

# healthmatters

Knocking down the barriers on

## Annual Mammograms

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## Stroke Rehabilitation

rebuilds the body and  
restores a passion for life

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## 128-Slice CT Scanner

arrives at the Hospital

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The Healing Garden outside the Main Entrance at Elkhart General Hospital.

# Meet Our New Medical Staff



**Geeta Bhargave, MD**  
Elkhart General Hospital - Hospitalist  
Internal Medicine

Dr. Bhargave earned her medical degree from the Temple University School of Medicine and completed her internal medicine residencies at St. Vincent's Medical Center-Manhattan and Mount Sinai Medical Center.



**Michael Dye, Jr., MD**  
Radiology, Inc.  
Diagnostic Radiology

Dr. Dye earned his medical degree and completed his diagnostic radiology residency at the University of South Alabama. He completed his neuroradiology fellowship at Wake Forest University. Dr. Dye is Board Certified in Diagnostic Radiology.



**Thomas Gast, MD**  
Radiology, Inc.  
Interventional Radiology

Dr. Gast earned his medical degree from Ross University. He completed his general surgery residency at Rush University and diagnostic radiology residency at the University of Illinois. Dr. Gast completed his burn surgery and critical care medicine fellowships at John H. Stroger Jr. Hospital of Cook County and his vascular and interventional radiology fellowship at Cornell University.



**Nazar Golewale, MD**  
Radiology, Inc.  
Interventional Radiology

Dr. Golewale earned his medical degree from Al-Ameen Medical College and completed his general surgery and diagnostic radiology residencies at SUNY Upstate Medical University. He completed his nuclear medicine fellowship at Mount Sinai School of Medicine and his interventional radiology fellowship at Yale New Haven Hospital. Dr. Golewale is Board Certified in Diagnostic Radiology.



**Jennifer Knapp, DO**  
Center for Behavioral Medicine  
Outpatient Services  
Psychiatry

Dr. Knapp earned her medical degree at the Nova Southeastern University College of Osteopathic Medicine. She completed her internal medicine internship at OhioHealth Doctors Hospital and her psychiatry residency at The Ohio State University Hospital. To schedule an appointment with Dr. Knapp, please call (574) 523-3347. Center for Behavioral Medicine Outpatient Services is located at 1506 Osolo Road, Suite A in Elkhart.



**Benjamin Moreno, MD**  
Radiology, Inc.  
Interventional Radiology

Dr. Moreno earned his medical degree from the University of Illinois College of Medicine at Urbana-Champaign. He completed his diagnostic radiology residency at Loyola University Medical Center and his interventional radiology fellowship at Northwestern Memorial Hospital. Dr. Moreno is a Board Certified Diagnostic Radiologist.



**Thomas Rhee, MD**  
Radiology, Inc.  
Diagnostic Radiology

Dr. Rhee earned his medical degree at the University of Iowa, completed his internal medicine residency at Iowa Methodist Medical Center and his diagnostic radiology residency at Northwestern University. He then completed his interventional MRI research fellowship and his body/musculoskeletal MRI fellowship at Northwestern University. Dr. Rhee is Board Certified in Diagnostic Radiology and Internal Medicine.



**Sridevi Sompalli, MD**  
Radiology, Inc.  
Diagnostic Radiology

Dr. Sompalli earned her medical degree from the University of Illinois College of Medicine. She completed her diagnostic radiology residency at John H. Stroger Jr. Hospital of Cook County and her body imaging fellowship at Boston University Medical Center. Dr. Sompalli is Board Certified in Diagnostic Radiology.

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## Your Cancer Treatments are Finally Over. You Survived the Disease. Now What?

*“I’m finally done with treatment and I’m cancer free. But I still have a lot of issues to deal with. I’m doing my best, but I could really use some help.”* This is a sentiment heard all too often among cancer care practitioners from cancer patients at Elkhart General Hospital.

Fortunately, Elkhart General developed the Cancer Survivorship Clinic to help cancer survivors deal with the

many physical, emotional, social and financial pressures that often follow cancer treatment. An innovative program created to address the unique needs of each cancer survivor, the Cancer Survivorship Clinic is the first of its kind in Northern Indiana.

“It’s generally assumed that once a patient is cancer free, it’s easy to get back to a normal life,” said Toni Klatt-Ellis, an

Oncology Advanced Practice Nurse who manages the Cancer Survivorship and Thoracic Oncology Clinics. “Experience tells us it’s often more complicated than that. There can be lots of issues to deal with, and that’s why the Cancer Survivorship Clinic is here.”

