

Health Connection



FROM YOUR FRIENDS AT MIMBRES MEMORIAL HOSPITAL

Spotting—and stopping—heart attacks and strokes

By Joseph Patterson, M.D.
Emergency Medicine



Many people don't know the difference between a heart attack and a stroke, two of the top five killers in the United States. Knowing the symptoms and how to respond can save a life—even your own.

HEART ATTACKS

A heart attack happens when the blood supply to part of the heart muscle is severely restricted or halted because one or more of the coronary arteries are clogged with fatty build-up called plaque. The plaque will often tear or rupture, which causes a blood clot to form, blocking the artery and causing a heart attack.

Heart attack warning signs include:

- uncomfortable pressure, squeezing, fullness or pain in the center of the chest
- discomfort in one or both arms, back, neck, jaw or stomach
- shortness of breath
- cold sweats, nausea or lightheadedness

STROKES

A stroke occurs when blood flow to the brain is disrupted, reducing the amount of oxygen it receives. There are two different types of strokes: ischemic and hemorrhagic. Ischemic strokes, which account for about 88 percent of all cases, happen when the brain doesn't get enough oxygen-rich blood. Usually this happens due to a blood



clot blocking a major artery leading to the brain. A hemorrhagic stroke takes place when excessive bleeding occurs in or around the brain. Stroke symptoms include:

- numbness or weakness in the face, arm or leg, often on one side of the body
- confusion, trouble speaking or understanding speech
- trouble seeing with one or both eyes
- trouble walking, dizziness or loss of balance or coordination
- severe headache with no known cause

Get help

If you or someone around you experiences any of these symptoms of a heart attack or stroke, call 911 immediately.

Preparing for outpatient surgery

Thanks to the miracle of science, surgeries that once required a hospital stay can now be done on an outpatient basis. That's good news for those who recover better in the comfort of home, but it also means that any necessary arrangements must be made before the surgery date. If you or a loved one is facing outpatient surgery, try the suggestions below to help make the experience as smooth as possible.

PLAN AHEAD

As surgery day draws closer, you'll find it helpful to have certain things taken care of. Once you know your surgery date and time, ask yourself these questions:

- **Do I need to make any changes in my house's setup?** You may have to set up a temporary bedroom on the first floor if you think you'll have difficulty climbing stairs, for instance.
- **Do I have enough food in the house?** Stock up on meals in the freezer (either homemade or store-bought) so you

won't have to worry about food preparation. Ask your doctor about dietary restrictions or recommendations.

- **Will I need help in the house?** Plan to have a friend or a family member drive you home from the hospital. It's also a good idea to have someone stay with you during the first 24 hours. After that, schedule your visitors. They'll brighten your mood but may also cut into your resting time. Be sure to limit visits based on how you feel.
- **Is there anyone I'm responsible for?** If you have baby-sitting or caretaking responsibilities, remember to make other arrangements for your recovery period.

THE DAY BEFORE

Your doctor will probably instruct you not to eat or drink within eight hours of surgery. Ask your doctor whether you should abstain from taking medication or bring a day's dosage with you to the hospital.

If you're recovering from or coming down with a cold, tell your doctor. Your surgery may be postponed until you feel healthy.

Because skin-tone changes can sometimes be a sign of postsurgery problems, don't wear any makeup the day of surgery, including eye makeup and nail polish. Also, plan to wear loose clothing to the hospital.

AFTER SURGERY

Tell your healthcare team about any discomfort, irritation or pain you feel. How long you stay at the hospital will depend on your ability to drink fluids, walk and urinate. The amount of pain you're in will also affect your discharge. Before you leave, get a written list of postoperative instructions, symptoms to monitor and in-case-of-emergency phone numbers.





A strong, stable core helps reduce your risk of injury and prevent back pain.

At the core of fitness

postures that focus on building flexibility, balance and strength.

- **Tai chi.** This Chinese ritual involves precise, relaxed exercises to increase both agility and balance.
- **Pilates.** It's the latest craze, involving the use of certain exercises to create longer and stronger muscles without the bulk.
- **Weight training.** Focus on exercises that target your core muscles. Start light and increase the intensity of your workout over time. You may want to consult with a personal trainer to develop a program tailored to your needs.
- **Stability ball.** Sometimes

Head of core conditioning? It's the "apple-a-day" way for you to ensure that your body stays strong and steady. Simply put, core conditioning is a series of exercises that target your core—the body's center of power that starts just below your shoulders and ends just below your hips. You work out to gain strength in the muscles that control your trunk and spine while improving balance, agility and flexibility. Adding core strength helps you perform daily functions like lifting grocery bags, playing with your kids and getting in and out of your car. A strong, stable core also helps reduce your risk of injury and prevent back pain.

