



## Different is Good... Very Good

More than a half century ago, a small group of hometown doctors who believed health care close to home should be something different, combined their genius to create NorthBay Healthcare.

To this day, we seek to be different for two reasons: to survive in a landscape over-colonized by big-box corporate systems, and to provide care better than they do.

We know we cannot be everything to everyone, but we strive to provide care as unique as every individual who comes to us. From a patient's perspective, that means customizing care based on individual needs and desires. From a community perspective, that means providing a wide gamut of services to ensure we fill the gaps created by the big systems that are focused on the bottom line.

So in some cases NorthBay knowingly operates service lines or programs that do not pay for themselves. But because we are different, we understand these programs provide great benefits to our community. No one else chooses to be in the business of free hospice care, or operate an Alzheimer's day center, or offer free prenatal care for low-income mothers-to-be, not to mention millions of dollars in unreimbursed care for the uninsured or underinsured.

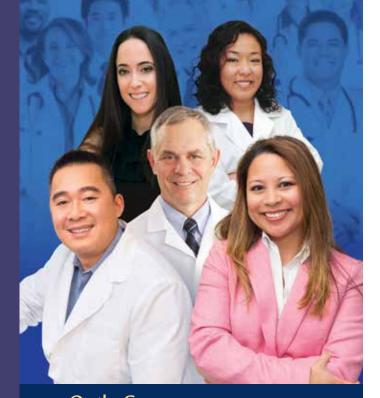
Within the pages of the *Wellspring* edition you hold in your hands is a compilation of just how different our physicians are, how their talents vary, how we value diversity and alternative approaches to keeping people healthy and treating them when they are not.

We are willing to take the risk of establishing new ventures if it means better serving the public at large. That spurred us to open the first neonatal intensive care unit for premature newborns so parents and child wouldn't be rushed off to another hospital far away. It drove us to create the first trauma center in Solano County. And it compelled us to advance medicine in a host of areas—cancer treatment, cardiovascular surgery, heart attack centers, women's health and neuroscience, to name but a few.

We promise more in the future. We are not done being different. We are not done bringing more advanced medicine close to home. Stay tuned...

Lang J. Carama

President and Chief Executive Officer



### On the Cover: Our Doctors Stand Out

Gracing the cover for this issue (back row) are Lauren Weber, D.O., a family practice physician who focuses on women's issues, including menopause; Angela Lim, D.O., who has made Osteopathic Manipulative Medicine (OMM) her specialty; and (front row) Dr. Tin Ngo, a urologist and expert on men's health issues; Dr. Bruce Hewett, a pediatrician who makes sure kids get their Zzzzs; and Dr. Cynthia Peña, who helps her patients manage all kinds of pain.



### Hope After Tragedy

CHP Officer Marvin Hurn was paralyzed from the waist down when he was wheeled into Dr. Jeffrey Dembner's surgical suite. Months later, after hard work and exhausting therapy, he can walk with the aid of a walker and has hope.

### Unique Physicians, Unique Healthcare

Just as no two patients are alike, so it goes with doctors...

At NorthBay Healthcare, we are proud of the oh-so-smart, diverse, skilled and ever-growing field of physicians we offer to our community.

There's the surgeon who thinks breast cancer patients shouldn't have to wait for reconstructive surgery. And the gastroenterologist who mixes Western medicine with Eastern therapies and treatments for the best of both worlds.

Meet our expert in getting children to sleep... Our Functional Medicine physician who looks for holistic ways to restore his patients' health... Our expert in joint replacement surgeries... Our doctors who use Osteopathic Manipulative Medicine to realign bodies and get patients back to active lives... Our experts in menopause who can help women of a certain age weather "the change" in their lives.

The list goes on and on.

NorthBay Healthcare has expanded from a simple community hospital to a comprehensive community healthcare system, comprising two hospitals, three centers for primary care, two specialty centers, a cancer center, and a center for women's health, all right here in Solano County. And yes, there's even more on the horizon.

NorthBay has grown up with our community and continues to serve the needs of local patients. Need a pediatrician? Emergency care? Specialty surgery? Help getting on a healthier track? We have a doctor for all that, right here at NorthBay Healthcare.

### Contents Winter'14

#### **Meet Our Distinguished Docs**

- 2 Neurosurgeon Brings Hope
- 5 Orthopedic Wizard
- 6 Functional Approach
- 8 Relief in Sight
- 9 Managing Pain of RA
- 10 Restoring Dignity
- 11 East Meets West
- 12 Taking Time for Patients
- 14 Mastering Chronic Pain
- 15 Focus on Men's Health
- 16 Team Tackles Diabetes
- 17 The Value of Touch
- 18 Rx for Sleep
- 20 Alternative Specialty
- 21 Hope Despite Menopause
- 22 Comforting Care

#### **NorthBay News**

- 24 Trauma Focus on Youngsters
- 25 Mammograms in 3D
- 26 Welcome New Physicians
- 26 Advances with Second Lab
- 28 Jubilee's New Venue
- 28 Office Ready to Open
- 28 Cancer Survivors Day
- 29 Community Classes

http://wellspring.northbay.org





**Expert Rebuilds Pelvis** 

Cornelis Elmes, M.D., is not one to shy away from a challenge, even if it's the crushed pelvis of a patient who was dragged 20 feet by a car. Thanks to his surgical expertise, the man is walking today.



