

LIFE & HEALTH[®]

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HEALTHFUL LIVING

Meet a couple of nice fellows

St. Francis physicians earn prestigious distinction

THE term *fellow* conjures up various images in the minds of different audiences. For physicians, being a fellow means they have distinguished themselves among their colleagues and in their communities by their service to their medical specialties.

Sally Bomar, MD, and J. Michael Feuerbacher, MD, family practitioners with St. Francis Family Health Care, earned the Degree of Fellow of the American Academy of Family Physicians (AAFP) in October 2009.

Dedicated to service

The fellowship application requires a minimum of six years' membership in the AAFP, extensive continuing medical education (CME), participation in public service programs outside of medical practice, conducting original research and serving as a teacher in family practice. Applicants are awarded points in various sections of the submission, and a minimum of 100 points is necessary to obtain the degree.

"I received points for mentoring medical students, providing a wide



▲ NOTEWORTHY PHYSICIANS: Sally Bomar, MD, and J. Michael Feuerbacher, MD, Fellows of the American Academy of Family Physicians.

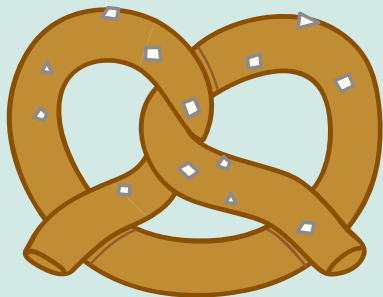
scope of practice, completing CME, serving in a rural area and doing community activities," Dr. Bomar says.

Both physicians say it was worth the time and effort to apply for the degree.

"It shows our commitment to family medicine," Dr. Feuerbacher says. "It also recognizes that we have stayed up-to-date on medicine in an environment that changes so rapidly."

—Continued on page 8

EVERY LITTLE THING



There's always peanuts and Cracker Jack, but many **BALLPARKS** now offer a variety of food items. Try scouting out some healthful fan fare, such as low-fat frozen yogurt, pretzels, lemon ices and even fresh fruit.

—American Dietetic Association

Be careful with an **INJURED PET**, or you could wind up getting hurt too. If your pet is hurt, it's likely scared—and fear can make an animal unpredictable. Your normally gentle pet may surprise you by biting or scratching, so be cautious as you try to help.

—American Veterinary Medical Association

TV TIPOVERS injure about 3,000 children in this country each year. Protect children in your home by making sure that TV stands are stable and not top-heavy—and that goes for bookcases and dressers as well. Furniture that a child might be tempted to climb should be fastened securely to the floor or wall.

—Safe Kids USA

Chest pain: Is it angina?

You might think of angina as an SOS from your heart.

Angina is chest pain due to heart disease. It occurs when the heart muscle doesn't get enough blood. Usually it lasts a short time and occurs because the heart's arteries are clogged or narrowed. Angina is a sign that you may be at risk for a heart attack.

According to the American Heart Association, symptoms of angina include:

- ▶ Pressure, fullness, squeezing or pain in your chest.
- ▶ Discomfort in your jaw, neck, shoulder, back or arm.

Because these can also be heart attack signs, don't wait more than a few minutes to dial 911 if symptoms continue.

If the symptoms do pass within a few minutes, you should still see a doctor because it's important to find out what is causing the discomfort. If you are diagnosed with angina, your doctor can help you manage the symptoms through lifestyle changes or medicines.

Do you see clearly? Blurry vision could be a sign of cataracts

It's disturbing when vision blurs, colors seem faded and headlight glare makes it hard to drive at night. It's also time to see your eye doctor.

These and other symptoms—double vision in one eye or needing more light to read, for instance—could be due to cataracts.

Cataracts are both common and treatable. They can develop at any age, but the most common type is age-related, occurring after age 40. Other factors—such as smoking, sun exposure and diabetes—can also contribute to cataract development.

