Heart to Heart

EDDIE HERNANDEZ was active and appeared healthy, but his wife, AMY, urged him not to ignore his symptoms, and that saved his life.

REAL PATIENTS. REAL STORIES.

BACK IN ACTION
Put back pain behind you at the new Spine Center at Baylor Grapevine page 2

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Getting You Back in Action

New Spine Center offers help to people with back pain

In February, people who experience back pain will have a new place to turn. The Spine Center at Baylor Regional Medical Center at Grapevine offers a comprehensive range of services that can help get back pain under control.

Melanie B. Kinchen, M.D., an orthopaedic spine surgeon on the medical staff at Baylor Grapevine, says that pain-killing medications are often prescribed for people with back pain. While the drugs work for some people, others don’t always get the relief they need. Those people may want to consult with the specialists at the Spine Center.

Every person—and every back—is different, and the center offers a range of treatments designed to meet those varied needs. The Spine Center offers diagnoses and treatment options including:

- Physical therapy
- Rehabilitation specialists who oversee therapy
- X-rays
- MRI scans nearby at Baylor Grapevine
- Medication
- Injections
- Spinal cord stimulation
- Access to a spine surgeon

Dr. Kinchen notes that people with chronic back pain, who have had back surgery without success or who have pain that stems from cancer, might find relief from these treatment options. The Spine Center starts with more conservative options and moves to surgery only when needed. “People with back pain are very afraid of surgery. But more than 80 percent of people do not require surgery. It’s worth seeing what’s wrong to find out if the pain can be alleviated with other means,” she says.

And, don’t assume you’ll need an operation just because you know someone with similar symptoms who had surgery. “The same diagnosis doesn’t always mean the same treatment,” Dr. Kinchen adds. Staff at the Spine Center will take time to get to know the patient and find out what’s best.

By Stephanie Thurrott

To learn more about treatment options at the Spine Center at Baylor Grapevine, call 817-424-4151 or visit BaylorHealth.com/GrapevineSpine.
Breast Care, Comfort Under One Roof

Breast Center at Baylor Grapevine opens soon, bringing quality care to local women

Women who need breast health care will have a new option for quality care in early February, when Baylor Regional Medical Center at Grapevine opens its new comprehensive Breast Center. The center will offer full-service imaging, diagnosis and treatment in a warm, comfortable setting.

By streamlining exams, imaging tests and appointments, women will be able to work toward a speedy recovery. Because it can be a long journey, the goal of the Breast Center is to help women get started as quickly as possible.

If a woman’s mammogram shows an abnormality that warrants further imaging, a patient will likely be scheduled for an ultrasound right away, and, if needed, a biopsy will be scheduled promptly. “This is a very scary time for most people,” says Scott Woomer, M.D., a radiologist on the medical staff at Baylor Grapevine. The staff at the Breast Center will work to lessen the wait, so fears and anxieties don’t build up.

Ed Clifford, M.D., a breast surgeon on the medical staff at Baylor Grapevine, says the multidisciplinary staff meets for conferences on each patient, where the center’s specialists go over cases together, so women can get a variety of opinions in one sitting.

Because a breast cancer diagnosis can plunge a woman into an unfamiliar world, Maureen Aschman, R.N., breast care coordinator at the Breast Center at Baylor Grapevine, helps with navigating the patient through tests, exams and appointments. In addition, she guides the patient through the cancer care continuum by providing educational support and acts as a liaison between the patient and her care team.

The Breast Center, located in front of the hospital on Lancaster Drive in the Clearview 2 building, will also offer:

- Full-service imaging, including digital mammography and high-resolution diagnostic ultrasound. (Breast MRIs are available at two nearby Baylor facilities.)
- A network of surgical, medical and radiation oncologists on the Baylor Grapevine medical staff who can help develop an individual treatment plan.
- Assessment and counseling for women at high risk for breast cancer.
- Meeting space where Look Good...Feel Better®, an educational class for women undergoing breast cancer treatment, and other support groups can gather. By Stephanie Thurrott

SCHEDULE A MAMMOGRAM
Take Care of You

To learn more about services at the Breast Center at Baylor Grapevine or to schedule your mammogram, call 1-800-4BAYLOR or visit BaylorHealth.com/GrapevineBreastCenter.

Schedule your mammogram at BaylorHealth.com/GrapevineBreastCenter • January 2011 Baylor Health
People with cancer will have more options for their care early this year when Baylor Regional Medical Center at Grapevine opens its new 20-bed Oncology Unit. Here are answers to a few common questions about the new unit.

Q Why did Baylor Grapevine see the need for an Oncology Unit?

