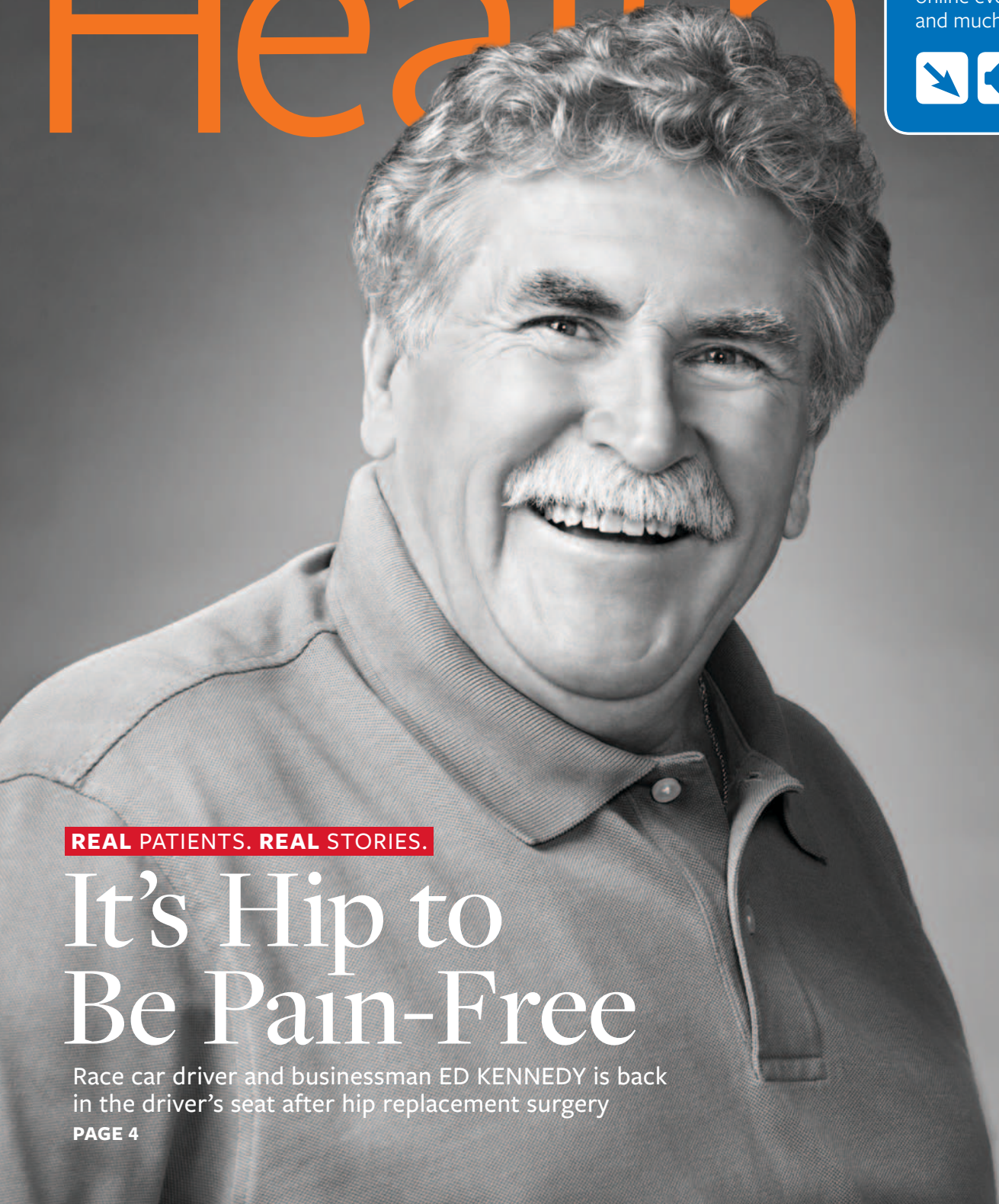


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Baylor Health

GRAPEVINE EDITION

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REAL PATIENTS. REAL STORIES.

It's Hip to Be Pain-Free

Race car driver and businessman ED KENNEDY is back in the driver's seat after hip replacement surgery

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PLAY IT SAFE
Reduce your risk for injury this summer with these simple solutions **PAGE 3**



TAKE CONTROL
Find out what steps to take now to lower your stroke risk in the future **PAGE 7**

Excuse Me?

The real reasons you're not getting your screenings—and how to get past them

WHEN YOUR DOCTOR, spouse or mother asks, you avert your eyes. You know you should be getting regular health screenings, but you just ... don't. Is it because you don't have time? Think they're too expensive? Worry about discomfort? Here's how to get over it.



