



ADVANCING

SUMMER 2018

HEALTH

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**BELLEVUE
MEDICAL CENTER
EDITION**

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LEADERSHIP UPDATE



Welcome to the summer issue of our Bellevue newsletter, *Advancing Health*. Summer is a time of growth and renewal — and we've been focused on both at Bellevue.

In terms of growth, we've continued to develop our Multidisciplinary Breast Cancer Clinic. The clinic provides a very personalized and comprehensive approach to breast cancer care based on a patient's individual needs and wishes, as well as the

expertise and careful assessment of a team of breast cancer specialists. A multidisciplinary team of experts helps each patient navigate through the many decisions available in breast cancer treatment, and works closely with each patient to provide a very personalized and patient-directed care experience.

Our primary care clinic is also a strong foundation at Bellevue. The National Committee for Quality Assurance (NCQA) has recognized 14 Nebraska Medicine primary care clinics as level III patient-centered medical homes, the highest level of quality. The patient-centered medical home (PCMH) model of care emphasizes the use of systematic, patient-centered, coordinated care that supports access, communication and patient involvement. It allows our patients to not just see a primary care provider at each visit, but to receive care from an entire team.

Healing is one of our organizational values — reflecting who we are and why we're here. While we usually think about healing in terms of caring for patients, we also can think about healing in terms of our community and the earth. April 22 was Earth Day, and I am reminded that our facility was built incorporating numerous green design elements, resulting in reduced energy consumption and water conservation. This makes the hospital 20 percent more energy efficient than a conventional hospital and helped us achieve Leadership in Energy and Environmental Design (LEED®) certification. LEED is a rating system devised by the United States Green Building Council (USGBC) to evaluate the environmental performance of a building and encourage transformation toward sustainable design.

This summer, I would encourage you to get involved with the community of Bellevue to ensure a greener, cleaner, more beautiful community exemplified by healthy environmental practices and lifestyles.

Sincerely,

Matt Pospisil

Vice President

Nebraska Medicine — Bellevue

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Advancing Medicine Through Research: How You Can Get Involved

Research is critical to the advancement of medicine. Without it, new therapies, treatments and even cures would not be possible.

“Research is an integral part of the Nebraska Medicine Health Network and its partner, the University of Nebraska Medical Center (UNMC),” says Christopher Kratochvil, MD, vice president of research at Nebraska Medicine and associate vice chancellor for clinical research at UNMC. “This partnership allows our clinicians to offer experimental and cutting-edge treatments that otherwise would not be available to our patients.

“It is part of our infrastructure,” adds Dr. Kratochvil. “With our new Fred & Pamela Buffett Cancer Center, our

► From left to right, Chin Lin, MD, PhD, radiation oncologist, Michael Hollingsworth, PhD, researcher, and Surinder Batra, PhD, researcher, discuss new clinical trial findings.

clinicians and researchers work in close proximity, which allows them to collaborate on studies to a greater degree and ultimately benefits the patient. Because many of our doctors are also involved in research, they have significant expertise and knowledge regarding the diseases they study. They may be the ones caring for patients as well as developing new therapies and protocols associated with treatment.”

Medical research must undergo several rigorous stages of study before a new discovery can make it to the bedside. Our clinicians and scientists are involved at each critical stage, beginning with basic science research. This involves research done in labs, such as the study of cells and microorganisms and their effect on the human body.

Translational research, also commonly referred to as bench-to-bedside research, involves applying

the discoveries found in the laboratory to the development of clinical trials that can be used in humans to determine the effectiveness of a medical strategy, treatment or device. Clinical trials involve multiple phases of study to determine the effectiveness and safety of a discovery. Each phase attempts to answer scientific questions and tries to find better ways to prevent, screen for, diagnose or treat a disease. Once a treatment has adequate safety and efficacy data, it can be submitted to the Food and Drug Administration for review and potential approval.

