Western Pennsylvania Guide to Good Health
Health News You and Your Family Can Use

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TOP DOCTORS:
Derek W. O’Donnell, O.D., Scott & Christie
See pages 34-40

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Confusing Times for Healthcare and Health Insurance: Navigating Through the Mess

By David Straight

Talk about confusing ... healthcare reform, Supreme Court rulings, state exchanges, Highmark versus UPMC, health reimbursement arrangements, and on and on ... Whether you have medical coverage through an employer, purchase individual insurance, or fall under Medicare or Medicaid, these are perplexing times. The change is rapid-fire, and we are flooded by a barrage of news, misinformation, and speculation from a wide variety of sources.

So can you navigate through this mess? How can you make informed decisions? As with anything important, seek the advice of an expert. In the case of health insurance, this means a trusted and qualified agent.

HERE ARE SOME IMPORTANT CONSIDERATIONS:

• Don’t make decisions in a vacuum. True professional advisors make it their business to stay current. They are licensed experts.

• Not all agents are created equal. Ask questions to make sure that health insurance is their primary specialty. A “jack of all trades,” financial advisor, or home/auto agent may only dabble in health insurance. That’s not good enough anymore.

• If you are a Medicare-eligible individual, find an agent who specializes in senior products. The truth is, not all health insurance advisors are qualified to sell these specialized products.

• If you are a sole proprietor, between jobs, or seeking individual insurance for any reason, seek an agent who knows this market.

• If you receive health insurance through your employer, your choices may be limited. Your employer’s agent may participate in annual enrollment meetings to educate you on your options.

• Calling a reputable insurance company directly can be helpful, but the right independent agent will do the legwork for you and provide information and quotes from all qualified insurance companies... without the sales pitch.

Here’s something many people don’t know. Seeking advice from a licensed agent does not increase your rates or cost you a fee. Because insurance companies value the role of these experts, the cost of their services is included in their pricing (whether you choose to work with an agent or not). So why not take advantage of the expertise?

Health insurance is a critical investment, yet the confusion factor today is enormous. Don’t go it alone.

David Straight is the President and CEO of Benefits Network, Inc., a leading insurance agency and consulting firm specializing in employee benefits, property and casualty insurance, and individual and Medicare products. For more information, call (724) 940-9400 or visit the website at www.benefitsnetwork.biz.

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SUMMER FITNESS

Be Active: Have Fun this Summer

By Sally Carey

There are many enjoyable, outside activities that can only be done when the weather is warmer, such as golfing, kayaking, hiking, water skiing, and playing tennis.

Be sure to take advantage of the weather by doing all the things you love to do that you cannot do the rest of the year. But also be careful about a few things that are specific to the season.

Beat the heat

• Try to plan your activity for early morning or after the sun goes down.
• If you are out in the heat, try to stay in the shade as much as possible.
• Check the weather forecast before you go out and try to avoid exercising during heat alerts.

Are you sun smart?

• Wear sunglasses to protect your eyes from the sun’s ultra-violet rays.
• Wear light-colored clothes made with wicking fabrics.
• Avoid wearing cotton, which soaks up water and can stick to your skin when wet.
• Avoid getting too much sun. Use a good sports sunscreen that is water repellent.
• Wear a light-colored hat with a brim to stay cooler and shaded.

Hydration

• Drink lots of fluids - before, during, and after being active. It is recommended to drink three cups of fluids to replace each pound of body weight you lose when exercising.
• Replacing electrolytes during sports activities is important, especially in hot weather. Be sure to focus on a diet of nutritious foods that are rich in electrolytes, such as dairy, bananas and orange juice.
• Alcohol promotes the loss of body fluids. Avoid drinking alcohol before or during exercise, especially in the heat, and afterwards until you are fully rehydrated.
• Beware of excessive caffeine intake as well because caffeine also promotes the loss of body fluids.
• Milk is a great drink after you exercise.

Avoid sun stroke

Be careful about potential sun stroke. Here’s what to look for:
• Very hot, dry skin
• Dizziness and nausea
• Confusion and unconsciousness

If these conditions exist, call your doctor or go to the emergency room.

Sally Carey is Program Manager of Physical Activity for UPMC Health Plan. For more information about UPMC Health Plan, visit www.UPMCHealthPlan.com.

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Prepare for a Healthy Pregnancy Before You Conceive

By Nancy Kennedy

Pregnancy begins at conception, but women can help themselves have a healthy, full-term pregnancy by taking good care of themselves before they conceive. "Pre-conception care," meaning the care of a woman as she prepares to become pregnant, is a means of optimizing her health, reducing medical and lifestyle risks, and getting ready for the life-changing miracle of having a baby.

Douglas H. MacKay, M.D., is a board-certified obstetrician-gynecologist who practices in McMurray and Mount Lebanon and is on the staff of St. Clair Hospital, where The Family Birth Center welcomes up to 1300 babies each year. According to MacKay, there are many steps that women can take, on their own and in partnership with their physician, to raise their odds of having a healthy pregnancy. "Not everything is within a woman's control," he says, "but if you address those things that are within your control, you can help yourself have a successful pregnancy."

In the U.S., the incidence of premature birth has been increasing in the past decade, among all groups of childbearing women. Prematurity carries a range of potential complications and long-term problems, such as cerebral palsy, for the infant. Pre-pregnancy care can help identify and address any factors that may contribute to premature birth, including pre-existing medical conditions such as high blood pressure or diabetes. "These conditions need to be under control before and throughout the pregnancy," MacKay explains. "Poorly controlled diabetes can lead to miscarriage or to prematurity, birth defects and large size. Good control of blood sugar, before and during pregnancy, greatly reduces the risk of birth defects and other problems." Women who take prescription medications, including anti-depressants, anti-hypertensives and blood glucose medications, should consult their physicians in case there is a need to adjust the dose or change the medication during pregnancy.

In addition to getting a physical exam and knowing her own medical history, a woman of childbearing age also needs to become familiar with her family medical history and that of her partner, to determine if there is a history of birth defects or genetic disorders. Genetic counseling may be indicated to assess the risks. A carrier test may be suggested, for cystic fibrosis, sickle cell disease or other inherited diseases.

MacKay emphasizes that a healthy pregnancy is largely a matter of lifestyle, including good nutrition, stress management and exercise. Those things are the foundation of health in general, but in pregnancy, they have added significance. Prenatal multivitamins, including folic acid, are critically important; since the March of Dimes campaign to promote folic acid, the incidence of babies born with neural tube (brain and spinal cord) defects such as spina bifida has decreased by as much as 93%.

"Good nutrition is essential, and achieving a healthy weight before getting pregnant is ideal," says MacKay. "Although it's difficult to lose weight, obese women are at greater risk to develop high blood pressure and gestational diabetes. Obese women are more likely to have complications of labor and require a C-section."

Every year in the U.S., thousands of women undergo bariatric surgery, including gastric bypass and lap-band procedures. The vast majority of bariatric surgery patients are women of childbearing age. Pregnancy after bariatric surgery is safe, says MacKay, although the physician should have a high index of suspicion when a pregnant woman who has had gastric bypass experiences nausea and vomiting. Bariatric surgery may also increase the risk of C-section.

Pre-pregnancy self-care means avoiding smoking, alcohol and illegal drugs, says MacKay. "There's no safe level of alcohol during pregnancy," he warns. "It's a neurotoxin and should be avoided. Smoking is associated with low birthweight and prematurity and is a known factor in Sudden Infant Death Syndrome. Illegal drugs should never be used during pregnancy. If you smoke, drink or use drugs, you need to wean yourself off these substances before you are pregnant in order to give your baby a healthy start," MacKay says that caffeine intake should be limited to 1-2 cups per day.

A pre-pregnancy check-up may include testing for sexually transmitted diseases, a Pap smear, and a review of one's immunization status, especially in regard to rubella (German measles) and chickenpox, both of which can cause birth defects. Updates on vaccinations can be given then, including flu vaccine, Hepatitis B vaccine and Gardasil.

"Improving your health before you become pregnant gives you a jump start on having a healthy baby," MacKay says. "Women have the power to affect the outcome of their pregnancies, by taking good care of themselves. The goal is always a healthy pregnancy and a full-term, healthy baby, and together with your obstetrician, you can help make that happen."

Dr. MacKay has been affiliated with St. Clair Hospital for the past six years. MacKay resides in Peters Township with his wife and three children.

"Not everything is within a woman's control, but if you address those things that are within your control, you can help yourself have a successful pregnancy."

-Dr. Douglas H. MacKay

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For information about the Family Birth Center at St. Clair Hospital, visit www.stclair.org. To make an appointment with Dr. MacKay, call (412) 942-1866.
Women and Resilience

By Rose K. Gantner, EdD

Resilience is a scientific term that refers to materials that have the capacity to return to their original shape after being bent or stretched. But, resilience is also a term that applies to people as well—people who have the ability to recover readily from illness, depression, defeat, or other adversity and bounce back.

For many women, resilience is considered an essential strength. However, women are not always aware of the amount of resilience they do possess.

My friend, Gail M. Wagnild, R.N., Ph.D, is the founder of the Resilience Center and a national expert on resilience, and she says that when you know your capacity for resilience, it gives you the confidence to deal with whatever life throws at you. Being resilient helps you to cope in a variety of different ways, be they personal, professional, or social.

Of course, all of us face challenges from time to time that seem overwhelming or that knock us back. That’s life. It’s the ability to get back up, and get back on track that matters most. In order to have the desire to get back into the game and actively manage your life, you need to have resilience.

The Five Core Characteristics of Resilience:

1. **A sense of purpose.** Without a sense of your purpose in life, you lack a driving force. So, how do you know what your purpose is? Ask yourself: What do I do that others value? In what ways and by whom am I needed every day? What in my life has the most meaning? What are my strengths? The answers will reveal your purpose.

2. **Perseverance.** Giving up is always the easy way out. Resilient people demonstrate the ability to stick to things and get them done. They find ways to go around, under, or over obstacles.

3. **Equanimity.** Stay balanced. Understand that regardless of the situation it is never entirely bleak, nor entirely positive. There’s a middle ground that allows you to see all possibilities and will help to give you the hope and optimism you need to improve.

4. **Self-reliance.** Your belief in yourself must be realistic to be helpful. Remember the challenges in the past that you have met successfully and those that were less successfully met. You can learn from both experiences and develop problem-solving skills that help to build self-reliance.

5. **Existential aloneness.** To be truly resilient, you need to be able to live with yourself. You can also call this, “being comfortable in your own skin.” Truly resilient people need to have this ability.

