

# InTouch

THE MAGAZINE OF DETAR HEALTHCARE SYSTEM

Take charge of  
your arthritis

After an ER visit—  
now what?

The dangers  
of texting

Is a stroke  
in your future?

Brown-bag it for  
better health

 **DeTar HEALTHCARE SYSTEM**  
*More than care. Commitment.*

[www.detar.com](http://www.detar.com)

# Ease your arthritis pain

**M**ore than 40 million Americans suffer from arthritis, a condition that can make every move painful. Osteoarthritis is the most common form. It occurs when cartilage, which cushions bones in your joints, breaks down and causes irritation.

Luckily, the following lifestyle changes and remedies can help you manage the pain:

• **LOSE WEIGHT.** It's pretty basic: The more excess weight you carry, the more stress on your joints. But a healthy diet of fruits, vegetables and whole grains, paired with regular exercise—at least 30 minutes a day—can help tip the scales in your favor. Cut back on saturated fats, which may increase your body's inflammatory response, adding to joint and tissue inflammation.



• **GET OFF THE COUCH.** Inactivity is a joint's worst enemy. Exercise can strengthen and protect the muscles around the joints, preventing them from stiffening and causing more pain. Walking, swimming, some yoga poses and tai chi are easy on the joints. Also beneficial are range-of-motion exercises, such as raising your arms above your head; strengthening exercises, such as weight training; and low-impact aerobic exercises, such as bike riding. Before starting an exercise program, check with your physician. If needed, ask him or her for a referral to a physical therapist who has a program for people with arthritis.

• **TAKE A PILL, IF NEEDED.** Sometimes you need medication for the pain. Over-the-counter options include non-steroidal anti-inflammatory drugs, or NSAIDs (such as ibuprofen and naproxen), and acetaminophen (such as Tylenol). Topical creams may provide hot or cool sensations to ease pain or contain pain medication that's absorbed into the skin. Your physician may prescribe pills or cortisone injections. Any drug you take can have side effects, so discuss them with your physician before starting a regimen.



• **REST UP.** Your body needs time to heal, so aim for eight to 10 hours of sleep every night, and avoid sitting or standing in one position for too long. Skip high-impact activities such as running. You may also want to look into stress-relievers such as meditation or yoga.

• **ASK ABOUT ALTERNATIVES.** Massage, acupuncture, heating pads, ice packs and supplements such as glucosamine and chondroitin may help reduce symptoms, though studies on the supplements have been mixed. Speak with your physician before trying any home remedies. Sometimes, there simply isn't a remedy that can effectively treat the pain. In that case, surgery to replace the joint may be an option to discuss with your physician.



# Life after the ER

## Following your physician's orders keeps you healthy

**W**hen you're not feeling well and you're surrounded by the hustle and bustle of an emergency room (ER), it's easy to be confused by what a physician is telling you. All you can think about is going home. That's why many people are unclear about how to handle their care when they leave the hospital.

Case in point: A small University of Michigan study found that more than 75 percent of patients didn't understand their discharge instructions or what ER physicians had just told them—although 80 percent thought they did. Some of the patients weren't even sure of their diagnosis.

Unfortunately, these misunderstandings may increase the likelihood of complications once you leave the ER. In reality, the care you receive at the hospital is just one important part of the puzzle. Knowing what to do next—and following those discharge instructions closely—is critical to getting better. Here's what you need to do for the best health care results:

➔ **SPEAK UP.** Don't be afraid to ask questions if you're unsure of your condition, what treatments you were given, your test results or something in the discharge instructions—for example, whether a medication that's been prescribed may interact with one you're already taking. It's best to ask the ER physician caring for you,

rather than having to contact the ER later, when the physician you saw may no longer be on duty.