A cataract is a clouding of the eye's lens. One or both eyes can be affected. In most cases, cataracts develop gradually over a period of years. Changing your eyeglass prescription and wearing sunglasses to



In most cases, angina is generally predictable—what doctors call stable angina. It usually occurs when the heart's need for oxygen increases. That's why it's often triggered by exertion, such as walking uphill, but may ease after a few minutes if you rest or take angina medication.

Angina can also occur in extreme temperatures or if you're stressed.

If the pattern of your angina changes, however, it may be a sign of something more serious. For example, angina that occurs when you're resting or doesn't get better with rest or medicine might be unstable angina. That's an emergency, and you should dial 911.



screen out ultraviolet (UV) light may slow the progression.

Surgery can clear things up. In some cases, your doctor may recommend surgery to remove the cloudy lens and replace it with a clear plastic lens. The implanted lens requires no special care and becomes a permanent part of the eye.

According to the American Academy of Ophthalmology, cataract surgery improves vision more than 95 percent of the time, unless there are problems with other parts of the eye.

Putting asthma on the sidelines

Your child doesn't have to quit playing sports just because exercise brings on asthma symptoms.

Millions of people have exercise-induced asthma (EIA), including many very active people. It's estimated that 1 in 5 elite athletes has it, some of whom have gone on to compete in the Olympics.

EIA occurs in people whose airways are unusually sensitive to changes in temperature and humidity. The combination of strenuous activity and breathing cold, dry air can lead to coughing, wheezing, chest tightness and shortness of breath.

Symptoms can occur within 5 to 20 minutes of exertion.

Not realizing they have asthma, kids with EIA might withdraw from physical activity rather than appear slower or less athletic than their peers.

If you suspect your child may have EIA, take him or her to the doctor for an evaluation. Medication and a treatment plan can get your child back up and running.

Source: American Academy of Allergy, Asthma & Immunology



Have a plan. Parents can download an asthma action plan at www.aaaai.org/patients/resources.



Your end-of-life wishes: Take time to put them in writing

It's a topic that's well worth discussing, even if it isn't easy.

Now might be the time to decide the kind of care you'll want at the end of your life—and to share those wishes with others in case you become unable to do so later.

For example, documents called advance directives let you say what kind of care you want and don't want if you become unable to communicate your decisions because of a serious illness or injury. You can state your preferences about types of care in specific situations, such as the use of a breathing machine or a feeding tube.

You also can name someone you trust, such as a family member, to make medical decisions on your behalf if you are unable to communicate.

Planning ahead can be important, even if you're healthy. You might start by talking with your family and your doctor.

For more on preparing an advance directive, go online to www.putitinwriting.org.

Sources: American Academy of Family Physicians; American Hospital Association

WOMEN AND STRESS

Nurturing your well-being

We all have ups and downs in life. Even some of the very things that bring happiness and satisfaction into our lives, such as close relationships or challenging work, can stress our mental health.

And while we usually recover, sometimes it can be hard to bounce back. Living with chronic stress can lead to depression and anxiety and contribute to other health issues, such as sleep problems and headaches.

Enjoy life again. The National Women's Health Information Center offers the following stress-relief advice:

- ▶ Get enough rest. Sleep helps both your body and your mind. It helps you re-energize and fight off illness. Aim for seven to nine hours of sleep every night.
- ▶ Move more. Physical activity is one of the best ways to reduce tension. Exercise helps your body release certain chemicals that help relieve stress and improve your mood.
- ▶ Make time for yourself. No matter how busy you are, try setting aside 15 minutes a day to do something for yourself.
- ▶ Ask for help. If you're feeling overwhelmed, know that help is available. Treatments such as counseling or medication can help you feel better and get back to enjoying life again. Talk to your doctor for more information.



What screenings are right for you?

ALONG with seeing your doctor regularly, getting recommended health screenings is one of the most important things you can do to stay healthy. Screening tests can help find diseases early, when they're often easier to treat.

