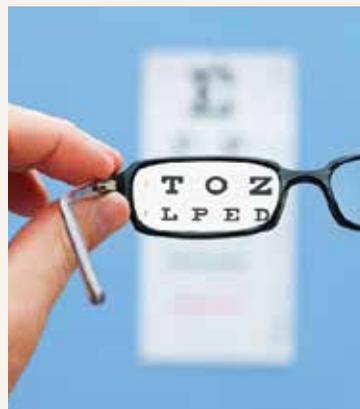


# Medical Journal

Your Resource for Healthcare  
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Morning Sentinel

Special Supplement

Saturday, March 28, 2015

**KENNEBEC JOURNAL**



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# MEDICAL JOURNAL

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# Medical Journal 2015

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**“Children are immunized in an effort to eradicate diseases (like polio or small pox) and to minimize health problems or prevent deaths related to vaccine-preventable diseases.”**

**DR. TIMOTHY BORELLI, INFECTIOUS DISEASE SPECIALIST,  
MAINEGENERAL MEDICAL CENTER**

## Recent measles outbreak raises questions about mandatory childhood immunizations

**WANDA CURTIS**  
*Correspondent*

The recent measles outbreak, which reportedly started at Disneyland in California, has again brought to the forefront the question of whether childhood immunizations should be mandatory.

According to a CNN news report, the outbreak may have started when a traveler who was infected overseas visited the amusement park. Since the news broke, CNN reported there have been 141 measles cases reported in the U.S., 98 of them in California and most who got measles were unvaccinated.

According to Dr. Timothy Borelli, an infectious disease specialist at MaineGeneral Medical Center, “Children are immunized in an effort to eradicate diseases (like polio or small pox) and to minimize health problems or prevent deaths related to vaccine-preventable diseases.”

Borelli said that high vaccination rates among healthy children also help to protect other children who are unable to receive some vaccines. Children who have a documented allergy to any component of vaccines

(such as protein in chicken eggs) or who have a weakened immune system due to a chronic medical condition or treatment (such as chemotherapy) shouldn't receive certain immunizations.

While immunizations may prevent disease in some children, immunizations are not without risk, Borelli said, which is why some parents are hesitant to immunize their children.

“Most side effects of vaccines are mild such as localized redness or swelling at the injection site,” said Borelli. “Sometimes they may develop an elevated temperature or soreness at the injection site. Serious side effects such as severe allergic reactions occur rarely.”

Maine law allows three exemptions from the law requiring that children be immunized before entering school. Children are exempt if their parent states in writing each year an opposition to immunization because of a sincere religious belief, for philosophical reasons, or because the immunizations are determined to be medically inadvisable for their child.

Maine legislators are currently considering a change to the existing law which would remove philosophical reasons as an exemption covered under Maine law.

## *Immunizations important for adults, too*

New parents can easily become overwhelmed by the number of pediatrician visits their children need. By the time a child celebrates his or her fifth birthday, he or she has seemingly been administered dozens of immunizations. But even though people get the majority of their vaccinations while they are very young, that does not necessarily mean they can't still benefit from immunizations later in life.

The Centers for Disease Control and Prevention notes that humans never outgrow their need for vaccinations.

### **Influenza**

According to the CDC, roughly 226,000 people are hospitalized in the United States due to influenza, while thousands more die from the flu and its complications. Flu vaccines protect against various strains of the flu virus, and the vaccine is recommended for just about everyone between the ages of six months and older, including middle-aged adults. People age two and older are now advised to get the nasal mist version of the vaccination. However, adults age 50 and older should not get the mist. Individuals who are severely immunocompromised, not feeling well or those who have an allergy to eggs should speak to their doctors before getting a flu vaccination.

### **Pneumococcal disease**

Pneumococcal disease is an illness caused by bacteria that can spread from the nose and throat to the ears or sinuses. If the bacteria spreads to other areas of the body, like the lungs, it can cause pneumonia. Pneumococcal disease also can cause meningitis if it affects the spinal column. Adults 65 and older need one dose of the pneumococcal conjugate vaccine followed by the pneumococcal polysaccharide vaccine.

### **Shingles**

Shingles is caused by the varicella zoster virus, the same virus that causes chickenpox. Individuals who have had chickenpox are at risk for developing shingles later in life. The virus can cause a painful skin rash and blisters. Other symptoms include chills, pain, fever, and even loss of vision. Because shingles most often occurs in people age 50 and older, the shingles vaccine is recommended for those in this age bracket. People who have medical conditions that weaken the immune system or those who take immunosuppressive drugs also may benefit from the shingles vaccine.

### **Pertussis (whooping cough)**

The CDC estimates that there are between one and three million pertussis cases in the United States each year. All adults between the ages of 19 and 64 need a one-time whooping cough booster vaccine, particularly if they will be in close contact with infants younger than 12 months. Adults are the most common source of pertussis infection in infants. Whooping cough for adults can last for several weeks or even months, causing unnecessary discomfort and leaving sufferers gasping for breath.

### **HPV**

Human papillomavirus, or HPV, is a common virus spread mostly through sexual contact. Few may know they have the disease, as it rarely produces symptoms. However, certain types of HPV can cause cervical cancer, genital warts and cancers of the penis, anus and throat. The HPV vaccine is recommended for both males and females between the ages of 17 and 50.



# Lunder-Dineen launches new education initiatives on oral health, alcohol use and nurse preceptorships

**SUBMITTED BY LUNDER-DINEEN**  
*Special to the Medical Journal*

The Lunder-Dineen Health Education Alliance of Maine (Lunder-Dineen) believes that health education is powerful medicine. That is why it offers free, easily accessible and evidence-based education to Maine health care providers and the communities they serve through an innovative partnership with Massachusetts General Hospital and an ongoing collaboration with Maine's health care community. Lunder-Dineen's goal is to improve the overall health of Maine residents by expanding their health knowledge and by advancing the skills and expertise of Maine health professionals.

In addition to Lunder-Dineen's free and on-demand online education, the organization has launched three innovative Maine-based and research-driven interprofessional education initiatives.

## Oral Health

Lunder-Dineen's project in oral health is titled MOTIVATE, short for Maine's Oral Team-Based Initiative Vital Access to Education. It is an innovative, evidence-based, and Maine-tailored program being developed by Lunder-Dineen and a statewide team of Maine-based experts in response to national calls-to-action from the U.S. Surgeon General, American Dental Association, Robert Wood Johnson Foundation, and others to raise awareness about the connection between good oral health and good systemic health. The program will improve, promote, and protect the oral health and overall health of Maine's long-term care residents by advancing the skills, expertise, interprofessional education, and practice of health care professionals.

Maine is home to the country's highest percentage of residents over the age of 65, and has a large and growing population of veterans and active-duty service members. There is an opportunity to support these special populations by addressing oral health care for older adult residents living in long-term

**"Through targeted, evidence-based education, Time to Ask will help health care professionals further develop their knowledge, skills and attitudes to assist patients and families experiencing unhealthy alcohol use."**

**LABRINI NELLIGAN, EXECUTIVE DIRECTOR LUNDER-DINEEN**



*Contributed photo*

MOTIVATE Advisory Team members Marilyn Gugliucci, PhD and James Hanley, DMD, both of the University of New England, and Jennifer Crittenden, MSW from the University of Maine, discuss the MOTIVATE initiative in a recent team meeting.

care settings in Maine. These settings present a unique opportunity to work with an interprofessional team on developing evidence-based standards that improve quality of life and overall health from simple enhancements in oral health care. As a result, Lunder-Dineen is collaborating with key stakeholders from across Maine and has a vision for this initiative to optimize aging through awareness and education.

"Older adult health and veterans' health are educational priorities for Lunder-Dineen," says Labrini Nelligan, executive director of

Lunder-Dineen. "That's why we convened a team of experts from University of New England, University of Maine, Maine Dental Association, Husson University, and more. They're driving the development and implementation of the interprofessional education for the MOTIVATE model, which will be piloted in Maine Veterans' Homes."

## Alcohol Use

Unhealthy alcohol use is often underidentified and as a result undertreated, and is a major public health issue in Maine and nationally. Most health care professionals

receive very little education about alcohol use, even though according to the CDC, excessive alcohol consumption is a leading cause of premature mortality in the United States. Alcohol use is also one of Maine's most preventable and costly health problems, for which few seek help. In rural areas of the state, unhealthy alcohol use and its related problems are acute.

In addition, the social stigma surrounding substance abuse makes it difficult for professionals to discuss

More MOTIVATE, **PAGE 7**



# Motivate

CONTINUED FROM PAGE 6

substance use with their patients and the lack of training leaves providers without the knowledge and skills to identify, address, or recommend evidence-based treatment options.

To address these critical issues statewide, Lunder-Dineen has convened a team of Maine experts to develop and implement a unique initiative – titled Time to Ask – to raise awareness, provide interprofessional education and skills, and address the gap in alcohol assessment and treatment.

“Through targeted, evidence-based education, Time to Ask will help health care professionals further develop their knowledge, skills and attitudes to assist patients and families experiencing unhealthy alcohol use,” Nelligan says. “The initiative will embed education and enhanced skills into their regular workflows, so it will support cultural shifts in how con-



# MOTIVATE

## Maine’s Oral Team-Based Initiative: Vital Access to Education

### *Oral Health Leads to Total Health*

versations about alcohol take place between clinicians and patients.”

Nursing Preceptorship The importance of nursing preceptorship programs has grown in recent years as patient care becomes increasingly dynamic and complex. Precepting is a period

of practical, guided training when a new nurse, or a nurse changing fields, applies the knowledge learned in school to clinical practice under the supervision of an experienced nurse.

An effective nursing preceptorship program is vitally important to

the health care landscape in Maine since registered nurses between the ages of 52 and 71 comprise more than 47 percent of the nursing workforce, with 52 percent planning to leave the workforce within five years (Maine Nurse Resource Inventory, 2008-2010). The anticipated retirement of the nursing workforce demonstrates an immediate need for quality precepting as a tool to prepare and retain new and transitioning nurses.

For these reasons, Lunder-Dineen is working in collaboration with a statewide, Maine-based advisory team to broaden and expand the reach of the Maine Partners in Nursing Education and Practice’s (MPNEP) 2013 Preceptor Pilot Program. Titled the Maine Nursing Preceptorship Education Program, this initiative is designed to build and deliver a statewide model for preceptor education to support the provision of efficient, effective, patient-centered care through education, support, and integration of nurses in Maine.

Learn more about the Lunder-Dineen Health Education Alliance of Maine and its initiatives at [lunderdineen.org](http://lunderdineen.org).

# Treating behavioral health problems early on may prevent a lifetime of more serious problems

BY COURTNEY YEAGER

*Crisis & Counseling Centers  
Special to Medical Journal*

Dr. Jeanmarie Tekverk, PsyD, NCSP, the school psychologist for Winslow Schools, has noticed alarming trends among youths.

“We’re seeing a lot more students with depression and anxiety and with significant mental health concerns that manifest as behavioral symptoms. These students are across the board age-wise and (those with these problems) are getting younger and younger.”

Alyssa Audie, mental health and substance abuse clinician at Crisis & Counseling Centers (C&C), said bullying is a major issue among the adolescents she treats in the Augusta-based community behavioral health agency’s Generations counseling program.

According to Audie, the self-doubt, self-loathing and self-image issues her young clients face often result from being the target of bullying.

“These kids have a lot of anxiety, and depression settles in when they realize they’re not well liked and may never live up to the ideal that they have in their minds,” she said.

Children’s behavioral health issues may stem from a variety of biological and environmental factors.

Studies in the Archives of General Psychiatry have indicated that half of lifetime cases of mental illness begin by age 14. According to the American Medical Association, approximately 50 percent of individuals diagnosed with severe mental illness are also affected by substance abuse.

“Genetics could play a factor in youth with substance abuse or mental health concerns,” Audie said, “but it’s also about learned behavior. Very similar to the ideals that we instill in our children, we could be fostering emotional states in them as well.”

Don Burke, director of outpatient at Day One, a South Portland-based agency addressing mental health and substance abuse issues among adolescents, said trauma may also lead to behavioral health concerns.

“Trauma impacts mental health but also can lead to substance abuse,” Burke said. “Trauma could be physical, sexual or emotional abuse but can also stem more broadly from poverty and the inability to meet basic needs such



as food and shelter.”

Helping a youth overcome trauma and behavioral health issues depends less on the child’s specific diagnosis and more on early detection and treatment. Untreated disorders can lead to more struggles over time, according to Audie.

“When parents pretend the issue is not there, adolescents sometimes start self-injuring or contemplating suicide,” she said. “If we head it off at the pass, so to speak, hopefully we can stop it from escalating to things that put them at increased risk.”

Many Mainers who end up incarcerated suffer from mental health and substance abuse issues, Audie said.

“If inmates had attended to their behavioral health needs as an adolescent, they may have developed a healthier sense of self and may not have traveled down a road that led to jail.”

Audie also treats adolescents who are involved with the criminal justice system and use substances through Day One’s Good-Will Hinckley residential program, in partnership with C&C.

The six-month program serves youth ages 13 to 18 from all over the state and addresses the underlying causes of substance abuse.

“I help them recognize that substance abuse is an unhealthy way to identify and treat the underlying mental health disorders they’re dealing with and learn that it’s not the only way to cope,” Audie said of her role at Day One.

Rates of youth who have both mental health and substance abuse disorders – known as co-occurring disorders – are climbing in general. Burke estimates that 80 percent of Day One’s young clients have a co-occurring disorder.

Crisis & Counseling Centers’ Generations program, which helps children and adolescents age 3 to 17 with mental health, substance abuse or co-occurring disorders, provides treatment appropriate to the youth’s age and abilities. In addition to individual therapy, the agency employs play therapy for younger, pre-verbal children, as well as family therapy to enhance communica-

tion within a household.

Day One utilizes a number of evidence-based practices in youth counseling, two of which seek to help the clients connect to their own motivation for change and help them establish positive goals for the future.

“For adolescents in particular, that’s really important because they often don’t come to treatment voluntarily,” Burke said.

Tekverk, who provides psychological services to students in kindergarten through 12th grade, advises parents to learn the warning signs appropriate to their child’s age. Middle and high school students may present irritability, withdrawal and a loss of interest in friends. Elementary students often display irritability, frequent crying, temper outbursts or aggression, but the complete opposite can be true, depending on the child.

“The bottom line is you really need to know your child so you can recognize when something is wrong,” Tekverk

**“These kids have a lot of anxiety, and depression settles in when they realize they’re not well liked and may never live up to the ideal that they have in their minds.”**

**ALYSSA AUDIE, MENTAL HEALTH AND SUBSTANCE ABUSE CLINICIAN  
AT CRISIS & COUNSELING CENTERS**



## Crisis

CONTINUED FROM PAGE 8

said. “Spend time with them every day, talk with them in the car when it’s not such a confrontational environment, and have dinner with them every night if possible.”

Recognizing that a problem exists is only half the battle, however, and the stigma that accompanies a mental health or substance abuse diagnosis may prevent families from pursuing treatment, according to Burke.

G.E.A.R. Parent Network, a statewide program of C&C, empowers parents of children with behavioral health needs to ask for help.

“Parents often have exhausted natural support among their family,” said Regional Parent Support Coordinator Diane Bouffard, CPSP. “That’s where G.E.A.R. comes in. Parents want to know that they’re not alone and that other people are struggling with the same issues.”

When a youth is diagnosed with a mental health or substance abuse

issue, Bouffard urges parents to ask questions and find available resources, such as G.E.A.R.’s free workshops and support groups.

“As parents of children with behavioral health needs ourselves, we have walked in parents’ shoes. We offer an opportunity to meet other parents who are going through the same issues that they are going through, and that really makes up a natural support system for the family.”

Crisis & Counseling Centers is an Augusta-based nonprofit serving individuals and families with behavioral health needs, including substance abuse, mental health and co-occurring disorders. In addition, the agency is the sole provider of crisis services for Kennebec and Somerset counties and provides 24-hour-a-day crisis services to those in need.

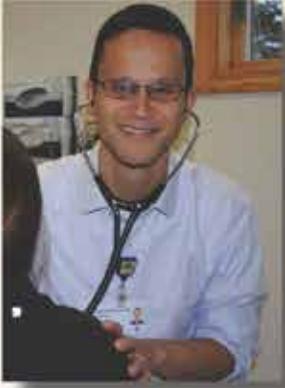
To learn more about Day One, visit [day-one.org](http://day-one.org).

To contact G.E.A.R. Parent Network, visit [gearparentnetwork.org](http://gearparentnetwork.org) or call 1.800.264.9224.

For more information about C&C, visit [crisisandcounseling.org](http://crisisandcounseling.org) or call Central Access at 626.3448. In crisis, call 1.888.568.1112.

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EMHS MEMBER

# Inland Hospital is awarded Top Hospital distinction for the fifth year by Leapfrog Group

BY WANDA CURTIS  
Correspondent

Inland Hospital has been named to the Leapfrog Group's annual list of Top Hospitals for the fourth time in five years. The Leapfrog Group, a national coalition of independent purchasers of healthcare, designated Inland as a Top Rural Hospital for 2014.

"We are so pleased to be recognized again this year," said Inland President and CEO John Dalton. "I am very proud of our staff who make safety and quality a priority every day at Inland. They are to be commended for achieving excellence on a continuous basis. The culture here is to always put the patient first, even when it's not easy or convenient.

This national award is a testament to everyone who works and volunteers at Inland."

The Leapfrog Top Hospital awards are given annually to hospitals nationwide for demonstrating excellence in hospital safety and quality. Only nine were awarded in Maine and only 25 in the nation.

Hospitals are selected to receive Top Hospital awards based upon the results of the Leapfrog Group's annual hospital survey which measures performance in regards to safety and quality, focusing on three critical areas of hospital care – how patients fare, how resources are used, and management structures designed to prevent errors (particularly medication errors). Hospitals must meet the standards defined in each year's Top Hospitals Methodology to receive the award.

Leah Binder, President and CEO of the Leapfrog Group, said that Leapfrog's Top Hospital award not only recognizes institutions for their excellence in quality of care and patient safety but also for their commitment to transparency. Hospitals voluntarily submit to the survey.

"By achieving Top Hospital status, Inland Hospital has proven it is a premier institution and deserves to be recognized for its dedication to the families and



patients in the greater Waterville area," said Binder.

Three other hospitals in the EMHS system were named to the Top Hospitals list including: Blue Hill Memorial Hospital, Charles A. Dean Memorial Hospital, and Sebecook Valley Health. To learn more about the Leapfrog Group and see the full list of institutions honored as Top Hospitals, go to [leapfroggroup.org](http://leapfroggroup.org).

Last November, the Leapfrog Group gave Inland an "A" grade (the highest possible score) in their bi-annual Hospital Safety Score program which recognizes hospitals for efforts to eliminate medical errors, infections, and injuries.

The Inland healthcare system includes a community hospital, a 105-bed continuing care center on the hospital campus in Waterville, as well as 21 primary and specialty care medical practices in Waterville and surrounding communities.

Inland Surgical Associates and Inland Wound Care recently received national recognition from the National Committee for Quality Assurance (NCQA). They were recognized as patient centered specialty practices.

NCQA said that the two practices met or exceeded national standards for:

- Communicating with primary care clinicians to exchange key information and establish coordinated care plans.



*Contributed photo*

Nine of Inland's primary care practices (Inland Family Care and Inland Medical Associates) recently received national recognition from the National Committee on Quality Assurance (NCQA). Shown is John Barnard, PC-C, one of Inland's primary care providers with a patient.

- Providing timely access to care and clinical advice based upon patient need.

- Using a systematic approach for tracking referrals and coordinating care.

In addition, NCQA recently awarded nine of Inland's primary care practices, Inland Family Care

and Inland Medical Associates, with the Patient-Centered Medical Home Recognition for using evidence-based, patient-centered processes that focus on highly coordinated care and long-term, participative relationships. For more information about Inland Hospital go to [inlandhospital.org](http://inlandhospital.org).



“The culture here is to always put the patient first, even when it’s not easy or convenient.”

**JOHN DALTON, PRESIDENT AND CEO  
INLAND HOSPITAL**



*Contributed photo*  
The friendly staff at Inland Family Care, Washington Street, Waterville, from left, Tashia Watson, MA; Moriah Smith, CMA; and Sam Stafford.



**Get Healthy This Spring with the Kennebec Valley YMCA**

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# Spectrum Generations Adult Day Care services are offered in four central Maine locations

BY WANDA CURTIS  
Correspondent

Kristin Overton, COO for Spectrum Generations said that their Adult Day Care program is for more than elderly clients.

“Our clients consist of elderly people who are lonely or need socialization, but also people with mild to moderate dementia or Alzheimer’s whose family members work or worry about leaving them alone, and younger adults with intellectual disabilities,” said Overton. “It’s nice to have an intergenerational program.”

Spectrum Generations offers these daycare services at four different senior centers – Hallowell, Waterville, Skowhegan and Belfast.

“We’ve been providing those services for more than 30 years,” said Overton. “We were one of the first in the state to offer Adult Day Care and Waterville was the first Adult Day Care we opened.”

According to Overton, their staffing ratio is one staff member per every 3 clients. She said that they prefer a 24-hours notice so that they can maintain that staffing ratio but will accept last minute requests from current clients if they have enough staff scheduled that day. She said they have activity aides who develop an individualized plan of care for each client who attends, considering clients’ needs and interests as well as the activities planned for the day.

Overton has been impressed by the number of volunteers from the community who contribute to their programs. She said some of them play the piano and sing songs or hymns with the clients. Others help with puzzles or bring in therapy animals.

“We have a lot of community engagement,” she said.

Overton said there are two models for Adult Day Care. The first



Contributed photos

Volunteers from the community contribute to Adult Day Care programs. Some play the piano and sing songs or hymns with the clients. Others help with puzzles or bring in therapy animals.

is the social model which focuses on socialization and nutrition. The second is the health model in which staff provide not only socialization and nutrition but are also equipped to give medications and provide personal care.

“We’re licensed as a health model,” she said. “If someone has an accident, we can bathe them and get them changed. We can offer them personal care and make sure they take their medications.”

