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REAL PATIENTS. REAL STORIES.

Family Man

BRIAN JONES is lucky to be alive after an aortic dissection. Now he cherishes time with his wife, LAURA JO, and son, CASH
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LOSING BIG
Learn how one woman lost 156 pounds, with the help of Baylor page 3



NEW OPTIONS
Robotic prostate surgery may offer improved outcomes page 4



Exercise, Therapy or Surgery?

Has an injury sidelined you? Take our quiz to find the right course of action

When it comes to making a full recovery, getting the right treatment at the right time is key. Whatever your injury, this quiz will help you decide what your next step should be.

- 1 How long ago did the injury occur?**
 - a. Just recently, and it was the first injury I've had like it.
 - b. Recently, but it's a recurring one.
 - c. A few months ago, but I still have pain or difficulty.
- 2 How severe is or was your injury?**
 - a. Some light bruising (or none at all) and mild pain.
 - b. Bruising, swelling or pain that subsided in six weeks or less.
 - c. Severe discoloration (blue-gray extremities), severe bruising, swelling and pain lasting several weeks or more.
- 3 What impact has the injury had on your life?**
 - a. Not much; it's getting better with RICE (rest, ice, compression and elevation).
 - b. It's frustrating and it's getting in the way of doing the things I love.
 - c. I regularly modify my activities around my injury.

YOUR RESULTS

Mostly A's: Exercise

After the initial bruising, swelling and pain subside, Eric Stehly, M.D., an orthopedic surgeon on the medical staff at Baylor Regional Medical Center at Grapevine, recommends slowly and cautiously returning to light exercise as you feel comfortable, and calling your doctor if something doesn't feel right.

Mostly B's: Therapy

Repeat injuries usually indicate that a prior injury wasn't treated properly the first time. Physical therapy is likely your best bet for making a full recovery. "There's also a chance that a combination of surgery and physical therapy may be the right course of action," Dr. Stehly says.

Mostly C's: Surgery

"Injuries this severe and slow-to-heal are usually the result of broken bones, torn ligaments or prior injuries that should have received more aggressive treatment in the past," Dr. Stehly says. "An orthopedist can help figure out what's really going on in there and determine the next steps for therapy, surgery and beyond." ● *By Alissa Edwards*

FIND A DOCTOR Get It Checked

Still unsure of the next steps for healing your injury? The orthopedic experts at Baylor Regional Medical Center at Grapevine can help. To find a physician, call **1.800.4BAYLOR** or visit **FindDrRight.com**.

Baylor Regional Medical Center at Grapevine

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Baylor Health Care System Mission:

Founded as a Christian ministry of healing, Baylor Health Care System exists to serve all people through exemplary health care, education, research and community service.

Visit **BaylorHealth.com** or call **1.800.4BAYLOR** for information about **Baylor Regional Medical Center at Grapevine services, upcoming events, physician referrals, career opportunities and more.**

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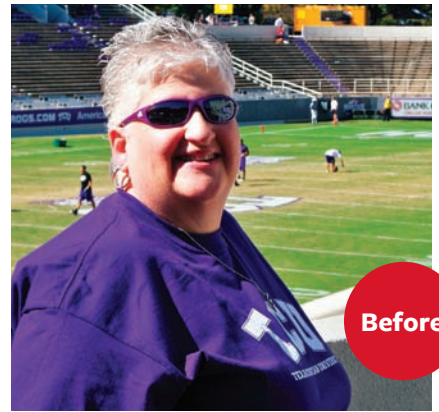
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BAYLOR
Regional Medical Center
at Grapevine

When Dieting Isn't Enough

Weight loss surgery helps local woman lose 156 pounds



Beverly Eden, before having weight loss surgery.

In June 2009, Beverly Eden boarded a flight for an Alaska vacation and discovered she couldn't buckle the seat belt. "I sat there and cried," she says. "When I told my husband, he said to just get one of those extensions, but I said, 'I'm not doing it.'" Eden covered her lap with her coat and flew without buckling in. But she was determined to do something about her weight.