One of those issues has to do with the patient’s complex, often confusing, treatment history. “Survivors tell us when they go to their doctor, they are often asked to give a complete history of their cancer care and they must do it every time they see a different provider,” Klatt-Ellis said. “For many, this complete history can be very involved. Our program provides the patient with a written *Cancer Treatment Summary*, or a brief but complete recap of every aspect of the cancer experience, which covers the type and stage of the disease, the schedule and intensity of treatments and any surgeries that were performed.”

By reviewing the patient’s entire collection of medical records, from the initial diagnosis through final treatment, Klatt-Ellis is able to prepare this summary prior to the patient’s first visit to the Clinic. With this document in hand, the patient is now able to easily provide accurate information to any new physician the patient may visit in the future.

While the *Cancer Treatment Summary* looks back, another tool that’s provided to the patient, the *Survivorship Care Plan*, looks forward. Created with the goal of maintaining good health, this pocket-sized document provides the patient with a comprehensive, step-by-step guide to follow over the next five years. “We’ll map out a complete, personalized care plan, including screenings, lab work, medications and any type of follow up or routine care that’s right for that individual,” Klatt-Ellis said. “Having a comprehensive care plan like this gives patients a lot of peace of mind. They know when they need to get things done, and they know who to call to make it happen.”

As an Oncology Advanced Practice Nurse, Klatt-Ellis is able to prescribe meds and to refer patients to physician specialists for follow up care or therapy as needed. The Clinic is also able to offer nutritional guidance, which is considered a vital component given that obesity is a huge risk factor for cancer and cancer recurrence, second only to tobacco use.

“In addition to physical problems, we also want to help patients with their emotional, financial and social needs as well,” Klatt-Ellis said. “By tapping into other resources in the community, we hope to bring a wide range of professional, non-medical expertise to the table when it’s called for.”

The Clinic is currently working to enlist the support of area experts who can assist the patient with financial or legal problems that may be related to the cancer experience. And to help with social or psychological issues, the Clinic will be able to draw on a variety of Hospital-based programs as well as several highly-regarded counseling organizations in the community.

The final component of the Cancer Survivorship Clinic focuses on communication. Patients want assurance that the physicians who were involved in their initial cancer treatment stay in the loop in terms of the post-treatment care they receive from other healthcare providers.

“Many patients who come to the Clinic may only come for one visit. They will have a physical, discuss any issues they may have and leave with their *Cancer Treatment Summary* and *Survivorship Care*

*Plan*. Others may require follow up visits, either with Clinic staff or other providers as needed,” said Klatt-Ellis. “Our goal is to provide a smooth transition from cancer patient to cancer survivor. For some, that’s a more difficult road than for others, and our Clinic is designed to meet whatever the patient’s needs call for.”

With regard to cost, visits to the Cancer Survivorship Clinic are treated the same as a visit to a physician’s office, and the patient’s insurance coverage should apply accordingly. Physician referrals are not required, and the Clinic welcomes all cancer survivors whether or not their cancer treatment was provided by Elkhart General or at other hospitals.

**For more information or to schedule an initial appointment with the Cancer Survivorship Clinic, call (574) 523-7819.**

The American College of Surgeons’ Commission on Cancer has awarded Elkhart General Hospital Center for Cancer Services its Outstanding Achievement Award. The Center has earned this merit for three consecutive times, making it the ONLY cancer program in Northern Indiana and one of 13 cancer programs in the United States to receive this distinction.



# What's Keeping You From Getting Your Annual Mammogram?

## Knocking Down Some Common Barriers to Better Health

"We don't yet know how to *prevent* breast cancer, but we *do* know when we catch it early, the cure rate can be as high as 98 percent," said Allison Lamont, MD, Board Certified Diagnostic Radiologist at the Elkhart General Hospital Breast Care Center. "That's why we continue to aggressively push the importance of annual mammograms."

Unfortunately, more than half of the women in the area who should have an annual screening mammogram are not doing so. And when a woman puts it off – and the cancer has the chance to spread – her odds of survival can drop to as low as one in four.

So why are so many women passing up this vital test? Dr. Lamont and her colleagues at the Breast Care Center have identified some of the apparent barriers that may be standing in the way; and they're working hard to knock them down.

