

Healthy

Winter 2023

COMMUNITY



Country Music Star

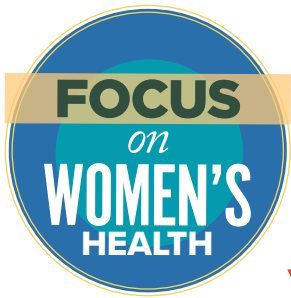
*Lorrie
Morgan*

**THIS ISSUE:
WOMEN'S
HEALTH**



**COMMUNITY
HEALTHCARE SYSTEM®**

COMHS.org



A Voice to be Heard

Country Music Star Lorrie Morgan is Singing the Praises of Breast Cancer Awareness

black wig. It wasn't until I passed her that I realized it was Kelly. She didn't want people to recognize her because of the cancer. I told her that her strength was her true beauty, not her appearance. The next day, she got rid of the wig.

What do women need to know about breast cancer?

First and foremost, follow the recommended schedule for having a mammogram, starting at age 40. It is so important for detecting breast cancer early, and that can be such a lifesaver. I have a mammogram once a year, and I also see my gynecologist. I really like the new 3D ultrasound mammogram that is now available. It doesn't feel as though it is closing down on your breast like a garage door. I am also a huge believer in breast self-exams. I try to perform one whenever I think about it, which is not as often as I should. When a woman does a regular self-exam, she becomes familiar with how her breasts feel. That way, it becomes easier for her to detect new lumps or anything else abnormal that might be a sign of breast cancer.

How do you stay healthy?

For me, healthy living comes down to doing little things, like watching the size of the portions I eat, or choosing spinach and other leafy vegetables instead of something less healthy. For exercise, I'm a big swimmer. I love to take walks with my two dogs, Puddin' and Li' Mae Rose, who also love playing in the water with me. Floor exercises, like hip rolls and leg raises as well as yoga, are also important to keep my body toned. I eat a lot of soft-boiled eggs and Ezekiel bread,

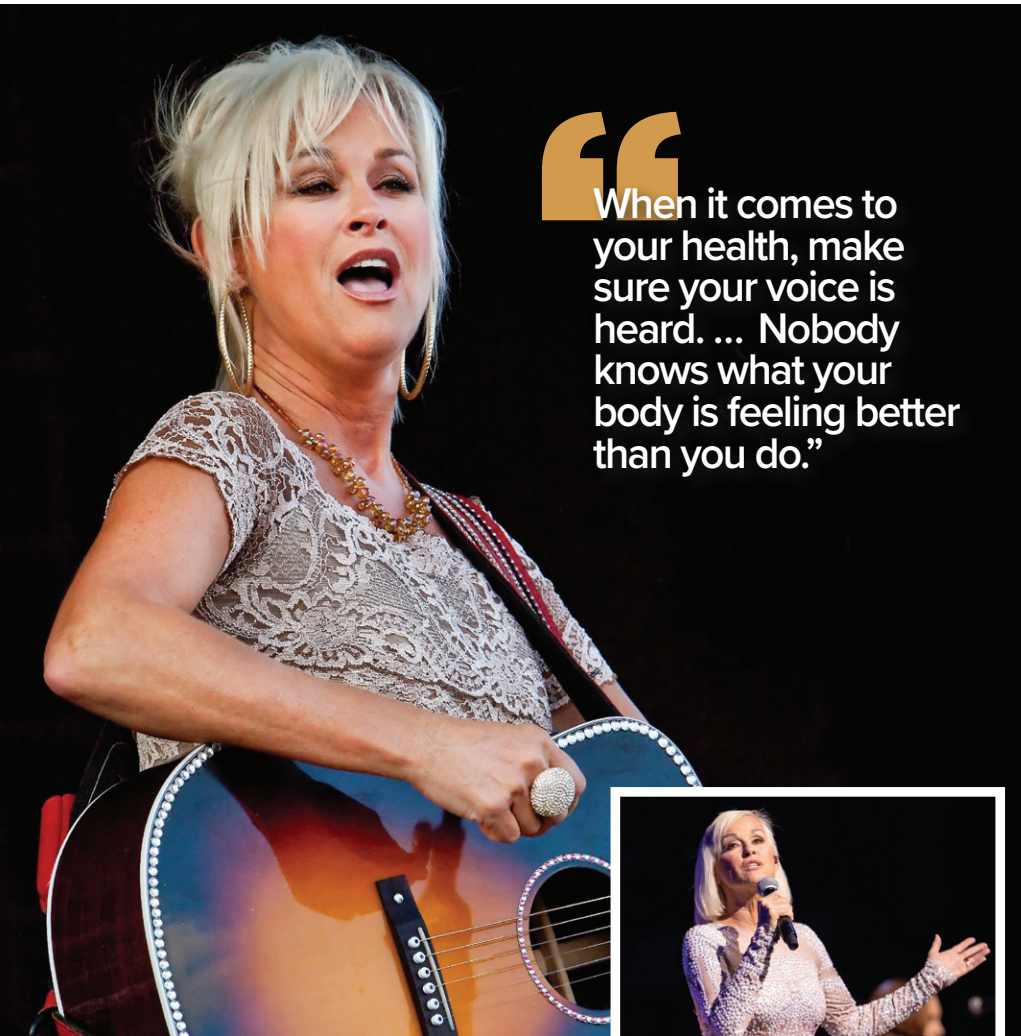
ASK LORRIE MORGAN and she will agree: Country music is in her blood. A Nashville native and daughter of Country Music Hall of Fame member George Morgan, Lorrie made her debut on the Grand Ole Opry at age 13 and was inducted into the Opry at the young age of 24. Lorrie is also the first woman to begin her country-music career with three consecutive platinum albums.

