

# VIM & VIGOR

SPRING 2019 • \$2.95



## Do It Your Way

**27** ways to embrace your  
health on your terms

### PLUS **Joanna Gaines**

welcomed a new baby  
to her family after her  
40th birthday

GET TO KNOW  
A LOCAL  
ORTHOPEDIC  
EXPERT

**Lung cancer  
screening  
can have you  
breathing easy**

HOW HEART ATTACK  
TREATMENT IS  
GETTING FASTER



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*Healing Families—Healing Communities®*



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**Best for Mom and Baby**  
A new mother thanks her PMC labor and delivery team for a meaningful birth experience.

# EAT RIGHT FOR DIABETES

*Enjoy this tasty, low-carb meal*



March 26 is Diabetes Alert Day, but when you have diabetes, you know it's important to pay attention to how much sugar you eat every day. You're probably very careful about candy, cakes and ice cream.

Did you know that your body changes many carbohydrates into sugar, too? That means grains, fruits, vegetables, pasta and milk affect your blood sugar

levels. To keep the balance between sugar and insulin, you can count the carbohydrates you eat. Start by asking your doctor or a dietitian how many servings of carbohydrates you should eat each day. Then, remember that one serving of carbohydrates is 15 grams. Finally, check food labels or free online carb counters to find out how many carbohydrates are in your favorite foods.



**Marie Walker,  
RD, LD/N, CDE,  
Diabetes Educator**

## SOUTHWESTERN CHICKEN

### WHAT YOU'LL NEED

1 teaspoon chili powder  
¾ teaspoon paprika  
¾ teaspoon cumin  
½ teaspoon onion powder  
½ teaspoon salt  
¾ teaspoon garlic powder  
Pinch cayenne  
1 pound skinless, boneless chicken breasts  
½ cup enchilada sauce  
4 ounces cheddar cheese, shredded  
3 green onions, chopped

### NUTRITION INFORMATION PER SERVING

Each serving has:  
266 calories, 12 g fat,  
4 g carbohydrates,  
1 g dietary fiber,  
33 g protein.

### DIRECTIONS

Mix spices together; sprinkle on both sides of chicken. Cook chicken in a nonstick skillet until juices run clear; cut into cubes and place in a greased 8-by-8-inch baking dish. Add the enchilada sauce and toss to coat the chicken. Sprinkle the mixture with cheese. Bake at 350 degrees for 15–20 minutes or until center bubbles. Sprinkle with green onions. Serves 4.



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# ONE GIANT LEAP FOR BETTER HEALTH

*What America's race to the moon and PMC's pursuit of patient safety have in common*

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Doing that which had never been done before allowed the U.S. to be the first on the moon. It's also how Parrish

Medical Center (PMC) earned the first worldwide award for its patient safety focus.

When President John F. Kennedy announced in 1961 that the U.S. would land a man safely on the moon and return him to earth, America had only launched one astronaut into space.

Engineers were perplexed. There were a great many things that didn't exist and that had to be invented. Among thousands of such items were integrated circuits, small cameras and scanners. These have evolved into today's microchips, smartphone cameras and CT scanners used in medical diagnoses.

Hospital safety existed before PMC made it a priority but not in the way it's been reinvented here. Sobering statistics reveal the desperate need for increased hospital safety: Between 700 and 1,000 people die every day in American hospitals as a result of medical errors.

PMC put your safety first even before healthcare reform saw many other hospitals running to catch up. We enlisted

our more than 1,300 care partners in a patient safety army. Emphasis is on danger prevention, awareness and correction.

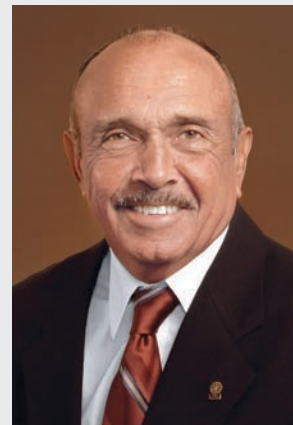
We created PMC's Culture of Safety to make safety a daily emphasis.

This long-term focus is among the reasons Consumer Reports named PMC Florida's safest hospital, and it's why PMC last spring accepted the Patient Safety Movement Foundation's Five-Star Award for being the world's first hospital to commit to achieving the foundation's zero-harm goal through a pledge to meet all of the foundation's actionable patient safety solutions.

Doing important things in space or on Earth makes demands on those willing to accept the challenges, put in the work and break the norms.

That's how we went to the moon, and that's why it matters which hospital you choose.

Sincerely,  
Herman A. Cole Jr., Col., USAF, Ret.  
Chairman of the Board



*"We created  
PMC's Culture  
of Safety to  
make safety  
a daily  
emphasis."*

# MARCH–MAY 2019

► *Parrish Healthcare sponsors classes, events and support groups for all ages. Unless otherwise noted, registration is required, and classes are free. Look for updates and newly added events online at [parrishvigor.com/calendar](http://parrishvigor.com/calendar).*

## Childbirth/Baby Care Education

### Beginning Breast-feeding Class

**When:** Third Monday each month

**Time:** 6:30–8:30 p.m.

**Where:** The Children's Center, 5650 S. Washington Ave., Titusville

**Info:** To register, call 321-268-6682.

## Moments to Miracles (Childbirth Education Class)

**Cost:** \$50 per couple

**Info:** Call 321-268-6790 for dates and times.

## Sibling Class for Big Brothers and Sisters

**Info:** Call 321-268-6790 for details.

## Children's Activities

**Where:** The Children's Center, 5650 S. Washington Ave., Titusville

**Info:** Call 321-264-0855 or visit [parrishchildrenscenter.com](http://parrishchildrenscenter.com).

## North Brevard Connections (NBC)

A casual support group for parents and caregivers of children with special needs.

**When:** Fourth Friday each month

**Time:** 9:30–11:30 a.m.

**Info:** Call Mary Cancel at 321-292-1370.

## Diabetes Education Program

This education program consists of two three-hour classes. Diabetes education is covered by Medicare and most insurance plans.

**When:** Mondays and Fridays

**Where:** Parrish Medical Center, Titusville, and Parrish Healthcare Center, Port St. John

**Info:** Call 321-268-6699.

## Nutrition Counseling

Medicare covers nutrition counseling for diabetes and

chronic renal disease; other insurance may include additional conditions.

**Where:** Parrish Medical Center, Titusville

**Info:** Call 321-268-6699.

## Take Charge of Your Eating Decisions

A six-week weight-management program for people who want to change their eating habits.

**Info:** Call 321-268-6699.

## Fitness Education Next Steps™ Medically Integrated Fitness Program

Take part in one of 10 medically integrated eight-week fitness programs. Team up with a fitness specialist to develop a plan for success.

**Cost:** \$99

**Where:** Parrish Health & Fitness Center, 2210 Cheney Highway, Titusville

**Info:** Call 321-567-2201 to schedule a tour, or visit [parrishhealthandfitness.com](http://parrishhealthandfitness.com).

## General Interest Classes Caregiver Academy

Different topics are featured each month. No registration required.

**When:** Second Thursday each month

**Time:** 10–11 a.m.

**Where:** Heritage Hall, Parrish Health Village

**Info:** Call Janet Rooks at 321-268-6800, or visit [parrishvigor.com/calendar](http://parrishvigor.com/calendar) for topics.

## Community Events Eat Well and Be Well

### Eat Well and Be Well

A diabetes diet simply means eating the healthiest foods in moderate amounts and sticking to regular

## FEATURED EVENT



## Free Event

# Stroke: Symptoms, Types, Treatment and Prevention

**Wednesday, May 8, 5–7 p.m.**

Stroke affects about 700,000 Americans each year. With the right care at the right time, many survive. Join us to learn more.

**Where:** Indian River Preserve, 3950 Walkabout Way, Mims

**Info:** Dinner will be served. Seating is limited. Visit [parrishvigor.com/calendar](http://parrishvigor.com/calendar) or call **321-268-6110** to reserve your spot.



mealtimes. Join us to learn how to create a healthy eating plan that's naturally rich in nutrients and low in fats and calories and is good for the whole family.

**When:** Wednesday, March 13

**Time:** 10 a.m.–noon

**Where:** Parrish Medical Center, Titusville

**Info:** Lunch will be served. Seating is limited. Visit [parrishvigor.com/calendar](http://parrishvigor.com/calendar) or call 321-268-6110 to reserve your spot.

### The Dream Diet

If you're trying to lose weight, the amount of sleep you get may be just as important as your diet and exercise. Evidence shows that sleep might be the missing factor for many people who are struggling to maintain a healthy weight. Join us to learn about getting good sleep.

**When:** Thursday, March 28

**Time:** 5–7 p.m.

**Where:** The Blue Heron, 137 Plantation Drive, Titusville

**Info:** Dinner will be served. Seating is limited. Visit [parrishvigor.com/calendar](http://parrishvigor.com/calendar) or call 321-268-6110 to reserve your spot.

### Sleep and Your Heart

Sleep is essential for a healthy heart. People who don't sleep well are at higher risk for heart disease, regardless of age, weight, smoking and exercise habits. Join us to learn more about getting good sleep.

**When:** Thursday, April 18

**Time:** 5–7 p.m.

**Where:** Holiday Inn, 4715 Helen Hauser Blvd., Titusville

**Info:** Dinner will be served. Seating is limited. Visit [parrishvigor.com/calendar](http://parrishvigor.com/calendar) or call 321-268-6110 to reserve your spot.

### Support Groups

Go to [parrishvigor.com/calendar](http://parrishvigor.com/calendar) for complete details.

#### AWAKE Sleep Disorders Support Group

**When:** Second Monday each month

**Time:** 6–8 p.m.

**Where:** Parrish Healthcare Center, Port St. John

**Info:** Call 321-268-6408.

#### Caregiver Support Group

**When:** First and third Thursdays each month

**Time:** 9:30–11:30 a.m.

**Where:** Heritage Hall, Parrish Health Village

**Info:** Call Janet Rooks at 321-268-6800.

#### Diabetes Support Group

**When:** Second

Thursday each month

**Time:** 3:30–5 p.m.

**Where:** Heritage Hall, Parrish Health Village

**Info:** Call 321-268-6699.

#### Look Good Feel Better

For women in various stages of cancer treatment. Get makeover tips and personal attention from specially trained professionals.

**Info:** Call the American Cancer Society at 800-227-9954 to schedule an appointment.

#### MAK Gathering (Moms and Kidz) Support Group: Birth to 18 Months

With lactation consultant Rita Jordan.

**When:** Mondays and Wednesdays

**Time:** 10–11:30 a.m.

**Where:** The Children's Center, 5650 S. Washington Ave., Titusville

**Info:** Call 321-268-6682 or 321-264-0855.

#### Parkinson's Support Group of North Brevard

**When:** Third Thursday each month

**Time:** 2–4 p.m.



CALL



## Need a Health Expert to Speak to Your Group?

PMC experts are available to speak to your group on important health issues. To schedule a speaker for your next meeting, call **321-268-6110**.

**Where:** Heritage Hall, Parrish Health Village  
**Info:** Call Janet Rooks at 321-268-6800.

#### Parrish Partners Cancer Support Group

**When:** Third Monday each month

**Time:** 4–5:30 p.m.

**Info:** Call 321-268-6111, ext. 3544, or visit [parrishvigor.com/calendar](http://parrishvigor.com/calendar).

#### Pulmonary Hypertension Support Group

Sponsored by PMC.

**When:** Second Tuesday each month

**Time:** 3–5 p.m.

**Where:** Grace United Methodist, 65 Needle Blvd., Merritt Island

**Info:** Call Janet Rooks at 321-268-6800.

#### Stroke-Heart Survivors Group

**When:** Third Tuesday each month

**Time:** 2–4 p.m.

**Where:** Heritage Hall, Parrish Health Village West

**Info:** Call Janet Rooks at 321-268-6800. ■



A dedicated committee of local community members spent months preparing and planning to make Fly Me to the Moon a success.

# Fly Me to the Moon

*Gala celebrates space exploration's golden era and raises money for mental and behavioral health services*

Jess Parrish Medical Foundation's annual benefit gala, Fly Me to the Moon, presented by the law firm GrayRobinson PA and William & Laura Boyles, was a tremendous success, raising more than \$175,000 to expand mental and behavioral health services in Brevard County.

More than 400 guests "played among the stars" with the beauty of a celestial evening re-creating the 1960s golden era of space exploration. While taking in picturesque views of one of the busiest cruise ports in the world, guests enjoyed signature cocktails, shopped an out-of-this-world online silent auction and reveled in an interactive, virtual reality experience. Guests danced the night away '60s style with the 15-piece swing sensations Space Coast Big Band, featuring a performance by trumpeter and former NASA astronaut Capt. Winston Scott.



Gala attendees with trumpeter Winston Scott (back center) and presenters William and Laura Boyles (back left).

"It was our honor and privilege to once again be the presenting sponsor of this important event," says William A. Boyles, a shareholder at GrayRobinson. "We believe in Parrish Medical Center's vision of Healing Families—Healing Communities® and look forward to helping expand mental and behavioral health services in the community."

The event was co-chaired by Judy Allender and Holly Carver. Gala committee members were Winnie Brewer, Kelley Broome, Mary Coleman, Amy Craddock, Lori Duester, Voncile Franklin, Betty Greene, Samantha Guyre, Dawn Hohnhorst, Clarissa Kirk, Jessie Kirk, Elizabeth Kump, Melissa Lugo, Allison Morgan, Christina Morrison, Susan Morse, Tara Ruch, Leigh Spradling, Dr. Tanya Taival, Obstetrics and Gynecology, and Lavaughn Young.

Go to [parrishmedfoundation.com/photos](http://parrishmedfoundation.com/photos) to see more pictures from the event.