### "I'm waiting for my doctor to set it up."

On this issue, Dr. Lamont has some emphatic advice to women: "Don't wait." A screening mammogram does not require a physician's order. "Many physicians we've talked with recently are somewhat surprised to learn that their patients have not been in for their annual mammogram. Clearly, there seems to be a bit of a disconnect. Physicians think their patients are making their own arrangements, while patients think only the physician can schedule the exam. So here's the message: If you're over 40 and haven't had a screening mammogram in over a year, it's time for you to get on the phone to the Breast Care Center," Dr. Lamont said. Scheduling the exam is easily done by the patient, and Dr. Lamont emphasizes that the Center will make sure the results are forwarded to the patient's primary care physician so she or he is in the loop.

### "I'm too busy. Way too busy."

As a working mom herself, Dr. Lamont is quick to acknowledge that it's busy out there and it can be tough squeezing a trip to the Hospital into an already overloaded

schedule. "That's why we've expanded our hours at the Breast Care Center to include evening and Saturday morning appointments." During the week, mammograms are scheduled as early as 7 a.m. and as late as 6:45 p.m. Saturday hours run from 9 a.m. to 1 p.m. "Our staff works hard to keep wait times to an absolute minimum, and the exam itself usually only takes a few minutes," Dr. Lamont said. "Plus, the Breast Care Center works in conjunction with the Regional Center for Bone Health, which is also located here in the Women's Health Center, so that both a mammogram and a bone density scan can be performed in just one hour. Both exams must be scheduled in advance, but since we started this two-tests-in-an-hour program over a year ago, it's proven to be a big hit with our patients." (See "Take Charge of Preserving Your Health" on Page 11.)

### "I just can't afford it right now."

The economy has forced a lot of families into making tough financial choices, and too often healthcare is taking a back seat in favor of other necessities. Again, Dr. Lamont has strong words of advice to women facing this situation: "Please call us," she said. "We work closely with a number of area agencies and national organizations, and we're often able to tap into these resources to provide financial assistance to a patient who may have no insurance and assumes she must forgo her mammogram."

Linda Choler, RN, a Breast Care Center Nurse who coordinates this financial assistance activity said, "Most private insurance plans cover annual screening mammograms, and for Medicare recipients the exam is also covered 100 percent. But for patients who have neither private insurance nor Medicare, we're able to turn to a number of other sources." Some of these assistance programs include:

- **Breast and Cervical Cancer Prevention Program**  
This program provides assistance to cover the cost of a variety of tests including a pap smear, a clinical breast exam and a screening mammogram. It's a federal program,

Allison M. Lamont, MD is Board Certified in Diagnostic Radiology and earned her medical degree from the Indiana University School of Medicine. She completed her diagnostic radiology residency at Western Pennsylvania and her musculoskeletal radiology fellowship at the University of Wisconsin Hospital and Clinics. Dr. Lamont has been part of the Elkhart General Hospital Medical Staff since 2000.



administered by the state, and is intended for uninsured and underinsured, low-income families. Assistance varies as a result of the number of individuals in a household. According to Choler, "One important feature of this program is that if the mammogram indicates the need for a biopsy, that exam is also covered. And if cancer is detected, the patient is shifted into Medicaid within seven days, allowing us to begin treatment as quickly as possible."

- **Breast Cancer Screening Special**  
This program is funded exclusively by Elkhart General. It offers qualified patients who are uninsured or underinsured and don't qualify for the above-mentioned program a discount of up to 70 percent on a screening mammogram. It includes the exam itself as well as the cost of the radiologist review.
- **Oncology Assistance Fund**  
This program is most commonly used to cover the cost of follow up diagnostic tests for uninsured or underinsured patients who had an initial screening through the Breast Cancer Screening Special. "We're also able to tap this fund

to assist oncology patients with miscellaneous expenses," said Choler. Support for the Oncology Assistance Fund has come through numerous private donations.

In conclusion Dr. Lamont said, "Outside healthcare experts continually rate the Elkhart General Hospital Breast Care Center as one of the top breast health programs in the state. The most advanced technology, exceptional staff expertise – we've got it all. But the best programs will work only when patients use them. That's why we're so committed to knocking down the barriers that are keeping women from coming in the door."

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**The Breast Cancer Center is designated as a Breast Imaging Center of Excellence by the American College of Radiology (ACR) and as a Certified Quality Breast Center of Excellence, Certification Level III by the National Consortium of Breast Centers National Quality Measures for Breast Centers™ Program (NQMBC™).**

**To schedule an appointment for a mammogram, please call the Breast Care Center at (574) 523-7842.**

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**Mark Klaassen, MD, FACS**, Board Certified Orthopedic Surgeon, received his medical degree from the Indiana University School of Medicine at Notre Dame and Indiana University Medical Center. He completed his orthopedic surgery residency at Lutheran Hospital of Indiana and is a Fellow of the American College of Surgeons and the American Academy of Orthopaedic Surgeons. Dr. Klaassen has been a member of the Elkhart General Medical Staff since 1987.