Today, Lorrie is still making music, having just finished a new album with award-winning producer Richard Landis, who died in May. However, even with her busy music career, she finds the time to be a fierce advocate for breast cancer

awareness and women's health. *Healthy Community* recently spoke to Lorrie to discuss her passion for healthy living and lifting the voices of women.

Why did you get involved in breast cancer awareness?

Well, it started close to home. Breast cancer runs in my daddy's family. I had a cousin who had breast cancer and needed a double mastectomy. It was very scary for her, but she handled it like a champ. A couple of my close friends also have had tough battles with breast cancer. Kelly Lang, a wonderful singer and person, is a breast cancer survivor. She was a real warrior fighting the disease for so many years. I remember walking at the gym one day and seeing a woman come toward me wearing a

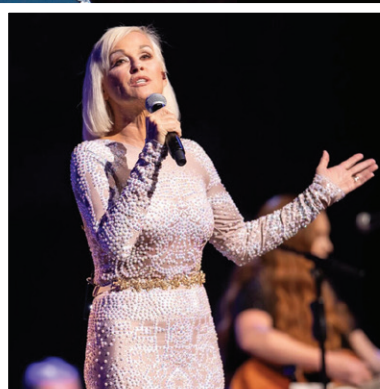


“When it comes to your health, make sure your voice is heard. ... Nobody knows what your body is feeling better than you do.”

which is made from freshly sprouted, organically grown grains. I love hot peppers, even ghost peppers, the hottest. Hot peppers are loaded with vitamins and antioxidants and they help with inflammation.

What other advice would you like women to hear?

When it comes to your health, make sure your voice is heard. Women need to stand up for themselves, so their doctors and nurses take notice and listen to their concerns. Let me share an example. A while back, my health was in bad shape and none of my treatments were working. I felt strongly that something was wrong with me, but I didn't say anything. This went on for years.



Finally, I insisted on an exploratory procedure to see what might be wrong. My doctors discovered endometriosis in my lower abdomen, and I ended up needing a hysterectomy. I went through a lot of unnecessary suffering that could have been avoided if I had just spoken up and been more assertive.

Any final thoughts?

Trust your intuition. If you think something is wrong with your health, take action. Nobody knows what your body is feeling better than you do. ■

THE START OF A *Healthy* RELATIONSHIP

Community Healthcare System is proud to be associated with an expert team of primary care providers. These family practice physicians, internists, pediatricians and gynecologists, as well as nurse practitioners, clinical nurse specialists and physician assistants, are ready to help you and your family manage all aspects of your health. A primary care provider (PCP) is trained to prevent, diagnose and treat a broad array of medical conditions and injuries, from chronic problems, such as diabetes, to the common cold or flu. Building a consistent, long-term relationship with a PCP keeps you healthier and lowers your medical costs. However, that only can happen if you decide to start seeing a PCP on a regular basis. So, don't wait! Make an appointment today.

Women's Health Services



For more information or to find a primary care provider, visit COMHS.org/find-a-doctor-HC.



'I HAVE BREAST CANCER. NOW WHAT?'

BEING TOLD YOU HAVE breast cancer can be a gut-wrenching experience for any woman. In addition to the fear, uncertainty and anxiety that comes with the diagnosis, you will want answers to many questions. Here is a checklist of some of the more important questions to ask your care team.

