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(Photo by Olaf Starorypinski)

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**Learn More!**

For more information about any of our stories, visit LVHN.org/healthyyou or call 610-402-CARE.

For more information about any of the doctors featured in this issue (such as practice name, location or hours), visit LVHN.org/find_a_doctor or call 610-402-CARE.
5 Things You Should Know About Physiatrists

**They get patients moving again**

1. **It’s pronounced fizz-EYE-a-trist.** Though you may not have heard of this medical specialty, physiatrists – MDs and DOs certified in physical medicine and rehabilitation – can play an important role in treating physical disabilities caused by injury or illness. If you or someone you know suffers from movement problems or pain, seeing a physiatrist may help.

2. **They look at the big picture.** “Our goal is to restore physical function in patients with bone, muscle, or nerve injuries or diseases – everything from strokes and brain injuries to low back pain and knee stiffness,” says Lehigh Valley Health Network physiatrist Chirag Kalola, MD, with the Advanced Spine Center. Physiatrists differ from other specialists because they focus on the entire body rather than just one organ, such as the heart. This head-to-toe approach can be particularly helpful for hard-to-diagnose problems like spine pain, which may be caused by anything from muscle strain to osteoarthritis. “We often notice things that are being overlooked,” Kalola says.

3. **They work as part of a team.** After developing a detailed treatment plan, physiatrists put together a team of practitioners (such as physical therapists, speech pathologists and vocational counselors) to help each patient medically, emotionally, socially and career-wise.

4. **They use nonsurgical treatments.** These may include pain medications, steroid injections, strengthening exercises, stretching and assistive devices, such as braces and wheelchairs. “Just because a doctor says you have a herniated disk or arthritis in your knee doesn’t mean you need surgery,” Kalola says. “Most patients with physical limitations can be treated with conservative approaches that have a lower risk for complications.” And if you do need surgery, working with a physiatrist before and after can help speed your recovery.

5. **They tailor treatments to your needs.** Whether arthritis keeps you from gardening or a knee injury has sidelined your daughter from the lacrosse team, a physiatrist creates a custom treatment plan to help you enjoy your favorite activities again. “We restore physical function as it relates to each individual, whether that means going back to work, playing golf or getting out with the grandkids,” Kalola says.

A physiatrist helped Laura Benson of Orefield recover from back pain. Now she’s an active student at the University of Pittsburgh.

Next Step

**Watch a video** about Chirag Kalola, MD, at [LVHN.org/find_a_doctor](http://LVHN.org/find_a_doctor).

Learn about the Advanced Spine Center at [LVHN.org](http://LVHN.org) or call 610-402-CARE.
Thermometer Tips

**SET IT:** Use a food thermometer to make sure meat is fully cooked. “To calibrate it, fill a glass with ice, top it with water, wait one minute and put the thermometer into the middle,” says executive chef James Lambert with Lehigh Valley Health Network. “After 30 seconds the temperature should be 32-33 degrees.”

**DON’T FORGET IT:** Insert the food thermometer into the thickest part of the meat without touching gristle or bone. Aim for these temperatures to make sure all bacteria in the meat is killed:

- **165°** Ground turkey
- **165°** Whole turkey
- **165°** Turkey breasts
- **165°** Ground chicken
- **165°** Whole chicken
- **165°** Chicken breasts
- **165°** Poultry thighs, legs, wings
- **155°** Ground beef
- **145°** Beef steaks, roast and chops
- **155°** Ground pork
- **145°** Pork
- **145°** Ham (fresh)
- **140°** Ham (precooked)

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**Make sure your fall to-do list includes a flu shot.**
Everyone over 6 months of age should get vaccinated annually to protect against influenza, a contagious virus that kills thousands of Americans every year. “Vaccination helps you, your family and our entire community stay healthy,” says infection control expert Terry Burger, RN, with Lehigh Valley Health Network.

The health network’s free drive-through flu clinics at Allentown’s Dorney Park and Coca Cola Park, Nov. 9-10, make vaccination fast and easy. See page 21 or call 610-402-CARE.
One of America’s Best Hospitals

For the 18th consecutive year, Lehigh Valley Hospital ranks as one of the nation’s top hospitals on U.S. News & World Report’s best hospitals list. Lehigh Valley Hospital is among the nation’s leading hospitals in seven categories:
- Cardiology and heart surgery
- Gastroenterology and GI surgery
- Geriatrics
- Gynecology
- Orthopedics
- Pulmonology
- Urology

Lehigh Valley Hospital also is cited as a “high performer” in:
- Cancer care
- Diabetes and endocrinology
- Ear, nose and throat
- Nephrology
- Neurology and neurosurgery

Lehigh Valley Hospital–Muhlenberg is listed as a “high performer” in:
- Gastroenterology and GI surgery
- Geriatrics
- Neurology and neurosurgery
- Orthopedics
- Pulmonology
- Urology

OVER THE PAST 10 YEARS, LEHIGH VALLEY HOSPITAL HAS A COMBINED TOTAL OF 44 SPECIALTY CATEGORY LISTINGS.

LEAVE A LEGACY

As a not-for-profit, charitable organization, Lehigh Valley Health Network relies on your generosity. Every gift – regardless of its size – has an impact, and a bequest through your will helps ensure leading-edge care for our community for generations to come.

Mary Ellen Herzog of Macungie, a development professional at Lehigh Valley Health Network, created her legacy by offering a gift of general support. “I’ve worked in nonprofits my entire career,” Herzog says. “The health network’s commitment to our community, particularly the underserved, is unmatched. I’m inspired and want to help ensure our care and services remain state-of-the-art.”

LEARN MORE ABOUT SUPPORTING LVHN. Visit LVHN.org/donate or call 610-402-CARE.

MEDEVAC CRITICAL CARE AMBULANCES

When a critically ill or injured patient needs transportation to or from a Lehigh Valley Health Network (LVHN) hospital, LVHN–MedEvac can now provide it by air or by ground.