# Recovery from Joint Replacement Surgery Takes a BIG Step Forward

“The human body has an amazing ability to take care of itself,” said Mark Klaassen, MD, FACS, Board Certified Orthopedic Surgeon at OSMC. “Think about this example: as soon you get a small cut on the finger, chemical messages are sent out from the site of the wound that say, ‘Hey, we have a problem here. Send in the troops.’ The ‘troops’ show up in the form of platelets, components of your blood that cause clotting and promote healing. Before long, bleeding stops, a scab forms and you’re as good as new.”

The same phenomenon takes place during orthopedic surgery, but on a much larger scale because of the sizeable incision the surgeon must make when operating on the knee or hip joint. “One of the most significant issues we deal with in joint replacement surgery is the healing of the soft tissue that was affected during the procedure,” Dr. Klaassen said. “It’s major surgery that involves a major wound. Ideally, the tendons, ligaments and muscle tissue will heal quickly so maximum strength and flexibility can be restored to the joint. But healing a wound of that size will naturally be a slow process.”

But what if it was possible to energize the healing process and accelerate recovery for patients in the Elkhart General Hospital Center for Joint Replacement? A recent advance in biotechnology can make that happen. It’s based on the remarkable characteristics of Autologous Platelets, the part of our blood containing “growth factors” that are vital to healing. The technique Dr. Klaassen uses during joint replacement procedures at Elkhart General allows him to harvest a concentration of these growth factors and apply them directly to the wound at the end of surgery, thus creating a super-charged healing environment.

“Prior to surgery, we collect a volume of blood from the patient. Then, using special centrifuge equipment, we’re able to isolate and capture a concentration of Autologous Platelets, the ‘troops’ I mentioned earlier,” Dr. Klaassen said. “Near the end of the surgery, before the wound is closed, we spray a fine gel

of this material throughout the surgical site. The platelets we’ve harvested join forces with the patient’s natural receptor cells and a highly accelerated healing process begins.”

The advantages of the technique extend beyond faster healing of the wound. Studies show that most patients experience a greater range of motion than would otherwise be achieved, and the risks of arthrofibrosis (excessive scar tissue that can restrict movement) may be reduced. Near the end of surgery, Dr. Klaassen brings yet another aspect of biotechnology to the table. “After replacing the joint and applying the platelet gel to the interior area, we close the wound and seal it with Fibrin, a glue-like substance that again comes from the patient’s own blood. Fibrin is strong enough that we generally don’t even need stitches or staples on the incision. And, like the platelet gel, Fibrin contains a natural concentration of growth factors that stimulate the healing process.”

In addition to quicker healing, sealing the incision this way results in a much less visible scar than would be possible with stitches or staples. “With this technique, a patient’s scar in six weeks looks like it’s been healing for six months,” Dr. Klaassen said. “I’ve never had a patient who likes an unsightly scar, so an improved cosmetic result is a nice bonus.”

Dr. Klaassen emphasized that this accelerated-healing approach to joint replacement surgery works so well because the material that’s applied – both inside and outside of the wound – comes from the patient’s own blood. “If we were introducing some foreign substance into the site, we’d have a natural risk of rejection. That just doesn’t happen with this procedure since we’re simply reintroducing a substance the patient’s own body produced in the first place.”

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**For more information on the Center for Joint Replacement, please visit [egh.org](http://egh.org) or call (574) 523-3303.**

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## Elkhart General Hospital Launches a New Assault in the Battle Against Lung Cancer

Lung cancer is the second most common type of cancer among both men and women. It's also the most deadly. Last year, nearly 106 members of our community were diagnosed with the disease at Elkhart General Hospital. And according to Cardiothoracic Surgeon Walter Halloran, MD, "With more than half of these patients, their cancer had advanced to Stage IV by the time we saw them, meaning the disease had already spread to other organs throughout the body."

In light of these ominous facts, Elkhart General has launched an aggressive strategy aimed at turning things around. Under

the direction of Dr. Halloran, the Hospital's new Thoracic Oncology Clinic will offer a new line of attack focused on both diagnosis and treatment of lung cancer.

