

Castle Medical Center

-Adventist Health

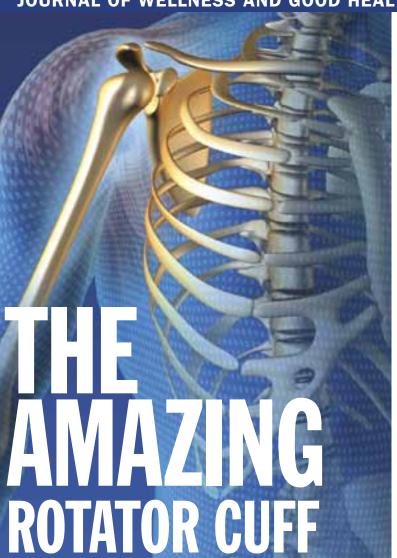
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WindwardHealth

JOURNAL OF WELLNESS AND GOOD HEALTH CARE

WINTER 2012



By Kevin H. Higashigawa, MD

The shoulder joint is one of the most dynamic joints in the body, and the way that it works is very complex. The exact cause of shoulder pain can be difficult to diagnose because most shoulder problems have the same signs and symptoms.

ANATOMY OF THE SHOULDER The shoulder is a very sophisticated joint which consists of a relatively round ball that sits on a comparatively small and flat socket. The difference in shape and size between the ball and the socket allows the shoulder to have a great range and freedom of motion—the most of any joint in the body. However, this difference also makes the shoulder inherently unstable.

The rotator cuff is a group of four muscles and their tendons that surround the shoulder and help to stabilize the ball on the socket. These muscles are important in rotating and elevating the shoulder.

INJURIES ARE NOT JUST FOR ATHLETES

Generally speaking, the cause of shoulder pain can be inferred based on the age of the individual. The rotator cuff tendons can become inflamed, a condition called tendonitis. Tendonitis typically occurs in younger people and is the result of overuse.

Middle-aged people may develop shoulder pain as a result of bone spurs, which can pinch and abrade the rotator cuff tendons. This condition is commonly referred to as impingement syndrome. Patients typically will complain of pain during overhead activities such as reaching for things.

Treatment usually begins with rest, antiinflammatory medicines and physical therapy. A cortisone shot may also be helpful, both diagnostically and therapeutically. If the pain persists despite these measures, the physician may suggest arthroscopic surgery (a routine procedure) to remove the bone spur.

THE EFFECTS OF AGING Complete tears of the rotator cuff tendons do occur and can be a significant source of pain and disability. Rotator cuff tears are normally the result of wear and tear, and typically occur in those over the age of 50. The likelihood of developing a tear increases with age, and it is estimated that 50 percent of people over the age of 80 have one.

Most of the time, tears develop gradually, and patients do not report a specific injury. Sometimes, rotator cuff tears occur after a seemingly harmless event, such as pulling luggage from the overhead bin of an airplane. Less often they are the result of major trauma, such as a serious fall or a shoulder dislocation.

Although rotator cuff tears are very common among seniors, the majority of tears have no symptoms.

WHAT YOU CAN EXPECT In order to determine if you have a rotator cuff tear, your physician will first ask you about your pain and perform a physical examination. X-rays may be needed to see if you have arthritis. Ultimately, an MRI of the shoulder may be ordered in order to confirm the diagnosis and document the size of the tear and the quality of the rotator cuff muscles.

Surgery to repair a torn rotator cuff depends on many variables, such as the age and activity level of the patient, the severity of the patient's pain and disability, and the nature (traumatic or degenerative) and size of the tear.

Meet Castle's orthopaedic surgeons

Seven board-qualified/certified orthopaedic surgeons provide services at Castle Medical Center. For a referral to any of these orthopaedic surgeons, call **263-5400**.



Kevin H. Higashigawa, MD, sports medicine, arthroscopic shoulder and knee reconstruction



Galen S. Kam, MD, surgery of the shoulder and elbow



Robert J. Medoff, MD, wrist, hand and arthroscopic surgery



Linda J. Rasmussen, MD, total hip and knee replacement



Stuart K. Wakatsuki, MD, foot and ankle surgery and sports medicine



Castle is what's right in health care

Castle Medical Center (CMC) was recently honored at What's Right in Health Care, Studer Group's annual health care peer-to-peer learning conference, which is the largest in the nation. The purpose of the conference is to bring organizations together to share ideas that have been proven to make health care better. The conference was held in Chicago.

CMC was honored for achieving excellent quality scores in physician satisfaction. Director of Quality Resources Laura Westphal accepted the award.

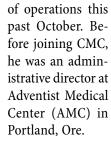
More than 1,700 delegates from across the United States and a number of international countries attended the conference.



Laura Westphal accepts the award from Quint Studer, founder of Studer Group, and Studer Coach Barbara Hotko.

