







RESISTING
REPLACEMENT?
Your options when it comes to joint surgery PAGE 3

### Beyond Human Limits

Robotic surgery helps speed recovery

### Is Robotic Surgery Right for You?

For a referral to a surgeon trained in robotic surgery on the Baylor Plano medical staff, visit **BaylorHealth.com/Plano** or call **1.800.4BAYLOR**.

BAYLOR REGIONAL MEDICAL CENTER AT PLANO was the first hospital in Collin County to offer robotic surgery with the da Vinci® S surgical system in 2007, and to date has completed more than 1,700 procedures.

The system's technology takes surgery beyond the limits of the human hand and gives surgeons greater precision, control and access to hard-to-reach areas. With it, complex operations can be performed through just a few small incisions.

Now, minimally invasive techniques can be used for procedures whose complexity once demanded open surgery, so surgery is much less invasive. After surgery, patients return to their schedules much more quickly and with less pain and discomfort than with traditional surgery.

Recently, Baylor Plano added an upgraded system, the da Vinci® Si<sup>TM</sup>. Butch Derrick, MD, chief of surgery at Baylor Plano, says that the new system enhances its robotic surgery offerings.

The robot features fluorescence imaging, which makes it possible for surgeons to see and identify key locations in surgery not otherwise possible.

The system also offers:

- Enhanced 3-D, high-definition vision with magnification up to 10 times, which allows the surgeon to see the surgical site better.
- Clear views of tissue and anatomy.
- Surgical precision far greater than the human hand.



### Robotic Options

Surgeons on the Baylor Plano medical staff are using the robotic system to perform the following procedures, and the list keeps growing.

- Prostate surgery
- Hysterectomy
- Pelvic floor reconstruction
- Gallbladder removal
- Endometriosis treatment
- Colon, small bowel and gastric resections
- Hiatal hernia repair
- · Liver biopsies
- Lymph node biopsies

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#### Back on Your Feet

With most of these procedures, once you've healed you'll be able to return to your former activities. If you have a partial or full joint replacement, you'll likely need to avoid impact sports, since they wear out the joint faster.

## RESISTING REPLACEMENT?

Total joint replacement is not your only option in treating joint pain

MANY PEOPLE ARE FINDING THAT AS THEY AGE, arthritis and deterioration wear down their joints and cause pain. Fortunately, there is a range of surgical options that can resurface or replace the joints, easing pain and restoring mobility.

"We have all these techniques to resurface the joint without doing total joint replacement," says Robert Berry, DO, an orthopedic surgeon and sports medicine specialist on the medical staff at Baylor Regional Medical Center at Plano. Options fall along a continuum of care starting with lessinvasive treatments and include:

**Arthroscopy** is a procedure in which a surgeon removes loose cartilage.

**Marrow stimulation** is when a surgeon places small holes in the bone to stimulate cartilage growth. It's typically recommended for people in their early 50s or younger with smaller lesions.

**Viscosupplementation**, in which medication is injected into the joint to help lubricate it, is most effective for early arthritis.

Cartilage transplant, usually used in people age 55 and younger, is when doctors replace worn or damaged

cartilage with your own transplanted cartilage or donor cartilage. It's most often performed in the knee and allows people to return to their full activity level, including impact sports.

**Osteotomy** is a procedure that realigns the bone to take pressure off arthritic compartments or surfaces.

Partial joint replacement replaces only the part of the joint that's worn out and leaves the rest of the joint intact.

Total joint replacement is when the entire joint is replaced. As people age they are more likely to need partial or

total joint replacement. Newer technologies provide better wear and allow people to remain fairly active.

With the less-invasive procedures, people typically recover more quickly with less pain than with a total joint replacement. And if these procedures provide relief for several years and then joint deterioration continues, total joint replacement is still an option.

>22%

The percentage of adults who have arthritis.

—Centers for Disease Control and Prevention

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#### Let Us Help You Decide

For a referral to an orthopedic specialist on the Baylor Plano medical staff, call **1.800.4BAYLOR** or visit **BaylorHealth.com/PlanoOrtho**.

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The truth behind four common heart health myths

Eight weeks after Christy Pfeifer-Gamez gave birth to her fourth child, Lillian, on the Fourth of July, she started feeling ill. One morning she couldn't even get out of bed. The doctors thought it might be pneumonia. They never expected it to have anything to do with her heart. After all, she was too young for that, they said.

Fortunately, Pfeifer-Gamez's family persuaded her to transfer her care to Baylor University Medical Center at Dallas. "My husband, family, everyone just wanted me at Baylor," the 28-year-old says. Their insistence may have saved her life. The doctors at Baylor discovered she had postpartum cardiomyopathy, meaning her heart had become weak and couldn't pump blood efficiently. "I was put in a medically induced coma for three weeks," she recalls. "After coming out of the coma,

I had to learn how to do everything again. It took a lot of help from my physical therapists, my family and my husband for me to recover."

