

SUMMER 2006

# Health Connection

FROM YOUR FRIENDS AT BERWICK HOSPITAL CENTER

Meet our  
new CEO

A solution for  
spinal fractures

New online  
nursing  
program

Easing the  
sneezing  
Surviving cold  
and flu season

# You've found a breast lump: Now what?

If the thought of finding a lump in your breast scares you, you're not alone. After all, many of us know someone who has had breast cancer. But some of us are so frightened that we avoid getting mammograms—the very habit that could save our lives if breast cancer develops. If you're in that group, you'll be glad to hear that four in five breast lumps turn out to be noncancerous. Here's a description of some common breast conditions:

**Fibroadenoma:** a smooth, solid, round painless lump that moves easily and can feel like a marble. Occurs most often in African-American women and women under age 30.

**Fibrocystic breast changes:** solid or fluid-filled lumps that

increase in size and tenderness five to seven days before each menstrual period.

**Cyst:** a smooth, fluid-filled lump often sensitive to the touch before the menstrual period. Typically appears in women between ages 35 and 50.

**Lipoma:** a soft and slow-growing painless lump that moves freely.

**Intraductal papilloma:** a small, wartlike growth near the nipple that may cause bleeding from the nipple. Occurs most often in women in their 40s.

**Mammary duct ectasia:** a thick, sticky, gray to green discharge from the nipple.

**Mastitis:** a warm, tender, lumpy area on the breast that appears red. Most often affects breast-feeding women.

**Traumatic fat necrosis:** painless, round, firm lumps that can result from a bruise or a blow to the breast. Occurs in older women and women with large breasts.

## WHAT HAPPENS IF YOU FIND A LUMP?

If you find a lump, see your healthcare provider. He or she will do a clinical breast exam and may recommend one or more of the following tests and procedures:

**Mammography,** or breast X-ray, may be recommended to determine the lump's size and location.

**Ultrasound** examination can determine whether the lump is a fluid-filled cyst or a solid mass.

**Fine-needle aspiration** is an in-office procedure. Fluid is drawn out of the lump with a thin needle. If the fluid is clear and the cyst disappears, you won't need a biopsy. If the fluid is bloody or the mass is solid, your doctor probably will recommend biopsy.

**Stereotactic biopsy** removes a small tissue sample with a thin needle for analysis. Computerized imaging guides the needle with pinpoint accuracy to the exact location to be sampled.

**Surgical biopsy** usually is performed on an outpatient basis. Normally, the surgeon removes the whole lump, but in certain cases he or she will remove only part of it. The tissue is sent to a lab where a pathologist will examine it for cancerous cells.



*The good news:*  
Four out of five  
breast lumps turn out  
to be noncancerous.



## IF PREVENTION DOESN'T WORK

Both a cold and the flu typically involve a runny nose, sneezing, sore throat, cough and fatigue, but only flu characteristically features headache, high fever and that all-over-achy feeling.

Some people are at higher risk for complications from the flu than others and should get prompt medical care instead of trying to self-treat. These include:

- people over age 65
- children and adults with a chronic health condition, such as asthma or diabetes, or a weakened immune system
- pregnant women
- infants and young children
- anyone who lives with children or others at high risk
- healthcare workers and caregivers who are in contact with children or others at high risk

Prescription antiviral medications such as oseltamivir (brand name: Tamiflu) can help shorten the duration of the flu and prevent you from getting sicker if taken within the first 48 hours of symptoms.

If symptoms suddenly worsen, linger more than a week and are accompanied by a dry, hacking cough, the flu might have developed into viral pneumonia. Thick, rust-colored mucus along with a cough may signal bacterial pneumonia. Both types of pneumonia require medical attention.

# Easing the sneezing

## Surviving cold and flu season

**A**utumn is almost upon us. Soon it will be time to rake the leaves, pull out the sweaters and pray the kids don't catch something at school that knocks the whole family out of commission for a week.

But with a few simple precautions, parents and children can keep colds and flu away—or at least from spreading. Here are some basic tips to avoid getting sick, whether you're 2 years old or 90:

- Wash your hands several times a day with soap and water—and even more frequently if you're around anyone with a cold.
- Keep your hands away from your eyes, nose and mouth.
- Cover your mouth and nose with a disposable tissue when you sneeze or cough. Then wash your hands.
- Protect and strengthen your immune system by getting enough rest, exercising regularly and eating a healthy diet that includes lots of fruits and vegetables.
- Don't share eating utensils or drinking glasses.
- Avoid crowds of people where germs may spread.
- Most important: Keep annual flu vaccinations up to date.