### Early Detection

"We've known for years that with diseases like breast cancer, early detection is key to survival," Dr. Halloran said. "Recent studies have shown this applies to lung cancer as well. That's why the Hospital is undertaking an ambitious campaign with area physicians and the public to bring lung cancer screenings to the mainstream of preventive medicine."

Initially, the Clinic will focus on individuals who are at the greatest risk for the disease. This group includes individuals with a "30-pack-year history" of smoking, which translates into a pack a day habit for 30 years or two packs a day for 15 years. "At the very least, these smokers should have a baseline x-ray and a follow-up screening at least every two years," Dr. Halloran said. "We frequently see patients with highly advanced tumors of the lung who had no idea they were sick. By putting an effective lung cancer screening program in place, we'll have the chance to find these tumors early enough to significantly improve the odds of survival."

### Streamlined Treatment

As soon as lung cancer is detected, another key component of the new Thoracic Oncology Clinic is introduced with the goal of streamlining what it takes to get treatment underway. Dr. Halloran said it's normal for a comprehensive lung cancer treatment plan to involve a number of different doctors, including a medical oncologist, thoracic surgeon, pulmonologist, the patient's primary care physician and possibly others. "Imagine you've just learned you have lung cancer. Now you're expected to schedule individual appointments with all of these different physicians and try to make sense of everything you hear. This can be a daunting challenge. Plus it chews up valuable time – perhaps weeks before all of the needed specialists are able to see you. It's not a good situation particularly given the patient is under extreme stress and anxiety."

The Thoracic Oncology Clinic goes a long way toward solving this problem. Within a matter of days, the newly diagnosed patient meets with the entire team of specialists who will be involved in the patient's treatment plan. The team works as a group to review the labs, scans, pathology reports and any additional clinical information that has been pulled on the patient's condition. Together, this interdisciplinary group of physicians develops the most effective treatment strategy. Toni Klatt-Ellis, an experienced Oncology Advanced Practice Nurse, oversees and coordinates these efforts.

The physicians will meet individually with the patient to review the plan. "In a very short timeframe the patient is able to have a thorough consultation with each specialist on the team, learn the plan of attack and address any issues or concerns he may have," Dr. Halloran said. "Follow up appointments can be scheduled on the spot so the patient is

able to get started with treatment right away. And the patient gets some important peace of mind knowing the treatment plan is a product of a team effort, with contributions from every specialist who will be involved."

An effective calming care program is yet another important element of the Thoracic Oncology Clinic. "For some of our more advanced lung cancer patients, treatment must focus not on cure but on comfort," Dr. Halloran said. "The goal with these patients is to do everything we can to manage symptoms and extend and maximize the quality of life. The palliative care component that we've built into this program focuses expressly on that goal."

Though diagnosis and treatment will be front and center, the Thoracic Oncology Clinic will also take an active role in efforts to prevent lung cancer from striking in the first place. "Nearly one in four Elkhart County adults smoke," Dr. Halloran said, "Every day I see the deadly results of that statistic. It's particularly tragic, given that this is such an avoidable disease." Dr. Halloran said there are a number of effective smoking cessation programs available in this community, and the Clinic plans to support and build on them. "But even the most effective program does no good if people don't take advantage of it. While we're committed to making the Thoracic Oncology Clinic a vital resource for lung cancer victims, we're also committed to getting fewer people to need it in the first place by helping them kick the habit for good."

**For more information on the Thoracic Oncology Clinic, please call (574) 523-7850.**



**Walter Halloran, MD** is Board Certified in Thoracic and Cardiac Surgery. He earned his medical degree from the University of Minnesota Medical School and completed his general surgery and cardiothoracic surgery residencies at the University of Rochester and Strong Medical Hospital. Dr. Halloran has been part of the Elkhart General Medical Staff since 1996.

# Stroke Rehabilitation: It's All About Rebuilding the Body, Retraining the Mind and Restoring a Passion for Life

For Annette Martz, it all started with a crushing headache that could not be calmed. Under normal circumstances she would have headed straight to the doctor's office or an emergency room. But hers was no normal circumstance. She was in Juarez, Mexico, serving with a team of missionaries from her church. Her friends wanted her to go to the local hospital, but she insisted on coming home instead; a wise decision given that she suffered a massive stroke three days later.

Don Devore's story opens quite differently. He was actually in the hospital when his stroke hit. With some stroke victims, if a clot-busting drug is administered within a short time of onset, the brain damage can be significantly reduced. Not in Don's case. His stroke attacked the brain stem, the one section of the brain that is essentially immune to this drug's effect. The damage was severe.

