

March 2011

# Baylor Health

**GRAPEVINE EDITION**

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**REAL PATIENTS. REAL STORIES.**

## Surviving & Thriving

When Donna Witters Banks delivered her son, Owen, doctors delivered the bad news that she had colon cancer.

Learn the steps she took to be healthy and happy today. **PAGE 4**

 **BAYLOR**  
Regional Medical Center  
at Grapevine



**GET SCREENED!**  
A Baylor Grapevine patient learns the lifesaving benefits of a colonoscopy **page 2**



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Expanded imaging capabilities in Keller **page 3**

# Beating Colon Cancer

## Screening proves key in diagnosing disease for North Richland Hills resident

**E**rin Gates, 38, was concerned about some health symptoms for several years. She often felt cramping, and saw blood and mucus in her bowel movements. But her doctor assured her that her symptoms were due to hemorrhoids. When she moved to North Richland Hills in 2006 she changed doctors, and her new doctor recommended a colonoscopy. The diagnosis? Rectal cancer.

Gates was determined to fight the disease. “I had just had my son—he was 14 months old—and I said, ‘I’m not

leaving this world yet. I have too many things to do with my son.’” Radiation, chemotherapy and surgery have removed all detectable cancer without recurrence. However, the surgery left her with a permanent colostomy.

Today, Gates homeschools her son in his kindergarten curriculum, works in the children’s department at her church and sings in the choir.

Clifford Simmang, M.D., a colon and rectal surgeon on the medical staff at Baylor Regional Medical Center at Grapevine, says that cases like Gates’ point out the importance of getting symptoms checked. “Just because you’re young doesn’t mean it can’t be something bad,” he says.

### Virtual or Traditional?

While there are different screening tests for colon cancer, the gold standard is optical colonoscopy, Dr. Simmang says. With optical colonoscopy, if doctors find a polyp they can remove it at the same time, avoiding the need for a repeat procedure. These polyps are found in 15 percent of women and 20 percent of men in their initial colonoscopies.

The procedure is performed under sedation, so people are comfortable during the exam. Preparation involves cleaning out the colon with a liquid diet and purgatives the day before. He points out that the preparation is the same whether you choose virtual or traditional colonoscopy, and with virtual colonoscopy polyps can’t be removed when they are discovered. Also, he says that virtual colonoscopy has a higher false-positive/false-negative rate than traditional colonoscopy. ● *By Stephanie Thurrott*



## GET SCREENED Prevention Is the Best Medicine

Talk to your doctor to see if you should schedule a colonoscopy. For a referral to a physician on the Baylor Grapevine medical staff, call **1-800-4BAYLOR** or visit **FindDrRight.com**.

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 **BAYLOR**  
Regional Medical Center  
at Grapevine



SCHEDULE AN MRI  
**A Better View**

To schedule an appointment, call **817-329-2501** or learn more at **BaylorHealth.com/GrapevineImaging**.

# MRI Scans Now in Keller

Permanent MRI to offer easy and convenient appointments

In March, Baylor Grapevine added a permanent MRI to its offerings at Baylor Medical Plaza at Keller, making it more convenient for people in and around Keller to undergo these scans. “Before, we had mobile MRI one day a week on a limited schedule,” says Timothy Lambrecht, radiology manager at Baylor Grapevine. The new MRI is available Monday through Friday from 8 a.m. to 5 p.m., making it much easier to schedule appointments.

The 1.5 tesla closed magnet has a large opening and can accommodate people weighing up to 500 pounds, so it’s ideal for bariatric patients, people with claustrophobia and children. The table disconnects from the bore, so people in wheelchairs or on stretchers can more easily set up for their scans. The MRI in Keller offers all general body imaging as well as breast imaging. In addition, the machine’s image quality means some vascular scans can be performed without injections of contrast agents.

A dedicated, registered MRI technologist and radiologist are on-site to interpret exams and answer any

### IMAGING SERVICES IN KELLER

In addition to the new MRI, other services available in Keller include:

- **40-slice CT scanners**, which image the entire body, including the heart and vascular system.
- **Digital mammography**, which allows image manipulation to visualize possible lesions or cancers.
- **Nuclear medicine capabilities** including two nuclear medicine cameras and one nuclear stress lab.
- **X-ray**, with four new rooms that have advanced direct digital technology for good image quality in seconds.
- **Fluoroscopic X-ray**, which provides live, digital, video X-rays for gastrointestinal (GI) studies.
- **Bone densitometry**, for whole-body scans and fat-content analysis in minutes.
- **Ultrasound**, with whole-body, 4-D capability, and abdominal and vascular exams to detect abnormalities without using radiation.

questions, and neurological radiologists and musculoskeletal radiologists are available for questions in their specialties.

