

Denton

EARLY SPRING 2008

Women



- **Meet our new physicians!**
- **Is that backache a sign of osteoporosis?**
- **Ease the pain of arthritis**
Tips for more comfort
- **Overcoming depression**
How to start feeling better

We keep growing to serve you better



Stan Morton

As the Denton community continues to experience tremendous growth, Presbyterian Hospital of Denton grows along with it. More patients are staying in Denton because of increased and expanded healthcare services. We continue to see a steady decline in patients leaving the area to seek healthcare elsewhere.

It's important for us to expand our services to meet this growth and to ensure that highly skilled, trained physicians are available to treat you and your family. We continue to serve the needs of families and premature babies with Denton's only Level III Neonatal Intensive Care Unit (NICU) and are pleased to have the area's only accredited-eligible Center for Sleep Disorders.

Expanding our physical services is important, too, and we're pleased to have opened the Presbyterian Denton Diagnostic Center and Physician Offices on Highway 380 this past October. Our all-digital center provides radiology, computerized tomography, mammography and bone densitometry services. Two full-time physicians providing family practice and pediatrics are on-site and dedicated to serving the growing East 380 corridor.

The healthcare needs of the women in our community are at the forefront of our concerns, and in this issue of *Denton Women*, you'll find relevant information about osteoporosis, easing the pain of arthritis and ways to beat depression.

When it comes to your health, thank you for choosing Presbyterian Hospital of Denton as your hospital.

Regards,

Stan Morton

Chief Executive Officer

Presbyterian Hospital of Denton

Meet our new physicians

We're pleased to introduce these physicians who have joined Presbyterian Hospital of Denton. With our team of fine doctors, you're in the right place for care. For more information about Presbyterian Hospital of Denton physicians, please call our Physician Referral and Health Line at **1-888-80-HEALTH**.



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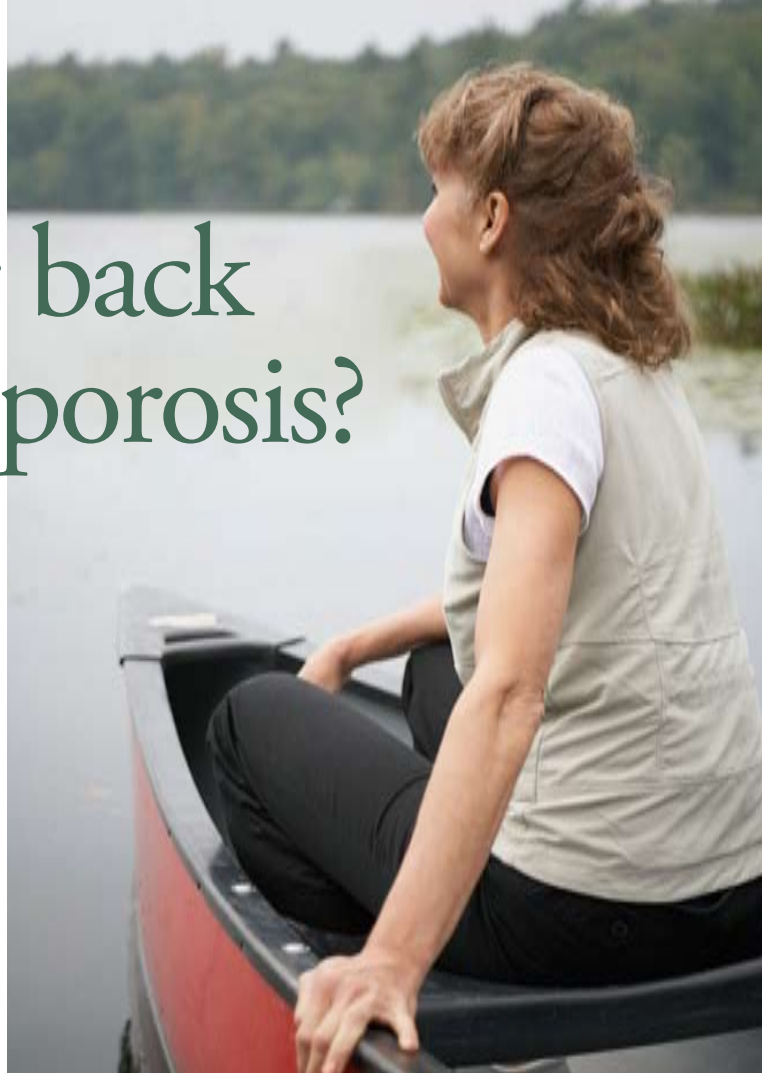
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On the cover: Women's Advisory Board members Jenny Newland, Connie Pelphrey, Phyllis Pittman, June McNeil, Patrice Frisby and Gayle Strange