#### Watch Christy's Story

Hear Christy talk more about her experience by visiting **BaylorHealth.com/Exclusive** today.

Christy Pfeifer-Gamez thought she was just getting sick eight weeks after giving birth to her daughter Lillian. But in reality, it was heart disease.



#### Do You Have Diabetes?

For a referral to an endocrinologist on the Baylor Plano medical staff, visit BaylorHealth.com/Plano or call 1.800.4BAYLOR.

Today, more than a year later, Pfeifer-Gamez is leading a heart healthy lifestyle. She stays active by playing in a coed soccer league with her husband, Freddy, and has changed her diet. "I'm on a low-sodium diet," she says. "I don't buy chips or snacks for the house. We eat more fruit and more salads."

Pfeifer-Gamez also sees her doctor regularly and will have to take medication for the rest of her life. She knows that heart trouble doesn't discriminate based on age. Do you? It's time to dispel this heart myth, and a few others, for good.

MYTH: Heart disease can't affect me. I'm too young!

**FACT:** Think again. As Pfeifer-Gamez's experience shows, cardiovascular disease takes many forms, including heart failure, and can affect anyone. "Patients can be teenagers and younger, or in their 80s," says Steve Simpson, MD, a cardiologist on the medical staff at Baylor All Saints Medical Center at Fort Worth.

This is why it's important to know your family history and get your blood pressure and cholesterol levels checked early and often. "Plaque buildup can start as early as the teen years," says Neeraj Arora, MD, a cardiologist on the medical staff at Baylor Regional Medical Center at Grapevine.

MYTH: Heart disease is a man's disease.

**FACT:** "There could not be a bigger myth than this," Dr. Arora says. "Heart disease is the leading cause of death among American women." In fact, it kills more women ages 65 and older than all cancers combined—including breast cancer.

And yet most women tend to ignore or explain away the subtle symptoms that might signal heart trouble, including shortness of breath (with or without chest pain), nausea, cold sweats and pain in your chest (or arms, jaw, neck, back or stomach). If you experience any of these warning signs, speak up and seek help immediately.

MYTH: No one in my family has had a heart attack, so I'm off the hook.

**FACT:** First, make sure that's true. Many people aren't aware they have a family history of heart disease until a crisis strikes. Ask your parents and siblings if they have high blood pressure or cholesterol levels—both important risk factors to know about.

Second, if your own numbers are high, you smoke or you aren't physically active, then you're at risk, no matter what your family history is. On the other hand, even if you eat right and exercise, you can still be susceptible. Unfortunately, there's no such thing as zero risk when it comes to heart disease, which makes managing the factors within your control (weight, activity level, diet) so important.

MYTH: I would be able to tell if I had high blood pressure.

**FACT:** "There's a reason why hypertension is called the silent killer," Dr. Arora says. "You may not have any symptoms from it." The same is true for high cholesterol levels.

Normal blood pressure is 120/80 or lower; your total cholesterol should be less than 200. Do you know what your numbers are? "Today there's not much of an excuse not to know," Dr. Simpson says.

#### The Link Between **Diabetes and Heart Disease**

People with diabetes are two to four times more likely to have heart disease, points out Sherry Davidson, RN, CDE, diabetes coordinator at Baylor Regional Medical Center at Plano. While the connection between the two conditions isn't entirely clear, insulin resistance plays a part.

"One of the things that I remind patients is that in general, the risk factors for heart disease—smoking, excess weight, lack of exercise, poor diet—are also linked with type 2 diabetes. Insulin resistance increases risk even more," Davidson says.

She says to reduce heart disease risk, people with diabetes should control the ABCs of diabetes:

A1c, which is a measure of blood sugar levels.

#### Blood pressure. Cholesterol levels.

Lifestyle modifications, such as exercise and dietary changes, and medication, can help. Davidson recommends 150 minutes of exercise a week. "It doesn't have to be going to the gym every day," she says. "A walk can do wonders."

Switching to smaller, more frequent meals helps, too. "A lot of people eat large meals but then skip meals. Eating less but more often can help you control portions," she says.

And don't forget a support system. "A lot of people make changes for a month or two but find it hard to continue. You need to find someone or something that can keep you motivated for the long haul," she adds.

For information on the Diabetes Self-Management training classes and support group, call 1.800.4BAYLOR.



## Optimism in Cancer Research

### Baylor studies of cell-based cancer vaccines show promise

FOR MORE THAN A DECADE, the researchers at Baylor Institute for Immunology Research (BIIR), a component of Baylor Research Institute (BRI), have been studying cell-based cancer vaccines—a treatment option that shows promise.

The research at BIIR focuses on using dendritic cells, which are the body's first

line of defense against immune system challenges. Because certain types of cancer can get past the immune system, BIIR researchers activate a patient's own dendritic cells to fight against these forms of cancer.

The work is being carried out with melanoma, an aggressive form of skin cancer, as well as breast and pancreatic cancers.

