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WINTER 2015 • \$2.95

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ST. CATHERINE HOSPITAL
ST. MARY MEDICAL CENTER
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Healthy Holidays

79 tips for a safe and celebratory season

PLUS How **Tom Hanks** manages diabetes, like millions of other Americans this season

REGAINING CONTROL
AFTER URINARY
INCONTINENCE

**The connection
between diabetes
and depression**

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ST. CATHERINE Hospital

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FROM OUR FAMILY TO YOURS

We are a healthcare system that believes in care that comes from the heart. Everything we do revolves around you and your family's well-being.



This issue, you will find that Tom Hanks' cover story is about learning to live with diabetes. We have been reaching out to communities throughout Northwest Indiana through our diabetes prevention programs for at-risk populations (page 4). We are working to ensure that all residents with diabetes get the best care, treatment and information on how to manage their condition.

Another way we are making a difference for our patients is by offering advanced orthopedic care (page 6). There are not many procedures that can improve quality of life the way orthopedic surgery can. A few of our successful "graduates" talk about how they are living with less pain and more mobility.

Pelvic floor dysfunction and incontinence are sensitive subjects—so sensitive that many people don't want to admit or be associated with the condition. We want to change that perception and let everyone know that there are new, very effective therapies available to help those going through it. Hear about it firsthand from a Community Hospital patient on page 50.

St. Catherine Hospital offers a team approach to healing when it comes to diabetes and depression, which often go hand-in-hand. Find out more about how we are addressing the emotional side of diabetes and helping residents who are learning to deal with their diagnosis (page 52).

St. Mary Medical Center is offering the highest quality, most advanced technology and equipment available in the industry with the opening of the new intensive care unit. And our medical team—the doctors, nurses, aides and technicians have the knowledge and expertise to successfully utilize these features for the benefit of our sickest patients (page 54).

We are here with quality care and innovative treatments when you need us. We will continue to be focused on how we can work with you and your family to keep you healthy and out of the hospital.

John Gorski
President and Chief Executive Officer
Community Foundation of Northwest Indiana



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MANIFEST

► COMMUNITY BRIEFS



Celebrating the Pillar Awards at St. Mary Medical Center are (from left) Chief Nursing Officer Tammie Jones, Candice Wojnaroski, Elizabeth Rossi, Bridget Ladra, Lisette Echterling, Nicole McKee, Mary Beth Munro and CEO Janice Ryba.



St. Catherine Hospital Nursing Excellence Award recipient for 2015 is Angie Callaway (center). Hospital CEO Jo Ann Birdzell (right) and Chief Nursing Officer Paula Swenson made the announcement at a tea honoring nursing staff.



Community Hospital CEO Don Fesko (left) and Chief Nursing Officer Ronda McKay (far right) congratulate Carol Mustain, patient care technician, Intermediate Medical Care Unit (center, right), and Katie Vroom, registered nurse, Intermediate Medical Care Unit North (center, left), on their excellence awards for 2015.

THE HEART OF HEALING

Community Healthcare System presents awards during National Nurses Week



Nurses help fulfill Community Healthcare System's mission to serve by providing quality, compassionate care to patients.

Community Hospital in Munster, St. Catherine Hospital in East Chicago and St. Mary Medical Center in Hobart salute this dedication with a presentation of awards during National Nurses Week. This is just a glimpse at a few of the extraordinary people who practice the art of healing in our hospitals.

At Community Hospital, Carol Mustain, a patient care technician in the Intermediate Care Unit, is recipient of the 2015 Patient Caregiver Excellence Award. Katie Vroom, RN, on Intermediate Care Unit-North, received the 2015 Nursing Excellence Award.

"Our nurses place the care of our patient first and foremost and we appreciate their outstanding efforts," says Don Fesko, CEO, Community Hospital.

Mustain and Vroom were nominated by their colleagues for going above and beyond in their respective patient care areas.

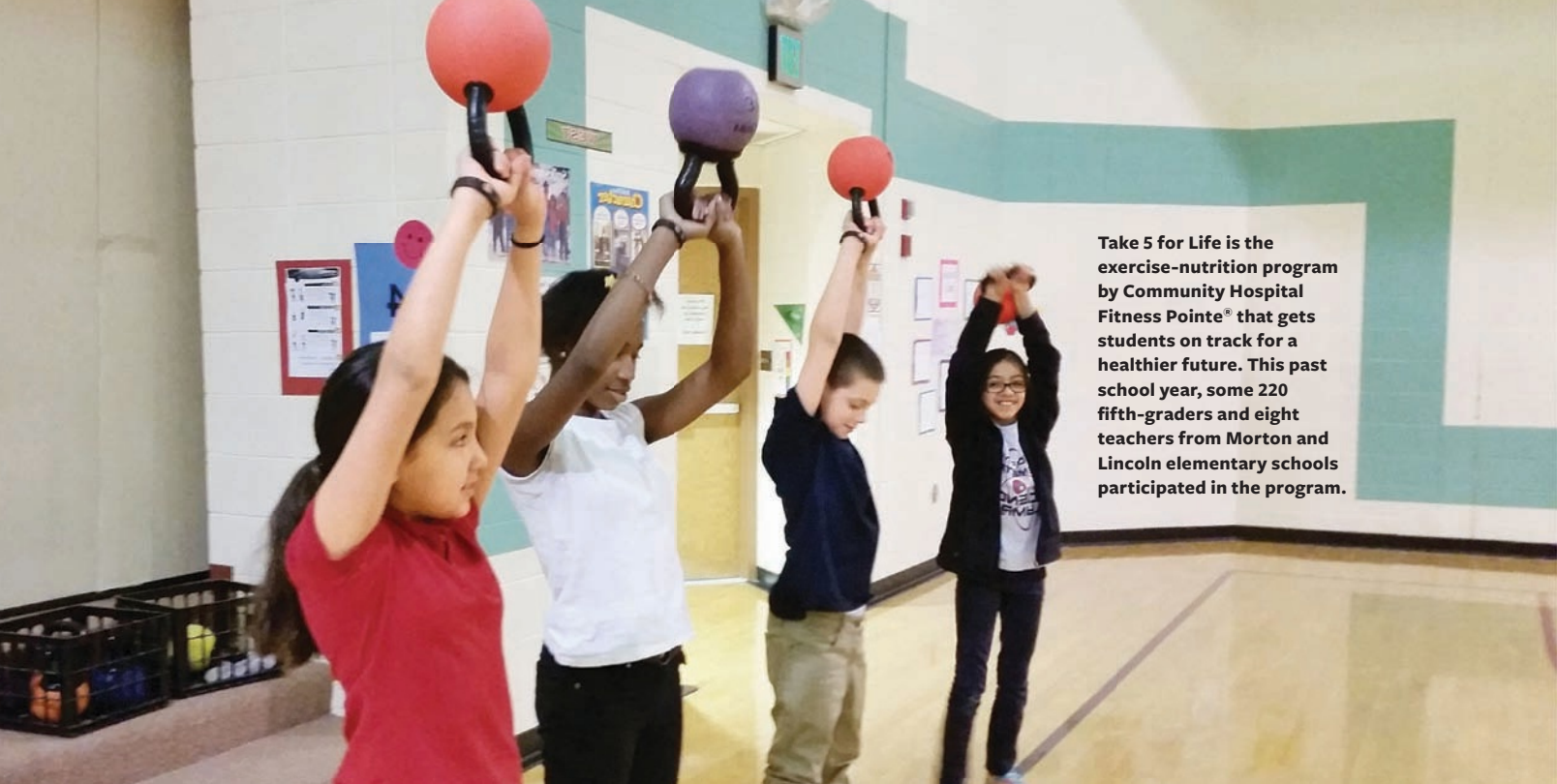
The Excellence in Nursing Award winner at St. Catherine Hospital is Angie Callaway of the ICU. Angie has worked at the hospital for 11 years.

Callaway's peers nominated her for this prestigious award based on characteristics of nursing excellence in areas of leadership, dignity, compassionate care, community, quality and stewardship.

"Angie is very deserving of this award," says St. Catherine Hospital CEO Jo Ann Birdzell. "We are happy to have her as part of our family and our patients are, too."

At St. Mary Medical Center, outstanding nurses are recognized with Nursing Pillar Awards in Operational Excellence categories of service, people, growth, quality and finance. The 2015 Nursing Pillar awards have been presented to Mary Beth Munro, Express Admissions Unit, Service; Lisette Echterling, ICU, People; Nicole McKee, ICU, Growth; Candice Wojnaroski, 5 West Oncology, Quality; Elizabeth Rossi, 3 East, Finance. Chosen overall as the SUPERSTAR is Bridget Ladra, 5 West Oncology.

"Every day our nurses walk in our patients' shoes, caring for them with compassion and dignity," says Janice Ryba, St. Mary Medical Center CEO. "The Pillar Awards honor their commitment to improving the lives of others." ■



Take 5 for Life is the exercise-nutrition program by Community Hospital Fitness Pointe® that gets students on track for a healthier future. This past school year, some 220 fifth-graders and eight teachers from Morton and Lincoln elementary schools participated in the program.

DOWNSIZING THE THREAT OF DIABETES

Programs help lower the incidence of type 2 diabetes

BY ELISE SIMS

Americans love big things. We drive big cars while drinking supersized drinks. We live in big houses with big refrigerators. That said, big isn't always better.

We are big and getting bigger: More than one-third of U.S. adults (or 78.6 million) are obese, according to the *Journal of the American Medical Association*. About 80 to 90 percent of the people diagnosed as obese also are diagnosed with type 2 diabetes. Health

organizations believe diabetes has reached epidemic proportions largely due to our nation's tendency toward obesity and inactivity.

Fortunately the hospitals of Community Healthcare System offer programs, classes and services that address unhealthy lifestyles and provide wellness education. With the correct treatment and recommended lifestyle changes, many people with diabetes are able to prevent or delay the onset of complications.

TAKE 5

Learning healthy eating habits at a young age can reap benefits for a lifetime, but getting kids to eat right and exercise on a daily basis is a lofty goal. Take 5 for Life is the classroom-based, exercise-nutrition program by Community Hospital Fitness Pointe® supported by funding from ArcelorMittal.

"Take 5 for Life's fitness and nutrition curriculum aligns with State of Indiana education standards," says

Debi Pillarella, MEd, CPT, education and fitness program manager for Community Hospital Fitness Pointe. “The five components of the Take 5 program are to eat healthy, be active, manage your mind (abstain from drugs, alcohol and tobacco), be well-rested and feel good about yourself.”



St. Catherine Hospital Clinical Educator Virginia Ait Said, RN, has a one-on-one session about diabetes management with Sherry Syron of Valparaiso.

This past school year, some 220 fifth-graders and eight teachers from Morton and Lincoln elementary schools participated in Take 5.

“Students were pretested at the beginning of the year, with measurements including height, blood pressure, heart rate, waist and hip,” explains Phrosini Samis-Smith, Take 5 coordinator. “At the conclusion of the program, students were retested to see if any progress was made.”

Statistics show that by the end of the program in May, 58 percent of the students reduced their systolic blood pressure; 47 percent reduced their diastolic blood pressure; 52 percent reduced their resting heart rate; 22 percent reduced their waist measurement; and 20 percent of the students reduced their hip measurement.

“Our students wore Fitbits throughout each school day, which helped them

track their daily number of steps,” Samis-Smith explains. “Teachers would help by incorporating longer ways to the cafeteria, letting students get up in the middle of class and taking exercise breaks. Students wore the Fitbits to show them how many steps they were getting during the school day and the importance of getting even more after school.”

DIABETES AND THE COMMUNITY

Every second Thursday of the month, students gather at The Diabetes Center of St. Catherine Hospital to learn—not about science or math, but about how to take better care of themselves and change their lifestyles.

“We have adults newly diagnosed with type 1 and type 2 diabetes, kids with juvenile diabetes and those with gestational diabetes interested in learning self-management behavior,” says Clinical Nurse Specialist Virginia Ait Said, RN. “Our program is aimed at providing participants with the skills necessary to control their diabetes rather than having diabetes control them.”

“We talk about the essential lifestyle changes needed to attain optimal glycemic control,” she says. “We also discuss how to prevent complications and reduce risk, and about diabetes and depression, which often go hand-in-hand.”

Trained certified experts in the field of diabetes management make up the hospital team, including certified diabetes nurse educators, a registered dietitian, a pharmacist, exercise specialists and counselors from Behavioral Health Services.

“We utilize a collaborative approach to effectively educate our participants on the disease process, nutrition/meal planning, physical activity, medications overview (pills/insulin), glucose monitoring and coping with stress and emotional issues,” Ait Said says.



Danny Gonzalez, RN, helps to coordinate the LAUNCH program at the Portage YMCA, which encourages elementary school kids to eat better and be more active.

PORTAGE Y

LAUNCH is the name of the Portage Township YMCA program, in partnership with St. Mary Medical Center, that gives third-graders a boost toward a healthier future.

The program, introduced to George L. Myers Elementary School students last fall, aims to educate area families

about childhood obesity and promote healthy living.

St. Mary Medical Center Health and Wellness Coordinator Danny Gonzalez, RN, says LAUNCH is designed to present fun lessons on healthy living habits, nutrition tips and overall well-being facts.

“Our lessons ranged in topics from obesity, heart disease, diabetes, human anatomy, MyPlate (specific information on food groups), healthy snacking, tips for eating healthy around the holidays and while eating out, techniques for weight and stress management, and more,” he says. ■

GO TO ...



More Info

For more information about diabetes management classes at Community Hospital in Munster, call **219-836-7714**; St. Catherine Hospital in East Chicago, call **219-392-7786**; and St. Mary Medical Center in Hobart, call **219-947-6234**.