Health screenings for most adults are intended to begin at certain ages and repeat at set times.

If you are at risk for a condition such as diabetes, cancer, heart disease or high blood pressure—because of

your family history or other factors—you may need to be tested earlier or more often than what is shown here. The recommendations in the following charts are for most healthy adults at average risk.

Talk to your doctor about what screenings you should have and when.

You may want to keep track of the health screenings you've had by keeping a list. Include the test date, the results and when you need to be tested again.

Call St. Francis Family Health Care at **660-562-2525** to make an appointment to discuss your screening needs.

| EVERYONE | Ages 18–39 | Ages 40–49 | Ages 50–64 | Ages 65 and older |
|---|---|--|--|--|
| Blood pressure | At least every 2 years | At least every 2 years | At least every 2 years | At least every 2 years |
| Cholesterol | Start at age 20; discuss with your doctor | Discuss with your doctor | Discuss with your doctor | Discuss with your doctor |
| Colorectal health: one of three methods | | | | |
| Fecal occult blood test | | | Yearly | Older than 75, discuss with your doctor |
| Flexible sigmoidoscopy (with fecal occult blood test) | | | Every 5 years | Older than 75, discuss with your doctor |
| Colonoscopy | | | Every 10 years | Older than 75, discuss with your doctor |
| Diabetes | Discuss with your doctor | Start at age 45, then every 3 years | Every 3 years | Every 3 years |
| HIV test | At least once to find out your HIV status | At least once to find out your HIV status | At least once to find out your HIV status | At least once to find out your HIV status |
| Skin exam | Monthly self-exam; by a doctor as part of a routine full checkup starting at age 20 | Monthly self-exam; by a doctor as part of a routine full checkup | Monthly self-exam; by a doctor as part of a routine full checkup | Monthly self-exam; by a doctor as part of a routine full checkup |
| Sexually transmitted infections | Discuss with your doctor | Discuss with your doctor | Discuss with your doctor | Discuss with your doctor |



| WOMEN | Ages 18–39 | Ages 40–49 | Ages 50–64 | Ages 65 and older |
|----------------------|---|--------------------------|--|--|
| Breast health | | | | |
| Mammogram | | Yearly* | Yearly* | Yearly* |
| Clinical breast exam | At least every 3 years starting in your 20s | Yearly | Yearly | Yearly |
| Bone density | | Discuss with your doctor | Get a bone mineral test starting at age 60 if you are at increased risk; discuss risk with your doctor | Get a bone mineral density test at least once; discuss repeat testing with your doctor |
| Pap test | Every 1 to 3 years starting at age 21 | Every 1 to 3 years | Every 1 to 3 years | Discuss with your doctor |
| Pelvic exam | Yearly | Yearly | Yearly | Yearly |

| MEN | Ages 18-39 | Ages 40-49 | Ages 50-64 | Ages 65 and older |
|---|---|---|---|---|
| Abdominal aortic aneurysm | | | | Once between ages 65 and 75 if you have ever smoked |
| PSA blood test (prostate-specific antigen; not routinely recommended) | | Discuss pros and cons with your doctor starting at age 45 if at high risk | Discuss pros and cons with your doctor | Discuss pros and cons with your doctor |
| Testicular cancer | Discuss with your doctor; consider monthly self-exams | Discuss with your doctor; consider monthly self-exams | Discuss with your doctor; consider monthly self-exams | Discuss with your doctor; consider monthly self-exams |

Charts compiled with information from the American Cancer Society; American Diabetes Association; U.S. Department of Health and Human Services
 *Mammography screening recommendation from the American Cancer Society. Discuss what's best for you with your doctor.

Do children need regular health screenings too?

Kids do need their health monitored—and most get what they need through their regular checkups.

Routine visits to the doctor and staying up-to-date with immunizations are two of the best ways to keep children healthy. Infants and children need frequent checkups until they are 2 years old. After 2 years of age, most children need a checkup only once a year. Ask your child's doctor what an appropriate schedule is for your child.

