

HEALTHWISE

THE MAGAZINE OF METHODIST HOSPITALS



METHODIST
CARE FIRST

Immediate Care & Much More!

In this issue:

- Your leg pain may be a sign of peripheral artery disease
- Manage your pain without using potentially addictive opiates
- Low-dose CT lung screens now covered by most insurance plans
- ...and much, much more.



METHODIST
HOSPITALS

LEADING THE WAY TO BETTER HEALTH.

FROM THE CEO



Forging meaningful community partnerships is an often overlooked key to delivering quality healthcare. These partnerships can help institutions, such as Methodist Hospitals, improve access to care, patient safety and the quality of care.

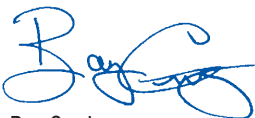
For example, Methodist Hospitals was proud to partner with the City of Crown Point to open the first Methodist CareFirst immediate care clinic at the Crown Point Sportsplex in July. Thanks to the support and cooperation we have received, that new facility will soon offer sports medicine and rehabilitation services in addition to immediate care services in the heart of Crown Point.

Methodist Hospitals has also teamed with the Indiana Hospital Association and the Governor's Task Force on Drug Enforcement, Treatment and Prevention to develop guidelines for prescribing potentially addictive opioid medications in our Emergency Departments. As anesthesiologist and pain specialist Dr. Tarek Shahbandar explains in his article on page 7 of this issue of HealthWise, opiate addiction has reached epidemic proportions across the entire nation, including Northwest Indiana. These new guidelines and new restrictions on the prescription of opiate-based pain relievers are intended to address this problem.

Our emphasis on attracting and retaining the very best healthcare professionals to help us serve Northwest Indiana continues. Please take a moment to meet two dynamic, accomplished specialists who joined our Methodist Physician Group this summer. Our new spine and scoliosis surgeon, Dr. Ashish Patel is profiled on page 4; and Dr. Omar Perez, our new orthopedic surgeon and sports medicine specialist, is featured on page 5.

There is much more useful information in this issue of HealthWise. I hope you enjoy it.

Yours in good health,



Ray Grady
President and CEO
Methodist Hospitals

Methodist Hospitals of Gary and Merrillville Indiana has over 800 physicians who collectively constitute the medical staff of the Methodist Hospitals. These physicians use the services of Methodist Hospitals to serve the needs of the community. Most physicians are independent contractors who are self-employed or employed by outside agencies or corporations, and they are not subject to the direct control or supervision of Methodist Hospitals in providing care to individual patients. Physician performance is overseen by the organized medical staff working through by-laws, policies and procedures. Please feel free to ask your physician whether his status is as an independent practitioner or as an employed physician.

Now Open in Crown Point!

Illnesses and injuries keep no timetable. Health care issues arise at all hours, including evenings and weekends. When you suffer a minor injury or if your child is under the weather, you want care...first...without visiting an emergency room or waiting for your doctor's office to open in the morning.

That's why Methodist Hospitals is opening a network of Methodist CareFirst clinics in Northwest Indiana. The first CareFirst clinic is now open in Crown Point on the Crown Point Sportsplex campus at 1275 E. North Ave.

Walk-ins are welcome and no appointments are required at Methodist CareFirst, which is staffed by experienced clinicians who offer immediate care and much more. Because the need for health care arises at all times, Methodist CareFirst is open seven days-a-week.

The CareFirst in Crown Point is the first of three immediate care clinics that will bring convenient, cost-effective care to Northwest Indiana. Methodist Hospitals will open CareFirst immediate care clinics in Merrillville and Gary in the near future.

"Our mission is to help keep the people we serve in Northwest Indiana healthy and well," said Methodist Hospitals President and CEO, Raymond Grady. "To accomplish that, we're expanding beyond our hospital walls, and making access to care more convenient."

Immediate Care and Urgent Care

Immediate Care Centers, such as Methodist CareFirst, typically offer walk-in access to address acute, non-emergent, non-urgent, and non-life threatening issues. This care is much like the attention one would receive



Meet the Methodist CareFirst – Crown Point staff (left to right): Catherine Lucas, Medical Assistant; Kimberly Innes, Director; Cynthia Jerry, Customer Service Representative; Lena Anderson, MSN, FNP-BC, Nurse Practitioner; David Howe, Practice Manager; Anne Schilling, MSN, FNP-BC, Nurse Practitioner; Ryan Kemp, Medical Assistant; Alexis Pagnusat, Radiology Technologist; and Patricia Hardesty, Customer Service Representative.

Methodist **CareFirst**: Immediate Care and Much More

from a primary care physician, but it's designed to be more convenient and accessible to the patient.

According to the Urgent Care Association of America, Urgent Care Centers treat minor or acutely rising medical conditions that patients feel require immediate attention but that are not medical emergencies.

The term "urgent care" may be misinterpreted. These facilities are generally not intended to handle potentially life-threatening emergencies. Medical emergencies, including those involving trauma or resuscitation, should be treated in hospital emergency departments.

The Care at CareFirst

Methodist CareFirst is equipped to offer physical exams,

X-rays, laboratory services, EKGs, immunizations and acute illness and injury care.

The CareFirst staff treats colds, fevers, sore throats, flu, upper respiratory infections and sinus infections. They also treat nausea, vomiting, diarrhea and food poisoning, as well as dehydration, earaches and ear infections, urinary tract infections and rashes. The Methodist CareFirst also treats fractures, sprains, strains, as well as cuts and minor burns.