Restoring Hope & Dignity

Oncoplastic surgeon Jason Marengo, M.D., says women shouldn't have to wait months after breast cancer surgery to have reconstruction; if it's done right, it can all be done at once.

Wellspring is published quarterly by NorthBay Healthcare, Solano County's locally based nonprofit healthcare organization.

**Editorial Staff** 

Steve Huddleston shuddleston@northbay.org

Diane Barney dbarney@northbay.org

Marilyn Ranson mranson@northbay.org Sally Wyatt swyatt@northbay.org Debbie Hooks

Publication Designer
Page Design Group

Photographers Henry Khoo, Gary Goldsmith, Diane Barney

Physical, Mental & Spiritual Recovery after a Traumatic Accident

### Long Journey Back Takes Courage & Faith

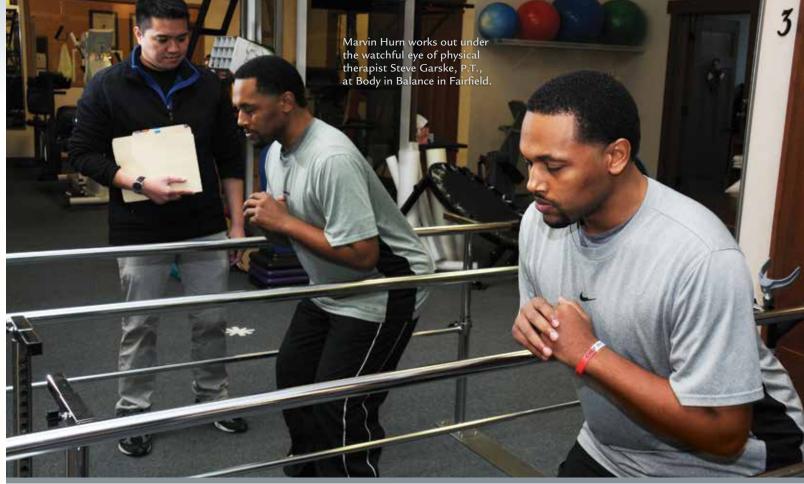
CHP Officer Marvin Hurn, 31, was spending a relaxing day off with his family and church at a trampoline park in Fairfield when his world was forever changed.

It was just one leap—from the trampoline into the foam pit surrounding it—but he landed on his head at the bottom of the pit.

He knew instantly what had happened. He hit his head on the ground and suddenly could no longer feel his body.

That was Aug. 13 when the eight-year CHP veteran dislocated his neck, leaving him paralyzed from the waist down. His wife, Deanna, was at another area of the park when the accident happened. Her 10-year-old daughter, Ramiyah, ran to her crying, "Daddy's hurt his neck!" She followed Ramiyah to the accident site, not knowing what to expect.





by helicopter to larger hospitals for treatment. To his surprise, the paramedics told him NorthBay Medical Center in Fairfield had a neurosurgery program and would take good care of him.

He was rushed by ambulance to the hospital and into the capable hands of the trauma team. Within hours, he had undergone all of the diagnostic tests necessary for neurosurgeon Jeffrey Dembner, M.D., to take him into the operating room. His surgery began at midnight as Dr. Dembner realigned his dislocated spine and fused his neck.

Meanwhile, Deanna sent their three daughters home with grandparents and began her vigil. She wouldn't leave the hospital for a week. Marvin had never been in the hospital and she didn't want to leave him alone.

Marvin's surgery was a success, and he spent the next week in the intensive care unit.

He went from being very active and independent to having no feeling below his chest. His medical team advised him that even when feeling came back, his likely outcome would be life in a wheelchair. He couldn't accept that and Dr. Dembner gave him hope.

In the dark days following his surgery, Dr. Dembner would ask if he could move his toes and Marvin just shook his head. "Not yet, Mr. Hurn, not yet," Dr. Dembner would correct him.

His first sense of feeling came in his thigh, although he couldn't move a muscle. It was enough to encourage him to believe that with hard work he could regain some mobility. After a week in the hospital he was transferred to the inpatient acute rehabilitation program at Queen of the Valley Hospital in Napa.

When he entered rehab he could hardly lift his head. But a physical therapist agreed to work with him as long as he showed progress. That was all Marvin needed to hear.

He learned that the window to make the most physical progress closes after about 12 months, so he was motivated to make the most of this time.

He had minimal movement when he left NorthBay Medical Center, but after five weeks in acute rehab, he was discharged using a walker.

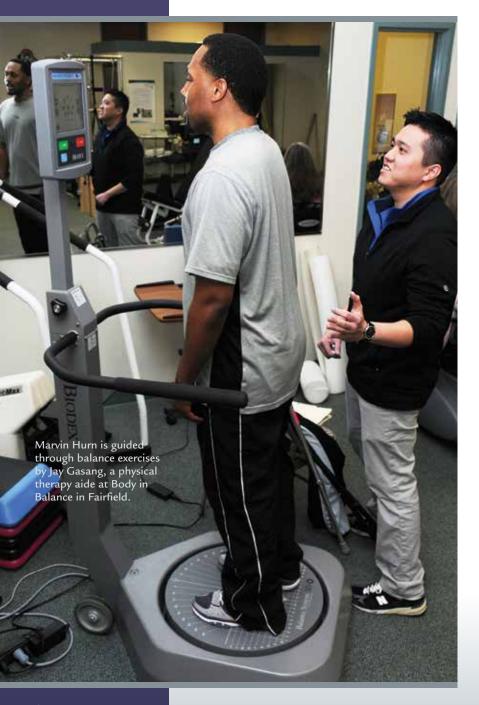
continued on page 4.



