

Health Connection



MIMBRES
MEMORIAL HOSPITAL
AND NURSING HOME

FROM YOUR FRIENDS AT MIMBRES MEMORIAL HOSPITAL

Bye-bye, back pain

Rare is the person who goes through life without some sort of back pain. The smartest approach to pain? Prevention. And if you've had trouble before, incorporating back-sparing techniques into your routine will help you avoid a recurrence.

BACK TO BASICS

- **Posture-perfect.** Keep your ears above your shoulders, hold your shoulders above your hips and keep your hips above your knees and feet.
- **Move a muscle.** Strengthening the muscles that support your legs, back and abdomen is a sound way to prevent back pain. Swimming, walking and cycling are good choices.
- **Lift it right.** Use your legs, not your back, to lift heavy objects.
- **Take a load off.** Lugging a heavy shoulder bag (more than 5 pounds)? Unload unnecessary items and switch the bag from shoulder to shoulder.
- **Don't sleep on it.** Sleep lying on your side, a pillow tucked between your knees. Avoid sleeping on your stomach, and if you must sleep on your back, put a pillow under your knees.
- **Lose excess weight.** Slim down and your back will benefit.
- **Wear sensible shoes.** Alternate between flats and 2-inch heels. Wear well-fitting athletic shoes during your leisure time.

FEELING THE PAIN?

Try these simple strategies if you have back pain:

- **Take two aspirin.** Nonsteroidal anti-inflammatory drugs, like aspirin and ibuprofen, can reduce inflammation. If they don't bring relief, or if your pain is severe, talk to your healthcare provider.
- **Ice it.** Apply an ice pack for no more than 20 minutes at a time for the first 48 hours. After that, try a heating pad.



- **Stick it out.** Instead of taking to your bed, stick with as many of your normal activities as possible. Bed rest of four days or more can actually aggravate your condition.

Bad back?

If you experience back problems, contact interventional pain management specialist Ala Alosman, M.D., at (505) 546-5892.

WHEN IT'S AN EMERGENCY

Take action when every second counts

When medical emergencies arise, it's not always easy to think clearly. But, when someone is hurt or in danger and needs immediate help, calling for emergency medical assistance is the best way to get that help—for you or someone else.

A crisis demands that you act quickly rather than waste time deciding whether to call for assistance. Sometimes people have difficulty assessing the level of urgency in an emergency situation. It's better to err on the side of caution and make that phone call. Always consider a situation more serious rather than less serious, especially if you aren't sure of the medical implications.

The best time to prepare for an emergency is before it happens. Make sure you keep all emergency numbers posted near your phone where family members can see them. When you call for immediate medical assistance, be prepared to tell the dispatcher about the emergency.

SPECIFIC QUESTIONS THE DISPATCHER MAY ASK

- **Where is the emergency?** Give your exact whereabouts such as street address, building number, apartment number, floor, nearest intersection and town.
- **What is the emergency?** Tell the dispatcher exactly what's wrong.
- **What is your name?**
- **What is the phone number** you are calling from?
- **Who needs help?** Be sure to give the approximate age of the injured and the number of people who need emergency care.
- **What is the condition of the victim(s)?** For example, is the person(s) conscious or unconscious, breathing normally, able to talk and so on.

ADDITIONAL INFORMATION TO ASSIST WITH THE CALL

- Listen to the specific instructions the dispatcher gives you on how to care for the injured until an ambulance arrives. Your ability to communicate the facts clearly and take instruction carefully could mean the difference between life and death.
- Don't hang up! Stay on the line and remain calm until the dispatcher tells you it's OK to hang up.

Sometimes people are confused about when to call for emergency assistance. Remember, when in doubt, call for help!



Be prepared

1. Know basic choking rescue techniques, such as the Heimlich maneuver.
2. Take a CPR class.
3. Cover burns with cool (not cold) wet cloths. Never apply home remedies (butter, ice, petroleum jelly). Never break blisters or remove burned skin.
4. Never move a person who has a back or neck injury.
5. Know how to stop a wound from bleeding. (A first-aid class can help.)
6. Keep individual medical history information handy.





