Mike Raggett on the road again
In this issue of *Pulse* magazine, you’ll find articles about the advantages of our new technology to see the human heart in 3-D, what Community Hospital is doing to help combat childhood obesity, and the impacts of an ongoing national shortage of certain prescription drugs.

Mostly, however, you will read about people who have taken on a health challenge and not only survived, but thrived. Lung disease, breast cancer, a rare tumor, a multitude of heart ailments — those are among the tests these patients faced and triumphed over in their own ways, usually relying on family, friends, their medical team, and their own inner strength.

For prostate cancer survivor Chet McAndrews, who does volunteer work with paralyzed veterans, it was all about perspective.

“This whole cancer thing is minor compared to all I have seen in others,” McAndrews says, “and it makes the stuff I’ve experienced seem simple.”

We think you’ll find his story, and the others, moving and inspirational. We would also like to invite you to hear another inspirational story in person. J.R. Martinez, an Iraq war veteran who endured 33 surgeries after being nearly killed by a land mine, will be the keynote speaker at the annual meeting of Community Hospital Foundation on January 17. Martinez is known for his resilience and optimism, and for winning the 2011 *Dancing with the Stars* television competition. You will find information about his upcoming visit to Monterey on the back cover of this issue. We hope to see you there.
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Two people receive similar cancer diagnoses. One sinks into depression and has difficulty with family, work, and even day-to-day living once treatment ends. The other celebrates the end of treatment with a huge gathering of family and friends, dives into a new pastime, and volunteers to help other cancer patients navigate their illnesses.

What sets the two on their vastly different paths? Specific conditions are a factor, of course, but so are the ways people look at and approach life, say those who work in healthcare.

“Research shows that people who survive and thrive through tough life events do so in part because they find and connect to their sense of purpose or meaning,” says Deena Haynes, assistant director, Tyler Heart Institute, Cardiopulmonary Wellness. “When some people face a significant challenge, they consider it a wake-up call to get aligned with their values and connect to what really matters to them.”

Julie Giguere, supervisor of Radiation Oncology, encounters these traits in patients who thrive: a deep support system, strong will, faith, and a positive attitude.

“I have seen patients get a bad prognosis, and because they had a great attitude and support system they lived for many years beyond initial expectations,” Giguere says. A sense of humor also helps.

“One patient would write us a little note and attach it to his colostomy bag each day for us to read,” she says. “Instead of being embarrassed about this bag, he used it to amuse us. The staff looked forward to seeing what tidbits this patient would share with us daily. Taking a very uncomfortable, scary situation and turning it into something comfortable is an art.

“I also have to give credit to our staff members: all the things we do behind the scenes to ensure treatment is top-notch, safe, and as quick as possible to minimize impacts on a patient’s day.”
What Mike Raggett remembers most about that morning four years ago, when he crashed his bike and lay battered and broken along Highway 1, was how relieved he was that he had broken the fall of the $5,000 titanium cycle.

But breaking the fall broke his own hip, and a replacement was in order. Like other blips in his medical history, this one sidelined him only temporarily and he was quickly back to the active lifestyle he has always known.

Raggett was a track star at Carmel High School in the 1950s and continued running during four years at the U.S. Naval Academy. After graduation, he spent 30 years on active duty, mostly in nuclear attack submarines, including a four-year tour as commanding officer. During that time he also took up bicycle racing.

Retirement wasn’t exactly retiring — he spent a dozen years teaching chemistry and algebra at Santa Catalina School, and he continues to coach track there.

Raggett retired from running, after 51 years, when he started having trouble with one of his hips. As an alternative, he returned to the bicycle. On that fateful morning of his accident, he was riding with friends from Carmel to Monterey, along a stretch of highway undergoing reconstruction.

About a half-mile from Community Hospital, Raggett’s front tire caught a rough patch of pavement, and he caught air. His rough landing snapped off the ball of his hip socket and he skidded along the street, generating road rash that looked like he had leaped from a moving car.

An ambulance arrived in minutes and ferried Raggett up the street to the Emergency department.

"Dr. Scott Kantor, my wife’s orthopedic surgeon and our neighbor, was the on-call surgeon," Raggett says. "I crashed around 9:30 or 10 that morning, and by late afternoon I had a new hip. By September, I was back on my bike."

The quick comeback was fueled by a couple of things, Kantor says.

"Mike did well in his recovery because he was in very good physical shape to begin with; he has very good muscle tone and muscle strength," Kantor says. "Also, he was a very motivated individual, who worked hard to get better, to get back to his very active lifestyle."

Community Hospital replaces more joints than any other hospital in the region. A free information session for those preparing for joint-replacement surgery is offered twice a month. For more information, please call 625-4835.
**A WORLD AHEAD OF HER**

**Tricia Dudley** recently picked up her diploma at CSU Monterey Bay and is headed to graduate school for a master’s degree in psychology. In between, she’ll be taking a six-month trip to Europe and Costa Rica. And her biggest achievement is that she’ll be doing it on her own two feet.

Six years ago, the outgoing, athletic high school junior was singing and dancing her way through a show choir competition when her left knee became extremely painful and swelled to twice its normal size. An MRI scan revealed that she might have a partially torn meniscus, the rubbery, curved disk that cushions the knee.

Although the problem surfaced in February, Dudley waited until that summer, between her junior and senior years, to have what was anticipated to be 30 to 45 minutes of arthroscopic exploratory surgery, in her hometown of Sonora. Abandoning choir, musicals, and dance, she spent most of her spring semester on crutches.

“My surgery took two hours,” she says. “The surgeon expected to see a smooth, white surface, but what he found looked like an alien or a sea anemone: tentacle growths in reds, yellows, and purples. He took out as much as he could. When he said, ‘I’m not sure what this is,’ I didn’t know what to think. Having an orthopedic surgeon not know what was going on in my knee made me nervous. I went through really difficult physical therapy all summer and hoped I’d get better.”

But Dudley didn’t get better, and her rare condition was eventually diagnosed as pigmented villonodular synovitis (PVNS), an unusual joint disease characterized by inflammation and overgrowth of the joint lining, with tumors that are easily caught within the joint and torn.

A second surgery in Sonora during Dudley’s senior year, followed by intensive physical therapy brought intermittent relief but still no resolution. She chose to put her treatment on hold and head off to college at CSUMB.

