

VIM &

SUMMER 2018

WK
WILLIS-KNIGHTON
HEALTH SYSTEM

Her BEST LIFE

38 ways women can
prioritize health

PLUS *Erin Andrews*
continued her busy career
while battling cervical cancer

SAY NO TO PAIN
WITH JOINT SURGERY

***How staying
social keeps
you healthy***

MINIMALLY INVASIVE
PROCEDURES TO
GET YOU BACK ON
YOUR FEET—FAST



It doesn't matter who you walk with, just walk.



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A Trip of a Lifetime

How one vacation inspired two Willis-Knighton employees to give back.

ENRICHING THE COMMUNITY

Our goal is to offer techniques and health tips to keep you healthy



When spring comes, we know that the sultry days of summer are not far behind. Just as the seasons change, so does the focus of this quarterly magazine. Our staff, working in collaboration with our national partners, seeks to present helpful information—not just about developments at Willis-Knighton and The Oaks of Louisiana, but about things that will improve your life and health.

Of course, I am partial to the stories about us. I suppose that's no surprise since I am president, chief executive officer and head cheerleader for Willis-Knighton. One thing about which I am passionate is our cardiovascular program. Although Willis-Knighton was not the first to introduce heart surgery in Shreveport, I believe we have come close to perfecting it. Our high-volume heart surgery program and the advanced diagnostic and treatment capabilities at Willis-Knighton are as good as those in large cities, perhaps even better than some.

Most heart surgery requires an overnight stay, but that's not the case with all surgeries. In fact, advancements in joint replacement surgery are leading to shorter hospital stays. On page 52, Darrell Rebouche talks to one such person, who is now pain-free after surgery.

Similarly, today more and more surgeries are being performed as day surgery, where people can go home the same day. Check out the story on day surgery on page 54 where Marilyn Joiner offers perspectives from two of our outstanding Physician Network surgeons.

One of the most rewarding tasks I have had at Willis-Knighton is the privilege of expanding services to our community. We know that the baby boomer generation is aging and will be seeking carefree living options, such as what we offer at The Oaks of Louisiana. Terrie Roberts' story on page 49 shares insight into the benefits of moving to a senior living community versus staying in and maintaining your home.

Certainly, you will find many other interesting features in this edition of *Vim & Vigor*, and not just topics close to my heart. My hope is that you view this as another way Willis-Knighton is attempting to enrich your life and health. It's not just our job—it's our mission.

James K. Elrod
President and CEO



VIM & VIGOR

PRESIDENT AND CEO, WILLIS-KNIGHTON HEALTH SYSTEM

James K. Elrod

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Joyce Florance

STAYING HEALTHY ON VACATION

Don't let travel cause a lapse in your health routine



With the summer vacation season already here, we all need to be ready to make wise choices so we can enjoy our time off and not sacrifice exercise and nutrition. Although exercise can be difficult to fit in when you are out of your element, use this opportunity to try something new and move out of the same old routine.

Here are some tips to stay on top of your routine while you are away from home.

► **PLAN AHEAD.** No matter where you are, make time for exercise every day. Make use of local fitness programs, take a run on the beach or plan a hike—anything that gets your body moving. Remember, the earlier in the day you

plan your workout, the more time you'll have for other activities.

► **MAKE USE OF THE AMENITIES.**

Hotels and cruise ships both offer an array of fitness activities, including workout rooms, group exercise programs and swimming pools. If your hotel does not have a fitness room, ask if they are affiliated with a nearby local gym that will offer discounts to hotel guests.

► **CREATE A TRAVEL-FRIENDLY ROUTINE.**

If weight equipment is not available, devise a hotel room-friendly exercise plan. Include moves such as pushups, crunches, calf raises, tricep dips on a chair, forward lunges and squats using your own body weight, or pack resistance bands for an extra push. Make sure to have a fitness specialist

demonstrate these exercises to be sure that you are performing them correctly.

► **SEEK OUT OPPORTUNITIES**

FOR EXERCISE. Walking in the airport between flights, carrying your own luggage and using the stairs instead of the elevator can all make your travel days more mobile. Once you're at your destination, consider activities such as taking a walking sightseeing tour, renting a bicycle or walking on the beach.

► **DON'T FORGET TO STRETCH.**

Remember, stretching is a vital part of any exercise program and can be done anywhere without fancy equipment. Take a few moments every morning and night to stretch and relax your body.

► **LET YOURSELF INDULGE—**

SOMETIMES. When it comes to food, try to keep meals as healthy as possible and only splurge on foods you can't get at home. Keep portions small and steer clear of excess calories by avoiding cheese, mayo and special sauces. Concentrate on maintaining your weight instead of trying to lose a few extra pounds.

► **CONTROL YOUR SNACKING.**

Pack healthy snacks if possible, and avoid fast food. If your hotel room has a microwave and fridge, you can store and prepare healthy snacks or meals on your own. With a coffee maker, you can prepare instant soups and oatmeal with hot water.

With careful planning, you can have a fun-filled vacation, maintain your health and fitness and return home with memories and souvenirs—not extra pounds. ■

Technology Update

Residents of Shreveport, Bossier City and the Ark-La-Tex look to Willis-Knighton for innovative care and technology. Here are several heart innovations available at Willis-Knighton.

LARIAT

- **Target:** Patients with atrial fibrillation (AFib) who cannot tolerate blood thinners.
- **Solution:** The LARIAT procedure is a minimally invasive procedure that places a pre-tied suture loop on the left atrial appendage (LAA) to close it and improve blood flow in the heart. The LAA is where 90 percent of all AFib blood clots develop, so this is an excellent way to minimize the risk of stroke. The procedure is performed outside, not inside, the heart and offers a quick recovery.
- **Introduced by:** Sai Konduru, MD, of Willis-Knighton Cardiology, with heart team support from Basel Kasabali, MD, Syed Mehmood, MD, and Ryan Master, MD.

MITRACLIP

- **Target:** Patients who have mitral regurgitation.
- **Solution:** MitraClip is a clip smaller than the diameter of a dime that is attached to the mitral valve in the heart to help it close more completely, which improves blood flow through the heart. To put the device in place, a catheter is inserted into the heart through a vein in the leg. The procedure is much less invasive than open-heart surgery, with only a short hospital stay and a quick return to a more active lifestyle.
- **Introduced by:** Wenwu Zhang, MD, Ryan Master, MD, and Sai Konduru, MD.



HEARTFELT EXPANSION

Willis-Knighton's new cardiovascular expansion opened in January to rave reviews from visitors who were able to tour the new facility and see the new state-of-the-art operating suites and equipment.

Due in large part to WK's high-volume cardiovascular surgery program, the expansion provides 80,000 square feet of additional space to the cardiovascular unit. In addition to new surgical facilities, the expansion also includes new intensive care rooms.

This addition also offers an open, light-filled environment to enhance the visit for people and their families, as well as illuminate the work of the heart care team of surgeons, cardiologists and support staff. It's just one example of why, at Willis-Knighton, your heart's in the right place.

The focus on heart health was further intensified with the MEGA Heart exhibit outside the entrance to the expanded facility. This anatomically correct, larger-than-life heart allowed guests to walk through the inside of the heart, where they could see how it functions and what heart disease looks like.

DIGITAL X-RAY

Technology is an important tool for people and the physicians who care for them. X-ray equipment at Willis-Knighton hospitals has now been converted to a digital format. This digital radiography uses less radiation, a benefit to patients, and provides a high-quality image that can be immediately previewed.