EXCUSE: I DON'T HAVE TIME

It's not about having the time, it's about *making* the time. Plus, "a lot of these tests are very quick—20 to 30 minutes," says Elizabeth Bah, DO, a family medicine physician on the medical staff at Baylor Regional Medical Center at Grapevine. "And if you think about it, you'd be saving time in the long run if you catch a disease early."

If you feel bogged down in appointment after appointment, plan in advance, schedule all your screenings for one day and take the day off work. Then, reward yourself with a movie, spa service or an afternoon of shopping.

EXCUSE: I JUST FORGET

This is an easy one. "It's very important to have a physician you can meet with annually so he or she can tell you what the appropriate screenings are for you," Dr. Bah says. Another idea is to schedule all your screenings during your birthday month each year.



EXCUSE: THEY'RE TOO EXPENSIVE

Even if you don't have insurance, there are plenty of low-cost and no-cost screenings available. Government programs offer discounts on mammograms. And hospitals offer simple tests such as blood pressure, cholesterol, glucose and prostate cancer screenings at community health fairs. Talk to your doctor about your options.

EXCUSE: IT'S GOING TO HURT

True, some screenings are uncomfortable. "But most are over very quickly," Dr. Bah says. "If you're afraid, talk to your doctor to get a good understanding of what to expect."

What's more, many screenings aren't painful at all. And for most people, the peace of mind that comes with knowledge is well worth a small bit of discomfort.

EXCUSE: I DON'T WANT TO KNOW

Some people avoid screenings because they feel healthy. "Screenings are important because they look for disease before you have symptoms," Dr. Bah says. "And if we can detect it early, you may have more options for treatment and a better quality of life."

Schedule Your Screenings Today

Talk to your doctor about the health screenings you need. To find a doctor on the medical staff at Baylor Grapevine, call **1.800.4BAYLOR** or visit **FindDrRight.com**.

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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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STAY SAFE THIS SUMMER

These solutions can cut your risk of injury



SUMMER'S HERE, and with it come outdoor sports, from softball leagues to water-skiing. Here, Shaun McMurtry, MD, a family and sports medicine physician on the medical staff at Baylor Regional Medical Center at Grapevine, offers his solutions to common problems that plague summertime sports.

Problem: You jump from the couch to the court. "There's a tendency for people to go from inactivity to full-on activity without doing proper, gradual increases. The lack of conditioning leads to strains, sprains and overexertion," Dr. McMurtry says.

Solution: Build your conditioning over time. For sports such as running, biking and swimming, Dr. McMurtry recommends increasing your activity level over four to six weeks, working up to 40 to 45 minutes five times a week. "The gradual buildup gets your

heart ready to perform the activity and gets the muscles and bones acclimated to the stresses they're going to be facing," he says.

Problem: You head out into the heat of the Texas sun.

Solution: To avoid heat illnesses, drink plenty of water or sports drinks with electrolytes before, during and after exercising. Wear fitness clothing that breathes well so your body's extra

Keep Kids Safe

Help prevent outdoor injuries by surrounding your swings, slides and climbing structures with rubber, wood chips or sand rather than packed dirt or grass. Softer surfaces can absorb some of the impact from a fall.

85 percent

Wearing a helmet when biking, skating or riding scooters can reduce your risk of head injury by as much as 85 percent, according to the U.S. Consumer Product Safety Commission.

Make an Appointment for Your Health

A healthy lifestyle includes regular trips to the doctor. Need a new physician? Call **1.800.4BAYLOR** or visit **FindDrRight.com** for a referral to a doctor on the medical staff at Baylor Grapevine.

heat can dissipate. Gradually increase your exposure to the heat, just as you gradually build your conditioning. And try to avoid exercising between 11 a.m. and 3 p.m.

Problem: You skip the stretching.

Solution: Start your workout with either a dynamic stretch like jogging slowly or skipping, or warm up with static stretches such as toe touches and lunges.

Problem: You take "no pain, no gain" to heart.

Solution: "Don't exercise or play through pain. That can lead to a worse injury," Dr. McMurtry says. An injury tells your body to back off. Recuperate with rest, ice, compression and elevation, and see your doctor if you think your symptoms are a sign of something serious.



Have No Fear

Worried about joint replacement surgery? We'll put you at ease

When entrepreneur and race car driver Ed Kennedy found out last year that he needed joint replacement surgery on his right hip, he was ready to act fast. The momentum came from a powerful testimonial: his own left hip replacement more than a decade before.

Kennedy, who says he is “61 going on 30,” was hesitant about surgery the first time around. “I’m always on the go, going 100 miles an hour every day of the week. To be tied up recovering from surgery sounded like being put in jail.”