Marvin has learned that healing is a physical, mental and spiritual process of putting in hard work and having a strong mind and faith to give you hope. His next step in recovery was an in-home program called "Rehabilitation Without Walls." It helped him acclimate to being at home and in the community.

By November, Marvin was no longer wearing a neck brace. At home, he alternated between a wheelchair and a walker; remaining positive and believing he would make a full recovery. In December, he began physical therapy at Body in Motion in Fairfield.

Dr. Dembner asked for full reports about Marvin's progress. "You can tell he takes great pride in every patient," Deanna says.



The months of recovery have been hard for the young family raising three daughters, ages 2, 3, and 10. "This has been the biggest challenge of our entire lives," Deanna says. "As for our marriage, we're doing our best to persevere through this life-changing situation. My husband I work together as a team and surviving this is teaching us how be an even better team. But, like any couple, we have our moments!"

They're both learning to have patience with each other and the situation in which they find themselves. "I have had to talk with Marvin and really convey the challenge of tending to him and the kids while managing our business. Sometimes this means he will have to be patient with me, as I am with him, as I juggle the day to be with him, the kids and our learning center," Deanna explains.

The Hurns own Miracle Math Coaching in Fairfield, a successful learning center with 15 employees. It's a business that Deanna developed from her own love of teaching math. Her strong faith has helped her balance the demands of work and family.

"I have an amazing administrative assistant, parents and teachers at my learning center and the center has blossomed through this because of their love and support for me," she says.

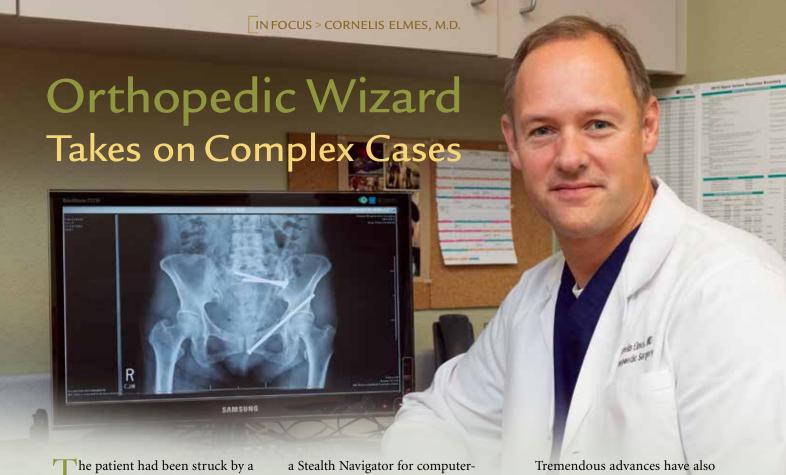
For Marvin, recovery is his full-time job. He's learned that healing is a three-fold process—physical, mental and spiritual. Putting in hard work and having a strong mind and using faith to give himself hope gets him through the day.

Always a goal-setter, in rehab he's had to learn to listen to his body more—to find a balance between working out and not doing too much. He's learning to work with where he is physically right now, with a goal in sight. His ultimate goal is to get back to work with the CHP.

The couple feels blessed by the outpouring of support they've received from their church, Liberty Christian Center; their CHP family; and the NorthBay nurses and doctors.

"Our family has extended to so many people who have lent helping hands, I honestly don't see how we could have made it without their support," Deanna adds. \$\infty\$

Marvin Hurn is dedicated to sharing his story to inspire and help others. If you would like to have him speak at your event, please send him an email at DHurn@me.com.



The patient had been struck by a car and dragged 20 feet. His ribs were broken and his pelvis crushed, both in the front and the back. He could have faced months of painful recuperation while his bones healed, and the possibility of never walking normally again. Fortunately for him, his injuries were repaired by Cornelis Elmes, M.D., a NorthBay Healthcare orthopedic surgeon skilled in the latest trauma surgery techniques.

Before coming to NorthBay five years ago, Dr. Elmes had worked at Level I and Level II trauma centers in New York, Florida and California. It was not unusual for him to put in 100-hour-plus weeks, performing surgeries in difficult and traumatic cases. "I probably was doing at least one pelvic fracture repair a week, which can be particularly complex and challenging."

While at those facilities he was also trained in several surgical innovations, including the use of special locking plates and nails, and the use of biologic agents. He brings his years of experience to NorthBay's surgical suites, which are equipped with the latest in surgical equipment, such as

a Stealth Navigator for computerassisted surgery, and an O-arm Surgical Imaging System, which allows the surgeon to more accurately navigate to the exact point of injury. With these tools, he can fix large fractures using screws inserted through very small incisions, all in less time and with greater precision and accuracy.

