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Baylor Health

CARROLLTON EDITION

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REAL PATIENTS. REAL STORIES.

Back in the Game

Knee replacement surgery got Bill Mattes off the sidelines

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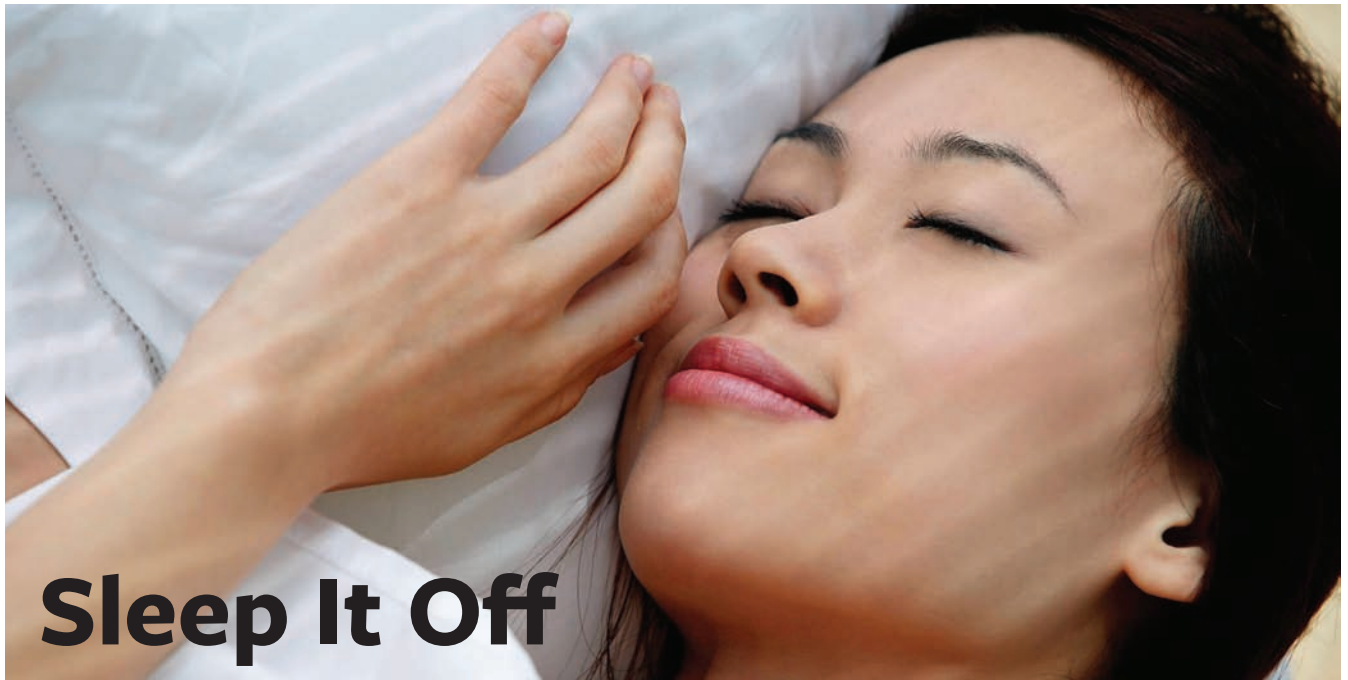
THE SCIENCE OF SLEEP

What you need to know to get the sleep you need page 2



PAIN 101

How you can benefit from a pain management specialist page 4



Nocturnal downtime is necessary to good health. Are you getting enough?

In today's busy world, adults often wear minimal sleep like a badge of honor: "I was up late working on the presentation," or, "I woke up at 5 a.m. to make brownies for the bake sale."

But sacrificing sleep for items on your to-do list is a big no-no. Here, we dispel common myths about sleep health.

MYTH It's OK if I don't sleep well during the week. I'll catch up on the weekend.

FACT The body can't "save up" sleep. It needs a regular sleep cycle every 24-hour period.