Try these exercises to build the back, abdominal, thigh and buttock muscles associated with a strong core. Check with your physician first to be sure you're starting at a fitness level that's right for you.

- **Yoga.** This ancient practice involves stretching and holding

called a Swiss ball or a resist-a-ball, this large, rubber exercise ball is one of the best ways to actively target and stabilize your core. Start with the ball slightly deflated or secure it against a wall until you're ready to add more challenge to your balance. Choose a ball that comes with a video of basic exercises.

- **BOSU ball.** Shaped like a stability ball cut in half—flat on one side, domed on the other—the BOSU ball is designed to activate and strengthen your core as you perform exercises on it. Many gyms offer BOSU ball classes, and you can also buy video and DVD workouts to use with the BOSU at home.
- **Stability equipment.** Other light equipment ranging from foam rollers, balance pads and discs and mini-trampolines (ideal for beginners) to balance and wobble boards (for the more advanced) can help you improve core strength and stability.



Managing menopause

The risks and benefits of hormone replacement therapy

By Clifford Gary, D.O.
Obstetrics and Gynecology

Menopause occurs when your ovaries decrease their estrogen production. More than 30 percent of women in the United States are postmenopausal and that number is growing. Your genes determine when you go through menopause—usually around age 51. It occurs earlier in women who smoke, have had hysterectomies and/or haven't had children. Given the current lifespan of women in the United

States, the postmenopausal period can last for more than one-third of the average woman's life.

EFFECTS OF MENOPAUSE

In the years prior to menopause, despite relatively normal estrogen levels, women may experience symptoms of estrogen deficiency, including hot flashes, irregular vaginal bleeding, night sweats, mood swings, vaginal dryness, insomnia, palpitations, headache and fatigue. Hot flashes are recurrent periods of flushing, sweating and heat sensations, accompanied by palpitations, feelings of anxiety and, sometimes, chills. A hot flash usually lasts one to three minutes and may recur as many as 30 times a day. Hot flashes occur in at least one half of women during natural menopause and more often after surgical menopause.

Decreased estrogen also causes vaginal, urethral and bladder tissue to atrophy within four to five years in one-third of women not taking hormone replacement therapy (HRT), resulting in vaginal dryness and recurrent vaginal infections.

Perimenopausal women often have difficulty concentrating and may lose short-term memory, which has been attributed to subtle sleep deprivation associated with hot flashes.

In addition, thin women with decreased estrogen levels are at an increased risk of developing osteoporosis. Lowered estrogen reduces bone formation and alters calcium balance. Most bone loss occurs during the first five years following menopause.

CONSIDERING HRT

Only about 15 percent of women who are eligible for HRT receive it, leaving 85 percent who either don't want or need it, or don't know about it.

HRT is used for treatment of hot flashes, vaginal dryness, recurrent urinary infections, short-term memory loss, night sweats, osteoporosis and sleep disturbances and may improve mood and psychological well-being. Side effects of HRT include vaginal bleeding (the reason most women discontinue HRT); breast tenderness; bloating; headache; and an increased risk of endometrial and breast cancer.

Estrogen appears to have a direct effect on mental function and has been shown to improve both long-term and short-term memory.

Regarding osteoporosis, women not taking HRT lose three to five percent of their bone mass after menopause. The Food and Drug Administration recommends using low-dose HRT for osteoporosis only after other treatments have proven ineffective. However, HRT's ability to help prevent osteoporosis may outweigh cancer risks for most women.

Estrogen increases HDL, or "good" cholesterol; decreases total cholesterol; increases the ratio of HDL to LDL, or "bad" cholesterol; causes vasodilatation (widening of the blood vessels); and acts as an antioxidant to prevent arterial plaque formation. However, long-term prospective trials of the cardiovascular benefits and risks of estrogen replacement therapy are lacking. Short-term trials suggest no overall decrease in mortality and a slight increase in blood clots in women with pre-existing cardiovascular disease. For women who already had a heart attack or have heart disease, it appears that HRT doesn't protect against another heart attack or dying from heart disease. According to the American Heart Association, HRT shouldn't be taken for the sole purpose of preventing heart disease in women who don't have heart disease or a history of a heart attack.

