says. There are more than 10,000 visits to ERs each day for sports- and exercise-related injuries, according to the CDC.

**WHAT YOU SHOULD DO INSTEAD:** Rather than cramming a week's worth of physical activity into two days, spread it out. You can still plan a more intense workout or game on the weekends, but get some exercise during the week as well, such as walking, stretching and using light weights.



## 5 GRILLING YOUR FOOD

It's a lower-fat option than frying or sautéing, but grilling may not be the perfect cooking method you think it is. Consuming charred meat may increase your risk for certain cancers; one study found a 60 percent increased risk for pancreatic cancer in people who regularly ate well-done meat, according to the American Cancer Society.

**WHAT YOU SHOULD DO INSTEAD:** Rather than closing down your backyard kitchen, follow a few simple rules to avoid overcooking and charring meat, which can produce carcinogens. Choose lean meats and trim them of excess fat. Precook meat in the microwave or oven to reduce the time it needs to be on the grill. Cut off and discard inadvertently burnt portions of meat.



## 6 SKIPPING MEALS

It sounds logical, doesn't it? If you want to lose weight, you should eat less. And skipping one meal a day means you'll eat a third fewer calories, right? Wrong. In fact, people who skip meals—usually it's breakfast that goes—end up eating more calories throughout the day than people who don't skip meals.

Similarly, overly restrictive diets can backfire. "They are not sustainable, and they tend to trigger overeating relatively quickly," says Marla Heller, RD, author of the best-selling *The DASH Diet Action Plan*. "When someone starts thinking about all the things they can't have, they focus on the unhealthy foods. They're trying not to have them, and then they go back and have three or four [portions] because they're fixated on the thing they can't have."

**WHAT YOU SHOULD DO INSTEAD:** Follow a balanced diet that includes breakfast, lunch, dinner and snacks. Don't cut out any food groups or eat too few calories.



## 7 TAKING A DAILY MULTIVITAMIN

Ensuring you're getting the recommended daily value of vitamins and nutrients sounds like a good idea, right? Actually, Americans aren't as deficient in vital nutrients as vitamin companies would have us believe. And with today's abundance of fortified products, including milk, orange juice, bread and cereal, most of us are getting sufficient amounts of essential vitamins and minerals, such as vitamin D, iodine, folic acid and iron.

Furthermore, a review by the Agency for Healthcare Research and Quality found that multivitamins had no effect on helping to prevent cancer and heart disease. And smaller studies have even suggested that taking a multivitamin actually raises the risk for breast, prostate and colon cancer.

**WHAT YOU SHOULD DO INSTEAD:** Eat a balanced diet. "There are guidelines that people over 50 should take a vitamin with B12 and women of child-bearing age should take folic acid," Heller says. "But in most cases, pills have never been shown to give the benefits of eating a really healthy diet. The whole food is much healthier than its individual parts."

## 9 DRINKING BOTTLED WATER

If most of your drinking water comes from a bottle, you may be missing out on one of the greatest public health advancements of the 20th century, according to the CDC. That's because fluoride, found in tap water, helps prevent tooth decay and fight cavities. It's not included in the vast majority of bottled waters.

**WHAT YOU SHOULD DO INSTEAD:** It's simple: Drink tap water. If you don't like the taste, get a filter or mask the flavor with a bit of lemon or orange juice or a slice of cucumber. If it's convenience you crave, buy a reusable bottle and fill it with water from the tap.

## MIX IT UP!

Keeping your exercise program varied and regular will not only reduce your risk of injury but can also get you closer to your goals. Community Hospital Fitness Pointe® in Munster offers fitness classes modeled after the top industry trends. Classes are available for members and nonmembers.

A class pass is perfect for people looking for group fitness classes without the cost or commitment of a full membership. Whether you're interested in Chair Yoga, Pilates4Abs, Yogilates, Indoor Cycling, Zumba, Flowlates, H.I.I.T. or AquaTone, these classes will get you in tiptop shape.

COACH consists of small-group personal sessions that provide training in TRX, Kettlebells, Pilates Allegro Reformer, Strength Training for Women Over 40 and Bootcamp Body Blast. Health coaches help people achieve a healthier lifestyle by combining fitness and support.

## 8 WEARING FLIP-FLOPS OR BALLET FLATS

Ladies, you know that 4-inch heels are bad for your body. They cause bunions, corns, and foot, knee and back pain. So you may think that giving your feet a break by slipping into a pair of flip-flops or ballet flats is doing them a service. But in fact, these options come with their own problems: They provide no support and little stability. And flip-flops in particular place undo stress on the toes as they require a constant gripping action to keep them on your feet when walking.

**WHAT YOU SHOULD DO INSTEAD:** Opt for well-fitting shoes with proper arch support that are sturdy enough for the activity you're doing. Choose sandals with ample support and protection and with multiple straps to keep them in place. ●



ONLINE

### Try a Class Pass

Community Hospital Fitness Pointe® offers the hottest exercise trends, personal training and fitness programs for every fitness level. Nonmembers may purchase a class pass without the commitment of a membership. Call **219-934-5348** or visit **www.fitnesspointe.org**



# Is your **S** shut-eye serving you well?

When it comes to getting a good night's rest, not all sleep is created equal. Various elements factor into what constitutes restful sleep, and different people have different needs. So how do you know whether you're really getting the rest you need? And what can you do to improve your sleep habits? *Read on.*

# Sleep

BY ELLEN OLSON

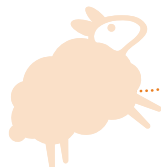
## TOP SLEEP DISORDERS

- 1** *Insomnia*  
Trouble falling or staying asleep
- 2** *Sleep apnea*  
Breathing interruptions during sleep
- 3** *Restless legs syndrome*  
A tingling sensation in the legs
- 4** *Narcolepsy*  
Daytime "sleep attacks"

## THE STAGES OF SLEEP

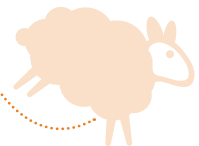
To understand sleep problems, it helps to first understand the sleep cycle.

**Stage 1** is **light sleep**, when muscles begin to relax. In this stage, you can be awakened easily and muscles twitch occasionally.



**Stage 2** is the **official onset of sleep** when you become disengaged from your surroundings and your heart rate and breathing are regular.

**Stages 3 + 4** are the **deepest and most restorative** stages of sleep—necessary for feeling well-rested and energetic the next day. If you're sleeping through the night but still not waking up refreshed, you may not be getting adequate deep sleep. Talk to your doctor about whether a sleep study is necessary.

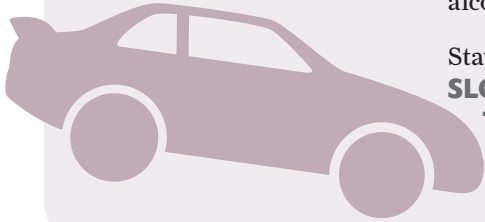


**40 MILLION** Number of Americans who suffer from **chronic, long-term sleep disorders.**





## The Dangers of **DRIVING** While Sleepy



**DROWSY DRIVING** causes 1 million crashes, 500,000 injuries and 8,000 deaths in the U.S. each year.

One sleepless night **CAN IMPAIR PERFORMANCE** as much as a blood-alcohol level of 0.10.

Staying awake for 17 to 19 hours straight **SLOWS AN INDIVIDUAL'S REACTION TIME** by about 50 percent compared with a well-rested driver.

## Are You Getting Enough?

Number of hours of **SLEEP PER NIGHT** the average adult needs for optimum health.



# 20%

Percentage of Americans who report getting **FEWER THAN SIX HOURS** of sleep a night.



ONLINE

### Schedule a Sleep Evaluation

If you are interested in finding out more about sleep services, visit us online at [www.comhs.org](http://www.comhs.org) or call for a referral to Community Hospital in Munster, **219-836-7075**; St. Catherine Hospital in East Chicago, **219-392-7666**; or St. Mary Medical Center in Hobart, **219-947-6790**.

### Health Benefits of **SLEEP**

- 1) Increased energy
- 2) Improved memory
- 3) Ability to maintain weight
- 4) Improved mood
- 5) Lower stress
- 6) Better immune function
- 7) Decreased risk for diabetes and cardiovascular disease

## Rest Assured

Sleep is one of the most underrated activities that affect our overall health and well-being. Inadequate sleep can lead to lack of productivity, serious medical conditions and even contribute to accidents. Of the more than 70 identified sleep disorders, most can be treated effectively once they are diagnosed. Finding a quality sleep center is paramount to determining whether you have a sleep disorder and which treatment options are best for you.

The Sleep Diagnostic services of Community Healthcare System offer the expertise and advanced technology for diagnosing sleep disorders ranging from difficulty falling asleep to excessive daytime drowsiness. Our highly experienced staff works with patients and their doctors to treat and improve the quality of both sleeping and waking hours.

"Sleep is essential to our well-being, yet most people don't talk about it with their doctors," says JoAnn Borns, manager of Sleep Diagnostics at St. Mary Medical Center. "The good news is that it's easier than you think to call for a sleep study, get the answers you need and on the road to feeling better through better sleep."











# NOBLE

*Instincts*

With challenges like morning sickness, fatigue and stress, *pregnancy is rarely the stuff of fairy tales.*

But you can provide your unborn child with care that's good enough for royalty.



by ALLISON  
THOMAS

# ure, she's gorgeous, famous and, of course, ROYAL.

But what was it about the pregnancy of Kate Middleton, the Duchess of Cambridge, that we found so fascinating? After all, just under 4 million American women have babies each year, just as Kate did when she delivered an heir to the British throne in July.