By January 2011, Dudley could no longer tolerate the pain and incapacity of her knee. And now she had related discomfort in her hip, back, and neck. She was referred to a surgical specialist at Stanford Medical Center for the removal of the synovial membrane, or lining, of the knee joint. Although her disease is benign and not classified as cancer, its aggressive nature warranted follow-up treatment.

Dudley thought she would have to return to Stanford for radiation, a daunting prospect because it would require 18 visits for the treatments, plus advance and follow-up appointments. Then she learned she could get the care she needed much closer to school and home, at Community Hospital’s Radiation Oncology department.

Dr. Bradley Tamler, one of two board-certified radiation oncologists on staff at Community Hospital, developed and directed her treatment plan.

“I see myself as thriving, because I am excited about the future and everything it has to offer.”
“Although only a few articles exist on radiation for this disease, they report that a mild dose of radiation leads to 80 percent to 90 percent resolution,” Tamler says. “Tricia tolerated the treatment well and, a year out, shows no sign of recurrence and has full function in her knee. She doesn’t need a wheelchair any longer, she works out at the gym, and she is on her way to Europe.

We measure her success in what she can do now compared to what she couldn’t do for five years.”

Dudley uses a similar yardstick.

“I see myself as thriving, because I am excited about the future and everything it has to offer,” she says. “And I’m not living with a constant fear of whether or not I’m going to be able to do the things I want because of my knee. I know I can go to Europe. I can go hiking again, which I used to love. I’ve gone dancing. To me, these are wonderful gifts.”

Community Hospital’s Radiation Oncology department methodically develops and reviews treatment plans to ensure that care is safe and precise. Tours of the department are offered for those in need of treatment, at 3 p.m. Wednesdays and 11:30 a.m. Fridays. Call 625-4630 for information.
Chet McAndrews has lived a full life. He was general manager of a restaurant on Cannery Row and has worked in construction as a heavy equipment operator. He loves his motorcycle, has finessed sport fishing to a fine art, and spent a year in Vietnam, exposed to both the herbicide Agent Orange and trauma that is still vivid in his mind.

It is the latter experience, he says, that both contributed to his prostate cancer and helped him get through it.

After diagnosis in late 2011, McAndrews began eight weeks of radiation treatment at Community Hospital in February.

“Chet came in for treatment looking like a motorcycle rider from the James Dean era,” says Dr. Bradley Tamler, the radiation oncologist who oversaw his radiation therapy treatments. “He had a moderately aggressive prostate cancer, and we treated him with advanced image-guided therapy. He tolerated the radiation excellently, without developing complications.”

McAndrews says his only persistent symptoms are fatigue and hot flashes.

“My wife sympathizes with me and laughs when I apologize for ever having teased her about hot flashes, while I keep changing my drenched shirts,” he says. “Otherwise, I have felt no pain. Mostly, I try not to think about it.”

Instead, McAndrews focuses his attention on his annual Monterey Bay Veterans, Inc., Wheelchair Salmon Fishing Derby, which celebrated its 25th anniversary last spring, soon after he completed radiation treatment. Using 28 private and 4 commercial boats, McAndrews and other volunteers took 150 veterans from all over California out on the bay to fish for salmon, followed by a barbecue and prize ceremony.

The annual fishing outing “began on a bet and a dare,” says McAndrews, “with six guys I hosted from the VA hospital in Palo Alto. All these guys had spinal cord injuries, and there I was, back from the same war but totally physically capable. One guy was a sport fisherman who, after a bad parachute jump, was paralyzed from the waist down. His friends promised they’d take him salmon fishing when he got out, but they weren’t sure how to do it. We set it up, and two years later started our own organization.”

McAndrews actually runs his program year-round; it includes whale watching for underprivileged children, as well as sport fishing and SCUBA diving certification for disabled veterans and memorials at sea with full honor guard for veterans who have passed away.

“You take a guy who is paralyzed from the waist down and put him in water,” says McAndrews, “and he is just like anyone else. It’s great therapy for him, mentally and physically, as it is for me. This whole cancer thing is minor compared to all I have seen in others, and it makes the stuff I’ve experienced seem simple. But life isn’t simple; you just have to trudge on. When you’re doing the right thing for the right reason, at the right time, it can’t go wrong. It’s a motto I live by.”
“When you’re doing the right thing for the right reason, at the right time, it can’t go wrong. It’s a motto I live by.”

Community Hospital treats about 150 newly diagnosed prostate cancer patients each year and offers a range of options, including radiation therapy, hormone therapy, surgery, and monitoring. The hospital also offers a bimonthly prostate cancer support group and numerous classes, including a series on cancer survivorship after diagnosis. For more information, please call 625-4753.
Being overweight and trying to lose weight have been defining characteristics of Aileen Santos’ life since childhood. As her weight inched higher over the years, she justified the increments. Yet she also knew the more weight she gained, the more she would have to lose. About two years ago, after years of temporarily successful weight-loss programs, Santos saw a photograph of herself and decided it was time to change the picture.

Having reached 320 pounds, she became determined to find a solution that would work for her.

Santos attended a lecture at Community Hospital on bariatric weight-loss surgery by Dr. Mark Vierra, a Monterey general surgeon. She saw promise in the procedure but decided she first wanted to give herself a year to lose weight through diet and exercise. She enrolled in a course called Weigh of Life to help her understand emotional eating and avoid reverting to old, unhealthy habits.

In 10 months, she had lost 30 pounds; it was a good start but not where she wanted to be. Her next step: She joined Community Hospital’s Peninsula Wellness Center (PWC) in Marina. And here she found her fitness footing in kickboxing and Zumba® classes. She also began talking with a diettian, who helped her balance her food choices, and began tracking what she ate through an app on her iPhone®.

After a total of 20 months, Santos hit a major milestone with a total weight loss of 100 pounds. She was so excited she sent before and after photos of herself to the staff she’s worked with at PWC.

“My biggest message is that if you don’t love to exercise, it is because you haven’t found the right exercise for you,” says Santos. “Try different kinds until you find something you enjoy, and don’t wait until you’ve lost weight to try something new. My family has a history of hypertension, diabetes, and being overweight, so I decided to make changes in my life to lose weight and become healthier to inspire my family to do the same.”

