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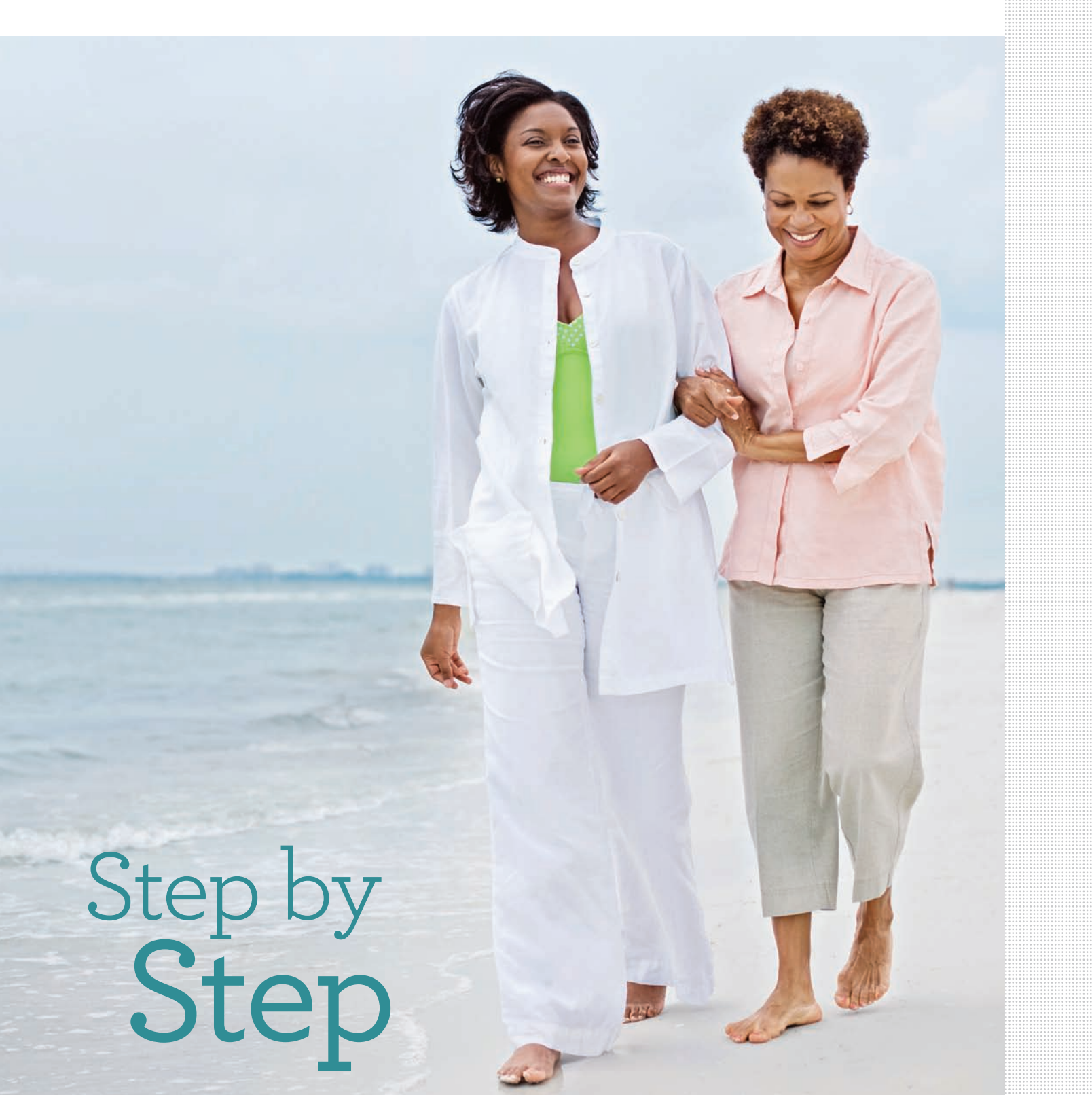
Early detection,
better treatment
for breast cancer

ROLE CALL

After a movie script
opened his eyes to bipolar
disorder, **BRADLEY COOPER**
found his voice—and his mission

INSPIRING
STORIES OF
SURVIVAL
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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**



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SPECIAL

What's New?

Latest GI procedure to detect cancer; expansion plans include new labor and delivery suites; and a high school clinic helps keep students healthier.

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ON THE COVER

Bipolar disorder wasn't even on his radar screen when Bradley Cooper started filming *Silver Linings Playbook*. Now he's an outspoken national advocate for mental health.



Health in Your Hands

As the sweeping transformation in healthcare continues, a couple of trends are becoming clear



John Gorski

Now more than ever before, you have increased control over your healthcare dollars. Changes in individual and family insurance plans are leading consumers to be more active in their own health. More and more Americans are also choosing where they will go for care. To meet these new expectations, hospitals will need to provide not only high quality healthcare, but care that is convenient and accessible.

At the hospitals of Community Healthcare System, we continue to be committed to providing the very best in care and enhancing our patients' access to vital programs and services. When it comes to gauging quality, our hospitals welcome feedback from independent studies, such as Healthgrades®, and input from industry organizations. Community Hospital, St. Catherine Hospital and St. Mary Medical Center build on these quality and safety accreditations and combine them with best practices to make sure you experience the same excellence and quality care across the system (page 4).

Richard Chambers counted on **St. Catherine Hospital** to help him get back on the road to recovery in a setting that was close to home, with a team that stayed at his side every step of the way. Read about his journey and other success stories from the accredited stroke centers at our hospitals on page 6.

Special therapy is sometimes necessary to help little bodies thrive. On page 50, find out how infants like Nathan Saltzman are getting over growing pains with the help of **Community Hospital's** highly trained staff.

Advances in technology for cancer detection, another convenient clinic location and a new addition for moms, babies and intermediate care needs are also helping to shape your care experience across our healthcare system (page 49).

St. Mary Medical Center is combining advanced technology, expertise and best practices to benefit patients undergoing screening and diagnostic procedures for breast cancer (page 54). These changes elevate the care experience by detecting cancer in its earliest stages and enhance the quality of our women's programs and services.

Our goal of providing better care that is close to home will lead to better health for all.

John Gorski
Chief Operating Officer
Community Healthcare System



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McMURRY/TMG

In Good Hands

In honor of National Nurses Week, we're sharing stories of our caregivers who are making a difference in the lives of our patients



ONLINE

Tell Us What You Think

Do you have a favorite nurse or caregiver of your own? Visit www.comhs.org, click on the hospital of your choice and click "Thank a Caregiver."

PERSISTENCE PAYS OFF

Nursing Supervisor **Angela Pinta** at St. Mary Medical Center is known for her excellent clinical skills and keen observations. While assessing a patient after surgery, she found the patient's condition was not improving, despite all lab test values being within normal limits.

"Angela does everything in her power to do what is right for the patient with the goal to improve communication and ultimately patient outcomes," says Chief Nursing Officer Tammie Jones, RN, MS.

Angela's follow-up with the healthcare team paid off as additional diagnostic testing revealed previously undetected internal bleeding. Her persistence got the patient back on the road to recovery much sooner.



Angela Pinta, RN

JUST LIKE FAMILY

During a snowstorm last January, 4N Nursing Assistant **Chaka Pleasant** stayed overnight following her afternoon shift at Community Hospital. She had been attending to a patient who was not doing well and was not expected to live much longer. Chaka had taken care of the dying patient that day as well and was a regular caregiver. As the hospital was making sleeping arrangements for the staff, Chaka requested to stay on the floor and sleep in the patient's room so that in the event the patient passed away in the middle of the night, she wouldn't be alone. The patient passed away the next day.

"Chaka always demonstrates sincere care and compassion to her patients," says Chief Nursing Officer Ronda McKay, MSN, RN, CNS. "Because of her actions, this patient was not alone in her final hours and it gave the patient's family comfort knowing that someone was with their loved one when they couldn't be."

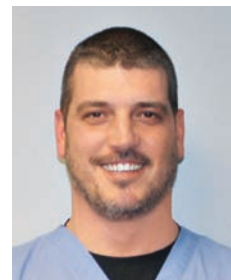


Chaka Pleasant

TAKING CARE TO HEART

During financial challenges, many patients have to choose whether to purchase their prescriptions or buy food. **Scot West, RN**, nurse manager of St. Catherine Hospital's Neurobehavioral Medicine program, makes sure his patients understand the importance of taking their medication to keep them well. Many times Scot has paid for his patients' medications out of his own pocket or has taken a collection from staff.

"Nursing in neurobehavioral medicine can be a challenge, but to have leadership and an example like Scot helps to make the entire patient experience a positive one," says Paula Swenson, RN, MS, chief nursing officer. "Because of his strong leadership skills, dedication to stewardship and compassionate heart, Scot works every day to keep our patients healthy. High cost prescription medication is a leading reason of noncompliance and oftentimes the reason why patients are readmitted to the hospital." ●



Scot West, RN

MAKING the GRADE

*The hospitals of Community Healthcare System
are among the top providers in the nation*

BY ELISE SIMS

If you're like today's savvy shoppers who check quality and performance records before making a major purchase, you probably also take time to select the right doctor and treatment option before your upcoming surgery. Does your choice in hospitals for the procedure make a difference? It can make a big difference in mortality rates and likelihood of complications, according to Healthgrades®, the leading online resource for comprehensive information about physicians and hospitals.

Each year, Healthgrades evaluates nearly 4,500 hospitals nationwide for 31 of the most common inpatient procedures and conditions, and identifies the 100 best hospitals within each procedure.

Community Hospital, St. Catherine Hospital and St. Mary Medical Center were each recognized in specific areas of clinical excellence ranging from cardiac care and cardiac surgery to stroke care, gastrointestinal (GI) care and orthopedic surgery.

Facilities considered to be among America's 100 Best in specific specialty areas, including the hospitals of Community Healthcare System, must not only demonstrate superior clinical outcomes, but also must maintain this superior level of care year after year. This performance of "better than expected" means that the hospitals with this 5-star 100 Best designation, as a group, could have potentially saved an average of 234,252 lives and avoided 157,418 complications.

"Our goal is to always integrate clinical quality care and service excellence throughout our entire healthcare

system," says John Gorski, chief operating officer for the Community Healthcare System. "The fact that all three of our hospitals have earned clinical distinctions as being among America's 100 Best for selected specialties ensures patients are receiving some of the best care in the country as demonstrated by the Healthgrades rankings."

★ COMMUNITY HOSPITAL

Community Hospital in Munster has been named among America's 100 Best Hospitals for Cardiac Surgery™ for a third year in a row, 2012–2014. For 2014, the hospital also has been distinguished among America's 100 Best Hospitals for GI Care™ and Stroke Care™. Community Hospital has also been ranked again by Healthgrades among America's 50 Best Hospitals™. It is the only hospital in Indiana named among Healthgrades' 50 Best Hospitals, and this is the seventh year in a row (2008–2014) that Community Hospital has been recognized as one of the best facilities in the nation.

"Not only have our physicians and healthcare professionals demonstrated that they can make strides in the battle on heart disease, but continue to be well-prepared to handle other critical health concerns for our patients as well," says CEO Donald P. Fesko.

★ ST. CATHERINE HOSPITAL

For 2014, St. Catherine Hospital has been recognized by Healthgrades among America's 100 Best Hospitals for Cardiac Care™. The legacy of outstanding care in the area of cardiology has continued since the hospital performed the first open heart surgery in Northwest Indiana.

In addition to helping to pioneer cardiac surgery, the hospital's cardiology program also introduced the area's first cardiac rehabilitation program, cardiac catheterization laboratory and cardiac intensive care program.

Expanding on this excellence, the hospital offers other specialty services including the area's first bilingual diabetes clinic, certified by the American Diabetes Association.

ONLINE

What Our Awards Mean for You

Accreditations and awards translate to better care for you, the patient. Learn more about the services we offer at www.comhs.org.



“Our hospital staff is known for teamwork, following a multidisciplinary approach and using best practices to achieve the highest level of quality care,” says CEO Jo Ann Birdzell. “Patients can trust in our caring doctors, staff and volunteers to treat them like family in a comfortable, state-of-the-art, forward-thinking environment.”

★ ST. MARY MEDICAL CENTER

St. Mary Medical Center has been distinguished among America’s 100 Best Hospitals for Orthopedic Surgery™ in 2014, according to Healthgrades.

“Our orthopedic surgery program, which includes our Joint Academy, is one of the most highly recognized in the entire Chicagoland area. St. Mary Medical Center also has earned The Joint Commission’s Gold Seal of Approval for both total knee and hip replacement surgeries and designation as a Blue Distinction Center by Anthem Blue Cross and Blue Shield Companies,” says CEO Janice Ryba. “To be acknowledged by Healthgrades among America’s 100 Best for orthopedic surgeries, together with high honors from these other national organizations, serves as confirmation of our hospital’s continuing commitment to excellence.”

★ GOING ABOVE AND BEYOND

Besides being independently evaluated by Healthgrades, Community Hospital, St. Catherine Hospital and St. Mary Medical Center also voluntarily seek accreditations from other professional organizations to monitor and improve performance.

“The accreditation process involves self-assessment by the hospitals as well as review by expert external surveyors who are also healthcare professionals,” says Nancy Moser, vice president of Compliance, Quality and Risk Management for Community Healthcare System. “This self-assessment or evaluation process is completed by hospital staff before a certificate or gold seal is awarded and results in elevated levels of care and service.”

Working at every level—from educating the public to improving coordination between first responders—the hospitals of Community Healthcare System have become Accredited Chest Pain Centers through the Society of Chest Pain Centers. This distinction has been earned through a rigorous evaluation of their cardiac care services, practices, guidelines and treatment protocols during the critical first stages of heart attack. Accredited Chest Pain Centers are designed to stabilize and treat heart attack patients immediately, when the chances of recovery are greatest. The goal is to provide the most urgent and direct care possible to minimize heart damage and enhance the level of recovery.

Community Healthcare System laboratory services, which also have a significant impact on the patient experience, have received a systemwide accreditation from the Commission on Laboratory Accreditation of the College of American Pathologists (CAP). Facilities of Community Healthcare System are part of some 6,800 laboratories that have received CAP-accreditation nationwide. However, there are only about 100 integrated system laboratories across the United States that have earned this distinction. ●



STROKE

*Expert care
for the long
road back*

SURVIVORS

BY ELISE SIMS

Do you believe in miracles? Jack O’Conner, Richard Chambers and William Gilliland do.

They say the fact that they are here today is nothing short of a miracle. All three have triumphed over stroke and acknowledge that they are enjoying life once again because of the timely care and rehabilitation therapies they received at the hospitals of Community Healthcare System.