Although some hospitals might still use older technology, or upgrade only a few machines or locations at a time, Willis-Knighton elected to bring this advanced technology to all of its hospitals, as well as to its outpatient locations at WK Portico and the WK Bossier Medical Pavilion.

BY THE NUMBERS



Willis-Knighton
offers care whenever
and wherever you
need it most

4

FULL SERVICE
EMERGENCY ROOMS

5

QUICK CARE URGENT
CARE CENTERS

1

PHYSICIAN NETWORK

100s

OF PROVIDERS

UPCOMING EVENTS

“THE DOCTOR IS IN: TOP HEALTH CONCERNS FOR SENIOR ADULTS”



We all want to age well and live healthy, independent lives for as long as we can. But age, family genetics and gender play a role in whether we develop chronic conditions when we're older. Thus, the adage “you're only as old as you feel” takes on new meaning and importance.

The Oaks of Louisiana, which promotes an active, healthy lifestyle and offers programs and activities that support aging well, is holding a series of four lectures in June called “The Doctor is In: Top Health Concerns for Senior Adults.” Led by Willis-Knighton physicians, these informative lectures will focus on causes, symptoms and treatments of arthritis, osteoporosis, heart disease and diabetes. The series, which begins Monday, June 4, with Robert L. Savory, MD, discussing arthritis; John J. Ferrell, MD, osteoporosis; Jagan M. Beedupalli, MD, heart disease; and Laura E. Kimball-Ravari, MD, diabetes. Each lecture will begin at 5:30 p.m. in the Oak Room at Tower at The Oaks. The lectures are open to the public, and hors d'oeuvres will be served. Cost is \$10 per lecture. Register online at wkhs.com (click “Classes & Events”) or by phone at 318-212-8225.



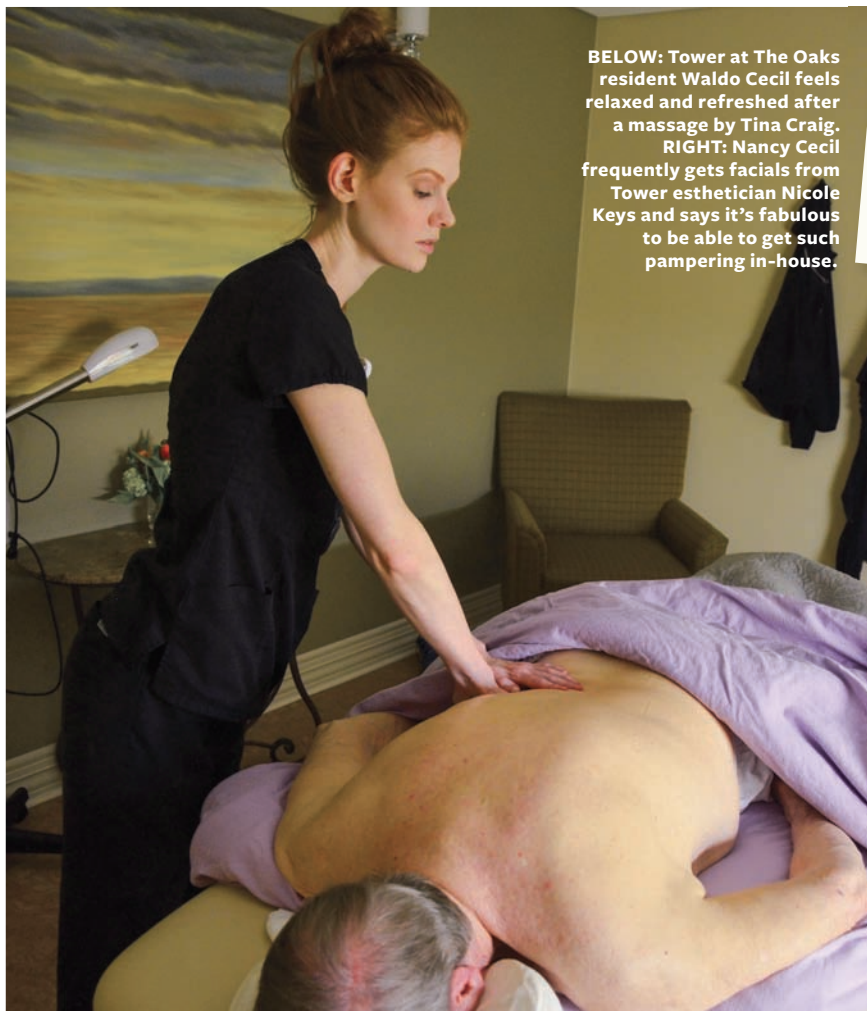
“THEN SINGS MY SOUL”



So many great hymns have been sung generation to generation and have stood the test of time: for example, “Blessed Assurance,” “Just as I Am” and “The Old Rugged Cross.” With many of our favorite hymns, we know not only the author's story but also the circumstances in which the hymn was written.

In his program “Then Sings My Soul,” Bryan C. Bierbaum, organist and director of music at Noel Memorial United Methodist Church, will explore the origins of several of our best loved hymns, which have helped many generations learn Scripture and Christian theology. The event is Friday, July 20, at 3 p.m. in the Alta and John Franks Community Centre. It is open to the public and free of charge. Register online at wkhs.com (click “Classes & Events”) or by phone at 318-212-8225.





BELOW: Tower at The Oaks resident Waldo Cecil feels relaxed and refreshed after a massage by Tina Craig. **RIGHT:** Nancy Cecil frequently gets facials from Tower esthetician Nicole Keys and says it's fabulous to be able to get such pampering in-house.



A DAY AT THE SPA

The Oaks' salon services keep residents relaxed and healthy



Soothing music fills the room as Waldo Cecil lies beneath a soft sheet.

Cocooned in relaxing smells and dim light, the Tower at The Oaks resident has come to the Tower's luxurious Spa & Wellness Center for a massage: manual manipulation of soft body tissues that will loosen tight muscles and help him relax and sleep well.

Massage therapist Tina Craig first rubs Cecil's back and shoulders using long gliding strokes that replicate the movements of the circulatory system. This technique, called a Swedish massage, offers benefits for issues other than stiffness or muscle aches and pains; it also helps increase circulation and flexibility, enhancing the immune system, improves concentration

and mental clarity and helps with injury rehabilitation.

That Cecil can walk out of the door of his apartment and to the Spa & Wellness Center for such pampering without ever leaving the Tower is among resort-style amenities that sets The Oaks of Louisiana apart from other senior living communities. The salon is designed to pamper and offers services equal to those in the city's leading spas.

Cecil's wife, Nancy, enjoys facials and, like her husband, says the ability to take advantage of such salon services without leaving home is a big perk. "To have at your disposal that care and attention by professionals is quite an asset," she says.

Massages, facials and other salon services, such as manicures and pedicures, are offered by the Spa & Wellness Center to assist residents in maintaining an optimal lifestyle, says Holly Sanders, manager and senior wellness coordinator. Although these services might seem like a luxury, health professionals recognize the benefits that spa services provide, especially to senior adults.

"We want residents to feel refreshed, relaxed and rejuvenated after they visit the Spa & Wellness Center, whether they have been soothed by a relaxing facial, massage, manicure or pedicure," Sanders says. "At the same time, we know that spa services can improve senior health-care in a variety of ways. It helps senior adults look good and feel good, and helps them live healthier, happier lives."