#### At Ease

Lambrecht says that because the center is located in a smaller community,

people can generally schedule their appointments the same day. A patient entertainment system allows people to hook up their MP3 players or watch DVDs during the scan. And, a conversation microphone allows them to talk to the technologist conducting the exam. ● *By Stephanie Thurrott*

# After the Diagnosis

By Stephanie Thurrott

Once the shock of hearing you have cancer wears off, take these 8 steps to prepare for the battle of your life

**W**hen Donna Witters Banks, 35, of Trophy Club, Texas, was delivering her son, Owen, by emergency c-section at Baylor Regional Medical Center at Grapevine, the last thing she expected to hear was that she had cancer. But after physicians gave her the news, she knew it was time to tackle the disease head-on. If you receive a cancer diagnosis, these tips can help guide you to the treatment process that's best for you.

## 1 GATHER INFORMATION

Treatment for cancer is evolving quickly. So, it helps to go to appointments with some basic understanding. Websites of the American Cancer Society ([cancer.org](http://cancer.org)) and the National Cancer Institute ([cancer.gov](http://cancer.gov)) can walk you through diagnosis and treatment recommendations. "When you know what to expect to hear from your care team, it can be empowering," says A. David McCollum, M.D., an oncologist on the medical staff at Baylor Charles A. Sammons Cancer Center at Baylor Dallas who treated Banks.

## 2 UNDERSTAND WHAT YOU'RE DEALING WITH

Sridevi Juvvadi, M.D., an oncologist on the medical staff at Baylor Medical Center at Irving, says, "Lots of patients don't understand what stage, what grade or what kind of cancer they have. Once they hear they need surgery, radiation and chemotherapy, it's too much for them." The solution? Bring two things with you to every appointment: a notebook and a friend or family member. That way, you can write down what your doctor says, and your friend can ask questions and help remember details.

## 3 CRUNCH THE NUMBERS

Many people have job and insurance concerns to deal with when they're facing a serious disease. Will you need time off for medical treatments? Is your job protected under the Family and Medical Leave Act? Will insurance copays or deductibles present a financial hardship? Talk to your doctor or your treatment center's financial services office if you expect to face financial difficulties. Sometimes, foundations and support organizations can help.

 **WATCH THE VIDEO**  
**Her Story**

Find out more about the decisions Donna Witters Banks faced when she was diagnosed with colon cancer. Watch her story at [BaylorHealth.com/HealthCast](http://BaylorHealth.com/HealthCast).



Owen is happy to have his mom, Donna Witters Banks, healthy again.

## 4 TALK TO YOUR DOCTOR ABOUT GENETIC TESTING

Some types of cancer, including breast, ovarian and gastrointestinal, run in families. C. Richard Boland, M.D., chief of gastroenterology and a physician on the medical staff at Baylor Dallas, says, “Familial syndromes become a big issue in terms of diagnostic considerations, outcome and followup for patients as well as for their children and siblings.” The Hereditary Gastrointestinal Cancer Risk Program at Baylor Dallas, in which Banks participated, offers genetic testing, and other cancer risk programs are available at various Baylor facilities.

## 5 WEIGH YOUR OPTIONS

After Banks’ diagnosis, some doctors advised a course of chemotherapy and radiation, followed by a final course of chemotherapy. Others whom she consulted recommended tackling the chemotherapy in its entirety first, followed by radiation. When questioned, both teams agreed that her outcome would likely be the same regardless of the sequence. She chose chemotherapy first, which she felt worked better for her schedule with a newborn, and allowed her a longer recovery period from initial surgery.

Support from her parents, Archie and Sarah, was key for Leslie Williams (center) while she battled breast cancer.

## 6 DO WHAT YOU NEED TO DO TO FEEL GOOD

Leslie Williams of Arlington was 41 when she was diagnosed with breast cancer. She learned the best techniques for putting on makeup when she lost her eyebrows and when she didn’t feel well. “It was important that I didn’t look the way I felt some days,” she says. “Looking good on the outside always made me feel better going through the process. I did not want to look like a typical cancer patient that people have pictured in their minds.” Banks felt the same. She made herself up as usual every day, even during daily radiation treatments.

