

Health Connection

MPH
Marlboro Park
HOSPITAL

www.marlbroparkhospital.com

A MESSAGE FROM MARLBORO PARK HOSPITAL

Welcome, Dr. Ignacio

New physician joins
MPH staff and
CareSouth Carolina



Iris Ignacio, M.D.
Family Practitioner

We're pleased to announce the arrival of family practitioner Iris Ignacio, M.D., to Marlboro Park Hospital (MPH) and CareSouth Carolina—Bennettsville. Dr. Ignacio joined the staff in September.

Dr. Ignacio received his medical degree from the University of the East Ramon

Magsaysay Memorial Hospital in the Philippines. He completed his internship at Our Lady of Lourdes Hospital in Manila, Philippines, and his residency at Grand Forks Family Medicine in Grand Forks, N.D.



AT HOME IN SOUTH CAROLINA

Dr. Ignacio practices at CareSouth Carolina with Haynes Cain, M.D. (family practice); Mohamed Noormohideen, M.D. (internal medicine); and Gail Cain, F.N.P. (family nurse practitioner).

Dr. Ignacio and his wife, Margaux, enjoy traveling. He's also an avid photographer.

MPH is proud to have Dr. Ignacio join our fine medical staff. Please help us welcome him to our community.

! Help for you and your family

Family physicians offer continuing, comprehensive medical care—including preventive—to you and every member of your family, regardless of age, gender or health problem. To make an appointment with Iris Ignacio, M.D., a new family practitioner at MPH and CareSouth Carolina—Bennettsville, or one of the other healthcare providers at CareSouth Carolina—Bennettsville, call (843) 479-2341. Their office is at 999 Cheraw St., in Bennettsville.

Snap, crackle, pop!

What are your joints telling you?

Your body is a symphony of sounds—that cracking in your ankles, the popping in your knee. What causes these noises? Sometimes, it's just ligaments or tendons tightening and moving with a joint. For the most part, these sounds are normal and don't require any treatment.

But sometimes these noises can signal a more serious problem. A loud pop and locking of a joint can mean that torn cartilage, a piece of bone or something else has gotten caught between joint surfaces. Cracking and grinding may be a sign of arthritis. A loss of smooth cartilage and roughening of the joint surface is to blame for these noises.

JUST MAKING NOISE?

To find out whether your popping and cracking should be of concern, look for the following signs. See your physician if you have any of these symptoms:

- pain accompanying the popping
- swelling of the joint
- locking or sticking of the joint
- loss of motion or function

A JOINT EFFORT

The Arthritis Foundation and the American Academy of Orthopaedic Surgeons suggest following these tips to keep your joints healthy:

- Maintain a healthy weight.
- Stretch to increase your flexibility. Ask your physician to help you develop a regular stretching program.
- Stand up straight, shoulders back.
- When you lift heavy objects, use your legs instead of using your back. If you can't lift something yourself, ask for help.



- Alternate heavy activity such as housework, brisk walking or strenuous yardwork with rest periods.
- Wear protective gear, such as wrist, elbow or knee pads, if you're engaging in an activity where you could fall.
- Pay attention to your body. Pain may be a sign you're overworking your joints.
- Eat a well-balanced diet that includes plenty of calcium (1,200 mg a day for those over age 50; 1,000 mg for those ages 19 to 50).

Knuckle cracking: Bad to the bone?

Some people just can't resist cracking their knuckles. The cracking sound you hear is the "popping" of air bubbles when the joint is pushed or pulled a certain way. Knuckle cracking can certainly be annoying to others, but does it really make your knuckles larger? That old wives' tale hasn't been proven, but this is still a habit you should try to break, as studies point to possible soft-tissue damage in joints, a weak grip and hand swelling as a result of repeated cracking.



A new way to stay dry

MPH offers a simple solution



Millions of women have sudden urine loss or stress urinary incontinence, which causes them to leak urine when they laugh, sneeze, cough or exercise. But they don't have to live with the condition. Dr. Kenneth A. Thompson, a medical staff member at Marlboro Park Hospital (MPH) specializing in laparoscopic gynecological surgery, offers a simple outpatient treatment option.

A LESS-INVASIVE SOLUTION

The procedure, called GYNECARE TVT Tension-Free Support for Incontinence, has been performed on more than 1 million women worldwide. A recent study showed that seven years after treatment, 81 percent of women who were treated remained dry and an additional 16 percent experienced significant improvement.

To determine if a woman is a good candidate for the procedure, Dr. Thompson uses a new urodynamic machine that focuses on the bladder's ability to empty itself steadily and completely.

"Many women experience sudden urine loss, but most aren't aware it's a treatable condition. They may suffer in silence and put off activities they once enjoyed," says Dr. Thompson, a board-certified obstetrician/gynecologist and the only physician in the area performing the procedure. "GYNECARE TVT is a proven treatment that can help these women live free from leakage."

GYNECARE TVT combines the use of a mesh tape with a traditional surgical procedure called a sling to correct stress urinary incontinence. The mesh is woven through pelvic tissue and positioned to create a supportive sling, like a hammock. When under pressure, the tape provides the support the urethra needs to maintain its seal and can restore the body's ability to control urine loss.

