My Healthy Life

Demystifying Metabolism and Losing Weight

Sports Injury?
Find the right doctor

99.9 Kiss Country’s Sharon Green shares her cancer survival story

Plus
10 tips for a restful sleep
Pets + your health
Low-carb options for diabetics
Varicose veins: myths & truths

HEALTHY HOLIDAYS
Winter Wellness

WINTER 2018
'Tis the season to unwrap the magic

- Tasty holiday recipes that won’t pack on the pounds
- Tips on managing holiday stress, choosing safe toys and avoiding decorating hazards
- Plus – stories of hope, fun and inspiration to make your days merry and bright

[Visit the website](mission-health.org/holidays) to explore more holiday health and wellness resources!
Winter 2017

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Inspiration and encouragement all season long

One of the best things about living in western North Carolina is that we have the opportunity to witness the change of seasons. And with the colder winter months at hand, it’s a good time to reflect on the past year and make plans for the next.

It’s time for basketball. On page 6, read about how UNCA and Mission Sports Medicine are partnering to keep student athletes in winning shape both on and off the court.

One thing we all think of for the new year is making resolutions. Usually, our resolutions involve being healthier, and that often means weight loss. In our winter 2018 issue, you can read the inspiring story of Asheville’s Bobby Somerville, who, with the help of Mission Weight Management Center, lost 90 pounds. You’ll find it on page 14.

There’s a science to weight loss, and metabolism is one of the keys. On page 10, learn some ways to boost your REE (that’s resting energy expenditure) and be healthier. If you have diabetes, you’re careful about your carbohydrates. On page 11, get some tips about making some nutritious low-carb choices for a healthy lifestyle.

Some inspiration is always welcome, and you’ll find it on page 12, where local radio personality Sharon Green shares her story of surviving cervical cancer. And on page 18, find out how vision rehabilitation is helping Kathleen Johnson recover from a brain hemorrhage.

Of course, there’s lots more between the covers of this issue of My Healthy Life, and we know you’ll find something of value to help you be well, get well and stay well.
Music and the holiday season go hand in hand. For Alex Farrell, a 14-year-old leukemia patient, a special musical project brings a one-of-a-kind heartwarming treasure for herself and those who love her dearly.

With the help of Asheville-based nonprofit Arts for Life, Mission Children’s Hospital patients are taking part in the creative process to produce a song using their heartbeat as a rhythmic element. Heartbeat Sessions yields professional-quality recordings for patients and their families.

Alex’s eclectic taste in music helped create a mashup combining 80s classic rock with a Latin-flavored piece. Bon Jovi’s “Wanted Dead or Alive” and the Cowboy Bebop theme song “Tank!” came to life powered by big brass and Asheville’s music community.

“We wanted Alex to remember she’s still a person beyond her diagnosis. She and her family have a lasting piece of art, marking her journey through treatment,” said Amy Fisher, child life specialist at Mission Children’s Hospital.

“Alex helped create something when everything else in her pipeline had to be put on hold,” said her mother, Chris Brink. “To be part of something new was very good for her.”

Like true collaboration, beautiful music is made when Arts for Life, Mission Health patients, Echo Mountain Recording Studios and local musicians lend their talents to the project.

“A moment in time is captured for families who can look back on the positivity of creating during an otherwise stressful time,” said Annie Rogers, Arts for Life program director.

“Working with Alex was super fun,” said Melissa Hyman, who coordinates and produces the Heartbeat Sessions. “All of the musicians enjoyed the challenge of blending these incredibly different musical styles.”

Alex listened to her song for the first time privately in her home through headphones. She loved the big brass accents to the unique and soulful arrangement. For those who know her, it’s a perfect reflection of her taste and style — beautifully surprising.

For more information on the specialist services provided at Mission Children’s Hospital or to find a pediatrician in your area, visit missionchildrens.org.

To learn more about Heartbeat Sessions, visit artsforlifenc.org/heartbeatsessions.
Ask the Doctor

Rami Arrouk, MD, a pediatric gastroenterology specialist with Mission Children’s Hospital, addresses some common digestive health-related issues for children.

To find a Mission primary care provider who’s best for you, call (828) 213-3222 or request an appointment at mission-health.org/needadoc.
What are some things children can do to maintain a healthy gastrointestinal (GI) tract?

Maintain a healthy diet. Eat on a schedule. Stay hydrated. Stay active, preferably as a family. Manage stress (even babies can have tummy discomfort if they are stressed). The old Latin phrase says “Mens sana in corpore sano,” which means a healthy mind in a healthy body.

My child has a lot of “poo accidents.” Should I be worried?

You should bring up this issue with your pediatrician. “Poo accidents,” or fecal incontinence, happen for various reasons. The most common reason is constipation, which your pediatrician can treat with simple and safe medications. The sooner this treatment is started, the quicker your child will stop having those accidents. I recommend watching with your child an excellent 5-minute YouTube video “The Poo in You” that explains why and how these accidents happen.

Our pediatrician said my 2-month-old baby has infant colic. What’s the best treatment for her?

Infant colic is characterized by recurrent and prolonged periods of crying or fussing with no evidence of failure to thrive, fever or illness. They peak at 4 to 6 weeks and tend to resolve by 3 to 4 months of age. The best treatment is to apply soothing maneuvers, such as rhythmic rocking and patting 1-3 times per second in a quiet environment.

My daughter strains for 10-20 minutes, screams, cries and turns red or purple in the face with each effort to defecate, and her bowel movements are soft and occur 2-3 times daily. Is she constipated?

You may want to ask your pediatrician if she has infant dyschezia, which occurs in some otherwise healthy infants under 9 months of age, as they learn to coordinate these muscles when using the bathroom. This usually resolves in 3-4 weeks. No treatment is necessary as long as her bowel movements remain soft with no blood.

My 2-year-old son has been having watery diarrhea, 6-7 times a day, for the last 6 months. His stool tested normal and he’s growing well. Why is he having this diarrhea?

You may want to ask your pediatrician if he thinks your son has functional diarrhea (previously called toddler’s diarrhea). It’s a common condition that occurs in about 7 percent of children ages 1-3 years old.

What is your care philosophy?

Healthy kids are happy kids. It is a privilege when a family comes to the office asking us to help take care of their child’s problem. Our top priority is the well-being of your child — to keep them healthy and happy.
Game Plan
Mission Sports Medicine and UNCA partnership keeps student athletes healthy on and off the court

By Jason Schneider

Being at your best is important when you’re an athlete. And now, with the partnership between the University of North Carolina–Asheville (UNCA) and Mission Sports Medicine, student athletes will be even better.

“I am extremely excited about this new partnership,” said Marc Haro, MD, MSPT, an orthopedic surgeon with Asheville Orthopaedic Associates, an affiliate of Mission Health, and surgical director for Mission Sports Medicine. “We have built an outstanding team of specialists in what is the only true comprehensive sports medicine program in western North Carolina. This includes access to fellowship-trained orthopedic sports medicine, primary care sports medicine specialists and the Mission Health system as a whole.”

Brenda Mock Kirkpatrick, head coach of the UNCA women’s basketball program, agrees. “Partnering with Mission Sports Medicine will ensure our student athletes have consistent and quality care from physicians who are some of the best in their fields, and are excited to work with our students on a daily basis,” she said.

“Caring for the student athlete begins with making sure they are thriving mentally, physically and emotionally on and off the court,” she added. “This is something our coaches and administration at UNCA prioritize above winning championships. We can achieve this goal much easier with Mission Sports Medicine as an invested partner.”

Collaborations in Care
This partnership is part of a larger initiative between Mission Health and the university. “The goal is for UNCA and Mission Health to promote health and wellness in the Asheville area,” said Dr. Haro.

Other components include establishing the Healthy Campus 2020 Initiative intended to improve health and wellness of students, faculty and staff, provide internships in health science and administration for undergraduate students, and offer scholarships to students going into healthcare professions.