Fortunately, there's a good side to both of these stories. Don and Annette, along with scores of other stroke victims, are

lucky to have one of the top stroke rehabilitation programs in the United States right here at Elkhart General Hospital. In fact, the Elkhart General program is included in the top 3 percent in the country according to the nationally recognized Uniform Data System for Medical Rehabilitation.

"Our goal with each patient is simple," says Lorna Stahler, CRRN, Unit Manager for Elkhart General Inpatient Rehabilitation Services. "We want the person to get back to the highest functional level possible. If it's 100 percent, wonderful. But even when it's not, and that's often the case, we know the patient will leave our program enjoying a much higher quality of life than would be possible otherwise."

According to Scott Vance, Manager of Elkhart General Outpatient Rehabilitation Services, "Most stroke patients require a broad spectrum of rehabilitation. Rebuilding the body from a physical standpoint is obviously important, but much of our work centers on re-educating the patient's brain

to relearn how to do the most basic things like walking, talking, swallowing and handling a toothbrush again. For many patients, we're almost starting from scratch and it can be a long, tough journey."

For Annette, the journey took more than seven months. "I was in the Hospital for 49 days," she said. "For the first several days, I couldn't talk or sit up or do anything with the left side of my body. I couldn't imagine getting better, and I was terrified that I'd never be able to get back home and be on my own again." Therapists started working with Annette even before she was transferred to the Rehab Unit, helping her learn to move again and encouraging her to do the exercises that could improve her speech and mobility.

"At first they did simple things to trick me, like when visitors came they had them sit to my left so I had to turn my head if I wanted to see them," Annette said.

Slowly, one step at a time, Annette began to recover. Speech therapy improved her ability to talk and swallow. Physical and occupational therapy helped her get back her basic motor skills. And her spirits improved dramatically. "I became pretty agile with the wheelchair," she said. "I've always been a bit of a rascal, so to have some fun along with the other patients in the Unit I started a competition I called 'bowling for nurses.' If you can run into a nurse with your chair you earn 20 points. Of course student nurses would count for 40 since they were generally quicker." Annette was obviously getting better.

Though her recovery took months of both inpatient and outpatient therapy, she's now back home doing the things she loves. She's on the road again thanks to a driving simulation system she used in the Unit. She even rejoined her mission team in Mexico for a few weeks last year.

Don Devore's experience illustrates one of the key features of the rehabilitation services at Elkhart General. Like most patients, Don underwent an intensive array of physical, speech and occupational rehabilitation activities. But the big question was if he would be able to put his renewed skills to work in the real world.

"I love to camp and fish," Don says. "So part of the rehab plan they designed for me included learning how to use fishing gear again. They actually have fishing rods in the department, along with golf clubs, tennis rackets and all kinds of gear like that. It's all about getting you back to doing the things you used to do.

One day a group of us and our therapists went on a field trip to find out how we'd do 'out there.' We rode up to Lunker's, armed with a shopping list and an appetite. We had to navigate



A shopping and lunch field trip to Lunker's gave **Don Devore** and his therapists confidence that he was ready to get back to doing the things he loves.

our way around the store, shop for the items on our list, pay for them, count the change, the whole deal. Then we all went into the restaurant for lunch. Again, we had to show that we could do the normal things like order our food, eat it, handle the bill, everything. I guess for our therapists, it was a test of how we could do. For me it was a real confidence builder. Plus, I picked up some nice lures."

"When we see a patient succeed with practical exercises like Don did, that's when we really know our program is working," Vance said. "We've learned to be very creative in crafting individual rehab plans that match up with the patient's personal interests. This keeps things interesting and helps the patient stay motivated, knowing they're making progress and getting back to doing the things that are important to them."

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**For more information on Outpatient Rehabilitation Services such as speech and physical therapy, call (574) 523-3242.**

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Thanks to special driving simulation equipment in the Elkhart General Hospital Rehabilitation Services, **Annette Martz** is safely back behind the wheel.



# Take Charge of Preserving Your Health

“I’m not going to the doctor unless I’m sick.” REALLY??

“I’d like to see people take more responsibility for maintaining their own health,” said Genevieve Lankowicz, MD, CCD, Board Certified Family Medicine Physician and Medical Director of the Elkhart General Hospital Regional Center for Bone Health. Dr. Lankowicz sees firsthand the devastating outcome that can result when an osteoporosis patient has failed to embrace the concepts of wellness and health preservation.