## JOIN THE FOUNDATION'S ANNUAL GIVING SOCIETY

Members of the Pauline Bryan Society, Jess Parrish Medical Foundation's annual giving club, include individuals, civic clubs and businesses making gifts of at least \$100 per year. Each spring, society members are honored for their generosity at the foundation's annual Garden Party. When you give, 100 percent goes directly to resources that transform our local community and create a healthier tomorrow for our neighbors.

GIVE



### Your Gift Matters!

Join the Pauline Bryan Society or renew your membership today. Member invitations will be mailed soon for the 2019 Garden Party. Call **321-269-4066** or visit **[parrishmedfoundation.com/donate](http://parrishmedfoundation.com/donate)**.

## NATIONAL DOCTORS' DAY

# HONOR A DOCTOR WHO'S MADE A DIFFERENCE

At Parrish Healthcare, doctors work tirelessly to keep our community healthy. Through selfless dedication to healing and delivery of extraordinary, compassionate care, they have touched the lives of countless people. They often work long hours, and at times, the sacrifices they make go unnoticed. Their commitment to improving people's health and well-being, every day, is the reason we ask you to join us in honoring them.

On March 30, Jess Parrish Medical Foundation will celebrate National Doctors' Day and the men and women who have dedicated their lives to healing others.

Let your doctor know that his or her work has made a difference in your life by making a meaningful gift of support for National Doctors' Day. Along with your contribution, we encourage you to express your gratitude with a personal note of thanks. The foundation will notify each physician you choose to honor. Proceeds will benefit The Karla Foster, RN, Memorial Nursing Scholarship, unless otherwise designated.

To make your gift, visit **[parrishmedfoundation.com/donate](http://parrishmedfoundation.com/donate)** or call **321-269-4066**.





**Pamela Tronetti,  
DO, AGSF, PMC  
Senior Services  
Medical Director**



# ARE YOU DEPRESSED?

*How to tell whether you might be at risk—and what you can do about it*

**Over the past two weeks, how often have you been bothered by the following problems?**

**Q Little interest or pleasure in doing things:**

- ☐ Not at all **(0)**
- ☐ Several days **(+1)**
- ☐ More than half of the days **(+2)**
- ☐ Nearly every day **(+3)**

**Q Feeling down, depressed or hopeless:**

- ☐ Not at all **(0)**
- ☐ Several days **(+1)**
- ☐ More than half of the days **(+2)**
- ☐ Nearly every day **(+3)**

These are the questions routinely asked on a screening test for depression. The higher the score, the more chance that a person is suffering from a depressive disorder.

The Greeks called depression *anhedonia*, or inability to feel pleasure. The Romans called it *deprimere*, meaning to press down. Many people confuse depression with grief or sorrow.

Actually, the symptoms of depression are more likely to be withdrawal from social activities, difficulty making decisions (paralysis by analysis), irritability, feelings of worthlessness, losing perspective of the importance of things, overwhelming guilt, eating or sleeping too much or too little, and deciding that nothing matters.

Some people, especially those who were raised in cultures where showing emotion is frowned upon, have physical symptoms such as headaches, chest pain and digestive symptoms (as if the person just can't "stomach" the stress anymore).

Treatment for depression includes medication, counseling and lifestyle changes. Yes, it takes all three. In addition, make sure you get adequate sleep, nourishing food and physical activity.

Depression affects 20 million Americans. It is a common medical condition that deserves treatment. If you are feeling depressed, start with an appointment with your family doctor to take the next step in getting an accurate diagnosis and treatment plan. ■

## THINGS PEOPLE SAY TO DENY THEIR DEPRESSION

**"I can't be depressed. I have nothing to be depressed about."** That's the

point. Feelings of depression are often separate from circumstances. Remember that depression can be linked to genetics as well as changes in brain chemistry. Or it can be a manifestation of a medical condition, such as thyroid disease or sleep apnea, or a side effect of the medication.

**"Men don't get depressed. We get**

**to work."** Men do show depression differently. They may display misdirected anger, try to self-medicate with alcohol and engage in risky or escapist behavior.

**"Good Christians don't get depressed. It's**

**almost a sin."** No, it's not. It's a medical illness, and it deserves treatment.

**"Wouldn't you be depressed? The world**

**is a mess."** Yes, it is. Always has been. Always will be. But when someone obsesses about how bad the world is, he or she just may be sinking into the dark depths of depression.



# The Breaking Rules Issue

Times change,  
and so do we.

## CHANGING NORMS



Human beings and their health are always evolving.  
What might change in the next 50 years?

**15.5%**

**Smoking:** In 1954, 45 percent of American adults lit up. Today, it's **15.5 percent**. Credit increasing public education about smoking's risks.



**↓39%**

**Breast cancer:** Death rates **dropped 39 percent** from 1989 to 2015. The decline is thanks to improvements in treatment and early detection.



**0**

**Vaccines:** Because of the polio vaccine, this disease is on the verge of worldwide elimination; **there have been no cases** originating in the United States since 1979. In 1952, nearly 60,000 U.S. children were infected with the virus.



**26.6**

**Pregnancy:** In 1970, the average age of a first-time mother was 21.4. **In 2016, it was 26.6**. The teen birth rate is nearly 70 percent lower than it was in 1991.



**Read on, and challenge some of the things you might believe about your health. ➔**

Sources: American Cancer Society, Centers for Disease Control and Prevention, Gallup, National Public Radio, World Health Organization





JOANNA PHOTO BY  
LARSSEN AND TALBERT/GETTY



# ADDING ON

Design star **Joanna Gaines** became a mother of five at 40 BY **SHELLEY FLANNERY**



HGTV fans admire Joanna Gaines for her creative vision. She can see potential in a space when no one else can. But it was a new addition to her own family last year that she didn't see coming. Gaines and her husband, Chip, had just decided to call it quits on their wildly successful home renovation show, *Fixer Upper*, when they found out she was expecting.

"It was a total surprise," Gaines told *People* magazine. "But when we found out, it solidified that it was the right decision to leave [the show] when we did."

Gaines was 39 when she discovered she was expecting her fifth child, eight years after the birth of the couple's then-youngest daughter, Emmie Kay. The Magnolia mogul and author of *Homebody* turned 40 during her third trimester.

And when she welcomed a baby boy, Crew, on June 21, she joined a growing club: women who give birth in their 40s.

## Babies at 40 and Beyond

Despite moms-to-be older than 35 being labeled as "advanced maternal age," women ages 40 to 44 saw the largest increase in birth rate between 2016 and 2017, up 2 percent, according to the Centers for Disease Control and Prevention, while other age groups saw decreases or stagnation. That modest gain is part of a long-standing trend: The birth rate for women in their early 40s has generally risen since 1982. (That said, women in this age group still gave birth to just 3 percent of the 3.85 million babies born in 2017.)



Joanna Gaines with her newborn, Crew.





There are several reasons for the increase. A study published in the *International Journal of Healthcare* reported the reason most commonly cited by women for delaying childbearing was “being able to financially support a child,” which often correlates with waiting to complete college and establish a career. Women who participated in the study also mentioned waiting to be in a stable relationship, finding the right partner and having a home as other top reasons for waiting to have kids into their 30s and 40s.

Another reason women may be taking more time is because they can, or at least they think they can. While Gaines says she conceived naturally—Chip, in a tweet, attributed the pregnancy to a romantic date night—many 40-somethings are relying on assisted reproductive technology, even if they’re not talking about it. It’s empowering to have options, but experts warn against putting too much stock in technology.

“I do think, based on what we’re seeing on social media about women having children later in life, there is a bit of a false sense of security thinking you

can delay childbearing indefinitely,” says Shannon Clark, MD, a spokeswoman for the American College of Obstetricians and Gynecologists. “And women may not necessarily recognize that it’s not always easy.”

### Fertility After 40

As evidenced by Gaines, women can—and do—get pregnant naturally after age 40, but it’s much more difficult. While a 30-year-old woman has about a 20 percent chance of conceiving each month, the chances drop to 5 percent 10 years later, according to the American

Society for Reproductive Medicine. The decline is attributable to both egg quantity and quality.

“Even though women are born with more eggs in their ovaries than they will ever ovulate, most of these eggs are lost without ever maturing and being released,” says Christos Coutifaris, MD, PhD, president of the American Society for Reproductive Medicine. “The other thing you have to remember is these eggs have been sitting in the ovaries since the woman was a fetus. Over time, the quality of the eggs decreases, resulting in chromosomal abnormalities or genetic defects that raise the risk of failed implantation and miscarriage.”

And conception is only half the battle. After 40, women are more likely to experience pregnancy-related complications.

## CONSIDER CONTRACEPTION

Joanna Gaines was thrilled to have a baby at age 40 and even told *People* magazine she’s open to having more.

But not all women over 40 want to start or expand their families. And while the odds of conceiving naturally after 40 are lower than they were in your 20s and 30s, it can happen unexpectedly.

“I know many women who thought, oh, I’m 41. There’s no way I can get pregnant,” says American College of Obstetricians and Gynecologists spokeswoman Shannon Clark, MD. “And then they get pregnant. It happens.”

The bottom line is, if you do not want to get pregnant and you still have periods, talk to your provider about what you can do to prevent pregnancy.

► Birth control pills can safely be used until age 50 as long as you have normal blood pressure levels, have no indication of heart disease and don’t smoke.

► Permanent birth control, such as tubal ligation or the nonsurgical placement of a permanent barrier, is the most common form of contraception in women over 35.

► Barrier methods, including condoms and diaphragms, are always available but aren’t as effective as the other options.

#### APPOINTMENTS



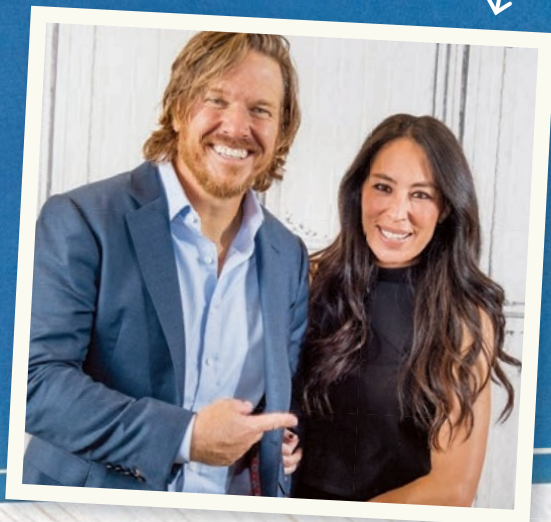
### See a Local OB-GYN Specialist

Parrish Medical Group specialists are highly qualified, board-certified obstetrics and gynecology providers who will partner with you in your care. Call **321-268-6868** in Titusville and **321-633-8663** in Port St. John, or visit [parrishmedicalgroup.com](http://parrishmedicalgroup.com).



# 7 THINGS

## You (Probably) Don't Know About Joanna Gaines



Joanna and Chip Gaines are the parents of five children.

- 1 While she calls Waco, Texas, home today, Gaines is from Wichita, Kansas.
- 2 Growing up, Gaines always wanted to be on TV, but as a broadcast journalist, not a home makeover star.
- 3 Her first job was at an all-you-can-eat buffet.
- 4 Gaines and her husband, Chip, both attended Baylor University but didn't meet until after they graduated.
- 5 She worked in her father's tire shop after college and met Chip when he brought his truck in for servicing.
- 6 Gaines has no formal design training. She's honed her style over years of flipping houses with Chip.
- 7 HGTV approached the couple about filming the pilot of *Fixer Upper* after a producer saw Gaines' design blog.

Sources: Texas Monthly, PopSugar, Insider

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## Complications Can Arise

Crew was born a bit ahead of schedule.

"He made an unexpected (and speedy) entrance into the world two and a half weeks early—which is fitting given he was a sweet surprise from day one," Gaines posted on Instagram on June 23.

Early delivery can be a complication for older moms. Fortunately, Crew arrived in good health and Gaines' pregnancy was complication-free as far as we know. But some women who have babies in their 40s aren't as fortunate.

Older moms are at higher risk for low birth weight, gestational diabetes, preeclampsia, birth defects, miscarriage and stillbirth, as well as getting pregnant with multiples.

"They also have an increased risk of needing a cesarean section at the time of delivery," Clark says.

Additionally, older moms need to consider any preexisting medical conditions, Clark adds.

"As we age, we can develop medical conditions, whether it be high blood

pressure, diabetes, cardiovascular disease or obesity."

Of course, being older won't automatically lead to complications, and younger women can have complicated pregnancies as well. A German study of nearly 9,000 women found those over 40 had similar outcomes to younger women as long as they regularly attended prenatal checkups, received proper medical treatment for underlying conditions, adhered to healthy lifestyle recommendations and delivered at a hospital that specializes in high-risk pregnancies.

## Benefits to Being an Older Mom

Pregnancy at 40 and beyond may sound daunting, but there are plenty of positives to having a child when you're more mature.

Research has shown that, in general, women who begin having babies later in life earn more over their lifetime than women who enter motherhood earlier. There are medical advantages

to the older mother as well. A study of women in the U.S. and Denmark suggested that those who have children later in life are more likely to live longer and less likely to develop cognitive decline as compared with women who have children at younger ages.

The biggest benefit might simply be having a different perspective.

Referring to her fifth pregnancy, Gaines told *People*, "I feel like I can really take this one in and relish these moments."

She wrote in her Magnolia blog, "Since it's been over eight years since I was pregnant with Emmie Kay, I joke with my friends that it feels like it's my first time being pregnant. The best thing about all of this is the excitement that my kids have shown for their new baby brother ... They love my growing belly (and boy is it growing), and they cannot wait to meet him. I truly believe this baby is a gift from God for our family in this season."