You can measure your resilience with the resilience scale online tool and you can also see how you compare with others. It’s a quick test that takes less than five minutes. Regardless of your score you can feel positive about yourself and you can learn more about resilience.

Dr. Wagnild has created a “resilience scale” (find it at www.resilience-scale.com) so that women (and men) from ages 18 years and up, can determine their level of resilience and learn how to increase it.

Rose Gantner is Senior Director of Health Promotion for UPMC WorkPartners, which is part of the UPMC Insurance Services Division. For more information on UPMC WorkPartners, visit www.upmchealthplan.com.

WELCOMING NEW PATIENTS MAGEE-WOMENS SPECIALTY SERVICES

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Nicole Donnellan, MD

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Katherine Himes, MD

**Midlife Health Center**
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Judy Balk, MD

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Serena Dovey, MD

Joseph Sanfilippo, MD

Anthony Wakim, MD

**Urogynecology**
The Women’s Center for Bladder and Pelvic Health treats women with disorders of the pelvic floor, including urinary and fecal incontinence and pelvic organ prolapse.

Michael Bonside, MD

Jonathan Shepherd, MD

Magee-Womens Specialty Services
1082 Bower Hill Road, Suite 125
Pittsburgh, PA 15243.

412-429-3900

 Magee-Womens Hospital of UPMC
A fibril with the University of Pittsburgh School of Medicine, UPMC is ranked among the nation’s best hospitals by U.S. News & World Report.
For years, discussing pelvic dysfunction amongst women and men has been taboo. However, statistics report that 47% of women ages 20-49 yrs have some form of incontinence (leakage of urine) and 56% of women over the age of 67 have urinary incontinence. These numbers are probably misrepresented for the fact that there are a large percentage of women and men that are still hush, hush at the doctors. 

When we discuss pelvic dysfunction, pain in the pelvic region also represents 20% of women with 61% going undiagnosed. Pain encompasses, vulvodynia, vaginismus, dyspareunia (painful intercourse). When women and men experience these different pelvic health dysfunctions quality of life is affected from personal relationships, social interactions, fear of public embarrassment and decreased productivity at work, as well as, frequent absences from work.

What women and men need to know is that there is assistance and help available to them from, medical doctors to physical therapists. Those patients who do not wish to undergo a surgical procedure or wear protective undergarments can utilize a specially trained physical therapist to help them strengthen weak pelvic floor/abdominal and hip musculature, heal and relax tight pelvic floor and hip musculature. Symptoms of pelvic floor dysfunctions are leakage of urine when a person cough, sneezes, laughs or is exercising, leakage of urine when hearing running water or extreme urgency to urinate, inability to completely empty ones bladder, fecal incontinence, a falling out feeling, stabbing pain in the vaginal area, pain after ejaculation, inability to sit due to pain or feeling of sitting on a golf ball, inability to have intercourse or a pelvic exam. The cause of these symptoms ranges from, low back pain, abdominal surgeries, long hours of standing, heavy lifting, pregnancy, increased BMI, hip dysfunctions, COPD, depression, post prostatectomy, neurologic dysfunction and unexplained reasons.

As an individual there is help for your pelvic dysfunction. A specially trained women’s (pelvic health) physical therapist can perform an examination and progress you through a comprehensive treatment program that will help you to regain your quality of life.

Martha Patterson-Avery, Director of Women’s Health for OSPTA, Inc., can be reached at (724) 489-8111.
At Magee, Advanced Urogynecology Procedures Are Transforming Women’s Lives

New Effective Treatments for Pelvic Floor Disorders

By Nancy Kennedy

Magee-Womens Hospital of UPMC has great news for the women of the tri-state region: the hospital recently opened an outpatient center in Mount Lebanon for Women’s Specialty Services, offering comprehensive obstetric and gynecological specialty care in urogynecology, midlife health, infertility, gynecologic oncology, maternal fetal medicine and gynecologic specialties.

Among the outstanding clinical services offered at Women’s Specialty Services is The Women’s Center for Bladder and Pelvic Health. The Center is a program of Magee’s nationally renowned urogynecology division, which provides comprehensive medical and surgical care to women of all ages who are experiencing the common problems of urinary incontinence, vaginal prolapse and other disorders of the “pelvic floor” – the system of muscles, ligaments and connective tissue that supports the bladder, uterus, vagina and rectum. Michael Bonidie, M.D., and Jonathan Shepherd, M.D., urogynecologists at the Mount Lebanon location, are highly skilled surgeons who perform the intricate procedures that have transformed the treatment of pelvic floor disorders.

Shepherd says that pelvic floor disorders are extremely common and can greatly compromise a woman’s quality of life. But highly effective new approaches to treatment, including minimally invasive surgical procedures, offer permanent relief. “Urinary incontinence is not an inevitable part of aging,” Shepherd says. “It’s a treatable condition and the treatment has evolved substantially; technology has enabled tremendous improvements.

Shepherd explains that although women in the midlife and senior years are more likely to experience pelvic floor disorders, they happen at any age. There are multiple contributing factors: multiple pregnancies; obesity; smoking; the effects of menopause and other medical conditions. As many as one-third of women over 50 will experience some degree of urinary incontinence, but many avoid seeking treatment because of shame or embarrassment. Their lives can become restricted, as they avoid activities for fear of having an accident. That can lead to social isolation and depression.

“She says, “You don’t have to live with the discomfort and embarrassment of leaking.” Shepherd and Jonathan Shepherd explain. “We’re here to help. We understand that this is a very private health concern, but then so is breast cancer. There’s no reason to be silent about this – it’s as common as breast cancer, and we’re able to talk openly about that.”

There are two main types of urinary incontinence: stress and urge incontinence. Stress incontinence occurs when you laugh or sneeze, and urge incontinence refers to bladder spasms that create the urge to empty the bladder frequently, even with a small volume of urine. Some women have a combination of the two.

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Medications such as Detrol may alleviate urge incontinence, but are not always effective. In that case, there are surgical options: minimally invasive, outpatient surgical procedures that involve a tiny incision, with natural movement, and can greatly compromise a woman’s quality of life. But highly effective new approaches to treatment because of shame or embarrassment. Their lives can become restricted, as they avoid activities for fear of having an accident. That can lead to social isolation and depression.

Shepherd’s method greatly reduces the risk of bacterial infection that sometimes results when mesh is inserted through the vagina.

“The surgical procedures that repair incontinence and prolapse used to require a large abdominal incision, long admission and considerable discomfort. Now, they are performed laparoscopically and robotically, using high-tech, state-of-the-art systems,” Dr. Shepherd explains. “The robotic apparatus gives us a three-dimensional image of the surgical field.”

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“At Magee we are always trying to make the care of women and the quality of their lives better.”

Women’s Specialty Services is located at 1082 Bower Hill Road, Suite 125. For more information or to make an appointment, call (412) 429-3900.
Q. My 20 year old daughter has been diagnosed with Polycystic Ovarian Syndrome (PCOS). What is it and how do you treat it? What are the long term implications to her health?

A. Polycystic Ovary Syndrome (PCOS) is a hormonal disorder that involves multiple organ systems within a woman’s body and is believed to be fundamentally caused by insensitivity to the hormone insulin. It can be diagnosed in girls as young as 9 years of age up through the menopause.

Common symptoms of PCOS include:
• Irregular or absent menstrual periods
• Irregular ovulation which can lead to infertility
• Weight gain (especially around the waist)
• Acne
• Excess hair growth on the face and body
• Thinning scalp hair

Women with PCOS often will also have many small painless cysts in the ovaries (hence the term “polycystic”). However, it is not necessary to have these “cysts” to be diagnosed with PCOS. In fact, PCOS manifests itself differently in each woman.

The diagnosis is usually made by taking a thorough medical history, performing a physical exam and checking certain blood hormone levels. There is not one single test that makes the diagnosis. While PCOS is not curable, it can be successfully managed with medications and changes in diet and exercise. There are several approaches to achieving hormonal balance including birth control pills, anti-androgen medications and drugs that help the body respond better to insulin. Proper early treatment is essential to avoid progression to long term illnesses such as high cholesterol, diabetes, heart disease and stroke. For women who have fertility problems, medications that improve ovulation may be helpful.

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William Mitsos, M.D., McMurray OB/GYN Associates can be reached at (724) 942-5420 or visit www.washingtonobgyn.net.
Women’s Health Services Expands at Jefferson Regional Medical Center

Jefferson Regional Medical Center in Pittsburgh’s South Hills provides a comprehensive selection of Women’s Health Services, focused on the unique diagnostic, medical and surgical needs of women, including health education, events and wellness services - for all the ages and stages of a woman’s life.

Through the five-physician women’s health practice of Anthony F. Gentile, MD and Associates, Jefferson Regional offers the most advanced gynecologic and uro-gynecologic diagnostic, medical and surgical treatments including perimenopause/menopause care and hormone replacement counseling; genetic testing and counseling; women-focused heart care; diagnosis and treatment for osteoporosis; and the most up-to-date minimally invasive and laparoscopic techniques to minimize the disruptions of surgery, and maximize healing and recovery.

Women’s Diagnostic Services provides diagnostic testing at Jefferson Regional’s main campus, and six other locations throughout the area, offering the most advanced technology for the early detection and treatment of breast and gynecologic disease, including mammography, breast and pelvic ultrasound, MRI, breast biopsies, needle localizations, bone scans to detect osteoporosis, and much more.

Thomas J. Cunningham, M.D., recently joined the practice of Anthony Gentile, MD and Associates, which includes Lawrence Glad, M.D.; John Sunyecz, M.D., and Christine Wilson, M.D. Dr. Cunningham specializes in minimally invasive surgical procedures. Minimally invasive surgery results in much faster patient recovery times, very small aesthetic incisions that are barely noticeable, and significantly decreased patient discomfort requiring less analgesic pain medications.

Before joining Jefferson Regional Medical Center, Dr. Cunningham was an attending physician at Wishard Memorial Hospital, Indianapolis, and an assistant clinical professor in the Department of Obstetrics & Gynecology at Indiana University School of Medicine.

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Dr Geskin has performed over 3000 procedures.
Breast Biopsies

By Dr. Natalie Furguele-Iracki

Screening mammograms will sometimes show an abnormality or change from the previous x-ray. If more testing is necessary, this may include sonography or breast MRI but could also include a recommendation for a biopsy. Today, the diagnosis of breast cancer is most often made prior to surgery by the use of less invasive, image-guided needle biopsies.

