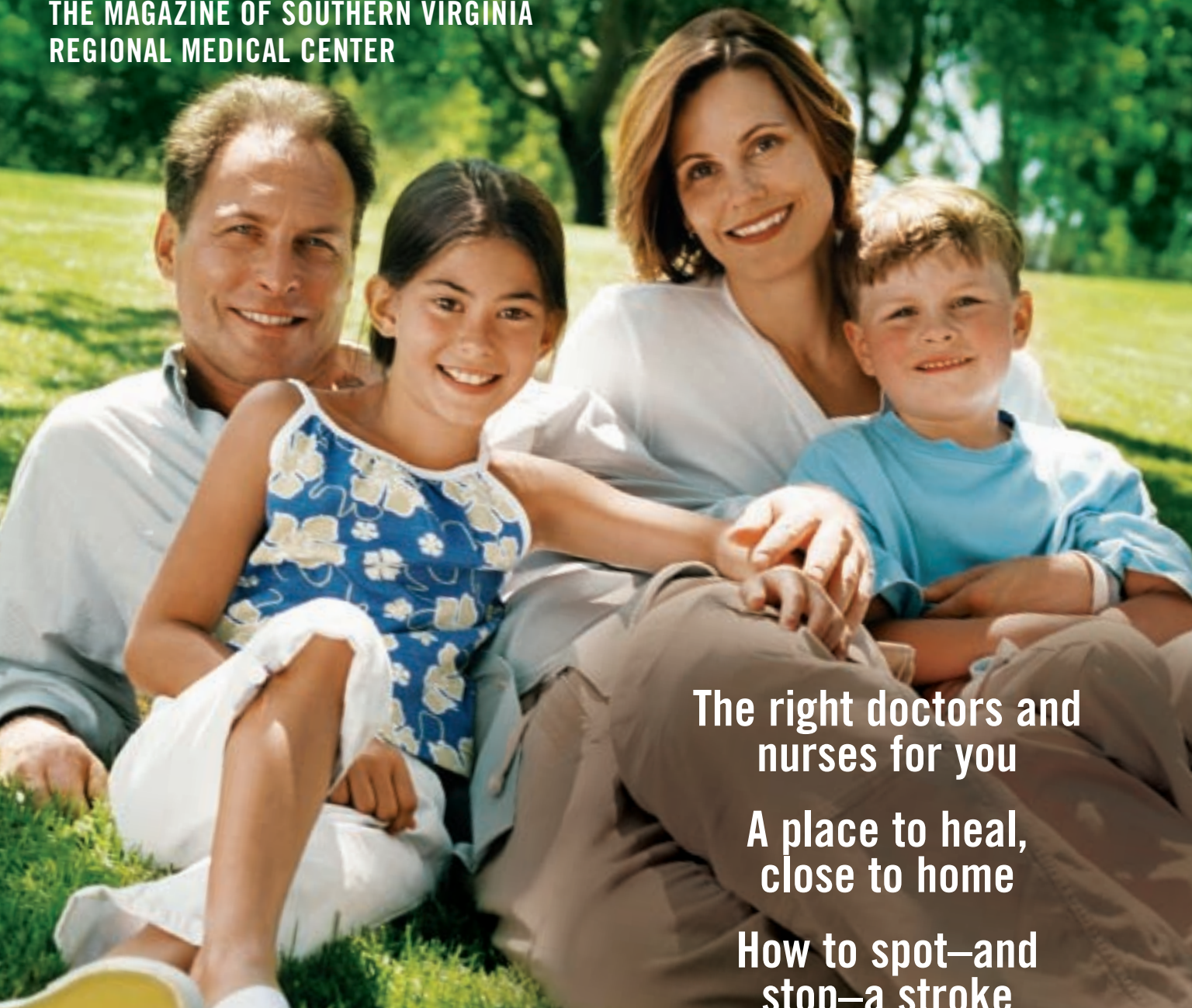


Health Connection

THE MAGAZINE OF SOUTHERN VIRGINIA
REGIONAL MEDICAL CENTER



The right doctors and
nurses for you

A place to heal,
close to home

How to spot—and
stop—a stroke

Good day, sunshine!
Greet the day with an SPF



SOUTHERN VIRGINIA
REGIONAL MEDICAL CENTER

Good day, sunshine!