Marianne Van Winkle is pain-free and back to bowling after a knee replacement at St. Mary Medical Center Joint Academy.

FROM NEW KNEES TO SUPER SHOULDERS

Advanced joint techniques provide major benefits

BY CHS HOSPITAL STAFF



Most people who have had a hip, knee or shoulder replacement will tell you they feel more mobile than they have in years. Orthopedic breakthroughs are giving surgeons the ability to perform more complicated procedures more easily.

Community Healthcare System surgeons are using computer-guided surgeries and minimally invasive techniques with much smaller incisions and less

tissue damage than in the past for better outcomes. Physicians also are using more durable materials in artificial joints and are getting a better fit as manufacturing companies offer a broader range of sizes and shapes. There also are advances in pain management and physical therapy.

Community Hospital in Munster, St. Catherine Hospital in East Chicago and St. Mary Medical Center in Hobart have been recognized for excellence in joint replacement procedures. Quality care demonstrates our healthcare

“I would say I am 100 percent now,” says Toth. “Dr. McComis and his staff were phenomenal.”

team is consistent in following the processes and procedures that help keep patients safer and experience fewer complications.

Sparing Patients from Knee Pain

A comment from a friend led Marianne Van Winkle to realize she could no longer ignore the pain in her knee. The 67-year-old was walking with a limp and a friend asked about the



Orthopedic Surgeon Kenneth Ham, MD

cause. “My leg was becoming stiff from pain in my left knee, causing a limp to slowly develop over time,” she says.

The pain also began to interfere with her passion—bowling. “After months of pain medication injections to my knee, I decided I needed to address the issue so I could get back to my game,” she says.

Van Winkle sought help at The Joint Academy of St. Mary Medical Center, one of America’s Top 100 Orthopedic Surgery facilities, a Blue Distinction Center by Anthem Blue Cross and Blue Shield, and recipient of the Joint Commission’s Gold Seal of Approval. Orthopedic Surgeon Kenneth Ham, MD, on staff at St. Mary Medical Center and also Community Hospital, performed Van Winkle’s total knee replacement.

Van Winkle was home 24 hours after her surgery and soon back to normal.



Orthopedic Surgeon Gregory McComis, MD, performed surgery on Mike Toth’s shoulder, helping him get back on the tennis court.

“Two weeks after surgery, I was driving and walking around,” she says. “By week eight, I was back to bowling!”

“As orthopedic surgeons, our goal is to improve the quality of life for patients,” Ham says. “Over the past several decades, developments in surgical tools and implants have helped enhance outcomes and quality of life in a timely manner. This has enabled our patients to continue working, enjoying life when they might otherwise be disabled.”

Van Winkle attributes her quick recovery to the preparation and care provided by The Joint Academy. “The presurgical group class put me at ease, preparing me for what to expect step-by-step throughout the entire process,” she says, sharing praise for the compassion and responsiveness of the hospital’s staff. “I can only say great things about my care at St. Mary Medical Center.”

Tennis Shoulder

Mike Toth’s lifelong love for tennis was his ticket to good health, or so it seemed. The active 55-year-old Schererville resident also enjoyed weightlifting at the YMCA between matches until he noticed a consistent pain in his right shoulder.

“You could hear it grinding and popping when I moved it in a circular motion,” says Toth. “As the pain got worse, I actually stopped playing tennis because I couldn’t serve.”

Toth suffered for three years until a trusted friend persuaded him to see Community Hospital Orthopedic Surgeon Gregory McComis, MD, in Munster.



Orthopedic Surgeon Gregory McComis, MD

After an evaluation and MRI, McComis told Toth he had tears in the cartilage and tendons of his right shoulder resulting from years of physical activity. He

needed surgery.

McComis and his team performed Toth’s surgery, taking every measure to ensure the experience was as comfortable as possible. “Before surgery, the nurse injected a numbing agent into my neck for the pain,” explains Toth, “When I woke up, I received an ice pack and medications to take home.” Toth went home that same day.

Dr. McComis prescribed a combination of home and outpatient physical therapy to help Toth strengthen his muscles and regain functionality of his shoulder.

Postsurgical patients at the hospitals of Community Healthcare System have access to a full range of rehabilitation and therapy services. Patients receive a continuum of care that is convenient and close to home.

Toth is now back to his active lifestyle. He has eased back into weightlifting and plays tennis every chance he can get. "I would say I am 100 percent now," says Toth. "Dr. McComis and his staff were phenomenal."

No Longer Weak in the Knees

Ruth Ann Renda of Whiting waited years to get her right knee replaced simply because she didn't have the pain that most people have when facing knee replacement.

"It was the strangest thing," says the 72-year-old retiree. "I really wasn't in a lot of pain. My knee just kept popping out of alignment. I was more worried about falling."

As time went on her right knee began getting weaker. After trying to prepare a meal and standing for a long period, she knew something had to be done.

"One night, as I was preparing dinner, one of my sons saw how my knee was getting very weak and said, 'Mom, something needs to be done now,'" says Renda.

Her son's comment prompted Renda to see her primary care doctor, Paula Benchik Abrinko, MD, who suggested Renda make an appointment with Joseph Spott, DO, an orthopedic surgeon at St. Catherine Hospital.



Orthopedic Surgeon Joseph Spott, DO



With the help of Joseph Spott, DO, Ruth Ann Renda is back on her feet and back to cooking after her knee replacement at St. Catherine Hospital.

"Ruth Ann's knee had been a problem for a while and it was time to see Dr. Spott," says Abrinko.

"The first thing Dr. Spott asked me was, 'Why did you wait so long?' He did a great job on my knee replacement and was highly recommended by my friends and family and Dr. Abrinko," Renda says.

"Dr. Spott and all of the nurses at St. Catherine Hospital have been wonderful in helping me to heal," she says. "The Rehab Unit really helped me get back on my feet." ■

CALL



Meet the Docs

For more information about the orthopedic surgeons on staff at the hospitals of Community Healthcare System, call our physician referral line at **219-836-3477** or toll-free **866-836-3477**.

The Healthy Holidays Issue

The holidays shouldn't cause a meltdown.

WHAT'S YOUR MELTING POINT?



As much as we enjoy the holiday season, some days aren't all about hot cocoa and Christmas carols. Rank the holiday stressors below from most to least stressful, then see what percentage of people found them stressful in an American Psychology Association survey.

- Lack of money
- Family gatherings
- Lack of time
- Staying on a diet
- Pressure of giving or getting gifts

ANSWERS:

- 1 Lack of time: **67 percent**
- 2 Lack of money: **62 percent**
- 3 The pressure of giving or getting gifts: **47 percent**
- 4 Family gatherings: **44 percent**
- 5 Staying on a diet: **37 percent**

The holidays should be merry, no matter how many items remain on your to-do list. Read on to learn how adopting healthful strategies can make this season your happiest yet. ➔

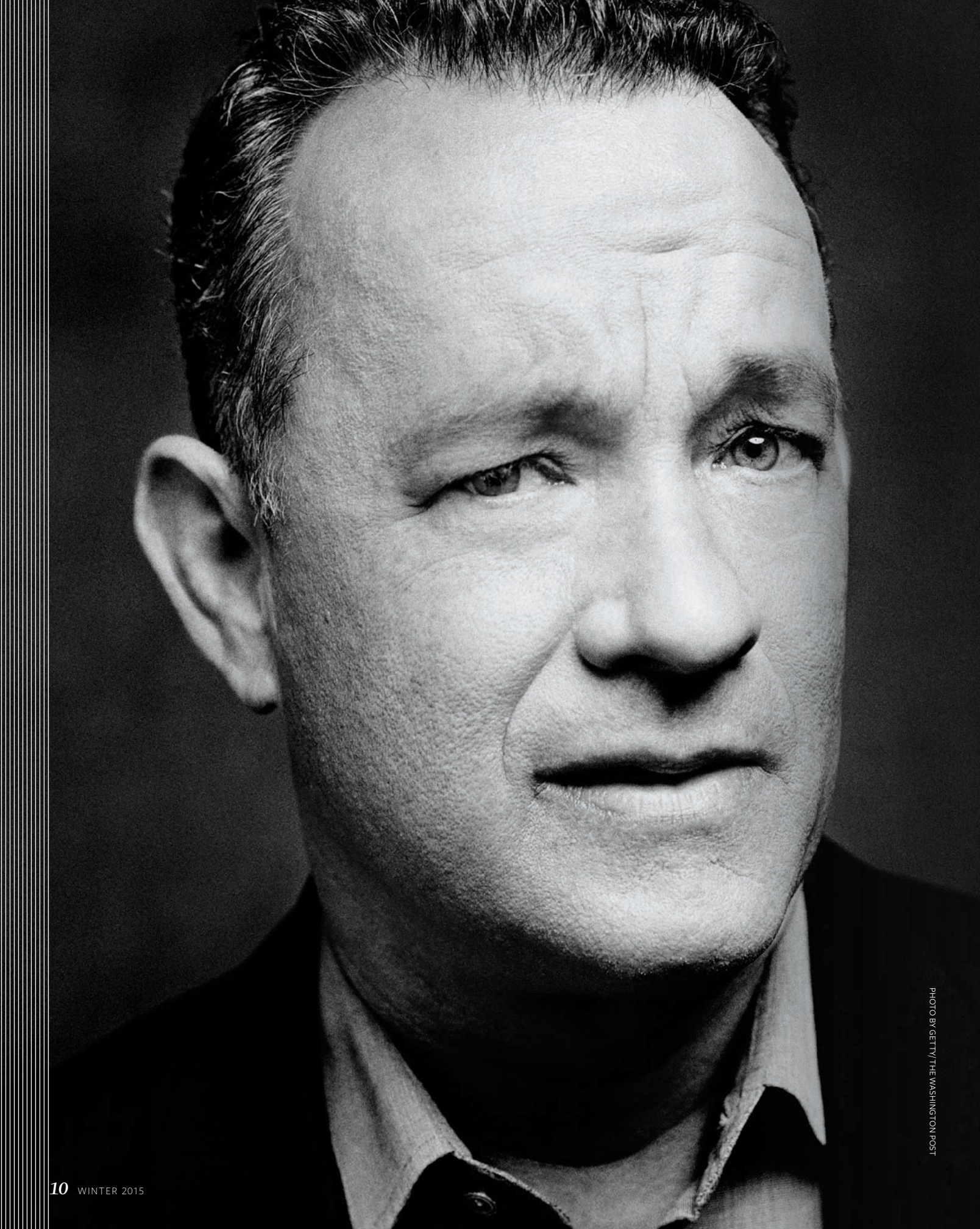


PHOTO BY GETTY/THE WASHINGTON POST

STAYING IN CONTROL

TOM HANKS is one of millions of Americans managing diabetes this holiday season **BY JENNIFER SMITH RICHARDS**

Try to find a Hollywood celebrity who comes across as grounded and genuinely nice as Tom Hanks. He's just guy-next-door relatable.

So it's no surprise that people identified with the movie megastar when he announced amid promoting the film *Captain Phillips* that he—like millions of Americans—has type 2 diabetes.

"I went to the doctor, and he said, 'You know those high blood-sugar numbers you've been dealing with since you were 36? Well, you've graduated! You've got type 2 diabetes, young man,'" said Hanks, now 59, revealing his diagnosis on the *Late Show with David Letterman* in 2013.

Joking aside, the seriousness of diabetes isn't lost on Hanks. Moviegoers

can see that he has slimmed down while adapting his lifestyle to manage the disease.

"Type 1 diabetes is very bad. Type 2 diabetes is controllable," Hanks told interviewers on the popular *Nerdist* podcast in 2013. "You've just got to lose weight and exercise a lot and change everything you eat and never, ever, ever, ever, ever have any fun whatsoever."

The 21 million Americans who have been diagnosed with diabetes can probably relate to the challenges of eating right and staying slim—especially during the holiday season, when diet dangers are everywhere. But, as Hanks has shown, those with type 2 diabetes have the power to maintain good health.

"Type 2 I can manage with good habits," Hanks tweeted shortly after sharing his diagnosis. "I shall!"

Understanding Diabetes

As Hanks said, there are two types of diabetes: type 1 and type 2. Both are conditions of the pancreas, a part of the digestive system that controls blood sugar.

Much of the food we eat is turned into sugar—glucose—that our bodies use for energy. The pancreas makes a hormone called insulin, which helps glucose get into cells for use as energy. In people who have type 2 diabetes, the pancreas either doesn't make enough insulin or their bodies don't use it well. In type 1 cases, the pancreas doesn't produce insulin at all.

Type 2 diabetes—which is often tied to obesity, as well as age and ethnicity—is far more common and, for some people, can be controlled with diet and lifestyle changes. Others may need oral medication, but insulin isn't always required.

Type 1 is much more serious: Those with the disease must rely on daily insulin injections and blood sugar checks to ensure their level is not too high or low. Severe hypoglycemia (low blood sugar) can cause metabolic problems that, if not treated quickly, can lead to death.

Hanks and wife
Rita Wilson



7 THINGS YOU (PROBABLY) DIDN'T KNOW ABOUT TOM HANKS

- 1 Hanks has four children:** two with his first wife, Samantha Lewes, and two with current wife Rita Wilson.
- 2 His guest appearance on *Happy Days* caught Ron Howard's attention,** which led to Hanks' big-screen debut in the movie *Splash*.
- 3 Hanks gained (and then lost) 50 pounds** for his role as Chuck Noland in the movie *Cast Away*.
- 4 He graduated from high school in 1974** but is a college dropout.
- 5 He's a distant cousin,** four generations removed, of Abraham Lincoln.
- 6 Though he's from California, Hanks is a Cleveland Indians fan.** He bought a stone in front of Jacobs Field when it was built.
- 7 His hobby? Collecting typewriters.** He's got more than 100.