The lifestyle change was vividly clear in the ways she celebrated her last two birthdays. At her 40th birthday party, Santos served a multicourse sit-down dinner for family and friends. On her 41st birthday, she invited more than 100 guests to a Zumba fitness party.

She’s become a fixture at the wellness center, where she coordinates workout wear with Zumba-mates by posting the T-shirt color of the day on Facebook.

“I am at the center every day,” she says. “The atmosphere is so different from regular gyms; they really focus on wellness. It is a social place, where we support each other. At Peninsula Wellness Center, we don’t look at it as exercise but as having fun.”

Santos became such a fan that she recently became certified as an instructor of Zumba and kickboxing.

“Everybody has to find their fitness niche,” says Chris Range, PWC fitness director. “Once they do, they become good at it; so they become engaged, and this leads to the results they’re looking for. Aileen really found her Zumba niche and, through that, she has created a new lifestyle for herself.”

Peninsula Wellness Center offers a range of classes, cardio and strength equipment, warm-water therapy and lap pools, and personal training to help people achieve their wellness goals. It is open to the public by membership. To schedule a tour, please call 883-5656. Community Hospital also offers the Weigh of Life class series, focusing on lifestyle changes rather than dieting. For information, please call 622-7220.
“My biggest message is that if you don’t love to exercise, it is because you haven’t found the right exercise for you.”
MAKING EVERY BREATH COUNT

Three times a week, Kathy Koenig drives 11 miles to Peninsula Wellness Center (PWC) in Marina from her Salinas home off Highway 68, works out on a circuit of cardio machines for one hour, and then drives herself home.

This may not seem extraordinary, but it is. Two years ago, Koenig couldn't walk more than 100 feet without needing to rest, recover, catch her breath.

Koenig, 73, suffers from an irregular heartbeat, congestive heart failure, diabetes, and chronic obstructive pulmonary disease (COPD); at one point in 2010, she was hospitalized for 46 days.

After her hospital stay, she enrolled in Community Hospital’s Pulmonary Rehabilitation Program. The program is designed to help patients manage and minimize the symptoms associated with their respiratory limitations, as well as to help them achieve their full potential lung function, increase activity, and decrease anxiety. The program consists of a series of half-hour lectures on respiratory topics, followed by an hour of guided exercise in the Cardiopulmonary Wellness department at Community Hospital’s Marina campus.

“I walked in there, absolutely terrified,” says Koenig. “I didn’t know what I was getting into. To be short of air is a frightening thing. I didn’t know how much they were going to push me. But Ida Corby, who runs the program, is the finest respiratory therapist I have encountered. She explained everything to me, adjusted the machines, watched over me; in a very short time, I was so relaxed. I admit I had a hard time getting through the program because I had breathing setbacks. But Ida encouraged me, and I made up time, finished the program, and graduated to my own routine.”

When Koenig is up and walking, it can feel like climbing a mountain at high altitude. She needs to stop, sit down, and rest. But when seated at the cardio machines, her lungs function more easily, and she is able to get the exercise she needs.

“It is marvelous to exercise, even a little,” she says. “It feels so good to walk out and say, ‘I did it today.’ I have learned not to compare myself to others, knowing that the progress I am making is what counts.”

Koenig’s routine starts with dropping by Pulmonary Rehabilitation, where she trades her personal portable oxygen tank for a canister of liquid oxygen, which delivers a higher flow rate of oxygen to assist in exercise tolerance. She then enters the Peninsula Wellness Center gym, which she joined after completing the rehabilitation program, and does her rounds on the various cardio machines.

An hour later, she returns the canister, collects her own oxygen tank, and drives home. Sometimes, she even stops at the grocery store.

“When Kathy first came in with her husband,” says Corby, “she was totally dependent upon him and afraid of all the equipment. But she also felt it was the right place for her. She had many physical issues besides her respiratory problems, but she was always cheerful and would not give up. She is a survivor.

“Recently, she went to a wedding in San Francisco and was very apprehensive about the stairs she would have to climb. But she remembered to use a breathing technique she had learned in the program and made it on her own. Kathy is a beautiful example of when life throws you a curve ball, you learn how to catch it.”

Community Hospital’s Pulmonary Rehabilitation is a medically supervised exercise and education program for those with chronic obstructive pulmonary disease (COPD), emphysema, chronic bronchitis, asthma, or cystic fibrosis, and for those who are pre- or post-lung surgery. For information, please call 883-5660.
“I have learned not to compare myself to others, knowing that the progress I am making is what counts.”
Like the 3-D images that pop off your local movie screen, the way we can look at hearts has come of multi-dimensional age.

Doctors and technologists have used two-dimensional ultrasound imaging to peer at and into the heart, giving them a flat picture. To create a 3-D effect, parallel 2-D ultrasound scans can be combined via computer.

That’s still the standard practice in many hospitals; but in June, 3-D echocardiography came to Community Hospital, both in the operating rooms and in Cardiology Services exam rooms, providing real-time, three-dimensional ultrasound images of a beating heart.

The ultrasound imaging is done two ways. In transthoracic scans, an ultrasound probe is placed on the patient’s chest to view the heart through the rib cage. In transesophageal scans, a narrow probe is passed into the esophagus, or swallowing tube, while the patient is sedated or asleep.

“A 3-D ‘echo’ provides the cardiologist more information to assist in making clinical decisions by producing more accurate, realistic images that enable the doctor to visualize more detail of the structures of the heart.”

— Jared Stiver, assistant director, Tyler Heart Institute, Cardiology Services
"A 3-D ‘echo’ provides the cardiologist more information to assist in making clinical decisions by producing more accurate, realistic images that enable the doctor to visualize more detail of the structures of the heart," says Jared Stiver, assistant director, Tyler Heart Institute, Cardiology Services. Earlier this year, the department was accredited by the Intersocietal Commission for the Accreditation of Echocardiography Laboratories (ICAEL), which ensures quality patient care by recognizing the provision of accurate, reproducible cardiac information.

Using 3-D transesophageal echocardiography for heart surgery is most effective with complex mitral valve repairs and replacements, says Dr. Matt Fritsch, a Harvard-trained cardiac anesthesiologist. The third dimension allows for better visualization of the anatomy, Fritsch says, and gives the surgeon a clearer picture of how successful the repair was, or if and where there are potential problems.