Greet the day with an SPF

You don't have to be a sun worshipper to take sun protection seriously—even limited exposure can cause damage. Skin cancer is the most common kind of cancer in the United States, affecting nearly half of all Americans who live to age 65. Although most cancers don't appear until after age 50, skin cancer results from years of accumulated sun damage. However, you can avoid sun damage and enjoy your favorite outdoor activities by taking sensible precautions and using a sunscreen that protects your skin from damaging ultraviolet rays.

THE ABCS OF SPFS

Sunscreen products are rated according to their sun protection factor (SPF)—the length of time a product will protect you from sunburn caused by ultraviolet B (UVB) rays. But sunscreens don't provide complete protection. You still need to be cautious about timing and limiting your sun exposure.

Your best bet when shopping for a sunscreen is to choose a product with an SPF of at least 15, according to the American Cancer Society. Check the label to make sure it provides “broad-spectrum” protection, which protects against UVB rays and ultraviolet A (UVA) rays. UVB rays cause sunburns that can lead to superficial skin cancers known as basal cell carcinomas and squamous cell carcinomas. They can also lead to the more deadly skin cancer, melanoma. UVA rays penetrate even more deeply into the skin, damaging connective tissue.

SAVE-YOUR-SKIN TIPS

If you'll be outside, slather on sunscreen and find a shady spot, but keep in mind that sunlight reflects off surfaces such as water, sand and pavement. Avoid the sun between 10 a.m. and 4 p.m., when rays are strongest. To block sunlight,



wear sunglasses, a broad-brimmed hat and clothing made from tightly woven fabric, preferably long-sleeved shirts and pants. For your sunscreen to be most effective:

- Apply about 30 minutes before going outdoors.
- Use liberally. Apply 1 ounce of sunscreen to cover all exposed areas of your body, including your neck, ears and scalp.
- Reapply every 90 minutes—more often if you sweat heavily or go swimming.
- Use even on cloudy days—UV rays can still reach you.

Harmful UV rays can pass through car windows, too, so apply sunscreen to exposed skin if you'll be driving during peak sun hours.

Make applying sunscreen a habit—like brushing your teeth—but don't rely on sunscreen for full protection against skin cancer. Be sure to examine your skin each month for unusual changes and see your dermatologist if you spot any irregularities.

“When outside, apply sunscreen liberally every 90 minutes.”



Bouncing back from joint pain

With all the wear and tear we place on our joints, it's no wonder that almost 639,000 people underwent hip or knee replacement surgery in 2003, according to the Centers for Disease Control and Prevention. Knees and hips, in particular, are prone to problems—largely because they play a part in almost everything we do—but shoulder, finger, ankle and elbow joints can need replacement as well.

WHY ARE JOINT REPLACEMENTS NEEDED?

Joint replacement surgery, also known as arthroplasty, becomes necessary when conditions such as arthritis destroy the cartilage that cushions and separates bones. Over time, the friction of bone against bone wears away the joint, causing it to become stiff and painful.

Additionally, sports-related injuries and falls can create the need for surgery. Generally, arthroplasty becomes an option when joint pain disrupts your daily routine.

GETTING NEW PARTS

Surgeons can create a new joint, relieving your pain and providing greater freedom of movement. During the procedure, destroyed bone and tissue are removed and replaced with prosthetics, or artificial parts. The parts are made from durable metal, plastic or ceramic and can last up to 20 years.

Newer minimally invasive techniques are being performed more often, using smaller incisions—just 3 to 5 inches, compared with 6 to 12 inches in standard procedures—and reducing recovery time. Your hospital stay may be reduced to one or two days from four or three, and some patients go home the same day as surgery. However, minimally invasive surgery is not for everyone; patients who are overweight, elderly or frail or who have bone abnormalities do not make good candidates.

With hip or knee replacement surgery, expect to use a walker, crutches or a cane initially after the procedure. As you recuperate, a physical therapist will help you perform exercises to strengthen the joint, guiding your movements so you don't accidentally dislocate the replacement. Barring the unforeseen, you should be walking unassisted two to six weeks later. And though grueling workouts like 10-mile runs may still be too tough for artificial hips or knees, make plans to resume long-lost activities like dancing or strolling on the beach within six months.



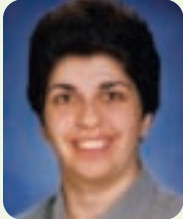
Do you need joint replacement surgery?

Your overall health and age and the condition of your joints will help you and your healthcare provider decide whether you're suitable for joint replacement. If you can answer yes to any of the following questions, you may want to consider surgery.