In other words, pampering—plus benefits. ■

DIVINE SIDES

Upgrade your salad routine with these tasty takes

Cucumber, Avocado & Mango Summer Salad

INGREDIENTS

Salad:

- 1 ripe mango, peeled and chopped (about 1½ cups chopped)
- 1 medium avocado, chopped
- 1 large cucumber, peeled, seeded and chopped (about 2½ cups chopped)
- 3 tablespoons chopped cilantro
- 2 tablespoons chopped mint

Dressing:

- 3 tablespoons fresh lime juice
- 3 tablespoons extra-virgin olive oil
- 1 tablespoon honey, raw and unfiltered
- ¼ teaspoon fine sea salt
- ¼ teaspoon cumin

INSTRUCTIONS

First, make the dressing in the bottom of a large bowl by mixing all ingredients together until emulsified. Then chop all salad ingredients and gently toss in the dressing. Store in an airtight glass container in the refrigerator up to three days.

Serving suggestions: Add on top of or as a side dish to grilled chicken; spoon a cup over a bed of baby spring lettuce; or add in ½ cup of cooked quinoa for a delightful lunch or dinner meal.

Yield: 5 1-cup servings

*Recipe submitted by
Julie Hartley, RD, LDN,
WK Diabetes & Nutrition
Center*



English Pea Salad

INGREDIENTS

Salad:

- 1 pound bag green peas (thawed)
- 2 hard-boiled eggs, peeled and chopped
- 2 tablespoons diced red bell pepper
- 3 cups shredded cheddar cheese (yellow or white)
- ½ cup cooked bacon (chopped)
- Salt and pepper to taste

Dressing:

- ¼ cup mayonnaise
- ¼ cup sour cream
- 2 teaspoons Dijon mustard
- 1 tablespoon lemon juice

INSTRUCTIONS

Combine peas, chopped eggs, red bell pepper, cheddar cheese and chopped bacon into a large mixing bowl and set aside.

In a small mixing bowl, combine mayonnaise, sour cream, mustard and lemon juice. Whisk mixture until combined. Using a rubber spatula, add the dressing mixture to the large bowl, stir until evenly mixed. Add salt and pepper. Store in refrigerator up to a day in advance.

Yield: 8 to 10 servings

*Recipe submitted by Maurice (Trey)
Dion III, sous chef at The Oaks of
Louisiana*





MANAGEMENT PROFILE

Behind-the-Scenes Care

You probably never will meet **Wesley Smith**; however, if you have ever received healthcare at Willis-Knighton, he is one of the most important people on your care team. As director of clinical engineering, he oversees the maintenance and calibrations of all equipment used to treat and diagnose patients.

This is an enormous responsibility, and, “it never stops,” Smith says. But after 37 years with Willis-Knighton, he is still fully engaged. “Medicine couldn’t do what it does today without people like us making sure the equipment works,” he admits.

Smith has been an integral part of Willis-Knighton’s impressive growth, and he speaks of those accomplishments with obvious pride. “It’s been such a rewarding career,” he says. “We’ve seen Willis-Knighton grow from a small hospital to what it is today, with some of the most state-of-the-art equipment in the world.”

Every day, he and his staff work with multiple departments at five hospitals to make sure everything’s running right. The ever-evolving technology keeps him sharp. “The things we do today are just amazing,” he says.



WK EMPLOYEES

The Power of Giving Back

Candi and Eric Henley were on vacation in Jamaica in 2008 when they hopped onto a bus bound for an excursion called “One Love Bus Bar Crawl.” They had a great time going from pub to pub, but it was a trip through an impoverished area that changed their lives.

Some of the people on the bus had brought gifts for the children there. “Stuff our kids would walk over and not even pay attention to they really needed and wanted,” Candi recalls.

Since then, at their own expense, the Henleys have traveled to Negril, Jamaica, sometimes twice a year to bring gifts to the kids in town. Both are Willis-Knighton nurses: Candi is an educator at WK Pierremont, and Eric works at the same hospital as part of the vascular access team.

The couple brings candy, soccer balls, medical supplies, school supplies and more to Negril. “Pencils and notebooks are treasures to those kids,” Candi says. It’s a vacation for the Henleys, but it’s much more. “It’s a joy just to see their smiles.”

A vacation to Jamaica changed Candi Henley’s life. She and her husband now travel to the country twice a year to take gifts to needy children.



Cervical cancer screenings have made a tremendous difference in survival rates since the Pap test was introduced in the 1940s.

“Cervical cancer screening is one of the most successful public health interventions we’ve ever had,” Saslow says. “Deaths dropped over 70 percent once Pap screening was introduced. In countries without screening, cervical cancer is one of the leading cancer killers of women.”

Regular screenings can also help providers intercept the development of cervical cancer. Pap tests screen for the presence of cancerous and precancerous cells in the cervix. HPV tests screen for the types of HPV that have the potential to develop into cancer.

The U.S. Preventive Services Task Force recommends that women be screened with a Pap test every three years between ages 21 and 65. At age 30, women can switch to a Pap test plus an HPV test every five years.

“In the U.S., hundreds of thousands of women every year are diagnosed with advanced cervical precancers, which can be treated or removed before they progress to cancer,” Saslow says.

Life After Cervical Cancer

Treatment options for cervical cancer include surgery to remove cancerous lesions, hysterectomy, chemotherapy and radiation. The sooner the cancer is identified, the more conservative doctors can be with their treatment recommendations. Fortunately for Andrews, her cancer was discovered early enough that surgery to remove the cancerous portions of her cervix alone was effective.

Her cancer experience strengthened her relationship with then-boyfriend Jarret Stoll, a former NHL hockey player. The couple married in June 2017.

“It was a huge step for my relationship with my boyfriend at the time,” she told *Health* magazine. “Because you don’t know if a guy is going to want to sit in with an oncologist and see, ‘OK, so this is your cervix, and this is your uterus, and we are cutting out this part.’ ... He was amazing.”

With Stoll’s support, Andrews decided to open up to her co-workers and the public about her experience. The response she received was overwhelmingly positive.

“After the trial, everyone kept telling me, ‘You’re so strong for going through all of this, for holding down a job in football, for being the only woman on the crew,’” Andrews told *Sports Illustrated*. “Finally, I got to the point where I believed it, too. ‘Hey, I have cancer, but dammit, I am strong, and I can do this.’”

The experience may have even helped her career.

“In a way, this all has allowed me to relate to players more,” Andrews told the sports outlet. “I understand what it’s like to be the story.” ■

GET VACCINATED

The HPV (human papillomavirus) vaccine was initially targeted to females but has since also been suggested for males. Emily Womack, MD, with Women’s Health Associates, says boys are also at risk of contracting HPV, which can lead to other sexually transmitted diseases. The HPV vaccine can also save lives by protecting against cancer.

“This virus is infecting close to half of the population in America at any given time,” Dr. Womack says. “With this vaccine, we have a tool to prevent some types of cancer from occurring in the first place.”

The thought that protecting your child from sexually transmitted diseases will cause them to be more promiscuous is simply not true, Dr. Womack says. People get the most benefit out of the vaccine if it is received before the start of sexual activity. “By doing so, the immune system has time to establish protection before the person chooses to become sexually active,” she says. “We vaccinate children against chicken pox before potential exposure. We do not wait until they have been exposed at school to protect them. The HPV vaccine should be no different.”

WEBSITE



Growing Up Together

Prepare your daughters and granddaughters for the physical and emotional changes ahead. Enroll in Willis-Knighton’s community education class “Growing Up for Girls” at classes.wkhs.com.



Pap tests, which detect abnormal cells before they become cancer, are one of two kinds of cervical cancer screenings. The other type, HPV testing, identifies human papillomavirus infections that cause cell abnormalities, sometimes even before cell abnormalities show up.