"We have made substantial progress in the laboratory, especially in pancreatic

and breast cancer," says Karolina Palucka, MD, PhD, director of the Ralph Steinman Center for Cancer Vaccines at BIIR. "We are now requesting FDA approval for two larger clinical trials."

One of the studies will look at a pancreatic cancer vaccine that has been in development at BIIR for more than four years. The other will study

#### Get Involved

To learn about these and other research trials at Baylor open to participants, visit **BaylorHealth.com/AdvancingMedicine**.

a vaccine against breast cancer, also a long-term project.

Working in conjunction with other researchers—including Yong-Jun Liu, MD, PhD, vice president and chief

scientific officer of BRI—Dr. Palucka hopes testing these vaccines in a larger patient population will validate their findings to date.

"We are very encouraged based on our clinical trials data in patients with melanoma from the past 10 or 12 years," she says. "We have good data in terms of patients' survival, so we're

optimistic."

Dr. Palucka credits the dedication and hard work of the team over many years with the progress they've made so far.

"We don't think these vaccines will solve

everything, but they could be a very important component," she explains. "Immunotherapy as cancer therapy is coming of age and is becoming more mainstream in oncology."

## **Epilepsy Explained**

What do you know about this seizure disorder?

MOST PEOPLE KNOW THAT EPILEPSY is a disorder of the brain that causes seizures. But beyond that, the condition can be mysterious. We answer the most common questions about epilepsy.

#### WHAT EXACTLY IS EPILEPSY?

Epilepsy is a disorder in which the brain mistakenly creates abnormal electrical signals. Depending on areas of the brain that are affected, these abnormal signals can lead to amnesia, blackouts, involuntary muscle contractions, and unresponsiveness.

### I'VE HAD A SEIZURE. DOES THAT MEAN I HAVE EPILEPSY?

Not necessarily. There are several reasons that the body might have a single

seizure, including some medications, illness, fever, brain damage and abnormal brain development.

"It usually requires two unprovoked seizures and/or an abnormal EEG to establish a diagnosis," says Avesh Verma, MD, a neurologist on the medical staff at Baylor Regional Medical Center at Plano.

#### ARE ALL SEIZURES THE SAME?

Each case of epilepsy is different and ranges from mild to severe. Seizures are



#### Need a Neurologist?

Do you think you may have epilepsy or another brain disorder? Visit **BaylorHealth.com/PlanoNeuro** to learn more about the neurosciences services offered at Baylor Plano

not all the same. While movies portray seizures as violent shaking and loss of consciousness, some people experience seizure as a simple staring spell or jerky movements of the arms or legs.

### WHAT SHOULD YOU DO IF SOMEONE IS HAVING A SEIZURE?

"The best thing to do is to make sure the patient is in a safe environment," Dr. Verma says. "Put them on the floor on their side. Do not put anything in their mouth or try to hold them down. Just stay with them until it's over and try not to interfere."

The seizure should pass in a couple of minutes. "But if it lasts longer than five minutes, call 911," he says.

#### **CAN EPILEPSY BE TREATED?**

Yes. "Finding the right treatment can take time," Dr. Verma says. "We start with a single medication. Then we might add another or change to a different medication until we find the right one."

Certain types of epilepsy can be cured with surgery, though meticulous preoperative investigation is required to determine the best approach.



# Ten years of caring. That's commitment.

When you care for as many members of a community as long as we have, you can't help but care for the whole community. Over the last decade, we at Baylor Medical Center at Frisco have become deeply involved in the life of this community. With over 400 physicians, our quality and range of services for the family continue to grow substantially. Beyond that, we've contributed more than 2,000 volunteer hours to Frisco in 2011 alone. So while we'll continue providing the advanced patient care you've come to expect of us, please know that whether you're inside or outside our hospital, we're always working for your health.

Celebrating 10 years of award-winning commitment.

For a virtual tour or for more information, go to **BaylorHealth.com/Frisco** or call **1.800.4BAYLOR**.

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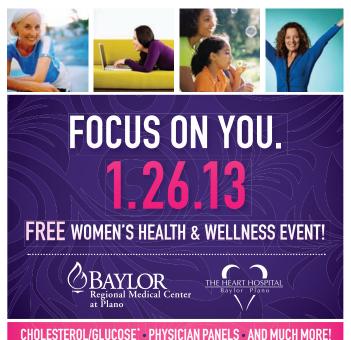
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#### SATURDAY, JANUARY 26, 2013 7:00 AM TO NOON

Take care of your health, inside and out, at Baylor Regional Medical Center at Plano and THE HEART HOSPITAL Baylor Plano's annual women's health event, For Women For Life™. Receive free health screenings, visit exhibitor booths and attend health presentations by physicians and other health professionals. Get your girlfriends together and register today!

Go to BaylorHealth.com and keywordsearch:ForWomen8 RSVP at 1.800.4BAYLOR

