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Early Screening Improves Lung Cancer Outcomes

! Expert Care and Treatment

To learn more about our lung cancer treatment program, visit us at www.NebraskaMed.com/lung.

Lung cancer is the leading cause of cancer deaths in the United States among both men and women. In fact, lung cancer claims more lives than breast, colon and prostate cancer combined. The disease accounts for approximately 165,000 deaths every year.

“Our biggest challenge with lung cancer is diagnosing it early,” says Rudy Lackner, MD, thoracic surgeon at The Nebraska Medical Center. “If we find it early, it is highly treatable. However, because there are usually no symptoms during the early stages, it is often not found until stage 3 or 4.”

Common symptoms that may develop in the more advanced stages of the disease include intermittent coughing, shortness of breath, coughing up blood, weight loss and chest pain. The goal is to diagnose the cancer before these symptoms develop. The Nebraska Medical Center’s Eppley Cancer Center is involved in a clinical study to determine the value of a

screening program targeted at patients ages 50 and older who have smoked a pack a day for 20 years or more.

“Research has shown that we start to see a marked increase in lung cancer at age 50,” says Dr. Lackner.

Screening involves a CT scan of the chest to identify nodules in the lungs. If nodules are found and the patient is in a high-risk category, this may be followed by a bronchoscopy, a CT scan-guided needle biopsy or a surgical biopsy to confirm cancer. Surgery is highly effective at curing lung cancer in its earliest stages. Cancers found in later stages may also need chemotherapy and radiation with or without surgery.

The largest risk factor for lung cancer is exposure to tobacco products, including cigarettes, cigars, pipes and marijuana. How long you smoked impacts your risk more than how much you smoked. “The earlier you quit, the greater your chances are for decreasing your risk,” says Dr. Lackner.

Secondhand smoke has been shown to increase an individual’s risk for lung cancer by as much as 30 percent.

Anyone in their 40s and 50s who has smoked should discuss screening options with their doctor, says Dr. Lackner. Other high-risk patients include smokers with underlying lung disease such as emphysema. These individuals should be considered for screening as early as age 40, notes Dr. Lackner.

Lung cancer patients treated at The Nebraska Medical Center benefit from the expertise of a multidisciplinary

group of physicians who meet weekly to discuss each patient’s case to formulate a treatment plan and ensure the best care possible.

“Data shows that survival is significantly better when patients receive care and treatment from physicians with dedicated expertise in treating lung cancer,” says Dr. Lackner. The Nebraska Medical Center’s program is the only one in the area with a team completely dedicated to treating lung cancer. “Twenty percent of all lung cancer patients will be cured,” says Dr. Lackner. “The key is finding the cancer very early.” ■



Understanding Lung Cancer

Our FREE brochure discusses lung cancer symptoms, diagnosis and treatment methods. To order a copy, please call 800-922-0000. Supplies are limited, so call today!

Testicular Self-Exam Recommended for Young Men

Compared to other cancers, testicular cancer is not very common. But it is the most common cancer in young men between ages 15 and 39. A quick and simple testicular self-exam performed each month can help detect testicular cancer early, when it's most treatable.

"One of the risk factors for testicular cancer is nondescended testicles," says James Schwarz, MD, hematologist/oncologist at The Nebraska Medical Center. "However, the risk remains even if the testicle has been surgically relocated to the scrotum or if just one is descended."

The primary symptom for testicular cancer in its earliest stages is a painless lump or enlarged testicle. Other symptoms include a feeling of heaviness or discomfort in the testicle, fatigue, weight loss and enlargement or tenderness in the breasts.

Because testicular cancer is more common among teens and young men, educating your children about the disease is important, says Dr. Schwarz. Any lump or firmness in the testicle should be checked out by your physician as soon as possible. The testicles are

only about the size of a walnut, so a lump should be easy to detect.

