

# Healthy

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## COMMUNITY

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This issue:  
**HEART  
HEALTH**

**A HEART-TO-HEART WITH  
COMEDIAN AND ACTOR**

*Howie  
Mandel*





# A Heart TO Heart WITH HOWIE MANDEL

**The famed comedian talks about living with atrial fibrillation, a heart condition that affects up to six million Americans.**

**H**OWIE MANDEL has enjoyed a highly successful career in show business for more than 30 years. The comedian, actor, game-show host, and author can currently be seen on NBC's highly popular *America's Got Talent*, where he's been a judge for the past 11 seasons. Howie also has served as the executive producer and host for CNBC's show *Deal Or No Deal* and continues to perform as many as 200 stand-up comedy shows each year. But it hasn't been all fun and games for Howie. In 2009, he was diagnosed with atrial fibrillation, commonly referred to as AFib, an irregular and sometimes

rapid heartbeat that can lead to a stroke or heart attack. *Healthy Community* recently talked to Howie to find out how he's managing his AFib, and the lessons he's learned from the experience.

***How did you find out you had AFib?***

I was having a medical check-up for insurance purposes. The doctor asked me how I was doing, and I told him I had been feeling tired. The next thing I know, the doctor is taking out his stethoscope, putting it on my chest and then, almost immediately, says, "Uh oh." Believe me, those are the last words you want to hear when a doctor is checking your heart.

***What happened next?***

I had to have a cardioversion, you know, when doctors put those

paddles on your chest like in the movies to restart your heart. I mean, I told a doctor I was tired, and I end up getting my heart shocked. Fortunately, the cardioversion was successful in getting my heart back in rhythm, but it didn't last long. I had to have three or four cardioversions. I also wore a heart monitor. Every time my heart rate would go up, the monitor would notify a call center, someplace in Chicago, and they would call and tell me my heart was out of rhythm. One time, I was on *The Tonight Show*, talking to Jay Leno, and the phone started to buzz. I called back during a commercial break and they said I was really off the charts.

***How did you finally find a treatment that worked?***

I ended up going to a cardiologist and having two ablations. It's a procedure where doctors use electrical signals to make scars in the heart tissue in order to restore a normal heart rhythm. Today, I manage my AFib with medication. Every now and then, I still feel the symptoms, but it's so much better than what it was. I also have high cholesterol so I take a statin.

**Were there any warning signs before you were diagnosed?**

I knew there was something wrong, but I would always find a way to explain it away. I just thought I was overworked, overtired and undernourished. I was living by the edict that, if something hurts, walk it off. If I was tired or dizzy, I drank

some water. If I was out of breath, I would just think I was overdoing it. I was 54 years old at the time. I was a young guy. I was healthy. It never occurred to me that I might have a heart problem. But I did. That's the reason I tell people it's so important to go see your doctor if you're not feeling right. AFib can be managed, but if it isn't it, it can increase your risk for stroke by five times and even cause a heart attack.

**How do you feel today?**

Great! I'm running seven or eight miles a day, and I've got my energy back. I really try to take care of myself. I eat healthy, try not to overexert myself, and get plenty of sleep.

**Any final thoughts?**

Whether it's high blood pressure or AFib, there are all of kinds of silent killers that can affect your heart. And the ones that are the most dangerous are the ones we're not aware of. The best defense is awareness and knowledge. Be open and communicate with your doctors, friends, and family. Know the symptoms of heart disease and take action if you experience any of them. When it comes to heart health, knowledge is king.

“I knew there was something wrong, but I would always find a way to explain it away.”

# Home is Where the Heart is

**T**HE STRUCTURAL HEART & Valve Center's team is dedicated to providing patients with access to the most advanced treatments for structural heart and valve diseases. Our team of specialists includes board certified cardiologists, cardiothoracic and cardiovascular surgeons, interventional cardiologists and electrophysiologists.

Using a collaborative approach, the team determines the most effective treatment options and shares best practices to ensure patients receive the most comprehensive care available.

“Our team reviews procedure candidates during a weekly multi-disciplinary conference to carefully consider each patient's disease state and potential risks,” explains Samer Abbas, medical director of the Structural Heart program of Community Healthcare System.

“With input from each of the team members—surgeons, cardiologists, anesthesiologists, nursing and surgical staff—we determine if the proposed procedure is right for best possible outcomes of our patients.”

