



HealthConnection

FROM YOUR FRIENDS AT **SUNBURY COMMUNITY HOSPITAL**



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new doctors**
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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.**





FROM OUR CEO

DEAR FRIENDS,

JEFF HUNT
Chief Executive Officer

For the past several years, major improvements have been made to both the infrastructure and physical presence of Sunbury Community Hospital & Outpatient Center. As we move forward to continue these improvements to the hospital, our commitment to the community becomes more visible.

This past year, our new electronic medical records (EMR) system went live throughout the facility. By implementing EMR, we're improving the quality of care given to our patients by increasing safety, increasing efficiency of care and including patients and their families in their care.

Our commitment to customer service and satisfaction is clear in our increased patient satisfaction scores. As we move forward in that commitment, we'll focus on continued hourly rounding and involve the patient in his or her care through bedside reporting and the use of communication tools.

Our tradition of caring will continue to focus on the health care needs of the communities we serve. We strive to improve and grow, seeking to provide the services needed for our residents and deliver quality care right here. Our goal is to make each hospital experience more positive than the last.

Best regards,

Jeff Hunt

*Chief Executive Officer
Sunbury Community Hospital & Outpatient Center*

WELCOME NEW DOCTORS



Murty S. Ganti, M.D.
Emergency Medicine

350 North 11th St., Sunbury, PA 17801
(570) 286-3333

Dr. Ganti is a graduate of Andhra Medical College, India, and completed his residency at Millard Filmore Hospital, Buffalo, N.Y. Dr. Ganti specializes in emergency medicine and is board certified by the American Board of Emergency Medicine and the American Board of Internal Medicine. Dr. Ganti is an independent member of the medical staff at Sunbury Community Hospital & Outpatient Center.



Richard Cornish, M.D.
Emergency Medicine

350 North 11th St., Sunbury, PA 17801
(570) 286-3333

Dr. Cornish is board certified in emergency medicine and surgery. He is a graduate of Boston University School of Medicine and completed his residency at Walter Reed Medical Center, Washington, D.C. Dr. Cornish is an independent member of the medical staff at Sunbury Community Hospital & Outpatient Center.



Samer S. Basha, M.D.
Emergency Medicine

350 North 11th St., Sunbury, PA 17801
(570) 286-3333

Dr. Basha is a graduate of the University of Damascus and completed his residency at Williamsport Hospital. Dr. Basha specializes in emergency medicine and is board certified by the American Board of Emergency Medicine and the American Board of Internal Medicine. Dr. Basha is an independent member of the medical staff at Sunbury Community Hospital & Outpatient Center.



Find a doctor

SCH is committed to recruiting experienced doctors. If you need help locating a doctor, or to find a doctor by specialty, visit **SunburyHospital.com** and choose "Find a Physician."

Alternative hip replacement option

Anterior approach hip replacement

➤ 50 million people (1 out of every 3 adults) in the United States suffer from some form of arthritis. With a growing number of people leading more active lifestyles than earlier generations, the need for rehabilitative surgeries like hip and knee replacements is growing.

The anterior approach hip replacement procedure was first introduced to the Susquehanna Valley here at Sunbury Community Hospital & Outpatient Center. It's a minimally invasive procedure that involves a smaller incision and less muscle damage than traditional surgery, so a faster recovery is possible.

With the anterior approach, patients often experience an accelerated recovery time compared to traditional hip replacement surgery. Usually, there are no post-operative restrictions necessary during the recovery period. Patients are allowed to walk immediately, bend their hip freely and are often without a walker or cane within the first two weeks after surgery.

Conventional lateral or posterior hip replacements typically require strict

precautions with regard to weight bearing and limiting hip motion. This can complicate normal activities like sitting in a chair or getting dressed. Studies have shown a lifetime dislocation rate of about 4 percent, but it can be as high as 11 percent, with the traditional approach.

The anterior approach surgical technique uses a specially designed operating table. This table allows the patient to be comfortably positioned on his or her back during the procedure (instead of on the side) and allows the surgeon to use a small incision to access the hip joint. In addition, an X-ray machine is used during the procedure to verify accurate placement of the hip replacement components so leg lengths can be reproduced accurately. ●



Get hip savvy

To learn more about the anterior hip replacement surgical procedure, contact us at **(570) 863-3072** or visit us at **SunburyHospital.com**.



Surgical services at SCH

The skilled surgical staff at Sunbury Community Hospital & Outpatient Center specializes in same-day laparoscopic surgery and outpatient procedures. In addition, inpatient and emergency services are provided to meet the many needs of the community. The experienced and dedicated staff will do everything they can to get you feeling better and back to your life as soon as possible.

The team of surgical nurses works diligently to provide quality care to our patients and to ensure your comfort. Our surgeons and anesthesiologists work together to provide quality care in general surgery and procedures, including endoscopy, ENT (ear, nose and throat), gynecology, interventional pain management, ophthalmology, orthopedics and urology.

To learn more about our services or to find a doctor, call us at **(570) 286-3333** or visit us at **SunburyHospital.com**.

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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SCH commits to 30-Minutes-or-Less ER Service Pledge

When a health emergency occurs and you find yourself in the local emergency room (ER), one of your top questions is likely to be, "How soon will I see a doctor?" Health care emergencies can be frightening. Being seen by a doctor or clinical professional soon after your arrival in the ER goes a long way to ensure peace of mind.

Respecting the importance of prompt service, Sunbury Community Hospital & Outpatient Center (SCH) offers a 30-Minutes-or-Less ER Service Pledge. The doctors and staff work diligently to have each ER patient initially seen by a clinical professional—a doctor, a physician assistant or a nurse practitioner—within 30 minutes of his or her arrival.

"We launched this pledge because we understand when you're not feeling well, you don't want to spend hours in an ER lobby waiting to see a doctor," SCH Chief Executive Officer Jeff Hunt says. "The initiative is about providing prompt and compassionate care, and most important, it's part of our ongoing hospitalwide quality improvement processes.

"Since we launched the 30-Minutes-or-Less ER Service Pledge in June 2012,

it's been very well received by patients," Hunt adds. From June through October, ER wait times averaged 25 to 28 minutes.

To establish average wait times, patients are tracked from the time they register to the time they are initially seen by a clinical professional.

Although the goal is to initially see every patient within 30 minutes, the most critical health emergencies always will receive top priority. During triage, the staff determines the level of severity of a patient's illness or injury.

"While we're committed to prompt and appropriate care for ER patients, the 30-Minutes-or-Less ER Service Pledge should not be misinterpreted as an effort to rush patients through the ER," Hunt adds. "We've changed our workflow and processes to better accommodate our patients. The entire team of employees and the ER doctors are committed to this pledge, long term." ●



Get to know your hospital

To learn about services offered at Sunbury Community Hospital & Outpatient Center, visit **SunburyHospital.com** and choose "Services."