



HEALTH SCIENCES®

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Health Link



NUMBERS TO KNOW

Help others help you—add ICE (in case of emergency) entries to your cell phone so others can quickly call your contacts if there is an emergency.

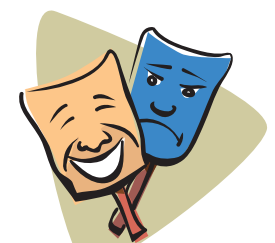
American College of Emergency Physicians



A HEALTHY SMILE

You should replace your toothbrush every three to four months, or sooner if the bristles become frayed. It's also smart to replace your toothbrush after an illness, such as a cold or the flu.

American Dental Hygienists' Association



THINK POSITIVE, LIVE LONGER

People with a positive attitude tend to live longer than people with a more negative outlook on life.

Mayo Clinic Proceedings

CANCER CARE

NEW CLINIC AT GRANDE RONDE HOSPITAL

Never underestimate the power of positive thinking, says Robert Quackenbush, MD, the oncologist at the new oncology clinic that opened recently at Grande Ronde Hospital (GRH). ♦ His sentiments are followed by a “Hallelujah!” from a patient who just learned that

her white blood cell counts are up. Good news is always welcome in the clinic, which sees a steady flow of patients twice a month.

The oncology clinic offers chemotherapy and biotherapy to Union, Baker and Wallowa county patients who previously traveled 200 miles or more round-trip to receive cancer treatment.

Now the doctor logs the miles. On the first and third Tuesday of each month, Dr. Quackenbush travels to Grande Ronde Hospital from the cancer center at St. Mary Medical Center in Walla Walla, Wash.

A TEAM TO SERVE YOU “There was a real need for this service,” says Dr. Quackenbush, who expects eventually to work with 20 patients each day he is at GRH’s clinic. “The new clinic saves time for pa-

tients, not to mention gas money.”

His patients agree. “When someone is having chemotherapy, rest is so important,” says Mary Park, a Cove resident with high-risk myelodysplastic syndrome—a serious blood disorder.

Before the clinic opened, Park would have traveled to Walla Walla seven days in a row, once a month, for chemotherapy treatment.

“It was devastating to think of driving there that often,” she says. “I know that the people who are fighting this [cancer] invasion of their life are so glad of this service. I’m very thankful to Dr. Quackenbush for coming here.”

**No more traveling;
the care you need is here!
To make an appointment,
talk to your primary
care provider.**

Park is also enthusiastic about GRH’s oncology staff. “The nurses here are so fabulous,” she says. “They are so cheerful and willing to help.”

Dr. Quackenbush, too, is quick with his praise of the oncology clinic team. The most important thing is the outstanding staff, he says. “They want to be around cancer patients. They are very dedicated.” ♦



Aimee Patterson, RN, checks Mary Park’s blood oxygen saturation levels. Park visits the new Grande Ronde Hospital oncology clinic twice a month.

Expanded services for you

OUR NEW ONCOLOGY CLINIC is further proof that we are working together for you! The idea for the clinic originated with the Grande Ronde Hospital staff and the board of trustees.

“As a community facility, Grande Ronde Hospital’s mission is to provide quality health care to all people needing medical care in our area,” says Bob Messinger, board chair. “We know how difficult it is for patients to travel to receive their treatment. When the hospital’s staff presented an idea for how the service could be provided in our hospital, the board was very supportive.

“We thought how wonderful it would be if we could provide professional treatment in a caring atmosphere nearer to patients’ homes,” he says.

The board unanimously agreed to make the investment in equipment, supplies and staff training that the new oncology clinic would require and voted to make the oncology program a recognized service at Grande Ronde Hospital.



Staff for the new Grande Ronde Hospital oncology clinic include (from left) Debbie Wright, RN; April Brock, RN, surgical services nurse manager; Jan Koegler, RN; and Leslie Blackman. “The patients are inspiring,” says Brock.

InSide

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Making good on all those New Year's resolutions

You make them, then break them.

If this pretty much describes your track record with New Year's resolutions, keep reading. You're about to learn from psychologist John Norcross, PhD, of the University of Scranton, what specific steps you can take to turn your resolutions into reality.

Dr. Norcross has studied the habits and success rates of hundreds of New Year's resolvers, and thus his advice is based on hard data and published studies.

His insights are especially important if—as his research suggests—you're like most American adults and resolve to lose weight, exercise regularly or quit smoking. "These are potentially lifesaving lifestyle changes," he emphasizes.