LVHN–MedEvac recently began 24/7 operation of two critical care ambulances. They are staffed by a paramedic with education in critical care, a registered nurse with experience in critical care and an emergency medical technician driver. Members of the MedEvac ambulance team can administer medication and are qualified to perform procedures beyond what typical emergency medical service (EMS) crews can provide. Clinicians with education and experience in pediatric critical care will care for children being transported to and from Children’s Hospital at Lehigh Valley Hospital.

WATCH MEDEVAC IN ACTION at LVHN.org/emergency.
DON’T MISS A BEAT
TAKE ATRIAL FIBRILLATION SERiously
A healthy heart is like a metronome. It beats evenly and rhythmically as it pumps blood throughout your body. Some people have a heart that beats out of rhythm, a condition called an arrhythmia. The most common type of arrhythmia is atrial fibrillation (A-fib). It occurs when the upper chambers of the heart (atria) beat irregularly.

A-fib can lead to serious complications. Because the heart isn’t pumping properly, blood in the atria may pool and clot. If a clot dislodges, it can travel to the brain and cause a debilitating or deadly stroke. People with A-fib are five times more likely to have a stroke.

You may have A-fib and feel fine
“A significant percentage of people who have atrial fibrillation don’t experience any symptoms,” says Lehigh Valley Health Network (LVHN) cardiologist Hari Joshi, MD, with Lehigh Valley Cardiology Associates of LVPG. The condition is often diagnosed during a routine medical exam or electrocardiogram (EKG). People who do have symptoms may experience:

- Heart palpitations
- Shortness of breath
- Dizziness
- Chest pain
- Fatigue

Whether you have symptoms or not, it’s important to take A-fib seriously and follow your doctor’s treatment plan.

People with A-fib who do not have symptoms often ask me why they need treatment if they feel fine,” says LVHN family medicine doctor Deborah Bren, DO, with Danielsville Family Medicine. “But when I explain that A-fib can cause a stroke that can kill them or paralyze an entire side of their body, they understand why they have to take action.”

Why you might have it
Possible causes of A-fib include:
- Previous heart attack
- Previous heart or valve surgery
- Hyperactive thyroid
- Sleep apnea

Your pulse tells the story
Although it’s always best to talk to your doctor about A-fib, you can feel if your heart is beating in rhythm by checking your pulse. Place your index and third fingers on the thumb side of your wrist.

As you feel your heart beating, check to see if it is doing so in a steady rhythm. You also can determine your heart rate. A normal resting heart rate for adults ranges from 60 to 100 beats per minute.

Count how many times your heart beats in 15 seconds and multiply the number by four. If your heart beats out of rhythm, more than 100 times per minute, talk to your doctor. “A heartbeat that is irregular and fast is more serious than a heartbeat that is irregular and slow,” Joshi says.

Determining your stroke risk
If you have A-fib, your doctor will consider several factors to determine your risk for stroke and your treatment. Your stroke risk is greater if you are or have:

- Heart failure
- High blood pressure
- Diabetes
- Vascular disease
- Suffered a previous stroke or mini-stroke
- 75 or older
- Female

Taking charge of A-fib
A-fib can be controlled with medication that helps your heart beat in rhythm. If your stroke risk is high, your doctor may prescribe blood-thinning medication to prevent clots from forming. If you are unable to take medication (or if the medication isn’t working), these procedures, performed by medical professionals, can correct A-fib:

Cardioversion – Paddles placed on your chest deliver a small electrical shock to the heart, restoring its normal rhythm.

Catheter ablation – A thin, flexible tube inserted through a small incision delivers heat or extreme cold to the heart tissue that’s causing the irregular heartbeat.

Maze procedure – During an open-heart surgery, incisions are made in the heart’s upper chambers to force its electrical signals to proceed in an orderly manner.

–Rick Martuscelli

Take Charge Now

Watch a video about Hari Joshi, MD, at LVHN.org/find_a_doctor.

Attend an atrial fibrillation seminar on Nov. 11. See page 21 or call 610-402-CARE.

Learn about atrial fibrillation care at LVHN.org/heart or call 610-402-CARE.
When Marcie Purinton’s older sister was diagnosed with stage 2 breast cancer at age 40, no one expected it; she was the first in the family to ever have the disease. “I was with her at her biopsy,” Purinton says. With this newfound family history though, Purinton, just 28 at the time, was considered at risk for developing breast cancer too.

“I remember sitting in the waiting area for my first mammogram, and I was the youngest person there,” Purinton says. In spite of that, she made her annual screening mammogram a priority. “My sister survived this, but I’ve seen what can happen if it isn’t caught early.”

Like most women, Purinton has been on the screening mammography track for her yearly breast images. Screening mammograms are an initial look at breast health designed to catch possible changes to breast tissue.

“Your annual mammogram takes two X-rays on each side, one each from the top-down view and one from the outside of each breast,” says Lehigh Valley Health Network (LVHN) radiologist Priya Sareen, MD, with Medical Imaging of Lehigh Valley. Within 24 to 48 hours, the digital images are read by a radiologist, and a report is sent to the referring physician.

“About one in 10 women will receive a callback from us,” Sareen says. “For many women, this call is upsetting, but we take a proactive approach and schedule a diagnostic mammogram to determine just what is there.”

Last year, Purinton received such a call from LVHN’s Breast Health Services, after her annual mammogram detected something suspicious.

“A diagnostic mammogram is not ‘better’ than a screening mammogram,” says Michele Brown, RN, of Breast Health Services. “The same machines are used to take X-ray images, and the same protocol is repeated to ensure we double check the image. However, if any additional X-ray views are needed, they will be done as requested by the radiologist.”

At that point, ultrasound imaging also may be employed to examine the breast. “Ultrasound is very targeted and helps us determine what this tissue is made of,” Brown says. “We can see edges, thicknesses, whether this lump is solid or has fluid inside it.” Once the imaging is completed, the patient will receive results immediately.