Hours for Adult Day Care range from 7 - 4:30, depending on the center. The staff serves breakfast, lunch, and a snack each day. Overton said many of their clients don’t arrive until about 10 .a.m. but are welcome to come earlier.

For people paying out of pocket, the cost is \$15 per hour for less than four hours and \$13 per hour for four hours or more. Clients

choose how often they attend.

Overton said that the largest payer for Adult Day Care is Maine Care but that some long-term care insurances also cover Adult Day Care. She said the VA may also cover services for some veterans.

“The Aide and Attendance benefit covers services for those veterans who don’t get a veterans’ pension,” she said.

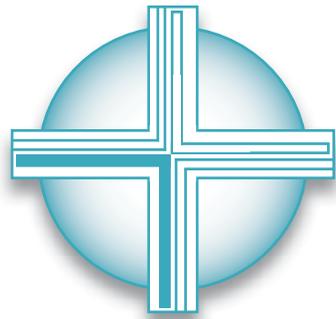
Overton added that the proceeds from their Adult Day Care and Bridges Home Care services benefit some of their other programs, including Meals on Wheels.

“The donations for Meals on Wheels have been down at least 50 percent and we’ve served 10,000 more meals this past year,” she said. “Federal and state funding has also decreased the last several years, while the cost of food has increased.”

“Our clients consist of elderly people who are lonely or need socialization, but also people with mild to moderate dementia or Alzheimer’s whose family members work or worry about leaving them alone, and younger adults with intellectual disabilities.”

KRISTIN OVERTON, COO  
SPECTRUM GENERATIONS





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**DR. GREG FEERO, FAMILY MEDICINE PHYSICIAN  
MAINEGENERAL’S FOUR SEASONS FAMILY PRACTICE**

## MaineGeneral’s ‘patient-centered medical home’ is key to wellness for their patients in the Kennebec Valley

**SUBMITTED BY JOHN BEGIN**  
*Communications Specialist,  
MaineGeneral Health  
Special to the Medical Journal*

If there is doubt about the importance of regular primary care when it comes to health and well-being, compare your personal health to that of your car.

Most of us understand that neglecting maintenance on a car can result in more serious and costly repairs later on.

People, too, may go without a primary care provider, relying on the emergency room or urgent care when illness or injury strikes. But that approach doesn’t offer a thoughtful, long-term, cost-effective strategy for establishing and maintaining a lifetime of good health.

“Pursuing your care in that way is a bit of a gamble; you may not need a lot of care for some time while saving resources,” said Dr. Greg Feero, a long-time family medicine physician at MaineGeneral’s Four Seasons Family Practice in Fairfield. “But much as you wouldn’t drive your car for 100,000 miles without changing the oil, you

wouldn’t want to live the next 20 years of your life without seeing a doctor, getting a vaccination, having your cholesterol checked and talking about your smoking. (If you do), eventually you will need a lot of care – and it will cost more – just like that non-maintained car.

“Regular, routine care in a patient-centered medical home with a primary care provider could help you avoid aggravation, lost work and it could keep you healthy,” he added.

### **What is a patient-centered medical home?**

By definition, a patient-centered medical home is a physician practice that seeks to create a healing partnership with the patient and his or her family.

Patients and their support network are encouraged to actively participate in the care they receive from a team of certified, licensed health care professionals who value a healthy lifestyle, teamwork and patient- and family-centered care. Patient-centered medical homes use the latest proven information and science to help patients prevent illness and

manage their health.

Gone are the days of a lone “Marcus Welby-type physician” managing all aspects of a patient’s health care, Feero said. The new model is a collaborative team approach that draws on the specialized skills and expertise of each team member to best serve the patient and his or her individual needs.

A patient’s medical home, for example, includes:

A dedicated primary care provider (PCP) who will get to know and care for the patient and his/her family.

An expanded team of staff, professionals and other care providers who partner with the PCP in the patient’s care.

Counseling, education and community services and support offered on site.

“Because of the complexity of today’s health care system, the physician may not always be the best person to help with certain aspects of care,” Feero said. “At our practice, for example, we have highly-trained nurses who can help with issues around diet and exercise for conditions like diabe-

tes and heart disease.

“We also have an expert on behavioral health-related issues who helps individuals make healthy changes in their behavior and provides strategies that I, as a physician, am not fully trained or qualified to provide,” he added.

Feero noted that another important aspect of the patient-centered medical home model is its keen focus on communication which is important for seamless coordination of patient care.

“Though there are challenges everywhere with electronic health record systems, we are very ‘well-wired’ in our environment for providing patient care,” he said. “This allows much better communication among primary care providers, specialists, physical therapists, dietitians, laboratory and radiology providers, for example, than was possible five or 10 years ago.”

Several of MaineGeneral Health’s primary care practices in the Kennebec Valley, including Four Seasons Family Practice, are accepting new patients. To learn more, please call 1-855-4MGHIN-FO (1-855-464-4463).



*Contributed photo*  
 Dr. Stephanie Calkins, a colleague of Dr. Greg Feero's at Four Seasons Family Practice, examines a patient during a visit to the Fairfield-based practice.

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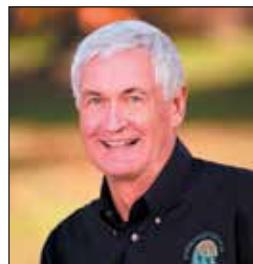
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Contributed photo

Sebecook Valley Health primary care providers offer a nationally-recognized level of service. Their health centers in Pittsfield, Clinton and Newport are part of the Eastern Maine Healthcare Systems, a growing network of hospitals and healthcare facilities, giving patients superior coordination of care and access to a wide range of specialists and specialized services. (L-R) Howard Margolskee, MD, Alycia Allen, FNP, Emily Cianchette, FNP, Chief Medical Officer Robert Schlager, MD, Reynaldo Arceo, DO, Donna Huff, PMHNP, Lisa Starkweather, FNP, George Butlers, MD, Shannon Piner, FNP.

# Sebecook Valley Health gets national recognition for high-quality Patient Centered Medical Home model

BY VALERIE TUCKER  
Correspondent

Sebecook Valley Health's Family Care practices in Newport, Pittsfield and Clinton have consistently received the highest level certification as a 'Patient Centered Medical Home' from the National Committee for Quality Assurance. A key factor is Sebecook Valley Health's steady focus on high standards for patient satisfaction every year.

Dr. Howard Margolskee, Family Care lead physician, said he and his staff measure five indicators of patient satisfaction: overall, inpatient, outpatient, emergency room and physician practice satisfaction.

Success hinges on the first step: building long-term primary care relationships with patients.

"In this day and age, the role of the primary caregiver is to care for the whole person," he said. "We work hard to teach people ways to develop healthy habits that prevent conditions that may require treatment or have more serious consequences."

Health care accessibility, especially during Maine's long winters, is another critical component. Sebecook Valley Health's three locations allow residents to access healthcare without driving long distances and they offer in-office laboratory services. This one-stop shopping approach to comprehensive, whole-person care

builds critical relationships, treats both short- or long-term problems and coordinates all the individual's healthcare needs, Dr. Margolskee said.

Sebecook Valley Health primary care offers patients Internet access to their information, via myEMHS Health, which provides an easy option to request appointments or prescription refills and review test results. Blending this modern digital access with traditional primary care standards offers all patients a chance to be more active in their long-term health objectives, according to Margolskee.

Decision-making, especially with more than one significant medical problem, can be overwhelming and challenging for patients and their

families, he said. Caregivers who know the patient's health history can recommend appropriate specialists and coordinate treatment, and those patients who participate in the process have improved outcomes.

"This is exactly what our Family Physicians, Internists and Family Nurse Practitioners are trained to do. Our entire staff takes responsibility for ensuring our patients and their issues don't fall through the cracks of our increasingly confusing health care system," he said.

All Sebecook Valley Health's caregivers start each visit with a

More SVH, **PAGE 9**



**“We work hard to teach people ways to develop healthy habits that prevent conditions that may require treatment or have more serious consequences.”**

**DR. HOWARD MARGOLSKEE, FAMILY CARE LEAD PHYSICIAN  
SEBASTICOOK VALLEY HEALTH**

## SVH

CONTINUED FROM PAGE 8

thoughtful and confidential discussion of factors that might impact overall health, including family, behavioral and mental health issues. Such insights provide important clues that help both the patient and caregivers to develop achievable goals. Annual well care visits provide additional opportunity to monitor changes, and Sebasticook Valley Health providers can often accommodate same-day access for acute issues that may arise,

said Margolskee.

“We care for patients across the age continuum, from infancy to adulthood, including geriatric care,” he said.

“We’re their first contact when they have a health concern, so it’s important they have that access.”

Prompt preventive care is critical for many reasons.

“Preventive care costs less,” he said. “For example, we know so much more than ever before about the long-term effects of problems such as high blood pressure, cholesterol and obesity, so we can help a patient decide realistic goals to address these issues.”

Other research reports indicate that behavioral and overall mental health issues also present complex compo-

nents that require the primary care providers with complex challenges.

“Demand by patients for mental-health care has increased such that if primary-care doctors didn’t offer it, many people would go without it,” according to an October 2013 New Yorker article.

Responding to that need, Sebasticook Valley Health has hired a provider with a specialization in the treatment of these issues. Additionally, a patient advisory group, which Sebasticook Valley Health plans to expand, reports what our offices are doing well and what they can do better, Margolskee said. Sebasticook Valley Health’s partnership with Eastern Maine Healthcare Systems’ network of

hospitals and healthcare facilities provides smoother coordination of care and access to a wide range of specialists and specialized services. Such focused personal care extends to the SVH hospital, recognized as one of the top ten critical access hospitals in the United States for clinical excellence by the VHA, a national network of not-for-profit health care organizations with a goal to improve performance and efficiency in clinical, financial and operational management. (This is not associated with the Veterans Health Administration which uses the same acronym.) Sebasticook Valley Health also received top rural hospital recognition for five years in a row by The Leapfrog Group.

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# Annie's Beanpole now can provide needed medical equipment from a new location at the Holman Parish House

## SUBMITTED BY

*The First Congregational  
Church of Farmington  
Special To The Medical Journal*

Anyone who might need crutches, a shower seat, a wheelchair or other medical equipment but can't afford to purchase such things has a new place to fill that need at no cost.

Old South Church wants to help. The First Congregational Church of Farmington has recently taken over Annie's Beanpole, a lending library for medical equipment, which is now available to all from the Holman Parish House in downtown Farmington.

There are no fees and no due dates – the borrower only has to sign a waiver and the equipment is free to use as long as needed.

"This feels like a perfect fit for our church," says Sherry Jenckes, moderator of First Congregational. "Old South has a long history of outreach, and local mission is at the heart of our call to be the hands and feet of Christ."

Annie's Beanpole was created in 2004 by Betsy Judkins for people who earn enough to have a co-pay, but too little to be able to easily afford specialized equipment. Her family was in just such a situation after her husband Garry was in a serious automobile accident. When a loved one is ill or injured, she realized, worrying about the cost of medical equipment is the last thing anyone needs.

Betsy named Annie's Beanpole after her grandmother, who benefited from a similar community closet after she experienced a stroke, and for her husband whose dream of growing beans up his no-longer-needed crutches sustained him during his long recovery.

Over the years, more than 250 people from all over Maine have used hundreds of pieces of medical equipment which they then returned for reuse by others. By last fall, it had grown too large to keep operating out of her basement. Judkins told the Daily Bulldog (the Franklin County online newspaper) that between work and her busy family life, she could not continue the service, so she asked for someone to step in and take it over. The Farmington UCC stepped forward.

"We're proud to be taking on this

**Annie's Beanpole is back in service from its new home at the parish house, offering several kinds of crutches and walkers, as well as hospital bed rails, wheelchairs, wheelchair ramps, shower seats, grab bars, tub rails, glucometers, and more.**



service that Betsy Judkins has offered our community for the past decade," said Chris Magri, an astronomy professor who serves on the church's Outreach, Justice & Witness committee. "Having access to the right medical equipment allows people in need to lead a reasonably comfortable existence, and we don't want anyone's finances to get in the way of that."

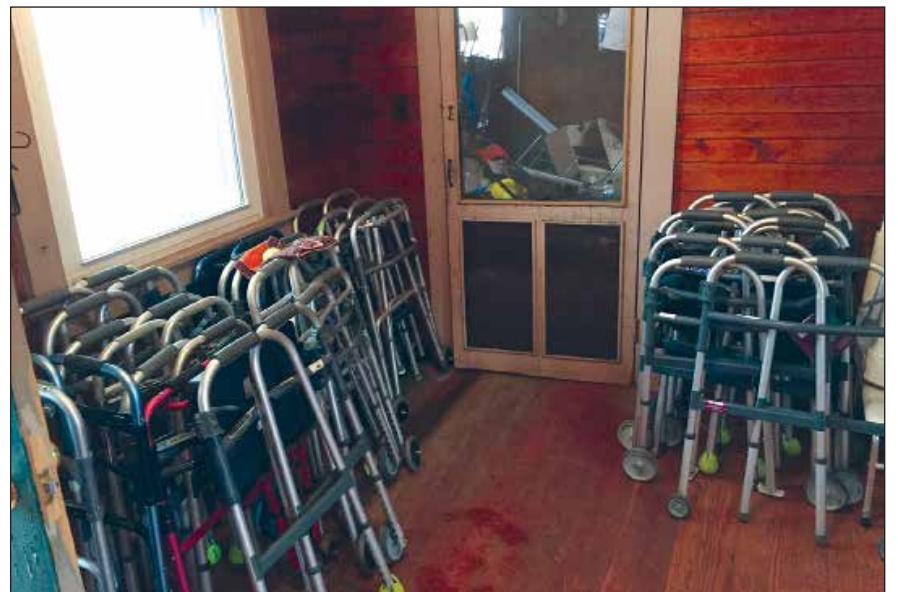
On January 24, church members gathered at the Holman Parish House to organize the equipment.

"There were a dozen of us, which was great because for all I knew only a few people would show up to work in a marginally heated space on a cold Saturday morning," said Magri. In about two hours, they had sorted through a decade's worth of donated medical equipment, culling old or unsafe items and sanitizing, inventorying, and organizing the rest.

"We worked in a storage room and a basement at the Holman Parish House and the atmosphere of cheerful, efficient cooperation felt like validation that this ministry is the right thing for us to be doing," said Magri.

As of February 1, Annie's Beanpole is back in service from its new home

at the parish house, offering several kinds of crutches and walkers, as well as hospital bed rails, wheelchairs, wheelchair ramps, shower seats, grab bars, tub rails, glucometers, and more. Please contact the church office at 778-0424 for more information.



*Contributed photos*

The First Congregational Church of Farmington has recently taken over Annie's Beanpole, a lending library for medical equipment, which is now available to all from the Holman Parish House in downtown Farmington. There are no fees and no due dates – the borrower only has to sign a waiver and the equipment is free to use as long as needed.

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# Central Maine Medical Center announces several new appointments to medical staff

BY WANDA CURTIS  
Correspondent

Central Maine Medical Center in Lewiston recently announced that Andrew C. Eisenhauer M.D. has been appointed Medical Director of Central Maine Heart and Vascular Institute at CMMC.

According to a CMMC press release, Eisenhauer will “provide leadership and medical direction to the inpatient and outpatient programs and services provided by CMHVI.”

He will also “work with physicians, staff, and administrative leadership to oversee quality and patient safety initiatives, efficiency of operations, and the overall performance of CMHVI”

said Susan Horton, executive director of CMHVI. Horton said Eisenhauer is a nationally-known leader in clinical cardiology.

“We are very excited about having someone with his demonstrated clinical, teaching and leadership skills join our team,” said Horton. “He also has a passion to keep our patients at the center of everything we do.”

Before joining the CMHVI team, Eisenhauer worked as an interventional cardiologist at Brigham and Women’s Hospital in Boston.

According to CMMC, Eisenhauer has expertise in treating complex coronary disease and structural heart disease as well as extensive experience as a medical educator. During recent years Eisenhauer, served in various capacities at Harvard Medical School, Beth Israel-Deaconess Hospital, and Brigham and Women’s Hospital in Boston. He had previously served as assistant professor of medicine at the University of Chicago and the University of California, Los Angeles School of Medicine.

Eisenhauer is currently accepting new patients in his office located in the Young Wing of Central Maine Heart Associates, 60 High Street in Lewiston. Appointments can be schedule by calling 753-3900.

Central Maine Heart and Vascular Institute is a full service cardiac and vascular center which opened in May 2003. Services offered there include: cardiology, cardiac diagnostic services, cardiac catheterization, including PCI (Percutaneous coronary intervention also known as coronary angioplasty);



DR. ANDREW C. EISENHAUER

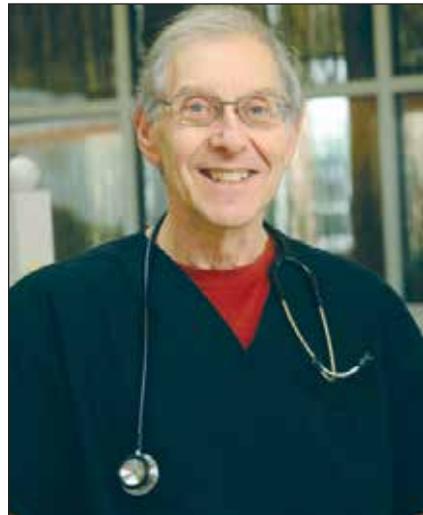
cardiac surgery, including minimally invasive valve surgery, vein center; thoracic surgery; electrophysiology; a vascular lab and endovascular and vascular surgery.

CMHVI also offers inpatient and outpatient cardiac rehabilitation and a variety of community education programs. For more information, visit [cmmc.org](http://cmmc.org)

Pamela R. Rietschel M.D. recently joined the professional staff at CMMC’s Sam and Jennie Bennett Breast Care Center. Rietschel served as co-medical director of the center for several years but recently became the center’s full-time breast surgeon.

Rietschel has also served as vice president of the CMMC medical staff for a number of years. She was previously a member of the surgical staff at Central Maine Vascular Surgery. Rietschel has also practiced general surgery, including breast and vascular surgery, during the 25 years that she has worked in the Lewiston-Auburn area. The hospital said she will now specialize in breast surgery at the Bennett Center.

The Sam and Jennie Bennett Breast Care Center was established in 1997 to provide comprehensive breast care for both men and women from Central, Western, and Mid-coast Maine. The Center offers a broad spectrum of breast cancer services, ranging from early detection screening mammography to the latest advancements in the multidisciplinary care of high-risk and



DR. MARC B. PERLMAN

breast cancer patients.

The center is a member of the National Consortium of Breast Centers and is accredited by the National Accreditation Program for Breast Centers and has earned a Center of Excellence Designation from the American College of Radiology. The Bennett Center follows National Comprehensive Cancer Network guidelines for benign, high-risk and breast cancer treatment.

For more information, call the Center at 795-2100.

CMMC has also announced that Marc B. Perlman MD, neonatologist and pediatrics hospitalist will serve as the new medical director for the CMMC Neonatal Intermediate Care Unit.

CMMC’s Neonatal Intermediate Care Unit (NICU) specializes in providing care for premature babies. The Unit also provides care for infants with developmental problems or medical complications such as infections, breathing disorders, traumatic injuries, and metabolic or neurologic disorders. The CMMC NICU evaluates and stabilizes babies for the treatment of cardiac and surgical problems at other medical facilities as well.

Perlman practiced medicine at CMMC from 1997 to 2008. He served as medical director of the NICU from 1999 to 2008 and was the unit’s associate medical director from 1997 to 1999. He served as director of CMMC’s pediatric hospitalist program from 2004 to 2007.



DR. PAMELA R. RIETSCHER

Before returning to CMMC, Perlman was employed as a pediatrics emergency and urgent care hospitalist at the Children’s Hospital of Philadelphia’s Care Network at Chester County Hospital, West Chester, Pennsylvania. Prior to that, he was a pediatrics hospitalist at several campuses of AtlantiCare Regional Medical Center, in Atlantic City, N.J. He also worked as a pediatrics hospitalist and hospitalist medical director for the Lehigh Valley Health Network at Pottstown Memorial Medical Center in Pottstown, PA and at Nemours/AIDHC Pediatric Partners at Lancaster General Hospital in Lancaster, PA where he served as chief of hospitalist service.

Perlman is certified in neonatal-perinatal medicine by the American Board of Pediatrics.

**Central Maine Heart and Vascular Institute is a full service cardiac and vascular center which offers cardiology, cardiac diagnostic services, cardiac catheterization, cardiac surgery, including minimally invasive valve surgery, vein center; thoracic surgery; electrophysiology; a vascular lab and endovascular and vascular surgery. CMHVI also offers inpatient and outpatient cardiac rehabilitation and a variety of community education programs.**



## Did you know?

If you have psoriasis, an autoimmune skin condition marked by red, flaky patches on the body, you also could be at risk for a certain type of arthritis. Psoriatic arthritis, which causes stiffness, swelling and pain in and around the joints, affects up to 30 percent of people with psoriasis, says the National Psoriasis Foundation. While psoriatic arthritis can develop at any time, it is most common in people between the ages of 30 and 50. This type of arthritis can develop slowly or come on quickly and be severe. Just like psoriasis itself, psoriatic arthritis tends to go through periods of flare-up and remission. Typically, the skin condition precedes the joint disease in 85 percent of patients. Keep in mind that a severe case of psoriasis will not necessarily translate into a severe case of arthritis. Psoriatic arthritis may be treated like other forms of arthritis. Doctors may prescribe anti-inflammatory drugs, antirheumatic drugs, exercise, and complementary therapies. Those who have psoriasis and have begun to experience joint pain and stiffness should talk to a doctor about potential therapies.

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# NICHE training makes sure older patients get exemplary care at Redington-Fairview

BY VALERIE TUCKER  
Correspondent

Maine, like the rest of the United States is getting older. In fact, in 2004 Maine had the highest median age of its citizens when compared to the other 49 states. According to a 2013 report from the Governor's Office of Policy and Management, the Baby Boom generation, born between 1946 and 1964, made up 29.4 percent of Maine's population in 2010 when its members were between the ages of 46 and 64. This is a higher percentage than any other state, the report noted. Vermont was a close second at 29.3 percent, and New Hampshire was third at 29 percent. Those seniors will need skilled medical care and one Skowhegan Maine hospital has taken steps to be prepared.