Clegg joins CMC as VP of operations

Travis Clegg assumed the role of Castle Medical Center's (CMC) vice president



Travis Clegg, vice president of operations

Clegg holds a bachelor of business administration degree from Southwestern Ad-

ventist University in Keene, Texas, and a master's of business administration from Portland State University. He comes to CMC with a diverse portfolio of ancillary oversight and clinical operations, and led AMC's pursuit of excellence using the Studer principles. (See "Castle is What's Right in Health Care," top left.)

At AMC, Clegg administered the Gresham Station satellite medical facility, which includes an outpatient imaging center, regional laboratory, physical therapy department, and physician clinics. He was also responsible for the medical center's cardiology department, cardiopulmonary rehab, and centralized patient scheduling services.

Clegg and his wife Hannah have vacationed to Hawaii often and are excited to live in the islands full-time.

Raethel is Castle's new President and CEO

Kathryn Raethel assumed her role as president and CEO of Castle Medical



Kathryn Raethel, president and CEO

Center (CMC) on Dec. 5, 2011, filling the vacancy left by Kevin A. Roberts, who left CMC to become the CEO of Glendale Adventist Medical Center in California, Adven-

tist Health System's

flagship hospital. "In working with the CMC medical staff and governing board, there was an enthusiastic vote of strong support for Kathy to serve in this position," says Robert G. Carmen, president and CEO of Adventist Health and chairman of CMC's Governing Board. "She is very familiar with the market in Oahu, and her progressive leadership qualities will benefit CMC and its communities."

Previously, Raethel has served as vice president of patient care services at CMC. During her 11 years at the medical center, Raethel directed and gave clinical oversight to clinical patient services and was responsible for clinical support functions including quality resources, risk management, infection control, staffing and clinical operations. She also oversaw the Pharmacy, Cardiopulmonary and Emergency departments.

She is responsible for the creation of the professional nursing structure, as well as the vision and management of all CMC patient care services and activities. Raethel also has been an active participant in the systemwide strategic planning process, chaired the Castle Leadership Institute Steering Committee and is very involved in other hospital committees. Raethel also helped develop CMC's annual quality report and the Adventist Health publication Our Stories, a devotional book.

Raethel, a registered nurse with advanced certification in cardiothoracic nursing, began her career at Sydney Adventist Hospital in Australia. She also worked at Loma Linda University Medical Center, White Memorial Medical Center and Walla Walla General Hospital in various administrative roles, and was the vice president of professional services and COO at Desert Valley Hospital.

Raethel holds master's degrees in public health and health administration from Loma Linda University, is a fellow in the American College of Healthcare Executives and boardcertified as a nurse executive.

CUSTOMIZED CARE

New guidelines for women's heart care. See page 3.

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808-263-5500

email us:

Visit our website at castlemed.org and click on "Contact Us." We'd be happy to hear from you!

- Send us a comment.
- Request a Castle brochure.

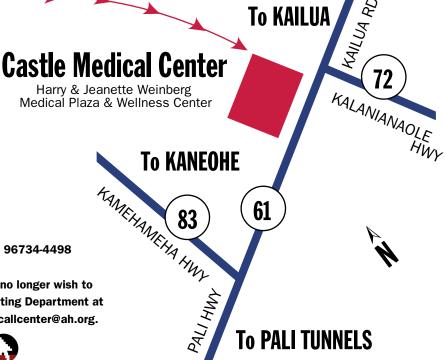
write or visit us:

Castle Medical Center, 640 Ulukahiki St., Kailua, HI 96734-4498

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Visit us at castlemed.org.





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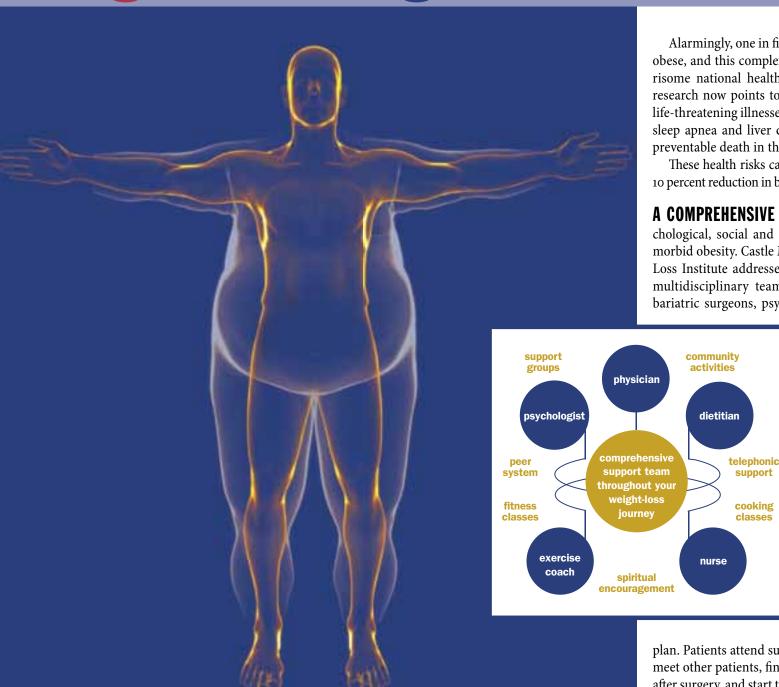
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Surgical Weight Loss Institute