"Type 2 diabetes is not going to kill me," Hanks told Yahoo Movies in 2013. "I just have to eat right, and exercise, and lose weight, and watch what I eat, and I will be fine for the rest of my life."

But there are potential serious complications. People with type 2 are more likely to have strokes, kidney failure, amputations, high blood pressure and heart attacks than people without diabetes.

Nerve damage called neuropathy sometimes results from poorly controlled blood sugar. In general, blood sugar that is too high can lead to trouble with healing and more difficulty in overcoming skin infections.

Many new patients don't accept their diagnosis as quickly as Hanks did. Hanks knew about his high blood sugar for two decades, but not everyone experiences blood sugar highs and lows.

Possible warning signs of diabetes—frequent urination, excessive thirst, vision changes and slow-to-heal infections or wounds—can be easy to explain away, says Gretchen Becker, who has type 2 diabetes and is the author of *The First Year: Type 2 Diabetes: An Essential Guide for the Newly Diagnosed*.

More than 8 million people probably have diabetes but haven't yet been diagnosed, according to the Centers for Disease Control and Prevention (CDC).

"Most people are really shocked. Even when it's in the family, people don't expect to get it. Even doctors," Becker says.

Becker says she urges those with a new diagnosis to learn right away about adopting a healthful diet. "The first step to taking control is being informed," she says.

Hanks seems to have a positive outlook, and he's certainly lost weight in the process of altering his diet. On the Nerdist podcast, when the interviewer told him he looked great, he quipped, "Hey, type 2 diabetes will do that!"

Diabetes Management Done Right

The same habits that are good for anyone who wants to live more healthfully also are great for those with diabetes. That means following a diet rich in fruits, vegetables, lean protein and fiber and light on high-sugar junk food and white, highly processed foods.

The American Diabetes Association even says that some starchy foods (beans, potatoes, yogurt) and even desserts are OK in moderation. The key is to keep portions small and make sweet treats truly a treat.

“People think there’s a diabetes diet. There’s not. But there are lots of diets,” says Becker, who sticks to a low-carb diet.

Following a healthful eating plan can be tough for some, particularly around the holidays, says Kathleen A. Kenny, MD, a clinical associate professor of medicine at Stanford University.

“If you look at national data, most people gain one to two pounds over the holidays and don’t take them off,” Kenny says. “For diabetics, they tend to gain weight this time of year.”

Kenny advises patients to make a food plan in advance of a holiday gathering. Choose a predetermined number of snacks that can be eaten on toothpicks. Load up on crudité’s and fruit rather than pastry-covered bites and crackers. And when going through a buffet line, stick with the plan. Spontaneous snack decisions can be poor ones, Kenny says.

And perhaps a no-brainer tip: Lay off the excess alcohol. It can impair the liver’s job in releasing stored glucose, possibly leading to hypoglycemia.

Those holiday tips are good year-round, of course, as is Kenny’s suggestion to exercise as often as possible. Even if it’s taking the stairs instead of the elevator, every bit of get-moving gumption counts. Exercise doesn’t have to be an all-or-nothing endeavor, Kenny says: Something is better than nothing.

SWEET SURRENDER

Holiday dinners can leave partygoers, especially those with diabetes, feeling defeated. Community Hospital Dietitian Terri Sakelar is recommending not forbidding yourself of favorite foods. Instead, follow these tasty tips to avoid end-of-year celebration temptations and keep glucose levels within healthy range:

- ▶ Choose vegetables first.
- ▶ Have lots of fruits, vegetables and shrimp.
- ▶ Limit dips, red meats, desserts and sweets.
- ▶ Eat a protein-packed daytime snack to prevent overindulgence.

Spreading the Word

More Americans could stand to follow the advice of losing weight, getting exercise and managing stress, all of which can stave off a diagnosis of type 2 diabetes.

In 2012, according to the American Diabetes Association, 86 million Americans who were 20 or older had prediabetes—as Hanks did before he “graduated.” The condition, marked by high blood sugar levels, is becoming more prevalent, and the reasons aren’t complicated: People are becoming more obese and less active.

That makes Hanks’ candor about discussing the disease even more valuable, Becker says.

“It calls attention to it. It helps people not to be embarrassed about it,” she says.

The American Diabetes Association gets this. On its website, it highlights celebrity supporters (from NFL player Duane Brown to rapper Lil Jon) who are working to raise awareness about diabetes and are pushing for a cure.

Now that the CDC is predicting that two in five adult Americans—that’s 40 percent—will develop diabetes during their lifetime, Hanks is truly an everyman, but one who happens to have a star on the Hollywood Walk of Fame.

CLASS



Diabetes Classes

We offer meal planning, nutrition education, exercise therapy and other programs for managing diabetes. For more information, call Community Hospital, Munster, at **219-836-7714**; St. Catherine Hospital, East Chicago, at **219-392-7786**; or St. Mary Medical Center, Hobart, at **219-947-6234**.

Because Hanks had adopted a healthier lifestyle, he could focus on supporting his wife, actress Rita Wilson, who revealed in April that she had been diagnosed with breast cancer and had undergone a double mastectomy. In a statement to *People*, Wilson said Hanks was by her side and that the cancer had been detected early. In June, she told *E!* News that she had “won” the battle.

“I feel great. ... I had so much love through the process. I’m very thankful,” she said, sounding upbeat and hopeful—just like Hanks. ■

HEALTHY HOLIDAYS

➔ *The most wonderful time of the year is not without risks. Watch out for these hazards, and you'll be on your way to a happy, healthy season*

BY **STEPHANIE R. CONNER**



PHOTO BY SUPERSTOCK



HAZARD: OVEREATING

Remember:
Parties are
about friends,
not food.

HOLIDAY PARTY SURVIVAL GUIDE

➔ *Five tips for enjoying the food and drinks of the season—and staying in control*

Your friends are having holiday parties. Your office is, too. Plus, you're invited to seasonal networking events, neighborhood happy hours and family gatherings galore. With all the opportunities for eating, drinking and merriment, it's no wonder that people believe they gain more than five pounds over the holidays, studies show.

PHOTO BY GETTY/SOFIE DELAUN

First, some good news: Experts say the average holiday weight gain is closer to a single pound. The problem, however, is that many of us never lose that pound—and year after year of weight gains add up.

To navigate the party season without worrying about the scale, remember these tips.

1 **FOCUS on your purpose**

As you enter the party, there it is: the buffet. You know it's full of indulgences, but avoiding temptation is easier said than done. To boost your self-control, remind yourself why you came to the party, suggests Marisa Moore, a registered and licensed dietitian and a spokeswoman for the Academy of Nutrition and Dietetics.

"Sometimes a party *is* about the food," she says. "But you're also there to enjoy your friends, meet people and have a good time."

Before you walk into a party, identify your purpose, she says.

"Try to set a goal in terms of whom you might talk to, and focus on that," she says. "Tell yourself, 'When I get there, I'm not going to go straight to the buffet. I'm going to mingle with friends first.'"

2 **PLAN ahead**

When you know you might be overindulging in the evening, it's easy to think the solution is to avoid eating during the day.

That's not a good idea, Moore says, because the ensuing hunger can make you far more likely to overeat at the party.

Instead, eat normally during the day—"but be mindful," she advises. For example, skip the bread at lunch. Have a salad instead of a cream-laden pasta. Don't add chips and a cookie to your meal.

3 **PICK the right plate**

"We tend to eat whatever is in front of us—especially at a party because we're distracted," Moore says. To help combat overeating, start with a small plate. If only large plates are available, fill just half.

4 **RECOGNIZE the best options**

Start by surveying the buffet and taking note of the healthiest options. When you're trying to make smart choices, Moore says, one of the best places to start is with the veggie tray.

And no, spinach-artichoke dip doesn't count as a veggie. It's one of your worst options. "It sounds healthy, but it's not," Moore says. "Don't be fooled by a hot and creamy dip that has a couple of vegetables sprinkled in there."

After filling up with vegetables, Moore suggests focusing on protein-rich foods that will help fill you up—items like sliced turkey or beef, smoked salmon or shrimp cocktail.

Then, once you've had nutritious sustenance, you can sample one or two richer dishes.

5 **CHOOSE wisely**

"It's a party, so you're allowed some indulgence," Moore says. That means choosing a few favorite treats, not piling one of everything onto your plate. And don't feel obligated to down desserts just to compliment the chef.

"Sometimes we end up with something that's not tasty and we eat it out of obligation," Moore says. "If you get a brownie and it's dry, is it really worth it? It needs to be worth it." ■

COCKTAILS COUNT

During the holidays, even if you're eating well, it's easy to let cocktails derail you. Good nutrition can be a source of frustration if you struggle with counting calories and maintaining a healthy weight. Experts at Community Hospital in Munster and St. Mary Medical Center in Hobart understand that the key to a successful diet plan involves maintaining a balance between counting calories and reducing fat intake.

Professionals at the Healthy 4 Life program stress education through a variety of nutrition seminars, meal planning programs and weight management support groups. Individuals also learn ways to shop and find an exercise plan that fits their lifestyle. If you want better health, the bariatric professionals of Community Healthcare System are available for guidance and to provide consultation about other treatment options.

WEBSITE



End the Weight Battle

Learn more about the Healthy 4 Life program with offices at Community Hospital in Munster and St. Mary Medical Center in Hobart. Call **866-224-2059** or visit **healthy4lifecenter.org**.

**Don't crack under
holiday pressure.**



NOT SO JOLLY HOLIDAYS

➔ *How to cope with busy schedules, family conflict and other seasonal stressors*

For many of us, the holiday season is equal parts wonderful and stressful. Women are disproportionately more likely to feel stress during this time—after all, we take on most of the additional shopping, cooking and organizing duties.

Keep the season as joyous as it's supposed to be by following these stress-reduction tips.

STRESSOR: The Never-Ending To-Do List

► **REDO YOUR TO-DOS.** Start by analyzing your to-do list. “Do you *have* to attend every party you’re invited to, or is this feeling of obligation self-imposed?” asks Jonathan Alpert, a psychotherapist and the author of *Be Fearless: Change Your Life in 28 Days*.

Then, take action, says Barb Schmidt, a life coach and the author of *The Practice: Simple Tools for Managing Stress, Finding Inner Peace and Uncovering Happiness*. Schmidt discovered a trick for making her own to-do list more manageable: crossing out the last two items.

“The last things on the list are not important,” she says. “That’s why they’re last.” That strategy allowed her to slow down and, she says, become “more of a human *being* than a human *doing*.”

► **GET COMFORTABLE SAYING NO.** Your time is valuable. To protect it, sometimes you have to say no. When considering an invitation, Schmidt suggests an initial response along the lines of, “Thank you for asking me. Let me check my schedule and get back to you.”

Then, be honest with yourself. Can you really fit in the request? Would you say yes because you would enjoy yourself or out of obligation?

To say no kindly, try something like, “I’d love to be there, but it isn’t going to work with my schedule.” If you’re pushed, Schmidt says, consider even fewer words: “I’d love to, but I just can’t.”

“Come from a loving place, and stay firm with it,” she says. “Most people are OK with that. And if they’re not, then it’s not your problem.”

STRESSOR: Family Drama

► **BE REALISTIC.** Schmidt, who has dealt with conflict in her own family, encourages others to recognize that problems can’t be solved at one family event.

“If I think I can make it different or better, I’m setting myself up for disappointment or failure,” she says. “It’s not a place where things can get resolved. Maybe later. But it certainly can’t get resolved that day.”

► **AVOID CONTROVERSY.** “We know what the hot buttons are,” she says. If a conversation is headed that way, interject and ask someone about a hobby or recent vacation.

► **START NEW TRADITIONS.** Do family traditions tend to create stress? “While old traditions provide good memories, sometimes due to life’s circumstances it’s not always possible to continue them,” Alpert says. “So give yourself a break and be open to creating new ones.”

Consider starting a new tradition by bringing the family to volunteer at a shelter or soup kitchen, he suggests.

STRESSOR: The Pressure for Perfection

► **GET CREATIVE WITH GIFTS.** “I tell my patients they have a choice: Participate in the frenzy of the season, or reduce stress by changing their view and celebrating in a way that is unique to them and truly theirs,” says Alpert. “Materialism isn’t an expression of love, and extravagance doesn’t equal happiness.”

Instead of hitting the mall, remember that it’s truly the thought that counts. For example, offer a night of babysitting to a friend with kids who rarely gets a night out with her husband.

► **BE MINDFUL OF WHAT MATTERS.** Remind yourself why you’re celebrating the holiday to begin with. It’s probably not the decorations, the perfect bow on a present or the way your table is set. ■

HEALING MINDS AND BODIES

The holidays are almost here. That usually means shopping, cooking and spending time with family. Money worries also tend to pop up this time of year. All of this adds up to stress. When stress is turning your world upside down, it may be time to reach out to experts for help. Behavioral Health Services of CommunityHealthcare System offers a team of extensively trained physicians, therapists, nurses and support staff to heal the mind, body and spirit of patients with mental and mood disorders ranging from major depressive to bipolar diagnoses.

“We focus on the development of a unique holistic approach that suits individual needs,” says Scot West, RN, nurse manager. “Our patients leave thinking, feeling and behaving in new ways that promote overall health and wholeness. We also offer outpatient counseling at the Centers for Mental Wellness.”

CALL



A Better Life

The Behavioral Health Services team can help you develop positive coping techniques to deal with stress. For more information or for an appointment, call **219-392-7025**.

HAZARD: ACCIDENTS

Two feet on the rungs at all times, please.

