

March 2012

Baylor Health

GRAPEVINE EDITION

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REAL PATIENTS. REAL STORIES.

Family Connection

DEBBIE STALLINGS thought she was safe from cancer since it didn't run in her family. Unfortunately, that wasn't the case

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Pictured with Debbie are her sons Tommy and Tony



PREGNANCY Q&A

Get answers to some of the most frequently asked questions page 2



THE IMPORTANCE OF SCREENINGS

How a colonoscopy helped a local man beat cancer page 3

Healthy Mom, Healthy Baby

Answers to common questions about pregnancy

Are you pregnant or planning to become pregnant? Carrie Phelps Morris, M.D., an obstetrician/gynecologist on the medical staff at Baylor Regional Medical Center at Grapevine, answers frequently asked questions.

Q. What steps should I take before becoming pregnant?

A. Start a prenatal vitamin to help prevent neural tube defects. Talk to your doctor about your immunizations, rubella status, current medications and any medical or genetic conditions that could complicate the pregnancy. Stop smoking.

Q. What are the best food choices?

A. Eat a well-balanced diet low in saturated fat and sugar. That means plenty of green vegetables, fruits, lean meats, low-fat dairy products and complex carbohydrates. Most pregnant women need only an additional 300 calories a day. Drink at least eight glasses of water daily.

Q. What food should I avoid?

A. Most foods are safe. Keep caffeine under 200 mg or one drink per day. Avoid alcohol. Limit seafood to two servings per week and avoid high-mercury fish. Avoid soft cheeses, raw sushi and deli meat.

Q. Can I exercise?

A. Yes, as long as you do not have any obstetrical or medical complications. Avoid exercising flat on your back after the first trimester. Stop exercising when you feel fatigued. Good choices are walking, light jogging, swimming and prenatal yoga.

Q. How much weight should I gain?

A. Average-weight women should gain 25 to 35 pounds. Underweight women may gain 28 to 40 pounds. Overweight women will only need to gain 15 to 25 pounds.

Q. What symptoms should I expect?

A. In the first trimester you may notice nausea, fatigue, food aversions, abdominal bloating and cramping. In the second trimester your energy may return and your nausea may subside. In the third trimester ligaments' stretching may cause pain down the sides of your abdomen. Heartburn and constipation can occur throughout pregnancy.

Q. Where can I obtain more information?

A. Prepared Childbirth classes, offered at Baylor Grapevine and in Keller, provide an overview of pregnancy, delivery, breastfeeding and more. The cost is \$130 per couple. To register, call **1.800.4BAYLOR**.



FIND A DOCTOR Give Your Baby a Strong Start

For a referral to an obstetrician/gynecologist on the medical staff at Baylor Grapevine, call **1.800.4BAYLOR** or visit **FindDrRight.com**.

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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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BAYLOR
Regional Medical Center
at Grapevine



Beating Colon Cancer

What you can learn from one man's experience with the disease

When Michael Fern was 46, he noticed symptoms that concerned him. He saw blood in his stool, had changes in his bowel movements and felt less energetic than usual. He discussed his symptoms with his family doctor, and his doctor suspected hemorrhoids because he had no family history of colorectal cancer.

But over time his symptoms worsened. "I was a very active person—doing yard work, playing with the dog, painting—and on Saturday mornings I was taking four-hour naps. I was getting a little older, but that just wasn't right," he says.

In October 2010, about a year and a half after he first noticed his symptoms, Fern scheduled a colonoscopy. Minutes afterward he found out he had a cancerous tumor. He immediately launched into an aggressive treatment program.

A Multipronged Treatment Plan

Fern began a five-day-a-week radiation regimen along with oral chemotherapy. Once he finished those treatments he had surgery to remove the tumor and temporarily redirect his small intestine outside of the body.

Close to 30 percent of the average-risk people who come in for a screening colonoscopy at age 50 have precancerous polyps.

Next, he started another chemotherapy regimen. Finally, in August 2011, he had surgery to reconnect his small intestine.

"This is the best I've felt since even a year before I was diagnosed," Fern says. "Even though I didn't know I had cancer, now that I look back I can tell something was wrong."