While each woman's pregnancy is unique, there are some experiences—both good and bad—that many expectant mothers share. Here, we take a look at the makings of a healthy pregnancy—even a royal one—from getting adequate nutrition and exercise to managing morning sickness, cravings and uncertainty.

## Ladies in Waiting

While Kate is one of the most recognized people on the planet, not everything about her pregnancy, or her life before it, is so different from that of other women, starting with waiting to have a baby (the Duchess turned 31 in January of this year).

In the U.S. as in many countries, the trend has been steady toward later childbearing years. The average age of first-time mothers was 25 in 2006 compared with 21 in 1970, according to the Centers for Disease Control.

"It's much more common to have babies later in life now, as people are paying off student loans and working and not necessarily meeting their partners early on," says Ann Douglas, a journalist and the author of *The Mother of All Pregnancy Books*.

And while you may see a notation of "high risk" on your medical folder—especially if you're pregnant after age 35—it doesn't mean you're doomed to have complications, Douglas says.

"This simply reminds your caregiver to look you over a little more carefully to see if anything is going on," she says. "Talk to your caregiver and ask if [you were] flagged as high-risk simply because you fall into the age category. Sometimes people panic, and they don't have to."

## Born with a Silver Spoon

You don't need a live-in chef or an on-call obstetrician to ensure your unborn baby gets the best nutrition possible to help it grow and develop. But in the best possible worlds, good nutrition should begin well before

pregnancy, says Siobhan Dolan, MD, medical advisor for March of Dimes and a professor of obstetrics and gynecology.

"It really is good to try to get to a healthy weight and eat a balanced diet prior to pregnancy," Dolan says. "During pregnancy, we strongly advise against restricting food groups or 'dieting' per se, because you need the full range of nutrients and a balanced diet for proper nutrition."

Besides eating right, she advises taking a prenatal vitamin with folic acid, a mineral that can help prevent birth defects of the brain and the spine. March of Dimes recommends a multivitamin containing 400 micrograms of folic acid daily.

Calcium and iron deficiencies also are concerns during pregnancy and can be addressed through your diet as well as supplements, Dolan says. But she cautions against overdoing it on supplements.

"One vitamin is good, but that doesn't mean two are better. For example, too much vitamin A can be associated with birth defects, so know exactly what you're taking," she says.

## Fit for a Queen

Being fit before pregnancy increases your odds for a healthy delivery, and the Duchess' commitment to staying active is well documented. Over the years, we've seen her playing field hockey and tennis, horseback riding and swimming.

And it has been widely reported that she follows an inexpensive daily workout, using a gym ball and a pair of dumbbells to perform simple yet effective moves like squats. Maintaining this kind of active routine throughout pregnancy will do more than make it easier to get back in shape after the baby is born.

"There are so many benefits to exercise—physical health, strong bones and muscles, improved mental health and stress reduction," Dolan says. "It also helps build your stamina for labor and delivery." >





PHOTOGRAPHY BY GETTY IMAGES



## PRETERM OR FALSE?

### *Recognizing Labor Differences*

False and preterm labor are different conditions, but expectant mothers sometimes worry that one is the other, says Siobhan Dolan, MD, medical advisor for March of Dimes. Only preterm labor requires immediate medical attention. Here's a quick primer to help you tell them apart.

#### **FALSE LABOR:**

- Can occur anytime after the middle of the pregnancy to term.
- Involves a period of contractions or uterine tightening that is less intense than regular contractions. "With false labor, you might have contractions every five minutes for an hour that typically aren't that strong, and then they just go away," Dolan says.

#### **PRETERM LABOR:**

- Occurs before 37 weeks.
- Involves regular, strong contractions coming every three to five minutes, each lasting longer than a minute. "These are more concerning, and we want to stop the labor if possible. If it's not, we want to get the baby into a better position for being born early, and do things to help it, like giving steroids to promote lung maturity," Dolan says.





If you haven't been particularly active prior to pregnancy, she recommends walking with a friend.

"It's a good place to start," she says, "so you have a social outlet as well as the physical."

## A Heavy Crown

The idea of "eating for two" during pregnancy went out of style a couple of decades ago—along with tentlike maternity wear that the fashionable Kate would never have been caught in. A proper balance of good nutrition and exercise promotes optimal weight gain. But what is optimal, exactly?

"There's not an absolute number. We recommend starting with your BMI [body mass index], using your weight before pregnancy to see where you need to go from there," Dolan says.

The general guidelines recommend a gain of about 25 to 35 pounds if you're starting at a normal weight with a single pregnancy, or a gain of 11 to 20 pounds if you're obese at the time of conception, Dolan says.

## A Royal Pain

Most expectant mothers experience their share of physical challenges, starting with morning sickness in the first trimester (12 weeks) of pregnancy. The Duchess endured a severe rare version known as *hyperemesis gravidarum*, which led to hospitalization early in her pregnancy.

"About 50 to 90 percent of women experience at least some mild nausea and vomiting. Less than 2 percent experience this type of extreme morning sickness," Dolan says. "If you do get dehydrated and lose too much weight—more than a 5 percent weight loss—you may need to be hospitalized, as was the case with Kate, to get intravenous fluids to rehydrate and get medications to stop the nausea."

This serious form of morning sickness (and most others, thankfully) tends to get better after the first trimester. But what can you do in the meantime to ease your symptoms? Douglas recommends pinpointing and avoiding foods or odors that trigger your nausea, and trying remedies like ginger and papaya, which can have a calming effect.

"It's amazing how the natural world continues to teach us so much about what we can do to manage some of these things," she says.



CALL

## Get Back in Shape After Baby

For more information on this new program at Community Hospital Fitness Pointe® designed to help you with a healthier recovery after childbirth, call **219-924-5348**.

### Let Them Eat (Some) Cake

Once the haze of nausea begins to lift, many pregnant women find they are drawn to certain flavors or foods. But is it a real or perceived need?

“When you look at the literature, these cravings get poo-hooped a lot, but there’s so much anecdotal evidence from pregnant women themselves,” Douglas says. “So I think we have to be respectful and say, if you’re having strong cravings, there may be something to it.”

But she cautions against overindulging in unhealthy cravings. “Don’t use cravings as an excuse to eat an entire bucket of ice cream,” she says.

### Healthily Ever After

One of the most important aspects of a healthy pregnancy—and one that your caregiver is likely to remind you of more than once—is listening to your body and responding accordingly. Assessing fetal movements is a big part of this monitoring during the second and third trimesters of pregnancy, Dolan says.

“You don’t feel movement until about 20 weeks, and issues with it are more likely to come closer to term, around the 34- to 38-week mark,” Dolan says. “Movement varies from one baby to another, but going from movement to no movement is something you should bring to your doctor’s attention.”

If you’re concerned about your baby’s movement—or, really, about anything during your pregnancy—don’t be afraid to let your caregiver know, especially if you fear something could be wrong.

“Page your caregiver or go to the hospital emergency room and get things checked out,” Douglas says. “A good caregiver’s going to provide you with guidance, and nobody will think you’re silly or stupid. ... You need that reassurance, and it’s perfectly valid. You’re simply taking really good care of your baby.” ●

## The Shape of Things

After your bundle of joy has arrived, the reality of a postpregnancy body sets in. Using the acronym M.Y.B.O.D.Y., these simple steps can help you slim down and get your body back where you desire:

**Mindfulness.** Be conscientious of eating healthy foods and begin to engage in walking activities.

**Yes to smaller portions.**

**Be patient.** Your body can take up to 12 weeks to return to prepregnancy hormone levels.

**On a schedule.** Eat, sleep and be physically active (walk) at set times.

**Don’t forget the importance of sleep.**

**Yes to exercise,** after your physician has approved.

Community Hospital Fitness Pointe® offers a postpartum fitness program that provides a safe and effective eating and exercise plan designed by a pre/postnatal exercise specialist, once you are cleared by your physician. During the program, the new mom works with a pre/postnatal specialist, taking aquatic and land exercise classes and using the general fitness area, and meets with a nutrition specialist.

# Anatomy of an ER Visit

*Knowing what to do in an emergency and what to expect in the ER can make both less frightening*

**EMERGENCY!** Even reading the word can get your heart racing. While worrying about emergencies is pointless (who knows when one will occur?), knowing how to handle them is not only valuable—it may even save your life or the life of a loved one. There are 136 million visits to U.S. emergency departments every year, so being prepared makes good sense.



## When to Go

The most common reasons to seek emergency treatment, according to the American College of Emergency Physicians, are:

- Difficulty breathing/shortness of breath
- Chest or upper abdominal pain or pressure
- Fainting, sudden dizziness, weakness
- Changes in vision
- Disorientation, sudden change in mental status
- Any sudden or severe pain
- Uncontrolled bleeding
- Severe or persistent vomiting or diarrhea
- Coughing or vomiting blood
- Suicidal feelings
- Difficulty speaking
- New type of abdominal pain

For minor illnesses or injuries, it's usually best to visit your regular doctor—unless it's an evening or weekend and you feel you can't wait.

When in doubt, always err on the side of caution. But should you go to the ER or call 911?

Call 911 when there is a threat to "life or limb," the victim could worsen en route to the hospital, moving the victim could cause further injury, or paramedic skills are needed.

