JOINT replacement
What are you waiting for?

What’s taking your breath away this spring?
A STUDY RELEASED by HealthGrades, the nation’s leading independent source of physician information and hospital quality ratings, once again named Ashtabula County Medical Center (ACMC) among the top 5 percent in the nation for emergency medicine.

The findings are based on an analysis of more than 7 million Medicare patient records from 2007 to 2009, from more than 5,000 hospitals across the U.S.

The HealthGrades Emergency Medicine in American Hospitals study focused on 12 of the most common and life-threatening medical emergencies, including heart attack, stroke, pneumonia and chronic obstructive pulmonary disease (COPD).

“We are extremely proud to receive the HealthGrades Emergency Medicine Award for the second consecutive year,” said Imraan Haniff, MD, medical director of the ACMC Emergency Department. “The cases included in the study are patients who came to ACMC and then were admitted to the hospital for further treatment, so this award reflects the dedication and skill of ACMC staff throughout the hospital.”

Putting patients first

In addition to the HealthGrades award, ACMC was recently accredited for Chest Pain and Heart Failure. The hospital is also a beta-test site for telestroke, a Cleveland Clinic program that enables a neurosurgeon to conduct a medical consultation for stroke patients in the emergency department to determine if surgical intervention is needed before transferring the patient to Cleveland.

“Every service we offer, every certification we achieve, everything we do is done for the benefit of our patients,” Haniff said.

“In the case of a medical emergency, patients need to get to the closest emergency room as fast as possible—no exceptions,” said Dr. Rick May, study co-author and HealthGrades vice president of clinical quality services. “That said, we encourage patients to prepare in advance by identifying top-performing hospitals close to home. Our research shows that it’s not just the care you receive the moment you arrive that makes the difference between life and death, but the hospital’s ability to continue to provide you with the right care at the right time if you need to be admitted.”

Other key findings of the HealthGrades study include:

Medicare patients treated at hospitals recognized with a HealthGrades Emergency Medicine Excellence Award had, on average, a 40 percent lower risk of death compared to patients treated at nonrecipient hospitals. On average, for the 12 conditions studied, the percentage of cases admitted through the emergency department increased 2.64 percent from 2007 to 2009.
If you are what you eat, eat less

If you’ve been trying a new weight-loss program but are not seeing the results promised by commercials or testimonials, take another look at what’s on your plate.

While many reputable weight-loss programs stress eating right and getting plenty of exercise, it is often easy to forget to watch portion sizes.

When bigger isn’t better

Ashtabula County Medical Center Clinical Dietician Jamie Spendal, RD, said the American diet leans toward bigger portions on the plate, which may not be equal to only one serving from a nutritional standpoint.

For people watching their diet—tracking calories, fats or carbohydrates—it is essential to know how to rate what’s on the plate.

Cardiologist Perry Fleisher, MD, said Americans face some of the biggest challenges of portion size when eating out.

“We think we are getting a bargain—a lot of food for the money,” he said. “It might be a bargain for our wallet, but it isn’t a good deal for our health.”

It is not uncommon to see people eating 16-ounce steaks or 12-ounce pieces of chicken.

Spendal said that when it comes to meat, people do not need more than three to five ounces (pre-cooked weight) at a single meal.

So that 16-ounce steak could net three or four portions.

Add in the bread, potato, vegetables, salad and a dessert, and that one meal becomes a nutritional minefield for someone trying to watch their weight.

Things aren’t much easier for people who swear off restaurants for home cooking.

Spendal said even bread slices have grown in size, so that the nutritional content equals more than one serving per slice.

Get the big picture

Nutritionists traditionally base the nutritional value of food on serving sizes. For example, one serving of apples is about half a cup (four ounces). But a large apple may be two servings. For someone watching their carbs, that becomes an important factor because they just went from about 15 grams to 30 grams or more.

Spendal said people no longer need to buy expensive computer software to track their nutritional information, recommending instead that they go to www.mypyramid.gov.

The website, managed by the U.S. Department of Agriculture, offers a nutrition tracker that gives a person the ability to see everything from calories to vitamin and nutrient intake.

“Take a day in your life and see the amount of food that you eat,” she suggested.

To effectively lose one pound each week, Spendal said people need to eat about 500 fewer calories each day than they expend in daily activities and exercise.

Keeping track of carbohydrates, sugar and fat is also a good way to lose weight.

