



HealthConnection

BROUGHT TO YOU BY **BIG BEND REGIONAL MEDICAL CENTER**



**New
ICU opens**
See page 8

**BBRMC receives
2012 Press Ganey
award for quality!**

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close to home**

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Healthbriefs

> Butter and margarine go head to head



You see them next to each other in the grocery store, but which one do you choose? And, more importantly, which type of fat is better for your heart? The decision is in: Most margarine choices are a healthier option than butter, according to the Mayo Clinic.

Because margarine is made from vegetable oils, it doesn't contain dietary cholesterol and it's higher in polyunsaturated and monounsaturated, or "good," fats, which, when substituted for saturated fats, help reduce low-density lipoprotein (LDL), or "bad" cholesterol. On the other hand, butter contains high levels of saturated fat and cholesterol because it's made from animal fat.

Buyers beware, though: Choose your margarine carefully. Solid margarine—which comes in stick form—isn't a good choice because it contains trans fat. Instead, choose soft or liquid margarine and check labels for the spread with the lowest calories, the least amount of saturated fat and no trans fat.



Are you at risk?

Have you been checked for high cholesterol? Make an appointment with your doctor to discuss your risk factors and ways you can lower your risk.

> Long commutes take toll on the heart

Do you have a long ride to and from work? Well, here's another drawback to the aggravation you may feel being trapped in your car: According to a study in the *American Journal of Preventive Medicine*, which looked at almost 4,300 Texas city workers, the longer you're behind the wheel during your commute, the worse your heart health. Waistlines expanded, exercise routines disappeared, and with these bad habits came higher blood pressure and excess pounds.

Even for those who did exercise, these heart disease risk factors didn't disappear, which means there's probably something to the commute itself that's harming hearts. Researchers hypothesize it could be that long-distance drivers are burning fewer calories overall and stress could be taking a toll. Researchers suggest finding other ways to add activity to your day, so don't hesitate to bring a pair of walking shoes to work and hit the sidewalks during your lunch break.



> Could it be a pinched nerve?

Pinched nerves, which occur when too much pressure is applied to a nerve by surrounding tissues, such as bones, cartilage or muscles, can be painful and irritating. Understanding if you're at an increased risk of one day experiencing a pinched nerve is the best way to help prevent it. Here are five risk factors:

- 1 Posture.** Proper posture decreases the pressure to your spine and nerves.
- 2 Bone spurs.** Conditions like osteoarthritis can cause you to develop bone spurs. They can stiffen the spine and narrow the space where your nerves travel.
- 3 Overuse.** Activities that involve extensive use of your hands, wrists and shoulders can increase your risk of a pinched nerve.
- 4 Obesity.** Having excess weight adds more pressure from muscles and body tissue onto your nerves.
- 5 Pregnancy.** Weight gain from pregnancy can swell your nerve passages and pinch your nerves.



Sleep and your brain

For optimal health, get your shut-eye

➤ Sleep is a time for you to rest and, hopefully, get refreshed and ready to face the new day. For your brain, sleep is a time for work.

During those blissful hours of shut-eye, your brain is playing an integral part in the maintenance of your nervous system, laying pathways to help you learn and create new memories. Some experts also think that sleep affords our brains the opportunity to rest hardworking neurons before they have a chance to malfunction. In addition, connections between neurons that aren't frequently used may finally get a chance to exercise during sleep as a way of preventing their deterioration.

If you cut your sleep sessions short (or get less than the recommended seven to eight hours), you're interrupting these vital processes and, as you probably know, making it more difficult to remember things or concentrate. You may find it more difficult to work, drive or function in general. Hallucinations and mood swings may also develop in more severe cases of sleep deprivation.

Some very preliminary research also seems to suggest that poor sleep habits may age your brain and contribute to cognitive health problems such as dementia, but more research is needed. On other, more definitive health fronts, lack of sleep has been linked to heart disease, obesity and diabetes.

Here's to good sleep

Struggling to get that elusive sleep can be frustrating, but a good night's sleep isn't just a dream. To keep your brain in tip-top shape:

➤ **Schedule bedtime.** Going to sleep at the same time every night can help program your body into a healthy cycle.