Is your aching back a sign of osteoporosis?

It could be a fracture

Osteoporosis is often called the silent crippler because many women don't realize they have it until a bone breaks—a sign that the disease is already advanced. While most women know when they've broken their hip or wrist, a vertebral (involving the segments of the spine) fracture can go unrecognized.

“In a spinal column weakened by osteoporosis, a vertebral fracture can occur simply because normal body weight is too much for the spine to support,” says Presbyterian Hospital of Denton family practitioner Teresa King, M.D. “The resulting break is called a compression fracture, which can occur without a fall. It can happen during an activity as simple as picking up a newspaper.”

The intensity and duration of compression fracture pain is different for everyone. Some people may even write their discomfort off as just a backache. “Usually, the patient feels mild to severe pain at the fracture site,” explains Dr. King. “It could radiate to the limbs, and muscle spasms may occur.” In most fractures, the pain is severe for the first one to four weeks and then lessens over time. A chronic backache in the mid- to lower spine can last from six months to a year and is largely due to muscle spasm and ligament strain.

“Perhaps the most important symptom is a sudden and rapid loss of height,” says Dr. King. “A woman with osteoporosis can lose as much as two inches in just a few weeks. Eventually, she may lose eight inches or more from her adult height.”

Fracture treatments

Traditional treatment for a compression fracture includes bed rest and a back brace, jacket or corset to relieve pain. It usually takes six to eight weeks for the

fracture to set and up to 12 weeks for complete healing. If the bone is pinching a nerve, corrective surgery may be needed. One newer treatment showing promise is percutaneous vertebroplasty, where a medical-grade cement is injected into the fractured vertebral body. This stabilizes the fracture and allows the patient to move around much more quickly.

Because osteoporosis can't be completely reversed, prevention is extremely important. Start by eating a diet high in calcium and engage regularly in weight-bearing exercise, such as walking, weight training and stair climbing. And talk to your physician about the best preventive plan for you.

Be kind to your bones!

To schedule your bone density screening at The Center for Women at Presbyterian Hospital of Denton or at Presbyterian Denton Diagnostic Center on Highway 380, call (940) 898-7399.

Easing the pain of arthritis

Increase your comfort today!

If you have arthritis, you know how joint pain and stiffness can make it a challenge just to get through the day. If you find yourself avoiding activities you used to enjoy, such as walking, gardening or crafting, because your joints are too achy or you're afraid you'll have pain later in the day, you could end up with a case of the blues.

Take heart—arthritis pain can be controlled. Ask yourself these questions to see if you're doing everything you can to prevent or minimize arthritis discomfort.

- **Are you paying attention to your body?**

“Notice which movements produce lingering pain and stiffness and try to avoid them,” says Presbyterian Hospital of Denton rheumatologist Kara Prescott, M.D. “Stretch every day, gently and smoothly, but not to the point of pain. Wear comfortable shoes that fit properly. Treat any foot problems because they can change the way you walk and cause misalignment and stress through the ankles, knees, hips and spine,” says Dr. Prescott. “A poor stride can cause arthritis to develop or aggravate existing arthritis.”

- **Are you positioned to avoid pain?**

Maintain good posture throughout the day. Make sure your work surfaces, both on the job and at home, are the right height for you. When sitting at a desk, adjust your chair's height so your work surface is about two inches below your bent elbow. This helps prevent

back strain and decrease stress on your hips and knees as you sit and stand. Use armrests or wrist supports if you work at a keyboard. And remember—the cushiest executive chair isn't necessarily the best; find a chair that supports your back.