Patients can count on expertise and quality heart care at the hospitals of Community Healthcare System, as well as a better overall experience without having to travel far from home. The hospitals' commitment to providing the most advanced medical facilities and highly talented medical staff has led the way toward offering better medicine to residents of Northwest Indiana. ■

**Cardiac Care Services**



To learn more about Structural Heart & Valve Center services available at Community Hospital, Munster; St. Catherine Hospital, East Chicago, or St. Mary Medical Center, Hobart, visit [www.COMHS.org/heart](http://www.COMHS.org/heart).

# Stroke 101: Causes, Symptoms and Treatments



## What Is a Stroke?

A stroke occurs when a blood vessel that carries oxygen to the brain is blocked by a clot or ruptures. Within minutes, the nerve cells in that area of the brain are damaged, and the part of the body controlled by those cells cannot function properly.

Stroke is the fifth leading cause of death in the United States and one of the leading causes of serious long-term disability in senior adults. Someone in America suffers a stroke every 40 seconds.

## Know the Symptoms and Act F.A.S.T.

When a person has a stroke, seeking medical care as soon as possible is essential. Whenever possible, medical care should be administered within the first three hours after the symptoms appear. That's why it's so important to know the symptoms of a stroke, which usually occur very rapidly. If you think someone is having a stroke, just remember to act F.A.S.T.

**Face:** A stroke usually affects only one side of the body. Ask the person to smile. Is the smile uneven or only on one side of the face?

**Arms:** Ask the person to raise both arms. Does one arm drift downward?

**Speech:** Ask the person to speak a simple sentence. Are the words slurred?

**Time:** If the answer to any of the above questions is "YES," it's time to take action and call 911.

Treatment for a stroke can be very effective if given in a timely manner. About **87 percent** of all stroke cases are ischemic strokes, which occur when a blood vessel supplying blood to the brain is obstructed. The FDA-approved treatment for ischemic strokes, tPa, has proven highly effective in saving lives and reducing the long-term effects of stroke. In fact, research has shown that when tPa is given within three hours of having a stroke, the **10-year survival rate increases by 42 percent.** ■

**A**TRIAL FIBRILLATION (AFib) is one of the leading causes of stroke. In fact, almost 35 percent of all AFib patients will have a stroke at some time.

But AFib is only one of the many risk factors that can cause a stroke. Other risk factors include:

- High blood pressure
- Obesity
- High cholesterol levels
- Diabetes
- Previous stroke or Transient Ischemic Attack
- Over the age of 65
- Family history of stroke

### Lifestyle choices can also increase the risk of stroke:

- Lack of exercise
- Smoking
- Unhealthy diet
- Consuming more than two alcoholic drinks per day



# Symptoms You Should Never Ignore

**Know when you need to seek medical attention**

**H**OWIE MANDEL knew something was wrong when he kept feeling tired and out of breath.

But he kept finding excuses not to see a provider until he was finally diagnosed with atrial fibrillation (AFib). Ignoring certain symptoms can lead to an ER visit or hospitalization, two situations that everybody wants to avoid. If you experience any of these 10 symptoms, see your provider.

## 1 A Persistent High Fever

Having a fever is an indication that your body is fighting an infection. A fever above 103° or a fever that lasts more than three days could be signs of a serious infection.

## 2 A Cold That Becomes Severe

See your provider if your cold doesn't go away or develops the following symptoms:

- A severe cough that lasts more than two weeks. This could be a sign of whooping cough.
- A fever, muscle aches or other flu-like symptoms. This is especially true for seniors, expectant mothers and people with heart disease.
- Extreme difficulty swallowing, chest pain and shortness of breath.

## 3 Sudden Weight Loss

If you lose more than 10 percent of your body weight in six months

(and you're not obese), it could be a sign of an overactive thyroid, liver disease, depression or other medical conditions.

## 4 Shortness of Breath

This could be a sign of asthma, bronchitis or another medical condition that affects the lungs, especially if the symptoms are strong and come on suddenly.

## 5 Severe Chest, Pelvic or Abdominal Pain

All of these symptoms immediately demand a provider's attention. Chest pain could indicate a heart attack. Pain in the abdomen can be a sign of gallstones, especially if there's nausea and vomiting. Pelvic pain could indicate a kidney infection or appendicitis.

## 6 Changes in Urination or Bowel Movement

These can include bloody or black stools, diarrhea, constipation or excessive urination.

## 7 A Recent Fall

If you've fallen on your head or suffered a blow to the head, you need to watch for signs of a concussion. Symptoms include headache, confusion, lack of coordination, memory loss, nausea, vomiting, dizziness, ringing in the ears, sleepiness and fatigue. If you experience any of these, you need to seek medical attention immediately.