Patients of the Nebraska Medicine Health Network can participate in research in a number of ways, says Dr. Kratochvil. First, when you sign your consent form for treatment, you can give permission for any leftover blood samples from routine blood tests to be used for research.

You can also agree to be contacted to learn more about clinical trials you might qualify for based on your history.

“Research, education and extraordinary patient care are all part of our core mission at Nebraska Medicine and UNMC, and each plays an integral role in allowing us to be a leading academic medical center and a significant resource to our community, both locally and on a global scale,” says Dr. Kratochvil. ❤️

To learn more about clinical trials available to you, visit NebraskaMed.com/Clinical-trials.



Sinus Pain: When to Seek Medical Help

Sinus problems are one of the most common reasons people go to a doctor. Symptoms of a sinus infection include persistent nasal drainage that has turned a gray-yellow or green hue, a loss of smell, facial pain or pressure, a productive cough or fever and an inability to breathe through your nose.

"If your symptoms continue past 10 days, you should see your doctor or an ENT specialist," says Christie Barnes, MD, Nebraska Medicine ENT (ear, nose and throat) specialist. "Most cases of chronic sinus problems can be managed medically. However, in about a quarter of cases, people will need surgery to resolve their issues."



Need an ENT? To schedule an appointment with one of our ENT specialists, call **800.922.0000**.

The most common types of sinus surgery include two minimally invasive procedures called endoscopic sinus surgery and balloon sinuplasty. Neither requires incisions. Endoscopic sinus surgery involves opening the blocked sinuses with small instruments that go through the nostrils. The instruments can be used to remove tissue, shave away a polyp that's causing nasal blockage, or enlarge a narrow sinus opening to promote drainage.

If the blockage is less severe, you may be a candidate for balloon sinuplasty, which involves using a balloon to dilate the sinus openings, notes Dr. Barnes. With both procedures, you can usually go home the same day and back to work in a week.



10 Lifestyle Changes Reduce Your Risk for Stroke

Every year, 800,000 people suffer from a stroke. Recent research found that 9 in 10 strokes could be prevented by modifying these 10 controllable risk factors.

- 1. Blood pressure.** Stroke risk is four to six times higher in those with high blood pressure.
- 2. Exercise.** Working out keeps your blood flowing and your heart strong. Aim for 30 minutes a day, five days a week.
- 3. Cholesterol.** High levels of LDL, or "bad" cholesterol, and low levels of HDL, or "good" cholesterol, cause plaque buildup, which can clog arteries and lead to heart disease and stroke.
- 4. Diet.** A Mediterranean diet, which is rich in fish and fruits, can help lower your stroke risk.
- 5. Smoking.** All forms of tobacco can cause blockages in the artery leading to the brain.
- 6. Atrial fibrillation.** Unmanaged atrial fibrillation, a type of irregular heartbeat, can cause clots, leading to a stroke.
- 7. Diabetes.** People with diabetes have 1.5 times the risk for stroke compared to those without the disease.
- 8. Obesity.** Losing as little as 10 pounds can reduce stroke risk.
- 9. Drinking alcohol.** Binge drinking increases bleeding risk. Limit alcohol to one drink per day for women and two drinks for men.
- 10. Stress.** Mental stress can damage artery walls.

► Did You Know?

The Nebraska Medical Center is the only Nebraska hospital certified as a Comprehensive Stroke Center by The Joint Commission. This means we can care for the most complex stroke cases 24/7 with a highly trained staff that specializes in comprehensive stroke care. For more information, go to NebraskaMed.com/Stroke.



Unmatched Trauma Care

When you or someone you love is injured, the Nebraska Medicine Health Network has the care you need. While most hospitals care for many types of injuries, ranging from minor to severe, only the Nebraska Medical Center is designated as a Level I Trauma Center.

The Nebraska Medical Center has received national verification by the American College of Surgeons as a Level I Trauma Center, the only hospital in the state, recognizing the Trauma Center's dedication to providing optimal care for injured patients. It therefore provides not only the hospital resources necessary for trauma care, but also the entire spectrum of care to address the needs of all injured patients.