## Call your pediatrician or primary care provider if ...

Your sick child has any of these symptoms:

- labored breathing, often signaled by the abdomen rising and falling dramatically
- a fever of approximately 102° F that acetaminophen (brand name: Tylenol) can't control or that's present for more than three days
- inconsolable crying or irritability
- blood in vomit or stool
- recurring vomiting or loose stools
- greatly diminished food or fluid intake
- pulling or tugging at the ears, which may indicate an ear infection



# Online nursing program comes to Berwick



Ann Bokleman, R.N., (second from right) associate director of online education for Southside Regional Medical Center, visited Berwick Hospital Center to introduce the online nursing program to the community. With her are (left to right) Diane Krolukowski, chief nursing officer, Berwick Hospital Center; Stephen Grubbs, CEO, Berwick Hospital Center; and Jackie Ridall, human resources director at Berwick Hospital Center.

**H**ave you always wanted to be a nurse? Are you compassionate, caring and motivated to help others? At Berwick Hospital Center, we want to help you pursue a career in healthcare. That's why we offer an online registered nursing program that provides a flexible learning schedule and a convenient location.

Together with the Southside Regional Medical Center (SRMC) in Petersburg, Va., Berwick Hospital Center will serve as a clinical education site. This past May, a nursing workshop was held to introduce the program to the community. Ann Bokleman, R.N., associate director of online education for SRMC, visited to speak to more than 125 potential applicants.

If you're interested in this exciting online nursing program, you must complete prerequisite coursework prior to applying to the school. Prerequisite courses include anatomy, physiology, writing and research,

medical terminology, nutrition and philosophy or English literature. The SRMC School of Nursing is known for its high number of required clinical hours for students, which results in well-educated, ready-to-practice nurses at the end of the two-year program.

To learn more about this innovative nursing program, call Berwick Hospital Center's online nursing hotline at **(570) 759-5086** or visit the SRMC School of Nursing Web site at [www.srmcnursing.org](http://www.srmcnursing.org).

## Pain management equals relief

**T**wo of northeast Pennsylvania's leaders in pain management, Joseph D. Paz, D.O., and Mark H. Bell, M.D., of Advanced Pain Management Specialists in Plains, Pa., are now seeing patients at their new, convenient location in Berwick Hospital Center. The doctors specialize in providing complete nonsurgical

and minimally invasive procedures to manage pain syndromes such as acute and chronic back and neck pain, cancer pain and headache pain.

On your initial visit to Berwick Hospital Center, you'll undergo a comprehensive pain assessment, and a customized treatment plan will be developed to meet your specific needs.

Both Dr. Paz and Dr. Bell are certified by the American Board of Pain Medicine. Dr. Paz is co-director of Advanced Pain Management Specialists, and Dr. Bell is the group's founder.

To schedule an appointment or to learn more about Advanced Pain Management Specialists and their services at Berwick Hospital Center, call **(570) 752-7246**. Or visit the physicians' Web site at [www.paindocmd.com](http://www.paindocmd.com).

Joseph D. Paz, D.O., (center) and Mark H. Bell, M.D., (second from right) with some of the Advanced Pain Management Specialists staff, including (left to right) Stacey Stefanoski; Terrence F. Duffy, M.D.; and Linda Paulson.



# Balloon kyphoplasty: A solution for spinal fractures

Imagine experiencing back pain so severe that daily activities such as walking, climbing stairs or holding your grandchild are no longer possible. Now, Gerard Foti, D.O., orthopedic surgeon/spine specialist at Berwick Hospital Center, offers a procedure called balloon kyphoplasty, a minimally invasive treatment option for spinal fractures due to osteoporosis, cancer or benign lesions. This procedure, used worldwide since 1998, can significantly improve patients' quality of life.

With more than 44 million Americans at risk for osteoporosis, a disease that causes bone to become fragile, spinal fractures are a major health concern. Left untreated, the fractures can result in kyphosis—a serious condition marked by forward curvature of the upper back, often described as a hunchback. When severe, this deformity can compress the abdominal cavity and elevate the risk for complications and death.

Each year, 700,000 patients in the United States suffer from osteoporosis-related spinal fractures, according to the National Osteoporosis Foundation.

Unfortunately, more than 400,000 of these fractures go undiagnosed and untreated due to lack of awareness about the disease and available treatment options. It's estimated that half of American women and one-fourth of American men over age 50 will experience an osteoporotic fracture in their lifetime. Traditional treatment for spinal fractures includes bed rest, medication and back bracing. While these therapies may help to decrease a patient's pain over time, they don't treat the fracture-related deformity.