If you should find a lump in the testicles, don't panic. Changes in the testicles are common and often are not testicular cancer. A lump could also be a cyst called a cystic hydrocele—an accumulation of fluid in a sac-like cavity or duct. A physical and ultrasound by your physician can help identify the mass. If needed, a follow-up blood test can be performed to confirm the presence of cancer. If it is determined the lump is a cyst, it should be followed for several months. If necessary, the cyst can be surgically removed.

Surgical removal of the testicle is also the treatment for testicular cancer. Whether you will need chemotherapy or radiation therapy will be determined by the size and stage of the cancer. If the cancer is found later, it may have spread to the lymph nodes, so they will also need to be monitored. About one-quarter of patients will have lymph node involvement, says Dr. Schwarz. "The good news is that the cure rate for testicular cancer is 90 percent if prompt treatment is received." ■

MammoSite Therapy Reduces Downtime for Breast Cancer Patients

A new breast cancer treatment regimen called MammoSite therapy has reduced treatment and recovery time for women receiving care for breast cancer.

MammoSite makes lumpectomy easier for more women by allowing a full course of radiation to be delivered in five days as opposed to the conventional regimen of daily treatments for six to seven weeks. Studies show comparable long-term recurrence and survival rates whether women choose lumpectomy or mastectomy.

"We know that mastectomy is not better than breast conservation, based on 40 years of clinical research and thousands and thousands of patients," says Edibaldo Silva, MD, PhD, surgical oncologist at The Nebraska Medical Center.

After removing the breast cancer tumor, a MammoSite balloon catheter is placed inside the tumor cavity through a small incision in the breast. The catheter holds the radiation seed to deliver the therapy. The MammoSite targeted therapy radiates an area 2 centimeters around the area of the breast tumor, helping to spare healthy tissue and minimizing side effects such as skin discoloration, scarring and burning.

"We recommend it to all women who are postmenopausal, whose tumors are less than 2 centimeters in size or who have a premalignant condition called ductal carcinoma in situ," says Dr. Silva.

Watch a Video! To learn more about MammoSite therapy, watch our Breast Cancer Treatment YouTube video at www.youtube.com/NebraskaMedcenter.

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Fred Wilson,
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Deborah Darrington, MD,
UNMC Survivorship
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Joann Schaefer, MD,
Nebraska's chief medical officer
and transplant recipient

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Registration deadline
is Friday, Sept. 24.

Cost is \$49 and \$79
for nurses. The conference pro-
vides 5 CEU credits for Nebraska
nurses; 6 for Iowa nurses.



health & wellness club events

The Nebraska Medical Center's Health and Wellness Club is a free club open to all individuals ages 50 and older. As a club member, you can enjoy occasional discounts, fitness programs, health education and screenings, social activities and a calendar of local programs to help you live a healthier lifestyle. For more information or to join the Health and Wellness Club, please call 800-922-0000 or check us out online at www.NebraskaMed.com/club. Call 800-922-0000 for more information or to sign up for these classes and events.

MONTHLY HEALTH SEMINARS

Storz Pavilion, Rooms 1 & 2
Lunch served at noon; speaker begins
at 12:15 p.m. Event is free. Reserva-
tions required. Space is limited.

WALKING CLUBS

Omaha's Henry Doorly Zoo Walking Club

For more information, call
402-738-2038.
Meets on Friday mornings at 9 a.m.
Zoo membership required.

Lauritzen Garden Walkers

Walkers meet every Tuesday at 8:30
a.m. from April through October.
Garden membership required or daily
admission fee for nonmembers. Meet
at the Visitor and Education Center.

SPECIAL OFFERINGS AT JOSLYN ART MUSEUM

Third Thursday Art Encounters Club

Enjoy docent-guided tours of Joslyn's
permanent collection and special
exhibitions on the third Thursday
of each month at 10:30 a.m. Free
admission with presentation of
your Health and Wellness Club
membership card.

Visualizing Literature Book Club

Meets four times annually from
10 a.m. to noon in the Joslyn Art
Museum conference room. Free
admission with presentation of
your Health and Wellness Club
membership card.