The mitral valve is the most complex valve and takes the most stress of any of the valves in the heart. It separates the two left-side chambers of the heart: the left ventricle, which is the workhorse that pumps the blood; and the left atrium, which is the reservoir for the blood.

Considerable pressure exists between the two chambers, which are separated only by the mitral valve. So if this valve isn’t working properly, the forward flow from the heart is drastically diminished, causing serious problems for the patient.

"Because of the experience of our highly skilled cardiac surgeons, Dr. Vincent Gaudiani and Dr. Gregory Spowart, we do a lot of complex valve repair and replacement at Community Hospital," Fritsch says. "So it is crucial to provide the best imagery for the most accurate repair. This doesn’t change how they perform the operation, but it gives them a lot more information."

Work to make these 3-D images possible was in progress for at least 20 years, says Dr. Richard Gray, medical director of Community Hospital’s Tyler Heart Institute.

"Yet, up until recently, there hadn’t been an acceptance of the technology because it didn’t provide the real-time images doctors sought," Gray says. "In the last two years, systems have been developed that can integrate various images to look like a real moving picture, which resembles a CT image of the heart. But a CT scan is costly and complex, and uses radiation, which an ultrasound does not. Also, ultrasound can be done at the bedside, which is a breakthrough in the area of data processing and image quality."

The 3-D technology, Gray says, has effectively “changed the picture” of echocardiography.

On a computer screen, these three-dimensional images provide vivid, clear views of the heart and its four chambers, left, and of a mitral valve repaired through open-heart surgery.
Heart disease isn’t just for men. Just ask Koryn Guthrie, Ronni Roman, or Catherine Vallaire. They are among nine women who received cardiac care at Community Hospital and shared their experiences in a “survivors’ gallery” portrait series that debuted at the American Heart Association’s Go Red For Women™ Luncheon this year. Their photos and stories have also been displayed at Community Hospital locations, including the Tyler Heart Institute’s Cardiology Services waiting area, and will be at the annual HeartWalk® fundraising event in October.

The images and words of Guthrie, Roman, and Vallaire are featured here. To read about and see the other “survivors”— Dee Bartsch, Judith Collins, Lynn Dittrich, Janet Drier, Marilyn Norton, and Joanne Shiffman — please go online to www.chomp.org. You will also find our videos about women and heart disease and the top-10 risk factors for heart disease.
At 35, Koryn Guthrie’s life was on track: married, mother of two young children, and working as a nurse. Then she injured her back at work. Numbness in her right leg made her nervous. A drop in income made her panic. And a dispute over her workers’ compensation claim sent her over the edge.

“I had just been released to start walking again,” says Guthrie. “Three minutes into my walk, I felt like I had a noose around my chest. I was nauseous, dizzy, sweating; I couldn’t catch my breath. I was alone. My husband was on a job site, so I called my mom. Within five minutes, I rolled into the emergency room. I thought I’d be released right away, but I was in the hospital for three days.”

Guthrie had normal blood pressure, worked out daily, and had no family history of heart disease; so for a time, no one suspected the issue was with her heart. Ultimately, she was diagnosed with takotsubo syndrome and microcardiovascular valve dysfunction.

Takotsubo is commonly referred to as a “broken heart.” Symptoms resemble a heart attack, but the cause is a “stunning” of the heart muscle from a surge in stress-related hormones, not blockage in the arteries. Generally, the heart can recover in a few months. The valve dysfunction in Guthrie’s case is also thought to be stress-related. It has been diagnosed only in women and is the subject of ongoing study, including a clinical trial in which Guthrie is taking part at Cedars-Sinai Medical Center in Los Angeles.

“I’m learning as much as I can about how to relax, how to take care of myself and my family,” says Guthrie. “Every day means something to me.”
Ronni Roman says she had never been ill a day in her life. She had never taken pills or vitamins, and had not been to a doctor since 1962. She didn’t know any of her “numbers” — cholesterol, blood pressure, blood glucose. She just knew she had always felt good, despite years of smoking and stress. Then she began to feel weak, winded, and unable to complete her usual walk through the hills of Carmel.

At 67, she attributed it to age. But a physical therapist she was seeing for a shoulder injury from a bike fall correctly suspected it was something more. At the therapist’s urging, Roman broke her no-doctor streak and underwent a stress test, which she failed. An angiogram revealed two 80-percent blockages in her arteries and significant blockage in her heart. Two days later, she had two stents placed to open up her arteries.

“My husband died of a heart attack on the way to the hospital,” says Roman. “Had I not been shamed into going to the doctor, I would have been found dead somewhere. It was a wake-up call. If something doesn’t feel right, go check it out immediately. Within a month of my surgery I went right to Community Hospital’s Cardiac Rehabilitation Program and continued with my exercise program. The people in cardiac care are wonderful — but pay attention to your symptoms so you never need them.”
Catherine Vallaire defines “survivor.” After multiple heart events and a battle with cervical cancer, one of her doctors says the 80-year-old still has a lot of “juice.”

The first time Vallaire went into heart failure, she had awakened with chest pain. She decided to get up and try to walk it off, then passed out. Her husband called 9-1-1. Paramedics who took her to the hospital said she would not have survived the ride if she hadn’t gone by ambulance.

After surgery requiring six bypasses, Vallaire felt well for two years. Then, in 2003, she again experienced chest pain. Her doctor placed two stents in her carotid arteries and scheduled surgery to have a defibrillator implanted to detect and correct cardiac arrhythmia.

“They said someday that defibrillator would be my paramedic,” says Vallaire. And it was.

“Last year, the Friday before Mother’s Day, I awoke and my defibrillator went off 25 times,” says Vallaire. “My daughter brought me my nitroglycerin. Everything seemed OK after that, but now my aortic valve might be narrowing. They’re watching me, but my doctor thinks I have a lot of juice in me yet and can withstand an operation. We’ll see.”

In the midst of cardiac rehabilitation, she underwent treatment for stage 3 cervical cancer. Then it was back to the Cardiac Rehabilitation Program and her exercise program at Peninsula Wellness Center.