Ask an expert

To learn more about healthy eating, schedule an appointment with one of ACMC’s clinical dieticians. They can offer nutritional meal plans and help tailor a plan to your needs.

Call 440-997-2262.
Restoring the quality of life

SPEND ANY TIME with people who have had a knee replaced, and eventually they will all tell you the same thing: “I wish I had done it years ago.”

Years of wear and tear can erode knee joints to the point that they hurt with every movement. Since the wear and tear can be so slow over the years, many people discount it as the price of aging.

In other cases, arthritis can cause joint pain at an early age.

Regardless of the cause, when exercise or drug therapy has failed to restore the person’s quality of life, total joint replacement may be the best option.

Looking for relief

Joint replacement surgery involves removing all or part of a damaged joint and replacing it with an artificial one. Hips and knees are by far the most common joints to be replaced. But other joints that can be replaced include shoulders, fingers, ankles, wrists and elbows.
While replacing a joint has become common in recent years, it should still be considered only if all other treatment options—such as exercise and drug therapy—are unsuccessful and the pain is preventing you from leading a normal life.

Over the past 30 years, improved surgical techniques and new implant materials have made joint replacement surgery one of the most reliable and durable procedures in any area of medicine, according to the American College of Rheumatology.

Mark Verdun, DO, an orthopaedic surgeon at Ashtabula County Medical Center, said joint damage can occur at any age—whether through sudden injury or long-term wear and tear on the body.

**Surgery 101**

A joint is formed at the point where two or more bones come together.

For example, the knee joint is formed by the kneecap, lower leg bones and thighbone. The hip is a ball-and-socket joint formed by the upper end of the thighbone (the ball) and a part of the pelvis called the acetabulum (the socket).

The surfaces where these bones touch are covered with a smooth layer called cartilage. Normal cartilage allows nearly frictionless and pain-free movement.

When cartilage is damaged, however, joints become stiff and painful.

During surgery, Dr. Verdun will remove the worn cartilage from both sides of the joint. He will then replace the joint with an implant, usually made of metal, plastic or both.

In the case of a knee replacement, for instance, the damaged ends of the bones and cartilage are replaced with metal and plastic surfaces that are shaped to restore knee movement and function.

During hip surgery, the damaged ball—at the upper end of the thighbone—is replaced with a metal ball. The ball is attached to a metal stem that is fitted into the thighbone. A plastic socket is implanted into the pelvis to replace the damaged socket.

**Recovery**

In many cases, surgery may not be a first option for physicians.

Dr. Verdun said that a drug regimen of anti-inflammatory medication (either steroid-based or not) is a starting point for many patients.

“If I can do that every six months—injections twice a year—and it can help improve a patient’s condition, it is a good option,” he said. “But I can only do the injections for so long. Cortisone, and other steroidal anti-inflammatories, can damage the healthy part of the knee.”

When it is no longer advisable to use the injections or other drug treatment, surgery may be the best choice.

You can usually return to a high level of activity after joint replacement surgery—in some cases, better than before the joint was replaced.

But it takes some time to recover, and you have to do your part to aid the healing process. The typical hospital stay after surgery is two to four days. For hip or knee replacements, you usually need to use crutches for up to two weeks and a cane after that until you build up strength in your new joint. Physical therapy can also help you regain strength.

Dr. Verdun said rehabilitation after a joint replacement is crucial for a return to a high quality of life.

Most patients have some temporary pain in the replaced joint because the surrounding muscles are weak from inactivity and the tissues are healing. How much pain you experience and how long it lasts depend on the type of surgery you have and how well you follow the rehabilitation program recommended by your doctor.

Exercise is an important part of the recovery process. You may be permitted to take part in light activities, such as playing golf or walking. High-impact and joint-overloading activities—such as running, heavy lifting or jumping—are generally discouraged once you have a joint replaced.

Dr. Verdun said the joint is important for rehabilitation, but there are varying exercises that work the joint and individualized plans are created for each patient.

**In the future**

Depending on your age, you may need to have a second total joint replacement procedure performed.

Artificial joints typically last anywhere from 10 to 25 years. But with advances in orthopaedic surgery and technology, replacement joints may now last even longer, Dr. Verdun said.

To schedule an appointment with Dr. Verdun, call 440-997-6910.
FOR MANY OF US, breathing is something we do not even notice. It just happens. But for thousands in northeast Ohio, breathing difficulties keep them from focusing on anything but the in-and-out flow of air.