Nebraska Medicine has 10 trauma surgeons who are double board certified in general trauma and surgical critical care. A Level I Trauma Center has an attending trauma surgeon in the building 24/7 who sees patients within 15 minutes of arrival. The Trauma Center is supported by more than 50 specialty

physicians who are surgical experts in trauma, neurosurgery, reconstructive, thoracic, vascular, orthopaedics, oral maxillofacial, urology, hyperbaric oxygen therapy, otolaryngology (ear, nose and throat), and ophthalmology. The hospital also has a dozen physicians certified in pediatric critical care and pediatric surgery.

"Trauma affects nearly everyone," says P.J. Schenarts, MD, Nebraska Medicine trauma surgeon and trauma medical director. "It's the leading killer of Nebraskans under the age of 44 and the third leading cause of death in our older citizens. But research shows that treatment at a Level I Trauma Center reduces the risk of death by 25 percent."



New Primary Care Clinic Opens in Elkhorn

Nebraska Medicine Health Network is bringing family health care closer to home. With our newest clinic in Elkhorn, Nebraska, we now have 14 locations throughout the Omaha area and one location in Grand Island, Nebraska.

Nebraska Medicine primary care clinics follow a patient-centered medical home model of care. This is a team-based approach to care in which a primary care team, consisting of primary care doctors, advanced practice nurses, physician assistants, nurses, pharmacists, nutritionists, social workers, educators and care coordinators, works in partnership with you and your family members to provide medical care for acute illnesses, chronic disease management and preventive health care.

Our primary care clinics have been recognized for providing the highest level of quality possible by the National Committee for Quality Assurance (NCOA), a private, nonprofit organization dedicated to improving health care quality.



Find a Doctor in Your Neighborhood!

Nebraska Medicine — Elkhorn is located at 20310 Blue Sage Parkway. To schedule an appointment, call 800.922.0000 or visit us online at NebraskaMed.com/Primarycare.

Blood Cancer Patients Given New Hope for a Cure

■ After beating cancer last year, Nick Howe and his wife, Rachel, look forward to a long and healthy life with their new baby.



Nick Howe was running out of options. Diagnosed with lymphoma at age 31, he soon found out he was in for the battle of his life.

"When I saw the CAT scan, I couldn't believe it," says Howe. "It was everywhere. It looked like I had run through a field of lymphoma."

Howe began treatment at the Fred & Pamela Buffett Cancer Center, where he underwent a five-month regimen of chemotherapy. This was followed by immunotherapy and then an autologous (using his own cells) stem cell transplant. Still, traces of the cancer continued to show up in scans. His last chance was an allogeneic transplant, which meant he needed to find a donor match. But before they could proceed, Howe's doctor, Philip Bierman, MD, Nebraska Medicine hematologist and medical oncologist, presented another option that had just become available. A promising new therapy for people with certain recurring blood cancers had been doing so well in clinical trials that it had been fast-tracked by the Food and Drug Administration

for rapid submission and early approval. The Fred & Pamela Buffett Cancer Center, which has a nationally recognized lymphoma program that specializes in research and clinical trials, was one of a handful of centers in the country providing this new option through clinical trials. Called chimeric antigen receptor (CAR) T-cell therapy, it works by harnessing the body's own immune system to attack a tumor.

Howe completed the therapy last November and remembers the first call he received from Dr. Bierman several weeks later. "He was ecstatic," recalls Howe. "He said, 'Your scan looks marvelous. There is no sign of cancer.'"

One hundred days later, there was more good news from new scan results: still no signs of cancer.

The CAR T-cell therapy is now available here for all approved non-Hodgkin lymphoma and pediatric/

"This new therapy allows us to take the patient's own T cells and restimulate them to fight their own cancer."

Julie M. Vose, MD, Nebraska Medicine hematologist and medical oncologist

young adult acute lymphoblastic leukemia patients.