When there's no lump

What you need to know about inflammatory breast cancer

While a breast lump is one of the classic signs of breast cancer, not every form of the disease bears this warning sign. Inflammatory breast cancer (IBC) is a rare but deadly form of cancer that often remains silent until it has spread.

IBC appears in women at an earlier average age than other forms of breast cancer—about age 52 versus 62—and accounts for up to 5 percent of all breast cancer cases in the United States. Although its prognosis has improved over the years, its five-year survival rate is still only about half that of non-IBC cases, or about 40 percent. While its cause is not entirely known, some studies have suggested family history may play a role in a woman's risk of developing the aggressive disease.

Despite its name, IBC isn't a product of inflammation. Rather, the disease occurs when cancerous cells block the lymphatic vessels in the breast's skin. Instead of a lump, you may notice that certain areas of the skin feel warm, appear red or bruised or look thicker. Your breast may also feel heavy. Other symptoms that develop in an affected breast include:

- tenderness or swelling
- itching
- pain
- skin texture like an orange peel
- enlarged lymph nodes under the arm, above or below the collarbone

- flattened or inverted nipple
- swollen or crusty nipple skin
- discoloration of skin around the nipple (areola)

IBC symptoms can easily be confused with a breast infection. However, it doesn't cause a fever and doesn't respond to antibiotics like an infection does. If you're experiencing any of the symptoms listed, contact your healthcare provider immediately. Because the disease spreads rapidly—changes in your breast can become noticeable in a matter of days—many women are already in advanced stages of IBC by the time they're diagnosed. If your healthcare provider suspects cancer, he or she will perform a biopsy to analyze a sample of your skin and tissue.

TREATMENT

Chemotherapy, surgery and radiation therapy are often combined to treat cases of IBC. Removal of the affected breast is often recommended following a treatment such as chemotherapy.

The chances of recurrence for this type of cancer are high. Further chemotherapy or hormone therapy, such as tamoxifen or anastrozole, may be necessary to help prevent the cancer from returning.

IBC is a scary diagnosis, but you can empower yourself against the disease by becoming educated. Talk to your healthcare provider about what to expect before and after treatment.

Your first choice for healthcare



John Gallagher
Chief Executive Officer

Dear friends,

Great things are going on here at Mimbres Memorial Hospital and Nursing Home (MMH), and I'm extremely proud of all the staff and physicians on our team.

COMPREHENSIVE HEALTHCARE CLOSE TO HOME

MMH offers a great number of specialties that allow us to take care of your medical needs right here in Deming. In addition to the core of medical care, the family practitioners and pediatricians, we're pleased to have specialists in internal medicine; anesthesiology and pain management; orthopedics; podiatry; hematology and oncology; gerontology; pulmonology; and general, laparoscopic and vascular surgery. Our newest general and laparoscopic surgeon, Jonathan C. Liu, M.D., is introduced in this issue.

We also have a radiologist on-site to interpret medical imaging studies and perform special procedures. Mammography, computed tomography (CT), magnetic resonance imaging (MRI), ultrasound, nuclear medicine and diagnostic radiology procedures, EKGs and a full complement of laboratory tests are performed by MMH's skilled staff.

BUILDING FOR A HEALTHY FUTURE

In our continuing commitment to provide improved services, we have invested more than \$2 million in construction and renovation, including a new

parking lot, new restrooms for each patient room and a new sterile processing department for instrumentation. The most exciting endeavor is the planned Operating Room construction project that will include a comprehensive perioperative suite with three large expanded operating rooms, 11 preoperative/postoperative suites, pain management offices and a new endoscopy room.