Volunteer Opportunities

Studies show those who volunteer are
happier and healthier. The Nebraska
Medical Center has many volunteer
opportunities. Application and mini-
mum time commitment are required.
Please call **800-922-0000** for more
information.

UNMC CENTER FOR HEALTHY LIVING

Health and Wellness Club members
are eligible to join the UNMC Center
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and Jones.

Vigor, Tone, and Mightier Bone

Instructor-led strength training, flexi-
bility and endurance class meets
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for Healthy Living.

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Improve your balance and reduce your
fall risk. Appropriate for all ages and
fitness levels. Call **800-922-0000** for
class times and locations.

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72nd Street
Fee is \$5.75; covers three games and
shoe rental. Reservations not required.



Interested in becoming a Health and Wellness Club member? Please call 800-922-0000.

Minimally Invasive Options for Heart Valve Repair Pose Less Risk

When the heart is working properly, it pumps blood through the organs, providing vital oxygen to the body. However, as we age, some parts of the heart's pumping system may start to wear down and cause the heart to lose its efficiency.

In some people, the aortic or mitral heart valves stop closing properly between contractions as they reach their late 50s and into their 70s. This is called a prolapsing valve. When this happens to the mitral valve, blood may leak backward through the valve—a condition called mitral regurgitation. If just a small amount of blood leaks back into the atrium, most people will not need treatment. However, more severe cases can prevent you from receiving the vital blood supply you need. If you experience shortness of breath, fatigue, lightheadedness or a cough, you may need surgery to fix the valve.

While not as common, some people are born with a leaking valve. While most of these people will never require treatment or changes in lifestyle, approximately 10 percent will develop a severely dysfunctional valve and require surgery by the time they are middle-aged or older adults. If left untreated, the heart will continue to weaken and can lead to heart failure. It can also lead to serious arrhythmia.

In the past, traditional open-heart surgery was the only solution for a leaky valve. The Nebraska Medical Center

now offers a minimally invasive approach to heart valve surgery that poses less risk to the patient, is safer and results in less discomfort and a shorter recovery time for the patient. According to Mohammed Quader, MD, a thoracic cardiovascular surgeon at The Nebraska Medical Center, the minimally invasive procedure causes less tissue trauma and blood loss and therefore reduces the need for a blood transfusion. It also offers cosmetic benefits since the incision is much smaller. The procedure is not commonly performed at most medical centers because of the specialized instruments and training required.

Dr. Quader performs both a heart valve repair or replacement procedure depending on the condition of the current valve. Heart valve repair preserves your valve, which is a superior choice compared to replacement, he says. Heart valve replacement involves replacing the damaged valve with an artificial (prosthetic) valve. Dr. Quader, who has performed more than 300 minimally invasive heart valve procedures over the past seven years, says the procedure provides similar or better results than the traditional open-heart procedure.

"The success of minimally invasive valve surgery lies in proper patient selection and a focus on safety," says Dr. Quader. "Valve repair is always preferable to replacement." ■

When to Seek Help for Life-Threatening Arrhythmias

Arrhythmia is a condition that is on the rise. For some, arrhythmia will never present a problem. However, for others, unmanaged arrhythmia can lead to cardiac complications or even cardiac death. Symptoms that may signal the need for treatment include shortness of breath or fainting. Treatment may also be needed if the condition is putting a patient at risk for more serious cardiac complications.

Atrial fibrillation, the most common form of arrhythmia, increases in individuals older than age 60. It is the most difficult arrhythmia to treat because it is more erratic and often occurs from multiple sources in the heart. The cardiology team at The Nebraska Medical Center is a leader in the diagnosis and treatment of arrhythmias.

The team uses an advanced electrical mapping system to determine the origin of complex arrhythmias like atrial fibrillation. The three-dimensional mapping system provides doctors a multidimensional visual map of the heart, allowing them to pinpoint the origin of an arrhythmia with extreme precision.

