

# Health Connection

A PUBLICATION OF LEA REGIONAL  
MEDICAL CENTER

**7 ways to  
weight-loss  
success**

**In case of  
emergency  
Know when to  
go to the ER**

**Meet our  
medical staff**

**Avoid flu season!**

**Cancer and  
heartburn**

**What's the link?**



**LEA REGIONAL  
MEDICAL CENTER**

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

## CHRONIC PELVIC PAIN

# Causes and cures

**W**omen 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

**I**t 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

**N**early 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

**O**ne 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.



Dear neighbor,

**H**ow time flies! Over the past six months, I've come to truly appreciate the things that make Hobbs a great place to live and Lea Regional Medical Center (LRMC) a great place to work and receive care.

I respect and value the skill and dedication of our employees and medical staff, and I appreciate the community's support of LRMC. The staff and I take to heart the ongoing comments you share about what we're doing right and suggestions to make LRMC even better.

**A PLEASANT DIFFERENCE**

Yes, we have a quality facility and staff. But we never stop in our efforts to continuously improve. We strive to make LRMC's care and service so distinct that when you walk through our doors, it's obvious that something is pleasantly different here. I want you to feel confident that LRMC's staff is not only going to provide professional, prompt care, but that your experience will be a positive one.

I'm committed to making great strides in improving the efficiency of our emergency room (ER) to ensure the ER experience is more stream-

lined and positive. We look forward to continuing to serve you and your family's health-care needs at LRMC.

Sincerely,

**LARRY W. PAYTON**  
Chief Executive Officer  
Lea Regional Medical Center



# 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?**

**T**alk with your physician about your diabetes risk factors. Or visit [www.learegionalmedical.com](http://www.learegionalmedical.com) to find more health resources related to diabetes.

## PHYSICIAN SPOTLIGHT

The experienced, dedicated medical staff at Lea Regional Medical Center (LRMC) can help your family stay healthy. We'd like to introduce you to two of our newest members.



**CYRIL M. SIMON, D.O.**  
Internal Medicine

Zia Family Healthcare  
5320 N. Lovington Hwy.  
Hobbs  
(575) 392-1973

LRMC is pleased to welcome Cyril M. Simon, D.O., a board-certified family practice physician and one of the newest members of the Zia Family Healthcare team, to Hobbs. Dr. Simon received his medical degree from the New York College of Osteopathic Medicine in Old Westbury, N.Y., and completed his family residency at Union Hospital in Union, N.J.

Before moving to Hobbs and joining Zia Family Healthcare, Dr. Simon was an attending family practice physician at Linden Family Medical in Linden, N.J., and at the New Jersey Sports and Exhibition Authority in East Rutherford, N.J. He had also returned to Union Hospital as a member of the teaching faculty.

Dr. Simon has been practicing at Zia Family Healthcare since July and is accepting new patients.



**JOSE L. GARCIA, M.D.**  
Internal Medicine

Lea County Children's Clinic  
5419 N. Lovington Hwy.  
Medical Arts Building 1, Ste. 2  
Hobbs  
(575) 392-1503

Jose L. Garcia, M.D., joined LRMC and the Lea County Children's Clinic in May. Dr. Garcia received his medical degree from the Higher Institute of Medical Sciences in Havana, Cuba, and completed an internship at Clinical Surgical Hospital in Havana. He completed a family practice residency at Van Troi Clinic Center in Havana and a pediatric residency at San Juan City Hospital in Puerto Rico.

Dr. Garcia has served as the attending physician in the pediatric emergency department at Palmetto General Hospital in Hialeah, Fla.; Bethesda Memorial Hospital in Boynton Beach, Fla.; and at St. Mary's Hospital in West Palm Beach, Fla. He also practiced at the Novales Medical Center in Miami, Fla., and at the Amedica Children's Center in Hialeah.

LRMC is pleased to bring a pediatrician with Dr. Garcia's experience to our community. He's currently accepting new patients.

For a current listing of LRMC's physicians, call (575) 492-5275.

## 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.

# Don't let the flu bug bite

## A vaccination can help

If you're one of many Americans who think you're somehow immune to infectious diseases, you may be putting yourself at risk for serious illness. That's why you should be sure to get your influenza (flu) vaccine this season.

The flu is a contagious respiratory illness caused by the influenza virus, which spreads from person to person through coughing and sneezing. For most people, it lasts only a few days. Flu symptoms include fever, cough, sore throat, headache, chills, runny nose, fatigue and muscle aches. Stomach symptoms, which mainly affect children, include nausea, vomiting and diarrhea. Some individuals experience complications like bacterial pneumonia, ear or sinus infections and dehydration.

### TYPES OF VACCINATIONS

The best way to prevent the flu is to get a vaccination each year. The inactivated (killed) vaccine has been used in the United States for many years and is injected. In 2003, the live weakened vaccine, a flu vaccine that's sprayed into the nostrils, was licensed.

Although October or November is the best time to get vaccinated, getting inoculated in December or even later can still help. Most flu activity occurs in January but the flu season can last through May.

### WHO SHOULD BE VACCINATED?

At-risk individuals or those who live with others who are at high risk for complications from the flu should get a vaccine. High-risk individuals include children 6 months



to 5 years old, pregnant women, people ages 50 and older, people who live in nursing homes, anyone with a chronic medical condition and people who live with or care for them.

To help prevent transmission from caregiver to patient, The Joint Commission requires vaccinations for individuals who come in contact with the virus. The Joint Commission developed this infection-control standard in response to recommendations by the Centers for Disease Control and Prevention, making reduction of influenza transmission from healthcare professionals to patients a top priority in the United States. As a Joint Commission-accredited hospital, Lea Regional Medical Center has implemented this safety standard for patients and staff.

## ! Avoid the flu this season!

For more information about flu vaccinations, contact your physician or call (575) 492-9675. You can log on to our Web site at [www.learegionalmedical.com](http://www.learegionalmedical.com), or visit [www.cdc.gov](http://www.cdc.gov).

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

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# Health Connection

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