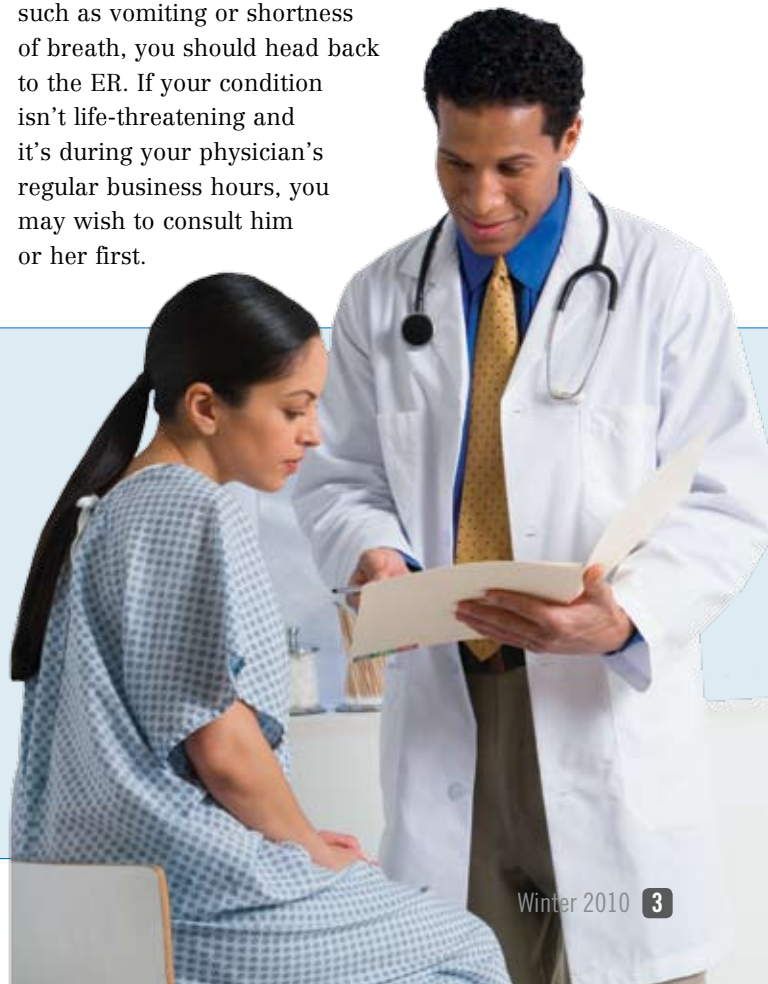
➔ **FOLLOW ALL MEDICATION DOSAGES.** Thoroughly read your discharge instructions. They should spell out what medications have been prescribed, what they treat and how often—and when—to take them.

➔ **FOLLOW UP WITH YOUR FAMILY PHYSICIAN OR A SPECIALIST.** You'll especially need to do this if you've received stitches or a cast. Your discharge instructions will tell you when to go. Double-check with your physician to make sure information about your ER visit, including test results, has been sent to his or her office before your appointment.

➔ **KNOW WHEN YOU SHOULD RETURN TO THE ER.** If your condition worsens or you're noticing new symptoms, such as vomiting or shortness of breath, you should head back to the ER. If your condition isn't life-threatening and it's during your physician's regular business hours, you may wish to consult him or her first.

## How did we do?

**W**hen you check in to the ER, admitting personnel will ask you if it's OK to follow up with you once you're back home. If you agree to it, we'll try to call you within 24 hours of your discharge, asking you six questions about your visit. At that time, if you don't understand your discharge instructions or have any questions about your treatment, a nurse will call you back. This process, called Discharge Callback Administrator, or DCA, helps us improve the way we care for our patients and ensure that you're on the road to recovery.





William R.  
Blanchard, FACHE  
Chief Executive Officer

## Dear neighbors,

The beginning of a new year always brings a bit of self-evaluation to everyone's life. The DeTar Healthcare System is a huge part of my life, so as I examine 2009, I can't help but think of what we've accomplished:

- our 80th year of providing quality health care to the residents of our community
- implementation of our 30-Minute ER Commitment

- participation in cardiac drug studies that brought new medicine to patients throughout the world
- implementation of a surgical weight-loss program to help improve the quality of our patients' lives
- addition of seven new physicians

Our success is due to the dynamic relationship we share with our employees, physicians and community. We've learned that we are responsible not only for returning our patients to good health when they've been hospitalized but also for improving the quality of life for our residents before they need more serious medical care. That's why we continually strive to develop programs that benefit the whole community.