- **What type of breast cancer do I have?**
- **Has my breast cancer spread?**
- **How treatable is my breast cancer?**
- **Do I need any other tests or procedures before treatment begins?**
- **How soon can I begin treatment?**
- **How long will my treatment last?**
- **Where should I have my treatment?**

Community Healthcare System offers a number of cancer-fighting services, including surgery, chemotherapy and radiation therapy, as well as support groups, counseling and educational support. By staying close to home for your cancer treatment, you will benefit from the much-needed support of your friends and family.

Ready for some good news?

The five-year survival rate for localized breast cancer is 99 percent! Localized simply means that the cancer has not spread outside of the breast. Even if the cancer has spread to the lymph nodes or other nearby structures, the five-year survival rate is 86 percent. That's the reason it is so important to follow the recommended guidelines for breast cancer screening. Early detection saves lives!

Go 3D with Mammography

Not all mammograms are created equal. For years, a conventional two-dimensional (2D) mammogram would take two pictures of each breast, one from the side and one from the top. In contrast, 3D mammography uses a low-dose X-ray and takes multiple images from different angles. Instead of having only four images from a 2D mammogram to review, the radiologist now has images synthesized from 200 to 300 images to examine.

As a result, a 3D mammogram can detect up to 40 percent more cancers and is more likely to detect a tumor in its early stages, when treatment is much more effective. 3D mammography also benefits the nearly 1 in 10 women with dense breast tissue and has been shown to decrease the need for a second exam, which can be very stressful. Be sure to check with your insurance provider to see if your plan covers a 3D mammogram.

Sources: Mayo Clinic, Summit Medical, American Cancer Society, HealthPartners

Every Woman's Cancer Screening Checklist

As a woman, there is a 1 in 3 chance you will be diagnosed with cancer during your lifetime. That's why it is so important to keep up to date with your cancer screenings. Here are the testing recommendations for five of the most common types of cancer for women.

Breast Cancer Screening (Mammogram)

Age 40 to 44: Women have the option to begin having a yearly mammogram.

Age 45 to 54: All women should have a mammogram every year.

55 and older: Continue yearly screening or switch to every two years.

Colorectal Cancer Screening (Colonoscopy)

Age 45: Start regular screenings if you have an average risk for colorectal cancer and continue through age 75.

Age 76 through 85: Talk with your primary care provider about whether you should continue screening.

Age 86 and older: Colorectal cancer screening is no longer required.

Cervical Cancer Screening (HPV and Pap test)

Between the ages of 25 and 65: Women should have a primary HPV test every five years. If that is not available, women should have a Pap test every three years.

Over age 65: Testing is not required if you have had cervical cancer testing in the past 10 years with normal results.

Important Note: There are some exceptions to these general recommendations. For example, women with a health history of serious cervical pre-cancer need to be tested 25 years after their diagnosis, even after age 65. Be sure to discuss your screening schedule for cervical cancer with your primary care provider.



Annual Lung Cancer Screening (Low-Dose CT Scan)

Between the ages of 50 and 80: Women in this age range should be screened if they currently smoke or have quit in the last 15 years AND have at least a 20 pack-year smoking history. Your pack-year smoking history is the number of packs of cigarettes per day multiplied by the number of years smoked. (Example: two packs smoked per day x 10 years = 20 pack-years of smoking.)

Endometrial (Uterine) Cancer

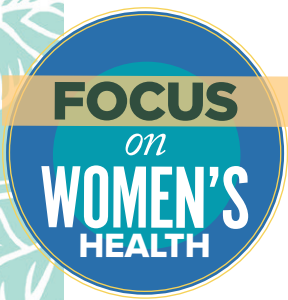
Menopausal women should ask their primary care provider about the risks and symptoms of endometrial cancer.

Cancer Screenings



To learn more about cancer screening services, visit [COMHS.org](https://www.comhs.org)

Source: American Cancer Society



— All The Ways We Care —

Understanding Your Primary Care Provider: *A Woman's Guide*

FOR WOMEN, SEEING YOUR primary care provider (PCP) on a regular schedule offers many benefits. Your PCP can make sure you are up to date with all of your tests and screenings, from breast cancer to osteoporosis. Your PCP also can be your guide as you navigate health issues that are more common in or exclusive to women, such as menopause and endometriosis.

Selecting a PCP is an important first step in staying healthy and managing your healthcare. Think of your PCP as your medical home. He or she is usually the first healthcare professional you visit for any type of medical need as well as yearly physicals, wellness visits and routine screenings.

A Woman's Point of View

Building a long-term relationship with a physician, whenever possible, is also important. A provider who knows your medical history and life story is better equipped to make a more accurate diagnosis and to detect a medical issue earlier in its development. For your part, you will feel more comfortable having honest conversations with someone you know and trust. If you currently don't have a primary care physician, here are some tips.

