

# Health Connection

THE MAGAZINE OF SOUTHERN VIRGINIA  
REGIONAL MEDICAL CENTER

6 ways to raise a  
healthy eater

Better your  
blood pressure

Easing  
pelvic pain

Splash! Is that  
water safe for  
swimming?

We care for  
your family



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# The facts about fibroids

**Y**ou're constantly running to the restroom, your back hurts and your periods are particularly painful. What's going on? You might be dealing with uterine fibroids, noncancerous tumors that grow out of uterine tissue.

Physicians aren't sure why some women develop fibroids, but if you're overweight or African-American or an immediate family member has fibroids, you're at increased risk.

## WHAT DO FIBROIDS FEEL LIKE?

In most cases, you won't even know that you have fibroids. But consult your physician if you experience any of these signs:

- heavy or painful periods
- bleeding between periods
- constant pelvic pain
- a feeling of fullness in the lower abdomen
- an increased need to urinate
- pain during sex
- lower back pain
- reproductive problems, including infertility, multiple miscarriages or preterm labor

## WHAT'S NEXT?

Your physician will do a pelvic exam to see whether your uterus is enlarged or misshapen. If he or she spots abnormalities, an imaging exam, such as an ultrasound, can confirm the diagnosis.

Treatment depends on your symptoms' severity, the



fibroids' size and location, your age and whether you want children:

- If you don't have symptoms, treatment is usually unnecessary.
- If you're approaching menopause, you may be advised to do nothing, as fibroids tend to stop growing or even shrink when hormone levels drop.
- If you have occasional discomfort, try an over-the-counter pain reliever, such as ibuprofen or acetaminophen.
- If you're bleeding heavily, your physician may recommend hormonal treatments to lighten your flow or an iron supplement to prevent anemia.
- If your fibroids are large, your physician may suggest hormones to temporarily stop menstruation and shrink the growths. These hormones are sometimes prescribed before surgery to make it easier to remove the fibroids.
- If your fibroids are growing quickly or causing excessive blood loss, your physician may present several surgical options. Myomectomy (removing the fibroids while leaving the uterus intact) is the best option for women who wish to have children. Myolysis (freezing or using an electric current to destroy growths) and hysterectomy (removing the uterus) are other possible treatments.

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Filling out the online survey is easy: Simply go to [www.healthconnectionmag.com](http://www.healthconnectionmag.com) and complete the survey.

By completing our survey, you'll be automatically entered in a random drawing to win one of five gift cards.

All surveys must be completed online by June 1, 2009, to be eligible to win. One entry per person, please. Thank you for your time and assistance.

All responses will be kept strictly confidential. We do not sell, rent or give away your e-mail address.

# Gut check

## Could it be appendicitis?

**W**hat's tiny and useless but can cause a whole lot of pain if it's unhappy? Your appendix, a finger-shaped pouch attached to your lower intestine. And if your appendix ever becomes inflamed and fills with pus, you'll have a raging case of appendicitis, a potentially life-threatening illness.

### WHO'S AT RISK?

Though anyone can get appendicitis, it often strikes between ages 10 and 30. It usually happens when the appendix is blocked by fecal matter or a swollen lymph node following a digestive tract infection. A small number of people are diagnosed following traumatic abdominal injury, while others are genetically predisposed. In all, about 280,000 appendectomies are performed each year in the United States, according to the National Center for Health Statistics.

### NOT JUST A BELLYACHE

A hundred different ailments can cause stomach pain, but your appendix might be the culprit if you have:

- pain that starts around the belly button and moves to the lower right of the abdomen and gets worse when you move, take deep breaths, sneeze or cough
- abdominal swelling
- loss of appetite
- nausea and vomiting
- constipation or diarrhea
- an inability to pass gas
- a low-grade fever

### TIME TO TAKE IT OUT?

This isn't a wait-and-see kind of problem. Removal is the only effective treatment for appendicitis, so if you're having symptoms, head to the emergency room, stat. Once there, a physician will check for pain location and ten-



derness, run a blood test for infection and send you for a computed tomography (CT) scan to confirm the diagnosis. He or she will also look to rule out other possibilities for your symptoms, including ectopic pregnancy, ovarian cysts, kidney stones and Crohn's disease. If you *do* have appendicitis, your appendix will be surgically removed before it can rupture. It may be done laparoscopically (the surgeon makes a few small incisions in your abdomen) or with traditional open surgery (the surgeon makes one large incision). Since experts have been unable to pinpoint the appendix's function, it's unlikely that you'll suffer any long-term effects.

Delay treatment and your appendix will likely rupture. If that happens, chances are good that you'll develop an infection of the abdominal cavity called peritonitis and then pain will take over and your entire abdomen will swell. Fever, thirst and low urine output will likely follow. This infection can cause organ failure, infertility and even death if not adequately contained with an abdominal cavity cleaning and intravenous (IV) antibiotics.

### Where does it hurt?

**A**fter migrating from your navel, pain from appendicitis nearly always settles at a place on your abdomen called **McBurney's Point**, named after the 19th century surgeon Charles McBurney, an authority on appendicitis. Find it by drawing an imaginary line from your belly button to your right hip bone; you'll feel tenderness about halfway between the two points.