Once identified, doctors may then prescribe medications. If these are not effective, doctors can treat the arrhythmia with cryoablation or radiofrequency catheter ablation that work by destroying the small spot of heart tissue responsible for the arrhythmia. The Nebraska Medical Center has been a leader in both of these surgery options. Radiofrequency catheter ablation uses heat to burn tissue near the source of the arrhythmia and is preferred for larger treatment areas. Cryoablation uses a freezing method to disable arrhythmias and provides more precision in treating the lesion. Arrhythmia patients who cannot be treated with these methods may be candidates for a pacemaker or an implantable cardiac defibrillator.



Live a Full Life!

An abnormal heart rhythm can be frightening, but you can still live a full life. Learn more about symptoms and treatment options with our FREE brochure, *Common Arrhythmias*. To order a copy, please call **800-922-0000**. Supplies are limited, so call today!

FREE DVD!

To learn more about arrhythmias, request a free DVD at www.NebraskaMed.com/heart/dvd.





The **Medical Home** Improves Access to Health Care

Stay Active This Fall!
Take a stroll with The Walking Club
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mornings at 9 a.m. To learn more,
call us at 402-738-2038.

Same-day appointments, extended office hours, online physician evaluations and a greater emphasis on preventive care. A family practice group at The Nebraska Medical Center hopes to improve both the quality and access to your health care by changing what has traditionally been called the doctor's office to the "medical home."

Ultimately, the medical home will strengthen the role of the family practitioner and reduce duplication by allowing your family doctor to maintain all your medical records and coordinate all care with specialists.

The primary difference, says Donald Darst, MD, an internist who recently reorganized his practice as a medical home, is that the medical home promotes a team approach to care. The medical home concept includes not just doctors and nurses but also other health care providers like a pharmacist, psychiatrist, dietitian, social worker and physical therapist. When patients see their doctor, they may also see other health care providers who are involved in their care. Dr. Darst's office currently includes nurses and physician assistants who assist in seeing patients and may eventually expand to other health care providers.

Having a team that is involved in a patient's care helps free up some of the doctor's time, thus improving access to your doctor in emergency situations. "We have a big emphasis on same-day appointments for acute problems," says Dr. Darst. His office also provides online physician consultations. A patient has to be seen in the office at least once before participating in online appointments. Once that relationship has been established, he or she can log on to www.MRHSomaha.com to complete an online questionnaire. Your doctor will then review the interview within 24 hours, provide a prognosis via e-mail or recommend a physical exam for further evaluation, if needed.

Dr. Darst says the medical home concept also places a greater emphasis on preventive health care. "Traditionally, healthy individuals are less likely to keep up with preventive health care screenings because they go to the doctor less often," explains Dr. Darst. "The goal of our office is to be more proactive and reach out to patients when preventive screenings are due." Dr. Darst has offices at Clarkson West Medical Center at 144th and Center Streets and at the North Tower Doctors



Quality and

Building on 4242 Farnam Street. His partners include family practitioners Marge Bisenius, DO; Kenneth Blad, MD; Phyllis Byrd, MD; Rebecca Lancaster, MD; Gordon Moshman, MD; and Toby Shinaut, MD.

"In the end, the patient is the winner," says Dr. Darst. "They will be able to get in to see their doctor when they need to, and we will be putting a greater emphasis on prevention to keep them healthy and to prevent little problems from becoming big ones." ■

Need a Doctor?

To schedule an appointment with one of our doctors who practice the medical home care concept, call **800-922-0000**.



q & a...

Do I need to get vaccinated for the H1N1 vaccine this year, and will it be in short supply again?

Mark Rupp, MD, infectious disease specialist

This year, the H1N1 virus will be included in the seasonal influenza vaccine, thus providing you protection for both the seasonal and H1N1 influenza viruses. You will need to get vaccinated again this year even if you received the vaccine last year. The vaccine is recommended for everyone ages 6 months and older who does not want to get the flu this season. In addition, some individuals are particularly prone to complications of influenza infection, and it is strongly recommended that they be vaccinated. These individuals include persons ages 6 months to 4 years and ages 50 and older; those receiving long-term aspirin therapy; pregnant women; persons with chronic pulmonary (including asthma), cardiovascular renal, hepatic, cognitive, neurologic/neuromuscular, hematological or metabolic disorders (including diabetes mellitus); those who are immunosuppressed; residents of nursing homes and other long-term care facilities; health care personnel; household contacts and caregivers of children ages 5 and younger and of adults ages 50 and older; or those in contact with persons with medical conditions that put them at higher risk for severe complications from influenza.