## 8 Unexpected Symptoms After a Procedure or Starting a New Medication

Before you have a medical procedure or surgery, get an immunization or start a medication, be sure you understand the known symptoms. Call your provider if you experience something unexpected.

## 9 Confusion or Changes in Mood

Trouble thinking or focusing, irregular sleep patterns or feelings of anxiety or depression can be the sign of a mental health issue or an infection or drug interaction.

## 10 Bright Flashes of Light

If you're experiencing sudden bright flashes of light in your vision, it could be a sign of retinal detachment, a serious condition that requires immediate medical attention to prevent permanent vision loss. ■

**For Emergency Care**



Emergency teams at Community Hospital, St. Catherine Hospital and St. Mary Medical Center are ready to provide you with fast expert care at a moment's notice. To learn more, visit [COMHS.org/services/emergency-care](https://www.comhs.org/services/emergency-care).

Source: Houston Methodist Hospital

# Choose *Community Healthcare System* for Expert Heart Care That's Always Ready and Always Close to Home.



*HEART DISEASE is still the leading cause of death* in the United States, responsible for about one in four deaths. With heart disease so prevalent and serious, the hospitals of *Community Healthcare System* offer a full range of diagnostic technology and therapeutic services to take care of your heart.

It starts with our Emergency Department, where expert physician specialists and a full array of diagnostic technology, comprehensive surgical capabilities, and many other life-saving resources are available 24/7. Here are some of the other cardiac services we provide right here in our community.

## Diagnostic Services

### Coronary Calcium Scan:

This non-invasive outpatient procedure uses a specialized X-ray test to take pictures of the heart and measure the amount of calcium in the walls of the coronary arteries, a sign of heart disease.

**Holter Monitor:** This small, battery-powered medical device is used to diagnose heart rhythm disturbances and to find the cause of palpitations or dizziness. Electrodes on your chest are connected to the device, which is slightly larger than a deck of cards, to capture your heart rate and rhythm as you go about your daily routine, usually for one or two days.

**Angiogram:** This test uses X-rays and a special dye to take pictures of the blood vessels. The dye is released into the coronary arteries using a catheter and allows physicians to clearly see the flow of blood through the heart.

**Cardiac MRI:** This painless non-invasive procedure uses radio waves and magnets to produce amazingly detailed images of the heart in action.

**Echocardiogram:** This test uses sound waves to create an image of your heart. The test can be used to examine the heart valves, check the size of the heart chambers and help determine if there is a risk of blood clots forming in the heart.

**Cholesterol Test:** This blood test helps determine the risk of blocked or narrowed arteries.

**Blood Pressure Check:** This test is a routine part of most medical appointments.

## Surgical Services

**Cardiac Catheterization:** A long thin tube is inserted into one of the large arteries in the body and threaded through the blood vessels to the heart to diagnose or treat a multitude of cardiac conditions.

**Coronary Angioplasty:** Used to open a blocked coronary artery, this minimally invasive procedure is not considered major surgery. A thin, expandable balloon is inserted into the artery and then inflated, expanding the blood vessel. The balloon is then

removed and sometimes replaced with a small wire mesh tube called a stent to help the artery remain open.

### Peripheral Angioplasty:

A minimally invasive procedure used to treat narrowed arteries that are reducing the flow of blood to the legs.

## Rehabilitation Services

### Cardiac Rehab

After a heart attack, people who participate in a cardiac rehab program are *57 percent less likely to die from another cardiac-related event* compared to those who don't. Our team of cardiologists, nurses, dietitians and physical therapists will develop an exercise program customized to your specific needs and goals. They can also help you stop smoking, manage your blood pressure and recommend a heart-healthy diet.

### Stroke Rehab

After hospitalization for a stroke, many patients still have difficulties with



physical mobility, speech and mental functions. In fact, stroke is the leading cause of serious, long-term disability in the United States. Fortunately, through rehabilitation, stroke victims can relearn many of the skills they've lost, regain their independence and improve the quality of their lives. ■

#### Free Heart Education



Community Healthcare System offers free heart health education for patients to learn to recognize the signs of a heart attack. Visit [COMHS.org/heart](https://COMHS.org/heart) for more information.

## Understanding Heart Disease

Heart disease is the term used to describe a wide range of medical conditions that affect your heart. Let's take a look at the four most common types of heart disease.

### ♥ Coronary Artery Disease

The most common type of heart disease is coronary artery disease (CAD). With CAD, the arteries that supply blood to the heart become hard and narrow. This prevents the heart from receiving the oxygen and nutrients it needs to function well. CAD is the leading cause of death in the United States.



