

# Health Connection

A PUBLICATION OF LEA REGIONAL MEDICAL CENTER

## Gender and heart attack

Know these warning signs

## Welcome new physicians

## What's lurking in your home?

3 causes of breathing troubles



**LEA REGIONAL**  
MEDICAL CENTER

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

# Keep your PROSTATE HEALTHY

**S**ens. Bob Dole and John Kerry, baseball team manager Joe Torre—what do all these men have in common? They're all prostate cancer survivors.

Cancer of the prostate—a walnut-shaped gland located below the bladder—is one of the most common cancers found in men. It may be slow growing and require little or no treatment, or it may be aggressive and spread quickly to other parts of the body.

## THE PREVENTIVE APPROACH

While prostate cancer isn't completely avoidable, certain measures may help reduce your risk:

- **Stay active.** Daily exercise improves your overall health and helps keep your weight in check. Some research has shown that men who exercise regularly have a lower incidence of prostate cancer compared to men who don't.
- **Watch your weight.** A sobering fact: Men who are obese when diagnosed with prostate cancer are more likely to have advanced cases, which are more difficult to treat. But eating right and exercising can help you keep off excess pounds.
- **Talk with your physician.** Discuss any risk factors you have—being older than age 65, African-American or

obese, or having a family history of prostate cancer. Also, learn about the pros and cons of screening tests. A digital rectal exam and the prostate-specific antigen (PSA) test are two ways to identify cancer cases, but they can't tell a physician about the aggressiveness of the cancer. And prostate cancer treatments can have unpleasant side effects such as impotence and incontinence.

The American Cancer Society (ACS) recently revised its prostate cancer screening guidelines, encouraging more patient involvement in decisions about screenings:

- The ACS recommends that men at high risk of prostate cancer, including men with a family history of the disease, talk with their physicians sooner—as early as age 40.
- Men who do not have prostate cancer symptoms (trouble urinating, problems with urine stream, blood in urine or semen, leg swelling, pelvic discomfort, bone pain) and who are in relatively good health and are expected to live at least 10 more years should have the screening conversation with their physicians beginning at age 50.
- Men without symptoms who aren't expected to live 10 more years because of age or poor health shouldn't be offered the screening because the risks likely outweigh the benefits.

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**Daily exercise improves your overall health and helps keep your weight in check.**  
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## What to ask your physician about prostate health

**B**e prepared to ask some key questions at your next appointment:

- What is my risk of developing prostate cancer?
- Do you recommend I be tested?
- What is my PSA level (if you've had the test)?
- Will I need more tests? If so, which ones will I need?
- What do the test results mean?
- If I have cancer, what are my treatment options, and what are the pros and cons of each?

# Mammogram confusion

## Information on new screening guidelines



**W**e've all heard that early detection of breast cancer with mammograms saves lives. So it was surprising when in 2009, the U.S. Preventive Services Task Force (USPSTF)—an independent panel that makes recommendations about which preventive services should routinely be offered and to whom—recommended against routine mammograms for women ages 40 to 49 who weren't at increased risk for breast cancer. Traditionally, all women ages 40 and older were encouraged to get the screening.

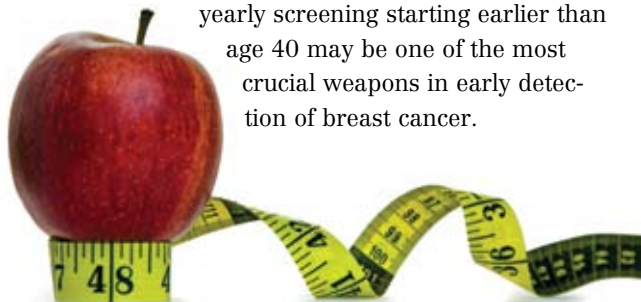
### THE FLIP SIDE

In disagreement with the USPSTF's recommendations were major professional health care organizations including the American Cancer Society. "I have tremendous difficulty in not recommending an intervention [mammography]," says Otis Brawley, M.D., chief medical officer of the American Cancer Society. "Women ages 40 and older should have a mammogram every year."

### NOW WHAT DO I DO?

Amid the confusion, you may be wondering about how to approach your own mammogram. Some words of advice: Talk with your physician.