Sherry Rogers, Chief Nursing Officer at Redington-Fairview General Hospital in Skowhegan, announced that nursing staff has received training in the Nurses Improving Care for Healthsystem Elders (NICHE) methodology. Based at New York University's College of Nursing, the NICHE training center has provided curriculum for more than 620 hospitals and healthcare facilities in 46 states, Canada, Bermuda, and Singapore and is the largest national geriatric program for hospitals.

According to the program's website, the vision of NICHE is for all patients 65 and over to be given sensitive and exemplary care. The mission of NICHE is to provide principles and tools to stimulate a change in the culture of healthcare facilities to achieve patient centered care for older adults.

"For example, many older patients have medications that should be monitored and adjusted regularly," Rogers said. "We make sure they leave here with a clear understanding of what they take and how to find information if they have questions later."

Patient and family input is pivotal, she said. Staff training teaches caregivers how to improve patients' transition from hospital to home or a long-term care setting. Rogers noted that while Maine has one of the highest percentages of older citizens, that percentage will steadily increase.

"All of our older patients require and deserve special attention," Rogers said. "Their care is unique and I'm excited about offering this increased level of expertise."

She said the NICHE curriculum has helped to ensure the proper care of older patients.

**"All of our older patients require and deserve special attention. Their care is unique and I'm excited about offering this increased level of expertise."**

**SHERRY ROGERS, CHIEF NURSING OFFICER, REDINGTON-FAIRVIEW GENERAL HOSPITAL**



*Contributed photo*

Redington-Fairview General Hospital Case Manager Michelle Aldrich, RN, BSN, works with patient Olive Roberge to plan for care after her discharge. Approximately 60 percent of RFGH admissions are for adults over age 65 and these older adults are often at risk for many complications. Caregivers are trained to recognize that although many of these patients come to the hospital with chronic conditions, they may have other issues that need similarly urgent attention. Sherry Rogers, Chief Nursing Officer, and her nursing staff at the Skowhegan hospital have received training in the Nurses Improving Care for Healthsystem Elders (NICHE) methodology. The training helps caregivers to identify and address many of the unique problems facing Maine's growing senior population.

Approximately 60 percent of RFGH admissions are for adults over age 65. A sick older patient is at risk for many complications and Rogers said the staff's job is to improve their lives and prevent functional decline. Many older patients come to the hospital with chronic conditions like COPD or diabetes, and others may arrive by ambulance with a broken shoulder after tripping over a scatter rug in the bathroom. Although these senior patients might be admitted for one problem,

caregivers often discover other issues that need similarly urgent attention.

"Older patients may worry about retaining their independence," Rogers said. "This targeted geriatric care can speed recovery and discharge dates by bridging gaps and making connections. When we ask what the most important goal is for you, our older patients say it's to be able to go home and resume daily activities with family and friends."

Since NICHE accreditation, Rog-

ers said, she has noticed a consistent improvement in the clinical outcomes for the hospital's patients, including higher patient satisfaction and a lower rate of readmissions. The reasons are clear, she said.

"We started by increasing our staff's awareness of geriatric issues, and we involve the patient and family members at every step," Rogers said. "They want inclusion in decision-making, respect, emotional support, care and kindness."

## Did you know?

Though laughter is often referred to as “the best medicine,” no definitive study has been conducted to determine the effects of laughter on overall human health, leaving open the possibility that maintaining a good sense of humor and a positive attitude are just as important, if not more important, than finding time to laugh each day. But even if laughter is not medicinal, its benefits can mimic those of exercise. When a person laughs, his or her pulse and blood pressure increase, and people tend to breathe faster when they laugh. Faster breathing sends more oxygen to the tissues, which can help the heart and lungs work more efficiently. In addition, a Vanderbilt University study found that between 10 and 15 minutes of laughter can burn as many as 50 calories. Finding time to laugh may also indirectly improve the body’s immune system response, as studies have suggested that infection-fighting antibodies might be more abundant in people who can use humor to combat stress.



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# Lyme disease is difficult to identify and treatment modalities are subject to debate

WANDA CURTIS  
Correspondent

One of the most misunderstood and misdiagnosed diseases today is the tick-borne illness referred to as Lyme disease. Healthcare providers report that it's difficult to diagnose because of its ability to mimic other diseases such as arthritis, fibromyalgia, chronic fatigue syndrome, multiple sclerosis, ADHD, ALS, and Alzheimer's disease.

Lyme disease was named after Lyme, Connecticut, where the disease was first identified in 1975. The disease was first called "Lyme arthritis" due to the arthritic-like symptoms in children affected by it.

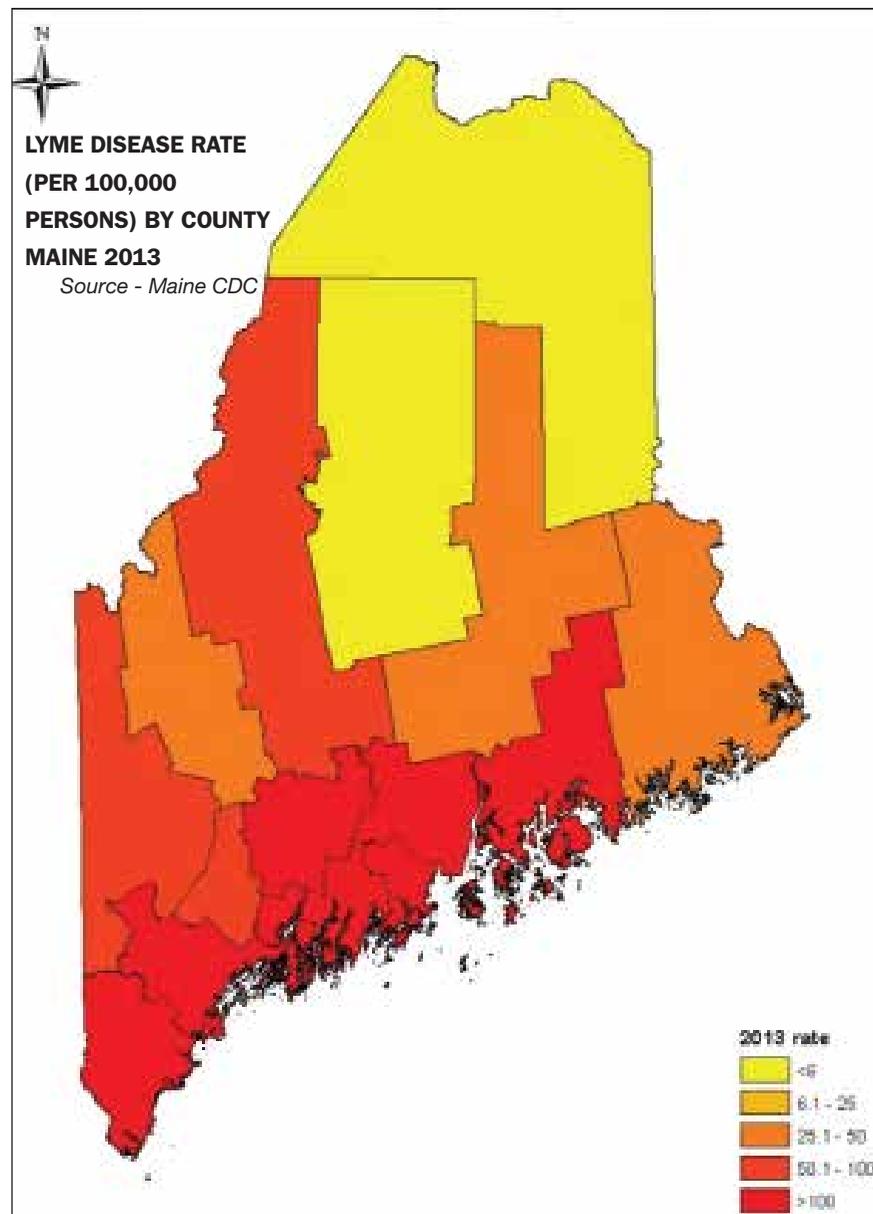
The Centers for Disease Control and Prevention (CDC) estimates that approximately 300,000 people become infected with Lyme disease in the U.S. each year. However, it is estimated that only about 10 percent or 30,000 cases get reported.

Albion physician Richard Dubocq, MD said recently that the disease is also difficult to diagnose because there's no single laboratory test that can confirm most cases of Lyme disease. He said the Western Blot test is the best laboratory test for it but even that may yield incorrect results in up to 50 percent of actual Lyme cases.

Dubocq, a family practice physician, said that his current practice is focused on the treatment of Lyme disease. He said that many Lyme specialists worldwide send blood samples to the IGeneX lab in California which specializes in the diagnosis of tick-borne diseases and conducts a more comprehensive type of testing for Lyme disease than many local laboratories.

According to Dubocq, the best way to diagnose Lyme disease is by making a clinical diagnosis based upon a patient's history and their symptoms. He said that if a patient requests it, he will order a Western Blot test. However, he said that he will still treat even in the presence of a negative lab test, if a patient presents with symptoms of Lyme disease if they have a history of a tick bite.

Dubocq said that people with Lyme disease often visit multiple specialists before they're correctly diagnosed because the disease can affect multiple body systems. Among the early symptoms are skin rashes, fever, chills, fatigue, body aches and headache. Later, migratory joint pains, numbness or weakness in the limbs, chest pain, heart palpitations, fatigue and other symptoms can be part of the disease. "They



can experience a plethora of symptoms and often see multiple specialists before they're diagnosed," said Dubocq. "They see rheumatologists for joint pain, cardiologists for cardiac issues, and neurologists for issues with the nervous system. Often the last referral is to a psychiatrist. They're told they've developed a psychiatric condition which is being expressed by physical symptoms."

When Dubocq and his wife were visiting Monhegan Island in 2000, his wife found a deer tick attached to her body. He said she noticed a spot and then saw the black legs.

She quickly removed the tick (which had been there less than 3 hours) and disposed of it. Then she told her husband about it.

"That was the year Monhegan Island hired sharpshooters to eradicate their deer population [which transport Lyme-infected ticks] because there was so much Lyme disease there," said Dubocq. "So without a host, the deer ticks were swarming that year."

Dubocq said the skin where his wife got the tick bite was reddened. However, she never developed the classic bull's-eye rash which sometimes surrounds the bite on

people who have been bitten by a Lyme-infected tick. As a precaution, though, she was prescribed a course of the antibiotic Doxycycline.

During the next year, his wife developed multiple symptoms but she never associated those with the tick bite. One day she was reading an article in a women's magazine about a woman with Lyme disease who had symptoms similar to hers. She and her husband later traveled to metropolitan New York where she was examined by a Lyme disease specialist who diagnosed her with the disease.

"She was treated with multiple antibiotics for more than a year," said Dubocq.

The length and type of treatment needed to cure or decrease the symptoms of Lyme disease is currently the subject of much debate. If a tick bite is treated immediately, many healthcare providers prescribe a 1-month course of Doxycycline. However, Dubocq said that Lyme disease which is not detected until months or years after the onset is much more difficult to treat because it may affect multiple body systems. Some physicians prescribe a more extended course of antibiotics for those patients as well as for patients who continue to have symptoms after the initial one-month course of antibiotics.

"It's much easier to treat when it just involves the skin," said Dubocq. "It's much harder to treat once it's disseminated."

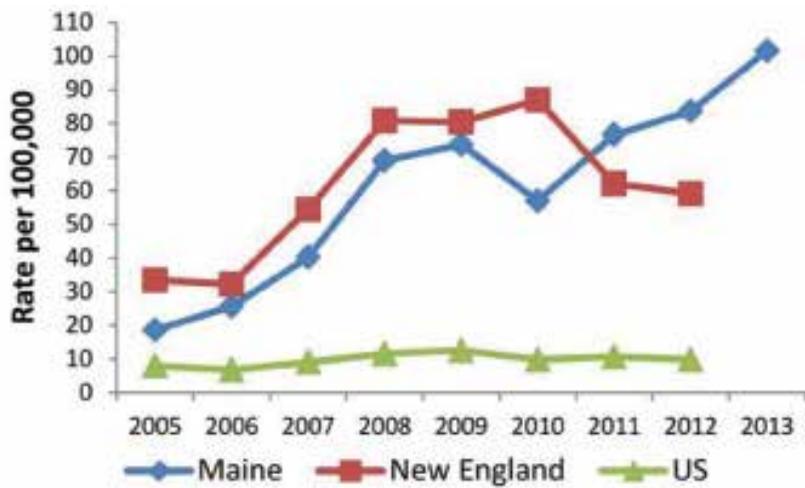
Whether to use an extended course of antibiotics is subject to debate among medical providers. The Maine CDC recommends against long-term antibiotics for Lyme disease. While there are risks involved with long term use of any antibiotic, Dubocq says that many physicians may prescribe an antibiotic for acne for a year or more and other diseases, including TB, also require long-term treatment with multiple antibiotics.

Dubocq treats some Lyme patients with multiple antibiotics for up to one year.

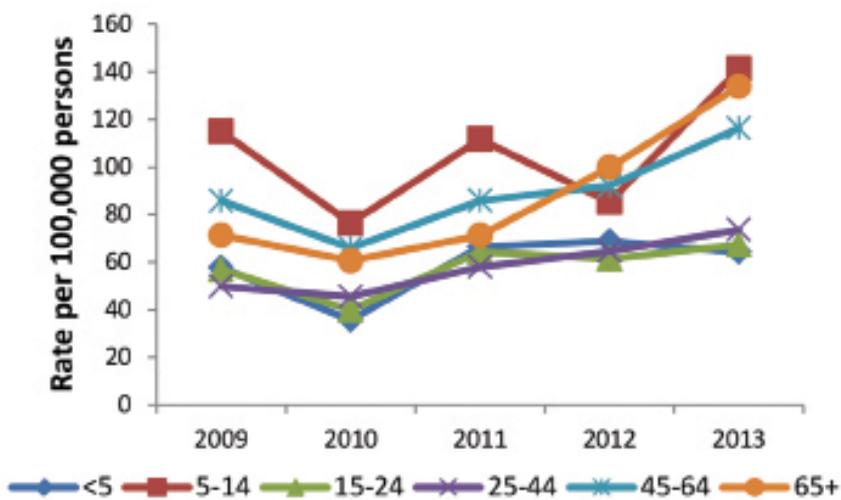
"I tell my patients that treating Lyme disease isn't a sprint, it's a marathon," he said. "I follow the treatment guidelines recommended by the International Lyme and Associated Diseases Society (*ilads.org*)"

Happy Dickey, a registered nurse facilitates an online support group for anyone diagnosed with Lyme disease as well as members of their families. She had previously facilitated a Lyme support group at Inland Hospital. Residents of Waterville, Clinton, and other Central Maine towns have participated in the online group *mainelyme.org*.

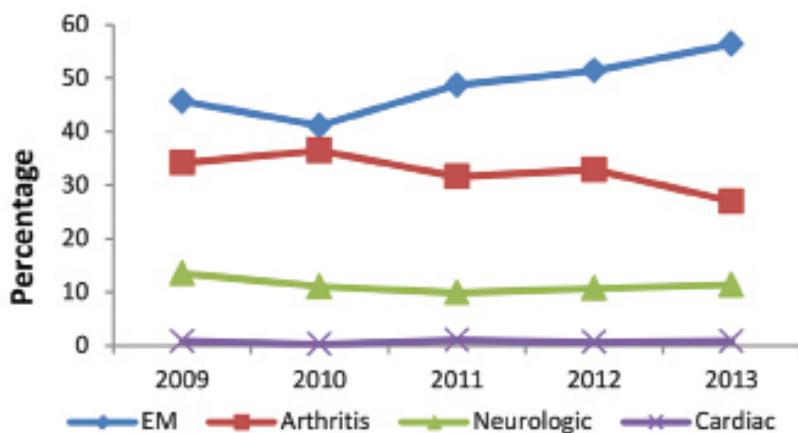
**LYME DISEASE INCIDENCE – MAINE AND US, 2005-2013**



**LYME DISEASE RATE BY AGE GROUP – MAINE 2009-2013**



**PERCENTAGE OF SYMPTOMS REPORTED AMONG LYME DISEASE CASES – MAINE, 2009-2013**



Source - Maine CDC



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## Tick and Lyme Disease FAQ's

### What is Lyme disease?

Lyme disease is a vector-borne illness caused by the bacteria *Borrelia burgdorferi*.

### How is Lyme disease spread?

Lyme disease is spread through the bite of an infected deer tick (*Ixodes scapularis*).

### Who gets Lyme disease?

Anyone can get Lyme disease, but the people who are most susceptible are people who are commonly outdoors in areas where ticks are found. (Wooded areas, thick grass, overgrown bushes, and brush or leaf piles.)

### What are some of the signs of Lyme disease?

Some of the early signs of Lyme disease include the following:

- A ring-like red rash around the area of the tick bite — the rash will resemble a bulls-eye and will appear within 3-30 days of the bite.
- Flu-like symptoms (Fatigue, headache, fever, muscle or joint soreness.)
- Later-stage signs of Lyme disease include the following:
  - Arthritis
  - Neurological problems
  - Cardiovascular problems

### How soon do signs of Lyme disease appear?

Visible symptoms could appear as soon as 3 days after the bite or as late as 30 days after exposure, other symptoms appear within the same time frame.

### I was recently bitten by a tick, removed it, and now want to have it identified. Where should I send the tick?

You can send the tick to the University of Maine Cooperative Extension for identification.

### Where do I send my tick to have it tested for Lyme disease?

The University of Maine Cooperative Extension only identifies ticks; they DO NOT test ticks for Lyme disease. The state lab in Augusta also does NOT test ticks for Lyme disease. Testing for a tick that bit you is not going to tell you whether you have Lyme disease. Individuals who still wish to have a tick tested may do so at their own expense at a private

laboratory.

### How is Lyme disease diagnosed?

If you think that you might have Lyme disease or were bitten by a tick, watch for symptoms for up to 30 days and contact your provider. The presence of the disease can be confirmed through laboratory testing.

### What is the treatment for Lyme disease?

Lyme disease can be easily treated if it is detected in the early stages. In its early stages Lyme disease is treated with oral antibiotics. If Lyme disease is found in later stages intravenous antibiotics may be given to the patient.

### How should I properly remove a tick?

Using tweezers, grasp the tick as close to the skin surface as possible and pull directly upward with a steady amount of pressure. Do not twist or move the tick because it could cause parts of the tick to stay stuck in the skin; also, do not squeeze the tick. Using a tick spoon: place the wide part of the open notch on the skin near the tick and apply slight pressure downward on the skin as you slide the spoon toward the tick; continuous motion will remove the tick.

Do not handle the tick with bare hands and after removal wash both the bite site and hands with soap and water.

### Where in Maine is Lyme disease found?

Lyme disease is found all throughout the State of Maine. Be on high alert for ticks if you often find yourself in:

- Wooded or forested areas
- Around wild, unmaintained landscapes with high grass
- Brush or leaf piles

### I'm pregnant and was recently infected with Lyme disease. How might this affect my pregnancy and how might my fetus be affected?

Pregnant women should stay away from all ticks and areas where ticks are most likely found. Lyme disease can be given to an unborn child, although it is extremely rare. It could also cause the mother to miscarry

or deliver a stillborn child in rare instances. Contact your provider immediately.

Refer to the federal CDC and their recommendations for more information:

[www.cdc.gov/lyme/faq/index.html/#pregnant](http://www.cdc.gov/lyme/faq/index.html/#pregnant)

### Is there a vaccine for Lyme disease?

No, currently there is no vaccine for Lyme disease.

### Can I get Lyme disease again after being successfully treated for it in the past?

Yes, you can get Lyme disease again if you do not take proper steps to protect yourself and are bitten by an infected deer tick.

### Can I get Lyme disease from another person?

No. Lyme disease is not passed from person to person.

### What time of the year should I be most concerned about Lyme disease?

Most cases of Lyme disease are diagnosed during the summer months, but cases can occur year round, (ticks may be active any time the temperature is around or above 40°F).

### How many people living in Maine die each year from Lyme disease?

There have been no known deaths from Lyme disease in the State of Maine.

### How can I protect my family and myself from getting Lyme disease?

• To prevent Lyme disease and other tick-borne illnesses, the best protection is to avoid contact with ticks. If you are working, playing, or relaxing in areas that may have ticks you should:

Wear light colored clothing (which helps spot ticks easier) with long sleeve shirts and pants.

- Create an extra "no tick" zone by tucking your pants into your socks and your shirt into your pants
- Use EPA approved repellent on your skin and apply permethrin (kills ticks on contact) to protect your clothes.
- Check your clothing and skin carefully after being outdoors in

tick-infested areas and remove ticks promptly.

- Wash area of any possible tick bites thoroughly with soap and water; apply an antiseptic to area of the bite.
- Mark the date that you were bitten and watch for signs of Lyme disease or any changes in your personal health for the next month.
- Keep your lawn cut short, cut overgrown brush, and clear away leaf litter from your home.
- Inspect any pets daily and remove any ticks found.

### Should I take antibiotics to prevent Lyme disease after being bitten by a tick?

Prophylactic treatment of Lyme may be considered if you meet these requirements:

- If the tick is identified as a deer tick that was attached for more than 24 hours.
- If it is less than 72 hours since the original bite.
- If more than 20% of the ticks in your area are known to be infected.
- You do not have problems taking doxycycline.

### How long does a tick need to be attached to a person for that person to get Lyme disease?

Ticks need to be attached for at least 24 hours before they can transmit Lyme disease. However, just to be safe you should check your health closely for one month after a tick bite and call your doctor if you have any of the early signs of Lyme disease.

### What can I do to protect my pets from getting Lyme disease?

Domestic animals such as dogs that have contact with the outdoors are at a high risk of getting Lyme disease. It is important that pet owners regularly bring their pets to a vet. The vet will advise you on tick control products that will help to prevent ticks from attaching to your pet. Vaccinations for dogs and other products such as tick and flea collars and pesticides such as Acaricide are available.