Her cardiologist, she says, calls her “Superwoman.”
Living longer and stronger after cancer

Hundreds of people gather in Monterey every year for a celebration centered around five words: I am a cancer survivor.

Organized by Community Hospital’s Comprehensive Cancer Center, the event gives people a place and time to mark their own meaningful milestone — whether it’s one day or many decades. Current and former patients, their families, and friends share a picnic and mingle with each other and many of the clinical staff who cared for them, sharing their triumphs and their trials.

When the gathering began 17 years ago, the concept of “survivorship” wasn’t usually part of the conversation about cancer. The focus was on diagnosis and treatment and not so much about what happens later, during the transition from cancer patient to survivor.
“For a long time, the healthcare system fostered a ‘patch you up, send you on your way’ mentality, ignoring the array of potential long-term problems cancer survivors may face,” says Dr. Grant Swanson, medical director of Community Hospital’s Comprehensive Cancer Center. “In recent years, there’s been a shift, driven by patients and clinicians, with a spotlight turning to post-treatment challenges and changes.”

That new spotlight on survivorship has meaning for a lot of people: There are about 12 million cancer survivors in the United States, and the number is growing.

“This year, 1.6 million people will be diagnosed with cancer, and two-thirds of them will be alive five years from now,” Swanson says.

Community Hospital offers a range of services and programs for people in all phases of their cancer journey, including, since earlier this year, a series focusing on survivorship.

Live Longer. Live Stronger. Moving from cancer patient to survivor, is a free seven-session program that meets weekly to teach participants ways of managing their potential long-term side effects and risks. Expert faculty talk about using nutrition, stress reduction, and exercise and fitness to take control of survivorship. Participants create a wellness plan to incorporate lifestyle changes to help their cancer remain dormant and to avoid developing other conditions, such as obesity, osteoporosis, diabetes, hypertension, stroke, or heart disease.

“Community Hospital has been good at celebrating the end of cancer treatment,” says Joy Smith, RN, oncology nurse educator and leader of the classes. “We have patients ring a wall-mounted bell once they have finished radiation treatment. And we host the annual picnic for cancer survivors and their families. But what patients need, in addition to celebration, is education and support as they transition to the next important step in the cancer experience, and we are offering that through this series.”

The program takes place in Marina at Community Hospital’s Peninsula Wellness Center (PWC). Participants are provided a temporary membership at the center during the course. Afterward, many choose to enroll as a regular member to continue on their journey. (See story on page 22.)

“A lot of research over the past half-dozen years has looked at the role of exercise in preventing cancer to begin with or in minimizing the risk of cancer coming back,” Swanson says. “The literature speaks to the benefits of being active during and after cancer therapy, and it’s very clear that exercise does enhance quality of life via mood, social interaction, sense of self, and hopefulness, as well as reducing the risk of other illnesses. We strongly encourage cancer survivors to be active in a controlled setting where staff is trained to work with people who have or have come through illnesses.”

The program encourages rehabilitation therapy for cancer survivors who face chronic post-treatment challenges, among them nerve damage, chronic fatigue, digestive problems, reduced lung capacity, muscle weakness, or balance issues.

“Interventions through rehabilitative medicine can help people with chronic low-grade deficiencies,” Swanson says. “It is important, as part of this program, to explore what long-term effects can result from the cancer or its treatment and how rehabilitation can help.”

Chris Range, fitness director at PWC, says everyone has different tolerances and preferences when it comes to exercise, and the program recognizes those differences.

“Exercise should never be a burden,” he says. “It should enable people to take concrete steps to overall wellness.”

The next Live Longer. Live Stronger, series begins September 26. For information or to register, please call 625-4753. Information about support groups is available at www.chomp.org.

Joy Smith, RN, oncology nurse educator at Community Hospital, with members of the Live Longer. Live Stronger class at Peninsula Wellness Center.
Jeanne Hamilton discovered the lump on a Sunday evening, as she sat at her computer checking messages and looking forward to sleep. A voice whispered in her mind, “Jeanne, you need to touch your breast.” Her finger went right to the popcorn shape just below the skin, and she instinctively knew she had shifted from healthy person to cancer patient.

One year later, after chemotherapy, surgery, and radiation, Hamilton’s cancer treatment journey ended, and she was definitely in a different place. Yet, in moving from patient to survivor, she sensed she had known more about what to expect during treatment than how to live life as a cancer survivor.

“I decided I needed a cause, a goal, something to shoot for,” says Hamilton. “So I signed up to do the Susan G. Komen 60-mile walk to raise funds for breast cancer research. Just six months out of chemotherapy, I completed more than half of the course. Last year, I did it again and made it all the way across the finish line. And I raised more than $6,000.”

She also became a “patient navigator,” volunteering through Community Hospital to assist other patients as they navigate their cancer experiences. And she’s rarely missed one of her regular Thursday nights on the dance floor, kicking up her heels in both swing and country styles. Even while going through breast cancer treatment, she would muster up enough energy to get out and take a few turns before sitting down to rest, just to feel normal in the midst of all the non-normal parts of her life.

Earlier this year, Hamilton joined the first group to go through Community Hospital’s new series for cancer survivors, Live Longer. Live Stronger. This five-session program is designed to help patients deal with post-treatment issues as they try to incorporate a “new normal” into their lives.

“It’s about having a survivorship plan going forward,” she says.

Through the program, participants learn strategies to help them toward long-term healthy survivorship. They work with experts in several areas, including medical management after cancer, nutrition, stress reduction, and exercise and fitness.

““This is an awesome program.”

“I needed to shift from my oncologist to a primary care physician, but I had been dragging my feet,” Hamilton says. “I didn’t want to see another doctor. As result of the program, I realized I needed to do this to stay healthy. I gathered my medical records and made that step. This gave me knowledge, which cancels out fear.

“The program also gave us a temporary membership at Community Hospital’s Peninsula Wellness Center for two months; I’d never had a gym membership, but I saw the benefits and have since returned to enroll on my own. I can now swim a mile. I’m not fast, but I’m passing everyone who’s sitting on the couch.”

Members of that inaugural class have decided to continue with quarterly check-ins to see how everyone is doing and discuss any ongoing or new issues.