## REPAIR AND RELIEF

Balloon kyphoplasty stabilizes the fracture and corrects the deformity. The minimally invasive procedure involves making two small incisions on either side of the spine.



**Balloon placement:** The balloon is inserted into the fractured bone with a hollow instrument.



**Full inflation:** The balloon is inflated in an attempt to raise the collapsed vertebra and return it to its normal position.



**Internal cast:** The balloon is filled with cement, which forms an internal cast that holds the vertebra in place.

A balloon is inserted into the area of the fracture and expanded to return the vertebrae to its normal height. Then, the balloon is removed and kyphoplasty cement is injected to fill the area.

The procedure is performed at Berwick Hospital Center and generally takes less than one hour per fracture. Patients typically require a hospital stay the night of surgery and can be discharged home the next day. In most cases, general anesthesia is used; however, local anesthesia may be an option. Balloon kyphoplasty is usually covered by Medicare and other health insurance carriers.

For more information about balloon kyphoplasty, visit [www.vspine.com](http://www.vspine.com). For a consultation, call Dr. Foti at (570) 802-0360.

## HEALTHWISE QUIZ

### How much do you know about Alzheimer's disease?

Take this quiz to find out.

**1** Which example of memory loss may be a sign of Alzheimer's disease?

- a. forgetting where your keys are
- b. forgetting what month and year it is
- c. forgetting the name of a person you just met
- d. forgetting to return a phone call

**2** British researchers have recently learned that drinking this beverage can inhibit enzymes associated with the development of Alzheimer's:

- a. orange juice
- b. coffee
- c. tea
- d. white wine

**3** All the following may be early warning signs of Alzheimer's *except*:

- a. speaking in jumbled sentences
- b. getting lost in familiar areas
- c. having rapid mood swings for no apparent reason
- d. losing sense of balance or experiencing vertigo

**4** Which health condition is suspected of increasing the risk of Alzheimer's?

- a. yo-yo dieting
- b. high blood pressure
- c. asthma
- d. low bone density

**5** Which is the most misdiagnosed mental disorder in older adults?

- a. Alzheimer's disease
- b. depression
- c. anxiety attacks
- d. insomnia

ANSWERS: 1. B, 2. C, 3. D, 4. B, 5. A

## NUMBER CRUNCHING

# Managing high cholesterol



**T**he bad news: High cholesterol plays a key role in whether you develop heart disease or suffer a heart attack or stroke. Excess cholesterol, a waxy, fatlike substance in your blood, builds up on artery walls, reducing blood flow. The good news: You can do something about it.

Many factors contribute to high cholesterol. While you can't change your genes, age or gender—which all affect cholesterol—you can take the following steps to improve your cholesterol levels and your health.

To lower your LDL, or bad, cholesterol and raise your HDL, or good, cholesterol:

- **Eat smart.** Saturated fat and trans fats raise LDL cholesterol levels. Instead, use polyunsaturated or mono-unsaturated fats like olive, safflower, sesame, soybean, canola and peanut oils. Eat no more than six ounces of lean meat, fish or skinless poultry a day. Choose plenty of fruits, vegetables and whole-grain foods. Switch to fat-free or low-fat dairy products and increase soluble fiber found in foods like oats, beans and citrus fruits.
- **Get regular exercise**—at least 30 to 60 minutes of physical activity a day.
- **If you smoke, quit.** Smoking lowers HDL cholesterol and increases the blood's tendency to clot.
- **Consider medication.** If lifestyle changes aren't enough, your healthcare provider may prescribe cholesterol-lowering drugs.

## Leveling off your numbers

**A**im for these desired cholesterol levels. If you already have heart disease or other risk factors, your doctor may set different goals for you.

Total cholesterol      less than 200 mg/dL

HDL cholesterol      greater than 50 mg/dL

LDL cholesterol      less than 100 mg/dL

Triglycerides      less than 150 mg/dL

# Bad breaks

## First aid for broken bones

If your child were to take a spill from a bike or your best friend turned an ankle while stepping off the curb and you suspected a bone is broken, would you know what to do? Try taking these actions:

- **Determine whether you need emergency help.** All fractures will need medical attention, but call for emergency help if the injury involves the head, neck, back, pelvis or upper leg; there's heavy bleeding; bone has pierced the skin; or a toe or finger on the injured arm or leg is numb or blue at the tip. Also, call for help if you can't transport the injured person by car because he or she can't sit upright or use safety or seat belts.
- **Remove clothing from the injured part.** Use scissors to cut clothing away; don't try to pull the limb out of clothes.
- **Stop any bleeding.** Use a sterile bandage or clean cloth



and apply constant pressure to the wound. Have the person lie down and don't wash the wound or poke the bone back into the skin.