These visits allow doctors to evaluate a child's height, weight, body mass index, vision and hearing—and to detect any problems before they become serious.

During a checkup, your child's doctor can:

- ▶ Discuss and track your child's growth, development and behavior.
- ▶ Update your child's immunizations.
- ▶ Answer questions and offer advice on how to keep your child healthy and safe.

Ask your child's doctor if your son or daughter needs any additional health screenings. If your child is at risk for diabetes, high cholesterol or other conditions, your doctor may recommend other tests.

Source: American Academy of Pediatrics



4 steps to strong bones

TO keep your bones healthy for a lifetime, you need to give them a little help.

Building strong bones in childhood and adolescence can help counter the bone loss that begins around age 30.

Osteoporosis is a largely preventable disease that causes bones to lose density and sometimes break. The disease is more common in women than in men.

Ideally, osteoporosis prevention begins when you're young. But it's never too late to adopt the following

bone-preserving strategies:

1 Bear some weight. Activities that force your bones to bear weight—such

as jogging, walking, gardening, stair-climbing, hiking, playing tennis or lifting weights—can help keep bones strong.

2 Boost calcium and vitamin D. These nutrients are key to bone health. Good food sources of calcium include milk, yogurt, broccoli and

orange juice with added calcium.

Food sources of vitamin D include fortified milk, egg yolks, saltwater fish and mushrooms.

Vitamin D is sometimes referred to as the sunshine vitamin. You can get enough of this vitamin by exposing some skin to the sun for 10 to 15 minutes two to three times a week. But since UV rays increase skin cancer risk, it's still best to limit your sun exposure.

Check with your doctor about how much calcium and vitamin D you need; you may need supplements.

3 Don't smoke. Smoking damages bones. In women, smoking lowers levels of estrogen, a hormone that protects women's bones until

menopause.

4 Put your bones to the test. If you're

65 or older, you should have a bone density test. Depending on your risk, you may need screening at an earlier age. If the test reveals osteoporosis, some medicines can treat bone loss.

Call **660-562-7907** to learn about bone mineral density testing.

Sources: National Osteoporosis Foundation; National Women's Health Information Center

GESTATIONAL DIABETES

Taking care— of you and baby

DURING pregnancy, sometimes there is a change in the way the body regulates blood glucose (sugar). This causes a condition known as gestational diabetes.

This type of diabetes is one of the most common health problems for pregnant women, according to the National Institutes of Health. It develops when the body doesn't make enough insulin—a hormone that moves glucose out of the bloodstream and into cells.

Without enough insulin, glucose



builds up in blood. If this process is not controlled, it can lead to serious health problems for women and babies. That's one of the reasons

prenatal care is so important. If it's caught and treated, gestational diabetes can be well-controlled and health problems can be avoided.

Testing for gestational diabetes by your doctor usually occurs 24 to 28 weeks into your pregnancy.

Staying healthy

If you have this condition, you will need to:

- ▶ Test your blood sugar level.
- ▶ Follow a diet that helps control blood sugar.
- ▶ Get regular physical activity.
- ▶ Pay close attention to your weight.
- ▶ Keep daily records of your diet, physical activity and glucose levels.
- ▶ Take medicines, such as insulin, as prescribed.
- ▶ Have your blood pressure checked as your doctor recommends.



SURGERY AND SENIORS

Your care comes first

IF you need surgery, it's certainly natural to feel some concern. And if you're an older adult, you might wonder how your age will affect how you fare.

Each year about 20 percent of people 65 and older have surgery, according to the American Geriatrics Society (AGS). And here's something reassuring that it reports as well: Because of medical advances, surgical risks for older adults have declined steadily over the last 40 years.

Caring for you

If you're facing surgery, you'll want to be sure you have all the information you need from your doctor so that you understand your particular procedure, the recovery process and the risks involved.