Here's what Dr. Norcross suggests:

- Be realistic. Resolving to lose 10 pounds and keep them off is a more attainable goal than resolving to shed 50. "If you tackle too much, you're likely to give up in two weeks," Dr. Norcross cautions.
- Line up support before you begin. Tell your friends and family what your goal is and ask for their encouragement.
- Don't rely on willpower alone. Even the most determined dieter will raid a cookie jar if it's there. So avoid people, places and things that could cause a setback.
- Substitute. Find healthy alternatives for habits you want to break. "You can't just say, 'I won't eat as much,'" says Dr. Norcross.

"You have to say, 'Instead of eating when I'm upset, I'll exercise.'"

- Finally, keep lapses in perspective. Successful resolvers view their behavior as merely a momentary slipup and recommit to their goal. Learn from them. ✨

FROSTBITE AND HYPOTHERMIA

Two hazards of winter

Pink cheeks may look healthy, and cold air can even feel refreshing. But that tingle can turn into a bite for cheeks, fingers, toes and other vulnerable areas. In fact, winter weather can turn downright dangerous if you're not prepared.

Frozen skin Frostbite happens when the skin, and sometimes the underlying tissues, freeze.

According to the American College of Physicians (ACP), frostbite causes the skin to turn white in patches, then tingle and eventually lose feeling. In more severe frostbite, the skin can become hard, blistered and very painful.

Any temperature below freezing can lead to frostbite, and the colder it gets, the faster frostbite happens—especially



if it's windy. It takes only 30 minutes for exposed skin to freeze if the temperature is zero and the wind is blowing at 15 mph, reports the National Oceanic & Atmospheric Administration.

If you have frostbite, follow these steps from the American Medical Association (AMA):

- Until you get out of the cold, cover your frozen skin with clothing or tuck your hands into your armpits.
- Once inside a warm room, gently heat your skin in warm, not hot, water. Use warm, moist compresses on frostbitten areas, such as ears, nose or cheeks.
- Do not rub frostbitten areas or warm them with direct heat, such as from a campfire, heater or hair dryer.
- Do not walk on frostbitten feet.

If frostbitten skin does not completely recover when it is warmed, go to a hospital as soon as possible. The skin may need special treatment to complete warming and to avoid infection.

Cold to the core People who don't dress warmly enough or who are exposed to very cold conditions for a prolonged time are at risk for a life-threatening condition called hypothermia. This occurs when the body temperature drops below 95 degrees, according to the ACP.

People with hypothermia may shiver uncontrollably, be confused or slur their speech. They need immediate emergency care, so call 911 or send someone for help. Then follow these steps from the AMA:

- Shelter the person from the weather, or move him or her to a warm place.
- Once in a warm room, remove any wet clothing from that person.
- Cover the person with warm, dry clothing and blankets. If necessary, use your own body to provide more warmth.
- Give the person something warm to drink, but not an alcoholic or caffeinated beverage. ✨

WINDOW CORDS

Keep them out of kids' reach

If your baby or toddler could make a daily to-do list, it might read, "Try, test, try, test, try!"

Babies and toddlers are born to experiment. Your task as a parent is to try to keep them safe as they explore everything from the light switch to the television remote.

But one hazard that can be easily overlooked may be as close as the nearest window. Window pull cords, used on blinds and other window coverings, can easily tangle around a child's body or neck and may cause accidental strangling, according to the U.S. Consumer Product Safety Commission.

Infants in cribs near windows can get tangled in the looped cords while sleeping or playing. Toddlers and children may become tangled as they try to look out a window or play on a bed or climb on furniture near a window.

To keep your little explorer safe, follow these tips from the American Academy of Pediatrics:

- Inspect the cords and chains on all window coverings.
- Move cribs, beds, furniture and toys away from window cords.
- Keep tasseled pull cords short, and anchor continuous-loop cords to the floor or wall.
- Lock cords into position when lowering horizontal coverings or shades.
- Consider installing cordless window coverings in children's bedrooms and play areas.

Window coverings purchased before 2001 may need to be updated or repaired to comply with current safety standards. Free repair kits are available at www.windowcoverings.org or by calling



800-506-4636. ✨



FOOD LABELS

WHAT TO LOOK FOR IF YOU HAVE DIABETES

IF FREE HELP was available to assist you in managing your diabetes, would you turn it down?

That's exactly what you're doing if you shop for food without reading food labels. You're missing out on the opportunity to become better informed about the ingredients and calories in the food you buy—information that can help you make the best possible choices.