HPV testing isn't recommended for women younger than 30, and Pap tests aren't recommended for women younger than 21. That's because HPV infection and any cervical cell abnormalities present early in life are likely to go away on their own.

Women older than 65 who otherwise aren't at high risk for cervical cancer don't need to be screened for the disease, according to the task force.

Many doctors still prefer to do annual or even more frequent cervical cancer screening, especially if a woman has had abnormal results before.



Sexually Transmitted Infections

When to go: If you're younger than 25, get annual chlamydia and gonorrhea tests. If you're any age but have new or multiple sex partners or sex partners with STIs, get annual chlamydia and gonorrhea tests. Everyone ages 13 to 64 should be tested at least once for HIV. All pregnant women should be tested for HIV, syphilis and hepatitis B. Source: Centers for Disease Control and Prevention

What to know: Most STIs can be effectively treated, sparing discomfort and potentially serious complications.



Mammograms

When to go: Talk to your doctor when you turn 40 if you're at average risk of breast cancer. Source: American College of Obstetricians and Gynecologists

What to know: Some physicians recommend annual mammograms at

40, while others wait until 45 or 50. Forty is when the doctor should go through a woman's family history and other risk factors, Schimmoeller says. Women with a family history should notify their doctors in their 30s.

From age 50 to 75, the American College of Obstetricians and Gynecologists recommends a mammogram every year or two years, and the U.S. Preventive Services Task Force suggests a mammogram every two years. Again, some doctors and women prefer annual screening.

Women older than 75 should talk to their doctors about whether to screen.



Blood Pressure and Cholesterol

When to go: Get a blood pressure test at every regular health-care visit, or at least once every two years if your blood pressure is less than 120/80. Adults 20 and older should have their cholesterol checked every five years. Sources: American Heart Association; National Cholesterol Education Program of the National Institutes of Health

What to know: Heart disease is the leading cause of death for women in the U.S., killing about 1 in 4 women.

High blood pressure and cholesterol are key risk factors for the disease. Be sure to get tested regularly for both.



Bone Density

When to go: If you're 65 and older, have a bone density test to screen for osteoporosis. Sources: U.S. Preventive Services Task Force; National Osteoporosis Foundation

Prepare for Your Visit

Before arriving for your next screening, learn how to prepare for your visit and what to expect. Visit the Willis-Knighton Health Library at healthlibrary.wkhs.com for more information.

SAY YES TO SCREENINGS

Recommendations for health screenings can vary considerably based on a woman's family or personal medical history. "Annual screenings are important and give women a chance to discuss risks factors for disease and preventive care," says April Palmer, MD, with Family Medicine Partners.

Dr. Palmer says it is always important to talk to your primary care provider and get personalized healthcare recommendations when discussing screenings. This is true for any age. "They should be your main resource for advice on getting healthy and staying healthy," she says.

Dr. Palmer also notes many health problems can be cured or prevented if addressed early. "Finding out at an early stage about health conditions or risk factors present is always important," she says. And screenings can do just that.

What to know: Osteoporosis, a disease that makes bones weak and more likely to break, affects more women than men.

About 80 percent of the estimated 10 million Americans with the disease are women, according to the federal Office on Women's Health.

That's because women usually have thinner bones than men; women live longer than men, and bone loss happens naturally with age; and women lose more bone mass after menopause. ■

cycle some feelings of fullness or pain, even a lump,” Baskies says. “Oftentimes, benign issues will disappear or will resolve themselves after going through a menstrual cycle.”

Even if it turns out to be malignant, or cancerous, breast cancer treatments have improved a lot in recent years.

“The survival rate for breast cancer has improved overall to 90 percent. It’s not a death sentence,” Baskies says.

Here are some types of lumps that aren’t cancer.



Cysts

Cysts—round, fluid-filled sacs in the breast—are the source of many breast lumps. They’re movable and can be tender to the touch.

Cysts can be found in women of any age, but they’re most common in women in their 40s. They range in size from microscopic to 2 inches across, and they tend to get bigger and more painful before the start of a period.

They’re often diagnosed based on symptoms, but sometimes an ultrasound may be necessary to see whether the lump is solid or filled with liquid. If the lump turns out to be solid or contain both solid and fluid parts, your doctor may conduct a biopsy, removing a tissue sample to rule out cancer. Solid masses do not necessarily mean cancer.

As for treatment, a doctor can drain fluid with a needle, but that may not be necessary if the cyst isn’t causing discomfort.



Fibroadenomas

Fibroadenomas are solid, rubbery masses made up of connective and glandular tissue.

They’re most common in women in their 20s and 30s, but they can be

found in women of all ages. Some fibroadenomas are too small to be felt, while others are several inches wide.

If you can feel it, it may seem like a marble within the breast.

“They can get bigger and bothersome,” Baskies says.

Fibroadenomas can be diagnosed with physical examination, possibly augmented by an ultrasound, mammogram or biopsy.

Many doctors recommend removing fibroadenomas, especially if they grow and change the shape of the breast, to ensure cancer is not behind the changes.



Mastitis

Mastitis is swelling in the breast that’s usually caused by an infection and tends to affect women who are breastfeeding, thanks to clogged milk ducts and breaks in the skin of the nipple. The infected part of the breast can be swollen, painful, red and warm to the touch. A woman with mastitis may also have a headache, fever or other flu-like symptoms.

Mastitis is diagnosed based on symptoms and treated with antibiotics.



Intraductal Papillomas

These wartlike tumors grow within the milk ducts of the breast and are made up of gland tissue, fibrous tissue and blood vessels.

CALL



Stay Informed

Want more information about how to prevent and detect breast cancer or annual breast cancer screenings? Call the WK Breast Health Center at **318-212-3090** to learn more.

STOP CANCER EARLY

Breast cancer is the second most common cancer diagnosis for women, but it is also one of the most treatable. “It does not have to be a death sentence,” says Julie Cupp, MD, with Willis-Knighton Breast Health and Surgical Specialists.

Early detection increases breast cancer survival rates, and in order to find cancer early, every woman should know their bodies and recognize any changes, Dr. Cupp says. “Women should know their breasts the same way they know their face.”

Dr. Cupp recommends monthly at-home breast self-examinations. Dr. Cupp says it is also important to get regular clinical breast exams performed by a healthcare professional trained to recognize the different types of abnormalities and warning signs.

If you notice any changes, Dr. Cupp says to talk to your physician immediately. “It might be nothing, but it is definitely worth mentioning.”

They’re often a culprit in clear or bloody nipple discharge, especially if it’s only coming from one breast. Intraductal papillomas can be painful and are sometimes felt as a small lump near or behind the nipple.

“They can be detected two ways: physical exam and mammogram or ultrasound,” Baskies says, and they are often biopsied or removed. ■



OB-GYNs

When many women think of doctors, gynecologists are often at the top of the list—and for good reason. OB-GYNs are the go-to resource for all things related to the pelvic area—from menstruation and pregnancy to vaginal dryness and menopausal issues.

It might feel embarrassing to talk about topics such as heavy periods or painful sex, but OB-GYNs are there to help, and they've heard it all.

Internal Medicine Doctors

Internal medicine doctors, also known as internists, are trained to treat adults for a wide range of issues and often serve as primary care physicians.

"The internist is probably the one you would go to for an annual health exam" to look at issues such as high blood pressure, diabetes and disease prevention, Rohr-Kirchgraber says. Plus, most internists now are trained to do some basic OB-GYN care, such as Pap tests.