For Purinton, her next step was a diagnostic breast MRI, and then a biopsy. “There was always a plan in place; I never had to figure it out,” Purinton says. “That was reassuring, because there were so many things I was worried about.” At Breast Health Services, you always leave with your next appointment in place, whether it is your next screening or follow-up appointment, a date for a biopsy or an appointment with a surgeon.

In the end, Purinton’s suspicious area was benign (cancer-free) – a conclusion that relieved her. “I’m fine for now,” Purinton says. “That’s not to say that in a year or two there won’t be a problem. But I know that no matter what, I will have the best care possible.”
**DIAGNOSTIC MAMMOGRAM**

**FREQUENCY**
As recommended by physician

**PRESCRIPTION**
Required

**LOCATION**
Can be performed only at Breast Health Services Cedar Crest, 17th Street or Muhlenberg locations

**SERVICES**
X-rays; ultrasound imaging; breast palpation exam; if needed, ultrasound-guided or stereotactic-guided biopsy

**RADIOLOGIST READING**
Immediately

**REPORT**
You will receive your results immediately after the imaging is complete to discuss the next step in your care.

**SCREENING MAMMOGRAM**

**FREQUENCY**
Once a year

**PRESCRIPTION**
Not necessary

**LOCATION**
Any Breast Health Services location

**IMAGES**
Usually two X-ray images on each breast

**RADIOLOGIST READING**
Within 24-48 hours

**REPORT**
Letter sent to you; radiologist’s report sent to your physician; or a phone call if additional imaging is needed

Marcie Purinton (left) is thankful for the guidance of Michele Brown, RN.
THE ABCs OF DIABETES

KNOW THESE TERMS TO BETTER MANAGE YOUR CONDITION

Having diabetes is hard enough. Trying to understand all the terms so you can manage your condition is sometimes harder. “Diabetes requires a lot of education, and the terms can be confusing at first,” says Lehigh Valley Health Network (LVHN) endocrinologist Marc Vengrove, DO, with LVPG Diabetes & Endocrinology.

Yet learning these terms can keep you healthy. “The more knowledge you have, the better off you are,” says certified diabetes educator Kathleen Brown, RN. So here’s your “cheat sheet” – an ABC of diabetes terms courtesy of LVHN’s experts:

**DIABETES 101**

Blood sugar (or glucose): Your body converts carbohydrates from food into glucose that is carried in the blood as fuel for the body’s cells.

Hyperglycemia: This means high blood sugar. If the blood sugar is very high, symptoms can include fatigue, frequent urination and thirstiness. Many people have mildly elevated blood sugars without symptoms.

Hypoglycemia: This occurs when blood sugar is extremely low. Symptoms range from dizziness, sweating and palpitations to disorientation and coma.

Insulin: This natural hormone is made by beta cells in the pancreas. It moves sugar from the blood into cells for energy. If you don’t produce enough insulin naturally, you may require insulin shots.

Type 1 diabetes: This means your body’s immune system attacks beta cells in the pancreas so they don’t produce insulin. Glucose builds up in the blood instead of moving into cells. Insulin therapy is always needed.

Type 2 diabetes: This means your pancreas either doesn’t produce enough insulin or your body resists the effects of insulin, preventing glucose from entering cells. This type of diabetes often is linked to obesity. It can be treated with pills and/or insulin.

**TESTS**

Blood glucose monitoring: This home test checks your blood sugar. You place a drop of blood from your finger on a test strip that is inserted into an electronic meter for a blood sugar reading. Blood glucose monitoring can help you and your doctor adjust pills or insulin therapy.

Hemoglobin A1c: This blood test performed at a lab gives a three-month average of blood sugar levels. Below 5.7 percent is normal; 5.7 to 6.4 percent indicates prediabetes; over 6.5 percent is high.

**EXERCISE/HEALTHY EATING**

Aerobic exercise: These activities boost your heart rate, including running, walking and bicycling. Exercise makes insulin work better in the body and burns blood glucose.

Anaerobic exercise: These strength-training exercises also help lower blood sugar.

Carbohydrates: These nutrients are found in breads, pasta, fruits, starchy vegetables and sugary sweets that the body converts to glucose for energy.

Glycemic index: It’s a measure of how quickly carbohydrate-containing foods raise blood glucose. High-glycemic foods (white bread, pasta, rice, baked goods) raise blood sugar faster than low-glycemic foods (fruits, vegetables, whole grains, legumes) and should be limited to control diabetes.

Next Steps

ATTEND OUR DIABETES COMMUNITY EVENT.

Cooking demonstrations and more; see page 21 or call 610-402-CARE.

GET MORE DIABETES ABCs and learn about diabetes at LVHN.org/diabetes.
HELP OTHERS UNDERSTAND THE ABCs

1 OFFER SUPPORT
“This is a big change if you’re newly diagnosed,” says LVHN family medicine doctor Frank Sperrazza, DO, with Southside Family Medicine. “Encourage lifestyle changes, but don’t nag.”

2 CHANGE YOUR LIFESTYLE TOO
Just because you don’t have diabetes doesn’t mean you’re not at risk. “A healthier diet and exercise is good for the entire family,” Sperrazza says.
They were all the rage on Inauguration Day. Perfectly toned arms – inspired by First Lady Michelle Obama – are the goal for many women. Is it possible to get her arms? The answer is yes.

But first, you may wonder why those upper arms droop. The answer lies in the way fat is stored in our bodies. “For women, the upper arms are a trouble spot because it’s one of the most common places they store fat,” says exercise physiologist Wayne Stephens with Lehigh Valley Health Network (LVHN). “And for many, once it’s there, it’s tough to get rid of.”

A DO-IT-YOURSELF APPROACH
You can tone your arms with a commitment to exercise and fitness. “That will help you lose overall body weight and build lean muscles in your upper body,” Stephens says. “As the arm muscle gets stronger, it naturally increases in size, giving your arms a more toned appearance.”