COMMUNITY EVENTS TO KEEP YOU HEALTHY

MMH is introducing a new program called Healthy Woman to improve the emotional, physical and fiscal well-being of women and their families. Healthy Woman is geared toward women ages 25 to 54, but all are welcome, including men. Free monthly talks and interactive events provide information about health, communication, relationships and life-balance issues.

If you're at least 50 years old and not already a member of Senior Circle, consider joining and taking part in all the great activities planned by Senior Circle advisor Marion Kleber. There's something happening nearly every day, from day and overnight trips to such destinations as Laughlin, to card games, a hiking club and many other activities. We're close to having 500 members and are awaiting that 500th member.

Best regards,

JOHN GALLAGHER
Chief Executive Officer
Mimbres Memorial Hospital
and Nursing Home

Battling prostate problems

A fight you can win

At some point in their lives, most men will be affected by prostate problems. Proper detection and treatment, however, can alleviate and even cure most prostate disorders.

Despite its walnut size and weight of just an ounce, the prostate plays a prominent role in a man's urinary and sexual health. The prostate produces fluid that transports semen through the penis. If the prostate is enlarged for any reason, it can press on the urethra and cause urinary problems.

Symptoms of prostate disease include pain, burning and difficulty in urinating; blood in the urine or semen; painful ejaculation; and lower back pain.

PROSTATE PROBLEMS

Experts believe diet, race, heredity and the aging process may all lead to prostate trouble. The three most common problems associated with the prostate are:

- **Prostatitis.** This condition develops when the prostate swells or becomes inflamed, usually caused by bacterial infection.
- **Benign prostatic hyperplasia (BPH).** A normal prostate can also grow many times in size when hormonal changes occur after age 40, causing BPH.
- **Prostate cancer.** Even though prostate cancer is one of the most diagnosed cancers in America, on average men have only a 3 percent risk of actually dying from the disease. Tumors are often slow-growing and highly treatable. However, patients sometimes experience no

symptoms until the cancer has spread. Thus, early detection by your doctor is important.

MANY TREATMENT OPTIONS

Treatments for prostatitis and BPH include a low-fat diet and medications. Chemotherapy, surgery and radiation target prostate cancer. But sometimes, all that is needed is watchful waiting for slow-growing tumors in men over 70.

SCREENING GUIDELINES

It's important for you to get your prostate checked. The American Urological Association recommends:

- **A digital rectal exam (DRE)** once a year after age 50, or earlier if you're at high risk for prostate cancer. Although some men consider this test embarrassing, it's a quick, simple procedure that could save your life.

- **Prostate-specific antigen (PSA) blood tests** should be considered for men over 50 with a life expectancy of at least 10 years, or earlier for men in high risk groups, such as African-Americans or those with a family history of prostate problems. Discuss the benefits and limitations of testing with your healthcare provider.

If you have a positive DRE or PSA, your provider may order a biopsy to determine whether cancer is involved in your prostate symptoms.

Call today!

To schedule an appointment, call urologist Ruel Taylor, D.O., at (505) 544-2030.



HEALTHWISE QUIZ

How much do you know about the flu?

Take this quiz to find out.

1

Flu season runs from:

- a. November to April
- b. October to February
- c. January to December
- d. December to March

2

About how many Americans die each year from complications of the flu?

- a. 900
- b. 5,600
- c. 15,600
- d. 36,000

3

The best thing you can do to avoid getting the flu is:

- a. take a daily multivitamin
- b. get vaccinated
- c. exercise at least five days a week
- d. avoid intimate contact with people

4

Flu is most often spread by:

- a. mosquitoes
- b. doctors and other healthcare providers
- c. people who cough or sneeze virus-infected droplets into the air
- d. the flu vaccine

5

Which of the following statements about the flu is not true?

- a. It's useless getting vaccinated after the season begins.
- b. Getting the flu can lead to pneumonia and other life-threatening complications.
- c. People who are allergic to eggs should not get a flu shot.
- d. You can spread the flu to others before your symptoms show.