General internal medicine doctors—internists who go into practice after they finish their basic internal medicine training—are recognized as "experts in diagnosis, in treatment of chronic illness and in health promotion and disease prevention," the American College of Physicians says. Their job is to deal with a wide variety of patient problems, whether simple or complex.

Family Medicine Doctors

Like internal medicine doctors, family physicians treat adults for a wide range of issues and often serve as primary care physicians. But unlike internal medicine doctors, family physicians are also trained to treat children.

"Family medicine physicians have been trained in a little bit of everything: some pediatrics, some medicine,

some surgery," Rohr-Kirchgraber says. "They're very adept at treating the whole family."

And they treat a lot of adults. The American College of Physicians says 85 to 90 percent of patients at a typical family medicine practice are adults, the same population seen by internal medicine doctors.

Having It All

So do you need to have both an OB-GYN and an internal medicine doctor or a family physician?

"It certainly doesn't hurt to have one of each, but it's not always necessary," Rohr-Kirchgraber says.

Medical and family histories can sometimes help you decide. For example, if you have a family history of colon cancer or melanoma, it's probably best to have an internal medicine doctor or a family medicine doctor.

"If you're interested in getting pregnant soon, then having an OB-GYN is a good idea," Rohr-Kirchgraber says. "If you're 40, you're done having kids and there isn't that much more you need, seeing a general physician who can do your Paps and pelvic exams, that's totally fine—as long as you're getting it done."

Just be sure to call ahead and confirm that your healthcare provider can do what you need, Rohr-Kirchgraber says.

"A lot of internal medicine physicians do some OB-GYN care, but not everyone is comfortable doing Paps and pelvic exams," Rohr-Kirchgraber says.

Pearson recommends asking practical questions such as "Are the exam rooms set up to do Pap smears?" and "Do you

Find Your Physician

There are many options when it comes to choosing the right doctor for your needs. Visit **wkhs.com** or call **318-212-8892** for help finding a doctor.

DOCTOR WHO?

With so many options available for doctors and specialists, it can be difficult to know where to go for help.

Although many patients go to Quick Care or the ER with the expectation of fixing a chronic problem, Danielle Raley, MD, with Family Medicine Doctors in Bossier City, says the best treatment for chronic health issues is with your primary care doctor.

Dr. Raley recommends making an appointment with your primary care physician to discuss any health concerns; seek routine or preventive care; or treatment for common illnesses. Your PCP will refer you to a specialist when he or she is faced with a diagnosis beyond their purview.

To make the most out of your appointment, be prepared. "Jotting down a list of concerns prior to coming into the office helps ensure you don't forget about anything in the moment," Dr. Raley suggests.

You should also come ready with the names and doses of medications, as well as any other important health information. "It is easier to provide the care you need if we know what we are starting with," she says.

have the sexually transmitted infection testing materials on hand?"

Once you find the right doctor or doctors for you, you can rest easy knowing your healthcare team meets all your needs. ■



Strength and Stamina

“There are definitely cases where younger moms have more energy,” Garbus says. But lots of factors can contribute to energy levels during pregnancy, including morning sickness and the demands of work or other children.

McDonough says she had a lot of energy with her first pregnancy, in her 20s. “I was so excited, and I wasn’t nauseous,” she says.

But while carrying her second and third babies, she had the demands of one young child, and then two, to contend with, and she was exhausted. Her fourth pregnancy came so many years after the third that she could rest if she needed to. “The kids were older, and they could fend for themselves,” she says.

Life Experience

Most would agree that having a baby as a teenager isn’t ideal, and the teen birth rate has been declining for years. But for very young women who do become pregnant, they face different risks than older moms-to-be. The brain’s prefrontal cortex isn’t fully developed until the early 20s, and that can affect reasoning in various ways.

“Younger moms can be less likely to keep their appointments,” Garbus says. They are also more likely to have multiple partners and less likely to have the support of a long-standing relationship. ■

Waiting to Get Pregnant?

Age is relative when it comes to pregnancy. Today, more people are waiting to have babies in their 30s and older.

“We are seeing more and more women make this decision,” says Amanda Bunton, MD, with Women’s Health Clinic. “Women today are working more and waiting until later in life to start a family.”

Dr. Bunton says there is no certain point when a woman is too old to carry a pregnancy, as long as she is healthy. “Physically, nothing changes with the body as far as being able to carry a pregnancy,” she says. Women are most fertile in their 20s, and, “due to increased risks, advanced age for pregnancy is considered to be 35,” Dr. Bunton says. The gradual fertility decline begins in women in their 30s, is sharper as they near 40 and becomes more so after age 40. These declines mean it may take longer to become pregnant.

“Becoming pregnant after the age of 40 may be more difficult without medical assistance,” Dr. Bunton says. “Pregnancy complications may be more prominent with age, but good health plays a big part.”

No matter your age, when planning a pregnancy, it is a good idea to visit an obstetrician/gynecologist to make sure you and your baby are in good health. He or she can also help maintain any existing conditions to ensure an easier pregnancy.

WEBSITE



Preparing for a Baby

For more pregnancy-related resources, visit wks.com/Obstetrics/Library for more information.

4 YOUR IMMUNE SYSTEM

If you've ever gotten sick during a stressful time—think finals week in college or while planning a big event like your wedding—you've probably experienced the connection between stress and your immune system firsthand. If stress is allowed to continue unchecked, it can hinder your body's ability to fight off illness (or manage one you already have).

Adequate rest and exercise can give your immune system a significant boost, Greenberg says. She also recommends foods rich in omega-3s, such as salmon, as well as garlic, black tea, turmeric and chicken soup, the old standby. You can also feed your immune system in other ways.

"Don't discount the importance of social support and connecting with others," Greenberg says. "But ensure you're talking to the right person—someone you trust—because some people can make your stress worse."

5 YOUR MENTAL HEALTH

A stressful episode can leave you feeling anxious, depressed or mentally exhausted. Chronic stress can result in depression, anxiety and panic attacks, and even memory loss and impaired concentration over time. How do you know when it's time for professional help?

"If you're experiencing stress or unhappiness that's interfering with your life or with accomplishing daily tasks, it may be time to seek help," Greenberg says. Chronic stress and anxiety can be treated with therapy and medications, if necessary.

And remember that, try as you might, you can't prevent or avoid all the stress that life throws at you. But that's all the more reason to treat yourself to healthy pick-me-ups whenever and wherever possible.

"The more stressful your life, the more important it is to have things planned in your immediate future (like this weekend) that bring you pleasure—things that you can look forward to all week as well as enjoy when they happen," Storoni says. ■



STRESS RELIEF AT WORK

Making time for mindful activities during your day isn't always possible. But you can get stress relief benefits while sitting at your desk using a practice called body scan meditation.

Derrick Stevenson, PhD, a social work practitioner at Willis-Knighton Institute for Behavioral Medicine, suggests trying this simple exercise: "Scan your left foot for any sensations. Simply become aware of them. Scan your left calf. Notice and allow any sensations that may be present. Scan slowly, up through your thigh. Allow yourself to feel any and all sensations. If you don't feel anything at the moment, that's OK. Just allow yourself to not feel anything."

Stevenson says this exercise is designed to help you develop a mindful awareness of your certain bodily sensations and to relieve tension wherever it is found. He adds that research suggests that this mindfulness practice helps reduce stress, improve well-being and decrease aches and pains.

WEBSITE



Banish Stress for Good

Is situational stress impacting your life? Willis-Knighton has a variety of ongoing support groups to help. Visit wkhs.com, and click on the "Classes and Events" tab.