Stereotactic biopsy is used to sample areas that are abnormal on mammography. They may be in the form of small microcalcifications with or without an associated solid lesion. Stereotactic biopsy is an outpatient procedure done under local anesthesia by the radiologist. It has an accuracy of 99%. It is not unusual for the radiologist to request a repeat mammogram to be done in six months to ensure that there is no ongoing problem. Sonography guided biopsy or core biopsy can give similar information. Sometimes lesions are seen on sonography that are not seen on mammography and vice versa. Occasionally, abnormalities are seen on MRI that is not seen on either mammography or sonography and again MRI guided needle biopsy may be advised.

The point is, that tissue examined under the microscope, if accurately obtained, is much more helpful in making a determination as to whether there should be a concern or if anything else should be done. Needle biopsies sample a portion of the area in question.

The radiologist also has to determine if the tissue obtained from the needle biopsy is concordant with the x-ray picture. If the needle biopsy does not seem concordant with the picture on the x-ray, the radiologist will advise that an excision be done, even if the tissue that was biopsied was benign.

No matter how a biopsy is done it is imperative that a patient follow up with their surgeon or family doctor and have subsequent imaging so that it is certain, no other abnormalities exist and that the area of concern has been resolved.

Need a physician or home care? Visit us online at www.guidetogoodhealth.com for Healthcare Directory.

Holistic Women, Healthy Fertility

(A “part” of many series)

By Kelly Haywiser

When I sat down to start writing this article on holistic women, healthy fertility; my main focus was on Fertility Massage. Yes, massage can play a wonderful “part” in the miraculous journey of life, through enhancing a couple’s potential to conceive naturally or with assisted reproductive methods. Therapeutic fertility massage strives in assisting with cleansing the client’s body, helping to reduce stress hormones, creating balance within the reproductive hormones and stimulating the reproductive organs using Cranial Sacral techniques, very specific massage protocols and precise reflexology practices. But I’m getting ahead of myself, so let’s start first with the Holistic Women. Whether you are trying to conceive, have conceived or in menopause, it is so important to take charge of your Mind, Body and Spiritual health to create the balance where healthy change can occur on all levels. So improving your lifestyle is just a part of the miraculous journey of life. Here are some tips for all women, (especially “to be mothers”):

Cleansing Your Environment - Start with your body. Consider performing a colon, liver and kidney cleanse through a Juice Detox with the help of a trained coach. We endure many toxins daily through Air, Water, Noise, Food, or Environmental pollutants and a good cleanse will help purge these impurities.

Improve Your Diet - Our eating habits have gotten worse with our very busy lifestyles. By eating healthy, we can help restore ourselves to Holistic balance. So consider organic foods and home cooked meals over processed and fast foods.

Get Moving - Most women sit for very long periods of time and this adds to many health concerns – especially constricting the pelvic area. So it is very important to start moving. Consider walking, swimming, biking or playing a sport on a daily basis.

Reduce Stress - Stress plays havoc on our health, so practice stress reduction techniques such as Yoga, Meditation, Journalism, Breathing or getting a massage or energy work.

Know Yourself - Become more aware of your emotions, your body and your spiritual needs. Take Self-Responsibility and Self-Control through nurturing yourself. A life coach can help when you feel the need to create more balance in your life.

These are just a few lifestyle recommendations that will help women at any age, especially conceiving mothers.

Kelly Haywiser is a Licensed Massage Therapist and Holistic Lifestyle Coach trained in Fertility Massage, Reflexology, Reiki, and Juice Cleansing. Contact Holistic Approach 4 Life at www.holisticapproach4life.com or call (412) 221-0700.

Father Scott Seethaler to Speak About the Spirituality of Aging

Mark your calendar for Thursday, September 13 at 1 pm when Father Scott Seethaler, OFM, Cap. addresses “The Spirituality of Aging” at the St. Margaret Mary Church Hall, One Parish Place in Moon Township. A reception and Information Station in the church hall will follow from 2 to 2:30 p.m. Father Scott will explore some of the causes of depression and how to better deal with it. Father Scott will make you laugh, bring some tears to your eyes, and make us think about being grateful for all of the gifts in each of our lives. One of his favorite comments is, “You don’t stop laughing because you have grown older, you have grown older because you have stopped laughing.” It will be an opportunity for seniors to reflect on how God works through the different seasons of their lives.

The “Spirituality of Aging” program is sponsored by Valley Care Association, Gallagher Home Health, Visiting Angels, Gateway Hospice, Copeland Funeral Home, Julian Gray Associates, and Baby Boomers & Beyond. This event is free of charge and persons of all faiths are welcome. Senior adults and their families are most welcome. To RSVP call 412-264-8631 or email Gwen.ogle@verizon.net.
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Yoga for Young Athletes and Swimmers

By Anne Chaikowsky

Athletes at all levels are beginning to see the benefits of incorporating yoga into their training, realizing that it’s about more than just “the stretch.” Swimming is one sport in particular that benefits greatly from yoga. One local coach says, “Yoga and swimming, unlike many other sports and activities, are life-long.” People can do them well into their twilight years.

So how do the two fit together so well?

In “Yoga for Swimmers,” co-authors Baron Baptiste and Kathleen Finn Mendola describe the critical relationship between yoga and swimming, noting that the biggest drawback to an exclusively water-based workout is that the body needs gravity to build strength in muscle and bone.

Leslie Sims, former national swim coach, agrees and points out that body alignment is often thrown “off kilter” in swimmers, attributing this to the nature of three of the four competitive strokes that tend toward an overdevelopment of the front body. The fourth stroke, backstroke, is the only one to provide any kind of counteraction, but it’s not enough as she states, “Learning proper alignment through a consistent yoga practice can help tremendously…” (postures) utilize body weight as a powerful source of resistance. Outside of the water, gravity helps to build strength and muscle. In addition, postures take the body through a full range of motion, encouraging flexible, supple muscles that are less prone to injury…And extended postures take the body through a full range of motion, encouraging flexible, supple muscles that are less prone to injury.

Shoulder blades, hips and ankles are key points of concentration in a yoga practice for swimmers in order to help realign the body. For young swimmers, this is especially important as their bodies are still growing and need gravity to build strength in muscle and bone.

The responsibilities of parenthood that matters most. “You have to get there for yourself,” said March. Anything is achievable. You just have to believe it. Don’t be left in the triathlon splash or dust. Everyone is doing it and you can too!
Peripheral Neuropathy

By Dr. Eugene M. Goldberg

Peripheral neuropathy is a malfunction of the motor, sensory and autonomic nerves that connect the spinal cord to muscles, skin and internal organs. It most commonly affects the hands and feet, causing weakness, numbness, tingling and pain. The Peripheral neuropathy course is variable; it can come and go, slowly progressing over many years, or it can become severe and debilitating. However through chiropractic care, it can be controlled or eliminated.

The peripheral nervous system is not protected by bone, leaving it exposed to mechanical injury or interference through pressure or irritation (neuropathy). Peripheral nerves comprise all of the nerves beyond the spinal cord. All peripheral nerves leave the spinal cord through small openings in individual spinal vertebrae called foramen (nerve windows). These nerve roots are exposed and susceptible to interference or neuropathy from the vertebrae themselves as well as the surrounding muscles, ligaments and tissues.

We’ve all heard the expression “hitting a nerve.” In this area of your body, structures of your own body: bone, muscle, ligaments and tissue can literally hit a nerve causing pressure or irritation (neuropathy) that compromises your health in any number of ways, ranging from numbness or pain to organ dysfunction.

Can Chiropractic Help With My Headaches?

By Dr. Amy Jennings

In a word, YES. Having suffered with headaches for years myself, this is a very personal topic. Until I started getting chiropractic adjustments on a regular basis, I had to have headaches every other day, if not every day. For those of you who suffer from headaches, you know how detrimental they can be to your daily life. Performing normal everyday activities suddenly becomes difficult. Knowing what type of headache you are having, what is triggering them and how best to treat them are three essential keys to ridding your life of these awful annoyances.

There are different types of headaches, such as, tension, hypertension, cluster, cervicogenic, sinus and migraine headaches.

Gaining the insight into what is triggering your headaches is the next step after determining what type(s) of headaches you are having. It is important to note that you may have more than one type of headache as well. For example, personally I have experienced tension, sinus, cervicogenic and migraine headaches. Each of these have their own set of triggers with some similarities amongst them. Sinus headaches will be triggered if I am out in the cold air for too long with my forehead exposed, especially when it is windy. These are also the types of headaches that accompany colds. Tension headaches are those that I have felt at the end of long days that are often filled with stress. Cervicogenic headaches were usually after a day of studying or sitting in front of the computer with less than perfect posture. Migraines triggers are different for everyone and my triggers are usually strong smells, like perfume or household cleansers. You may or may not have the same triggers that I do, but learning what causes your headaches is essential in not only treating them, but better yet, preventing them.

Treating headaches has been almost as baffling as treating the common cold for the medical field and usually involves medication to mask the pain. If you would rather use natural methods like so many people have, dietary health, proper hydration, exercise, and chiropractic adjustments are essential to fighting headaches. Most of us cannot avoid stress, which is a contributing trigger to just about every type of headache there is on the list, so we need to find ways to protect ourselves against it. Proper spinal alignment and posture will help you fight off those triggers when they appear.

Regular chiropractic care cannot only treat the headaches you are currently having, but can also help prevent future headaches.
Why is ultrasound done? Ultrasound can produce images of the body's tissues, blood vessels and even blood flow! Like all imaging modalities, ultrasound has its unique strengths and weaknesses. Your doctor will determine if ultrasound is the best imaging tool to evaluate the area of interest.

How does ultrasound work? Ultrasound uses sound waves that are transmitted into the body and reflected back from the tissues. The characteristics of the sound waves reflected back can be utilized to generate images of the tissues and structures.

Does ultrasound use x-rays or radiation? No, the sound waves utilized during ultrasound procedures are safe and harmless to the body's tissues.

Is ultrasound safe? Yes!

What should I expect during an ultrasound? There are many ultrasound exams, and significant variation in how each are performed. The ultrasound technologist will explain the entire procedure to you before and during your exam. Always feel free to ask the technologist questions!

Why can't I have anything to eat for an abdominal ultrasound? Air and food in the stomach and intestines can disrupt the sound waves used in ultrasound exams. For this reason, patients are often asked to not eat for a period of time before their procedure.

Why do I have to fill my bladder for a pelvic ultrasound? The full bladder acts as a “window” to see other tissues and organs within the pelvis. An empty bladder can significantly reduce the ability to see important structures.

Will it be uncomfortable? The vast majority of ultrasound procedures are very well tolerated with no discomfort at all. A few procedures that may include placing an ultrasound probe within a body cavity to visualize tissue of interest may be associated with some mild discomfort. Your technologist will discuss these procedures with you prior to the exam.