“As part of the Mission Sports Medicine team, our outstanding affiliated specialists stand ready to help care for student athletes,” said Dr. Haro. “UNCA student athletes now have a whole health system behind them. We will help elevate the care of these student athletes by using evidence-based practices and developing policies and procedures to optimize their care and treatment. We are adding to the on-the-field emergency response team and resources available to UNCA.”

Avoiding injury is a priority for the UNCA men’s basketball program. “Having doctors and therapists present in our training room on a day-to-day basis will benefit our program in the short and long run. The
constant oversight and care from Mission athletic trainers and doctors allow our athletes to stay healthy and get back on the floor quicker after injuries,” said Nick McDevitt, UNCA men’s basketball head coach.

**Treating and Preventing Injuries**

Kirkpatrick, a former Division I student athlete, can attest to the rigors of playing college-level sports on the body and mind.

“It is critical to have a support team capable of addressing all aspects of the total person, not just the athletic development piece,” she said. “When student athletes have resources at their fingertips, if an injury does occur knowing they have assistance means they can focus on their obligations and perform at high levels in all areas.”

“It’s about our student-athlete care and student-athlete welfare,” said McDevitt. “I think being able to partner with a hospital and hospital system like Mission and the talented doctors, physicians and therapists who are now at our disposal only continues to push our program forward as well as the things we can do here as an athletics department.”

“By providing access to timely primary and orthopedic care, we plan to not only treat injuries but prevent them too,” said Dr. Haro.

Dr. Haro hopes to translate this model into care for all athletes and active individuals within western North Carolina, including athletes from area high schools and youth organizations to weekend warriors. “We want all area athletes to have to access to the same team of specialists our partners at UNCA have,” he said.
Orange-Rosemary Chicken

**ingredients**
- 6 (4 oz each) skinless chicken breast halves
- 2 cloves garlic cloves, minced
- 1-2 tsp olive oil
- 3 tsp fresh rosemary, minced
- ¹⁄₈ tsp freshly ground black pepper
- ¹⁄₃ cup orange juice

**preparation**
Preheat the oven to 450 degrees Fahrenheit, and lightly spray a baking dish with cooking spray. Spray with nonstick cooking spray or lightly rub a small amount of oil on each piece of chicken; rub with garlic, and sprinkle with rosemary and pepper. Place the chicken pieces in the baking dish, and pour the orange juice over the chicken. Bake uncovered for 8-10 minutes, then flip using tongs and bake for another 8-10 minutes, or until juices run clear when pierced with a fork.*

Baste the chicken with the orange juice from the pan as needed during cooking to keep it from drying out. Remove baked chicken breasts and loosely cover with foil. Allow to rest for 5 minutes before serving. Spoon orange juice from the pan over the top of the chicken and serve immediately.

*The best way to make sure the baked chicken breasts are done is to use an instant-read thermometer. It should read 165 degrees Fahrenheit when inserted into the thickest part.

**6 servings**

Nutritional information (per piece): 155 calories; 4.8 g total fat; 40.4 mg sodium; 1.8 g carbohydrates; 25.2 g protein
Roasted Curried Cauliflower

**ingredients**
- 1 head cauliflower, broken into large florets, or 2 packages of frozen cauliflower florets
- 2 tsp olive oil
- ½ tsp salt
- 1 tsp curry powder
- 1 tsp cumin seeds

**preparation**
Preheat oven to 375 degrees Fahrenheit. Coat a rimmed baking sheet with cooking spray. Mix together the olive oil, cumin, curry powder and salt in a large bowl. Add the cauliflower and toss to coat evenly with the spices.

Arrange cauliflower in a single layer on the rimmed baking sheet. Roast until cauliflower browns slightly and is tender when pierced with a fork. About 35 minutes.

**Tip:** The orange color comes from turmeric, which has anti-inflammatory properties.

**5 servings**
Nutrition information: 44 calories; 2 g total fat; 150.8 mg sodium; 6 g total carbohydrates; 2.9 g total dietary fiber; 2.3 g protein

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Butternut Squash Soup

**ingredients**
- 1-2 Tbsp olive oil
- 1 yellow onion, chopped
- 3 cups butternut squash, cubed
- 1 apple, peeled and chopped
- ½ tsp allspice
- ¼ tsp nutmeg
- ½ tsp cinnamon
- ½ tsp cracked black pepper
- 1 tsp salt, or to taste
- 1 tsp chopped fresh thyme
- 6 cups water
- 1 Tbsp cider vinegar (or lemon juice)
- ¼ tsp crushed red pepper

**preparation**
Heat Dutch oven over medium heat. Add 1 tsp oil and onion, and cook 5 minutes, stirring occasionally. Add cubed squash and apple; cover and cook 10 minutes, stirring occasionally. Add allspice, nutmeg, cinnamon, thyme, salt and cracked pepper, and cook for 1 minute. Add water, bring to a boil, cover, reduce heat and simmer 45 minutes until squash is very tender. Add water as needed.

Blend with immersion blender or in a full size blender, working in batches until completely pureed. Stir in vinegar and red pepper.

**6 servings**
Nutrition information: 80 calories; 2.5 g total fat; 397.4 sodium; 15.6 g carbohydrates; 3.9 g dietary fiber; 1 g protein
Demystifying Metabolism
The science behind the weight loss

By Rachel Wyman, RD

We've all heard the complaint “I have a slow metabolism” when someone feels frustrated with weight management. To break this feeling of powerlessness, it's helpful to understand metabolism to influence it in a healthy way.

Weight management shines the spotlight on energy metabolism, which continuously shifts up and down like a playground seesaw, breaking down compounds to release energy and building up compounds to use energy. When you release more energy than you build, weight loss happens.

Resting energy expenditure (REE), energy expended at rest, contributes a great deal — 60 to 75 percent — to the total calories burned each day. Factors like age, gender, genetics, hormones, disease and medications can affect REE. However, research suggests you can influence REE.

Hydration – Drink More Water Daily
A 2007 study showed a 24 percent increase in REE during the 60-minute period after drinking 16 ounces of water, compared with drinking 4-8 ounces. A 2015 trial illustrated that individuals who drank 16 ounces of water before three main meals per day lost an average of 2.8 pounds more in a 12-week period.

Sleep – Get a Good Night’s Rest
A 2004 study showed individuals with 5.6 hours sleep per 24-hour cycle, after three weeks had an 8 percent decrease in REE. Another 2012 study showed a 5.2 percent drop in REE plus a 20 percent drop in post-meal energy expenditure during a 24-hour period of total sleep deprivation.

Stress – Take a Walk after a Meal
A 2015 study demonstrated a greater number of previous-day stressors were associated with lower fat metabolism, decreased post-meal energy expenditure and higher insulin production. Specifically, the 6-hour post-meal energy expenditure was 104 calories less in individuals with one prior-day stressor compared with individuals with none.

Workout – Try Resistance Training
Two classic well executed research studies conducted in 1994, at Tufts University and at the University of Maryland, had participants engage in a strength training program three times per week. After 12-18 weeks, participants gained an average of 3-3.5 pounds of muscle, and showed a 6.8-7.7 percent increase in REE. 🔁

Join Mission Weight Management to get more healthy weight-loss tips. To sign up for a free information session, call (828) 213-4100 or visit missionweight.org.

Rachel Wyman, RD, is a Clinical Nutrition Educator with Mission Weight Management. (828) 213-4100
Low-Carb Hacks
Healthy, nutritious carbohydrate options for people with diabetes

By Trisha McBride Ferguson

If you have diabetes or prediabetes, eating a nutritious diet is crucial to regulating blood sugar levels. Yet, managing carbohydrates can be challenging. Here are some carb-friendly tips and ideas for maintaining a healthy lifestyle.

Befriend Carbs
In proper quantities, carbohydrates themselves aren’t bad, said Stacy Eilers, RDN, LDN, Clinical Nutritionist Educator at Mission Health. The key is moderation and choosing the best carbohydrate options. “We need carbs. They are the fuel for our body and we don’t run right without them,” said Eilers.