ILLUSTRATIONS BY PETER HOEY

BY BOB COOPER





# ER Packing List

ER also stands for Early Readiness. “People should have a medical history form,” says Ryan Stanton, MD, an emergency physician and a spokesman for the American College of Emergency Physicians. “You may be too ill to talk to us when you arrive at the ER, and knowing what we can and cannot do is crucial. We need those details so we can provide the right treatment without tracking down records.”

Go online and print a form or create your own. It should list your current doctor, medical conditions, surgeries, allergies (drug, food, insect), medications, immunizations (especially for kids) and insurance information.

If time allows, also bring:

- Actual medications if you don’t have an updated list
- Any suspected source of poisoning
- Copy of your most recent electrocardiogram, if you have one
- Personal essentials: wallet, eyeglasses, phone
- Reading material

## Waiting for the Ambulance

One overriding piece of advice applies in any emergency, from the moment you call 911 to the time you leave the ER: Stay calm.

“Nobody gets better by freaking out,” says Ryan Stanton, MD, an emergency physician and a spokesman for the American College of Emergency Physicians. “You may be anxious and stressed, but the more calm you are, the better decisions you will make while waiting for help, and the easier it will be for us to evaluate and treat you.”

It’s best not to move the person, especially in cases of car crashes and bad falls, except to get the individual out of harm’s way. In the event the victim stops breathing, perform chest compressions until help arrives.

You can do three things right now to ensure the best possible treatment by paramedics, who are trained to check in all three of these places when a victim is unresponsive: Add In Case of Emergency numbers (family, neighbors) to your cellphone address book and name them “ICE-1” and “ICE-2”; always wear your medical-alert necklace or bracelet if you have one; and keep an up-to-date medical history in your wallet and car and at home. Also, make a plan for how children or elders can be cared for while you’re gone in the event of an emergency. (Adult family members can accompany a patient in the ambulance or follow in their car.)

# Triage and Treatment

Upon arriving at a hospital's emergency department waiting room—unless you arrive by ambulance and require immediate treatment—you will register and wait to be seen by a triage nurse. When you're called in, the nurse will ask you about your condition and symptoms; check your vital signs like temperature, heart rate and blood pressure; take a brief medical history; and may do a diagnostic test or administer first aid. This assessment helps the nurse determine how urgently you need to be seen by a physician compared with other waiting patients. Be accurate and honest in describing your condition and symptoms—neither downplay nor exaggerate them. Getting the most appropriate treatment depends on it.

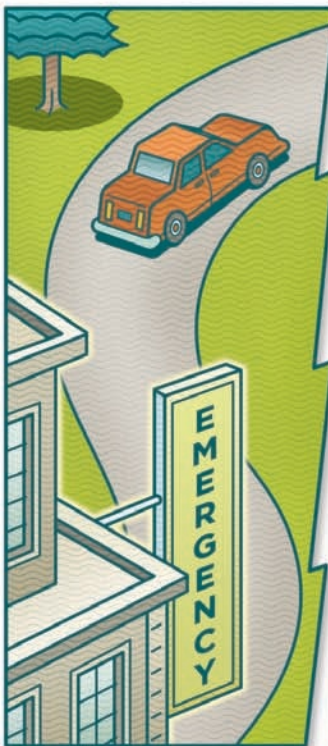
Now it's back to the waiting room. Try to relax; distract yourself with a magazine or a game on your smartphone. Tell the registration attendant if your condition changes, especially if pain increases, while you're waiting.

Emergency staff members try to get you in as fast as they can, but if they're dealing with a more pressing case, you may have to wait awhile, Stanton says.

Once you are called in to see the ER physician, you will be examined, diagnosed and treated. Emergency physicians are trained to address all medical conditions, and most emergency departments are equipped to administer blood tests, X-rays, electrocardiograms, CT scans and ultrasounds regardless of the hour.







## It Doesn't End There

You might be admitted to the hospital, or you may be transferred for specialized treatment. Otherwise, you'll be sent home with care instructions from a doctor or a nurse. These may include making follow-up appointments with your primary care provider or specialists, taking prescription medications and watching for symptoms that justify a return to the ER.

You'll receive this information in printed form, but it's still best for the patient's companion to take notes and ask questions before leaving, because the patient may be too groggy, anxious or distressed to pay attention. Studies show that many ER patients don't fully comprehend or remember post-treatment instructions (or even the treatment itself), yet their full and rapid recovery can depend on it. ●



CALL

## We're Here When You Need Us

Getting sick is never convenient, but thankfully there is a simple solution when the doctor's office is closed. Call St. John **(219-365-1177)**, Schererville **(219-322-5723)**, Hessville **(219-844-9060)** or Valparaiso **(219-286-3707)** for hours of service.

## Get Expert Care on the Go

Do you need medical attention for illnesses or injuries that are not life-threatening and want to get in and out in a hurry? Prompt quality healthcare is available through the immediate care services of Community Healthcare System. Our state-of-the-art outpatient facilities offer a variety of diagnostics: laboratory, general cardiology testing, and X-ray and other imaging technology. With fully equipped, spacious exam rooms and experienced Care Network physicians specializing in family medicine and internal medicine under one roof, you often can get the help and answers you need in just one visit. We accept patients on a walk-in basis at convenient locations throughout Northwest Indiana: Community Hospital Outpatient Centre in St. John; Community Hospital Outpatient Center in Schererville; St. Catherine Hospital's Hessville Family Care Center in Hammond; and the Valparaiso Health Center of St. Mary Medical Center in Valparaiso. No appointments are necessary. Our outpatient centers have close parking and helpful staff to get you in and out and on with your day.



# NEXT -GEN

A CLOSE-UP LOOK AT MINIMALLY INVASIVE  
PROCEDURES—THEN, NOW AND TOMORROW

# SURGERY



There may be more than 7 billion of us, but our world is shrinking. We're connected in real time across oceans, borders and cultures. We learn about events unfolding around the globe—news that we used to receive hours, days or weeks after the fact—just by glancing at our phones. And as technology makes our world smaller, it's also minimizing surgical procedures in big and meaningful ways. Here, we take a look at the past, the present and the not-too-distant future of the next generation of surgery known as minimally invasive procedures.

### A Big Picture Made Smaller

Minimally invasive surgery (MIS) refers to procedures performed through tiny incisions instead of one larger opening, commonly called open surgery. Using an endoscope (a small tube with a camera at the end), surgeons can visualize the area, then diagnose and possibly treat the problem. MIS is often referred to as laparoscopic surgery, but while laparoscopy focuses on the abdomen and pelvis, MIS can be applied in other areas such as the spine, heart and joints.

MIS has been around since the late 1980s, says Jay A. Redan, MD, who has been there from the start. The spokesman for the Society of Laparoendoscopic Surgeons recalls the early days of MIS with amazement.

"It was very dramatic when we first began," says Redan, who performed his first minimally invasive procedure in 1989. "You'd take somebody who'd normally be out of the hospital in 10 days and they'd be out in two."

### The Future Is Now

Although around for only a couple of decades, MIS already has become the standard of care for many procedures, says Shawn Tsuda, MD, a spokesman for the American College of Surgeons.

"It really blew up in the 1990s, and since then, the number of open procedures that this technique has been applied to has expanded tremendously."

Now MIS techniques are being used in everything from colon, weight loss and acid reflux surgery to spine, gynecologic and heart procedures.

"Cardiac procedures themselves have become a case study for MIS because most cardiac vessel diseases are treated with angiography—stents and angioplasty—rather than traditional cardiac bypass surgery now," Tsuda says. "There are very few areas that won't be touched by minimally invasive surgery."

## Back on Your Feet —and Beating the Odds

The most common MIS procedure by far is gallbladder removal.

“This has had a big impact overall on healthcare costs as well as patient comfort and outcomes,” Tsuda says. “The alternative is a fairly large incision under your right rib cage, and that hurts and means you’re in the hospital and out of work for a while. With this surgery, you can often be back to work within a few days and certainly within a week or two.”

These kinds of benefits—less pain, earlier return to bowel function, less narcotic use (and related adverse events), lower risk for infection and a faster recovery—have been experienced in a variety of MIS procedures and are making their way to cancer treatment as well.

“When it comes to cancer operations, they can start your chemotherapy and adjuvant treatments sooner because the inflammatory response and your body’s ability to heal is much quicker,” Redan says. “For the average colon cancer operation that I do now, they’re out in two days and back to work in two weeks. It used to be, they were in the hospital two weeks and it took two months to recover. We don’t see that anymore.”

## Robotics in Perspective

The potential of MIS is limitless, and newer techniques like robotic surgery are feeding its growth.

“There are already 2,000 robotic devices in hospitals around the world,” Tsuda says. During robotic surgery, a surgeon sits at a console and manipulates the robot much like a video game, using 3-D images of the internal organs and robotic arms to perform the procedure with precision.