A With the development of an outpatient cancer center near the hospital, more people with cancer are getting the treatment they need close to home. But sometimes, people with cancer need to be hospitalized. With this Oncology Unit, specialized care is nearby, in a comfortable and familiar setting. Baylor Grapevine’s oncology services have grown in recent years. Developments include physician education, an active tumor board, a cancer committee, and improved diagnostic tools and surgical techniques for identifying and treating cancer. Also, improvements in chemotherapy and molecular targeted therapies help physicians personalize cancer treatment programs for each patient. The new Oncology Unit is the result of all these developments.

Q What special care is offered in the Oncology Unit?

A It’s a 20-bed unit designed especially for adults with cancer. The nurses are specially trained in caring for people with cancer and have received additional education in the biology of cancer and chemotherapy. People with cancer often have additional health problems, such as heart disease or diabetes, and the unit’s staff can help coordinate care so all of the conditions are best managed. The nurses help people with their emotional needs as well. With much of cancer care today provided in an outpatient setting, being hospitalized can be a stressful time for people with cancer. It’s helpful to have nurses focused on caring for these patients.

Q When do people with cancer need inpatient care?

A “Most cancer care doesn’t require hospitalization,” says Vikas Aurora, M.D., an oncologist on the Baylor Grapevine medical staff. “But sometimes, people undergoing chemotherapy have a decline in their blood counts, leaving them susceptible to infection.” They may need to be hospitalized. The side effects of chemotherapy can leave people dehydrated. In some cases, pain management is best handled in the hospital, and there are chemotherapy regimens that need to be administered in an inpatient setting. Now, the Oncology Unit has the ability to do all of these things here in the community. 

By Stephanie Thurrott

FIND A PHYSICIAN

We Have Cancer Answers

To learn more about Baylor Grapevine’s new Oncology Unit, visit BaylorHealth.com/GrapevineCancer. For a referral to an oncologist on the medical staff at Baylor Grapevine, call 1-800-4BAYLOR or visit FindDrRight.com.
Tackling Tuberculosis

Baylor researchers identify the genetic signature of TB

Baylor researchers have discovered a pattern of gene activity that shows up in people with an active tuberculosis (TB) infection. This genetic signature could help improve diagnosis and treatment of TB, which is one of the world’s 10 leading causes of death, killing nearly 2 million people annually.

“Millions of people are exposed to the bacteria that causes TB, yet only a small percentage go on to actually get sick,” says Damien Chaussabel, Ph.D., associate investigator, Baylor Institute for Immunology Research, a component of Baylor Research Institute.

While about one-third of the world’s population is infected, only 10 percent develop symptoms. “It is difficult to identify an active versus a dormant infection,” Dr. Chaussabel says. Current skin and blood tests for TB identify anyone who has been exposed, but they can’t predict who will develop the active disease.

The Power of Prediction

The telltale genetic signature Baylor researchers have identified could change the way tuberculosis is managed and treated. This pattern of gene activity showed up in patients with active disease, reflecting the extent of the disease in the lungs and disappearing after successful treatment.

This genome activity was also present in 10 percent of people with latent TB. “As of now, we have no way of knowing if that 10 percent of people will ever develop TB, but we are planning additional studies to try and determine that,” Dr. Chaussabel says.

If research demonstrates that the genetic signature can predict who will become sick from TB, it could have a big impact on preventing the spread of tuberculosis. “If we could treat people before their disease is clinically active, it would mean people would not become contagious,” Dr. Chaussabel says.

The distinctive pattern of gene activity in affected people also gives researchers new information about how the body reacts to the infection, particularly the response of a certain type of white blood cell. Follow-up research could lead to more effective vaccines and treatments.

Baylor researchers made this discovery in collaboration with researchers at MRC National Institute for Medical Research in England. They published their findings in the journal Nature in August 2010.

By Teresa Caldwell Board

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Study Up

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Hidden Dangers

High cholesterol and high blood pressure spell double trouble for your heart

By Teresa Caldwell Board

When you think of a heart attack waiting to happen, these two men weren’t the usual suspects: in their mid-40s with reasonably active, healthy lifestyles. No obvious risk factors like smoking, obesity or diabetes. Just a little past history of cholesterol and blood pressure problems, along with some uncles with a history of heart disease.

So when 45-year-old Eddie Hernandez of Flower Mound woke up at 1:30 a.m. this past August not feeling quite right, the possibility of a heart attack didn’t even enter his mind. He went running regularly, frequented the gym and ate right. To him, it felt like indigestion.

“I had been wakeboarding two weeks before and had trouble catching my breath when I got back in the boat,” says Hernandez. “I felt like that again when I woke up that night. My wife convinced me to go get checked.” The trip to Baylor Regional Medical Center at Grapevine helped save his life.