Stephens recommends 30 minutes of aerobic exercise (such as jogging) a minimum of three days a week. It’s most effective to include within your workout higher-intensity interval exercises – for example, 10 jumping jacks, 10 arm curls, then 10 more jumping jacks. Toning exercises like push-ups also help.

As with any exercise program, if you haven’t exercised in a while, talk with your doctor first. Also, once you start, stick with it. “It may take three months or more to start seeing results,” Stephens says.

A SURGICAL OPTION
If exercise doesn’t work, arm lift surgery is a potential option. “The number of arm lift procedures since 2000 has grown by more than 4,300 percent according to the American Society of Plastic Surgeons,” says LVHN plastic surgeon Robert X. Murphy Jr., MD, with Cosmetic & Reconstructive Specialists of the Lehigh Valley.

That number includes many people who have had weight-loss surgery. “If you’ve had extreme weight loss, you may have loose upper arm skin that cannot be exercised into shape,” Murphy says.

An arm lift will remove excess skin and fat, but also will include a potentially long scar. Yet with realistic expectations and a commitment to a healthy lifestyle, results can be long-lasting.

If you choose surgery, there are some steps you should take. “You must achieve a stable weight for six months to ensure the success of the procedure,” says LVHN plastic surgeon Randolph Wojcik Jr., MD, with Plastic Surgery Associates of Lehigh Valley. “And ask whether the surgeon is board-certified and about his experience doing arm lifts.”

—Jennifer Fisher

Kristina DaCosta of Macungie tones her arms with resistance exercises. Get more exercises at LVHN.org or call 610-402-CARE.
Assess Your Health Risk and Change Your Life

Do you find health care intimidating? We’re here to help. The “Empower Yourself” column shares tips from a Lehigh Valley Health Network doctor about how you can best work together with your health care team. In this issue, family medicine doctor Joseph Habig II, MD, discusses the purpose and benefits of a health risk assessment.

If you have health insurance, chances are you’ve been told to take a health risk assessment. These questionnaires are used to identify potential threats to your health. They also can help you learn about healthy lifestyle changes. The healthier you live, the fewer medical services you’ll likely require. That’s good news for you and a cost savings for our health care system. It’s also why most insurance companies now routinely require these assessments.

Health risk assessments may be completed online or printed and filled out by hand. Some of my patients bring theirs in, and we fill them out together. They typically focus on three main areas:

- **Behavior** – Do you exercise regularly? Drink alcohol? Smoke? Wear a seatbelt? Use sunscreen?
- **Medical markers** – What is your blood pressure? Cholesterol? Blood sugar? Contact your primary care doctor if you do not know this information or if you need any of these tests performed.
- **Psychosocial factors** – Do you feel anxious or depressed? Do you have job or family stress? You also may be asked if you pray or believe in a higher power, but you won’t need to identify a specific religious affiliation.

Discuss the results. Some assessments assign a score based on your projected health risks. Others may not. Either way, you can maximize the benefit by thoroughly reviewing the results with your doctor. Working together, you can:

- Better understand your risks
- Identify potential barriers to change
- Develop a plan to address any unhealthy behaviors

Because lifestyle and genetics are interrelated, discussing results with my patients allows me to note other factors, such as family history, that can impact their risk. If necessary, I can refer them to another caregiver, such as a dietitian, nurse educator or exercise physiologist, for help with a specific issue.

Take action. How much your assessment helps is ultimately up to you. It’s an educational tool that allows you to take control of your health and your future. Use it wisely and get to work.

–Gerard Migliore
Jilian Keller remembers sitting with her parents in the waiting room outside the neonatal intensive care unit (NICU) at Children's Hospital at Lehigh Valley Hospital in January. Her premature twins, daughter Ava and son Niko (at right), had arrived the prior month at 23 weeks, 6 days. Every day was a battle for survival, and on this night Jillian was distraught.

“It was horrible,” she says. “It was one of three times we didn’t think Niko would make it. I turned to my mom and asked if my baby would die. But he made it.” In fact, Niko and Ava thrived, eventually becoming the youngest twins ever to have survived and be discharged from the hospital’s NICU.

“They’re miracles,” says Jillian, a 33-year-old first-grade teacher at Topton’s Brandywine Elementary School. “It was a long road. I was too afraid to leave the hospital during the first month.”

THE KELLERS’ JOURNEY

Jilian and her husband, Clint, a 27-year-old fiber optics technician, expected a relatively normal pregnancy. When she went for a 20-week ultrasound in early December 2012, Jillian had no physical issues. Yet the ultrasound determined she had an “incompetent cervix,” meaning she was at risk for her cervix opening too soon.

She was admitted to the hospital that day. A little less than four weeks later, on Dec. 27, 2012, Ava was born at 12:34 a.m. at 1 pound, 5 ounces. Niko followed at 1:15 a.m. at 1 pound, 3 ounces.

“It was such a shock to see them,” Clint Keller says. “I couldn’t believe how small they were. Their skin was transparent.”

Jilian Keller says the babies’ caregivers weren’t sure if the twins’ hearts would be strong enough for them to make it to the NICU. That’s when Ava and Niko began beating the odds.

“There’s a very high mortality rate for babies delivered at less than 24 weeks,” says Lehigh Valley Health Network neonatologist Nachammai Chinnakaruppan, MD, of LVPG-Neonatology, who cared for the twins during most of their NICU stay. “Niko in particular had some very rough patches. But babies are far stronger than we think. We support them medically in every way we can, but they really do the work.”

LIFE IN THE NICU

Ava spent 119 days in the NICU. Niko was there 126 days. They endured nine surgeries between them. Their parents weren’t able to touch them for more than a month. At each step they were comforted by a NICU team that made them feel like family.

