

Health Connection

BROUGHT TO YOU BY
NORTHWEST MEDICAL CENTER

Break free
from chronic
pelvic pain

Cancer and
heartburn
What's the link?

7 ways to
weight-loss
success

The right
physicians
for you
Our medical staff
is growing

Urgent care
Now in your area

CHRONIC PELVIC PAIN

Causes and cures

Women who suffer from chronic pelvic pain may feel that the discomfort is something they just have to live with—a “side effect” of being female. But they don’t have to suffer. Chronic pelvic pain, or CPP, is a real medical condition. And that means it can be treated.

WHAT CAUSES PELVIC PAIN?

You may be suffering from CPP if you’ve had recurring pain in your lower abdomen and pelvic area for at least six months. The symptoms can vary. You may feel pain all the time or it may come and go. You may have a mild, dull ache or sharp, stabbing pain. In addition, you may have abnormally painful menstrual periods (*dysmenorrhea*), low backache, pain during intercourse, pain when going to the bathroom or rectal itching and burning.

The most common causes are gynecological:

- **Endometriosis.** In this condition, tissue from the uterine lining grows on other pelvic organs. When you have your period, this tissue swells and bleeds, causing pain and scarring.
- **Pelvic inflammatory disease.** This is an infection in the uterus, fallopian tubes and ovaries.
- **Fibroids.** These are benign (noncancerous) growths in the uterine wall.

TESTING AND TREATMENT

Your physician will evaluate your pain by taking a detailed health history and performing a physical exam. He or she may also order some diagnostic tests, such as blood tests, urologic tests, X-rays or laparoscopy (a minimally invasive procedure in which the surgeon inserts a thin lighted tube through an incision in the abdomen to view your pelvic organs).

Treatment depends on the cause of your pain and includes the following options:

- stopping ovulation with birth control pills or injections
- using pain relievers such as ibuprofen or naproxen
- performing relaxation exercises, biofeedback and physical therapy
- taking antibiotics
- getting psychological counseling
- having surgery

Stress incontinence: Help is available

It may be embarrassing, but stress urinary incontinence is a common problem among women. It’s also highly treatable. In fact, eight in 10 women who seek treatment see an improvement or are cured.

Stress incontinence occurs when any kind of pressure is put on the bladder, such as when you sneeze, laugh, lift, cough, exercise or even rise from a chair. Childbirth and weight gain are two common causes of incontinence because these conditions stretch the pelvic floor muscles. Hormone changes during menopause, some medications and other factors can also cause incontinence.

Your physician has many treatment options, including medication, strength exercises, biofeedback and, in extreme cases, surgery. So don’t let embarrassment keep you from asking for help.



Put out the fire

Heartburn can raise your risk for cancer

Nearly everyone has had an occasional bout of heartburn, or acid indigestion, after a spicy meal. But if you have chronic heartburn that occurs more than twice a week, you may be suffering from a more serious condition called gastroesophageal reflux disease (GERD). If you think you may be suffering from GERD, don't ignore it—without treatment it may eventually lead to more serious health problems, including cancer.

WHAT IS GERD?

Though it's commonly called heartburn, GERD is a digestive condition that has nothing to do with your heart. Food is carried from your mouth to your stomach through your esophagus tube, which is connected to the stomach by the sphincter muscle. The sphincter usually closes once food passes into the stomach, but if it doesn't close properly, digestive juices rise back up into your chest and throat. They cause the burning feeling near your heart—hence the name heartburn.

GERD can also cause a dry cough and swallowing difficulties, make asthma worse and disrupt sleep. Left untreated, it can damage the esophagus' lining and cause bleeding or ulcers.

A MORE SERIOUS DEVELOPMENT

GERD can also result in a condition called Barrett's esophagus, in which stomach acids actually cause changes to cells in the esophagus. These damaged cells can lead to esophageal cancer.

Barrett's esophagus is diagnosed with an upper gastrointestinal endoscopy. In this outpatient procedure, the physician passes an endoscope—a small, lighted tube with a tiny camera at the end—into the throat. This lets the physician look for tissue abnormalities and take a tissue sample through the endoscope if needed.