Stroke miracles begin with a whole team of people who are working together to ensure that more people not just survive, but recover with as few lasting complications as possible. The dedicated team includes neurologists, neurosurgeons, neuroradiologists, clinical nurse specialists, registered nurses, emergency medical personnel, and therapy and rehabilitation professionals. This team begins its intervention from the first point of contact with the patient, usually in the emergency department.

UNDERSTANDING STROKE

Stroke occurs when a blood vessel to the brain is blocked by a clot or ruptures. The loss of oxygen and nutrients causes brain cells to die. Physical disabilities as well as problems

with thinking and speaking may result from damage to the brain. Immediate treatment is crucial to survival and reducing long-term disability.

For their work to optimize the care of stroke patients, Community Hospital in Munster, St. Catherine Hospital in East Chicago and St. Mary Medical Center in Hobart, have earned Certified Stroke Center Status from The Joint Commission. A specialized stroke team at each hospital works to diagnose and develop individual plans of care to help patients who suffer strokes, and those who are at risk, to live longer, fuller lives.

“One of the most important aspects of caring for stroke patients is ensuring that there is the same high standard of care in a timely efficient manner,” says Neurologist Andrea DeLeo, DO, MSE, Chamber’s doctor and medical director of the Stroke Care program at St. Catherine Hospital. “A dedicated stroke unit reduces mortality and improves overall outcomes for patients.

“This means that, no matter when a patient comes into the hospital experiencing a stroke, each person receives the same quality of care,” she says. “We have worked diligently to collaborate and customize patient services, from emergency to



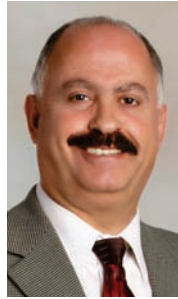
The dedicated stroke team at Community Hospital that made all the difference in timely care for Jack O’Conner (front center with wife Catherine) includes neurologists, neurosurgeons, neuroradiologists, clinical nurse specialists, registered nurses, emergency medical personnel, and therapy and rehabilitation professionals. O’Conner’s team included (back row, from left): Stephanie Bandstra, RN, BSN, Neuroscience Stroke Team; Jill Conner, RN, BSN, Nurse Manager, Neuroscience ICU/IMCU, Stroke Center; Jennifer Ewing, RN, MS, CNS, Stroke Program Coordinator; Jamie El Hairt, RN, BSN, Neuroscience ICU Nurse; Gauri Kalokhe, MD, Neurologist; and Shashidhar Divakaruni, MD, Cardiologist.



Neurologist Andrea DeLeo, DO



Neurologist Gauri Kalokhe, MD



Neurologist George Abu-Aita, MD

rehabilitation, to provide each individual who comes to any of the Community Healthcare System hospitals for stroke treatment the best possible experience and recovery.”

JACK O’CONNOR’S MIRACLE

Lansing resident Jack O’Conner had been in the hospital with bouts of atrial fibrillation before, but this time it was different. He couldn’t seem to catch his breath and his left arm and leg began to go numb. While in the emergency department, his cardiologist, Shashidhar Divakaruni, MD, recognized that O’Conner was suffering an ischemic stroke and immediately called all stroke team members to his side.

“He reassured me that it would be OK and that he was here,” explains O’Conner. “I am very thankful that I was in the right place at the right time.”

O’Conner learned that he had a blood clot in his heart due to atrial fibrillation. There is a small window of time to reverse the paralysis, and the quick actions of Divakaruni, neurologist Gauri Kalokhe, MD, and the whole stroke team at Community Hospital, proved to make a difference for O’Conner. He was given tissue plasminogen activator (tPA), a clot-busting drug approved for certain patients having a stroke. Not even 20 minutes afterward, he was able to lift his left arm and then, a few minutes later, lift his leg.

“Our dedicated stroke team ensures that stroke patients are diagnosed and treated as quickly as possible, knowing that every minute counts, limiting brain damage and the risk for complications,” says Kalokhe.

RICHARD CHAMBERS’ MIRACLE

Home-schooling and using the Internet provided Richard Chambers with some general medical knowledge about strokes and recovery. But when the 17-year-old had a hemorrhagic stroke in the summer of 2011, he had no way of knowing just what it would take to get his life back on track.

The Hammond resident is now 23 years old and planning to graduate this month with a degree in journalism, thanks to the help from the team at St. Catherine Hospital who walked him through the rehabilitation process. >



The Stroke Centers of Excellence at the hospitals of Community Healthcare System have earned the Gold Seal of Approval™ from The Joint Commission for Primary Stroke Centers. This recognition is presented to stroke programs that follow stringent national standards and guidelines that significantly improve outcomes for stroke patients.




The hospitals’ Acute Rehabilitation Centers have received three-year accreditation by the Commission on Accreditation of Rehabilitation Facilities.

The certified Stroke Care Centers of Community Healthcare System ensure that patients receive treatment according to higher national standards and recommendations. Stroke programs at Community Hospital, St. Catherine Hospital and St. Mary Medical Center have received the Gold Seal of Approval™ from the Joint Commission for Primary Stroke Centers. Each hospital was awarded this distinction after The Joint Commission conducted its on-site review of the stroke care programs, treatment standards and guidelines, and preventive education.

CALL

Stop Stroke in Its Tracks

If you have had a stroke, learn how to prevent another one through Community Healthcare System’s Moving Forward program. To sign up, call **219-852-6499** (Munster), **219-392-7641** (East Chicago) or **219-947-6345** (Hobart).





Hammond resident Richard Chambers is now 23 years old and planning to graduate this month with a degree in journalism, thanks to the expertise of team members at St. Catherine Hospital who helped him through rehabilitation.

“When I was admitted to the Rehabilitation Center of St. Catherine Hospital in East Chicago, I couldn’t walk—not even with the aid of a walker—I couldn’t talk or swallow or even use the bathroom by myself,” he says. “It took an entire team to help me: Dr. DeLeo; Program Director Jeff Orange; physical therapists Vince, Jeff and Danielle; speech therapists Stephanie and Marcy S.; and occupational therapists Kelly and Lisa. They worked with me for more than three hours a day over several months on physical therapy, occupational therapy, speech therapy and relearning everyday tasks.”

Although *most* strokes occur in people 65 and older, they can—and do—happen at any age. Nearly 25 percent of stroke victims are younger than 65.

“Other local hospital systems would not accept Richard for rehab because of his age,” says Orange. “We felt like he had great potential and because of his age we needed to give him a chance—so we admitted him here. The rest is history. I am so glad we decided to take a chance on Richard. It was a great decision by our rehabilitation team and hospital administration. It makes me proud how hard our team works and what we can do to make a difference. One of the most rewarding aspects of the job is helping people in our local community access the care they need to get better.”

Recovering from a stroke can mean a long and challenging rehabilitation. The stress associated with developing new skills, relearning previous skills and making lifelong adjustments can be very difficult for patients. Support from family and friends is vital to a successful recovery. That’s why it’s so important to choose a rehabilitation center that’s close to home.

WILLIAM GILLILAND’S MIRACLE

After suffering a stroke last year on Christmas Eve, 53-year-old William Gilliland didn’t find out what had happened for sure until three days later when he went to the emergency department of St. Mary Medical Center with paralysis in his right arm and leg.

What followed was weeks of recovery with a team of more than 20 professionals dedicated to his care. Helping coordinate the team was Quality Care Navigator Kim Sgouroudis, RN, who reassured Gilliland that despite the complexity of his treatment, he and his family could count on her to be his personal contact throughout his hospital stay and beyond.

Like many stroke patients, Gilliland required services from a multitude of disciplines including neurology, physiatry, podiatry, occupational, speech and physical therapy, social services, rehabilitation nursing and more. They all collaborated to ensure that Gilliland would achieve the best possible recovery from his stroke.

“I had therapy for my upper body four to five times a day,” says Gilliland. “I also had physical therapy for my lower body four to five times a day. My therapists pushed me and encouraged me, but they made it enjoyable and really listened to me.”

Two weeks after his stroke, Gilliland was already showering and getting dressed by himself and combing his hair. He also has learned to write with his left hand.

“It’s been excellent care and they are right on about everything,” Gilliland says. “I’m looking forward to continuing with the rehabilitation program through outpatient therapy at St. Mary Medical Center.”

“Nearly 800,000 Americans suffer a stroke each year,” says Gilliland’s neurologist, George Abu-Aita, MD. “That translates to one stroke about every 45 seconds. We have excellent technology and expertise to help us fight stroke and heart disease, but it’s up to us to know the symptoms, lower the risk factors and use good judgment in seeking treatment.” ●



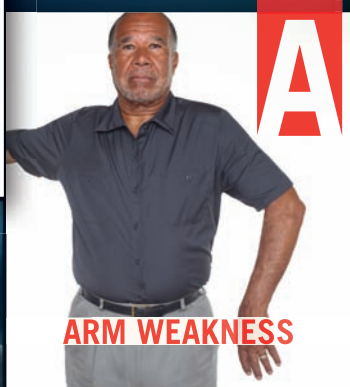
William “Bud” Gilliland required services from a multitude of disciplines, including occupational, speech and physical therapy. St. Mary Medical Center’s team including therapists Mark Cruz, PT, collaborated to ensure that Gilliland would achieve the best possible recovery from his stroke.



Body language can tell you all sorts of things. Like someone is having a **stroke**.



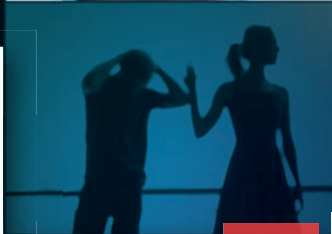
FACE DROOPING



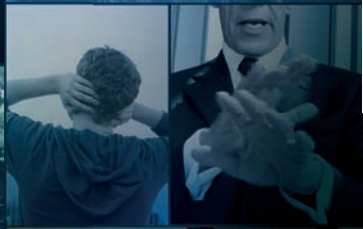
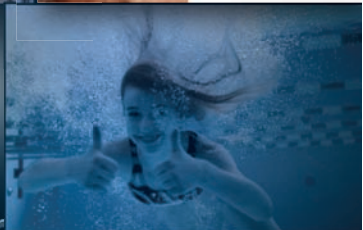
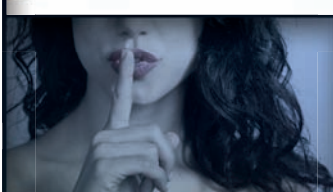
ARM WEAKNESS



SPEECH DIFFICULTY



TIME TO CALL 911



Together to End Stroke™

Know the sudden signs. **Spot a stroke F.A.S.T.**



strokeassociation.org



STRESS SOS

*Feeling frazzled?
4 stress-busting strategies that work*

A project deadline. Kids arguing about chores. An epic traffic jam. An unexpected car repair. A sick dog. Your list of stressors is endless—and seems to be getting longer. You have company: In 2011, 44 percent of Americans surveyed said their stress level was higher than it was five years ago.

● BY JODI HELMER





While some stressors are fleeting—like the butterflies you feel before a nurse draws blood—a constant barrage of them can cause serious health issues. Stress has been linked to headaches, fatigue, depression and heart disease, leading the American Psychological Association to declare that the nation is on the verge of a stress-induced public health crisis.

“To ease stress, we need to take a break and make time for things that relax us,” explains Mary Ann Bauman, MD, a spokeswoman for the American Heart Association. “If we keep exposing ourselves to stress without taking time to recharge, we end up getting sick.”

The possible health implications of stress have led to countless newspaper headlines, best-selling books, TV shows and radio segments urging you to calm down. The avalanche of advice can actually add to your stress level.

When you feel the familiar symptoms of stress—chest pain, insomnia, upset stomach, sweating, a lack of concentration—should you veg in front of your favorite sitcom? Tuck into a child’s pose? Make an appointment for a neck massage? Go for a brisk walk?

It depends.

“There is no one-size-fits-all solution for stress relief,” Bauman says.

The techniques that are effective for combating stress depend on the situation. Do you want to know which proven stress-busting strategies work in different situations? Keep reading—and try to relax.

STRESS BUSTER: **MASSAGE**

How It Works: You already know that massage eases tense muscles, relieves headaches and reduces joint pain. But it has also proved effective for combating stress by increasing the feel-good hormones serotonin and dopamine. In one study, heart rate slowed and the relaxation response kicked in after five minutes of massage. “Giving yourself permission to take an hour to wind down is relaxing in and of itself,” says Daniel Kirsch, the president of the American Institute of Stress.

You don’t have to spend big bucks at a spa to get the stress-busting benefits of massage. Ask a friend to rub your shoulders or give yourself a foot or hand massage to ease stress.

When to Use It: When you can take a short timeout.

Massage proves that you don’t have to work hard to relieve stress. Once the appointment is made, all you have to do is choose a scented oil, listen to the nature soundtrack and enjoy the feeling of a skilled therapist working out the kinks. If you’re uncomfortable with a stranger seeing you unclothed (for some, it adds stress), try Thai massage. You’ll wear loose-fitting clothing while the therapist presses rhythmically and moves your body into positions that ease tension.



STRESS BUSTER:
DEEP BREATHING

How It Works: During stressful times, your breathing becomes shallow, making you feel short of breath. You can combat the stress response and feel more relaxed by taking several deep breaths. Deep breathing expands the diaphragm, lowers cortisol and blood pressure levels, and slows the heartbeat.

For the best results, Kirsch suggests inhaling deeply through your nose, exhaling slowly through your mouth and repeating the sequence at least six times. "It's a natural way to control the stress response," he says.

When to Use It: Anytime, anyplace.

The best thing about deep breathing exercises—aside from their effectiveness—is that it's possible to use them in a range of situations. Stuck in traffic? Turn off the radio and tune in to your breathing. Pressured at work? You can take deep breaths while prepping a client report or taking notes in the morning meeting.



STRESS BUSTER:
WATCHING TV

How It Works: Your favorite shows can reduce the physical effects of stress, including fatigue. But skip the true crime dramas and opt for sitcoms instead.

"The big belly laugh that comes from watching something funny increases your intake of oxygen and reduces your blood pressure," Bauman says.

Watching a rerun may be particularly helpful in recovering from a stressful experience, according to a new study. Researchers believe that knowing the outcome of a previously viewed TV show alleviates any pressure to pay close attention to the plot. Just the anticipation of laughing at the characters can release endorphins and reduce stress.

When to Use It: When you don't have the energy to engage in active stress relief.

Stress can sap your energy. Zoning out in front of the television might be the perfect antidote to a stressful day at work. While it's OK to watch an hour or two of television in an evening, avoid too much screen time, which can lead to weight gain, increasing—you guessed it—stress.

Stress Buster with Rewards

New Healthy Me (NHM) is the points-based incentive program that has been helping Community Healthcare System and other area businesses reduce employees' stress and help them maintain healthier lifestyles.