### ♥ Arrhythmia

An arrhythmia is an abnormal heart rhythm. During an arrhythmia, the heart beats too fast (tachycardia) or too slow (bradycardia) or with an irregular rhythm. Atrial fibrillation, commonly known as AFib, is the most common type of heart arrhythmia.

### ♥ Heart Valve Disease

Your heart has four valves that open and close to direct blood flow through your heart. Heart valve disease occurs when there is a narrowing (stenosis), leaking (regurgitation or insufficiency) or improper closing (prolapse) of the valves.

### ♥ Heart Failure

This type of heart disease, also known as congestive heart failure, occurs when the heart muscle is doing a poor job pumping blood through the body. Coronary artery disease and high blood pressure are two of the medical conditions that cause the heart to become too stiff or weak to function well.

# Breakthrough

## to Better Health



**Above:** After her procedure, Henrietta Palmer makes a follow-up visit to her cardiologists' office and gets a final okay from the Mitral Valve Repair team to get back to the things she loves to do.

## Heart specialists perform Northwest Indiana's first minimally invasive mitral valve repair.

by Karin Saltanovitz

**H**ENRIETTA Palmer found herself at a crossroads. At 84, Palmer liked to stay busy, but she was having a

hard time breathing. She had recently recovered from two rounds of double pneumonia, but she knew something else was wrong.

"I could hardly walk 10 feet without gasping for a breath," she says.

A visit to a cardiologist showed severe mitral valve regurgitation which places extra strain on the heart because with blood pumping

backward, there is less blood going forward. If left untreated, it could cause heart failure.

Doctors had previously told her she needed to have surgery, but she did not think her body could endure the stress of open heart surgery and the risks associated with traditional surgery. She wanted a less invasive option.

A visit for a second opinion with Community Healthcare System's cardiac team at Community Hospital provided that option.

MitraClip™, a Transcatheter Mitral Valve Repair (TMVr) device, gives new hope to patients who suffer from severe heart disease, but who are not ideal candidates for a complex open heart surgery.

After talking everything over with her family, Palmer agreed and became Community Healthcare System's first TMVr patient.

"The hospitals of Community Healthcare System have a well-established history of providing excellence in cardiac care from routine screenings to complex treatments," says Samer Abbas, MD,



medical director of cardiovascular services at Community Hospital and the healthcare system's Structural Heart program. "That's why we are uniquely positioned to spearhead programs such as TMVr that benefit the entire Northwest Indiana community."

TMVr is a less invasive approach to open heart surgery that does not require the patient to be placed on a heart-lung machine. Instead, while under sedation, a catheter is inserted into the groin area and threaded through a vein to the heart to gain access to the left-sided heart chambers and enable repair of the mitral valve.

The MitraClip device is a small metal clip covered with a polyester fabric that is implanted on the mitral valve. The device treats mitral valve regurgitation by fastening together a small area of the mitral valve's flaps. During the procedure, the valve continues to open and close on either side of the clip. This allows blood to flow on both sides of the clip while reducing the flow of blood in the wrong direction. Once the MitraClip is advanced into position using a guidewire, set into place below the regurgitating valve and the clip arms opened, the guidewire and delivery system are removed from the heart chamber.

**“I just cannot put into words how grateful I am to the doctors and the hospital. It's a miracle what they can do.”**

Palmer felt so good after her surgery that she was not even sure it had happened.

"I didn't feel a bit of pain," she says. "This is truly lifesaving. At my age, I was debating should I or shouldn't I have surgery. I was really worried. I just cannot put into words how grateful I am to the doctors and the hospital. It's a miracle what they can do. They can save so many lives by offering this treatment option."

The TMVr procedure is performed in a state-of-the-art hybrid operating suite at Community Hospital. This specially equipped surgical suite utilizes real-time image guidance and continual medical



**Above:** Community Healthcare System's Mitral Valve Repair team of specialists includes (left to right) Jessica Kiszka, structural heart/valve nurse practitioner; Michael Eng, MD, chief of cardiothoracic surgery, Community Healthcare System; Omar Husseini, MD, director of echocardiography, Community Hospital; Samer Abbas, MD, medical director of cardiovascular services at Community Hospital and the Structural Heart program of Community Healthcare System and Jill Conner, administrative director, Structural Heart Services, Community Healthcare System.

assessment at the same time, making this type of advanced procedure possible.

With advanced video integration technology, surgeons and anesthesiologists can view multiple forms of information simultaneously including blood pressure and radiology images as well as other patient vital signs and images taken prior to surgery.