This wasn't the first time the Rhome resident battled obesity. "I have lost 100 pounds three different times in my adult life," she says. But each time she gained the weight back, plus more. "I had pretty much given up on everything," Eden says.

After she returned home from Alaska she met a friend who had lost 75 pounds after weight loss surgery. Inspired, Eden started the process toward her own surgery the next day.

Exceeding Expectations

In January 2010, before her surgery at Baylor, she weighed 300 pounds. Her goal was to lose 100 pounds before her 50th birthday, and she reached it with two weeks to spare. Eden has lost a total of 156 pounds and now, at 144 pounds, is 10 pounds lighter than her doctor predicted.

Eden, a middle school office manager, had a host of other medical problems either caused or exacerbated by her obesity: high blood pressure, high cholesterol, restless leg syndrome, insomnia, fibromyalgia, acid reflux

and sleep apnea. She has eliminated or greatly reduced the treatments she needs to control these conditions, most of which have disappeared altogether.



Today, Eden is 156 pounds lighter and enjoying an active lifestyle.

A Change in Lifestyle

She points out that surgery is a tool, not a magic bullet. "Surgery allows you to eat much smaller portions and feel full," she

says. She has learned to think about what she's putting into her body and to make healthier choices.

She also has changed her activity level from "nonexistent" to "very active." She works out three to five times a week and also likes to walk, cycle and swim. With the extra pounds out of the way, she can keep up with her 10 grandchildren.

And those airplane seat belts? She flew home from New Orleans recently. "I had about 15 inches of seat belt left over!" she says. ●

By Deborah Paddison



LEARN MORE

Find Out If You Are a Candidate for Weight Loss Surgery

The Baylor Weight Loss Surgery Center offers a comprehensive program, including three different surgical options that can help you reach your weight loss goals. To register for the FREE online weight loss seminar, visit YourWeightLossSurgerySeminar.com.





Zooming In on Prostate Surgery



Robotic surgical procedures typically bring better outcomes

For men who have prostate cancer, surgery is sometimes the best treatment option. But traditional open surgery can sometimes lead to complications including lack of urinary control and decreased sexual function.

A new robotic technique may improve outcomes and reduce side effects. Bryan Bruner, M.D., a urologist on the medical staff at Baylor Regional Medical Center at Grapevine, explains that with robotic surgery, doctors inflate the abdomen with a gas and insert small instruments on robotic arms.

One of the instruments is a camera that magnifies the view 10 times. The image is displayed on a nearby console in high definition and 3-D. The surgeon controls the instruments with a joystick at the console, which allows for precise movements even at 10 times magnification. “It’s almost like being in the body of the patient,” Dr. Bruner says.

Check out the chart below for side-by-side comparisons of traditional and robotic surgery. • *By Deborah Paddison*

  **EXPLORE YOUR OPTIONS**
Learn More About Prostate Cancer Care

To learn more about treatment options for prostate cancer or for a referral to a urologist on the medical staff at Baylor Grapevine, call **1.800.4BAYLOR** or visit **BaylorHealth.com/Grapevine**.

	TRADITIONAL OPEN SURGERY	ROBOTIC SURGERY
Blood Loss	Typically, men lose more than a quart of blood, often requiring transfusions.	Because of the gas pressure in the abdomen, men typically lose less than 7 ounces of blood and are less likely to need transfusions.
Hospital Stay	Generally three to four days.	One night for 90 percent of men.
Catheter	Men often need a catheter for three weeks.	Men generally have a catheter from four to 10 days.
Recovery Time	Most people are back to normal daily activities in four to six weeks.	Most people are back to normal daily activities in one to two weeks.
Incisions	Surgeons open the lower abdomen with an 8- to 10-inch incision.	Surgeons insert the instruments through several incisions of about a half-inch or less.
Cancer Control	Studies have found success rates of 90 percent or higher.	Growing data indicate that the magnification could potentially provide even better success rates.
Urinary Control and Sexual Function	Most men have some degree of incontinence and loss of sexual function after prostate surgery. These side effects vary depending on age, cancer involvement and other factors.	With the robot, the magnified vision and more precise movements increase the chance of better erectile function and better urinary continence.