1 Decide Which Type of Provider You Prefer

For adults, there are three types of physicians who can be your primary care provider.

- **Family Practice Physicians:** They see and care for patients of all ages, from infants to seniors.
- **Internal Medicine Physicians:** Also called internists, these doctors typically treat only adults.
- **General Practice Physicians:** Like family practice physicians, they treat patients of all ages. This type of doctor also includes osteopaths (designated with a DO instead of an MD), who have a focus on the musculoskeletal system.

For women, there is another option available: seeing a gynecologist as well as a primary care physician. Find out more in the section *Should I See a Gynecologist?*

2 Ask about Insurance

Selecting a provider who is in-network with your health insurance will help you avoid surprise out-of-network expenses. You will also pay less out of pocket with these in-network providers.

3 Ask for Referrals

If you are like many people, you will feel more comfortable choosing a provider who has been recommended by someone you know – whether it be a friend, a co-worker or a family member. Ask around. You might also want to talk to other healthcare professionals, such as a pharmacist or a dentist, and find out what they have to say.

Source: University of Rochester Medical Center

4 Visit the Provider's Office

If you want to make sure you are comfortable with a physician and his or her staff, there is nothing like an office visit and a face-to-face meeting. This is the best way to experience the atmosphere of the office and find out firsthand how you will be treated.

Here are other factors you should ask about during your visit.

- **Hours:** Do the office hours fit your work and family schedule?
- **Language:** Does the team and medical staff understand your preferred language?
- **Appointments:** Is there a long wait to see the provider? What are the policies for canceling or rescheduling an appointment? Do they offer payment plans for services?
- **Technology:** How does the office communicate with patients – by email, phone, text? Do they offer an online portal?

Should I See a Gynecologist?

Many healthy women choose to see either a primary care provider or an OB/GYN for their medical care. There is nothing wrong with that decision. That said, it is important to know there are benefits to seeing both types of providers. To understand why, let's see how the two are different.

The main difference between a primary care physician and an OB/GYN is their areas of expertise.

Unlike other primary care physicians, OB/GYNs do not treat medical conditions that are not related to women's health, such as diabetes or high blood pressure. For those situations, a woman would need to see a primary care provider. However, because of their specialized knowledge, OB/GYNs are well trained to address such health concerns as fertility issues, cancer prevention and sexually transmitted infections. They also have special training in Pap tests, menstrual cycles and pelvic exams. OB/GYNs provide a well-woman exam, which includes a breast exam, pelvic exam and Pap test. The primary purpose of this type of exam is to address a woman's sexual and reproductive health. Of course, if a woman is wanting to become pregnant, an obstetrician/gynecologist is the right provider to see.

Some women may choose to see both. By having a relationship with an OB/GYN and a primary care physician, a woman can take advantage of the unique perspective each provider has to offer by having both a physical and a well-woman exam each year.

We are Here for You



For a list of services and providers available through Community Healthcare System, visit COMHS.org/obgynHC.



Because of him, I can **Walk**'

Gary woman praises doctor and team at
Community Healthcare System's wound center

by Karin Saltanovitz

VANESSA WHEELER-HARDIMON was not sure how bad the wound was on her left foot.

"To be honest, I did not look at it for a long time," the 68-year-old Gary resident said. "I just could not do it."

With her wound getting worse, she made the decision to go to the Emergency Department at St. Mary Medical Center in Hobart.

That is when she met Jared Moon, DPM, a podiatrist with Community Care Network, Inc., who examined the wound and diagnosed her with gangrene and osteomyelitis – a bacterial infection of bone tissue. Moon decided Wheeler-Hardimon needed surgery that day – Christmas Day.

"When the ER called me, I knew her situation required emergency surgery," he said. "Her overall prognosis was not good. Typically, patients with gas gangrene do poorly unless surgical and medical care is started quickly. Fortunately, we were able to prevent leg amputation and saved enough of her foot so that she could still walk with normal shoes. This experience underscores the importance of timely intervention in critical cases. It can make all the difference in a patient's quality of life."

Each year, more than 6.5 million Americans are treated for chronic wounds, and the numbers likely will increase, according to the U.S. National Institutes of Health. When a wound does not improve within four

weeks or has not healed within eight weeks, it is classified as a chronic, non-healing wound.

If left untreated, chronic wounds decrease a person's quality of life and may lead to the loss of a limb or life. People with slow-moving wounds often have another chronic condition as a contributing factor, such as diabetes, heart disease or peripheral artery disease.