How long does an ultrasound exam take? Ultrasound exams typically take 30 minutes or less. Some exams may take longer!
By Margie Webb, RN, LMT

Many of my baby boomer clients comment on not being able to do what they used to. They say things like: I can't go like I use to, I get tired sooner, I need a nap, I can't do what I did when I was twenty (or thirty).

I like to consider myself to be a resource person so years ago I went on the quest for the answer! James A. Peterson, PhD, FASM in his Take Ten paper states, “By the age of 65, individuals who haven’t engaged in resistance exercise may incur as much as an 80% Decrease in muscular strength... by the age 80, sedentary individual will lose about half of their muscle mass.

Peterson goes on to say, “... the adult has 206 bones. These bones are dynamic living tissues being formed, broken down, and build up through a process known as remodeling. By the time a person reaches age 35, the skeleton has reached a point when the bones are the most strong.”

I learned we will experience a 15% muscle loss per decade between the ages of 50 and 70. This decreased muscle equals decrease muscles strength causing rapid fatigue or endurance. Our body loses 40% of our skeletal mass between the ages of 24 and 80.

So what does this all mean?

First, do some form of exercise. If you don’t use it - you lose it! Since you will have less muscle, exercise to strengthen what you do have. Exercise or stretching tones muscles and helps your balance to prevent falls. It will help to strengthen your bones.

Second, take a walk. Walking is a good way to start, 15 minutes after dinner is great. Walking after a meal boosts the metabolism burning calories. Since you have less muscle to do the work that would explain why your muscles ache, less muscle trying to do more.

Third, drink water. Your energy level is greatly affected by the amount of water you drink. It has been medically proven that just a 5% drop in body fluids will cause a 25-30% loss of energy.

Fourth, begin to pace your activities. Learn to say “NO” you’re not the do all person for everyone. Teach someone else to do the job.

Fifth and most important, learn to take things in stride. Everything can’t be a crisis. Laugh and smile everyday: it will make you feel good and boost your immune system to keep you healthy.

For more information, contact Margie Webb, Licensed Massage Therapist, at (412) 877-8569.
NTI-tss. You don’t have to know what it means. You only need to realize how much it could help you. For the record, NTI-tss stands for Nociceptive Trigeminal Inhibition Tension Suppression System; but its significance is much easier to understand. People who suffer from migraines, or jaw or facial pain, as a result of clenching their teeth at night can wear one of these devices and experience relief in a short amount of time.

Dr. Robert Luther, Jr., one of the few dentists in the area who offers the NTI, has been working with it for a couple of years. He explained that the device is custom made to fit over a person’s two front teeth, top or bottom. It is worn at night, and the purpose is to keep people from clenching their jaws while they sleep.

Dr. Luther said that for a long time, dentists would give a night guard to patients who clenched their jaws. He warned, however, that a guard is designed for people who grind their teeth. “In the past, there was no differentiation (between grinding and clenching). But if you put a night guard in a person who clenches, it makes it worse; you can actually generate 4 percent more force, which isn’t going to help.”

Instead, the NTI fits snugly over and is removed from the teeth by the patient’s hands; it cannot be dislodged otherwise. And it offers enough resistance to give relief from the discomfort of jaw-clenching.

As Dr. Luther clarified, “When you bite down (while wearing the NTI), you only hit the front teeth. So you can’t generate much force because the back teeth don’t come together at all. And that takes the pressure off the jaw joint, or the TMJ (the jaw that connects the lower jaw to the skull).”

Dr. Luther said “it is extremely reliable in getting results,” and quoted statistics that say 82 percent of people had a 77 percent reduction in migraine incidents. He added that the NTI is FDA-approved for preventing or reducing the symptoms of migraines.

Before recommending the NTI, Dr. Luther said he starts by asking patients the right questions. For example, if he sees wear on their teeth, he will ask if they suffer from headaches. Some may reply yes, and say they have seen their physician but haven’t gotten any relief. “Some think they have to live with the pain for the rest of their lives.”

But Dr. Luther is confident in the ability of the NTI to help. “We’re so excited about it,” he said. “It’s so simple it’s unbelievable, and yet people say things like, ‘You’ve changed my life.’”

By Lois Thomson

Robert Luther, Jr., DMD, can be reached at 412-788-6300 or visit the website www.pittsburghlaserdentist.com.

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Dr. Robert Luther, Jr.
Thyroid Disease: Twice as Common as Diabetes

By Nancy Kennedy

Elizabeth W. is a 56-year-old registered nurse who has always taken good care of herself. So when her doctor called following her annual physical and told her that she had hypothyroidism and would need to take synthetic thyroid hormone for the remainder of her life, Elizabeth was surprised. She had no symptoms. A screening blood test had revealed the condition.

Jill Z. is a 40-year-old executive assistant who loves her work and has an active social life. Normally upbeat and energetic, Jill began experiencing fatigue and bouts of sadness. Jill visited her family practice doctor, who did a thyroid screening along with other blood work. Jill had hypothyroidism, and when she was placed on thyroid hormone, her depression disappeared. She is feeling like her old self.

Sandy is a 27-year-old first-time mother. After having had a miscarriage the year before, Sandy expected to feel elated to bring home her baby. Instead, she felt depressed and sluggish. Her family and friends assumed it was postpartum depression, but learned that she had hypothyroidism.

Surprise, surprise, surprise – Elizabeth, Jill and Sandy all had hypothyroidism, due to underactive thyroid glands that were not producing enough thyroid hormone to meet the metabolic needs of their bodies. Too little thyroid hormone slows down all of the body’s physiologic processes, such as regulation of the heart rate, breathing, body temperature and digestion. It is a critically important hormone that is essential to life and good health. But most of the time, hypothyroidism is subclinical – meaning the patient has no clinical symptoms – or it presents with vague, generic symptoms that can easily be associated with other conditions.

“Hypothyroidism is the Great Masquerader of diseases,” says Wayne Evron, Dr. M.D., a board-certified endocrinologist with West Penn Allegheny Health System. “The symptoms, when there are symptoms at all, are so general that they are often misdiagnosed. Some patients will experience fatigue, dry skin, weight gain, changes in their hair and nails and weakness in the proximal muscles – the ones closest to the trunk. Women of childbearing age may have heavier periods. Hypothyroidism is actually a frequent cause of miscarriage and is common in the postpartum period.”

Hypothyroidism is the most common form of thyroid disease, and it is on the rise, especially in women. The risk increases with advancing age. Women should begin getting annual screenings around the time of menopause, in order to detect the condition as early as possible. Treatment is simple: taking a daily dose of synthetic thyroid hormone and getting an annual thyroid blood test is usually all that is needed.

On the other end of the spectrum is hyperthyroidism – an excessive production of thyroid hormone. This condition is not as common as hypothyroidism, and the presenting symptoms vary according to age, says Dr. Evron. “Younger people are more likely to exhibit anxiety, sweating and palpitations; older people will often lose weight. Also known as Graves Disease, hyperthyroidism is dangerous in that it predisposes you to atrial fibrillation, an abnormal heart rhythm. Treatment of hyperthyroidism depends on the cause, so treatment is individualized. Radioactive iodine, anti-thyroid medication and surgery are the three therapeutic approaches. My preference is to treat the patient medically, to normalize the thyroid function without the loss of the thyroid gland.”

Ironically, that disease is hypothyroidism – and the treatment consists of taking thyroid hormone. Hyperthyroidism is an autoimmune disease, and it may be temporary. As many as 50% of cases of hyperthyroidism can be reversed, according to Dr. Evron.

Thyroid disease cannot be prevented, but it can be detected early with screening tests. Dr. Evron recommends annual thyroid screening for all adults; in addition, he says that pregnant women should be tested as soon as the pregnancy is confirmed. People who are being treated for depression should ask to have their thyroid function checked, as should anyone who is experiencing symptoms suggestive of thyroid disease, regardless of age.

Thyroid disease is a common problem – twice as common as diabetes. By menopause, 1 in 5 women will have developed a thyroid condition, but like Elizabeth, Jill and Sandy, most of them won’t know it – unless they get a screening test.

To contact Dr. Evron, call his office at West Penn Allegheny Health System at (412) 683-4550 or at the Joslin Diabetes Center at (412) 578-1724.
Dr. Brent Angott specializes in laparoscopy and minimally invasive surgery at The Washington Hospital, and because of his expertise, he has been chosen as one of 200 surgeons in the country to participate in robotic single-incision gallbladder surgery.

Dr. Angott said robotic surgery has been around for close to 20 years, initially used in cardiac surgery. It then moved onto urological surgery, gynecologic surgery, and thyroid surgery. Most recently it is being used for minimally invasive gallbladder surgery.

Dr. Angott said the newest advancement in robotics is single-incision gallbladder surgery. “I’ve been doing single-incision gallbladder surgery for the past four years, but it is very cumbersome because your instruments have to be scissored across each other, so it can be very difficult.

“Now with the robotic single-incision surgery, the computer manipulates the instruments so they don’t come in contact with, it makes it so much simpler; it takes a good surgeon and improves his ability to do procedures.”

A good surgeon, like Dr. Angott.

Dr. Angott said robotic surgery has been around for close to 20 years, initially used in cardiac surgery. It then moved onto urological surgery, gynecologic surgery, and thyroid surgery. Most recently it is being used for minimally invasive gallbladder surgery.

- Dr. Brent Angott

For more information, call Angott Surgical Associates at 724-222-9500 or visit www.washingtonhospital.org.

**Medical Profiles**

**Dr. Brent Angott, Surgeon**

By Lois Thomson

Dr. Angott said robotic surgery has been around for close to 20 years, initially used in cardiac surgery. It then moved onto urological surgery, gynecologic surgery, and thyroid surgery. Most recently it is being used for minimally invasive gallbladder surgery.

- Dr. Brent Angott

**Dr. James Marks, Wound & Skin Healing Center**

**Complex Wounds Have Complex Health Needs**

By Lois Thomson

“Right now, at this moment, people are walking around with untreated, non-healing wounds or foot & ankle pain,” observes Dr. James Marks. Dr. Marks is medical director of The Washington Hospital’s Wound & Skin Healing Center, and a podiatric with his partner, Dr. Nicholas Lowery, in Penn Foot & Ankle Specialists, so is very aware of what's going on in this field.

He continued, “Providing optimal care is always challenging when, in the United States, we are experiencing an increasingly aging population, increasing obesity, increased at-risk populations such as diabetes, and an increase in undetected circulation conditions (Peripheral Arterial Disease, Chronic Venous Insufficiency).”