As employees participate in activities through the year, like exercising, losing weight and getting an annual physical, they accumulate points that translate into rewards. Every 5,000 points accumulated means prizes—gift cards, drawings and more.

"We have a program that can be customized to fit any company's specific needs," says Roger Vogie, director of NHM. "Employees 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."

CALL

Are You a Business Owner?

Businesses interested in creating a healthier workforce with New Healthy Me can call **219-934-2861** to schedule an appointment for a demonstration presentation.





STRESS BUSTER:
EXERCISE

How It Works: Physical exercise produces mood-elevating endorphins and reduces stress hormones like cortisol and adrenaline. Focusing on a yoga pose or your pace on the treadmill helps take your mind off stressful situations.

Getting your heart pumping doesn't just release stress in the moment. Research shows that the beneficial effects continue after your workout ends, helping you feel calm when faced with future stressors.

"People who exercise regularly release fewer stress hormones when they're stressed than people who don't exercise," Bauman explains.

When to Use It: Anytime you can get physically active, for 15 minutes to an hour.

Lacing up your sneakers for a long run is just as effective as taking a deep-stretch class. And a brisk walk around the block has the same stress-busting effect as a 60-minute spin class.

"You don't have to do a hard workout to get the benefits," Bauman says. ●

The BENEFITS of Stress

Feeling a little frazzled can be a good thing. In addition to protecting against danger, the "fight or flight" response can enhance learning, stimulate immune cells and boost performance.

"Stress is not a problem; too much stress is a problem," says Daniel Kirsch, PhD, the president of the American Institute of Stress. "The biggest problem is that most people don't know how to cope with the amount of stress in their lives."

Don't stress about feeling stressed out. Just be sure to use effective strategies to keep minor stressors from becoming overwhelming.

8 CURES FOR SUMMER BLUES

BY STEPHANIE R. CONNER

Simple tricks that will help manage your mood

The sun is out. The birds are chirping. Flowers are blooming. It's summertime, and the living is easy. Right?

Not so fast.

For some people, the months of long, sunny days and lazy afternoons can trigger depression.

The possible reasons vary, according to Friedemann Schaub, MD, PhD, the author of *The Fear & Anxiety Solution*.

"It can be issues about the disruption of the routine," he adds. "Kids are out of school, and you have to drive them from one [activity] to the next."

Plus, when you're paying for camps, babysitters or vacations, summer can be expensive, leading to financial stress. And depending on where you live, he notes, heat may play a role. For some people, extreme heat affects sleep patterns, and dehydration contributes to lower energy levels—another depression trigger. Schaub notes that for some people, even wearing fewer clothes can trigger summertime stress.

Regardless of the cause, here are eight ways to manage your mood and take control of those summer blues.

THE RTIME

1 EAT BREAKFAST.

"It's unbelievable how many people who are depressed have no breakfast," Schaub says. After you've fasted all night, blood sugar levels are low, and your body and brain need food to function. Physiologically, eating breakfast helps to maintain your blood sugar levels. Blood sugar levels that spike and crash can wreak havoc on your mood.

2 SET A ROUTINE.

Going on vacation, having the kids at home and changing your work schedule throw off your routine. For some people, that means feeling a loss of control, spurring depressive symptoms. Fight back by establishing a new routine: The kids can sleep in, but you still set bedtimes.

3 TAKE CARE OF YOURSELF.

"Having a self-care routine is very important, especially when you're anxious or depressed," Schaub says. "When you feel like everything is about taking care of the kids, it's important to bring your focus back to yourself."

4 RUN AWAY FROM DEPRESSION.

Exercise can be like a drug—reducing levels of the stress hormone cortisol and releasing mood-elevating endorphins. Doctors are even prescribing exercise as a treatment for depression. Studies show that exercise can reduce depression as effectively as medication can for some people. Start your day with a morning jog, take a walk during your lunch break or do yoga on your patio.

5 LEAN ON YOUR FRIENDS.

"The greatest buffer against depression is your social support network," says Shawn Achor, a co-founder of the Institute for Applied Positive Research and



the author of *Before Happiness*. "The depth and breadth of your relationships is the greatest buffer against depression."

6 FEND OFF FACEBOOK.

A study in the *Public Library of Science* in 2013 suggested that heavy Facebook users were more likely to be unsatisfied with life. If you find yourself struggling with all those photos of happy people or feeling disappointed when you compare your achievements with those of others, Schaub says, close down Facebook.

7 GET YOUR ZZZs.

People with insomnia are 10 times more likely to develop depression than those who sleep well, according to the National Sleep Foundation. But, the organization acknowledges, the relationship is complex: Sleep problems can lead to depression, and depression can lead to sleep problems. Examine your sleep pattern, and think about changing your bedtime or installing light-blocking blackout shades.

8 FOCUS ON THE POSITIVE.

It's important to concentrate on the good, Achor says. Make a list of things in your life that you feel fortunate about: success at work, people you love. "You have a lot to be grateful for," he says. ●

Help for Cancer Patients

Cancer patients will find free services including mind-body programs, a lending library and support groups at the Cancer Resource Centre.

A support group for depression called Mind Over Matter offers patients a way to better identify the negative elements in their lives and adapt coping skills, says James Bovan, PsyD, HSPP, licensed clinical psychologist and group facilitator.

"Depression can express itself in many ways," he says. "Someone can have low energy; no motivation to act; lose focus; feel that everything is meaningless and futile. Mind Over Matter offers a way to explore and identify the impact of mood on one's life and disease," Bovan says.

ONLINE

The Support You Need

At the Cancer Resource Centre located at 926 Ridge Road in Munster, cancer patients and their family members will find a community of people who truly understand what you're going through. Call **219-836-3349** for more information or visit www.cancerresourcecentre.com.




The
treat
About
Sunscreen



*Is SPF 45 any
better than SPF 15?*

Which are the harmful rays, UVA or UVB?

See how much you know about the lifesaver in your beach bag



I've come a long way since my teenage days of slathering up with coconut-scented oil and roasting by the pool. But I have a confession to make: I still don't practice safe sunning. Sure, I'll apply a low-grade SPF for a day at the beach, but everyday wear? Not for me. Staying out of the sun between 10 a.m. and 2 p.m.? No way. Reapplying sunscreen every hour or so? Can't be bothered.

As I approach a milestone birthday this year, I'm resolving to take better care of my skin. And as I recently learned, my new approach to sun safety can't come a day too soon. If, like me, you need a good dose of reality to help you change your risky ways, read on. >

TRUE OR FALSE:

Any SPF (sun protection factor) higher than 30 is a bunch of hooley.

» **FALSE** I hate to be a party pooper, but that SPF 4 tanning oil isn't helping your skin. Turns out, a higher number really is better. An SPF 15 filters out about 93 percent of all UVB rays, while SPF 30 blocks 97 percent, and SPF 50 keeps out 98 percent. The differences may seem negligible, but if you are light-sensitive or have a history of skin cancer, they can make an impact. Plus, over a lifetime, a few more percentage points can add up to a lot less sun damage.

"For regular daily use, an SPF of 15 or 30 is more than adequate," says Steven Q. Wang, MD, a spokesman for the Skin Cancer Foundation. "But if you're spending a lot of time outdoors, you need something higher, like SPF 50."

TRUE OR FALSE:

The sun's rays are all dangerous, so you have to block them all.

» **TRUE** UVA? UVB? UB40? OK, so the 1980s band behind the song "Red, Red Wine" has nothing to do with sun protection, but it's easy to get confused with all these abbreviations floating around. When shopping for a sunblock, not only are you deciding which SPF to get, but you also have to look for a product that protects against both types of damaging rays.

Ultraviolet B rays are the chief culprits behind sunburns. They play a large role in the development of skin cancer, and their intensity varies with the season, location and time of day. It was once thought that UVB rays were the only worrisome ones, but we now know that UVA does damage, too.

Ultraviolet A rays penetrate the skin more deeply than UVB and play a major role in aging and wrinkling. Until recently, scientists believed that UVA's damage was all superficial, but new studies show that UVA rays do, in fact, contribute to skin cancer.

So what does it all mean as you navigate the sunscreen aisle? "Look for a sunscreen labeled *broad-spectrum*, which means it meets the FDA standards for both UVA and UVB protection," Wang says.



TRUE OR FALSE:

Wearing sunscreen can be bad for you.

» **FALSE** OK, this one was easy. But some people shy away from sunscreen, believing it poses a health risk. Consider those myths officially debunked. "There have been some ideas perpetuated that sunscreen is really a cause of melanoma. This was most likely due largely to the fact that older products didn't offer UVA protection," Wang says. "A clinical trial in 2010 showed that daily use of sunscreen reduced the risk of developing skin cancer by 50 percent."

Another common misconception is that wearing sunscreen will limit your ability to get enough vitamin D. While it's true that the sun's rays are a source of this nutrient, they certainly aren't the only one. "When you consider the health risks compared to the health benefits of getting your vitamin D from the sun, it really becomes apparent that oral intake from diet and supplements is the preferred method of obtaining the vitamin," Wang says.

TRUE OR FALSE:

Even under total cloud cover, sunscreen is essential.

» **TRUE** Sunscreen should be a part of your daily routine, not just something you throw in your beach bag. Even on an overcast day, up to 40 percent of the sun's ultraviolet radiation reaches Earth. This can lead to serious sunburn, because when you don't feel the sun's rays, you may be inclined to spend hours outdoors without protection.

TRUE OR FALSE:

If I put on sunscreen, I can safely veg on this lounge chair all day.

» **FALSE** Sorry, sun worshippers, but SPF is only one aspect of complete sun protection. Wang recommends practicing sun avoidance, especially between 10 a.m. and 2 p.m. during summer, when the sun is at its strongest. If you are outside, wear protective clothing and hats and seek shade when possible. And to get the full benefits of sunscreen, make sure you slather it on right: Apply 1 ounce (about a shot glass full) every two hours. During a long day at the beach, one person should go through about half of an 8-ounce bottle. ●

Sunscreenings

Not sure which sunblock is right for you? Here are some of our recommendations:

For Recovering Tanoholics

Jergens Natural Glow + Protect, \$9
All hail the gradual self-tanner. Get a sun-kissed look while protecting your skin.



For Busy Women

Clarins UV Plus HP, \$16
This formula protects and enhances skin tone, so you can skip the foundation.

For Kids

Alba Botanica Very Emollient Sunscreen Kids Mineral Protection, \$10
Go natural with this paraben-free, water-resistant sunscreen. Minerals provide strong protection for days spent playing in the sun.



For Your Kisser

Aquaphor Lip Repair + Protect, \$5
Now with broad-spectrum SPF, this pout protector covers all the bases.

For Runners

Neutrogena Wet Skin Sunscreen, \$12
We tested the sweat-proof claims during a run on a summer day in Phoenix—it held up its end of the bargain.



For Sensitive Skin

MDSolarSciences Mineral Lotion, \$34
Free of any chemical ingredients or fragrance, this one is gentle enough for even the most finicky skin.

Map It Out!

Playing “connect-the-dots” with the moles on your skin may not be such a bad idea after all. Skin cancer is one of the most common forms of cancer, with more than 3.5 million cases diagnosed each year, according to the Skin Cancer Foundation. Fortunately, it’s also one of the easiest to cure if diagnosed and treated early.

“Patients should make a ‘body map’ of themselves, noting all the shapes, colors and locations of moles, tags and other markings on their skin,” says Robert Ehresman, MD, a family medicine practitioner on staff at St. Mary Medical Center. “That way any changes or new moles can be more easily identified during monthly self-examinations or when you have an appointment with your physician.”

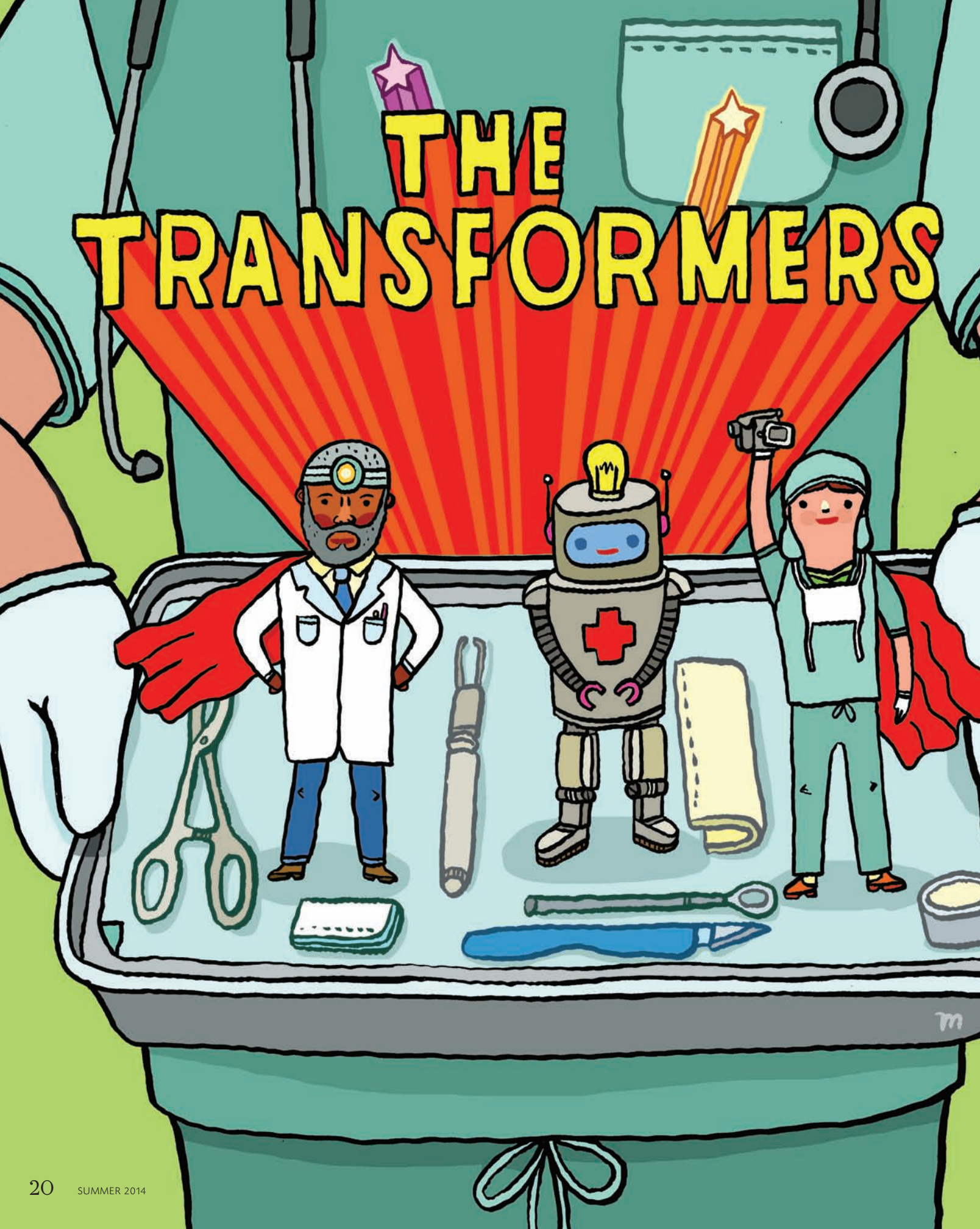
CALL

Made in the Shade

Community Healthcare System hospitals offer free skin cancer screenings throughout the year. Call our physician referral line at **219-836-3477** or toll-free at **866-836-3477** for a list of physicians performing these screenings along with available dates and locations.