- **Are you using tools that can help you?**

Ask your doctor about arthritis-friendly devices and tools that can help reduce or prevent joint pain. Toilet-seat risers can help take stress off hips and knees. A book holder can let you enjoy lengthy reads without hand pain. Kitchen tools and other gadgets with padded grips can help you easily open jars and cabinet doors. Walking sticks or canes may help take stress off your joints and encourage mobility so you remain flexible.

- **Are you treating your body well?**

Don't curse your body for what it can't do. Nurture your body to get the best performance out of it you can. Take warm baths or showers to soothe stiffness, or apply cold packs to numb arthritis pain. Perform regular, moderate exercise as recommended by your physician. “Exercise can keep your weight in check, limiting





Need care? Stay in Denton!

The City of Denton, Presbyterian Hospital of Denton and other local medical facilities have formed a cooperative partnership to educate area residents about the medical expertise available right here. To see how we can serve all of your healthcare needs, visit the new site, DentonM.D. (Medical Destination) at www.dentonmd.org.

the joint stress caused by excess pounds,” explains Dr. Prescott. “Determine which kinds of exercise make your body feel good. Eat well and get proper rest to help keep your spirits up and give you the energy to exercise.”

- **Are you having a good time?**

A positive mind-set works wonders. Enjoy your hobbies and interests; they’ll distract you from your arthritis pain, bring pleasure into your life and promote a sense of accomplishment. Get together with friends, rent a good movie, play cards, listen to music

or play with your pet. Do what you love but in smaller amounts. Garden for only 20 minutes if you find that longer periods trigger pain. And don’t rule out vacation plans. Just be sure to pack your medication, insurance card, comfortable shoes and anything else that helps you fight pain.

- **Are you changing it up?**

“Activities that feel fine for a while may eventually cause discomfort,” says Dr. Prescott. “At work or at home, avoid repetitive movements that can stress your joints.” That includes sitting—get up and move around. If a sedentary office job makes you ache, build stretching breaks into your day. If you feel sore after working out, don’t assume you can’t exercise. Ask a physical therapist or a knowledgeable personal trainer to show you different ways to work your muscles. Learn how to adjust gym equipment to minimize joint strain. Rotate among different activities and consider water exercise and fitness classes developed for people with arthritis.

- **Are you communicating?**

Let your friends and family know how your arthritis affects you. Some arthritis causes fatigue as well as pain and stiffness. Don’t be timid about asking for help. Talk to your healthcare provider about your arthritis pain and any problems you may be having with your medication.



Seeing the light

Women and depression

In the United States, women become clinically depressed about twice as often as men. Why are we so susceptible to this serious, potentially life-threatening illness? Is it biology? Are we genetically programmed to be depressed? Could our hormones be at fault? How does our role in the community affect us?

Experts agree that outside influences contribute significantly to our increased vulnerability to depression. Starting as girls and continuing on through adolescence and adulthood, we're exposed to situations that affect our self-esteem. Although genetic chemical factors play a major role in depression, the way we feel about ourselves also affects our chance of developing the disease.

Shaping self-images

Women are more likely than men to base their self-worth on external signals—words of praise or criticism from our spouses, bosses and parents. We're more likely to keep anger, frustration and other negative emotions bottled up; we're expected to make peace, not waves. We're encouraged to nurture others, often at the expense of our own needs. And, we may feel self-conscious if our bodies don't measure up to media images of the ideal woman.

Women with poor self-images are prone to depression when events such as a job loss, the end of a relationship, a loved one's death or financial trouble strikes. While these are upsetting situations, it's not normal for them to cause the persistent sadness and feelings of worthlessness that

characterize clinical depression.

Not to be overlooked is the fact that clinical depression can often occur for no apparent reason. No matter the triggering event (if there is one), don't accept persistent depression as an inevitable part of life.

Take the first step

The same preconceptions that make us more vulnerable to depression also explain our resistance to seeking treatment. "Good" women don't get depressed. Wives with loving husbands and children "shouldn't" feel down. These sorts of internal messages may account for many cases of female depression that go undiagnosed and untreated.