He said solid, researched evidence has shown the importance of building a “team” approach when treating patients with foot & ankle problems, Diabetic Foot Disease (Diabetic Foot Ulcers, Diabetic Foot Infections), and complex wounds. “For example, Diabetic Foot Disease is the most complex and vulnerable of all populations, and partnering with surgeons, pediatric surgeons, intervention specialists for peripheral vascular disease, and infectious disease specialists, has shown to increase quality of care and reduce amputation rates by 36 percent to 86 percent.”

The Washington Hospital and the Washington Physicians Group have created a unique patient center in one location to address these conditions. Located at the Wilfred R. Cameron Wellness Center, 204 Wellness Way, Building 1, the Wound & Skin Healing Center, with the expertise of Penn Foot & Ankle Specialists (with Dr. Marks and Dr. Lowery), is equipped to coordinate, with local physicians, the diagnosis, surgical & medical management, and preventive care of untreated non-healing wounds, or those who suffer from foot & ankle pain.

The outpatient center at Cameron Wellness Center consists of The Wound & Healing Center, Hyperbaric Oxygen Therapy, and Penn Foot & Ankle Specialists.

Dr. Marks is excited to introduce the newest physician addition to the Wound & Skin Healing Center and Penn Foot & Ankle Specialists, Dr. Brandon Crim, DPM.

“Dr. Crim will join us August 1 after completing his extensive training at UPMC’s Comprehensive Foot & Ankle Center in conservative and surgical treatment of the foot and ankle, with emphasis on reconstruction, diabetic limb salvage, trauma of the foot & ankle, and arthroscopy. Dr. Crim will have also completed extensive post-graduate training at the Department of Orthopedic Surgery, Foot and Ankle Division of UPMC, under the direction of Dr. Dane Wukich, MD.

“Dr. Crim’s expertise in foot & ankle surgery will advance our goal to provide the best medical care in this region with state-of-the-art techniques in ankle joint replacement; Diabetic Foot Disease (ulcers, infections, and Charcot foot reconstruction); diagnosis and treatment for osteomyelitis (bone infection); limb salvage and amputation prevention; plastic surgery repair with advanced skin substitutes for faster wound healing; and sports and tendon injuries.”

With the addition of Dr. Crim, as well as extensive patient education, early assessment, and aggressive treatment, The Washington Hospital offers an answer to all patients who are walking around with untreated non-healing wounds or foot & ankle pain.

For more information about HBO and other treatments for chronic wounds, contact the Wound & Skin Healing Center at 724-223-6903. For appointments for foot and ankle conditions, contact Penn Foot & Ankle Specialists at 724-222-5635 or visit www.pennfoot.com

**Dr. Brandon Crim, DPM**

For more information call Angott Surgical Associates at 724-222-9500 or visit www.washingtonhospital.org.

Diabetic Foot Disease is the most complex and vulnerable of all populations, and partnering with surgeons, pediatric surgeons, intervention specialists for peripheral vascular disease, and infectious disease specialists, has shown to increase quality of care and reduce amputation rates by 36 percent to 86 percent.” - Dr. James Marks
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Safe Eating Tips for Children with Special Needs

By Deborah Fenton, MHS, OTR/L, and Marie Persi Maletic, MS/CCC-SLP

In many cases, children with special needs require assistance to learn safe eating skills to overcome challenges such as difficulty chewing or swallowing, tolerating various food textures and learning to feed themselves. When the muscles needed for eating are impaired, it may increase the risk for aspiration. Often called “going down the wrong pipe,” aspiration occurs when food/liquids pass through the airway and into the lungs instead of going down the esophagus and into the stomach. Aspiration can lead to various respiratory difficulties including choking and pneumonia. But if the child has decreased sensation or impaired muscles he/she may have silent aspiration. A medical test called a Modified Barium Swallow study can detect a child’s propensity for aspiration and may result in preventative measures such as a modified diet.

Children with sensory processing challenges may experience difficulty tolerating the different textures of food. When children who prefer creamy textures are given lumpy foods, their heightened agitation is typically greater than what is seen with a child who is a picky eater. Caregivers should develop a trusting relationship with their child around the feeding regimen. Attempting to “trick” children to eat a texture that is unpleasant will often result in negative outcomes.

Individuals with special needs may also have difficulty feeding themselves because they may not have the strength, coordination, or sensory skills. Children with visual impairments, like those who attend the Western Pennsylvania School for Blind Children (WPSCB), cannot learn to feed themselves by imitating the actions of others. Therapy that centers on these issues and consistent practice of self-feeding can help. The child can be seated upright in special equipment, such as an adapted chair. Use of commercially available plates, cups, and utensils with adaptations can help facilitate self-feeding.

Approximately 85% of the students at WPSC have feeding challenges. Mealtime is a learning opportunity, where therapists create a plan that incorporates safe position, texture, liquid, and feeding techniques. Collaboration with our families helps these feeding skills carryover to ensure safe eating at home as well.

How to Improve Your Child’s Social Skills

By Cherie River

Did you ever wish you could follow your child to school? Do you find yourself longing to be nestled on their shoulder so you can quietly nudge them to say “hi” to a friend or ask for a turn on the swings? Don’t you wish you could whisper in his ear the best “comeback” in the world when a mean spirited peer laughs at him? Your every instinct as a parent is to protect and help. This instinct is magnified when you have a child with Autism or a child with limited social skills.

You are not alone. As a Speech Language Pathologist I often find myself ending a session by telling the parent “If only I could be there on the playground…”

When we are engaged in the natural turns and twists in life as adults we rely on our social language skills to get us out. We rely on the subtle facial gestures and body cues by the listener to know if they are interested in our story or checking out the conversation across the room. We rely heavily on social language skills at work to get new contracts or promotions by simply being likeable and friendly. We rely on social language skills from ordering food the way we would in a restaurant to allowing a more hurried shopper to quickly roll their cart in front of our cart. We rely on social language skills to build friendships and to fall in love.

Parents need to know how important it is to talk to their child about their social experiences. How do parents approach such off-limit topics with their child? Simple! Just analyze what YOU did today that required social language skills. Did you get annoyed today when waiting in line at the bank and someone else very cleverly got in front of you? Confess that you did nothing and said nothing and held it all in. Tell your child what you wished you would have said. Give your child funny scenarios where you could over-react. After bursting into laughter together ask your child why that option might not work so well. Then ask him to come up with creative ways to make the person know that it is not polite to line-jump.

After you discuss your social language experiences in which you felt awkward or uncomfortable, it opens the door for your child to feel safe sharing his most vulnerable experiences he encountered at school today. Feel free to laugh and come up with absurd ideas on how he could have responded. Allow your child to try to think of solutions with you. Avoid saying things like “Haven’t I told you to stand up for yourself?” That means nothing to a kid who thrives on order, routines, and scripted responses. Kids with poor social skills can’t just pull the words out of the sky to “stand up” for themselves. They need to be taught. They need to be told that we all feel awkward and search for the right way to say things even as adults. Kids need confidence knowing that their “comebacks” are funny and well-timed! Give your child specific examples of what he could have said in that situation at school. If you can’t think of the right words (like you couldn’t at the bank today) teach him a gesture to brush off a peer’s remark. Have him look in the mirror and practice things like shrugging his shoulders or making a “whatever” expression on his face. Practice makes perfect even when it comes to social language skills. Be sure to share your ideas and discussions with your child’s teachers so they can help carry-over.

Also, remember that we all had to be taught social skills. Not one of us was born with the knowledge of each nuance of life. Kids with limited social skills just need a little more real-life help and encouragement. So, we may not be able to follow them onto the playground and whisper in their ear but we sure can share our own struggles with social language and allow our children to see that
When caring for a medically fragile child, the daily difficulties of the child’s care can weigh heavily on a family. The Children’s Home of Pittsburgh & Lemieux Family Center understands the complexity of these obstacles and encourages families to keep a positive attitude, work on realistic goal-setting and create a clear line of communication with therapists, physicians and educators, to achieve the best outcomes for their child.

Keeping a positive outlook on the future of a child with medical fragility will help yield encouraging gains in their development. It’s important to recognize that children are resilient and will rise to great expectations with proper encouragement and education. However, being able to achieve this during complex circumstances, can prove challenging.

“Often, families working through the daily struggles of a child’s medical complexities find themselves discouraged,” said Arran Harland, Educational Coordinator for Child’s Way, The Children’s Home’s medical day care. “It is important to remember that you and your family are not alone if you experience worry, anxiety, or helplessness.”

Finding an outlet to express concerns surrounding your child’s care is an effective and healthy method in dealing with the situations that arise. Support groups, counseling, or spiritual guidance can empower you to balance family life and professional careers, while staying positive and setting high, yet practical goals for your children.

Goal-setting is another crucial step in helping your child to succeed. You know your child’s abilities and desires better than anyone, so being a participatory member of their early intervention is paramount to setting realistic goals. Creating an open dialogue of expectations between you and your child’s medical caregivers will help plan goals that are continual.

To foster a unified alliance in working towards your child’s goals, create a clear line of ongoing communication about the techniques and strategies your child’s medical caregivers utilize, while implementing the same methods at home. Stay vigilant with continuing caregivers’ recommendations, while voicing your opinions.

Finally, never forget to celebrate every milestone, big or small, in your child’s progress to help stay positive and remain focused.

At The Children’s Home, positivity, goal-setting, and communication are integral to what we do each and every day. To learn more about The Children’s Home & Lemieux Family Center or to see if Child’s Way medical day care might be a good fit for your medically fragile child, call (412) 441-4888, visit the website www.childrenshomepgh.org, or e-mail info@chomepgh.org.

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Parenting Advice from The Children's Home of Pittsburgh & Lemieux Family Center

**Maintaining a Positive Outlook through Goal-Setting and Communication:**

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**Envisioning New Paths to Success for Students with Visual Impairment for 125 Years**

The Western Pennsylvania School for Blind Children is proud to provide superior educational opportunities for students with visual impairment, including those with severe multiple disabilities.

In addition, our comprehensive outreach programs provide vital services to western Pennsylvania youth with visual impairment in their school setting or in the community.
A Parent’s Touch

By Philip Buttenfield, LCSW, JD

F ew things in life are as memo-

rable - or as comforting - as

the feeling of our mother’s - or

our father’s - hands gently soothing
away our pain. The touch of a caring
hand communicates far more than
even a poet’s words can adequately
express. Who among us cannot
remember a time of pain or sorrow
when words failed us, and all we
could - in fact, all we needed - to do
was simply to reach out and touch a
loved one to let them know we
cared?