The Structural Heart & Valve Center at the hospitals of Community Healthcare System is among an elite few in Indiana to offer patients MitraClip™ for mitral valve repair, WATCHMAN® for stroke prevention in atrial fibrillation, balloon valvuloplasty for both aortic and mitral valve stenosis and TAVR.

"Community Healthcare System has a long-standing commitment to providing the most advanced medical facilities and highly-talented medical staff," says Lou Molina, CEO of Community Hospital. "This is one of the many reasons Community Hospital is uniquely positioned to provide programs such as TMVr that benefit our patients and our entire Northwest Indiana community." ■

#### Cardiac Care Services



For more information on the Structural Heart & Valve Center, call 219-703-5301 or visit [COMHS.org](http://COMHS.org).

# Healthy Beginnings

## Family Birthing Center staff earns honors for mom-baby care

by Debra Gruszecki



**A** NEWS STORY HEADLINE more than two years ago queried, “What’s Killing Indiana Infants?” The investigative piece cited 2017 federal statistics and revealed that roughly 600 Indiana babies had died before their first birthdays that year alone. From 2013 to 2017, three ZIP codes with the highest infant death rates in Indiana were in northern Lake County, according to state health records.

Taking charge in the nurseries and in childbirth preparation classes, Community Healthcare System Family Birthing Center nursing staff had unified in the same goal years ago to remain ahead of that curve. Community Hospital; St. Catherine Hospital and St. Mary Medical Center’s Family Birthing Center healthcare professionals have been leaders in safeguarding infants, mobilizing to put significant initiatives in place to set standards for healthy pregnancies and programs to give every infant their best start in life.

Last October, preliminary data showed the infant mortality rate fell three years in a row to the lowest level since 1900 when the Indiana State Department of Health statistics were first recorded. Thanks to vigilant efforts by the hospitals’ nursing staff, newborns and preemies in the nurseries at Community Healthcare System hospitals are thriving through the first year. News headlines reflected the

nurses’ hard work when Indiana Gov. Eric Holcomb commended hospitals, birthing professionals and community-based health organizations for their collective actions to protect our youngest.

“With every new initiative, one needs to take that first baby step before you can walk and run,” says Jean Gardner, director of Education Services for Community Healthcare System. “We’re proud to say that we’re well into our run to ensure women have the tools they need to achieve a healthy pregnancy and have someone walk with them throughout their parenting journey.”

**With every new initiative, one needs to take that first baby step before you can walk and run.**

For dedication to promoting optimal health during pregnancy through a baby’s first steps, the Family Birthing Centers of Community Healthcare System have achieved several state and international recognitions.

The Indiana Hospital Association (IHA) has presented all three Family Birthing Centers with the INspire Hospital of Distinction 2020 award in

October 2020. The award recognizes staff for their commitment to doing everything possible to ensure the health of new moms and their babies from conception through postpartum care.

Hospitals earning the award meet criteria for infant initiatives on safe sleep, along with key drivers of maternal and infant health:

- Infant Safe Sleep
- Breastfeeding
- Tobacco use
- Perinatal substance use
- Obstetric hemorrhage

“We are proud of the role we continue to play across Community Healthcare System to reduce Indiana’s maternal and infant mortality reduction programs and achieve Governor Holcomb’s state challenge to be the ‘Best in the Midwest’ by 2024,” says Tracy Sharp, RN, Family Birthing Center nurse manager, St. Catherine Hospital.

St. Catherine Hospital has been lauded by Lake Area United Way for efforts in mentoring first-time at-risk moms and offering mental health counseling. The hospital also partnered with Safe Haven to have a baby box installed as an added protective measure to enable a woman to anonymously surrender a newborn into a safe caring environment.

“Maternal and child health and a reduction in infant mortality are among the state’s highest priority health initiatives,” says Brittany Pankiewicz, Family Birthing Center nurse manager, St. Mary Medical Center. “It is a top priority of Community Healthcare System, as well. We are proud to be able to lead the way in creating effective solutions to help women and their babies have a healthy successful first year in life.”

Some of those creative solutions have led St. Mary Medical Center to be designated as a Baby-Friendly Hospital by Baby-Friendly USA. The nursery also has received Level II OB and Level II nursery from the Indiana State Board of Health.

“This level of care allows for specialized care of moderate to high risk conditions affecting moms and babies in our community,” says Pankiewicz.