THE TRANSFORMERS



Tiny tools and minimal incisions are giving the operating room an extreme makeover

● BY JO OSTGARDEN

Appendectomies in the 19th century were the type of operation that would make a grown man faint: large incision, exposed muscles and tissue, blood-staunching nurses. Post-op wasn't much better, as a patient would spend weeks in recovery, fighting infection.

Today, if you develop appendicitis, and a laparoscopic appendectomy is the appropriate surgical option, the doctor will make a few half-inch incisions in your abdomen and use a tiny camera and miniature tools to remove the rupture. Chances are, you'll be walking the hospital corridors within

hours and heading home the next day.

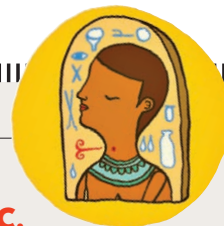
Rapidly evolving advances in biotechnology, diagnostic methods and specialized instruments have helped speed this astounding medical transformation. Surgeons can repair and remove everything from an inflamed appendix to a cancerous tumor using minimally invasive surgery (MIS). While not everyone is a candidate for MIS, Benjamin H. Lowentritt, MD, a fellow of the American College of Surgeons whose expertise encompasses robotic and laparoscopic and other endoscopic procedures, says the benefits are many. Here's an overview of MIS today. >

Great Strides in Surgery



12000 B.C.

The earliest known surgery is performed. Skulls from the Stone Age, discovered by archaeologists, offer evidence of trepanation, in which a hole is drilled to relieve pressure.



3600 B.C.

Talk like an Egyptian: A tracheotomy is portrayed on two ancient stone tablets; the procedure is also noted on the Ebers Papyrus, a medical papyrus from 1550 B.C.

WHAT'S IN A NAME?

MIS is also known as endoscopic surgery, keyhole surgery and less-invasive surgery. You may have heard the term laparoscopic surgery. Laparoscopy is the most common type of MIS, in which surgeons examine and repair organs in the abdominal or pelvic cavities.

HOW DO THEY DO THAT?

The beauty of minimally invasive surgery is, of course, the small incisions, or maybe no incision at all, if the surgeon is able to maneuver a scope and work through a body's natural opening. Usually, incisions will be less than a half-inch. Space is tight in there! In some abdominal cases of MIS, carbon dioxide gas is pumped into the cavity around an organ to create better working space.

LIGHTS, CAMERA ... SURGERY!

For two centuries, doctors have inserted endoscopes into human bodies to diagnose ailments. Today's scopes, thin tubes equipped with lights, cameras and surgical tools, allow surgeons to also make repairs. Utilizing an incision or a natural body opening, the doctor guides the endoscope as live imaging appears on a video screen, allowing him to clearly see the surgical site. Other small incisions are used as entry and exit points for surgical instruments. "The concept and goals are the same as open surgical procedures," Lowentritt explains, "but the least invasive possible."

THE BOT AND THE BODY

During robotic-assisted MIS, a physician sits at a console and maneuvers "arms" that seamlessly replicate hand movements to manipulate miniature



instruments. A high-definition camera that has been inserted through a small incision streams 3-D images to a monitor. "Robotics allow the surgeon to see more clearly what they're doing, and the riveted arms and surgical tools allow more flexibility in approaching the repair. The robotics also reduce the surgeon's natural movements, like hand tremors, which helps make it even more precise," Lowentritt says.

FROM THE TOP DOWN

MIS can be performed almost anywhere in the body, from the brain to the foot. Gallbladder removal and appendectomies are two of the most common procedures. Prostate and uterus removal are others. Heat can be delivered to destroy or shrink tumors. Heart valves can be repaired. Hernias, diverticulitis, uterine fibroids, joint problems, obstructions and herniated disks are just some of the conditions for which MIS may be suitable.



600 B.C.

The first rhinoplasty (nose job) is recorded in India.

1842

The first documented successful operation using ether as an anesthetic is performed in Jefferson, Ga.



Two neck tumors are removed; the patient pays \$2.

1911

Laparoscopic surgery, dubbed "minimal access surgery" or "organoscopy," is performed for the first time in the U.S.



1958

In Sweden, the first cardiac pacemaker is implanted and functions for three hours.

WHAT'S TO LIKE

You may be able to go home the day of the MIS or the next day. In general, Lowentritt says, “scars are smaller. There’s less blood loss, less pain, less medication, fewer complications and shorter hospital stays.” And because of the smaller incisions, recovery is faster and infection risk is lower.

THINGS TO THINK ABOUT

There are a few downsides to consider. Procedures can sometimes take longer because of the skill required, so a patient may be under anesthesia longer. Surgeons can’t touch organs and feel around to look for other problems. People who are obese or who have scar tissue from previous surgeries may not be candidates. Robotic surgical equipment is pricey, and compared with laparoscopy, such operations typically cost the hospital more per patient and require more operating time.

WHAT'S NEW IN A HOT FIELD

Single-incision laparoscopic surgery, also known as single-port surgery, is a newer form of MIS. The physician uses a soft and flexible instrument equipped with three distinct openings that allow for the simultaneous use of three surgical devices—all accessed through one small incision, usually in the navel. It’s increasingly being used for gallbladder, urologic and gynecologic procedures.

Another new frontier is known as “scarless surgery,” or NOTES, for natural orifice transluminal endoscopic surgery, which uses the body’s existing openings, such as the mouth and the vagina, to access organs with an endoscope and surgical tools.

Stay tuned. ●

Less Is More

The hospitals of Community Healthcare System offer patients many minimally invasive options that can make treatment easier to undergo.

Community Hospital and St. Mary Medical Center use da Vinci Si® technology. The Si robot enables surgeons to remove the gallbladder through the belly button during a single-incision laparoscopic surgery and perform other laparoscopic procedures such as Nissen (GERD), hiatal hernia, colectomy and splenectomy. St. Catherine Hospital offers CyberKnife®, a nonsurgical procedure that delivers radiation to tumors without damaging healthy tissue and organs.



ONLINE

Log On to Learn More

Visit us online at www.comhs.org for more information about minimally invasive procedures at the hospitals of Community Healthcare System.

1960

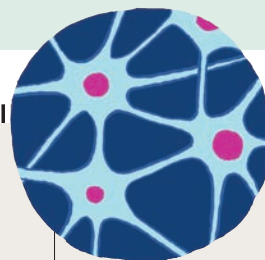
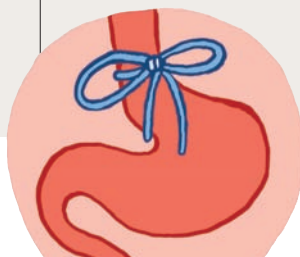
The first hip replacement is performed. The procedure becomes one of the most successful types of surgery performed in the U.S.

1985

A robot called the Puma 560 places a needle for a brain biopsy using CT guidance.

2001

The first bariatric surgical device, commonly called a Lap-Band, is approved to treat obesity.



2008

French neurosurgeons use a fiber-optic laser to destroy cancerous brain cells.

2012

Doctors in Sweden perform the world’s first mother-to-daughter uterus transplant.





GET YOUR

HEAD

IN THE GAME

BY STEPHANIE R. CONNER

Know the signs of a concussion and how to prevent long-term damage

You're on your feet, shaking a foam finger high in the air to the beat of the fight song. You know you'll have a sore throat tomorrow from all the cheering, but this is your kid's team, and this is one exciting game. Then, suddenly, the crowd falls silent. The athletes stop playing. The coach and trainer race to help your child off the field. Your heart stops.

When your child suffers a head injury, what do you do? Injuries, including concussions, are part of sports at every level of play. But to prevent long-term damage, it's important to know the signs of a concussion and what steps to take next.



» COMMON CAUSES OF CONCUSSION

A concussion is a type of traumatic brain injury usually caused by a blow to the head. Accidents or sports are typically to blame.

In 2011, the Centers for Disease Control and Prevention (CDC) reported a 60 percent increase in young athletes being treated in emergency departments for traumatic brain injuries during the prior decade. The top five causes were bicycling, football, playground activities (especially in younger kids), basketball and soccer.

Experts suggest that this dramatic rise is not the result of more dangerous play, but rather a sign that parents and coaches better recognize the signs of concussion and know when to seek treatment.

“Concussion in recreational sports is not new,” says Stanley Herring, MD, a team doctor for the

Seattle Mariners and Seattle Seahawks and a member of the National Football League (NFL) Head, Neck and Spine Committee. “This is a reflection of better recognition. People are erring on the side of caution.”

» WHAT TO LOOK FOR

During a concussion, the brain is violently rattled against the inside of the skull. So it’s no wonder that headaches are a common symptom of a concussion.

And while many people associate concussions with loss of consciousness, that happens in less than 10 percent of sports-related concussions, says Barry Jordan, MD, a neurologist who serves on the NFL Players Association Mackey-White Traumatic Brain Injury Committee and the NFL Neuro-Cognitive Disability Committee.

Signs of concussion, Jordan says, fall into three categories:

- **Cognitive.** Children might be confused or disoriented or have amnesia.
- **Behavioral.** They may feel as if they’re in a fog, or may be more emotional than usual.
- **Physical.** Kids can experience headaches, dizziness or nausea, or have difficulty with balance or coordination.

It’s essential for coaches and trainers to recognize these symptoms because what happens next is critical to a child’s health.

“This is a very important point,” says Herring, who helped develop the CDC’s Heads Up online concussion training program. “If there’s a suspected concussion, they’re out for the day.”

Next, it’s important to make an appointment with your child’s doctor. “The brain is vulnerable until the concussion heals,” he adds. A second blow to the head before a concussion

Concussion and the Classroom

A recent report in *Pediatrics*, the official journal of the American Academy of Pediatrics, warns doctors, parents and school officials of potential cognitive damage resulting from a concussion. While concussion victims are already cautioned to avoid activities such as texting, playing video games, reading and watching TV, the new study indicates that normal schoolwork may need to be adjusted for several weeks after the trauma. Be sure to discuss with your child’s doctor.

heals can cause serious and lasting damage or even death.

For moms and dads concerned about the life-long neurological impact of contact sports, the good news is that as long as you take the right steps after a brain injury, there's little to worry about, Jordan says.

One significant factor, he says, is the length of time between concussions.

"Someone having three concussions in six months is different than someone having three concussions in a six-year period," he explains. "One thing parents and athletes should be concerned about is that each time, it takes longer to recover. And it takes less impact to cause [a concussion]."

» WHAT TO DO

Forty-eight states have laws that require coaches to take athletes out of the game after a concussion. The laws also affirm that athletes can't play until they've been cleared by a medical professional.

How long that takes depends on the individual situation, Jordan says.

"Most concussions will resolve in seven to 10 days," he explains. "Some take longer."

Once the symptoms have gone away, the athlete can begin to slowly return to activity, he adds. That means progressively increasing activity and training to make sure symptoms don't reappear.

"They should return to competition only when they are asymptomatic at rest and on assertion—and are not on any medications for the symptoms," Jordan notes.

It's important, Herring adds, for coaches, trainers and parents to be educated about concussions and to take advantage of free resources, such as the CDC's Heads Up program.

"In youth sports, there aren't always trained medical professionals on the field," he says. "I don't expect (coaches and parents) to make a diagnosis, but look at a checklist."

What makes this crucial is knowing that young athletes may not always be honest about their symptoms. In addition, Herring says, coaches should adopt a team concussion policy.

"Athletes sometimes listen to their parents, but they always listen to their coach," says Herring, an advocate for head trauma legislation to protect youth athletes. "Everyone's tough, but no one has a tough *brain* ... Reward robust reporting. Make it part of the team culture."

Help the Hurt

Most people would not play football without protective gear, but many people who suffer a head injury continue their normal activities without seeking medical care. Injury to the head or spine that temporarily interferes with the way the brain works is a concussion. Seeking medical care quickly is important to make a full recovery and lessen the chance of developing long-term complications.

The Concussion Clinics at Community Hospital and St. Mary Medical Center have a team of experts experienced in evaluating and treating concussions.

"The key to concussion care is proper diagnosis and treatment at the point of injury whether in a sporting event or accident," says Mohammad S. Shukairy, MD, neurosurgeon at the Concussion Clinic. "Oftentimes people wait to seek treatment thinking their headache or other symptoms will go away after they rest."

CALL

Head to the Experts

The Concussion Clinics at Community Hospital in Munster and St. Mary Medical Center in Hobart will help patients through the journey of evaluating, treating and recovering from a concussion. For more information or to schedule an appointment, call the Concussion Clinic at **219-836-4461**.



While brain injuries are scary, it's important for parents to not overreact, he adds. With the rise of childhood obesity, Herring says, sports can be incredibly healthy for kids.

"There are consequences to not letting kids play sports," he notes. "Youth sports are an important part of physical and social development. And injury is an inevitable part of an active lifestyle. ... It's how you manage the first concussion and treat the athlete that will make a difference." ●



Pack your bags and your meds—a chronic condition doesn't have to mean your travel days are over • BY BOB PAYNE

THE JOURNEY CONTINUES



For anyone who enjoys traveling, learning that you have a chronic medical condition comes with the apprehension that the adventures you've enjoyed throughout your life will become a thing of the past—that you'll have to tuck away your passport and put your suitcases in the attic.

But retired business executive Mike Eicher says it doesn't have to be that way. Eicher has undergone heart and lung surgery. He has experienced a stroke, and he has diabetes, all combining to limit his stamina and mobility. Yet he remains a world traveler and believes that others with chronic health conditions can travel safely, too. "As long as you take precautions, health issues shouldn't keep you at home," says Eicher, author of *Travel for Seniors Made Easy: Staying Alive @ 65*.