The act of touching a loved one to
relieve suffering is especially effec-
tive with our children, who may not
understand our verbal attempts at
making them feel better, but who
almost universally respond to a lov-
ing touch. A child in pain, whether
emotional or physical, wants to be
held, touched and in this way com-
forted and soothed. This is especial-

ly true for special needs children, many of whom require more medical
interventions than others and may not be able to appreciate the need for these interventions.

So much of what medical professionals have to do to treat an injured child,
from cleaning a cut to setting broken bones to surgery to physical therapy,
produces pain. Yet we sometimes have to subject our beloved children to
these painful experiences in order for them to get better. A Reiki treatment,
however, is actually quite soothing, and has the added benefit of that won-
derful balm: physical touch. Furthermore, Reiki is an effective and compat-
ible complement to any medical treatment, medication regimen, chemother-
apy or physical therapy program. In addition to activating the body’s own
natural healing abilities, Reiki has been clinically demonstrated to be help-
ful in reducing subjective levels of pain.

Because we are all “hard-wired” to conduct Reiki energy, any parent,
grandparent, aunt or uncle can learn to perform this valuable treatment for
his or her loved ones. Basic Reiki training is relatively inexpensive and can
take place in the space of a weekend. And then the comforting touch, so
freely given and so welcome, becomes a healing
touch as well.

Philip Buttenfield is a principal of Key Stone
Reiki, an association of independent Reiki
practitioners; see their website at
www.KeyStoneReiki.com. Philip also offers
psychotherapeutic and Reiki services through his
private practice, Green Stone Therapies -
www.greenstonetherapies.com. He can be reached at
(412) 805-6811 or greenstone1@verizon.net.

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When you’re under stress, do you automatically reach for potato chips or cookies, and then eat the whole bag instead of just one? A 2010 survey by the American Psychological Association found that female respondents, more than male, turned to fatty, sugary “comfort foods” when faced with stressful situations.

Women’s stressors can accumulate over time until they become overwhelming. Maybe you’re taking care of an aging parent, or a “boomerang” child has moved back in with you. Maybe your spouse faces a health issue, or your boss begins making unreasonable demands on your time. Stress that builds up and doesn’t abate causes wear and tear that may eventually lead to health problems, including digestive ills, chronic fatigue, hypertension, out-of-whack blood sugar levels, and weight gain, particularly in the abdomen.

If you’re like most women who put on weight around the middle, you probably start restricting calories or skipping meals in an attempt to shed the extra pounds. But in reality, dieting stresses your body even more. Calories are your body’s fuel; they power all your systems, and you need them to survive. They’re only the enemy when they’re “empty,” giving you little to nothing in return – when you eat a fast-food meal for lunch, reach for a soda in the afternoon, or pop a frozen pizza into the oven for dinner.

The ideal diet for women under stress is actually no diet at all, but a regimen of fresh, whole foods that supply nutrients known to alleviate stress levels, like vitamins C and E, the family of B vitamins, and omega-3 fatty acids.

How you eat is also important. Keep your body fueled with whole foods so your energy levels remain steady. Eating several small, nutritious meals and snacks will keep you on an even keel all day. Combining high-quality protein, fat and carbohydrates, especially fiber, works best to sustain energy over time and control cravings for the empty-calorie foods you turn to under stress. Don’t rush through meals and snacks, but take the time to appreciate your food.

With a diverse array of fresh fruits, vegetables, legumes, nuts, seeds, fish and lean meat incorporated into regular meals and snacks, your body will actually begin to prefer healthier options. You might actually find yourself craving broccoli!

Paula Martinac is a nutrition educator and holistic health coach with a private practice at the Nuin Center in Highland Park. She is a member of the National Association of Nutrition Professionals. Visit her online at www.nutritionu.net or email paula.nutritionu@gmail.com.

Q. My brother has been drinking for the past 40 years. Can you tell me what impact long term drinking has on the brain and personality. His personality has altered significantly and I am wondering if it is a result of his drinking.

A. Long-term heavy drinking for 40 years has the potential to cause numerous problems to every organ system in the body including the brain. Brain problems created from alcohol use can:

• cause problems in short- and long-term memory;
• lead to a type of dementia similar to Alzheimer’s disease;
• create problems with impulse control, making a person more likely to be more violent and argumentative;
• cause a variety of other personality changes.

I would strongly recommend that your brother have a thorough medical evaluation because although alcohol may be a factor causing these problems, there are potentially other medical factors that could cause similar problems.

It is never too late to get help with an alcohol problem, so I would strongly suggest that your brother get help as soon as possible.

For more information, call 1-800-472-1177 or visit www.gatewayrehab.org.

More on alcoholism in our Fall issue of the Guide To Good Health!
Got the Food Blues? Turn Your Summertime Stresses into Healthy Successes

By Lindsey Smith

As much as I enjoy food now, I used to spend more time worrying how many cookies I was going to indulge in at a family outing than I did actually enjoying and savoring the taste of the cookies. I felt ashamed for worrying and having to constantly think about food at events. I felt stressed about my weight and my body. I felt guilty after I would indulge. And I just felt alone.

For an entire week, my body was in a state of stress and panic over a single cookie!

Little did I know the stress I was putting on my body over this one single cookie was dramatically affecting my weight and my health. You see, our gut is made up primarily of stress hormones including cortisol and adrenaline, making it the first responder to stressful situations. Yes, this also includes feeling guilty and upset about eating a cookie.

Regardless of the type of stress (good or bad), your body immediately goes into a state of fight or flight. All of the hormones that sit in your gut and all the blood moving through your digestion process now rush away from your stomach to help you think clearly, fight off an attacker, or run for your life. The last thing your body is thinking about is whether or not it wants to digest your chocolate chip cookie.

Therefore stressful situations or even “food stress” or “weight stress” make it harder on your body to digest which can lead to constipation, bloating, acid reflux, and yes, even weight gain.

Here are 3 tips to help you stress less and digest better this summer season:

1. Know that your friends and family are a sense of nourishment too! The more time you spend with people that love you, the more full and satisfied you will feel. No cookie could do justice!

2. Go into every situation with food with a sense of love and appreciation. I don’t care if it’s kale or a cookie. This will help calm your body and mind down to help you digest better and feel better.

3. Food is pleasurable, but what do you define as pleasure? Is pleasure binging on five cookies without remembering it? Or is pleasure enjoying the rich taste, creamy texture, and bountiful flavors in the cookies? If you experience healthy pleasure in food, you will digest better, have a better outlook and all the blood moving through your digestion process now rush away from your stomach to help you think clearly, fight off an attacker, or run for your life.

Remember, these small changes and shifts in mindset add up to big results! Start with one and work your way up! You got this!


Hot Dogs and Heart Health? 5 Heart-Healthy Cookout Tips from Creta Farms

Creta Farms, a new product line now available in Pittsburgh-area Giant Eagle stores, has provided five heart-healthy cookout tips to help local families make better choices during this summer’s grilling season.

• Choose Lean Meats
Not all hot dogs are created equal! When shopping, read nutrition labels carefully and choose products with low saturated fat, sodium, and cholesterol levels. Creta Farms AHA Hot Dogs contain less saturated fat by starting with lean meats and adding Extra Virgin Olive Oil – leaving the “bad” saturated fat out and adding the “good” fat (and flavor!) of EVOO in.

• Get Colorful
Add colorful veggies to salads, on the grill, or in a cold pasta salad. Choose bright vegetables like peppers, tomatoes, and zucchini to add tasty color and flavor to any dish.

• Upgrade Your Sides and Snacks
Choose healthy side dishes to accompany your burgers and dogs. Steer clear of potato chips and packaged snacks.

• Serve Whole Grain Buns
Be conscious of the buns that you are serving at your next cookout. Buns made with whole grains are good for your heart and taste great!

• Try Grilling Fruits
Replace high-sugar desserts with other healthy sweets, like grilled fruit. Pineapple and peaches are especially delicious on the grill, and will impress your cookout guests while keeping your heart healthy.

People who love hot dogs and sausages and have sought healthier options find that they often just don’t measure up on taste. Creta Farms products replace the animal fat in their products with EVOO (Extra Virgin Olive Oil), allowing for up to 90% less saturated fat than their competitors while retaining flavor and juices.

By combining lean meats and wise choices on side dishes and snacks, cooking out can be a fun and healthful activity for the whole family.

To share your own heart-healthy cookout tips join Creta Farms at facebook.com/iheartcretafarms.

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The Real You

GUIDE TO GOOD HEALTH 29
I believe in saying yes. Saying yes to spending time walking outside, spending time with friends, yes to healthy living and yes to smiles.

There are some areas though, that maybe the correct answer is not yes. When they are things that hurt us physically, mentally or emotionally, we need to say no. It can be very difficult to say no to ourselves. It is hard enough saying no to other people, but I think it can be hard-

er to say no to ourselves.

We are told to think about self-care and we interpret this as coddling ourselves and being selfish. It isn’t the same thing.

Another problem. We don’t want to deny our selves of anything. Here are the reasons we say that we shouldn’t have to:

• I work hard - I deserve this! (The this could range from a huge sundae to a cigarette to alcohol.)
• I spend enough time taking care of the kids and supporting them - I don’t have time to listen to them.

Get the priorities of your life straight in order to be happy and healthy!!!! Here’s how:

1. Make a half hour date with yourself.
2. Sit down with a paper and pen or pencil.
3. Make a list of everything that is important to you.
4. Now go back and circle the top three.
5. Take an honest look at your life and ask yourself the following questions: Are you giving everything you can to these three items? Are you honestly trying to eat healthier, be kinder, or be more financially responsible? Again, be honest - don’t make excuses. Figure out what to say YES to and what you MUST say NO to. Be the responsible person you know you can be.

It’s that simple. Not easy, but simple. Get started right now.

Live the life you are meant to live!

Diana Fletcher is the author of Happy on Purpose Daily Messages of Empowerment and Joy for Women, and Reduce Your Stress Month by Month Stress Reducing Strategies. Her books are available on amazon.com in both print and Kindle versions. They are also available for the Nook at barnesandnoble.com. Diana can be reached through her website, www.dianafletcher.com or (412) 612-5977.
The Revolution in Laser Cataract Surgery

By Drs. John P. Nairn and Lisa M. Cibik

Traditional vs. Laser Cataract Surgery

In both methods, the lens must next be split into manageable size pieces for removal. Traditionally, ultrasonic energy divides the natural lens into quadrants. Now, the laser divides it in an instant using much less energy.