Because Wheeler-Hardimon is diabetic, her wound did not heal as fast as desired. Moon suggested she receive a series of hyperbaric oxygen therapy (HBOT) treatments at Community Healthcare System's Wound Ostomy & Continence Center, 3170 Willowcreek Road in Portage.

"Typically, the air we breathe is 21 percent oxygen," said Patricia Biel, NP, who specializes in wound care at Community Healthcare System. "With hyperbaric medicine, the extra oxygen is carried through the various components of blood to the compromised areas of the body."

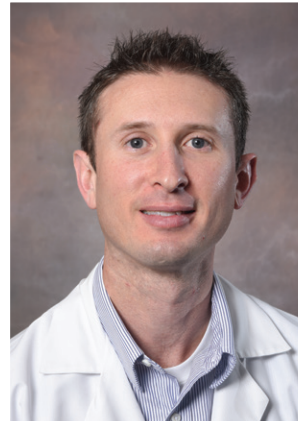
"Wheeler-Hardimon quickly saw improvement within the first month and completed therapy in three months after 60 sessions.

"I could really see the healing," she said. "I was shocked by how much faster the healing happened than I anticipated. The nurses would take pictures to compare the healing from each treatment."

Hyperbaric therapy takes place in a clear, acrylic chamber. Patients lie on a stretcher inside the chamber



“I found the treatments to be soothing and calming. I would lie in the chamber, watch my movies and think about everything I’m grateful for.”



Above: With hyperbaric therapy, the air is 100 percent oxygenated and at an elevated ambient pressure. The extra oxygen is carried through red blood cells to the injured area of the body.

Left: Jared Moon, DPM, is a podiatrist with Community Care Network, Inc.

Far Left: Vanessa Wheeler-Hardimon completed 60 hyperbaric treatments for a chronic wound that was slow to heal.

and can watch TV or a movie. Most sessions last between 90 and 120 minutes. A wound care team member stays in the room during treatment.

“I have full trust in Dr. Moon and the staff,” Wheeler-Hardimon said. “They showed me the chamber and explained how everything worked. I found the treatments to be soothing and calming. I would lie in the chamber, watch my movies and think about everything I’m grateful for.”

When she is not serving as a St. Mary Medical Center Auxiliary volunteer – a commitment she had maintained for nearly 10 years – Wheeler-Hardimon is an associate minister at her church.

“God is good,” she said. “I’m just now getting to a point where I can stand for long periods of time and speak to the congregation. I take my hat off to Dr. Moon. Because of him, I can walk.” ■


Conditions treated with hyperbaric therapy include:

- Bone infections
- Diabetic foot and leg wounds
- Injuries from radiation therapy
- Certain types of skin wounds

In addition to hyperbaric oxygen therapy, the wound centers of Community Healthcare System offer a full range of inpatient and outpatient wound and ostomy care. The multidisciplinary Wound Ostomy Care team not only uses advanced therapies for healing but also addresses the underlying cause of a wound to help reduce the potential for recurrence.

Treatments also include:

- Bioengineered skin grafting
- Compression therapy for edema or swelling
- Debridement (gentle removal of unhealthy tissue in the wound)
- Negative pressure wound therapy
- Off-loading devices for foot ulcers

Wound Care Services 

To learn more about wound care services at Community Healthcare System, call the physician referral line at 219-836-3477.



Mental Health

and a breast cancer diagnosis

Treatment plans at Community Healthcare System include medical, physical and emotional support

by Kerry Erickson

Community Healthcare System physicians, nurse navigators and other medical professionals know the profound impact mental health issues may have on patients facing a breast cancer diagnosis. When discussing a care plan, a Community Healthcare System team understands the important role mental health plays in the successful treatment of the whole patient.

“Being diagnosed with breast cancer is a very emotional time,” said Mary Nicholson, MD, a fellowship-trained breast radiologist and regional director of the Women’s Diagnostic Centers of Community Healthcare System. “I’ve even had women say, ‘I don’t know who’s going to raise my children.’ And we say very calmly, ‘You are.’ We help patients beat cancer by treating the whole person, and that means getting them on a path to wellness – physically, mentally and emotionally.”

Cancer services at Community Healthcare System include nurse navigators to help guide patients through diagnosis, treatment and beyond. Three navigators on staff work exclusively with breast cancer patients.

The navigators often are the first person to contact a patient after a breast cancer diagnosis. They answer questions, provide support and assist with setting up appointments for services. Navigators serve as their patients’ advocates during every part of the health journey. At any

time, patients and their family members may access the navigation program, which is a free, confidential service of Community Healthcare System.