THIS JUST IN

GOOD-FOR-YOU NEWS, CUES AND REVIEWS

PROTECT YOUR LIVER

Are you walking around with the potential for liver damage without knowing it?

"Many patients aren't aware that they're at risk," explains Jared D. McFarlin, DO, MS, an internal medicine specialist at Tri-State Medical Clinic in Shreveport. Dr. McFarlin says not to dismiss hepatitis C as a disease acquired only through IV drug use and risky sexual behavior. If you have had a blood transfusion or have traveled abroad, you may be at risk.

Dr. McFarlin emphasizes that hepatitis C is not something to fear. "What was once a near-untreatable disease that often led to cirrhosis, cancer and liver transplants is now often curable with a course of oral medication," he says. "All that's needed is a simple blood test to find out."

WEBSITE



Get Your Weight in Control

If you are seeking a solution to your weight problem, Willis-Knighton Weight & Wellness Solutions can help you address all the contributing factors. Visit wkhs.com/diabetes/weight for more information.



Even grandpas can drive to the hoop.

WORKOUTS THAT WORK: PLAYING WITH YOUR KIDS

You should embrace your inner child, and while you're at it, why don't you get that kid's heart pumping, too?

Playing outdoors with your children gets everyone moving, and as an added benefit, you'll be doing something together.

A 155-pound adult will burn 141 calories in 30 minutes of romping with the kids at the playground. (Just make sure you actually *play*; sitting on a nearby bench doesn't count.)

Here are a few other ideas to consider (all calorie counts based on 30 minutes for a 155-pound adult):

- **Frisbee:** Throwing and catching (or in many cases, chasing) the flying object burns 106 calories.
- **Swimming:** Swim in the pool or lake with your child, and you'll burn 223 calories.
- **Basketball:** A game of basketball churns through 298 calories.

PHOTOS BY GETTY IMAGES

TRUE OR FALSE:

Only overweight people have sleep apnea.

→ **FALSE.** People of all sizes can have the sleep disorder. Obesity, however, is the primary risk factor for sleep apnea in adults and children. (For younger ones, medical conditions such as enlarged tonsils can play a role, too.) Obesity contributes to airway collapse in two ways: fat in the neck can lead to narrowing of the upper airway and smaller breaths (larger breaths actually help keep the airway open). Other risk factors include family history and a person's sex—men are more likely to develop sleep apnea than women, though women's risk rises after age 50.

TRUE OR FALSE:

Sleep apnea can lead to other serious medical conditions.

→ **TRUE.** People with sleep apnea are at increased risk of high blood pressure, heart disease and stroke. Sleep apnea events trigger the body's autonomic or stress systems, Rowley says, resulting in short-term increases in heart rate and blood pressure. Over time, these changes can lead to heart disease and high blood pressure. In addition, decreases in oxygen levels trigger inflammation, a factor in atherosclerosis, coronary artery disease and stroke.

TRUE OR FALSE:

Changing sleep position will fix sleep apnea.

→ **FALSE.** In general, how a person sleeps rarely has an effect on moderate to severe sleep apnea. In mild cases only, side sleeping can be beneficial.

TRUE OR FALSE:

Sleep apnea is treated with medicine.

→ **FALSE.** Medications are generally not used to treat sleep apnea. The most common and successful form of treatment is to use a continuous positive airway pressure (CPAP) machine, a masklike medical device that provides a continuous flow of air to keep the airway open during sleep. Some people use an oral appliance to keep the airway open; others may benefit from surgery to remove excess tissue.

TRUE OR FALSE:

Lifestyle changes are helpful for someone with sleep apnea.

→ **TRUE.** Weight loss is the most important recommendation made by sleep specialists. They discourage the use of alcohol near bedtime, as it relaxes the throat muscles (consumption should end at least four hours before going to sleep). Specialists also suggest regular exercise because it helps with weight loss and provides cardiovascular benefits. ■

TIME FOR BED

"A good sleep consists of a good sleep hygiene," advises Samreena Sara, MD, of Shreveport Sleep Medicine at Willis-Knighton. "Underlying heart or lung disease can adversely affect your sleep. Chronic pain can also lead to badly affected sleep; both are interlinked."

Dr. Sara offers several tips to help you establish healthy sleep habits.

- Keep a consistent sleep schedule. Get up at the same time every day, even on week-ends or during vacations.
- Set a bedtime that is early enough for you to get at least seven hours of sleep.
- Don't go to bed unless you are sleepy.
- If you don't fall asleep after 20 minutes, get out of bed.
- Establish a relaxing bedtime routine.
- Use your bed only for sleep and sex.
- Make your bedroom quiet and relaxing. Keep the room at a comfortable, cool temperature.
- Limit exposure to bright light in the evenings.
- Turn off electronic devices at least 30 minutes before bedtime.
- Don't eat a large meal before bedtime. A small snack is OK.
- Exercise regularly and maintain a healthy diet.
- Avoid consuming caffeine in the late afternoon or evening.
- Avoid consuming alcohol before bedtime.
- Reduce your fluid intake before bedtime.

QUIZ



Need More Shut-Eye?

Willis-Knighton Sleep Centers offer a comprehensive range of diagnostic and treatment services. For more information, visit wkhs.com/sleep today.

Aging Together

*The Oaks offers companionship
and increased health benefits
for older adults* ▶

BY **TERRIE M. ROBERTS**





TOP: Betty Allen, left, and Martha Duncan meet each Tuesday for an afternoon of corporate prayer to remember those who are ill or in need of special requests. BOTTOM: Proper nutrition and an active lifestyle are important at The Oaks and help residents age healthily and well.



There is truth in the lyrics by Harry Nilsson and made famous by Three Dog Night that “one is the loneliest number that you’ll ever do.” The prospect of aging without a spouse or family member at your side is one that nobody relishes. Yet, as the baby boomer generation passes age 65, a growing number of senior adults face that reality. As people get older, their likelihood of living alone increases.

Lonesome No More

Betty Allen, a resident of Garden Apartments at The Oaks, moved to The Oaks of Louisiana in June 2017 after her second husband, a man she had known since they were 13, passed away after two and a half years of marriage.

Vision problems and the realization that she needed to hand over her car keys sparked her quest to find a senior living community to call home. “One day I came back home, and I was trembling. I could not see half a block. I was fearful of a wreck,” she remembers. “I knew then I needed to park the car and that I didn’t need to stay in my home (in King’s Crossing) and depend on people. I needed to be where transportation was available.”

Moreover, Allen had begun experiencing occasional bouts of loneliness and was tired of cooking for one and eating alone. “I had gotten to the point I would eat a

bowl of cereal in the morning, snack on crackers and peanut butter for lunch and then have another bowl of cereal at night,” she says.

No more.

Already Allen is reaping the physical and mental benefits of living at The Oaks.

“At my checkups with my primary care physician, and even my dentist, they have asked what is going on,” she says. “I’m so much better. I’m eating better. I’m sleeping better. I am happier. I never feel alone.”

Making the Move

As Allen can attest, moving to an independent living residence before needing assisted living or skilled nursing care has many advantages, especially for active adults.

“Residents no longer have to worry about yardwork or home maintenance,” says Lisa Naquin, leasing consultant with The Oaks. “These things are included in the monthly rental fee, along with housekeeping, 24/7 security and transportation.

“Residents also pay one monthly price

for most of their expenses,” Naquin says. “When a cost comparison is done between staying in your home and moving to The Oaks, most discover that senior living is more affordable than they thought, especially when factoring in the many activities that are offered: health and wellness classes, spiritual life programs, socials, cultural and education programs, book reviews and more, all to enjoy and take part in with friends with similar interests.”