Leslie Spry, MD, a nephrologist and a spokesman for the National Kidney Foundation, agrees. "In the case of kidney patients, as long as their health is stable, we encourage travel because it can give a boost to their sense of well-being. And with the number of dialysis centers worldwide, they can go just about everywhere."

6 RULES OF THE ROAD

As with kidney disease, every other chronic condition creates its own demands and limitations for travelers. The best way to learn about specifics is from organizations such as the National Kidney Foundation (kidney.org), the American Diabetes Association (diabetes.org) and the American Heart Association (heart.org).

But you'll discover there's a core of precautions common to all. >





1 HAVE YOUR DOCTOR EVALUATE your ability to take the trip. That may mean an exam, an assessment of risks and research into the care available at your destination. For kidney patients traveling domestically, for example, medicare.gov has information that allows you to compare any dialysis treatment center in the U.S. with your center at home.

2 CARRY RECORDS that can help a doctor who doesn't know you quickly assess your condition. These should include prescriptions for your medications and a letter from your doctor at home, detailing your condition and needs; the medicines and medical supplies (e.g., syringes) you require; food or medicine allergies; and emergency contact information.

Your list of medications should include generic names and, according to the Centers

for Disease Control and Prevention, be written in the local language if possible. Consider a medical ID bracelet or necklace that has basic medical information or a USB drive with your medical history. "Access to information is key," Spry says. "Just by knowing what medicines a patient is taking, you can get a pretty good idea of what's going on."

3 TELL SOMEONE traveling with you about where your medicines are packed, where you keep your medical records and your medical needs.

4 CARRY ENOUGH MEDICINE and supplies to last for the trip, plus a few days extra in case of spills or travel delays. Keep them in your carry-on, along with written prescriptions for emergency replacements.

5 DETERMINE what your insurance will cover (Medicare, for example, won't cover anything outside the U.S., except in a few instances), and, if necessary, supplement it with short-term travel, health and evacuation insurance.

6 WHEN BOOKING, let airlines know if you need special assistance or special meals, alert hotels if you have problems with stairs or distance and, if you use a travel agent, tell him or her about your special needs, too.

DON'T LEAVE HOME WITHOUT THEM

Travelers with health conditions venturing out of the country need to bring extra paperwork. In addition to the list of medications you are taking and a letter from your doctor detailing your medical condition, the Centers for Disease Control and Prevention suggests that you carry a card containing contact information for the following:

- Family member or close contact remaining in the United States
- Healthcare provider(s) at home
- Lodging at your destination
- Hospitals or clinics at your destination, including emergency services
- U.S. embassy or consulate in your destination country



Whatever your needs, Eicher says, the important thing to remember is that if you love to travel, there is a way to do it. "It's just a matter of doing things a little differently."

IF YOU HAVE KIDNEY PROBLEMS

To safely treat you as a transient patient, most dialysis centers will require the following information, mailed or faxed six to eight weeks in advance, with another copy hand-carried by you, the National Kidney Foundation says:

- The dates you need dialysis treatment
- Your name, address, phone number
- Medical history and recent physical exam reports
- Recent lab results
- Recent EKG
- Recent chest X-ray
- Your dialysis prescription and three to five recent treatment records
- Dialysis access type
- Special needs or dialysis requirements
- Information about your general health
- Insurance information
- Where you will be staying in the area
- A list of the medications you take during treatment and at home

IF YOU HAVE DIABETES

The biggest challenge for travelers with diabetes can be the clock: On a long journey east or west, an air traveler may rapidly cross several time zones. That can make keeping track of insulin and meal schedules confusing, as this must be done based on time intervals and not the time of day at your current location. When more than a couple of time zones are involved, have your doctor help you set up the schedule. According to the American Diabetes Association, you should keep these points in mind:

- Eastward travel means a shorter day. If you inject insulin, less may be needed.
- Westward travel means a longer day, so more insulin may be needed.

- To keep track of shots and meals during changing time zones, keep your watch on your home time zone until the morning after you arrive.

IF YOU HAVE A HEART CONDITION

Deep vein thrombosis (DVT) is a condition in which blood clots form in a deep vein, usually in the legs. It's serious because if a clot breaks off, it can travel through the bloodstream to the lungs and block blood flow, causing a pulmonary embolism. Sometimes called "economy class syndrome" because it's associated with the restriction of mobility on long flights, DVT can happen to any traveler. But if someone has had vascular disease or a history of heart failure, the risk increases. If you are in that category, the Federal Aviation Administration says you may want to:

- Talk to your doctor about specific risks and precautions.
- On the advice of your doctor, wear compression stockings, which can reduce the chances of blood pooling and clotting. Your doctor may also prescribe blood-thinning medications.
- Get up and walk around the cabin when you can. If that's not possible, frequently exercise your lower legs and ankles while seated.
- Drink adequate fluids but avoid alcohol and caffeine.
- Wear loose-fitting clothing, which may help prevent constriction of veins.
- Take short naps to avoid the prolonged inactivity of longer ones. ●

Rx RESOURCE

Taking medications for a health concern can be a confusing experience. But at the retail pharmacies at Community Hospital in Munster and at St. Catherine Hospital in East Chicago you can find the support and convenience you need. Patients can get their prescriptions filled and purchase over-the-counter medications.

The pharmacies are committed to helping patients stay healthy and provide extra support and education in making informed choices about taking medications at home. The pharmacists use the most up-to-date computer programs and advanced robotic automation refill for increased patient safety. The equipment enables staff to track pertinent information about patients and fill prescriptions in a timely manner.

Community Hospital

Pharmacy hours:

Monday–Friday,
9 a.m.–6 p.m.;
and Saturday,
9 a.m.–3 p.m.

St. Catherine
Pharmacy hours:

Monday–Friday,
9 a.m. to 5:30 p.m.

CALL



Got Questions?

We have answers. Contact
Community Hospital's retail pharmacy at
219-836-2146 or St. Catherine Hospital's
retail pharmacy at **219-392-7691**.

B Brain

BY ALISSA M. EDWARDS

M Man

*How a movie role compelled
BRADLEY COOPER to become
an advocate for mental health*

When Bradley Cooper took on the role of a man with bipolar disorder, he probably never imagined it would change his worldview.

Portraying Pat Solatano in *Silver Linings Playbook*, the 39-year-old actor and executive producer earned Academy, Golden Globe and Screen Actors Guild award nominations. The film also catapulted him into a role as a high-profile advocate for mental health issues.



You Don't Know Brad

Think you've got Bradley Cooper all figured out? Here are seven things you probably didn't know about this charming and versatile actor.

- 1 CALL HIM "COOP."** His closest friends do.
- 2 HE LOVES HIS DOGS.** "They are both rescue dogs and they are the best," Cooper told *People* magazine. "They're my kids."
- 3 HE'S QUITE A COOK.** "My grandmother was an amazing cook. I used to make homemade pasta," he told *People*. "I love the idea of making whatever is in the fridge into something."
- 4 HE'S ON FIRE.** The actor reportedly earned \$15 million for reprising his role of Phil in *The Hangover Part III*.
- 5 HE HASN'T HAD A HANG-OVER FOR A WHILE.** He quit drinking at age 29 after a rough night of partying sent him to the ER. "I realized I wasn't going to live up to my potential, and that scared ... me," he told *US Weekly*.
- 6 HE LOVES HIS VESPA,** which was given to the cast of *The Hangover Part II* as a gift by producer Todd Phillips after they wrapped.
- 7 HE HAS A BROMANCE.** He's best friends with Dax Shepard, of *Punk'd* and *Parenthood* fame.



A FRESH PERSPECTIVE

Before researching the *Silver Linings* role, the star of *The Hangover* trilogy admits to being relatively ignorant to the plight of those with bipolar disorder. "It's not that I didn't know about mental illness. ... I just didn't see it as a part of my own life; I didn't really think that it affected me," Cooper said during a speech at the National Conference on Mental Health in June 2013.

But filming the movie changed his perspective. "I realized that people that I knew, people that I loved and cared about, they were coping with this in silence and ... I really had no idea."

The truth is that most of us don't. And although bipolar disorder is more common than we might realize, affecting more than 5.7 million adult Americans in a given year, or 2.6 percent of the population 18 and older, misconceptions abound. We have answers to six common questions.

Q WHAT IS BIPOLAR DISORDER AND WHAT ARE THE SYMPTOMS?

Bipolar disorder is a mental health disorder that causes dramatic, sudden shifts in mood, energy, sleep and activity levels.

Though researchers aren't sure exactly what causes it, "genetics clearly play a role and environmental factors like significant life events also appear to trigger episodes," says David Miklowitz, PhD, a psychologist and the author of *The Bipolar Disorder Survival Guide: What You and Your Family Need to Know*. "Some neuroimaging studies have also found differences in the brains of bipolar individuals."

In *Silver Linings Playbook*, the character's illness manifests itself in obsessive behavior, delusions, rapid speech, sleeplessness, manic and depressive episodes, and temper flare-ups, "with mood swings and weird thinking brought on by severe stress," the Solatano character explains to his therapist.

Though these are all common symptoms of bipolar disorder, Ryan Niemiec, PsyD, a psychologist and the co-author of *Movies and Mental Illness: Using Films to Understand Psychopathology*, points out that the movie doesn't get every bit of it right. Solatano's frequent episodes of rage and fighting "are likely features of another condition and are not necessarily characteristic of bipolar."

Celebs SPEAK OUT

Bipolar disorder can affect anyone, including your favorite celebrities.

"There's evidence that people with this illness have high levels of creativity," says David Miklowitz, PhD, a psychologist and the author of *The Bipolar Disorder Survival Guide: What You and Your Family Need to Know*. "It seems to go along with the artistic temperament." Here, Hollywood's finest share their experiences.



Catherine Zeta-Jones,

on going public. "I hope I can help remove any stigma attached to it," she told *People* magazine, "and that those who didn't have it under control will seek help."



Jean-Claude Van Damme,

on medication. "In one week, I felt [the medication] kick in," he told *E! Online*.

"All the commotion around me, all the water around me ... became like a lake."



Carrie Fisher, on being

bipolar. "I thought if I could ever get [bipolar disorder] to be funny, it would be brilliant," she told *BP Magazine*. "But it took a really long time ... dealing with the bipolar situation was far from funny."



Linda Hamilton, on treat-

ment. "Every year is just richer ... because I'm really returning to who I was

meant to be," she said on *Larry King Live*.

PATH TO WELLNESS

Do you experience feelings of overwhelming hopelessness or negative thinking? Are you more irritable, short-tempered or aggressive than usual? These may be signs of manic-depressive or bipolar disorder.

St. Catherine Hospital in East Chicago offers compassionate care on two inpatient treatment units: a Mood Disorder Unit and an Intensive Treatment Unit. A treatment day consists of individual and group psychotherapy, medication management, family support sessions, recreational therapy and spiritual care as well as other alternative therapies including art therapy, yoga and more.

Recreational therapist Ann Bobos directs group therapy and incorporates a variety of approaches.

"We do group work that includes activities on the Wii, journaling, reading activities, art and other projects to help patients transition back home," Bobos says.

Patients are prepared for the outside world so they can continue on their healing journey through the outpatient centers in Schererville or East Chicago.

Services are available in English and Spanish.

Q HOW DOES BIPOLAR DISORDER AFFECT A PERSON'S LIFE?

For Solatano, bipolar disorder is a contributing factor in both the end of his marriage and the loss of his job as a substitute teacher. People with bipolar disorder face similar challenges in real life.

"It's common to experience problems in work, social and family relationships due to extreme mood states," Miklowitz explains. "To complicate things further, the moods of people with bipolar disorder are negatively affected by stress in their relationships."

Though treatments can help minimize these problems, they don't erase them. Bipolar individuals, along with their employers, co-workers and the people who care about them, should educate themselves and make adjustments accordingly. Changes could include, for example, a more flexible work schedule to allow for adequate sleep and counseling sessions.

Q HOW IS IT DIAGNOSED?

In *Silver Linings Playbook*, Solatano's diagnosis comes after a particularly violent altercation during which he nearly beats someone to death. His diagnosis lets him skip jail time but puts him in a mental institution for eight months.

For most people, it's not a single event that precedes a diagnosis. "Most people seek the help of a mental health professional after experiencing symptoms for an average of 10 years before getting a diagnosis," Miklowitz explains.

To be diagnosed as bipolar, individuals must undergo a physical examination and blood tests to rule out other problems that could be causing symptoms. Next, a psychological evaluation is performed, usually along with analysis of moods and sleep patterns, to determine whether the person meets the criteria for a diagnosis.

CALL

Worried About Yourself or a Loved One?

If you or someone you love is bipolar, St. Catherine Hospital Centers for Mental Wellness can help. There are two locations for outpatient support: Schererville (6225 W. Lincoln Highway) and East Chicago (4321 Fir St., hospital 3rd floor). Call **219-392-7025**.



By the end of *Silver Linings Playbook*, therapy, family and ballroom dancing have helped Cooper's character begin to manage his illness.



Q HOW IS IT TREATED?

A comprehensive treatment plan, as explored in the film, should include counseling, medication, a healthy lifestyle and a strong support network, Niemiec says. A plan typically entails:

Mood-stabilizing medication. Though it may be the most important piece of treatment, many patients have an on-again, off-again relationship with medications because of side effects like memory and concentration problems, nausea and drowsiness. Though the process involves trial and error, Miklowitz says the right medication can “make a world of difference.”

Counseling. When combined with medication, research shows that therapy can help those with bipolar disorder recover faster from episodes and better control their moods.

Diet and exercise. A healthy, balanced diet that includes plenty of omega-3s (found in foods such as fish, eggs, soy, seeds and nuts) may help lessen symptoms and prevent weight gain associated with medications, while exercise can decrease mood swings and reduce the stress of manic episodes. “You see Cooper’s character doing this with running and eventually dancing in the film,” Niemiec says.

Structured sleep. A regular and consistent sleep schedule is critical. Insufficient sleep is a trigger for manic episodes—as when Solatano bursts into his parents’ bedroom at 4 a.m. after spending the night reading Ernest Hemingway’s *A Farewell to Arms*.

Support. Attending a support group and having a network of friends and family can help bipolar individuals stay on course with treatments and better cope with the day-to-day ups and downs of their diagnosis.

Q WHAT ARE BARRIERS TO TREATMENT?

Despite the treatment options available, many people with bipolar disorder “white knuckle it,” as Solatano tells his psychologist he did before his diagnosis. They go without medications or therapy.

Miklowitz says this is due in part to the stigma surrounding mental illness. “Many people still think that mental health issues aren’t as legitimate as physical problems,” he explains. “Even though there’s medical evidence that they affect the brain and can be inherited, people still blame the victim.”

Another challenge is adhering to medication regimens, Niemiec says. “Like Solatano, many individuals don’t like the way the medicines make them feel, so they quit on their own—a very dangerous thing to do.”