## 7 TELL PEOPLE HOW THEY CAN HELP

Some people prefer to go through chemotherapy alone. Not Williams, who was treated at Baylor Irving. “I was never alone during chemo. I wanted somebody to go through it with me,” she says. And when she had surgery, she surrounded herself with family and friends in the hospital. She told her co-workers she was being treated for cancer. But she asked them not to treat her any differently. “I didn’t want people to feel bad for me, and it was good for them to be about business as usual,” she says.

## 8 DON’T FEEL PRESSURED

Banks said that when she had decisions to make regarding her treatment she wanted to make them quickly. “I was thinking, ‘I’ve got cancer. I want it gone,’” she says. But her doctors explained that taking a week or two to think about a major decision likely wouldn’t affect her prognosis. ●



 **FIND A SUPPORT GROUP**

**Don't Go Through It Alone**

Sometimes it helps to talk to others who are going through the same thing. To find a support group at a Baylor hospital near you, go to **BaylorHealth.com/CancerSupport**.



# Is It Something Serious?

If you have more than occasional digestive difficulties, seek help to tame your tummy troubles

By Amy Lynn Smith

There was a time when Dyanna Cornell accepted being sick to her stomach every day as a fact of her life. But when she reached the point of having 12 to 15 bowel movements and vomiting daily—resulting in a significant weight loss—the 38-year-old resident of Mesquite knew she had to take her problem more seriously.

After a thorough evaluation at Baylor University Medical Center at Dallas, Cornell was diagnosed with celiac disease. This inflammatory condition is caused by eating foods

## LISTEN TO YOUR STOMACH

Ever wondered why your stomach rumbles and grumbles?

“Those sounds are usually the process of digestion, as air, gas and digestive juices move through the intestines,” explains Elizabeth Odstrcil, M.D., a gastroenterologist on the medical staff at Baylor University Medical Center at Dallas.

The stomach and intestines contract during digestion and every 90 minutes or so as part of a regular “sweeping of the intestine,” she says. That also creates those rumbling noises, which can sometimes be the result of incomplete digestion of food.

### BETTER SAFE THAN SORRY

## Trust Your Gut Instincts

If you think something is just not quite right with your digestive system, trust your instincts and talk to your doctor. For a referral to a primary care physician or gastroenterologist on the medical staff at Baylor, call 1-800-4BAYLOR or visit [FindDrRight.com](http://FindDrRight.com).

containing gluten, such as wheat, barley and rye, which damages the lining of the small intestine and leads to various complications.

The treatment for celiac disease is to avoid foods with gluten. Working with a nutritionist, Cornell adopted a new

eating plan. She no longer gets sick to her stomach every day and has put back on the weight she'd lost.

“I feel 100 times better and I have tons more energy,” Cornell says. “Being diagnosed answered questions I’ve had for years, and now I know what to do to feel better.”

### What’s Normal and What’s Not?

Everyone has digestive discomfort on occasion, which is nothing to be concerned about. But certain symptoms point to a potentially more serious issue.

“If you’re having any changes in bowel habits, or if they’re associated with alarming symptoms like rectal bleeding, weight loss, tiredness or a skin rash, you need to see a doctor,” says Syed Oqail, M.D., a gastroenterologist on the medical staff at Baylor Medical Center at Carrollton.

According to Elizabeth Odstrcil, M.D., a gastroenterologist on the medical staff at Baylor Dallas, chronic abdominal pain, nausea, vomiting, bloating and gas could also be signs of a digestive problem.

### Digestive Diagnostics

Ongoing symptoms could be a sign of celiac disease or one of these other common digestive disorders, which all warrant treatment.

**CROHN’S DISEASE** A form of inflammatory bowel disease (IBD), Crohn’s is inflammation of the gastrointestinal tract that commonly affects the end of the small intestine and the beginning of the colon, says Dr. Odstrcil. The condition requires treatment with medication and, sometimes, surgery. Dietary modifications may also be prescribed.

**ULCERATIVE COLITIS** Another type of IBD, colitis strikes the large intestine or the lining of the colon. The treatment options are the same as those for Crohn’s.

**GLUTEN INTOLERANCE** Unlike celiac disease, gluten intolerance doesn’t cause damage—just discomfort such as bloating or nausea. A gluten-free diet resolves the issue.

**LACTOSE INTOLERANCE** Almost everyone will develop at least a slight intolerance to lactose (milk products) as they age. It’s caused when the body quits making lactase, an enzyme necessary to metabolize lactose. Treatment includes avoidance of all or some products containing lactose and, sometimes, taking a medication that contains lactase.