A SAFER SEASON

➔ *In the hustle and bustle of November and December, watch out for these lurking safety threats*

With so much to think about late in the year, safety might not be top of mind. But if you're not careful, decorations can pose a fire risk, and foodborne illnesses can sicken partygoers. Take note of these risks to keep your loved ones and guests safe.

FIRE Safety

THE DANGER: Each year, firefighters respond to about 230 home fires that start with a Christmas tree, the National Fire Protection Association reports. An additional 150 home structure fires annually are attributed to decorative lights. Not surprisingly, the agency also reports that December is the peak time for home fires caused by candles.

WHAT YOU CAN DO:

- Never leave a candle or fire-place unattended.
- If you purchase a live Christmas tree, be sure that it's fresh, and keep it watered.
- Position the tree at least 3 feet away from a heat source such as a fireplace, candle or heat vent.
- Don't use lit candles to decorate the tree, and make sure tree lights are labeled for indoor use. Replace light strings that have broken or worn cords.
- Unplug lights before leaving the house or going to bed.

FOOD Safety

THE DANGER: During the holidays, we often prepare a smorgasbord of food items—and leave everything sitting out for hours. Proper food preparation and temperature control are key to preventing foodborne illness.

WHAT YOU CAN DO:

- Before handling food, wash your hands with soap and water for at least 20 seconds. Make sure dishes, utensils, countertops and cutting boards have also been washed.
- Rinse fruits and veggies under running water, but don't rinse raw meat before you cook it. (Rinsing can lead to the spread of bacteria around the sink and countertops.)

- Keep raw eggs, meat and seafood separate from foods you don't need to cook. Also, be sure to use a separate cutting board for raw meats.
- Using a food thermometer, make sure beef, pork, lamb and veal steaks, chops and roasts are cooked to a minimum internal temperature of 145 F. Ground beef, pork, lamb and veal should be cooked to a minimum of 160 F and all poultry to 165 F.
- Don't let food sit at room temperature for more than two hours. Keep hot foods at 140 F or warmer, and cold foods at 40 F or colder.
- Eat or freeze your leftovers within three to four days.

CHILD Safety

THE DANGER: Children help remind us what the holidays are all about. But they can also add stress, as danger lurks around every decoration. Young children are naturally curious creatures who explore the world by putting everything (and we do mean everything) in their mouths.

WHAT YOU CAN DO:

- Avoid sharp or breakable ornaments on your tree.
- Ornaments with small removable parts are a choking hazard. Keep them on the highest branches or put away in the attic until your children are older.
- Don't set out decorations that look like food or candy.
- Buy toys appropriate for your child's age, and heed warning labels. Don't buy toys with small parts for children younger than 3.
- Be aware that some holiday plants—mistletoe berries, holly berry and Jerusalem cherry—are poisonous. Keep them out of children's reach.
- Keep button batteries away from children. More than 2,800 kids each year are treated in emergency departments after swallowing these batteries. ■

HOLIDAY SAFETY

Whether you're stringing lights on your house or adding the star atop the tree, take note: The U.S. Consumer Product Safety Commission reports nearly 13,000 people every November and December sustain injuries related to holiday decorations.

When you need medical attention for injuries that are not life-threatening and want to get in and out in a hurry, prompt quality health-care is available through immediate care services of Community Healthcare System. Our state-of-the-art outpatient facilities offer a variety of diagnostics: laboratory, X-ray and other imaging technology. With fully equipped, spacious exam rooms and experienced Care Network physicians specializing in family and internal medicine, you can often get the help and answers you need in one visit. We accept patients on a walk-in basis at convenient locations throughout Northwest Indiana.

WEBSITE



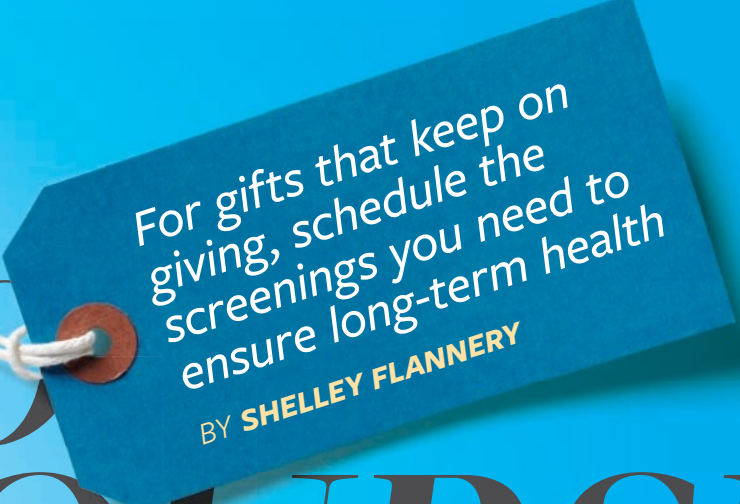
Here When You Need Us

Visit www.comhs.org for information about our immediate care centers in Hessville, Portage, St. John, Schererville, Valparaiso and Whiting.

A

Gift





For gifts that keep on giving, schedule the screenings you need to ensure long-term health

BY **SHELLEY FLANNERY**

TO YOURSELF

Who's on your holiday shopping list? Your parents, husband and kids, no doubt, not to mention a litany of friends and co-workers. But what about you? You deserve gifts this time of year, too. And we've got some ideas, no wrapping required.

Health screenings are the most important gifts you'll give yourself all year long. They're not as fun as getting new shoes, of course, but screenings could save your life.

"Women tend to be the healthcare coordinators in our families, and yet sometimes we're the last ones to get our preventive services done," says Angela Golden, a family nurse practitioner and past president of the American Association of Nurse Practitioners. "But they truly can keep us healthier longer. The concept is to find issues early and treat them quicker and maybe even keep them from becoming lifelong problems."

While you're thinking about your holiday gift list this year, make sure you're on it. Here's what to give yourself to keep every part of you healthy.

FOR: YOUR HEART

→ Heart screenings are some of the easiest and most important checkups you can get.

“We’ve seen a huge drop in mortality rates for heart disease, and at least some of that is due to the screenings that are available,” says Vincent Bufalino, MD, a spokesman for the American Heart Association. “Unfortunately, heart disease is still the No. 1 cause of death in the U.S., so people need to be vigilant.”

GUIDELINES

BODY WEIGHT: Your doctor should calculate your weight-to-height ratio (body mass index) annually, starting after age 20.

BLOOD PRESSURE: Start at 20 and get it checked every two years. If the readings are high, you may need to be screened more frequently.

CHOLESTEROL: Schedule a fasting lipoprotein profile (a simple blood test) every four to six years after age 20. Your doctor may recommend more frequent screenings.

BLOOD GLUCOSE: Starting at age 45, have your blood glucose checked every three years or more frequently depending on your risk for diabetes. Diabetes puts you at greater risk for heart attack and stroke.

FOR: WOMEN

→ In recent years, screenings have detected women’s cancers earlier than ever. The five-year survival rate for breast cancer has steadily risen to an all-time high of nearly 90 percent.

Cervical cancer survival rates have also seen improvements, although more modest. Death rates fell an average of 1.3 percent per year between 2002 and 2011.

“We have effective screening methods that can help the early detection of breast cancer and cervical cancer, among others,” says Rachel Grisham, MD, a gynecologic medical oncologist and a spokeswoman for the Society of Gynecologic Oncology. “Through the use of such tests as the Pap, we’ve greatly reduced incidences of cervical cancer in the U.S.”

GUIDELINES

MAMMOGRAM: Schedule a mammogram annually beginning at age 40 and continue for however long you’re in good health.

CLINICAL BREAST EXAM: Women should have a clinical breast exam every three years in their 20s and 30s and then annually beginning at age 40.

BREAST SELF-EXAM: The American Cancer Society says self-exams are optional for women. Most important, women should be familiar with the look and feel of their breasts and report changes to their physician.

CERVICAL CANCER

SCREENING: Pap tests should begin at age 21 and continue every three years until 29. Between 30 and 65, women should have a Pap plus HPV test every five years or a Pap-only test every three years.



FOR:
MEN

→ The efficacy of prostate cancer screenings has come into question in recent years, with some researchers saying testing isn't worth the cost or anxiety. The U.S. Preventive Services Task Force has gone so far as to recommend against prostate-specific antigen (PSA) screening. But the American Cancer Society and the American Urological

Association urge men in their early 50s to start a discussion with their doctor about whether the PSA test is right for them. Some experts predict prostate cancer rates to increase in coming years if screening schedules are abandoned.

GUIDELINES

PROSTATE CANCER SCREENING:

Men should talk to their doctor at age 50 about screening for prostate cancer with the PSA blood test and digital rectal exam. African-American men and others at high risk for prostate cancer should talk to their doctor sooner, or by 45.

SCREENINGS FOR A HEALTHIER YOU

Men are notorious for avoiding the doctor. More than half of men have not seen their primary care provider in the past year, according to research from the American Academy of Family Physicians. If that's not telling enough, 29 percent of survey respondents said they wait as long as possible before seeking help for a medical condition.

Healthcare may be more ingrained in women because women must visit the doctor more often for routine screenings such as a Pap test or mammogram.

Whatever the reason your man isn't going to the doctor, you can help change it.

"Men tend to get healthcare screenings when the women in their lives push them to do it," says Mark McMurtrey, MD, Community Care Network family medicine physician on staff at the Valparaiso Health Center of St. Mary Medical Center.

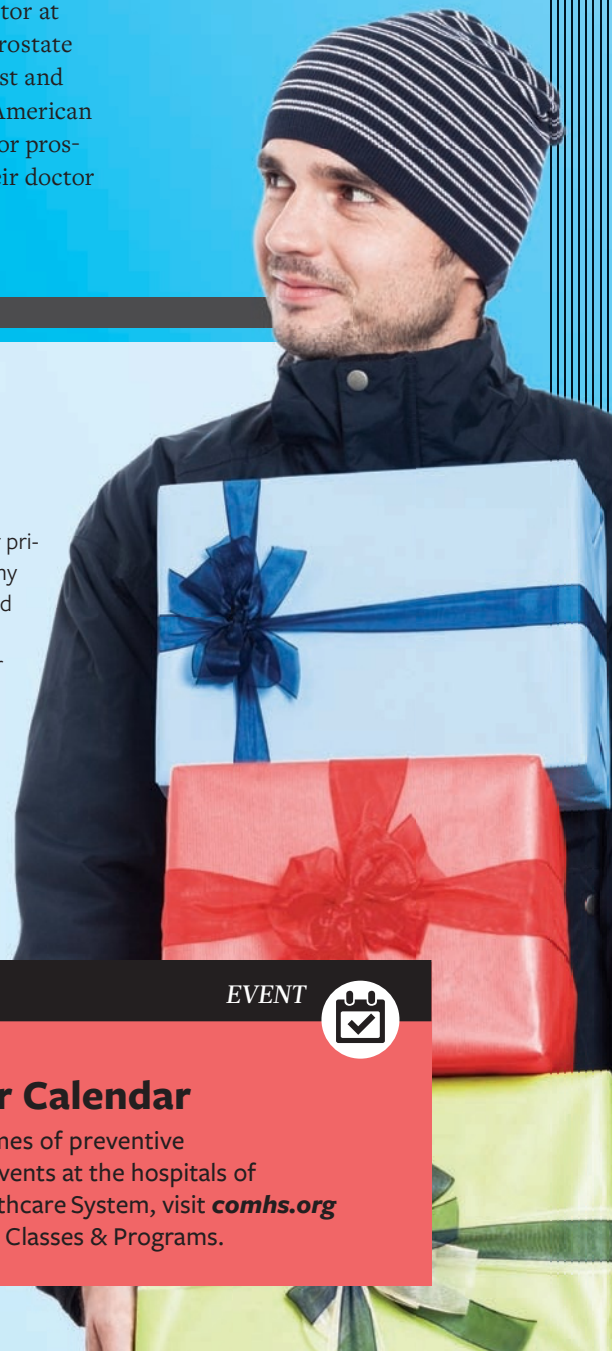
The hospitals of Community Healthcare System—Community Hospital in Munster, St. Catherine Hospital in East Chicago and St. Mary Medical Center in Hobart—are committed to helping Northwest Indiana residents get the knowledge they need to lead healthier lives. Various types of low-cost screenings and free health fairs are held throughout the year to help ensure everyone has access to potentially lifesaving tests. Blood profile and blood pressure screenings and other heart and vascular screenings such as those for peripheral arterial disease (PAD) are also offered at each of the hospitals. Special stroke education events are held each spring.

EVENT



Mark Your Calendar

For dates and times of preventive screenings and events at the hospitals of Community Healthcare System, visit comhs.org and click on Find Classes & Programs.





14 FREE SCREENINGS

Do you think regular health screenings are something you have to save up for? Not anymore. The Affordable Care Act mandates that health plans cover the full cost of preventive healthcare, including the following screenings and counseling visits:

- 1 One-time abdominal aortic aneurysm screening for men who smoke or have smoked
- 2 Alcohol counseling
- 3 Blood pressure checks
- 4 Cholesterol screening
- 5 Colorectal cancer screening
- 6 Depression screening
- 7 Diabetes (type 2) screening
- 8 Diet counseling
- 9 HIV testing
- 10 Immunization vaccines for adults, such as the flu shot
- 11 Obesity screening and counseling
- 12 Sexually transmitted infection prevention counseling
- 13 Syphilis screening
- 14 Tobacco use screening and cessation interventions

→ We take our bones for granted—until one breaks. And the risk of broken bones goes up considerably as we age.

Women make up 80 percent of osteoporosis cases, which equates to 8 million Americans. About half of women will suffer a bone fracture related to osteoporosis in their lifetimes. Why are women at greater risk? Their bones tend to be smaller and thinner than men's. Menopause also contributes to bone loss.