"We are really excited about offering this new therapy to our patients," says Matthew Lunning, DO, Nebraska Medicine hematologist and medical oncologist. "Nationwide, patients with non-Hodgkin lymphoma who have received this therapy have had a

complete remission rate of nearly 40 percent after six months. This is significant, as these are patients who have failed other available therapies."

The therapy works by using the body's own T cells, which are white blood cells that help our bodies fight infection and cancer. In some patients

with lymphomas and leukemias, their T cells don't recognize the cancer as being abnormal, which allows the cancers to grow.

"This new therapy allows us to take the patient's own T cells outside the body and restimulate them to fight their own cancer," explains Julie M. Vose, MD, Nebraska Medicine hematologist and medical oncologist, chief of the Division of Hematology/Oncology at the University of Nebraska Medical Center (UNMC).

During the first phase, the patient's T cells are collected in an outpatient procedure and sent to a lab where they are genetically modified and grown until there are millions of them. During this time, the patient also receives chemotherapy. The modified CAR T cells are then infused into the patient, where they multiply, attack and kill the cancerous cells. The CAR T cells, which remain in the body long after the infusion has been completed, help



prevent the lymphoma or leukemia from relapsing.

"The potential for this new therapy is very promising," says Dr. Lunning. "We hope to be able to expand it to the treatment of other cancers, like multiple myeloma and solid tumors."

Today, Howe is cancer-free and feeling excited and hopeful about the future. "This is such an emotional time," he says. "First, we didn't know if we'd be able to have children. And until recently, I didn't even know if I'd still be here today. I'm so excited to be a new father and to experience this new stage of my life with my wife, Rachel. I have Dr. Bierman and his staff to thank. I trusted him wholeheartedly throughout this process." ♥

► Schedule an Appointment!

To find out whether you are a candidate for this new therapy, call **402.559.5600** to schedule an appointment.

Experience Matters

There are many reasons to choose the Nebraska Medicine Cancer Network for your care. Here are a few:

- More than 200 world-leading specialists and researchers in cancer care that span multiple specialties, ensuring that you get the most advanced and up-to-date treatments and therapies
- The cancer network has four locations throughout the Omaha area and Southwest Iowa, including the Fred & Pamela Buffett Cancer Center, Bellevue, Village Pointe and Shenandoah, Iowa
- We are the only National Cancer Institute cancer center in Nebraska; in addition to being a member of the National Comprehensive Cancer Network, a nonprofit alliance of 25 of the world's leading cancer centers devoted to patient care, research and education

Breakthrough Treatm

After suffering five strokes in a matter of months, Tom Keeling and his wife, Sandy, began to wonder whether life would ever be normal again.

The 65-year-old Keeling suffered from a type of irregular heartbeat called atrial fibrillation, which can lead to the formation of dangerous clots that increase the risk for a stroke. Keeling's condition was doubly serious because doctors were also having difficulty regulating his blood thinners, which are critical to helping reduce clot formation.

Keeling recently became one of the first handful of people at the Nebraska

Medical Center to receive an implant device called the WATCHMAN™, an alternative to long-term blood thinners for people with atrial fibrillation. Since the device was implanted several months ago, Keeling's strokes have come to a halt.

The Nebraska Medical Center is the first hospital in Omaha to offer patients the WATCHMAN™ implant. The device reduces the risk of stroke by closing off an area of the heart called the left atrial appendage. This helps keep harmful blood clots from forming in the appendage, entering the bloodstream and potentially causing a stroke. Over

People with atrial fibrillation are five times more likely to have a stroke than the general population.

National Stroke Association

time, patients should also be able to stop taking blood thinners.