- **Make a splint.** Keep the limb in the position you find it. Place soft padding around the injury with something firm (like a board or rolled-up newspaper) next to it, using first-aid tape. Make sure the splint extends past the joints above and below the injury.
- **Apply cold packs.** Wrap ice in a towel and place it on the injured area to control swelling and pain until help arrives.

### In case of emergency ... We're here for you

**T**here's no telling when an accident or a sudden illness will occur. But when it does happen, turn to us, the clear choice for emergency assistance. Our emergency department provides patients with fast, dedicated and compassionate care. What's more, our ER is backed and supported by an entire hospital dedicated to helping you get well.

**In an emergency, every second counts. Call us for emergency help anytime you suspect someone needs urgent care.**



## The whole-grain truth

### Think outside the breadbox to include more healthy foods in your diet

**G**rains like wheat, rice, oats and corn are a staple in the American diet and for much of the world. Whole grains

and foods made from whole grains are an important source of fiber, vitamins, minerals and other nutrients. When refined grains like white flour and white rice are processed, much of the fiber and nutrients are lost.

Eating more whole grains can help you lower cholesterol and control your weight, reducing risk of heart disease, stroke, diabetes, gastrointestinal problems and cancer. Aim to eat at least three servings of whole grains each day. The earthy, nutty flavors and chewy textures are a great way to add a new dimension to your menu. Whole-grain breads, cereals, tortillas and crackers are just the beginning. Explore a variety of whole grains like barley, groats, wheat berries, buckwheat, triticale, bulgur, millet and quinoa.

#### HOP ABOARD THE GRAIN TRAIN

Upping your intake of whole grains is easier than you think. Try making some of these simple diet switches:

- Start your day with a bowl of bran flakes, shredded wheat or oatmeal.
- Buy whole-grain breads, bagels, rolls, tortillas, muffins, waffles and pancakes.
- Substitute rolled oats or crushed bran flakes for bread crumbs in recipes.
- Switch to whole-wheat pasta.
- Bypass the potatoes and try bulgur, barley, quinoa or brown or wild rice.
- Snack on un buttered popcorn or whole-wheat crackers or pretzels.
- Substitute barley or brown or wild rice for pasta or noodles in soups, stews, casseroles and salads.
- Use whole-wheat pastry flour in place of much of the all-purpose flour in recipes.

# Berwick Hospital Center welcomes new CEO



Stephen J. Grubbs, CEO

**B**erwick Hospital Center is pleased to announce the appointment of Stephen J. Grubbs as chief executive officer (CEO). Grubbs has served as interim CEO since November 2005.

A graduate of the University of Kentucky, Grubbs has worked in hospital administration for more than 17 years.

Prior to coming to Berwick, he served as interim CEO at Sunbury Community Hospital in Sunbury and spent five years at Cleveland Community Hospital in Cleveland, Tenn., where he served as both chief financial officer and assistant CEO.

“During the past year, I have seen firsthand Berwick Hospital Center’s devotion to quality care and patient satisfaction,” says Grubbs. “I’m honored to accept this position during such an important time in the hospital’s history, and I look forward to working closely with the board, medical staff and the community to continue strengthening this important community asset.”

This year is already shaping up to be a defining time for Berwick Hospital Center, which is celebrating its 100-year anniversary as a community hospital. An estimated \$4.5 million emergency department

expansion and renovation will begin later this year. Plans are also underway to enhance services in the areas of cardiology, oncology, orthopedics, pain management and women’s health.

“Steve was overwhelmingly the choice of the board and medical staff for this position,” says John DeFinnis, M.D., chairman of the board for Berwick Hospital Center. “He brings a great deal of energy and innovative leadership to our hospital and has already established a strong rapport within the community.”

Grubbs, his wife, Cissy, and daughters Heidi and Rebekah have relocated to the Berwick area from Cleveland, Tenn.

Berwick Hospital Center is licensed for 101 acute-care beds and includes a 240-bed, long-term care facility (Berwick Retirement Village), as well as home health and hospice services.



(570) 759-5000 | [www.berwick-hospital.com](http://www.berwick-hospital.com)

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