Of course, that doesn't mean men aren't affected. Both women and men should be screened for osteoporosis with a simple X-ray.

GUIDELINES

BONE DENSITY SCREENING:

Women should be screened for osteoporosis at age 65, and men at 70. Screening should take place earlier for anyone who breaks a bone after age 50 and for those at increased risk for osteoporosis.

→ No one likes to think about colon health, but everyone needs to: Colorectal cancer is the second leading cause of cancer death in the United States.

Colonoscopy, the gold standard of colorectal cancer screening, is not only used to diagnose cancer but can also help prevent the disease. Doctors use colonoscopy to check for precancerous polyps (growths in the lining of the large intestine). If found, most polyps can be removed immediately.

GUIDELINES

COLORECTAL CANCER

SCREENING: Beginning at age 50, men and women should have a colonoscopy every 10 years, a flexible sigmoidoscopy every five years, a double-contrast barium enema every five years or a virtual colonoscopy every five years.



FOR: YOUR SKIN

➔ Each year, new cases of skin cancer outnumber new cases of breast, prostate, lung and colon cancers combined, according to the Skin Cancer Foundation. Of the seven most common cancers, only melanoma has a rising incidence rate.

Along with a healthy dose of prevention, which includes vigilant protection from the sun, check your skin regularly for abnormalities.

GUIDELINES

SELF-EXAM: Perform monthly head-to-toe skin self-exams and alert your doctor to abnormalities. Remember the ABCDEs of skin cancer, looking for changes in asymmetry, border, color, diameter and evolution.

CLINICAL EXAM: Have your doctor check your skin for cancer at regular intervals based on your skin cancer risk.

FOR: YOUR EYES

➔ If you're lucky enough to have good vision, eye exams are easy to dismiss. But to keep seeing clearly, you need to have your vision checked.

Changes in vision are a normal part of aging. You may notice a need for reading glasses or

difficulty adjusting to glare. Eye diseases, however—such as age-related macular degeneration, glaucoma and cataracts—shouldn't be considered normal.

Eye exams can detect ocular problems and vision loss even before they are recognizable to the patient. Early detection and treatment can help prevent vision loss.



GUIDELINES

COMPREHENSIVE

EYE EXAM: Adults 18 to 60 should have an eye exam every two years, or more often if they have diabetes, hypertension or a family history of ocular disease. Starting at 61, exams should continue annually. ■

CELEBR



BACKGROUND PHOTOS BY THINKSTOCK; COOKIES BY GETTY

ATING



WHILE SOMEONE IS ILL

*Practical advice to help you
through the holiday season*

BY **COLLEEN RINGER**



When someone you love is seriously ill, you may be tempted to tune out everything between Thanksgiving and New Year's Day. The planning, the additional errands, the emotions—the holidays can seem overwhelming when regular days are challenging enough. But before you cancel the entire season, consider this: Celebrating is beneficial to you both.



“For the caregiver and the loved one, it can be very reassuring to go through those familiar traditions and rituals. Many times we see that people hang on for those holidays and milestones. It means a lot psychologically.”

—John Schall, CEO of the nonprofit Caregiver Action Network

“For the caregiver and the loved one, it can be very reassuring to go through those familiar traditions and rituals,” says John Schall, CEO of the nonprofit Caregiver Action Network. “Many times we see that people hang on for those holidays and milestones. It means a lot psychologically.”

Celebrating the season will trigger happy memories and bring together those who are dear. But that’s not to say that this year won’t be different. It will be, and that’s OK—what’s important is spending time with the ones you care about.

As you head into the holidays, consider this advice for celebrating when your loved one is ill.

GET IT OUT in the Open

Start the conversation about the holidays well in advance. It’s important to acknowledge this year’s challenges

instead of letting the topic hang over your heads. “Start by saying, we’ve always done ABC and I think we should do A and B. How do you feel about that?” Schall suggests.

Make your plans part of an ongoing conversation. During a low moment, your loved one may declare that everything’s off and then, a few days later, have a change of heart. You don’t want to be a broken record, but you do want to hit repeat a few times.

SCALE Back

Your day-to-day routine is different, and your celebration should be, too. Chances are that neither you nor your loved one will be up for anything too big, noisy or complicated.

Start by shrinking the guest list and the number of activities. If you’ve always exchanged gifts with every family member, consider drawing names instead.

Or if the festivities usually involve an entire day of eating, drinking and games, limit the fun to one meal scheduled around the time of day when your loved one has the most energy. (A Thanksgiving breakfast instead of dinner? Go for it.)

While you're downsizing the festivities, increase the amount of help you're asking for. Let someone else plan the food (go potluck style), and enlist older children in the family to decorate, set the table and do the dishes.

PLAN an Escape Route

"It's very important that wherever you celebrate, it needs to be a situation where your loved one can easily get away, rest and recuperate," Schall says.

That might mean changing the venue or confining the party to one side of the house (away from the person's bedroom). If weather permits, usher folks outside after the meal so your loved one can have some quiet time.

SPREAD the Wealth

There's no reason the entire extended family has to come over on Thanksgiving Day. "It can be more a holiday season than a holiday day," Schall says.

Set up a staggered visiting schedule, which will be easier on your loved one

and allow for more intimate exchanges. But, you're thinking, that means more cooking and cleaning for me. Nope. Ask guests to bring snacks or food if it's around mealtime—they'll be more than happy to. And let them know that the house won't be spic-and-span. They're not coming to see whether your oven is spot-free; they're coming to spend time together.

LET GO of Normal

"When you go in thinking you're going to make the holiday as normal as ever, you're setting yourself up for emotional turmoil," Schall says.

Instead of hanging on to a family tradition that would be difficult this year, start a new one—something that fits your loved one's energy and mobility levels. It could be a movie marathon or an evening drive around the neighborhood to look at the lights.

BRACE Yourself

Accept that the holidays will be tough—there's no way around it. There will be difficult moments. You will cry, others will cry. Recognizing it's going to be an emotional roller coaster will help you get through it—and you *will* get through it. ■

ALZHEIMER'S AND THE HOLIDAYS

When a loved one has Alzheimer's disease, you may be unsure of how you should acknowledge the holiday season. Maybe you're worried that celebrations will only confuse the person. In most cases, planning a few festivities is a good idea.

"People with Alzheimer's forget many things, but they usually don't forget that Thanksgiving is something, that Christmas is something," says Brenda Obinger, program manager for Memory Support at Hartsfield Village Senior Living Community. "They remember the celebration with it."

Some of the ways you can get your loved ones involved in the holidays are the same activities the residents and families do in Memory Support to celebrate the holidays: trim the tree, take group pictures, make cookies, wrap presents and make cards, sing holiday songs, tell stories or read poems, watch movies, take a drive to look at decorative lights or have an indoor "snowball" fight.

You can also be prepared and scale down the celebration to better accommodate your loved one by toning down decorations and removing hazards like cords, candles and decorations that look edible. Consider smaller group gatherings; the most important thing is that you spend time together.

APPOINTMENTS



Memory Support

Hartsfield Village Senior Living Community is a designated Memory Screening Center for the Alzheimer's Foundation. Confidential memory screenings are held year-round. Free. Appointments required. Call **219-934-0750** and ask for Jill Keilman.



10 TIPS FOR HEALTHIER HOLIDAYS



1 To reduce holiday stress, cross out the last two items on your to-do list. They're last for a reason.



2 There's no need to ban holiday cookies, but there's no need to sample every dessert at the party, either. Choose your treats wisely.

3 If you're celebrating the holidays with a loved one who is ill, make sure there's easy access to a place where he or she can get away and rest.

4 Give yourself the gift of health this season and talk to your doctor about the screenings you need—and actually schedule them.

5 Before you hit the buffet at your neighbor's holiday bash, pick up the smallest plate to combat overeating.

6 Remember that holidays aren't the time for resolving family problems. If a hot button gets pushed, change the subject.

9 Yes, it's a party, but watch your alcohol intake. Alcohol adds empty calories to your diet and negatively affects blood glucose levels.

10 Beware of holiday leftovers. To prevent foodborne illness, don't allow food to sit at room temperature for more than two hours, and eat or freeze leftovers within three to four days.

If you're overscheduled, ask yourself: Am I saying yes because I want to attend this event or out of obligation?



8 To avoid a fire, place your Christmas tree at least 3 feet away from heat sources like a fireplace or heat vent.



PHOTOS BY THINKSTOCK

➔ **WANT MORE HEALTHY IDEAS?** Check out our spring issue, focusing on women's health.

THIS JUST IN

GOOD-FOR-YOU NEWS, CUES AND REVIEWS



ADD FIBER, LOSE WEIGHT

Fiber may be, well, the fiber of weight loss.

In a study funded by the National Institutes of Health, two groups of adults at risk for type 2 diabetes were asked to follow different diets. One diet simply asked participants to add more fiber; the other involved reducing salt, sugar and alcohol while balancing protein, fat and carbohydrates.

By simply adding more fiber-rich fruits, vegetables and whole grains, the “add fiber” group lost an average of 4.6 pounds in a year compared with 6 pounds lost by the group on the complicated regimen. Both groups lowered blood pressure and blood sugar.

THIS JUST IN

GOOD-FOR-YOU NEWS, CUES AND REVIEWS

FOWL BEHAVIOR

This Thanksgiving, many Americans will commit fouls while handling fowl, according to a recent study of raw poultry protocol.

The study showed that fewer than two-thirds of consumers have a food thermometer and that fewer than one in 10 of those who have them use them. Meanwhile, researchers also discovered that nearly seven in 10 consumers wash or rinse raw poultry—a no-no because splashed, contaminated water may spread salmonella and other bacteria.

Follow these guidelines for proper food safety:

- Cook or freeze fresh poultry within two days.
- Thaw frozen poultry in the refrigerator, ensuring juices do not drip or cross-contaminate other food.
- After cutting raw poultry, wash the cutting board, utensils and countertops with hot, soapy water.
- Cook poultry to a minimum internal temperature of 165 degrees.



ORANGES VS. RED BELL PEPPERS

Which contains more vitamin C?

ANSWER: RED BELL PEPPERS.

Orange you surprised? While we've long been sweet on oranges for boosting our immune systems with vitamin C, red bell peppers pack twice the punch. An average-sized orange has 82 milligrams of vitamin C, compared with 152 in a medium red bell pepper.



PHOTOS BY THINKSTOCK



▶ TRUE OR FALSE

You're more likely to catch a cold out in the cold.

TRUE (POSSIBLY). Your mom may have been right after all: A 2015 study by Yale University found that the common cold virus more easily replicates in cooler conditions in the nasal cavity. Researchers also found that lower temperatures lowered immune response in mice, the subjects of the study.

LONELINESS AND LONGEVITY

A lonely life may be a shorter one, according to recent mortality research. A study of about 3 million people with an average age of 66 showed that the likelihood of death increased by 26 percent for seniors who were lonely, 29 percent for those experiencing social isolation and 32 percent for those who live alone.

As risk factors for mortality, loneliness and social isolation may be comparable to obesity, researchers say.

PHOTOS BY GETTY/JOSE LUIS PELAEZ INC

WINTER WOES



95 F

Hypothermia, a medical emergency that can be fatal, occurs when body temperature drops below 95 F.

28K

Manual ice and snow removal results in an estimated 28,000 trips to hospital emergency rooms annually.

20/20

If the temperature is below 20 F and the wind is whipping at more than 20 mph, frostbite can occur within minutes.

OUTSIDE THE BOX

This year, consider giving a heart-healthy gift that keeps on giving. How about a fitness membership? Portage YMCA, in partnership with St. Mary Medical Center, offers exercise classes and healthy activities for the whole family. Community Hospital Fitness Pointe® offers a Class Pass program so you can try some classes, such as Virtual Cycling, Pilates and Zumba, without a full membership. The pass is renewable. St. Catherine Hospital's SilverSneakers® program helps older adults take greater control of their health and helps improve overall well-being.

CLASS



Jump-Start

Call to learn about our low-cost fitness options: Community Hospital at **219-924-5348**; Portage YMCA at **219-762-9622**; and St. Catherine Hospital at **219-392-7086**.

THIS JUST IN

GOOD-FOR-YOU NEWS, CUES AND REVIEWS



NO NAPS, PLEASE?

When your preschooler stages an epic strike against naptime, research suggests she may be right.

In a recent study, preschoolers who napped—especially those ages 2 to 5—got less sleep overall and less quality sleep.

While individual sleep needs vary, the National Heart, Lung and Blood Institute recommends 11 to 12 hours of sleep per day for preschool-age children.

QUIZ



Your Sleep IQ

Are you getting enough sleep? See how much you know about sleep by taking the Sleep IQ quiz from the National Sleep Foundation at sleep-foundation.org/quiz/sleep-iq-quiz.

Boxing benefits your brain, heart and muscles.




WORKOUTS THAT WORK: BOXING

Float like a butterfly, sting like a bee—and build muscles, work your heart and challenge your mind. Boxing is a supersport that helps:

- ▶ **THE MIND:** Boxing can improve your confidence, and avoiding hits sharpens your reflexes.
- ▶ **THE UPPER BODY:** All that bench pressing and punching builds upper-body strength—from biceps and triceps to traps and pecs.
- ▶ **THE HEART:** Boxing is an excellent cardiovascular workout.
- ▶ **THE WAIST:** Boxing is a big-time calorie burner, with some estimates near 700 calories an hour.
- ▶ **THE CORE:** Strong core muscles can help deliver the strength and power that boxing requires.

GIRL: PHOTO BY GETTY/KLAUS TIEDE; BOXING PHOTO BY SUPERSTOCK



WHAT ARE THE ODDS

of keeping a New Year's resolution?



40%. The majority of people who make New Year's resolutions fall off the wagon after six months, studies show. And after two years, just 19 percent were sticking with their goals.