- Are you still in pain even after losing excess weight?
- Does your pain keep you awake nights?
- Does your pain interfere with your ability to earn a living?
- Has your quality of life suffered because of your pain—your ability to travel, perform household chores or visit with friends or family?
- Have you exhausted all other options, including anti-inflammatory drugs to relieve joint pain, walking with a cane, power-walking or swimming instead of jogging?

THE RIGHT TEAM FOR YOU

The experienced, dedicated medical team at Southern Virginia Regional Medical Center can help your family stay healthy. We'd like to introduce you to four of our team members.



MUNA FAHMI, M.D.
Board Certified in Internal Medicine
Fellowship Trained in Geriatrics

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Doctors of internal medicine focus on adult medicine and have completed special training on the prevention and treatment of adult diseases. At least three years of their postgraduate training is spent learning to prevent, diagnose and treat diseases that affect adults. After completing internal medicine training, an internist may subspecialize in one of 13 areas of internal medicine. To specialize in geriatrics, a subspecialty that deals with diseases and medical conditions specific to older adults, one must complete all educational and training requirements in internal medicine, followed by a year in a geriatrics fellowship-training program.

Muna Fahmi, M.D., is board certified by the American Board of Internal Medicine in internal medicine and geriatrics. She's a vital part of the medical team at Southern Virginia Medical Group. Dr. Fahmi's internal medicine practice provides complete care to patients with diseases affecting adult and older adults.

Dr. Fahmi joined Southern Virginia Regional Medical Center's medical staff in August 2005. She, her husband, Muhanad Aljassar, M.D., and their children live in Emporia.



**FITZGERALD MARCELIN, M.D.,
F.A.A.P.**
Board Certified in Internal Medicine
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Internal medicine/pediatrics is a combined medical specialty residency program in which doctors train in both internal medicine and pediatrics. After completing four years of medical school training, physicians complete a residency, which are additional years of training in their specialty. Traditionally, the internal medicine and pediatric residency programs both take three years to complete and lead to board certification in either internal medicine or pediatrics. Doctors completing this combined four-year residency program are eligible to take the board examinations for both the American Board of Internal Medicine and the American Board of Pediatrics. An internal medicine/pediatrics physician is trained to care for adults and children.

Fitzgerald Marcelin, M.D., F.A.A.P., of Marcelin Medical Center, completed his internal medicine and pediatrics residency at Louisiana State University Health Sciences Center in New Orleans, and he's board certified by the American Board of Internal Medicine and the American Board of Pediatrics.

Dr. Marcelin has been a member of Southern Virginia Regional Medical Center's medical staff since spring 2001. He's currently the chief of staff. Dr. Marcelin, his wife and their two children live in Emporia.



MANHAL G. SALEEBY, M.D.
Board Certified in Anesthesiology
Board Certified in Pain Medicine

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Successfully diagnosing and treating chronic pain is an important part of any medical practice. Sometimes, the cause of pain is straightforward, easily diagnosed and a treatment plan is prescribed.

Unfortunately, many people experience chronic pain that's elusive in origin and therefore difficult to diagnose and control.

Manhal G. Saleeby, M.D., of South Central Virginia Pain Center, is board certified by the American Board of Anesthesiology in anesthesia and pain medicine. He specializes in the treatment of chronic conditions such as back pain and migraines. He's up to date on procedures and treatments for chronic pain.

Dr. Saleeby completed a fellowship in pain medicine at Vanderbilt University Medical Center in Nashville, Tenn. He joined Southern Virginia Regional Medical Center's medical staff in April 2003. Along with his wife and three children, Dr. Saleeby makes Emporia his home.



**SUSAN JONES, R.N.,
F.N.P.**

**Emporia Medical
Associates
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A nurse practitioner (N.P.) is a registered nurse (R.N.) who completes advanced training in the diagnosis and treatment of illness. For an N.P. program, educational requirements include licensure as an R.N., a master of nursing degree and one to two years clinical experience. Nurse practitioners differ from physicians in that they focus on prevention, wellness and education and they provide an individualized, holistic approach to healthcare. An N.P. obtains medical histories, performs physical examinations, administers medications and immunizations, treats and manages acute and chronic illnesses and interprets diagnostic tests and X-rays.

Susan Jones, R.N., a certified family nurse practitioner (F.N.P.), provides personal, compassionate inpatient and outpatient medical care for her patients. Jones joined Emporia Medical Associates and the medical staff of Southern Virginia Regional Medical Center early in 2005. A lifelong resident of Emporia, Jones and her husband have one son.