**FOOD ALLERGIES** Digestive issues such as gassy buildup or cramps can be caused by food allergies, says Dr. Oqail. Avoiding the offending foods will relieve the discomfort of mild food allergies.

To diagnose a digestive condition, doctors need as much information as you can provide about your symptoms and what you think may cause them.

“Don’t be scared to talk about what your stools look like or if bowel movements are bloody or painful,” Dr. Odstrcil says. “These are the things we need to know.”

### GO INTERACTIVE Learn More About Digestive Health

Visit [BaylorHealth.com/HealthCast](http://BaylorHealth.com/HealthCast) this month to take our food allergies quiz, get tips on eating if you have Crohn’s disease or another GI disorder, and listen to our podcast on avoiding indigestion. Plus, you’ll find a downloadable tip sheet with ideas for spring cleaning your diet.

# I Can't Lose!

Some reasons slimming down is difficult—and what you can do about it

**H**ave you been in and out of the gym and on and off diets? Does losing weight seem like a never-ending battle? You may have the best of intentions, but, unfortunately, there's no such thing as getting an A for effort on your bathroom scale. And if you're not losing, you're not alone.

"Obesity is an epidemic in the U.S.," says Anthony O'Connell, M.D., an obstetrician/gynecologist and bariatrician on the medical staff at Baylor Regional Medical Center at Plano. "It's a chronic condition with a high incidence of relapse and is an underlying factor in many cases of the most common causes of death."

## Internal Struggle

Why is it so hard to lose weight? You can blame physiology. Well, partly. "Humans didn't always have such easy access to food," Dr. O'Connell says. "And so our bodies are designed to hold on to excess calories."

But behavior is another part of the equation, and perhaps an even more important one. "The majority of weight problems

are caused by eating too much and not getting enough exercise," says Sina Matin, M.D., a surgeon and medical director of the Weight Loss Surgery Center at Baylor Regional Medical Center at Grapevine.

And for people who are morbidly obese, losing weight can be an even greater challenge. "Your body decreases metabolism and increases hunger, making it more difficult to lose weight," says Gregory S. Barnes, M.D., a surgeon and medical director of Weight Loss Surgery at Baylor Medical Center at Southwest Fort Worth. "Plus, you have a decreased tolerance for exercise."

## Slimming Solutions

It's clear that preventing weight gain is much easier than losing weight later. So start making healthy choices today. Stick to a meal plan rich in fruit, vegetables and whole grains. And get at least 30 minutes of exercise five or more days per week, recommends Dr. Matin.

If you are obese and have a history of not being able to lose weight or keep it off, surgery may be a solution. "Surgery has the highest percentage cure rate and the highest percentage of weight loss," Dr. Barnes says.

But no solution is a magic bullet, so be patient, recommends Dr. O'Connell. "You didn't gain weight overnight, and you're not going to lose it overnight either. It will take some time." ●  
*By Shelley Flannery*



  **EXPLORE YOUR OPTIONS**

## Lose It— for Good

To find out if you are a candidate for weight loss surgery, watch videos of patient success stories or calculate your BMI, visit **BaylorHealth.com/WeightLoss** or call **1-800-4BAYLOR** for a referral to a bariatric specialist on the medical staff at Baylor.





# Studying Solutions to Side Effects

**Baylor participates in anti-rejection drug trial for transplant patients**

Patients who have a kidney transplant nearly always need to take anti-rejection drugs for the rest of their lives. These drugs are essential, but can cause significant side effects such as bone and muscle weakness, high blood pressure, nausea, vomiting, diarrhea and even kidney dysfunction.

But a new anti-rejection drug might do the job with fewer side effects, and researchers at Baylor University Medical Center at Dallas are part of an eight-center study to evaluate the medication.

When a kidney is transplanted from one person to another, cells in the recipient's body fight what's perceived as a foreign invader, causing the body to reject the organ. Currently available anti-rejection drugs block the body's rejection response, but the side effects can be uncomfortable for patients or even toxic to their kidneys.

"Ideally, what we'd like to see with the drug Baylor is studying is a rejection and kidney survival rate that's equal to or better than today's standard, along with lower toxicity to the kidney and fewer side effects," says Larry B. Melton, M.D., Ph.D., medical director of the Kidney/Pancreas Transplant Program at Baylor Dallas and a transplant nephrologist on the medical staff there.