But take heart: Simply making a resolution and outlining simple, realistic steps puts you on the right track. In fact, research suggests that resolution-makers are 10 times more likely to change behavior than those who set no goals.



STRESS AND DEPRESSION: **TOUGH ON THE TICKER**

Heart disease is hard enough to handle. But add stress and depression to the mix, and researchers say it's a perfect storm for a heart attack or death in the first 2½ years after diagnosis.

While the study, published in the journal *Circulation*, did not prove cause-and-effect, it did show that in a 30-month window, the risk of death for heart patients with both stress and serious depression was nearly 50 percent higher than for those with low stress and low depression.

JARGON WATCH

What is often incorrectly called the “stomach flu” is actually **GASTROENTERITIS**, an inflammation of the lining of the intestines. The most common cause is a norovirus infection, which produces unpleasant symptoms such as diarrhea, vomiting, abdominal pain, headache, fever and chills.

You'll spend a third of your life sleeping.



THE TRUTH ABOUT SLEEP

Can you really catch up on sleep? Are sleep aids dangerous? What you need to know about our sleep-deprived world



Don't blame boredom for that big yawn you can't suppress. If you're a typical plugged-in American adult, you're getting 60 to 90 minutes less sleep per night than was the norm 50 years ago, says Lawrence J. Epstein, MD, author of *The Harvard Medical School Guide to a Good Night's Sleep*.

With 50 million to 70 million American adults estimated to have a sleep or wakefulness disorder, the Centers for Disease Control and Prevention calls our sleep deficit "a public health epidemic."

To understand how you can reap the benefits of slumber, separate myth from reality.

TRUE OR FALSE:

The worst that can happen when you skimp on sleep is that you'll be tired and need to catch up the next night.

→ **FALSE.** Viewing sleep as a luxury underestimates its impact on your health, says Ilene M. Rosen, MD, a spokeswoman for the American Academy of Sleep Medicine. Along with good nutrition and regular exercise, "it's one of three pillars of a healthy lifestyle," she says.

In the long term, shortchanging bedtime "affects pretty much everything,"

says Epstein. That includes your risk for cardiovascular disease, diabetes, weight gain and depression, perhaps even dementia and cancer.

Catching up on sleep isn't as simple as going to bed early the next night. "Your sleep patterns might be back to normal by night four," Rosen says. "But making time for recovery sleep never really occurs."

TRUE OR FALSE:

Drinking alcohol, smoking and using electronic devices before bedtime interferes with sleep.

→ **TRUE.** A nightcap can help you fall asleep faster. But as the alcohol wears off, "it causes fragmentation of sleep and you wake up, so overall sleep quality is worse," Epstein says. Nicotine hampers sleep differently, as cravings can awaken smokers during the night.

The bedroom is not the place to use electronic devices, which emit a brilliant blue light "that is the exact wavelength of light that tells your brain it's time to be awake," Rosen says. The best environment for falling asleep, she says, is by making your bedroom "a cave—cool, dark and quiet."

TRUE OR FALSE:

Sleeping pills and other sleep aids are effective solutions to insomnia.

→ **TRUE, WITH CAVEATS.** Epstein cautions against using sleeping pills for more than two to four weeks or over-the-counter aids containing antihistamines for more than two nights.

As with any medicine, sleep aids come with possible side effects. In some people, tolerance builds and can lead to

addiction. Other risks are daytime drowsiness, breathing problems and falls.

For insomnia lasting more than six weeks, Rosen recommends behavioral sleep medicine programs. Such programs might include using light therapy or a continuous positive airway pressure (CPAP) device—along with recommendations for good sleep habits, like simply going to bed and getting up at the same time every day.

TRUE OR FALSE:

Snoring is annoying, but it's no big deal.

→ **FALSE.** Habitual snoring can be a sign of obstructive sleep apnea. The disorder, in which breathing is periodically interrupted during sleep, is caused by throat muscles that relax too much and block the airway. See a physician if you think you may have sleep apnea. The condition not only makes you tired during the day, but it can also lead to high blood pressure and increase your risk for heart disease.

TRUE OR FALSE:

You can sleep too much.

→ **FALSE.** If you sleep longer than the typically recommended seven to nine hours, it's because your body requires more rest, Epstein says.

But if you know the amount of sleep that typically leaves you refreshed and it changes for unknown reasons, "there's something else going on and it should be addressed," he says.

Oversleeping may be a symptom of an underlying but treatable health condition. ■

SWEETER DREAMS

It's 3 a.m. You're wide awake. You begin counting the hours until you have to get up again.

You're not alone.

Experts at the hospitals of Community Healthcare System know that sleepless nights cause unbearable daytime stress and are committed to helping patients get a better night's rest.

At the accredited Sleep Centers of Community Hospital, St. Catherine Hospital and St. Mary Medical Center, patients are cared for by experienced professionals trained in the evaluation and treatment of disorders such as sleep apnea, insomnia, narcolepsy and various irregular sleep patterns. The sleep study is a painless procedure performed by a specially trained technologist. Studies are performed in a bedroom suite with the comforts of home for optimal relaxation and results. All results are read by board-certified sleep specialists skilled in treating your symptoms for a more relaxing slumber.

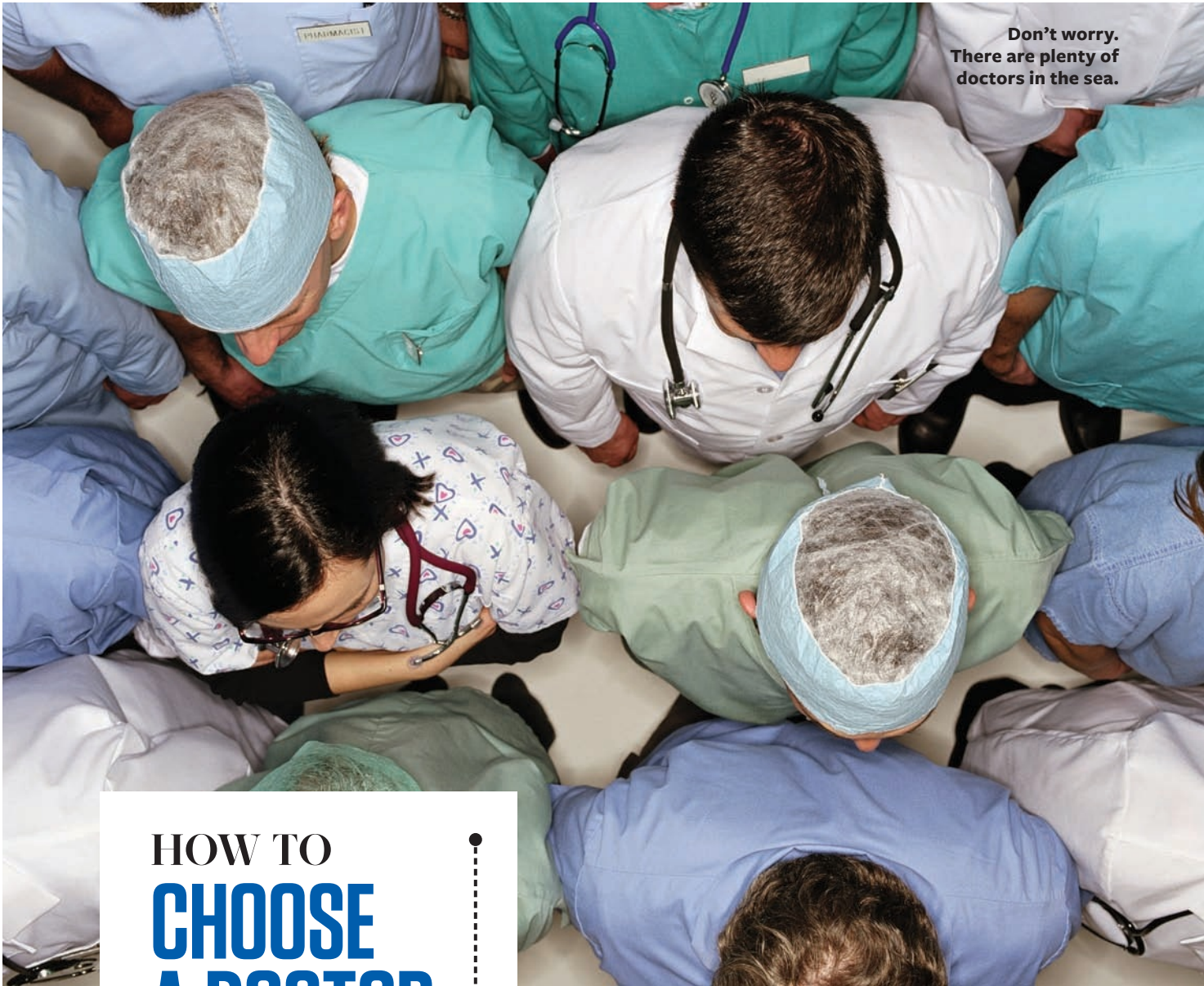
APPOINTMENTS



Catch Some ZZZs

Call Community Hospital (219-934-2873), St. Catherine Hospital (219-392-7666) or St. Mary Medical Center (219-947-6790) for a sleep study.

Don't worry.
There are plenty of
doctors in the sea.



HOW TO **CHOOSE A DOCTOR**

*If you're looking for a new
primary care physician,
follow these four steps to
meeting Dr. Right*



There comes a time in everyone's life when you have to pull out the tried-and-true phrase: "It's not you, it's me."

Whether you've changed insurance plans, moved to a different area or just want a new perspective, there's no shame in breaking up with your primary care physician—as long as it leads you on the path to finding a new one. This is one relationship where jumping in right after a breakup is a good idea.

PHOTO BY GETTY/THE IMAGEBANK

1

Find out who's in and who's out.

Of your healthcare network, that is. This should be your first determining factor in choosing a doctor—the last thing you want is to fall head over heels for a physician who is out-of-network or doesn't accept your insurance. Most health plans offer discounted rates with certain doctors and hospitals, so you'll pay less out-of-pocket if you opt to see an in-network doc. Find out whether your healthcare plan offers an online doctor database, which allows you to focus your search on in-network physicians.

2

Ask to be set up by friends.

"Nine times out of 10, patients are referred by friends, neighbors or family members," says Robert

Lee, MD, a member of the board of the American Academy of Family Physicians. "Word of mouth is probably the most powerful—and oftentimes the most accurate—referral tool we have."

Just as you'd be more likely to trust a friend with a romantic referral, asking people you know for doctor recommendations is often a better bet than relying on Web sources. "Online resources are reasonable, but you don't know what the reviewing standards are, so it's harder to gauge the accuracy," Lee says. "Was it a one-off visit that garnered that rating? Or is it based on a long history with a certain doctor? It is hard to get a feel for the context of online ratings and reviews."

4

Take the first date seriously.

"The best way to find out if a doctor is right for you is to go in for an appointment," Lee says. "Come in for an

PRIMARY CARE DOCTOR OR SPECIALISTS?

When it comes to selecting a doctor, you need all the information you can get. Whether you need a family medicine practitioner or a specialist, our referral experts can help you find the right physician among the Community Care Network physicians affiliated with Community Hospital, St. Catherine Hospital and St. Mary Medical Center.

By selecting a Community Care Network physician you'll have the convenience of online access to your medical record through MyChart®. MyChart is the free, secure way to access information in your medical record and communicate with your healthcare team. View your medical history and test results, renew prescriptions, request appointments, and more.

Avoid long-distance relationships.

Consider the logistics of your doctor's office. Is the office close to home or work? Does it have accessible parking? What are typical wait times? To which hospital do they admit patients if necessary? What are the after-hours policies?

In this case, distance doesn't necessarily make the heart grow fonder. "If you only see your doctor once or twice a year for a checkup, you can probably get away with a bit more distance in between," Lee says. "But if you have a chronic condition that requires more frequent visits, or you rely on public transportation, it's best to opt for a physician who is close to home."

3

APPOINTMENTS



Call or Click

Our primary care physicians and specialists have offices throughout Northwest Indiana. Call **219-836-3477** between 8:30 a.m. and 5 p.m. Monday–Friday for a free referral.

actual checkup and take note of how everything goes."

Items on your mental checklist should include the friendliness of the front desk staff and your wait time. Talk to your doctor about treatment plans, but also trust your gut—if it just doesn't feel right, search for a new provider. It may take a little extra effort, but it's worth it to find the physician who's right for you. ■

What's the source of your seasonal suffering?



FREAK OUT OR CHILL OUT?

Test your health knowledge with these five winter situations



For most of us, winter brings a typical litany of coughs, aches and sniffles. The trick is knowing when that nagging cough or sore throat is a symptom of a common ailment or something more serious. We asked Joe Zachariah, DO, an infectious disease specialist and a founding member of the International Society of Travel Medicine, to provide some basic tips for self-diagnosis.

PHOTO BY GETTY/JOE FOX

Q You have a severe cold and wake up in the middle of the night with **intense, sharp pain behind your sternum.**

IS IT: Chest congestion or pericarditis?

PERICARDITIS. Pinpoint the location of the discomfort to distinguish between seasonal chest congestion and a more serious cardiac condition like pericarditis, in which the fibrous sac surrounding the heart becomes inflamed. With pericarditis, pain is felt behind the sternum and worsens with a deep breath, Zachariah says. With congestion from a respiratory illness, pain radiates along the rib cage. While many cases of pericarditis go away on their own, some can lead to life-threatening heart problems and should be treated promptly.

Q Without warning, you go on an **uncontrollable, dry coughing jag in the middle of a meeting.**

IS IT: Bronchitis or pertussis?