The divided lens is then removed. The laser actually softens the lens when it divides it, so that less ultrasonic energy is required to remove the cataract. This means less stress to the delicate fibers and membrane that will hold the newly implanted intraocular lens in place. Finally, the intraocular lens of choice is inserted and positioned.

Undergoing cataract surgery is an important decision. Patients should be sure to discuss the available options and any questions they have with the doctor who will perform their procedure.

Drs. John P. Nairn and Lisa M. Cibik are Board-Certified, Fellowship-Trained Eye Surgeons at Associates in Ophthalmology. For more information, call 1-800-246-1000 or visit www.AIOeyesurgeons.com.
Cataracts: A Normal Part of Aging

By Heo-Jeng Ooi, M.D.

If you are over 60 years old and you find your vision getting a little blurry that even glasses could not help, changes are you may be developing cataracts in your eyes. A cataract, by definition, is a cloudy lens in the eye that may or may not affect vision significantly. Your eye works like a camera, with a clear lens that focuses images on the retina at the back of your eye. When the lens becomes cloudy and discolored, losing its transparency, it is called a cataract. However, just because you have cataracts, it does not necessarily mean your cataracts are visually significant (meaning you think you can see clearly and you report no symptoms whatsoever in life). Symptoms that may suggest you are developing visually significant cataract include difficulty to see street signs, to watch TV, or to read, despite wearing glasses or contact lenses. Others may also include difficulty to drive due to glares.

Cataract formation is a normal part of aging. While cataracts may develop in both eyes at the same time, they do not spread from one to the other. They are not caused and do not grow worse through overuse of the eyes, but, as a rule, develop gradually over many years. According to National Eye Institute, by age 80, more than half of all Americans either have a cataract interfering with their vision or have had cataract removal surgery. The term "age-related" is perhaps a little misleading. You do not have to be a senior citizen to develop cataract. In fact, you could have developed "age-related" cataract in your 50s, or even younger like in 40s. These "younger" patients do tend to have systemic diseases like Diabetes Mellitus that could hasten the progression of the onset of cataracts.

If you have cataracts interfering with your vision, surgery is the only effective way to improve your vision when the glasses no longer help. Cataract removal surgery is one of the most commonly performed surgeries in the United States. It is also one of the safest and most effective types of surgery. In general, about 95% or above of the people who have had cataract removed experience improved vision afterward.

If you have cataracts in both eyes that require surgery, the surgery usually will be performed on each eye at separate times. Talk with your local Ophthalmologist and learn about the risks, benefits, alternatives, and expected results of cataract surgery.

Dr. Heo-Jeng Ooi is Associate Ophthalmologist and Surgeon at the Cataract and Laser Institute of PA. For more information, visit www.cliofpa.com.
Why did you choose your specialty?
I always wanted to pursue a career in healthcare. I feel that vision is one of our most important senses. Because of this, I chose a career in which I have the opportunity to improve and preserve someone’s ability to see on a daily basis.

What symptoms do patients ignore most?
Dryness and overall eye irritation. Patients tolerate the discomfort and redness of their eyes and assume there is nothing that can be done. They are overwhelmed by the choices of over the counter drops, and usually choose a drop that takes the “red out” of the eyes, which actually makes the problem worse. If they would address the issue with an eyecare professional, the diagnosis and proper treatment can often times be implemented to relieve the symptoms.

What question do patients most often ask?
Am I legally blind without my glasses? Legal blindness is defined as vision of 20/200 or less in the better eye, with best correction possible. So, referring to the definition, once the glasses or best correction is removed the term “legal blindness” cannot be used.

What advice do you wish patients would take seriously?
I wish they would wear eye protection more often, especially around the house while performing a task where a foreign object could easily cause trauma to the eye.

Tell us about your most compelling case?
My company’s nonprofit, Mission Vision, afforded me the opportunity to prescribe a pair of glasses for an underprivileged child that was considered “learning disabled”. The boy was lead into the classroom by an aide and showed very little awareness or emotion. After the examination, I realized the child could not see anything clearly beyond 3 inches. Once he was fit with glasses his world opened up and he began running around the room giving high fives to everyone!

What innovation has changed treatment in your specialty?
Refractive Surgery: LASIK, PRK, ICLs and clear lens exchange have revolutionized the optometric profession. These procedures offer visual freedom for our patients, which they never thought would be possible.

What is the biggest myth you deal with and what is the truth?
The biggest myth I deal with, especially from parents of children, is a high refractive error means that the eye is unhealthy. Ocular health and refractive error rarely have any correlation. A high prescription does not mean the eye is unhealthy, it just needs more correction to achieve the best vision.

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There are many joys families experience within the relationships they have with senior relatives. Grandma and Grandpa are often able to tell the best tales of times past. The memories they impart during family get-togethers, along with valuable family history seniors recount, become the ties that bind many families together.

Along with the joys seniors bring to our lives come hard decisions that may eventually need to be made regarding their ability to live alone. Some seniors suffer mental or physical limitations that make it difficult for them to safely care for themselves. In these instances, family members find themselves in the position of deciding who can provide the best care for their loved ones.

There are two types of caregiving scenarios to consider – choosing a willing family member to provide care or hiring a home care company to deliver caregiving service for seniors. Deciding to become a family caregiver can be an incredibly rewarding experience. Family caregivers often find their relationships with their senior loved ones enriched and satisfying beyond words. Even so, becoming a family caregiver can have a negative impact in some ways, as well. Many family caregivers experience financial difficulties, others become susceptible to depression due to the physical and emotional impact caregiving can have. Careful consideration of all parties involved should be taken before a family member takes on a caregiving role.

An alternative to family caregiving is to hire a professional and experienced agency to provide care and support. Home care agencies focus on serving the senior population with services such as personal care, transportation, housekeeping and daily companionship for those who need close monitoring.

Deciding a loved one’s needs can be a daunting experience. Keep in mind the best fit for a loved one’s needs and safe environment is essential for success. The end result should make everyone happy and provide peace of mind for all involved.

Mary Donohue is the Owner of Comfort Keepers, Pittsburgh, South & East Office. For more information, call (412) 653-6100 or visit the website www.comfortkeepers.com/southpittsburgh-pa.
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Hospital Readmissions Reduced by Virtual Care Program

By Dr. Tonya Miller, PT, DPT

Individuals with chronic diseases often face many trips to the hospital each year. These readmissions to the hospital are challenging for both the patients and our healthcare system, and many are preventable.

Celtic Healthcare decided to take on the daunting task of readmissions for their chronically ill patients by establishing a Virtual Care Transition Program. The program’s goal is to ensure no interruption in patient care, which can go a long way toward reducing unnecessary readmissions. In the program’s two plus years, Celtic Healthcare has been able to reduce readmissions for individuals with heart failure from 14 percent to just under 5 percent.

How It Works

Celtic Healthcare’s Virtual Care Transition Program has two components that work together. One revolves primarily around coaching, the other is telehealth care.

A Care Transition Coach, who works closely with Case Managers, identifies patients most appropriate for participation in the program. The coach gets the necessary medical records and paperwork aligned before the patient is discharged from the hospital to ensure there is no gap in care due to incomplete information.

Involving a Care Transition Coach, who is typically a Registered Nurse or Medical Social Worker, provides extensive care coordination, including assurance that prescriptions have been sent directly to the patient’s pharmacy. Adding this accelerated layer of support is critical, because many times home care or follow-up physician appointments do not occur for several days after discharge. Research has found that the highest rate of re-hospitalization occurs within seven to 10 days after discharge from the hospital.

The Care Transition Coach often recommends telehealth technology. If this step makes sense, our Home Health Nurse sets up the telehealth program and teaches the patient how to take his own vital signs (weight, blood pressure and oxygen level) at the same time each day. The patient then reports through an automated telephone system. A specially trained nurse reviews the data on a daily basis. If something is not right, the nurse contacts the patient and, if necessary, the doctor. The nurse also schedules weekly phone education sessions with the patient to ensure that the patient understands lifestyle changes needed to be successful in managing his own disease.

Why It Works

People with chronic diseases who require complex care frequently receive care in multiple settings. Healthcare professionals in these settings often work independently from one another, which can lead to lack of information about the care for the patient. When this occurs, patient care and safety is compromised. This can lead to rehospitalization.

Celtic Healthcare’s program is designed to ensure both coordination and continuity of care. It is all about improving patients’ confidence in their ability to care for themselves and learn when and why to alert their doctor or nurses if something doesn’t seem right. Ultimately, getting patients to understand their vital signs and symptoms and what they mean will help prevent unnecessary readmissions.

Patients Experience Empowerment at Home

Celtic Healthcare’s goal is to keep patients at home, where they want to be. The program gives patients the opportunity to succeed at home, where they are comfortable. We know there still are going to be times when a patient needs to return to the hospital, but the program is helping prevent a significant number of preventable readmissions. Reducing heart failure readmissions to less than 5 percent speaks for itself. We know our program is working.

Better patient understanding leads to better quality of life and, ultimately, less of an impact on the healthcare system. Patient welfare is our priority. At Celtic Healthcare, we have created a program that is contributing to reducing preventable hospital readmissions and creating a better quality of life for our patients.

Dr. Tonya Miller is the Eastern Regional Vice President for Celtic Healthcare. For more information, contact Celtic Healthcare by calling 1-800-355-8894.
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Wishes
Granted

By Rafael J. Sciullo, MA, LCSW, MS

Making a wish sometimes involves a long-held dream. Sometimes, an impulse. Of course, some dreams are more realistic than others.

At Family Hospice and Palliative Care, we strive to honor patients’ and families’ wishes every day. We take pride in providing the care, comfort level and dignity that our patients desire and deserve.

At times, we are blessed with the opportunity to do more. Two such opportunities arose recently and I am happy to report that our staff worked a little magic.

Roger and Debbie returned to the Pittsburgh area from Florida so Roger, a cancer patient, could be under Family Hospice care. Roger and Debbie didn’t have children and their Yellow Lab Bailey truly was part of the family - but when they returned to Pittsburgh they were not able to bring Bailey along.

Roger’s dying wish was to have Bailey back at his side. His team of caregivers from Family Hospice recognized this very real need to help Roger. With the help of a volunteer organization called “Pilots N Paws,” Family Hospice arranged for Bailey to be transported home aboard private planes.

Bailey made it to Roger’s side - and Roger died a few days later. The beautiful story gained attention both locally and nationally, on WTAE-TV and The Huffington Post.

Not long after that, another wish was coming together at our inpatient center in Lawrenceville.