"You'll end up with a sleep debt," says James Loftin, M.D., a pulmonary and sleep disorders physician on the medical staff at Baylor Medical Center at Carrollton. "You might even have pauses during the day where you think you're alert, but you're actually napping."

MYTH Everybody needs eight hours of sleep a night.

FACT There is no magic number of hours of sleep. "Each person has a different number of hours he or she needs," Dr. Loftin says. And sleep needs change throughout life, too.

Dr. Loftin suggests finding out how much sleep you need by going to bed and sleeping until you wake up naturally for several days straight. Then, take the average number of hours per night. That's how much sleep your body requires daily.

MYTH Not getting enough sleep isn't really all that bad.

FACT Inadequate sleep leads to poor work performance, a decrease in reaction times and an increase in car crashes. It even has been linked to obesity, high blood pressure, heart disease, stroke and diabetes.

MYTH Snoring is normal.

FACT "While it may be common, snoring is not normal," Dr. Loftin says. It is caused by a restriction in airflow in the nasal cavity. Some cases of snoring are benign. But others may signal a serious sleep disorder called sleep apnea. It causes a person to stop breathing for short periods throughout the night. And though the person may not fully awaken each time, sleep is disrupted. ●

By Shelley Flannery

GET SOME REST Tired of Being Tired?

Take our online quiz at BaylorHealth.com/CarrolltonSleep to see whether you have symptoms that may require medical attention.

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BAYLOR
Medical Center
at Carrollton

A Going Concern

Urologists on the medical staff at Baylor Carrollton can help you say goodbye to urinary incontinence

If you've experienced occasional unwanted urine leakage, you're not alone. "This is a very common problem for women, and it can start as early as the 30s and 40s," says Andrea Marvin, M.D., a urologist on the medical staff at Baylor Medical Center at Carrollton.

There are two primary types of urinary incontinence. *Stress incontinence* is the most common and is characterized by a small amount of involuntary leakage occurring when sneezing, coughing or laughing. "Anything that puts pressure on the bladder, even just standing up from a chair, can force some urine out," Dr. Marvin says.

Pregnancy and childbirth (both vaginal and cesarean) are major causes of stress incontinence because they weaken the

pelvic muscles that support the bladder. Aging and being overweight also play a role.

Urge incontinence, also called overactive bladder, is a strong sensation or urgency to urinate that sends you running to the restroom frequently. "The bladder muscles contract or spasm inappropriately," says Dr. Marvin.

Speak Up

While it may be difficult to bring up this condition with your doctor, don't let momentary embarrassment stop you. Urinary incontinence is very treatable, and some of the simplest solutions have proved quite effective. Dietary changes, Kegel exercises to strengthen the pelvic muscles that control urine flow, and behavioral techniques such as relaxation, meditation, bio-feedback and bladder training can help. For urge incontinence, medications can decrease bladder spasms.

Certain surgical procedures may also provide long-term relief. One of the most popular, the urethral sling, is a minimally invasive procedure that involves placing a sling to support the bladder and reduce the symptoms of stress incontinence. "It's like a hammock holding the urethra in place so urine can't leak out," says Dr. Marvin.

If occasional leakage is affecting your day-to-day activities, she adds, "seeing someone early is worth it, because even making small adaptations to your lifestyle can help a lot."

● By Deborah Paddison



FIND DR. RIGHT



Regain Control

For a referral to a urologist on the medical staff at Baylor Carrollton, call **1-800-4BAYLOR** or visit **FindDrRight.com**.

What Does a Urologist Treat?

A urologist treats diseases related to the urinary tract, consisting of the kidneys, ureters, bladder and urethra, plus the male prostate, along with the muscles and nerves that keep the urinary system running smoothly. In addition to urinary incontinence, a urologist treats:

- Kidney stones and other urinary obstructions
- Urinary tract infections
- Prostate conditions

- Interstitial cystitis (painful bladder)
 - Vesicoureteral reflux (urine flowing backward)
- Depending on their specific areas of expertise, urologists may work in concert with nephrologists (for chronic kidney disease or kidney failure), oncologists (for kidney, prostate or testicular cancer) and other specialists.