The 30-minute, minimally invasive treatment can be performed under local anesthesia in an outpatient setting.

RECOVER AT HOME

Patients treated with GYNECARE TVT may be able to go home as soon as a few hours after the procedure. Daily activities shouldn't be greatly affected during the two- to three-week recovery period; however, heavy lifting and intercourse should be put off for four to six weeks.



Call today for an appointment!

If you're experiencing incontinence, call Dr. Thompson at (843) 454-1100 to schedule an appointment. His office is directly behind MPH at 1040 Marlboro Way, Suite 8, in Bennettsville.



Dr. Kenneth A. Thompson
Obstetrician/
Gynecologist

MPH encourages the community to GO RED

Marlboro Park Hospital (MPH) employees will be joining thousands of individuals, companies and organizations across the nation and wearing red on National Wear Red Day, Friday, Feb. 6. Wearing red and making a donation to the American Heart Association will help support ongoing research and education efforts to increase awareness about women and heart disease.

Don't know what to wear on National Wear Red Day to help spread the message? Be bold: Wear a cerise suit, a burgundy blazer or brick-red boots. If you're not so daring, accessorize with a scarlet scarf, blushing belt, vermilion vest or crimson camisole.

"At Marlboro Park Hospital, more than 230 employees will be asked to participate in the campaign because, for many of them, heart disease is personal," says Christi Meggs, director of human resources, marketing and physician recruitment. "National Wear Red Day is an opportunity for everyone to remember their female friends and family members who have suffered from the disease. It's also a time for women to think about their own hearts and take charge of their own health."

WHAT'S A WOMAN TO DO?

Too few women perceive heart disease as their greatest health threat, and many don't know it's the No. 1 killer of women and men. And though some risk factors for heart disease are unchangeable—including age, gender and family history—you can reduce some threats to your heart health by not using tobacco; controlling your weight, cholesterol and blood pressure; being physically active at least 30 minutes a day on most days of the week; and taking medications prescribed by your physician.

"We are committed to supporting organizations and programs that interest our employees. Since heart disease affects so many of our employees' personal and professional lives, National Wear Red Day is a perfect fit," says Meggs.



! Get involved!

MPH asks that all individuals and companies in the communities we serve join us on Friday, Feb. 6, and wear red! For more information about how you can do your part to go red, call Christi Meggs, director of human resources, marketing and physician recruitment, at (843) 454-8404.

HEALTHWISE QUIZ

How much do you know about exercise?

Take this quiz to find out.

1 To lose one pound, you need to burn how many calories?

- a. 500
- b. 1,500
- c. 2,500
- d. 3,500

2 A good way to measure the intensity of an exercise is to keep track of your:

- a. heart rate
- b. blood pressure
- c. sweat levels
- d. thirst intensity

3 Exercise can:

- a. reduce depression
- b. help manage type 2 diabetes
- c. boost good HDL cholesterol
- d. all of the above

4 The *minimum* amount of time you should be active every day is:

- a. 15 minutes
- b. 20 minutes
- c. 30 minutes
- d. there is no minimum

5 Which of the following exercises will *not* help you build stronger bones?

- a. running
- b. swimming
- c. lifting weights
- d. dancing

ANSWERS: 1. (d) 2. (a) 3. (d) 4. (c) 5. (b)

The kidney-heart connection

If you think kidney disease only affects your kidneys, think again. Though researchers can't fully explain the link, kidney disease is an independent risk factor for heart disease and greatly increases the risk of dying from heart problems. In fact, heart disease is the most common cause of death for the more than 20 million Americans with chronic kidney disease.

WHO GETS KIDNEY DISEASE?

Kidney disease is often called a "silent killer" because many people don't even know they have it until it reaches an advanced stage. Risk factors include being obese; smoking; and having high blood pressure, diabetes or a family history of kidney disease. Ask your physician about testing if you're at risk. If he or she suspects you may have chronic kidney disease, blood and urine samples can diagnose it.

KEEP YOUR KIDNEYS HEALTHY

If you already have kidney disease, early treatment can help keep it from getting worse. But the best method of attack is to prevent the problem in the first place. Take these steps to minimize your risk:

- **Maintain a healthy weight.** Eat healthful foods and be active every day.
- **Quit smoking.** Besides the damage it can do to your heart, smoking can interfere with medicine for high blood pressure.
- **Get your blood pressure level to 120/80 mm Hg or lower.** Start by slashing salt from your diet and getting more potassium (found in bananas, apricots and broccoli). If changing your diet doesn't help, discuss medications with your physician.
- **Control your blood sugar if you have diabetes.** Dietary changes and medication may be needed.



'Brake' for breakfast



You wouldn't take off for a road trip with no fuel in your car, so it doesn't make much sense to send your body out for the day with nothing to run on. Your tank needs breakfast.