To help provide continuity in care for high-risk pregnancies, Community Hospital has a maternal-fetal medicine program, laborists on staff 24/7 and an Obstetric Emergency Department (OB-ED). The OB-ED is dedicated solely to pregnant women and those up to six weeks postpartum to ensure they receive timely diagnosis and treatment. Additionally, with regard to best breastfeeding practices, Community Hospital in 2020 became the only hospital in Northwest Indiana to receive the



**Above from Top:** Community Hospital, Munster’s Mother-Baby staff is helping to provide continuity in care for high-risk pregnancies with a maternal-fetal medicine program, laborists on staff 24/7 and an Obstetric Emergency Department (OB-ED). These programs and services are helping moms and babies get a healthier start in the first year.

St. Catherine Hospital Family Birthing Center staff has earned recognition from the state of Indiana for healthy baby initiatives including mentoring first-time at-risk moms and installing a Safe Haven baby box.

St. Mary Medical Center’s Family Birthing Center staff has earned the Indiana Hospital Association’s INspire award for programs and education in the form of healthy mom-baby initiatives that are leading to healthier beginnings for new families.

International Board of Lactation Consultants’ Care Award for its ‘role model’ efforts to promote optimal infant feeding.

“Community Healthcare System hospitals have a strong history of helping mothers and babies succeed in the first year of life,” says Lauren Hovan, RN, manager of Community Hospital’s Family Birthing Center. “Education and quality care for both routine and complex conditions are an essential part of that support.” ■

#### Family Birthing Centers



For more about healthy beginnings at the Family Birthing Centers of Community Healthcare System, visit [COMHS.org/baby](https://COMHS.org/baby).

# WATCHing Out

## for your Heart

Expert care is just a heartbeat away

by Elise Sims

VINCENT HUDAK takes a lot of pride in his home, landscaping and property. But he became continually frustrated in September of 2019, when he couldn't mow the lawn without stopping to catch his breath.

"I look forward to doing yardwork," the Highland resident says. "I like to take care of my house and my yard. At that time, if I mowed the lawn and went up and down a row, I would have to stop to rest and catch my breath because my heart was beating so fast and hard."

Hudak had open heart surgery in 1997, so he monitored his blood pressure very closely every day at home. He knew his heart rate was too high at 110 and 115 on the cuff. A quick trip to his family physician, H. Alan Jones, DO, prompted a consult with the heart team of experts at the hospitals of Community Healthcare System.

**"If you go in to see Dr. Patel, it's like stopping in to see a friend or a buddy with a good bedside manner."**

Hudak met to discuss his racing heartbeat with Community Care Network electrophysiologist Pratik Patel, MD, on staff at Community Hospital, Munster and St. Catherine Hospital, East Chicago.

"I've been to many other doctors in my life and most of them are just all business," Hudak explains. But, if you go in to see Dr. Patel, it's like stopping in to see a friend



**Above:** Vincent Hudak does not need to stop to rest and catch his breath anymore while mowing his lawn or performing yardwork thanks to the advanced care he received to restore his irregular heartbeat after atrial fibrillation.

**Right:** Highland resident Vincent Hudak found the expert care he needed to treat his atrial fibrillation close to home at the hospitals of Community Healthcare System.

or a buddy with a good bedside manner. He knows his stuff and knows how to make you feel comfortable.”

Hudak’s heart monitor revealed he had atrial fibrillation. Atrial fibrillation or AFib is an irregular heartbeat that causes poor blood flow in the upper two chambers of the heart. With AFib, blood is not completely pumped out, which can



cause the remaining blood to pool or clot, leading to stroke, heart failure or other heart-related complications. Although not considered a life-threatening condition, those with AFib are five to seven times more likely to form blood clots and suffer a stroke. Once accurately diagnosed, AFib can often be treated with blood thinning medications such as warfarin.

Immediately, Patel started Hudak on a blood thinner once a day. This past May, he also was admitted to Community Hospital for a “shock” cardioversion treatment to slow his heart rate. It worked for about a month and then his heart rate went back up again over 100 beats per minute.

“Dr. Patel told me that the only other way they could bring my heart rate down was, besides other medicine, to try ablation. The ablation was scheduled at the end of June and worked out very well. Since that time, I have had no issues at all. My heart rate has stayed down in the low 60s.”

Catheter ablation is a minimally invasive procedure that prevents unwanted electrical currents traveling to the upper chambers of the heart. During a catheter ablation, small areas of heart tissue that are causing the irregular heartbeats are destroyed. The resulting lesions help to restore the heart’s regular rhythm.

“After the ablation, Dr. Patel did tell me that I would have to take (the blood thinner) the rest of my life,” Hudak says.

“Despite its proven efficacy, long-term warfarin therapy is not well-tolerated by some patients and carries a significant risk for bleeding complications,” says Patel.