Melissa Shanley, a Certified Respiratory Therapist with Ashtabula County Medical Center (ACMC), said spring and summer can be a very stressful time for people with breathing difficulties such as asthma or chronic obstructive pulmonary disease (COPD).

She said a combination of pollen floating in the air, increased humidity, and warmer temperatures plays a role in creating breathing difficulties.

Yisa Sunmonu, MD, a pulmonologist with ACMC, said in mild cases, the symptoms may appear as nothing more than a spring cold.

If those symptoms linger, however, it could be a sign of something more severe.

Springtime with asthma
Dr. Sunmonu said more than 20 million people have asthma, one of the leading causes of long-term illness in children.

Those who live with asthma know that seemingly anything can trigger a reaction, known as a bronchospasm.

Shanley said the airway begins to swell and, in essence, reduces the airflow to the lungs.

There are ways to minimize the risk for a bronchospasm, Dr. Sunmonu said:

➜ Avoid smoke. Tell smokers not to smoke in your home or car.
➜ Pets can trigger asthmatic and allergic reactions. Keep animals off upholstered furniture and out of bedrooms—or keep them outside, if possible.
➜ Change air conditioner and duct filters seasonally to prevent dust buildup.
➜ Wash your blankets, sheets and towels at least once a week.
➜ Try to keep your home free of mold (for example, remember to clean your refrigerator. It’s spring-cleaning time, after all).
➜ Keep food in airtight containers and don’t leave garbage out. This should also prevent bugs from appearing—they, too, can cause allergic reactions.
➜ Clean and dust your home frequently, especially carpets, rugs and upholstery.
➜ Close your windows to keep airborne particles and other outdoorsy items where they belong.
➜ Try using a dehumidifier if you’re having trouble breathing.

Shanley said the natural reaction in the spring is to throw open the windows and doors to let the spring air in to replace the musty air of winter. But that may be just the opposite of what a person needs.

The allergens in the air may come into the home and become trapped in furniture, drapes and carpeting, causing more problems for someone with allergies or breathing disorders.

Living with COPD
For people with a chronic breathing disorder, such as COPD, a complete lifestyle change may be needed.

Shanley said COPD is a condition a person will have to live with the rest of their life.
In the initial stages, COPD may be nothing more than a nuisance. But it can quickly progress to a life-threatening condition. Early detection of COPD is the best solution, because varying treatments can help alleviate symptoms. There is no cure for COPD.

Shanley said along with taking medications, people with COPD must watch their environment very carefully. They must be aware of the outside air quality. If the pollen count or humidity is too high, they should stay inside.

“It is worst outside between 6 and 9 a.m. and at dusk,” Shanley said. “That’s when the pollen count is the highest. Keep your windows shut tight.”

For people with COPD, any over-exertion can lead to breathing difficulties.

Shanley said in many cases limiting the time doing an activity or the time outside in the heat is a good remedy.

“If you formerly could spend two hours outside working on a project, maybe divide it up into hourlong work periods, or come inside every half-hour. The key is not to overdo it,” she said.

That also may mean reducing activities later in the week, too.

“You may be able to do an activity fine one day but not even be able to start it a couple of days later. With COPD, you have to realize that your physical condition can change as the environment changes,” Shanley said.

In the final stages of COPD, people may require full-time oxygen assistance. Protecting the airway is the key to a better quality of life later in life. That is why it is important to catch COPD early and to continue medication, all while keeping an eye on the sky.
OBSTETRICIANS and nurses often spend years learning about childbirth. But parents-to-be usually only have a few months to prepare for their baby’s arrival.

You may be worried about the prospect of labor and delivery—not to mention parenthood. But Ashtabula County Medical Center (ACMC) childbirth classes can help ease your concerns.

The classes can help expectant moms build confidence in their ability to give birth and can help birth partners learn how to be active members of the birthing team during labor and delivery. Parents learn what to expect during labor, which may help reduce anxiety about childbirth. They will also have the chance to ask the instructor questions and talk about any concerns, as well as meet other expectant parents.

Commonly covered topics in our classes include:

► Pain relief options, including massage, relaxation, breathing and medications.
► Labor and birthing positions.
► Common medical procedures used during labor and delivery.
► How to care for your newborn baby.
► Breast- and bottle-feeding tips and advice.

In addition to childbirth classes, ACMC offers biweekly tours of the hospital obstetrics department. The one-hour tour includes a visit to birthing rooms, patient rooms and more. The tour is available for expectant parents and those closest to them, who might also be involved during the hospital stay.