[www.maine.gov/dhhs/mecdc/infectious-disease/epi/vector-borne/lyme/lyme-faq.shtml](http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/vector-borne/lyme/lyme-faq.shtml)

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- **Contact Information:**  
124 Silver Street,  
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and Redington-Fairview General  
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- **Chief Executive:**  
Dr. Anne Pratt Giroux
- **Founded:** 2000
- **Phone:** (207) 872-0320
- **Employees:** 3

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- **Phone:** (207) 474-9686
- **Web:** [www.genesisihcc.com](http://www.genesisihcc.com)
- **Chief Executive:**  
Mike McDougal
- **Founded:**  
July, 1999
- **Employees:** 120

• **About Us:** Cedar Ridge Center offers skilled rehabilitation programs, as well as nursing services in a lively, caring environment. Recovery from hospitalizations or elective surgery like joint transplants proceed smoothly with the assistance of rehab therapists. Cedar Ridge Center is part of Genesis HealthCare.

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- **Contact Information:**  
300 Main Street  
Lewiston, ME 04240  
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• **Web:** www.cmmc.org
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Tina Legera
  - **Founded:** 1891
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(207) 621-2552 from a cell phone  
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  - **Chief Executive:**  
Michael E. Mitchell, LCSW, CEO
  - **Founded:** 1970
  - **Employees:** 120
  - **Hours:** Crisis response 24/7  
Outpatient and Admin:  
Mon.-Thurs. 8 a.m.-6 p.m.,  
Fri. 8 a.m.-5 p.m.  
G.E.A.R. Parent Network, varies
- **About Us:** Sole provider of 24-hour crisis response in Kennebec and Somerset counties; outpatient treatment of mental health, substance abuse and co-occurring disorders (Augusta and Skowhegan); mental health and substance abuse treatment for children and adolescents (Augusta); G.E.A.R. Parent Network (statewide); medication-assisted substance abuse treatment (Augusta and Skowhegan); and integrated correctional healthcare.

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11 Academy Road, Monmouth  
7 South Main Street, Turner
  - **Phone:** (207) 524-3501
  - **Web:** www.dfdrussell.org
  - **Medical Director:**  
Kevin Cowell, D.O.
  - **Founded:** 1974
  - **Employees:** 50
  - **Hours:** 24 hour on call Provider.  
Evening and weekend hours for established patients.
- **About Us:** A Federally qualified community health center offering primary care and behavioral health services to patients of all ages on a sliding fee scale according to income guidelines. DFD is a leader in Patient-Centered care and health information technology in Maine. We are innovative in our approach to primary care and proactively identify and develop programs to address the full spectrum of the physical and behavioral health of patients. DFD's services emphasize prevention, health promotion, care management and community outreach in an effort to reduce the need for costly treatment due to preventable causes.

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  - **10 Cory Road**  
122 Medical Center Parkway  
Augusta, ME  
(207) 623-4900
  - **Email:** info@deltaambulance.org
  - **Web:** www.deltaambulance.org
  - **Chief Executive:**  
Timothy A. Beals, MBA, EMT
  - **Founded:** 1972
  - **Employees:** 140
  - **Hours:** 24 hours a day,  
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- **About Us:** Delta Ambulance is the leading provider of high quality, compassionate emergency services, and non-emergency medical transportation in central Maine, as well as an important regional resource for emergency care, health and safety education and a strong supporter of the community. Winner: Margaret Chase Smith Maine State Quality Award - 2000; Kennebec Valley Chamber of Commerce President's Award - 2010; Department of Defense/ESGR Pro Patria Award - 2011; MidMaine Chamber of Commerce - Business of the Year Award - 2012.

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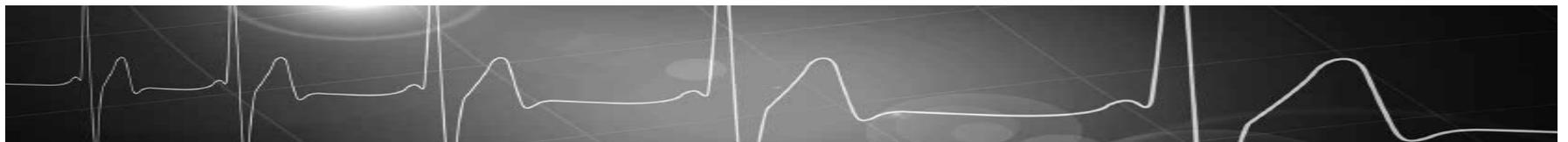


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  - **Phone:**  
(207) 474-9613  
(207) 474-6590  
Next to the Indian statue
  - **Web:**  
www.dunn-pakulski.optometrists.com
  - **Doctors:**  
Gerry Dunn, O.D.  
Alex Pakulski, O.D.  
David Benas, O.D.
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1991, as a partnership
  - **Employees:** 7
  - **Hours:**  
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Winthrop, ME 04364  
(207) 377-8958
  - **Web:** www.watervilledentistry.com  
www.winthropdentistry.com
  - **Founded:** 1976 / 2007
  - **Employees:** 12 / 9
  - **Partners:**  
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Jay R. Wiertacha, D.M.D., M.A.G.D.  
Peter G. Vayanos, D.M.D.
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281 Westam Avenue  
Augusta, Maine 04330  
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**Web:** www.evergreendental.net
- Chief Executive:**  
Heather S. Harper, D.D.S.  
Peter R. Shumway, D.M.D.
- Founded:** 1977
- Employees:** 26
- Hours:** Mon.-Fri. 7 a.m.-4 p.m.

**About Us:** Preventive Dentistry, Periodontal Therapy, Restorative Dentistry, Root Canal Therapy, Tooth Whitening, Crowns & Bridges, Dental Implants, Surgery & Extractions, Treatment of Halitosis, and Nitrous Oxide. Look for us on Facebook, YouTube and Google.

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- Contact Information:**  
325A Kennedy Memorial Dr.  
Waterville, ME 04901  
**Phone:** (207) 873-2731  
(800) 660-3403  
**Web:** www.Maine2020.com
- Founded:** 1922
- Doctors:**  
Steve R. Wilkin, M.D.  
Peter C. Kohler, M.D.  
James R. Putnam, M.D.  
Marc B. Daniels, M.D.  
Helen Bell-Macevski, O.D.  
Lorie Lapeley Parks, O.D.  
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Fax: (207) 213-6785  
**Web:** www.fhealth.net
- Employees:** 7
- Medical Providers:**  
Laura Caron, MD  
Monica White, PA-C
- Hours:**  
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Tues. 8 a.m. - 7 p.m.  
Wed. 8 a.m. - 7 p.m.  
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- Contact Information:**  
111 Franklin Health Commons  
Farmington, ME 04938  
**Phone:**  
(207) 778-6031  
(800) 398-6031
- Web:** www.fchn.org
- Chief Executive:**  
Rebecca Arsenault,  
President/CEO
- Founded:** 1929
- Employees:** Approximately 605

**About Us:** Franklin Memorial Hospital is a progressive, not-for-profit community general hospital whose mission is to provide high quality, cost-effective, patient-centered health care to residents and visitors of West Central Maine. The hospital is fully qualified and accredited to handle a broad range of medical, surgical, pediatric, women's care, and diagnostic services. Franklin Memorial Hospital has 9 medical and surgical practices. Franklin Memorial Hospital became a member of the MaineHealth system on October 1, 2014.

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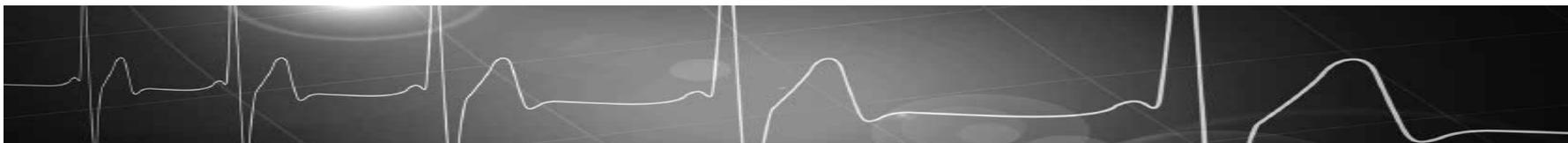

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34 Center Street  
Auburn, ME 04210  
(207) 689-9171  
**Email:** info@ghmagency.com  
**Web:** www.ghmagency.com
- Chief Executives:**  
Bill and Paul Mitchell
- Founded:** 1901
- Employees:** 28
- Hours:**  
Mon.-Fri. 9 a.m. - 4:30 p.m.  
(24-hour claim service)  
Evenings and weekends by appointment.

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653 Oak Grove Rd.  
No. Vassalboro, ME 04989  
**Phone:** (207) 873-3688  
**Web:** www.hairbuildersme.com
- Founded:** 1989
- Employees:** 2
- Chief Executive:**  
Beth Morse
- Hours:**  
Tues., Thurs, Fri. 8 a.m. - 5 p.m.  
Wed. 11 a.m. - 8 p.m.  
Sat. 8 a.m. - ?

**About Us:** Hair restoration for women and men. Hair loss solutions, free consultations. Hair salon, cuts, color, perms, style, manicures, pedicures, tanning.



## MEDICAL JOURNAL PROFILES 2015



### HEALTHREACH COMMUNITY HEALTH CENTERS

- **Contact Information:**  
10 Water St., Suite 305  
Waterville, ME 04901
- **Phone:** (800) 299-2460
- **Email:** HRCHC@HealthReach.org
- **Web:** www.HealthReachCHC.org
- **Founded:** 1975
- **Employees:** 240

- **Chief Executive:**  
Connie Coggins, President/CEO
- **Hours:** Waterville administrative offices are open 8 a.m.-5 p.m. Closed on major holidays. Health Centers are open Mon.-Fri. with hours varying by location. Some offer evening, Sat. and walk-in hours.

• **About Us:** HealthReach Community Health Centers is a system of eleven Federally Qualified Health Centers located in Central and Western Maine which deliver high-quality, affordable healthcare to underserved residents in over 80 rural communities. HealthReach is a private, non-profit organization celebrating a 40-year history, funded by patient fees, grants and individual donations. Health Centers are located in Albion, Belgrade, Bethel, Bingham, Coopers Mills, Kingfield, Livemore Falls, Madison, Rangeley, Richmond and Strong. Dental services are offered at Bingham and Strong.



### HEARING HEALTHCARE ASSOCIATES

- **Contact Information:**  
89 Hospital St.  
Suite 3  
Augusta, ME 04330
- **Phone:** (207) 622-5922
- **Fax:** (207) 622-6052
- **Web:**  
www.hearing-healthcare-maine.com

- **Head Audiologist:**  
Corinne Zimmerman, Au.D., F-AAA
- **Founded:** 1999
- **Employees:** 3
- **Hours:**  
Augusta Office:  
Tues. & Thurs. 9 a.m.-5 p.m.  
Topsham Office:  
Mon., Wed. & Fri. 9 a.m.-5 p.m.

• **About Us:** Hearing Healthcare Associates is an audiology practice and hearing aid center. They bring the latest hearing care technology and unmatched care to their patients every day. They provide hearing screenings and demonstrations, routine and diagnostic testing, programming and adjustments, in-office repairs and cleaning, hearing instrument repairs of all makes and models, evaluation period for all new hearing aids, batteries, accessories and extended warranties, referral rewards program, 0% financing, and accepts most insurances.

### HERITAGE REHABILITATION AND LIVING CENTER

- **Contact Information:**  
457 Old Lewiston Rd.  
Winthrop, ME
- **Phone:**  
(207) 377-9965
- **Toll free:** (800) 746-8453

- **Chief Executive:**  
Carolyn Sawyer, RN, MN
- **Web Address:**  
www.northcountryassociates.com
- **Founded:** 1984
- **Employees:** 96

• **About Us:** If you or your loved one is in need of specialized care after an illness, injury or surgery, consider Heritage Rehabilitation and Living Center. Located just 10 miles outside of Augusta, we specialize in stroke, cardiopulmonary and orthopedic aftercare. Heritage Rehabilitation and Living Center can provide Physical, Occupational or Speech therapy 7 days a week, with those services continuing after your inpatient stay if needed. In addition, Heritage Rehabilitation and Living Center offers 24 hour skilled nursing care by a team of experienced and dedicated professionals. Feel free to visit or give us a call at 377-9965, we would love the opportunity to discuss all we have to offer.



### HOME CARE FOR MAINE

- **Contact Information:**  
347 Maine Avenue  
Farmingdale, ME 04344
- **Phone:** (800) 639-9084
- **Web:** www.homecareforme.org
- **Founded:** 1994

- **Chief Executive:**  
Mollie Baldwin, RN, CEO
- **Employees:** 500
- **Hours:**  
Weekdays: 8 a.m.-4:30 p.m.  
24/7 On Call Management

• **About Us:** provider of in-home care to elders and disabled adults including personal care, homemaking, grocery shopping, transportation to doctor appointments.



### INLAND HOSPITAL

- **Contact Information:**  
200 Kennedy Memorial Drive  
Waterville, ME 04901
- **Phone:** (207) 861-3000
- **Web:** www.inlandhospital.org

- **Provider Finder Service:**  
1-800-914-1409
- **Chief Executive:**  
John Dalton, President/CEO
- **Founded:** 1943
- **Employees:** 750

• **About Us:** Inland is a dynamic healthcare organization where patients and their families always come first. Services include: compassionate and respectful care, primary care providers in Waterville, Augusta, Fairfield, Oakland, Madison, North Anson and Unity, private inpatient rooms, a full range of outpatient and diagnostic services, family birthing center, cardiology, neurology, general surgical services, OMT, podiatry, rheumatology, wound care, diabetes and nutrition services, OB/GYN care, emergency care with on-site helipad, orthopedics, rehabilitation, and specialty clinics. Lakewood, located on the Inland campus offers skilled nursing, dementia and long-term care. Inland is a member of EMHS.

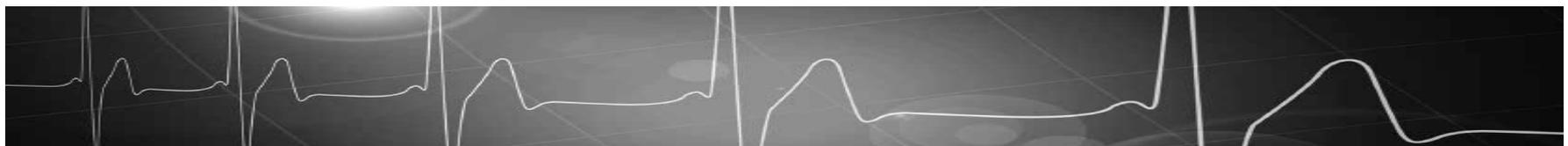


### KENNEBEC BEHAVIORAL HEALTH

- **Contact Information:**  
67 Eustis Parkway  
Waterville, ME 04901
- **Phone:**  
(207) 873-2136 or  
1-888-322-2136

- **Chief Executive:**  
Thomas J. McAdam
- **Founded:** 1960
- **Employees:** 400
- **Web Address:**  
www.kbhmaine.org

• **About Us:** A non-profit organization of mental health and substance abuse specialists, with facilities in Waterville, Augusta, Skowhegan and Winthrop; provides mental health, behavioral health and substance abuse services for adults, children and families in Kennebec, Somerset and Waldo counties. KBH offers adult, child, and family counseling; psychiatric, home-based and school-based services, community integration and substance abuse services; independent and supported housing; and a vocational clubhouse program.



# MEDICAL JOURNAL PROFILES 2015



### KENNEBEC EYE CARE, P.A.

- Contact Information:**  
216 Main Street  
Waterville, ME 04901  
**Phone:** (207) 872-2797  
**Web:**  
www.kennebeceyecare.com  
**Founded:** 1955  
**Employees:** 11
- Doctors on Staff:**  
Frank Myska, O.D.  
Peter Paradis, O.D.  
Kerry Kaplan, O.D.
- Hours:** Year round  
Mon., Tues., Thurs, Fri. 8-5  
Wed. 9-5  
Nov.-May: Saturdays, 8-noon  
Evenings: call for appointment

**About Us:** Medical and routine eye care, contact lenses, spectacle frame and lenses. In-house lab makes photochromic, glare-free, high index and aspheric lenses. Our friendly, courteous technicians and opticians make each patient's experience a pleasure. One hour service available, some restrictions apply.



### KENNEBEC MEDICAL CONSULTANTS

- Contact Information:**  
13 Railroad Square  
Suite 2  
Waterville, ME 04901  
**Phone:**  
(207) 877-9562  
Fax: (207) 877-9560
- Chief Executive:**  
Jerald E. Hurdle, DO
- Founded:** 2011
- Employees:** 4
- Hours:** Mon.-Thurs. 8 a.m.-3 p.m.  
Fridays: 8 a.m.-12 p.m.  
Appts. within 24 hours available.

**About Us:** *Dermatological Disease:* Acne, Skin Cancer, Psoriasis, Eczema, Atypical Moles, Hair Disease, Nail Disease, Blu-u Therapy, Botox, Laser Treatment  
*Colorectal Disease:* Hemorrhoids, Genital Warts, Rectal Bleeding, Irritable Bowel Disorder, Inflammatory Bowel Disease, Pelvic Floor Rehabilitation, Colonoscopy and Constipation.  
We are accepting new patients and accept Medicare and all major insurance plans.

### KENNEBEC PHARMACY & HOME CARE

- Contact Information:**  
43 Leighton Road  
Augusta ME  
**Phone:** (207) 626-2726  
(888)-463-8083
- Web:**  
www.kennebecpharmacy.com
- Chief Executive:**  
Mike Nowak
- Founded:** 1995
- Employees:** 110
- Hours:**  
Mon.-Fri. 8 a.m.-5 p.m.  
Sat. 9 a.m.-1 p.m. (retail store only)

**About Us:** Medical supplies, home infusion & respiratory services, compounding, men's & women's health.



### KENNEBEC VALLEY COMMUNITY COLLEGE

- Contact Information:**  
92 Western Ave.  
Fairfield, ME 04937  
**Phone:** (207) 453-5822  
**Web:** www.kvcc.me.edu
- President:**  
Dr. Richard Hopper
- Founded:** 1969
- Employees:** 237  
104 full-time  
133 part-time
- Hours:**  
Mon.-Thurs. 8 a.m.-5 p.m.  
Fri. 9 a.m.-4 p.m.

**About Us:** Offering two-year associate degrees and one year certificate programs, unique programs, opportunities to transfer credits to four-year colleges and universities, online classes, professional development courses.



### KENNEBEC VALLEY YMCA

- Contact Information:**  
31 Union St.  
Augusta, ME 04330  
40 Granite Hill Rd.  
Manchester, ME 04351  
**Web:** www.kvymca.org  
**CEO:** Tom Warren  
**Founded:** 1914
- Employees:** 95
- Hours:**  
Augusta: Mon.-Fri. 5 a.m.-9 p.m.,  
Sat. 7 a.m.-5 p.m.,  
Sun. 10 a.m.-5 p.m.  
Manchester: Mon.-Fri. 5 a.m.-8 p.m.,  
Sat. 7 a.m.-2 p.m.,  
Sun. CLOSED

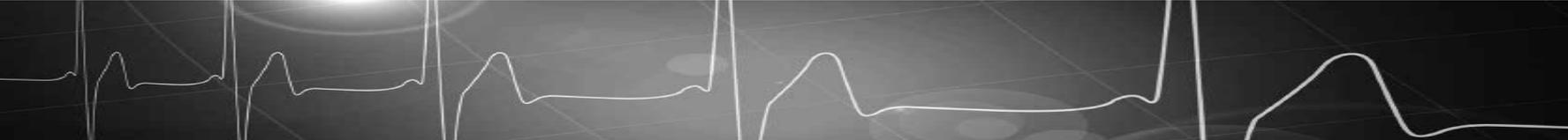
**About Us:** The Kennebec Valley YMCA is an enduring community partner in the Capital region. The Kennebec Valley YMCA's Healthy Living Program includes LIVES-STRONG at the YMCA, National Diabetes Prevention, pediatric referral programs, and a variety of classes designed to meet individual needs regardless of their fitness level. The Kennebec Valley YMCA is a charitable nonprofit organization, providing more than \$200,000 in scholarship funds annually, ensuring open doors to all.



### LAWRY BROTHERS FUNERAL HOME

- Contact Information:**  
Main office:  
107 Main St.  
Fairfield, ME 04937  
(207) 453-6049  
Oakland office:  
(207) 465-3011  
Windsor office:  
(207) 445-2076
- Chief Executive:**  
Jeffrey A. Forsythe
- Web:**  
www.lawrybrothers.com
- Founded:** 1887
- Employees:** 10
- Hours:**  
Mon.-Fri. 8 a.m.-5 p.m.  
Anytime by appointment 24 / 7 / 365

**About Us:** Funeral Services; Cremation Services; Pre-arrangement Services.



## MEDICAL JOURNAL PROFILES 2015



### MAINE INTEGRATIVE HEALTHCARE

- **Contact Information:**  
964 Western Avenue, Suite #1  
Manchester, ME 04351  
• **Phone:** (207) 512-8633  
• **Fax:** (888) 688-0407
- **Chief Executive:** Dustin Sulak, D.O.
- **Web:** www.maine-health.com
- **Hours:** Mon.-Thurs. 8 a.m.-5 p.m.,  
Fri. 8 a.m.-4 p.m.

- **Medical Providers:**  
Dustin Sulak, D.O.  
Danielle Saad, D.O.  
Laurel Schwingsel, D.O.  
Shawn Sulak, D.N.  
Patricia Philbrook, R.N.C., N.P.  
Dana Robison, N.P.  
Jim Wright, L.C.P.C.  
Jennie McNeil, F.N.P.

• **About Us:** We are an independent medical practice offering primary care for the whole family, integrative medicine, traditional Osteopathy, Reiki, and much more! We provide the highest quality of care utilizing medical cannabis (marijuana) for conditions including chronic pain and PTSD. We specialize in helping people heal from complex chronic illnesses, including Lyme Disease. We provide the only Naprapathic Manipulation in Maine, a wonderful modality for healing acute and chronic pain. Come check out one of our classes or Dr. Sulak's low cost community healing arts clinic every Wednesday afternoon.