The USPSTF's recommendations were just that—recommendations, not rules. Discuss your personal and family health history and how frequently you should get mammograms with your physician. And, if you're at high risk—see *Are you at risk?* at right—a yearly screening starting earlier than age 40 may be one of the most crucial weapons in early detection of breast cancer.



## Mammogram comfort

**T**ry these tips for a more comfortable mammogram, courtesy of the Centers for Disease Control and Prevention:

- Don't schedule your mammogram for the week before or during your period, which is when your breasts are likely to be tender or swollen, making mammograms less comfortable.
- Skip the deodorant, perfume and powder on the day of your mammogram. These may show up as white spots on the X-ray.
- For ease of undressing from the waist up, wear a blouse with a skirt or pants, instead of a dress.

## Are you at risk?

**A**ccording to the National Institutes of Health, breast cancer will affect one in eight women in their lifetime. Why breast cancer affects some women and not others isn't known; however, several known risk factors for the disease include:

- increasing age
- having the BRCA1 or BRCA2 genes; if your family members have had breast or ovarian cancer, talk with your physician about getting tested
- starting your period before age 12 or going through menopause after age 55
- being overweight
- using menopausal hormone therapy
- taking birth control pills
- drinking alcohol
- not having children or having your first child after age 35
- having dense breasts

## A LETTER FROM OUR CEO



Larry Payton  
Chief Executive Officer

### Dear neighbor,

Lea Regional Medical Center (LRMC) is continuously looking to improve available health care options in Lea County. As part of our strategic goals for 2010, we were committed to increasing the number of physicians and specialists that you could choose from. We made several

strides toward this effort by bringing in four new physicians last year. In this newsletter, you'll meet three of them, two pediatricians and a general surgeon. We're pleased to have them join the medical staff and the community.

Looking back at 2010 also allows us the opportunity to recognize the overall impact LRMC has had in Lea County, and we're proud to have donated to and supported so many worthwhile causes. We're happy to be a part of Lea County, which is such a great place to work and live.

For 2011, we will continue to bring more specialists to town and to grow and expand our array of services and programs that are available for you, right here at home! We're committed to providing Lea County quality health care options through 2011 and beyond!

Sincerely,

*Larry Payton*

Chief Executive Officer  
Lea Regional Medical Center

## PHYSICIAN SPOTLIGHT

The dedicated and experienced medical staff members of Lea Regional Medical Center can help keep you and your family healthy. We'd like to introduce one of them to you.



**KERMIE L. ROBINSON,  
M.D., FACS**  
General Surgery

**Southeastern  
New Mexico Surgery  
5419 N. Lovington  
Highway  
Medical Arts Complex 4,  
Suite 21  
Hobbs  
(575) 392-3200**

Louisiana native and general surgeon Kermie L. Robinson, M.D., FACS, began his education at Xavier University of Louisiana in New Orleans before completing his medical degree at Tulane University School of Medicine in New Orleans.

Dr. Robinson was the chief surgical resident while completing his medical training at Flushing Hospital Medical Center in New York. His list of impressive positions extends to his most recent at the Advanced Surgical Specialists of Northeast Georgia, a private practice in Conyers.

For a complete list of physicians, visit  
[www.learegionalmedical.com](http://www.learegionalmedical.com).

### FAST FACT

➤ Did you know that about one in three American adults has at least one type of cardiovascular disease?



To learn how to keep your heart healthy, visit Lea Regional Medical Center at [www.learegionalmedical.com](http://www.learegionalmedical.com) and click on "Health Resources." There, you can assess your risks, take quizzes and more.



# Matters of the heart

Men and women experience heart attacks differently



By James Galizia, M.D., Cardiologist

**W**e've all heard about the differences between men and women when it comes to matters of the heart.

These differences hold true for heart health as well. While heart disease has previously been considered a

man's disease, more women than men die every year from cardiovascular-related conditions. Knowing how to recognize the early symptoms of a possible heart attack can help prevent it or allow time to intervene before the heart is damaged.

## GENDER DIFFERENCES

Men usually experience what are considered "classic" heart attack signs: intense chest pain or pressure; arm, back, neck, jaw or stomach discomfort; shortness of breath; a cold sweat; or nausea.