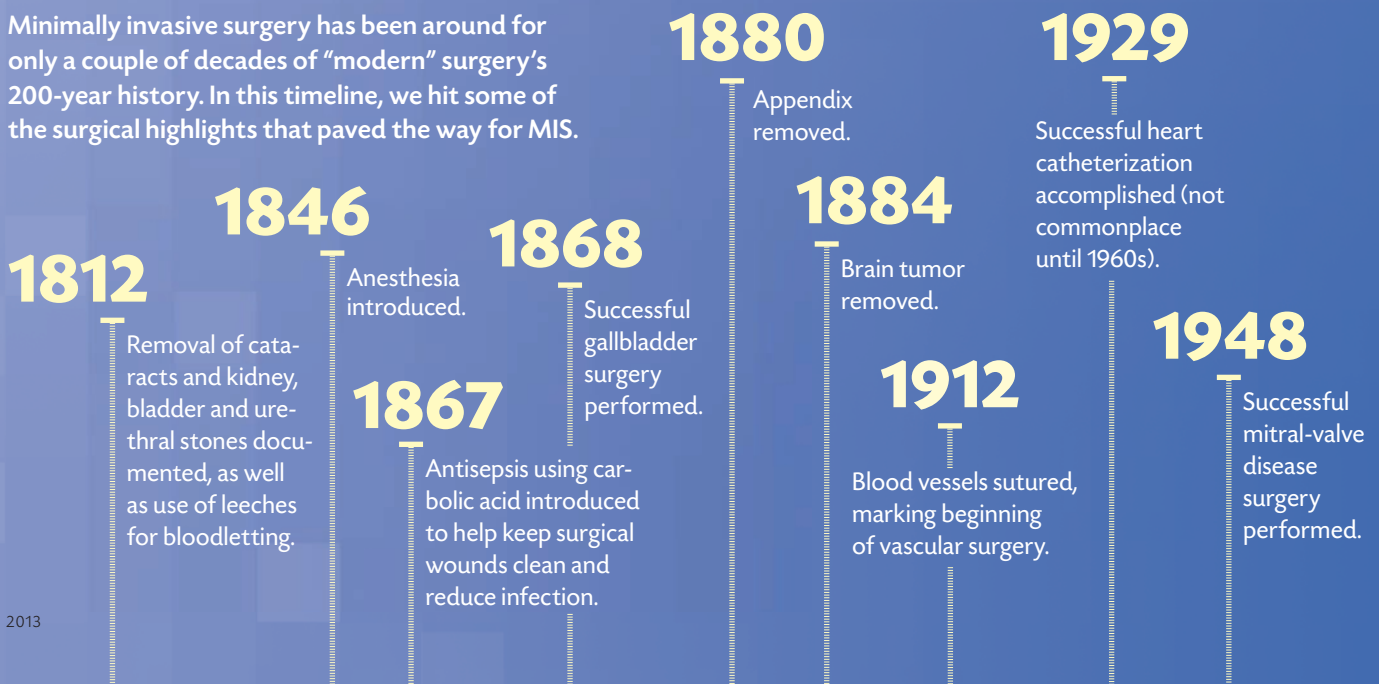
“This helps reduce some of the natural disadvantages of humans performing surgery, like hand tremor. It also solves other visual problems of minimally invasive surgery by replacing a two-dimensional image with a three-dimensional one,” Tsuda says.

For his part, Redan prefers the term “computer-assisted surgery,” which acknowledges that technology isn’t the only force in play when it comes to surgical advances.

“You’ve got to remember that R2-D2 is not doing your operation,” he says. “Computer-assisted surgery is evolving, but there’s still a surgeon there.”

## Modern Surgical Milestones

Minimally invasive surgery has been around for only a couple of decades of “modern” surgery’s 200-year history. In this timeline, we hit some of the surgical highlights that paved the way for MIS.





## The Next Evolutions of MIS

“If you think about when the first procedure came out and where we are now—and will be five to 10 years from now with robotic surgery and endoscopic procedures—that’s a huge jump in technology,” Tsuda says.

In discussing the imminent future of MIS, he points to minimally invasive techniques, such as single-incision surgery, that are being tested to reduce the trauma of surgery even further.

“Operations we previously did, such as gallbladder surgery with four incisions, will now be reduced to one incision at the belly button,” Tsuda says.

And then there’s surgery with *no* incisions, performed through a natural orifice such as the mouth, vagina or rectum.

“I know it sounds weird and it’s not the standard of care yet, but there have been procedures where gallbladders have been removed transvaginally,” Tsuda says.

Other procedures, such as incision-less weight-reduction surgery performed through an endoscope, are also in the early stages.

“All of these things are still experimental but not out of reach. Certainly within 10 years if not five years,” Tsuda says, adding that “in the future there will be very few things that haven’t been touched by minimally invasive techniques.” ●



**1952**

Open heart surgery and cardiopulmonary-bypass surgeries performed. Organ transplants began around this time.

**1981**

Laparoscopic appendectomy performed.

**1987**

First robotic surgery

**1970**

Technique developed to perform laparoscopy through miniature incision.

**1982**

“Video laparoscopy” debuts with introduction of first solid-state camera.

CALL

## Find a Surgeon

To learn more about the advanced surgical options available to you and your family or to find a qualified surgeon near you, call our physician referral line toll free at **866-836-3477** or visit **[www.comhs.org](http://www.comhs.org)**.



## Minimal Incisions, Maximum Outcomes

Always on the cutting edge of surgical innovation, Community Healthcare System hospitals offer patients more choices in minimally invasive surgical technologies than ever before.

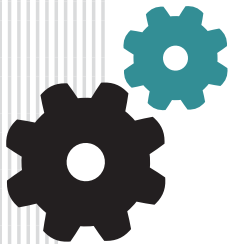
Community Hospital and St. Mary Medical Center offer the latest da Vinci® Si robotic surgical systems, which enable surgeons to perform even the most complex and delicate procedures through very small incisions.

“The da Vinci system provides a higher level of dexterity for surgeons operating laparoscopically,” says Douglas Dedelow, DO, a Community Care Network Ob-Gyn. “The surgical ‘arms’ simulate the same movement as our wrists and hands, allowing for more efficient surgeries with less pain and quicker recoveries.”

CyberKnife at St. Catherine Hospital is a nonsurgical procedure that delivers high doses of radiation to cancerous and benign tumors without damaging nearby healthy tissue and organs. It offers unique, precision capabilities that can seek out and treat cancerous tumors and lesions that were previously unreachable by traditional radiosurgery systems. As one of the first hospitals nationwide to offer CyberKnife, St. Catherine Hospital has helped pioneer the use of this technology.

# ATTACK FROM

# WITHIN



*When you're forced to sit next to a coughing seat mate at 30,000 feet, your immune system is your trustworthy travel companion. When a nasty stomach flu is making its way around the office, your immune system is on the job. It's your body's very own defense system against germs and diseases, and it never takes a day off.*

But for those with an autoimmune disease, the immune system takes things a step too far. "It's like friendly fire," says Michael Lockshin, MD, a rheumatologist, professor and former editor-in-chief of the journal *Arthritis & Rheumatism*. "The immune system starts attacking the body and doesn't recognize what's normal."

In other words, it attacks healthy cells. And it knows no boundaries, meaning almost any part of the body can be affected—from your brain to your bladder—depending on the type of autoimmune disease. More than 80 known types are divided into two broad categories: those that attack multiple organs (such as lupus) and those that attack only one (such as inflammatory bowel disease).

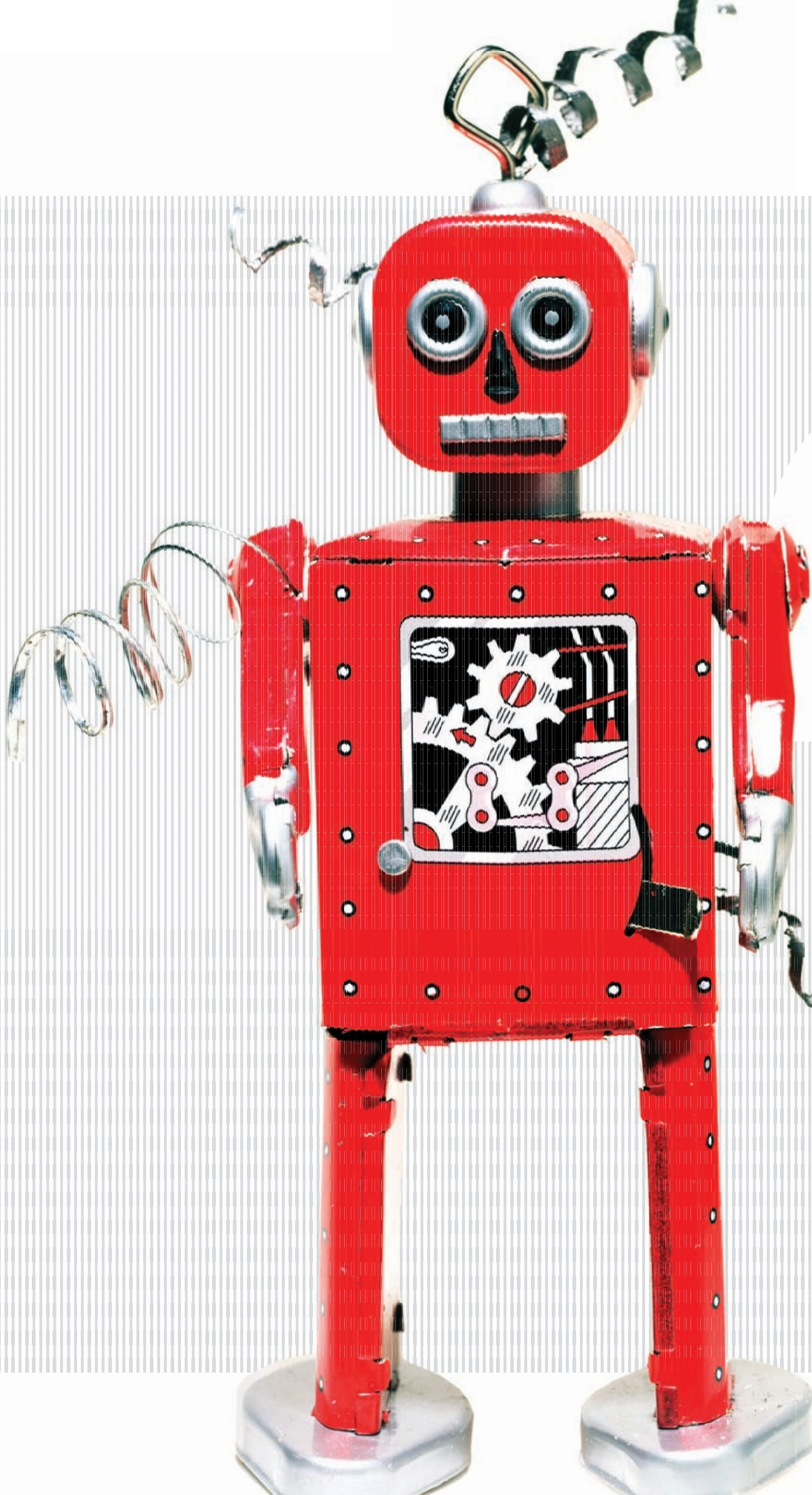
To make things even more complicated, autoimmune diseases often have similar symptoms, such