Eilers suggested choosing healthy carbohydrates and spreading them out throughout the day. “If you have too many carbs at one time, your body will get overloaded and can’t clear them out of your blood fast enough,” she explained.

Get Fresh
Healthy carbs choices are fruits, vegetables, beans and legumes, and whole grains, said Eilers. Low-carb foods are often found in nature. Most nonstarchy vegetables are low in carbohydrates and are extremely nutritious. They also offer additional health benefits, such as lowering blood pressure, improving heart health, helping with weight loss and reducing the risk of cancer.

Go Low-Fat
Eating a low-fat diet benefits both the heart and diabetes. “High-fat foods tend to linger longer and not just as indigestion. They can also cause your blood sugar to stay higher longer after a meal,” said Eilers.

Control Portions
Consider both the portion size and number of portions of carbohydrates consumed. Even too many healthy carbs can raise blood sugars. “A carb serving is 15 grams of carbohydrates,” said Eilers. “At meals, it is recommended that women have 2 to 3 carb servings and men have 3 to 4 servings.”

Go-To Snacks
Pair a carbohydrate with a protein:
- Small piece of fruit with low-fat cheese
- Small apple with peanut butter
- Cut-up veggies with 2 tablespoons of hummus or guacamole
- Four to six 100 percent whole grain crackers with low-fat cheese or peanut butter
- 3 cups of air-popped popcorn sprinkled with parmesan cheese
- 1 slice of whole wheat bread with 1 ounce of chicken breast, lettuce and tomato
- 6 ounces of plain, nonfat yogurt with ¼ cup of salt-free nuts

For a low-carb/no-carb snack, try:
- A small handful of lightly salted or salt-free nuts
- Low-fat string cheese
- Hard-boiled egg
- 6 olives (warning: high in sodium)

To learn more about diabetes services at Mission Health, visit mission-health.org/diabetes.
Country music is story driven. That’s one of the reasons fans of the genre love it so much. Story can evoke emotion, create connection and inspire change. But a powerful story doesn’t have to be accompanied by a banjo or fiddle to motivate its listeners. Sometimes, just a single voice carrying out over the airwaves can stop a person in her tracks and help her change course. That’s what Sharon Green, co-host of The Eddie Foxx Show on 99.9 Kiss Country, hopes her message accomplishes.

**Broadcasting Hope**

Local radio personality Sharon Green shares her story of cervical cancer survival

**The Power of Story**

In January 2015, Green had an abnormal Pap test. Busy with work and family, she put off a biopsy. She had received abnormal Pap results in the past, and reasoned this time would turn out the same. But then another woman’s story changed her mind.

Not long after Green received her Pap results, she learned of the saga of Joey Feek, a beloved country music performer who was part of the husband-wife duo Joey + Rory. As many fans know, Joey was a cervical cancer survivor whose cancer returned and metastasized. She passed away in March 2016, but not before sharing her story with the world. Green gets emotional thinking about it.

“As a woman, you start thinking, ‘If I have a hysterectomy, are they going to be taking what makes me a woman?’” she said. “Until it’s happened to you, you don’t know how hard that’s going to be.”

Green said she and her husband, who have one 4-year-old son, also had to adjust to the reality that, after her treatment, they would no longer be able to have biological children. “I was 42 at the time, so we had already assumed we probably wouldn’t be having another child, but it’s difficult thinking about the option being taken away from you completely,” she said.

While many women with cervical cancer have experiences similar to Green’s, Dr. Case said fertility-sparing surgery may be an option in some instances. “This is more likely in earlier stages of the disease, when there are more treatment options,” she said.

Through the support of her family and doctors, Green was able to adjust her mindset. In fact, she said that having a clear diagnosis and treatment plan helped her through the process. “HOPE has some of the most wonderful people I have ever come across,” she said. “I can’t explain how wonderful Dr. Case was in explaining everything to me from the
very beginning. She was so thorough; I didn’t have any questions when I left my first appointment.”

Getting the Message Out
Following her hysterectomy, which was performed with robotic laparoscopic surgery, Green recovered well with an excellent prognosis. She does still return to HOPE every three months for a Pap test. This is a precaution to ensure the cancer hasn’t returned. Because cervical cancer is caused by the human papillomavirus (HPV), which remains in the body, there is a chance that cervical cancer can recur.

“Every three months my mom is on me to make sure I’m going in,” Green said. “She always tells me, ‘If you don’t do it for you, do it for your son and husband.’ And that’s what I’ve told women on the air, on social media and everywhere: ‘Ladies, do it for yourself, but if you’re not going to do it for yourself, do it for the people who love you.'”

Cervical cancer screenings undoubtedly play a critical role in detecting cervical cancer early. In addition to the Pap test, women can also be tested for high-risk types of HPV.

“The more than half of the women who develop cervical cancer have not been screened appropriately,” said Dr. Case. “Among women diagnosed with invasive cervical carcinoma, half have never had a Pap test, and another 10 percent have not had the test in the past five years.”

When caught early, cervical cancer is highly treatable. Women who undergo treatment of early-stage cervical cancer have excellent survival rates — with a 92 percent survival rate through the first five years following the diagnosis.

In light of the lifesaving benefits of screenings, Dr. Case recommends that women under the age of 30 get a Pap test every three years, and that women age 30 and older get a Pap test every three years or co-testing with a Pap test and HPV test every five years if both initial tests are negative. Screening can be discontinued when a woman reaches age 65.

“I pray that women will listen and realize they need to get checked,” said Green. “We all hate those regular Pap smears. You’re embarrassed, and it’s not the greatest experience. But it’s so necessary, because if you can catch it early on, you can have an experience like mine. In the early stages, surgery and radiation can cure you. You can walk away cancer free.”
Putting the “We” in “Weight Loss”

Bobby Somerville discovered that weight management is a team effort

By Jennifer Sellers
My story is about the opportunities I've been given by the professional people on the third floor at 1 Hospital Drive,” said Bobby Somerville of Asheville.

If you want to get to the core of Somerville’s weight loss—success, it’s that in a nutshell. In Mission Weight Management Center he’s found a family. One that has provided him with the motivation, encouragement and structure he’s needed to lose 90 pounds and maintain a healthy weight.

**Every Weight-Loss Journey Is Different**

Somerville points out that his story is a bit different than that of the average weight-loss patient. But then again, everyone’s story is just a little different, he said.

Prior to gastric sleeve surgery in November 2016, 50-year-old Somerville had been overweight about half his life. At his heaviest, he was 275 pounds — a weight some bariatric surgery candidates might consider closer to their goal weight than their starting weight. Yet Somerville’s weight was a problem, and he knew it. Even with a BMI under 40, he had most of the comorbidities associated with severe obesity, like diabetes and high blood pressure.

Somerville had also achieved weight loss on his own in the past, but his successes were always short lived. In fact, a year before his surgery, he lost almost 50 pounds, which he quickly began regaining. “The yo-yo dieting was taking a toll on him physically and mentally.

“When I learned about the sleeve procedure, I knew it would work for me,” said Somerville. “I knew what behavior I would be able to manage, and this facilitated that. The only other thing I needed was the support.”

Support is what Somerville got from Mission Weight Management Center — and then some. He says it has contributed as much to his success (which included meeting his goal weight within 6 months) as the surgery did.

“Last November before my surgery, I was 250 pounds,” he said. “Now I’m at 160. I’ve lost all of my excess weight, I don’t have high blood pressure or diabetes anymore, and I’m not on any medications. It has done everything for me, medically, they said it would, and I’m healthier than I’ve ever been. It has made a difference in almost every aspect of my life.”

While Somerville has taken his weight loss in stride, the rapid changes that occur following bariatric surgery can throw some patients for a loop. “Weight-loss surgery provides exceptional and often rapid weight-loss results,” said Bonnie Nece, MSN, executive director of Surgical Services Clinical Programs, Bariatric Services at Mission Health. “For those suffering years with the disease of obesity, these rapid changes can come by surprise, creating the need for support.