## ! Know where to go

If you think you're having a heart attack, call 911 immediately. To make an appointment with James Galizia, M.D., call (575) 392-3903.

Women experiencing a heart attack may have chest pain, though not as frequently as men. Women often experience symptoms that may be confused with other illnesses and aren't always associated with heart trouble, such as shortness of breath, nausea, vomiting and back or jaw pain. And while men's symptoms come either right before or during a heart attack, women's symptoms may come earlier and last as long as a month or more before a heart attack, says the National Institutes of Health (NIH).

## BY THE NUMBERS

In a 2007 NIH study of more than 500 women, 95 percent of participants reported experiencing new symptoms at least a month before their heart attack, including unusual fatigue, sleep disturbance and shortness of breath. Less than 30 percent of women studied experienced chest pain before the attack, and 43 percent had no chest pain during the attack. Other symptoms included indigestion and anxiety. Women who experienced these nontraditional symptoms didn't identify them as a heart attack and put off seeking medical attention, decreasing their chances of preventing—or surviving—the attack.

Even if you're unsure if it's a heart attack, it's important to be checked by a physician. New medications and treatments are now available that can stop some heart attacks in progress and save lives, but these drugs must be given at the first sign of symptoms for maximum effectiveness.

## HEALTHWISE QUIZ

How much do you know about **high blood pressure**?

Take this quiz to find out.

- 1** How many American adults have high blood pressure?
  - a. one in three
  - b. one in five
  - c. one in 10
  - d. one in 20
- 2** Most people with high blood pressure experience:
  - a. nausea
  - b. weakness
  - c. trouble concentrating
  - d. no symptoms
- 3** Healthy adults with no history of high blood pressure should have their blood pressure checked every:
  - a. six months
  - b. year
  - c. two years
  - d. 10 years
- 4** High blood pressure can increase your risk for:
  - a. dementia
  - b. eye damage
  - c. bone loss
  - d. all of the above
- 5** Which of the following statements is true?
  - a. After age 65, more women than men have high blood pressure.
  - b. After age 65, more men than women have high blood pressure.
  - c. After age 65, an equal number of men and women have high blood pressure.
  - d. After age 65, the number of men and women suffering from high blood pressure is unknown.

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

# Show your heart a little love

**Y**our heart works hard for you, pumping day in and day out to supply your body with the oxygen-rich blood you need for survival. So what are you doing to nurture it? Try these five tips to ensure better heart health:

➔ **Choose good-for-you foods.** Follow a diet such as Dietary Approaches to Stop Hypertension (DASH). This eating plan is centered on foods low in fat, cholesterol and salt; and rich in fruits and vegetables (aim for five to 10 servings a day), whole grains and low-fat dairy products. Foods that are good for the heart also include those with high levels of omega-3 fatty acids, a type of polyunsaturated fat, found in fish such as salmon, mackerel and sardines.

➔ **Give your heart a workout.** You don't need a gym membership to keep your heart in tip-top shape. Get the recommended 30 to 60 minutes of physical activity daily by walking, jogging or biking—and remember that everyday tasks such as gardening, vacuuming and taking the stairs count toward your activity goals. Activity, along with eating healthy foods, can help you maintain a healthy weight, which is another way that you can boost heart health.

➔ **Consider aspirin therapy.** A daily aspirin can benefit many people, but not everyone, so talk with your physician first about the risks and benefits. For example, aspirin can help prevent first and second heart attacks in older women and men of all ages, but only second heart attacks in women younger than age 65. Aspirin also may prevent certain types of strokes.

➔ **Quit smoking.** Tobacco smoke contains thousands of chemicals that damage the heart and blood vessels, including nicotine, which narrows blood vessels and makes your heart work harder. Within one year of quitting, you can expect to see your heart-disease risk drop dramatically.

➔ **Get checked.** Have your blood pressure and cholesterol checked regularly. Ask your physician how frequently you should be tested based on your health history.