“A few days ago I had a patient come to us for a bone density exam because of a recent fracture,” Dr. Lankowicz said. “Her primary physician wanted to fully evaluate her bone health and define her risk for additional fractures. Sure enough, our bone scan confirmed that the fracture was probably a result of low bone density. But in my view there was another factor that contributed equally to her ailment: the fact that she hadn’t visited her physician in more than five years. Five years! Which meant she passed up any chance of avoiding the fracture in the first place through early detection and treatment of her disease.”

The attitude exhibited by this patient is only one of the issues Dr. Lankowicz sees as to why proactive health preservation is a back-burner issue for some, particularly when it comes to her field of bone health. Another issue has to do with an apparent misunderstanding related to insurance coverage. “A lot of people aren’t yet aware that the new healthcare

legislation that’s now in place provides 100 percent coverage for a bi-annual bone density screening for female patients covered by Medicare,” she said. A physician’s order is required, but Dr. Lankowicz emphasized that bone health should be a standard part of the patient’s annual visit to the primary care physician, which is another service that’s covered under the new legislation. “It’s important for the patient to take the initiative in scheduling an annual wellness visit with the primary physician and to have a thorough discussion about all of the steps that can be taken to preserve good health. Of course that should include the issue of bone health and whether it’s time for a bone scan as part of the patient’s overall wellness plan.”

The reason bone density screening is such a vital exam, and the reason it’s included in the new healthcare law, is simple: when bone disease is detected early it can be effectively treated, thus reducing the risk of a devastating and costly fracture later on. “Some of our elderly patients who present with low bone mass assume it’s too late to do much about the disease,” Dr. Lankowicz said. “I’ll often hear something like, ‘I’m 80 years old. What can you do?’ The fact is we can do a lot. And considering studies show that when an elderly man suffers a hip fracture he faces a 50/50 chance of never recovering, it’s vital that we do everything possible to keep that fracture from happening.”



**Genevieve Lankowicz, MD, CCD** is Board Certified in Family Medicine and is a Certified Clinical Densitometrist. She received her medical degree and completed her family medicine residency from the SUNY School of Medicine. Dr. Lankowicz is the Medical Director of the Elkhart General Hospital Regional Center for Bone Health, and the Chief of the Elkhart General Hospital Medical Staff.

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**For more information on bone density scans and osteoporosis treatment or to schedule an exam after you’ve received a physician’s order from your primary care physician, please call (574) 523-2751.**

**With advance scheduling, it’s possible to get both a bone density scan and a mammogram in the same one-hour visit. Please make this request at the time of your call.**

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# Are Your Genes Contributing to Obesity and Poor Health?

## How to Switch Your Genes On or Off

It's a common belief that when a person suffers from obesity, diabetes or high blood pressure, the parents are to blame. It's genetic, right? Not much you can do?

Not so fast. While it's true we may inherit genes that could contribute to these conditions, the science of Epigenetics has revealed that we possess the ability to turn many genes on or off. How? By choosing healthy habits. "It is our lifestyle and environmental choices that bring in nutrients and chemicals that can turn genes off or on," said Liz Winet, FNP-bc, MSN, MBA, Manager of the New Directions Wellness Clinic and Heart Failure Clinic at Elkhart General Hospital. "The most powerful choices we can make to create good health are to avoid obesity, choose healthy whole food and think success-promoting thoughts. Avoid holding onto fear, anger and anxiety. Yes, anxiety is toxic to our genes and so is obesity!" According to Winet, this is the fundamental awareness from the science of "Epigenetics," which literally means "above the genome."

Scientists have discovered that chemicals attached directly to a gene or its associated protein can turn a gene off. This allows cells to specialize and keep a balance of hormones to maintain health. Epigenetics has revealed that when parents are obese, their DNA and associated on and off switches can be passed onto their children to make it easier for the child to become obese as well. Along with obesity comes diabetes, high blood pressure, heart disease, depression and cancer, a full array of unhealthy conditions. But Epigenetics also shows us that it doesn't have to be that way.

"It's actually the offspring's own lifestyle choices that can determine whether that switch is on or off," Winet said. "We are not victims of our genes. The passion behind New Directions is to support people in creating the health and life they desire. Even a modest weight loss can have dramatic impact on the position of those on and off switches," Winet said. "Studies show that just a 10 percent reduction in weight

can translate into a significant reduction in diabetes and hypertension. By losing that excess weight, the person not only feels and moves healthier and lighter, but their body produces health-promoting chemicals that reduce disease. Plus, there's a special bonus: not only does the individual's health improve, a healthier set of switches are passed onto the next generation. We're able to honestly say to our New Directions participants, 'How would you like to be the first person in your family to turn around your family's poor health history?'"