The weakest link: Understanding abdominal aortic aneurysm

As the body's largest blood vessel, the aorta has the important job of carrying blood from your heart throughout the rest of your body. When the aortic wall in your abdomen weakens or becomes damaged by plaque buildup, it enlarges, causing an aneurysm, or bulge. Aneurysms that grow too large can burst, causing potentially fatal internal bleeding.

Three out of four people with an abdominal aortic aneurysm (AAA) have no symptoms, although some patients may feel back pain; intense, intermittent abdominal pain; or a pulsating sensation in the abdomen.

WHO'S AT RISK?

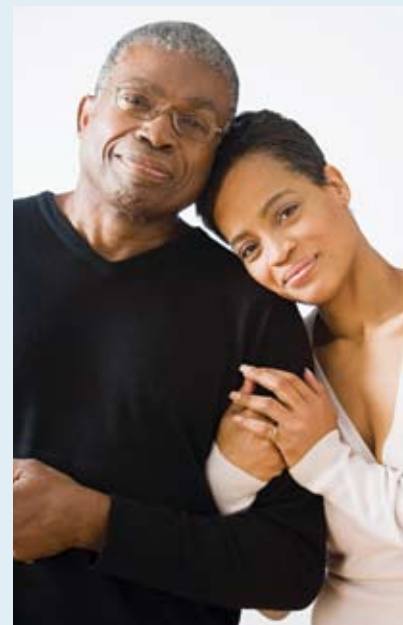
AAAs occur most often in men older than 65. Most aneurysms are caused by atherosclerosis—hardening of the arteries, which can result from a fatty, high-cholesterol diet. Other conditions that increase risk are smoking, high blood pressure, diabetes, congenital defects and a family history of aneurysms.

Decrease your chances of developing an aneurysm by not smoking; eating a low-fat, low-cholesterol diet; exercising regularly; and controlling blood pressure.

HOW IS AAA TREATED?

Treatment depends on the aneurysm's size and whether it's life-threatening. Most aneurysms are less than 2 inches in diameter and seldom rupture. If you're diagnosed with this type of AAA, your doctor will likely monitor it and prescribe blood pressure-lowering medicine. But if you have an aneurysm that leaks, is small but grows quickly, expands to greater than 2 inches or seems about to burst, your doctor can surgically repair the damaged part of your aorta.

When an aneurysm ruptures, the results can be fatal, so immediate medical attention is needed. Symptoms of a ruptured aneurysm include sudden, severe pain with rapid pulse, sweatiness or clamminess, anxiety, nausea and vomiting, low blood pressure, dizziness, fainting, dry mouth and paleness.



ANSWERS: 1. A; 2. D; 3. B; 4. C; 5. A



Take steps now to prevent diabetes in your child

About 15 percent of children and teens are overweight—double from 20 years ago. This has led to a surge in the number of children with type 2 diabetes, the form more commonly found in overweight adults over age 40. According to

experts, one in three American children born in 2000 will develop diabetes if we don't take steps now to address their fatty diets and poor fitness habits.

Talk to your family doctor about diabetes testing if your child seems to be gaining too much weight or is already overweight and has any of these risk factors:

- a family history of type 2 diabetes, particularly among first- or second-degree relatives
- being of African-American, Hispanic/Latino, Native

American or Asian/Pacific Islander descent

- signs of insulin resistance or conditions associated with insulin resistance such as high blood pressure, poor cholesterol and triglyceride levels and *acanthosis nigricans*, a condition where the skin around the neck or in the armpits appears dark, thick and velvety

WHAT YOU CAN DO

- **Eat at home.** Avoid super-sized fast-food meals on the run. Make the time to cook and eat healthy family fare.
- **Limit screen time.** The sedentary nature of modern play-time—TV, video games and using the computer—has contributed to overweight kids.
- **Exercise together.** Make physical activity a group event. Go on a family hike or bike ride. Join a gym together or enter family fun walks.
- **Don't use food, sweets or candy as rewards or gifts.** Try activity-minded presents such as jump ropes, kites, pogo sticks or scooters.