By Mele Pochereva

When Castle Medical Center opened its Surgical Weight Loss Institute in 2006, it was the first nationally recognized program in the state to bring a comprehensive, multidisciplinary approach to sustained weight loss for morbidly obese patients. Today, the institute continues to lead the way across the islands, placing itself among the best such programs in the country. ◆ "In just five years, our program has become well-established and remains in the forefront of the latest procedures and protocols," says Steven Fowler, MD, a bariatric surgeon and the Institute's medical director. "We are proud to have earned the distinction as Hawaii's only Bariatric Surgery Center of Excellence by the American Society for Metabolic and Bariatric Surgery."

A NEW LEASE ON LIFE

Alarmingly, one in five people in Hawaii are morbidly obese, and this complex disease is an increasingly worrisome national health issue, says Dr. Fowler. Recent research now points to morbid obesity, and associated life-threatening illnesses such as diabetes, hypertension, sleep apnea and liver disease, as the leading causes of preventable death in the country.

These health risks can be greatly reduced with even a 10 percent reduction in body weight, if sustained over time.

A COMPREHENSIVE APPROACH Physiological, psychological, social and genetic factors all contribute to morbid obesity. Castle Medical Center's Surgical Weight Loss Institute addresses each of these areas through a multidisciplinary team approach. The team includes bariatric surgeons, psychologists, registered dietitians,

exercise specialists, nurses and a patient coordinator.

After an initial evaluation by Dr. Fowler, prospective patients receive a psychological evaluation to determine their readiness for surgery. The comprehensive postsurgery program at Castle Medical Center will help patients achieve long-term lifestyle changes to reach their weight-loss goals. Part of this comprehensive program includes meeting with the dietitian and fitness specialist to map out an individual weight-loss and weight management

plan. Patients attend support group sessions where they meet other patients, find out more about what to expect after surgery, and start to form a valuable network of peer support to ensure their continued success.

After weight-loss surgery, patients continue to receive follow-up care over the next 12 months and then annually for life. Patients attend fitness classes, cooking demonstrations, and individual and group counseling sessions that offer support and the tools necessary to keep them on track—physically and emotionally—for a successful transition to a healthy, new life. Even after a year, patients are encouraged to attend the ongoing support group meetings, where they not only enjoy the positive feedback from peers, but also can be an inspiration to others.

Choosing bariatric surgery takes tremendous commitment. "We like to tell patients that it's more than a choice to change your life—it may be a choice to save your life," explains Carol Enderle, DNP, APRN-BC, the clinical manager of Castle's Surgical Weight Loss Institute. "Reducing obesity-related disease and medications is our primary goal; weight loss is the icing on the cake."

 $-Continued\ on\ next\ page$

Surgical Weight Loss Institute



A NEW LEASE ON LIFE

—Continued from previous page

NEW ADVANCES IN BARIATRIC SURGERY Bariatric surgery modifies the stomach or intestines to physically limit the amount of food a person can eat. In the past decade, such surgeries have become more widespread as safer, less invasive procedures have been developed.

The Surgical Weight Loss Institute now offers patients a choice of three procedures, including the "gold standard" gastric bypass surgery, the laparoscopic adjustable band, known as Lap-Band, and the newest bariatric procedure, vertical sleeve gastrectomy.

Castle is the first and only Hawaii hospital to use the new, single-incision laparoscopic technique for the vertical sleeve gastrectomy and the Lap-Band procedures. The single incision is made through the belly button, resulting in a less-visible scar.

Each surgical procedure has its "ideal" patient, with expected outcomes and associated risks and benefits. Your surgeon will help you determine which procedure is best.

"For our patients, the first step is attending one of Castle's free monthly informational seminars where we explain the pros and cons of each procedure," says Dr. Fowler. "Then, during our one-on-one patient consultation, we'll match their goals for weight loss and improved health with the procedure we feel will work best for them."

NEIGHBOR ISLAND OUTREACH In the past year, the Surgical Weight Loss Institute has reached out to the neighbor islands by rotating

its free monthly informational seminars on Kauai, Maui, and in Hilo and Kona on the Big Island. Neighbor islanders also can request a copy of a free informational DVD that explains the institute's comprehensive program and each of the surgical procedures that are available.