"It's amazing technology," he says.
"These surgical advances use less
invasive techniques, which help reduce
post-operative pain, the risk of infection and other complications.

"Locking plates and nails have also proven to be a revolutionary development in orthopedic surgery," Dr. Elmes says. "They help us to treat the toughest of fractures, such as those that occur near joints or in the elderly, who have weak and fragile bones."

With these devices, screws actually lock into the plate, making the construction much more rigid and strong. Before, "there was some degree of motion between the screw and plate," he explains. "We also now have implants specifically designed for every major bone in the body, which helps complicated surgeries go more quickly and smoothly."

Tremendous advances have also been made in the use of biological agents and bone plasters. "When these agents—bone graft substitutes, bone plasters and proteins—are added at the time of surgery, they can stimulate bone healing and growth, with improved outcomes for patients."

When the bone plaster is injected into the fracture, he explains, it quickly hardens like cement, reaching strengths of up to 10 times that of normal bone. This allows people to walk weeks, if not months, earlier than previously possible, he says.

"The cutting-edge surgical equipment we have here at NorthBay would typically be found in a Level I or Level II trauma center, not usually in smaller community hospitals," he adds.

Dr. Elmes' surgical expertise and three patients who benefited from it—including the one who suffered a crushed pelvis—will be featured in a special PBS documentary. Called "Breakthroughs," the documentary is expected to air in early 2014.

Dr. Elmes, a hospitalist in orthopedic surgery, can be reached at (707) 646-4644.

4 Wellspring Winter 2014 5

# Functional Approach Healing Begins with the Patient

Hassid, M.D., leaves no stone unturned as he strives to restore his patients' health while improving their underlying medical problems. It has brought him a loyal following of long-term patients as well as enthusiastic new patients after his move to Vacaville from Davis last year.

Functional medicine addresses the factors that are the underlying cause of many diseases, including diet, activity level, sleep quality, stress, hormonal stability and environmental exposures. hood," says Dr. Hassid of this thorough approach to medicine. "It's a challenge to find the underlying cause of a patient's condition. I strive to bring hope to patients who have had limited success with their previous treatments."

"I like to look under the

"Dr. Hassid has a practical, empirical approach to med-

icine," says retired attorney Romaine Nelson, who began seeing Dr. Hassid for chronic pain in 2005. He also has fibromyalgia, restless leg syndrome and insomnia.

"He keeps me functioning," adds the 77-yearold Davis resident. "I have the luxury of seeing him once a week and he tinkers with my treatment depending on how I feel."

In retirement, Romaine has taken up woodworking along with other projects around his home. He's very active and plans to stay that way. A few years ago he injured himself cleaning a large backyard fountain, adding the pain of sciatica to his list of ills.

"Dr. Hassid referred me for acupuncture, we tried a nerve block, and I've been helped by Osteopathic Manipulative Medicine (OMM)," he explains. "If a treatment will do no harm, he'll give it a try."

Romaine's wife of 30 years, Pamela, has lupus and she is a patient of Dr. Hassid's as

well. They agree that Dr. Hassid never gives up on a patient.

"My many years of practicing medicine have taught me that true healing occurs from the patient more so than from the doctor," Dr. Hassid explains. "Functional medicine addresses the factors that are the underlying cause of many diseases, including diet, activity level, sleep quality, stress, hormonal stability and environmental exposures."

Yuba City resident Tim Farley came to Dr. Hassid with a multitude of health problems in April 2013. Frustrated when his local ER diagnosed his grossly swollen leg as a possible spider bite or allergy, his wife, Roanna, took him to her own physician—Dr. Hassid.

The 58-year-old welding inspector had long suffered with Type 2 diabetes as well as Hepatitis C, which had progressed to cirrhosis—a scarring of the liver that can't be reversed. By the time he met Dr. Hassid, he was on the non-active liver transplant list, resigned to waiting for his liver to fail so it could be replaced. His swollen leg was caused by his diseased liver.

The liver carries out several essential functions, including detoxifying harmful substances in your body, cleaning your blood and making vital nutrients.

Candidates for liver transplants are prioritized using a complicated mathematical calculation called a MELD score. A score of 20 is needed to be eligible for a liver, and Tim had a score of 11 when he met Dr. Hassid.

"Dr. Hassid brought a fresh outlook to my liver disease," Tim explains. "He said 'let's make your liver healthy enough that you don't need a transplant."

Dr. Hassid referred Tim to a liver specialist for tests. Then, Dr. Hassid prescribed a series of IV infusions and a regime of supplements.



His Nurse Practitioner, Karin Grumstrup, helped Tim with his diet to get his diabetes under control. Now he is on a strict, low-salt, low-glycemic load diet, and is getting more sleep; all of which has helped his overall health and energy level improve. And, to the delight of the entire functional medicine staff, Tim's MELD score was dropping. Furthermore, a recent scope of his esophagus showed that his esophageal varices (varicose veins in the esophagus usually resulting from liver failure) had disappeared.

"Today, I sleep better and I have more energy," Tim reports. "And best of all, I feel like I'm going in the right direction."