But the Coppell resident knew he had to do something. His hip pain was constant, disrupting his sleep and making it hard for him to walk or even sit through a movie with his wife.

After the first operation, “it was like hitting a switch,” Kennedy says. “The pain was gone. The second time around, I couldn’t wait for that relief.”

Thanks to hip replacement, Kennedy came out of semiretirement to run several businesses, including a water park in Florida. He still races at Daytona and Talladega every year.

After hip replacement surgery, Ed Kennedy is back to doing the things he enjoys, including watching movies with his wife, Pam.

Hear More of Ed's Story

To watch a video about Ed's story, visit [BaylorHealth.com/Healthcast](https://www.baylorhealth.com/Healthcast) today.



FEARS VERSUS FACTS

Joint pain like Kennedy's occurs when the cartilage that cushions joints is damaged by arthritis, meaning bone rubs directly on bone, causing pain and dysfunction. If conservative treatments such as medication or physical therapy aren't enough, joint replacement surgery is an option to relieve pain and restore function.

If you are considering having joint replacement surgery but you're afraid—as Kennedy was years ago—to take that next step, let us help you put your fears to rest.

FEAR #1

THE SURGERY ITSELF

Joint replacement is one of the most common and successful orthopedic surgeries, according to the Centers for Disease Control and Prevention. "Ninety to 95 percent of the time, people have a good to excellent result," says Marc S. Goldman, MD, an orthopedic surgeon on the medical staff at Baylor University Medical Center at Dallas.

Fear of pain can make people hesitant to head to the operating room. "Compared to a decade ago, we do more to control postoperative pain than we used to," says Jeffrey D. Moffett, MD, an orthopedic surgeon on the medical staff at Baylor Regional Medical Center at Grapevine. Options include oral pain medication, injections, self-administered pain pumps and nerve blocks, which may be used in combination.

The short-term pain of recovery can actually be a welcome change from the chronic pain of arthritis. "Patients tell me, 'My pain is so different now. I can feel that it gets better day by day, and the pain I had before only got worse,'" Dr. Moffett says.

FEAR #2

THE RECOVERY PROCESS

If you sympathize with Kennedy's fear that recovering from surgery would feel like being jailed, take heart: "People think they're going to be down for a long period of time," says Charles E. Toulson, MD, an orthopedic surgeon and medical director of the Total Joint Replacement Center at Baylor Regional Medical Center at Plano. "At Baylor, we use advanced techniques, so patients are returning to an active lifestyle much more quickly than before."

Typically, patients go home from the hospital in two to three days and participate in outpatient rehabilitation three times a week for the first month, Dr. Goldman says.

"Once you get past that first month, people are often already better than they were before the surgery," Dr. Moffett says. "The full recovery is somewhere between three and six months."

FEAR #3

MY ACTIVITY LEVEL WILL CHANGE

You're right about this one—but most likely it will change for the better! It's true that avoiding high-impact activities reduces wear and tear on the joint, but in general, joint replacement helps people stay more active, not less.

"Arthritis is generally a progressive problem that gets worse as time goes by," Dr. Moffett says. By undergoing joint replacement surgery, "you're looking at a short-term hardship for a long-term gain."

After 20 years, 93 percent of knee replacements and 95 percent of hip replacements are still functioning well, based on current information. With new technology, today's implants have the potential to last even longer.

"Joint replacement surgery changes people's lives," Dr. Goldman says. "Most people say, 'I wish I'd done it sooner.'"

Take the Next Step

If the pain in your hips or knees is interfering with your life, it might be time to consider joint replacement. Nathan Williams, MD, an orthopedic surgeon on the medical staff at Baylor Regional Medical Center at Grapevine, says, "Many of my patients are apprehensive about joint replacement surgery. But afterwards, they tell me it turned out better than they anticipated."

Baylor Grapevine offers a Total Joint Wellness Program designed to care for you before, during and after surgery to help you heal and get back to the activities you enjoy.

The program features a team model, with your surgeon, nurses and physical therapists working with you and your family to help you heal and regain your strength.

"It's a very comprehensive, hands-on approach, and patients have access to a variety of resources," Dr. Williams says.

In addition, the minimally invasive procedures the team offers can lead to fewer complications and quicker recoveries compared with traditional procedures.

Along with comprehensive medical care, the program provides features that can help speed your recovery. For example, you can bring a family member or friend to be your designated coach, helping with therapy after surgery. You can also bring your own clothes to the hospital to change into after surgery so you can feel more comfortable.

Sign Up for the Joint Wellness Program Today!