“A breast cancer diagnosis is not something a person ever wants. It can make you feel depressed, anxious and scared,” said Jennifer Sarkey, director of Cancer Care Services for Community Healthcare System and Community Cancer Research Foundation. “Knowing how breast cancer can affect your mental health can help you get the support you need. Community Healthcare System’s nurse navigators are here to support every patient. This includes helping them address anxiety, depression and other mental health issues.”

A breast cancer diagnosis may affect some people’s mental health more than it does others. Some factors

“Many of the people who attend the support groups at Cancer Resource Centre find it comforting to share stories with others facing a breast cancer diagnosis and treatment. It helps alleviate fears and anxiety.”

include a history of mental health issues, a previous trauma and a lack of social support from family, friends or community.

Patients also may find mental health support at the Cancer Resource Centre in Munster. The center helps those affected by cancer obtain the guidance, camaraderie and resources they need to cope with the diagnosis, treatment and survivorship. A comfortable setting awaits visitors who wish to review educational materials, gather with others in a social setting, attend special events or classes, or come together in a professionally led group for support. The center offers patients and their families a non-medical atmosphere where they can celebrate life, deal with hardships and get their questions answered.

“It helps to talk to people who are experiencing a similar situation,” Sarkey said. “Many of the people who attend the support groups at the Cancer Resource Centre find it comforting to share stories with others facing a breast cancer diagnosis and treatment. It helps alleviate fears and anxiety.”

The Cancer Resource Centre is a program of the Community Cancer Research Foundation, a nonprofit organization dedicated to improving the quality of cancer care available in Northwest Indiana and the Chicago suburbs. All services of the Cancer Resource Centre are offered free of charge. Individuals do not need to be patients of Community Healthcare System.

Among the services are yoga, meditation and other classes aimed at calming the mind and invigorating the spirit.

“Participants often comment on how at ease they feel mentally after participating in one of these classes,” Sarkey said. “We want people facing a cancer diagnosis to know they are not alone. They can find a groundswell of support through Community Healthcare System, our navigation program and the Cancer Resource Centre.” ■



Above: Yoga instructor Andy Wichlinski, far left, leads a morning class at Cancer Resource Centre (CRC) in Munster. Among the free services at the center are yoga, meditation and other classes aimed at calming the mind and invigorating the spirit.

Left: Yoga students take a moment to stretch and relax the mind during a morning class at Cancer Resource Centre in Munster.

Below: Jennifer Sarkey, far right, director of Cancer Care Services, sits with nurse navigators, from left, Kassie Cadman, Nicole Surratt and Ana Bran-Guzman in Cancer Resource Centre’s garden in Munster.



Services at Community Healthcare System



For more information on the Women’s Diagnostic Centers, visit COMHS.org/services/womens-care/womens-diagnostic-centers.

For more information on the Cancer Resource Centre, visit myccrf.com/about-us/cancer-resource-centre.

For more information on clinical navigators, visit COMHS.org/about-us/patient-resources/clinical-navigators.

Finding *freedom* *in* ZeroG

Therapy equipment offers support,
safety for patients

by Vanessa Negrete

SECURED IN A HARNESS that was tethered to a track on the ceiling gave Doug Bakker a feeling he longed for: freedom.

The 60-year-old Cedar Lake father of three had lost some of his freedom after complications following aortic valve replacement surgery at an Illinois hospital. He went into anaphylactic shock after receiving steady doses of a blood thinner to which he was unknowingly allergic. After emergency surgery for leg clots and a series of mini strokes, he ended up on a ventilator for three weeks.

In time, he came off the ventilator and went into rehabilitation. Once an avid fisherman, camper and kayaker, Bakker found himself struggling with basic movements like walking and balancing.

He underwent intense rehabilitation at an Illinois hospital, was transferred to a nursing home and eventually returned home. Home Health came to assist, but his wife, Kris Bakker, knew her husband needed more intense therapy.

“I wanted him to have the ZeroG,” she said. “I knew he needed it.”

She had worked as a physical therapy technician at St. Mary Medical Center in Hobart for four years and is familiar with rehabilitation therapies.

Doug Bakker turned to Community Healthcare System’s Community Stroke & Rehabilitation Center in Crown Point,

where he trained with the ZeroG Gait and Balance System.

Mounted to an overhead track, the ZeroG supports patients and protects them from falls as they practice therapy exercises. ZeroG “un-weights” patients, meaning it offloads some of their body weight to make them feel lighter as they build strength and range of motion. The equipment assists with balancing, moving from sitting to standing, walking and stepping up and down stairs.