Overcoming resistance to the highly effective treatments available can be a lifesaving step. Depression can almost always be conquered with antidepressant medications, psychotherapy or both. If you or someone you love is depressed, visit a healthcare provider who can diagnose the illness, rule out any underlying physical causes and map out a suitable treatment plan.

Get help today!

To learn more about treating depression, call the Presbyterian Hospital of Denton's Physician Referral and Health Line at **1-888-80-HEALTH**. The Health Line is here to help you and your family with all your health-related needs.



Don't let the flu bug bite

Separate myths from facts!

What you don't know about the flu can be enough to make you sick—literally! See whether you've got the know-how to fight influenza by taking this true-or-false quiz.

1 **Since the flu season runs from November to April, it's useless getting vaccinated after the season begins.**

FALSE. While it's best to get vaccinated in the fall, a flu shot in January can help keep you healthy, especially during the flu's peak in February.

2 **Getting the flu can make you seriously ill.**

TRUE. Influenza can lead to pneumonia and other life-threatening complications. About 36,000 Americans die each year from the flu.

3 **Once you get a flu shot, you've done all you can to prevent it.**

FALSE. Enhance your immune system's ability to fight influenza by eating a diet rich in fruits and vegetables, exercising moderately, managing stress and avoiding drugs, alcohol and tobacco.

4 **Taking a multivitamin is the best thing you can do to avoid getting the flu.**

FALSE. Getting vaccinated is your best flu-prevention strategy, reducing your chances of catching it by up to 80 percent.

5 **Influenza is most often spread by intimate contact, like kissing.**

FALSE. Flu is generally spread when people cough or sneeze virus-infected droplets into the air.

6 **Antibiotic medications aren't helpful in treating flu symptoms.**

TRUE. Influenza is a viral infection, so it can't be treated with antibiotics.



7 **The flu shot can actually give you the flu.**

FALSE. You won't get the flu, but you may have a runny nose, headache, sore throat or cough.

8 **If you got a flu shot last year, you don't need to get one this year.**

FALSE. You need a flu vaccination every year, since a shot's protection wears off. Plus, the vaccine is updated annually to include the most current strains.

9 **Not everyone should get a flu shot.**

TRUE. The flu shot is not safe for people who have a fever or egg allergies, who have had past severe reactions to flu shots or who have Guillain-Barré syndrome (a nerve and immune system disorder).

10 **You can only spread the flu when you have symptoms.**

FALSE. You can spread the flu to others before your symptoms show and for another three to four days after they appear.

Let's get physical!

Exercise takes too much time and effort for a payoff that's long in coming, right? Wrong! You may not build muscle overnight, but from the moment you commit to a regular fitness program you'll start enjoying these life-extending benefits:

Better weight control. By building muscle, you'll burn more calories (even at rest), helping keep your weight stable.



A healthy cardiovascular system. The physically fit are eight times less likely to die from heart attacks or strokes. Working out lowers your risk of hypertension by as much as half.

Stress-free living. Tension evaporates along with your sweat. That's good, because stress is linked to insomnia, heart disease, headaches, back pain and colitis.

Flexibility and freedom of movement. You'll be less stiff, have better balance and agility and be less likely to be injured in a fall.

Strong bones. If you walk, run or do other weight-bearing exercise, you'll be less likely to suffer from osteoporosis.

Control over diabetes. Exercise reduces the body's need for insulin and your chances of developing type 2 diabetes. If you already have the disease, regular exercise may help reduce your medication needs.

A good night's sleep. Exercise helps people fall asleep more quickly, sleep more soundly and awake feeling more refreshed and alert.

Sharp mental skills. Exercise improves short-term memory and reasoning skills in older people.

Happiness and optimism. Exercise activates the release of chemical messengers in the brain that produce a sense of well-being.

Round-the-clock energy. Regular exercisers don't tire or get winded as easily as inactive people, and they aren't as likely to feel wiped out at day's end. A bonus: Strength gained through exercise makes you look younger, stand straighter and avoid back pain.



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