With a referral from their primary physician, prospective patients can take advantage of Castle's Quick Start program. The program enables them to attend the informational seminar, have an initial evaluation with Dr. Fowler, and then set up their other pre-surgery appointments for a single visit to Castle Medical Center, which reduces the number of trips that Neighbor Islanders must make to Oahu.

After surgery, many of the follow-up consultations can be done over the phone or with Dr. Fowler, who travels to the neighboring islands monthly.

"There is no surgical weight-loss program like Castle's available on the neighbor islands," Enderle says. "Our Quick Start program, follow-up care and monthly neighbor island support groups help to fill a patient need for availability and ongoing support following weight-loss surgery."

Gastric bypass

We're here to change your life. From day one, and every day after. Call 263-5400 to register to attend an informational session.

Surgical weight loss _____

How is each procedure different?

Gastric bypass surgery achieves weight loss by cutting the stomach to make it smaller and to restrict food intake, and then bypassing a section of the small intestines so that calories and nutrients from food have less time to be absorbed by the body—a process called malabsorption. Bypass patients usually experience a 60 to 70 percent weight loss, but must take nutritional supplements for the remainder of their lives. For those with many obesity-related diseases, bypass surgery is the "gold standard" for significant long-term weight loss.

For those with less severe weight and health issues, the laparoscopic adjustable band, or Lap-Band, is an option with fewer postoperative complications. This adjustable band is inserted through a single incision in the belly button and placed around the top of the stomach to create a small pouch where the food is restricted. It makes a person feel full sooner, helping to reduce food consumption. The band is tightened or loosened as needed by adding or removing fluid through a small port under the skin. After a year, patients can reduce excess weight by as much as 40 percent.

The newest arrival in the field of bariatric surgery

is the vertical sleeve gastrectomy, a procedure that has the advantages of bypass surgery, but uses the same less-invasive, single-incision belly button surgery as the Lap-Band. The procedure removes 85 percent of the stomach, to limit its capacity for food, but unlike the bypass surgery, there is a reduced risk of complications and reduced need for ongoing nutritional supplements. Sleeve patients can achieve a 50 to 60 percent

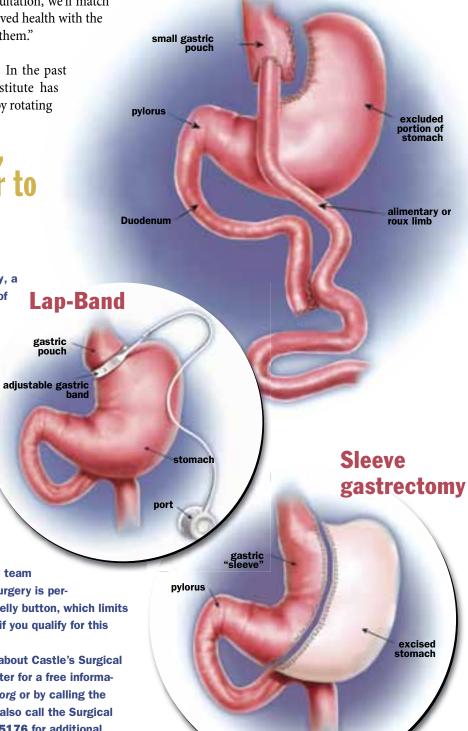
Single incision laparoscopic

weight loss.

surgery (SILS) at the Surgical Weight Loss Institute. Our surgical team offers SILS, where the weight-loss surgery is performed through one incision in the belly button, which limits visible scars. Call 263-5176 to see if you qualify for this popular new technique.

gastric pouch

Patients can request a free DVD about Castle's Surgical Weight Loss Institute and also register for a free informational session by visiting castlemed.org or by calling the hospital at 263-5400. Patients can also call the Surgical Weight Loss Institute at 263-5176 for additional



THREE SUCCESS STORIES

Bonnie Lee Chappell

From wheelchair to water fitness

When Bonnie Lee Chappell went to her first surgical weight-loss consultation with bariatric surgeon Steven Fowler, MD, she presented him with a spreadsheet documenting her 25-plus attempts at losing weight.

"I've been fat since I was 5," Bonnie says. "Two years ago, at age 58, I thought my life was at an end. I weighed nearly 400 pounds; I had difficulty breathing and walking at the same time, arthritis, sleep apnea, asthma, and a lot of pain."

Several years ago, Bonnie had considered having Lap-Band surgery, but having been diagnosed with disordered eating, she wasn't convinced that having surgery on her stomach would solve an issue that was in her head. It wasn't until a friend taught her how to use

medical qigong—a Chinese healing art involving meditation, controlled breathing and movement exercises to visualize the changes she needed to make—that Bonnie had the courage to go through with surgery in 2009. She chose the vertical sleeve gastrectomy as the best fit for her circumstances.