### ACCREDITED CHEST PAIN CENTER

In December, we were surveyed by the prestigious Society of Chest Pain Centers. The DeTar Healthcare System is now a fully accredited Chest Pain Center with PCI (percutaneous coronary intervention). We add this recognition to our Joint Commission Stroke Center accreditation, Texas Department of State Health Services Stroke Facility designation and our hospitals' status as Victoria's only Joint Commission-accredited facilities.

### CARDIAC STUDY

Recently, I spoke with interventional cardiologist Harish Chandna, M.D., a lead investigator in the cardiac study (TRITON) that helped the Food and Drug Administration approve the new drug prasugrel. This anticoagulant slows down or stops the formation of clots, thereby improving blood flow through the veins of patients with coronary artery disease. This study was conducted at DeTar Hospital Navarro under the direction of Dr. Chandna and his partners, Ajay Gaalla, M.D., and Daksheshkumar Parikh, M.D., and it revealed that the use of prasugrel significantly contributed to a reduction in ischemic events, such as heart attacks. These physicians' efforts have placed DeTar Healthcare System among some of the most well-known names in the medical world like Harvard Medical School's affiliate Brigham and Women's Hospital. With the help of the patients who volunteered to participate in the study, we've helped develop a new pharmaceutical protocol that will positively impact people's cardiac health for years to come.

In this issue, you'll find a brief introduction of some of the newest members of our medical staff. With the addition of endocrinologist Rekha Pandula, M.D., our medical staff now includes physicians representing all adult medical specialties.

DeTar Healthcare System is pleased to offer you *InTouch* as an overview of our services and an informational tool for you to empower yourself with information about your health and the health of your family.

Regards,

WILLIAM R. BLANCHARD, FACHE  
Chief Executive Officer  
DeTar Healthcare System

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# Lose weight, feel great

## at DeTar's Weight Loss Center

To enhance our patients' quality of life, DeTar Healthcare System launched the Weight Loss Surgery Program in summer 2009. Craig Chang, M.D., FACS, bariatric and general surgeon, performs these life-changing procedures at DeTar Hospital Navarro.

### IMPROVE YOUR HEALTH

Obesity is a serious health threat: It can significantly shorten your life span, dramatically impact your quality of life and threaten your heart health by putting you at greater risk for cardiovascular disease, high blood pressure, high cholesterol and diabetes. Bariatric surgery has proven effective in improving individual health and controlling many obesity-related conditions. Surgery is only done when deemed medically necessary and all nonsurgical options have been exhausted.

The bariatric surgical program at DeTar helps you achieve your goal of medically supervised weight loss. The medical staff specializes in procedures—including gastric bypass, sleeve gastrectomy and

gastric band surgeries such as LAP-BAND—that restrict the amount of food you can eat.

### OTHER RESOURCES

- **Information sessions.** During these presentations, learn about your surgical weight-loss options, patient criteria (to determine if you qualify for surgery) and results you can expect. You'll also meet the bariatric team and get answers to questions. A family member or friend is encouraged to attend for support. Classes are free, but registration is required. For more information, call our bariatric coordinator at **(361) 788-2610**.
- **Support group.** Adapting to life after weight-loss surgery is ongoing. The monthly support group provides a secure, warm setting for patients undergoing the lifelong journey; lifestyle changes improve surgery outcomes and are necessary to achieve lasting weight loss. Meetings are at 5 p.m. every Tuesday in the Education Classroom of the DeTar Hospital Navarro MEDI Center.

### Meet Dr. Chang

Craig Chang, M.D., FACS, general surgeon, is board certified by the American Board of Surgery. Dr. Chang specializes in general, laparoscopic and bariatric surgery. He's completed an additional one-year fellowship in laparoscopic surgery at Parkland Hospital in Dallas. His practice is located at 2700 Citizens Plaza, Suite 401, in Victoria.



Craig Chang, M.D., FACS  
Bariatric and  
General Surgeon

! Achieve a new you!

For more information about  
DeTar's Weight Loss Surgery  
Program, call **(361) 788-2610**.

## HEALTHWISE QUIZ

How much do you know about **obesity**?