“This is an awesome program,” Hamilton says.
An energetic 10-year-old boy leaps to his feet in front of his classmates to announce his nickname. “They call me Mango Man!” declares Jacob Salinas, scanning the Martin Luther King, Jr., Elementary School classroom for reaction. In this age of Thor, Iron Man, and the Hulk, it’s a surprising proclamation. To Community Hospital registered dietitians Barbara Quinn and Lisa Holden, it represents a victory in the ongoing battle against childhood obesity.

Barbara Quinn, registered dietitian, shows Jacob Salinas (a.k.a. Mango Man) and a classmate the importance of eating a balanced meal.
Community Hospital has launched a kid-friendly nutrition program, Kids Eat Right, and has been piloting it at two Monterey Peninsula Unified School District (MPUSD) campuses: Marina Vista in Marina and Martin Luther King, Jr., in Seaside. Based on an initiative from the Academy of Nutrition and Dietetics, and using a curriculum developed by Quinn and Holden, the afterschool nutritional boot camp focuses on how to “shop smart, cook healthy, and eat right.”

The dietitians, a cadre of volunteers, and an occasional guest speaker do five weekly sessions of the program at each campus, offering a mix of information, physical activity, food preparation, and a little homework. The plan is to eventually roll out the program to other classrooms and campuses.

“We are coming to the children where they are, breaking down barriers, and encouraging parents to become involved,” says Tricia Vincent, registered dietitian and manager of Outpatient Diabetes and Nutrition Therapy at Community Hospital. “As the kids become enthusiastic about nutrition, we hope it spreads to the rest of the family.”

Mango Man is the perfect messenger, with his passion for tropical fruit. “I like the sweetness and how good it is for me,” says Jacob, who makes mango-banana smoothies for his family. (He’s proud of his recipe: mangoes, bananas, low-fat milk, and vanilla). “And at home I get to plant the seed.”

There is definitely need for the seed. According to the American Heart Association, roughly one in three American kids and teens is overweight or obese, nearly triple the rate in 1963. Obesity leads to a broad range of early-onset health problems, most notably high blood pressure and type 2 diabetes.

“Childhood obesity is a huge problem,” says Vincent. “How to approach it and intervene has been a mystery. The problem feels so big, and the root causes come from so many directions. We are trying to do our part with this program.”

Jenn Gerard, director of Nutrition Services for MPUSD, has been among the enthusiastic classroom volunteers and program advocates.

“Schools are now required to serve a wide variety of fruits and vegetables,” Gerard says. “If the kids don’t understand why this is important, then we’re missing a key component in the process. We need to come at them from every angle.”

The program challenges kids to track what they eat and drink, including how many days they can go without having a soda or fast food. They’re also asked to bring in food labels for discussion and deciphering.

“We target key messages, such as no sugar-sweetened drinks or eating more fiber,” Quinn says. “Some kids never drink plain water. And many had never had a nut until we brought samples.”

Each time the volume rises, as it tends to do in a roomful of 8- to 10-year-olds, Quinn and Holden start an attention-grabbing group chant, punctuated by three loud claps: “Kids! Eat! Right!”

On this day, Doug McFarland from Colorful Harvest in Salinas arrives with boxes of his company’s specialty: fresh produce in eye-popping but naturally grown colors, such as purple carrots and orange cauliflower (proof that M&Ms are not the only multicolored food).

“What I try to do is make it fun for them, and hopefully they’ll be looking for more color on their plate,” McFarland says.

Near the end of class, students get to cook (no flames involved). They break up into small groups, don chef hats and aprons, and begin work constructing colorful broccoli salads with yogurt dressing. When told they get to take home bags of brightly colored cauliflower and strawberries, courtesy of Colorful Harvest, an unusual thing happens when it comes to kids and fruits and vegetables: they cheer and exchange high-fives.

For information about Kids Eat Right or other nutrition programs, please call Community Hospital’s Diabetes and Nutrition Therapy program at 622-7220.
Nobody enjoys having an IV needle stuck into a vein. So to ease the discomfort, nurses at Community Hospital of the Monterey Peninsula first administer a little lidocaine buffered with sodium bicarbonate solution to desensitize the spot. Last spring, that little courtesy temporarily ended, a victim of the ongoing shortage of prescription drugs that has hit hospitals across the country.

Sodium bicarbonate — baking soda — may be a common household item, but the injectable formulation for hospital use was in such short supply that Community Hospital reserved what it could get for the more vital application in life-threatening emergencies during cardiac arrest. Sodium bicarbonate has been among a long and constantly changing list of pharmaceuticals in limited or nonexistent supply as the national drug shortage continues to affect everything from simple, everyday solutions to complex chemotherapy drugs.

“We spend a couple of hours a day trying to find drugs, or substitutions for those drugs, and communicating with physicians to make changes,” says Mariann Novarina, pharmacist and director of Pharmacy at Community Hospital. “I have been
improved somewhat after the U.S. Food and Drug Administration stepped in and began monitoring manufacturers and encouraging stepped-up production where needed. The number of drug shortages fell to around 170 in early 2012. But that is still at crisis level, he says, and requires continued vigilance by hospital pharmacies.

In July, President Obama signed legislation to help alleviate the shortages. Among other things, it requires drug makers to report planned discontinuance of drugs at least six months before manufacturing stops. While the legislation may provide some relief, healthcare providers say it did not go far enough and many shortages persist.

Community Hospital has had to work around shortages for about 200 drugs. Novarina says the pharmacy staff keeps in constant contact with drug supply representatives and other area hospitals to watch for new shortages and other sources for needed drugs. It also looks for creative ways to meet the prescription needs of patients.

One ongoing problem is getting certain drugs delivered in typical dosage amounts. For example, a drug that was previously produced in the typical single-dose amounts suddenly became available only in bulk amounts. Community Hospital ordered bulk quantities and then prepared individual syringes with the correct dosage, an expensive work-around to meet patient needs.

Chemotherapy drugs have been a particular problem. A number have been in acute shortage and do not have direct substitutes. Like other hospitals, Community Hospital has had to come up with alternate chemotherapy protocols that may not be a doctor’s first choice.

The drug shortage has required creative solutions, Novarina says, but no patient has had to forego treatment.