Q HOW CAN I HELP?

Watching *Silver Linings Playbook* will open your eyes to the plight of individuals dealing with bipolar disorder. Educate yourself about the issue, share what you learn and practice compassion toward those experiencing mental illness. “People need to know that bipolar disorder is a biologically based, genetically acquired illness,” Miklowitz says. “We need to stop blaming people for their behavior and show them the same sympathy and encouragement we show people who have physical illnesses.”

Cooper agrees. “It’s less about the people who are dealing with this illness and more about the people who aren’t,” he said in his closing remarks at the 2013 National Conference on Mental Health. “I think it is up to all of us to help, and I want to help. ... I want to be a part of the solution.”

Now you can, too. ●



THE Foot FOLLIES

● BY JO OSTGARDEN



*On the journey through life,
your feet are two of your
best friends. It's time to
treat them that way*

Quick! Name the woman whose stiletto obsession led to a rush on \$400 shoes designed by Jimmy Choo and Manolo Blahnik. It's Carrie Bradshaw, of course, the *Sex and the City* heroine portrayed by actress Sarah Jessica Parker—who confessed that the steep heels she wore while filming left her with permanently damaged tootsies.

Alas, human feet are, well ... complicated. Composed of 26 bones, 33 joints and more than 100 muscles, ligaments and tendons, feet are essentially the body's foundation. Instead of torturing them, why not try a little podiatric pampering? You might just kick up your heels. >



CULPRIT 1 HIGH HEELS

“A normal arch acts as a shock absorber for the entire body,” explains Bal Rajagopalan, MD—aka Dr. Raj—a Beverly Hills, Calif., orthopedic surgeon and a medical consultant for ABC News. “Each time you take a step, you’re loading up to five times your body weight onto that foot. A 6-inch heel typically has a 60 percent angle, which not only overloads the forefoot but also deforms the arch and reduces shock absorption and leads to inflamed nerves in your toes.” It can also shorten the calf muscles, which may cause inflammation of the Achilles tendon, resulting in painful tendinitis.

Eventually, all this distortion creates structural instability, Rajagopalan says, and can cause compression in the spine, which impinges the nerves running

through it. This is especially true, he says, if your spine already curves forward more than normal. High heels also exert pressure on the fat pads under the ball of your foot, causing intense localized pain called metatarsalgia.

Stilettos, distinguished by thin, tapering heels, create even greater instability, and can make your foot wobble and cause ankle sprains.

THE FIX: Consider platforms, wedges or chunky high heels; they offer height but also, typically, more cushion. Critically, they spread the load and impact of each step across a greater surface area, Rajagopalan says.

CULPRIT 2 TIGHT SHOES

The majority of today’s high-fashion footwear is designed with a narrow, pointed profile that doesn’t bear much resemblance to the feet most of us were born with. Stuffing your feet into an unrealistic contour can make toes curl and cause “pump bumps,” knobby bone protrusions on the side of the heel. The repeated friction or pressure of ill-fitting shoes also can lead to corns (raised hard skin), calluses (diffuse patches of hardened skin) and bony enlargements (bunions) on the side of the big toe.

THE FIX: Do your feet hurt badly? Get a foot specialist (a podiatrist, a pedorthist or an orthopedic physician) to evaluate them. When deformities like corns and hammertoes become severe, Rajagopalan says, they typically require surgery to repair. You can prevent this by wearing shoes that accommodate a narrower heel and a wide forefoot, or decrease pressure at friction points.

TOES *AND* NOSE

Each pair of human feet contains about a half-million sweat glands, so if you lace them up all day in a pair of nonbreathable shoes, they’re likely to get sweaty. Sweat causes the bacteria count inside of your shoes to increase, leading to stinky feet. The solution: Wash and dry your feet thoroughly, every day; wear socks made of wool or synthetic fibers designed to wick moisture; and rotate your shoes daily. Besides creating an odor, sweat can also lead to athlete’s foot (*tinea pedis*), a fungus that loves dank places like shoes and locker room shower stalls. It can make your feet itch like crazy. This problem doesn’t go away on its own; treat it with an antifungal balm or straight tea tree oil.

CULPRIT 3

HEALTH CONDITIONS

The inflammation of osteoarthritis and gout can cause foot swelling and pain. Being overweight stresses foot muscles and joints, which leads to structural instability, and even foot ulcers. Diabetes also increases the risk of foot ulcers and nerve damage. Toenail fungus can be a problem for people with diabetes and rheumatoid arthritis and other immune deficiencies.

If you're pregnant, swelling in your feet is usually normal but can be a sign of preeclampsia (pregnancy-related high blood pressure). Some medications can also cause swollen feet, especially those used to treat high blood pressure.

THE FIX: Diabetics should inspect their feet daily and keep blood sugar levels under control to prevent foot ulcers. See a doctor if you notice open wounds or toenail problems. Untreated ulcers can lead to serious infections and even amputation.

If you have a chronic health condition and begin to notice numbness or prickly pain in your feet, have a foot specialist check for neuropathy, or nerve damage. Avoid going barefoot to reduce potential foot injury. Your doctor may recommend padded socks and specialized footwear to reduce pressure and speed healing. If you're pregnant, pack away your pumps. Look for shoes with a wide forefoot and adjustable straps that accommodate the intermittent swelling that can occur any given day during pregnancy.

CULPRIT 4

HIGH-IMPACT EXERCISE

Distance runners, race-walkers, and serious hikers and backpackers are prone to a long list of foot woes, including corns, calluses, blisters, athlete's foot, fungal infections, plantar fasciitis, Achilles tendinitis

HAVE TINGLING IN YOUR TOES?

Even if it isn't love, it might still involve your heart.

Tingling, numbness or pain in your feet or legs can be a sign of poor circulation due to peripheral arterial disease (PAD). Millions of Americans suffer from PAD, which is a narrowing of the arteries in the legs. "PAD is easy and painless to diagnose," says Felix Gozo, MD, medical director of St. Mary Medical Center's Cardiopulmonary Rehabilitation program. "Screenings involve a handheld ultrasound and blood pressure cuffs on the ankle and upper arm."

and metatarsalgia. Most problems are a result of high-mileage training or excursions, and ill-fitting or worn-out footwear.

THE FIX: Replace running shoes every 400 to 600 miles. And be sure they fit correctly (unless you're buying exact replacements, don't order online).

Orthopedists and podiatrists are divided about barefoot-style running shoes. Before the invention of footwear, humans mostly went barefoot. In the past few years, going barefoot or wearing barefoot-style shoes while running and hiking has gained popularity. Proponents claim the shoes are the fix for a wide assortment of foot ills. As for technical innovations in other athletic footwear, such as corrective devices and enhancements designed to alter biomechanical deficiencies (weakness, inflexibility), the jury is most definitely out. ●



CALL

Sign Up for Screenings

Community Healthcare System hospitals offer low-cost screenings for PAD. This simple 15-minute screening analyzes leg arteries for blockages. For screening dates and locations call **219-836-3477** or toll free **866-836-3477**.



● BY JODI HELMER

Friendly FAT

*Bring it, swimsuit season!
These delicious ingredients will help you
welcome summer with open arms
(and maybe a flatter tummy)*

As temperatures rise, the idea of confronting the dressing room mirror in a strapless one-piece can fill you with dread. But instead of skipping meals to slim down or spending the summer hiding under a cover-up, a few delicious diet changes can help trim belly fat so you can brave swimsuit season with confidence.

Monounsaturated fatty acids, or MUFAs, are one weapon in the battle of the bulge. Research shows that MUFA-rich foods like almonds, avocado, peanut butter, dark chocolate and olive oil may reduce belly fat. These “good” fats also are known for increasing HDL (“good”) cholesterol, reducing the risk of diabetes and breast cancer, and protecting against cardiovascular disease.

While it’s unclear how the healthy fats help you slim down, Cynthia Sass, MPH, RD, co-author of the *Flat Belly Diet*, believes consuming more MUFAs may help prevent the accumulation of visceral belly fat, boost metabolism or both.

“We’ve known about the health benefits of MUFAs for years, but recently nutrition education has strongly shifted towards focusing about which foods to eat for health rather than which

foods to avoid,” Sass says. “This has brought superfoods [like MUFAs] into the limelight.”

The National Heart, Lung and Blood Institute recommends a diet with 25 to 35 percent of calories from fat, with 20 percent of those calories coming from monounsaturated fats. In other words, if you’re following a 1,600-calorie diet, you should aim to consume 35 grams of MUFAs per day.

Because monounsaturated fats aren’t listed on nutrition labels, it’s hard to track your consumption of the good fats. Sonya Angelone, MS, RDN, a spokeswoman for the Academy of Nutrition and Dietetics, recommends eating MUFAs at every meal to ensure you’re consuming enough of the healthy fats.

Incorporating MUFAs into your diet is as simple as sprinkling flaxseeds on your morning bowl of oatmeal, adding avocado to a turkey sandwich, keeping a stash of almonds in your desk drawer for snacking or using a splash of extra-virgin olive oil to broil veggies at dinner.

“Foods that contain MUFAs are delicious and nutritious,” Angelone says. “These are foods you want to eat, so adding more of them to your diet is a really satisfying way to improve your health.”

These MUFA-rich recipes prove that even a “diet” dish can be filled with delicious fats.

If you’re following a
1,600-
calorie diet,
you should aim to
consume
35 GRAMS
of MUFAs per day.



Garbanzo NUTS

Makes six $\frac{1}{3}$ -cup servings
160 calories per serving

INGREDIENTS

- 2 15.5-oz. cans garbanzo beans, rinsed and patted dry
- 1 Tbsp. olive oil
- dash of chipotle pepper powder (use quantity desired)
- dash of salt (optional)

DIRECTIONS

1. Heat oven to 350 degrees.
2. Line a jelly roll pan (cookie sheet with a rim) with aluminum foil or parchment paper.
3. Place garbanzo beans in a medium-sized bowl. Add olive oil and chipotle pepper or other herbs and combine well.
4. Place on baking pan and bake for two hours (monitor so they don't start to burn).
5. Turn off the heat and leave the garbanzo beans in the oven as they cool and become a crunchy "nut." (This usually takes a few hours. For best results, let them cool overnight.) Store in an airtight container.



Cherry Almond Ginger **SMOOTHIE**

Makes 1 serving, 416 calories

INGREDIENTS

- 1 single-serve container (5–6 oz.) of nonfat (0 percent) plain Greek yogurt
- ¼ c. water
- 1 c. frozen pitted cherries
- 2 Tbsp. almond butter
- ¼ c. dry old-fashioned rolled oats
- ¼ tsp. fresh grated ginger

DIRECTIONS

1. In a blender, combine all ingredients and process to desired consistency.
2. Pour into a glass and serve.



Peanut Butter **GRANOLA BARS**

Makes 48 servings, 120 calories per serving

DRY INGREDIENTS

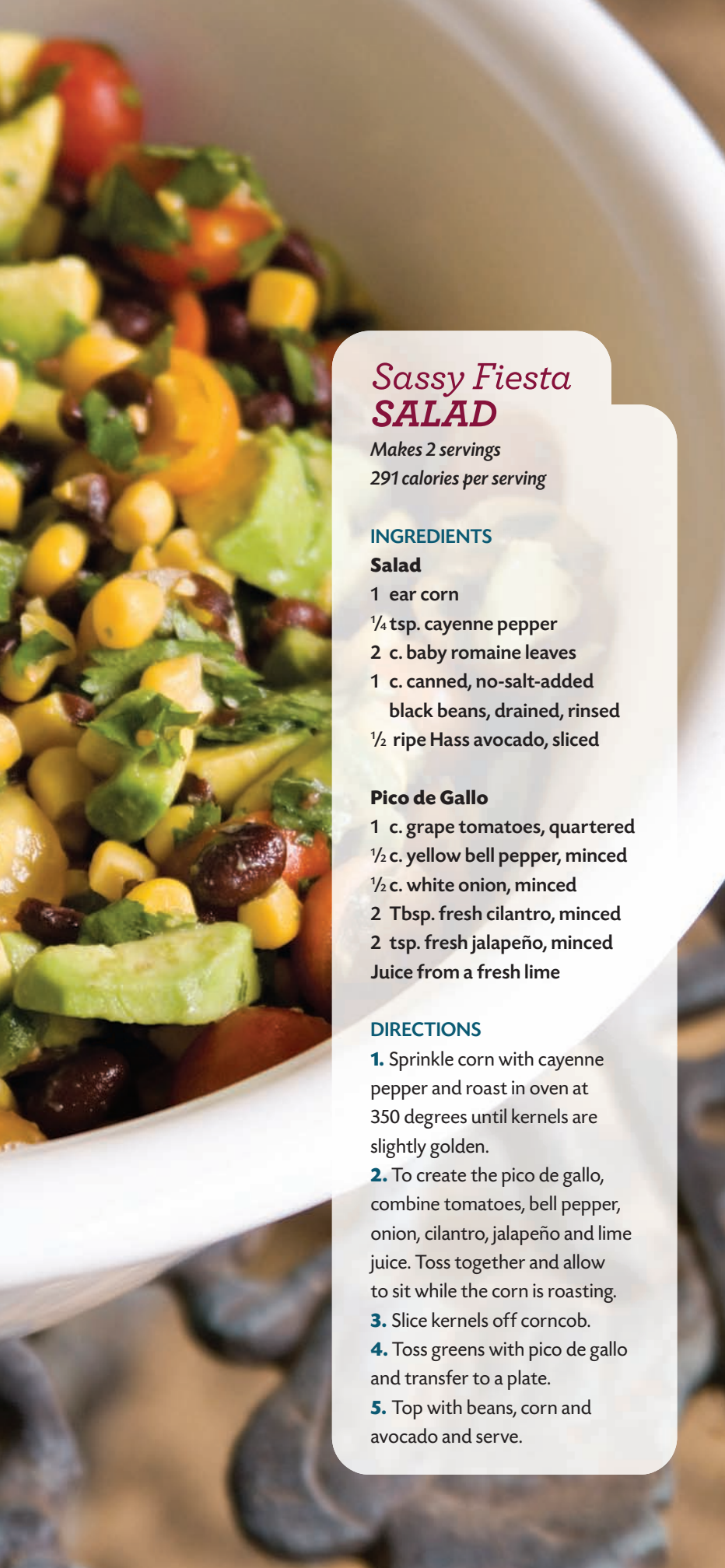
- 3 c. raw oats
- 1 c. flaxseed meal
- 1 tsp. baking soda
- 1 c. peanuts, chopped
- ½ c. sunflower seeds
- ½ c. dried cherries or cranberries, chopped
- ½ tsp. salt (optional)
- ½ c. dark chocolate chips

WET INGREDIENTS

- 1 c. peanut butter
- 1 c. favorite jelly like strawberry or raspberry
- 3 Tbsp. safflower oil or other high-oleic oil like peanut or hazelnut
- 1 tsp. vanilla extract

DIRECTIONS

1. Heat oven to 350 degrees.
2. Line a 9-by-13 -inch baking dish with parchment paper.
3. Combine first seven dry ingredients and mix well. Keep chocolate chips separate.
4. Combine all wet ingredients in a large pot. Cook over low heat until well combined, stirring frequently. Remove from heat.
5. Pour dry ingredients into the pot and mix well. Allow mixture to cool for about 15 minutes.
6. Add chocolate chips and mix well.
7. Pour mixture into the baking dish and press firmly. (Keep mixture from sticking to hands by pressing with a piece of parchment paper.)
8. Bake at 350 for about 20 minutes.
9. Cool slightly before cutting into 48 medium-sized bars.