Watch for Warnings



Clifford Simmang, M.D., a colorectal surgeon on the medical staff at Baylor

Regional Medical Center at Grapevine, notes that some studies are finding colorectal cancer is becoming more frequent in people age 35 to 50, like Fern.

"Just because you're young doesn't mean bleeding is hemorrhoids," he says. If you notice bleeding, frequent diarrhea or constipation, abdominal pain or unexplained weight loss, talk to your doctor about scheduling a colonoscopy.

Dr. Simmang says that close to 30 percent of the average-risk people who come in for a screening colonoscopy at age 50 have precancerous polyps. Those polyps can be removed during the colonoscopy, eliminating their risk of becoming cancerous. And if a colonoscopy shows early-stage cancer many tumors can be removed laparoscopically.

Average-risk people with no signs of polyps can generally wait 10 years before having another colonoscopy. ●

  **MAKE TIME FOR YOUR HEALTH**
Schedule a Screening Today

For a referral to a colorectal specialist at Baylor Grapevine, call **1.800.4BAYLOR** or visit **FindDrRight.com**.



DON'T WAIT **Get a Head Injury Checked**

If you or a loved one has a suspected concussion, go to the emergency room. To find a sports medicine physician who can help you bounce back from a sports injury, visit FindDrRight.com today.

Crash Course

Learn how to spot a concussion, and what to do if one occurs

While concussions that strike athletes grab attention, ballplayers aren't the only ones at risk. Any blow to the head can lead to a concussion. Although sports injuries are common causes, so are falls and car accidents. Jason Wander, D.O., a family physician and board-certified ImPACT concussion consultant on the medical staff at Baylor Regional Medical Center at Grapevine, answers some common questions about concussions.

What is a concussion?

A concussion is a brain injury that results when a blow to the head jars the brain inside the skull.

What are the symptoms?

If you've been hit in the head, watch for symptoms, which come on fairly quickly after the injury but may last for weeks. They include headache, nausea, balance problems or dizziness, double or fuzzy vision, sensitivity to light or noise, feeling mentally foggy, and concentration or memory problems.

Others may notice that you seem dazed or stunned, move clumsily, answer questions slowly, lose consciousness temporarily, have behavior or personality changes, or forget events that happened before or after the blow.

Athletes in particular may forget plays or be unsure of the game, score or opponent. They also might find that symptoms worsen with exertion.

How are concussions diagnosed?

If you have a suspected concussion, get it evaluated. Your doctor will ask questions to test your orientation, concentration and memory, and for amnesia.

How are concussions treated?

Most concussions will heal on their own with physical and cognitive rest. Once symptoms clear, you should return to activity gradually. For athletes, that means starting with noncontact, no-risk physical exertion and building slowly back to preinjury levels. For cognitive rest, you may need time off from work

Avoid Double Trouble

If you get a concussion, it's important to avoid a second injury. "When you get a concussion, your brain is in a vulnerable state," says Jason Wander, D.O., a family medicine specialist on the medical staff at Baylor Regional Medical Center at Grapevine. "A second head injury can cause more prolonged, sometimes permanent, postconcussion symptoms like memory loss and headaches."

To avoid a second concussion:

- Take time to rest and recover from your first concussion.
- Always wear your seat belt and obey traffic laws.
- Wear protective headgear when participating in contact sports and other physical activities where head injury is possible, including biking, skiing or in-line skating.

and driving. And students may need academic accommodations.

Mild concussions may heal in hours, but recovery from more serious concussions may take weeks or even months. ● *By Teresa Caldwell Board*

Sleep on It

How bedtime can help (or hurt) back pain

Will a new mattress alleviate your aching back? Or is it all about sleep position? Here, we dispel some common myths about the links between sleep and back pain.



MYTH:

You need a very firm mattress to avoid back pain.

FACT:

A mattress needs to be comfortable, with good, even support. “The old recommendations about using a very hard mattress or placing plywood under your mattress were made at a time when mattresses were not evenly supported and would sag,” says William Bruck, M.D., an orthopedic surgeon on the medical staff at Baylor University Medical Center at Dallas. “That’s no longer the case.”