We can't wait to see what's in store for Gaines' next season—and beyond. ■



THE BIG STORY

# The Rules

**DON'T APPLY**



PHOTO BY GETTY IMAGES



*When it comes to health,  
we can't control everything  
that happens to us. But being  
aware of the risks may help us  
live longer and better*

BY **STEPHANIE R. CONNER**



Lung cancer is the top cancer killer, and non-smokers aren't immune.



## *‘But I Never SMOKED’*



*Lung cancer may be more common in smokers, but yes, nonsmokers can get it, too*

Smoking causes about 90 percent of lung cancers. But the American Cancer Society reports that as many as 20 percent of Americans who die from lung cancer have never used tobacco.

“To get lung cancer, all you really need is lungs,” says David Tom Cooke, MD, a volunteer spokesman for the American Lung Association and co-founder of #LCSM (Lung Cancer Social Media).

Because only a small number of people qualify for lung cancer screening, it helps to understand the warning signs and know when it's time to call your doctor.

### **SCREENING AND RISK**

There is a test that screens for lung cancer—a low-dose CT scan. But it's not standard for everyone of a certain age, like mammograms or colonoscopies.

“When you're screening people who are asymptomatic, there are potential benefits and harms,” says Ella Kazerooni, MD, chair of the American College



of Radiology Lung Cancer Screening Committee and ACR Thoracic Imaging Panel.

Lung cancer screening is recommended for those considered at high risk for the disease—those who are 55 to 80 years old, still smoke or have quit within the last 15 years, and have a 30-pack-year history of smoking (one pack a day for 30 years, or two packs a day for 15 years, and so on). But Kazerooni notes there is ongoing discussion in the medical community and research exploring the potential benefits of screening based on other risk factors.

After all, while smoking is a major contributor to lung cancer, it's not the only one. Other factors that can put you at risk for the disease include:

- **Radon gas.** This naturally occurring gas is harmless in small amounts, but when it becomes concentrated, it can pose a risk. You can hire a professional to test for radon in your home, or you can purchase an inexpensive kit to do it yourself. According to the U.S. Department of Health and Human Services, 1 in 15 homes has a high radon level. If you find you have high radon levels in your home, you can install a vent system or fan to pull the gas out.

- **Secondhand smoke.** If you're frequently around others who smoke, you may be putting yourself at risk. In fact, nonsmokers who are regularly exposed to secondhand smoke have a 20 to 30 percent greater chance of developing lung cancer. In those who have never smoked but breathed secondhand smoke as a child, lung cancer is more common as well.

- **Exposure to cancer-causing materials.** Asbestos, which is a concern for those who work in certain industries like shipbuilding and insulation, and diesel exhaust, which we can inhale at work or while traveling, are agents that can cause lung cancer. To help lower your risk, wear a protective respirator to filter the air you breathe. In addition, try to reduce your exposure by limiting the time you spend near idling machines.

- **Air pollution.** In the U.S., the risk of lung cancer as a result of air pollution is lower than in many other countries, but people should still beware of indoor and outdoor air pollution. To limit your exposure, watch for the air quality index in your area and avoid outdoor activity when pollution is at high levels. Take your walks or runs along lower-trafficked routes, and keep your windows closed during rush hour. An air purifier inside your home can help, too.

- **Genetics.** A family history of lung cancer may increase your risk, regardless of whether you ever smoked.

## WARNING SIGNS TO WATCH FOR

Be sure to talk to your doctor about any of your risk factors and concerns. It's also important to know the warning signs. Without a standardized screening, your ability to identify changes in your body and see a healthcare provider is essential to identifying lung cancer early. Those symptoms include: a cough that doesn't go away and worsens over time, hoarseness, constant chest pain, shortness of breath, regular lung infections and coughing up blood.

If you experience these symptoms, talk to your doctor. He or she will recommend tests to look for any signs of

lung cancer or other conditions that might be causing your symptoms. Note that the early symptoms of lung cancer are subtle—if they are present at all—and can indicate something else.

Cooke says it's important to change the way we think about lung cancer to help people get the care they need, whether they smoke or not.

"Lung cancer is considered a lifestyle disease versus a disease of bad luck. But most cancers are bad luck, and most smokers don't get lung cancer," he says.

Of course, smokers don't deserve lung cancer, either. "But there's stigma with lung cancer," Cooke says, "and we need to stop that." ■

CALL



## Breathe Easier

The American Lung Association's Lung Cancer HelpLine is available to you seven days a week. Talk to a registered nurse or respiratory therapist to get answers to your questions. Call **1-844-ALA-LUNG (252-5864)**.

## Who Is a Candidate for Lung Cancer Screening?

Researchers understand that lung cancer screenings come with benefits and risks. Making recommendations about who should be screened and when is about maximizing benefits and minimizing potential harms. Researchers have found that those who should be screened for lung cancer meet the following criteria:

- Are age 55 to 80
- Have a 30-pack-year history of smoking (meaning one pack a day for 30 years, or two packs a day for 15 years, and so on)
- Are current smokers or have quit within the last 15 years

"The National Lung Trial studied that type of smoker," says Ella Kazerooni, MD, chair of the American College of Radiology Lung Cancer Screening Committee, "and showed that if you screen once a year for three years, you can reduce the risk of dying from lung cancer by 20 percent."

Younger people with dementia may feel caught in a cycle of forgetfulness and confusion.



# *When Dementia* **STRIKES YOUNG**



*Knowing the signs can help you prepare for the future*

Forgetting our keys or struggling to find the right word ... who can't relate? Some memory loss is normal as we age. But more serious cognitive challenges can be a sign of dementia. And it can begin younger than you might think—even in a person's 40s or 50s.

Of the 5.7 million Americans living with Alzheimer's disease today, about 200,000 of them are classified as younger-onset, meaning they started developing symptoms before age 65. Because developing a cognitive disorder like Alzheimer's is rare in our younger years, it's easy for the symptoms to be mistaken for other conditions, including stress, menopause or thyroid problems.

"Diagnosis becomes difficult," says Monica Moreno, senior director of

care and support for the Alzheimer's Association. "For a clinician to see someone in their 50s having issues with cognition, Alzheimer's disease is not the first place they go."

But getting a diagnosis is important to ensure a person has access to treatments for their symptoms as well as support resources. Knowing what signs to look for can help you understand when to see a doctor and get help.

### WHAT TO LOOK FOR

A lot of people believe that the symptoms of Alzheimer's and other types of dementia are a normal part of aging.

"That is not true," Moreno says, because it's not just forgetting something here or there. "We're talking about cognitive impairments that start to affect daily life."

She shares examples of an award-winning chef who can't recall how to make a simple omelet or individuals who can't remember how to get to the job they've held for years. Sometimes a person might not recall where they are or what year it is.

"It's these types of events that cause people to be concerned," Moreno adds. If you notice these symptoms, it's time to see a doctor.

It can take time to diagnose dementia, especially in a younger adult. The doctor may ask questions about medical history and do a physical exam. In addition, he or she may order lab work as well as cognitive tests and a brain MRI or CT scan. Part of the doctor's goal is to rule out other possible problems before confirming a diagnosis of Alzheimer's disease or another form of dementia.

### LIFE AFTER DIAGNOSIS

A diagnosis is essential to benefit from treatments and resources. But it's important to recognize that there is no cure.

"There is no way to prevent, cure or slow its progression," Moreno notes. "There are treatments that address the symptoms but not the underlying disease."

For younger adults, there are financial benefits to a timely and accurate diagnosis. Individuals with younger-onset disease can start to struggle at work and earn poor reviews—they might even get fired.

"While they were employed, they might have had access to benefits like long-term disability," Moreno says. "But once they've been relieved, they no longer have access to those benefits. If they are the primary breadwinner for their family, that can have a significant impact. There are a lot of implications in not getting a diagnosis."

With the disease identified, a family can also start to make legal or financial plans, such as who will make decisions when the person with Alzheimer's no longer can. And, as Moreno points out, understanding what they're dealing

with allows a family to have difficult but vital conversations early on and begin to know what the loved one wants and expects in the future.

Alzheimer's disease looks different in every individual and progresses differently, too. But once you have a diagnosis, you can take steps to provide your loved one comfort and quality of life. ■

CALL



### Get Support

Parrish knows that elderly people and their families face new and intimidating challenges as they confront geriatric health issues. Call **321-268-6800** today to learn more about programs and resources at Senior Solutions.

## 5 Ways to Reduce Your Risk

Although there is no cure for dementia, research shows we might be able to reduce our risk of cognitive decline.

"There are things you can do early in life that may contribute to brain health down the road, such as eating a healthy diet, exercising and not smoking," says geriatrician Pamela Tronetti, DO, AGSF, medical director of Senior Services at Parrish Medical Center.

Consider the following tips from the Alzheimer's Association:

**1. Hit the gym.** Regular cardiovascular exercise may reduce your risk for cognitive decline. Not a regular exerciser? Start with simple brisk walking.

**2. Don't light up.** When you quit smoking, you help your lungs, your heart and your brain.

**3. Eat right.** Research continues on diet, but a healthy diet lower in fat and higher in veggies and fruit is a good place to start.

**4. Get your zzz's.** Sleep is important for good overall health. Strive for about eight hours a night.

**5. Challenge your brain.** Whether you're doing jigsaw puzzles, playing strategic games or taking a class, engage your brain.



Don't sideline your fitness because of an injury.



# *Back in the* **GAME**



*Don't let a sports injury keep you on the sidelines*

You know the feeling: Something moved in a way it shouldn't have—a twist, a wrench or a pop. Maybe it was poor form on the elliptical, landing wrong during pickup basketball or an awkward twist while getting dressed.

Injuries can be devastating to avid exercisers, weekend warriors and fitness novices alike, because when we take a break from our workout regimen, we risk losing our strength and endurance—and perhaps, just as important, our momentum toward better health.

If you've suffered a sports (or not-so-sporty) injury, it's important to first identify the injury and treat

it properly. Then, after you heal—or sometimes, as you heal—you can rehabilitate the problem area while finding other ways to maintain your fitness.

“Everyone will have some sort of deconditioning,” says Ryan Balmes, PT, DPT, a spokesman for the American Physical Therapy Association (APTA), but just how much will depend on the severity of the injury and how fit you were beforehand. Fortunately, there’s a way to regain your strength. “That’s the art of rehabilitation,” he says.

Here are a few ideas for staying on track after three common injuries.

## ANKLE SPRAINS

APTA notes that 45 percent of U.S. sports injuries are ankle injuries. If your activity involves running, jumping or changing directions quickly, you’re at higher risk for a sprained ankle, which happens when the foot twists beyond its normal range of motion, causing ligaments (tissues that hold our joints together) to stretch or even tear.

**Help it heal:** Immediately after a sprain, rest and ice are helpful. You might consider wrapping the ankle too, as compression reduces swelling. And you can start to walk on it as soon as you feel you can support your weight. Go slow and talk to a doctor or physical therapist about exercises you can do to work your way back into shape.

**Stay in shape:** Unable to bear weight to run, walk or jump? A great cardio exercise, Balmes says, is swimming. You can also consider trying an arm bike, which can help you maintain your cardiovascular endurance. Your gym may have one to try.

## LOW BACK STRAINS

Back pain is a very common problem. Poor lifting technique (whether you’re lifting boxes at home or barbells at the

gym), weak core muscles and awkward movements can all come into play.

**Help it heal:** Ice, heat and rest can be helpful in the early days of a back strain. As you start to feel better, ask your doctor or physical therapist about whether massage might be beneficial and what exercises can help.

**Stay in shape:** As your back heals, you might not be able to handle heavy loads to squat or dead lift at the gym, but after the first couple of days, you’ll probably be able to at least walk.

## TENNIS ELBOW (LATERAL EPICONDYLITIS)

It’s called tennis elbow, but you certainly don’t need to wield a racket to experience this painful condition. The muscles you use to grip or twist objects attach to parts of the elbow. So, anyone who uses their hands a lot (for any purpose, really) can aggravate the elbow.

**Help it heal:** As with a lot of injuries, rest, ice and wrapping the elbow

can be helpful in the early days afterward. Then, you can start to move your wrist and elbow (without using your muscles) before moving on to more active exercises.

**Stay in shape:** Fortunately, there are lots of activities you can engage in that are easy on your elbows. To maintain basic fitness, focus on walking or riding a stationary bike. ■

WEBSITE



## Advice for Better Exercise

Want to learn about exercising during cancer treatment or how to avoid chronic pain? Check out the American Physical Therapy Association’s advice at [moveforwardpt.com/tips](https://moveforwardpt.com/tips).

## 3 Tips for Working Through an Injury

Getting back to the activities you love after an injury will take time.

“Injuries will heal,” says Ryan Balmes, PT, DPT, a spokesman for the American Physical Therapy Association. “But what you do now will matter for the long term.” Here are three tips for maximizing your healing time.

**1. Get a proper diagnosis.** Knowing how to treat an injury begins with knowing what the problem is and what structure—bone, tendon, ligament or muscle—is injured. Your primary care doctor is a good place to start. Depending on the nature of the injury, he or she might refer you to a sports medicine or orthopedic specialist.

**2. Speak up.** Tell your physical therapist or doctor what concerns you have and what level of activity you desire to return to. That will help him or her craft a plan that can get you there.

**3. Don’t ditch your team.** If you play team sports, camaraderie is a big part of the experience. Just because you can’t play, Balmes says, shouldn’t mean you can’t participate. “Find ways to still be with those people you like being with,” he says. “Be out there to support your teammates. That will help.”



# Is Sitting Smoking?

*There's no easy answer—but there's also no doubt being sedentary is lethal* **BY ROSE SHILLING**

**Y**ou drive to work or ride the bus. Your days often include hours in your office chair, seated meetings and lunch at your desk.

Exhausted after work, you sink into your couch to check your phone and then eat dinner at the table (or maybe back on the couch). You work out when you can, but, like three-quarters of American adults, you know you don't get enough physical activity.