It was his fellow officers who got 48-year-old police officer Fred Curry to Baylor Medical Center at Garland last June when he developed nausea, sweating and shortness of breath after boxing practice. He was training for an annual fundraiser in which police officers spar against firefighters.

“I felt like I was dehydrated,” Curry says. “I thought I’d just pushed myself a little too hard in my training.”

Both men were surprised to be diagnosed with a heart attack. Each received several stents to open blocked arteries. Because they acted fast, they avoided heart damage.

GET HEART SMART

The Heart Truth

To learn more about heart disease—from risks and prevention to diagnosis and treatment—visit BaylorHealth.com/Heart.
Double Trouble
On its own, high cholesterol raises your risk of heart disease, and so does high blood pressure. When you have both risk factors, it takes a double toll on the health of your blood vessels. “The higher they are, the worse it is,” says Stuart R. Lander, M.D., a cardiologist on the medical staff at Baylor All Saints Medical Center at Fort Worth.

Blood pressure measures the force on the walls of your arteries when your heart pumps blood. It’s affected by the size and flexibility of the arteries. When there is too much cholesterol in the blood, it can build up on blood vessel walls, causing artery-narrowing deposits called plaque.

“Plaque in the arteries is usually stable, but sometimes it ruptures—the ‘roof’ of the plaque breaks off,” says Biren H. Parikh, M.D., a cardiologist on the medical staff at Baylor Garland. “When the plaque ruptures, it triggers a cascade of events which clog blood vessels and lead to an acute heart attack.” High blood pressure, as well as other cardiac risk factors, can cause plaque to rupture.

Protect Your Heart
To prevent heart disease, it’s important to have a healthy lifestyle—eat right, stay active, manage your weight and don’t smoke. Still, it may take medication to get your blood pressure and cholesterol numbers in a healthy range. “The vast majority of individuals will fall short of meeting their goals through lifestyle alone,” says David Scherer, M.D., a cardiologist on the medical staff at Baylor Grapevine.

“Unfortunately, a lot of cardiac risk factors can be hereditary,” Dr. Parikh says. Genetics have an especially strong influence on cholesterol levels.

“If you’re born with blond hair and you want red, you have to do something and keep doing it to change it,” Dr. Scherer says. It’s the same with an inherited tendency to high cholesterol, he explains. “You have to alter your metabolism of cholesterol through medication.”

In general, healthy adults should have a blood pressure of less than 120 over 80. Total cholesterol should be under 200, with LDL (“bad”) cholesterol of less than 130. However, “the more risk factors you have, the more aggressively you need to treat each one,” Dr. Lander says. So your doctor may set lower goals to protect your cardiovascular health.

“I would have been on medication years ago if I knew what I know now,” Hernandez says. After Curry’s heart attack, there was a big spike in the number of area police officers taking advantage of the city’s free physicals. “You always think it will happen to somebody else,” Curry says, “until it happens to you.”

Choose the Right Foods to Fuel Your Body
Glenn Burnett, M.D., an internal medicine specialist on the medical staff at Baylor Regional Medical Center at Grapevine, likes to use the word “diabesity” to describe the collection of symptoms that show up after years of horrible eating habits and virtually no exercise. He says that along with high blood pressure and high cholesterol, “diabesity” includes glucose intolerance, type 2 diabetes and obesity.

In the past, these symptoms affected mature adults. But now that bad lifestyle habits are often starting in childhood, doctors are seeing people in their 20s with the condition. Dr. Burnett points a finger at processed foods that are high in refined carbohydrates, sugar and starch. “People should concentrate on food that Mother Nature made, not food that was made in a laboratory,” he says. He suggests a diet loaded with fruits, vegetables, lean meat, whole grains, nuts, beans and lentils. He adds that people need to take a break from sedentary time in front of the computer, TV or video games and get some exercise, working up to 30 to 45 minutes of aerobic exercise daily. (Talk to your doctor before starting or intensifying an exercise program.)

While drugs to control blood pressure, cholesterol and diabetes can help, Dr. Burnett warns that they can’t take the place of lifestyle changes. “No medication can protect you if you continue to abuse your body,” he says.
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SAT., JAN. 22, 2011 - 7 a.m. to 11 a.m.

For Women For Life™ offers women time to focus on their health. So plan on inviting other women you would like to share a day with – your mother, daughter or friends – and enjoy this special day. Attendees receive free screenings, assessments and breakfast, as well as the opportunity to attend a physician panel that will answer your health questions. There is no charge, but registration is required.

- Event Location:
  Hilton Southlake, Southlake Town Square
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