Source: American Urological Association

Pain, Pain Go Away

Chronic pain doesn't have to be your everyday reality

We all eventually discover that life holds little aches and pains here and there. But sometimes little pains become big ones, or pain grabs hold and won't let go. That's when it might be time to consult a pain management specialist.

"A pain management specialist works to prevent, diagnose and treat chronic pain conditions almost anywhere in the body," says Jerry Lewis, M.D., a pain management specialist on the medical staff at Baylor Medical Center at Carrollton.

Make a Plan

Although these specialists most frequently treat neck, spine and lower-back pain, they also deal with pain in the extremities, postoperative pain, joint pain and headaches.

To treat chronic pain successfully, Baylor Carrollton brings together an interdisciplinary team of physician specialists on the medical staff and trained health professionals who can create a personalized treatment plan for each patient. Goals of treatment include:

- Identifying and eliminating the source of pain, when possible
- Minimizing physical and emotional symptoms, including depression, anxiety or anger
- Decreasing any disability caused by the pain
- Helping patients resume a more productive role at home and work

Take Action

Treatment at Baylor Carrollton involves interventional procedures, medications, physical therapy and other tools to reduce and, if possible, eliminate a person's pain.

For example, an epidural steroid injection relieves pain caused by a degenerated spinal disk by decreasing swelling and inflammation.

"Facet joints in the spine are another common source of pain," notes Dr. Lewis. "If a patient doesn't get long-term relief with a steroid injection, physicians can try a procedure called a rhizotomy, which destroys the nerve supplying the affected joint and therefore interrupts the pain signal."

Other options include nerve blocks and implantable devices like a spinal cord stimulator, which uses electricity to "short-circuit" pain signals.

The effects of chronic pain are not only physical but also emotional, social and even economic as the patient retreats from activity. That's why the goal of pain management is to relieve pain, restore function and get patients back to doing the things they love. ●

By Deborah Paddison

Where Does It Hurt?

Baylor Medical Center at Carrollton strives to provide advanced pain-relieving procedures and to treat a wide array of pain types, including:

- Disk herniation
- Spinal stenosis
- Neck and back pain
- Facet syndrome
- Headaches and migraines
- Peripheral nerve pain
- Cancer and post-radiation pain
- Joint pain
- Complex regional pain syndrome (RSD)
- Facial and dental pain (TMJ/TMD)
- Myofascial pain syndrome



TAKE CONTROL OF PAIN

Stop the Daily Struggle

To learn more about pain management options at Baylor Carrollton, visit BaylorHealth.com/CarrolltonPain. For a referral to a pain specialist on the Baylor Carrollton medical staff, visit FindDrRight.com.



Centralizing Cardiovascular Research

Virtual center will coordinate efforts across Baylor

Baylor has already distinguished itself as a leader in cardiovascular research across multiple locations. But moving forward, this research will be coordinated in a united effort intended to improve collaboration, access to funding and visibility. Even more important, it's expected to help Baylor more efficiently translate research into patient care.

This initiative is a program of Baylor Research Institute (BRI) and will create a "virtual" cardiovascular research center (VCC). Entities already conducting research, including THE HEART HOSPITAL Baylor Plano, Baylor Jack and Jane Hamilton Heart and Vascular Hospital, and the Soltero Cardiovascular Research Center at Baylor University Medical Center at Dallas, will be part of the new VCC.

"They've all done world-class cardiovascular research, but what's been lacking so far is a unified approach," says Bernard Brignonet, vice president and chief operating officer of BRI.

According to Brignonet, the VCC will create synergies and access to joint resources across Baylor's research lines, including BRI's personalized, or precision, medicine efforts.

"The advancing field of personalized medicine is becoming more important every day in the care of patients," says Brignonet, referring to treatment that's tailored to an individual patient's genetic, genomic and clinical information. "Research in

cardiovascular disease could benefit from this science, too."

By uniting the efforts of its various research teams, Baylor can create a single entity large enough to become one of the top research recruitment centers in the country, Brignonet says.