If this describes your day, you're not alone. But a growing body of research in recent years suggests that all of this sitting is killing us.

That's why you hear recommendations not only to exercise more, but also to stand at your desk, take the stairs and choose the farthest parking spot from the store.

Sedentary science has a catchphrase: Sitting is the new smoking. The idea comes from research suggesting

that inactivity, like smoking, is responsible for millions of deaths worldwide.

Equating sitting with smoking—the country's No. 1 cause of preventable death—helps emphasize how serious of a health risk a sedentary lifestyle can be. After all, most Americans have heard the pervasive messages about how dangerous smoking is.

But is the comparison appropriate?

# ing Really the New



## Smoking vs. Sitting

For the overall population, calling smoking and being sedentary similar threats is fair based on research, says Kathryn Schmitz, PhD, MPH, president of the American College of Sports Medicine.

Researchers can estimate how many people develop diabetes, heart disease, cancer and other health problems from moving too little, and the number of related deaths stacks up frighteningly high compared with smoking fatalities, she says.

About 6 million people die annually worldwide from tobacco use. Physical inactivity causes more than 5 million deaths globally, considered a conservative estimate by researchers whose findings appeared in *The Lancet* in 2012.

Smoking, a habit of about 14 percent of American adults, is so damaging that it kills a big portion of people who light up, Schmitz explains. Being sedentary rivals smoking for number of deaths because the pool of people who don't meet minimum activity goals is huge: 75 percent in the U.S.



## Consider the Individual

In other words, smoking and sitting don't have equal risks for an individual, despite their comparable effects on society, Schmitz says.

As a researcher who advocates exercise for cancer recovery, people expect her to say physical activity is the most important thing they can do for their health. But that is not true for smokers, she says.

A smoker's risk for cardiovascular disease, cancer and many other problems is at "a way ridiculous higher rate" than someone who sits too much. "If you have the choice between quitting smoking and sitting less, I'm going to say quit smoking," she says.

But for sedentary non-smokers, she ranks standing up and being active as their most important tool for better health.



## Fixing Our Sitting Problem

With smoking, use started to decline after people learned how damaging it was in the '60s, points out John Maa, MD, a spokesman for the American Heart Association who works on tobacco policy.

In the same way, he hopes research on sedentary lifestyles will spur people to change patterns of inactivity that have hurt their health, driving down related deaths.

One priority to encourage activity should be providing accessible places to get exercise, such as bike lanes and paths for commuters, and safe parks and school walking routes for kids, Maa says.

“These are health patterns that you want to ingrain [in children], and those become healthy behaviors all through their adult life.”

In the health field, patient-doctor discussions about physical activity are becoming more common, says Maa, a general surgeon who studies how tobacco affects surgical results.

Doctors often have their best chance to sway a person to quit smoking after a diagnosis of a major health condition, he says. Those “teachable moments” also should be used to inspire people to get active.

## What Too Much Sitting Does to Your Body

When you sit or recline, your muscles go quiet and start to weaken, says Kathryn Schmitz, PhD, MPH, president of the American College of Sports Medicine. Over time, your muscle mass declines. “Muscle is a use-it-or-lose-it proposition,” she says. Sitting too much sets off a chain reaction:

- ▶ With less active muscle, you need fewer calories as fuel to move.
- ▶ If you haven't cut back food, you gain weight.
- ▶ You might develop deep belly fat around your organs, which increases health risks.
- ▶ Your body has excess glucose (sugar) because you're overeating and produces more insulin in response.
- ▶ Insulin helps get glucose into your cells for fuel, but the cells are full.
- ▶ Your glucose level rises, along with risk for type 2 diabetes.

And for your heart, smoking and obesity that is worsened by sitting could put you on the same path to problems by hardening your arteries, says John Maa, MD, spokesman for the American Heart Association. Cigarette chemicals damage blood vessels, and fat can build up in overweight people's arteries. Both put you at risk of heart attack-causing clots.





## Breaking Out of Bad Habits

To upend your tendency to sit too long, Schmitz offers advice that she gives people who use physical activity to help with cancer: Be as active as you can and know that “something is better than nothing.”

You don’t have to be fit, healthy or athletic to get moving. Schmitz tries to “meet people where they are” and provide individualized activity plans that they can handle. The same idea can work for anyone who faces roadblocks to getting active because of obesity, depression, poverty, overwhelming schedules, injuries or pain.

Schmitz understands that life gets in the way of exercise, as she has learned from personal experience. She stopped working out when her fiancé went through head and neck cancer. She moved and changed jobs,

and her parents died in recent years, all dragging down her activity level. She didn’t feel well and was embarrassed by her weight gain, she says.

When she restarted, she couldn’t exercise for a half-hour, but she gradually built back her cycling and weightlifting routine.

“I have never, ever seen a situation where somebody didn’t feel better after a workout than they did before. I am living that now,” she says.

She doesn’t want you to feel guilty that you have to sit for an hour in your car or feel doomed by stats that say you lose time from your life when you sit for hours. “People have lives, and lives are hard.”

And don’t worry about hiring a trainer, joining a gym, buying special workout clothes or even sneakers, she says.

## Exercise or Activity: What’s the Difference?

What kind of movement are health experts talking about when they say you need to move more to add time to your life?

It doesn’t have to mean trips to the gym, a workout video or jogging around the park. Exercise as we think of it is just one kind of physical activity.

People who do moderate activity—brisk walking, lawn mowing, cycling or dancing—for an hour or more a day don’t seem to face an increased risk of death from sitting, even if they’re seated or lounging for eight hours or more a day, according to one study.

“If an hour a day of activity is unrealistic for you, start small with little bursts of activity, even if you’re not overweight,” says Dixitkumar Modi, MD, a primary care physician with Parrish Medical Group. “Build toward experts’ recommended weekly minimum of 2½ hours of moderate activity and two days of muscle strengthening.”

Try anything you like to get started, Dr. Modi says. That might mean:

- ▶ Garden after dinner instead of watching TV.
- ▶ Take a break during reading to walk up your stairs or do pushups against the wall.
- ▶ Carry work documents outside to read to increase your steps.

APP



### Need a Reminder to Stand Up?

There are several apps that will give you alerts during the day that it’s time to take a break and stand up. One is **Stand Up!**, available in the Apple App Store. The app lets you schedule when it will remind you to stand up. It also has a “snooze” feature and a random mode to keep you on your toes.



## Changing Your Health

Try some of these ideas to inject more movement into your day:

- ▶ Don't look for a seat at a party. Stay standing instead.
- ▶ Take a brisk walk after meals to lower your blood sugar levels.
- ▶ Have a competition with co-workers to walk the most steps.
- ▶ Try a fitness tracker or step counter if you haven't yet.
- ▶ Maximize movement: Walk to talk to a co-worker in person or use a restroom on another floor.

▶ Set movement habits: Stretch after sending an email or text or pace when talking on the phone.

▶ Add motion to routine activities: calf raises while brushing teeth, leg lifts while cooking, arm and neck stretches at a red light.

For beginners and people with physical limits, Schmitz suggests these basic activities:

▶ Chair stands: This is a great starting point for people who don't feel like they can exercise. Without using your arms, see how many times you can stand from your chair. When you can do 20, add some walking.

▶ Walk the commercials: Stride around the house or march in place during TV show breaks (pause a movie or streaming series without commercials every 15 minutes).

▶ Table laps: Walk around your table as many times as you can. Work up to laps around the house, and then walk to the corner of your street and eventually around the block.

"Exercise is a medicine," Schmitz says. "It has effects that are just as powerful as any medicine." ■




# The **REAL** **DEAL** with **CARDIO**



PHOTOS BY GETTY IMAGES





## *Conventional wisdom says cardio is the way to lose weight. But can you really run your way thin?*

BY **JEANNIE NUSS**



For decades, exercise trends have focused on cardio as a key to weight loss—from Jazzercise and aerobics to running and SoulCycle.

Now, though, many popular workouts, such as CrossFit and P90X, seem to drill down on strength training as the way to move the scale.

So, if you're looking to lose weight, what's your best option?

Ideally a combination of cardio and strength training, experts say.

"Doing some sort of cardiovascular exercise really is effective at burning calories," says Angela Fitch, MD, secretary and treasurer for the Obesity Medicine Association. "Strength training, on the other hand, helps you build and maintain muscle mass," which, in turn, helps you burn more calories at rest.

Current federal guidelines recommend at least 150 minutes of moderate to vigorous physical activity and two strength-training workouts per week.

We turned to Fitch and other experts to talk about how cardio and strength training work—and how to best spend your time at the gym if weight loss is your goal.







## WEIGHT LOSS 101

It seems simple, really: To lose weight, you need to burn more calories than you take in.

And if you're looking to lose a pound a week, which experts say is a healthy goal, you'll want to cut 3,500 calories a week, or about 500 calories a day.

You can do this by following a healthy, balanced diet and by exercising—and, ideally, by doing both (more on that later).

But not all exercise is created equal.

Cardio tends to burn more calories during a workout. So, if you run for 30 minutes, you'll burn more calories than you would, say, lifting weights for 30 minutes. (Harvard Health Publishing says it's 335 calories for running versus 112 calories for weightlifting by a 155-pound person.)

**30  
MINUTES**

A 30-minute run burns more calories than lifting weights for 30 minutes.

**500  
CALORIES**

Cutting 500 calories out of your daily intake will help you lose a pound per week.

That's because people are able to do cardio for longer periods without a break compared with strength or resistance training, says Josephine Boyington, PhD, program director in the Division of Cardiovascular Sciences at the National Heart, Lung, and Blood Institute.

"When you do resistance exercises [such as strength training], generally what happens is the muscle is tasked to the extent that it needs to rest," Boyington says.

But strength training helps build more lean muscle mass, which burns more calories even when you're not working out, says American Board of Obesity Medicine Medical Director Rekha Kumar, MD.

Strength training is also increasingly important as we age, Kumar adds, because we tend to lose muscle mass and our metabolism slows as we get older.

## GIVE HIIT A CHANCE

Traditional cardio and strength training aren't the only forms of exercise.

Recent studies show that HIIT—short for high-intensity interval training—is another effective way to torch calories.

That's because HIIT, which often includes cardio and sometimes features strength training, incorporates short bursts (or intervals) of very intense exercises with short periods of rest, rather than plugging along at a more comfortable pace for a longer stretch of time.

So, if you only have 20 or 30 minutes to work out, try mixing it up with some HIIT-style cardio and strength training.

For example, if you're at the gym, you can hop on the treadmill, set it on an incline and alternate between sprints and walking. And if you're outside, you can sprint to a landmark like a nearby tree or telephone pole, then walk to the next landmark.



With intervals, “in addition to increasing your heart rate, you’re stressing your muscles in a different way where you’re also building muscle,” Kumar says.

Spend the rest of your workout doing strength-training exercises that target big muscle groups, like holding a plank pose to work your core or doing squats to work your quads.

### YOU CAN'T OUTFIT (OR OUTFIT) A BAD DIET

Although it can be tempting to think that the gym is a silver bullet for weight loss, exercise alone isn't enough to shed pounds.

“By doing only physical activity, you don’t lose very much weight,” Fitch says. “You’ve got to combine exercise with some dietary changes in order to produce results.”

So, start keeping tabs on what—and how much—you’re eating with a calorie tracker. Then, once you see what you’re eating, you can cut back on calories and start making more healthful food choices (e.g., drinking sparkling water instead of soda or eating spaghetti squash instead of pasta).

Calorie trackers can also include a log of your exercise and help keep you from overestimating the calories you burn when you’re working out. It might show you, for example, that a half-hour workout is quickly negated by a single-serving bag of potato chips, Fitch says. ■

## BENEFITS BEYOND THE SCALE

If you add cardio and strength training to your exercise regimen and still don’t see a change on the scale, fear not.

You may be losing fat and adding more lean muscle mass, which doesn’t necessarily translate to pounds lost but does mean you’re getting fitter. So, try looking at other results, from how your clothes fit to your body fat percentage or waist size.

Plus, keep in mind that losing weight isn’t the only reason to work out.

“The bigger benefit of exercise is that it’s good for a whole lot of other things,” from reducing your risk for cardiovascular disease and high blood pressure to lowering stress levels and elevating your mood, says Scott Kahan, MD, chair of the Clinical Committee of the Obesity Society.

Just make sure you choose an exercise that you enjoy, he says.

So, before trekking to the treadmill with a grimace, find an activity that works for you, whether that’s power lifting, hiking or swimming.

“If you don’t like going to the gym, but you like playing basketball,” Dr. Kahan says, “go outside and play some basketball.”

CALL



### Get Moving

Take part in Next Steps™, a medically integrated eight-week fitness program at Parrish Health & Fitness Center, and team up with a fitness specialist to develop your plan for success. Call **321-567-2201** to learn more or schedule a tour.



# 10 WAYS TO BE HEALTHY IN AN UNPREDICTABLE LIFE



**1** If you start having respiratory symptoms—persistent cough, chest pain, lung infections—tell your doctor.

Don't accept memory loss or confusion as a normal sign of aging. Get it checked out.

**2**

**3** Remember that delaying childbirth comes with risks but also the benefits of being a more mature mom.

Get your house tested for radon gas to help prevent lung cancer.



**4**

**5** When you get hurt, don't be afraid to take it easy. Your body needs rest to heal.

Injured and can't do weight-bearing exercises? Try swimming to stay in shape.

**6**



**7** Know that you don't need to belong to a gym or be in shape to exercise.

Stand up. Too much sitting has proved fatal.



**9** Start identifying ways to move in your daily life, like taking a walk after every meal.

**10** Use a food tracker to see what you're eating and how much. Once you know, you can make healthier choices.

➔ **WANT MORE HEALTHY IDEAS?** Check out our summer issue, all about lifelong improvement.