The FDA-approved study is currently in Phase I, which is designed to look for adverse effects and evaluate dose tolerance in patients who agree to participate.

In September 2010, Baylor entered the first patient into this phase of the study, which is expected to last about 18 months. The data will then be analyzed before Phase II is designed and approved by the FDA. According to Dr. Melton, it could be six to 10 years before the drug is approved for routine use.

Baylor, which was involved in the studies of many of the anti-rejection drugs available today, has more than 25 years of experience working with transplant patients in clinical trials.

"These patients are helping Baylor blaze the trail for getting these drugs approved," says Dr. Melton, "so we can use them in future patients and help improve outcomes in transplantation." ● *By Amy Lynn Smith*

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**ADVANCING MEDICINE**  
**A Range of Research**

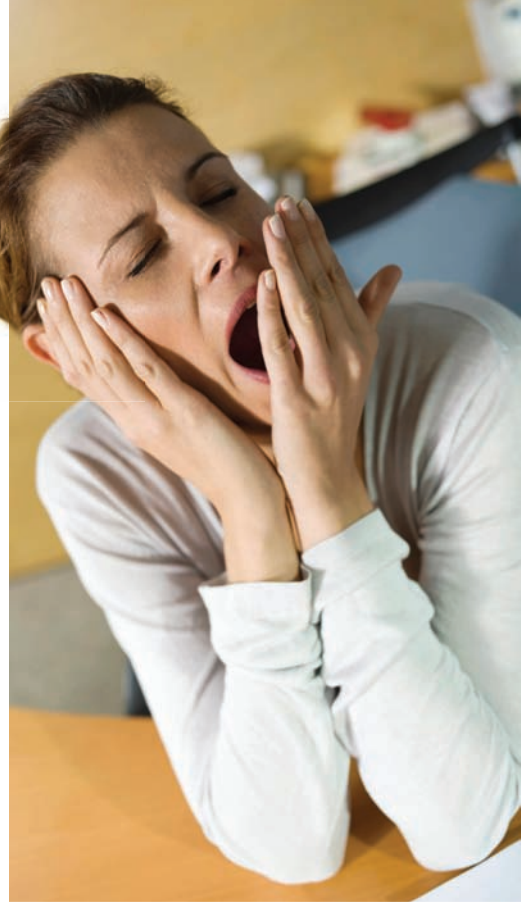
Although the anti-rejection drug trial is not open for enrollment, you can learn more about other trials at Baylor that are seeking participants at [BaylorHealth.com/AdvancingMedicine](http://BaylorHealth.com/AdvancingMedicine).

# Is Your Body Trying to Tell You Something?

5 symptoms you should never ignore

*“I don’t have time to go to the doctor.”  
“I’m sure it’s nothing.”  
“It’ll go away.”*

If you’re a woman, you’ve probably uttered such phrases—even if only to yourself. But you’re doing yourself and your body a disservice. In some cases, your life and health depend on being a good listener. Below are five symptoms you should never ignore.



**1 Fatigue**  
Busy women often find themselves tired. “But persistent, chronic fatigue that lingers longer than two weeks should be checked,” says Natalia Southerland, M.D., a family practitioner on the medical staff at Baylor Medical Center at Waxahachie. It could indicate hypothyroidism, a condition resulting from the thyroid not producing enough hormones. It also could signal anemia, heart disease, sleep apnea or depression.

**2 Unexplained weight loss**  
Think losing 10 pounds without even trying sounds like a miracle? Think again. “Unexplained weight loss can be a sign of diabetes,” Dr. Southerland says. “Other symptoms include unusual thirst and frequent urination, extreme hunger, fatigue, blurred vision, wounds that are slow to heal, and numbness in the hands or feet.” But don’t wait to experience symptoms to talk to your doctor about your risk factors for the condition. Ask about blood glucose screenings.

**3 Abnormal bleeding**  
Whether it occurs between your periods or after menopause, any abnormal bleeding should be checked out by your doctor, says Barbara K. Chen, M.D., an obstetrician and gynecologist on the medical staff at Baylor Regional Medical Center at Grapevine. “Women often think abnormal bleeding is not a big deal,” she says. “But it could signal hormonal problems, fibroids or even cancer.”

**4 Changes in your breasts**  
You know to alert your doctor right away if you feel a lump, but not all breast cancers are detected by a mass. Talk to your doctor if you notice changes in your breasts, such as reddening or thickening of the skin and nipple discharge.