GETTING RELIEF

If you suffer from heartburn more than twice a week, see your physician. He or she may recommend lifestyle changes (*see "Don't go for the burn," below*) as well as over-the-counter or prescription drugs such as:

- antacids (brand names include Mylanta, Maalox, Alka-Seltzer, Rolaids)
- H2 blockers (Tagamet, Pepcid, Zantac)
- proton pump inhibitors (Nexium, Prilosec, Prevacid)

Some of these drugs can also help improve Barrett's esophagus. In rare circumstances, your physician may recommend surgery to repair the sphincter.

Don't go for the burn

One key to soothing heartburn is to avoid the triggers that can lead to discomfort.

In general, the following lifestyle changes can help most people put out the fire:

- If you smoke, stop.
- Avoid foods and beverages that worsen symptoms, such as citrus fruits, chocolate, fried foods, tomato-based foods, spicy foods and drinks with caffeine or alcohol.
- Lose excess weight.
- Eat small, frequent meals.
- Wear loose-fitting clothes.
- Avoid lying down for three hours after a meal.



When it's not an emergency

Urgent care now available in the Foothills

Urgent care clinics treat patients who have illnesses or injuries that don't require a trip to the emergency room (ER). If you determine your condition doesn't present a serious health threat, Northwest Medical Center (NMC) offers prompt, professional care at the hospital's newly opened La Paloma Urgent Care and Physician Offices in the Catalina Foothills at the corner of Hacienda del Sol and Sunrise Drive.

FIRST IN THE AREA

"Opening this facility is part of NMC's plan to meet the healthcare needs of people who live in the Foothills area," says Paul Kappelman, chief executive officer at NMC. "We can do this by not only opening the urgent care facility but also bringing a variety of experienced physicians to this area."

La Paloma Urgent Care and Physician Offices includes urgent care facilities, lab and X-ray services, mobile digital mammography and physician offices. The

facility also includes a community room where a variety of health education seminars will be held in 2009. The newly constructed facility is 18,000 square feet, with an additional 4,000 square feet for future expansion.

PROVIDING FOR YOUR NEEDS

"We're thrilled to be serving Foothills residents. Our medical staff is committed to providing quality care and customer service," says Domingo Costa, director of La Paloma Urgent Care. "We hope anyone who needs urgent care services in the Foothills area will choose to visit us here."

Four physicians with Northwest Allied Physicians have offices in the facility. Indu Partha, M.D., internal medicine physician; Stacey Yell, M.D., gynecologist; John Hornback, D.O., family medicine physician; and Rise-Ann Wohl, M.D., internal medicine physician, are all pleased to be practicing in and serving the Foothills community.



Urgent care in your neighborhood

La Paloma Urgent Care and Physician Offices is the fourth urgent care facility in the NMC system. In 2007, the three current locations served more than 109,000 patients. For urgent care in your area, visit one of NMC's urgent care locations:

2945 W. Ina Road
Tucson

13101 N. Oracle Road
Oro Valley

8333 N. Silverbell Road
Marana

! Visit our newest facility!

La Paloma Urgent Care and Physician Offices

4001 E. Sunrise

Urgent care hours: 9 a.m.–9 p.m.

Urgent care hotline: (520) 469-8295

Bringing physicians to our community

Northwest Medical Center's staff is growing



Physicians' offices are busy places, and patients often wait weeks for an appointment with their primary care physician. When patients need to be seen immediately, they go to an urgent care facility or emergency room for care. Northwest

Medical Center (NMC) understands our community's need for quality primary care and specialty physicians and is committed to bringing more of these physicians to our area.

A GROWING COMMUNITY

Since 2007, NMC has recruited a variety of physicians, including:

- 10 internal medicine physicians
- six family medicine physicians
- two gynecology surgeons
- three gastroenterologists
- one urologist
- one cardiologist
- one physical medicine specialist
- one hand surgeon

Many of the new physicians on staff at NMC will offer same- or next-day appointments. Some of the physicians who have begun practicing in the northwest and are on staff at NMC include:

Indu Partha, M.D.
Internal Medicine

Tim McNichols, M.D.
Internal Medicine

David Buechel, D.O.
Internal Medicine

Bethany Panchal, M.D.
Family Medicine

Rachel Kelly-Hornback, D.O.
Family Medicine

John Hornback, D.O.
Family Medicine

Manjul Srivastava, M.D.
Geriatrics

Ayaaz Ismail, M.D.
Gastroenterology

Romeo Esquivel, M.D.
Gastroenterology

Stacey Yell, M.D.
Gynecology

Tracey Allen, M.D.
Physiatry

! Find a physician at NMC

For more information about these physicians or to find a physician, call 1-866-NW4WELL (1-866-694-9355).