Southern Virginia Regional Medical Center (SVRMC) recently announced the promotion of Douglas T. Arbour as chief executive officer (CEO).

Arbour, a lifelong resident of Baton Rouge, La., has served his 21-year career in healthcare, ranging from a respiratory therapist to a senior manager. Since 1999, Arbour has been assistant chief executive officer (ACEO) for River West Medical Center (RWMC) in Plaquemine, La. At RWMC, his leadership was marked by successful efforts to improve physician relations, develop new service lines and promote community involvement.

“I am honored to accept this leadership position,” says Arbour. “SVRMC has a combination of assets including competent physicians and staff, a high quality facility and community support. I look forward to building on the success of the hospital through physician, employee and community satisfaction.”

Arbour holds an Associate of Science in respiratory therapy from Southeastern Louisiana University, a Bachelor of Arts in health management from Ottawa University and a Master of Business Administration with a focus on health-care management from the University of Phoenix.

Arbour, who took over the CEO position at SVRMC in mid-April, looks forward to moving to Emporia with his wife, Tricia, and their children, early this summer.



**Douglas T. Arbour
Chief Executive Officer**

HEALTHWISE QUIZ

How much do you know about ADHD?

Take this quiz to find out how much you know about attention deficit hyperactivity disorder (ADHD).

- 1 Which of the following is *not* a symptom of attention deficit hyperactivity disorder?
 - a. hyperactivity
 - b. obsession
 - c. impulsivity
 - d. inattention
- 2 ADHD is thought to be caused by:
 - a. poor parenting
 - b. a genetic disorder
 - c. rheumatic fever
 - d. all of the above
- 3 Other disorders may accompany ADHD in as many as one in three cases. These include:
 - a. Tourette's syndrome
 - b. learning disabilities
 - c. bipolar disorder
 - d. all of the above
- 4 Most children who have ADHD begin to show signs and symptoms of the disorder between ages:
 - a. 1 and 2 years
 - b. 4 and 6 years
 - c. 9 and 12 years
 - d. 13 and 15 years
- 5 Adults can also suffer from ADHD. To be diagnosed with the disorder, a person must:
 - a. have shown symptoms of ADHD in childhood
 - b. have suffered from a serious illness as a child
 - c. have trouble holding down a job
 - d. be a reckless driver

ANSWERS: 1. B; 2. B; 3. D; 4. B; 5. A



STROKE SMARTS

How to spot a stroke

A stroke is similar to a lightning strike—it can happen suddenly and without warning. However, there are sometimes warning signs that lightning is imminent, such as storm clouds, rain and thunder.

Warning signs can signal a stroke, too. If you spot them and act quickly, you may prevent severe disability or death. If you or someone around you show any of these symptoms, seek emergency medical treatment immediately:

- sudden numbness or weakness in the face, arm or leg, especially on one side of the body
- sudden confusion, trouble speaking or understanding
- sudden trouble seeing in one or both eyes
- sudden trouble walking, dizziness, loss of balance or coordination
- sudden, severe headache with no known cause

These signs point to a stroke in progress. Blood and oxygen are not getting to a part of the brain as a result of a burst blood vessel or a blood clot, and that portion of the brain begins to die. Speedy medical care may minimize brain damage.

RISK FACTORS

Lifestyle factors and other health conditions that weaken blood vessels or contribute to blood clots increase your risk for stroke. You can control or treat some of them, such as high blood pressure, smoking, diabetes, carotid or other artery disease, abnormal heart rhythm, transient ischemic attacks (mini-strokes), certain blood disorders, sickle cell disease, high blood cholesterol, high triglycerides, physical inactivity, obesity and substance abuse.

Factors you can't change include increasing age, gender (more men suffer strokes), family history, race (African-Americans face greater risk) and having had a prior stroke or heart attack. Talk to your doctor about ways to reduce your risk for stroke and be prepared to act quickly if warning signs appear.

Outward bound

10 play-safe tips for your kids



What's one of the best things to say to your child? Go outside and play! Close supervision, proper protective gear and these simple precautions will help your kids safely enjoy the great outdoors:

- 1 Apply a sunscreen with an SPF of at least 15 every day—even on cloudy days—and reapply every 90 minutes, especially after swimming or sweating.
- 2 Outfit kids with brimmed hats and don't forget the sunglasses.
- 3 Keep babies under age 6 months out of direct sunlight and in the shade.
- 4 Avoid using swimming aids such as "floaties." They don't substitute for a life vest and can give kids a false sense of security.
- 5 When kids are swimming, keep a portable phone and rescue equipment like a shepherd's hook and life preserver nearby.
- 6 Supervise kids at all times near water and stay within arm's length of babies and toddlers. If you have to step

away even for a moment, get everyone out of the pool area and take little ones with you.