“I gained confidence the more I used it,” Doug Bakker said.

He trusted the equipment would support him. “If you start to lose your balance, it catches you,” he said.

The confidence he gained while training with ZeroG during therapy sessions translated into self-assurance when using a cane or walker in other places, like at home, he said.

Physical Therapist Amy Huckstep, DPT, said Bakker needed therapy two to three times per week at the beginning. The primary focus was to use ZeroG for gait training in a safe environment.

“Within a few months, he was able to achieve longer distances and eventually became stable enough to incorporate standing and walking at home,” she said.

Bakker also used the ZeroG for stair mobility training because he lives in a bi-level home, and the stairs were limiting his access within his house.

“Prior to the use of ZeroG, he was using a chair lift in

“I love everybody at Community Stroke & Rehabilitation Center. They’re all great people. They’ve helped me move forward.”



Above: Cedar Lake resident Kris Bakker had heard of the ZeroG Gait and Balance System and knew her husband, Doug Bakker, would benefit from the therapy equipment.



Right: Physical Therapy student Maggie Pajak and Physical Therapist Amy Huckstep, DPT, assist Cedar Lake resident Doug Bakker as he uses the ZeroG Gait and Balance System at Community Stroke & Rehabilitation Center in Crown Point. Mounted to an overhead track, the ZeroG supports patients and protects them from falls as they practice building strength and range of motion.

his home for the stairs but is now able to navigate the stairs with minimal support from his family,” Huckstep said.

The ZeroG can accommodate patients up to 450 pounds and benefit those who live with certain conditions, including stroke, spinal cord injury, multiple sclerosis and traumatic brain injury.

Therapists purposely tried to trip him up so he could strengthen his ability to balance, Kris Bakker said.

Huckstep said ZeroG has a “trips function” so patients may practice reacting to unexpected obstacles to improve balance responses and to decrease fall risks.

Doug Bakker said he even walked backward in the security of the ZeroG harness. In the throes of recovery, it can be difficult for a person to notice his own improvement.

But a number of people have remarked to Bakker on how far he has come through the help of therapy.

“Hearing people tell me how good I’m doing ... when you’re in it, you really don’t see the progression,” he said.

The Community Stroke & Rehabilitation Center team noticed his progress, too.

“ZeroG played a vital role in Doug’s ability to resume functional ambulation,” Huckstep said.

“With the capability to un-weight and prevent falls, the ZeroG provided Doug with the chance to greatly increase his repetition of walking practice. As a result, he was able to eventually restore his ability to walk in the home and community with supervision. He now is participating in more of his previous functional activities.”

Bakker goes to therapy about once a week now. He and his wife have high praise for Huckstep.

“Amy has been amazing,” Kris Bakker said. “She is definitely an asset.”

Doug Bakker said the entire staff at Community Stroke & Rehabilitation Center have been supportive.

“I love everybody at Community Stroke & Rehabilitation Center. They’re all great people. They’ve helped me move forward. I highly suggest going there.” ■

Physical Therapy and Rehabilitation



For more information about physical therapy and rehabilitation at Community Healthcare System, visit COMHS.org/services/therapy-services.

A Supporting ROLE

Non-surgical, surgical options available
for pelvic organ prolapse

by Vanessa Negrete

BARBARA BROWN'S PLAN to spend retirement pedaling cruiser bicycles on trails with her husband and hiking along Michigan's beaches was interrupted by a medical diagnosis.

"It's hard to enjoy a bike ride with this," the 70-year-old Portage woman said.

Brown suffered from pelvic organ prolapse, which happens when the ligaments and muscles supporting pelvic organs become too loose or weak. This causes one or more of the pelvic organs, such as the uterus, rectum or bladder, to shift out of their normal position.

"Pelvic organ prolapse affects 3.5 million women in the United States," said Douglas Dedelow, DO, FACOG, an Obstetrician-Gynecologist specialist with Community Care Network, Inc. "This is a common and treatable condition. You do not have to suffer with prolapse. Our experienced team at Community Healthcare System has brought relief to many patients through non-surgical and surgical options."

Like many women, Brown never had heard of pelvic organ prolapse.

"It's not something most women know about," said Brown, a married mother of two adult children and grandmother of four granddaughters.

Brown noticed frequent urination at the beginning of 2023. After a diagnosis of sleep apnea in April, she was prescribed a CPAP machine to assist with airflow as she slept. Frequent urination also is linked to sleep apnea, so Brown hoped the CPAP would alleviate that problem. It did not.

"I know there are plenty of women out there suffering from this. Maybe they can read my story and seek help."