“They cared as much as we cared,” Jillian Keller says. “Dr. Chinna (Chinnakaruppan) sat with us every day and explained what was going on. Everybody there – the surgeons, the doctors, the therapists, the nurses – were just so wonderful to us.”

The Kellers say they had complete faith in health network pediatric surgeon William Hardin, MD, who also cared for the twins throughout their stay.

“He’d check on them every single day,” Jillian Keller says. “He wrote the most beautiful card for us when we were discharged. I just cried when I read it. We have it displayed in our home.”

When Ava and Niko came home to Breinigsville, the Kellers celebrated. So too did their NICU caregivers. “You see these twins go through the ordeal they did and ultimately survive, and now they have every hope of growing up, going to school and facing life without any chronic disabilities,” Hardin says. “It means a lot to all of us.”

For the Kellers, the feeling is mutual. “We exchanged phone numbers with our caregivers,” Jillian Keller says. “They’ve all texted us often to check on the babies, and they see the babies’ pictures on our personal Facebook page. They’ll always be special to us.”

—Ted Williams
About Children’s Hospital at Lehigh Valley Hospital

CHILDREN’S HOSPITAL AT LEHIGH VALLEY HOSPITAL PROVIDES FAMILY-CENTERED CARE FOR CHILDREN OF ALL AGES. It includes inpatient and ambulatory care, a Children’s ER, subspecialists in more than 25 pediatric specialties, and numerous child-specific services such as rehabilitation and burn care. It is the only Children’s Hospital in the Lehigh Valley. Learn more at LVHN.org/children.

Next Step

LEARN MORE ABOUT THE NICU at LVHN.org/intensivecare or call 610-402-CARE.

William Hardin, MD
Pediatric surgery

Nachammai Chinnakaruppan, MD
Neonatology
Quick Facts About Joint Replacement Surgery

OUR EXPERTS OFFER THEIR TAKE

Q HOW DO I KNOW IF I NEED JOINT REPLACEMENT SURGERY?
A: If you have a sore knee or hip, it’s a question you might be asking. Your first step is learning from a doctor exactly what’s causing the pain. Your doctor will order diagnostic tests to rule out any other causes of pain.

If tests reveal you have osteoarthritis – the wearing down of the cartilage that covers the joints – your quality of life will determine when and if you need replacement. As a general rule, if your pain is regularly causing you to lose sleep and hurting your work or daily functions, it’s probably time for surgery.

Before surgery, your doctor may first recommend non-surgical options such as pain medication, physical therapy, cortisone and synthetic joint fluid injections, and weight loss and other lifestyle changes.

Q AM I TOO OLD (OR TOO YOUNG) FOR SURGERY?
A: Your overall health means much more than your age when it comes to successful recovery from surgery. At one time surgeons only did joint replacements for older people. Today knee and hip replacements last longer, so younger people can have the surgery with the understanding they may need a second one in their lifetime.

Q HOW LONG WILL RECOVERY TAKE?
A: Most joint replacement surgery patients return home in just two days, and can ride an exercise bike within two weeks. It’s a far cry from the early days of joint replacement, when patients were hospitalized for up to two weeks. And often any immediate post-surgery pain pales in comparison to the pain of walking with an arthritic knee or hip. Once you recover, you can essentially return to normal activities. You may even be able to do more than you could prior to surgery.

Q BOTH OF MY KNEES ARE BAD. SHOULD I GET THEM BOTH DONE AT ONCE?
A: If you are younger and healthy, a bilateral knee replacement (both knees at once) may be the answer. If you are age 70 or older, or if you have significant health issues, having the procedures separately may be a better answer. The final determination should be made with your doctor.

Next Step

READ HOW ELISABETH SMITH (LEFT) OF MACUNGIE quickly recovered from hip replacement surgery. Visit LVHN.org/healthyyou or call 610-402-CARE.

SIGN UP for a joint replacement prep course. See page 22.

–Alisa Bowman
Joe Langan (below, right) may never have discovered he had sleep apnea had his wife, Kelly, not been worried about what was going on next to her at night. “At first she was just annoyed by my snoring,” says Langan, 64, of Macungie. “Then she said I stopped breathing at times during the night. We decided to talk to our family doctor about it.”

Their family doctor recommended a sleep study. Yet instead of needing to go to the health network’s Sleep Disorders Center, Langan received equipment to do a sleep study at home.

WHAT’S A HOME SLEEP STUDY?
“A home test measures the same key data – oxygen levels, airflow – that we measure in the laboratory,” says Lehigh Valley Health Network pulmonologist Richard Strobel, MD, with Pulmonary Associates of LVPG. “They’re ideal for people whose symptoms point to classic sleep apnea, but a lab test is still recommended for patients who may have more complex sleep issues.”

Sleep specialists showed Langan how to prepare himself for the three-night home test. “I put a wide belt around my abdomen that had a battery pack with wires that plugged into the sensors,” he says. “There were sensors around my stomach and chest to measure breathing, a clip on my finger to measure my oxygen level, and a monitor at my nose to measure airflow. They all fed information into a special computer. I thought I was ready to be sent off into space.”

While wearing the equipment to sleep took some getting used to, Langan adjusted. “I didn’t want to knock out any of the wires if I rolled over,” he says. “But each night got easier.”

After the home test, Strobel reviewed Langan’s data. They confirmed he had sleep apnea. Langan then visited the Sleep Disorders Center at Lehigh Valley Hospital–17th Street, where he was fitted for a CPAP (continuous positive airway pressure) mask and machine, which he now uses nightly. The CPAP allows him to have a normal oxygen level during sleep. That means Langan no longer snores. “My wife and I both sleep much better,” he says.

Most of all, Langan breathes normally now while sleeping. “We’ve made such strides in the study of sleep apnea,” Strobel says. “We know for a fact that sleep studies at home and in our lab are saving lives.”