- 7 Insist kids wear proper protective equipment, especially a helmet, wrist guards and knee and elbow pads when bicycle riding, skateboarding and in-line skating.
- 8 Teach kids to bike skillfully. Enroll your children in a class to practice basic skills, such as balance and braking, on a smooth surface away from traffic.
- 9 Visit playgrounds that have soft surfaces like wood mulch or chips, shredded rubber tires or sand to lessen the impact of falls. Avoid play equipment on asphalt, concrete, packed dirt and grass.
- 10 Don't let kids wear helmets, necklaces, backpacks, scarves or clothing with drawstrings while on playgrounds.



Fire up the grill!

But read these food-safety tips first

For many people, summertime fare means fresh, fast, no-fuss meals cooked outdoors. However, warm temperatures can set the stage for a nasty bout of food poisoning. Take these

precautions to make sure your meals are safe:

- **Defrost thoroughly.** Place frozen foods in the refrigerator for safe thawing. If meats are out too long, bacteria can produce illness-causing toxins that remain active even during cooking.
- **Marinate right.** Keep foods refrigerated while marinating.
- **Transport safely.** When traveling, use an insulated cooler with enough ice or cold packs to maintain a temperature of at least 40° F. Wait until you're ready to leave to

pack refrigerated foods in the cooler. Then place it in the coolest part of the car—not the trunk. When you arrive at your destination, move the cooler into the shade, avoid opening it frequently and replenish ice as needed.

- **Bring extra plates and tools.** Use one

platter and spatula, tongs and sauce brush for raw foods and a different platter and utensils for cooked foods.

Don't use a fork to turn meats since puncturing can introduce surface bacteria into the meat.

- **Keep clean.** Bring paper towels and disposable wipes or a sanitizing gel for convenient hand washing and surface cleanup.

- **Prepare the grill.** Light the coals and allow the cooking surface to heat up to kill microorganisms before putting on the food.

Is it done?

Use an instant-read meat thermometer to test meat's doneness. Grill precooked meats such as hot dogs to 165° F until steaming hot. Refer to the chart at right to determine when cooked meat is safe to eat.

Meat product	Safe temperature
poultry	180° F
pork	160° F
beef, ground	160° F
beef, steaks or roasts	145° F
veal	145° F
lamb	145° F

A place to heal, close to home

Adult Behavioral Health Services Unit opens at SVRMC



In the past, area patients and families have had to drive up to an hour to reach the nearest facility with inpatient behavioral health services. Now they don't have to. In February, months of preparation and construction came to fruition as final touches were made to the home of Southern Virginia Regional Medical Center's (SVRMC) Southern Virginia Behavioral Health Services.

The planning process began in spring 2005 when SVRMC assessed the need for behavioral health services in Emporia/Greensville and the surrounding areas. Research determined that there was an unmet need among adults and older adults for both inpatient and related outpatient behavioral health services in the geographic area served by SVRMC, which includes Greensville, Sussex, Brunswick and Southampton Counties in Virginia and Northampton County in North Carolina. In these counties, the population is estimated at 58,690. About 40 percent of this population is 45 years or older. Fifteen percent is 65 years or older, which is greater than the national average of 12.4 percent. About 15 in every 1,000 adults and older adults have severe and persistent

mental illness that requires inpatient treatment.

Having established an overwhelming need for adult and older adult behavioral health services, SVRMC entered into the Certificate of Public Need (COPN) process required by the Commonwealth of Virginia Department of Health. In fall 2005, the behavioral health services project was introduced to the community. At the COPN public hearing in November, area officials and citizens responded to the project with enthusiasm and unopposed support. In January 2006, the COPN was approved and SVRMC made plans to open the 10-bed inpatient adult behavioral health services unit.

Southern Virginia Behavioral Health Services will also include structured outpatient behavioral health services designed to complement the inpatient services and allow patients needing further treatment to transition from an inpatient to an outpatient treatment setting.



Celebrating the opening of SVRMC's new adult behavioral health services unit

Learn more!

For more information,
call (434) 348-4580.

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