At Mission Weight Management, we have a full team of behavioral health, nutrition and fitness experts ready to offer support and guidance during this exciting — but sometimes unexpected — transitional period.”

“If you’re going to do this, and you’re thinking you’re going to be alone in it, that’s not what’s going to happen,” said Somerville. “You’ll find what you need. Everyone is different, and none of us have the same physical or emotional experiences with weight loss and surgery, but we all are offered the same opportunities by the great people in Mission’s Weight Management Center.”

**Working the Program**

The reason the support offered by Mission Weight Management Center has worked so well for Somerville is because he has taken advantage of all of the resources available to him. “I go to every support meeting and every postop class, I see the behaviorist once a month, I follow up with the nutritionist and I go to exercise class twice a week,” he said. “Basically, I need my own parking space over there.”

This kind of devotion to weight loss and management is the common thread Nece said she sees in patients who are successful at both losing and maintaining weight. “Follow up, follow up, follow up,” she said. “Patients who regularly follow up on medical, behavioral health, nutrition and exercise support tend to be more successful with weight-loss maintenance and lack of weight regain.”

Somerville said taking part in the Weight Management Center’s programs is much like working a program for recovery from addiction. According to him, going through the steps and talking things through really does work.

“I have a family history of substance abuse, and as a result I have a family member who is active in Al-Anon,” he said. “That’s her program; this is mine. My recovery is related to going over to the third floor and seeing those people and following up with them.”

Somerville is quick to point out that it’s not just the services he’s receiving that make him feel supported, but also the people behind them. From the surgeon to the receptionist to everyone in between, Somerville said the Weight Management Center team is professional, caring, courteous and exceptional. “They reach out to me in marvelous ways,” he said.

In addition to their personal attributes, the weight management team is also highly skilled. “We have a multidisciplinary team that exceeds all programs in western North Carolina,” said Nece. “And they have a state-of-the-art clinic and many resources at their disposal.”

“They don’t just cut your stomach out and send you on your way,” said Somerville. “They’re a Center of Excellence, and they act like it. They’re really knowledgeable and really care about outcomes. They love what they’re doing, and they’re really good at it.”

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Mission Weight Management Center offers many weight-management resources, including:

- State-of-the-art clinic
- Multidisciplinary team of providers (behavioral support, nutrition, exercise, bariatrician)
- Extensive support classes pre and post surgery
- Nonsurgical weight-loss programs
- Convenient full line of ecommerce retail items
- Frequent support groups

Register for a free Mission Weight Management information session at missionweight.org or call (828) 213-4100.

Bonnie Nece, MSN, is executive director of Surgical Services Clinical Programs, Bariatric Services, with Mission Health.

(828) 213-4100
Ahead of the Curve
A custom remodeling helmet corrected baby Janie’s skull
By Cheri Hinshelwood
Moms quickly learn the details of their newborns — from their features to newly forming habits. It wasn’t long before Janie’s family noticed she mostly slept on her right side, and her head wasn’t quite as round as when she was first born.

Janie developed plagiocephaly, a condition characterized by a flat spot on the side of her head due to her sleeping patterns. Similarly, brachycephaly is noticed when the back of a baby’s head is flat or wider than it is long. While both conditions can lead to misaligned ears, asymmetrical facial features or a bulging forehead that could last a lifetime, both are treatable when caught soon enough. These conditions are not merely cosmetic; developmental delays are linked to these irregularities, if left untreated.

“A baby’s head is not fully fused at birth,” said Matthew Kirby, a certified prosthetist orthotist with CarePartners Orthotics & Prosthetics.

While this feature helps during the birthing process, it makes a baby’s head so malleable that even gentle pressures can change a newborn’s natural head shape.

For Janie, muscles in her neck tightened on one side, causing her to look and sleep with her head to the right, creating a flat spot on that side of her head. The Shermans knew they needed to do something.

**Treatment**
Cranial remodeling reshapes a baby’s head as it grows. The team at CarePartners Orthotics & Prosthetics custom fit a specially made helmet to their tiny patient’s head. The helmet holds the high spots in place while flat spots are reshaped by the helmet as the baby’s head grows.

“We urge anyone with an infant to look closely, because this can be corrected, especially if it’s caught early enough,” said Kirby.

**Progress**
“It’s been amazing. Janie’s head is almost within normal limits,” said Sherman.

Babies are treated between three to 18 months, while their heads are still growing.

“It’s best if we first see patients who are three to five months old,” said Kirby. “We can make considerable corrections when the most significant head growth occurs during baby’s first nine months.” If parents keep helmets on for 23 hours per day, most babies can be corrected within four to five months.

“We have very high success rates,” said Kirby. “And because the Shermans were diligent, Janie made incredible progress.” Soon she will be able to take off her helmet for the last time.

**Getting Started**
It starts with a referral from your pediatrician. Experts like Kirby take measurements at the first visit to determine the size, shape and severity of irregularities. A 3D image of your baby’s head is used to create a custom helmet. Regular follow ups during treatment ensure steady progress is made. Treatment is covered by most insurance.

**Prevention**
Tummy time, repositioning and other habits can reduce time and pressures on your baby’s head while it is pliable. Newer car seats have been designed to eliminate the pressure on the back of a baby’s head for parents who want added precautions.

“We were a little concerned we wouldn’t be able to kiss our baby’s head during treatment, but she’s done so well. It’s been worth it,” said Sherman.
Alexander resident Kathleen Johnson has goals. At the top of her list is driving. Next up is a return to teaching yoga. And then there are a host of everyday activities — areas in which she wants to regain full independence. Her husband, Michael, believes she’ll get there. “She’s a very determined person,” he said. “She’s always achieved what she’s put her mind to.”

A Knack for Transformation
Kathleen’s past achievements included earning her law degree in her 40s, attending law school at night and working during the day, and then later changing careers to pursue her passion for yoga.

“In New Jersey where we’re from, Kathleen (pronounced “Kathlyn”) was an attorney — a sole proprietor,” said Michael. “When we moved down here, she worked in conflict resolution for a while. But when she started taking yoga classes at Asheville Community Yoga, she enjoyed it so much she decided to take the training to become an instructor. That’s been her personality her whole life — someone says she can’t do it, she finds a way to do it. She has totally transformed herself time and time again.”

In her quest to perform another metamorphosis, 70-year-old Kathleen is working hard on recovery exercises and

Vision rehabilitation is helping Kathleen Johnson recover from a brain hemorrhage

By Jennifer Sellers
therapies with CarePartners. She has come a long way since July 9, 2015, the day of her brain hemorrhage.

In the early days, following her discharge from the hospital, she received inpatient rehabilitation from CarePartners. “When I went to CarePartners, I had no idea what was going on,” she said. “I could barely talk, I couldn’t do anything.”

Kathleen was at CarePartners for about a month, where she received physical therapy, occupational therapy and speech therapy. Following her stay there, she was released to outpatient care.

Vision Rehabilitation

While Kathleen has made strides in many areas of recovery, one of her remaining hurdles is her vision. The hemorrhage occurred in the rear left portion of her brain, which impacted her vision in the upper right corner of her eye. This affects her peripheral vision on that side, which is an important visual component in driving.

According to Cynthia Piasta, OTR/L, Kathleen’s vision rehabilitation therapist at CarePartners, vision loss due to an event like a brain hemorrhage or stroke is somewhat common. “Vision takes place in various areas of the brain; any direct injury to those areas or subsequent injury due to swelling on the brain can lead to a visual impairment,” she said.

Fortunately, recovery of vision loss is often possible, and when it’s not, compensations and adjustments can be made, said Piasta. “Studies show that vision rehabilitation has been successful in treating many of these impairments,” she said. “In cases where people do not progress with rehabilitation or the prognosis with rehabilitation is poor, modifications or compensations can be used to help people adapt to their visual changes and continue to lead successful lives. We also work closely with our optometrists, neuro-ophthalmologists and low-vision therapists to discuss further needs such as prisms or surgery.”