Dr. Hassid is a board-certified neurologist who has studied functional medicine for more than 10 years. He is also certified by the American Board of Anti-aging Medicine. "I firmly believe in the body's inherent ability to be restored to good health," he says. His goal is to work in concert with the patient's primary care doctor to work on the core issues of health. He has cared for patients with complex conditions such as multiple sclerosis, Parkinson's disease, and migraine headaches. With an emphasis on natural healing agents, he helps patients with a wide variety of disorders, including insulin resistance, hormone imbalances, fatigue, mood disorders and aging concerns. He provides a patient-centered team approach to his clients with a goal of helping them attain optimal health and function.

Functional Medicine, a NorthBay affiliate, is located in VacaValley Health Plaza in Vacaville. For more information, call (707) 624-8530.

6 Wellspring Winter 2014 Wellspring Winter 2014

### Hands-on Approach Brings

## BIG RELIEF~

At 23 years old, Carmen Robinson felt like a much older woman. There were days when her back pain was so intense, the Fairfield resident could barely walk. It made her job as a medical assistant at the NorthBay Center for Primary Care in Fairfield exceptionally draining. Her daughter, Tatiana, now 4, couldn't understand why mom wouldn't play with her.

"Back pain definitely affected my lifestyle and even my moods," recalls Carmen. "I used to exercise, but I had to give it up because I was in too much pain. Even sleep was difficult; I was always tired."

She started seeing a parade of doctors at age 15, when the pain first started. She even visited emergency rooms a time or two in her quest to find relief.

**8** Wellspring Winter 2014

At one point, she had acute kidney failure and bladder disease, and the hope was that once she recovered, the back pain would abate, but it did not.

She was prescribed narcotics, such as Vicodin and Percocet, which were not a good option for someone going to school, and then later working a full-time job, Carmen explains.

The worst? When she was advised she should no longer pick up and carry her daughter. "We both lost out with that directive," she recalls ruefully.

One day at work, she was telling a colleague of her pain when Zackery

Wood, D.O., overheard. He asked a few questions and said he might be able to help.

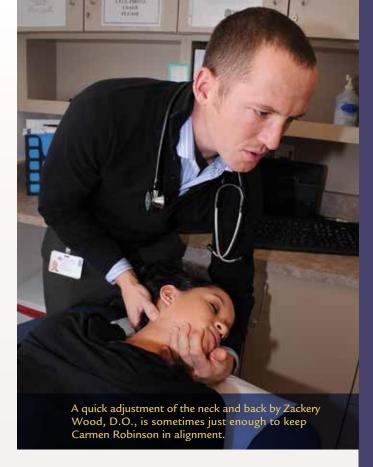
Zackery Wood, D.O., performs an adjustment on patient Carmen Robinson. "In a quick exam, he checked my bones, neck and spine and said he knew right away he could help." Turns out, Carmen's back was out of alignment.

She was nervous the first time she laid on the table while he adjusted her back, punctuated with a series of pops. "It sounded scary, but the minute I got off that table, my whole life changed," she recalls. "Before the adjustment, I couldn't touch my toes. He had me try. Afterward, I bent down with no problem whatsoever," she said.

It may have seemed like a miracle to Carmen, but it is just all part of a day's work for Dr. Wood. He frequently turns to Osteopathic Manipulative Medicine—or OMM— when a patient is suffering from a sore back or neck.

"I work on a person's overall wellness," says Dr. Wood from his Center for Primary Care office in Fairfield. "A doctor of osteopathy embraces a holistic perspective: mind, body, spirit."

For patients with pain issues, especially involving the back and neck, OMM is his go-to choice. "I can prescribe pills, but that's not the best



treatment for everyone. So often, it's an issue of alignment. Patients are often surprised at how quickly they can experience relief."

OMM involves stretching, gentle pressure and resistance to ease pain and promote healing.

Dr. Wood comes from a long line of osteopathic doctors, including his grandfather, father, uncles and brothers. "Listening to medical discussions around the dinner table was common, and I looked forward to the day I began my own practice," he says.

Today that practice is open to patients of all ages. "I like to educate my patients on how to become healthier people, not just care for a condition or disease," he notes. "I consider each patient's lifestyle and personal environment when making a treatment plan. It's a lot like being a lifestyle coach. I try to help them make good decisions."

To schedule an appointment with Dr. Wood at the Center for Primary Care, a NorthBay Affiliate, in Fairfield, call 646-5500.

IN FOCUS > MELISSA SCHOENWETTER, D.O.

### Arthritis Specialist Helps Patients Cope

We've all woken up with aching joints, and the occasional morning stiffness is inconvenient but manageable. For people with rheumatoid arthritis (RA), however, the activities of daily living—washing hair, buttoning a shirt, or even walking up or down stairs—can be painful all day long.

RA is an inflammatory autoimmune disease characterized by pain, swelling, stiffness and reduced function of the joints. Because the body's immune system is attacking the thin membranes that line the joints, it is possible that cartilage, tendons and ligaments may also be damaged.

RA is a chronic illness, which means it is ongoing, progressive, and best managed by a physician specially trained in caring for this complex disease. Melissa Schoenwetter, D.O., is one of less than a handful of rheumatologists in Solano County, and she comes to NorthBay Healthcare after more than six years of specializing in the practice at David Grant Medical Center.

For Dr. Schoenwetter, who is both board-certified in internal medicine and rheumatology, becoming a rheumatology specialist was a natural career choice, because the disease is complex and its management requires lots of interaction with patients.