MYTH:

You need to sleep in a certain position to prevent back pain.

FACT:

Any position that’s comfortable for you is fine. “If you’re asleep and something hurts, you’re going to turn over,” says Meredith Adams, D.O., a physical medicine and rehabilitation specialist on the medical staff at Baylor Regional Medical Center at Grapevine. “Your body will wake you up.”

MYTH:

Heating pads can ease back pain while you sleep.

FACT:

Ice packs are more helpful than heating pads, though some people find relief by alternating ice and heat. But you should try these treatments in the daytime. “Sleeping on ice or heat can injure your skin,” says Venkat Sethuraman, M.D., an orthopedic spine surgeon on the medical staff at Baylor Medical Center at Irving.



MYTH:

Bed rest is the best treatment for a back injury.

FACT:

Studies have found that more than two days of bed rest can actually worsen your condition. And even two days may not be necessary. It’s fine to take it easy when your back hurts, but it’s better to be up and moving around. “We’re not meant to lie around like that,” Dr. Adams says.

● By Stephanie Thurrott



A Good Night’s Rest

If your back, neck or shoulder pain is interfering with your sleep, try:

- Lying on your side with a pillow between your knees.
- Using a pillow to support your back so it props you up.
- Sleeping on your side or back, not your stomach.
- Hugging a pillow while you sleep.
- Choosing a comfortable, supportive pillow.

Learn more about how poor sleep affects your health and more tips for how to get better ZZZs by downloading a tipsheet at BaylorHealth.com/SleepTipsheet today.

GET RELIEF
 **Don’t Let Back Pain Keep You Up at Night**

If your back pain is severe or keeping you up at night, talk to your doctor. To find an orthopedist on the Baylor medical staff, visit FindDrRight.com today.

Family Predictors

By Alissa Edwards

How your family tree affects your cancer risk—and how it doesn't

Debbie Stallings, a 55-year-old Plano area mother of two grown sons, thought she was safe from cancer since there was none in her family. “I put off my annual mammogram one year because of an appointment conflict,” she says. “No one in my family has had breast cancer, so I guess there’s a part of me that thought I’d be OK, too.”

But six months later, she remembered her missed appointment. “I literally sat up in bed when I realized I never went in, so I scheduled it the next day,” Stallings says. “A few weeks later I was diagnosed with cancer.”

Stallings had a mastectomy in October 2007 and has been cancer-free ever since, but she remains a vigilant defender of her health. “It’s naïve to think you’re destined to live a long life just because your parents did,” Stallings says. “You have to take care of yourself and stay on top of screenings. No one else is going to do it for you.”

Some people, like Stallings, falsely believe that having no family history of cancer protects them from the disease. And others, who do have a family history of cancer, may falsely assume that they are destined to get it, no matter what. But that’s not necessarily the case either.

“[People with family history of cancer] often think there’s nothing they can do,” says C. Richard Boland, M.D., chief of gastroenterology for the GI Cancer Research Laboratory at Baylor Research Institute (BRI) at Baylor University Medical



WATCH THE VIDEO

See Debbie's Story

To hear more about Debbie Stallings' journey through cancer diagnosis and treatment, watch her story at BaylorHealth.com/MyStory.



Center. “That’s simply not the case.” In fact, genetic testing is one tool available that could help protect one’s family and future generations.

Is Cancer in Your Genes?

“We’re still discovering markers in the human genome when it comes to cancer,” says Jennifer Rhees, research lab supervisor for the GI Cancer Research Laboratory at BRI. “But there are many cancers that we know do have a genetic component. For example, Lynch syndrome is an inherited predisposition towards colon and other cancers.”

If there are multiple cancers in your family, don’t just throw in the towel and succumb to it, Rhees says. “Just because you have cancer in your

family tree doesn’t mean it’s necessarily going to be passed down to you.”

“It’s important to distinguish between familial cancers—those that appear multiple times in families due to environmental factors or lifestyle choices—and hereditary cancers, which can be attributed to a single gene mutation,”

Dr. Boland says. “Only about 3 percent of colon cancer cases—and probably most other cancers—are inherited.”