"Making wise food choices, no matter what type of diabetes you have, is key to keeping your blood sugar in a healthy range and preventing serious complications of the disease," emphasizes Roberta Anding, RD, a certified diabetes educator and a spokeswoman for the American Diabetes Association.

Of course, to choose well, you have to know how to interpret the information on labels.

Because it's all too easy to misread food labels—and make wrong assumptions about the food you eat—these tips from Anding and the American Dietetic Association are worth remembering:

- Check out ingredients. Ingredients are listed in order by weight. The first ingredient makes up the largest percentage of the food, the last the smallest.

Since you have diabetes, you have a heightened risk of heart disease. You want your diet to help lower that risk. Therefore, look for heart-healthy ingredients such as soy; monounsaturated fats, such as olive, corn or peanut oil; and whole grains, such as whole-wheat flour.



No-sugar foods can still have calories

Sorry, but this may burst your bubble.

Some oh-so-enticing words on food labels may not mean what you think.

Those words are *sugar-free*.

***Sugar-free* does not necessarily mean *calorie-free*.**

Take, for instance, yogurt or hot cocoa mix that has been sweetened with a low-calorie sugar substitute. These foods still have ingredients, such as fruit or milk, that supply significant calories.

This same caveat applies to any food that's marketed as having no sugar added. Yes, it's true that no actual sugar has been added during processing. Even so, this food may be high in calories.

The bottom line: If you need to control your weight because of diabetes, always read the label carefully to find out how many calories are in a food or drink.

Sources: American Diabetes Association; International Food Information Council Foundation

Similarly, you can use food labels to avoid ingredients that can harm your heart, such as hydrogenated oils, which are high in trans fat.

- Size up servings. The serving sizes on food labels may be different from those in your food plan or from what you normally

For more blood sugar tips, call Susan Lewis, certified diabetes educator and registered dietitian, at 541-963-1435.

eat. If you eat twice the serving size on the label, be sure to double the calories, fat, carbohydrates and sodium.

- Don't be fooled. If you're counting carbohydrates, remember that *sugar-free* doesn't equal *carbohydrate-free*. In fact, a food sporting a *sugar-free* label may actually have more carbs than the standard version. Likewise, fat-free foods may have more carbs than their traditional counterparts. So comparison shop.

- Concentrate on total carbohydrates. Focus on the grams of total carbohydrates rather than just on grams of sugar. (Total carbohydrates include sugar, complex carbohydrates and fiber.)

If you look only at sugar content, you might bypass foods, such as fruits, that are naturally high in sugar but still good for you. Or you might eat too much of a low-sugar, high-carb food. ✨

WHEN GOOD MEDICINES TURN BAD

Why you need to understand the potential risks of drug interactions

YOU MAY NOT have imagined that taking an antacid could be cause for concern. Or that eating chocolate could be hazardous to your health.

Ordinarily, neither is a risky activity. But both could pose problems if you take certain antibiotics or heart medicines.

These two drug interactions are among dozens of possible combinations in which medicines meant to help you can have the opposite effect.

Interactions may make your drug less effective, cause unexpected side effects or increase the action of a particular drug. Preventing these problems should be your goal.

In general, drug interactions fall into three categories:

- Drug-drug interactions can be caused by combining prescription and/or over-the-counter (OTC) medicines or by taking drugs with vitamin supplements or herbs.

For example, taking the two blood-thinning medicines aspirin and warfarin can cause excessive bleeding. And taking a vitamin K supplement may reduce the effectiveness of warfarin.

- Drug-food interactions happen when foods or beverages react with medicines you are taking.

For instance, mixing alcohol with pain relievers, such as ibuprofen or acetaminophen, can increase the risk of stomach bleeding.

Grapefruit juice may interfere with blood pressure medicines.

Either cheese or soy sauce can cause a potentially fatal increase in blood pressure if you take a mood disorder drug (monoamine oxidase inhibitor) such as Marplan, Nardil or Parnate. These drugs can also cause adverse reactions when taken with the herb ginkgo.

- Drug-disease interactions may occur when an existing medical condition makes certain drugs potentially harmful.

One example: Nasal decongestants, found in common cold and allergy remedies, may cause an increase

in blood pressure that is dangerous for people with hypertension.

If you take several medicines, it's more likely that you'll be exposed to drug interactions. To avoid problems with medicines, the American Pharmacists Association recommends the following dos and don'ts:

- Don't combine prescription and OTC medicines unless your doctor says it's OK.

- Don't take any medicines that were prescribed for another person.

- Do give your doctor and pharmacist a list of all prescription and OTC medicines, vitamins and herbal products you use every day—or even occasionally. Update the list when new ones are added or stopped.