The therapies Piasta has taught Kathleen, which she works on at home every day with Michael when she doesn’t have an appointment with Piasta, have been strengthening her vision, she said. She also finds she’s learning to compensate for her blind spot better.

The exercises she practices include one in which she visually follows her thumb as far right as possible, another in which a pen is extended by a string and must be focused on until the configuration forms a cross shape, and the final one involves visually following a laser pointer in a dark room or closet. This one the Johnsons have found entertaining: “Our cat tried to join in on the exercise!” Kathleen laughed.

There is a range of vision therapies and resources available to those who are recovering from stroke or hemorrhage, said Piasta — although not all come with feline endorsement. “In vision rehabilitation, we look at how vision is affecting a person’s ability to perform daily living activities, and we use techniques to work on those tasks,” she explained. “Some techniques that we use are visual motor exercises, accommodation techniques, bilateral integration techniques, use of fine motor tasks, visual perceptual exercises and use of manual therapy to decrease cervical tension or to provide assistance with lymphatic drainage affecting the ocular tract. We will also provide compensation techniques to allow people to return to functional tasks when rehabilitation is not effective or appropriate.”

The Support of Experts

According to the Johnsons, Kathleen wouldn’t have progressed this far without the care she received through Mission Health and CarePartners.

“The doctors we dealt with in the neurology department at Mission were wonderful, and really all the people she’s dealt with have been — and there have been a lot,” said Michael. “At CarePartners, they really worked with her intensely, and after about two weeks, you could see her coming back in all the different phases.”

Kathleen said everyone at CarePartners is well aware of her desire to drive again, and that they have all been very encouraging to her.

“They know she’s someone who tries very hard, and I think that motivates them even more,” said Michael.

According to Piasta, “CarePartners focuses on patients’ individual needs and capabilities in order to help them achieve the best possible outcomes. We strive to provide our patients with a strong understanding of their injury in order to empower them,” she said. “We believe in patient-centered therapy that allows people to return to happy and productive lives after therapy.”

Kathleen is planning on doing just that. She has high hopes for her future, but plans to adapt no matter what. “Things are getting better and better with my vision, and it’s a lot easier now for me to compensate,” she said. “What I always say to myself, and what I’d like others to know, is that no matter what you’re up against, you can always try.”

CarePartners Vision Services provides a variety of services to assist those who have vision loss or challenges due to stroke, hemorrhage or neurologic impairment:

- vision rehabilitation
- low-vision rehabilitation
- physical therapy
- driver rehabilitation

It’s strongly recommended that patients seek an evaluation from an ophthalmologist or optometrist prior to setting up vision rehabilitation with an occupational therapist, because therapists don’t diagnose medical conditions.

To schedule an appointment with CarePartners Vision Services, call (828) 274-6100.

Cynthia Piasta, OTR/L, is a vision rehabilitation therapist with CarePartners. (828) 274-6100
Getting under Your Skin
The truth about varicose veins

By Cheri Hinshelwood

Varicose veins occur when damaged veins have trouble getting blood from the legs back to the heart. They can be painful and be a sign of a serious health issue. Toby Cole, MD, interventional radiologist and medical director with The Vein Specialists of Carolina Vascular, helps separate truths and myths about varicose veins.

**MYTH**

Varicose veins are nothing more than unsightly

**Truth:** Spider veins — fine veins under the skin — are merely cosmetic. However, swollen, bulging veins known as varicose veins are more serious. If untreated, they can lead to more severe medical conditions like leg swelling, skin discoloration, hemorrhaging and difficult-to-heal wounds. “This disease is progressive and should not be ignored,” said Dr. Cole.

**MYTH**

Varicose veins are an older person’s condition

**Truth:** About half of people with varicose veins are under age 50. “Contributing factors include family history, childbirth, obesity and occupations requiring prolonged sitting or standing,” said Dr. Cole.

**MYTH**

Insurance doesn’t cover treatment for varicose veins

**Truth:** Many insurance companies cover treatment when symptoms are present.

**MYTH**

Surgery is the only option for treating varicose veins

**Truth:** A common treatment for varicose veins is minimally invasive thermal ablation of refluxing veins. The procedure is performed in the office as an outpatient. Ultrasound guidance is used to access the vein and the laser is placed into position for thermal ablation. The bulging veins are then removed through very small 2-3 mm incisions. “The good news is treatment is a routine procedure done every day with very good outcomes,” said Dr. Cole.

**MYTH**

Recovery for thermal ablation means being bedridden for a long time

**Truth:** Patients are asked to stay active with light activity following treatment. Walking 30 minutes per day is recommended the day of the procedure, and for 2 weeks following the procedure, just no heavy lifting or very strenuous activity for two weeks, until the inflammation subsides.

**MYTH**

Varicose veins can be prevented

**Truth:** No, since heredity, childbirth and occupations are risk factors. “Elevating your legs, wearing compression socks and losing weight can relieve some symptoms, but won’t prevent the onset,” said Dr. Cole.

Want great looking legs for summer? Call the varicose veins experts with The Vein Specialists of Carolina Vascular at (828) 670-VEIN (8346) or visit theveinspecialists.com.
The decision to choose hospice care is never an easy one. But for those facing a terminal illness — and for their families and loved ones — thinking about hospice earlier on can be beneficial.

Making Life Meaningful

“We have a certain taboo in our culture about talking about death,” said Michael D. Parmer, DO, CPE, FAAHPM, System Medical Director — Post Acute and Palliative Care Services, CarePartners. “This is an uncomfortable decision and is very emotional for all involved.”

While physicians often say they don’t want to take away hope by discussing the end of life, Dr. Parmer added, all the parties involved usually realize the direction the illness is taking. “We have the opportunity to make the final days, weeks or months that a person lives a meaningful and positive time to negotiate the grief [and] loss, and to celebrate the person’s life.”

A Positive Experience

All people with a terminal prognosis of six months or less are eligible for hospice care. “This means that a physician must be willing to state that if the disease or condition a patient is dealing with continues its current course, it is reasonable to think that this person will die within the next six months,” said Dr. Parmer.

“Often patients, families and doctors feel that hospice is just available for the management of symptoms and the end-stage dying process,” he said. “In reality, by engaging with hospice at an earlier time in the end-stage trajectory of the disease, the hospice team is able to provide for good symptom management and support that allows a person to stay engaged with family and friends, and design a positive end-of-life experience.”

Providing Quality of Life

The hospice team’s ability to help manage symptoms and treatments can provide more quality time to spend with loved ones.

“An example would be a patient who wants to travel or have quality time with their grandchildren, but is having difficulty managing symptoms associated with the end-stage disease or aggressive treatments,” said Dr. Parmer. These symptoms and treatments, he added, may not be adding to their length of life, but instead may be decreasing their quality of life.

Hospice is able to help patients and families navigate these difficult times with support through physical, psychosocial and spiritual needs, and the expertise of the interdisciplinary team.

“It is a personal choice that can provide for improved quality of life, and in many cases, patients enrolled in hospice live longer than those patients with similar disease that are not enrolled in hospice,” said Dr. Parmer.
Reading Is Fundamental
NICU book program helps families bond
By Nancy Lindell

Every day, mothers and fathers walk into the Mission Neonatal Intensive Care Unit (NICU) to see their babies. Often parents of these babies are unable to hold their children, to do the normal things that other parents might take for granted.

In part, this is why the Family Support team developed the NICU reading program in February 2017. For each infant who comes into the NICU, a book is given — a book the family can one day take home with them. This book stays at the bedside to be picked up by a parent, a nurse or a volunteer, and it is read by them to that baby.

“The goal is to help the family bond to the baby. They can’t hold their baby, so it’s an opportunity to bond in another way,” said Jessica Edwards, Family Support and Outreach Coordinator and Advisor with Family Support Network of WNC, Mission Children’s Hospital.

Often there is a sense of powerlessness that comes over parents whose baby is whisked off to the NICU. While the staff is friendly and the walls are painted brightly, the NICU can be an intimidating place for parents. The NICU reading program provides parents who are on an emotional and difficult journey with a way to cope.