"This new device provides doctors with a breakthrough stroke risk reduction option for patients," says Andrew Goldsweig, MD, Nebraska



■ Tom Keeling and his wife, Sandy, celebrate after a successful surgery reduced Tom's stroke risk.

ent for Stroke Patients

Medicine interventional cardiologist. “Blood thinners are one of the biggest challenges for managing people with atrial fibrillation. Although patients need blood thinners to help prevent clot formation, blood thinners can cause bleeding as well as other adverse reactions or interactions with other medications. Forty-five days after the WATCHMAN™ is implanted, patients should be able to stop taking blood thinners while receiving stroke protection from the device that is equivalent to a full-dose blood thinner.”

Atrial fibrillation is the most common type of arrhythmia. It increases with age and occurs in as many as 1 in 10 people older than age 80. As the disease progresses, it can significantly increase your risk for a stroke and congestive heart failure. In fact, people with atrial fibrillation are five times more likely to have a stroke than the general population.

To implant the device, the doctor inserts a small needle in the upper leg, followed by a narrow tube, similar to a standard stent procedure. The doctor then guides the device into the left atrial appendage of the heart. Patients commonly stay in the hospital overnight and leave the next day.



► Dr. Andrew Goldsweig, interventional cardiologist, performs the WATCHMAN™ procedure on patient Tom Keeling.

Nebraska Medicine has a specialized clinic to evaluate people with atrial fibrillation to determine whether the WATCHMAN™ device is the right course of treatment.

“This gives us another tool to elevate our already high level of cardiac care,” says Jessica Delaney, MD, Nebraska Medicine cardiac electrophysiologist.

“We are both looking forward to getting back to a life of normalcy,” says Sandy. Since Tom’s surgery, Sandy says

planning a cruise is back on the bucket list. “We are so grateful for all of the care we’ve received at the Nebraska Medical Center. It was a scary time for us, but everyone was so nice and put us at ease. The care was wonderful.” ♥

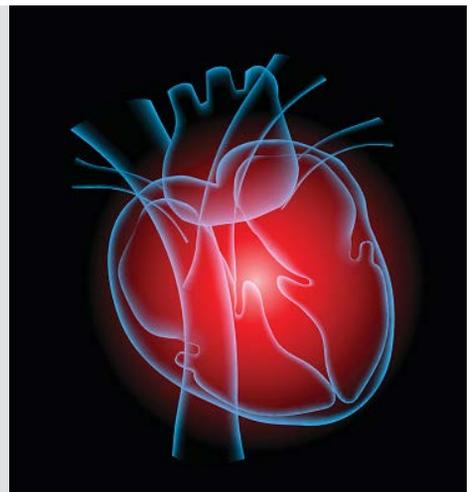
► Do You Have Arrhythmia?

Call **800.922.0000** to schedule an appointment with one of our specialists for a complete evaluation.

► State-of-the-Art Heart and Vascular Care

When you visit the Nebraska Medicine Heart and Vascular Network, you have access to more than 80 heart and vascular specialists who offer the most advanced and innovative procedures for heart care in the region. Many of our surgeries are performed using the latest in minimally invasive techniques, meaning fewer open heart surgeries

and less downtime for you. We are the only heart transplant center in Nebraska, and we have one of the largest heart failure and ventricular assist device programs in the nation. We also have cardiologists throughout the Omaha area and Denison, Iowa, who who specialize in heart disease prevention to help keep your heart healthy.



Every Gift Counts

Walking down the halls of the Nebraska Medical Center, Amy Volk, Nebraska Medicine chief development officer and senior vice president for the University of Nebraska Foundation, often recalls the faces of people she can't forget. Their stories continue to linger.

One of those stories involves a family that came to the Nebraska Medical Center nearly 25 years ago. Their daughter needed a bone marrow transplant. Although she didn't survive, her parents were so grateful for the care she received that every year since her death, they have asked people not to give them any gifts for birthdays or anniversaries, but instead to donate to the University of Nebraska Medical Center's Division of Oncology and Hematology.

And people do. Over the years, gifts have arrived in small amounts — \$25 or \$50 at a time. Together, they combine in a big way to help other people, like clinicians, researchers, students, educators or other families.

