

Denton Women

SUMMER 2008



- **Get your mammogram today!**
Screenings are more comfortable
- **Is that sharp pain a gallbladder attack?**
- **Don't ignore your aching legs**
- **Stay heart healthy**
New technologies help diagnose disease



**Presbyterian
Hospital of Denton**



Presbyterian Hospital of Denton

provides convenient, advanced diagnostics



Stan Morton

Presbyterian Hospital of Denton and the Presbyterian Denton Diagnostic Center and Physician Offices on Highway 380 continue to attract top physicians, nurses and technical and administrative personnel to help meet the healthcare needs of our growing North Texas population. As more people become

aware of our advanced capabilities available right here, many choose us for diagnostic tests and procedures. Our dedication to our community extends to all our services with an experienced, caring medical staff guiding you through every procedure while providing high-quality reports to your primary care physician.

Advanced technology

Presbyterian Hospital of Denton offers 64-slice computerized tomography (CT), digital diagnostic X-ray, ultrasound, nuclear medicine and magnetic resonance imaging (MRI) technologies. The Center for Women provides digital mammography, stereotactic breast biopsy, bone densitometry and ultrasound services. At our Presbyterian Denton Diagnostic Center along the East 380 corridor, CT, digital mammography, general radiography and bone densitometry are available.

In this issue of *Denton Women*, we'll explore health conditions you may want to know more about, with the information you need about related tests and procedures. We think you'll find our comprehensive diagnostic services are another good reason to choose Presbyterian Hospital of Denton as your hospital.

Regards,

Stan Morton
Chief Executive Officer
Presbyterian Hospital
of Denton

Presbyterian Hospital of Denton physicians contributing to this issue include:

Susan Hostetter, M.D., radiologist; Tung Cai, M.D., cardiothoracic surgeon; Scott A. Simms, M.D., family physician; Yasir Suliman, M.D., vascular surgeon; and Heather Sutton Walsh, M.D., Ph.D., obstetrician and gynecologist.



Is it time for your mammogram?

To schedule a screening mammogram at The Center for Women at Presbyterian Hospital of Denton or at Presbyterian Denton Diagnostic Center, call (940) 898-7399.



Today's breast screenings

More comfortable and less invasive

Even though screening mammograms save lives, many women delay or simply don't bother having them. If you've been avoiding this important exam, be aware that newer technologies have made getting a mammogram more comfortable and convenient than ever before. Here's a roundup of how mammograms have improved.

Digital mammography

If you have routine mammograms, you can take advantage of the latest diagnostic technology—digital

mammography—at The Center for Women at Presbyterian Hospital of Denton and at the Presbyterian Diagnostic Center on Highway 380.

“Women under age 50 and women of any age with dense breast tissue benefit more from digital than film screen mammography,” says Presbyterian Hospital of Denton radiologist Susan Hostetter, M.D.

“The procedure is the same as conventional screening, though you may experience shorter exam times and fewer callbacks for additional images. The major difference is that the radiologist can manipulate the image's contrast, brightness and magnification levels to better detect abnormalities,” says Dr. Hostetter. “Our radiologists also use computer-aided detection, the first of its kind in Denton, to help identify questionable breast tissue.”

More diagnostic options

Ultrasound, which uses sound waves to produce images, is used in certain cases along with mammograms, for example, to help determine whether a breast mass is solid or a fluid-filled cyst.

Sometimes mammogram or ultrasound results require further investigation with a biopsy. Presbyterian Hospital of Denton was the first facility in the area to offer stereotactic biopsy, the least-invasive method available today.

A more comfortable exam!

Do you avoid your annual mammogram because it's too painful? The MammoPad breast cushion, used at both Presbyterian facilities with digital mammographies, can help. It's a soft foam pad that sits between you and the hard equipment surface, giving you a softer, warmer and more comfortable mammogram—without losing image quality.

“By making sure that each patient's experience is as comfortable and convenient as possible, we hope to bring more women in for routine screening and take care of any cancer at the earliest possible stage,” says Susan Hostetter, M.D.



Unmasking a hidden heart threat

Technology helps physicians detect disease

Cardiovascular disease (CVD) is America's leading cause of death. More than 80 million people have some form of it, and about 870,000 die from it each year.

"Fortunately, we can rely on an increasing number of diagnostic tools to help us identify risk factors and catch heart disease early, before it becomes life-threatening," says Presbyterian Hospital of Denton cardiothoracic surgeon Tung Cai, M.D.