The virtual nature of the VCC means there will be no new physical building. Each research team will work from its existing facility but will be united where appropriate through centralized leadership, including the already existing Cardiovascular Research Coordination Committee.

In addition to enhancing research capabilities and access to funding, the VCC is intended to bring research developments to the patient bedside faster.

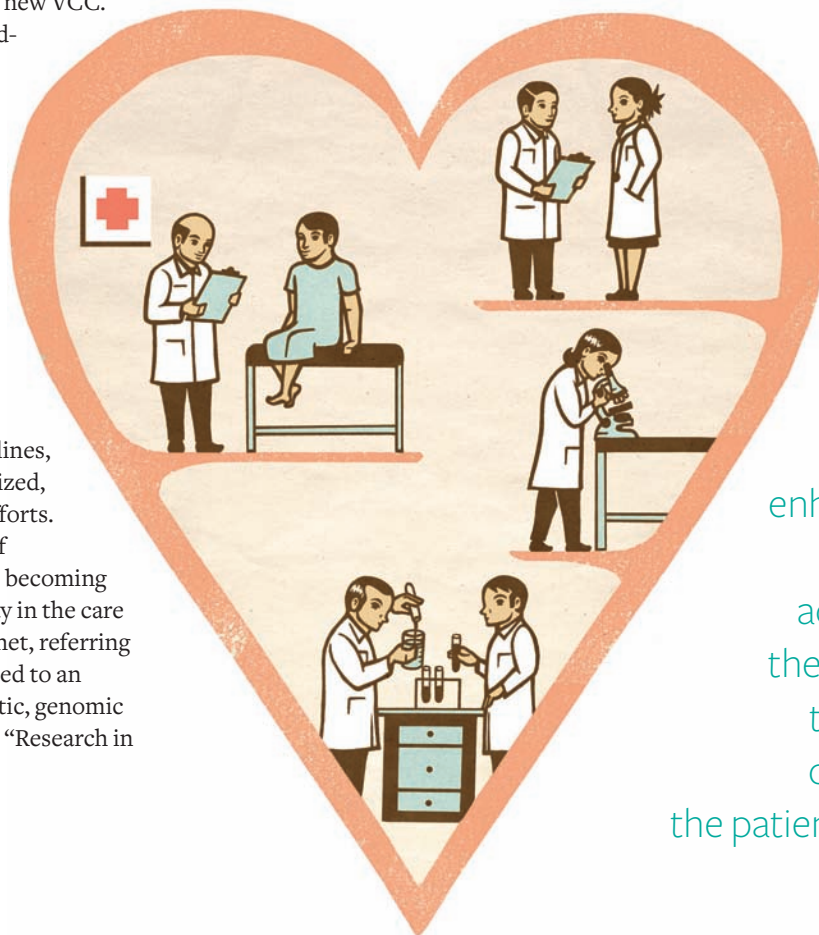


LEARN ABOUT RESEARCH

Need to Know

To learn more about Baylor's cardiovascular care capabilities and related research studies open for enrollment, call **1-800-4BAYLOR** or visit **BaylorHealth.com/AdvancingMedicine**.

"Physicians and surgeons will have a much greater chance of sharing their experience and research with their colleagues," says Brignonet. "The acceleration of the adoption of new procedures would be a great innovation for our patients." ● *By Amy Lynn Smith*



In addition to enhancing research capabilities and access to funding, the VCC is intended to bring research developments to the patient bedside faster.



When You Can't Just Walk It Off

Seek treatment for these common knee injuries

By Stephanie Thurrott

Bill Mattes of Dallas walks trade show floors for work and plays tennis for fun. So he can't let knee problems slow him down. Over the years, that meant therapy and injections to alleviate pain, as well as five operations on his knee—an anterior cruciate ligament (ACL) reconstruction and four arthroscopies to clean up damaged cartilage and bone.

Still, by age 50, his knee pain was flaring up again. He decided it was time to have his knee replaced, and last October he had the surgery at Baylor Medical Center at Carrollton. By January, he was swinging his tennis racket again. "I'm able to do what I want and need to do with no joint pain at all," he says. "Just being able to walk on the concrete floors of convention centers now—to do what I do for a living—is so nice."