Take this quiz to find out.

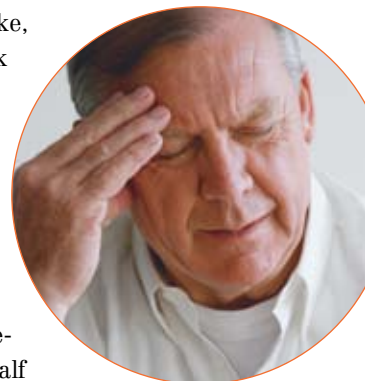
- 1** What percentage of American adults are overweight or obese?
  - a. 25
  - b. 33
  - c. 50
  - d. 66
- 2** Which of the following has not been linked to obesity?
  - a. hyperthyroidism
  - b. cancer
  - c. gallbladder disease
  - d. infertility
- 3** Obese children have a higher risk of:
  - a. asthma
  - b. early puberty
  - c. skin infections
  - d. all of the above
- 4** One problem with body mass index (BMI)—a calculation that assesses obesity—is that:
  - a. It doesn't take height into account.
  - b. It doesn't measure muscle, so a muscular person can have a high BMI.
  - c. It doesn't factor in age.
  - d. none of the above
- 5** How much excess weight do you usually have to be carrying to be considered for weight-loss surgery?
  - a. 30 pounds for women, 50 for men
  - b. 50 pounds for women, 70 for men
  - c. 80 pounds for women, 100 for men
  - d. There's no minimum weight requirement for weight-loss surgery.

ANSWERS: 1. (d), 2. (a), 3. (d), 4. (b), 5. (c)

## { MINI-STROKES }

# Heed the warning

It may not be a full-blown stroke, but a transient ischemic attack (TIA)—also called a mini-stroke—is your warning that one could be just around the corner. TIAs produce symptoms similar to strokes, but they usually only last a few minutes and don't cause damage. About a third of people who have TIAs will subsequently have a stroke, and about half of them will have it within a year.



### INSIDE A TIA

A TIA occurs when a blood clot briefly blocks an artery, cutting off part of the brain's blood supply. Like a stroke, symptoms arise without warning. They include:

- sudden numbness or weakness in the face, arm or leg—usually on one side of the body
- sudden confusion, speech problems or trouble comprehending
- sudden problems walking, dizziness and loss of balance or coordination
- sudden severe headaches
- sudden vision problems such as loss of sight in one eye

If you suffer any of these symptoms, call an ambulance or have a friend take you to the ER right away. Physicians usually have to make a diagnosis based on your medical history.

### IS A TIA IN YOUR FUTURE?

You're at higher risk for a TIA if you:

- have a family history of TIA or stroke
- are 55 years or older
- are a man
- are African-American

Those are things you can't control, but you can help change other risk factors:

- blood pressure 140/85 mm Hg or higher
- high cholesterol
- heart disease, carotid artery disease and peripheral artery disease
- obesity
- cigarette smoking
- heavy drinking
- physical inactivity
- diabetes
- a high-fat, high-sodium diet

## Sending out an SOS:

# Texting can be bad for your health

It's not uncommon to see people crossing busy streets or even driving with their cell phone or BlackBerry® in hand, dashing off a quick message. Texting shifts your focus away from the task at hand and can be downright dangerous.

While no hard numbers exist, the American College of Emergency Physicians has reported an anecdotal rise in serious and fatal injuries involving texting—especially among teens and young adults. That includes face, chin, mouth and eye injuries for those who trip and fall while texting, and fatal trauma stemming from car accidents. Texting has also been linked to medical phenomena like “BlackBerry thumb” and “teen texting tendonitis”—catchphrases for conditions that result from the repetitive thumb motions of texting. These conditions can cause pain and numbness in the thumbs and joints of the hand.

### BE TEXT SAVVY

Steer clear of texting troubles by following a few guidelines:

- Avoid texting while doing things like walking and driving. Turn your phone off to avoid temptation.
- On the road, pull over if you need to text immediately.
- Set a good example behind the wheel: Don't engage in distracting behavior in front of your kids.