Naquin says because moving can be stressful for senior adults, who because of aging are experiencing changes in their mental and physical health, moving to a senior living community is best done while they are healthy.

Allen agrees. “My sons and their wives are still thanking me for making the decision and not putting them in the position to make it for me,” she says. “I’ve seen so many people whose families are torn apart. I was determined not to put my boys through that.”



Although many Oaks residents own their own cars, transportation is provided for those who no longer drive.

Now, Allen’s days are filled with new companions such as Perry Mason, whom she has breakfast with each morning at 8 a.m. Then, depending on the day, she is off to Tower at The Oaks for Bible study, lunch with friends, or working on crafts or handwork. Martha Duncan visits on Tuesdays for an hour of corporate prayer, and on Thursdays another friend comes by for Scrabble.

“I’m as happy as a lark, and I attribute it to living at The Oaks,” she says. ■

5 REASONS LIVING ON YOUR OWN IS UNHEALTHY

Studies show living alone can be hazardous to older adults’ health for a variety of reasons, ranging from safety to psychological well-being:

→ **PHYSICAL SAFETY.** One-third of Americans age 65 and older fall each year. In fact, falls are the leading cause of both fatal and nonfatal injuries in older Americans. Senior adults often have medical conditions that affect balance and physical strength, so some chores that require use of a stool or ladder are better left to a friend or family member who can help.

→ **NUTRITION.** People who live alone are less likely to prepare nutritious meals than those who share meals with others. Although they might enjoy the freedom that comes with grocery shopping for themselves or being able to decide what to eat and when, senior adults living alone are more apt to develop poor eating habits, such as skipping meals or opting for quick snacks and empty calories, especially if meal preparation is tiring or difficult.

→ **HEALTHCARE.** Seniors living alone who lack social contacts often fail to recognize acute medical conditions and obtain appropriate medical care. Minor medical conditions might be ignored until they become serious.

→ **MEMORY PROBLEMS.** A decline in memory can affect a senior’s ability to safely carry out household chores. Failure to turn off stoves, heaters, irons and other appliances that can cause house fires is more common in senior adults. Forgetting to pay bills, perform tasks of basic hygiene and take medications on time and in appropriate doses are other concerns for memory-impaired people living alone.

→ **FINANCIAL SECURITY.** Senior adults living on their own are attractive targets to con artists seeking to deprive them of their life savings through financial fraud or scams. Phone callers fish for personal information, and email and website scams can entice lonely seniors into giving personal information.



Scott Bicknell, MD, examines Teresa Paulk's surgically repaired knees near the end of her post-surgical physical therapy program.

LIVING LIFE PAIN-FREE

For people with joint pain, surgery can offer immense relief

BY **DARRELL REBOUCHE**

Teresa Paulk experienced incessant pain for more than 20 years and learned to live with it. “You put up with it because you’re busy with your life, and you don’t want to stop your life,” she says.

Severe osteoarthritis ravaged her knees, but she kept moving, though in an unconventional way. “I kind of kept my knees straight,” she says. “I didn’t bend them too much, because that was too painful—bending and walking and moving.” The simplest day-to-day

movements, the kind most people would not think about, hurt “every day, all the time.”

Finally, at age 53, she made a decision that changed her life: Paulk decided to have total knee replacement surgery. “We removed the source of the pain,” explains Scott Bicknell, MD, an orthopedic surgeon at The Orthopaedic Clinic.

“Coming out of the surgery, I had no bone pain,” Paulk says. When she took her first steps after surgery, her knees didn’t hurt for the first time in

almost 25 years. “There was pain from the operation, but I knew that would go away,” she says. She was so pleased, she had Dr. Bicknell replace the other knee three months later.

Still relaxed and relieved several months after the procedure, she enjoys a better life, without pain.

Deciding on Surgery

Dr. Bicknell estimates more than 90 percent of joint pain is caused by some form of arthritis. Despite

ever-increasing discomfort, people often delay surgery, either fearing the surgery itself or thinking that it won't give them the relief they want.

Paulk was one of the latter. "I guess you have original fear, wondering what the pain will be like when you come out of surgery," she recalls. She put off her joint replacements for years, but after two friends had knee replacements in 2017, she finally agreed to do it.

Surgeon Richard Harrell, MD, of Bossier Orthopedics, says that once people realize the dramatic relief they get, they wonder why they delayed. Both he and Dr. Bicknell note that people who are candidates for joint replacement might avoid the procedure because they have heard stories about older surgical techniques and replacement joints.

"Almost routinely after joint replacement, the most common response is, 'I wish I had done this sooner,'" Dr. Harrell says.

Updated Technology

Most joint replacements involve weight-bearing joints, knees and hips. Techniques and technologies for those and other joint replacement procedures are evolving rapidly. For years, Willis-Knighton has been a leader in the most advanced hip replacement procedures. Now, they are also expanding their expertise to other joints, such as ankles or shoulders.

For example, Dr. Harrell now performs a reverse total shoulder replacement. For a long time, a regular anatomic shoulder replacement was the only solution, but it didn't work for everyone.

"That works for a lot of patients with arthritis," he explains, "but that doesn't work well for patients without a rotator cuff because it doesn't allow the shoulder to function fully." In the past, people with severely damaged rotator cuffs were limited in their movement. "They could basically just do shoulder shrugs," Dr. Harrell says. But with this

reverse total shoulder technique, people can gain a full range of motion.

Physicians such as Bicknell, Harrell and their colleagues are always seeking the latest techniques to bring to patients at Willis-Knighton. "The thing that's nice about orthopedics is that the community is more than happy to share techniques," Dr. Harrell says. "We go all over the country and go into other doctors' operating rooms to learn."

Overall, there's good news for people considering any joint replacement: There's much less surgical trauma than there once was. Dr. Harrell notes that people can now recover so quickly a hospital stay is often reduced to just a day or two thanks to new techniques.

Life After Surgery

After joint replacement surgery, people can often quickly discern a difference in their joints. "Even though they're still going through the postsurgical changes, and they're not as good as they're going to get, they're much happier and much more functional than they were," Dr. Harrell explains.

Six months after joint replacement, most people don't routinely talk about their surgeries unless they're

asked about it, Dr. Bicknell says. Why? Because they're not experiencing pain, "they just don't think about it."

Paulk, who is now pain-free, has dedicated herself to a physical therapy program at Willis-Knighton to learn a new way to walk without keeping her knees straight. She can now bend and move comfortably.

"They're not the knees she had at 20," Dr. Bicknell admits, "but they're a lot better than the knees she had at 53."

For Paulk, living and working are simply easier these days. "I still do the things I was doing," she says. "But my whole attitude is better because I'm not hurting while I'm doing them." ■



ABOVE: Richard Harrell, MD, gets ready to perform surgery at WK Bossier Health Center. **RIGHT:** Teresa Paulk works to strengthen her legs and increase her flexibility following two total knee replacements.



SURGERY TODAY, HOME TODAY

At Willis-Knighton, advanced surgical techniques lead to quicker recovery **BY MARILYN S. JOINER**



Mark Brown, MD, who is examining patient Anna Catherine Schwalke, says day surgery is a great option for young patients such as Anna Catherine and their families.

Archaeological evidence indicates that surgery was performed on humans for thousands of years. Fortunately for us, those rudimentary procedures bear little resemblance to the advanced technology and minimally invasive procedures available today. These new techniques, coupled with exceptional pain control, allow many surgeries to be performed on an outpatient basis, with patients going home the same day.