as fatigue, joint pain and fever, so it can take multiple tests and exams to pinpoint the exact cause. Also, there is somewhat of a cycle to autoimmune diseases. When symptoms are at their worst, it is called a flare-up. And when they retreat, it's a remission. Flare-ups can come and go within days or weeks, and a remission period can last a year or more.

While the exact cause of autoimmune diseases is unknown, there are certain risk factors, including family history. Women, especially those in their childbearing years, and minorities are at higher risk than the general population. In fact, 78 percent of people affected by autoimmune diseases are women.

Here, we explore four common types of autoimmune diseases, including symptoms and treatment options.

BY COLLEEN RINGER



*What happens when your immune system goes rogue?*



## Inflammatory Bowel Disease (IBD)

**What it is:** IBD encompasses a group of disorders that cause the intestines to become red and swollen. The most common are ulcerative colitis, which can result in ulcers on the large intestine, and Crohn's disease, which can affect any part of the digestive tract.

**How to recognize it:** Symptoms include abdominal pain, diarrhea, weight loss, loss of appetite, rectal bleeding, joint pain and fever. "The frequent diarrhea is very disrupting for many activities and very restricting in terms of lifestyle," Lockshin says. "Today, treatment is quite effective for preventing flare-ups, but they do occur, especially if patients try to wean themselves off of medications."

Your doctor may use a variety of tests to reach a diagnosis, including blood tests, a stool sample and colonoscopy.

**What can be done about it:** In addition to medication, some people find relief with lifestyle modifications, such as changing the foods they eat and reducing stress.

## Lupus

**What it is:** Lupus can affect almost any organ, with symptoms ranging from "virtually trivial to lethal," Lockshin says. "When I started out, the major goal was to save lives. Now, it's to make lives normal. A good portion of lupus patients can lead normal lives."

There are a few types of lupus, but the most common is systemic lupus erythematosus, and it can strike many different parts of the body—from the joints to the kidneys to the skin.



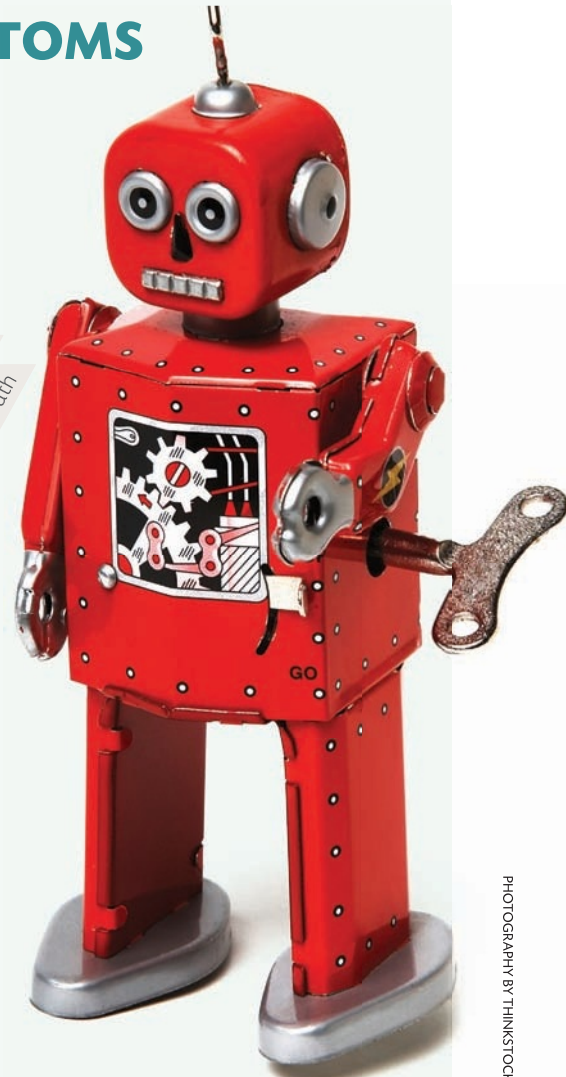
## MAKING SENSE OF SIMILAR SYMPTOMS

Your symptoms are usually the key to receiving an accurate diagnosis. But with autoimmune diseases, therein lies the challenge.

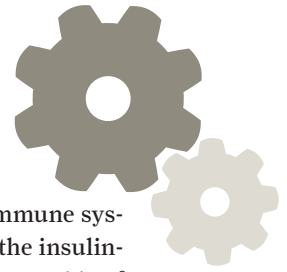
"When a patient with an autoimmune disease shows up, it's not terribly easy to distinguish among the different diseases," says Michael Lockshin, MD, a rheumatologist, professor and former editor-in-chief of the journal *Arthritis & Rheumatism*. "Many have arthritis as a symptom, and many have some form of blood vessel inflammation, so it requires many tests."

Do you think you may have an autoimmune disease?  
Use this chart to check your symptoms.

	Fatigue	Weight loss	Fever	Weight gain	Diarrhea	Trouble swallowing	Frequent urination	Sensitivity to heat or cold	Swollen or stiff joints	Rash	Sores on fingers or toes	Dry eyes and mouth
Celiac disease	⚙️	⚙️			⚙️					⚙️		
Graves' disease (overactive thyroid)	⚙️	⚙️					⚙️					
Hashimoto's disease (underactive thyroid)	⚙️			⚙️			⚙️	⚙️				
Inflammatory bowel disease	⚙️	⚙️	⚙️		⚙️				⚙️			
Rheumatoid arthritis	⚙️	⚙️	⚙️						⚙️			⚙️
Scleroderma		⚙️			⚙️	⚙️		⚙️		⚙️		
Lupus	⚙️	⚙️	⚙️					⚙️	⚙️			
Sjögren's syndrome	⚙️				⚙️			⚙️				⚙️
Type 1 diabetes	⚙️	⚙️				⚙️						



PHOTOGRAPHY BY THINKSTOCK



**How to recognize it:** “Arthritis is a common sign,” Lockshin says. “Or the patient may have a rash or an abnormal blood test.” Other warning signs are fatigue, fever, sensitivity to sunlight, hair loss and mouth sores.

**What can be done about it:** Anti-inflammatory medications (e.g., aspirin and acetaminophen) can help manage fever and the pain caused by inflamed joints. Your doctor may also suggest steroid injections or antimalarial medication.

## Rheumatoid Arthritis (RA)

**What it is:** While it’s true that both rheumatoid arthritis (RA) and osteoarthritis cause joint pain, they do so for different reasons. Inflammation is the culprit in RA, while osteoarthritis is caused by the deterioration of your joints’ cartilage as you age. Also, RA can affect more than your joints. Your eyes, mouth and lungs are at risk. It often shows up earlier in life, too, between the ages of 25 and 55.

**How to recognize it:** “Arthritis is obviously the leading symptom,” Lockshin says. “Generally, it’s in the arms, legs, hands and wrists.” And because it isn’t confined to your joints, RA can also result in dry eyes and mouth, chest pain when inhaling and nodules under the skin.

**What can be done about it:** Medication, physical therapy and exercise can be used to manage symptoms as well as prevent future joint damage. You might also find relief by experimenting with your diet, Lockshin says, as some food intolerances or allergies make symptoms worse.

## Type 1 Diabetes

**What it is:** In this autoimmune disease, the immune system turns against the pancreas—specifically the insulin-producing cells within it—making the body incapable of producing insulin. Without insulin, your blood sugar levels soar, causing problems with your heart, eyes, kidneys and more.

**How to recognize it:** Warning signs of type 1 diabetes include frequent urination, extreme thirst, weight loss, sores that heal slowly and blurry eyesight. It can be diagnosed with a blood test.

**What can be done about it:** Your doctor will prescribe an insulin injection regimen that will keep your blood sugar at normal levels. You will need to check your levels throughout the day to ensure they stay in the proper range. Eating well and exercising can help further manage the disease.