Get off the diabetes track



A condition of elevated blood glucose that precedes diabetes, pre-diabetes is serious and the stakes are high—diabetes can lead to complications such as blindness, nerve damage, amputations and premature death from heart disease, stroke and kidney failure. Studies show that even with pre-diabetes, damage to the heart and blood vessels may already be under way. Making lifestyle changes can bring your blood glucose level to the normal range and even turn back the clock on the disease's progression. People who have pre-diabetes should:

- **Move!** And get at least 30 minutes a day of moderate physical activity.
- **Lose weight.** Even a modest loss of 5 percent to 10 percent of body weight makes a difference.
- **Eat a low-fat, low-calorie diet.** Include plenty of fruits, vegetables and whole grains.
- **Take heart-smart measures.** Quit smoking, control blood pressure and reduce cholesterol.

! Are you at risk?

Talk with your physician about your diabetes risk factors. Or visit northwestmedicalcenter.com to find more health resources related to diabetes.

HEALTHWISE QUIZ

How much do you know about stroke?

Take this quiz to find out.

1 A stroke occurs when blood flow is interrupted to your:

- a. heart
- b. lungs
- c. brain
- d. kidneys

2 Someone in the United States has a stroke:

- a. every 45 seconds
- b. every 4 minutes
- c. every 45 minutes
- d. every 4 hours

3 Which of the following are major risk factors for stroke?

- a. smoking
- b. high blood pressure
- c. high cholesterol
- d. all of the above

4 Which of the following is usually not a symptom of stroke?

- a. sudden numbness, weakness or paralysis of your face, arm or leg—usually on one side of your body
- b. sudden difficulty speaking or understanding speech
- c. sudden blurred, double or decreased vision
- d. sudden shortness of breath

5 How quickly must clot-busting drugs be given after the onset of a stroke to be effective?

- a. within 1 hour
- b. within 2 hours
- c. within 3 hours
- d. within 4 hours

ANSWERS: 1. C; 2. A; 3. D; 4. D; 5. C



Holiday health alert PROTECT YOUR HEART

The holidays are supposed to be a happy time of year. But for many people, they can end up being a particularly *unhealthy* time of year. Heavy meals, excessive alcohol, smoking, stress—they all can take a toll. Your heart is especially vulnerable. But knowing which dangers lurk can help you take control of your heart health this season.

STRESS INDUCERS

Three main triggers tend to cause holiday stress, says the Mayo Clinic:

- 1. Relationships.** Family tensions often increase during the holidays. What's more, those facing the holidays away from loved ones may feel lonely or sad.
- 2. Finances.** Spending too much on gifts, travel, food and entertainment can increase stress.
- 3. Physical health.** All that shopping, socializing, cooking, eating and drinking can be exhausting, especially for those already suffering from an illness.

STRESS REDUCERS

To avoid holiday stress and health problems:

- Exercise and get enough sleep. Both fight off stress and fatigue.
- Watch what you eat. Go ahead and have your favorite holiday treats, but do so in moderation.
- Find time for yourself—do things *you* like to do.
- Seek help. If the holidays overwhelm you with sadness, anxiety or physical problems, talk with your physician. You may be suffering from depression, which needs to be treated.

Healthy eating

7 winning ways to weight-loss success

The upcoming holidays present considerable challenges to eating healthfully. But with some careful planning and these helpful tips, you can stick with your weight-loss plan and enjoy a healthier lifestyle all year long.

- 1 **Work with your physician.** He or she can help you plan for and meet your goals.
- 2 **Set reasonable expectations.** Don't try to lose weight during the holidays. Simply maintaining your current weight will be a real accomplishment.
- 3 **Eat a variety of foods.** If you know you'll be having high-fat foods at dinner, focus on lots of fruits and vegetables for breakfast and lunch.
- 4 **Stay active.** Find 30 minutes a day to walk. If you're too busy—and who isn't?—break it up into three 10-minute walks.
- 5 **Eat breakfast every day.** Studies show that people who eat breakfast are less likely to overeat the rest of the day.