Sassy Fiesta SALAD

Makes 2 servings
291 calories per serving

INGREDIENTS

Salad

- 1 ear corn
- ¼ tsp. cayenne pepper
- 2 c. baby romaine leaves
- 1 c. canned, no-salt-added black beans, drained, rinsed
- ½ ripe Hass avocado, sliced

Pico de Gallo

- 1 c. grape tomatoes, quartered
- ½ c. yellow bell pepper, minced
- ½ c. white onion, minced
- 2 Tbsp. fresh cilantro, minced
- 2 tsp. fresh jalapeño, minced
- Juice from a fresh lime

DIRECTIONS

1. Sprinkle corn with cayenne pepper and roast in oven at 350 degrees until kernels are slightly golden.
2. To create the pico de gallo, combine tomatoes, bell pepper, onion, cilantro, jalapeño and lime juice. Toss together and allow to sit while the corn is roasting.
3. Slice kernels off corncob.
4. Toss greens with pico de gallo and transfer to a plate.
5. Top with beans, corn and avocado and serve.

Weighing Your Options

One way to eliminate “bad fats” from your diet is to check food labels for the amount of saturated and trans fats in each serving *before* loading items into your shopping cart. Healthy 4 Life’s team has extensive experience offering consultation about nutrition and smart eating choices and also can help you make more informed decisions about medical and surgical weight loss procedures. As part of an initial appointment, patients explore the program and procedure path that will work best for them. All patients are required to attend classes to learn how to manage their diet to prevent difficulties and to achieve long-term success.

Healthy 4 Life, with locations in Hobart, Valparaiso and Munster, offers medical weight loss options with ongoing support. Each medical weight loss program involves varying levels of calorie control and supplementation based on the patient’s needs. Patients are offered a complete series of sessions to learn more about nutrition, portion control, exercise, shopping, cooking behavior adaptation, and more. Topics include “Smart Choices for a Healthy Heart,” “Low-Carb Snack Ideas” and “Don’t be Fooled by Food Labels.”

CALL

Becoming a Healthier You

Take the first step toward reaching your weight loss goals. Attend the free seminar “Weight Loss Surgery—Is It Right for Me?” to learn more about individualized options. Classes are held at Valparaiso Health Center; St. Mary Medical Center, Hobart; and Community Hospital, Munster. Call toll-free **866-224-2059**.



VIRTUAL HEALTH



PHOTOGRAPHY BY THINKSTOCK

Gluten-Free & Fab

Crafting a healthy menu that your family will actually enjoy is a challenge to begin with. But it reaches a whole new level of difficulty when someone in your house has a gluten sensitivity or celiac disease.

"When I was diagnosed with an autoimmune condition, I decided to try going gluten-free and I felt so much better," says E.A. Stewart,

a registered dietitian also known as the Spicy RD. She chronicles her challenges, and ultimate success, on her blog, eastewart.com, a collection of healthy and 100 percent gluten-free recipes. From her "amazingly addictive" artichoke squares to pumpkin pesto bruschetta to blueberry streusel muffins, they're as unusual as they are delicious.

"Although no one diet fits all, everyone can benefit from more fruits and veggies," Stewart says. "All my recipes feature lots of seasonal produce to make them both healthy and delicious."

All It's Missing Is FarmVille

What if learning about your health—and then making positive changes—could be as fun as Facebook? Everyday Health (everydayhealth.com) helps you create your own profile page, then customizes your news feed with relevant information on the topics and conditions that matter to you most (like parenting or diabetes).

Everyday Health is also home to a wealth of social forums, where you can chat with others who have similar conditions (Crohn's disease) or goals (losing 10 pounds). It also regularly hosts live Twitter chats with national health experts.

The site also features online tools including a pollen counter, a weekly meal planner and a body fat calculator, and offers a food and fitness journal, a weight and measurement tracker and a calories-burned-during-exercise calculator to boot. Best of all, it's free.



Clip-on Health

You have to be active. And you have to sleep. But chances are, if you're addicted to your smartphone, tablet or Facebook account, the digital world is robbing you of these two health necessities.

The Centers for Disease Control and Prevention recommends a minimum of 150 minutes of moderate-intensity aerobic activity each week and the National Sleep Foundation recommends seven to

nine hours of sleep each night. Are you getting enough of both?

The FitBit One (\$100) can help you find out. About the size of a money clip, this gadget tracks physical activity, calories burned and sleep quality, then outputs the data into charts, graphs and tools on fitbit.com.

Unlike some activity-tracking gizmos, the FitBit One clips unobtrusively on to clothing during the day (no "dork alert!" armband) and syncs wirelessly with your computer or smartphone without a USB cord. Transfer it to a wristband at night to monitor sleep duration and quality. It even wakes you with a gentle vibration.



LOOKING FOR DR. RIGHT?



You know the benefits of maintaining an ongoing relationship with a primary care physician—from continuity of care to disease prevention. Finding one you like and trust is the first step.

Healthgrades.com takes the guesswork out of finding a doctor or a dentist. The online tool lets you search for practitioners by specialty, location or gender and then tells you all about their educational backgrounds, board certifications and types of insurance accepted. You can also read anonymous reviews from patients and schedule an appointment. Now that's service.

Health To-Go

Travelers with health conditions can stay in touch with their Community Care Network doctor's office online—anytime. Whether you receive care at a Community Healthcare System hospital or any of our outpatient facilities, you can manage your health information from one online medical record called MyChart®. It is the free, secure way to view information in your medical record and connect with your Community Care Network doctor and healthcare team. With your Internet connection, you can review current health issues, medications, immunizations and allergies; view test results; renew prescriptions; view your medical history and communicate with your healthcare team. Need a prescription refill? View a list of your current medications and request renewals.

ONLINE

Log In to Get Started

Activate the MyChart® app through your Community Care Network doctor's office or at Community Healthcare System hospital locations. Visit www.comhs.org

to register and log in online.



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**

What's New

Updates from around
Community Healthcare System

● ADVANCED GI IMAGING AT ST. CATHERINE HOSPITAL

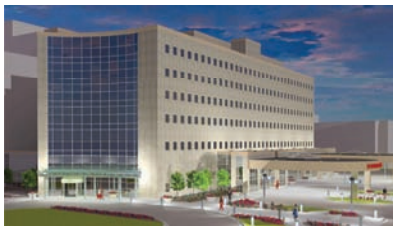
St. Catherine Hospital is using endoscopic ultrasound (EUS), an advanced scope procedure used to diagnose complex cancers. EUS combines endoscopy and ultrasound in order to obtain hard-to-get images and detailed information about the digestive tract and the surrounding tissue and organs. High-frequency ultrasound waves are generated from the tip of an ultrasound endoscope and provide detailed images of the GI tract.

“Precision is key in diagnosing and staging cancers especially in the areas of the esophagus, pancreas and lungs,” says Gastroenterologist Praveen Nallapareddy, MD. “This new device allows for enhanced images and improved diagnoses of suspicious tumors.”

With this new procedure, images of deeper organs such as the pancreas, stomach and liver can be obtained to better access hard-to-detect tumors and lesions. Endoscopic ultrasonography is now used in examining cancers of the pancreas, lung, stomach and esophagus as well as diagnosing and assessing benign disease associated with these organs.



Endoscopy Charge Nurse Jerri Toth, RN, worked with Gastroenterologist Praveen Nallapareddy, MD, to bring the new endoscopic ultrasound (EUS) technology to St. Catherine Hospital. The procedure combines endoscopy and ultrasound in order to obtain images and information about the digestive tract and tissue and organs around it.



The four-story addition expands the number of Intermediate Care private rooms, doubles the capacity of the Neonatal Intensive Care Unit and features new birthing suites for Labor and Delivery.

● EXPANDING TO SERVE YOU

This summer, Community Hospital will unveil a new four-story addition featuring an expanded Family Birthing Center and Intermediate Care Unit for patients needing heart monitoring.

“This latest expansion at Community Hospital will help us to respond to the growth and demand for our services,” says Donald P. Fesko, CEO, Community Hospital. “Patients look for high-quality care, expertise of doctors and staff, advanced technology and private accommodations. This project will not only create an expanded hospital on the outside, but a more patient-focused hospital on the inside.”

The West Pavilion expansion includes 32 Intermediate Care private rooms; 25 private Mother/Baby rooms; Newborn Nursery; a 32-bed Neonatal Intensive Care Unit; 12 private Labor and Delivery rooms; and two cesarean section suites.

● STUDENTS GIVE BRICKIE CLINIC AN A+

St. Mary Medical Center and the School City of Hobart have partnered to open the Brickie Community Health Clinic. Located at Hobart High School, the clinic is open to School City of Hobart students and employees. Parents and employees preregister at the clinic for care services including school/sports physicals, vaccinations, flu shots, general lab services, and health education and risk assessments. The clinic is staffed with a Community Care Network certified family nurse practitioner and a medical assistant.

“My goal is to make students feel comfortable and create an atmosphere of trust and support,” says Julie Burk, family nurse practitioner.

“St. Mary Medical Center is committed to addressing the health needs of our communities in a meaningful way,” adds Janice Ryba, hospital CEO. “The Brickie Community Health Clinic not only provides easy access to needed health services; it allows us to provide education, preventive medicine and prompt attention to medical needs when they first appear—before they develop into more serious conditions.” ●



St. Mary Medical Center and the School City of Hobart have partnered to open the Brickie Community Health Clinic. Located at Hobart High School, the clinic offers students and school employees care services such as school and sports physicals, vaccinations, flu shots and general lab services, and health education and health risk assessments.

TLC and Therapy

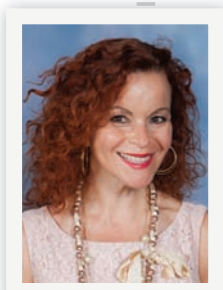
BY ELISE SIMS

*Teaming up to treat
“twisted neck”*

When her son, Nathan, was only 1 month old, Jina Saltzman began to see the telltale signs and symptoms that she missed when her first child, Evelyn, was born. Like his big sister, Nathan had difficulty turning his head to one side and favored his right side whenever he was in a lying position. Pediatrician Lamia Katbi, MD, diagnosed Jina’s babies with torticollis—the abnormal positioning of the head and neck that is caused by tightness in one of the neck and shoulder’s major muscles.

“People tend to get squeamish with anything that has to do with the neck,” says Saltzman. “As first-time parents with Evelyn, we didn’t feel comfortable doing the repositioning exercises and stretching at home by ourselves, as recommended by Dr. Katbi. So Evelyn’s outpatient therapy was delayed until about 7 months, which delayed other milestones too, like walking.

“With Nathan, I was on the lookout,” she says. “I knew the signs and symptoms and how important it was to be able to get Nathan into physical therapy much earlier. Both children are doing fine today thanks to the early referral by our pediatrician and the care we received at Community Hospital.”



Pediatrician
Lamia Katbi,
MD

CARE FOR KIDS

“We’ve been able to help a lot of children with the level of pediatric therapy services we offer,” says Elizabeth Zurek, MPT, CCCE, senior physical therapist, Neonatal Intensive Care and Pediatrics at Community Hospital. “Early intervention is key. Our team approach between parents, pediatricians and therapists makes all the difference in the world with outcomes. As we make more parents aware of what we can do for this condition and work toward earlier interventions, we expect to have many more success stories.”

Torticollis, which means “twisted neck,” is equally common in both newborn boys and girls. The sternocleidomastoid muscle is the large, ropelike muscle that runs on both sides of the neck from the back of the ears to the collarbone. Shortening of this muscle on one side can create tightness on one side of the body, making it difficult for baby to turn his head to one side or tilt his ear toward one shoulder.

It is not known why some infants develop the condition and others do not, but doctors believe it may be related to extra pressure on the muscle that can come from positioning in the womb, a difficult birth or, as is the case of those who develop it later, the amount of time spent lying on their back during the day.

RISK FACTORS

Besides torticollis, infants born in breech position also are at increased risk for hip dysplasia because the hip joint forms in a flexed or bent position, which can impact the hip socket and set the infant up for dysplasia/dislocation. Babies like Evelyn and Nathan, who have GERD, are at increased risk for developing torticollis because their natural response to the reflux is to arch the spine to elongate the esophagus and turn their heads to the side to constrict the opening at the back of the throat.

CALL

Sign Up for a Free Class

For more information on physical therapy services available at Community Hospital in Munster, call **219-836-4527**. To make an appointment for the *free* Infant Massage and Baby’s Development class taught at Fitness Pointe®, call **219-836-3477**.





For those babies who develop torticollis, early intervention is key. A team approach between parents, pediatricians and therapists makes all the difference in the world with outcomes. Physical therapist Liz Zurek works with mom Jina Saltzman and baby Nathan with exercises designed to stretch and balance muscle.

A physical examination in the pediatrician's office will show if the baby's head tilts toward the affected side while the chin points to the opposite side; if there is a shortening of the neck muscles; or if the entire head pulls and turns to one side (in more severe cases). Then, depending upon the evaluation, the parent can be taught neck-stretching exercises to practice with baby at home. In certain cases, the physical therapy team is recommended for more intensive treatment.

"The good news is that most babies with torticollis improve after regular position changes, stretching exercises and physical therapy," Katbi explains.

Physical therapists work with babies as young as 6 weeks and up to 8 and 9 months to address the condition. Infants can benefit from gentle range-of-motion stretching exercises, head turning and eye-tracking activities and repositioning in the form of "tummy" time.

"Physical therapy sessions serve as a reminder every week for us to continue to stretch and motivate our babies to turn their heads while at home," Saltzman says.