➤ **Exercise regularly.** A good workout—if not timed too close to bedtime, or about five to six hours before you go to bed—can help you achieve a deeper sleep.

➤ **Skip the cigarettes, nicotine and alcohol,** all of which can negatively affect your quality of sleep.

➤ **Relax.** Read a book or soak in a nice, warm bath before going to sleep.

➤ **Avoid staying in bed if you can't sleep.** Find another low-key activity to do until you feel sleepy.

➤ **Keep your room cool, but not too cool.** Extreme temperatures that make you uncomfortable will keep you from getting sleep.

➤ **Wake with the sun.** It helps reset your body's internal clock. ●

While you sleep, **your brain** is playing an integral part in the **maintenance** of your **nervous system**, laying pathways to help you learn and **create new memories.**





Meeting the community's needs

We're here to serve you

Every year, Big Bend Regional Medical Center (BBRMC) treats thousands of community members. And while patients benefit from our being close by, ultimately it's the whole community that prospers from our presence. Whether it's through the people we employ, the local businesses we use or the charities we support, we're committed to making our community a better place to live and work.



Sign up today!

To attend the Childbirth Education class or the Living Well with Diabetes class, call **(432) 837-0430** to register.

Drs. Banister, Alsop and Harrington are members of the medical staff at Big Bend Regional Medical Center.

► **Awards:** The Joint Commission awarded BBRMC the Top Performer on Key Quality Measures for pneumonia care and surgical care. BBRMC was 1 of 405 hospitals in the nation to receive this designation. Also, BBRMC received the National Rural Health Association award for quality for the top 20 critical access hospitals in the nation and the Press Ganey award for quality.

► **Advances in technology:** A picture archiving and communications system (PACS) was installed in our diagnostic imaging department, allowing doctors to access images from their offices. This brings us one step closer to the realization of an electronic medical record (EMR) system.

► **New services:** A two-bed intensive care unit (ICU) debuted in August. One advantage to opening this new unit is the reduction in transfers that will be needed for situations like diabetic monitoring or conditions that require stabilization through ventilation or telemetry. Pediatric echocardiography is another new service introduced in August.

► **New medical staff:** Melinda Banister, M.D., a general surgeon, joined George Alsop, M.D., in the Big Bend Surgical Associates office. She also serves as the medical director of the new ICU.

► **New offerings:** Catherine Harrington, M.D., is now teaching a childbirth class to women in their third trimester of pregnancy. This class teaches everything from pain control during labor to breastfeeding and infant care. The class is offered monthly and partners are encouraged to attend. Best of all, the class is free. To register, call **(432) 837-0430**.

In 2013, Big Bend Regional Health Center will be offering free classes for people who have diabetes. Living Well with Diabetes will be offered in six one-hour segments, twice a month from 5:30 to 6:30 p.m. This program is designed to educate patients about living their lives as healthfully as possible without being limited by their disease. Topics include diet, exercise, foot care, medications and much more. To register, call **(432) 837-0430**. ●

- **Employees:** 104
- **Payroll:** \$6,731,144
- **Taxes paid (property and sales):** \$290,068
- **Indigent care:** \$559,500
- **Bad debt write-offs:** \$4,198,142
- **Capital equipment expenditures:** \$948,222
- **Community impact per employee:** \$38,834

The road to **recovery**

Let our rehabilitation department be your guide

➤ Big Bend Regional Medical Center (BBRMC) offers a full-service rehabilitation department. Now residents of the Big Bend region have access to physical therapy, occupational therapy and speech therapy. In the past, someone recovering from a brain injury, such as a stroke, or from orthopedic surgery would have to travel to Midland/Odessa or El Paso to access occupational therapy or speech therapy, but not any longer.

Occupational therapy

Occupational therapists (OTs) assist individuals in regaining and improving their function and independence within the parameters of their lives. They provide rehabilitation through the therapeutic use of everyday activities or occupations. Not only will OTs work to improve a patient's physical performance level, but they're also trained to use a holistic perspective of focusing on adapting the environment to fit the person.