- Do ask your doctor or pharmacist to help you choose OTC medicines that are right for you.

- Do consider using one pharmacy for all of your medicine purchases.

Also, read the labels and inserts of all OTC and prescription medicines. Look for the label section called "Drug Interaction Precaution." If you don't see it, don't assume that no interactions will occur. Read all of the information carefully to be sure.

Finally, be sure to report any side effects from drugs to your doctor or pharmacist. ✨



WE OFFER THE MANY SPECIALTIES YOU NEED

DID YOU KNOW that Grande Ronde Hospital provides support for the following surgical specialties? ● General surgery. ● Gastrointestinal endoscopy. ● Orthopedics. ● Ophthalmology. ● Obstetrics and gynecology. ● Ear, nose and throat (ENT). ● Urology. ● Podiatry. ● Dentistry.

Within these specialties a variety of procedures are available, and most do not require an overnight stay. In fact, many procedures can now be performed in your doctor's office or on an outpatient basis at the hospital.

TOTAL JOINT REPLACEMENT If your knees, hips or shoulders cause you pain, now is the time to look into joint replacement surgery. The procedure for knee replacements has changed dramatically over the past few years.

GRH has kept up with the advancements. We've offered computer-assisted knee replacements since 2005. This technique is precise and minimally invasive. As with all of our surgeries, we provide personalized care before, during and after the operation.

CATARACT SURGERY A cataract is a clouding of the lens in your eye. The lens, located just behind the iris—or the colored part of your eye—works like the lens of a camera.

If you have a cataract, as light passes through the lens, it is diffused or scattered. The result is blurred or unfocused vision.

Great advances have been made in cataract surgery. For patients, it's a simple operation. Through a tiny incision, the surgeon removes the clouded lens and then implants an artificial lens.

NEW! EAR IMPLANTS If you have severe hearing loss and hearing aids no longer work for you, a cochlear implant may help. A cochlear implant is the only medical device designed to restore a human sense.

GRH supports the ENT surgical specialist in providing

patients with the Baha system implant. This device uses direct bone conduction, allowing the bone to transfer sound to a functioning cochlea and bypass the middle ear. This unique hearing treatment is the only system of its kind cleared by the U.S. Food and Drug Administration to treat hearing loss.

KIDNEY STONE REMOVAL The first symptom of a kidney stone is usually pain. The pain may begin suddenly as a sharp stabbing in the back, just under the rib cage. This pain usually occurs when a stone blocks the flow of urine out of the kidney. A patient may experience nausea or vomiting during the pain, feel the need to urinate more frequently, or have burning upon urination.

In the past, treatment involved major surgery. However, advances in technology have led to the development of alternative, less invasive approaches for treating most kidney stones.

HERNIA REPAIR A hernia is a common condition that involves a weakness or defect in the abdominal wall. Fatty tissue or another organ may protrude through the resulting opening in the abdomen. The pressure caused by the protruding tissue can be painful, and serious medical complications may arise from an untreated hernia.

Surgery is the only way to repair a hernia. At GRH, most hernia surgery can be performed on an outpatient basis. The surgery usually involves the implantation of a secure mesh over the opening in the abdominal wall.

NEW! TREATMENT FOR HEAVY PERIODS One in five women experiences heavy periods. The situation can



We provide personalized care before, during and after all our surgeries.

be resolved with a quick, safe, one-time procedure that requires no hormones and no hysterectomy.

At GRH, physicians use NovaSure endometrial ablation, a procedure that provides an effective and minimally

To learn more about any of these procedures, ask your health care provider or call April Brock, RN, surgical services nurse manager, at 541-963-1836.

invasive alternative to hysterectomy while avoiding the potential side effects and long-term risks of hormone therapy. This simple procedure requires no incisions and can be performed on an outpatient basis.

OTHER SERVICES A variety of other surgical procedures are available at GRH: ● Arthroscopic surgery. ● Gallbladder removal. ● Laser vaporization of the prostate. ● Bladder tumor removal. ● Bunionectomy. ● Bone spur removal. ● Laparoscopic surgery. ● Ear tubes. ● Endoscopic carpal tunnel repair. ● Breast biopsy. ● Tubal ligation. ● Hysteroscopy. ● Tonsils and adenoids removal. ● Nasal and sinus surgery. ✨

GRANDE RONDE HOSPITAL

A CENTURY OF CARING SINCE 1907

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To find out more about Grande Ronde Hospital, visit our web page at www.grh.org or call 541-963-8421.