–Ted Williams

Next Step

LEARN MORE ABOUT THE SLEEP DISORDERS CENTERS at Lehigh Valley Hospital–17th Street and the Health Center at Bethlehem Township. Visit LVHN.org/sleep or call 610-402-CARE.
Mediterranean Veggie Wrap

1½ lbs. roasted Mediterranean vegetables (Get our Mediterranean vegetable recipe at LVHN.org/recipes)
6 Tbsp. tzatziki sauce
6 8-inch tortillas (55% whole-grain flour)
6 oz. cucumbers, fresh, peeled, seeded, julienned
6 oz. plum tomatoes, fresh, diced ¼-inch
6 Tbsp. feta cheese, crumbled

Spray tortilla with vegetable oil spray. Place tortilla on a Panini press or griddle. Place ½ cup roasted vegetable mixture in center of tortilla. Top with 2 Tbsp. diced tomato and ¼ cup cucumbers. Drizzle 1 Tbsp. tzatziki sauce over vegetables. Sprinkle 1 Tbsp. feta cheese over tzatziki sauce. Start rolling from one side and tuck in the bottom ½-inch. Keep rolling to form an open-ended cone.
Unlike a lot of diets, the one known as “Mediterranean” isn’t a hard-and-fast set of rules. “It’s not a strict diet as much as a general approach,” says dietitian Whitney Butler with Lehigh Valley Health Network’s Weight Management Center. The Mediterranean diet is high in fresh produce and healthy fats while low in red meat, salt and processed foods.

Its classic ingredients have been associated with a wealth of healthy effects. One recent study found that Mediterranean eating reduced the incidence of serious cardiovascular events such as heart attack and stroke. Other research suggests it can lower risks for dementia and cancer.

“I’ve seen the Mediterranean diet have benefits for patients with known diabetes or cardiovascular risks,” says health network internist Eric Mueller, DO, with Internal Medicine of the Lehigh Valley. “People find they can easily adhere to a Mediterranean diet.” That’s because it includes a lot of good food and no absolute restrictions. “The diet doesn’t prohibit you from eating bread, pasta or meat as long as you use them sparingly,” Mueller says.

Here are some of the diet’s key ingredients – and how they can improve health.

- **Fruits and vegetables** account for the bulk of the diet, providing phytochemicals and antioxidants. These nutrients help control chronic inflammation, which can result from eating too many processed foods. Plant-based foods also provide plenty of fiber, which most Americans lack. “The USDA’s ‘My Plate’ method of filling half your plate with fruits and vegetables is partly based on the Mediterranean diet,” Butler says.

- **Fish** contain omega-3 fatty acids, which have been shown to help the heart. In fact, many Mediterranean foods contain healthy fats that help displace saturated fat and trans fat, which dominate the typical American diet and are associated with higher heart risks.

- **Olive oil** is another source of healthy fats and contains more antioxidants than other vegetable oils such as corn and soybean. Cooking with olive oil means you can use less butter, which contains saturated fat. “If you do use butter, try products made with olive oil,” Butler says. And opt for extra-virgin olive oil when possible: It’s the least processed kind.

- **Nuts** contain healthy fats as well, but are also rich in calories. “Aim to eat about 1 ounce a day – about a small handful,” Butler says. Avoid nuts that are flavored with salt or honey-roasted with sugar; These added ingredients are pro-inflammatory, diminishing the nuts’ healthy benefits.

- **Legumes** such as beans, peas and lentils are packed with vitamins, minerals and other nutrients, including fiber and protein. A legume-rich diet has been linked to lower blood sugar and cholesterol, reducing risks for heart disease and diabetes.

- **Herbs and spices** such as fresh onion, garlic and other natural flavor-enhancers are thought to have health-promoting properties of their own, but also tend to displace salt from the diet, which may help improve blood pressure. “Buying commercially prepared spices is fine, but check labels to make sure they don’t contain sodium,” Butler says.

- **Wine** in moderation has been associated with lower risk for heart disease. “If you don’t drink, there’s no need to start, and you should check with your doctor if you have a history of heart or liver disease,” Butler says. “But one glass a day may have benefits.”

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**Homemade Tzatziki Sauce**

2 Tbsp. cucumbers, fresh, peeled, seeded, grated  
1 tsp. kosher salt  
2 tsp. dill weed, fresh  
¾ Tbsp. chopped garlic  
½ tsp. ground black pepper

2 tsp. fresh lemon juice  
1 Tbsp. mint leaves, fresh, chopped  
½ tsp. ground cumin  
6 oz. nonfat plain yogurt

Peel, seed and grate cucumbers (avoid over-grating). Stir in salt. Let stand for 15 minutes. Drain well. Stir in dill, garlic, pepper, lemon juice, mint, cumin and yogurt. Mix well. Refrigerate until ready to use.
There are expectations from parents and teachers, sports practices and games, homework, the desire to “fit in” and peer pressure. Going back to school can be enough to make a child feel stressed. But is this good stress or bad stress?

The answer depends on how a child views the challenges facing her. “Stress occurs when you perceive that a challenge is more than you can handle,” says Lehigh Valley Health Network (LVHN) psychiatrist Susan Wiley, MD, with LVPG-Psychiatry.

Some stress is good. For example, the stress of an upcoming exam builds self-confidence in a child who believes she will ace it if she studies. In this case, stress may be a healthy challenge that helps her grow. But a child who thinks she’s not smart enough to pass the exam can feel overwhelmed by stress. In this case, she might feel defeated.

Look for these warning signs to know your child is under too much stress:

- Stomachache, diarrhea, nausea, vomiting
- Headache
- Change in appetite
- Change in sleep pattern
- Bed wetting
- Trouble separating from you or loved ones
- Avoidance or procrastination
- Aggression
- Irritability, outbursts and tantrums
- Refusing to participate in regular activities and friendships

If you suspect your child is stressed, talk to her. “Children need to know they have an adult in their life who believes in them and loves them unconditionally,” says LVHN pediatrician Amil Qureshi, DO, with Cetronia Primary Care. He also is affiliated with ABC Family Pediatricians.