Debbie Stallings never expected to have breast cancer, since it doesn’t run in her family. Fortunately, sons Tommy and Tony were there for her.

DOWNLOAD IT NOW Chart Your Family History

Know what you’re up against. Download a free family health tree and start filling it out today! Then, talk to your doctor about what’s on it. Get yours at BaylorHealth.com/HealthCast.

A genetic counselor can help you understand the difference and provide testing to identify any mutations in your DNA. If the results are positive, look at it as an opportunity to be proactive, instead of as a dark cloud over your future.

“Having a predisposition toward cancer isn’t a death sentence,” Rhees says. “Knowing that you carry a mutated gene offers valuable information that can help you make informed decisions about preventive care.”

In Your Hands

Regardless of your family’s health history, the importance of being proactive about your health, communicating with your physician and regular screening can’t be emphasized enough.

“Keep a detailed history of your family’s health conditions, age at diagnosis and age at death—and then share that information with your physician,” Dr. Boland says.

“And consider meeting with a genetic counselor, who can offer additional testing and valuable education,” Rhees adds. “Then follow your physician’s orders when it comes to recommended screenings and make appropriate lifestyle changes to reduce your risk.”

Most of all, remember that the most significant determining factor of your future health isn’t that your parents died of cancer young or that your grandparents are still living cancer-free into their 90s—it’s you. ●

HOW GENETIC TESTING CAN HELP

If you’re concerned about cancer or other inherited diseases in your family tree, a genetic counselor can help. Here, C. Richard Boland, M.D., chief of gastroenterology for the GI Cancer Research Laboratory at Baylor Research Institute at Baylor Dallas, explains how.

1 RISK ASSESSMENT

A genetic counselor can help assess your risk of disease based on your family and medical history, and a blood test to identify mutations in your DNA.

2 EDUCATION

Your counselor can educate you about your results, guide you toward further testing, offer suggestions on prevention and management, and share additional research in areas of interest.

3 COUNSELING

In addition to helping you assess your risk, a genetic counselor can help you make informed decisions about prevention for future generations and modifying your screening schedule or lifestyle to aid in prevention and early detection.

MORE → For a referral to a genetic counselor, please call **1.800.4BAYLOR**.

For By Teresa Caldwell Board the Girls

5 things no one ever told you about being a woman

Women's health issues have come out of the shadows and into the spotlight since the days when visibly pregnant women didn't appear in public and breast cancer was a taboo subject. Now, politicians debate cervical cancer vaccines and football players wear pink on national TV to promote breast cancer awareness.

All this attention to women's health is a great thing. But you might get the impression that if you've kept up with mammograms and Pap tests, you've done everything you need to do.

To stay whole-body healthy your whole life, here are some things every woman should know:

1 Your annual exam is about more than getting a Pap test.

Women with a history of normal Pap tests only need to get them every one to two years. (Talk to your doctor about the frequency that's right for you.) But an annual exam is still important.

"Since Pap smear screening recommendations have changed, women think they don't need to come in for annual exams," says Danielle Burkett, D.O., an obstetrician and gynecologist on the medical staff at Baylor All Saints Medical Center at Fort Worth.

A well-woman exam is a chance to cover other important screenings and discuss lifestyle habits. "Women often don't realize that heart disease is the No. 1 killer of women," Dr. Burkett says. To screen for heart disease risk, your provider will look at your blood pressure, weight, family history and cholesterol level, along with lifestyle factors such as smoking and exercise.

A colonoscopy at age 50 is another important screening women need. "Colon cancer is one of the top three causes of cancer death in women," Dr. Burkett says. Plus, if the results are normal, you won't need another test for 10 years.

2 Strength training isn't just for men.

"As women get older, we lose some of our muscle mass," Dr. Burkett says. Incorporating strength or resistance training into your regular workout increases metabolism, boosts fat burning and improves bone health.

"Women may think of big, muscular guys in the gym lifting huge barbells," Dr. Burkett says. In reality, you can use light hand weights, resistance bands and even your own body weight. Add a couple of days of strength training to three days of 30-minute cardio sessions for a balanced fitness program, Dr. Burkett suggests.