**5 Chest discomfort**  
Women are more likely than men to experience lesser-known symptoms when having a heart attack, including shortness of breath, lightheadedness and nausea. But the No. 1 indicator for men *and* women is still chest pain or discomfort. If you have it and it isn’t heartburn, call 911 right away. ●  
*By Shelley Flannery*



**MAKE AN APPOINTMENT**

**Get Peace of Mind**

If you’re worried about a symptom or you’re just not feeling right, talk to your doctor. For a referral to a physician on the Baylor medical staff, call **1-800-4BAYLOR** or visit **FindDrRight.com**.

## Good-for-You Goals

If your resolutions have already fallen by the wayside, don't give up. Set some new healthy goals for 2011 starting now! Here are a few ideas:

### LISTEN UP

## 1-2-3, Goal!

Check out our podcast about setting goals at [BaylorHealth.com/HealthCast](http://BaylorHealth.com/HealthCast).

**GET MOVING** Overwhelmed by your usual exercise resolutions? Start small. Get a pedometer and set a goal to reach 10,000 steps every day—no gym required.

**GET BACK TO NATURE** If you can't identify most of the ingredients in the foods you're eating, make a vow to eat at least

half of your foods in their natural state. That means cutting down on processed, prepared and packaged foods.

**SCHEDULE SCREENINGS** Make appointments early for annual tests such as cholesterol, blood pressure, mammograms, PSA blood tests and other screenings.

**STRESS LESS** Worrying rarely gets results. This year when financial worries, a heavy workload or other stressors get you down, commit to taking time for yourself. Whether it's 10 minutes to just sit quietly and breathe slowly or a monthly massage appointment, taking care of your health is a wise time investment.



**BAYLOR HEALTH EXCLUSIVE**

# Available Now

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## WHAT'S THE RIGHT RATE?

Any kind of exercise or activity is good for you. But to truly reap the heart-healthy rewards, you need to get in the zone—your target heart rate zone, that is. If you don't know a heart rate from an interest rate, don't worry. This formula from the American Heart Association makes it easy. Your maximum heart rate is 220 minus your age. Ideally, you want to maintain a heart rate



between 50 and 85 percent of your maximum during the middle of your workout.

If you're just starting out, stay near the lower end of your range. If you have a condition such as high blood pressure, heart disease or diabetes or if you're new to exercise, be sure to talk with your doctor before beginning any workout program. He or she may have special recommendations for you.

## Spring Ahead of Allergies

It's the perfect time for cleaning, yard work and outdoor activities. Unfortunately, it's also time for allergy season. Pollen and other allergens can trigger sniffles, sneezing, scratchy throats and watery eyes. Avoid allergies this season with these tips from the American Academy of Allergy, Asthma & Immunology.

**INSIDE** Close windows at night to keep pollen and molds from drifting into the house.

Dry the air with an air conditioner. This helps keep irritating allergens from growing in your home. Try to keep your pets clean and out of your bedroom if they bother your allergies. Also, avoid hanging clothes or sheets outside to dry because pollen can collect on them.

**OUTSIDE** Avoid doing yard work or physical activities in the morning, when the most allergens are released. Also, stay inside on windy or humid days when pollen and mold counts are highest.

Talk to your doctor about taking medication if your allergy symptoms are getting in the way of your daily life.



### TAKE THE TEST

## Do You Have Allergies?

Take our allergy assessment at [BaylorHealth.com/AllergyAssessment](http://BaylorHealth.com/AllergyAssessment) to see what's bugging you this spring.



**Free. Online.  
All the time.**

At **BaylorHealth.com/Exclusive** you'll find health information for you and your family you can't get anywhere else, including:

Articles • Videos • Recipes • Quizzes • Tips



## “My family had a unique situation, but Baylor Grapevine delivered.”

Christina Kuhn and her husband, Tim, struggled with infertility for seven years. “It was painful because we really wanted a child,” she says. That’s when her sister Sarah Tiemann volunteered to be her surrogate. Baylor Regional Medical Center at Grapevine made sure Christina was involved in baby Trinity’s birth every step of the way. She was in the delivery room with Sarah where she was able to cut the umbilical cord and give her daughter her first bath. The sisters also stayed in adjacent rooms where they could check on each other. “Baylor was very accommodating. The service we received was just amazing. We felt really special there.”

For a physician referral or for more information about women’s services, call **1.800.4BAYLOR** or visit us online at **BaylorHealth.com/GrapevineWomen**.



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