The California Hospital Association (CHA) has promoted legislation to relieve the shortages. CHA encourages people who have been impacted to tell their stories to members of Congress:

- **REP. SAM FARR** may be reached through his web site, [www.farr.house.gov/](http://www.farr.house.gov/), or by regular mail at 1126 Longworth House Office Building, Washington, D.C. 20515.

- **SEN. DIANNE FEINSTEIN** may be reached through her web site, [www.feinstein.senate.gov/](http://www.feinstein.senate.gov/), or by regular mail at 331 Hart Senate Office Building, Washington, D.C. 20510.

- **SEN. BARBARA BOXER** may be reached through her web site, [www.boxer.senate.gov/](http://www.boxer.senate.gov/), or by regular mail at 112 Hart Senate Office Building, Washington, D.C. 20510.
In 1996, Community Hospital started the Community Benefit Program, a way to make sure we were doing everything we could — inside the hospital and out — to cultivate the health and well-being of our community. Through it, we have provided nearly $1 billion: in support of local organizations with health-related goals; for access to care for thousands of people who couldn’t pay for themselves; for education on health and wellness; and in programs for those with special needs. That commitment continued in 2011, with nearly $146 million and 25,655 volunteer hours committed to community benefits.

<table>
<thead>
<tr>
<th>Where the money went</th>
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<tbody>
<tr>
<td><strong>Improving access to care</strong></td>
<td>$138,506,388 to people in need; includes unpaid cost of Medicare, Medi-Cal, and CHAMPUS services and general charity care</td>
</tr>
<tr>
<td><strong>Building healthy communities</strong></td>
<td>$3,669,856 for identifying and addressing our community’s unmet health needs</td>
</tr>
<tr>
<td><strong>Health education and wellness</strong></td>
<td>$2,627,167 to educate people about how their lifestyle choices affect their health</td>
</tr>
<tr>
<td><strong>Special care for special needs</strong></td>
<td>$857,697 for those at risk because of age, involvement in a violent relationship, chemical dependence, mental illness, HIV, or socioeconomics</td>
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If you would like a copy of our complete Community Benefit report, please call (831) 625-4528 or write to: Administration, P.O. Box HH, Monterey, California 93942.
Healing through health fairs

She was in her early 20s, so getting her blood pressure checked hadn’t been high on her to-do list. Then, a health fair sponsored by Community Hospital of the Monterey Peninsula made the young woman reorder her priorities.

Her blood pressure registered 180 over 116, compared with the normal 120 over 80 — definitely in a range that warranted follow-up with a doctor.

“We talked to her about what it meant and what it could lead to, and told her she needed follow-up care, regular blood pressure checks, and perhaps lifestyle changes,” says Ellen Watson, RN, Community Wellness coordinator at Community Hospital. “She took it seriously. If we helped even just that one woman that day, the health fair was a success.”

In reality, many people are helped each year at free health fairs sponsored or cosponsored by Community Hospital. In 2011, the hospital held or took part in 30 health fairs and provided services to nearly 15,000 people. That included almost 2,400 free screenings such as blood pressure checks, cholesterol and glucose tests, and prostate exams.

“Our goal for all of our community events is to reach the underserved,” says Darlene DeLancey, RN, director of Wellness and Health at Community Hospital. “They may not have insurance or sometimes they have insurance but can’t even afford the insurance co-pay, or they may not have a relationship with a doctor.”

Through the health fairs, Community Hospital promotes wellness and preventive healthcare, introduces community members to services they may not have known were available, and connects them with a primary care doctor if they don’t have one.

The events, including the cost of the screenings, staff time, and other expenses, are paid for through Community Hospital’s Community Benefit Program, which supports efforts to improve the health and well-being of area residents. Community Hospital spent nearly $146 million through its Community Benefit Program in 2011; about $2.7 million targeted health education and wellness, including health fairs.

Events included Seaside Healthfest, Every Beat Counts heart-health fair at Del Monte Center in Monterey, Monterey Peninsula College Health Fair, Big Sur Clinic Health Fair, and Men’s Wellness Night at Peninsula Wellness Center in Marina.

The young woman who discovered she had high blood pressure isn’t an anomaly. One-in-four of all the screenings done last year produced abnormal results. Community Hospital clinicians review the results with the health fair participants and provide educational materials and follow-up recommendations. Some have needed emergency or urgent care. In a few cases last year, people tested abnormally high for carbon monoxide and were instructed to call their utility company to check for gas leaks in the home.

“We have literally saved lives,” DeLancey says.

Most cases, though, are fairly routine. Participants learn about lifestyle changes they can make or resources they can access.

“It’s the right thing for us to do,” DeLancey says. “It’s why we are here.”

To learn about classes, services, support groups, and health fairs sponsored by Community Hospital, please go online to www.chomp.org.
Health education and support close to home

From meditation to cancer wellness, stress management to grief support, Community Hospital provides education and information on many health-related topics. For a complete list, including dates, times, meeting places, and registration information, go online to www.chomp.org and click on Classes & Events or call 888-45-CHOMP (888-452-4667). You can also scan the QR code on page 31 using your smartphone.

**bone health**

**American Bone Health Lecture Series**  
Experts talk about how bone is built, risk factors for osteoporosis, effects of medications, the role nutrition plays, and more.

**Better Bones and Balance**  
Halt bone loss and restore bone mass. Learn Pilates-based exercises to correct posture, strengthen muscles, improve balance and flexibility. For those who have difficulty getting up and down from the floor.

**Pilates for Bone Building**  
Bone-building class using foam rollers, exercise tubes, bands, and weights. Focuses on alignment, breathing and core control, balance, spinal mobility, and postural correction. You must be able to get up and down from the floor.

**Total Joint Replacement**  
Information session on pain management, physical therapy, recovery, and more for those planning hip-, knee-, or shoulder-replacement surgery.

**cancer**

**Healing Art Retreat**  
Find a creative outlet for healing the mind, body, and spirit in a one-day art workshop. No art experience required.

**Live longer. Live stronger.**  
*Moving from cancer patient to survivor*  
Community Hospital’s Comprehensive Cancer Center and Peninsula Wellness Center offer an interactive, motivational class series that teaches strategies for living longer and stronger after a cancer diagnosis and treatment. Topics include nutrition, stress reduction, and fitness.