Karen is a cancer patient who was admitted to our Center for Compassionate Care Canterbury for pain management. Her husband Tim mentioned to our staff that he found Karen’s wish list - and one of her wishes was to renew her wedding vows.

Once again the Family Hospice team got to work. There were flowers in the chapel at Canterbury. Tim wore a boutonniere and Karen carried a lovely bouquet. Family Hospice spiritual care specialist Mary Ann Trifaro officiated at the ceremony. Canterbury inpatient unit manager Megan King served as one of Karen’s attendants. And Family Hospice Quality of Life program coordinator Paula Church recorded video and took photos of the event so Karen and Tim could cherish the memory.

Our team is grateful for every one of these opportunities that come along. Playing a part in granting a wish is an honor. We thank Roger, Karen and their loved ones for allowing us to help make a difference.

Have you played a part in granting a wish? Have you witnessed a dream made true for someone special? Please visit our Facebook page and share your story: www.facebook.com/familyhospicepa - or access our Facebook page from the top of any page on our website (www.familyhospice.com).

Rafael J. Sciullo, MA, LCSW, MS, is President and CEO of Family Hospice and Palliative Care and Past Chairperson of the National Hospice and Palliative Care Organization. He may be reached at rsciullo@familyhospice.com or (412) 572-8800.

If it seems like your ears ring constantly, you’re not alone. You may have tinnitus, an inner ear ailment that affects between 25 million to 50 million Americans— with about 12 million people experiencing such severe symptoms it affects their daily lives.

The good news is treatment, including hearing aids, can offer relief to some suffering the persistent ringing, buzzing or humming associated with tinnitus. A recent study found that six out of 10 patients reported some tinnitus relief when using hearing aids and two out of 10 reported major relief (Kochkin and Tyler, 2008).

Tinnitus can be intermittent or constant. Causes range from ear infections and overexposure to extremely loud noises, to underlying health problems like allergies or heart and blood pressure problems.

Although tinnitus is actually common and can cause major life disruptions, the number of sufferers who seek treatment for the problem is relatively small. One reason may be that they mistakenly believe their condition is untreatable. Unfortunately, many doctors are also unaware of the latest treatment option. Patients may think they simply have to learn to live with the noise.

While hearing aids are not a cure for tinnitus, they may be able to help tinnitus patients by:

- Improving communication and reducing stress, which makes it easier to cope with the condition.
- Amplifying background sounds, which can make tinnitus seem less loud and prominent.

In addition, there are new hearing aids specifically designed for tinnitus that are inspired by the relaxing effect of certain types of music. These devices play random, chime-like tones that can be used for relaxation and for making tinnitus less noticeable.

If you think you have tinnitus have your hearing evaluated by a hearing health professional and to explore the use of hearing aids to alleviate tinnitus. The American Academy of Otolaryngology and the American Tinnitus Association recommends these additional tips for minimizing the effects of tinnitus on your health:

- Avoid exposure to loud sounds and noises.
- Get your blood pressure checked. If it is high, get your doctor’s help to control it.
- Decrease your intake of salt. Salt impairs blood circulation.
- Avoid stimulants such as coffee, tea, cola, and tobacco.
- Exercise daily to improve your circulation.
- Get adequate rest and avoid fatigue.
- Eliminate or reduce some stress in different parts of your life; stress often makes tinnitus worse.
- Experiment by eliminating other possible sources of tinnitus aggravation, e.g., artificial sweeteners, sugar, alcohol, prescription or over-the-counter medications.

(Do not stop taking medications without consulting with your health care professional about the possible ototoxic impact of your medications.)

Furthermore Washington Ear, Nose and Throat and the Better Hearing Institute recommends that in addition to the practical tips above (which apply to a healthy lifestyle for all people) that people with tinnitus may receive benefit by simply understanding the causes, myths and facts about tinnitus through either counseling or self-help books. "We believe that if hearing health professionals can provide effective treatment for tinnitus, they also can be instrumental in motivating people to concurrently treat their hearing loss," Kochkin says. "This would have a double impact in improving the quality of life for millions of Americans.”

To make an appointment with Dr. Nicole Wasel, Audiologist at Washington Ear, Nose and Throat, call (724) 225-8995. For more information, visit www.washingtonent.net.

Article adapted with permission from The Better Hearing Institute. To learn more, visit www.betterhearing.org.
Chronic obstructive pulmonary disease (COPD) is one of the most common lung diseases to affect people over age 60. A progressive disease, it is caused by damage to the lungs over many years, often from smoking or environmental conditions, which makes it difficult for people with COPD to breathe. As a result, many people who suffer from COPD end up in the hospital time and time again.

The Pines of Mt. Lebanon, which provides Senior Living and Memory Care programs, is taking a proactive approach to identifying residents with COPD and helping them learn more about the disease process and how it can be managed. The Pines’ new COPD Transition Program partners with multiple health care providers to develop a specific care plan for each program member that is vital to managing his or her disease. These partnerships are based on the unique concept that a person can benefit greatly from a home at The Pines that provides medical, educational, therapeutic and psychological treatment specific to each COPD resident.

The Pines also offers a Respite-To-Home Program for COPD Transition Program members. “A resident in our Respite-To-Home Program receives the medical and educational components that will help them to manage their symptoms, increase endurance and properly use any equipment that they may require at home,” explained Joy Paglia, director of Sales and Marketing. “Before they leave, we assess their homes to make sure that they are returning to a safe environment.” The Pines’ staff also coordinates home health providers to ensure that COPD patients have access to all of the care that they need after returning home.

In addition to helping program members learn more about the disease, The Pines also trains its staff on the special care needs of their COPD residents. Staff has received, and will continue to receive, training on how to care for the multiple physical, mental and emotional needs that may accompany a COPD resident.

Working with St. Clair Hospital and HCR ManorCare skilled nursing facilities, The Pines is also tracking COPD patients once they return home to see if they are readmitted to the hospital. After a person returns home, they are contacted by phone twice weekly for the first 30 days, and then on a quarterly basis after that. “Our goal with this program is to prevent readmits, which are very hard on the elderly,” said Paglia.

If needed, patients can also be provided with counseling for smoking cessation or anxiety, and a COPD support group, Better Breathers, has been set up at The Pines to provide ongoing education to residents and the community as a whole.

For more information on the COPD Transition Program at The Pines of Mt. Lebanon, call (412) 341-4400 or visit www.integracare.com.
Southwest Regional Opens Wig Salon

The American Cancer Society (ACS) recently opened a wig salon within Southwest Regional Medical Center. The salon is located at the SRMC Hematology and Oncology Center, which is located on the first floor of Southwest Regional Medical Center. Appointments are held privately to ensure comfort for each patient.

“When I had cancer I had to go to Washing County to get my wig,” shared Valerie Cole, Wig Salon Volunteer. “I am so happy that we can offer this locally to those who need it.” To make an appointment, call 724-627-2412.

Children with Heart Conditions Experience Summer Fun at Annual Heart Camp

More than 130 children from across the region traveled to Camp Kon-O-Kwe in Fombell, Pa. from June 12 to 16 to enjoy traditional camp activities while sharing with each other the challenges of living with heart conditions. The camp, sponsored by the Children’s Hospital of Pittsburgh of UPMC, gives kids a test-free, pain-free vacation and the chance to interact with nurses and doctors in a non-medical setting.

The camp, established in 1991 by Children’s Hospital, is the first in the nation dedicated solely to children with heart disease. It is named in honor of founding Children’s cardiologist William Neches, M.D., who retired in 2005 after 33 years at Children’s Hospital.

Heart Camp is supported through the generosity of organizations such as the American Heart Association, as well as many other private and corporate donors. The camp is a program of the Heart Institute at Children’s. For more information about the Heart Institute or Heart Camp, please visit www.chp.edu/heart.

Advanced Surgical Care Procedures Available at Jefferson Regional Medical Center’s Expanded Operating Room Facility

Jefferson Regional Medical Center in Pittsburgh’s South Hills, where more than 10,000 surgeries are done each year, announces the opening of newly expanded operating rooms with an exciting new direction in advanced surgical care.

“The new operating rooms are equipped with the latest high-definition video equipment and monitors. This equipment provides the best possible images during minimally invasive procedures across all of our surgical specialties,” said Robert McCoy, MBA, BSN, RN, director, Surgical Services.

More than ever before, minimally invasive surgery is becoming a viable alternative to traditional approaches affording patients increased safety, less pain, and quicker recovery time. Board-certified surgeons have brought their expertise in minimally invasive techniques to Jefferson Regional, expanding the scope of surgical possibilities. Tunc Aksehirli, M.D., recently joined Jefferson Hills Surgical Specialists, led by Charles Cline, M.D., FACS, to augment the group’s 20-plus years of experience in minimally invasive techniques.

Hope Bariatrics has brought its bariatric surgery program to Jefferson Regional. Lead surgeons Michael Felix, M.D., and Geoffrey Wilcox, M.D., with 10 years each of bariatric experience, have been joined by Dr. Aksehirli who completed his fellowship in bariatric and minimally invasive surgery at New York Medical College performing some 300 advanced bariatric laparoscopic procedures.

Since opening 10 years ago, The Heart Institute at Jefferson Regional, where more than 4,000 open heart surgical procedures and 33,000 cardiac catheterizations have been done, has earned national awards for its success with complex, cardiac surgical procedures. Jefferson Regional’s orthopedic surgeons perform 500 knee replacement surgeries each year, using the most modern navigational equipment and patient-specific instruments.

For more information, call (412) 469-5000 or visit www.jeffersonregional.com.

‘Navigating the Social Media Super Highway’ Conference on September 5th Geared for Healthcare Professionals

Navigating the Social Media Super Highway! What Every Healthcare Professional Needs to Know will be held on September 5, 3:00 PM – 6:30 PM, at Sewall Center on the Robert Morris University Campus, 6001 University Blvd, Moon Township. Participants will learn how to identify key strategies to protect individuals and organizations from the social media land mines; five ways healthcare professionals can use social media to promote their practice and their organization; and innovative ways social media is being used in healthcare. The presenter is Renee Thompson, MSN, RN, CMSRN, President and CEO of RTConnections, LLC. The special guest speaker is Debra M. Wolf, PhD, MSN, RN, Associate Professor, Chatham University and coauthor of a new book “Social media for Nurses: Educating Practitioners and Patients in a Networked World”.

The target audience include nurse faculty and educators, healthcare professionals, nurse managers, health service administrators, quality personnel, staff nurses, therapists and pharmacists.

The cost is $45. Registration is now open at www.rtconnections.com. For additional questions, or to register, please contact Renee Thompson at 412.445.2653 or renee@rtconnections.com.
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