For more information, call 440-997-6655.
WHENEVER we have a milestone event in our lives, it is nice to celebrate. Now Ashtabula County Medical Center (ACMC) is offering new moms and a guest a way to celebrate a new birth with a special postdelivery meal.

Called Bistro ACMC, a special dinner for two is prepared for moms after the birth of their baby.

ACMC Chef John Juhasz said the menu is designed to be healthy, but also offers families an upscale dining opportunity.

“Every item is specially prepared for each family,” he said. “We enjoy being able to offer them something unique to celebrate this special time in their lives.”

The menu reads more like a meal at a five-star restaurant than at a hospital.

The four-course dinner starts with either a garden-fresh Caesar salad or fresh melon and berries. The entrée is a choice of char-grilled New York strip steak with buttered mushrooms and caramelized onions; baked chicken supreme with Monterey Jack cheese; or poached Norwegian salmon with lemon dill cream sauce. Side dishes are cheddar-whipped duchess potatoes or oven-roasted red-skin potatoes. Dessert choices are a chocolate midnight torte or peanut butter blast. Beverages include chilled Dasani water, coffee, tea or hot cocoa.

Brian Olszko, the nutritional services director at ACMC, leads the department responsible for preparing the meal.

He said in the past special dinners were created from what the kitchen staff had prepared that day.

“We wanted to kick it up a notch,” Olszko said. “We looked at popular entrees and what blended with them. We asked the OB nurses to sample the items and made some changes based on their comments.”

Main dishes are seasoned and every hot item is prepared immediately before serving.

Celebrating in style
Olszko said presentation of the meal is just as important as the meal itself to promote an atmosphere of fine dining.

Fresh flowers are placed in a vase, and sparkling mineral water is a pretty addition to the tray.

“We want to make it an appealing tray,” Olszko said.

“The flowers and water and other touches make it pleasant to look at.”

The kitchen staff prepares the meal and usually delivers it.

Olszko said when he has taken turns delivering the meals, he makes sure to wear his chef’s coat and hat to add to the ambiance of the moment.

“It is a happy, happy experience,” he said. “I am happy to be a part of it. I think the patients love it, and it makes them feel special.”

He said there is great joy in seeing a new mom and dad, or mom and grandparent, eating and talking about future plans.

Gourmet is a group effort
When the kitchen staff cannot deliver the meals, it falls to the nursing staff to handle delivery of the food.

Olszko said the kitchen staff coordinates with nurses to ensure they are not too busy with patients to deliver the food.

“They have been very supportive of the program,” he said. “I appreciate their willingness to help.”

John Englemann, RN, nurse manager of maternity services, said the entire department is excited about the Bistro program.

“This is an excellent way to celebrate the birth of a child,” he said.
FOR THE THIRD TIME, Ashtabula County Medical Center (ACMC) has been recognized for its efforts to be more environmentally friendly.

Environmental Services Supervisor Butch Breedlove said the hospital earned the Partner For Change award for its efforts to recycle, reuse and make the hospital more energy efficient.

A community of caring
The award comes from Practice Greenhealth, an organization of hospitals committed to environmentally positive healthcare.

The group regularly exchanges ideas about best practices for environmentally friendly ways to provide healthcare in communities across the country. The Practice Greenhealth awards program recognizes strides taken in all aspects of the sustainability program.

Data was collected and presented on:
- Waste reduction and recycling.
- Chemical management.
- Mercury reduction and elimination.
- Green building.
- Device reprocessing.
- Pharmaceutical waste handling.
- Local food.
- Green cleaning, energy conservation and water conservation.
- MedWish contributions.
- United States Environmental Protection Agency compliance.
- Environmental education for employees and community members.
- Transportation.
- Environmentally preferred purchasing.
- Community engagement.
- Progress toward stated goals.
- Innovation.

These annual awards recognize continuous improvement and program growth. Breedlove said much of the credit goes to Matt Reed, facilities director. He said Reed embraced the program and has taken every opportunity to improve the efficiency and sustainability of the hospital.

When fluorescent bulbs need to be changed, Breedlove said the hospital uses the latest, most energy-efficient bulbs available. And one of the biggest challenges in recent years was the demolition of the Rogers Building. Breedlove said hospital officials opted to recycle as much of the material as possible. The final results were astounding.