Douglas T. Arbour  
Chief Executive Officer

## Dedicated to caring for you

It's no secret that the U.S. economy is at the lowest point in recent memory. While healthcare certainly isn't immune to these problems, I assure you that Southern Virginia Regional Medical Center (SVRMC) is secure, and we'll be here to provide quality healthcare to you and your family

throughout these difficult financial times.

With so much to think about, I'm happy to share with you some of the very positive things that are going on at SVRMC.

### ADVANCED CARE

In January, our cardiopulmonary services department received an updated peripheral arterial vascular unit used to diagnose peripheral artery disease. Called VasoGuard, the unit will be used to provide upper- and lower-extremity arterial studies, including pulse volume recordings and ankle-brachial indexes. Our board-certified radiologist, Howard Hightower, M.D., will interpret these valuable studies.

The cardiopulmonary services department also recently earned the Quality Respiratory Care Recognition aimed at helping patients and families make informed decisions about the quality of respiratory care available in hospitals. Started in 2003 by the American Association for Respiratory Care (AARC), this designation identifies facilities that use qualified respiratory therapists to provide respiratory care and ensure patient safety by agreeing to adhere to a strict set of criteria governed by the AARC.

### LAB SERVICES

In February, our laboratory had an unscheduled survey by The Joint Commission and was awarded full accreditation. During this strenuous three-day process, The Joint Commission surveyor traced patients who received services in our laboratory throughout the continuum of care.

### CUSTOMER SERVICE FOCUSED

At SVRMC, we continue to put great emphasis on customer service. During the fourth quarter of 2008 and early 2009, our focus has been on our emergency department (ED). Changes you may have noticed include our ED nurses rounding on patients every half hour and post-discharge phone calls to check in with our patients who were discharged. Through these efforts, we've experienced a significant increase in the percentage of patients who would definitely recommend our ED to their friends and family.

Updated equipment, recognitions of the services we provide by nationally renowned organizations and continually improved customer service—just a few reasons to choose SVRMC as your healthcare provider.

Sincerely,

Douglas T. Arbour  
Chief Executive Officer  
Southern Virginia Regional Medical Center

# Family practice is the family business



**W**hen most people think about a family business, medicine isn't the first thing that comes to mind. Not so with the Squire family. In 1992, family medicine became the family business when Robert Hall Squire, M.D., joined Prince Squire Medical Center, a practice his father, Peter Squire, M.D., and partner John Prince, Sr., M.D., opened in 1953.



## **PETER SQUIRE, M.D.**

Born in Fairmont, W.Va., Dr. P. Squire and his family moved to Greenville County. During World War II, Dr. Squire earned the ensign rank in the Amphibious Forces, Pacific Theater. In 1943, he entered Hampden-Sydney College (HSC) in Hampden-

Sydney and joined the U.S. Naval Reserve. He earned his bachelor's degree from HSC in 1948 and his medical degree at the Medical College of Virginia in 1952. In 1953, Dr. Squire completed his internship at Stuart Circle Hospital and opened Prince Squire Medical Center with Dr. Prince. At that time, family practice wasn't an officially recognized specialty. A board didn't govern general practitioners (physicians who provide general care). In 1969, the American Board of Family Practice (ABFP) was born, and family practice was officially recognized as the 20th primary medical specialty. Dr. Squire earned his status as a Diplomate of the board in 1971.

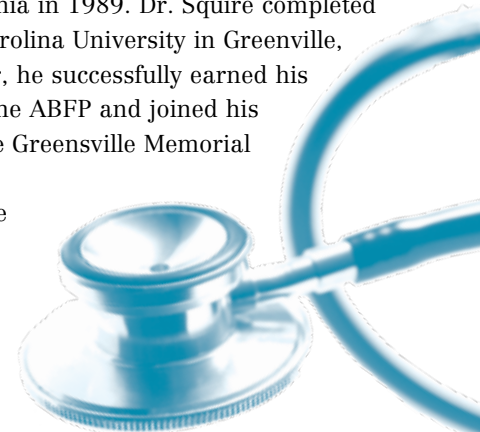


## **ROBERT HALL SQUIRE, M.D.**

Dr. R. H. Squire has lived his entire life in the Emporia/Greenville community. He earned his bachelor's degree in animal science in 1981 and a bachelor's degree in biology in 1982 from Virginia Polytechnic Institute and State University in Blacksburg. He continued

his studies at Virginia Commonwealth University in Richmond before earning his medical degree from the Medical College of Virginia in 1989. Dr. Squire completed his residency at East Carolina University in Greenville, N.C., in 1992. That year, he successfully earned his status as Diplomate of the ABFP and joined his father's practice and the Greenville Memorial Hospital medical staff.

Dr. Squire is an active member of the SVRMC medical staff, where he's physician advisor. He and his wife, Molly, have three sons and live in Lake Gaston, N.C.



## **!** Make an appointment!

**T**o make an appointment with Peter Squire, M.D., or Robert Hall Squire, M.D., call (434) 634-4148.

## HEALTHWISE QUIZ

How much do you know about **allergies**?