A visit with a gynecologist revealed Brown had a prolapsed bladder and a prolapsed rectum. She was told she needed to go to Chicago for treatment, but she faced a four-month wait to see a urogynecologist there. Brown dreaded the idea of fighting Chicago traffic to receive care.

As she sat in a St. Mary Medical Center waiting room for an unrelated matter, Brown picked up an informational brochure and learned that Dr. Dedelow treats pelvic organ prolapse. When she got home, Brown made an appointment with Dr. Dedelow, whose office is a short commute from home.



Left: Barbara Brown talks about being one of about 3.5 million women in the United States with pelvic organ prolapse. She hopes that by sharing her story, other women who are suffering in silence will talk to their doctor about treatment.

Far Left: Portage resident Barbara Brown meets with Douglas Dedelow, DO, FACOG, an obstetrician-gynecologist specialist with Community Care Network, Inc. Brown is grateful she could find treatment for her pelvic organ prolapse locally at St. Mary Medical Center in Hobart with Dr. Dedelow.

exercises, specially trained Community Healthcare System therapists may help patients improve the ability to manage bladder and bowels, decrease pelvic pain, regain control and improve quality of life.

Symptoms that may signal pelvic organ prolapse include a sense of heaviness in the pelvic region; feeling as though you are sitting on a ball; pain, pressure or bulging; and difficulty urinating.

Brown acknowledged that pelvic organ prolapse usually does not require emergency attention, but she said it is uncomfortable and annoying.

“You have that heavy feeling down there,” she said. “You know something is not right.”

Childbirth, excessive weight, menopause and frequent constipation increase the likelihood of a woman developing the condition. Some lifestyle changes may help reduce that risk. The American Urogynecologic Society recommends women maintain a normal weight, drink plenty of fluids, consume fiber, exercise, don't strain during bowel movements and don't smoke.

Brown encouraged women who may be experiencing symptoms of pelvic organ prolapse to talk with their physician about it.

“I know there are plenty of women out there suffering from this,” she said. “Maybe they can read my story and seek help.” ■

“It's a 20-minute ride down back roads,” she said. “No big, heavy road construction. I don't have to drive through Chicago and deal with all that.”

Brown underwent pelvic organ prolapse surgery on Sept. 19 and is glad to experience relief from her symptoms.

“Dr. Dedelow is a godsend,” Brown said. “I'm really grateful I found him.”

Dedelow performs minimally invasive gynecologic surgeries at St. Mary Medical Center. The Hobart hospital is a designated Center of Excellence for Minimally Invasive Gynecology and Center of Excellence for Robotic Surgery by the Surgical Review Corp.

These designations for minimally invasive gynecology and robotic surgery attest that the gynecologists and clinical teams at Community Healthcare System bring the highest levels of knowledge, expertise and professionalism to the practice of women's healthcare.

Non-surgical options, such as pelvic floor therapy, and surgical options, such as minimally invasive robotic surgery, are available to correct pelvic organ prolapse. The plan of care is customized to each patient.

Pelvic floor physical therapy helps patients to correct pelvic floor muscle dysfunction that contributes to bladder and bowel symptoms as well as pelvic pain.

By strengthening the pelvic floor muscles through

Pelvic Floor Diagnosis and Treatment



For more information about diagnosis and treatment of pelvic organ prolapse, visit [COMHS.org/services/surgery/robotics](https://www.comhs.org/services/surgery/robotics).

For more information about physical therapy services, visit [COMHS.org/services/therapy-services](https://www.comhs.org/services/therapy-services).

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Lorrie Morgan



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Women's Health Quiz

Test your knowledge about women's health by answering these six true-or-false questions.

- 1) **T or F?** A woman's bone density begins to decrease after age 50.
- 2) **T or F?** The risk of heart disease is six times higher for women with diabetes.
- 3) **T or F?** Post-menopausal women need to increase their calcium intake.
- 4) **T or F?** Women are less likely to suffer mental health issues than men.
- 5) **T or F?** Regular exercise can reduce your risk of breast cancer.
- 6) **T or F?** Older women are more likely to develop breast cancer.

ANSWERS:

1) False. The actual age is 30 unless women start to exercise regularly and eat healthy.

2) True. Maintaining a healthy weight, reducing stress and exercising can reduce your risk of Type 2 diabetes.

3) True. After menopause, women require more calcium and vitamin D in their diet.

4) False. Women are 40 percent more likely to have a mental health issue.

5) True. Studies show that exercise reduces the risk, especially after menopause.

6) True. Breast cancer is more common in women older than 55.