Individuals between ages 6 months and 9 years who are getting the vaccine for the first time will need to get the vaccine twice a month apart. The vaccine should be available beginning in September and is expected to be in ample supply this season. While the best time to receive it is in the fall, you can still get the vaccine as long as influenza is occurring in the community (usually through March or April). The vaccine is safe and effective and is the best way to protect yourself from seasonal and pandemic H1N1 influenza virus.

Is the use of the HCG hormone safe and effective?

Jeffrey Passer, MD, internal medicine specialist

HCG is a natural hormone that is produced in abundance during pregnancy and enhances the body's ability to mobilize fat. HCG, combined with a low-calorie, high-protein diet, triggers the body to use stored fat for energy, helping to eliminate excess fat reserves as opposed to muscle or bone mass. It has no side effects. HCG was first used as a weight-loss enhancer through needle injections in the 1950s. It has regained favor in the last couple of years when it was introduced in an oral form. I've been using the HCG hormone with my patients for the last three years and have seen significant success. About 80 percent of individuals reach their goal weight in about a year. Maintaining this weight loss requires patients to make long-lasting lifestyle changes that include healthy diet changes and regular exercise. Approximately 30 percent of my patients are able to maintain their weight loss after HCG is discontinued.

Retraction: The Q & A about tattoo removal in the Summer issue should have been attributed to Jason Papenfuss, MD, dermatologist, rather than Rebecca Lancaster, MD, family practitioner.

Need a physician referral?
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www.NebraskaMed.com.



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Are Energy Drinks All They Claim to Be?

With a plethora of energy and sports drinks on the market, sometimes it's difficult to know what to reach for to rehydrate and energize a tired body. Energy drinks boast claims from boosting energy, sharpening alertness, lowering reaction time, improving concentration and increasing stamina. But do they really give you that extra edge and, even more importantly, are they safe?

Medical nutritionist Brenda Bishop recommends using energy drinks with caution. "Most energy drinks are packed with sugar and caffeine, and many include unusual ingredients and stimulants which aren't regulated," she says.

For instance, there's no conclusive evidence on the effectiveness and safety of consuming large amounts of three popular ingredients in energy drinks—the amino acids taurine and carnitine and the herbal supplement Panax ginseng. While some studies suggest taurine supplementation may improve athletic performance, more studies need to be done. Dangerous drug interactions are also possible with herbal ingredients.

Large amounts of caffeine are also a concern. Energy drinks aren't

required to list how much caffeine a bottle contains, so the consumer is often unaware of exact caffeine amounts. One researcher tested 10 popular energy drinks and found some had up to 141 mg of caffeine—the equivalent of nearly four cans of cola or 1.5 cups of coffee. While caffeine can improve mental alertness, too much caffeine can increase your heart rate and blood pressure, interrupt sleep and cause nervousness and irritability. Regular use of these high-caffeine drinks can also cause withdrawal symptoms if you skip a day.

Another increasingly popular trend is to combine energy drinks with alcohol. Not a good idea, says Bishop. The combination can make you feel less intoxicated than you really are and lead you to believe you are sober enough to drive.

So what is the best choice to reach for when you're hot and thirsty and need to rehydrate? "Water is still the best hydrator and least expensive option available," says Bishop.

For individuals exercising at a moderate-to-high level for more than an hour, a sports drink like Gatorade may help replenish nutrients like



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potassium and sodium. To ensure peak performance, don't depend on energy drinks and supplements, says Bishop. Instead, focus on eating a healthy diet, exercising regularly and getting an adequate amount of sleep. ■

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