Hudak says Jones, his family doctor, agrees. “He explained that when a person gets older and starts taking blood thinners, they increase their chances for internal bleeding,” Hudak says. “I saw Dr. Patel and told him that I wanted the WATCHMAN procedure.”

The WATCHMAN implant is a parachute-shaped, self-expanding device that is designed to permanently close off the left atrial appendage, a part of the heart believed to be the source of a majority of stroke causing blood clots.

## Whether we use ablations, blood thinners or the WATCHMAN device, we have the tools and technology to find the right treatment for our patients.

“The WATCHMAN implant closes off an area of the heart called the left atrial appendage to keep harmful blood clots that may form from entering the bloodstream and potentially causing a stroke,” says Samer Abbas, MD, medical director of the Structural Heart program of Community Healthcare System. “By closing off the left atrial appendage, the risk of stroke is reduced, and over time, patients, including Vincent, may be able to stop taking warfarin.”

Implantation of the WATCHMAN



**Above:** Electrophysiologist Pratik Patel, MD

device is a one-time procedure that usually lasts an hour and is typically performed under general anesthesia. Following the procedure, patients typically need to stay in the hospital 24 to 48 hours.

“It is important to understand that WATCHMAN does not prevent AFib, but reduces stroke risk by closing off the appendage,” explains Samer Ajam, Community Care Network electrophysiologist on staff at Community Hospital, St. Catherine Hospital and St. Mary Medical Center. “It takes about 45 days for the WATCHMAN

device to fully settle and seal the appendage off.”

“Whether we use ablations, blood thinners or the WATCHMAN device, we have the tools and technology to find the right treatment for our patients to give them a better quality of life,” he says. ■

### Cardiac Care Services



For more information about heart care at the hospitals of Community Healthcare System, visit [COMHS.org/heart](https://www.comhs.org/heart).

# On the Move Again

## Community Stroke & Rehabilitation Center helps patients regain mobility.

by Elise Sims

While on the job in Illinois, Steve Wartman was up on an aerial work platform changing a light over the high school parking lot. The next thing he remembers about that day in December 2019, was waking up in a trauma center.

“I don’t remember anything from the accident, thankfully,” he says. “I have been told that I fell 32 feet from the cherry picker to the ground. My injuries included a concussion, strained neck, punctured lung, bruised rib, separated pelvis, broken back, broken tibia, broken fibula and a broken heel, among others.”

He was ready for release as an inpatient to a rehabilitation facility for therapy to regain mobility in mid-February. Wartman was told by hospital staff that he needed to go to a center in downtown Chicago.

“It would have been a hardship for my family to go back and forth to downtown Chicago for therapy every day,” says the Crown Point resident.



**Above:** Steve Wartman practices putting weight on his right leg while standing as physical therapist James Markos watches his progress. Wartman is regaining movement every day, thanks to the advanced care and technologies at the Community Stroke & Rehabilitation Center in Crown Point.

The Wartmans knew a new rehabilitation center had opened in Crown Point and found out that Steve qualified for admission. The Community Stroke & Rehabilitation Center extends inpatient rehabilitation care and therapies offered by area hospitals by providing highly skilled trained therapy professionals and advanced state-of-the-art technologies and equipment.

“The Community Stroke & Rehabilitation Center is a great place with great accommodations,” Wartman says. “First class equipment; it is everything you need to progress and regain mobility right there in Crown Point. The staff goes above and beyond expectations. The setting is new and beautiful.”

“Studies suggest that for patients recovering from neurological conditions and joint injuries such as Steve’s, intensive inpatient rehabilitation treatment at an inpatient rehabilitation facility may be the best choice,” says Craig Bolda, administrator of the Community Stroke & Rehabilitation Center. “This type

of advanced care can result in enhanced functional outcomes with a shorter length of stay and higher discharge rate.”

To best meet the needs of each patient, an individualized care plan is created based on an evaluation upon admission. The care plan is used depending on whether the patient is an amputee, is a stroke patient, had a spinal cord or brain injury or is suffering from other neurological conditions.

Once a week, each patient’s care team of doctors, nurses, occupational therapists, physical therapists, speech therapists and social workers meet to discuss the plan of care and the next steps. The patient and his/her family are invited to attend.

“The staff at the CSRC became my extended family.”

“We encourage family members to become involved; it gives the patient a lot of support,” says Toni Novak, clinical coordinator.

“From the doctors, nurses and administrator to the therapists and housekeepers, they were all phenomenal and extremely helpful,” Wartman says. “Until my accident, I never spent one night in a hospital. My family and I are tightknit. They couldn’t visit me when the COVID crisis hit. The staff at the CSRC became my extended family.”