Children handle stress better when they have confidence in their resiliency. The health network’s new Mindful Kids program teaches children to bounce back from stress by building self-awareness and skills that promote healthy coping. Here are some tips you can use.

Encourage a variety of interests. Even if a child is a poor athlete, he’ll remain confident knowing he’s good in math, can play an instrument or has many friends.

Don’t overschedule. Like you, children appreciate free time.

Provide a support system. Children handle stress better when they have the love and support of family and friends.

Make sure they sleep. Children need it to grow, develop and function. Children age 5-10 should sleep at least 10 hours; age 11-17 at least eight hours.

Put healthy food on the table. A healthy diet aids in brain development and helps children stay focused.

—Rick Martuscelli
What’s New

18th Annual Parkinson’s Symposium
For patients and caregivers, get answers to questions and learn the most current information on Parkinson’s treatment and research. Sept. 28: 8:30 a.m.–2:15 p.m. at LVH–Cedar Crest

Care of the Speaking Voice
Learn tips to take care of your speaking voice, especially if you often use your voice in work or social interactions. Oct. 15: 2 p.m. at LVH–Muhlenberg

Helwig Health and Diabetes Center Community Event
Cooking demonstrations, panel discussions, door prizes, vendors and a keynote speaker. Nov. 10: 1-4 p.m. (12:30 p.m. registration) at LVH–Cedar Crest

I Pink I Can
A women’s health awareness program featuring information on cancer prevention and detection presented by hospital staff, including a Q&A session. Light dinner will be served. Sept. 25: 6 p.m. at LVH–Cedar Crest

Mindful Kids
This six-week course for children grades 4-6 is designed to help foster increased attention, inner calm, self-understanding, compassion and confidence. For details, call 610-402-CARE. Starting Sundays, Oct. 20: 4-5:30 p.m. at LVH–Cedar Crest

Pancreatic Cancer Awareness Event
An educational evening for those diagnosed and their family members, learn from experts about advances and updates in pancreatic cancer treatment. In cooperation with J’s Run, a nonprofit organization dedicated to finding a cure for pancreatic cancer. To register, call 610-402-CARE. Nov. 18: 6 p.m. at LVH–Cedar Crest

Prostate Education Event
Learn the latest about prostate health; free screenings available. Sept. 14: 8-10 a.m. at LVH–Cedar Crest Sept. 21: 8-10 a.m. at Muhlenberg Primary Care, Bethlehem

Third Annual 50+ Wellness Expo
Expo promotes health and fall prevention. Panel discussions will include Independent Living and Living With Chronic Illness. Screenings, flu shots, giveaways, healthy snacks. To register, call 610-402-CARE. Sept. 21: 9 a.m.-1 p.m. at LVH–Cedar Crest

To Fib or Not to Fib? Answers for Atrial Fibrillation
Meet electrophysiologists who specialize in heart rhythm management. Learn about the latest treatments for atrial fibrillation. To register, call 610-402-CARE. Nov. 11: 6 p.m. at both LVH–Cedar Crest and LVH–Muhlenberg

Around Our Community

Community Exchange
Create a healthier community. Volunteer time and earn time by exchanging services with friends and neighbors. Third Mon. of month: 2-4 p.m. at LVH–17th, First Wed. of month: 6-8 p.m. at LVH–Muhlenberg

Drive-Through Flu Vaccines
For adults and children 6 months and older (children must be accompanied by parent or guardian). Nonperishable food donations accepted for area food banks and shelters. Please no pets in car. Nov. 9: 9 a.m.-3 p.m. at Dorney Park, Allentown Nov. 10: 9 a.m.-3 p.m. at Coca-Cola Park, Allentown

Get Out! Lehigh Valley
This healthy outdoor activity program with a Wildlands Conservancy guide connects you to parks, trails, gardens, rivers and more in your community. For details and new dates, go to getoutlehighvalley.org or call 610-402-CARE.

Lehigh River Towpath Navigators Bike Ride ($10/person) Sept. 21: 10 a.m.

Lake Nockamixon Walk Oct. 12: 10 a.m. at Marine Visitor Parking Lot

Pool Wildlife Sanctuary Walk Oct. 26: 10 a.m.

Trexler Memorial Park Walk Nov. 16: 10 a.m.

Women’s 5K Classic
Run or walk a 5K in support of female cancers. Health expo includes packet pickup, wholesome food, health screenings, raffles and more. Expo Oct. 11: 3-7 p.m. at 501 Cetronia Road, Allentown 5K Oct. 12: 9 a.m. festivities begin at Little Lehigh Parkway, Allentown

Would a Support Group Help?
Dozens of different groups provide comfort and support.

Caring for Mind and Body

Massage Therapy
Medical therapists offer different massage options at various sites.

Mindfulness-Based Stress Reduction
Internationally recognized program uses meditation and group support.

Aging Well

APPRISE Medicare Counseling
For an appointment, call 610-402-CARE. Tue.: 10 a.m.-1 p.m.; Thu.: 9 a.m.-noon

Aqua New
Water exercise for posture, balance, strength and confidence.
Dr. Salerno’s Geriatric College of Knowledge

Early Signs of Alzheimer’s
Oct. 16
Depression in the Elderly
Nov. 13

Protecting Your Health

Cessation, What Works?
How to succeed in beating tobacco addiction.
Oct. 14

Tobacco Treatment Program
12-month program of individual counseling and ongoing support.

Partnership for Tobacco-Free Northeast
Tobacco treatment services available for individuals and businesses

CPR
- Adult Heartsaver AED
- Heartsaver Adult First Aid
- Heartsaver CPR – Pediatrics
- Heartsaver Pediatric First Aid

Living With Diabetes
Our team will work with you and your physician to design a program to fit your needs.