Source: Bryan Bruner, M.D., a urologist on the medical staff at Baylor Regional Medical Center at Grapevine



Solving the Mysteries of Multiple Myeloma

To find answers, investigators at the Baylor Sammons Cancer Center are studying myeloma at the cellular and molecular level

Multiple myeloma is a malignant plasma cell disorder that accounts for approximately 20,000, or 1.4 percent of, new cancer cases in the United States as well as about 11,000 deaths per year. Myeloma currently is considered an incurable blood cancer; however, new treatment has resulted in significant improvements in the quality of life of patients with myeloma and overall survival. Clinical investigators and research scientists at Baylor and other institutions are hoping to improve the treatment outcome.

The Baylor Charles A. Sammons Cancer Center is one of 16 sites participating in a study led by the Multiple Myeloma Research Consortium. This research trial, which will enroll at least 1,000 patients diagnosed with multiple myeloma, hopes to better understand the disease by studying how a patient's individual molecular profile may affect the disease's progression and his or her response to treatment.

"We're hoping to learn about changes that happen at the molecular level," says Tracy Messing, R.N., OCN, CCRC, research manager for the Office of Clinical Oncology Research Coordination at the Baylor Sammons Cancer Center. "If we can identify personalized molecular targets within each patient, the hope is that we could better tailor treatments for each individual."

Treatment Challenges—and Explorations

According to Messing, the current challenge with the treatment of multiple myeloma is that even the best therapies have a short duration, after which the cancer recurs. One of the goals of the study is to develop new drugs based on the findings.

Throughout the study, participants will provide bone marrow samples, which they would do as part of any treatment protocol. Patients will be treated using the existing therapy their doctor determines is most appropriate for their case. Participants will be tracked by researchers from initial diagnosis through the duration of their treatment, for a minimum of five years. The study will evaluate each patient's response to his or her treatment and the course the disease takes.

"How multiple myeloma progresses and responds to treatment at the molecular level is a very important scientific question," says Joseph W. Fay, M.D., the principal investigator at Baylor and director of immunotherapy for cancer at Baylor Research Institute. "This study is significant because it has the potential not only to impact the way we treat multiple myeloma, but may also serve as a model for the study and treatment of other cancers." ● *By Amy Lynn Smith*

RESEARCH
Do You Have Multiple Myeloma?

Most participants will be referred to the study by their physician. For more information, call **214.818.8472** or email **cancer.trials@baylorhealth.edu**.

Magnificent Bystander

By Alissa Edwards

Acting fast in the event of a cardiac or stroke emergency could save a life



When Laura Jo Jones received a magnet in the mail from Baylor Regional Medical Center at Grapevine that listed heart attack symptoms, she didn't think much of it. In fact, she almost threw it away.

But when her husband, 44-year-old Brian Jones, experienced severe chest pain as they were getting ready for bed one night, she was glad she had kept it. "My wife grabbed the magnet and started reading off the symptoms—and I had most of them," he says. "That's when she knew without a doubt to call 911."

While it wasn't a heart attack, it was a life-threatening tear in a major artery. "An aortic dissection sometimes presents like a heart attack, but classically the first symptom is a severe, tearing pain in the chest that radiates to the back," says Manish Assar, M.D., a cardiologist on the medical staff at Baylor University Medical Center at Dallas. "The key to survival in either case is receiving immediate medical attention."

Brian underwent a triple bypass, valve repair and pacemaker placement. "From the time I arrived at the Baylor Grapevine ER to surgery, it was less than three hours," Brian says. He's lucky he survived—and Laura Jo is part of the reason he did. "Most people don't survive an aortic

Brian Jones is lucky to be alive after an aortic dissection. His wife, Laura Jo, recognized symptoms and called 911.

dissection," Dr. Assar says. In other words, if his wife hadn't recognized his symptoms and acted immediately, he probably wouldn't be here today.