And if you choose to have surgery at our facility, we want you to know that we do everything we can to keep you comfortable and safe.

The consent forms and questionnaires you fill out in preparation for surgery help guide medical decisions and keep everyone who is caring for you informed. Any pre-surgery tests that are performed are done to make sure your heart, lungs and overall health are strong enough for surgery.

We employ practices to help ensure patient safety—measures to reduce the risk of complications and medical errors.

What you can do

If you're having surgery, there are things you can do to protect yourself and recover as quickly as possible. The AGS offers these suggestions:

▶ Stop smoking at least eight weeks before a planned surgery. Smoking affects your body's ability to heal.

- ▶ Follow your doctor's advice regarding activity and physical therapy. Lack of activity after surgery can lead to weakened muscles, as well as a higher risk of some complications.
- ▶ Keep pain controlled. Medications and other therapies can manage it. Don't try to tough it out; uncontrolled pain may slow your recovery.
- ▶ Take medicine as directed. Some may be prescribed to help prevent infection, blood clots or other potential problems. Know what medicines you take and why.
- ▶ Ask what you can do to keep your recovery on track once you get home. Arrange for home health care or other help if needed.

Finally, if you have questions about your care, please don't hesitate to ask. Our caring staff is here to help.



▲ Feeling better! Ask your doctor for specifics on how to keep your recovery on track when you return home.

Same-day procedures: Outpatients recovering at home

Not every surgery requires an overnight stay in the hospital.

In fact, it's estimated that upwards of 70 percent of all procedures performed today are outpatient surgeries—that is, the patient goes home that same day.

Some of the most common outpatient procedures include:

- ▶ Cataract and other eye surgeries.
- ▶ Ear tube surgery.
- ▶ Hernia repair.
- ▶ Removal of tonsils and adenoids.
- ▶ Gallbladder removal.

Even some cardiac procedures, such as insertion of a pacemaker, may be done on an outpatient basis.

Because of surgical advances, many procedures can be done less invasively

(with smaller incisions than with traditional surgery).

These procedures typically have a faster recovery time and tend to cost less, since there is no overnight stay.

Still, an outpatient procedure is surgery, so ask your doctor to explain the risks and benefits. Find out what you can expect during recovery.

Here are a few other suggestions:

- ▶ On the day of surgery, leave jewelry and other valuables at home.
- ▶ Arrange for someone to drive you home after the procedure.
- ▶ Be sure to get written instructions for home care, as well as a number to call if problems arise.

Source: Agency for Healthcare Research and Quality

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Meet a couple of nice fellows

—Continued from page 1

Complete care

Family practitioners provide continuing and comprehensive health care to individuals and families to diagnose and treat a wide variety of illnesses in patients of all ages. Their training includes adult medicine and geriatrics, pediatrics, women's health, obstetrics, preventive medicine, and behavioral science. Special emphasis is placed on primary care for families and using consultants and community resources when appropriate.

Homegrown hospitality

Drs. Bomar and Feuerbacher also provide homegrown experience.

Born and raised near Mound City, Mo., Dr. Bomar attended the University of Missouri School of Medicine at Columbia before completing her residency at Truman Medical Center East in Kansas City.

Dr. Feuerbacher calls Wathena, Kan., his hometown. He attended the University of Iowa College of Medicine in Iowa City and returned to the area to complete his residency at the University of Missouri-Kansas City.

In conjunction with the AAFP's



▲ SHARING KNOWLEDGE: J. Michael Feuerbacher, MD, mentors medical students as part of his commitment to family practice.

▶ A WIDE RANGE OF CARE: Sally Bomar, MD, sees patients of all ages in her family practice.

annual meeting, Drs. Bomar and Feuerbacher were two of only seven physicians from Missouri honored at a convocation ceremony at the Scientific Assembly in Boston.

“Our patients may not realize the distinction, but they will receive the benefits of our knowledge and expertise as fellows and our service to family medicine,” Dr. Feuerbacher says.