**Look Good . . . Feel Better**  
Learn techniques for wearing wigs and scarves and using makeup to enhance your appearance and outlook during treatment. Cosponsored by American Cancer Society.

**Patient Navigator**  
Trained cancer survivors become one-on-one "buddies" to those with a new diagnosis. Call to find your "match" or to volunteer.

**Radiation Therapy Orientation**  
Tour the department, meet staff, and ask questions before treatment starts.

**Your Personal Cancer Guide: A Prescription for Healing**  
Meet with an oncology nurse educator to design a personal program for coping with the physical and emotional challenges of cancer.

**end of life/bereavement**

**A Conversation with Life**  
Discuss personal, practical, medical, and spiritual aspects of end-of-life preparation in this half-day class. Learn to prepare and communicate your healthcare wishes to your family and medical team.

**Grief Support: Hospice of the Central Coast**  
**Adult Bereavement Support Groups**  
Transform pain of loss into a healing journey. Groups meet in Monterey and Salinas.

**Griefbusters**  
One-on-one and in-school grief support for children and teens.

**Grieving the Loss of a Child**  
Support group for bereaved parents. Find friendship, understanding, and hope.

**childbirth**

**Breastfeeding: The Beginning**  
Learn how to get breastfeeding off to a good start for you and your baby.

**Family Birth Center Tour and Orientation**  
Tour and orientation of the Family Birth Center, led by an experienced labor-and-delivery nurse. Free online childbirth course provided to those who take the tour.

**diabetes**

**Diabetes Program**  
A comprehensive, individualized program on diabetes self-management, including nutrition, blood glucose monitoring, medications, and foot care. Doctor’s referral required.

**Diabetes Refresher: Staying on Track**  
If it’s been more than a year since you took part in Community Hospital’s Diabetes Program, it’s a great time for a refresher with this 90-minute class.

**Pre-diabetes: Stop Diabetes Before It Starts**  
Learn five key behavior changes to help you stop diabetes.

**Topics in Diabetes**  
Monthly speakers on the latest in diabetes.

**heart health**

**Advanced Lipid Management**  
Meet with a cardiologist and registered nurses to review your lab results, discuss medication, and receive a personalized nutrition and lifestyle plan to manage cholesterol and triglycerides.
weight management

Body Composition Analysis
Learn your body mass index (BMI), and percentage of body fat, lean tissue, and body water.

Emotional Eating
Learn to manage troubling thoughts and emotions, reduce stress and anxiety, and change self-defeating behaviors related to weight in this six-week class.

Preparing for Bariatric Surgery:
What Can You Eat Afterward?
How and what can you eat after gastric bypass or lap-band surgery? Find out in this one-session class.

Supermarket Tour
Registered dietitian leads an eye-opening supermarket tour, teaching you how to read nutrition labels.

WellFit Rx
Discover how you can manage high blood pressure, irregular heartbeat, diabetes, or other conditions through exercise and lifestyle changes, all in a supportive, monitored environment with clinical professionals to guide you. Program is a bridge to independent exercise.

lung health

Asthma Management
Manage asthma by working with a respiratory therapist who will review your symptoms, triggers, and medications.

Kick the Nic: Stop Smoking Now
The most successful approach to quitting smoking combines counseling, medical assessment, medication, and group support. Free introductory evaluation and consultation. Monthly one-on-one sessions with a tobacco-cessation counselor can be arranged for a fee.

Pulmonary Rehabilitation
Medically supervised exercise and education program for those with chronic obstructive pulmonary disease, emphysema, chronic bronchitis, asthma, or cystic fibrosis, and pre- or post-lung surgery patients. Manage symptoms and anxiety, and increase activity.

pre-teen/teen

Safe Sitter
Two-day class for 11–13-year-olds, who will learn CPR, sitter safety, accident management, and basics of childcare.

Survival Skills for Teens
Learn skills to reduce stress, communicate better with family and friends, and be more in control of actions and emotions. Six-week class for 9th–12th graders.

Mood Management I
Conflicts in relationships? Overwhelmed by emotions? Acting in self-defeating ways? Understand the connection between thoughts and emotions, and learn to manage change in this six-week class.

Mood Management: Interpersonal Skills
Learn effective ways to interact with family, co-workers, and others in this six-week class.

T’ai Chi
T’ai chi’s slow, gentle movements strengthen arms and legs, improve balance and flexibility, prevent falls, and help manage stress.

Wellness: Body and Mind

Attention Issues 101 — For Adults
Develop strategies to improve concentration, planning, and organization in this four-week class. For ages 18 or older. Screenings available for additional fee.

Health Resource Library
Our community lending library has an extensive collection of books, videos, and audiotapes on health-related topics. Also lends wigs and caps. Guided tours of internet resources by our librarian or volunteer staff.

Living Well Workshop: Take Charge of Your Health
Learn to work with your doctor and manage your symptoms from an ongoing health condition like arthritis, diabetes, or heart, breathing, or back problems.

Mindfulness Meditation
An eight-week course on coping with stress or a chronic condition through meditation, gentle movement, and group support; based on the work of Jon Kabat-Zinn.

support groups

Alzheimer’s Family
AWAKE: Alert, Well, and Keeping Energized (sleep apnea)
Breast Cancer Early Support
Cancer Wellness®
Caregivers’ Drop-in Program
Chronic Pain
Diabetes
Epilepsy
Ostomy
Parents of Difficult Teens
Prostate Cancer Self-Help Group of the Central Coast
Restless Legs Syndrome
Stroke
Weight-Loss Surgery (4 groups)
• For recent patients
• Advanced — after 1 year
• Adjustable bands
• Back on track
Women’s Cancer Support

Accommodations (services and aides) are available for those with special needs by pre-arrangement. Please call 888-45-CHOMP (888-452-4667) at least one week in advance to make arrangements.

For more information, go to www.chomp.org or scan this QR code with your smartphone.
Iraq vet, *Dancing with the Stars* champ

**J.R. Martinez** to speak at annual meeting

J.R. Martinez, who survived an IED attack in Iraq and then endured 33 surgeries and 34 months of recovery, shares his inspirational story at the annual meeting and luncheon of Community Hospital Foundation.

**January 17, 2013 • 11:30 a.m.**

**Monterey Conference Center**

For tickets or more information, please call 625-4506.

Space is limited.