Today, she has lost nearly 150 pounds and continues to make steady progress towards her weight goal of 150. Bonnie enjoys an hour of aquacize each day, and she no longer needs a wheelchair or cane to get around. "My asthma is gone, my arthritis is better, and although I turned 60 earlier this year, I feel like 40 again," she says.

Her favorite story to share: "I recently went to see Sunset Boulevard at Diamond Head Theatre, and for the first time I didn't need to get permission to bring my own chair. I could sit in a regular seat, put my purse in my lap, and reach around my body to clap my hands."



Joel Kamakele

1,1,1,1,1,1,1,1,1,1,1,1

Fall in love with the journey

Joel Kamakele was always chubby, but after high school he kept in shape by bodybuilding. He also consumed a lot of calories to fuel his fitness regimen. When he broke his knee some years ago, he stopped lifting weights, but didn't stop eating.

"I was 360 pounds at my biggest, but always thought I could lose weight on my own," Joel says. "I tried different diets, but constantly went up and down in weight."

It was his desire to look good for his wife and be there for his 4-year-old daughter that motivated Joel to have Lap-Band surgery. On his own, he got his weight down to 338 before surgery. Six months after the procedure, his weight was down to 250 pounds, with his final goal of 230 in sight.

Joel's knees can now handle the lighter load, so he has returned to the gym, where he does an hourlong weight-lifting and cardio workout each day before his two-mile jog around Enchanted Lake. "Castle has changed my whole outlook on fitness, nutrition and health." he says.

One of the hardest things that Joel has had to overcome were the comments from others who say surgical weight loss is 'cheating.'

"Cheating means getting something the easy way, but since my surgery, it has never felt easy," he explains. "Dr. Fowler told me that with the Lap-Band, I would have to work harder to lose weight. At the end of my journey I will have earned my weight loss."

His advice to others considering weight-loss surgery: "Fall in love with the journey, not the end itself. Mentally, emotionally and physically, I have changed. My friends notice that I'm not a grump anymore, and I'm just so happy for everything the surgery has done for me."

AFTER BEFORE

James Stoddard

A new birthday awaits

At 6'2", James Stoddard has always been big. He had thought about having weight-loss surgery for at least 10 years, but it wasn't until his weight reached 579 pounds that he made up his mind to have gastric bypass surgery.

"I didn't want to hit 600 pounds," James says.

"Because of my weight, I needed to see more dramatic results so that I wouldn't lapse back to being big, so I decided the bypass surgery was best for me."

Another motivation for losing weight was his new niece. "I wanted to be able to play with her and see her grow up," he says. "My family was happy with my decision and has been 100 percent supportive. They want me to live longer and be healthy."

Two years after surgery, James has lost more than 325 pounds. "People don't recognize me until they see

my smile and hear my voice," says James, adding that he now can take pleasure in the little things that most people take for granted.

Topping the list of little pleasures is being able to cross his legs without physically lifting them with his hands, and sitting that way all day. "I find the biggest joy in that," he says.

James also can take a plane ride without having to buy two seats, sit in the movie theatre without putting up the armrests and walk through the swap meet without tiring out. For his one-year postsurgery anniversary, James bought himself a new car with bucket seats—and seatbelts without extensions.

James is aiming for an ideal weight of 230 pounds. With his sister expecting another baby, he remains motivated to reach that goal.

For others who have serious weight issues, James offers this advice: "Go to one of the information seminars and check out what Dr. Fowler has to say. A new birthday awaits. For me it's Oct. 14, the day I had my surgery."



YOUR SURGICAL OPTIONS

BARIATRIC (OR WEIGHT-LOSS) surgery has been proven to be the best solution for morbidly obese patients aiming for sustained weight loss. This type of surgery modifies the stomach or intestines to restrict the amount of food a person can eat or the amount of calories and nutrients the body absorbs.

Castle Medical Center offers three types of bariatric procedures, all of which can be performed laparoscopically—through small incisions, using a camera and instruments.

These minimally invasive procedures result in quicker recovery, less postoperative pain and fewer complications, and will not leave large scars.

WHO QUALIFIES FOR BARIATRIC SURGERY? Castle

Medical Center's Surgical Weight Loss Institute uses National Institutes of Health (NIH) criteria to determine who qualifies for the procedures. To qualify, patients must have a body mass index (BMI) greater than 40 or a BMI greater than 35 with obesity-related health problems such as type 2 diabetes, hypertension or sleep apnea.

We work with the following insurance carriers: HMSA, UHA, HMA, HMAA, UHC Choice Plus, MDX, DMBA, and Medicare. We also accept cash and credit cards.

A COMPREHENSIVE PROGRAM AT CASTLE Even

a 10 percent reduction in body weight, if maintained, can reduce many obesity-related health risks. However, bariatric surgery alone is not enough to ensure your success. For long-term maintenance of a healthy body weight, you need the kind of comprehensive treatment program offered at the Surgical Weight Loss Institute at Castle Medical Center.