PERTUSSIS. Not to paint too graphic a picture, but the moistness of the cough distinguishes bronchitis from its more persistent and serious respiratory cousin, also known as whooping cough. Bronchitis is marked by “a rattle in the chest that brings up some phlegm,” says Zachariah. Conversely, pertussis produces “unpredictable, spastic coughing ... like a burst of gunfire.” Duration is also key: Bronchitis may last only a few days, but untreated pertussis will linger for about six weeks. Seek early treatment for pertussis, which is highly contagious.

Q You wake up one morning with a **sore throat and an angry-looking red splotch** on your tongue.

IS IT: Strep throat or tonsillitis?

STREP THROAT. Swallowing ability is the main difference between these maladies of the throat. “With tonsillitis, the chief distinction is not the soreness (of the throat), but difficulty swallowing,” Zachariah says. “Sometimes, you will also see a pharyngeal abscess, which produces pus deposits in the throat.” By contrast, strep throat presents what physicians call “strawberry tongue”—an inflammation of the taste buds—and can be treated with antibiotics.

Q You escape the winter weather with a trip to Hawaii but miss the opening-night luau with a **102-degree fever, coughing and aches** all over.

IS IT: Flu or pneumonia?

FLU. Like the common flu, pneumonia is often accompanied by fever and coughing. But with the flu, body aches predominate. “With pneumonia, sufferers might get sudden onset of chills and sweat so sudden they can’t control it,” Zachariah says, “and they may have asymmetrical pain in the chest in the right or left lung.”

Q You’ve always been sensitive to winter dryness, but now that patch of **scaly skin** on your leg looks **red and swollen.**

IS IT: Eczema/psoriasis or dry skin?

DRY SKIN. Dry skin can be distinguished from inflammatory skin conditions by the pattern and texture of the disruption. “If you have a silvery, scaly patch over your skin, that’s the tip-off for psoriasis, whereas with winter dryness, the skin has a parched quality,” Zachariah says. “In eczema and psoriasis, the pattern is also generally localized to joint surfaces like the knee and elbow.”

Zachariah cautions against dismissing dry skin as a mere inconvenience. Cracked skin is prone to bacterial infections like cellulitis, which commonly affects the lower legs and causes swelling, heat and tenderness. “I recommend applying petroleum jelly or baby oil to your skin every morning after your shower,” he says. ■

VIDEO



Dry Skin Rescue

Is your skin parched this winter? Get tips about skin-care products, humidifiers and other ways to relieve dry skin in a video from the American Academy of Dermatology. Visit bit.ly/1CvDvTe.

A WORRYWART'S GUIDE TO CANCER

How much should you be concerned about possible environmental causes of cancer?



You've probably heard that cellphones can cause cancer—as can computers, artificial sweeteners and even microwaves. It may seem like cancer risks are everywhere, but much of what is rumored to cause cancer doesn't.

Fewer than half of Americans understand cancer risks, a recent survey by the American Institute for Cancer Research revealed. It found that most Americans believe that genetically modified foods, food additives and pesticides used on produce cause cancer, though no definitive evidence exists. The survey also reported that most Americans don't realize that alcohol use, lack of physical activity and poor diet increase cancer risks.

As research investigating the environmental causes of cancer continues, let's set the record straight with what we know through sound science.



MYTH: Constant cellphone conversations lead to cancer.

FACT: Studies show no definitive link between cellphone use and cancer, but research continues in this relatively new area. Cellphones emit non-ionizing radiation, the type that isn't cancerous. X-rays and radon emit ionizing radiation, which can cause cancer.

WORRY SCALE: 😐

MYTH: Hormones used in dairy cows can cause cancer in humans.

FACT: Although the recombinant bovine growth hormone (rBGH) has adverse effects on cows, it's unclear whether milk from hormone-fed cows harms humans. Studies haven't confirmed the relationship between growth hormones and certain tumors, the American Cancer Society says.

WORRY SCALE: 😐

MYTH: Antiperspirants that contain aluminum can cause breast cancer.

FACT: Although no conclusive evidence links antiperspirants and breast cancer, some research suggests that the aluminum in antiperspirants, when absorbed by the skin, can mimic the effects of estrogen—which promotes the growth of breast cancer. The National Cancer Institute says more research is needed.

WORRY SCALE: 😐

MYTH: Sunscreen is enough to prevent skin cancer.

FACT: Sunscreen doesn't prevent skin cancer or protect skin from all ultraviolet rays. Don't use sunscreen as an excuse to stay out in the sun all day, and make sure you use one with an SPF of at least 30.

WORRY SCALE: 😐

MYTH: Alcohol has no connection to cancer.

FACT: Consistent heavy drinking is linked to cancers of the mouth, throat, liver, colon, pancreas and breast. Alcohol can cause organ and tissue inflammation and can slow the ability of cells to repair themselves, which can create cancerous cells.

WORRY SCALE: 😞

MYTH: Smoking causes only lung cancer.

FACT: In addition to lung cancer, smoking increases risk of kidney, bladder, pancreas, nose, throat, mouth, stomach and cervix cancers. Chemicals in cigarettes weaken the body's immune system and damage or change a cell's DNA. Once a cell's DNA is damaged, it can create a cancerous tumor.

WORRY SCALE: 😞

MYTH: Using a microwave increases cancer risk.

FACT: Food and water that have been microwaved are not radioactive, nor do they cause cancer. The radio waves cause the molecules to heat up, but the chemical structure of the food remains unchanged and is safe to eat.

WORRY SCALE: 😊

MYTH: Tanning beds are safe because the bulbs produce UVA rays, not UVB rays.

FACT: In 2009, the International Agency for Research on Cancer confirmed that tanning beds can cause cancer. Although tanning-bed bulbs emit more UVA rays than UVB rays, UVA rays are just as dangerous as UVB rays, researchers found.

WORRY SCALE: 😞

MYTH: Reusing plastic water bottles can lead to cancer.

FACT: An urban legend warned that reusing plastic bottles, especially those exposed to heat, is dangerous because the plastic contains diethylhexyl adipate (DEHA). Most plastic water bottles, however, don't contain DEHA, and the chemical compound hasn't been classified as cancerous by the American Cancer Society or the International Agency for Research on Cancer.

WORRY SCALE: 😊

WORRY SCALE

- 😊 Definitely don't worry
- 😐 Keep it in mind
- 😊 Don't worry
- 😞 Definitely worry
- 😐 Don't worry too much

QUIZ



Know the Facts

Can men get breast cancer? Do women still need mammograms after menopause? Test your breast cancer knowledge by taking a quiz at cancer.org/healthy/toolsandcalculators/quizzes today.

THREE WAYS TO COOK SWEET POTATOES

These root vegetables are packed with nutrients and flavor—no butter and brown sugar required



The sweet potato might look humble, but under its skin lie powerful nutrients (offering 400 percent of your daily vitamin A!). Although home cooks often smother them in butter or brown sugar, sweet potatoes taste nuanced and indulgent even without embellishment.

Besides vitamin A, which promotes eye health, these nutritional powerhouses are rich in immunity-boosting vitamin C; beta carotene, which is converted to vitamin A; and heart-helping potassium. Packed with fiber, they're also a great source of complex carbohydrates.

"They boost energy, but they're not going to spike someone's blood sugar like white rice or white bread," says registered dietitian Lori Zanini, a spokeswoman for the Academy of Nutrition and Dietetics. Sweet potatoes also don't need heavy pesticides to survive. "Because so few chemicals are used during the growing process, they're a good option for a shopper on a budget who'd rather buy conventional produce instead of organic," she says.

Here are three of Zanini's favorite ways to prepare sweet potatoes.

1 HASH THEM

Add olive oil to a skillet over medium heat and sauté sliced onions until they're translucent. Add cubed sweet potatoes and apples and season with salt, pepper and thyme; cook for 10 to 15 minutes until they have softened and can be easily pierced with a fork. Serve as a breakfast dish, topping with a poached egg if desired.

2 ROAST THEM

Peel and cube sweet potatoes. Place them on a foil-lined baking sheet and season them with olive oil, salt, pepper, rosemary and garlic. In a 375 F oven, roast them until tender (about 30 minutes). Add onions to the roast for additional flavor.

3 TURN THEM INTO BURGERS

Follow the directions for roasting. Mash sweet potatoes in a bowl, then stir in corn kernels, black beans, cilantro and a dash of cayenne pepper. Shape into patties and cook by sautéing in olive oil over medium-high heat until golden, about 5 minutes. (Or bake patties on a foil-lined sheet for about 30 minutes in a 375 F degree oven, flipping once.) Serve on a bun with lettuce and other toppings if desired. ■



THE SCOOP ON SWEET POTATOES

Q Are sweet potatoes actually potatoes?

Despite the name, they aren't even related, coming from different plant families. Regular spuds are higher in iron and potassium, but sweet potatoes win for levels of vitamins A and C. So include both in your diet.

Q Is yam just another word for sweet potato?

Nope. From yet another plant family, yams are drier, starchier and have less fiber and vitamin C than sweet potatoes. Grocery stores often mistakenly label sweet potatoes as yams. Because yams are common in Africa and Asia but less frequently grown in the United States, you're most likely buying sweet potatoes.

Q Is the flesh always orange?

Depending on the type of sweet potato, the inside might be white, yellow, orange-red or even purple. Yellow and orange tones indicate high levels of beta carotene.

Q Can I eat the skin?

You can and should, as the skin is high in fiber. (You'll also save on prep time!) Just be sure to scrub it first with a clean brush.

WEBSITE



Sweet Spot

For inventive ideas on preparing sweet potatoes—from sweet potato oatmeal cookies to sweet potato sausage balls—visit the Mississippi Sweet Potato Council site at mssweetpotato.org and click on “Recipes.”

LOOKING AT AUTISM



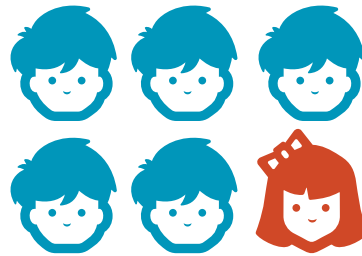
The average age for diagnosis of autism spectrum disorder.

1/68

children in the United States has autism, a ratio that has increased 30 percent since 2012.



The high school graduation rate for students with disabilities.



Autism is almost **FIVE TIMES MORE COMMON** in boys than girls.

\$8,600

The extra annual cost of educating an autistic child.



From 2000 to 2010, the prevalence of autism rose about 120 percent. Experts speculate that the increase may be due to how autism is identified and diagnosed in children, but what specifically is causing the increase is unknown.

50% More than half of people with autism weren't employed or hadn't pursued further education two years after high school.

Sources: National Institutes of Health; Centers for Disease Control and Prevention; U.S. Department of Education; American Academy of Pediatrics

WHAT WE KNOW ABOUT AUTISM AND VACCINATIONS

A measles outbreak early this year cast a spotlight on parents who choose not to immunize their children for various reasons, including fear of the vaccinations leading to other issues, including autism.

The outbreak made clear, however, that children who don't receive vaccinations are susceptible to diseases, like measles. Although research into the causes of autism is ongoing, studies have repeatedly shown that vaccinations aren't one of them.

"We can say without a doubt that vaccines are not triggering autism,"

says Mark Sawyer, MD, a member of the American Academy of Pediatrics Committee on Infectious Diseases.

Immunizations protect children by inducing an immune response that prevents infections from taking hold. Vaccinations are particularly important for children because they lack strong immune systems.

"We wouldn't use a vaccine for a disease we didn't think people would be exposed to," Sawyer says. "The risk from the diseases is always higher than the risk from the vaccine."

VIDEO



Living with Autism

In a TED talk, 16-year-old Rosie King discusses the uniqueness of living with autism. To see her presentation, "How Autism Freed Me to Be Myself," visit ted.com/talks and search for her name.

What's New



The new, innovative 3T MRI is available at Community Hospital.



Nurse Roberta Bach helps set up a treatment for Juana River of Chicago in the infusion clinic at St. Catherine Hospital.



St. Mary Medical Center is offering cancer patients the TrueBeam™ Radiotherapy System, an advanced medical linear accelerator.

1 Image Excellence

For patient comfort and convenience, Community Hospital in Munster has introduced advanced magnetic resonance imaging (MRI) technology to more efficiently diagnose brain, spine and musculoskeletal and soft tissue conditions.

“The Siemens Magnetom® Skyra 3T Open Bore MRI operates at twice the strength, speed and clarity of a traditional MRI, shortening scan times,” says Don Fesko, Community Hospital CEO. “The result is a faster, more comfortable exam for patients.”

Community Hospital’s 3T MRI combines quality and convenience to give you an exceptional patient experience. A physician order is required for MRI testing. For your convenience, MRI testing may be scheduled through our Central Scheduling department at 219-836-4599.

2 Quality Care

Oncology services of St. Catherine Hospital have teamed up with Northwest Oncology Clinic and expanded patient



**Oncologist
Mohamad
Kassar, MD**

care services at the hospital in East Chicago. Led by Oncologist Mohamad Kassar, MD, patients have new exam rooms for outpatient visits, a full-service infusion clinic and CyberKnife® services.

“Collaborating with Northwest Oncology Clinic was the perfect partnership, combining quality, compassionate care and innovative technologies,” says Craig Bolda, chief operating officer of St. Catherine Hospital. “We know that being diagnosed with cancer can be overwhelming for patients and their families. We are committed to keeping everyone close to home while receiving treatment and maintaining a positive quality of life.”

For more information or to make an appointment, call 219-392-7197.

3 Advanced Treatment

Cancer patients have a powerful ally in the form of new technology that is delivering hope and treatments closer to home. St. Mary Medical Center has acquired the TrueBeam™ Radiotherapy System, an advanced medical linear accelerator. The treatment system is fast and precise and can be adjusted to provide many forms of tracking and targeting external beam therapies, allowing doctors to tailor treatments to each patient’s specific case.