A CLICK AWAY

Do You Have a Doctor?

Women who have a doctor tend to be healthier than those who don't.

To find a doctor near you, visit FindDrRight.com today.

3 Children aren't the only ones who have "accidents."

Stress incontinence is common after childbirth and usually resolves on its own. But if you continue to leak urine when you cough, laugh or sneeze, you don't have to live with it.

For stress and other types of incontinence, "there are a variety of treatment options that range from very minimally invasive, like physical therapy, to medications and surgical options," Dr. Burkett says.

5 Losing sleep can leave you vulnerable to illness.

Feeling tired isn't the only price you pay for selling yourself short on sleep. In one study, people were three times more likely to catch a cold if they had slept seven hours or less, compared with those who had slept at least eight hours.

Not only that, sleep deprivation has been associated with weight gain, which can affect your risk for chronic disease. Making time for a regular, restful night's sleep can pay off in more energetic, healthy days. ●

4 Your shoes can be a pain—in more than just your feet.



Those killer stilettos may be as menacing as they sound. Over time, high heels can cause shortened calf muscle fibers and thickening and stiffening of the Achilles tendon. They also strain knee joints, increasing the risk of osteoarthritis.

"It's important to realize that your feet are your foundation," Dr. Burkett says. By throwing off your body alignment, high heels can cause knee, hip or back pain, even headaches. Take a step in the right direction by wearing lower heels, and wear them less often.

Know What's Normal

Not every lump in the breast means cancer. In a common condition known as fibrocystic breasts, fibrous tissue causes breasts to have a lumpy texture. "I tell my patients it's important to be familiar with what's normal for them, so that when something does seem different, they're more likely to be aware of it," says Danielle Burkett, D.O., an obstetrician and gynecologist on the medical staff at Baylor All Saints Medical Center at Fort Worth.

Of course, any new or different lump should be evaluated by your health care provider. But the good news is, "especially in premenopausal women, breast masses are generally benign," Dr. Burkett says.

Getting Lifesavers Back to Their Lives

Baylor studies customized cardiac rehab for firefighters and others in strenuous occupations

Cardiac rehabilitation is an essential component of helping people regain strength and confidence after a heart attack or other cardiac event. But what a retiree needs to return to tasks like gardening is vastly different from what a 40-year-old firefighter needs to get back on the job.

That's why Baylor Jack and Jane Hamilton Heart and Vascular Hospital has established a Return to Work Lab, where customized cardiac rehab is offered to people who work in specific fields. The lab was created as part of a research study to demonstrate that more strenuous cardiac rehab can be safe under the right circumstances.

"The traditional person in rehab stays about eight weeks, and current guidelines say they need to be able to lift one to five pounds for the first five weeks," says Jenny Adams, Ph.D., a senior research associate and member of the cardiac rehab team at Baylor Hamilton Heart and Vascular Hospital. "When you realize that a firefighter's uniform alone weighs 50 or 60 pounds, you can see why that's an issue."

Building Stamina

The Return to Work Lab has special equipment beyond the usual treadmills and bikes. Firefighters, for example, also work with stairs, heavy fire hoses and mallets used to break down doors.

Like any cardiac rehab participants, the firefighters gradually build up their strength and stamina. In one exercise, they begin by carrying a 50-pound dummy and work their way up to one that weighs 175 pounds.

Part of the research study involved visiting firehouses to look at the tasks performed by firefighters on a daily basis. This helps the cardiac rehab specialists know what level they need to work firefighters up to so they can return to their jobs safely.

The study will look at five occupations, including police officers and farmers. Ultimately, Dr. Adams says, the goal is to demonstrate that

it's safe to work some cardiac patients harder than others.

Equally important is making sure professionals are ready to get back to work. "If a firefighter comes into your home or is working right next to you on the job," Dr. Adams says, "you want to know they're physically capable." ● *By Amy Lynn Smith*



RESEARCH AT BAYLOR Want to Help?

This study isn't open to volunteers, but to learn about other research trials at Baylor seeking participants, visit BaylorHealth.com/AdvancingMedicine.