Kate Cortez, OT, received her OT training and initial professional certification in New Zealand with a Merit Award recognition in 1994. She then received her American board certification in 1996 and, in 2003, became a certified lymphatic therapist. Cortez has worked in various settings, including the New Mexico Rehabilitation Center, adjunct faculty at Eastern New Mexico University and as a program supervisor at several rehab locations, and she has vast experience with skilled nursing and elderly care.

Speech therapy

Speech and language pathologists (SLPs) specialize in communication and swallowing disorders. These disorders can arise from conditions such as stroke, head injury, genetic disorders, hearing loss or basic language delay. Because each patient's clinical needs are different, you may seek an individualized clinical assessment from an SLP.

SLPs can evaluate many areas such as cognitive problems resulting in communication issues. These may be reflected in attention, memory or problem-solving task difficulties, or perhaps actual articulation or speech fluency problems.

Difficulty in swallowing food or liquid can be disabling and can result in dehydration, malnutrition, pulmonary aspiration or aspiration pneumonia.

Elizabeth Mesker, CCC-SLP, completed her master's degree in 2007 from the Texas Tech Speech, Language and Hearing program and was recognized in 2008 by the American Speech-Language-Hearing Association as a licensed speech and language pathologist. She works with patients of all ages who have difficulty with speech, voice or language disorders; cognitive communication deficits; or swallowing dysfunction. ●



Get back to your life

To make an appointment for rehabilitative services, call **(432) 837-0220**.

HealthWise QUIZ

How much do you know about medication management?

> TAKE THIS QUIZ TO FIND OUT.

1 According to the FDA (U.S. Food and Drug Administration), splitting pills:

- a. is safe for all medications
- b. can affect the way a medication is absorbed
- c. should never be done unless the pills are approved for splitting and you have your doctor's OK
- d. both b and c

2 Which tip is not recommended for storing medication?

- a. Store it in a cool, dry place.
- b. Keep it in the original container.
- c. Keep the cotton plug in the bottle.
- d. none of the above

3 When talking with your doctor, you should let him or her know you take:

- a. vitamins
- b. over-the-counter medicines
- c. herbal supplements
- d. all of the above

4 Which of the following drugs can interact with St. John's wort?

- a. blood thinners
- b. antidepressants
- c. pain medications (narcotics)
- d. all of the above

5 When ordering medication online, you should only purchase from a website that:

- a. has an FDA seal of approval
- b. is accredited by the Verified Internet Pharmacy Practice Sites (VIPPS) program
- c. is based in Canada
- d. has testimonials

Answers: 1. (d) 2. (c) 3. (d) 4. (d) 5. (b)



Coping with stroke

> You didn't see it coming, but few people who have a stroke do. And as you may know by now, surviving a stroke is only half the battle. How do you cope with a life that's forever changed?

First off, know that there are many people facing the same situation as you. Almost 800,000 people have strokes every year. Some may recover with only minor residual effects, while others are left with permanent disabilities. Learning to cope with your individual situation is critical to recovery. Here are some strategies that may help:

> **Recognize the emotions.** You'll likely go through a range of emotions, from sadness about things you may no longer be able to do, to anger about why this happened to you, to frustration with the difficulty of communicating with loved ones. All of these are normal feelings. If you're experiencing extended periods of sadness, have lost interest in

life or have thoughts of suicide, seek help immediately because these are symptoms of depression. If you're a caregiver of someone with stroke, learn to recognize the signs.

> **Work with the new you.**

Recuperating will take time and a lot of hard work, and you may not totally get back to where you were before. Set small goals for yourself and celebrate as you reach them. And don't be afraid to rest. Remain active. You may not be moving the way you used to, but don't feel embarrassed by having to use a cane or wheelchair. You need to get out, even if only for a short time. If your loved one has had a stroke, encourage him or her to meet up with friends or engage in enjoyable activities, if he or she is up to it.