Doug Yoder is living proof of what all this can mean. Last December, Doug tipped the scales at 314 pounds, suffering from obesity, which he shared with other members of his family, including his mother and uncle. Like others who have battled obesity, Doug had a history of yo-yo "successes." "I tried Weight Watchers several years ago and lost 60 pounds," Doug said. "But after about a year I started putting it right back on and then some." Since then, he tried various self-managed efforts that produced similar on-again, off-again results. "It wasn't just my weight. My blood pressure went up too and my cholesterol was bad. All in all, things seemed pretty hopeless, and considering my family history, somewhat inevitable."

Doug's excessive weight was aggravating yet another inherited condition: arthritis in his hip. "I do a lot of walking for my job, and the pain in my hip was really taking a toll," he said. "I visited an orthopedic surgeon to talk about a possible hip replacement and we ended up talking about New Directions instead. Turns out the surgeon had recently gone through the program himself and was a big advocate based on his own success. He gave me some New Directions literature and a recommendation to give it a try. This was the first step toward a real solution."

New Directions is a medically managed wellness program that focuses not just on weight loss but also on habit changes that can improve overall health and mental well being. Participants

Before



After



**Doug Yoder** enjoys bike riding and gardening more than ever after completing the Elkhart General Hospital New Directions Wellness Clinic program.

attend weekly group sessions, use nutritional supplements to replace certain meals and learn new meal options and healthy lifestyle changes that will support a sustained healthy weight. "We work with each participant individually, helping them understand what got them into the condition they're in and what they can do to get back to where they want to be," Winet said. "We go beyond just weight loss issues. We offer skills to maximize success in all parts of life. In Doug's case, he not only wanted to shed 100 pounds. He also wanted to maintain normal blood pressure and cholesterol without medications and get back to enjoying a more active lifestyle while improving his job performance."

At the completion of the program, Doug's cholesterol dropped from 274 to 165, his triglycerides from 555 to 100 and blood pressure from 159/91 to 122/69. He was also able to stop taking his blood pressure medication, and he learned to add

foods that improve his lipid profile and omit what had not been working. "Doug was always an inspirational person and now he knows exactly how he creates his habits and which choices brought on disease," Winet said. At New Directions we promote the 'art of health' and personalize the best from science to each participant's unique body and mind to support them in creating their own success."

"I really can't say enough about what this program has done for me," Doug said. "It was simple to follow the plan we designed, and the group meetings were great. I haven't felt this good in years, and I now know what it will take to stay this way."

**For more information on the New Directions Wellness Clinic or to participate in a free orientation, call (574) 523-2750.**

# New 128-Slice CT Scanner Arrives at Elkhart General Hospital

Elkhart General Hospital now offers the area's first and only 128-slice Computed Tomography (CT) scanner. Considered the next evolution in radiology technology, the new scanner provides 2D and 3D imaging for the most accurate and confident diagnoses in areas such as Cardiology, Oncology and Neurology among others.

According to Board Certified Diagnostic Radiologist, Samir Patel, MD, not only does the scanner contribute to improved access to equipment within Elkhart General, it also provides safer patient care as the technology allows for lower doses of radiation over time.

"The new 128-slice CT scanner delivers unprecedented image quality and detail at the lowest possible radiation dose to the patient," said Dr. Patel. "This scanner also provides the fastest, least-invasive and highest-resolution scans in the region."

Dr. Patel also points to the location of the scanner in the Hospital's Emergency Department (ED) as an essential setting for the new equipment. "More than 50 percent of CT scans at Elkhart General originate in the Emergency Department," Dr. Patel said. "If patients are brought in through the ED and it is determined that they need a scan, the CT scan can be performed right there instead of in the Radiology Department. This translates into a faster scan, less transportation time and better patient care."

World-renowned medical institutions, such as the Mayo Clinic and Johns Hopkins Hospital have also adopted this technology because of its speed, reduced radiation doses and application potential. With the addition of the scanner, Elkhart General will provide the same world-class technology to Elkhart and the surrounding communities. Applications include, but are not limited to diagnosing cancer, evaluating injuries to skeletal structures and detecting and diagnosing vascular disease.

**For more information about the new 128-slice CT Scanner, please visit [egh.org](http://egh.org) or call (574) 523-3303.**



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