# THIS JUST IN

GOOD-FOR-YOU NEWS, CUES AND REVIEWS



## **ALCOHOL GUIDELINES CALLED INTO QUESTION**

**Men, you know those guidelines that say you can drink more than women, safely? New research disputes that.**

Drinking more than 100 grams of alcohol per week (about one drink per day) is the threshold for health risks, no matter your gender, according to a study published in the journal *The Lancet*. That differs from previous guidelines with higher consumption limits for men than women.

The large-scale study conducted in Europe showed that those who drank more than 100 grams per week had a higher risk of death from certain heart-related issues, such as heart failure and stroke.

# THIS JUST IN

GOOD-FOR-YOU NEWS, CUES AND REVIEWS

## FDA APPROVES MIGRAINE-PREVENTION MEDICINE

The Food and Drug Administration has approved the first medicine to prevent migraines.

Aimovig is a monthly injection intended for use by people who have multiple migraines a month. It works by blocking a protein fragment that prompts migraines.

Before the new medication, people trying to prevent migraines had to rely on medicines that were developed for other purposes, like treating high blood pressure. Those medicines often were not effective for migraines and had troublesome side effects. During clinical trials for Aimovig, users did not report any serious side effects.

### SOCIAL MEDIA



### Get Migraines? Join the Club

The Move Against Migraine Facebook group, run by the American Migraine Foundation, provides a place for people with headaches to come together. Join at [facebook.com/groups/moveagainstmigraine](https://facebook.com/groups/moveagainstmigraine).

## Peanut Butter vs. Almond Butter

### • Which butter is better for your health?

#### Answer: Almond butter, by a sliver.

When you're choosing a nut butter to slather on your apple slice, almond butter is the winner, with better stats for fats.

Almond butter has slightly less saturated fat—the kind that raises cholesterol levels and the risk of heart disease—than peanut butter. It is also high in heart-healthy monounsaturated fats. As a bonus, almond butter is lower in sodium and higher in calcium than peanut butter.

Keep in mind that peanut butter is still a healthy choice, but it's easy to overeat; people don't always realize a serving size is typically a tablespoon or two. Eating peanut butter in moderation has been linked to increased heart health. Some experts think peanut butter comes out ahead when weighing both health benefits and affordability, since almond butter tends to be much more expensive.

Just keep it simple—choose peanut butters with only a few ingredients, such as peanuts and salt, and skip those with added sugar or oil.





## ► TRUE OR FALSE

Nearly 9 in 10 of all cancers in the United States are diagnosed in people ages 50 and older.

**TRUE.** Cancer typically is diagnosed in older people. But factors other than age also come into play:

- Some behaviors increase the risk of cancer—for example, smokers are 25 times more likely to develop lung cancer.
- Unhealthy eating and lack of physical activity can affect risk.
- Family history and genetics matter, too.



## GESTATIONAL DIABETES LINKED TO KIDNEY RISK

Women who develop diabetes during pregnancy may be at increased risk of early-stage kidney damage, according to a study in the journal *Diabetes Care*.

Those with gestational diabetes who later developed diabetes were nine times more likely later in life to have a high rate of blood per minute passing through the kidneys. The high rate is often a predecessor of early kidney damage.

Researchers recommended that women who had gestational diabetes now consider regular checkups for early-stage kidney damage and treatment.

## STATS: ATRIAL FIBRILLATION



### 2.7–6.1M

people in the U.S. are thought to have atrial fibrillation, called AFib for short, which is a quivering or irregular heartbeat.

-----

### 9%

of people 65 and older have AFib.

-----

### 15–20%

of people who have strokes have AFib. That's because when the heartbeat is erratic, as with AFib, it increases the risk of blood pooling and clotting, which can lead to stroke.

-----

### >750K

hospitalizations occur each year because of AFib.

Sources: American Heart Association, Centers for Disease Control and Prevention

## Get to Know the New Colorectal Screening Guidelines

The American Cancer Society now recommends that colorectal cancer screening start at age 45, rather than the long-standing threshold of 50 years old.

The society made the move because its national cancer registries show a dramatic increase in colorectal cancers, mostly among people ages 40 to 49. The new guidelines mean an additional 22 million American adults would be routinely screened.

The new recommendations suggest that doctors give patients a choice among several screening options, ranging from a colonoscopy to a lab test of stool samples collected at home.



# THIS JUST IN

GOOD-FOR-YOU NEWS, CUES AND REVIEWS

## WHAT IT MEANS TO WALK BRISKLY

You've probably heard that the best way to start exercising is to walk. That's why federal exercise guidelines recommend 30 minutes of brisk walking a day.

But what is "brisk" walking, exactly? Researchers have defined it.

A study in the *British Journal of Sports Medicine* recommended keeping a pace of 100 steps per minute to walk briskly, which is about 2.7 mph. The guideline is intended for people younger than 60.

It's easy to determine whether your walking is up to snuff: Count the number of steps you take in 10 seconds and multiply by six, or simply count how many steps you take in a minute.

GO TO ...



### How Do You Do a Chest Press?

Want to know proper form for almost any kind of exercise? The degreed and certified fitness staff at Parrish Health & Fitness Center offer personal health and fitness assessments to help you reach your goals. To learn more, visit [parrishhealthandfitness.com](http://parrishhealthandfitness.com) or call 321-567-2201.

It's not just  
for kids.



## WORKOUTS THAT WORK: JUMPING ROPE

Jumping rope is not just for kids. If a 150-pound person jumps rope at a moderate pace for 15 minutes, she burns the same amount of calories as running for 15 minutes at a pace of 10 minutes per mile.

Even better, jumping rope brings other benefits, including:

- ▶ Increasing coordination, because of its cyclic nature and the rhythm required of the eyes, feet and hands
- ▶ Improving cognitive function by learning new motor patterns and increasing communication among brain, wrists and muscles

Jumping rope is a simple, inexpensive exercise that packs plenty of punch. That's worth jumping for joy!

PHOTOS AND ICON BY GETTY IMAGES





## WHAT ARE THE ODDS

of a person older  
than 65 falling in  
a given year?

-----



## 1 in 4

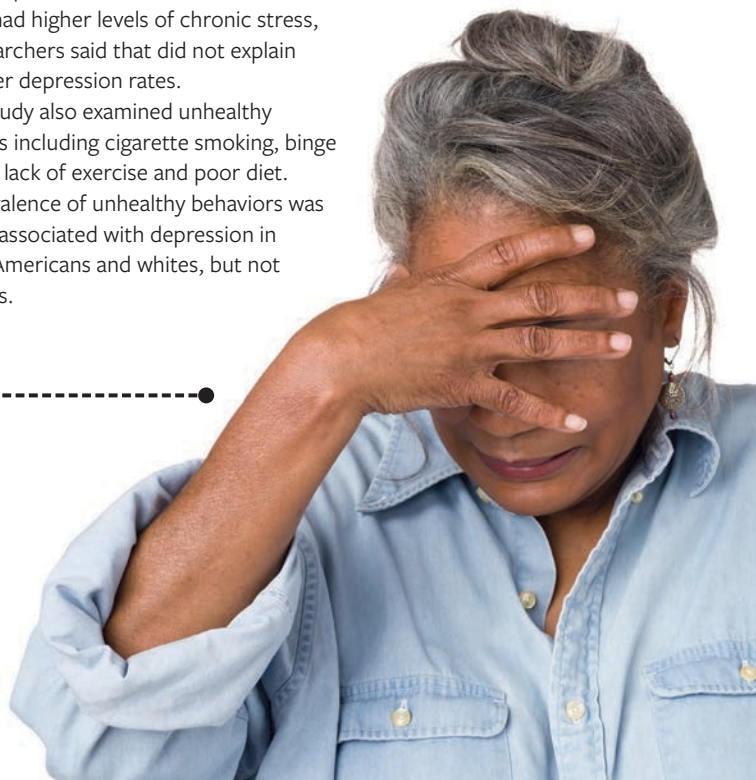
Falling is the No. 1  
cause of fatal injury  
among older adults  
and the most common  
reason for trauma-related  
hospital admissions among  
that population.

## African-Americans and Latinos at Higher Depression Risk

African-Americans and Latinos are much more likely to be seriously depressed, though the reasons why are not well understood, according to a study in the journal *Preventive Medicine*.

The seven-year study included 12,272 people ages 40 to 70 and aimed to capture the effects of chronic stress over the participants' lifetimes. African-Americans and Latinos had higher levels of chronic stress, but researchers said that did not explain the higher depression rates.

The study also examined unhealthy behaviors including cigarette smoking, binge drinking, lack of exercise and poor diet. The prevalence of unhealthy behaviors was strongly associated with depression in African-Americans and whites, but not in Latinos.



## JARGON WATCH

**IMPETIGO:** The word impetigo sounds imposing, but the medical condition is simple: It's a skin infection common in babies and children. Most often, children get red sores around the nose and mouth that begin as small blisters and then get crusty. Impetigo is caused by bacteria and is easily spread by person-to-person contact.

Oh, no—last night's dinner might ruin breakfast.



## THE TRUTH ABOUT **FOOD POISONING**

*From grocery stores to restaurants to your own kitchen, dangerous germs lurk everywhere. Here's what to know to reduce your risk*



It's a truly miserable feeling—the dreaded stomach cramps, nausea, vomiting and diarrhea that can strike after you eat contaminated food. The Centers for Disease Control and Prevention estimates that 48 million people in the U.S. get food poisoning each year. And it's not just an inconvenience. Annually, 128,000 people are hospitalized and 3,000 die from foodborne illnesses.

“While it's easy for food poisoning to happen, it's also relatively easy to prevent. When you're depending on someone else's cooking, it's a challenge, but at home you can follow safe food-handling practices,” says Carl R. Olden, MD, a family physician and member of the board of directors of the American Academy of Family Physicians.

Test your knowledge of how to keep yourself safe from this wretched experience.



### TRUE OR FALSE:

**Rinsing chicken is the best way to protect against germs or contaminants on the surface.**

→ **FALSE.** This long-debunked belief still pops up in cookbooks and on cooking shows. Rinsing chicken (or red meat or fish) just makes it likely you'll splash germs onto your kitchen sink and counter, where they can multiply. Instead of rinsing, simply cook the chicken to an internal temperature of 165 degrees F—that's high enough to kill the bacteria that might be living on it. You can blot chicken dry with paper towels if you prefer a drier surface for cooking, Olden says.

### TRUE OR FALSE:

**You should wash fruits and vegetables even if you're going to discard the peel or rind.**

→ **TRUE.** You don't have to use soap, but you should rinse produce thoroughly before you peel or slice it. Otherwise, germs could transfer to your hands or your knife blade and spread to the pieces you're going to eat.

### TRUE OR FALSE:

**If you suspect you have food poisoning, you need to look back at what you ate for several days to try to figure out what caused it.**

→ **TRUE.** Different bacteria, parasites, viruses and toxins can cause food poisoning. With some causes,

symptoms begin in just an hour. Others can take days. And sometimes, you'll never know what made you sick. Between the number of meals and snacks you eat over time and the fact that not everyone who eats a contaminated food gets ill, it's not always possible to identify the culprit.

### TRUE OR FALSE:

**Once you've defrosted meat, it's OK to freeze it again.**

→ **FALSE.** Refrigerate meat as soon as you get it home from the market. If you're not going to cook it within 48 hours, freeze it, and be sure to put it in bags or containers that will prevent it from dripping on other foods. "Once you thaw it, use it or discard it," Olden says. "You can't keep freezing and rethawing over and over. You'll increase the risk of contamination."

### TRUE OR FALSE:

**Hot foods should cool to room temperature before you put them in the fridge, so they don't warm up other nearby fridge foods to unsafe temperatures.**

→ **FALSE.** Cooling leftovers to room temperature increases the risk of bacterial growth. They can go into the fridge as soon as they are cool enough to handle. If you have lots of hot food that you want to refrigerate or freeze, like soup or stock, separate it into smaller containers so it chills more quickly. ■

## IS YOUR FOOD SAFE?

**It's important to handle your meat and produce safely at home. But it's also crucial to know when foods are recalled, since lots of items can make their way into home kitchens before an outbreak gets reported and traced to its source. While widespread outbreaks—like 2018's romaine lettuce recall—make the news, smaller product recalls may go unnoticed.**

The Food and Drug Administration ([fda.gov](http://fda.gov)) and the U.S. Department of Agriculture ([usda.gov](http://usda.gov)) both list recalled foods, so you can check if the foods you buy are affected. Not sure you'll remember to look regularly? Sign up for FDA email updates at [go.fda.gov/subscriptionmanagement](http://go.fda.gov/subscriptionmanagement).

If you think you became sick from eating a certain food, the Centers for Disease Control and Prevention recommends that you contact your local health department. The CDC uses the information from local health departments to track outbreaks.

APP



### An App with Answers

Do apples need to be refrigerated? How long do pickles last? With the **USDA FoodKeeper** app, you can find storage advice for everything from meat to pasta. It's available from Google Play and the App Store.

# HOW TO HELP SOMEONE WHO IS BLEEDING

*If you witnessed someone bleeding—a lot—would you know what to do? Learn the steps that could save a life*



When there's an accident or emergency, we look to first responders and emergency physicians for help. But if someone is hurt and bleeding heavily, those professionals might not be first on the scene.

"The true first responder is often you or somebody in your neighborhood—a friend, family member or co-worker," says Rade Vukmir, MD, emergency and critical care physician and spokesman for the American College of Emergency Physicians.

If you're comfortable with it, we'll show you how to help someone who's bleeding—and possibly save that person's life.