### MAINEGENERAL HEALTH

- **Contact Information:**  
35 Medical Center Parkway  
Augusta, ME 04330  
149 North Street  
Waterville, ME 04901
- **Email:** public@mainegeneral.org
- **Web:** www.mainegeneral.org
- **Chief Executive:** Chuck Hays
- **Founded:** 1898
- **Employees:** 4,216
- **Hours:** 24 hours a day, 7 days a week

• **About Us:** MaineGeneral is an integrated not-for-profit organization with a range of services that includes: a 192-bed acute care medical center in Augusta; a comprehensive outpatient center in Waterville; a cancer treatment center which was the first center in Maine to earn the Quality Oncology Practice Initiative (QOPI®) certification; primary care and specialty physician practices; mental health and substance abuse services; long-term care facilities; rehabilitation; home health care and hospice services; special care for patients with memory loss; community outreach; and retirement living options. MaineGeneral is the state's third-largest health care system.

### MEDICAL MARIJUANA CAREGIVERS OF MAINE

- **Contact Information:**  
42 Bangor St.,  
Augusta, Maine 04330  
• **Phone:** (207) 596-3501  
• **Email:** mmcmaine@gmail.com  
• **Web:** www.mmcm-online.org
- **Board Chair:**  
Steve A. Ruhl
- **Founded:** 2010
- **Employees:** 3

• **About Us:** Medical Marijuana Caregivers of Maine (MMCM) is Maine's Medical Marijuana Trade Association, providing education and advocacy for Caregivers and Patients. MMCM holds educational workshops and classes throughout the state to help patients, caregivers, and health care professionals better understand Maine's medical marijuana laws, and learn how to safely access & prepare marijuana for medical use. To schedule a presentation, email mmcmaine@gmail.com.



### BRIAN J. MORIN, DMD, MMSC, PA

- **Contact Information:**  
325-D Kennedy Memorial Drive  
Waterville, ME 04901  
• **Phone:** (207) 872-2094  
• **Web:** www.morinorthodontics.com
- **Chief Executive:**  
Brian J. Morin, DMD
- **Founded:** 1994
- **Employees:** 4

• **About Us:** Quality orthodontic treatment for children and adults. Other locations are Skowhegan and Farmington.



### CAROLYN J. MORIN, DDS, PA

- **Contact Information:**  
14 Merrill Street  
Farmingdale, ME 04344  
• **Phone:** (207) 620-1200
- **Chief Executive:**  
Dr. Carolyn Morin
- **Email:**  
morindental@gmail.com
- **Web:** www.cmorindental.com
- **Founded:** 2012
- **Hours:**  
Mon.-Thurs. 7:30 a.m.-5 p.m.

• **About Us:** Private practice of general dentistry. Dr. Morin has been in practice since 2008 and her hygienists have 100 years combined experience! We see patients of all ages, including children. Our goal is for you to be so comfortable and confident with the quality treatment you are receiving that you would refer others to us without hesitation.

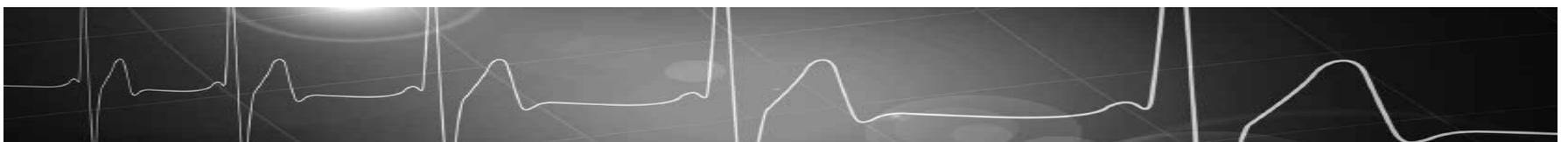
### MOUNT SAINT JOSEPH RESIDENCE & REHABILITATION

- **Contact Information:**  
7 Highwood St.  
Waterville, ME 04901  
• **Phone:** (207) 873-0705
- **Chief Executive:**  
Diane Sinclair - Administrator
- **Founded:** 1966
- **Employees:** 240

• **About Us:**  
Nursing facility: Specializing in skilled and rehab services; Physical, occupational and speech therapies; 24 hour nursing services; Committed to getting you home.

Long-Term Care Services: Alzheimer/Dementia; Hospice; Mental Health; Residential and Nursing level care

*Voted "Best Nursing Care Facility" in the community for 16 years.*



# MEDICAL JOURNAL PROFILES 2015



### OAK GROVE CENTER

- Contact Information:**  
27 Cool St.  
Waterville, ME 04901  
**Phone:** (207) 873-0721  
**Web:** www.genesisihcc.com
- Chief Executive:**  
Sara Sylvester, RN - Administrator
- Founded:** 1962
- Employees:** 130

**About Us:** At Oak Grove, we believe care is about more than state-of-the-art equipment: it's about quality of life. Providing you or your loved one with the personalized attention needed to achieve the highest quality of life is our daily concern. We offer skilled care and subacute programs for people making that recovery transition between hospital and home. Physical, occupational, speech and respiratory therapies, wound care and IV therapies assist in timely recuperation. Oak Grove Center is part of Genesis HealthCare. We have been selected for the Silver-Achievement Quality Award for Outstanding Performance by the American Healthcare Association.



### ORTHOPEDIC PHYSICAL THERAPY

- Contact Information:**  
234 College Avenue  
Waterville, ME 04901  
**Phone:**  
(207) 873-5503  
1-800-838-5503  
**Web:** www.orthopedictherapy.com
- Chief Executive:**  
Joshua D. Hunt, MS PT
- Founded:** 2009
- Employees:** 9
- Hours:**  
Mon. & Wed. 7:30 a.m.-7:30 p.m.  
Tues. & Thurs. 7 a.m.-5 p.m.  
Fri. 7 a.m.-1 p.m.

**About Us:** Orthopedic Physical Therapy specializes in the rehabilitation of orthopedic, sports, industrial, and hand injuries as well as post-surgical and motor vehicle accident rehab. The OPT staff provides personalized, professional, high quality treatment in a non-institutional setting, taking pride in their community reputation. OPT is proud to be locally owned and operated with a family oriented atmosphere.



### REDINGTON-FAIRVIEW GENERAL HOSPITAL

- Contact Information:**  
P.O. Box 468  
46 Fairview Avenue  
Skowhegan, Maine 04976  
**Phone:** (207) 474-5121
- Web:** www.rfgh.net
- Chief Executive:** Richard Willett
- Founded:** 1952
- Employees:** 550
- Hours:** 24 hours, 7 days a week

**About Us:** Provides a full range of health care services including internal medicine, family medicine, pediatrics, OB/GYN, orthopedics, neurology, gastroenterology, endocrinology, general surgery, rehabilitation, and emergency medical services in addition to community health education and wellness programs. RFGH is an independent, non-profit, critical access community hospital providing quality, comprehensive health services to Somerset County.



### SEBASTICOOK VALLEY HEALTH

- Contact Information:**  
447 N. Main St.  
Pittsfield, ME 04967  
**Phone:** (207) 487-4000  
TTY: (207) 487-4590  
**Web:** www.sebasticookvalleyhealth.org
- Chief Executive:**  
Teresa P. Vieira  
President/CEO
- Founded:** 1963
- Employees:** 335
- Hours:** Hospital - 24/7

**About Us:** Not-for-profit critical access hospital with Surgical Services (general, trauma, laparoscopic, and specialty surgeries), Diagnostics (CT, MRI, Nuclear Medicine, Ultrasound, Digital Mammography, Bone Density Screening), Full Service Laboratory, SVH Family Care practices in Clinton, Newport, and Pittsfield, Women's Health Center, Outpatient Specialty Services, Emergency Services (emergency department, ambulance service, helipad), Rehabilitation Centers in Pittsfield and Newport, Surgical Services, Urology Services, Cardiopulmonary Services, SVH Courtesy Van, Community Health and Education, Diabetes and Nutrition Clinic, Business Health Services, EMHS member.

### WATERVILLE PEDIATRICS

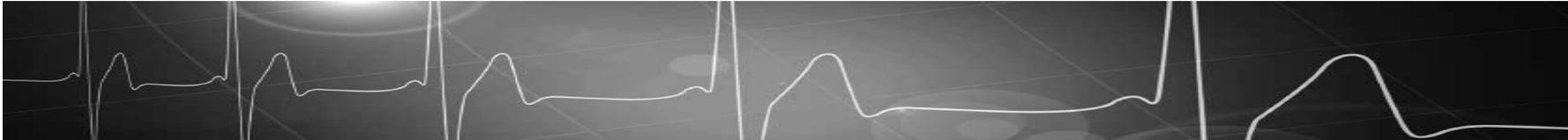
- Contact Information:**  
169 Silver St.  
Waterville, ME 04901  
364 Lakewood Rd.  
Madison, ME 04960  
**Phone:** 873-NDS (5437) or (800) 871-0806  
**Web:** www.watervillepediatrics.com
- Employees:** 43
- Hours:** Waterville: Mon.-Fri. 8 a.m.-8 p.m.  
Sat. and Sun. same day appointments available.  
Madison: Mon.-Fri. 8 a.m.-5 p.m.
- Founded:** 1996
- Providers:**  
Jeffrey Stone, D.O. F.A.A.P.  
Charles Danielson, M.D. F.A.A.P.  
Leslie Doolittle, M.D. F.A.A.P.  
Melissa Taylor, D.O. F.A.A.P.  
Robin LaBlond, M.D. F.A.A.P.  
John Hickey, M.D. F.A.A.P.  
Kathleen Hickey, M.D. F.A.A.P.  
Amelia Brochu, PA-C  
Whitney Lutz, RN, CPNP  
Lisa Lehoumeau, RN, CPNP  
Jessica Rubashkin, RN, CPNP

**About Us:** We are a private pediatric practice specializing in newborn care through adolescence. We offer comprehensive well child care including immunizations, developmental and dental screenings. We deliver ongoing management of a variety of health concerns including asthma and ADHD. We have a new Healthy Steps nutrition education program as well as offer hypnosis services. We provide walk-in care at both locations Mon. - Fri. 8 a.m.-8:30 a.m. for same day illness visits.

### WELLNESS CONNECTION OF MAINE

- Contact Information:**  
31 Maine Ave.  
Gardiner, Me 04345  
685 Congress St.  
Portland, Me 04102  
221 Dirigo Dr.  
Brewer, Me 04412  
149 New County Rd.  
Thomaston, Me 04861
- Phone:** (855) 848-6740
- Web:** www.mainewellness.org
- Chief Executive:**  
Patricia Rosi
- Founded:** 2011
- Employees:** 55
- Hours:** Mon.-Fri. 10 a.m.-7 p.m.  
Saturday 10 a.m.-4 p.m.  
Sunday closed

**About Us:** Wellness Connection of Maine operates four state-licensed and inspected medical cannabis dispensaries which are safe, inviting, clean and accessible wellness centers fusing the best features of a pharmacy, community center and wellness practice in one convenient location. Here you can confidently obtain quality, safe medicine from compassionate experts who care about you, in a form that fits your needs and budget.



# Dr. Nathaniel Petley believes in harnessing the power of nature to keep the body healthy

BY SUSAN VARNEY  
Correspondent

Nathaniel Petley, ND is a naturopathic doctor, an accomplished herbalist, and adjunct professor and lecturer throughout New England. His office is at the Maine Center for Natural Health in the old post office building in Waterville with its wonderful high ceilings and sunny windows looking out on downtown Waterville. Green growing plants, old-fashioned radiators, hot tea and comfy chairs make it a warm and welcoming place.

"I love what I do, helping people," said Petley as we sipped a hot cup of tea on a cold winter day. The Clinton native and Lawrence High School graduate explained what Naturopathic medicine is all about.

"Naturopathic medicine is about treating the whole body, mind and spirit. It's about finding the reason behind the symptoms and how they fit in the whole picture. Asking questions helps the doctor and patient discover whether a condition is a symptom or the disease. A symptom is like a smoke detector going off," he said. "Taking the battery out quiets the detector but does nothing for the reason it is going off. It is our goal to get to the cause."

Sometimes all it takes is a little tweaking – address the diet or lifestyle, provide a nutrient or two or discover mental obstacles to physical health. For example, some people, especially caretakers, need permission to focus on themselves.

"They work so hard for other people that they themselves become unhealthy in the process."

Petley said he takes the time to get to know his patients as individuals so he can best assess and treat a problem.

A naturopathic doctor uses many modalities to restore health to a patient including nutrition, homeopathy, botanical medicine, and physical medicine, taking into consideration anatomy, physiology and pathology.

"I have not prescribed a pharmaceutical because I haven't had

**"A symptom is like a smoke detector going off. Taking the battery out quiets the detector but does nothing for the reason it is going off. It is our goal to get to the cause."**

NATHAN PETLEY  
NATUROPATHIC PHYSICIAN



Photos by Susan Varney

Dr. Nathaniel Petley, ND in his office at the Old Post Office Building in Waterville.

to, not that I wouldn't but I find other modalities or measures," said Petley.

Petley shared the six principles of Naturopathic Medicine:

- Let nature heal. The naturopathic doctor helps to remove obstacles which inhibit the body from healing by creating a healthy internal and external environment.

- Identify and treat the causes. Naturopathic doctors work to identify and remove underlying causes of disease rather than simply suppress symptoms. Symptoms are the body's fire alarm.

- First do no harm. Guidelines: Utilize methods and medicinal substances which minimize the risk of side effects. Avoid harmful suppression of symptoms. Acknowledge, respect and work with the individual's self-healing process.

- Educate patients. Work with each patient as teacher and encourage self-responsibility for health. The doctor-patient relationship is an integral part of the healing process.

- Treat the whole person. Ask about the patient's physical, mental and emotional health as well as genetic, environmental, social, and other factors surrounding their health including spiritual health.

- Prevent illness. By evaluating risk factors, heredity, and susceptibility to disease, it is possible to intervene when appropriate in order to prevent illness.

Petley believes the doctor and patient must work together to set realistic goals, consider the potential of the body to accomplish the goals, set time frames, learn to listen to the body and feel the effects of using up its stores of nutrients.

"Stress has a huge impact on health," he said, making one feel older than necessary. "Age itself shouldn't dictate how vibrant we feel."

Allergies, food, digestion, environment, genetics, stress, there are so many factors that affect our health that is often a matter of piecing together the history, symptoms,

More PETLEY, PAGE 35

# Petley

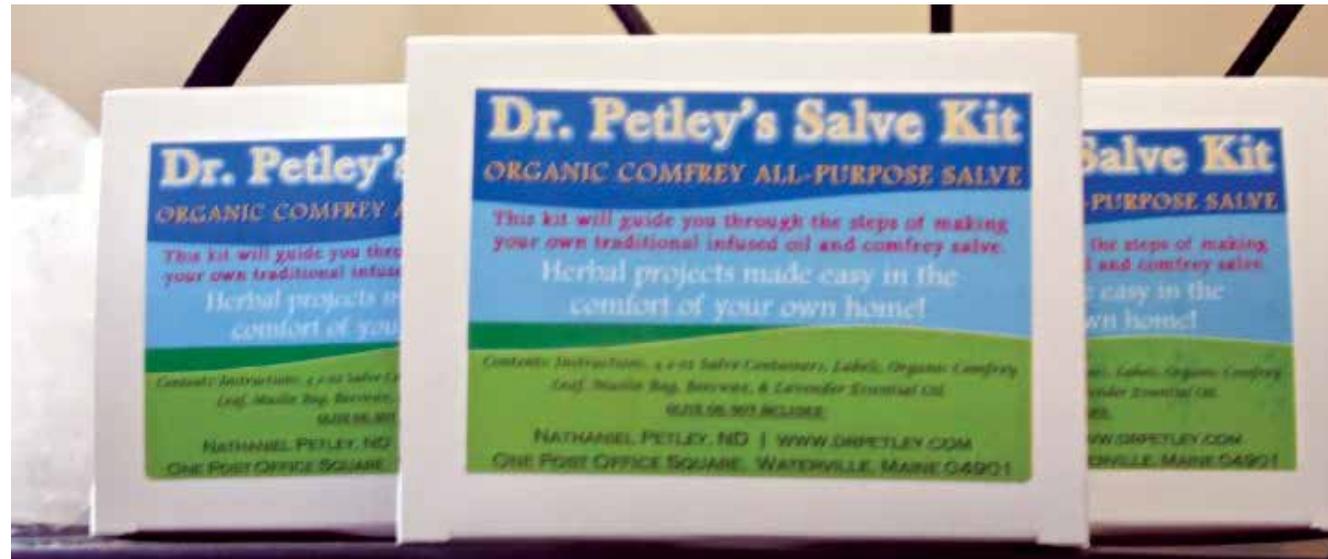
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complaints, lifestyle, and goals to get to a place where the body can heal, Petley said. He said these influences are like a rain barrel, a little in, a little out and things stay in balance but sometimes there is a storm and the “rain barrel” overflows, becomes overwhelmed and needs to detox, rest and heal. All of the above factors can, over time, affect the body’s capabilities to eliminate waste and toxins in order to be in balance.

### Why see a naturopathic doctor?

“It’s about improving function, teaching, guiding, nutrition, dosing and reducing toxic load starting with the liver and kidneys,” said Petley. “It’s about personalizing medicine for the individual and matching the nuances of a remedy to the uniqueness of the patient.” Some things, environmental toxins, for instance are beyond our control but, he said, if it’s not possible to relocate, it is possible to learn how to minimize the effect on the body.

Petley studied Horticulture and Botany at the University of Maine,



Dr. Petley holds classes in making healing salves, tinctures, & oils. He has supplies for those who wish to make their own herbal medicinals including kits, bottles, and bee’s wax.

Interned at the Chicago Botanic Gardens, got a Master’s degree at UConn in Plant Science, and graduated from the University of Bridgeport College of Naturopathic Medicine in 2013. He opened Acadia Herbals, in Northampton, MA after graduation, selling it to continue his education at Bridgeport. While

attending medical school, he was an adjunct professor teaching botanical pharmacy and worked part-time as a supplement consultant at Nature’s Way in Stratford, Ct. He teaches classes and workshops on botanical medicine and naturopathic medicine throughout New England. He also teaches herbal

medicine making, tinctures, infusions, decoctions (concentrations of a substance), salves, creams and soaps as well as plant identification, harvesting and gardening.

Visit [drpetley.com](http://drpetley.com) for upcoming lectures and workshops or to order bulk herbs, essentials and supplies.

## Did You Know... that hearing loss has a direct effect on your overall health?

- Those with **hearing loss** experience a **30-40% greater decline** in **thinking abilities** compared to those without hearing loss.
- Adults with **hearing loss** are more likely to develop **problems thinking and remembering** than adults with normal hearing.
- Adults with **hearing loss** are significantly more likely to **develop dementia** over time than those who retain their hearing. Adults with **severe hearing loss** are **four times more likely** to develop dementia.
- People with **mild hearing loss** (25 decibels) are three times more likely to have a history of **falling**. Every additional 10 decibels of hearing loss increases the changes of falling by **1.4 times the original risk**.



**Call us today to schedule a FREE hearing screening**  
**207-622-5922**

### Meet Our Audiologist



Corinne R. Zimmerman, Au. D. CCC-A, has over 22 years of professional experience as an audiologist. She completed her Bachelor of Arts in Communication Sciences and Disorders from the University of Toledo in 1991 and her Masters of Science in Audiology from Syracuse University in 1993. She completed her Doctorate Degree in Audiology (Au.D.) from Central Michigan University in 2009, with a concentration in aural rehabilitation.

After moving from Ohio to Maine in 1995, Corinne worked in hospital-based and private-practice/ENT settings. She was appointed to the Maine Newborn Hearing Screening Advisory Board in 2002 and served as a Board member for five years. She is a fellow of the American Academy of Audiology, and a member of the Maine Academy of Audiology.

Corinne is committed to providing quality care and staying current with developments in the hearing care field.



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# Franklin Health Patient-Centered Medical Home model works to reach patient health care goals

BY VALERIE TUCKER  
Correspondent

Dr. Jay Naliboff, Medical Director of Franklin Health, said the Patient-Centered Medical Home model doesn't mean a building or place, but, rather, teams of health professionals who coordinate care with patients. The three goals of the model are improving quality, improving the patient experience and decreasing the cost of healthcare.

"We have simple but effective goals and offer a care team that gets to know our patients and their families," he said.

Franklin Health primary care includes Franklin Health Internal Medicine, Pediatrics, and Farmington and Livermore Falls Family Practices. These four practices have received national recognition for implementation of the national health standards of the Patient-Centered Medical Home model.

Naliboff and Mavis Dubord, Director of Clinical and Administrative Services, have paid close attention to the many common-sense suggestions of their Patient Advisory Council and responded with improvements that have made overall patient care better. Naliboff also took the council's advice to become more of a public face and voice for the practices. Now a regular voice on WKTJ's radio spots on health topics, he addresses current medical issues, including influenza, Ebola and measles. He has also been a guest on the Mt. Blue Community Access television station. Another of the council's suggestions that has been enacted is processing bills locally rather than outsourcing to a Massachusetts contractor.

Dubord and Naliboff welcome new voices on the patient advisory board. Anyone interested in attending a meeting should call 779-2077.

"The patient centered medical home model helps make sure that patients get the preventive care and the support they need to manage any chronic diseases they may have," he said. "We work together to reach health care goals and keep patients out of the hospital when possible. For example, we strive for same-day appointments as needed for urgent conditions and access to a provider on-call when the office is closed to help reduce unnecessary emergency room visits."

Today's services include e-mail communications, information about costs,

**"The patient centered medical home model helps make sure that patients get the preventive care and the support they need to manage any chronic diseases they may have. We work together to reach health care goals and keep patients out of the hospital when possible."**

**DR. JAY NALIBOFF, MEDICAL DIRECTOR, FRANKLIN HEALTH**



*Contributed photo*

Farmington Family Practice offers a full range of family medical services from routine physicals such as well-baby checks, sports physicals, and adult physicals, to managing complex chronic medical conditions. Dr. Kendra Emery, left, reviews any questions her patient Kathy Bryant may have after a routine visit. Patients receive customized folders with health information including easy-to-read documents and charts that help them keep track of changes and reminders between visits.

and online tools to help patients review their medical information and make better decisions about their health. Through the electronic Patient Portal, individuals receive online reminders about appointments and screenings, as well as other support to help them and their families manage chronic conditions. Behavioral and mental health practitioners are embedded in each practice, so the patient's overall needs can be addressed immediately.