Call **1.800.4BAYLOR** or visit **BaylorHealth.com/GrapevineOrtho** to learn more about the joint wellness options at Baylor Grapevine.

Studying Stress

Baylor researchers look at the effects of working with trauma patients

ANYONE WHO HAS WATCHED a medical drama on TV can imagine how stressful it is to work with critically injured patients.

Baylor researchers are examining just how much this stress can affect health care providers. What's more, they want to learn what might be done to ease or prevent what's known as secondary traumatic stress.

Secondary traumatic stress is similar to post-traumatic stress disorder, says Ann Marie Warren, PhD, ABPP, a licensed psychologist and an associate investigator of trauma research in the Level I Trauma Center at Baylor University Medical Center at Dallas.

"The empathy that draws people to the health care profession actually makes us susceptible to secondary traumatic stress," she explains.

Clinicians experiencing secondary traumatic stress might find themselves thinking too much about the traumatic stories they hear or having nightmares that the traumas are happening to them. Other symptoms include trouble sleeping and irritability.

As a Level I Trauma Center, Baylor Dallas treats some of the area's most critically injured patients. The study is looking at every discipline that cares for trauma patients, including doctors,

nurses, surgeons, emergency medical personnel and rehabilitation therapists. Researchers want to better understand not only the incidence of secondary traumatic stress but also the theory that the more resilient medical personnel are, the less likely they might be to develop secondary traumatic stress.

By gathering data on the clinicians' backgrounds, experiences and reactions to patients, the researchers hope to better understand secondary traumatic stress. This knowledge may be able to help them develop management and prevention strategies.

Although the study is focused on trauma clinicians, the researchers hope to expand their work to include other medical specialties, as well as family members who are caring for trauma patients.

"Family members aren't usually professional caregivers, so you can imagine that the experience of living through these events is significant," Dr. Warren says. "As for our clinicians, we want to help take care of them and improve their quality of life—which can ultimately translate into better patient care."



Are You a Clinician?

The study of Secondary Traumatic Stress in Clinicians is limited to Baylor Dallas personnel, but it may be open to other health care providers in the future. Email

AnnMariW@BaylorHealth.edu or call **214.820.4460** to learn more.

The risk factors for stroke and heart disease are the same. Take these steps to lower your stroke risk and you'll lower your heart attack risk, too.



STAVING OFF STROKE

Five risk factors you can reduce

STROKE IS THE FOURTH-LEADING CAUSE OF DEATH in the United States, responsible for more than 133,000 deaths a year. Stroke survivors often suffer from long-term disability. But you can take steps to lower your risk. Madhuri Koganti, MD, a neurologist on the medical staff at Baylor Regional Medical Center at Grapevine, explains how.

RISK FACTOR 1: HIGH BLOOD PRESSURE.

What you can do: Get your blood pressure checked, and take steps to treat it if it's high. Your blood pressure should be below 140/90. If you have diabetes, heart disease or kidney disease, aim for 130/80.

RISK FACTOR 2: DIABETES.

What you can do: Keep tight control of your blood sugar levels. And talk to your doctor about taking statins. "Some recent studies have shown that statins may help reduce the risk of stroke in people with diabetes, even if they have normal or close-to-normal lipid levels," says Dr. Koganti.

RISK FACTOR 3: OBESITY.

What you can do: Reduce excess weight by choosing foods low in fat and sugar and exercising—think walking, swimming or jogging—for 30 to 60 minutes most days. Losing excess weight will also help you control high blood pressure and blood sugar.

RISK FACTOR 4: SMOKING.

What you can do: Quit. Talk to your doctor about different treatment options and medications that can help you quit.

Stop Stroke in Its Tracks

Baylor Grapevine is certified as a Primary Stroke Center, meaning that area residents have access to quality stroke care, close to home. To learn more, visit BaylorHealth.com/GrapevineStroke.

RISK FACTOR 5: HEAVY ALCOHOL CONSUMPTION.

What you can do: If you drink alcohol, limit it to one drink a day.

Your age, gender, race, personal history and family history also influence your risk for stroke. You can't change these factors, so if you're at high risk it's especially important to manage the risk factors you can control.

FAST Action

The acronym FAST can help you recognize stroke symptoms in yourself or someone else:

Face: Look for drooping on one side of the face, particularly when smiling.

Arms: When raising both arms, does one drop downward?

Speech: Do words sound slurred or unusual?

Time: Call 911 if you spot any of these signs. Remember the time you first noticed symptoms so medical staff can track how much time has elapsed.





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There are more than 800 physicians on the medical staff at Baylor Regional Medical Center at Grapevine. Together we deliver advanced medicine and compassionate care to every patient we serve.

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Help with immediate referral to a physician

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