## 1 Ensure Scene Safety

"If it's a mass-casualty incident, law enforcement might be handling this part, making sure the area is safe for emergency personnel to enter," Vukmir says. But for something in a home, at work or on the roadways, it's on you. Start with logical precautions: If someone's been injured by machinery, ensure that it's turned off before proceeding. If you're helping after a car accident, be sure that you are safely off the street before assisting.

## 2 Locate What's Bleeding While Calling for Help

You've probably been told that in case of emergency, call 911 first. But when someone is bleeding, time is critical, so you can get started helping the person while you're calling, Vukmir says. (Or, even better, get started while someone else calls.) First, determine where the bleeding is coming from. Remove clothing from around the wound to get to the source, but if a foreign object is present, work around it versus removing it.

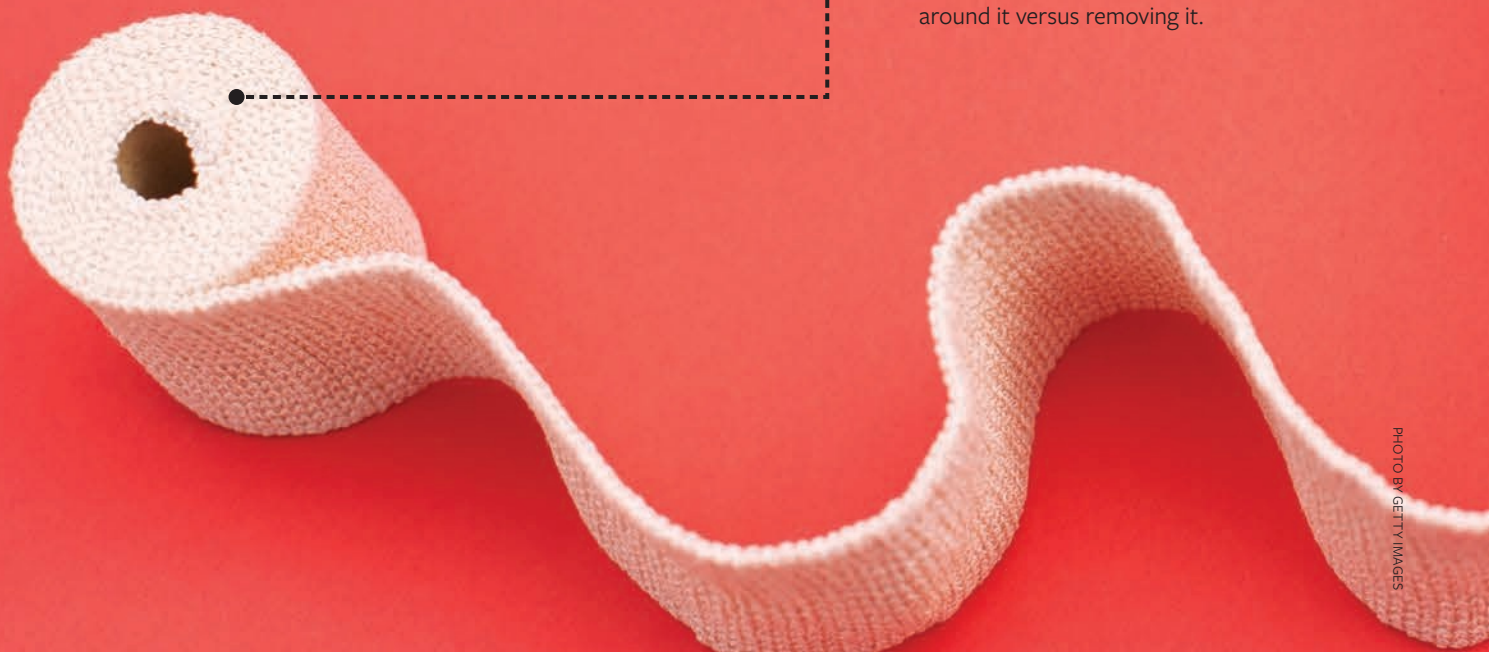


PHOTO BY GETTY IMAGES



### 3 Apply Pressure to the Site

Once you've found the source of the bleeding, use a sterile bandage or clean cloth and apply direct pressure to stop it, Vukmir says. Use as little material as possible; more material can make it difficult to maintain pressure.

"I want to visualize the wound once and try and get finger or hand pressure on it," he says. "If that stops the bleeding, I'll apply a small, adherent dressing, allowing more focused pressure on the wound itself."

While the dressing can be anything clean, if you're at work or at a

public event, there may be a first-aid kit nearby with what's called a hemostatic-impregnated bandage. "Our troops carry these," Vukmir says. "They are incredibly light and have a hemostatic product inside that will help to stop the bleeding."

Don't remove the dressing if blood seeps through; add a bit more and keep pressing firmly.

### 4 Make a Tourniquet if Needed

If more powerful pressure is needed to stop the flow, a tourniquet placed just above the wound can be an alternative. Whether you use one from a first-aid kit or make one with a belt, cord or shoelace, Vukmir says the key is to cinch it down tight and tie a knot. Then tie a second knot around a windlass—a sturdy object 4 to 8 inches long, like a stick or a carabiner—that you can use to twist the tourniquet tighter if needed.

### 5 Stay Focused

While people worry about not applying the dressing right or getting it too tight (or not tight enough), Vukmir recommends staying focused on your task. "Your job is just to put it on," he says. "Get pressure on it, stop the bleeding and hold the pressure until a professional comes who can relieve you." ■

CLASS



### Sign Up for Hands-On Training

Practice your skills so you're ready in a bleeding emergency. Visit [cms.bleedingcontrol.org/class/search](https://cms.bleedingcontrol.org/class/search) to find a Bleeding Control Basics class in your area.

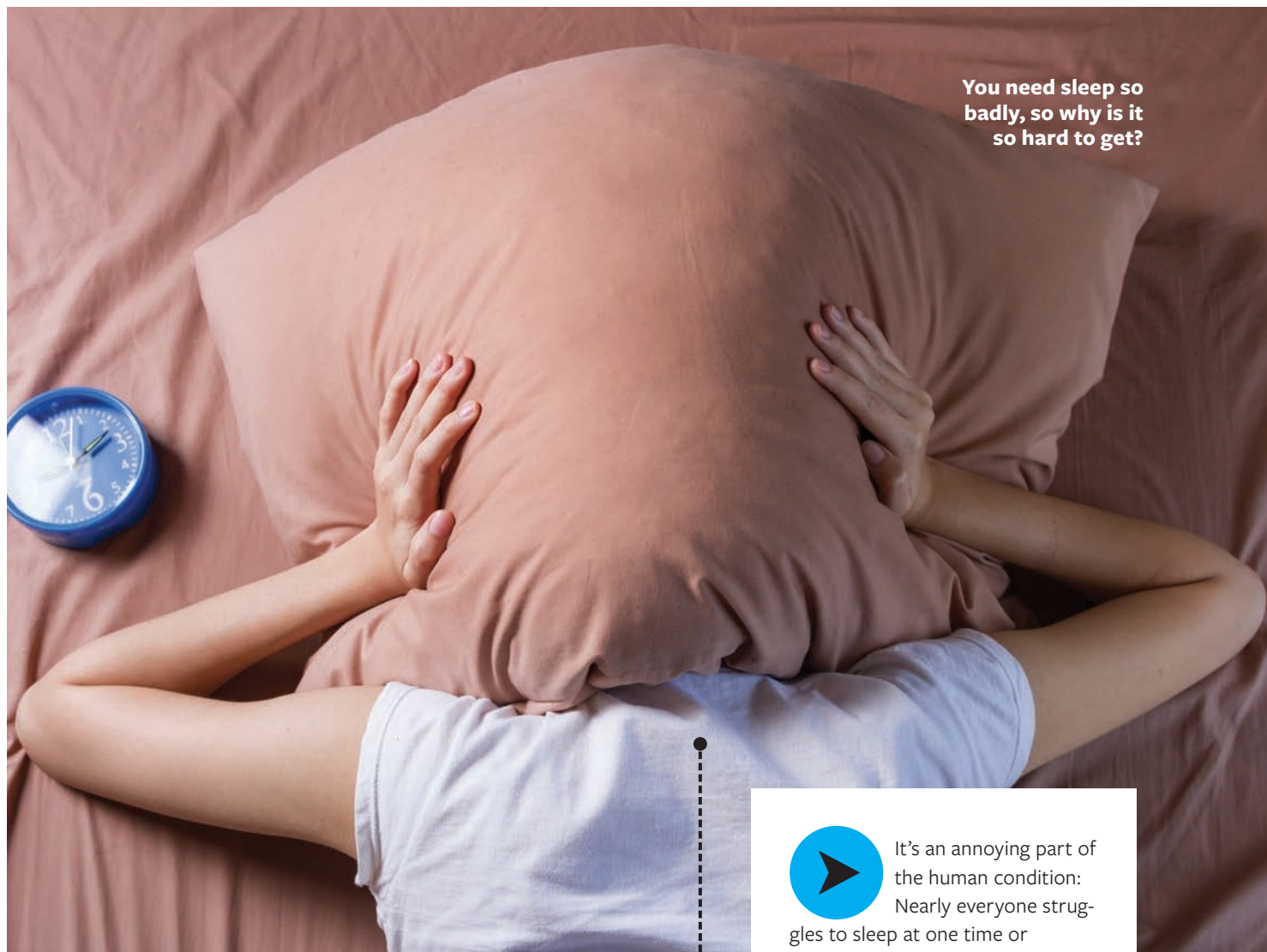
## 3 THINGS NOT TO DO

Bleeding is the leading cause of preventable trauma-related death in the U.S., according to the American College of Emergency Physicians. And learning what not to do can be crucial to effectively stopping a bleed. Gregory Cuculino, MD, medical director of Parrish Medical Center's Emergency Department, walks us through three common mistakes to avoid when you're trying to help someone who's bleeding.

**1. Not applying enough pressure on the wound.** "Make sure you keep constant pressure," Dr. Cuculino says.

**2. Peeking.** A natural mistake people make is removing pressure to look at the wound. "You lose hemostasis [the stopping of blood flow] each time you remove pressure to look at the wound," he says. "Check it once early on, and that's it."

**3. Removing objects.** While your first inclination might be to remove an object from a wound before proceeding, don't. "Apply pressure around any objects," Dr. Cuculino says. "Removing an object from a wound can do more harm than good. Let medical professionals remove it."



You need sleep so badly, so why is it so hard to get?

## FREAK OUT OR CHILL OUT?

*We all need sleep. But from crying children to free-floating anxiety, it can be hard to get. Here's how to know what requires medical attention*



It's an annoying part of the human condition: Nearly everyone struggles to sleep at one time or another. But chronic sleep problems can impair your quality of life and mental health, not to mention your ability to care for your family and your performance at work.

Sometimes, professional medical help can put an end to the sleepless nights. Eric Olson, MD, a pulmonologist (respiratory expert), sleep medicine specialist and member of the American Academy of Sleep Medicine, shares his tips on deciding when you can solve your sleep issues on your own and when you should seek expert advice.

PHOTO BY GETTY IMAGES



**Q** You're struggling with a big project at work, and you're wide awake at night with details and deadlines swimming through your head.

Should you try an over-the-counter sleep aid or just push through the sleepless nights until the project is finished?

#### TRY NONPHARMACOLOGICAL

**OPTIONS FIRST.** Olson says to start with the obvious sleep stealers—minimize alcohol and caffeine, get some exercise, keep kids and pets out of the bedroom, darken your bedroom, and turn off the TV and smartphone.

A lot of people find if they schedule time earlier in the day to worry about a problem in their lives, it can help them sleep better at night. "Make a list or think in a methodical way about your stressors," Olson says. "They don't have to be solved. For many people, just listing them is enough."

If you find that you're turning to over-the-counter sleep aids nearly nightly, your insomnia goes on for more than three months, or your daytime fatigue is affecting your job or relationships, talk to your doctor.

**Q** Your spouse says your snoring is loud, and it sounds like you're gasping. You say everybody snores and it's no big deal.

Is your snoring normal, or could it be sleep apnea?

**IT COULD BE SLEEP APNEA.** Sleep apnea is tricky, since its signs and symptoms—snoring, choking or gasping, waking up unrefreshed and being drowsy during the day—could be caused by other conditions. "More people

snores and don't have sleep apnea than snore and do have sleep apnea," Olson points out.

That said, if your snoring is disrupting other people, waking you up every night or loud enough to hear outside the bedroom, you should have it checked out. Sleep apnea is related to an increased risk of cardiovascular problems, but it can be treated.

**Q** You don't know what you were thinking—your baby isn't sleeping through the night yet, and neither is the puppy you let your older kids adopt a month ago.

Can you stave off sleep deprivation, or do you have to tough it out until both the baby and the puppy grow up?

#### YOU CAN MINIMIZE SLEEP

**DEPRIVATION.** "You have to try to budget enough overall time for sleep," Olson says. Sleep deprivation can make it hard to think clearly and can affect your mood, and it could contribute to long-term health problems. While it's normal for new parents to struggle with sleepless nights, the goal is seven hours in a day, and it doesn't need to happen all at once. So if you can't get in that much overnight, try to fit in some strategic daytime napping.

#### QUIZ



### Are You Sleep Savvy?

Is snoring harmful? Does everyone dream every night? Take the National Sleep Foundation's 12-question true-or-false quiz at [sleepfoundation.org/quiz/sleep-iq-quiz](https://sleepfoundation.org/quiz/sleep-iq-quiz) to find out.

**Q** Ever since you were a child, you've had an urge to move your legs or get up and walk around during the night.

Should you keep walking it off, or is this a medical issue?

#### IT MIGHT BE RESTLESS LEGS

**SYNDROME.** Restless legs syndrome is an irresistible urge to move your legs, and it's more common than people think. "Many people have it in childhood and attribute it to growing pains or other things, and it becomes a fact of life," Olson says. Your healthcare provider can talk to you about solutions.