Franklin Health's high standards are

aligned with the national principles of the Patient-Centered Medical Home, established by the American College of Physicians, the American Academy of Family Physicians, the American Academy of Pediatrics and the American Osteopathic Association. Certification is awarded by the National Committee for Quality Assurance (NCQA).

Naliboff said the NCQA standards are rigorous and require many, many hours of documentation that is reviewed and graded by outside observers. The time

and commitment by everyone from practice managers, to providers, nurses, and office staff has been essential in achieving this recognition.

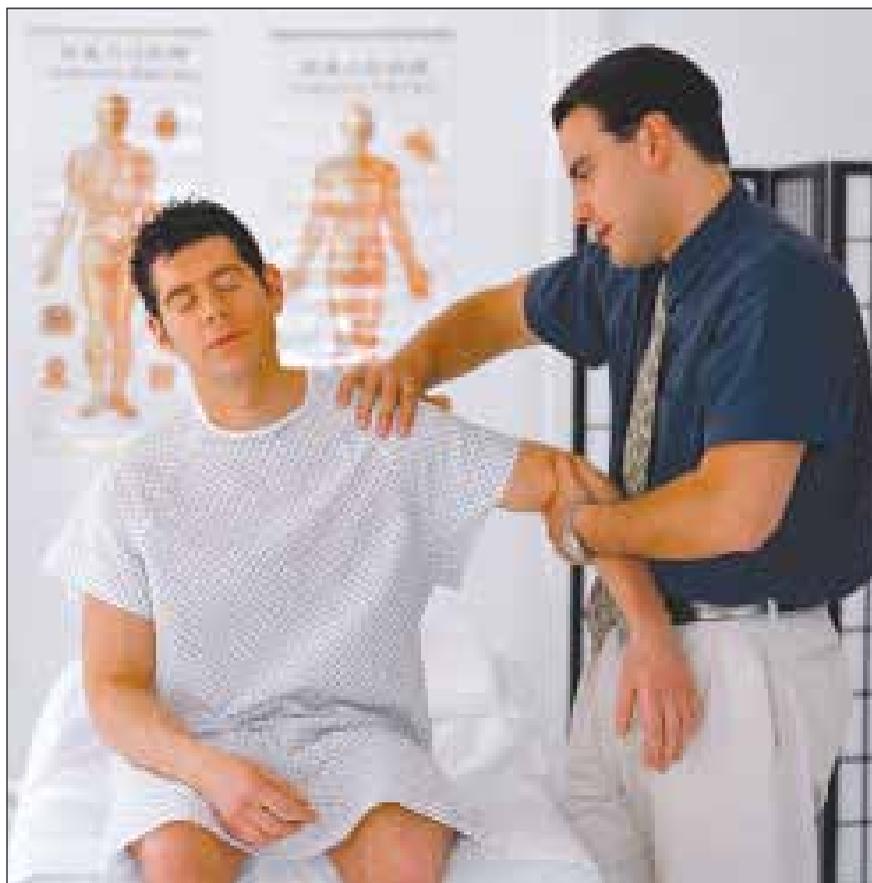
Franklin Health clinicians demonstrated consistently and successfully that they are familiar with the specific standards of patient-centered care. This national recognition has been a well-deserved reward for Franklin Health's accomplishments and recognition for success in meeting these requirements.

# How to cope with an athletic injury

As any professional athlete can attest, even the most athletic and physically fit individuals can suffer an injury. Professional athletes typically have highly trained medical personnel at their disposal as they recover from injury, but men and women who don't draw a paycheck for their athletic exploits have no such luxury, making it far more difficult to recover from and cope with injury.

Each individual body responds to injury in different ways. For example, one person may heal from a hamstring injury in as little as a few weeks, while others must endure a healing process that lasts several months. But no matter how different athletes' bodies may be, there are coping mechanisms every athlete can employ to help deal with the mental toll that injuries can take.

- **Stay involved.** Athletes who train heavily and devote much of their free time to pursuing their sport of choice may feel as though their world has come crashing down when they suffer an injury. But even if you cannot compete, you can still stay involved in your sport. If you are physically capable, offer to volunteer at sanctioned events, which can help you maintain a connection with your sport and keep abreast of the happenings within that community. If your injury is so limiting that active volunteering is nearly impossible, you can still attend events and then blog about them afterward. The important thing is to recognize that, while an injury



Working together with a trainer or physical therapist to set realistic recovery goals is one way for athletes to successfully cope with injury.

may prevent you from competing, you can still find other ways to stay involved.

- **Set realistic recovery goals.** Many athletes begin physical therapy or their rehabilitation

processes with a gung-ho attitude, insisting they will return from injury stronger than they were before. While that's a great attitude, it's important that athletes temper their enthusiasm for recovery with a dose of reality. Recovery is not

overnight, and even the most elite athletes, many of whom are accustomed to their bodies responding in the way they want them to respond, can be discouraged if they enter the rehabilitation process with unrealistic expectations. Work with your physical therapist, physician or trainer to establish realistic recovery goals, using your enthusiasm to meet your short- and long-term recovery goals. Be flexible when setting your recovery goals, as you never know how your body will respond to treatment.

- **Expect setbacks.** Setbacks are an unfortunate reality of recovery for many athletes. Don't allow yourself to become discouraged if a goal can't be met because your body is simply not ready or needs to pause in its recovery process. A setback can be frustrating, but you can cope with setbacks by writing about them, be it on a blog or in a personal journal. Many athletes have found that writing down their feelings is an effective way to deal with the frustration of the recovery process. Keeping a journal or recovery blog can also help you cope with any future setbacks down the road, as you can look back and see what did or did not help you deal with past obstacles.

Athletic injuries can be thorns in the sides of committed athletes, who may or may not know what to do with themselves when sidelined with significant injuries. But there are various ways for athletes to cope with injuries and make the recovery process less frustrating.

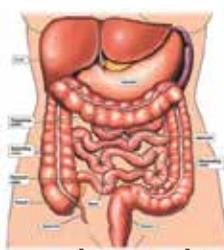


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### **Poison Control Center**

1-800-222-1222 (Voice) 711 (Maine Relay). The Northern New England Poison Center is the regional poison center for Maine, New Hampshire and Vermont. It is available 24/7 to provide immediate treatment advice for poisonings and answer questions about poisons and prevention. Visit the Northern New England Poison Center.

### **Maine Statewide Crisis**

1-888-568-1112 (Voice) 711 (Maine Relay). If you are concerned about yourself or about somebody else, call the crisis hotline. This will connect you to your closest crisis center.

### **Suicide Prevention**

1-888-568-1112 (Voice). (Crisis Hotline) 711 (Maine Relay). National Suicide Prevention Lifeline: 1-800-273-TALK (8255). Visit the Maine Youth Suicide Prevention Program.

### **Child Abuse**

1-800-452-1999 (Voice). 711 (Maine Relay).  
The State of Maine's child abuse hotline is staffed 24 hours a day.

### **Elder Abuse**

1-800-624-8404 (Voice). 711 (Maine Relay). The Office of Elder Services provides or arranges for services to protect incapacitated and dependent adults (age 18 and over) in danger of abuse, neglect or exploitation. Calls may be made anonymously.

### **Sexual Assault Support**

1-800-871-7741 (Voice). 711 (Maine Relay). A 24-hour statewide sexual assault crisis and support line providing confidential services free of charge. Visit [www.mecasa.org](http://www.mecasa.org). See Wabanaki Domestic Violence and Sexual Assault for phone and contact information specific to programs offered by the Wabanaki Tribes of Maine.

### **Domestic Violence**

1-866-834-4357 Statewide Domestic Violence Helpline. Visit [www.mcedv.org](http://www.mcedv.org) Information, crisis counseling, emotional support and advocacy. See Tribal Domestic Violence and Sexual Assault for phone and contact information specific to programs offered by several tribes of Maine.

### **Alcoholics Anonymous (AA)**

1-800-737-6237. During business hours, your call will be taken by a member of Alcoholics Anonymous who knows exactly what you are going through and can give you all the information you need. At night, we have a well qualified answering service, who can give meeting information, or put you in touch with an recovering alcoholic, in your area, who will speak with you about your problem.

### **Statewide Alanon**

1-800-498-1844 Staffed by volunteers answering phones, providing literature, and keeping meeting information. Visit [www.maineafg.org](http://www.maineafg.org)

### **Narcotics Anonymous (NA)**

1-800-974-0062 Call their helpline and talk to a recovering addict. Visit [www.namaine.org](http://www.namaine.org)

### **The Women's Project**

Southern Maine 1-800-611-1588. Northern Maine - 1-800-611-1779. Helping women affected by substance abuse - their own or others. Visit [www.maine.gov/dhhs/osa/help/women.htm](http://www.maine.gov/dhhs/osa/help/women.htm)

### **The Maine Tobacco Helpline**

When you're ready to quit, just call. 1-800-207-1230. Visit [www.tobaccofreemaine.org/quit\\_tobacco/Maine\\_Tobacco\\_HelpLine.php](http://www.tobaccofreemaine.org/quit_tobacco/Maine_Tobacco_HelpLine.php)

### **Drug Tips**

1-800-452-6457. Maine Drug Enforcement Agency (MDEA) Drug Tip Hotline. Provide drug tip information to the MDEA.

### **2-1-1 Maine, Inc.**

211 Maine - dial 211 - Out of state call (877)463-6207. One number - thousands of services. 2-1-1 is an easy-to-remember number that connects people who want to give help or get help with a full range of health and human services in their community. Visit [www.211maine.org](http://www.211maine.org)

### **1-877-kids-now**

(Toll free) 1-877-543-7669. Maine has a health insurance program for infants, children and teens.

[www.maine.gov/dhhs/hotlines.htm](http://www.maine.gov/dhhs/hotlines.htm)

# Kennebec Behavioral Health psychiatrists Hermida and Parent named “Top Docs” in survey

**ELIZABETH KEANE**

*Kennebec Behavioral Health  
Special to the Medical Journal*

Kennebec Behavioral Health is the community resource focusing on customized and effective care for children, adults and families in central Maine who experience mental illness, trauma, emotional or behavioral problems. With 21 sites serving 15,000 people annually, KBH maintains its quality care through the dedication and effectiveness of its staff.

Down East Magazine released a 2014 Physician Survey for Maine’s Top Docs. In this year’s survey asked Maine physicians: “If you or a family member had a problem in a certain area, who would you select as the best specialist in Maine?”

This year two KBH staff members made this list: Jennifer Parent, MD for her excellence in Psychi-

**KBH’s psychiatric clinicians and other providers help children and adults with mood disorders, anxiety disorders, major mental illness and other emotional and behavioral problems.**

atry and Teresa Hermida, MD for her excellence in Psychiatry for Children and Adolescents. These top providers of behavioral services for our community are located at KBH’s Winthrop Clinic. They exemplify the critical and personal care KBH provides clients. KBH is very proud to have both Dr. Parent’s and Dr. Hermida’s important and effective care recognized by members of our peer community.

“It has been a true pleasure working with both Dr. Parent and Dr. Hermida. We are very fortunate to have both providers working in our Winthrop clinic, serving the

Winthrop area communities,” said Bridget Gray, Administrator of Medical Services and Access at KBH.

Hermida, raised in Massachusetts, attended Case Western Reserve University for medical school and did her residency at Cleveland Clinic Foundation. Parent, raised outside New York City, went to New York Medical College and did her psychiatric residency at Butler Hospital in Rhode Island and at Thomas Jefferson Hospital in Philadelphia.

Hermida has worked at KBH for almost 12 years and served 302

patients during 2014. Parent has worked at KBH for almost 10 years and served 374 patients during 2014. They exemplify our mission to promote the well-being of children, adults and families who experience mental illness, emotional or developmental difficulties or behavioral challenges.

KBH’s psychiatric clinicians and other providers help children and adults with mood disorders, anxiety disorders, major mental illness and other emotional and behavioral problems. Clients are provided with appropriate medical prescriptions, medication monitoring, reviews, supports and evaluation of possible medication side effects.

KBH operates community-based clinics in Augusta, Winthrop, Skowhegan and Waterville. More information about KBH programs can be found online at [kbhmaine.org](http://kbhmaine.org) or by calling 888-322-2136.



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# KVCC offers state-of-the-art medical training and more right in our back yard

BY SUSAN VARNEY  
Correspondent

Kennebec Valley Community College is growing, changing and offering academic programs that are in demand across Maine. A wide range of medical programs are offered for students interested in a medical career from one-semester certificate programs in Allied Health to two-year Associate in Science Degrees (ADN) in the Nursing Program which qualifies the graduate for the NCLEX-RN (National Council Licensure Examination) in the state of Maine.

Enrollment at KVCC is about 2400 students, 76% are adults or non-traditional students, while 24% are just out of high school. Richard Hopper, President of KVCC said a lot of that is due to not having dormitories although that is changing since the addition of the Hinckley facilities.

"We have the lowest tuition in New England at \$3500 for a full-time student with 77.4% covered by Pell Grant or state grants or KVCC Foundation grants. Students fill out the FAFSA application and we work with them to find the money to cover tuition costs. Grants are not loans, students are not walking away with huge debt. These are grants to cover most of the cost of attending KVCC.

"More than 90 percent of graduates get jobs within three months of graduation," said Hopper. "Ninety percent of those stay in Maine."

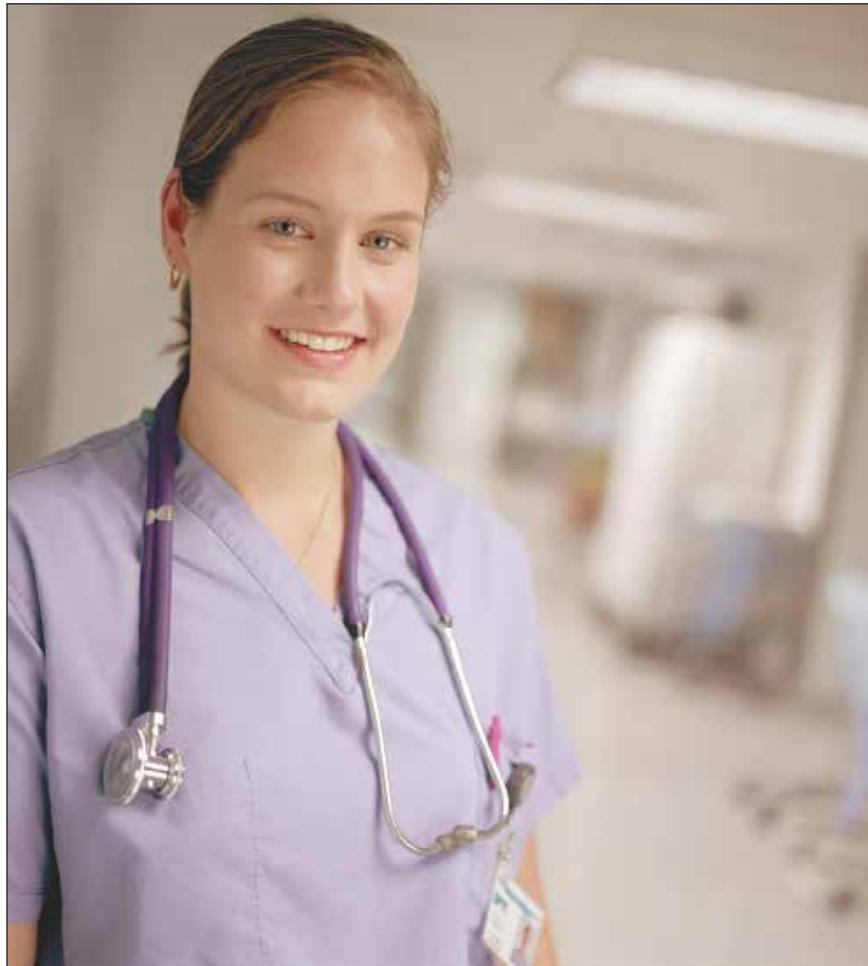
Students who complete the nursing program will have the knowledge and ability to assess a patient's "biopsychosocial" needs, analyze data, plan interventions, implement and evaluate care and the patient's response to care.

"With a one to five ratio of teacher to student, KVCC has teachers who work in the fields they teach, are good at it and are beloved by the students," said Hopper.

The KVCC Nursing Program keeps pace with current health care trends and technology in order to meet the needs of the community and the requirements of accrediting agencies, facilities and the college, he said. Students are expected to be computer proficient in keyboarding, word

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**RICHARD HOPPER, PRESIDENT  
KENNEBEC VALLEY COMMUNITY COLLEGE**



processing and use of the internet and should have off-campus internet access for online course activities.

The Nursing Program has 58 students who start and stay together as a cohort until graduation. The program is filled up by March 1 for 2016. Anyone who needs prep for the program to refresh skills, especially for adults long out of school, will find classes in developmental education for math, science and writing. The Health Occu-

pations Basic Entrance Test helps the school place the student at the right level for them.

"There is lots of support for students to succeed," said Hopper. "Older students are discerning, learning quickly and remembering. They appreciate good teachers who have the information they want and need," he said.

Other health related-programs at KVCC include Mental Health and Allied Health. The field of Mental

Health is a diverse field with an array of career opportunities and qualifications. Allied Health courses offered at KVCC include options in Advanced Emergency Care from EMT to Paramedic training, Computed Tomography (CT scan), Health Information Technology, Mammography, Massage Therapy, Medical Assisting, Medical Coding, Occupational Therapy Assistant, Phlebotomy (drawing blood specimens and laboratory testing), Physical Therapist Assistant, Radiologic Technology (X-rays and MRIs), Respiratory Therapy, and Sonography (ultrasound-based diagnostic imaging).

KVCC has a simulation laboratory where students work in a state-of-the-art facility equipped with the latest patient simulators and simulation software dealing with various medical conditions to prepare students to then go into the community for experience in hospitals and clinics before graduation.

KVCC has been awarded \$2.5 million in federal funding from the U.S. Labor Dept over the next three years. The money is to be used to advance health care, social work and construction careers in Maine. KVCC will use the funds to expand and enhance its existing degree and certificate programs in Medical Assisting and Mental Health while creating a new two-year degree program in Sustainable Timber Frame Design-Build Construction.

KVCC's Trades & Technology programs include Electronics and Computer Technology, Electrical Technology, Energy Services, Precision Machining and Pulp & Paper Technology. With the addition of the campus at Hinckley there is now a Sustainable Agriculture program. There are also programs in Business Administration, Culinary Arts, Education, General Science and Liberal Studies.

# Medication safety tips for children and adults

Prescription and over-the-counter medications can save lives and help people of all ages manage certain conditions. When used correctly and under the guidance of a physician, medications are largely safe. It's when medicines are used off-label, shared or taken in error that reactions and injury can occur.

The American Academy of Pediatrics and their Healthy Children Organization warns that more than 7,000 children visit hospital emergency rooms every year for problems related to medication errors. Children are not the only ones in danger. Adults can make mistakes with their medications as well. For example, seniors who may be managing several different types of medications can inadvertently cause dangerous drug interactions by mixing the wrong pills.

Pharmacists work diligently to help prevent medication errors. However, the general public can also do their part. The American Society of Health-System Pharmacists and the

National Association of Boards of Pharmacy offer these medication safety tips.

- When a new medication is prescribed, ask the doctor to explain more about it, including its intended purpose and any common side effects to be expected.

- Make sure your doctor knows about all the medications you are taking, including non-prescription products, herbal remedies, dietary supplements, and vitamins. Some medications do not mix with seemingly innocent ingredients. Keep a running list of any medicines you take so you can easily and accurately share this information with your physician.

- Question anything that you do not understand. Check the prescription for dosing information. For refills, make sure the refill information conforms to the original prescription strength.

- Fill all prescriptions at the same pharmacy and develop a rapport with the pharmacist so that potential drug interactions will be flagged. Pharmacists are well versed in medications and may be able to inform you as to the safety or risk involved in taking an over-the-counter product at the same time that you are on a prescription.

- Many pills look the same. If you are confused and taking multiple medications, keep medications in the original packaging and double-check the labels before taking any medications.

- Use the right dosing tools. A spoon from the kitchen is not accurate for measuring out a teaspoon of medication.

- If you take multiple medications, use a pillbox to keep pills organized. The box makes it easier to manage medications and serves as a reminder if you have or have not taken a medi-

cation on a given day.

- Store medications as instructed on the label. The bathroom medicine cabinet may not be an ideal place to store medications, as bathrooms get damp, and that can compromise the integrity of the pills. Also, bathroom cabinets are readily accessible by all, including kids. It's better to store drugs out of sight and reach of children. Keep dangerous medications locked away.

- Routinely discard expired or unneeded medications. Medicine take-back programs for disposal are a good way to remove medicines from the home and reduce the chance that others may accidentally take the medicine.

- Consult with a doctor before beginning or ending medication. Medicines play important roles in personal health. When used correctly, medications are assets, but caution should always be taken to ensure safe usage and storage of any medications.



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# The Maine Aging Initiative workgroups trying to address problems related to aging

BY JOHN E. NALE, ESQ.  
Elder Law Attorney  
Special to the Medical Journal

In the Winter 2014 edition of the Elder Law Advisor, we introduced you to the series of round table discussions being held to focus on the rapidly changing landscape of Maine's aging population. These round table discussions began in the fall of 2013 in partnership with the Maine Council on Aging (MCOA) and the Maine Speaker of the House, Mark Eves, and were attended by a diverse group of leaders representing business, industry, finance, housing, philanthropy and state and municipal government.

The ideas generated from these discussions provided a framework for further exploration with 400 people at the Maine Summit on Aging in January of 2014. From ideas generated and prioritized at the Summit, the Council and Speaker Eves crafted the Blueprint for Action on Aging and launched the Maine Aging Initiative in March of 2014.

Maine is facing an unprecedented challenge as a result of a rapidly aging population that is living longer and in need of significantly more community support. This challenge is exacerbated by a shrinking population of working-age residents and very low in-migration to the state as compared to other regions. A complicating factor is that many of our workers are also informal caregivers who struggle to keep working and still provide care with little outside support.