● WHAT YOU CAN DO

"Early intervention is important as the majority of head shaping happens between newborn and

18 months, with the peak period being from 0-6 months," Zurek says. "When there is tightness in the sternocleidomastoid muscle, it can impact the entire myofascial system and can lead to limitations in other joints as well, pulling the head and facial features to the side and downward. Torticollis can lead to other conditions, too, which can be hard to treat, such as toe-walking, joint instability and plantar fasciitis."

In some cases, a head orthosis or shaping helmet is used as an adjunct therapy when more aggressive support is needed to correct head shaping. Treatment with a STARband® orthotic device begins with an initial laser scan of baby's head using a STARscanner™. The scanner takes 3-D measurements and the child is fitted for a soft helmet. Wearing the helmet takes pressure away from the flattened areas and allows cranial growth to occur more rapidly in the areas of least resistance.

"We're here to offer reassurance, be a resource and to provide skilled intervention," Zurek says. "We offer a free class called Infant Massage and Baby's Development where we teach about the importance of 'tummy time,' discuss infant massage, provide educational handouts and answer questions about baby's development in the first year." ●

Heart to Heart

Leading the way in cardiac care

BY ANGELA MOORE

St. Catherine Hospital has long been known as a pioneer in cardiac care. A number of technological “firsts” for Indiana and the Chicagoland area—the first open heart surgery, cardiac rehabilitation program, cardiac catheterization laboratory and cardiac intensive care program—brought physicians and technicians from across the country to train on these advances.

That tradition of excellence continues as Healthgrades® has recognized St. Catherine Hospital as one of America’s 100 Best Hospital for Cardiac Care™ for 2014. St. Catherine Hospital is one of two in the entire state of Indiana to receive such recognition. In addition to being named by Healthgrades as one of the nation’s 100 Best Hospitals for Cardiac Care™ for 2014, the hospital has also been named among the top 5 percent in the nation for overall cardiology services, a five-star recipient for coronary interventional procedures and a five-star recipient for treatment of heart failure for the 12th year in a row, 2003–2014.

St. Catherine Hospital also has been recognized by additional national organizations for extraordinary care, including The Society of Chest Pain Centers and The Joint Commission. The Stroke Center of Excellence at St. Catherine Hospital earned the Gold Seal of Approval™ from The Joint Commission for Primary Stroke Centers and the Chest Pain Center was the first in the healthcare system to receive accreditation.

“We exceed national standards of care for heart care patients,” says Roberto Gonzalez, director of imaging and cardiology services. “With the expansion of these services, we expect to be able to treat patients even more quickly, help save more lives and improve the quality of life for many more patients.”

EXPANDING CARE

Today, the 8,000-square-foot cath lab continues delivering the same advanced quality care that resulted in the need for a major expansion project.



Members of the St. Catherine Hospital Cath Lab.

CALL

Help for Your Heart

Cardiac cath lab procedures require a physician’s referral and are performed by a cardiologist after an evaluation. For more information about the cardiology services available at St. Catherine Hospital, call **219-392-7110**.





Cardiologists Pastor Llobet, MD, and Samer Abbas, MD, are part of St. Catherine's experienced team providing high-level diagnostics and interventional cardiology procedures to patients.

The expanded cath lab with five additional holding areas, a cath lab suite and the latest diagnostic equipment, allows physicians and staff to continue providing high-level diagnostic and interventional cardiology procedures to patients. The new space also features advanced peripheral vascular procedural capabilities for urgent lifesaving procedures as well as scheduled life enhancing interventions.

"The cath lab expansion project ensures that we can continue performing routine cardiac procedures and address emergencies simultaneously without delay," says Pastor Ramon Llobet, MD, Community Care Network cardiologist. "Both of these aspects are critical in delivering the best cardiac care to our patients."

Cardiac catheterizations at St. Catherine Hospital help cardiologists diagnose the severity of blockages in the heart's blood vessels and identify the best methods of treatment.

Peripheral vascular procedures are performed to determine the severity of vessel blockages in other areas of the body such as the abdomen, neck (carotid artery), arms and legs.

Chief Operating Officer Craig Bolda says the expansion project was designed to better meet the needs of patients.

"The decision to expand the cardiac program was in response to the increasing prevalence of cardiovascular disease within the community we serve," Bolda says. "The layout and design of the new space aims to make patients more comfortable while undergoing cardiac procedures and the newly installed technology will assist physicians in the diagnosis and treatment of advanced heart disease."

6 Ways We Can Help

From cardiac catheterization to angioplasty to implantation of defibrillators, some additional advanced diagnostic and treatment procedures currently being performed in the St. Catherine Hospital cath lab include:

- 1** Coronary intravascular ultrasound (IVUS) is a device that utilizes sound waves to assist in evaluating heart arteries. A small catheter is advanced into an artery, where images are taken from within to better define the blockages.
- 2** Fractional flow reserve (FFR) is a technique used in coronary catheterization to measure pressure differences across a narrowed or blocked artery, usually due to coronary artery disease, to determine the likelihood that the narrowing is compromising blood flow to the heart muscle.
- 3** Peripheral angiography and angioplasty is a procedure that examines arteries of the legs, kidneys and upper body for diagnosis and treatment, helping increase the blood flow where needed.
- 4** The Ocelot Catheter uses optical coherence tomography, allowing physicians to view images of complicated blockages at an advanced level during the actual procedure
- 5** The EKOS System is used to treat blood clots. EKOS ultrasound technology uses sophisticated acoustic conditioning, making it possible to dissolve blood clots quickly and safely, saving lives immediately.
- 6** The Impella device involves a minimally invasive procedure for those high-risk interventions especially in older patients with multiple complications.

"We are extremely excited that this caliber of cath lab has been built at our hospital," says Gonzalez. "The new cath lab procedure rooms are equipped with state-of-the-art digital imaging systems that have consistently been one of the highest rated systems on the market. To go along with this latest technology, the cath lab has a highly experienced, dedicated staff to care for patients 24 hours a day, seven days a week." ●

A BETTER View

3-D mammography offers a better chance of diagnosing breast cancer earlier, when it is most treatable

BY MARY FETSCH

We think we see something.”
With her thick Southern drawl still discernible after 40 years in the region, Valparaiso resident Teresa Linzy recalls the words she heard more than a year ago that shook her world.

“It was just a routine mammogram,” recalls Linzy. “I’d been getting them for years, but this time, I went to the new Valparaiso Health Center. It was convenient and they had the new 3-D technology, but I still didn’t expect them to find anything.”

But this time they found something: a suspicious lesion in her right breast, back near the sternum. “They may not have found it with conventional mammography,” she says. “It was deep and covered up by layers of breast tissue.”

What followed was a whirlwind. Linzy had a breast ultrasound that same day and soon underwent a stereotactic breast biopsy at St. Mary Medical Center.

When those results confirmed the presence of cancer, she was immediately able to see surgeon Richard Browne, MD, to discuss her options. Within a few weeks of hearing those first words of concern, Linzy had the results of her breast MRI and lumpectomy and learned the full extent of her condition.

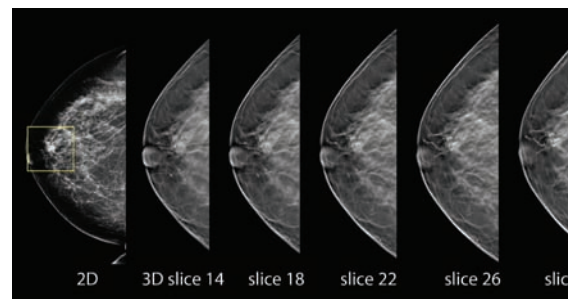
“Dr. Browne spent so much time with me, explaining what type of cancer I had, what my options were, and what the road ahead would be like,” says Linzy. “I learned I didn’t have just one lesion in my left breast; it was all throughout my right breast as well. It was still located within the chest wall, so the extent was only detectable through a breast MRI. After a lot of contemplation, I decided to have a double mastectomy.”



Teresa Linzy

STEP BY STEP

“What we found with Teresa in that initial mammogram turned out to be the tip of the iceberg,”



In a “conventional” 2-D mammogram there appears to be an area of concern that the doctor may want to further investigate with another mammogram or a biopsy. Looking at the same breast tissue in 3-D “breast tomosynthesis” image slices, the doctor can now see that the tissue is in fact normal breast tissue that was overlapping in the 2-D mammogram creating the illusion of an abnormal area. Thanks to 3-D technology, this patient likely avoided a callback for an additional mammogram.



explains Charisa Spoo, DO, breast radiologist at St. Mary Medical Center's Women's Diagnostic Centers. "There was a lot going on pathologically and each step of the process revealed different levels of cancer in both breasts."

The process Spoo refers to includes technology, expertise and best practices that benefit patients undergoing screening and diagnostic procedures for breast cancer. St. Mary Medical Center was one of the first hospitals in Northwest Indiana to earn recognition by the American College of Radiology as a Breast Center of Excellence as well as receiving accreditation for Breast MRI.

Most recently, the hospital was granted a three-year/full accreditation by the National Accreditation Program for Breast Centers (NAPBC), a program administered by the American College of Surgeons. Accreditation by the NAPBC is only given to those centers that have voluntarily committed to provide the highest level of quality breast care and that undergo a rigorous evaluation process and review of their performance.

"Our entire breast care team works together with demonstrated best practices and technology that is of the highest standards," adds Janice Ryba, hospital CEO. "The addition of 3-D breast tomosynthesis to our Hobart and Valparaiso locations only enhances the quality of our women's programs and services. Combined with compassionate care and attention to personal service, our program meets the full-range of needs for breast cancer patients."

Breast tomosynthesis technology, or 3-D mammography, gives breast radiologists the ability to identify and characterize individual breast structures without the confusion of overlapping tissues. During a 3-D mammogram, multiple low-dosage images of the breast are acquired at different angles. These images are then used to produce a series of thin "slices" that can be viewed as a 3-D reconstruction of the breast.

"Breast tomosynthesis allows us to see breast tissue in a detail that is not possible with conventional 2-D images," says Spoo. "Instead of viewing all the complexities of breast tissue in a flat image, we can examine it 1 millimeter at a time. Fine details are more clearly visible and not hidden by the tissue above and below."

● A TEAM EFFORT

What mattered to Linzy, however, was having the team behind her every step of the way.



St. Mary Medical Center's Breast Center Team includes (from left): Donna Faitak, RT(R)(M)(QM), certified breast health navigator; Richard Browne, MD, breast surgeon; Charisa Spoo, DO, breast radiologist; and Ana Bran-Guzman, RN, FNP-BC, certified breast health navigator.

"I can't say enough how wonderful they were," says Linzy. "From the moment I stepped in there to get my mammogram, through diagnosis and surgery, I was pampered and catered to. I always felt they were there for me, holding my hand, providing me with everything I wanted to know about my care and the decisions I would have to make. I learned a lot, and now I want to make sure that every woman takes control of her life, learns her family history, and gets in for her annual mammogram."

Since her diagnosis, Linzy has advocated screening mammograms to co-workers, family members and friends. Of those, two women also discovered they had breast cancer.

"Early diagnosis and treatment offers the best chance for a cure," says Ana Bran-Guzman, RN, BSN, the breast cancer navigator who guided Linzy through her care. "Our team works seamlessly to make the process as easy as possible for patients and provide them the best care available." ●

ONLINE

Ladies, Get the Care You Need

For more information about the programs and services available at the Women's Diagnostic Centers of St. Mary Medical Center, visit

www.comhs.org/stmary



Finding the Silver Lining

Mood Disorder team heals minds, bodies and spirits

Life was going very well for Alan*. He was a successful business owner running several companies and balancing a busy family life at the same time. When two of his three businesses began experiencing financial difficulties, the stresses of the situation affected his bipolar disorder, turning his world upside down.

A family member suggested the Mood Disorder Unit at St. Catherine Hospital.

"I work and live for my family and didn't want to be away from them, but I knew something had to change—and it was me," says the father of five. "I received the support I needed from deeply compassionate, highly trained professionals who helped me gain a new perspective and to start living life again."

A recent \$2 million internal expansion of the hospital's Neurobehavioral Medicine program provides two progressive healing environments for mental health: one for intensive treatment and the other for patients with mood disorders. St. Catherine Hospital's team of extensively trained physicians, therapists, nurses and support staff works to heal the mind, body and spirit of patients with mental and mood disorders ranging from major depressive to bipolar diagnoses.



St. Catherine Hospital Mood Disorder team includes (seated from left): Angelica Moreno, RN; Melissa Evers, RN; Patricia Bruicer, RN; Barbara VanderBoegh, RN; Lori Frank-Jovanovich, RN; Juanita Matlock, MHW; Ileana Ramos, RN; (standing from left): Maylee Chavarria-Iruegas, MHW; Sharon Booker, MHW; Scot West, RN; Chandra Lyles, LCSW; Willie Morgan, MHW; Carmen Rodriguez, LCSW; Willie Hurson, MHW; Bobbie Williams, RN; Jaime Rivas, MHW; Ameer Elsalaymeh, MHW; Robert Crowe, RN; Ann Bobos, RT.



CALL

Don't Suffer in Silence

Get the help you need. For more information or to make an appointment, call **219-392-7025**.

"Each patient, like Alan, who comes to St. Catherine is seeking alleviation of significant challenges to their ways of thinking, feeling and behaving," says Scot West, RN, nurse manager, Neurobehavioral Medicine program. "We focus on the development of a unique treatment approach that suits individual needs."

In the Mood Disorder Unit, staff recognizes that patients can benefit from interactive therapies. By incorporating yoga, tai chi, spirituality groups and support groups focusing on depression, anxiety and impulse control, they can work toward the goals of mood stabilization, improved coping strategies, development of a healthier lifestyle, psycho-education and relapse prevention.

"It's a holistic treatment approach that has our patients leaving our units thinking, feeling and behaving in new ways that promote overall health and wholeness," West says.

Other hospital team members work in conjunction with the Mood Disorder Unit as the need arises, including cardiac rehabilitation specialists, dietitians from nutrition, diabetes specialists, and labor and delivery nurses, to provide a more complete treatment approach, he says.

"Education is an important aspect of our care, with the goals of helping patients and their families understand their illness, fully participate in treatment and develop positive coping techniques," says Neurobehavioral Medicine program Medical Director Joseph Fanelli, MD.

"Our team brings together knowledge and techniques from the medical, behavioral and social sciences to provide treatment for a wide range of health conditions," says Fanelli. "We work together to meet the needs of the entire person with care that ranges from general counseling to cutting-edge, state-of-the-art innovations."

Once the patient is ready to continue treatment on an outpatient basis, the Centers for Mental Wellness offers counseling and support at two convenient locations: in East Chicago inside the hospital at 4321 Fir St., 3rd floor, and in Schererville at 6625 W. Lincoln Highway (southwest corner of U.S. 30 and Harvest Drive). ●

(*name changed for patient privacy)



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