“People with type 1 diabetes are more susceptible than those with type 2 to marked swings in blood sugar,” Lockshin says. “They should carry identification and instructions regarding how to get help and what to do if they are behaving abnormally or losing consciousness.” ●

## FINDING DOCTOR RIGHT

People with autoimmune diseases often face a frustrating journey to get to the correct diagnosis. With no medical specialty titled “autoimmunologist,” you may get answers sooner by seeking out a physician who is familiar with a variety of conditions and deals with your major symptom. Our experienced Care Network physicians affiliated with Community Hospital, St. Catherine Hospital and St. Mary Medical Center can help you find answers quicker by linking you to the expertise you need to face a health challenge. A family medicine doctor is an MD (medical doctor) or DO (doctor of osteopathic medicine) who practices general medicine. He or she is usually the first physician whom most people make an appointment to see. Family medicine doctors provide broad primary care medical services to patients of all ages. They treat a range of minor ailments but also diagnose a wide range of conditions and promote healthy lifestyle choices.

ONLINE

### Call or Click for a Free Referral

Care Network physicians are located throughout Northwest Indiana. Go to [www.comhs.org](http://www.comhs.org) or call **219-836-3477** between 8:30 a.m. and 5 p.m., Monday through Friday, for our *free* referral service.





# VIRTUAL HEALTH



## GOOD EATS

Eating nutritious meals in the right portions will help you and your family stay healthy. But mouth-watering, healthy menus don't just *happen*. They take planning.

Tap into this quick collection of USDA tools and databases to make your meals healthier than ever and to take the pressure off the cook.

### FOOD-A-PEDIA

[supertracker.usda.gov/foodapedia.aspx](http://supertracker.usda.gov/foodapedia.aspx)

Need to make a quick decision or food comparison? Look up almost any food by general category (e.g., carrots, ice cream) or brand name for an instant breakdown of empty calories, fat, sodium and sugar.

### SUPERTRACKER

[supertracker.usda.gov/foodtracker.aspx](http://supertracker.usda.gov/foodtracker.aspx)

Now, it's time to get personal. Starting each morning with breakfast, SuperTracker's bank account-like ledger subtracts calories from a total allowance of 1,200 calories daily. Meanwhile, a real-time bar graph helps you see how your food intake stacks up against fruit, vegetable, whole-grain, dairy and protein recommendations.

### RECIPE FINDER

[recipefinder.nal.usda.gov](http://recipefinder.nal.usda.gov)

Want to find a new way to cook sweet potatoes? Or a new recipe for your blender, wok or skillet? This database links you to thousands of recipes submitted by health professionals and organizations (such as the Centers for Disease Control and Prevention and the American Heart Association). Search by ingredients, ethnic preference, cooking equipment or nutrient requirements.

## Make the Connection

Community Care Network physicians use MyChart®, a free, easy and secure online tool that allows you to view information in your medical record and communicate with your doctor's office. All you need to get started is an access code from your Community Care Network physician (or from [www.comhs.org](http://www.comhs.org)), an Internet connection and an email address. With this link, you can send secure messages and communicate with your physician's office; view immunizations and current medications; view medical history and inpatient stay summaries; view and print lab and test results; renew prescriptions; request and schedule appointments; access family member information; and view and pay your bills online.



ONLINE

### Log In, Please

The Community Care Network physician practices use MyChart®. To sign in, first you'll need to activate your account. Visit [www.comhs.org](http://www.comhs.org) for more on how to get started.





# MAP

## Your Movement

If you travel often and like to exercise on the road, **mapmyfitness.com** (or the **iMapMy app** for smartphones) is your ultimate workout buddy.

Using a GPS-enabled device, any fitness buff—or beginner—can track and store running, cycling, walking and hiking activities. Compete virtually against others in the community or enter your own course into the database of international routes. This program tracks your pace, net elevation loss and gain, and even the wear on your gear.

## FIND COOL Health Gadgets

Medgadget (**medgadget.com**) is the definitive online source for information on the latest medical technology gadgets. Constantly updated with medical breakthroughs from around the globe, the blog offers photos, illustrations and digestible chunks of text on promising techniques and devices.

From an electroencephalogram headset that senses brain waves and may be able to identify a stroke (alerting the wearer and caretakers to call 911) to pajamas with built-in breathing sensors to address sudden infant death syndrome to a phone app that works as a hearing aid, you'll stay informed about groundbreaking medical technologies.

## Little People, BIG Problems

Some psychologists believe that kids have never been as stressed as they are today. And, really, between overscheduled lives, peer pressure, cyberbullying, increased exposure to violence, academic expectations and a high incidence of divorced parents—why *wouldn't* they be stressed?

On one hand, stress is a normal part of growing up. But, according to the American Academy of Pediatrics, it's time to step in if your child has frequent headaches and stomach pains, seems restless and agitated, appears depressed or exhibits changed behaviors, such as waning interest in once-pleasurable activities, falling grades or unusual social behavior like lying or cheating.

Need help getting inside your child's head? Visit **bam.gov**, then click "Your Life" and have your child take the Stress-o-meter quiz. Designed for kids 9 to 13 years old, the quiz helps your kids—and you, if they'll share their answers with you—identify whether their stress revolves around school or home.

The quiz could open a floodgate of honest discussion. And, if any findings trouble you, a trip to your pediatrician's office will help uncover strategies for better emotional and physical health.



# Like Mother, Like Daughter



*She walks like you, talks like you—wants to be you.*

Give her a positive example to emulate, and you'll set her up for a lifetime of good health.

Living with **VIGOR**





Hartsfield's philosophy of care in the Memory Support Residence is to match services with the residents' personal schedule to enhance independence with their own daily routine.

"Hartsfield's philosophy of care in the Memory Support Residence is to match services with the resident's personal schedule to enhance independence with their own daily routine," says Gillette. "Recreation begins right after breakfast. Our certified activity director is a nurse and she specifically designs activities to address memory issues and stimulation. She covers all aspects of their daily lives, including spiritual and emotional needs and thinking stimulation."

## TRUST IN CARE

Hartsfield Village offers a structured program in a beautiful environment that has been created specifically to serve the needs of cognitively challenged residents. Living space is divided into two distinct areas—the red neighborhood and the green neighborhood, joined in the middle with a nurses' station. Ceilings are lower and the lighting in the hallways and common areas gives off a warm, comforting glow. After they are finished cleaning individual rooms, housekeeping will put back things exactly as each resident prefers to help maintain uniformity in their surroundings.

"Hartsfield Memory Support staff understands dementia and understands the programming," says Jill Keilman, resident services counselor at Hartsfield Village. "Our staff also has participated in dementia sensitivity training so that we have a better idea of what it is like—the challenges of being older and living with associated health issues."



EVENT

## Join the Caregivers Support Group

For those caring for someone with Alzheimer's or other types of dementia, Hartsfield Village offers a free Alzheimer's and Dementia Support Group. The group meets in the multipurpose room the second Wednesday of the month, beginning at 6 p.m. Aug. 14, Sept. 11, Oct. 9, Nov. 13 and Dec. 11. To register, please call **219-934-0750**.

Dementia sensitivity training allows participants to experience several of the physical and sensory deficits often experienced by seniors with dementia. This powerful training promotes both understanding and empathy for the difficulties seniors may encounter when trying to complete everyday tasks.

"It heightens awareness of some of the things our residents are struggling with," says Gillette. "It helps us understand why someone does what they are doing. It's one of the best ways we can educate and help staff and families understand the issues their loved ones face. Instead of highlighting deficits, we're highlighting things that they can accomplish and encourage them to do the things they still can do." ●

## Memory Screenings

Hartsfield Village Senior Living Community, 10000 Columbia Ave. in Munster, is a designated Memory Screening Center for the Alzheimer's Foundation of America. Early detection and recognition of mild cognitive impairment are important to improving quality of life. Results and recommendations will be discussed at the conclusion of the screening. Screenings are free and are available between 10 a.m. and 2 p.m. Aug. 13, Sept. 10, Oct. 8, Nov. 12 and Dec. 10. Please call **219-934-0750**, ext. 200, and ask for Jill.



# The Best of Community Partnerships

*How an emergency medical course is saving lives*

BY MARY FETSCH

**O**n his way to a Valentine's Day dinner, 17-year-old Jake Stephenson and his girlfriend were taking I-65 to a restaurant in Merrillville. When the traffic came to a sudden halt, he was able to slam on his brakes to avoid hitting the car ahead of him. In his rearview mirror, he could see a truck swerve quickly to avoid hitting him, but the car behind the truck would not be as lucky.

"The impact was like BOOM!" recalls Stephenson. His head hit the steering wheel before he whiplashed back and was hit in the face again with the airbag and other debris from the dashboard. "I was dazed," he says. "Our seats got pushed backwards and when I opened my eyes, I could see blood dripping down my right arm."

Stephenson soon realized it was blood coming out of a laceration from his girlfriend's head resting on his shoulder.

In recalling the moments after impact, the Portage High School senior sounded like a medical professional. He automatically went through a series of mental evaluations of the scene: His girlfriend was unresponsive but breathing and bleeding from the head. Smoke coming from the car that hit them made it imperative that he remove both himself and his girlfriend from the vehicle as quickly as possible. With assistance from another driver, Stephenson was able to force the passenger door open, place a sweatshirt over the laceration on his girlfriend's head and pull her from the vehicle.

"When I knew we had to move her, I just automatically did what we learned in class to protect her neck and spine," Stephenson says. "We moved her to another car and immediately started putting pressure on her head to slow the bleeding. It was crazy, but my training just kicked in."