“It helps create a sense of normalcy or something that a parent who was able to take their baby home might be doing. And the books go home with the babies,” said Linda Smith, RN, NICU Nursing Manager.

Babies in the NICU are able to hear and process sounds, so the reading program allows for critical brain and auditory development. While the initial hope of the program is to provide parents with a bonding experience, evidence is now showing that parent-infant verbal interactions in the NICU improve language and cognitive outcomes.

For more information about maternity and NICU services provided by Mission Health, visit mission-health.org.

Volunteer Charlie Mueller reads to Baby Leda in the NICU

Jessica Edwards is Family Support and Outreach Coordinator and Advisor with Family Support Network of WNC, Mission Children’s Hospital.

Linda Smith, RN, is the NICU Nursing Manager. missionchildrens.org
The loyalty, affection and silliness pets offer us can greatly add to our sense of happiness and can even improve our health. Numerous studies have found that pet owners tend to have certain health advantages over people who don’t own pets:

1. Physical Fitness and Mobility
Pet owners tend to get more exercise and be less obese, on average, than people who don’t own pets. Certain activities, in particular — such as dog walking or horseback riding — are known to increase physical activity. Pet ownership can be particularly beneficial for older pet owners, who tend to have greater overall mobility at home when they walk their dogs regularly.

2. Cardiovascular Health
The reassuring presence of pets has been shown to lower heart rates and blood pressure. Studies have shown that dogs, in particular, may help their owners recover from heart attacks. Research conducted by the National Institutes of Health showed that dog owners were significantly more likely to have survived the year than those who did not own a dog.

3. Allergies and Asthma
Studies are showing that kids who grow up in homes with “furred animals” are less likely to develop allergies and asthma. This goes for children who grow up on farms, too. It is believed that early and ongoing exposure to the bacteria and allergens animals produce can help strengthen a child’s immune system.

4. Aging and Brain Health
Simply owning a pet can improve the health and mental well-being of older adults. In fact, some insurance companies even grade pet ownership favorably in evaluating the applications of adults over age 75. Studies have also found that having an animal in the home can reduce anxious outbursts among people with Alzheimer’s disease.

5. Mental Health
Perhaps one of the most well-known benefits of pet ownership is improved mental health. Studies have shown that there is a noticeable increase in serotonin and dopamine when people interact with a beloved pet. Pets can help reduce depression and anxiety, and can engender positive feelings in their owners.

Pet Rx
Keep your pet healthy and happy with pet prescriptions and supplies at great prices from Mission Community Pharmacy:
- pet prescriptions
- vitamins and treats
- chews and toys
- skin care and shampoo
- leashes and collars
- dental care
- grooming supplies

Mission Apawthecary
2 Medical Park Drive, Asheville
(828) 213-9470, option 4
Are You Sluggish during the Day?

Try these 10 tips for a restful night

By Trisha McBride Ferguson

1. Don’t go to bed unless you are sleepy.
2. Keep a regular schedule for meals, medications, chores and other activities to help keep the inner body clock running smoothly.
3. Exercise in the late afternoon to ensure good quality sleep at bedtime.
4. Avoid stimulants such as caffeine and nicotine close to bedtime.
5. Avoid alcohol (at least within four hours of sleep).
6. Avoid daytime naps.
7. Avoid eating close to bedtime.
8. Ensure adequate exposure to natural light during the daytime.
9. Don’t watch television, use smartphone devices or read in bed.
10. Make your bedroom cool, dark and quiet.

Sleep is an essential part of a healthy lifestyle. More than just inconvenient, poor-quality sleep can have a major impact on your overall health. “Sleep is necessary for life,” said Roy W. King, DO, a neurologist and sleep medicine specialist with Mission Neurology. “Sleep is required for both proper healing and for proper memory formations.”

Chronic sleep deprivation increases risk of hypertension, kidney disease, heart disease, depression, diabetes and stroke, explained Dr. King. Sleep deprivation also increases irritability, decreases concentration, promotes memory lapses/loss, impairs moral judgement, increases reaction times and decreases accuracy.

“Sleep deprivation tends to increase irritability and anger,” said Dr. King. “It also may lessen one’s ability to deal with stress in their life. Chronic sleep deprivation increases risk for depression.”

Sleep deprivation also hinders weight loss. “With sleep deprivation, it has been shown that your body makes more of a protein hormone called ghrelin that promotes hunger, and less of leptin — a protein hormone that signifies satiety. Thus, sleep deprivation tends to lead to overeating,” said Dr. King.
It started out as an ordinary January day in Jeff Butler’s income tax office in Clayton, Georgia. Then he tried to share a simple story with his wife. “I couldn’t find the words,” he recalled.

Butler’s wife called his doctor, who urged them to get to the hospital immediately. When Butler reached the Angel Medical Center emergency department in Franklin, North Carolina, staff confirmed what his physician had suspected. “My nurse looked at me and said, ‘You’ve had a transient ischemic attack (TIA), a mini-stroke, and you’re at risk for a more serious stroke in the next hour or even day,’” Butler recalled.

Butler, just one week away from his 70th birthday, was whisked away for a series of tests and then, even though his symptoms had passed, was admitted for 24 hours of intensive monitoring.

He quickly learned that a TIA is a life-changing event — and that he was in the right place for advanced care. Angel Medical Center is an accredited Acute Stroke Ready Hospital, and the nurse who arrived in his room to educate him about his new “normal” was Amanda Pack, RN, a stroke-certified registered nurse (SCRN).

“Just because these symptoms resolved does not mean your condition was minor or this wasn’t a big deal,” Pack told him.

Pack described how TIAs occur when a clot or a narrowed artery temporarily blocks blood flow to part of the brain — and noted that having one TIA put him at greater risk for additional TIAs or a full-blown stroke. “She drew easy-to-understand diagrams to help my wife and I understand,” Butler said, and outlined preventive steps he could take. “Amanda had been well-trained to do her job.”

He credits the care and education he received at Angel Medical Center with helping him make diet, exercise and medication changes designed to prevent a more serious stroke. “I have the utmost respect for the team members at Angel Medical Center and Mission Health for the service they provided to me that day,” said Butler. “I’m forever grateful.”

Do You Know the FAST Test for Stroke?

Face: Is one side of the person’s face drooping?

Arm: Does one arm drift downward when both arms are raised?

Speech: Is the patient’s speech slurred or strange?

Time: If you observe any of these signs, it’s time to call 911.

To learn more about stroke services at Mission Health, visit mission-health.org/stroke.

Amanda Pack, RN, is a stroke-certified registered nurse at Angel Medical Center.

Sudden Silence

Jeff Butler gets expert help after a stroke

By Deanna Thompson
Choosing an Orthopedic Provider
From falls to sports injuries, the right doctor makes a difference

By Jason Schneider

Whether you’re a weekend warrior or simply enjoy a recreational activity or two, you may be in need of orthopedic care at some point due to an injury. Here’s what you should look for when choosing an orthopedic specialist:

Training
“I believe the surgeon’s training is an important factor, and if they are board certified and maintaining the continuing medical education for continued board certification,” said David Pope, MD, an orthopedic surgeon with Asheville Orthopaedic Associates, an affiliate of Mission Health. Dr. Pope is fellowship trained in sports medicine and specializes in advanced arthroscopic surgery of the knee and shoulder, including complex ligament repair of the knee, rotator cuff repair and stabilization of shoulder injuries.

Availability
Having care available when you need it is also important. “We are currently offering full-service orthopedics five days a week in Spruce Pine, as well as Burnsville on one of those days,” said Dr. Pope. “We’re capable of treating the majority of orthopedic issues at Blue Ridge Regional Hospital, but I am also associated with Asheville Orthopaedic Associates if added expertise is needed.”

Personal Care
When you’re injured, you want to know that your provider will take the time to explain your injury and the treatment required. “The biggest factor, I think, is spending time with the patient and letting them know you care about their problem or injury,” said Dr. Pope. “Being available to answer questions and responding to problems that may arise during the course of their treatment in a timely fashion.”