> **Ask for help.** Don't be afraid to reach out to friends and family to assist with errands or just stop by for a visit. ●

Just desserts

Satisfying a sweet tooth—without the guilt

➤ You make it through dinner, keeping your promise to limit the calories and fat. But then comes the course that almost always gets you to cave: dessert.

Though it can be a calorie and fat trap, you don't have to skimp on the meal's finale. Instead, you need to find a way to satisfy that sweet tooth without guilt. And that's where nature's sweetest low-fat, low-calorie offering—fruit!—comes in:

- **Apple of your eye:** Slice up some apples and sprinkle with a little bit of cinnamon, then bake.
- **Layer:** Alternate layers of nonfat yogurt with fresh fruit in a parfait glass.
- **Get your calcium, too:** Keep low-fat

or nonfat fruit yogurt on hand for an afternoon pick-me-up.

➤ **The grill isn't only for meat:** Slice up peaches, bananas and pineapples and give them a little heat, which will bring out their natural sweetness.

➤ **Try an even quicker sweet fix:**

Pop open some canned fruit (canned in its own juice or water—no heavy syrup!) and enjoy.

➤ **Think heavenly:** Not all cakes are created equal.

Angel food cake is a healthy option that's made even better with the addition of some fresh fruit or fruit puree on top.

➤ **Make your own icy treat:** Freeze grapes and bananas for an ice cream alternative. Choose wisely: If your dessert options are limited to a restaurant menu, look for a fruit salad or sorbet, sherbet or meringues and skip the chocolate lava cake.

➤ **Get creative:** OK, so you really want to make that brownie recipe. You can still cut down on the sugar intake by substituting equal amounts of unsweetened applesauce, or cutting the amount of sugar in half. ●



'V' is for vitamin

Do your kids need vitamin supplements?

➤ Growing up, health sources touted that getting all your vitamins and minerals was your ticket to a life spent big and strong. Today, parents have a multitude of vitamin choices to help their children get all those necessary

nutrients. But does your child really need them?

It's a question with no easy answer, experts say. Research has only seemed to make things more confusing for parents. A recent study led by the National Institutes of Health found that children who could have benefited the most from vitamins often weren't getting them, and those children who didn't need them were taking them. The study also found that some children—whether their parents supplemented their diet with vitamins or not—were deficient in the nutrients vitamin D and calcium while many took in too much iron and vitamin A, leading researchers

to hypothesize that those pills may not be a good match for today's childhood diets.

What should you do?

The general recommendation from the American Academy of Pediatrics is that supplements are rarely needed in children ages 5 to 10 because most children can get all the vitamins and minerals they need through diet alone. But for children who may have more erratic or poor eating habits, or follow a certain diet (for example, vegetarian without dairy), a supplement may be necessary.

Start by talking with your pediatrician about your child's habits to see if a supplement might be beneficial. Your pediatrician might have other suggestions about how your child can meet nutritional goals (for example, finding alternative food sources that your child enjoys). ●





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ICU care is now close to home

A message from our CEO

DEAR FRIENDS,

In August of this past year, a major accomplishment occurred at Big Bend Regional Medical Center (BBRMC) when we opened our new two-bed intensive care unit. It was the culmination of two years of planning, rigorous training and infrastructure reorganization. The grand opening was well attended, and within the week both beds were in use. The patients who occupy these beds represent a reduction in transfers—one of the many goals that inspired us to open this new service line.

In September, BBRMC was awarded another national quality award—this time from the National

Rural Health Association (NRHA). The NRHA named us one of the Top 20 Critical Access Hospitals for quality. This follows on the heels of The Joint Commission Key Quality Performer award for pneumonia and surgical care. The doctors and staff of our hospital continually strive to provide the best care possible, and it shows.

Regards,

Michael J. Ellis,
FACHE

Chief Executive Officer
Big Bend Regional Medical Center



MICHAEL J. ELLIS, FACHE
Chief Executive Officer



Michael J. Ellis, FACHE, chief executive officer, cuts the ribbon that officially opened the new ICU at BBRMC.

Learn more!
For more information about the services offered at BBRMC, visit www.BigBendHealthcare.com and choose "Services."