The CareFirst facility in Crown Point will soon offer physical therapy and sport medicine services and house physician offices.

Don't wait. Get better at Methodist CareFirst.

**METHODIST
CARE FIRST**
1275 East North Street
CROWN POINT
219-663-2793



YOUR GUIDE TO



Knowing where to go is an important first step when you need health care.

Emergency Room **VS** Immediate Care Center

Visit the **emergency room** or call 911 to treat serious or life-threatening illnesses or injuries. Such as...

- Chest Pain
- Compound fractures (bone visible)
- Confusion
- Fainting
- Fevers in infants less than two months old
- Head injury with loss of consciousness
- High fever
- Ingestion of obstructive objects
- Ingestion of poisons
- Palpitations
- Pneumonia
- Seizures
- Severe abdominal pain
- Severe asthma attack
- Severe burns
- Severe headaches
- Shock
- Traumatic injuries
- Unconscious or catatonic state
- Uncontrollable bleeding

Visit an **immediate care center**, instead of visiting an ER, to get treatment for illnesses or injuries that are not life-threatening, and do not appear to pose serious health risks. Such as...

- Allergies
- Asthma attack (minor)
- Bronchitis
- Colds, flu, fever
- Cough
- Dizziness
- Ear infection
- Insect bites
- Migraines
- Minor burns
- Minor cuts/lacerations
- Minor head injury
- Nausea
- Pink eye
- Rash
- Simple fracture
- Sore throat
- Sprains and strains
- Stitches
- Urinary tract infections

Not sure? When in doubt, always go to the Emergency Room.

Improving Spinal Alignment:

Treating Adult Scoliosis

Scoliosis is well-known as the most common spinal condition among children and adolescents. However, many people do not know that scoliosis affects adults in greater numbers. In fact, a 2005 study conducted by Frank Schwab, MD, at Maimonides Medical Center in New York found scoliosis in two-thirds of people over the age of 60.

Adult scoliosis, better known as Adult Spinal Deformity, is often caused by arthritis of the spine, a degeneration of the facet joints, which are small, stabilizing joints around the vertebrae. Adult Spinal Deformity can result in a side-to-side curvature of the spine or a flattened back leading to a stooped posture.

When I first entered the orthopedics field, I was interested in spinal deformities and their effects on young people. It was the reason I chose a career in spine surgery. I was fascinated to learn that scoliosis not only affected the growing population, children and adolescents, but also affected the aging population. Unfortunately, spinal deformities in the adult population often result in symptoms of pain and a loss in functional capacity which may reduce quality of life.

A combination of the degeneration of the spine and scoliosis may cause pressure on nerves and possibly even the entire spinal cord. This can lead to weakness, numbness, and leg pain. People with adult scoliosis are often unable to walk short distances or even maintain an upright posture for short periods of time without intense pain.

People in their 60's and 70's are much more active today than previous generations. Understandably, they expect to continue to live active, pain-free lives for many years, even

after retirement. Form, function and the ability to continue doing the things they enjoy are vitally important to them. As a result, it's incumbent upon those of us in health care to help them maintain their quality of life.

Fortunately, adult scoliosis is typically treated with conservative, non-surgical solutions. In most cases, we are able to develop muscles that keep patients upright and stabilize their spinal segments to reduce their pain and improve their function through back-strengthening and postural exercises. Surgical options are available for the smaller group of patients in which conservative treatments have failed.

Most of my training and research has focused on pediatric and adult spinal deformities. That gives me a unique perspective and ability to treat these patients through conservative and surgical methods.

At Methodist Hospitals, which has the staff and facilities required to effectively treat patients suffering from all types of spinal issues, we take a coordinated team approach to delivering safe, effective and comprehensive treatment. I'm especially gratified to have the opportunity to collaborate with Dr. Elian Shepherd, who has served Northwest Indiana with distinction for many years, to treat patients with spine and spinal deformity issues.

Ashish Patel, MD, is a fellowship-trained Methodist Physician Group spine surgeon.



MEET **Dr. Ashish Patel**

Methodist Physician Group **Spine and Scoliosis Surgeon**



Fellowship 2015-16

Spine and Scoliosis Surgery Fellow
Hospital for Special Surgery, New York

Residency 2010-15

Orthopedic Surgery
SUNY Downstate Medical Center, Brooklyn, NY

Research Fellowships 2007-10

Orthopedic Surgery – Spine Division
New York University Hospital for Joint Diseases, New York, NY

Awards

Co-Chief Fellow – Hospital for Special Surgery
2015-16

Academic Chief and Orthopaedic Resident
of the Year – SUNY Downstate Medical Center
2014-15

Medical Affiliations

American Medical Association
AOSpine Member
Brooklyn Orthopedic Association
North American Spine Society
Scoliosis Research Society Member

Academic Highlights

Received SRS Grant (\$25,000) for research
on the topic of scoliosis

Co-authored 20 Peer Reviewed Articles

Co-authored 4 textbook chapters on the topic
of Spine and Spinal deformity surgery

Co-presented 36 podium presentations at
National and International conferences

Office:

Northwest Indiana Orthopedic-Spine Center
at Methodist Hospitals
Southlake Campus – Pavilion A,
101 E. 87th Ave., Merrillville
219-738-6670

Chronic Shoulder Pain Affects the Young and Not-So-Young

When shoulder pain lasts for more than six months it is considered to be chronic. Before treating this pain, we must first rule out neck problems, because neck issues can cause pain to the shoulder.