Take this quiz to find out.

**1** Approximately how many people suffer from allergies?

- a. 50 million
- b. 35 million
- c. 27 million
- d. 18 million

**2** You're more likely to develop allergies if you:

- a. eat shellfish
- b. have a family member who has allergies
- c. had pets as a child
- d. regularly garden

**3** Which does *not* aggravate allergies?

- a. cigarette smoke
- b. cockroach droppings
- c. pet saliva
- d. they all can trigger allergies

**4** Where does pollen first appear in the spring?

- a. weeds
- b. trees
- c. grass
- d. mold

**5** What reduces pollen allergies in the spring?

- a. not drying laundry outside on a clothesline
- b. removing your shoes before coming indoors
- c. not going outside before 10 a.m.
- d. all of the above

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

# Get your blood pressure under control

**H**igh blood pressure truly is sinister: You can have it but not know it until you suffer a heart attack, stroke or another serious health complication.

Hence, its nickname: the silent killer. Seeing your physician regularly is the best way to determine whether you have high blood pressure—or hypertension. He or she will measure the force of blood in your arteries by looking at your systolic (the higher number) and diastolic (lower number) pressure. Elevated levels (140/90 mm Hg or more) indicate hypertension,



while numbers ranging from 120/80 to 139/89 point to prehypertension, a condition that puts you at risk for high blood pressure in the future. Normal blood pressure is under 120/80. Although hypertension has no cure, you can take steps to control it and protect your health:

- **Eat a healthy diet.**

High-fat and sugary foods contribute to high blood pressure,

so reach for foods from the DASH (Dietary Approaches to Stop Hypertension) diet. They include whole grains, fish and poultry, nuts, fruits and vegetables and low-fat and low-sodium foods.

- **Get moving.** Aim for 30 minutes of cardiovascular activity most days of the week. If you're short on time, break up your workout into three 10-minute segments over the course of the day. Take a walk around the block, dance to your favorite CD or work out to an exercise DVD.

- **Take your meds.** Sometimes medication is the only way to lower your blood pressure. Because hypertension drugs work only when they're regularly in your system, you should never miss a dose or stop taking them.



## HOW DOES WATER GET CONTAMINATED?

When it comes to swimming pools, water parks and play fountains, most disease comes from fecal matter on the bodies of sick splashers. If chlorine and pH levels aren't carefully calibrated, other swimmers could swallow live bacteria. In hot tubs, naturally occurring germs can cause rashes and respiratory problems, ranging from the common cold to pneumonia. Large bodies of water—from rivers to the ocean—can be contaminated by sewage, animal waste, swimmers' feces and even parasites.

## HOW CAN I AVOID CONTRACTING RWI?

Take these precautions to stay healthy when you swim, dive or just splash around:

- Avoid pools with murky or chemical-smelling water (properly chlorinated pools don't have an odor).
- Don't share towels, kickboards or toys.
- Keep water out of your mouth and never swallow it.
- Stay on dry land if you have open sores.
- Skip bodies of freshwater on very hot days, since bacteria flourish in warm water.
- Plug your nose when swimming in freshwater to keep parasites out.
- Shower before and after swimming and wash your hands after using the toilet or changing diapers.
- Take children on frequent bathroom breaks and change diapers in the bathroom, not poolside.

# Warding off water illness

**A**s the weather warms up, we all look forward to swimming laps in the pool; splashing in the ocean, stream or river; or lounging in a hot tub. But those waters may mask something ominous: Contaminated water can lead to recreational water illness (RWI). Touching or swallowing water in pools, lakes, spas, rivers and oceans can lead to gastrointestinal, outer ear, eye, skin, respiratory and neurologic infections—and children, pregnant women and people with compromised immune systems are at greatest risk.

## Be a fruit-and-veggie role model

**W**hether you're driving the car or stepping into high heels, your little ones want to be just like you. So why not use your power for good?

Follow these tips, and the eating habits your children copy will positively influence their health—and yours—for years to come:

**1 Restock the pantry.** Keep healthy snacks around. Say goodbye to cookies loaded with high-fructose corn syrup and bright orange cheese puffs and hello to baked veggie chips and sugar-free applesauce.

**2 Drink right.** Switch out your super-acidic, high-sugar soda for water and 100 percent juice—little teeth and waistlines will thank you.

**3 Start the day right.** No time to sit down to breakfast? Send your kids off with a banana and a baggie filled with dry whole-grain cereal. Studies show that breakfast eaters boast improved math grades, less incidence of hyperactivity and better school attendance. And teen-

agers who eat first thing tend to weigh less, exercise more and generally have a healthier diet than their breakfast-skipping pals.

**4 Turn off the tube.** People who eat in front of the television are more likely to eat unhealthy foods.

**5 Eat together.** Children who dine with their parents tend to consume more fruits and veggies and fewer unhealthy snacks.

**6 Pack a lunch for everyone.** You'll save cash while making sure the whole family is eating well. Be sure to include a lean protein, low-fat dairy, grains, a vegetable and a piece of fruit (try sliced turkey and low-fat cheese on whole-wheat bread with carrot sticks and an apple).





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