Castle's program includes thorough and ongoing

nutritional, emotional, exercise and lifestyle support. At Castle, you work with a team of professionals who will be there for your entire journey.

Castle Medical Center's Surgical Weight Loss Institute is a designated Bariatric Surgery Center of Excellence*, credentialed by the American Society for Metabolic and Bariatric Surgery. This national distinction recognizes our program's demonstrated track record of favorable outcomes in bariatric surgery. It reflects our commitment to patient safety and proven successful outcomes.

We are also a designated Blue Distinction Center® for Bariatric Surgery** by Blue Cross Blue Shield America. Earning this distinction is a rigorous process, and is another credential recognizing our commitment to excellence.

Steven Fowler, MD, the Surgical Weight Loss Institute's medical director and surgeon, is a fellow of the American College of Surgeons and a Bariatric Surgery Center of Excellence designee. He performs surgical weight-loss procedures exclusively.

LEARN MORE You are invited to attend a Castle Medical Center Surgical Weight Loss Institute information session. Information sessions are conducted on Oahu, Kauai, Maui, and the Big Island.

Register online at *castlemed.org* and select a weightloss surgery class, or call **263-5400**. You can also contact us at 640 'Ulukahiki St., Kailua, HI 96734, or **808-263-5176**.

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**Designation as Blue Distinction Centers® means these facilities' overall experience and aggregate data met objective criteria established in collaboration with expert clinicians' and leading professional organizations' recommendations. Individual outcomes may vary. To find out which services are covered under your policy at any facilities, please call your local Blue Cross and/or Blue Shield Plan.

The health risks of obesity

Obesity is one of the major causes of preventable death in the United States and is a major factor in increasing the chance of developing serious medical conditions.

Obesity is a complex, chronic disease that affects nearly one out of every three American

In Hawaii, 22 percent of the population is defined as obese. Approximately half a million residents of Hawaii are considered overweight. Obesity puts a person at greater risk for developing the following health problems:

- Arthritis.
- Asthma.
- Cancer.
- Depression.
- Diabetes.■ Fatty liver.
- Gastric reflux.
- Heart disease.
- High blood pressure.Infertility.
- Osteoarthritis.
- Pulmonary embolus.
- Respiratory problems.
- Skin ulcers.
- Sleep apnea.
- Urinary incontinence.

BMI chart

If your BMI is 35 or more, you have a six times greater risk of developing diabetes than a person of normal weight, and more than twice the risk of gallstones, high blood pressure or arthritis.

BMI-asso	ciated disea	se risk						
WEIGHT CATEGORY	BMI (kg/m²)	RISK						
normal weight	18.5-24.9	normal						
overweight	25-29.9	increased						
obesity	30-34.9	high						
severe obesity	35-39.9	very high						
morbid obesity	<u>></u> 40	extremely high						

	Wei	ght (p	ounds	5)																A 4									
Heigh	t 154	165	176	187	198	209	220	231	243	254	265	276	287	298	309	320	331	342	353	364	375	386	397	408	419	430	441	452	463
4'9	33	36	38	40	43	45	48	50	52	55	57	59	62	64	67	69	71	74	76	78	81	83	86	88	90	93	95	98	100
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5'1	" 29	31	33	35	37	40	42	44	46	48	50	52	54	56	58	60	62	65	67	69	71	73	75	77	79	81	83	85	87
5'3	" 27	29	31	33	35	37	39	41	43	45	47	49	51	53	55	57	59	61	63	64	66	68	70	72	74	76	78	80	82
5'5	" 26	28	29	31	33	35	37	39	40	42	44	46	48	50	51	53	55	57	59	61	62	64	66	68	70	72	73	75	77
5'7	" 24	26	28	29	31	33	35	36	38	40	42	43	45	47	48	50	52	54	55	57	59	61	62	64	66	67	69	71	73
5'9	" 23	24	26	28	29	31	33	34	36	38	39	41	42	44	46	47	49	51	52	54	56	57	59	60	62	64	65	67	69
5'11	" 22	23	25	26	28	29	31	32	34	35	37	39	40	42	43	45	46	48	49	51	52	54	56	57	59	60	62	63	65
6'1	" 20	22	23	25	26	28	29	31	32	34	35	37	38	39	41	42	44	45	47	48	50	51	53	54	56	57	58	60	61
6'3	" 19	21	22	24	25	26	28	29	30	32	33	35	36	37	39	40	42	43	44	46	47	48	50	51	53	54	55	57	58

ou've heard the message many times: Women get heart disease and have heart attacks just like men do.

- ◆ The American Heart Association (AHA) has been driving home those facts to women, as a group, for many years.
- ♦ Now the organization would like women

to make that message more personal and more relevant to their

everyday lives. It is urging every woman to sit down with her doctor and ask two questions:

- "What factors keep me personally from being in optimum heart health?"
- "What are some practical steps I can take—given my age, health and background—to change them?"