We provide education for:
- Prediabetes
- Type 1 and type 2 diabetes
- Gestational diabetes

We will help you learn more about:
- Healthy eating
- Being active
- Using a meter to test your blood sugar
- Medication
- Reducing risks

We also offer:
- Insulin pump training
- Continuous glucose monitoring
- Support groups for adults and children

Insulin Pumpers Support and information for adults with diabetes using insulin pumps and continuous glucose monitors (CGMs).

Techno Open House–Learn more about the most recent technology with insulin pumps.
Nov. 12 at 1243 S. Cedar Crest Blvd., Allentown

Sweet Success
Monthly support group for adults with type 2 diabetes.
Coping With Diabetes
Sept. 19
Update on Oral Medications
Oct. 17

Sugar-Free Kids
Monthly support group for children with type 1 diabetes.

Screenings

Clinical Breast Exams and Pap Tests for Uninsured Women
Appointment is necessary. Call 610-969-2800.
Sponsored by the Community Health and Wellness Center in collaboration with the Allentown Health Bureau.
Weekly 8:30 a.m.-4 p.m.

Rapid HIV Testing
Free, anonymous and confidential.
Mon.-Thurs.: 9 a.m.-3 p.m., Fri. by appointment at LVH–17th

Heart Failure Support Group
Successful living with heart failure support group for patients and families.
Meets every two months

Huntington’s Support Group
Meets second Sat. of month at LVH–Cedar Crest

Joint Replacement Prep
What to expect for knee or hip replacement.
Sept. 25, Oct. 23: 1:30-3 p.m.
Oct. 1, Nov. 5: 9-10:30 a.m.

Kidney/Pancreas Transplant Information Session
If you would like more information about kidney and pancreas transplants, attend one of our information sessions. For details, call 610-402-CARE.

Coping With Illness

Amputee Support Group
Meets third Mon. of month: 5-6:30 p.m., includes dinner at LVH–Cedar Crest

Bereavement Support Services
Bereavement Care Workshop
Grief Process Groups

Raising a Family

Welcome
Pregnancy 101
Tours
Expectant Parent Tour
Sibling Tour – My Baby and Me
Getting It All
Six-week series includes
Preparing for Childbirth,
Baby Care and Breast-feeding
Your Baby
Preparing for Childbirth Weekend
One-Day: Fri.-Sat.; Sat.-Sun.
On the Internet
Refresher
Teens Only
Preparing for Baby
Baby Care
Breast-feeding Baby
Becoming New Parents Workshop
Sept. 21

Staying Safe
Babysitting – Safe Sitter
CPR – Safe Sitter Student
CPR – Family and Friends
Free Safe Ride – Car Seat Safety
Certified technicians show how to correctly install car seats and secure children.

After-Delivery Support
Monday Morning Moms
Free!
Postpartum Support
Understanding Emotions After Delivery
Parenting
Five-week Series
Resumes Oct. 22
Workshops
Resume Sept. 19

Bereavement Care Workshop
Grief Process Groups

Individual, Family and Couples Counseling
Ladies Lunch Club
Spiritual-Based Adult Grief Support Group
Stepping Stones for Children

Brain Warriors Stroke Support Group
Share emotional and physical issues to help deal with life after stroke.
Sept. 16, Oct. 21, Nov. 18

Crohn’s Disease and Ulcerative Colitis Support Group
From the Crohn’s and Colitis Foundation of America.
Meets second Sun. of month at LVH–Muhlenberg

Lung Cancer
Appointments necessary. Call 610-402-CAre.

Coping With Illness

Amputee Support Group
Meets third Mon. of month:
5-6:30 p.m., includes dinner at
LVH–Cedar Crest

Bereavement Support Services
Bereavement Care Workshop
Grief Process Groups
Weight Management Services

INDIVIDUAL
Nutrition Counseling Assessment, body-fat analysis and goal-setting.

Nutrition Counseling/Metabolism Body Composition Test Counseling plus personal metabolism test and interpretation.

Six-Month Supportive Weight Loss Program Individualized expert-level care for nutrition, behavior and fitness.

GROUP
Eat Well for Life Learn healthy food choices for weight management.
Part 1 starting Oct. 7 Part 2 starting Nov. 4

Managing Your Weight


Daily Steps to Less Stress This lifestyle management program helps you manage everyday stress through practical relaxation techniques and stress management strategies. Starting Sept. 24

Drop 10 in 10 Group-based 10-week weight management program to help you lose 10 pounds (or 10 percent) of body weight through nutrition, exercise and behavior. Starting Oct. 3

Monthly Support Group Support and information on weight-loss surgery. Cooking Demonstration by Sodexo Oct. 2
Making Healthy Choices During the Holidays Nov. 6
Weight-Loss Surgery Information Night What to expect.

Sports Performance Classes

Youth Program For young athletes ages 8-11, two sessions/week for eight weeks concentrate on proper weight-lifting technique, flexibility and movement skills.

Junior Varsity Program For athletes ages 12-14, two or three sessions/week for eight weeks emphasize gaining flexibility, strength and power.

LVHN Fitness Group Classes

Being an LVHN Fitness member allows you to partake in a variety of classes. Call 610-402-CARE for more information. See a list of class locations and descriptions at LVHN.org/fitness. Classes are offered at four locations.

MEET YOUR DOCTOR

They’ve been inspired by a sick relative, a personal injury, a mentor. Now they’re in our community and here to care for you.

Lehigh Valley Health Network includes nearly 1,200 physicians, nurse practitioners and physician assistants. Each one has a story – and you can watch those stories on our website.

At LVHN.org/find_a_doctor you will find videos featuring more than 50 of our providers. Each one tells a personal story. Use these videos to help you choose the right doctor with whom you can build a trusting relationship.

TO FIND A DOCTOR, visit LVHN.org/find_a_doctor or call 610-402-CARE.

Watch! VIDEOS ABOUT MORE THAN 50 PROVIDERS AT LVHN.ORG/FIND_A_DOCTOR.