Marcus Roux, M.D., an orthopaedic surgeon on the medical staff at Baylor Medical Center at Waxahachie, says sports that require pivoting can lead to knee injuries. In addition to tennis players, he sees problems in people who play basketball, soccer and football.



WATCH THE VIDEO

Hear Bill's Story

To hear more about the surgery and rehabilitation that helped Bill Mattes get back on his feet and back on the court—pain free—watch his story at BaylorHealth.com/MyStory.

Here are some of the most common knee injuries and ailments:

Bone bruises occur when people hyperextend a knee, take a hit to the knee or suffer trauma from an accident. People with bone bruises will feel pain along the joint lines and notice swelling. Rest, ice, elevation and change in your activities can help bone bruises heal. “Don’t run, don’t cut [side to side], don’t jump,” Dr. Roux says.

Meniscus tears cause pain when pivoting and rising up from a squat. Sometimes, they’re caused by something as simple as bending down and standing up, or rolling over in bed, says Eric Stehly, M.D., an orthopaedic surgeon on the medical staff at Baylor Regional Medical Center at Grapevine. “These injuries aren’t always apparent, and people sometimes fail to seek treatment for weeks or months because it doesn’t hurt all the time, just during certain activities.” Meniscus tears can be treated surgically, in a same-day procedure.

With **ligament sprains**, your knee will feel unstable, as if you might misstep. Bracing and activity modification can help with healing.

ACL, medial collateral ligament (MCL) and lateral collateral ligament (LCL) tears bring swelling and knee instability. MCL and LCL tears may heal with conservative treatment; ACL tears usually require surgical reconstruction.

Overuse injuries, such as **tendinitis**, usually heal with rest. Your doctor can help determine if your injury stems from overuse.

Arthritis is the most common cause of chronic knee pain and loss of function. Osteoarthritis causes the cartilage cushioning the knee bones to wear away, forcing the bones to rub together, while chronic inflammation from rheumatoid arthritis can damage the cartilage and trigger severe pain and stiffness. Both conditions may result in the need for joint replacement.

Glenn Wheelless, M.D., an orthopaedic surgeon on the medical staff at Baylor Carrollton, suggests seeking treatment for these knee warning signs:

- Pain when you try to do a deep knee bend
- A knee that locks or catches, preventing you from bending it
- Sharp pain

Depending on the diagnosis, treatment may include physical therapy, exercise, bracing or surgery. ●

TAKE OUR QUIZ

? Joint Know-How

Test your knowledge about the risks and symptoms of joint problems at BaylorHealth.com/HealthCast.

Got Joint Pain?

How do you know when it’s time to call a doctor about joint pain? If you’re experiencing one of the following symptoms, an orthopaedic specialist on the medical staff at Baylor Medical Center at Carrollton can help.

- Your pain lasts longer than a few days.
- It wakes you up in the middle of the night.
- Your pain causes numbness, tingling or a dramatic loss of motion.
- You have trouble doing daily activities.
- You’re unable to walk comfortably.
- Previous treatments haven’t worked.

The Baylor Carrollton team can provide the care you need, when you need it most, from general surgery to advanced procedures. Our orthopaedic services include:

- **Minimally invasive treatments** for hips, knees and shoulders
- **Total joint replacement** including hips, knees and shoulders
- **A joint wellness program** designed to help patients return to their daily lives after joint replacement surgery
- Complex **joint reconstruction**
- Comprehensive **sports medicine services**
- **Inpatient and outpatient rehabilitation**

JOINT VENTURE Get Help

For a referral to an orthopaedic surgeon on the medical staff at Baylor Carrollton, call **1-800-4BAYLOR** or go to **BaylorHealth.com/Carrollton** and click “Find a Physician” to the right.



ROMANIAN STEPS

Wendell Cooke, of Waxahachie, travels to Romania on a mission trip every summer. “I have to walk a good bit, and go up several flights of stairs. My knee began to swell on me, and for the past two years I’ve had trouble. I’m going back this year, so I knew I needed to do something.”