NEW RISKS TO CONSIDER The idea of a more individualized and real-life approach to heart health is the result of updated guidelines the AHA released in 2011 for the prevention of cardiovascular disease (CVD) in women.

Included in the updated guidelines were some new risk factors for CVD that apply specifically to women. Among them: health issues—such as pre-eclampsia and diabetes—that may crop up only during pregnancy.

"Things like elevations in blood pressure or gestational diabetes increase a woman's risk for developing diabetes or hypertension later in life," says Ileana L. Piña, MD, one



Women heart health What's new for you?

of the authors of the guidelines.

So even though these conditions may disappear after childbirth, they can remain CVD risks for a long time.

For instance: Women with a history of pre-eclampsia face double the risk of having a stroke, heart disease and dangerous blood clots in their veins 5 to 15 years after their pregnancy compared to women who never experienced pre-eclampsia, according to the AHA.

What might this mean for you? If you had a complication such as gestational diabetes or high blood pressure during pregnancy, your doctor needs to carefully monitor and control your risk for CVD.

Another new risk factor women may not know about: Having certain immune disorders, such as lupus and rheumatoid arthritis, can significantly increase a woman's risk for CVD. According to the AHA, if you have one of these conditions, you should be screened for CVD, even if you don't have evidence of heart disease.

The updated guidelines also emphasize the need to recognize the impact that racial example: High blood pressure is a particular problem for African American women, as is diabetes for Hispanic women.

in these groups because there may be

important cultural and medical differences," Dr. Piña says.

POSSIBLE PROBLEMS, PRACTICAL SOLUTIONS

Most of what's in the guidelines isn't new. And that's because the basics of heart health haven't changed: Don't smoke, keep a healthy weight, stay active and eat right.

However, once you know and understand your personal risk factors for CVD, it's crucial to take those staples of preventing disease and make them work specifically for you so they become an essential part of your life.

"It's important to maintain a heart-healthy life," Dr. Piña emphasizes. "Your focus should be on heart health, not just heart disease."

Here are examples of how to do that:

Take a measure of your weight. "It's vital to keep a healthy body weight and avoid abdominal obesity," Dr. Piña says. Aren't sure if your weight puts you at risk for CVD? Ask your doctor. Meanwhile, you can check your waist size (an indicator of too much belly fat) yourself with a tape measure—less than 35 inches is healthy for women.

Be physically active. You don't have to join a gym or step on a treadmill. "Just go for regular walks," Dr. Piña says. If you don't feel comfortable doing that in your neighborhood, walk inside a nearby mall.

Feed your heart well. Fruits and vegetables. Fish. Nuts. Whole grains. Talk frankly with your doctor about any obstacles in your life to eating these hearthealthy foods. Brainstorm ways to get around them.

Keep working with your doctor. Ask and ethnic factors can have on CVD. For your doctor if you can sign up for email reminders about screenings, medication refills or other alerts. And be sure to let him or her know of any changes in your "It's important to look at women life that may throw roadblocks in your personal path to heart health.

Find a cardiologist to take care of your heart at *castlemed.org*, or call 263-5400.

FOR YOUR HEALTH



Take time for yourself this holiday season with Castle Medical Center's health programs. We invite you to register for a health-promoting class or seminar or call for a physician referral. Call **263-5400**, or visit our website at *castlemed.org* and click on "Classes."

EVENTS CALENDAR



FAMILY

Giving Birth: The Castle Experience

Begins Thursdays, Jan. 5, Feb. 2 or March 1; 6 to 8 p.m.

'Ohana Room

Learn about the birth experience from a knowledgeable labor and delivery nurse who will cover a wide range of topics from preparing for the hospital to caring for you and your baby. This four-session class is suggested for couples in their third trimester that plan to give birth at Castle.

Lamaze[™] Prepared Childbirth

Six sessions.

- Beginning Sundays, Jan. 8 or 15 or March 4, 9 a.m. to noon
- Beginning Mondays, Feb. 13 or March 26, 5:30 to 8:30 p.m.

Fee: \$75; \$65 if delivering at Castle.

Infant CPR and Safety

■ Tuesdays, Jan. 24 or Feb. 28, 5:30 to 8:30 p.m. Fee: \$25 per couple.

General Newborn Care

■ Tuesdays, Jan. 3 or 31 or March 6, 6 to 9 p.m.
Fee: \$25 per couple.

Breast-Feeding

Wednesdays, Jan. 18, Feb. 15 or March 28 6 to 8:30 p.m.

Taught by a certified lactation consultant. Fee: \$25 (free with a childbirth class).

Peacefully Pregnant

■ Tuesdays, Jan. 10, Feb. 21 or March 13 5:30 to 8:30 p.m.