Give your fridge a health makeover

When it comes to wellness, we are what we eat. To benefit your heart, food choices must be low in saturated fat, the number-one dietary contributor to cardiovascular disease. Culprit foods include those from animals—primarily meats and whole-milk products—and from certain plant-based oils—coconut, palm and cocoa butter. Evict those and other artery-clogging foods from your icebox and replace them with the foods on this heart-smart guide from the American Heart Association:

- **Fruits.** Buy fresh, frozen or canned—but select fresh if you have a choice. Check labels on canned fruits, especially those packed in syrup, for calories.
- **Veggies.** Again, fresh is best. Frozen or canned are good choices, too, but watch salt content. Avoid sauces and other gimmicks, like flavor pouches.
- **Meat, poultry and fish.** Buy skinless poultry and lean beef, veal, lamb and pork with all fat trimmed away. Canned tuna and salmon packed in water are excellent low-fat choices.
- **Meat substitutes.** Try dried beans, lentils and soybean items like tofu and tempeh.



- **Drinks.** Store orange, grapefruit, prune, apricot or grape juices or low-salt tomato or vegetable juices. Stash a pitcher of cold water in your refrigerator, too.
- **Dairy.** Stock up on low-fat favorites like low-sodium cottage cheese, mozzarella, ricotta and Neufchâtel, along with yogurt and either skim or 1 percent milk.
- **Fats and oils.** Go with unsaturated oils—canola, olive, corn, cottonseed, peanut, safflower, soybean and sunflower. Buy unsalted, low-fat margarine and low-fat, low-sodium mayonnaise and salad dressing.
- **Sweets.** Enjoy (in moderation) gelatin, cocoa, frozen juice bars, sorbet, sherbet, jelly, jam, preserves, apple butter, maple or cane syrup, honey, molasses or fig bars.

MEET OUR SPECIALISTS

The experienced, dedicated physicians of Mimbres Memorial Hospital and Nursing Home (MMH) can help your family stay healthy. We'd like to introduce you to six of them.



ALA ALOSMAN, M.D.
Interventional Pain Management/
Anesthesiology

900 W. Ash St.
Deming
(505) 546-5892

Dr. Alosman is board certified in pain management and anesthesiology and treats acute and chronic pain with both interventional procedures and medical management. Dr. Alosman joined MMH in 2006.



JONATHAN C. LIU, M.D.
General and Advanced Laparoscopic
Surgery

122 S. Gold, Suite 5
Deming
(505) 546-1365

Dr. Liu came to MMH in July. He joined Southwest Surgery as a general surgeon specializing in advanced laparoscopic surgery. Dr. Liu holds screening clinics for early detection of breast cancer.



VALENTIN ANTOCI, M.D., Ph.D.
Orthopedics

710 S. Gold
Deming
(505) 546-1177

Dr. Antoci joined MMH in 2006 and is a fellowship-trained orthopedic surgeon. He has experience in adult and pediatric orthopedics and treats trauma, congenital and acquired orthopedic conditions.



NIKHIL MEHTA, M.D., FACS
General and Vascular Surgery

122 S. Gold, Suite 5
Deming
(505) 546-1365

Dr. Mehta has been at MMH since 2001. He performs general, vascular and thoracic surgery and is board certified in general surgery.



CLIFFORD GARY, D.O.
Obstetrics/Gynecology

850 W. Florida
Deming
(505) 546-6548

Dr. Gary joined MMH in 2001 and has delivered hundreds of babies. He's a caring physician who is board certified in family practice.



RUEL TAYLOR, D.O.
Urology

122 S. Gold, Suites 6 and 7
Deming
(505) 544-2030

Dr. Taylor is a board-certified urologist who joined MMH in 2006. He performs vasectomies and treats conditions of the kidneys and bladder in men and women and prostate diseases.

For a list of doctors by specialty, visit mimbresmemorial.com, or call (505) 546-5892.

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