The Maine Aging Initiative was launched with the formation of five working groups made up of people with different skills and perspectives on the workgroup subject areas. The groups include more than 100 people from across all sectors of the state's economy and have been working on their assigned priority focus areas for the last eight months.

The Aging Friendly Communities Workgroup is charged with developing best practices related to housing, transportation and community-based initiatives that support healthy aging. This group has drafted a white paper on accessory apartments providing concrete recommendations for towns to improve opportunities to help seniors live independently.

The Health & Well-Being Workgroup is working to develop and promote best practices for collaboration of health care and community-based care services, and for volunteer community-based naviga-



JOHN NALE

Maine is facing an unprecedented challenge as a result of a rapidly aging population that is living longer and in need of significantly more community support. This challenge is exacerbated by a shrinking population of working-age residents and very low in-migration.



MARK NALE



tion and health support of older adults. This group is exploring practices related to patient engagement, training of health and direct care workers, person-centered coordinated care, and senior and caregiver isolation.

The Higher Education Workgroup has a three-pronged mission, which includes 1) Compiling data about research being conducted in Maine on aging and coordinating efforts statewide. 2) Discovering best practices in educational models that support older adults with a goal of replicating these models. 3) Determining concrete steps to best support training to help older people engage in

the workforce.

The Public & Private Safety Workgroup is charged with strengthening public communication about scams and frauds and increasing coordination between first responders, health and direct care workers and community organizations in order to support vulnerable older adults.

The Workforce & Employment Workgroup is charged with developing standards of best practices for employers related to caregiver and aging worker leave policies, flexible work schedules, information and training to support older workers who are extending careers

or returning to work, and delving into the needs of working caregivers.

The Legislative Aging Caucus. In addition to these workgroups, the Maine Aging Initiative calls for the formation of a Legislative Caucus on Aging. The Caucus is forming now and will begin to explore ways legislators can work together to enact legislation that will help older adults age safely and independently in their communities.

The University of Maine has already patented several new technologies it has developed to advance this goal. To read more on this important and ongoing initiative, visit [mainecouncilonaging.org](http://mainecouncilonaging.org).

# Yearly eye exams can reveal more than just vision trouble

More evidence points to the importance of routine eye exams, not only to pinpoint potential conditions of the eye, but also to serve as windows to diseases that affect the entire body. Now more than ever it is essential to make and keep annual eye exams, as they can help to reveal the first signs of serious ailments.

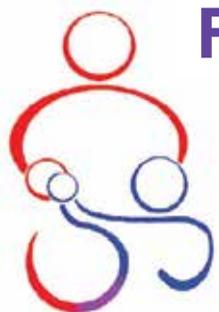
Doctors from around the world say dozens of diseases - from certain cancers to arthritis to high blood pressure - can show symptoms in the eye. Under the watchful and knowing gaze of an eyecare professional, individuals can get early diagnosis and begin treatment promptly.

According to Dr. Roy Chuck, chair of the Department of Ophthalmology and Visual Sciences at Albert Einstein College of Medicine and Montefiore Medical Center, there

are many systemic diseases that can be seen in the eye. In addition to the conditions mentioned, jaundice can indicate liver disease while retinal detachment and bleeding in new blood vessels may indicate hypertension. By looking at the color of the cornea, some doctors can tell if a patient has elevated levels of cholesterol. Many people have had their eye doctors be the first healthcare professional to detect the presence of their diabetes.

If an ophthalmologist suspects an underlying medical condition, he or she will likely refer men and women to their primary care doctors for a more thorough examination.

Going to the eye doctor can do more than ensure your vision is sharp. It's a life-saving decision for many people who have major health conditions diagnosed through the eyes.



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# How to beat the couch potato curse

Diet and exercise make great bedfellows for men and women looking to live a healthier lifestyle. A combination of a healthy diet and regular exercise makes it easier for men and women to

maintain a healthy weight while lowering their risk of various ailments, including heart disease and diabetes.

A heightened awareness of what makes for a healthy and unhealthy

diet coupled with the increased availability of healthy foods has helped many people smoothly transition to a healthier diet. But many people still struggle to find time to exercise every day. Commitments to work and family can make it difficult to squeeze in regular workouts, and the call of the couch is often more appealing than a trip to the gym at the end of a long day juggling both personal and professional obligations. But exercise is integral to a healthy lifestyle, so it's important that men and women take steps to incorporate exercise into their daily routines.

**Figure out when you're free.** Finding free time is perhaps the biggest hurdle adults must clear when attempting to exercise more. Track your daily schedule for a week or two, making note of down times during the day when you might be able to squeeze in 30 to 60 minutes of exercise. If you notice you're spending your lunch hours catching up on personal emails or surfing the Internet, then consider joining a gym near your office and turning those lunch hours into workouts. If your mornings are not dominated by getting the kids ready for school, then wake up a half hour earlier each morning to squeeze in some time on the treadmill. You likely have some down time with regard to your daily schedule, and identifying such time is the first step toward making better use of it.

**Make it a team effort.** Daily exercise is not just good for adults; it's great for kids, too. Parents looking to fit more physical activity into their daily routines should consider involving their children, many of whom are dealing with a fitness crisis of their own. According to a 2014 report in the *Journal of the American Medical Association*, childhood obesity has more than doubled in children and quadrupled in adolescents over the last three decades, putting youngsters at increased risk for cardiovascular disease, prediabetes, bone and joint problems, and sleep apnea. Parents can make daily exercise a family affair, which increases the time

they spend with their children while ensuring their kids stay fit as well. Men and women without families also can make daily exercise a team effort by working out with a friend or significant other. The buddy system often proves motivational, encouraging men and women to exercise even on those days when the couch is calling.

**Make exercise more interesting.** Many workout routines fall by the wayside because they simply do not engage men and women no matter how motivated they are to lose weight. An hour on the treadmill can seem like an eternity to certain men and women, who can benefit by choosing workout routines that are less monotonous. For example, Zumba is a combination of dance and aerobic exercise that is growing in popularity. In lieu of spending an hour on the treadmill or elliptical machine, Zumba participants get an equally if not exceedingly challenging cardiovascular workout that many find more fun than traditional aerobic exercise thanks to its incorporation of dance. For those without such happy feet, bring a tablet along to the gym and catch up on your favorite television shows or a good book during your cardiovascular routines. The more interesting you find your workout routine, the more likely you are to find time for that routine every day.

**Choose an accessible routine.** When planning your workout, make it as accessible as possible. While sports like kayaking and mountain bike racing make for great exercise, such activities are not readily accessible to many working professionals with busy schedules. Join a gym that's only a short drive from home, or purchase some gym equipment you can set up in your own home. The more accessible a workout routine is, the more likely you are to embrace that routine.

The call of the couch can be difficult to ignore. But the side effects of a sedentary lifestyle can be grave, so men and women should work to find ways to include exercise in their daily routines.



# Travel and stay healthy at the same time

Healthy habits are often put aside when men and women travel. Whether traveling for professional or personal reasons, even the most ardent proponents of healthy lifestyles may find themselves making less than healthy choices when they're away from home.

Though part of the joy of travel is experiencing other cultures and cuisines, such experiences should not come at the expense of your overall health. Fortunately, there are many ways men and women can travel and still protect their personal health.

**Be sure to get enough sleep.** Lack of sleep can lead to a host of consequences, none of which are very good for your overall health. While it might be fun to burn the candle at both ends on a business trip or vacation, such an approach will almost certainly weaken your immune system and leave you susceptible to a host of ailments. Business travelers should keep in mind studies that have shown lack of sleep impairs alertness, concentration and reasoning, which can make it hard to make a good impression on professional colleagues.

Lack of sleep also makes it difficult to maintain adequate energy levels, making it difficult for vacationers to make the most of their time away from the office. When traveling, try to get as much sleep as you would if you were home. Adults typically need between seven and eight hours of sleep per night to operate at full capacity, and that rule should not be forgotten just because you're away from home.

**Book a room with a kitchen.** Business travelers may find it difficult to enjoy healthy meals on the road. In lieu of dining out each night, travelers can book a room with a kitchen so they can prepare their own meals, which gives them more control over what they're putting in their bodies. Without a kitchen in your room, you're at the mercy of restaurants near your hotel, which may or may not have readily accessible and healthy restaurants nearby.

**Don't abandon your exercise routine.** Whether traveling on vacation or for business, you can still exercise even when you are away from home. When booking a hotel, look for one with

its own exercise facilities, which you should be eligible to use the moment you check in. If you are traveling for work and your room has already been booked, then you might have to improvise if the hotel has inadequate exercise facilities or no facilities at all. Pack some jogging outfits and bathing suits so you can squeeze in a run or swim some laps while on your trip. Both exercises make for great workouts that can act as your fallback plan should you find yourself in a hotel with no exercise facilities.

**If it ain't broke, don't fix it.** Just because you're on the road does not mean you should relax all of your rules regarding diet and exercise. If your current diet and exercise routine is producing great results, try to stick to that routine as much as possible while you're traveling. Many people struggle to find a successful balance of diet and exercise, so if you have managed to find that balance, don't be quick to abandon it just because you're on a business trip or enjoying a vacation. When vacationing, afford yourself some dietary spoils,

but keep up your good habits as well, being sure to eat your nightly helping of vegetables or your morning fruit with breakfast. Such an approach will make it easier to maintain your diet when you return home, and might give you the energy you need to have a more enjoyable vacation. The same goes for business travelers who should not abandon healthy eating habits just because they're dining out or ordering room service. The more you can maintain your healthy habits away from home, the more likely you are to embrace those habits when you are back home and away from the temptation of the road.

**Employ the buddy system.** The buddy system, in which you and a friend, coworker or family member, resolve to exercise and/or diet together, can be just as effective when traveling as it is at home. Having someone there with you to sweat and make healthy dietary choices when out on the town can make it much easier to adhere to a healthy lifestyle when away from home.



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# Snack foods that promote better sleep

According to the National Sleep Foundation, changes in sleep patterns are a part of the aging process. Many people experience difficulty falling asleep and then staying asleep as they age, and that difficulty can make men and women over 50 feel more tired during the day.

But even though difficulty sleeping may be a part of aging, that does not mean men and women over 50 cannot take steps to improve their sleeping patterns. For example, certain snack foods may help to improve quality of sleep, especially when these foods replace less healthy snacking options. While men and women over 50 should always consult with their physicians before making any changes to their diets, the AARP notes that the following are a handful of snack foods that promote better sleep.

• **Almonds:** Magnesium is a mineral with muscle-relaxing properties, and almonds contain enough magnesium to help men and women get a better night's sleep. A small amount of almonds before bed might be enough to make falling and staying asleep easier.

• **Bananas:** Much like almonds, bananas provide a substantial amount of magnesium. Bananas also contain the amino acid tryptophan, which many people associate with Thanksgiving turkey. While tryptophan might be most often associated with the sleepiness people feel after eating a holiday meal, it

also has been linked to better sleep quality, so a banana shortly before bed might be just what you need to fall and stay asleep.

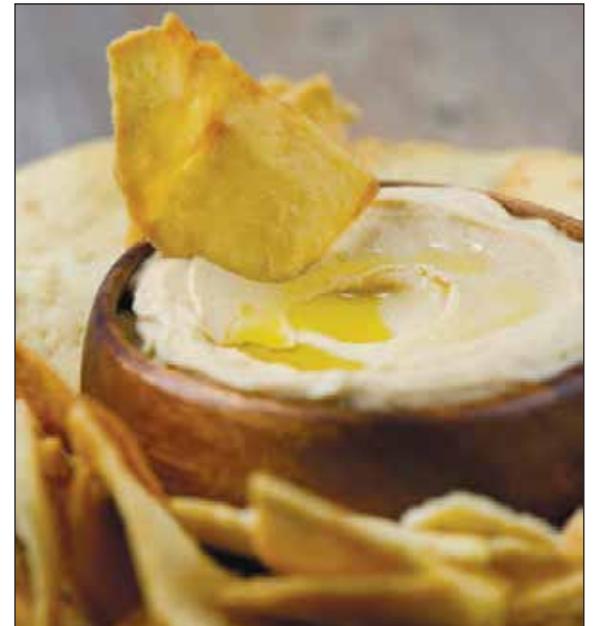
• **Cheese and crackers:** One more traditional snack may just help you get a better night's sleep. Cheese and crackers contain tryptophan and carbohydrates, which can induce a better night's sleep and help you fall asleep sooner.

• **Cherries:** Cherries contain the sleep hormone melatonin, and the AARP notes that recent studies indicated that participants who drank tart cherry juice on a daily basis fell asleep more quickly and slept longer and better than participants who did not.

• **Hummus:** The primary ingredient in hummus is chickpeas, which are loaded with tryptophan, folate and vitamin B6. Folate has proven especially beneficial to older men and women who need help regulating their sleep patterns, while vitamin B6 helps the body regulate its clock.

• **Peanut butter:** Peanut butter is another snacking item loaded with tryptophan. Spread some peanut butter on a carbohydrate, whether it's a slice of toast or some crackers, before going to bed, and you may enjoy a better, longer sleep.

• **Walnuts:** Like cherries, walnuts contain melatonin, which can contribute to a longer, more restful night's sleep. Walnuts also can help regulate stress, which is a leading cause of sleeping difficulty.

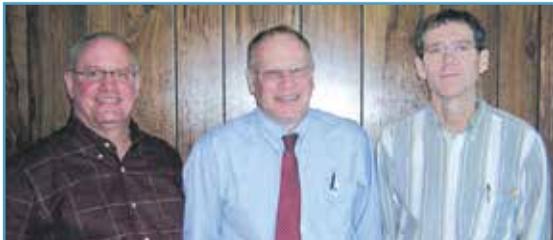


Many men and women experience difficulty sleeping as they age. But the right foods may just help combat such problems and help men and women get a more adequate night's sleep.



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# Home remedies for joint pain can provide relief

Stiff, painful joints affect a vast number of people. According to the American College of Rheumatology, arthritis and other rheumatic diseases afflict roughly 23 percent of Americans, while Canadian Health Surveys indicate that nearly 17 percent of the Canadian adult population have arthritis. The number of people living with arthritis is expected to increase as the Baby Boomer generation continues to age.

Treatments for joint pain and stiffness range from medication to physical therapy. Finding the right regimen may take some effort, including some trial and error. For those looking for treatments they can try at home, consider these homespun remedies. (Note: Check with a physician to confirm the safety of alternative treatments before adding herbs to or modifying your existing medications.)

#### •Exercise more.

Regular movement helps to maintain flexibility in the body's joints. Those with joint pain may shy away from exercise, but they could be doing themselves a disservice. Low-impact exercises, like swimming and water aerobics, can work out muscles and joints without adding extra stress. Walking can replace jogging or running, and yoga and pilates may be just the thing for deep stretching.

#### •Lose weight.

Joint pain is often tied to obesity. Losing just a few pounds can ease up strain on certain joints, such as the hips, feet and knees. Shedding weight can improve mobility and decrease pain and potential future damage to joints. Exercise goes hand-in-hand with healthy eating

to lose weight.

#### •Consider hot and cold therapies.

Using a heating pad, hot shower or bath or an ice pack can work wonders on arthritis-related pains. Hot treatments will loosen up stiff joints, while cold therapy is best for acute pain relief. Do not apply hot and cold packs to the skin directly, as this can injure the skin. Wrap them in a towel first before application.

#### •Include anti-inflammatory foods and beverages in your diet.

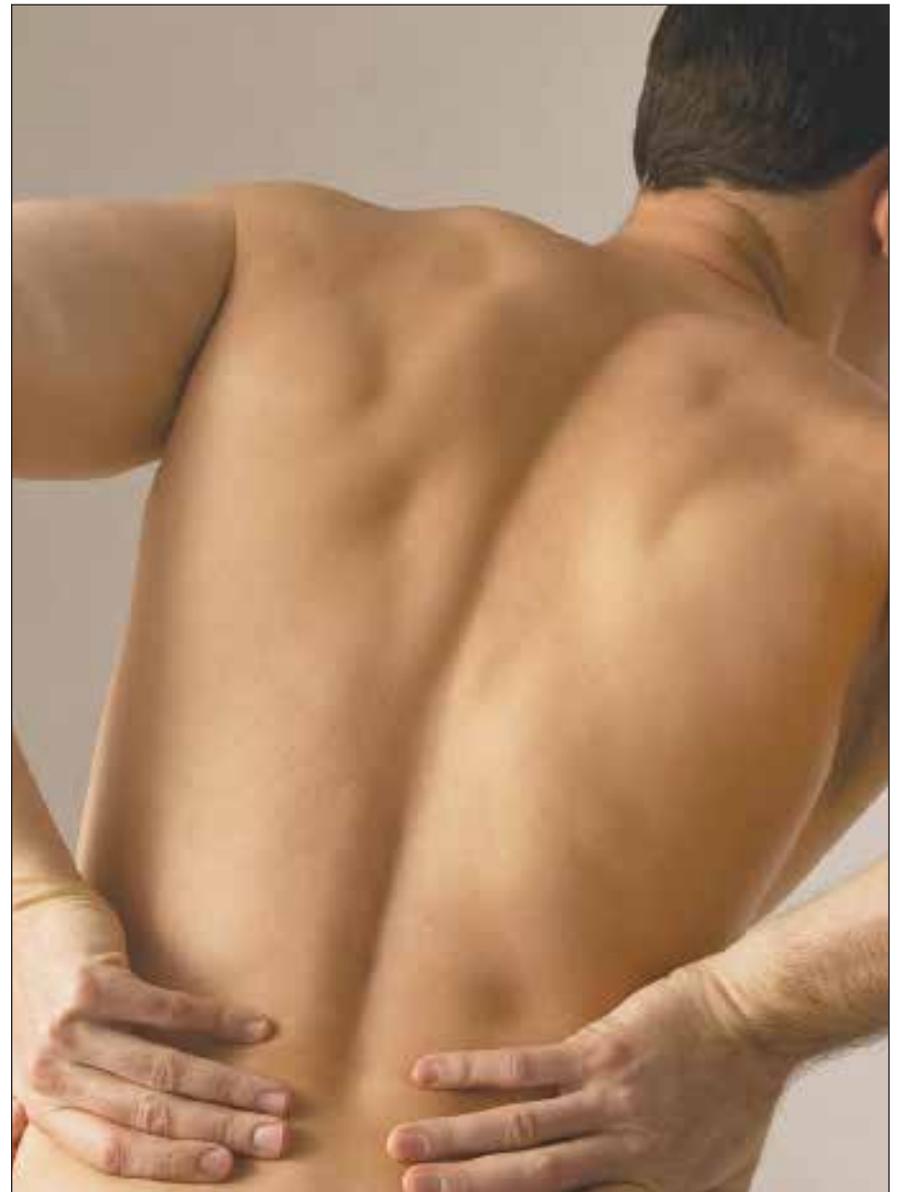
Explore the many different natural foods and herbs that are purported to reduce inflammation in the body. Ginger, turmeric, flaxseed, grape juice, and bromelain can alleviate inflammation and stiffness. Foods such as fatty fish and nuts high in omega-3 fatty acids also will help fight inflammation. Blueberries, garlic, celery, and kelp should be included in diets as well.

#### •Go for a massage.

The Arthritis Foundation says regular massages can help reduce pain and stiffness and improve range of motion. The massage therapist should have experience working on people with arthritis. In addition, massages should be performed by licensed physical therapists and guided by a doctor's recommendation.

#### •Increase magnesium intake.

Magnesium can alleviate pain and reduce inflammation. It is best ingested through dark, leafy greens but also can be taken in supplement form. Magnesium oil can be applied topically to sore joint areas.



Joint pain can impact daily life and make activities less enjoyable. Fortunately, there are plenty of ways that do not require harsh medications to loosen joints and combat pain.

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# Learn to recognize potential cancer symptoms

A cancer diagnosis is a life-altering event. Those diagnosed with cancer typically wonder how the disease will impact their futures, including their ability to work and how the disease may impact their family's security.

Men and women diagnosed with cancer also often wonder if they missed any warning signs that might have alerted them to their disease prior to their diagnosis. Unfortunately, many forms of cancer have no symptoms in their earliest stages. When they do, conditions may be so mild that they are easily mistaken for something more innocuous.

But that does not mean men and women should not familiarize themselves with the warnings signs of cancer.

Early detection of cancer factors heavily into the efficacy of treatments, and the Cancer Cure Foundation notes the following signs and symptoms could be warnings signs of certain cancers:

- lumps or thickening in tissues of the body
- sores that do not heal or noticeable changes in warts, moles or beauty marks

- unusual bleeding or discharge
- weakness, persistent aches or constant fatigue
- unexplained weight loss
- persistent cough or blood in sputum
- constant indigestion or trouble swallowing

Additionally, the American Cancer Society uses the word CAUTION to help people recognize the most common early signs of cancer.

- Change in bowel or bladder habits.
- A sore that does not heal.
- Unusual bleeding or discharge.
- Thickening or lump in the breast, testicles or elsewhere.
- Indigestion or difficulty swallowing.
- Obvious change in the size, color, shape, or thickness of a wart, mole or mouth sore.
- Nagging cough or hoarseness.

Keep in mind that cancers in particular areas of the body may have their own unique symptoms that do not include any of the ones already mentioned. For example, bloating could

be a sign of ovarian cancer, but some may look at it as a symptom of indigestion. Dizziness or drowsiness may be indicative of brain cancer.

The presence of cancer symptoms does not mean a person has the disease. However, symptoms that persist beyond two weeks should be investigated by a doctor. Cancer screening is specific to age and risk factors. A doctor is best qualified to determine which screening options are in your best interest. Blood tests and minimally invasive tests, such as biopsies or CT scans, can help to determine if cancer is present.

The good news is that recognizing cancer early can make treatment more effective. The ACS notes that early diagnosis generally translates to a higher rate of survival.

Routine screenings for cancer in those who have a family history or other risk factors can be helpful. However, understanding your body and being mindful of even the slightest changes can prove even more effective in recognizing symptoms that may be the early stages of cancer.

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# Understanding cholesterol

Cholesterol is in many ways considered a dirty word. While cholesterol is too complex to categorize so easily, the widely known complications of high cholesterol make it easy to generalize cholesterol as something detrimental to human health.