The causes of chronic shoulder pain are varied and tend to differ in patients...often depending upon whether they are under or over age 40. Younger, more active patients are apt to develop labral tears and muscle strains, while older patients are prone to rotator cuff tears, acromioclavicular (AC) joint arthritis and shoulder arthritis.

Treatment begins with conservative, non-surgical measures for both groups.

Overhead athletes such as tennis players, volleyball players and pitchers can develop labral tears due to the extreme motions of their shoulder joints. This is a tear in the soft fibrous tissue rim that helps stabilize the joint.

Our first line of treatment is physical therapy to strengthen the muscles around the shoulder joint. Patients may choose to continue the exercises on their own after a few sessions. This type of tear can be managed by certain injections as an adjunct to the physical therapy protocol.

A common complaint among patients over 40 is shoulder weakness with worsening pain, which may be symptoms of rotator cuff tears. An MRI can confirm a rotator cuff tear. Depending on the severity of the tear, we can begin treatment with steroid injections followed by a six weeks of physical therapy and rehabilitation.

If therapy fails, we proceed to arthroscopic rotator cuff repair, followed by range-of-motion exercises and then strengthening. The shoulder may begin to feel normal in one year.

Arthritis is the progressive loss of cartilage and it can develop in the shoulder joint. This can cause motion loss and chronic shoulder pain as this condition worsens over time. We start managing it with rehabilitation, strengthening exercises and steroid injections.

In extreme cases when debilitating shoulder pain does not respond to treatment and significantly impacts a patient's quality life, we suggest that those patients consider shoulder replacement. This is obviously a major surgery and not for everyone.

Do you have undiagnosed chronic shoulder pain? The sooner you address it, the easier it will be to treat through conservative, less invasive means.

Omar Perez, MD, is a Methodist Physician Group Orthopedic Surgeon and Sports Medicine Specialist.



MEET Dr. Omar Perez

Methodist Physician Group Orthopedic Surgeon and Sports Medicine Specialist



Fellowship
Orthopaedic Sports Medicine
Baylor/University of Texas, Houston, TX

Residency
Orthopaedic Surgery Program
University of Puerto Rico, Medical Sciences Campus

Research Fellowships
Orthopaedic Research Fellowship
University of Puerto Rico, Medical Sciences Campus

Medical Affiliations
American Academy of Orthopaedic Surgeons
American College of Surgeons
American Medical Association
American Orthopaedic Society of Sports Medicine

Sports Medicine Affiliations
NFL Football, Houston Texans
NCAA Football, University of Houston
Major League Baseball, Houston Astros
NBA Basketball, Houston Rockets
NCAA Basketball, University of Houston
MLS Soccer, Houston Dynamo

Office:
Northwest Indiana Orthopedic-Spine Center
at Methodist Hospitals
Southlake Campus – Pavilion A
101 E. 87th Ave., Merrillville
219-738-6670

Your Leg Pain May Be a Symptom of Peripheral Artery Disease



Dr. Mihas Kodenchery

“When detected early, we treat PAD conservatively.”

Many older Americans experience leg pain when they walk even short distances. If the cause of that pain is peripheral artery disease (PAD), failure to address it may put them at increased risk of leg amputation, heart attack, stroke or worse.

PAD is the most common cause for arterial claudication (pain while walking). It is the result of plaque build-up inside the artery, which creates a blockage in the blood vessels that supply blood to your feet. This can significantly limit your physical activity, leading to weight gain, obesity and other related health hazards.

These blockages aren't limited to the lower extremities. More than half of those with such circulatory issues also have coronary or cerebral artery disease, which put them at higher risk for heart attack and stroke.

The build-up of plaque and eventual development of PAD are often associated with uncontrolled diabetes, high cholesterol, high blood pressure, physical inactivity, a high-fat diet, and/or smoking.

The initial symptoms of PAD include pain in the calf or thigh muscles during activity, foot pain or a non-healing leg wound. Eventually, the pain is constantly present, and relieved only when the legs are dangled over the side of the bed. Left untreated, PAD may progress to gangrene, loss of leg and sepsis, a life threatening infection.

Treating PAD

When detected early, we treat PAD conservatively. Medications, exercise, dietary changes and

smoking cessation help. We also intensify treatment of high blood pressure, high cholesterol and uncontrolled diabetes when we find PAD.

Advanced cases of PAD call for invasive treatments.

Atherectomy is a novel, game-changing PAD treatment procedure, which is routinely performed in Methodist Hospitals' catheterization lab. We insert devices through minute pin-hole sized catheters to scrape, grind or laser the plaque away. Then, if needed, we use a balloon and stent in the affected vessel.