Surgery: Then and Now

The first ambulatory surgery centers were opened in the U.S. just over 50 years ago, initiating the era of same-day surgery. Willis-Knighton was part of that movement and opened the Albert Bicknell Day Surgery Pavilion in 1996.

Today, the health system's surgical services program features seven da Vinci robots, which allow physicians to perform robotic-assisted surgery with more precision than ever. In fact, last year, Intuitive Surgical, the system's manufacturer, cited WK as the

largest-volume robotic program in the state, in both overall volume and general surgery. Research shows high-volume surgical programs like WK's tend to have better outcomes.

Special Considerations for Children

With a high volume of pediatric surgery at Willis-Knighton South, staff there are establishing a pediatric surgery center of excellence. "We're doing more than 2,000 a year, and that's really important to have your child's surgery in a place that does a lot of procedures for children," says Mark Brown, MD, of Pediatric Surgical Associates. "Volume builds competency."

Dr. Brown considers day surgery as a great option for his young patients. "It's a way for us to do minor surgeries for children without totally disrupting the child's and the family's lives," he explains.

Dr. Brown acknowledges that he and his partners must carefully screen young people to determine whether day surgery is an option. A child's safety is the priority issue, and one key consideration is anesthesia.

"Over the past 15 to 20 years, we've developed a lot of pain control techniques we didn't used to have," he explains. "Now, we can give local blocks or nerve blocks for pain control that last a long time, and that allows children to have surgery and go home, but without pain."

Surgeons and anesthesiologists working together has been a real benefit for day surgery patients. "Some surgery patients have to be admitted afterward, but a very small number, less than 1 percent," Dr. Brown notes. For example, this might happen in instances where doctors want to keep a child for further observation.

But overall, Dr. Brown believes one reason day surgery works well with children is that they are much more flexible than adults, both physically and



Manipulation of surgical instruments with robotic assistance provides Kamel Brakta, MD, with a high degree of control in a tight space.

mentally, and they generally tolerate surgery much better than adults do.

Better Recovery for Adults

For adult surgery, Kamel Brakta, MD, is an advocate for day surgery when a patient's condition warrants it. Like Dr. Brown, he agrees that it's really better for the patient. "There's no need for a more expensive hospital stay," he explains. "And with the scrutiny of healthcare costs, it's one way we can help lower these costs."

Dr. Brakta is so focused on these minimally invasive procedures that he added it to the name of his clinic, WK Robotic & Laparoscopic Surgery Clinic. As a surgeon who focuses on robotic and laparoscopic minimally invasive surgeries, he marvels at procedures that a decade or two ago were always performed as open surgery. "The majority of what we do today can be done as outpatient surgery, whether

it is surgery for acid reflux, gallbladder removal, or a wide range of hernia repairs," he says.

The da Vinci robots at Willis-Knighton also feature wristed instruments with articulating capacity, which means they can twist and turn multiple degrees. "You can do more with it, sew more comfortably and precisely," he says. "This has provided a significant advantage over just the laparoscopic technique."

There's no doubt that technology has enhanced the field of surgery. "Robotic technology allows us to fine-tune our skills," Dr. Brakta notes. "It gives the surgeon an edge in getting into limited anatomical spaces that would otherwise be difficult to access by hand." It also allows surgeons to operate with a significantly high degree of accuracy with less tissue trauma and bleeding. These factors are paramount to less pain and faster recovery time and return to normal activity. ■



The friends she has made at The Oaks of Louisiana have provided Lucille Williams, second from right, solace and much-needed support after the loss of husband Hugh.

feisty, inspiring, strong, and devoted—and she brings all of those traits to The Oaks.

Lucille and her husband, Hugh, whom she lost in 2016, moved to The Oaks in 2013. Maintenance of a large home and pool was becoming a burden, and Hugh's health made it more difficult.

When they walked into the grand foyer of Tower at The Oaks, Lucille recalls Hugh said, "This is where I want to move."

She chuckles at the memory. "I said, 'Let's check around,'" she remembers. "Hugh said, 'You can if you want to, but this is where I'm moving.'"

After visiting other communities with her daughter, Lucille wanted to come back to The Oaks. Her daughter agreed.

"We have never regretted choosing The Oaks for a second," Lucille says. "We could not have been treated any better than here, and when I lost Hugh, it was devastating. But I have made friends here that are so dear to me, friendships that I treasure."

Lucille maintains an active lifestyle out in the community and is an integral part of life at the Tower, something she says promotes her mental and physical well-being. She exercises frequently, attends many of the scheduled activities, makes cards for friends and tends to those who are sick. "They say if you stay busy you will stay young," she says. And Lucille is exactly that: 84 years young! ■

KEEPING YOUNG

For one resident, activities at The Oaks keep her busy—and young



Lucille Rowzee Williams is a diminutive figure but larger than life to those who know her—more a steel magnolia than a shrinking violet.

The 84-year-old resident of The Oaks of Louisiana is a native of the small Louisiana town Leesville, but her sphere of influence spans the United States, thanks in large part to her roles as a military wife and power-player in the Republican Party.

Lucille typifies a true Southern lady. She has impeccable table manners, says thank you when someone does

something for her and treats everyone at Tower at The Oaks, the independent living residence where she lives, with respect and kindness. She is a gracious hostess when family or friends come to visit, sends thank-you notes even at times when they are not required, dresses appropriately for all occasions and, above all, considers her family members to be the most important people in her life.

And she is to them.

A recent birthday present included their descriptions of her, including charismatic, courageous, determined,

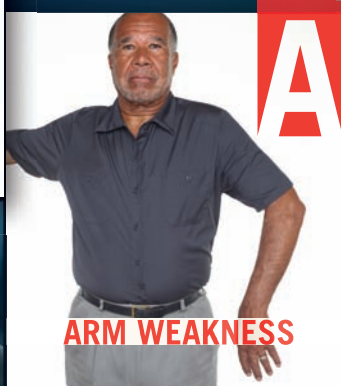


Body language
can tell you all
sorts of things.
Like someone is
having a **stroke**.



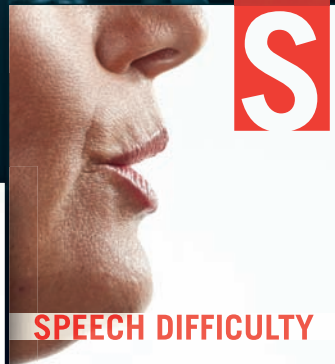
F

FACE DROOPING



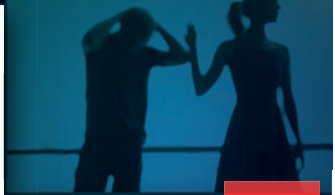
A

ARM WEAKNESS



S

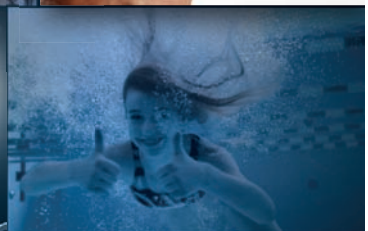
SPEECH DIFFICULTY



T



TIME TO CALL 911



Ad
Council



strokeassociation.org

 American
Heart
Association | American
Stroke
Association

Together to End Stroke™

Know the sudden signs.
Spot a stroke F.A.S.T.

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Shreveport, LA 71103

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This rating on the CMS website, Hospital Compare, recognizes the efforts of Willis-Knighton. And Willis-Knighton recognizes the people who make it possible—the **dedicated employees and physicians** and their commitment to provide superior care to patients in Shreveport-Bossier and the Ark-La-Tex.

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