David Pope, MD, treats a number of orthopedic conditions, including:
- fractures
- shoulder problems requiring conservative and surgical treatment, including rotator cuff tear
- conservative and surgical treatment of knee injuries, including meniscus tears and ligament injuries
- hand injuries, including tendinitis, carpal tunnel syndrome surgery and treatment of trigger fingers
- conservative treatment of sports-related sprains, strains and overuse injuries

Mission Community Orthopedics and Sports Medicine is located at 189 Hospital Drive in Spruce Pine. To schedule an appointment, call (828) 766-3555, or to learn more about Mission Orthopedics, visit mission-health.org/boneandjoint.

David Pope, MD, is an orthopedic surgeon with Asheville Orthopaedic Associates, an affiliate of Mission Health.
(828) 213-1111

Orthopedic surgeon David Pope, MD, attending to one of his patients

Photo by Ryan Chambers
Get in the Zone
Do you know your target heart rate?
By Trisha McBride Ferguson

Everyone knows exercising is a key to weight loss and a healthy lifestyle — but did you know managing your heart rate can help you maximize your efforts? “People starting an exercise program such as jogging or cycling will often over exert themselves, which is not needed and can be detrimental,” said Johnathan Davidson, MD, a general cardiologist with Asheville Cardiology Associates, an affiliate of Mission Health. “An effective exercise program is one that can be maintained, and this requires working in your target heart rate zone — neither under nor over exerting yourself.”

Know Your Zone

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<th>Maximum Heart Rate (100%)</th>
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<td>30 years</td>
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*bpm* = beats per minute  |  Courtesy American Heart Association - www.heart.org

The easiest way to track heart rate is to **wear a heart rate monitor**

Before beginning an exercise program, consult your physician

Visit Mission Health’s blog for additional resources on improving your heart health at blog.mission-health.org.
Michael Chenier, MD, Sarah Ciccotto, MD, Yaron Fridman, MD, Lucius Howell, MD, and LaVone Smith, MD, join Asheville Cardiology Associates.

Dr. Chenier is a graduate of the University of North Carolina School of Medicine at Chapel Hill. He completed his residency at the Duke University Medical Center in Durham, North Carolina, and later completed a two-year fellowship in interventional cardiology, including structural heart and peripheral endovascular interventions at the Cleveland Clinic in Cleveland, Ohio. Dr. Chenier is board certified in internal medicine, cardiovascular disease, interventional cardiology and nuclear cardiology. In addition, he is a certified registered physician in vascular training, RPVI.

Dr. Ciccotto is a graduate of the University of Maryland School of Medicine in Baltimore. She completed her residency at the University of Maryland Medical Center and Baltimore Veterans Affairs in Baltimore, Maryland, and later completed her cardiovascular disease fellowship at the University of North Carolina in Chapel Hill. Dr. Ciccotto is board certified in internal medicine and cardiovascular disease.

Dr. Fridman is a graduate of the University of Pittsburgh School of Medicine in Pennsylvania. He completed his internal medicine residency at the University of Michigan in Ann Arbor and later completed his cardiovascular disease and advanced imaging fellowship at the University of Pittsburgh Medical Center, Heart and Vascular Institute in Pittsburgh, Pennsylvania. Dr. Fridman is board certified in internal medicine and cardiovascular disease.

Dr. Howell is a graduate of Tulane University School of Medicine in New Orleans, Louisiana. He completed his residency at Tulane University School of Medicine, and later completed his cardiovascular disease and interventional cardiovascular disease fellowships at the UNC Center for Heart and Vascular Care in Chapel Hill, North Carolina, focusing on coronary artery and peripheral vascular interventional procedures. Dr. Howell is board certified in cardiovascular disease, vascular imaging and echocardiology.

Dr. Smith is a graduate of the University of Virginia in Charlottesville. She completed her residency at the University of Texas Health Science Center in Houston, and later earned her cardiovascular medicine, advanced heart failure and transplant fellowships at the University of Virginia Health System in Charlottesville. Dr. Smith is board certified in internal medicine and cardiovascular disease.

The Asheville Cardiology Associates office is located at 5 Vanderbilt Park Drive in Asheville. The phone number to schedule an appointment is (828) 274-6000.

Stephen Chadwick, DDS, joins the Mission Children’s Hospital dental team. Dr. Chadwick graduated from the University of North Carolina School of Dentistry in Chapel Hill. He completed a pediatric dental residency and received his Master of Public Health from the University of Washington in Seattle.

Dr. Chadwick sees patients across western North Carolina on The ToothBus and will be treating patients at McDowell Hospital and Blue Ridge Regional Hospital. He is part of the dental team located at Mission Children’s Hospital Reuter Outpatient Center, at 11 Vanderbilt Park Drive in Asheville. The office number is (828) 213-1700.
Ellen Hearty, MD, joins McDowell Women’s Care. Dr. Hearty is a graduate of Case Western Reserve University School of Medicine in Cleveland, Ohio. She recently completed her residency at MAHEC OB/GYN Specialists in Asheville. Prior to her medical career, Dr. Hearty received the United States Congressional Award, Bronze Medal and the Presidential Volunteer Service Award.

Dr. Hearty sees patients at McDowell Women’s Care with three convenient locations including Marion, Burnsville and Spruce Pine. The phone number to schedule an appointment is (828) 766-3001.


Dr. Haro has also been named the Medical Director of Mission Sports Medicine. He earned his medical degree from the Indiana University School of Medicine in Indianapolis, and completed his residency in orthopedics at the University of Virginia School of Medicine in Charlottesville. Dr. Haro subsequently earned his sports medicine fellowship at Midwest Orthopaedics at Rush in Chicago, Illinois. He worked as an assistant professor in the Department of Orthopaedics at the Medical University of South Carolina in Columbus for the last three years. Dr. Haro also holds an undergraduate degree in athletic training from Purdue University in West Lafayette, Indiana, as well as a master’s degree in physical therapy from Washington University in St. Louis, Missouri.

Dr. Hiza earned her medical degree from the University of Colorado School of Medicine in Denver, and completed her residency in orthopedics at Emory University in Atlanta, Georgia. Dr. Hiza subsequently earned her fellowship in orthopedic sports medicine and orthopedic surgery at the Southern California Orthopedic Institute, in Van Nuys, California.

Dr. Rutherford earned his medical degree from the Medical College of Georgia in Augusta, where he was inducted into Alpha Omega Alpha, and completed his residency in orthopedics at Duke University Medical Center in Durham. Dr. Rutherford subsequently completed fellowship training in hip and knee replacement at Colorado Joint Replacement in Denver, Colorado.

The Asheville Orthopaedic Associates office is located at 111 Victoria Road in Asheville. The phone number to schedule an appointment is (828) 252-7331.

Hiromi Terawaki, MD, and Sean M. Warsch, MD, join Cancer Care of Western North Carolina, a service provided by Mission Hospital.

Dr. Terawaki graduated from Duke University with a biomedical and electrical engineering degree. She earned her medical degree from the Medical University of South Carolina as a presidential scholar, followed by her internal medicine residency at the California Pacific Medical Center in San Francisco. She returned to the South for her hematology and medical oncology fellowship training at the Winship Cancer Institute of Emory University. Dr. Terawaki is board certified in Internal Medicine, and board eligible in Hematology and Medical Oncology.

Dr. Warsch earned his medical degree from the University of Miami Miller School Of Medicine in Florida, and completed his residency in internal medicine at the University of Miami in Florida. Dr. Warsch subsequently earned his fellowship in Hematology and Oncology at the Sylvester Comprehensive Cancer Center at the University of Miami in Florida.

Cancer Care of Western North Carolina, a service provided by Mission Hospital, is located at 21 Hospital Drive in Asheville. The phone number to schedule an appointment is (828) 253-4262.
Calendar of Events

December 2017 through February 2018
All events are free unless noted. Event dates and times subject to change.