WATCH THE VIDEO
See Brian's Story

To hear more about Brian Jones' story, watch his video at BaylorHealth.com/Healthcast today.

The Push She Needed

When Janie Morris, 70, began experiencing vision trouble while reading the paper one afternoon, her first thought was that she should call the eye doctor. But as the minutes wore on, it became clear that something was very wrong. "I told my husband I couldn't see my hand spreading cheese on my cracker or the columns in the paper, and I wasn't speaking clearly," Morris says. "He made me take two aspirin and insisted we go to the hospital right away."

When they arrived at Baylor Medical Center at Garland, her husband wasted no time. "He looked the attendant in the eye and said, 'I believe my wife is having a stroke and we need attention right away,'" Morris says.

He was right. Within minutes, she was undergoing a CT scan and receiving appropriate treatment.

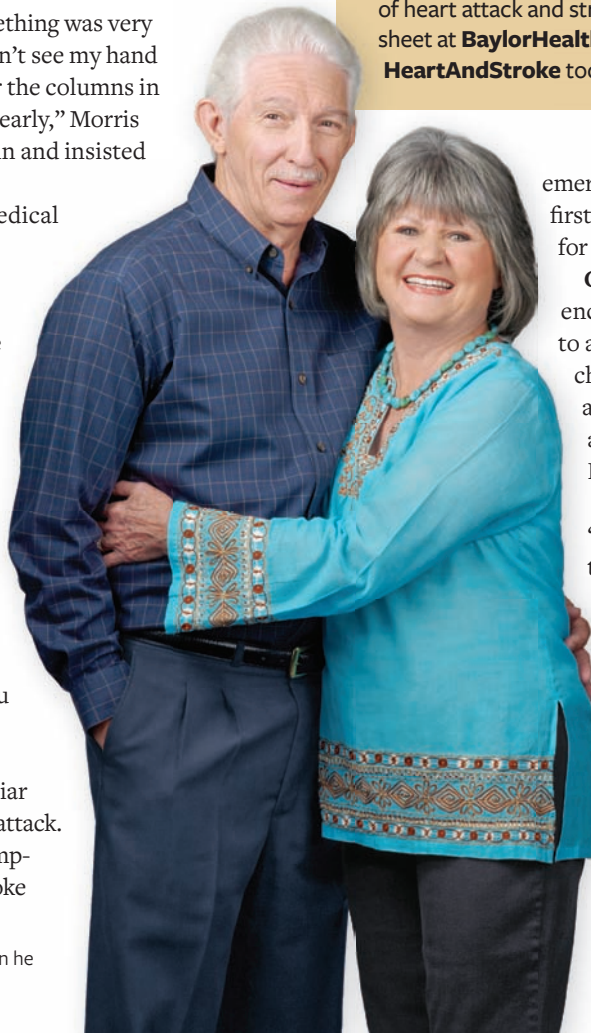
Be a Hero

You never know when you'll have the opportunity to recognize the signs of a cardiac or stroke emergency. Here's how you can be prepared:

Brush up on your knowledge.

As a rule, everyone should be familiar with the signs of stroke and heart attack. "Take the time to memorize the symptoms before you're in a heart or stroke

Jerry Morris saved his wife Janie's life when he recognized signs of a stroke and called 911.



DOWNLOAD Get Your Guide to Heart and Stroke Emergencies

To save a life, you have to know the symptoms of heart attack and stroke. Download a tip sheet at BaylorHealth.com/Healthcast/HeartAndStroke today.

emergency, and, of course, taking a CPR and first-aid class is a great way to be prepared for any emergency," Dr. Assar says.

Carry aspirin. "If someone is experiencing symptoms that could be related to a stroke or heart attack, have them chew two aspirin unless there's an allergy," says Richard Feingold, D.O., a cardiologist on the medical staff at Baylor Grapevine.

Always have your cell phone.

"You'll never regret calling 911 if it turns out to be nothing," Dr. Feingold says. "And if it's something, you could save their life."