New Technologies

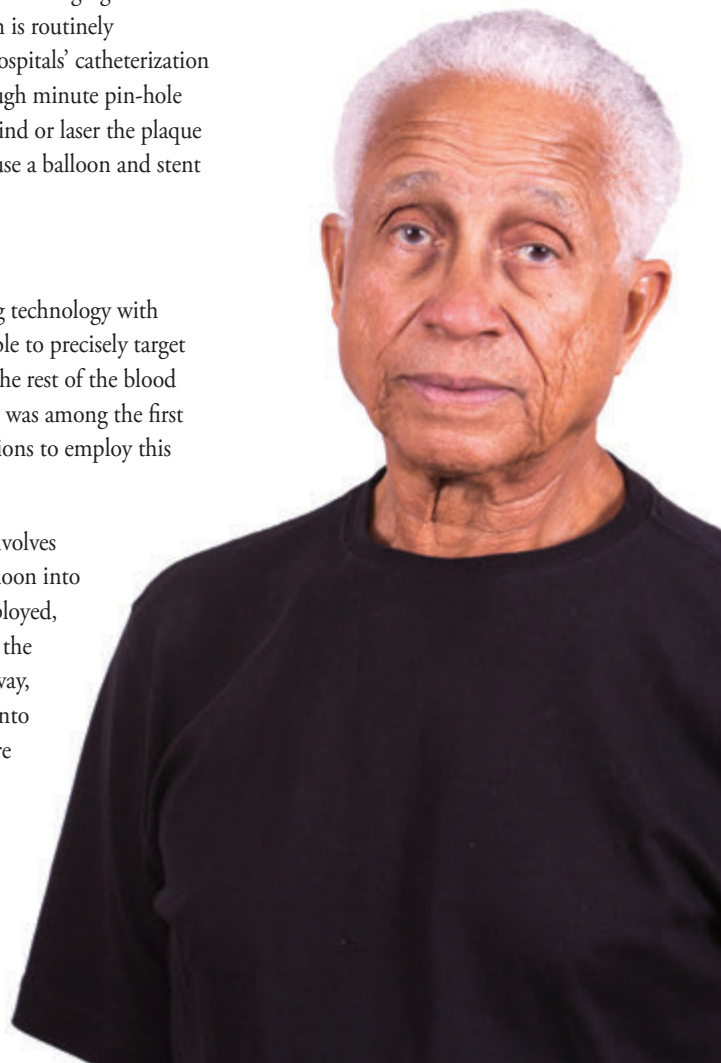
By combining new imaging technology with atherectomy, we are now able to precisely target plaque without damaging the rest of the blood vessel. Methodist Hospitals was among the first Northwest Indiana institutions to employ this technology.

Another new technology involves inserting a drug-coated balloon into the blood vessel. When deployed, the balloon not only opens the vessel and pushes plaque away, it also releases medication into the vessel wall to slow future plaque growth.

Preventing repeated plaque build-up is key to avoiding the PAD complications. Your cardiologist can prescribe medications

and perform procedures, but you must do your part, too. That means eating a healthy diet, exercising regularly, not smoking and controlling any other contributing illnesses.

Mihás Kodenchery, MD, is a Methodist Physician Group Interventional Cardiologist.



What can your legs tell you about your heart? **FREE PERIPHERAL ARTERY DISEASE SEMINAR**

Presented by Dr. Mihás Kodenchery

Know your risk factors. Understand your chances of developing PAD, and learn about effective medications and lifestyle choices you can make to help prevent or manage PAD.

Community Invited.

FREE Refreshments & Raffle!

Space is Limited! Reserve your seat today.
Call 1-888-909-3627 or visit MethodistHospitals.org

Thursday, October 6

4:00 pm - FREE PAD Risk Assessments
5:00 pm - PAD Presentation

Radisson Star Plaza, Celebrity East Ballroom
800 E. 81st Ave., Merrillville

Exploring New Avenues of Pain Management

Methodist Hospitals is Helping to Reverse Reliance on Prescription Opioid Medications.



Dr. Tarek Shahbandar

“There’s no reason to live with pain. A qualified pain specialist will help you explore safe and effective options to reduce your pain.”

You don’t have to endure chronic pain that stands between you and what you love to do and diminishes your quality of life. At the same time, you don’t necessarily have to use potentially addictive opiates to get relief.

Methodist Hospitals offers a wide range of opiate-free pain management alternatives that increase function and reduce one’s sense of suffering.

Opiate addiction has reached epidemic proportions, driven in part by prescription opioid pain relievers. Deaths from prescription opioids such as oxycodone, hydrocodone and methadone, have quadrupled since 1999. In response to this crisis, the State of Indiana recently adopted increased restrictions on the prescription of opiate-based pain relievers and strengthened existing laws governing these substances.

New specialized techniques, technologies and medication alternatives are enabling us to lower opiate medication doses, avoid opiate dosage increases and often eliminate opiates entirely.

Our patients are referred to us by surgeons and specialists whose patients are experiencing persistent pain. We always work closely with these physicians to ensure that our treatments are appropriate for each patient’s unique situation.

Effective Alternatives to Opiates

Back, knee and hip are some of the most common sources of pain. Cooled radiofrequency ablation (burning) and cryoneurolysis (freezing) are techniques that have been used successfully to significantly reduce these sources of pain for up to two years.

Some patients may continue to suffer pain even after they have undergone multiple surgeries. Dorsal column stimulation may significantly reduce pain for many of these patients. During this minimally invasive procedure, a specially designed catheter is implanted in the back. This device functions much like a pacemaker for the spine that stops pain signals from reaching the brain.

Topical preparations, such as lidocaine, amantadine and ketamine, also help reduce pain, especially on the skin. Epidural steroid injections may reduce nerve irritation and swelling for those with herniated discs.

Additional approaches to pain cessation include the use of non-narcotic pain medications, such as non-steroidal anti-inflammatory drugs (NSAIDs). Some antidepressants and alternative medications like Bromelain have also been effective.

Biofeedback therapy and relaxation therapy offered by our mental health specialists are also promising treatments for pain.

There’s no reason to live with pain. Don’t let your concern about opiates prevent you from seeking relief. We are continually seeking new alternatives to opioid-based medications. A qualified pain specialist will help you explore safe and effective options to reduce your pain.