## REAL-WORLD TRAINING

Stephenson's training came from a high school course in emergency medical training (EMT) offered through Hobart High School. It was made possible through the creative thinking of the superintendent of the School City of Hobart, Peggy Buffington, PhD, and support from St. Mary Medical Center.

"Our goal for offering classes like this is to provide as many real-world experiences as possible," says Buffington. "Without the clinical partnership with St. Mary Medical Center, this class would lack real hands-on experience. Those experiences help students find their passion in life. They go through the clinicals and see how what they've learned is translated into saving lives."



Through a clinical partnership with St. Mary Medical Center, students like Jake Stephenson get hands-on experience that can translate into saving lives.

Nearly 10 years ago, Buffington and members of the Hobart Fire Department began developing a fire science class that would help prepare future volunteer firefighters.

“But as the fire chief and I spoke, it became clear that the majority of calls that came into the department were for medical emergencies,” Buffington adds. “I realized that we should develop the program to include medical and health professionals to help prepare students for careers that offer a steady labor market and demand for jobs. We now just needed the experts in their fields to help deliver the curriculum.”

Enter St. Mary Medical Center and Chief Executive Officer Janice Ryba, in 2008.

“Our hospital has always been a strong community partner throughout the years,” Ryba says. “But when Dr. Buffington presented an opportunity for us to work with the School City of Hobart and support educating future healthcare workers, we recognized the potential long-term benefits.”

## ● OPENING OPPORTUNITIES

“Janice and I sat down and thoughtfully discussed what the partnership should look like,” Buffington says. “We needed an expert to deliver the curriculum, but I didn’t need an employee 365 days a year. So we looked at how we could share this person who could train these future healthcare professionals and community responders. Then the partnership took off. Today, the hospital not only supports the EMT class but also classes for kids who want to go on to medical careers. This partnership has opened up all kinds of opportunities for our students.”

The EMT course is made available to students from 10 Northwest Indiana high schools through Porter County Career and Technical Education services. Course instructor Jeff Lawley also serves on a subcommittee of the EMS Commission for the State of Indiana tasked with replicating the program in other systems across the state.

“Dr. Buffington and Janice had this foresight in 2008,” Lawley says. “From my perspective they were on the cutting edge of what the State of Indiana EMS Commission is trying to replicate in 2013—to create partnerships that focus on promoting the careers, education and successful training of qualified emergency medical personnel.”

“There has to be a willingness to partner from all levels,” Buffington says. “And you have to find the resources. By figuring out how we can run this program together and make it work so we can both



Superintendent Peggy Buffington, PhD (left), of the School City of Hobart, and course instructor Jeff Lawley, stand in front of the ambulance “classroom” that provides hands-on experience for students in the Emergency Medical Training course at Hobart High School. Buffington purchased the used ambulance on eBay as a less-expensive alternative to equipping a simulated environment in the classroom.

benefit is the masterful side of this. We looked at it from the perspective that we are educating the future workforce in healthcare, especially in Lake and Porter counties. That is what led us down this path.”

From all accounts, the program is having a much more immediate impact on the community. Thanks to his clear thinking, Stephenson and his girlfriend were treated for their injuries and released from the hospital later that night.

“We hear stories like Jake’s all the time,” Buffington says. “How they have come across or find themselves in these situations—on basketball courts, at soccer games, in car accidents—and are able to stabilize the situation, keep cool and calm and help others. I smile because these are high school students who are already going above and beyond our expectations. I think that bodes well for our future.” ●

CALL

## Interested in Emergency Medical Training?

EMT and paramedic courses are also available for adults through St. Mary Medical Center’s EMS Institute. For more information, contact Robert Bobby, RN, EMS manager, or Jessica Lawley at **219-947-6874**, or visit us online at **[www.comhs.org/stmary](http://www.comhs.org/stmary)**.



# A Step Ahead

*Teaming up against peripheral arterial disease*

BY ELISE SIMS

**D**ennis Kaegebein of Schererville and Dennis Williams of Hammond had the same goal: to walk without pain. Their shared goal became reality after getting the treatment they needed for peripheral arterial disease (PAD) at the PAD Center of Community Hospital in Munster.

“It’s a miracle,” says Williams, a retired police officer who had calcium deposits and plaque buildup in his left foot after a motorcycle accident some 40 years earlier. “Instant and total relief; it’s just like I had a new leg.”

“It has changed my whole life,” says Kaegebein, who is retired from Inland Steel. “Before, I couldn’t walk. My wife and I like to go to the Lighthouse Mall and I couldn’t walk it. I’d have to stop and take breaks. After my procedure at the Peripheral Arterial Disease Center, I went shopping at the grocery store and walked up and down the aisles with no pain at all!”

## ● A COMMON PROBLEM

Like 17 million other Americans, Kaegebein and Williams were living with PAD, which occurs when the arteries in the legs—usually the lower leg—become narrowed or blocked by plaque. Blockage can result in critical leg ischemia, a condition in which not enough blood is being delivered to the leg to keep the tissue alive. With only about 25 percent of PAD patients undergoing treatment, it is a disease



Schererville resident Dennis Kaegebein (left) and Hammond resident Dennis Williams (right) are walking again without pain after being treated for peripheral arterial disease (PAD) by Prakash Makam, MD, at the PAD Center of Community Hospital in Munster.

that is largely underdiagnosed and undertreated. If left untreated, PAD can lead to severe pain, limited physical mobility, life-threatening and nonhealing leg ulcers, and amputation.

Kaegebein and Williams were able to find relief and are now walking a path to a healthier future with the help of interventional cardiologist Prakash Makam, MD, medical director of the Peripheral Arterial Disease Center.

## ● FINDING SOLUTIONS

“We are making real advances in the treatment of PAD that will lead to fewer amputations and a better quality of life for so many people,” Makam says. “We used SilverHawk™ on Mr. Kaegebein and TurboHawk™ on Mr. Williams to relieve their pain and symptoms and increase their quality of life and well-being.”

The technology used in their procedures is a variation on atherectomy—the cleaning out of an artery through excision. It works by shaving the plaque from artery walls with a tiny blade the size of a grain



of rice. A guidewire threaded into the artery positions the device. Then at a very high rotation per minute, plaque is shaved from the artery wall, pushing it into position and into a nose cone for collection. Originally developed to clean out heart arteries, atherectomy is proving to be an even more effective treatment for blocked arteries in the leg, Makam says.

## NEW HOPE

"I met Dr. Makam, an interventional cardiologist who specializes in treating people with my symptoms," Williams says. "He gave me hope. I can't tell you how happy and relieved I was. It's totally amazing. He's a caring, skilled doctor. PAD and amputation used to go hand in hand, but with new technology, I can say amputation is no longer an option as far as I'm concerned."

"He saved my leg," says Kaegebein. "As soon as I woke up, my leg was warm to the touch and had turned pink."

"Dr. Makam took an interest, was willing to listen, asked questions and gave me options," Kaegebein says. "He did a great job; I would recommend him to anyone."



PAD Center staff includes (back row, from left) Sharon Krumm, LPN; Anna Luka, CNA; Vanessa Davis, RN; Abby Wilson, operational assistant; (third row, from left) Debbie Andrews, LPN; Sue Gluek, RN, CWON; Denise Colantuono, RN; (second row, from left) Melissa Angyus, APN, CWON-AP, CWCN; Kathy Porras, APN, CWON-AP, CWCN; (front, from left) Molly Janovsky, manager, APN, CWOCN; and Daniel Smith, MD, CWS, FCCWS, Wound-Ostomy Care director.

## Do You Have PAD?

Symptoms of PAD include achiness, burning and weakness in the legs, calves or feet, which can lead to significant impairment in the ability to walk. Many patients with PAD also have diabetes or high blood pressure levels or other conditions such as obesity or renal disorders that can increase risk for PAD.

PAD is a progressive disease; in some cases blockages are extensive and can involve the whole lower extremity from above the groin to the toes.

Community Hospital's team of specialists understands how significant nonhealing wounds can be in the lower extremities for people with other complicating conditions. A multidisciplinary approach is used and incorporates interventional cardiovascular medicine, infectious disease and wound care specialists, diabetes management, and health, nutrition and exercise education to provide each patient with the best possible outcomes. These physicians and healthcare professionals work together to determine the treatment options that will meet each patient's specific needs.

For more information about the Peripheral Arterial Disease Center of Community Hospital, visit [www.comhs.org](http://www.comhs.org).

"The advantage in offering the latest advances in PAD technologies is being able to provide a greater range of treatment options to meet the unique needs of each individual's vessel type and blockage," Makam says. "Our experience with new technologies for PAD enables us to improve treatments and help save lives and limbs." ●

CALL

### Get Screened for PAD

This simple 15-minute screening explains peripheral arterial disease (PAD) and screens for blockages in the leg arteries. Screenings are available at Community Hospital Fitness Pointe® in the Cardiac Rehabilitation department and cost \$10 each. For upcoming dates and times and to register, please call **219-934-2830**.



BY ANGELA MOORE

# A Dose of *Quality Care*

*Retail pharmacy fills prescription for excellence in service*

**D**octors and staff at St. Catherine Hospital were concerned patients were putting their health at risk by skipping prescription refills to save money. To provide extra support in making informed choices about patients' health and in taking their medications, the Pharmacy department at St. Catherine Hospital recently opened a retail outlet.

"St. Catherine Hospital recognizes the value in providing a continuum of patient care—one that doesn't end after discharge," says Koula Tsahas, RPh, the director of pharmacy at St. Catherine Hospital. "The new hospital-owned retail pharmacy represents a significant opportunity to expand services to patients, the community, as well as to hospital employees and our volunteers."