Of the 1.25 million pounds removed from the building, 1.21 million pounds were recycled. In addition, the hospital is saving an estimated $68,000 in electrical costs, and an estimated $50,000 in natural gas costs. The hospital also recently upgraded its medical air flow system. The project is saving more than 1.31 million gallons of water each year.

Last year, ACMC was honored with the Partner for Change Award and the Making Medicine Mercury-Free Award. The hospital improved its recycling efforts and eliminated almost all of the mercury at the facility.

In 2009, ACMC received a Partner Recognition Award for efforts begun to make the hospital more environmentally friendly.

“The staff at ACMC gives so much of themselves every day, and to think that they would once again step to the plate to help the people of this community and support many worthwhile programs is just overwhelming to me,” Breedlove said. “We have the best people that work for this organization!”
Prostate problems

FREQUENT TRIPS to the bathroom—especially at night—are no fun.

If you’re a man and the above scenario sounds familiar, you may have an enlarged prostate—a noncancerous condition known as benign prostatic hyperplasia (BPH).

A matter of time

Mark Cabelin, MD, a urologist at Ashtabula County Medical Center (ACMC), said as men age, it is common for the prostate to enlarge and press on the urethra—the tubelike structure through which urine passes out of the body.

Men rarely have symptoms of BPH before age 40. But more than half of all men in their 60s and as many as 90 percent of men in their 70s and 80s have some symptoms.

Though the symptoms vary, Dr. Cabelin said there are many treatment options.

Many of the symptoms associated with BPH stem from the narrowing of the urethra and a gradual loss of bladder function, which results in incomplete emptying of the bladder. The most common symptoms involve:

➜ Frequent urination, particularly at night.
➜ A hesitant, interrupted, weak stream.
➜ A sudden and urgent need to urinate.
➜ Leaking or dribbling.
➜ Difficulty in starting the urine flow.

In most cases, the symptoms mean you have BPH, but they can also signal more serious conditions, including prostate cancer. Only an examination by a doctor can correctly diagnose the condition.

In some cases, your urologist may suggest regular checkups to monitor the BPH problem.

Dr. Cabelin said the good news is that even when it does become a more serious problem, BPH treatment can be successful, and a good quality of life can be restored.

When you need treatment

Mark Cabelin, MD, a urologist at ACMC, said the following options may be used to treat benign prostatic hyperplasia (BPH):

Drug therapy. Alpha-blockers relax the muscles around the prostate, which improves urine flow. Other drugs relieve BPH symptoms by shrinking the prostate or preventing it from growing.

Minimally invasive therapy. If drugs don’t relieve BPH symptoms, your doctor may recommend:
✓ Transurethral microwave thermotherapy, which uses computer-regulated microwaves to heat and destroy excess prostate tissue.
✓ Transurethral needle ablation, which uses low-level radiofrequency energy to burn away a part of the prostate.
✓ Water-induced thermotherapy, which uses heated water to get rid of troublesome prostate tissue.

Surgery. The best long-term solution for BPH is to remove the part of the prostate that is enlarged and pressing on the urethra. Options may include:
✓ Transurethral resection of the prostate (TURP), in which a surgeon reaches the prostate by inserting an instrument through the urethra. This is the most common type of surgery for BPH.
✓ Prostatectomy, in which part of the prostate is removed through an incision in the abdomen (open surgery). This surgery may be needed if a transurethral procedure can’t be done.

American Urological Association

Men rarely have symptoms of BPH before age 40. But more than half of all men in their 60s and as many as 90 percent of men in their 70s and 80s have some symptoms.

To learn more

For more information about treatments for BPH, make an appointment with Dr. Cabelin.

Call 440-997-6970.
Support group helps those with breathing difficulty

NORTHEAST OHIOANS living with breathing difficulties such as COPD or asthma do not have to struggle alone.

For the past three years, the COPD Support Group has been meeting at Ashtabula County Medical Center to offer information, encouragement and other support for those with breathing difficulties.

Respiratory therapy supervisor Melissa Shanley, CRT, said the group is open to anyone with breathing difficulties. Discussion of living with COPD is a focus of the group, but other areas such as living with asthma, dealing with allergies or how to handle other breathing difficulties are also included.

The group meets the first Wednesday of every month from 2 to 3 p.m. in the Education Building, across from the hospital on Rogers Place.

Shanley said the group will discuss oxygen therapy and wound healing at its next meeting.

The group will also undergo a name change, to be voted on next month, to reflect the fact that the group is not limited to people with COPD.

Monthly meetings are free and open to anyone with breathing difficulties.