She believes it's important to take an active role in educating her patients about the disease so they can better manage their condition. Early diagnosis and aggressive treatment may put RA in remission and minimize potential joint and organ damage.

There is at least one common misconception about RA, she notes. It is not a disease just for the elderly. While peak onset is between 50 and 70 years, it can occur in children, teens and young adults in their 20s and 30s. Approximately 1.3 million Americans have rheumatoid arthritis, or 1 percent of the nation's population.

"There are many good treatment options available for RA, and I find it rewarding when I can see my patients are feeling better," she adds. "I want them to leave my office feeling I really listened to them and find that in me they will have a healthcare advocate who will work with them to improve the quality of their life."

Dr. Schoenwetter practices at the Center for Specialty Care, a NorthBay Affiliate, in Vacaville at (707) 624-8530.



< Melissa Schoenwetter, D.

"A diagnosis of breast cancer

*Until now, cancer surgery* 

reconstruction followed at

came first and plans for

a later date."

can be overwhelming.

# Restoring Hope & Dignity

#### Advanced Approach Proves Effective for Women with Breast Cancer

eptember 2012 was shaping up to be a difficult month for Beverly Stewart. The 64-year-old Angel's Camp resident had just learned her job would be eliminated and with it, her health insurance. Not yet old enough for Medicare, she was researching options when she attended a regular monthly meeting of the Soroptimists International of Calaveras County.

"The guest speaker that day was a breast cancer educator who was there to remind women of the importance of getting regular mammograms," Beverly recalls. "I hadn't had one in five years. Like so many women,

we let work and other things get in the way, but after hearing her speak, I thought I better get mine before the end of the month."

It was a fortunate decision. The mammogram revealed a lump and her follow-up tests indicated cancer.

Upon hearing the news, Beverly's family members sprang into action, and she is grateful for the immediate support she received from them, especially daughter Shelley Johnson, who is director of Medical-Surgical Services at NorthBay Medical Center and NorthBay VacaValley Hospital.

"Without hesitation, Shelley said I should come to the NorthBay Cancer Center because they have the best oncologists and surgeons." Beverley says.

> "My son-in-law said I could stay at their home for the treatments, rather than travel back and forth. And so I put it all in her hands."

First, the lime-sized lump needed to be removed by oncoplastic surgeon Jason Marengo, M.D. He joined the Center for Specialty Care in 2012, and is one of only a handful of surgeons nationwide trained in both surgical oncology and plastic surgery.

Before the surgery, Dr. Marengo met with Beverly and explained his surgical philosophy: "I am in a unique position to provide a truly comprehensive surgical plan to my patients. Breast reconstruction is often only discussed in the context of recreating a breast after mastectomy, but I believe that reconstructive principles should be applied to every breast procedure, from the smallest breast biopsy to recreating a breast after mastectomy."

He promised he would carefully remove the lump and reconstruct the breast so that Beverly would not really notice any difference. "I was so overwhelmed with everything at the time that my first reaction was to say, 'Are you joking? I'm 64, do you really think that is important to me?' But, in fact, it is! I was so emotional I just couldn't process what he was saying at the time."

"A diagnosis of breast cancer can be overwhelming," Dr. Marengo says. "Not only do you have to make decisions about treatment, you also have choices when it comes to breast reconstruction. Until now, cancer surgery came first, and plans for reconstruction followed at a later date."

Dr. Marengo has personal knowledge of the long-term effects of breast cancer surgery. "My grandmother had breast cancer at a time when procedures were much more invasive. I witnessed how she coped with the side effects of such radical surgery."

Dr. Marengo applies the principles classically used in breast lift, breast reduction, and breast augmentation to not only remove a breast cancer, but through careful placement of incisions and the use of breast-shaping techniques, restore, and in some cases improve, the breast's appearance. The idea, he says, is to remove the cancer with as little damage to surrounding breast tissue as possible. "My job is a marriage of surgical oncology and plastic reconstructive principles."

After three weeks of radiation treatment at the NorthBay Cancer Center, Beverly's prognosis is very good. She has taken this opportunity to make some positive life changes.

"I've lost 30 pounds, I don't eat processed foods and I walk five miles a day. I haven't felt this wonderful in years!"

And, she's had some time to reflect on Dr. Marengo's original promise. "He was so right; reconstruction is important. I fit in all my clothes; I didn't need a new bra. I truly become more appreciative as time goes by."

To book an appointment with Dr. Marengo, contact the NorthBay Cancer Center at (707) 646-4000 or the Center for Specialty Care, a NorthBay Affiliate, at (707) 646-4180.



IN FOCUS > TAWHID GAZI, M.D.

### East Meets West Cutting-Edge Therapies

His title is a mouthful: Interventional gastroenterologist. But that's simple compared to the names of some of the complicated, cutting-edge therapies and procedures Tawhid Gazi, M.D., has mastered and brought to Solano County.

Start with the Endoscopic Ultrasound or EUS for short. Using a technique called fine needle aspiration, he can deliver pain relief for chronic abdominal conditions, take tissue samples and even screen for pancreatic cancer, an insidious cancer that often goes undetected until it's too late.