BLOOD DRIVES

The Blood Connection of Greenville, South Carolina, is the sole provider of blood to Mission Health, guaranteeing that all blood donated stays here locally for the benefit of the community. To schedule a blood donation appointment, call (828) 213-2222, option 2. Walk-in appointments welcome; however, appointments are requested. For more information, visit mission-health.org/blood-drives.

Angel Medical Center
Dec 8, Feb 2, 8 am-2 pm
120 Riverview St., Bloodmobile in the parking lot, Franklin

McDowell Hospital
Dec 7, noon-5 pm
420 Rankin Dr., 500 Building, Conference Room, Marion

Mission Hospital
Dec 7, noon-5 pm; Feb 20, 7 am-noon and 1-6 pm
Memorial Campus, 501 Biltmore Ave., Lobby, Asheville

Transylvania Regional Hospital
Dec 13, Feb 8, 9 am-2 pm
260 Hospital Dr., Carlson Conference Room, Brevard

CHILDREN’S HEALTH

Parenting and Baby Safe Classes
Educational opportunities for all caregivers. Various dates and times
Asheville
For details, visit store.mission-health.org/womens/

SUPPORT

ALS (Lou Gehrig’s Disease) Support Group
4th Friday of each month, 1-2:30 pm
23 Edwin Place, Asheville
Contact Pamela Brown at (828) 252-1097

Aphasia Support Group
Every Monday, 10 am-12 pm
Grace Covenant Presbyterian Church, 789 Merrimon Ave., Asheville
Contact Edna Tipton at (828) 684-9619 or ednatip@gmail.com
For more information, visit www.ashevilleaphasia.org

Begin the Conversation: End-of-Life Care Planning
3rd Monday of the month, 5:30-6:30 pm
CarePartners, 68 Sweeten Creek Rd., Seymour Auditorium, Asheville
Contact Dylan Babb at (828) 775-7111
Please call ahead if you are attending

Bereavement Support Groups
Call for dates and times
CarePartners Bereavement Center, 68 Sweeten Creek Rd., Asheville
For information, call (828) 251-0126

Brain Injury Support Network
4th Tuesday of each month, 6-7:30 pm
Foster Adventist Church, 375 Hendersonville Rd., Asheville
Contact Lynn Williams at (828) 683-8788 or Karen Harrington at (828) 277-4868

Burn Survivor Support Group
1st Saturday of each month, 2-4 pm
CarePartners Seymour Auditorium, 68 Sweeten Creek Rd., Asheville
Contact Frank Hensley at frank@greenstreet.org

Caregivers Support Group
3rd Wednesday of each month, 3:30-5:30 pm
CarePartners Adult Day Services, 68-A Sweeten Creek Rd., Asheville
Contact Kenya Miles at (828) 277-3399

Grief Classes
CarePartners Bereavement Center, 68 Sweeten Creek Rd., Asheville
For information, call (828) 251-0126

Hearing Loss Support Group
3rd Saturday of each month, 10:30-11:30 am; starting in 2018 the group will meet during the week (email or call for new meeting time)
CarePartners Seymour Auditorium, 68 Sweeten Creek Rd., Asheville
Contact Ann Karson at (828) 665-8699 or akarson57@gmail.com

Limb Loss Support Group
1st Thursday of the month, 4 pm
CarePartners Conference Room B, 68 Sweeten Creek Rd., Asheville
Contact David Taylor at (828) 254-3392

Parkinson’s Support Group
1st Tuesday of the month, 10:30 am-12 pm
Grace United Methodist Church, 94 Tunnel Rd., Asheville
Contact Dylan Babb at (828) 775-7111

Post-Polio Resource Group
2nd Saturday of the month, 1-3 pm
Asheville
Contact Charles Henson for location at (828) 648-1938 or janicehenson1@aol.com

Spinal Cord Injury Support Group (patients and caregivers)
3rd Thursday of the month, 11 am-12 pm
CarePartners Rehabilitation Hospital Family Room, 68 Sweeten Creek Rd., Asheville
Contact Debbie Johnson, PT, at (828) 274-2400, ext. 41112

Stroke and Neurological Disorders Support Group
1st Wednesday of the month, 3:30-4:30 pm
Dec 1: Holiday Party
Jan 3: My Medications with Jared Chiusano
Feb 7: Laughter Yoga with Cindy Miles
Angel Medical Center, 120 Riverview St., Cafeteria, Franklin
For more information, call (828) 369-4171

Stroke Education and Support Group
2nd Thursday of the month, through May, 12:15-1 pm
CarePartners Seymour Auditorium, 68 Sweeten Creek Rd., Asheville
Contact Robin Smith at (828) 274-9567, ext. 41101
WEIGHT MANAGEMENT

Mission Weight Management: Free Medical Information Session — Mission Hospital
An information session on a program designed to help you lose weight without surgery with the help of trained medical professionals.
Dec 6, 11 am; Dec 21, 6 pm; Jan 3, 11 am; Jan 18, 6 pm; Feb 7, 11 am; Feb 15, 6 pm
Call (828) 213-4100 or visit missionweight.org

Mission Weight Management: Free Surgical Information Session — Mission Hospital
Learn about our many surgical options for weight loss.
Dec 8, 1 pm; Dec 19, 5:30 pm; Dec 22, 1 pm; Jan 5, 1 pm; Jan 16, 5:30 pm; Jan 22, 5:30 pm; Jan 26, 1 pm; Feb 2, 1 pm; Feb 20, 5:30 pm; Feb 23, 1 pm; Feb 26, 5:30 pm
Call (828) 213-4100 or visit missionweight.org

Mission Weight Management: Free Surgical Information Session — Cherokee
Learn about our many surgical options for weight loss.
Jan 4, 5:30 pm
Call (828) 213-4100 or visit missionweight.org

Mission Weight Management: Free Surgical Information Session — Fletcher
Learn about our many surgical options for weight loss.
Dec 21, 5:30 pm; Feb 15, 5:30 pm
Call (828) 213-4100 or visit missionweight.org

MISSION HEALTH

Childbirth and Pregnancy Classes
Educational opportunities for women and families including a free orientation for women who plan to give birth at Mission Hospital.
Various dates and times
Asheville
For details, visit store.mission-health.org/womens/

For a full list of Mission Health’s events, visit calendar.mission-health.org
Thank You

“I would like to express sincere appreciation for my recent hospital stay at McDowell Hospital. I went to the emergency room the evening of June 26, 2017, with a hernia that had blocked my intestines. I was admitted to the hospital and received emergency surgery the next day to repair two hernias. I have medical problems resulting from esophageal cancer that make me a difficult case. I was treated with respect and understanding by all the hospital staff including the emergency room, hospital staff for room 232 and the surgical staff. I believe the level of care I received to be a reflection on a hospital administration that expects nothing less than excellent medical care at their facility. Thank you.” — From Richard La Baw via Mission Health’s Office of Mission Experience (formerly Office of Patient Experience) online contact form.

The philosophy of Mission Heath is summarized through our BIG(G)ER Aim: to get every person to their desired outcome, first without harm, also without waste and always with an exceptional experience for each person, family and team member. Through the Mission Experience we are committed to provide positive recognition of team members as well as assisting with the needs of our patients and families. To contact the Office of Mission Experience, visit mission-health.org/mission-experience.

Have a great Mission Health story to tell? Email us at MyHealthyLifemagazine@msj.org.
At Mission Women’s Care, we understand that each season of life brings change. We also know that over the course of her lifetime, a woman’s healthcare needs change. Our providers specialize in caring for the particular needs of women throughout their entire lifetime.

We are now accepting patients at all of our convenient, women’s care locations. To find a provider in your area, visit mission-health.org/womens.
Choose a plan as flexible as you are.

IF YOU HAVE BLUE CROSS MEDICARE ADVANTAGE, YOUR COVERAGE HAS CHANGED.

Don’t miss your opportunity to change insurance and get care at the in-network rates you deserve.

OPEN ENROLLMENT IS OCT. 15 - DEC. 7
Visit missionstandswithyou.org