Tarek Shahbandar, MD, is a Methodist Hospitals Anesthesiologist and Pain Specialist who is fellowship trained in pain management.



Potentially Lifesaving Low-Dose CT Lung Screenings

Now Covered by Medicare, Medicaid and Many Insurance Plans

Most cancers have the best outcomes when detected and treated at early stages. That's especially true for lung cancer.

The five-year survival rate for lung cancer is 54 percent when it's detected while the disease is still localized within the lungs. Unfortunately, just 15 percent of lung cancer cases are diagnosed at an early stage.

Until recently, there wasn't a reliable screening modality for lung cancer. As a result it was usually caught in its late stages. Symptoms such as "smoker's cough" were often ignored and the disease was often detected incidentally when the patient came in with another complaint.

Those factors all contributed to the high lung cancer mortality rate. Now, there's cause for optimism.

In 2015, the Centers for Medicare and Medicaid Services (CMS) announced that it would cover Low-Dose CT (LDCT) Lung Screening based on a clinical trial sponsored by the National Institutes of Health. That clinical trial showed LDCT to be an effective tool in detecting lung cancer at its earliest stages for eligible patients.

"Scanning people at risk for lung cancer gives a survival benefit because the earlier you diagnose the disease, the better the treatment options and chance of a curative treatment," said Bharat Barai, MD, Medical Director of Methodist Hospitals Oncology Services.

According to the CMS, the eligibility criteria for Low-Dose CT Lung Screening include:

- 55 to 74 years of age
- 30 pack-year history, (the number of packs smoked daily times the number of years as a smoker)
- Current smokers or former smokers who quit within the last 15 years

A physician's order and a shared decision-making visit are also required. That physician office visit will address the pros and cons of screenings and, for current smokers, smoking cessation counseling.

The National Comprehensive Cancer Network includes a second, high-risk group in their eligibility: people 50 years or older who have a greater than 20-year pack history and an additional risk factor. The highest risk factor for lung cancer is smoking. Other factors include occupational or radon exposure, first-degree family history of the disease, or a chronic lung condition.

"Low-Dose CT Lung Screening has been recommended as a modality for detecting early stage lung cancer since 2013," said Bilal Safadi, MD, a Methodist Hospitals Pulmonary, Sleep and Critical Care Specialist. "Like mammograms, it can be a valuable, cancer-detecting tool."

"When you consider that a Low-Dose CT Lung Screen lasting just five to 10 minutes has the potential to ultimately save your life, that's pretty significant," Dr. Safadi added.



Methodist Lung Care Center Helps You Breathe Easier

Whether you're a current or former smoker in need of screening, someone recently diagnosed with lung cancer seeking education, support or treatment options, interested in smoking cessation or in need of pulmonary rehabilitation, the Lung Care Center at Methodist Hospitals is here to help.

Our multidisciplinary team of pulmonologists, radiologists, thoracic surgeons, oncologists and pathologists employ the most advanced diagnostic technologies and treatment options to deliver the best possible outcomes. All of this is done with the support of a caring Nurse Navigator who guides every patient through the treatment process.

In addition to Low-Dose CT Lung Screening, Methodist Hospitals offers two of the most advanced lung cancer diagnostic technologies, including Northwest Indiana's first Electromagnetic Navigation Bronchoscopy (ENB) and advanced Endobronchial Ultrasound (EBUS) technology.

Methodist Hospitals is a Lung Cancer Alliance screening center of excellence and an accredited Lung Cancer Screening Center by the American College of Radiology

To learn more about the Lung Care Center, visit MethodistHospitals.org or call 219-757-7212.

Take the Hint:

Prediabetes May Signal the Onset of Type 2 Diabetes



Carol Sakelaris

“The Diabetes Center at Methodist Hospitals helps prediabetes patients reduce their blood glucose levels back into the healthy range.”

As strange as it may seem, prediabetes may be a great thing. That is, if you make the necessary lifestyle changes that help you prevent prediabetes from “graduating” into full-blown type 2 diabetes.

A diagnosis of prediabetes means your blood sugar levels are higher than normal, but not so high as to be diagnosed as type 2 diabetes. Most importantly, it means you are at high risk for developing type 2 diabetes if you don’t make important lifestyle changes.

Your fasting blood glucose level should be less than 100. Elevated blood glucose levels between 100 and 125 indicate prediabetes. A test showing results of 126 and above indicates diabetes.

Conquering Prediabetes

Can those with prediabetes really prevent the onset of type 2 diabetes? You bet. Adopting certain lifestyle changes can reduce your risk of developing diabetes by 58 percent, or if you’re over 65, 70 percent. Recommended lifestyle changes include:

Exercise: Engage in 150 minutes of exercise, preferably aerobic, each week.

Weight Loss: Lose five to seven percent of your body weight. Even if you have more weight than that to lose, losing this percentage significantly reduces your risk of developing diabetes.

Medication: Although they’re no substitute for positive lifestyle changes, antidiabetic medications, such as Metformin, may be

prescribed to help safeguard against developing type 2 diabetes.

Diabetes Risk Factors

Everyone should be aware of their personal risk factors for developing prediabetes or diabetes. They include:

- Having a parent or sibling with diabetes
- Having had gestational diabetes or giving birth to a baby that weighs nine or more pounds
- Having high blood pressure or high cholesterol levels
- Inactivity

The Diabetes Center at Methodist Hospitals helps prediabetes patients reduce their blood glucose levels back into the healthy range.