REAL
PATIENTS.
REAL
STORIES.

Injections didn’t alleviate the pain for long, and when X-rays showed that Cooke had bone rubbing against bone, his doctor recommended total knee replacement. He underwent the surgery last November and now is able to walk on the knee. He’s so confident he will be able to move around Romania without trouble, he’s already booked his tickets for July.



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Community Calendar

May & June 2011

Registration required for all events unless otherwise indicated. Call **1-800-4BAYLOR** to register.

Know Your Numbers

Free screenings for blood pressure, weight, BMI, oxygen level and body fat. Plus, cholesterol panel and glucose testing for \$15. May 18, 7 to 9 a.m., front lobby.

Saturday Mammography Appointments

Women's Imaging Services at Baylor Carrollton offers Saturday mammogram appointments beginning at 8 a.m. Call **972-394-1080** to schedule this lifesaving screening.

Support Groups

Breast Cancer Survivor Support Group

Open to breast cancer survivors at any stage. Dinner provided. Call **214-820-9277** to register. May 3 and June 7, 6 to 7:30 p.m., Conference Room 2.

Caregiver Education and Support

This group is for anyone caring for an older adult, or chronically ill or disabled loved one. Brown bag lunch meetings May 12 and June 9, noon to 1 p.m., Conference Room 2. Registration is not required for this event.

Infertility Support Group

This group is designed to encourage and empower

women who are struggling with infertility. Spouses and significant others are also welcome. May 2 and June 6, 7 p.m., Conference Room 1.

Weight Loss Surgery Support Group

Led by a certified bariatric nurse, who is also a successful weight loss surgery patient. May 3 and June 7, 6:30 p.m., Conference Room 1.

Women's and Children's Education Preparation for Childbirth

six weekly sessions beginning May 2 or July 11, from 6:30 to 9 p.m. Weekend option also available. \$115

Beyond the Basics: A Baby Owner's Manual, teaches infant care and development, May 4 or June 8, 7 to 9:30 p.m. \$25

Infant and Child CPR, teaches basic skills but is not a certification course, May 18 or June 22, 7 to 10 p.m. \$25

Big Kid's Club, designed to help siblings, ages 3½ to 8, adapt to a new baby, May 1 or June 5, 2:45 p.m. \$15

All maternal/child health information classes will be held in Classroom 202.

BETTER MAN, BETTER YOU.

JUNE 11 / 7 AM – NOON

Main Lobby

Baylor Medical Center at Carrollton
4343 N. Josey Lane, Carrollton, TX 75010

Most guys insist on taking charge and being in control until it comes to their health. Do you know the last time you had a check-up? Do you know your cholesterol or blood pressure numbers? What's your PSA? You can find out on June 11th.

Join us for *It's A Guy Thing*, an event dedicated solely to men's health.

Free Health Screenings:

- Laboratory testing:*
 - Lipid Panel (Cholesterol, HDL, LDL, and Triglycerides)
 - Glucose
 - Hemoglobin A1C
 - Prostate cancer screen (PSA)
- Blood pressure
- Body Mass Index (BMI)
- Body fat analysis
- Lung function
- Sleep apnea

Other offerings:

- Men's health educational seminars
- Health information booths
- Complimentary breakfast
- 5 minute chair massages
- Golf swing analysis
- Physician panel to answer your men's health questions
- And more

Take charge of your health this summer. Registration is required and space is limited. Call for your appointment today.

REGISTER at 1.800.4BAYLOR or
BaylorHealth.com/CarrolltonGuyThing



*For a more accurate reading, do not eat or drink anything after midnight before the screening. You may take your regular medications as directed. Physicians are members of the medical staff at one of Baylor Health Care System's subsidiary, community or affiliated medical centers and are neither employees nor agents of those medical centers, Baylor Medical Center at Carrollton or Baylor Health Care System. © 2011 Baylor Health Care System. BMCC_141 BHM CE 3.11