Your physician may suspect heart disease when a physical exam, personal history or family history indicates you could be at risk. You may need some basic screening, such as a chest X-ray or a blood test to check cholesterol and triglycerides.

Outside looking in

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help determine whether you're suffering from CVD. These procedures help your physician confirm a diagnosis so that your prescribed treatment is more likely to be effective.

Today's cutting-edge imaging techniques for diagnosing CVD include:

- **Computed tomography (CT)**, which creates two- and three-dimensional images of the cardiovascular system in ultra-thin "slices" of the body snapped at various angles. "In minutes, computers assemble the slices into high-resolution images that reveal clots, arterial blockages or aneurysms," says Dr. Cai. "Because the heart is a moving, beating organ, traditional CT scans of coronary arteries tend to be blurry. The fast 64-slice CT imaging technology at the Medical Imaging Department at Presbyterian Hospital of Denton lets physicians see images of the heart and blood vessels clearly."
- **Magnetic resonance angiography (MRA)**, a magnetic resonance imaging (MRI) tool that targets blood vessels. The patient is usually injected with contrast dye.



The MRI's magnet aligns water molecules in the body toward the dye. Radio waves help the molecules send back signals, allowing the computer to produce images of the blood vessels.

- **Nuclear ventriculography**, a study that involves injecting radioactive chemicals into the patient's bloodstream where the compound binds to red cells. Scanning equipment follows the isotopes through the heart and major arteries. These scans detect the heart's size and condition and the amount of blood entering and leaving its pumping chambers.
- **Catheterization and angiography**, tests that find blockages in the heart and coronary arteries. While the patient is under mild sedation, the physician guides a catheter (a long, thin plastic tube) through an artery in the right or left leg into a heart chamber. Catheterization assesses the pressure and flow rate of the blood and collects blood samples. The catheter can also inject dye into the chambers or arteries for a cardiac angiography. A fluoroscope produces images called angiograms or arteriograms that reveal the site, shape and extent of arterial blockages, as well as head and neck clots that could cause stroke.

Stay heart healthy!

Presbyterian Hospital of Denton features four digital radiography procedure rooms, two nuclear medicine rooms, two high-speed multislice CT scanners, an MRI suite and a cardiac catheterization suite. To schedule any diagnostic procedures mentioned in this article, you need a physician's order. If you don't have a primary care physician or if you need to know more about coronary artery disease, call the Presbyterian Hospital of Denton's Physician Referral and Health Line at 1-888-80-HEALTH.

The facts about gallstones

They can attack without warning!

Experts estimate that one in 12 Americans has gallstones, but most don't even know it. That's because gallstones—crystalline structures that vary in size from a grain of sand to a golf ball—generally cause no symptoms.

The problems don't begin until a gallstone travels from the pear-shaped gallbladder to a nearby duct. As the stone passes through or blocks the duct, it triggers a gallbladder attack.

Occasionally, gallstones—usually nothing more than a buildup of cholesterol—lead to serious complications, such as gallbladder, bile duct or pancreas inflammation.

Women between ages 20 and 60 are twice as likely as men to develop gallstones. Researchers think the reason involves estrogen and progesterone hormones, which seem to raise the amount of cholesterol crystals found in the bile that leads to stone formation.



Is it gallbladder pain or indigestion?

How do you tell the difference between a gallbladder attack and heartburn or indigestion? “If you feel a sharp, sudden pain in the upper right side of your abdomen that may even spread to your shoulder blade, chances are good that a gallstone is the culprit—and you should seek medical help,” says Presbyterian Hospital of Denton family physician Scott A. Simms, M.D.

To confirm the diagnosis, your physician will look for other signs of gallbladder disease, such as jaundice, fever and chills. Blood tests and an ultrasound examination of your gallbladder may provide more evidence.

Treatment options

Don't be surprised if your physician takes a wait-and-see approach, especially if your gallstones were detected by chance (such as during an ultrasound exam evaluating another condition) or if you've just had your first attack. Some people can live their entire lives with gallstones that cause no symptoms.

“If treatment is necessary, several options can help, including surgical removal of the gallbladder [a cholecystectomy],” says Dr. Simms. “Previously, that meant surgically opening the abdomen. Today, surgeons can usually remove a gallbladder laparoscopically with a minimally invasive procedure requiring only a few small incisions in the abdomen.”

Finally, some drug treatments are available, but they may take up to two years to work and aren't a permanent solution.

