



Celebrating
our success

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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.**



A message FROM OUR CEO

DEAR NEIGHBORS,

DAN BUCKNER
Chief Executive
Officer

I've been thinking about our successes in 2012. Heritage Medical Center (HMC) was honored with a monumental award for the second year in a row, all thanks to the commitment and hard work of the members of our team. They don't take great care of patients to win awards—they win awards because they take great care of their patients.

HMC was named one of the nation's Top Performers on Key Quality Measures by The Joint Commission, the leading accreditor of health care organizations in America. We were 1 of only 244 U.S. hospitals that achieved the distinction two years in a row. To earn this distinction, HMC met 95 percent performance thresholds in three areas: heart failure, pneumonia and surgical care. We understand that what matters most to patients at HMC is safe, effective care. That's why HMC has made a commitment to accreditation and to positive patient outcomes through evidence-based care processes.

Also in 2012, we spent a great deal of time recruiting doctors for the community. We recruited three in the fields of family practice, cardiology and sleep medicine. That gives us 37 active doctors to take care of our patients and expand the services the hospital offers. We have more doctor recruitment planned this year, a year in which we'll be celebrating the five-year anniversary of the opening of the new hospital.

Best wishes,

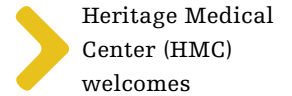
Dan Buckner

*Chief Executive Officer
Heritage Medical Center*

HMC welcomes Sherwan Ahmad, D.O., to medical staff



SHERWAN AHMAD, D.O.
Family Practice



Heritage Medical Center (HMC) welcomes

Sherwan Ahmad, D.O., as a member of our hospital's medical staff and community. As a board-certified family practice doctor, Dr. Ahmad brings his

skill and experience to HMC and Rutherford County residents. "I'm extremely excited to call Murfreesboro home. I'm looking forward to providing quality family care to the patients of Rutherford County," Dr. Ahmad says.

Dr. Ahmad received his medical degree from Lake Erie College of Osteopathic Medicine in Erie, Pa., and performed his residency at Saint Vincent Hospital, also in Erie. Dr. Ahmad is originally from Kurdistan in Northern Iraq and moved to Erie in 1997. He enjoys playing the drums, swimming and running, and he recently got married. ●



Meet Dr. Ahmad

Dr. Ahmad's new practice is located in Barfield at 268 Veterans Parkway, Suite F, Murfreesboro, Tenn. He is accepting new patients and can be reached at
(615) 890-4565.

Do you have high blood pressure?

BY SHERWAN AHMAD, D.O., BOARD CERTIFIED IN FAMILY MEDICINE

Nearly 1 in 3 Americans has high blood pressure, also known as HBP or hypertension. Though once developed it usually lasts a lifetime, it can be controlled and treated.

Blood pressure measurements gauge the force of blood against artery walls. A certain level of pressure must be maintained to stay healthy; however, HBP occurs when the pressure of blood becomes too strong. When someone has HBP, the heart must pump harder and the arteries carry blood under more pressure. If one has the condition for a long time, the heart and arteries may not work as well as they should and other organs may be affected.

The silent killer

High blood pressure is often called the “silent killer” because many people don’t realize they have it until they have trouble with their arteries, heart, kidneys or other organs. This makes blood pressure screening vital. Blood pressure levels can be checked by your primary care doctor or at a clinic, community center, health fair or fitness center.

A health care professional can determine blood pressure level with a simple test that will provide two numbers. The first number, the systolic measurement, calculates the pressure of the blood against the artery walls when the heart has finished pumping, while the diastolic measurement gauges blood pressure when the heart is relaxed and filling with blood.

Blood pressure for normal adults should be less than 120/80 mm Hg. A blood pressure level of 140/90 mm Hg or above is considered high blood pressure and should be treated.

High blood pressure categories

High blood pressure can be categorized as primary or secondary. Primary hypertension has no specific cause; however, aging, heavy alcohol use, high salt intake, low potassium and calcium intake, obesity, sedentary lifestyle, stress and resistance to insulin can increase your risk. Secondary high blood pressure can be caused by certain medications, pregnancy and narrowing of the kidney arteries. Some people only experience an elevated blood pressure reading while in a medical setting. This is called white coat hypertension and is generally not dangerous.

Treatment options

Depending on the severity of hypertension, lifestyle changes such as exercising, limiting alcohol, maintaining a healthy weight, managing stress and reducing sodium intake may help lower blood pressure. However, those with higher blood pressure levels may need medication. Depending on the diagnosis, your doctor will develop a treatment plan to help manage your blood pressure levels.

If you haven’t been tested recently, visit a health care professional soon—it’s important to know your blood pressure. ●



Know your numbers

If you have concerns about high blood pressure or need to discuss your high blood pressure with a doctor, Dr. Ahmad can be contacted at **(615) 890-4565**. Dr. Ahmad is accepting new patients.

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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Breathe easy

It's never too late to break the smoking habit

BY **FREDERIC D. SEIFER, M.D., FCCP**
BOARD CERTIFIED IN PULMONARY MEDICINE

➤ Quitting smoking has immediate benefits. According to the Centers for Disease Control and Prevention, as soon as you quit smoking a series of changes in your body occur almost instantaneously—and the benefits continue the longer you remain a nonsmoker.

Smoking is the leading cause of preventable disease and death, claiming the lives of more than 443,000 adults in America each year—along with an estimated 50,000 deaths from secondhand smoke exposure. And it's no surprise, considering that cigarette smoke contains more than 7,000 chemicals—at least 250 of which are known to be harmful and more than 69 that are proven to cause cancer.

Benefits of quitting smoking

➤ 20 minutes after quitting

Heart rate drops.

➤ 12 hours after quitting

Carbon monoxide level in your blood drops to normal.

➤ Two weeks to three months after quitting

Heart attack risk begins to drop.
Lung function begins to improve.

➤ One to nine months after quitting

Coughing and shortness of breath decrease.

➤ One year after quitting

Your added risk of coronary heart disease is half that of a smoker's.

➤ Five to 15 years after quitting

Your stroke risk is reduced to that of a nonsmoker.

➤ 10 years after quitting

Your lung cancer death rate is about half that of a smoker's.

Your risk of cancers of the mouth, throat, esophagus, bladder, kidney and pancreas decreases.

➤ 15 years after quitting

Your risk of coronary heart disease is back to that of a nonsmoker's.

Studies have shown that quitting at about age 30 reduces the chance of dying from smoking-related diseases by more than 90 percent. Quitting by age 50 reduces the risk of dying prematurely by 50 percent. Even people who quit at age 60 or older live longer than those who continue to smoke. ●



Kick the habit

Frederic D. Seifer, M.D., FCCP, specializes in treating patients who are acutely ill or chronically ill with breathing problems. New patients are always welcome, and convenient same-day and next-day appointments are available based on the severity of symptoms. For your appointment, call **(931) 684-0488**.

Sources: Centers for Disease Control and Prevention and National Cancer Institute
Dr. Seifer is a member of the medical staff at HMC.