The goal of therapy at the Community Stroke & Rehabilitation Center is for patients to get back to where they were before they were sick or injured so that they can go home and live as independently as possible, Novak says.

“Besides an excellent nursing staff, we are able to offer more intense physical, occupational and speech therapies with advanced technologies to enhance the care we provide to our patients,” she says.

During a physical therapy session, for example, the patient walks in increments, walking 10 feet, then 50 feet while the therapists assesses how he or she performs. The patient also practices picking up objects from the ground and getting in and out of a car.

An occupational therapy session focuses on how the patient is able to take care of themselves, from eating to grooming and brushing their teeth to washing their face, managing a checkbook, paying bills and grocery shopping.



**Above from Top:** To best meet the needs of each patient, an individualized care plan is created based on an evaluation upon admission. The care plan is used depending on whether the patient is an amputee, is a stroke patient, had a spinal cord or brain injury or is suffering from other neurological conditions.

Community Stroke & Rehabilitation Center is able to offer more intense physical, occupational and speech therapies with advanced technologies to enhance the care provided to patients such as Steve Wartman.

When Wartman first got to Community Stroke & Rehabilitation Center, because of his broken back and other leg injuries, to help him get out of bed, staff had to use lift equipment.

“From February to mid-May, I relearned to walk with a walker,” Wartman says. “Now, I can ‘work’ my way up to the second floor of my home so I can ‘live’ on the second level. I still have a lot of rehab ahead of me. One of my goals is to walk on my feet by myself again someday. Hopefully, I’ll be able to do that, thanks to the outpatient rehabilitation staff.” ■

**Stroke & Rehabilitation Services**



For more information about the Community Stroke & Rehabilitation Center in Crown Point, visit [COMHS.org](http://COMHS.org).

## INSIDE THIS ISSUE



Howie Mandel



Stroke 101



A First For NW Indiana



Healthy Beginnings

# THE FACTS ABOUT AFib

Atrial fibrillation (AFib) is the most common type of heart arrhythmia, which occurs when the heart beats too fast, too slow or in an irregular way. With AFib, the upper chambers of the heart beat irregularly (quiver) so they can't efficiently move blood into the heart's lower chambers.

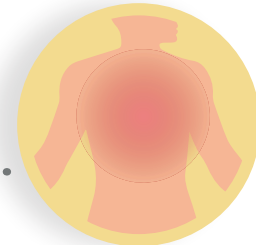
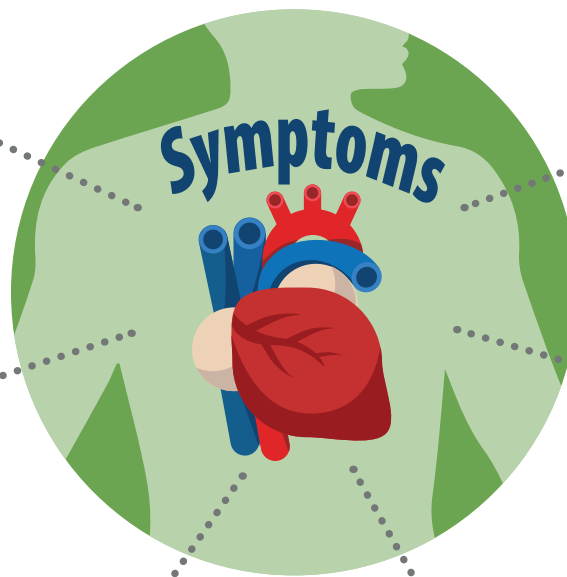
**2.7 million:**  
Number of Americans who have AFib

**12.1 million:**  
Number of Americans expected to have AFib in 20 years

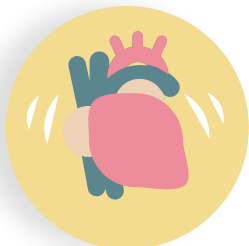
**5x:**  
Increase in risk of stroke for people with AFib



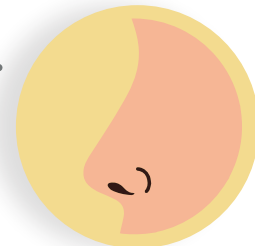
**Irregular Heartbeat**



**Chest Pain**



**Heart Palpitation**  
(rapid, fluttering or pounding heart)



**Shortness of Breath**



**Lightheadedness**



**Extreme Fatigue**

Sources: Mayo Clinic, American Heart Association, CDC