Alcohol's Link to Breast Cancer

You already know that too much alcohol isn't good for you. But it may be especially bad for women.

A new study supports what experts have been saying for a while: More than one drink a day boosts your risk of breast cancer.

The study followed 106,000 women over 28 years and found that women who consumed three to six drinks a week increased their risk of breast cancer by 15 percent as compared with women who didn't drink. Plus, the study showed that the more women

drank, the greater their odds of developing breast cancer.

To reduce the risk of breast cancer and other health issues, women should stick to no more than one alcoholic drink per day. That's 12 ounces of beer, five ounces of wine or 1.5 ounces of 80-proof spirits.



PROTECT YOURSELF An Ounce of Prevention

There are many more ways to decrease the risk of health conditions specific to women. Learn more at BaylorHealth.com/Prevention.

Get Smart About Strokes

A stroke is serious. But did you know a ministroke can be, too?

Transient ischemic attacks (TIAs), also known as ministrokes, can decrease life expectancy by 20 percent, says a new study published by the American Heart Association.

Just like strokes, TIAs are caused by a blood clot that blocks blood flow to the

brain. With a TIA, the blockage is temporary and doesn't leave lasting damage. But TIAs do increase your risk of having a stroke in the future.

Fortunately, TIAs and strokes can often be prevented with lifestyle changes. These include managing blood pressure, cholesterol and blood glucose levels, as well as not smoking.

SPRING INTO FITNESS THE RIGHT WAY

This may be one of the most popular times of year for people to start sprucing up their fitness program. (Especially if those new year's resolutions didn't work out so well.)

Whether you're starting from scratch or just want to take your exercise routine to the next level, do it wisely. Here are some tips from the American Academy of Orthopaedic Surgeons:

- Start with an amount of activity you're comfortable with, whether it's 30 minutes or 10 minutes of moderate activity per session.
- Increase your activity gradually, maybe keeping a chart to track your progress.
- Always include time to warm up and cool down, and stretch.
- Set a weekly schedule that includes days off.
- Establish goals and reward yourself for meeting them.

Ideally, choose a combination of aerobic, flexibility and strength-training exercises that you enjoy. For example, you could walk one day, take a yoga class the next and work with resistance bands another day. The variety will give you the best results and ward off boredom.





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Community Calendar

MARCH 2012

New Techniques in Treating Colorectal Cancer

Thursday, March 29

6 p.m.

Blue Mesa Grill

1586 E. Southlake Blvd., Southlake

APRIL 2012

Breastfeeding Basics

Tuesday, April 17

6 p.m.

Blue Mesa Grill

1586 E. Southlake Blvd., Southlake

Non-Surgical Treatment Options for Back Pain

Tuesday, April 17

6:30 – 8 p.m.

Center for Continuing Education

Baylor Regional Medical Center at Grapevine

1650 W. College Street, Grapevine

MAY 2012

Women's Heart Health—

Exercise Tips and Demonstration

Wednesday, May 9

Noon – 1 p.m.

Center for Continuing Education

Baylor Regional Medical Center at Grapevine

1650 W. College Street, Grapevine



FIND A CLASS
**Make
Time
for Your
Health**

For more information about the classes and events offered at Baylor Grapevine, call **1.800.4BAYLOR.**

SATURDAY

Digital Mammography Spa Days

*Can't find time during your busy week for this life-saving screening?**

We've made time for you!

Baylor Breast Center has scheduled Digital Mammography Spa days just for you.



Saturdays: April 14 & 28

- Appointments beginning at 7:30 a.m.
- Call (817) 329-2501 to schedule your appointment. Please bring previous mammogram files to your appointment if available.
- Free massage
- Free gift with each appointment
- Free parking
- Refreshments will be provided

SCREENING LOCATION:

Baylor Breast Center

1631 Lancaster Drive, Suite 130, Grapevine

BaylorHealth.com/
GrapevineBreastCenter

FOLLOW US ON:
Username: BaylorHealth



*An annual mammogram is covered by most insurance plans. Co-pays will be billed at a later date. Please bring your insurance card and a photo ID to your appointment.
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