But there's more to cholesterol than meets the eye, and understanding this waxy substance can help men and women get a better idea of their overall health and what they need to do to be even healthier.

## Where does cholesterol come from?

Cholesterol is produced by the body, but also comes from the food you eat. The human body makes all the cholesterol it needs and circulates that cholesterol through the blood. But foods, including meat, certain dairy products and poultry, also contain cholesterol, and the liver actually produces more cholesterol if you eat a diet that's high in saturated and trans fats.

## Why is cholesterol potentially dangerous?

According to the National Heart, Lung and Blood Institute, high blood cholesterol is a major risk factor for heart disease. If your body has too much cholesterol in its blood, that excess cholesterol can form plaque in the walls of your arteries, gradually causing

a hardening and narrowing of the arteries. Narrow arteries slow blood flow to the heart, which needs both the blood and the oxygen that blood carries in order to function at full strength. If plaque buildup in the arterial walls slows or blocks off that blood flow, a heart attack may result.

## Bad vs. Good?

Many people are now aware that cholesterol is widely categorized as "bad" or "good," but many of those same people may not know why that distinction is so important. Cholesterol does not dissolve in the blood, so it must be transported through the bloodstream by carriers known as lipoproteins. There are two types of lipoproteins that perform this function: low-density lipoproteins, or LDL, and high-density lipoproteins, or HDL. LDL is what's commonly referred to as "bad" cholesterol because it contributes to the buildup of plaque, the thick and hard deposits that can line the arterial walls and impede blood flow. HDL is the "good" cholesterol, as it helps remove LDL from the arteries. According to the American Heart Association, experts believe HDL gathers LDL before carrying it away from the arteries and back to the liver, where it is ultimately broken and down and passed from the body. Healthy levels of HDL can protect against heart disease and stroke, while low levels of

HDL are considered a major risk for heart disease.

## What affects cholesterol levels?

Cholesterol levels are affected by lifestyle choices you can control and additional factors you cannot.

**Diet:** Diet is entirely within your control, so bad cholesterol levels that increase because of your diet are entirely preventable. A diet that's high in saturated fat is unhealthy, and the AHA recommends a diet that emphasizes fruits, vegetables, whole grains, low-fat dairy products, poultry, fish, and nuts. Avoid red meat as much as possible and steer clear of sugary foods and beverages.

**Weight:** Weight is another controllable risk factor for high cholesterol. Being overweight is a risk factor for a host of ailments, including high cholesterol and heart disease. Losing weight can lower LDL while increasing HDL, providing the best of both worlds.

**Exercise:** Regular physical activity can lower LDL and raise HDL levels. The AHA notes that 40 minutes of aerobic exercise performed at moderate to vigorous intensity three to four times per week is enough to lower LDL and high blood pressure. Inactivity, on the other hand, is a major risk factor for heart disease.

**Age:** Cholesterol levels rise as men and women age, which only highlights the emphasis men and women must place on healthy

lifestyle choices as they get older. You won't be able to cease aging, but you can still make healthy lifestyle choices to combat the impact that aging has on your cholesterol levels.

**Gender:** Gender is another uncontrollable factor that affects cholesterol levels. Before reaching the age of menopause, women have lower total cholesterol levels than men of the same age. But after they reach the age of menopause, women's LDL levels typically rise.

**Heredity:** High blood cholesterol can run in families, so your genes might just be influencing how much cholesterol your body is making.

## How great is my risk of heart disease or heart attack?

The more risk factors, including high LDL levels and factors listed above, you have, the greater your risk of developing heart disease or having a heart attack. Those who already have heart disease are at greater risk for heart attack, and people with diabetes also have a more significant risk of developing heart disease.

Monitoring cholesterol levels and making healthy lifestyle choices can greatly reduce your risk of heart disease and heart attack. More information about cholesterol is available at [www.heart.org](http://www.heart.org) and [www.nhlbi.nih.gov](http://www.nhlbi.nih.gov).

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# Simple ways to maintain your mental acuity

Many people know that a combination of a healthy diet and routine exercise is the best way to maintain their physical health. But what about mental well-being? Memory lapses are often assumed to be an accepted side effect of aging, but such an assumption is incorrect as there are many steps men and women can take to maintain their mental acuity well into their golden years.

**Find time for cardiovascular exercise.** Cardiovascular exercise can help men and women maintain healthy weights and reduce their risk for potentially deadly ailments like diabetes and heart disease. But cardiovascular exercise also can boost brain power. Cardiovascular exercise pumps oxygen-rich blood to the brain, and that blood contains glucose that can fuel brain cells. Cardiovascular exercise also strengthens blood vessels, which can help prevent potentially devastating diseases, such as stroke, that can have a lasting and negative impact on cognitive function.

**Find time for friends and family.** Many people need no reason to socialize, but those that do can now cite boosting brain function as a great reason to get together with family and friends. Routine socialization can keep a brain sharp by reducing its levels of cortisol, a potentially destructive hormone brought on by stress. Researchers also believe that routine interaction with other people stimulates structures in the brain's frontal lobe that are likely responsible for planning, decision making and response control.



**Squeeze in a nap every so often.** Naps can have a reenergizing effect on men and women, but a study from German researchers also found that naps also can improve memory. In the study, researchers divided participants into three groups: people who would stay awake for 60 minutes; people who would sleep for six minutes; and people who would sleep for 30 to 45 minutes. After the hour was up,

participants were given a word recall test, and those who slept performed better on the test than those who hadn't. But the development that was perhaps most interesting was that those who slept for just six minutes performed just as well on the test as those who slept for far longer, leading researchers to suggest that men and women need not take long naps to improve their memories.

**Include fish in your diet.** A study from researchers at Chicago's Rush University Medical Center found that people who eat fish once per week have a 60 percent lower risk of developing Alzheimer's disease than those who do not include fish in their weekly diets. Researchers credit this lower risk to DHA, an omega-3 fatty acid that is found in both the brain and in fish such as salmon and tuna.

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# Understanding lymphoma and its potential causes

The human body's immune system is integral to its short- and long-term health, helping guard the body from a host of threats, including germs and viruses. But the immune system can be compromised, and when this happens, the results can be severe.

Lymphoma is one of the more troubling issues that can compromise a person's immune system. A cancer of the lymph system, which is a part of the immune system, lymphoma comes in many forms, and recognizing which type of lymphoma a person has can help a doctor tailor a treatment plan and provide a more accurate prognosis to his or her patients. But men and women also can benefit from understanding lymphoma, as it can help them more effectively manage their disease or better understand what a loved one diagnosed with lymphoma is going through.

## What are the types of lymphoma?

There are many types of lymphoma, and these types fall into one of two categories: Hodgkin disease and non-Hodgkin lymphomas.

Hodgkin disease: Hodgkin disease begins in white blood cells known as lymphocytes, and because lymphoid tissue is present

in many parts of the body, Hodgkin disease can start nearly anywhere on the body. However, Hodgkin disease most often starts in the lymph nodes of the upper part of the body, such as the chest, neck or under the arms. Hodgkin disease will spread gradually, most often from lymph node to lymph node.

But because there are different types of Hodgkin disease, the disease can grow and spread differently depending on the type a person has.

**Non-Hodgkin lymphoma:** Non-Hodgkin lymphoma also begins in the lymphocytes and can begin almost anywhere in the body. There are many types of non-Hodgkin lymphoma, but they were often grouped as slow- or fast-growing lymphomas. The former grows so slowly that it produces few symptoms, while the latter spreads so quickly it can cause severe symptoms and may be referred to as an aggressive lymphoma.

## What causes lymphoma?

Though researchers are not always certain why certain factors make a person more likely to develop Hodgkin disease, they have determined a handful of factors that increase a person's risk.

People who have had mononucleosis, an infection caused by the Epstein-Barr virus, or EBV, have an increased, albeit small, risk of Hodgkin disease. DNA from EBV is found in roughly half of Hodgkin patients' Reed-Sternberg cells, which are a type of cell found in people with Hodgkin lymphoma. But many people infected with EBV never develop Hodgkin disease.

Age is another risk factor for Hodgkin disease, as the disease is most common among people between the ages of 15 and 40, especially men and women in their 20s. But many men and women are diagnosed with Hodgkin disease in late adulthood as well. Age also is a risk factor for non-Hodgkin lymphoma, though the majority of cases are diagnosed in people in their 60s or older.

Family history also plays a role, as brothers and sisters of young people with Hodgkin disease have an elevated risk, one that is especially high for the identical twin of a person with Hodgkin disease. But the American Cancer Society still notes that a family link is still seen in only about 5 percent of all cases of Hodgkin disease.

Some studies have suggested that exposure to certain chemicals, most notably benzene, and

certain herbicides and insecticides used to kill weeds and insects, may be linked to an elevated risk of developing non-Hodgkin lymphoma. However, such research is ongoing.

Patients treated with radiation therapy for other cancers may also be at an increased risk of developing non-Hodgkin lymphoma, and this risk is even greater for those treated with both radiation and chemotherapy.

Immune system deficiencies and autoimmune diseases have also been linked to a greater risk for non-Hodgkin lymphoma. People who have received organ transplants are often treated with immune system suppressants to ensure the immune system does not attack the new organ, and such suppressants put people at a higher risk of developing non-Hodgkin lymphoma. Children born with immune system deficiencies also have an elevated risk of developing non-Hodgkin lymphoma, as do people with autoimmune diseases such as rheumatoid arthritis, lupus and celiac sprue.

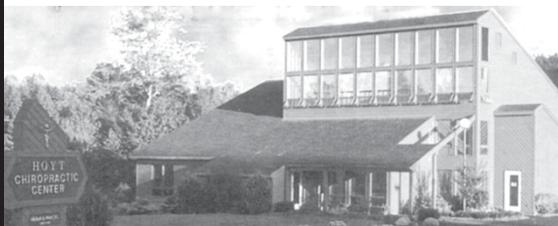
Lymphoma is a potentially deadly disease, but one that is often treatable. More information about lymphoma and lymphoma treatment is available at [www.cancer.org/cancer/lymphoma](http://www.cancer.org/cancer/lymphoma).



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# Is there a link between GMOs and cancer?

The use of genetically modified organisms, or GMOs, in foods remains a controversial subject. The concerns about modifying genetic material in foods surrounds the uncertainty about the medical implications of consuming foods that have had their DNA changed in a laboratory. One such concern is whether or not there is a link between GMOs and cancer. To understand such a potential connection, it first helps to understand GMOs and why they spark such controversy.

## What are GMOs and why are they used?

GMOs are plants or animals that have been genetically changed, but many people associate GMOs with foods, namely corn and other grain products. Genes from one species are inserted into another to create a desired trait. This is known as gene splicing. Plants may be modified to be more resistant to drought or harsh conditions. Other genes may be altered to make plants more resilient and resistant to pesticides or certain diseases.

## Most commonly altered foods

Certain foods are subject to genetic modification more so than others. Soybeans, corn, cotton, canola, papaya, zucchini, and other squashes are some of the more commonly modified crops. The In-

ternational Service for the Acquisition of Agri-Biotech Applications also lists alfalfa, chicory, eggplant, flax, potato, rice, sugar beet, and tobacco on its list of GM crops.

## Concerns about GMOs

The risks associated with consuming GMOs are largely unknown. According to the MD Anderson Cancer Center, researchers have not conclusively confirmed if GMOs increase a person's risk of developing cancer or other diseases. Some experts say the benefits of eating whole grains and vegetables — even GMO varieties — outweigh the concerns about GMOs, while others are not so sure.

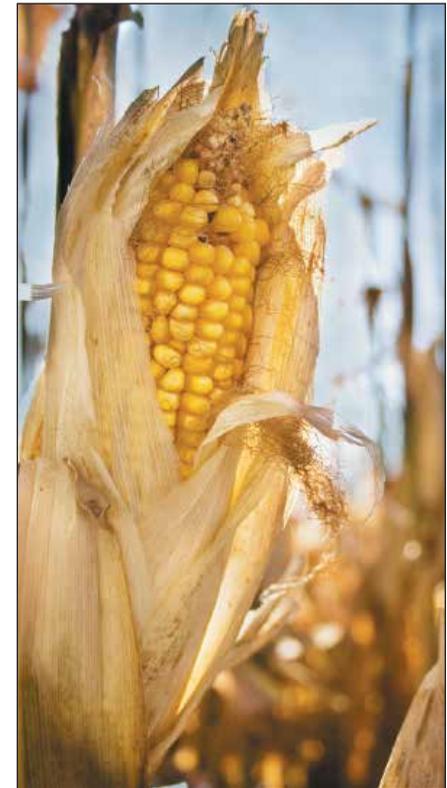
According to a study published in the peer-reviewed journal, Food and Chemical Toxicology, French researchers discovered that rats fed genetically engineered corn or those exposed to the active ingredient in the weed killer Roundup over a long period suffered premature death and developed mammary tumors while also suffering from kidney and liver damage. Researchers fed rats GM corn or gave them water laced with Roundup at levels allowed in the United States. The research found that even limited exposure to these products produced mammary tumors and led to severe liver and kidney damage, which occurred in as little as four months

in males and seven months in females.

Fifty percent of the male rats and 70 percent of the females died earlier than the rats in the control group. The corn studied was Monsanto's NK603 seed, a variety developed to live through heavy dosings of pesticide. Roundup is a pesticide that plants can consume at levels many toxicologists say could cause harm to humans.

## Conclusions

More research is necessary to confirm or debunk any suspected link between GMOs and cancer, and even then it may be difficult to weed out risks between brands, foods and types of modification. People concerned about GMOs can eat organic foods or GMO-free foods.



Some studies point to a link between GMOs and cancer, while others are inconclusive.

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# The dangers of belly fat

Doctors use many different methods to assess their patients' health. Measuring the fat in a person's midsection is one indicator physicians may rely on more heavily in the future as they look to pinpoint potential health risks before they become something more serious.

Belly fat is much more than an eyesore, as it poses a serious health risk doctors are only just beginning to understand. A recent study on belly fat presented at the European Society of Cardiology Congress confirmed that belly fat is far more dangerous than many people think.

That's because a large stomach may not only be comprised of subcutaneous fat, or the fat contained under the skin. Very often visceral fat, or the type of fat that surrounds internal organs, is a contributing factor to girth around the midsection. Visceral fat, also known as intra-abdominal fat, is linked to a variety of health problems, including high triglycerides, high blood pressure, high cholesterol, and high blood sugar.

Every person has some amount of belly fat, even those with relatively flat abdominals. Visceral fat provides cushioning around the organs and is actually beneficial in small amounts. It's when visceral fat becomes too plentiful that it can pose a problem. According to Kristen Hairston, MD, an assistant professor of endocrinology and metabolism at the Wake Forest University School of Medicine, visceral fat doesn't just sit dormant; it plays an active role in the body's production of a number of potentially harmful substances. Researchers are studying if visceral fat secretes inflammatory molecules in higher amounts than other types of fat. These molecules can contribute to various health ailments.

A person's ideal weight is not necessarily based on pounds on the scale. Rather, individuals should use other measurements to determine propensity for belly fat. Having a "pear shape" where the hips and thighs are larger than the waist can actually be safer than an "apple shape," where the waistline is larger.

People concerned about belly fat should use a measuring tape to measure girth and determine if



there is a potential problem. Place the measuring tape around the waist at the navel. The measuring tape should be level and stretch around the midsection. Women want a waist measurement of less than 35 inches. Men should measure in at less than 40 inches. Measurements that exceed those figures may indicate excessive amounts of visceral fat. A hip-to-waist ratio measurement also can be used. This ratio should be below .85 for women and below .90 for men. Anything higher is considered "at risk," and a person should consider losing belly fat.

The only precise way to measure visceral belly fat is to get a CT scan or an MRI. However, this

is expensive and may not be covered by health insurance.

It's important to note that belly fat is not a problem exclusive to those who are overweight. Although it may not be as visible, thin people can have excess visceral fat as well. This is often the result of eating a healthy diet but failing to exercise regularly.

There are ways to manage and reduce belly fat. Getting adequate exercise in conjunction with eating a healthy diet, getting enough sleep and managing stress can help.

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# Stop colds before they start

The stuffy nose, aches and pains that often accompany the common cold can leave sufferers feeling miserable for a week or more. Cold season seems to kick into high gear when the temperatures drop, but this can be the year you don't come down with a case of the sniffles. The following cold prevention tips can increase your chances of making it to spring without losing any days or sleep to the common cold.

• **Keep kids clean.** School-aged kids tend to carry home lots of germs, so when kids get home after a long day at school, make sure they wash their hands thoroughly and change into fresh outfits. Such precautionary measures can keep colds and other illnesses from running rampant through your house.

• **Go outdoors and get some fresh air.** It's a myth that cold air will bring on a cold. In reality, being outside instead of congregating indoors with other sick people may decrease your

risk of getting a cold. Don't be afraid to go outside when the temperatures drop for fear of getting sick. Fresh air and exercise can be good for you.

• **Drink plenty of fluids.** Keeping your body hydrated will help flush toxins out of your body, strengthening your immune system and making it more capable of fending off colds.

• **Keep your distance.** Did you know the cold virus can be shot up to three feet away when someone sneezes? The virus travels on the small droplets of saliva and mucus that get propelled from the nose and mouth of a sick individual. If you know someone is sick, stay as far away as possible and wash your hands frequently, paying special attention to your fingertips.

• **Wipe down surfaces.** The cold virus can live on surfaces for up to 24 hours. That means a sick person can easily transfer a virus by touching a computer keyboard or remote control

he or she shares with others. Use disinfecting wipes or warm, soapy water to clean off doorknobs, telephones, light switches, cabinet handles, and anything that is frequently touched around a home or business.

• **Let it out gently.** Blowing your nose forcefully or pinching your nose to hold back sneezes can irritate nasal passageways and make them more vulnerable to infection.

• **Avoid touching your eyes, nose and mouth.** If you are well, keep your hands away from your mouth, nose and eyes. Viruses are especially good at entering the body through the mucus membranes located in these areas of the body. A combination of frequent handwashing and avoiding touching your face can keep colds at bay.

• **Maintain your exercise routine.** Regular exercise can boost the body's immune system and help it to fend off foreign invaders, including the cold virus. A recent study found

that taking vitamin C in addition to daily exercise can reduce your risk of cold and cut the duration of the cold should you get one. Before taking any supplements, speak with your doctor to make sure they won't interact negatively with other medications.

• **Recognize that antibiotics are not the answer.** Antibiotics are only effective at treating bacterial infections, not viruses, which means they are ineffective at fighting the cold virus.

• **If you do get sick, play it smart.** Should you succumb to a cold in spite of your best efforts, steer clear of others so you are not spreading the virus. Rest and fuel your body with healthy foods and beverages. There's no need to visit a doctor for a cold unless you have a fever after several days of being sick. Colds normally last between seven and 10 days. If your symptoms do not improve or if they seem to be worsening, visit your doctor.



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# Is it possible to prevent cataracts?



Clouding of the lenses of the eyes is a common symptom of cataracts.

Millions of people are affected by cataracts, which Prevent Blindness America says is the most common cause of vision loss for individuals over the age of 40. In the United States, there are more cases of cataracts than glaucoma, diabetic retinopathy and macular degeneration combined.

The prevalence of cataracts makes some wonder if they can be prevented. According to The Mayo Clinic, studies have yet to determine a way to prevent cataracts or even slow their progression. However, eye doctors and other experts say that certain strategies can help keep the eyes and the body healthy, which may keep cataracts at bay.

#### Regular eye examinations

Visiting the eye doctor on an annual basis, or as recommended by an optician or ophthalmologist, can help detect cataracts and eye problems early on. This helps prevent vision loss and enables patients to take proactive steps to treat their cataracts. Cata-

ract surgery, which is now a common procedure and can usually be done with local anesthesia on an outpatient basis, is a common way to treat cataracts. During cataract surgery, the lens inside the eye that has become cloudy from cataract formation is removed and replaced with an artificial lens called an intraocular lens, or IOL, to restore clear vision.

#### Quit smoking

Smoking affects eyesight and eye health. Research suggests that smoking increases a person's chances of developing cataracts. The lenses of the eyes are mostly made up of arranged proteins, and sometimes these proteins stick together, breaking their careful formation and affecting the transparency of the lens. Cigarette smoke can damage the proteins in the lenses, causing them to stick together more readily, increasing the chance that cataracts develop.

#### Protect the eyes

Always wear sunglasses with UV

protection, particularly glasses that block UVB rays, when spending time outdoors. Ultraviolet light from the sun may contribute to the development of cataracts. Remember, ultraviolet rays can be present even when it is cloudy outdoors, so make it a point to don your sunglasses before stepping outside.

#### Manage diabetes

Although the reasons why are still not fully understood, individuals with diabetes mellitus face a greater risk of developing cataracts. That risk may be elevated by as much as 60 percent. When increased blood sugar enters the lenses of the eyes, sorbitol forms, and both this and fructose can build up in the lenses. Increased sugar causes water to be absorbed inside the lens, resulting in swelling and increased cloudiness. By treating high blood-glucose levels, those with diabetes may be able to keep cataracts from forming.

More CATARACTS, **PAGE 57**

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# Cataracts

CONTINUED FROM PAGE 56

### Improve the diet

A healthy diet should be a priority for everyone, including people at a greater risk for cataracts. Eating foods high in antioxidants like beta-carotene, selenium and vitamins C and E may help prevent cataracts. That's because antioxidants help the body to fight free radicals, which can contribute to cataracts later in life.

A 2000 article published in the American Journal of Clinical Nutrition highlighted two Harvard University studies that noted the role of lutein and zeaxanthin in the development of cataracts. The studies noted that individuals whose diets were high in lutein- and zeaxanthin-rich foods had a 19 to 22 percent lesser chance of developing age-related cataracts than those who do not incorporate these foods into their diets in high quantities. Foods that are high in lutein and zeaxanthin include green vegetables, such as spinach, broccoli, collard greens, kale, mustard greens and peppers, winter squash and eggs.

Cataracts tend to be most noticeable when vision begins to grow cloudy. However, cataracts also can cause glares and halos; a myopic shift, in which a person who was once nearsighted becomes farsighted, and vice versa; drop in color vision; lens discoloration; and poor night vision. Those experiencing these symptoms should have an eye examination to confirm or rule out cataracts.



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