And then there's endoscopic retrograde cholangiopancreatography or ERCP for short, used to diagnose abdominal pain and to evaluate the ducts of the gallbladder, pancreas and liver.

"Endoscopy offers patients quicker recovery times, and shorter or no hospital stays," explains Dr. Gazi. "Rather than traveling to academic centers, my patients can now receive this cutting-edge gastroenterological care close to home."

When appropriate, Dr. Gazi combines traditional Western medicine with Eastern therapies and treatments to promote quicker healing and overall health.

"Some of these treatments include acupuncture, herbal teas and herbal therapies that perfectly complement Western medicine," he says. "It's all about helping the patient feel better again."

Dr. Gazi was recently voted the top gastroenterologist in Fairfield by the International Association of Healthcare Professionals. Prior to joining NorthBay, he was the chief of gastroenterology at Providence Health Center in Texas.

"After my first

visit, I felt very

confident that

I could make

an informed

my surgery."

- Roy Yarbrough

decision about

## Surgeon Takes Time

A partial knee replacement has Roy
Yarbrough, 63, of Vacaville, optimistic
that he will return to the tennis court this
spring. Looking back, he's amazed that Orthopedic Surgeon Andrew Brooks spent two hours
with him on his very first visit.

"To have a doctor spend so much time with me, going over my test results and explaining the options for repairing my knee just blew me away," Roy says. "After that visit, I felt very confident that I could make an informed decision about my surgery."

For Roy, it was hard-won confidence. Losing his wife in 2008 left him with a very negative impression of doctors and health care in general. "I pretty much gave up on health care for the next five years," Roy says. "It was only when I realized that my knee needed more help than rest and ice could give it, that I gave in and sought medical help."

Garth Davis, M.D., his physician at the Center for Primary Care in Vacaville, sent him for tests, including an MRI of his knee. When the results came in, Roy was referred to Dr. Brooks.

"Roy was a good candidate for a partial knee replacement," says Dr. Brooks. "The procedure is much less invasive than traditional knee replacement surgery and patients recover more quickly and with less pain."

During that first, long appointment, Dr. Brooks reviewed all of Roy's test results with him, explained the condition of his knee and shared what he could expect from various treatments. "I had torn the meniscus in the same knee back in the early '90s, but I wasn't sure I needed a knee replacement," Roy says.

"Dr. Brooks showed me a comparison of

my left and right knees. There was very little

padding in my left knee—it was pretty much

h

"Once I decided on the surgery, we set a surgery date 30 days away and I had a lot of preparation to do."

bone on bone—which explained my knee pain.

Roy met with Dr. Brooks' medical assistant Erinn Whittemore, who gave him a timeline that included a visit to his dentist to ensure he had no infections that could contaminate his surgical site. Physician Assistant Hanna Krimms went over his medications and postoperative care.

"By the date of my surgery I felt very well taken care of," Roy remembers. "And, best of

all, the surgery began at 7:30 a.m. and I was home by 11:30 a.m."

Roy's surgery was Sept. 25, and he returned to work on Oct. 15. During his recovery at home, he had two weeks of visits from a home health nurse and a physical therapist.

to Focus on Patient's Recovery

"My recovery was amazingly good. I skipped the crutches and walker and went right to using a cane," Roy adds. "I mowed my lawn 10 days after surgery, although Dr. Brooks wasn't happy to hear that. Unfortunately, I felt so good that I continued to do too much, too soon, and two days after returning to work I couldn't put any weight on my knee."

He was sure he had ruined the surgery. He returned to Dr. Brooks' office for help and Hannah reassured him that it was just a case of overuse. She outlined a program of rest and pain medication and the problem soon resolved.

Today, his recovery is on schedule. He has relatively little pain and says he's doing great. ❖



### What isPartial Knee Replacement

A partial knee replacement is designed for patients with limited knee arthritis. Unlike a total knee replacement involving the removal of all of the knee joint surfaces, a partial knee procedure replaces only one side of the knee joint, preserving the healthy parts of the joint for continued use.

Knee osteoarthritis usually occurs first in the medial (inside) compartment, as this side of the knee bears most of the patient's weight. In knees that are otherwise healthy, this approach allows the outer compartment and all of the ligaments to remain intact.

This conservative procedure is less invasive than traditional knee replacement surgery and is an outpatient procedure. It requires a smaller incision, less bone removal and minimal trauma to the surrounding soft tissue. This means the patient recovers more quickly and with less pain.

For more information about Dr. Brooks and joint replacement, please call the Center for Specialty Care, a NorthBay Affiliate. at (707) 624-7900.

Orthopedic Surgeon Andrew Brooks, M.D., checks the motion in Roy Yarbrough's knee following a partial knee replacement.



### Putting Pain in its Place



#### Ten Ways to Manage Chronic Pain

- ✓ Consistently take medications as your health provider prescribes them.
- ✓ Remain active! Participate in light daily exercise (walking or swimming, etc.)
- ✓ Stretch at least one to two times per day.
- Stop smoking.
- ✓ Maintain nutritious eating habits and a healthy weight.
- ✓ Pain prevention is your goal. For example, take your medications on time and avoid overexertion.
- ✓ Investigate different approaches to controlling pain such as massage, acupuncture, osteopathic manipulation therapy, functional treatment programs, biofeedback, meditation and relaxation therapies.
- ✓ Learn how to manage stress, anxiety and depression.
- ✓ Build one or more support systems (family, friends, church, school, community, counseling, self-help programs, etc.)
- ✓ Think positively and surround yourself with positive people.