- Contact your cell-phone provider if you're worried about your child's texting habits. Some companies now offer services that ban texting at certain times of the day.



## A healthy lunch is in the bag!

Every day at noon, workers around the country run to the corner deli for a sandwich, hit a local eatery with co-workers or order in. But if you're watching your waistline—or your wallet—packing your own lunch is a smarter solution. A homemade lunch is more nutritious and economical, as long as you pack it correctly. The recipe for a healthy lunch includes:

- **PROTEIN** Try lean turkey, ham, roast beef, tuna or a bean-based entree, such as hummus or a black bean burrito.
- **GOOD GRAINS** Pack whole-wheat pasta salad and sandwiches made on multigrain bread.
- **FRUITS AND VEGGIES** The deeper the color of the vegetable or fruit, the more vitamins and minerals it contains. Slice up baby carrots, peppers, broccoli, apples, blueberries and oranges.



- **CALCIUM** Slip fat-free yogurt, cottage cheese or string cheese into your bag.
- **H<sub>2</sub>O** Water has no calories, so it's a perfect choice, but if you need a little more flavor, try adding a squeeze of lemon, lime or orange. Watch out for fruit juices, energy drinks and sodas, which are loaded with sugar.
- **FLAVOR APPEAL** Switch it up a bit by adding interesting items, like walnuts in a salad or horseradish spread on a roast beef sandwich.
- **MINIMAL SODIUM** Thinking of one of those “healthy” frozen meals? Watch out for sodium. Total daily intake for a healthy individual shouldn't exceed 2,300 milligrams (mg), and some frozen meals can contain a big portion of your day's allotment. Follow the FDA's recommendation for a healthy frozen meal by choosing one that has 480 mg of sodium or less per serving.

*InTouch* is published as a community service of DeTar Healthcare System. 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 health care provider.

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## MEET OUR NEWEST MEDICAL STAFF MEMBERS

We're pleased to introduce four physicians who've joined the medical staff of the DeTar Healthcare System.



**RUSSELL W. HOHLT, M.D.**  
Hospitalist Medicine

**506 E. San Antonio St.**  
**(361) 575-7441**

Russell W. Hohlt, M.D., is the most recent addition to our physician-staffed hospitalist program. Dr. Hohlt received

his medical degree from the University of Texas Health Science Center at Houston after serving six years in the U.S. Navy. As a critical care-trained hospitalist, Dr. Hohlt brings his skills and experience as an internal medicine physician to our team and works with your primary care physician to provide continuity of care while you're hospitalized.



**BENJAMIN S. WILSON, M.D.**  
Orthopedic Surgery

**605 E. San Antonio St.**  
**Suite 520E**  
**(361) 576-0633**

Orthopedic surgeon Benjamin S. Wilson, M.D., has brought his knowledge and skills to the DeTar Healthcare System. Dr. Wilson earned his medical degree from the University of Texas Medical Branch in Galveston. Dr. Wilson and his family moved to Victoria this past summer, and he began working with Victoria Orthopedic Center in late July. He currently holds clinics in Victoria and Cuero. Dr. Wilson is accepting new patients.



**CINDY S. JACOB, M.D.**  
Family Practice and Obstetrics

**202 James Coleman Drive, Suite C**  
**(361) 576-2222**

Equally enthusiastic about medicine and the patients she works with, Cindy S. Jacob, M.D., brings her skill

and knowledge of family medicine to our team. Dr. Jacob looks forward to partnering with her patients to make a positive difference in their lives. Dr. Jacob practices family medicine and obstetrics, providing quality health care to patients of all ages. Dr. Jacob is accepting new patients.



**REKHA PANDULA, M.D.**  
Endocrinology

**605 E. San Antonio St.**  
**Suite 510E**  
**(361) 574-7805**

As a board-certified endocrinologist, Rekha Pandula, M.D., will work closely with her patients' primary care physicians to diagnose and treat a variety of hormone-related disorders, including diabetes, thyroid disorders, osteoporosis, calcium disorders, adrenal gland problems, pituitary disorders and female hormone issues. Dr. Pandula is accepting new patients.

For a list of physicians by specialty, visit [www.detar.com](http://www.detar.com).