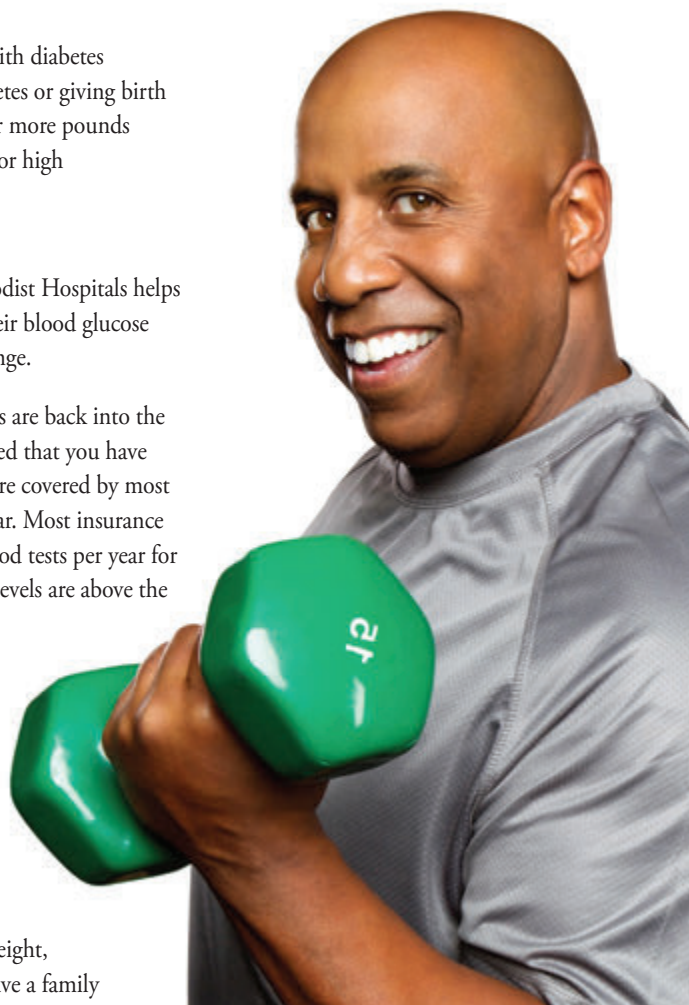
Once your blood glucose levels are back into the normal range, it’s recommended that you have follow-up blood tests, which are covered by most insurance plans, twice each year. Most insurance plans cover four follow-up blood tests per year for patients whose blood glucose levels are above the normal range.

As many as 79 million Americans are living with prediabetes, and many of them don’t even know it. So, they’re also unaware that they’re on the cusp of developing type 2 diabetes.

If you’re age 65 or over, overweight, lead a sedentary lifestyle, or have a family

history of diabetes ask your doctor to assess your prediabetes status. That’s your first step in preventing type 2 diabetes.

Carol Sakelaris, RN, CDE, is a Methodist Hospitals Certified Diabetic Educator.



Get off the road to diabetes.

FREE DIABETES PREVENTION SEMINAR

Presented by Carol Sakelaris, RN, CDE

Learn how healthy lifestyle and diet changes can help you prevent prediabetes from “graduating” into full-blown type 2 diabetes.

Community Invited.

FREE Refreshments & Raffle!

Tuesday, October 25, 5:30 pm

Southlake Campus, Pavilion B,
Conference Room
200 E. 89th Ave, Merrillville

Space is Limited! Reserve your seat today.
Call 1-888-909-3627 or visit MethodistHospitals.org

It's More Than Just Heartburn...

Treating GERD is Essential to Your Health



Dr. Peter Mavrelis

“GERD can usually be medically managed. The first step in the treatment process involves lifestyle changes.”

It may be tempting to shrug off the symptoms of GERD as “just heartburn,” but it’s important that this condition be treated.

Gastroesophageal Reflux Disease, or GERD, is a common, often chronic, digestive disorder that can begin at a young age and intensify in adulthood. Left untreated, GERD can lead to damage of the esophageal lining. When this happens, patients may develop Barrett’s Esophagus. In rare cases, this can progress to esophageal cancer.

GERD is caused by a weakened lower esophageal valve that allows gastric content to regurgitate from the stomach into the esophagus. Symptoms include heartburn, chest pain and, in many cases, interrupted sleep.

A number of things can exacerbate this condition, including obesity, smoking, overeating, spicy foods, alcohol, caffeine and peppermint.

Two of the biggest risk factors for GERD are obesity and smoking. White men with these risk factors are at the highest risk for developing Barrett’s Esophagus.

Treating GERD

GERD can usually be medically managed. The first step in the treatment process involves lifestyle changes such as weight loss, elevating the head of the bed at night, and not eating before going to bed.

If these changes don’t work, we prescribe acid reduction medications. Patients may also employ over-the-counter medicines that reduce acid secretion and alleviate symptoms.

Patients whose symptoms include heartburn with regurgitation should have a gastroscopy exam, also known as an upper GI. Patients are lightly sedated to ensure that they experience no discomfort during the procedure.

If the exam reveals Barrett’s Esophagus, patients will need to be monitored and checked for changes. Changes indicate dysplasia, which are precancerous cells.