- 6 **Ask for a doggy bag.** When eating at a restaurant, eat half of your meal and bring the rest home for later.
- 7 **Reduce stress.** Stressful times can cause many to overeat. Find healthier ways to cut stress. Exercise, get plenty of sleep and spend time with people whose company you enjoy.

When the ER should be your only option

How do you know when to treat a medical problem yourself, go to the emergency room (ER) or wait it out? For the following three situations, knowing how to react can mean the difference between life and death.

Chest pain. Chest pain that often comes with certain activities and then goes away easily is called stable angina. More than likely, if you've had this kind of angina for some time, you know how to treat it yourself.

Angina that comes on unpredictably or changes over time is called unstable angina. It may be the first sign of a heart attack. Get emergency treatment.

Asthma attack. Your asthma action plan tells you how to react to an asthma attack. But sometimes, even when you follow your plan, the attack may become severe. Go to the ER if:

- Your asthma medicine doesn't help.



- You feel a little better after taking your medicine, but serious symptoms come back quickly.
 - Your lips and fingernails are bluish or grayish.
 - You have trouble talking or walking.
- Insect bite.** Bug bites usually cause mild reactions—some swelling, minor pain, itching—that go away in a day or two. You can treat them with an icepack for the pain and an antihistamine to reduce swelling.

A severe reaction, however, can be life threatening. If you notice difficulty breathing, swelling of the lips or throat, dizziness, con-

fusion, a rapid heartbeat or nausea, cramps and vomiting, get to the ER.

In an emergency, don't drive yourself to the ER. Have someone drive you or, better yet, call for emergency medical assistance. The equipment and expertise on an ambulance can give you lifesaving first aid on the spot.

Advanced cancer detection



High-definition television (HDTV) is making its way from your home to the hospital. Northwest Medical Center (NMC) is the first hospital in Tucson to introduce the technology as part of a new initiative to help physicians diagnose diseases in the upper and lower gastrointestinal (GI) tract using a minimally invasive procedure called endoscopy.

During endoscopy, a physician inserts a long, thin tube with a tiny light and video camera attached to it through the mouth, down the throat and through the GI tract. The physician can see the inner workings of the stomach and digestive system on a TV monitor.

Compared to conventional systems, high-definition endoscopy, combined with the technology of narrow band imaging (in which different shades of bright lights illuminate potentially unseen precancerous tissue) provides physicians with sharper images and better contrast. This may give patients more accurate diagnoses and can shorten procedure times.

PRECISION TECHNOLOGY

“The patients and gastroenterologists at Northwest Medical Center are privileged to have this advanced technology,” says Edmund Krasinski, M.D., a gastroenterologist and the gastroenterology section chief at NMC. “The HDTV and narrow band imaging technology

make diagnosing and treating GI diseases more precise.” HDTV displays clear, detailed images of the colon to assist physicians during a colonoscopy.

CANCER PREVENTION

The American Cancer Society (ACS) projects that more than 148,000 Americans will be diagnosed with colorectal cancer this year. The five-year survival rate for people whose cancer is treated in an early stage is greater than 90 percent.

The ACS recommends that both men and women begin getting screened for colon and rectal cancer beginning at age 50. People with certain risk factors, such as family history of colorectal cancer polyps, should talk to their physician about starting screening earlier or getting screened more often.

! Get screened!

Treatment is more effective when diseases are diagnosed early. To find a gastroenterologist, call our Find a Physician line at 1-866-NW4WELL (1-866-694-9355).

northwestmedicalcenter.com

70NMC

NORTHWEST MEDICAL CENTER

Northwest Medical Center
6200 N. La Cholla Blvd.
Tucson, AZ 85741

PRSR STD
U.S. POSTAGE
PAID
Lebanon Junction, KY
Permit 19

FALL 2008

Health Connection

Health Connection is published as a community service of Northwest Medical Center. There is no fee to subscribe.

The information contained in this publication is not intended as a substitute for professional medical advice. If you have medical concerns, please consult your healthcare provider.

Copyright © 2008 Northwest Medical Center