Fee: \$25 per couple.

Attend this three-hour class to help dispel common myths that lead many couples to fear what is really a normal, natural event. Includes discussion, short films and a workbook.

Birth Center Tour

Thursdays, 5 p.m.Call for a reservation.

New Mothers Hui Wednesdays, 10:30 to

11:30 a.m. 'Ohana Room

A support group for new moms led by an internationally certified lactation consultant/perinatal RN. Free, no registration.

FITNESS

Exercise Classes

Registration and fitness assessment required (may include a medical clearance and physical therapy screening).

- Bone Builder
- Core Strength
- Exercise for Life
- Flexibility Focus
 Interval Training
- Longer Life
- Lunch Crunch
- Pilates
- Qigong
- Steady on Your Feet

Fitness Training

Ongoing, by appointment

Our certified fitness trainer will assess your current fitness level and design a tailored plan to help you reach your fitness goals, whether you want to improve your health, flexibility, strength and stamina or just want to lose a few pounds. Group rates are available. Call **263-5050** for more information.

JOINT CARE

Joint Care Seminars Day and evening classes Orchid Room

Learn options to reduce hip and knee pain through diet, exercise, medication or joint replacement surgery.



NUTRITION

Nutrition Counseling Ongoing, by appointment

To help you start a healthy diet and nutrition program for optimal health. Focuses include weight loss, diabetes (covered by many HMSA plans and Medicare Part B), heart disease and cholesterol reduction, and wellness specific to women and men. Diabetes interactive group education is also available. Call **263-5050** for more information.

STOP SMOKING



Individual and Group Stop-Smoking Services

Free nicotine replacement medication available for qualified program participants. For more information on individual or group appointments, call **263-5050** or visit *castlemed.org*.

WEIGHT LOSS

Individualized Weight-Management Program

Ongoing, by appointment

Includes four one-on-one nutrition counseling sessions with a registered dietitian, four one-on-one personal training sessions with a certified exercise specialist, personalized menu planning, fitness classes and body composition analysis.

Take advantage of our free 15-minute information consultations with a dietitian and fitness trainer to discuss if this program is right for you. Call **263-5050** for more information.

Cindy Carvalho, trainer, and Allison Chan, RD

Take Shape For Life!

Find details about Castle's popular weight-loss program at www.castlewellness.tsfl .com/hp. Call 263-5050 to schedule a consultation and taste testing, and to learn about special discounts.

Weight-Loss Surgery Seminar

- Wednesdays, Jan. 18 or March 21, 6:30 p.m. ■ Saturday Feb. 11, 7 p.m.
- Wellness Center Auditorium Learn about Castle's comprehensive surgical weight loss program from bariatric surgeon Steven Fowler, MD, and other members of the bariatric team. Registration

SUPPORT GROUPS

Free and open to the public.

- Alzheimer's Caregivers
- Bereavement
- Cancer

required.

- Caregivers
- Parkinson's
- Mental Illness Caregivers (NAMI)

Women's health services

Please add Rona Lieberman, MD, and Marc Shlachter, MD, to the list of physicians in our previous issue who provide routine women's services in their offices. For a physician referral, call **263-5400**.



Rona Lieberman, MD



Marc Shlachter, MD

EAT WELL FOR LIFE CLASSES

Healthy food prep demonstrations with tasty samples!

Eating healthfully doesn't have to be complicated, expensive or boring! Learn practical tips and discover recipes that will inspire you to eat well for life. Tasty samples and written recipes provided. All foods are made with nonanimal food products in the Castle Wellness & Lifestyle Medicine Center's beautiful demonstration kitchen. These demonstration classes do not include hands-on food preparation by partici-

pants. Price: \$15/person, \$10/person
for CMC employees, volunteers, students (with ID) and seniors
(age 65+), or
\$20 per couple
(two people
who register
together).

Thursdays, 11:30 a.m. to 1 p.m.

Healthy Weight Management, Jan. 5

Whether you're eating too much or eating too little, if maintaining a healthy weight is a challenge, you'll enjoy this class that will focus on how choosing and preparing foods that help support a healthful way of eating.

■ Heart Health, Feb. 2
Learn some great food
choice and prep ideas that
will help your heart keep
ticking strong and long!
■ Brain Health, March 1

Fat your way to better brain

Eat your way to better brain health with these delicious recipes and tips.

Wednesdays, 6:30 to 8 p.m.

Seeds & Nuts!, Jan. 25 Learn how to prepare these plant-based protein powerhouse foods in creative and fun new ways!

■ Rice Cooker Creations, Feb. 22

Use your rice cooker in a new way! Go beyond just rice and make easy, delicious and nutritious main dishes.

Party Pupus! March 28 Not sure what to bring to your next party, but know that you want it to be fresh, healthy and delicious? Creative solutions to this dilemma abound in

this fun class.