**Q** Your spouse says you're acting weird overnight—talking, crying and laughing. It seems like you're acting out your dreams.

Is it just dreaming or something more serious?

#### IT'S POSSIBLY A PARASOMNIA.

Parasomnias are conditions, including sleepwalking, where there are unwanted movements or vocalizations during sleep. You should talk to your doctor. Some parasomnias can be treated by getting enough sleep, while others may need medication to get them under control. ■

# HEART FAILURE WARNING SIGNS

*Is your ticker trying to tell you something? Learn to recognize the symptoms of this life-threatening condition*



Heart failure is often misunderstood, and maybe its name is partly to blame. Because it sounds as though the heart has, well ... failed. Like it won't work at all anymore. But in reality, heart failure means your heart isn't pumping properly, and its ability to provide oxygen and nutrients to your body has been weakened. Unlike a heart attack, which comes on suddenly, heart failure usually develops and worsens over time.

Recognizing its warning signs and seeking care immediately is critical because once you have symptoms, the early stages of heart failure have begun.

"It takes days to weeks of changes in the body before it actually manifests outside," says Gurusher S. Panjra, MD, a cardiologist and chair of the American College of Cardiology's Heart Failure and Transplant Council.

"If you ignore them, you'll end up requiring hospitalization and invasive treatment. But if they're caught early, they can be treated with appropriate therapy, and it can change your quality of life."

Here are a few of the biggest symptoms to watch for.



ILLUSTRATIONS BY GETTY IMAGES





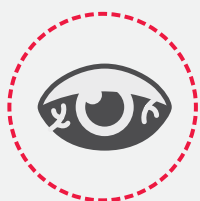
### **SHORTNESS OF BREATH**

It's more likely to occur when you're on the move, but shortness of breath can also happen when you're resting or even while you're sleeping.



### **CONFUSION**

Changing levels of sodium and other substances in the blood can leave you feeling confused, forgetful and disoriented.



### **FATIGUE**

When your heart can't pump enough blood to meet your body's needs, less essential tissues (like muscles in your limbs) get short-changed. As a result, you may feel unusually tired even during simple daily activities like walking or climbing stairs.



### **COUGHING/WHEEZING**

With heart failure, the heart may not be able to keep up with the supply of blood, which can back up in the veins that return it from the lungs to the heart. This can cause a buildup of fluid in the lungs—and chronic coughing or wheezing.



### **EDEMA**

Excess swelling is most likely to occur in your feet or ankles, but it can also occur in your abdomen and can cause noticeable weight gain.



### **HEART PALPITATIONS**

Your heart may beat faster to compensate for its loss in pumping capacity. ■



### **DIGESTIVE ISSUES**

Ongoing nausea and loss of appetite can occur. Gallbladder disease and reflux can produce these symptoms, "but it can be a major sign of heart failure in some people," Panjraht says.

APP



## **Support from a Trusted Source**

Facing heart failure can be scary, but support is available. Download the **HF Path** app from the App Store or Google Play. It's a self-management tool from the American Heart Association that can help you live better with the condition.

## THREE WAYS WITH LEEKS

*Aromatic and tasty, these nutrient-packed bulbs aren't just for fancy French soups*



It's possible you can't remember the last time you ate a leek, let alone bought a bunch at the market. If you only know leeks as the main ingredient in creamy, bistro-style soup, it's time to unearth some new ways to prepare them. The leek is part of the allium plant family, and its more familiar cousins include onion, garlic, chive, scallion and shallot. Some chefs, when seeking a subtler, sweeter flavor, substitute leeks in recipes that call for garlic or onion.

Leeks are high in vitamin K, which contributes to blood and bone health, says Ginger Hultin, a registered dietitian, spokeswoman for the Academy of Nutrition and Dietetics and author of the Champagne Nutrition blog. They're also an excellent source of vitamin A, believed to support immunity and vision function. Rounding out the profile are important substances like vitamin B6 and folate, which help metabolize food into energy, and vitamin C, which encourages wound healing.

"Some people discredit white-colored vegetables as being less healthy than dark, leafy greens or other colorful options, but that couldn't be further from the truth," Hultin says. Leeks also have antioxidants called flavonoids and sulfur-containing compounds, which "have shown some promising anti-cancer and heart-healthy effects," she says. Here's how to incorporate these green-and-white beauties into your weekly meals.

### 1 ADD THEM RAW TO SALAD

Because of their mild flavor, leeks don't need to be cooked, but they should be carefully cleaned and prepped. Rinse them first, then chop off both the root end and the leaves' tough, dark-green end. Next, cut the leek lengthwise and make a series of crosswise cuts with each half (you'll end up with crescent-shaped pieces). Because leeks grow underground, they tend to contain lots of sandy soil between their folds. To remove it, soak the chopped pieces in a bowl of water before draining them in a colander and drying well with paper towels.

### 2 CARAMELIZE THEM

Follow the steps above, then heat olive oil in a large skillet over medium heat. Add the leeks, season with salt and cook, covered but stirring occasionally, for 15 to 20 minutes, until they have a golden-brown color. If leeks begin to burn at any point, reduce heat. Caramelized leeks can be added to quiches or gratin dishes or used atop homemade pizzas.


### 3 ROAST THEM

Chop off both ends and slice leeks in half lengthwise. Rinse the halves thoroughly under cool water, gently peeling back the leaves to dislodge soil and sand. Pat dry, then toss with olive oil and season with salt. Place on a baking sheet and roast at 425 degrees for 10 to 12 minutes, turning once halfway through.



PHOTO BY GETTY IMAGES





Onions aren't  
the only thing  
to caramelize.

## DIG DEEPER ON LEEKS

► **Leeks are hardy veggies.** Depending on how fresh they are when you buy them, leeks can keep in the vegetable crisper for up to two weeks. It's best to wrap them loosely in plastic and keep them whole until you're ready to use them.

► **Don't freeze leeks unless you've cooked them first.** Raw leeks tend to become bitter and mushy when frozen, but cooked dishes like soups and quiches will keep well.

► **They go way back.** The ancient Greeks and Romans were fond of leeks, and Emperor Nero, who was one of their biggest fans, believed that eating leeks would strengthen his voice.

► **They are the symbol of Wales.** On the feast day of St. David, the country's patron saint, many Welsh people carry leeks or wear them as boutonnieres. The tradition has also come to include the daffodil, another national icon.

APP



### Cooking Coach

As the name suggests, using the **SideChef** recipe app, available from the App Store and Google Play, is like having a chef by your side offering tips as you cook. The thousands of recipes are highly visual: Each one guides you with not only text, but also a series of color photos. You can scale the recipes up or down, create shopping lists and set timers.



# SUNSCREEN



## EVEN WHEN THERE IS CLOUD COVER,

as much as **80 percent** of damaging ultraviolet (UV) rays can penetrate your skin.



More than

**75 percent**

of changes in skin over time are from the effects of sunlight. Sun exposure is strongly linked to skin aging.

More than

**25 percent**

of women and

**30 percent**

of men do not consistently protect themselves from sun exposure.



SPF 50

## MOST PEOPLE APPLY LESS THAN HALF

the recommended amount of sunscreen. Most adults need a golf ball-sized amount to cover all exposed skin.

**No. 1**—

Skin cancer is the most common cancer.

Reduce your risk by wearing sunscreen every day.

Source: American Cancer Society

## Select Your Sunscreen with Care—and Then Wear It

Have you ever looked at the ingredients in your sunscreen? Not all formulas are the same, says David Ruta, Parrish's director of pharmacy.

"While it's important to wear sunscreen when outside, it's also important to know what type of sun protection you're getting," Ruta says. He recommends physical sunscreens—instead of chemical—because they don't degrade in the sun. They sit on the surface of the skin to deflect UV rays and act as a physical block.

To identify a physical sunscreen, look for a high concentration of zinc oxide or titanium dioxide in the ingredients. For any sunscreen,

make sure you choose one that's broad spectrum, blocking both UVA and UVB rays.

On the flip side are chemical sunscreens, which Ruta says can decompose in the sun. They work as a sponge by absorbing the sun's rays.

Above all else, Ruta says, apply sunscreen no matter what—even if it's cloudy or you're only going to be outside for 10 minutes.

"Don't be fooled into thinking you're not exposed to the sun as much as you are," Ruta says. "Sitting by a window at the office or in your car still counts, and it causes cumulative damage. Sunscreen is something you need to use every day."

TOOL



## Questions About Sunscreen?

The American Academy of Dermatology answers frequently asked questions, such as how to choose an SPF and how to protect a baby in the sun, at [aad.org/media/stats/prevention-and-care/sunscreen-faqs](http://aad.org/media/stats/prevention-and-care/sunscreen-faqs).



**Peggy McLaughlin, BSN, RN, CDE, Diabetes Nurse Educator**



over time; B is for blood pressure; and C is for cholesterol. Talk to your healthcare team about how to manage these.

Know how to monitor your blood glucose. Bring your monitor and log book to all medical appointments.

Take any medications as prescribed and talk to your doctor if you have side effects or your blood glucose is consistently too high or low.

Make smart food choices and lose weight, if needed. Be consistent about eating three to five small meals or snacks a day. Reduce fat. Choose healthy carbohydrates, like whole-grain breads. Eat fresh fruits, veggies and beans.

Drink plenty of water.

Exercise and be active. Start where you are and aim for 30 minutes of exercise or activity on most days.

Quit smoking.

Stay motivated. Make use of diabetes education and nutrition services.

Though managing your diabetes isn't always easy, living well is possible—and you're always worth it. ■

## DIABETES CARE

*Read this if you have the disease or think you might be at risk*

More than 30 million Americans are living with diabetes. At least 1 in 3 will develop diabetes in his or her lifetime. Fortunately, there are ways to avoid common problems and live well with the disease.

**Q What is diabetes?** Diabetes is a lifelong condition that results when the body is not able to use food properly for energy. Diabetes increases your risk for heart disease and stroke. It is a serious medical condition, but you can learn to manage it and avoid complications by taking care of yourself.

**Q What factors increase my risk?** You can't change a family history of diabetes, your age (being older than 45) or your ethnic background. People with African-American, Alaska Native, American Indian, Hispanic, Asian and Pacific Islander genes are at higher risk.

But you can control being overweight, being sedentary, having high blood pressure, having high blood cholesterol and developing prediabetes or gestational diabetes.

**Q If I have diabetes, how can I live well?** First, learn all you can about the disease and get support. Know your diabetes ABCs: A is for the A1C test, which measures your average blood glucose

CLASS



### Learn How to Live Well with Diabetes

Diabetes education classes and nutrition counseling for diabetes and chronic renal disease are held monthly at Parrish. Medicare and most insurance plans cover these services. Call **321-268-6699** for details.



Cindy Leto and baby Giuliana return to the PMC Women's Center to visit advanced registered nurse practitioner Cara Starkey.

# BEST FOR *Mom* & Baby

*Parrish Medical Center's labor and delivery team provides meaningful birth experiences*



Cindy Leto's healing experience began when she visited Parrish Medical Center to take photos for a relative having a baby. She noticed how effortless and orchestrated the whole event seemed.

"That was the moment I decided that Parrish Medical Center was where I wanted to have my baby, should my husband and I be lucky enough to have one," she says.

As the fates would have it, Leto was soon making her own preparations

to expand her family. She attended Mommy and Me classes at The Children's Center later that year.

"Rita Jordan was a calm, soothing soul," Leto says of the instructor. "She made the classes about breastfeeding and caring for an infant enjoyable."

## Welcome to the World

A week before her due date, baby Giuliana decided to make her entrance. "I woke up at 4:30 in the morning," Leto says, "not imagining I would





Titusville resident Cindy Leto delivers baby Giuliana at Parrish Medical Center.

***“The nurses have no idea how much they meant to me.”***  
**—Cindy Leto**

be bringing a life into this world on that day.”

But she and her husband, Vic, knew they needed to check out the symptoms she was having. So, they drove to the hospital in their pajamas and nervous silence, with only their phones in hand.

Leto was admitted and prepped for the process of labor and delivery.

But, after deciding to come early, the baby seemed to change her mind.

“My heart was in my throat,” Leto says, recalling when she realized her baby’s heartbeat was in trouble. “The door flew open and what seemed like a football team of nurses came flying in.”

Leto delivered via cesarean section, and all turned out well.

“From the touch on my shoulder and the hug before the surgery to my daughter Giuliana’s first bath by [registered nurse] Heather Focht, the nurses have no idea how much they meant to me.

[Advanced registered nurse practitioner] Cara Starkey calmed me as she held my hand,” Leto continues. “She was so professional, but so best-friend-like and comforting. In my most vulnerable moments, they will never know how they made all the difference.”

### **‘You Are So Loved’**

To the nursing team, Leto says: “I am so deeply thankful for each one of you. Your kind words, your soft touch, your confident teachings and warm smile made my experience so beautiful and memorable. Your training is to be commended and your education is to be admired, but your beautiful way of connecting with people is invaluable. You are so loved by my little family of three, more than you will ever know. If I were to have another baby, I would do it in a heartbeat at Parrish.” ■

## **MEET OUR NEWEST OB-GYN PHYSICIAN**



**Rosanne Henry, MD,**  
**Obstetrics and Gynecology**

Rosanne Henry, MD, has practiced medicine since 2016 after receiving her medical degree from the University of Miami Miller School of Medicine.

She completed residency training in obstetrics and gynecology at the University of South Florida Morsani College of Medicine in Tampa.

Dr. Henry specializes in the care of general obstetrics and gynecology, adolescent medicine, reproductive health, and postmenopausal care and treatment. She welcomes new patients and accepts most insurance plans.

Dr. Henry is in the Parrish Healthcare Center in Port St. John, at 5005 Port St. John Parkway, Suite 2300.