Is your gallbladder acting up?

If you think you may have gallstones and you don't have a primary care physician, call the Presbyterian Hospital of Denton's Physician Referral and Health Line at 1-888-80-HEALTH. Ultrasound testing for gallstones is available at Presbyterian Hospital of Denton and the Presbyterian Denton Diagnostic Center on Highway 380.



Don't ignore leg pain

It could be a cause for concern

A blood clot in a deep leg vein isn't likely to send you rushing off to a physician. That's because this type of clot—called a deep vein thrombosis, or DVT—is often symptomless. “It usually doesn't go away on its own, but it can interfere with blood flow,” says Presbyterian Hospital of Denton vascular surgeon Yasir Suliman, M.D. “Sometimes a clot fragment will break off and travel through the bloodstream. When that happens, it's called an embolus,” says Dr. Suliman. “If the traveling embolus lodges in the lungs, it can cause severe damage and become a life-threatening crisis.”

Who's at risk?

Any situation that immobilizes you can raise your DVT risk, such as bedrest or sitting still for long periods on an airplane. Other risks include fractures, recent surgery (particularly hip, knee or gynecologic surgery), childbirth within the last six months, hormone medications such as estrogen and birth control pills or family history of DVT. The likelihood of DVT increases with age and weight.

How can DVT be identified?

DVT often has no symptoms, but when they do appear, they usually occur in only one leg. Call your physician if you experience any pain, tenderness, swelling, increased warmth and skin color changes.

“A common test used to diagnose DVT is Doppler

ultrasound scanning, which uses sound waves to create a picture,” says Dr. Suliman.

How to keep the vessels open?

Physicians use several methods to help prevent DVT in surgical and high-risk patients. In-bed exercises, special devices and anticoagulant drugs can help prevent clots. During a DVT episode, physicians give patients medications designed to allow the body to dissolve the clot. Sometimes, physicians use minimally invasive clot-removal treatments, including:

- **Venous thrombectomy**, to remove deep vein clots
- **Thrombolytic therapy**, where a clot-dissolving drug is injected into the thrombus.
- **Mechanical thrombectomy**, another method to remove the DVT
- **Mechanical thrombectomy combined with thrombolytics**, using a catheter to administer a drug to help soften the clot

Get a leg up on DVT!

If you think you may have deep vein thrombosis, call the Presbyterian Hospital of Denton's Physician Referral and Health Line at 1-888-80-HEALTH. Tests and procedures used to diagnose DVT are available at Presbyterian Hospital of Denton.

How strong are your bones?

A bone density test can give you the answer



Osteoporosis, the condition that causes bones to shrink and become brittle and prone to fracture, affects millions of Americans. Yet osteoporosis is called a “silent disease” because symptoms may not appear until something such as a fracture points to its existence. “If osteoporosis is caught in its early stages, lifestyle changes (diet and exercise) plus medication may slow down or stop bone loss before damage occurs,” says Presbyterian Hospital of Denton obstetrician and gynecologist Heather Sutton Walsh, M.D., Ph.D.

Measuring bone density

The most accurate way to assess early osteoporosis is to have a bone mineral density (BMD) screening test. It’s fast, painless and noninvasive, and you stay fully dressed during the imaging.

According to the American College of Obstetricians and Gynecologists, the dual-energy X-ray absorptiometry (DEXA) machine is the “gold standard” for measuring BMD. The advantages of DEXA include high precision, minimal radiation exposure and rapid scanning time. “In addition to diagnosing osteoporosis, DEXA is effective in tracking the effects of treatment for osteoporosis and other conditions that cause bone loss,” says Dr. Walsh.

Who should be screened?

Some physicians suggest a baseline bone density test for premenopausal women in their 40s. But most experts recommend that if you’re postmenopausal, you should discuss a screening with your doctor, especially if you:

- are 65 years or older
- have had a bone fracture
- are Caucasian or Asian
- are thin or small-framed
- smoke
- have a history of alcoholism
- take lithium or heparin
- have other medical history associated with increased osteoporosis risk

Bone up on your knowledge!

Bone densitometry testing with DEXA is available at Presbyterian Hospital of Denton and the Presbyterian Denton Diagnostic Center on Highway 380. To schedule your screening appointment, call (940) 898-7399. To speak with a physician about osteoporosis, call the Presbyterian Hospital of Denton’s Physician Referral and Health Line at 1-888-80-HEALTH.



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