You shouldn't take HRT if you're pregnant, have undiagnosed uterine bleeding, active or recurrent thrombophlebitis (inflammation of a vein), gall bladder disease, liver disease, a history of breast cancer or endometrial cancer.

HRT remains a highly personal issue—your medical history, risk factors and lifestyle choices must be weighed. HRT has helped thousands of women improve their health, but only you and your doctor can decide if it will help you, too.



Clifford Gary, D.O.
Obstetrics and Gynecology

Learn more!

Ob/Gyn Clifford Gary, D.O., is available to answer your questions about hormone replacement therapy. Call (505) 546-6548 for an appointment.



10 secrets of weight-loss winners

You're probably well into your New Year's resolution of getting healthy and shedding those unwanted pounds. We know it's tough to lose weight—and just as difficult to keep it off. To help, researchers suggest these 10 habits of people who have successfully kept off the weight:

1. They walk several miles a week.
2. They rely on the support of friends, neighbors and co-workers. For example, they form exercise groups for motivation.
3. They eat different healthy foods in moderation. They cook with little or no fat, and eat fruits and vegetables, whole grains, nonfat dairy products and lean entrees.
4. They limit portion sizes. They know that calories (not just fat) count.
5. They distinguish hunger from anger, loneliness and fatigue. For those emotions, they call friends or breathe deeply.
6. They examine underlying issues that may cause overeating. Counselors can help resolve such issues.
7. They don't make excuses for overeating and use a lapse as incentive to take a walk or cut portions next time.
8. They use behavioral strategies like planning meals, storing foods out of sight and linking exercise to daily habits like walking.
9. They recognize that weight management—exercising, eating nutritiously and thinking positively—lasts a lifetime.
10. They live in the present. They participate in enjoyable activities instead of waiting for the perfect shape to do the things they want to do.

HEALTHWISE QUIZ

How much do you know about **menopause**?

Take this quiz to find out.

1 The average age when women in the United States reach menopause is:

- a. 51
- b. 55
- c. 48
- d. 64

2 The single biggest risk factor for osteoporosis, or brittle bone disease, is menopause. All of the following are signs that you may have osteoporosis except which one?

- a. height loss
- b. tooth loss
- c. joint pain
- d. backaches

3 One of the few reasons you should consider using hormone therapy is to:

- a. prevent ovarian cancer
- b. relieve severe menopausal symptoms such as hot flashes
- c. protect against heart disease
- d. lower your risk of breast cancer

4 The transitional period of two to 10 years before menopause, characterized by hormone fluctuations that can cause menopausal symptoms, is called:

- a. premature menopause
- b. premenopause
- c. perimenopause
- d. postmenopause

5 Of the following remedies, which is the only one approved by the U.S. Food and Drug Administration to relieve hot flashes?

- a. soy
- b. black cohosh
- c. phytoestrogens
- d. hormone therapy

Take control!

7 steps to healthy blood pressure and cholesterol

Heat disease and stroke kill millions of Americans each year. Unless you take steps to control your blood pressure and cholesterol levels, you may be at risk for these diseases. Get on the road to better health today with these seven simple steps:

- 1 Take a walk.** Exercise helps control your blood pressure and improves your cholesterol. Choose activities you enjoy and strive for at least 30 minutes of moderate-intensity physical activity on most days of the week.
- 2 Manage your weight.** Reducing your weight by just 10 pounds may help lower your blood pressure and reduce bad cholesterol. Since dropping pounds may be easier when working with a group, ask your healthcare provider to refer you to experts, groups or classes that can help.
- 3 Toss the cigarettes.** Smoking causes blood vessels to narrow and blood pressure to rise. It also makes it easier for cholesterol-rich plaque to stick to artery walls. A smoking cessation class can offer extra support.
- 4 Eat well.** Enjoy vegetables, fruits, whole grains, beans and legumes, along with moderate amounts of lean protein and healthy fats like those in salmon and olive oil. Avoid foods high in saturated fat, cholesterol, sodium, sugar and trans fatty acids.
- 5 Try soy.** A recent study shows that two servings a day of uncooked soy protein—found in tofu, soy milk or soy powder—lowers cholesterol levels by as much as 9 percent.
- 6 Limit your liquor.** Women should consume no more than one drink a day and men no more than two drinks a day.
- 7 Get screened.** Routinely checking your blood pressure and cholesterol levels keeps you on top of your cardiovascular disease risks. If your blood pressure's high, ask your doctor about buying a blood pressure monitor for home use.