## CLEAN UP your health

It's easy to focus on all the bad things we breathe in the air outside, such as pollen and pollutants. But what about what's lurking inside our houses? Household dust, mold and various chemicals can make breathing difficult. Here's what might be stirring up trouble at home:

**Dust mites.** In dust around the home lie dust mites—microscopic insects that are the most common cause of dust allergies. They can also trigger asthma and flu-like symptoms.

**Combat them:** Wipe dusty surfaces with a damp cloth, and vacuum once a week. Wash bedding once a week in hot water, and cover mattresses, box springs and pillows in mite-proof covers.

**Mold.** Mold spores thrive in damp areas such as basements and bathrooms. Along with dust mites, mold is considered a biological pollutant and can also trigger allergies and asthma.

**Combat it:** Use ventilation fans and dehumidifiers to keep humidity at 30 percent to 50 percent. Treat moldy bathrooms, basement walls and furniture with diluted bleach or other disinfectants.

**Volatile organic compounds (VOCs):** These gases are emitted from products such as paints and cleaning supplies. Health effects range from ear, nose and throat irritation to central nervous system damage.

**Combat them:** Use chemicals only in well-ventilated areas. Consider purchasing low-VOC paint.

### Don't let the bedbugs bite!



**B**edbugs are one souvenir you don't want to take home with you from vacation. But these flat, little reddish-brown pests, which are more common in places such as hotels, may find a way into your home by hitching a ride in your suitcase. Waiting to strike, they hide out in beds, box springs, headboards and bed frames. When they do bite, they can cause red, itchy, clustered bite marks on the face, neck, arms and hands. The best way to eliminate them is with a professional exterminator.

## DOUBTING diet soda

**D**iet soda: It's sugar and calorie free, so it must not be bad for you, right? Some recent research suggests otherwise. While most of these health concerns need further investigation, now might be a good time to either limit your diet-soda intake to the occasional indulgence, or switch to water, skim milk or diluted 100-percent fruit juice. Here's why:

**Tough on teeth.** Diet soda is just as acidic as regular soda, which can damage tooth enamel and promote decay.

**Wicked to waistlines.** Some studies have found that drinking diet soda regularly may be connected to obesity and type 2 diabetes. Researchers are unsure if diet soda actually causes obesity, but one study found that those who drank three or more of the beverages daily were more likely to gain weight than those who didn't.

**Unkind to kidneys.** One major study found that women who consumed two or more artificially sweetened sodas a day doubled their risk for kidney function decline. Drinking regular soda or only one diet soda daily did not decrease kidney function more than normal. However, for those prone to kidney stones, a separate study discovered that citrus-flavored diet sodas contain high levels of a compound that may inhibit stone formation.

**Bad to the bones.** According to the National Institutes of Health, people may be replacing bone-friendly, calcium-rich milk with soda, which may lead to decreased bone mass and an increased risk of fracture.





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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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## MEDICAL STAFF SPOTLIGHTS

The dedicated and experienced medical staff members of Lea Regional Medical Center can help keep you and your family healthy. We'd like to introduce two of them to you.



**ALI M. SHERIF, M.D.**  
**Pediatrics**

**Lea County Children's Clinic**  
**5419 N. Lovington Highway**  
**Medical Arts Complex 2,**  
**Suite 2**  
**Hobbs**  
**(575) 392-1503**

**A**li M. Sherif, M.D., pediatrician, has a diverse educational background and has studied all over the world, including in his native Egypt as well as Japan. Dr. Sherif has practiced at Children's National Medical Center in Washington, D.C., and Driscoll Children's Hospital in Corpus Christi, Texas. He has special training in kidney disease management, dialysis, kidney transplantation and medical intensive care units.

Dr. Sherif is one of two new pediatricians seeing patients at the new Lea County Children's Clinic.



**ALINA STANICA, M.D.**  
**Pediatrics**

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**A**lina Stanica, M.D., pediatrician, began pursuing a career in medicine at the Victor Babes University of Medicine and Pharmacy in Timisoara in her home country of Romania, and finished her residency at Flushing Hospital Medical Center in New York.

Her academic honors and awards demonstrate her commitment to medicine and to her chosen specialty. In addition, Dr. Stanica has participated in various training programs in the Netherlands and France. She is fluent in Romanian, Hungarian, English and Spanish. Dr. Stanica is accepting new patients at Lea County Children's Clinic.