Speak up. If you think someone may be experiencing a stroke or cardiac emergency, insist that he or she get help immediately. "Especially in the case of a stroke, a person may not be thinking clearly enough to make the right decision," Dr. Feingold says. "If they have a list of medications they are currently taking nearby, be sure to bring that to the hospital as well." ●

Saving Time, Saving Hearts

When a heart attack strikes, treatment speed is crucial in saving both heart muscle and a life. David Scherer, M.D., medical director of interventional cardiology at Baylor Regional Medical

Center at Grapevine, says just 3 percent of heart attacks are fatal if treatment starts within 30 minutes. That figure jumps to 6 percent after 90 minutes, and increases exponentially after that.

Established by the American College of Cardiology, the national standard for door-to-balloon times is 90 minutes. Baylor Grapevine is currently averaging 54 to 56 minutes—significantly lower than national guidelines.

Door-to-balloon times refer to the time from when a patient enters the emergency room to the time the patient receives a lifesaving procedure. This length of time is critical when a patient is having a heart attack because "time is muscle." The less

time it takes to restore blood flow, the less damage is sustained by the heart muscle.

Baylor Regional Medical Center at Grapevine treats heart attacks anytime, day or night. If you believe someone is suffering a heart attack, call 911.



GET HEART SMART Are You at Risk for a Heart Attack?

Learn more about risk factors and steps you can take to prevent heart disease at BaylorHealth.com/GrapevineHeart.



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At BaylorHealth.com/Exclusive you'll find health information for you and your family you can't get anywhere else, including:

Articles • Videos • Recipes • Quizzes • Tips

Community Calendar

January and February 2012

JANUARY 2012

What: Weight Loss Surgery Treatment Options

When: Thursday, Jan. 19; 6 p.m.

Where: Blue Mesa Grill
1586 E. Southlake Blvd., Southlake

What: Questions to Ask Your OB/GYN

When: Thursday, Jan. 26; 6 p.m.

Where: Blue Mesa Grill
1586 E. Southlake Blvd., Southlake

FEBRUARY 2012

What: Knee Replacement: Know Your Options

When: Thursday, Feb. 9; 6:30–8 p.m.

Where: Conference Rooms A and B
Baylor Regional Medical Center at Grapevine
1650 W. College St., Grapevine

What: Women's Heart Health—Healthy Eating & Cooking Demonstration

When: Tuesday, Feb. 14; noon–1 p.m.

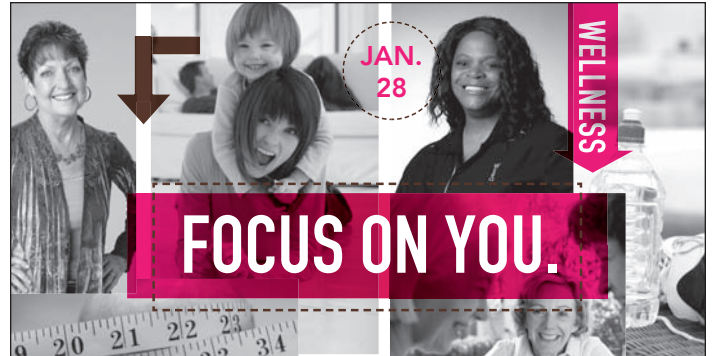
Where: Center for Continuing Education
Baylor Regional Medical Center at Grapevine
1650 W. College St., Grapevine



FIND A CLASS

Make Time for Your Health

For more information about the classes and events offered at Baylor Grapevine, visit BaylorHealth.com/Grapevine/Events.



SATURDAY, JANUARY 28, 2012

7:00 A.M.–11:00 A.M.

Take care of your health at our FREE annual women's health event, *For Women For Life™*. Enjoy breakfast and complimentary hand massages, receive free health screenings, learn about disease prevention and ask health questions to a panel of physicians. See you there!



Download a code reader on your smartphone and scan this QR code to get event details.

RSVP by calling **1.800.4BAYLOR**

Learn more at

BaylorHealth.com/GrapevineForWomen