Studies have shown that those who eat this most important meal of the day are less tired and irritable, have better concentration and are more likely to maintain a healthy weight. Not a bacon-and-eggs person? No problem. Try these

out-of-the-cereal-box suggestions from the American Dietetic Association:

- one cup of vanilla low-fat yogurt topped with whole-grain cereal and berries
- leftover veggie pizza with a piece of fruit and a glass of milk
- whole-grain toast topped with a little peanut butter and apple slices
- whole-grain waffles or pancakes topped with fresh banana
- a super-fast smoothie, made from frozen fruit and yogurt, whipped up in a blender
- a breakfast wrap (try low-sodium deli turkey, low-fat cheese and spinach in a tortilla)
- oatmeal sprinkled with cinnamon and walnuts

Ready, aim, vaccinate!

Vaccines aren't just for babies. If your child hasn't been to the pediatrician in a while, he or she may have missed some important shots. And don't forget that adults need vaccines, too! Talk

with your pediatrician about your child's specific needs and whether he or she is at high risk. And ask your own physician about *your* needs. Use this handy chart as your guide.

IMMUNIZATION	BIRTH TO AGE 6	AGES 7-18	AGES 19+
Diphtheria, tetanus, pertussis (DTap, Td/Tdap)	4 doses by 18 months; final dose at age 6	Kids need a booster at ages 11-12. For teens, ask your pediatrician if your child is up to date.	Get a Td booster every 10 years. If you're under age 65 and haven't been vaccinated with Tdap before, you need a single dose.
<i>Haemophilus influenzae</i> type b	4 doses by age 15 months		
Hepatitis A	2 doses between 12 and 23 months	High-risk kids and adults need a vaccination.	
Hepatitis B	3 doses within first 18 months of life	Ask your pediatrician if your child is up to date.	High-risk adults should be immunized.
Human papillomavirus (HPV)		3 doses are recommended for girls ages 11-12, or later if a young woman isn't up to date. Ask your physician about the pros and cons of vaccination.	
Inactivated polio virus	3 doses by 18 months	Ask your pediatrician if your child is up to date.	
Influenza	Yearly, for kids ages 6 months to 19 years		Anyone <i>can</i> get vaccinated; high-risk adults and those over age 50 <i>should</i> be.
Measles, mumps, rubella (MMR)	1 dose at 12-15 months; another at ages 4-6	Ask your pediatrician if your child is up to date.	If you haven't had this vaccine, you need it. High-risk adults need a second dose. If you were born before 1957, you're considered immune to measles and mumps.
Meningococcal (meningitis)	Ask your pediatrician if your child is high risk.	It's recommended for kids ages 11-12; otherwise, ask your pediatrician if your child is at high risk.	It's a must for high-risk groups.
Pneumococcal (pneumonia)	4 doses of pneumococcal conjugate by 15 months	High-risk kids and adults need the pneumococcal polysaccharide vaccine. Adults should get vaccinated at age 65; some older adults may need a booster.	
Rotavirus	3 doses by 6 months		
Varicella (chicken pox)	1 dose at 12-15 months; another at ages 4-6	Ask your pediatrician if your child is up to date.	If you aren't up to date and never had the chicken pox, speak with your physician.
Zoster (shingles)			Get it once, at age 60 or older.

Source: Centers for Disease Control and Prevention

New faces at MPH



Jeff Reece, R.N., M.S.N.,
M.B.A.
Chief Executive Officer

NEW CHIEF EXECUTIVE OFFICER

Jeff Reece, R.N., M.S.N., M.B.A., was named chief executive officer for Marlboro Park Hospital (MPH) in October.

Reece was acting as the interim chief nursing officer for several weeks after coming from Chesterfield General Hospital (CGH) in Cheraw, where he spent the last three-and-a-half years working first as the director of quality and

most recently as chief nursing officer. He also worked at Springs Memorial Hospital in Lancaster, serving as clinical director of the intensive care unit as well as in various roles in the emergency room, infection control, risk management and patient education.

Reece received his associate degree in nursing from Carolinas College of Health Science, his bachelor's degree from Western Carolina University and his master's degree from the University of Phoenix.

CHIEF NURSING OFFICER NAMED

Anita Crawford, R.N.C., B.S.N., M.S.N., was named chief nursing officer for MPH in November.

A native of Cheraw, Crawford has more than 15 years of experience in nursing that includes her roles as nurse manager of the Women and Children's



Anita Crawford, R.N.C.,
B.S.N., M.S.N.
Chief Nursing Officer

Unit at CGH; staff nurse at MPH, McLeod Regional Medical Center in Florence and CGH; and nursing instructor at Florence-Darlington Technical College and Northeastern Technical College.

Most recently, Crawford was the nursing coordinator/instructor for the associate in nursing and practical nursing programs at Northeastern Technical College, where she

developed and implemented the associate degree in nursing curriculum to help produce registered nurses for the area.

Crawford received her associate degree in nursing from Chesterfield-Marlboro Technical College in Cheraw, her bachelor's degree in nursing from the University of South Carolina and her master's degree in nursing from the University of Phoenix.

MPH'S HARDWORKING TEAM

MPH is pleased to welcome these fine individuals to the senior management team. They join Troy Pickens, chief financial officer; Christi Meggs, director of human resources, marketing and physician recruitment; and Candace Morton, director of quality management and regulatory compliance.

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WINTER 2009

Health Connection

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