"Walking down the hallways, it probably does speak to me differently because I know the people who made certain things happen," says Volk. "I get to experience the fruition of donors exploring their interests and then making a gift. And then I get to see the intense pride those donors have when their gift makes an impact.

"I describe my job as making others' dreams come true. It's making the dream come true of the donor as well as the leadership on campus, who have great vision and know what needs to be done and how private support can make a difference. So it's helping bring these two things together."



▶ Amy Volk,
Nebraska Medicine
chief development
officer and senior
vice president for
the University of
Nebraska Foundation

This spring, the University of Nebraska Foundation began managing fundraising for Nebraska Medicine. Volk leads this effort, in addition to leading fundraising for the University of Nebraska Medical Center. She joined the foundation in 1993, after serving as the director of UNMC Alumni Affairs for five years. She shares some insight into her job and how your donations, big or small, can make a difference.

What part of your job makes you most proud?

It is the integrity of doing what we tell our donors we will do. That takes a strong partnership with the campus leaders and their commitment to make the donor's dreams come true. I'm really proud to be a part of the important work that's impacting lives every day and working alongside passionate people who are committed to exceeding expectations every day.

How do private funds make a difference?

Private funds make a difference at every level. They help construct buildings like the Fred & Pamela Buffett Cancer Center; they help buy state-of-the-art equipment that allows us to develop new protocols or gets us enrolled in new clinical trials; and they help with new basic needs for patients who arrive and might be in crisis by providing housing, food transportation or personal items.

What kinds of gifts do you need most?

A donor can make a difference in any area they care about. Some options include: the Patient Assistance Fund, our Child Life program, which helps families understand the health care environment and develop age-appropriate ways to cope, or gifts to advance research and innovation to improve clinical care. ♥

» Help make a difference. Learn more at NebraskaMed.com/Giving.

An interest in medicine was shaped early on for Michael Lankhorst, MD, pain medicine specialist.



With several family members in the medical field, Dr. Lankhorst's exposure to medicine began during his childhood and adolescent years. By the time he reached college, medicine seemed

like a natural career path.

His interest in pain medicine was sparked as a medical student while doing an anesthesiology rotation that included work at a pain clinic. "I really like the patient interaction and the reward you get from helping people in pain," he says.

Dr. Lankhorst works with a team of Nebraska Medicine pain medicine specialists who see patients for all types of pain problems including acute or chronic, and pain associated with many types of conditions such as headaches, back pain, fibromyalgia, arthritis, post-strokes or cancer pain. The clinic uses a variety of pain therapies that not only address the pain problem itself, but also focus on the underlying conditions that lead to or contribute to pain.

Many people suffer for years with chronic pain because they haven't received the right treatment or they've been led to believe it is not treatable, he says. "It's exciting to offer this service to the Bellevue community to help people find relief from their pain so they can get back to enjoying their active lifestyle," says Dr. Lankhorst. "I believe it's important to not only understand what hurts, but what the pain is preventing a patient from doing."

Dr. Lankhorst grew up in Sioux Falls, South Dakota, and completed his residency training at the University of Nebraska Medical Center (UNMC) in Omaha, Nebraska. He came back to Omaha to join the staff at Nebraska Medicine after finishing his fellowship because of the comprehensive expertise of the pain medicine group, as well as the ability to work in an academic setting where he could help train future doctors.

Spending time with his wife and three children, who range in age from 1 to 7 years old, consumes most of Dr. Lankhorst's free time. He also likes to play recreational soccer and sneak in a round of golf when possible.

Why have blood pressure guidelines changed?

Shane Tsai, MD, cardiologist



High blood pressure, also known as hypertension, is often called "the silent killer." That's because patients with high blood pressure often have no symptoms, and can develop life-threatening complications before they are even diagnosed. Hypertension is the second leading cause of preventable heart disease and stroke deaths, behind only cigarette smoking.