According to Tsahas, St. Catherine's pharmacy care team is committed to "helping our patients stay healthy. High-cost prescription medication is a leading reason of noncompliance and oftentimes is a reason why patients are readmitted into hospitals."

She adds that St. Catherine's retail pharmacy staff will work with patients and their physicians

to develop a healthcare medication plan that is specific to their needs. In addition, by having the retail pharmacy located inside the hospital, St. Catherine's pharmacy care team will play a major role in helping the patient transition back home by ensuring that patients receive their medications and get an opportunity to receive medication counseling before they are discharged from the hospital.

"The patient connection with the pharmacy care team will continue following discharge," says Tsahas. The pharmacist will be contacting patients at home to reinforce proper medication usage, avoid, prevent and resolve medication-related issues by answering any questions and encouraging follow-up with their physician."

## A FOCUS ON PATIENT NEEDS

St. Catherine Hospital pharmacists use the most up-to-date computer programs and state-of-the-art robotic automation refill for safety. The equipment enables staff to track pertinent health information about patients and fill prescriptions in a timely manner.

"Patient safety is always top priority, and with the proper tools we make sure our patients are receiving the proper medicine, education and care that they deserve," Tsahas adds.

"At St. Catherine Hospital, we treat the entire patient and are mindful of their entire well-being," says Craig Bolda, chief operating officer. "Many patients have socioeconomic challenges, and with our combined resources and the stewardship of our staff, physicians and support of the Community Healthcare System, we are able to provide extraordinary quality care."

For example, if a patient doesn't own a vehicle and cannot pick up a prescription, delivery service is available, Bolda says.

Tsahas also works with pharmaceutical companies to ensure that the patients at St. Catherine Hospital are receiving the most cost-effective prescriptions.



St. Catherine Hospital pharmacists and staff serve as a direct connection to the hospital and ongoing treatment by educating patients about the importance of continuing their medicine and making sure they refill their prescriptions in a timely manner.



Hospital pharmacist Sparkle Box, PharmD, BCPS, and St. Catherine Pharmacy staff are available to speak with East Chicago residents about their medications, explain how to take them and answer questions.

## ● MAKING THE ROUNDS

When a patient is admitted to St. Catherine Hospital, to attain proper medication management, pharmacists conduct rounds daily with patients to counsel them on medication compliance and help ensure patients are committed to taking their prescriptions. Taking the time to counsel and coach the patient personally can improve compliance and reduce readmissions.

“Unfortunately, too often patients have to choose between purchasing medication and paying bills,” Tsahas says. “Most likely they cannot afford it. There are programs in place to assist those patients in need, and pharmacy and case management work closely in helping bridge the gap.”

Regional Vice President of Clinical Ancillary Services Elizabeth Yee is proud of the program that has been put into place.

# What the Pharmacy Offers

- Conveniently located on the first floor of the Professional Office Building off the North Entrance
- Comprehensive retail pharmacy services
- Prescription delivery if needed
- Office hours: Monday–Friday, 9 a.m. to 5:30 p.m.
- Automated refills by telephone
- Low-cost cash prescriptions
- E-prescriptions accepted
- Most major medical carriers, Medicare Part B, Medicaid and third-party prescription benefit plans accepted
- FaxRx discharge and prescription program
- Bilingual staff
- Comprehensive inventory of prescription medications
- Information and education about medications (compliance monitoring and drug interactions)
- Generic and name brand health and beauty aids
- State-of-the-art technologies to fill prescriptions quickly and accurately, giving staff more time to offer personal assistance and counseling

“In representing Community Healthcare System, we have worked very hard at the state, local and national levels to bring the prescription assistance programs to the forefront,” Yee says. “As a system, we realize many of our patients do not take their necessary medications due to financial restrictions. We are working on promoting and educating the resources that are available to them.”

St. Catherine Hospital Retail Pharmacy is conveniently located on the first floor of the Professional Office Building off the North Entrance. ●

## HELPING YOU SAVE MONEY

Help is available for many people who can't afford their medicines. Patient assistance programs (PAPs) are designed to help those in need obtain medicine at no or low cost. Use these resources to learn more:

### ON THE WEB

Visit NeedyMeds ([www.needymeds.com](http://www.needymeds.com)), RxAssist ([www.rxassist.org](http://www.rxassist.org)) and [helpingpatients.org](http://helpingpatients.org) ([www.helpingpatients.org](http://www.helpingpatients.org)) for general information.

### IN THE NEIGHBORHOOD

**Healthcare Advocacy Group, Inc.** meets at St. Mary Medical Center in Hobart every Wednesday from 10 a.m. to 2 p.m. at 1500 S. Lake Park Ave., East Tower, fourth floor. For more information, call **219-947-6846**.

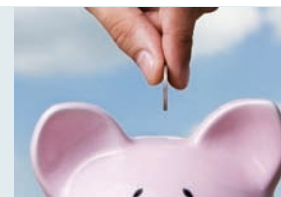
**ADRC** (Northwest Indiana Community Action Corp) provides assistance in applying for pharmaceutical company PAPs as well as other aid. Call **219-794-1829**.

### ACROSS THE STATE

**Healthy Indiana Plan** provides health insurance for low-income uninsured adults ages 19–64 who have been without health insurance for six months and have no access to it. Benefits include prescription assistance. Visit [www.in.gov/fssa/hip/index.htm](http://www.in.gov/fssa/hip/index.htm).

**Hoosier Healthwise Health Care Program** is a health insurance program provided for low-income families, pregnant women and children at little or no cost. Benefits include prescription assistance. Visit [www.in.gov/fssa/ompp/2544.htm](http://www.in.gov/fssa/ompp/2544.htm).

**Hoosier RX** helps eligible Indiana seniors pay their Medicare Part D monthly premiums. Visit [www.in.gov/fssa/ompp/2669.htm](http://www.in.gov/fssa/ompp/2669.htm).





# In Good Hands

*Finding relief for  
carpal tunnel pain*

**C**hronic pain caused by carpal tunnel syndrome did not keep Louise Thompson of Valparaiso from her passions of cooking, gardening and home repairs.

For more than 10 long years she had lived with persistent pain, wearing splints to bed every evening. After falling and breaking her left hand, she had no choice but to seek help.

“Positive outcomes from Dr. [Ralph] Richter and his staff are well known throughout the area,” says Thompson, who works as a community outreach specialist for the Alzheimer’s Association Greater Indiana Chapter. “I knew I could go to the Hand Center at St. Catherine Hospital to get the best care.”

In addition to repairing the fracture in Thompson’s left hand, Ralph Richter, MD, director of the Hand Center at St. Catherine Hospital, performed the first of two surgeries to repair the carpal tunnel she endured as a result of her many years of being a medical transcriptionist and the long hours on the computer. Carpal tunnel syndrome is a condition brought on by increased pressure on the median nerve at the wrist and includes numbness, tingling and pain in the arm, hand and fingers.

“Results were simply amazing,” she says. “I didn’t have to have therapy and I was back to work very quickly.”

## GETTING PAST THE PAIN

For more than a decade, thousands of people have come to the Hand Center at St. Catherine Hospital for relief from carpal tunnel syndrome, work injuries, traumas and intense pain.

“We treat every hand and injury on an individual basis,” says Richter. “The hand is a very unique machine and every patient places different demands on their hands.”

The Hand Center at St. Catherine Hospital is the area’s foremost program dedicated to the treatment of hand pain and injury. The experienced staff diagnoses and treats a

BY ANGELA MOORE



For more than 10 years, Valparaiso resident Louise Thompson lived with the persistent pain of carpal tunnel syndrome in her hand. After seeking help from the Hand Center at St. Catherine Hospital in East Chicago, she is now pain-free and enjoying life again.

variety of hand conditions from the common to the complex. This network of specially trained, board-certified physicians, nurses, therapists and skilled healthcare professionals ensures patients receive quality care from diagnosis to treatment through rehabilitation and preventive education.

If an unexpected hand injury occurs, either at home or at work, Hand Center staff can be reached 24 hours a day through the Emergency department. After an initial exam, a physician who specializes in the treatment of hand injuries and conditions will provide follow-up care. If occupational therapy is necessary, St. Catherine Hospital therapists, specially trained in hand rehabilitation, will coordinate care with the patient’s employer and physician.

“I can use my hands without the pain I previously endured,” says Thompson. “Dr. Richter and his staff consistently go above and beyond to help patients enjoy their quality of life.” ●

CALL

## Need a Helping Hand?

For more information about the Hand Center at St. Catherine Hospital in East Chicago, call

**219-392-1215.**





# Step by Step

*Walking for 30 minutes a day* can help reduce your risk for heart disease and diabetes. What are you waiting for?

Living with **VIGOR**





*When you need us most...  
for the most out of life...*

*We'll be there.*

The Community Care Network physicians of Community Healthcare System help families get the most out of their life and health. We'll be there for the birth of your baby, guide you through sniffles and broken bones, and help you live a healthier life. Our physicians located throughout Northwest Indiana bring the resources of our hospitals to you and your family. It's Extraordinary Care you can count on beyond the walls of our hospitals: Community Hospital in Munster, St. Catherine Hospital in East Chicago and St. Mary Medical Center in Hobart.

For more information on our Community Care Network physicians and other physicians within Community Healthcare System, call 219-836-3477 or toll-free, 1-866-836-3477.