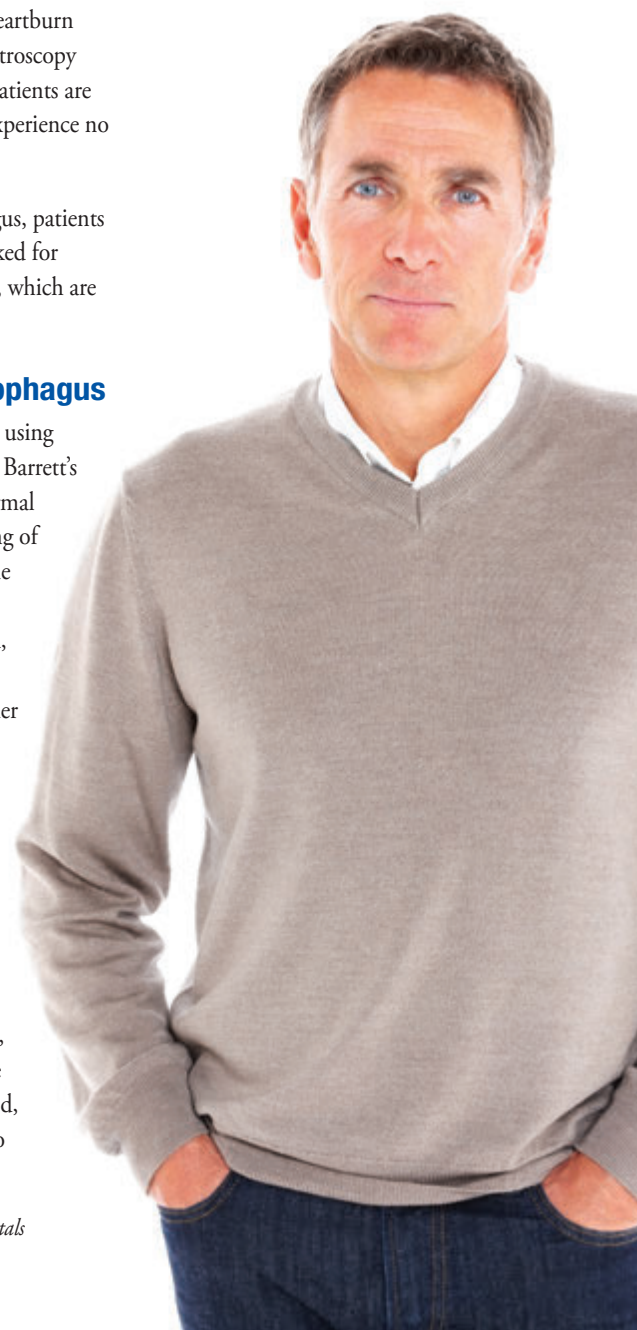
Eliminating Barrett’s Esophagus

At Methodist Hospitals, we are now using radiofrequency ablation to eradicate Barrett’s Esophagus. This procedure uses thermal energy to destroy the abnormal lining of the esophagus and can be done at the same time as the gastroscopy exam. Once the abnormalities are removed, the esophageal lining grows back normal, assuming the GERD is under control.

Another procedure, endoscopic mucosal resection, removes small pieces of the esophageal lining that may contain pre-cancerous tissue.

As common as it is, GERD or heartburn can become a serious problem. If you have any symptoms, it’s important to see your doctor. He or she can monitor the condition and, if necessary, reverse its progression to Barrett’s Esophagus.

Peter Mavrelis, MD, is a Methodist Hospitals gastroenterologist.



Say good-bye to acid reflux pain & discomfort

FREE GERD SEMINAR

Presented by Dr. Peter Mavrelis

You don’t have to live with chronic heartburn or acid reflux pain and discomfort. Learn about the latest effective treatments to relieve upper digestive disorders at this free seminar.

Community Invited.

FREE Refreshments & Raffle!

Space is Limited! Reserve your seat today.
Call 1-888-909-3627 or visit MethodistHospitals.org

Wednesday, October 26, 5:30 pm

Southlake Campus, Pavilion B,
Conference Room
200 E. 89th Ave, Merrillville

Community Event Calendar

Call 1-888-909-3627 to schedule unless otherwise indicated.

SEMINARS

Heart Talk with Our Doc *A Guide to Cardiovascular Disease in People with Diabetes.*

Learn why many people with diabetes also have heart disease. Learn how to manage your diabetes to have a healthy heart.

Presented by Dr. Arshad Malik, Cardiologist

Thursday, October 20

4:30 pm – FREE Blood Pressure Screenings

5:30 pm – Heart Disease and Diabetes Presentation

Radisson Star Plaza,
Celebrity East ballroom
800 E. 81st Ave., Merrillville

FREE Weight Loss Surgery Seminar

An informational seminar about weight loss and surgery options. The session is open to all interested persons and their families or friends.

Monday, September 26, 6:00 pm

Thursday, October 3, 6:00 pm

Thursday, October 27, 6:30 pm

Southlake Campus, Pavilion A,
4th Floor, Suite 430
101 East 87th Ave., Merrillville

Stop the PAIN!

Get permanent relief from Varicose Vein Pain.

Learn about the newest minimally invasive treatment options for varicose vein and swelling.

Presented by Dr. Rajiv Kumar, Interventional Radiologist

Tuesday, October 4, 5:30 pm

Southlake Campus, Pavilion B,
Conference Room
200 E. 89th Ave, Merrillville

CLASSES & SUPPORT GROUPS

Care Givers Support Group

A group for families, partners, and other caregivers of adults with chronic debilitating health conditions. The group offers a safe place to discuss the stresses, challenges, and rewards of providing care for a loved one.

Group meets the second and fourth Thursday of every month at 6:00 pm

Southlake Campus, Classroom 1 (lower level),
8701 Broadway, Merrillville

For information, email reice709@comcast.net

Diabetes Self-Management Education Classes

Comprehensive diabetes education involving all aspects of treatments as well as prevention of chronic complications.