Recently, the American Heart Association released new guidelines that lower the definition of hypertension, putting nearly half of all Americans into this category. Previously considered within normal range, a systolic blood pressure between 120 and 129 mmHg, and a diastolic blood pressure over 80mmHg, is now considered abnormal. Systolic blood pressures between 130 and 139 (and diastolic between 80 and 89) were previously called high normal (or prehypertension), but are now defined as stage 1 hypertension.

Changes were made due to the results of a large study, which revealed that individuals who maintained a systolic blood pressure less than 120 had fewer heart attacks and strokes, lower risk of kidney disease, and decreased mortality. In contrast, individuals with blood pressure 130-139/80-89 have double the risk of cardiovascular complications.

The new guidelines allow for earlier diagnosis and intervention, which can lower lifetime risk of stroke, heart attacks, congestive heart failure and death due to cardiovascular causes.

» To find a Bellevue physician, call 800.922.0000.

I feel fatigued and lethargic. Could it be my thyroid?

Jennifer Gibert, MD, endocrinologist

Hypothyroidism, which is caused by an underactive thyroid, can present with a myriad of vague symptoms. If you've not been



feeling well and you're not sure why, it's reasonable to have your thyroid checked.

Symptoms can include fatigue, weight gain, dry skin and hair, trouble concentrating, constipation and depression. Hypothyroidism occurs in about 10 percent of the population, tends to be hereditary, is three times more common in women than men and increases with age. If you have some of these symptoms and they continue to persist or worsen, you should be evaluated. It could be your thyroid.

Hypothyroidism can be diagnosed with a blood test, and can be managed with proper medications that will allow you to live a normal life. If you are worried about your thyroid, call to make an appointment at our Bellevue location.

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New Clinic Provides Management of Diabetes and Other Endocrine and Metabolism Disorders

Disorders of the endocrine system often require careful and lifelong management. The Diabetes, Endocrine and Metabolism Clinic at Nebraska Medicine — Bellevue brings comprehensive care for these disorders close to home.

The endocrine system glands produce and release hormones that impact many body functions, including the body's ability to change calories into energy to fuel cells and organs. Metabolic disorders involve conditions that affect the body's ability to metabolize or break down carbohydrates, protein and fats, which the body uses for energy. Endocrine and metabolic disorders include conditions like diabetes, hypothyroidism, osteoporosis, and adrenal and pituitary disorders.

The most common disorder of the endocrine system is diabetes.

"Diabetes is increasing in this country at an epidemic rate," says Padmaja Akkireddy, MBBS, endocrinologist at Nebraska Medicine — Bellevue. The Centers for Disease Control and Prevention (CDC) estimates that nearly 11.6 percent of the adult population in Nebraska has diabetes and another 30 percent or more has prediabetes — a condition in which blood sugars are higher than normal but not high enough to qualify as Type 2 diabetes.

"Diabetes is a chronic disease that needs ongoing medical management in order to prevent serious complications, such as heart disease, stroke, kidney

disease and nerve and eye problems," says Dr. Akkireddy. "Early intervention can also help prevent or reduce the risk of progression to Type 2 diabetes in people who have prediabetes."

The clinic combines comprehensive clinical care with education to help patients effectively control the disease. A diabetes clinical educator and dietitian develop a customized plan, including nutrition, exercise, self-management and self-monitoring.

All individuals ages 45 and older should be screened for diabetes every three years. High-risk individuals, including those of African-American, Hispanic, American Indian, Asian and Pacific Islander

descent, should receive annual screenings before the age of 45, as well as individuals with hypertension, obesity, high cholesterol, a family history of diabetes or a history of gestational diabetes.

Other common endocrine and metabolic disorders include osteoporosis, hypothyroidism, hyperthyroidism, adrenal insufficiency and pituitary disorders.

"There's typically no quick fix," says Dr. Akkireddy. "We help you get the right diagnosis and treatment and help you manage the disease through the long run." 

Need an Endocrine Specialist?
Call **800.922.0000** for an appointment.

 **Dr. Padmaja Akkireddy counsels a patient about diabetes management.**