For an appointment, call  
**321-633-8663.**

VIDEO



### **Cindy’s Story in Her Own Words**

Watch Cindy Leto talk about the care she received while delivering her baby at Parrish Medical Center. See the video at **[parrishhealthcare.com/cindys-story](http://parrishhealthcare.com/cindys-story)**.

# Get to Know a LOCAL ORTHOPEDIC EXPERT.



Certified by the American Osteopathic Board of Family Physicians in family practice with added certification in sports medicine, Anthony Allotta is a doctor of osteopathic medicine (DO) and a fellow of the American Osteopathic Academy of Sports Medicine (FAOASM). He has been part of Parrish Medical Group's orthopedic medicine team since 2008 and focuses his practice on sports medicine.

Get to know this orthopedic medicine physician with Parrish Medical Group.

**Q** *Vim & Vigor: Why did you go into orthopedic medicine?*

**DR. ALLOTTA:** Having been an athlete who had multiple injuries, I wanted to find nonsurgical treatments for common orthopedic injuries. This led me to sports medicine. I realized this was the right medical career path for me on the first day of my sports medicine clinical rotation in medical school.

**Q** *Vim & Vigor: What services do you provide?*

**DR. ALLOTTA:** I offer patients a nonsurgical, hands-on method for musculoskeletal injuries. From sports-related injuries to osteoarthritic conditions, the treatment services I provide include osteopathic manipulative treatment, fracture care, injection therapy, and bracing and physical therapy. I also treat conditions of the cervical spine, thoracic spine, lumbar spine, shoulder, elbow, wrist, hand, hip, knee, ankle and foot. During football season, you can find me on the sidelines as the team physician for Space Coast High School in Port St. John. I also cover many other athletic events in the area.

**Q** *Vim & Vigor: What are the latest advancements in your field that will benefit people?*

**DR. ALLOTTA:** Some of the latest advancements in sports medicine include ultrasound-guided injections: Through a small, nonsurgical procedure, and using ultrasound as a guide, a steroid is injected into the appropriate area to reduce musculoskeletal pain. ■



Anthony Allotta, DO,  
works with a patient at  
Parrish Healthcare Center.

APPOINTMENTS



## Find an Orthopedic Specialist

Parrish Medical Group's team approach can get you back to what moves you—work, play and daily living. The practices are certified by the National Committee for Quality Assurance. For a consultation, call **321-433-2247**.



# State of the Heart



- *PMC specialists use an **ADVANCED CARDIAC ASSIST DEVICE** to treat people with blocked arteries*

**P**arrish Medical Center (PMC) is now using minimally invasive technology called the Impella CP heart pump. The medical device was first used by PMC's cardiovascular team last summer to reopen blocked coronary arteries. PMC's first Impella patient was treated successfully, well under national benchmarks of 90 minutes from arrival in the emergency department to the time the coronary artery was opened.

## Great Need for Heart Services

More than 86 percent of adults in North Brevard report at least one cardiovascular risk factor, according to PMC's 2016 community needs health assessment. Risk factors include being overweight, smoking cigarettes, being physically inactive and having high blood pressure or cholesterol.

The Florida Department of Health attributes 3 out of 10 deaths in Florida to heart disease. It is the No. 1 killer in the U.S.

While more than 50,000 people have been treated with Impella in the U.S. to date, Impella is used in only 1 percent of percutaneous (through-the-skin) coronary interventions. PMC Cardiovascular Services is at the forefront of this life-saving medical advancement.

## How the Device Works

The Impella is an advanced cardiac assist device that pumps for the heart. It allows the heart to rest during stent placement or balloon angioplasty. The device is inserted via a catheter in the patient's femoral artery.

"It is extremely gratifying to us to be able to provide this medically advanced cardiovascular treatment to our community," says Biju Mathews, MD, chair of the Department of Medicine at PMC. "Use of the Impella allows more patients with severe heart damage to receive the care they need close to home." ■

## APPOINTMENTS



## Experts in the Art of Healing Your Heart, Lungs and Veins

Your Parrish Healthcare cardiovascular team is a member of the Mayo Clinic Care Network and has a proven quality and safety track record in the prevention, diagnosis, treatment and rehabilitation of heart, pulmonary (lung) and vascular (vein) disorders. Find a Parrish cardiovascular expert at [parrishhealthcare.com/cardiologists](http://parrishhealthcare.com/cardiologists).



# Breathe EASY

## Low-dose CT scans for lung cancer offer peace of mind



According to Parrish Medical Center's 2016 community health needs assessment, 17.9 percent of Brevard County adults smoke cigarettes, higher than state and national numbers. Smoking is more prevalent among men, adults younger than 65, lower-income residents and nonwhite races.

With all types of cancer, it's important to have an early diagnosis. Cancer as small as 1 centimeter (0.39 inches) can be detected with a low-dose CT scan.

Detecting lung cancer at its earliest stage and having it treated means a person can expect much better results.

smoke also may qualify for a screening after a discussion with a physician.

The screening, however, is not appropriate for those who have a history of cancer or lung nodules (except nonmelanoma skin cancer).

### An Unequal Threat

When it comes to equality of the sexes, lung cancer remains a sexist disease.

According to a 10-year study using CT screening, women are twice as likely to

develop lung cancer as men, regardless of how much they smoke, their age, or the size and texture of nodules found in their lungs. Researchers have not yet determined why.

The study, reported in the journal *Lung Cancer*, also found that the more tobacco a smoker has used and the older a smoker is, the greater the chance he or she will develop lung cancer.

Lung cancer is the No. 1 cause of cancer-related death in both men and women. Smoking is the leading cause of most lung cancers, but exposure to asbestos, radon and secondhand smoke also may contribute to its development. Genetics play a part, too.

If you're concerned about your risk, talk to your doctor about screening options. And if you smoke, quit. ■

#### APPOINTMENTS



### Schedule Your Screening

Call **321-268-6150** Monday through Friday, 7 a.m. to 6 p.m. Physician prescriptions are not required for this service. The cost is \$99 for self-referred patients.

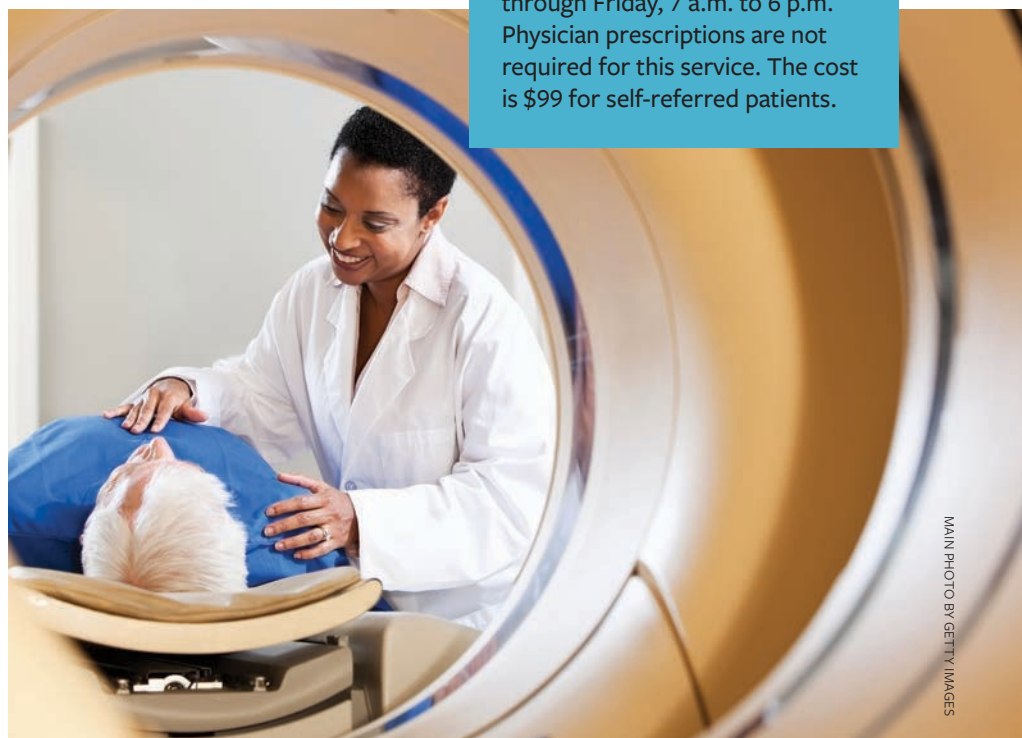


**Shannon Luker, BSN, OCN, CBCN, CN-BN, Parrish Cancer Center Patient Navigator**

### Understanding the Options

"Parrish Medical Center offers a self-pay screening that does not require a doctor's order," says Shannon Luker, BSN, OCN, CBCN, CN-BN, Parrish Cancer Center patient navigator. "The screening is affordable peace of mind."

Luker says current or former smokers age 55 and older are candidates for low-dose CT scan lung screening. Those with a family history and exposure to certain chemicals and secondhand



MAIN PHOTO BY GETTY IMAGES



# PARTNERS IN HEALING

*Spiritual support helps patients  
recover and cope*

**B**eing admitted to the hospital is a stressful event that can overwhelm a family. As one of America's finest healing environments®, Parrish Medical Center (PMC) began Partners in Healing in 2013. Recognizing that good spiritual and emotional health has a positive effect on physical health and recovery, PMC provides hospital and local pastoral care to patients and their families.

Today, the Partners in Healing program has grown to include 25 congregations in North Brevard. Together, we have supported more than 1,200 people admitted to the hospital.

Research shows that quality emotional and spiritual support help people recover from illness or cope with chronic medical conditions. Local congregations and patients speak highly of the program and the vital role that it plays in their healing experience that continues even after the patient is discharged.

"Our church has been privileged to help many people who would have otherwise slipped through the cracks," says Dal Cottrell, pastor of First Baptist Church of Aurlantia. "Partners in Healing participants have a lower rate of readmission, which is practical

evidence of the program's impact on our community. We are proud to be a part of this vital ministry and look forward to seeing how it will continue to grow and flourish."

Ricky Kelly is an enrollee in the program who was involved in a life-threatening car accident that resulted in him having paraplegia.

"I appreciate the team and the spiritual support," Kelly says. "It keeps me encouraged. Having someone to talk with really helps deal with depression. I'm not going to lie; it gets to me sometimes, so the support helps me cope with it."

Partners in Healing helps people like Kelly address questions and concerns they might have about their care and helps provide what they need for a full recovery.

"Based on the readmission rates tracked by the Centers for Medicare & Medicaid Services, PMC's rates continue to trend better than regional, state and national averages for Medicare patients, including patients enrolled in the Partners in Healing program," says Jerald Smith, director of Pastoral Care at PMC. "We want to be sure that our patients have everything they need for a full recovery and that their healing continues after they leave the hospital." ■

CALL



## Help Is Here If You Need It

To learn more about the Partners in Healing program, call Parrish Medical Center's director of pastoral care at **321-268-6111, ext. 3526**.

# Out of the Woods

One woman's battle with Lyme disease

• reminds us all to be vigilant **BY ERICA K. DANIELS**



Jamie Williams (left, with wellness coach Erica K. Daniels) says Parrish Health & Fitness Center has been her “home away from home” as she recovers from Lyme disease.

**L**yme disease cases are concentrated in the Northeast and Upper Midwest—yet, chances are that you know someone here in Florida who has Lyme disease.

“When I first noticed it, I thought it was a little scab,” explains 42-year-old Titusville resident Jamie Williams. “Of course, by that time it had been on me for several days.”

Williams was training for a marathon in early 2016. She was a wife, a stay-at-home mom and a full-time student. Before the end of the year, she was in a wheelchair.

“I was out for about a 15-mile run, and part of the route took me through the woods,” Williams recalls.

“The next morning, I noticed a small circular rash on the back of my leg. Every day it was getting bigger,” she says. “Of course, I now know that

it was the classic bull’s-eye rash that you get when you have a tick bite.”

## Major Health Scare

The Florida Department of Health says that most people are infected by ticks in nymph stages. Nymphs are often small enough to escape notice, so they can stay attached longer than adults, increasing risk of disease transmission.

Within two weeks of being bitten, Williams began to develop flu-like symptoms. Nonetheless, she approached her maiden marathon adventure with dogged determination. “I just kept telling myself, keep going, don’t quit, cross the finish line. By the

grace of God, I finished the marathon on March 26, 2016.”

Then, her health took a drastic and abrupt turn for the worse. She began to experience arthritis symptoms in her right knee, pain in her back, debilitating fatigue, labored breathing and cognitive deficiencies. Medical diagnoses ranged from lupus to multiple sclerosis to adult-onset mitochondrial disease. “I had no insurance, no promises, just lots of faith,” Williams recalls. “I just kept

thinking, I’m not going down like this.”

GO TO ...



## Get Your Free Pass to the Fitness Center

Parrish Health & Fitness Center is no ordinary gym. Check out the medically integrated facility today and receive a free one-day pass just for taking a tour. Stop by 2210 Cheney Highway or call **321-567-2201** for details.

## Treatment and Recovery

Prompted by an email from her aunt, Sally, Williams went in to be tested for Lyme disease. The result was positive. “It suddenly became crystal clear: That trek through the woods, that scablike spot on my leg, that bull’s-eye rash—I was bitten by a baby tick when I was training for the marathon,” Williams says.

She began treatment with a functional medicine program in May 2017. “Parrish Health & Fitness Center has been a huge part of my recovery,” she says. “It’s my home away from home.”

Fully recovered and with a renewed appreciation for life, Williams faithfully makes the fitness center a regular part of her weekly routine. She says, “The fitness center is so good for my mental and physical well-being.” ■



# Life Guards on Duty



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To learn more visit, [PatientSafetyMovement.org](http://PatientSafetyMovement.org).



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