In addition to faster treatments, TrueBeam’s enhanced communication technology enables the therapist operating the equipment to constantly interact with the patient, offering reassurance and a more comfortable experience.

For more information about the cutting-edge technology and minimally invasive procedures offered by St. Mary Medical Center in Hobart, visit comhs.org/stmary. ■

Maria Liberio, PT, DPT,
of Therapy Services at
Fitness Pointe (standing)
demonstrates a side-lying
hip assisted pelvic floor
contraction with Sarahann
Callaway, PT, DPT.



Ebbing the Flow

Taking control after incontinence



Incontinence is a sensitive subject that can be painfully private and difficult to discuss. But Ann*, a Hammond resident who loves lunching with girlfriends, riding her bike and shopping, is excited to share her experience with urinary incontinence after seeking relief from the professionals at Community Hospital in Munster.

“I would recommend them to anyone,” says Ann. “Everybody there is just wonderful. I’ve been taking advantage

of their services for a while, and I’ve always had good experiences.”

Community Hospital offers a full range of diagnostic and therapeutic services fortified with the expertise of highly skilled professionals to provide compassion and understanding for patients with incontinence issues.

What Is Urinary Incontinence?

Essentially, urinary incontinence is loss of bladder control, resulting in mild

“Strengthening the pelvic floor muscles through exercise can improve bladder control,” says Maria Liberio, PT, DPT.

leaking to uncontrollable wetting. The most common types are stress incontinence and urge incontinence. With stress incontinence, the pelvic muscle weakens and urine may leak when an individual laughs, coughs, exercises or lifts a heavy object. People with urge incontinence leak when they have to use the restroom and cannot get there fast enough. Some people may just have urgency symptoms without leaking, and urinate more than every two to three hours.

Factors such as multiple pregnancies, being overweight and abdominal or pelvic surgery may increase the risk of developing incontinence. Individuals of all ages may experience symptoms, but most do not seek proper treatment because of embarrassment.

“I was changing pads throughout the day, and two to three times a night,” says Ann. “Every time I went out, I had to remember to carry supplies with me and know where the bathrooms were because I would have to go several times.

“This had been happening for a couple of years, but I thought it was just a normal part of aging,” says Ann. “I also have had six kids, so I thought that might be a factor.”

Relief in Sight

Community Hospital Physical Therapist Sarahann Callaway, PT, DPT, engaged Ann in a series of therapeutic exercises to help strengthen her pelvic muscles and decrease the severity of her incontinence.

“I can’t believe how quickly it worked,” says Ann. “I’ve only had four or five sessions, and it’s already helped. My legs

don’t hurt as much or feel as tired when I’m walking, and my back feels better.”

Ann still has a few sessions left before her therapy is complete, but she has already begun regaining the activities she loves. The ultimate result of treatment is an overall improvement in the quality of life for people who have been previously limited by these conditions.

“Strengthening the pelvic floor muscles through exercise can improve bladder control,” says Maria Liberio, PT, DPT, physical therapist and clinical specialist of Therapy Services at Fitness Pointe. “We may use biofeedback to help identify the correct muscles and teach patients the proper techniques when performing exercises that assist in retraining the muscles of the pelvic floor.

“The combination of activating the core muscles of the hips, abdomen and back helps the pelvic floor muscles work properly,” says Liberio. “It is important to keep all these muscles strengthened and working together for ultimate health.”

Physical Therapy for Pelvic Pain

For those whose lives have been disrupted by pelvic pain, physical therapy also may be the right option, she says.

“Oftentimes people suffer with pelvic pain due to endometriosis, pelvic organ prolapse, irritable bowel syndrome, constipation, chronic prostatitis, episiotomy scars and abdominal scars postsurgery,” says Liberio. “These conditions may cause muscle imbalances that can result in future incontinence if left untreated, but many options for pelvic pain relief

are available, including therapeutic exercise, manual therapy, biofeedback and lifestyle changes.”

Physical therapy evaluations require a physician referral. During the initial appointment, the physical therapist will review your history and symptoms. A plan of care and home exercise program will be customized to your individual needs.

Discussing your condition with your physician is the first step toward relief. Various tests may be performed to determine the cause and treatment options based on your condition. ■

**Name has been changed to respect the privacy of the patient.*

CALL



Treatment Is Available

Learning the cause of incontinence is the first step toward relief. To find a physician on staff at Community Hospital who specializes in incontinence, call **219-836-3477** or **866-836-3477**. For information about outpatient physical therapy for incontinence, call Community Hospital Fitness Pointe® at **219-934-2840**.

The LINK Between Diabetes and Depression

Teaming up to treat the whole person BY ANGELA MOORE



When Anthony* was recently diagnosed with diabetes at St. Catherine Hospital, he realized his life would forever change. He battled with depression as he accepted his diagnosis. Now, with the combination of educational services from the outpatient Diabetes Center and counseling through Behavioral Health Services, he is on a healthier path. >

“I was down and out, learning that I had to make a lot of changes,” he says. “I worried all the time, thinking that I let everyone down, especially family. With the support of St. Catherine Hospital, I am learning to change everything—my eating, my lifestyle and most importantly my thinking,” says the 60-year-old East Chicago resident.

According to Jake Messing, program director for Community Healthcare System’s Behavioral Health Services, depression not only affects the brain



Behavioral Health Program Director Jake Messing, RN

and behavior—it affects the entire body. Depression has been linked with other health conditions, including diabetes. Dealing with more than one health issue at a time can be difficult, so proper treatment is important.

“Feeling down once in a while is normal,” explains Messing. “But some people feel a sadness that just won’t go away. Life seems hopeless. Feeling this way most of the day for two weeks or more is a sign of serious depression.”

In addition to possibly increasing the risk for depression, diabetes can heighten symptoms of depression. The stress of managing diabetes every day and the effects of diabetes on the brain are contributing factors.

The Cortisol Connection

According to Messing, people who are depressed have elevated levels of stress hormones such as cortisol, which can lead to fluctuation in glucose or blood sugar metabolism, increased insulin resistance and the accumulation



Psychiatrist Joseph Fanelli, MD

of belly fat—all diabetes risk factors, he says. “There is long-term stress and strain associated with diabetes management such as blood sugar control and treatment for complications, and this can lead to decreased quality of life and increased probability of depression,” Messing says.

“Both are very common diseases,” says Joseph Fanelli, MD, medical director of Behavioral Health Services.

“Diabetes can make depression worse because it’s a chronic illness with a lot of worries.

“So much of the treatment for diabetes is self-care, and people who are depressed may not take good care of themselves,” says Fanelli. “They don’t exercise as much and may have other issues in terms of watching their diet, checking their blood sugar and taking medications.”

The Emotional Side

According to Virginia Ait Said, clinical nurse specialist and Diabetes Education coordinator at the Center for Diabetes, the emotional side of diabetes is an important one to tend to during treatment. “This speaks to the burden associated with diabetes,” Ait Said says. “Changes in diet and lifestyle, and the burden of injections can lead to increased levels of distress.

“Clinicians are working to do a better job,” she says. “We know that if you’re distressed once you have diabetes, you’re at increased risk for poor self-management, complications and possibly death.”

“I feel very blessed to be a patient at St. Catherine Hospital,” says Anthony. “I not only have my life back, I have a quality life.” ■

**Name has been changed to respect the privacy of the patient.*

THE CENTER FOR DIABETES AT ST. CATHERINE HOSPITAL

With a focus on self-management, the Center for Diabetes’ programs are designed to meet the individual needs of patients. When hospitalized for diabetes-related problems, patients are admitted to the Center for Diabetes, where they undergo a comprehensive assessment to determine the severity of the disease. Then they meet with the Center’s specialized health-care team to develop a personal diabetes self-management plan, covering everything from daily living skills and self-monitoring to meal planning and exercise.

For information on the various diabetes education programs available to the public, call **219-392-7786**.

CALL



Learn More

For more information about Behavioral Health Services, call **219-392-7025**.

CUTTING EDGE CRITICAL CARE

New ICU opens at St. Mary Medical Center



St. Mary Medical Center recently celebrated the ribbon-cutting of the new ICU. On hand (from left) are Mary Sudicky, CFO, St. Mary Medical Center; Tammie Jones, DNP, MS, RN, chief nursing officer and vice president of Patient Care Services, St. Mary Medical Center; Mary Ann Shacklett, CFO and senior vice president, Community Foundation of Northwest Indiana; Frankie Fesko, chairman of the board, Community Foundation of Northwest Indiana; Bob Welsh, board member, St. Mary Medical Center; John Gorski, president and CEO, Community Foundation of Northwest Indiana; Janice Ryba, CEO, St. Mary Medical Center; Ken Krupinski, chairman, St. Mary Medical Center board of directors; Joan Scully; Sharon Harig, MD, medical staff president, St. Mary Medical Center; Michael Deis Jr., project manager, Walsh Construction; and Ken Gurtowski, VOA Architects.



When it comes to delivering the most complex critical care to patients,

St. Mary Medical Center is ushering in a new standard of medical excellence that Northwest Indiana residents can rely on.

This past July, the hospital opened its 20,000-square-foot intensive care unit (ICU), featuring advanced technologies in a bright, modern space. Located on the second floor of the new four-story surgical pavilion, the 20-bed unit culminates the first phase of the hospital's 115,000-square-foot construction project.

"The thoughtful design and leading-edge technologies incorporated into this space allow staff to provide

improved comfort and care for our most vulnerable patients and their families," says Janice Ryba, CEO of St. Mary Medical Center. "Every detail we've implemented in the new ICU will enhance the abilities of our talented physicians and staff to deliver the highest quality care as efficiently as possible."

Each patient room of the new unit includes an innovative call light system, enhanced monitoring capabilities and state-of-the-art critical care beds. Select rooms also offer specific features such as negative pressure options, as well as special accommodations for bariatric, cardiothoracic, neurosurgical and vascular patient care. The new unit features designated nursing workspace located



Each patient room of the new ICU includes an innovative call light system, enhanced monitoring capabilities and state-of-the-art critical care beds.

between every two rooms to allow nurses enhanced visibility of patients.

“Delivering the highest quality critical care medicine is becoming increasingly important as our population ages and the demand for this level of care grows,” says Sharon Harig, MD, president of the medical staff. Harig’s father, John T. Scully, MD, was memorialized in the naming of the unit. “St. Mary Medical Center is continuing with our tradition of producing excellent patient outcomes in a comfortable, healing environment.”

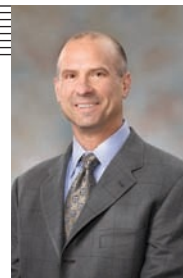
The new building that houses the ICU is linked to the existing six-story west patient tower through a walkway, and is served by a bank of two public elevators. There are also staff-restricted elevators in the new pavilion to deliver patients directly to the new ICU from the operating rooms below.

“We now offer the highest level of technology and equipment available in the industry,” adds Tammie Jones, DNP, MS, RN, chief nursing officer and vice president of Patient Care Services. “But we understand that technology is only as good as the people using it. Our entire medical team—nurses, physicians, aides and technicians—offer the knowledge and expertise to integrate these features for the optimal benefit of our patients.”

“The new ICU allows us to meet the most complex needs for our most critical patients,” adds Ryba. “Combine that with the expertise of our staff in a bright, modern healing environment and we can say we’ve advanced the standard of healthcare in Northwest Indiana to a higher level.” ■

NEW ICU FEATURES INCLUDE:

- Enhanced cardiac monitors with additional carbon dioxide measuring features, providing clinicians with early warning of any respiratory difficulties.
- State-of-the-art critical care bed system that helps support early mobility of patients.
- Call light system that enhances communication between physicians, nurses, patients and family.



**General and
Bariatric
Surgeon Paul
Stanish, MD**



WEIGHING IT OUT

Bariatric Surgeon Paul Stanish, MD, answers some of the heaviest questions about weight loss

Q Is weight loss surgery right for me?

Many chronic health conditions such as diabetes, heart disease and asthma can be associated with obesity and significant weight issues. Individuals who are overweight with a body mass index (BMI) greater than 30 can greatly improve their health through medical or surgical weight loss programs such as Healthy 4 Life.

Q What are the most common causes of obesity?

The development of obesity is a complex interplay of forces that are behavioral, environmental and genetic. One common misconception is that overweight or obese individuals lack self-control or personal responsibility. The truth is that obesity has reached epidemic proportions primarily due to an environment that offers an abundance of calorie-rich, nutrient-poor foods and fewer opportunities for physical activity. Also, scientific studies have identified

several genes that regulate how our bodies capture, store and release energy from food. Those genes function differently within each individual.

Q When should someone consider weight loss surgery?

Anyone with a BMI of 40 or higher or a BMI of 35 with accompanying health conditions such as diabetes, heart disease, sleep apnea, hypertension or more should speak with their doctor about medical or surgical weight loss options.

Q How is the Healthy 4 Life program different from others?

Our board-certified bariatric surgeons and internal medicine physicians fellowship-trained in obesity medicine work collaboratively with a multidisciplinary team of health professionals to help patients achieve long-term success. St. Mary Medical Center's bariatric program has earned accreditation as a


Center of Excellence by the American College of Surgeons and designation as a Blue Distinction Center+ for Bariatric Surgery by Anthem Blue Cross/Blue Shield. These designations mean our programs have demonstrated superior quality outcomes when it comes to bariatric surgery services. ■

CLASS



Attend a Seminar!

Healthy 4 Life offers free monthly seminars in Hobart, Valparaiso and Munster for anyone who would like to learn more about medical and surgical weight loss options. Call us toll free at **866-836-3477**.



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