Classes meet the first 3 Wednesdays of the month

1:00 pm - 4:00 pm or 5:00 pm - 8:00 pm

Southlake Campus, Pavilion D, 303 East 89th Ave, Merrillville

Classes meet the first 3 Tuesdays of the month. 1:00 pm - 4:00 pm

Northlake Campus, 600 Grant St, Gary
(Meet by Booth #5 in Outpatient Registration)

To register, call 219-738-5802. Must have physician referral.

Exercise Class for Cancer Patients

This class is for patients in active cancer treatment and is led by an ACSM Exercise Physiologist. Activities include range of motion, stretching, weight bearing and Theraband exercise – all while standing or seated, as well as walking in the room or in place.

Classes are forming. For more information, please call 219-757-7212.

Yoga Class for Cancer Patients

This class is specifically designed for people living with cancer and is taught by a Certified Hatha Yoga Instructor. Hatha Yoga is the preferred yoga practice for cancer patients. It focuses on easy movement and body postures, meditation and breathing.

Every other Monday from 9:30 to 10:30 am

For more information, please call 219-757-7212.

Living After Loss Support Group

A support group for adults grieving the death of a loved one.

Every Wednesday, 4:00 pm to 5:30 pm

Northlake Campus,
South Pavilion Auditorium,
600 Grant St, Gary

Every Monday, 6:00 to 7:00 pm

Southlake Campus,
Classroom 2 (lower level),
8701 Broadway, Merrillville

For more information, call 219-886-4522.

Smoking Cessation Classes

Are you ready to be a non-smoker?

Methodist Hospitals' Smoking Cessation Classes are based on the highly successful American Lung Association's Freedom from Smoking Program, which has helped people across the U.S. take control of their health by quitting smoking.

Seven 90-minute to two-hour sessions over seven weeks ONLY \$60

Mondays, September 26 to October 31

Southlake Campus,
Hospitality Room (lower level),
8701 Broadway, Merrillville

Prepared Childbirth Classes

This is a course designed to assist pregnant mothers and their partner to learn about labor, delivery and the immediate post-partum period. The first three weeks focus on labor: relaxation, breathing, and breast-feeding. Week four discusses parenting topics.

Northlake Campus
Every Tuesday, 6:00 pm
November 1 to November 22
3rd Floor Conference Room
600 Grant St, Gary

Southlake Campus
Every Tuesday, 6:30 pm
October 11 to November 1
November 8 to November 29
Maternal Fetal Medicine
Conference Room
8701 Broadway, Merrillville

Community Memorial Service

A Service of Reflection and Remembrance

Join us for a free community memorial service to honor and celebrate loved ones lost in 2016.

Refreshments will be served following the service.

Monday, October 10, 5:00 pm

Southlake Campus,
Auditorium (lower level)
8701 Broadway, Merrillville

Wednesday, October 12, 5:00 pm

Northlake Campus, Admin. Bldg.,
Seyl Auditorium
550 Grant Street, Gary

For more information, email Chaplain Alesia Terrell at aterrell@methodisthospitals.org

Additional Support Groups

Learn about free support groups for cancer, cardiac, diabetes, multiple sclerosis, Parkinson's disease, stroke and weight loss surgery. Call 1-888-909-3627 for more information.

Go Pink OPEN HOUSE

Saturday, October 1 9am - Noon

Southlake Campus – Pavilion A, 101 E. 87th Ave., Merrillville

Join us for a free continental breakfast & celebrate breast health awareness!

- FREE GIFTS
- FREE SPA SERVICES
- FREE RAFFLES
- FREE SCREENINGS

Meet our Breast Care Center radiologist, technologists and staff!



**NORTHWEST INDIANA
Breast Care Center**

at Methodist Hospitals

REGISTER TODAY! Call 1-888-909-3627 or visit MethodistHospitals.org

free

HEALTH SCREENINGS

& Gospel Showcase

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HEALTH HARMONY

fair **3RD ANNUAL
FIRST LADIES HEALTH DAY**

SATURDAY, OCTOBER 15, 2016

**8:00 am - 10:30 am
FREE HEALTH SCREENINGS**

- Blood Pressure
- Blood Sugar*
- Body Mass Index
- Bone Density
- Cholesterol*
- Foot Screenings
- Heart Attack and PAD Risk Assessment
- Oximetry (Blood Oxygen %)
- PSA (Prostate Blood Test)
- Stroke Risk Assessments
- AND MORE!

Some tests are limited & are provided on a first come first serve basis.
*12 hour fasting required.

**8:00 am - 11:00 am
HARMONY CAFÉ**

Featuring FREE coffee, juice and pastries

**9:15 am - 10:30 am
INSPIRING STORIES OF
HEALTHY LIVING**

Hosted by Darryll King, WYCA-Rejoice 102

**11:00 am - 1:00 pm
GOSPEL SHOWCASE**

Featuring the JOYFUL SOUND of
choirs from across Northwest Indiana

Hosted by Darryll King, WYCA-Rejoice 102



ADMISSION
TO GOSPEL
SHOWCASE
WITH HEALTH
SCREENINGS

**SATURDAY,
OCTOBER 15, 2016**

**Genesis Convention Center
1 Genesis Center Plaza
Gary, IN**

PRESENTED BY:


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HOSPITALS



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REGISTER TODAY! Call 1-888-909-3627 or visit MethodistHospitals.org