First-aid foresight

Would you know what to do?

Sooner or later, we all face a medical problem that calls for immediate first aid and clear thinking. Knowing what to do next is a health skill everyone needs.

Bleeding. Apply pressure to the wound with a thick, clean cloth and raise the wound above the heart. If bleeding is severe or isn't controlled in five minutes or if the wound is very dirty, longer than an inch or gaping, get immediate medical care.

Puncture wounds. Don't self-treat deep puncture wounds since they can result in deep-tissue injury or infection.

Burns. Run cool water over minor burns, immerse in cold water or wrap the burned area in a cold, wet cloth for about 10 minutes or until pain subsides. Apply an antibiotic ointment and cover with a bandage. Call your doctor if blisters form.

Poisoning. Before doing anything, call the National Poison Control Hotline at 1-800-222-1222. Induce vomiting only if instructed.

Shock. Shock may cause cold, clammy skin; weakness; confusion; a rapid heartbeat; or deep, shallow or irregular breathing. Keep the victim warm and lying down on his or her back until help arrives. Don't give the victim anything to drink.

Electrical injuries. Do not touch someone who has just been electrocuted—the current may pass through you. While waiting for help to arrive, try to turn off the source of electricity.

Sprains and strains. To treat sprains and strains, follow the RICE method: rest, ice, compression and elevation. Apply ice packs or cold-water compresses to relieve swelling. Wrap the injury in an elastic bandage and keep it elevated above the heart.

Broken bones. Quickly call for emergency assistance. It's best not to move the person or attempt to straighten a broken bone.

Dine the Greek way

Although many of their meals consist of 40 percent fat, residents of the Greek isle of Crete who eat a traditional diet live longer than most other ethnic groups. In fact, Greeks who haven't succumbed to Western-style meals are 20 percent less likely to die of coronary artery disease and about 30 percent less likely to die of cancer than Americans are.

These stats make nutritionists take note, and what they've found is that the traditional Greek diet is one of the healthiest eating styles you can choose. The diet focuses on:

- vegetables, fruits, fish, grains, beans, nuts and legumes like chickpeas
- olive oil as the sole source of added fat
- only a few weekly servings of poultry, eggs and sweets
- daily, small to moderate amounts of cheese and yogurt
- red meats saved for special occasions only

What's more, the Greek diet is tasty—a sign that you don't have to give up good food to stay healthy.

BEWARE OF TROJAN HORSES

But be cautious: Some Greek foods found in the United States don't fit the heart-healthy profile of traditional



Greek cuisine. The nonprofit Center for Science in the Public Interest analyzed typical restaurant-size portions of some popular Greek meals. What they found could stop your heart. For example, spanakopita (spinach pie in phyllo dough) has 410 calories and 24 grams of fat, beef or lamb gyro (sandwich) has 760 calories and 20 grams of fat and moussaka (a meat and eggplant casserole) has 830 calories and 48 grams of fat!

er+ When seconds count

Our ED is standing by

You don't plan to visit the emergency department (ED). It just happens—and usually when you least expect it. At Mimbres Memorial Hospital (MMH), we practice a philosophy of emergency care called ER+, which helps further our goal of providing quality medical care as quickly and professionally as possible.

THE RIGHT TEAM

Our ED staff is ready to work for you during your time of need—24 hours a day, 365 days a year—treating injuries from minor cuts and bruises to life-threatening conditions.

OUR GOAL

Our goal at MMH is to do our best to get you through the process as quickly as possible. When you arrive at the ED, a nurse will check your vital signs and inquire about your symptoms, medical history, medications and drug allergies. The nurse will perform an initial evaluation to determine the severity of the illness. Patients who come to the ED are treated based on their condition's severity. Our staff gives top priority to more severe and life-threatening emergencies.

Our team of physicians, nurses and technicians are trained to provide timely, quality care supported by modern technology and diagnostic equipment. They'll listen to you, examine you carefully and prescribe a treatment plan you can understand and believe in.

At our ED, ER+ represents a commitment to providing



quality service by meeting the needs of our patients and their families with courtesy and respect. Your experience should be one of care, concern and attention to your emotional and physical needs. It's our goal to not only meet but exceed our patients' needs every day.

We want your feedback

ED patient satisfaction is important and we appreciate your feedback. Contact us via our Web site at www.mimbresmemorial.com or call (505) 546-5863.



Mimbres Memorial Hospital and Nursing Home
900 West Ash St.
Deming, NM 88030

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