### Techniques Unique For Each and Every Patient

Pain can be a formidable foe.

Just ask Cynthia Peña, M.D., who has made it her mission to help people suffering from all kinds of pain, from the nagging and intermittent to the chronic and debilitating.

Her original focus, medically speaking, was anesthesiology, but she realized early on that she craved more interaction with patients.

"I enjoy building a relationship with a patient, getting to know them," she explains. "It gives you the chance to see how much you can teach them and help them gain from it. It's so refreshing to see patients who respond to your treatment."

She's been with the Center for Pain Management for six years, and has embraced the team approach in caring for her patients. The "team" includes physicians, nurse practitioners, a case management nurse, nutritionist, physical therapists and other rehabilitation professionals—to help patients heal the body, mind and spirit.

Some of the tools in their kit include physical therapy and body conditioning, medication, anesthetic injections, counseling, massage, relaxation and biofeedback.

Because everyone's pain is unique and individual, so is their treatment, she says. Her patients run the gamut, from those recovering from surgery, to those dealing with end-of-life issues.

Dr. Peña focuses on interventional pain management, which uses minimally invasive techniques to relieve, reduce or manage pain. Techniques include fluoroscopic imaging, spinal cord stimulation, steroid injections, nerve blocks, and radiofrequency ablation. Pain management also includes treatments such as physical therapy, medication management, and behavior modification.

"Our main role is to teach people how to manage their pain," she says. "The solution is not always the end of pain. It's learning what you can do to manage your flare-ups. You learn what the stressors are in your life, and how you can control them."

Plans call for a Pain Management Essentials program to be offered in 2014. For information, or to schedule an appointment with Dr. Peña, call the Center for Pain Management at (707) 646-4666.

### When it Comes to Men's Health: Knowledge is Power

nostate cancer is a diagnosis that strikes fear in the hearts of men and the women who love them. Recently, many articles have been published about the controversy surrounding prostate cancer screening. A minority of doctors want to completely stop screening for the disease. They feel that they are doing more harm than good by detecting and treating small, non-aggressive cancers.

#### Is this an over-reaction? Is there a more modest approach? What are the facts?

Tin Ngo, M.D., a urologist with the Center for Specialty Care, a NorthBay affiliate in Fairfield, brings a commonsense approach to treating prostate cancer.

"We should screen men for prostate cancer simply because it is better to know the facts," says Dr. Ngo. "After the diagnosis is made, we can always talk about personalizing treatment to balance the benefits and risks in a way that the patient, his family, and his doctors are comfortable with. This is better than putting our heads in the sand until prostate cancer causes symptoms, at which point many cases are too advanced to cure."

Since the discovery of the Prostate Specific Antigen (PSA) to screen for prostate cancer, the death rate from prostate cancer has gone down by 33 percent, he adds. Screening has saved the lives of thousands of men with prostate cancer.

Dr. Ngo offers the following facts about prostate cancer that every man should know:

- Prostate cancer is the most commonly diagnosed cancer and the second leading cause of cancer deaths in men. It is cancer that starts in the prostate gland—a small, walnutsized structure that makes up part of a man's reproductive system. This gland produces the fluid that transports sperm.
- Prostate cancer is a slow-growing disease that mostly affects older men. In fact, more than 60 percent of all prostate cancers are found in men over the age of 65. The disease rarely occurs in men younger than 40 years of age.
- Treatment options for prostate cancer include surgery, radiation, or active surveillance.
- Treatment side effects from surgery and radiation are bothersome but occur infrequently. Only a small percentage of men are severely bothered by the side effects.
- Active surveillance is recommended for patients with small, low-grade cancers that are unlikely to cause harm. Approximately 25 percent of men on active surveillance will require treatment because the cancers eventually grow or become more aggressive. That means 75 percent of these men do not require invasive treatment.

To make an appointment with Dr. Ngo, call the Center for Specialty Care, a NorthBay Affiliate, at (707) 646-4180.

#### **Know the Symptoms of Prostate Cancer**

Most cancers in their early, most treatable stages don't cause any symptoms. Early prostate cancer usually does not cause symptoms. However, if prostate cancer develops and is not treated, it can cause these symptoms:

- A need to urinate frequently, especially at night.
- Difficulty starting urination or holding back urine.
- Inability to urinate.
- Weak or interrupted flow of urine.
- · Painful or burning urination.
- · Difficulty in having an erection.
- · Painful ejaculation.
- · Blood in urine or semen.
- · Pain or stiffness in the lower back, hips, or upper thighs.

Any of these symptoms may be caused by cancer, but more often they are due to enlargement of the prostate, which is not cancer.



### Expert, Team Tackle Diabetes Epidemic...



The NorthBay Center for Diabetes and Endocrinology has undergone myriad changes since Dr. Deborah Murray, M.D., endocrinologist, came on board as the center's medical director in 2007. Her goal: To create a center of excellence.

"Diabetes is a complicated disease and no single provider of care can manage all the needs a patient with diabetes may have," says Dr. Murray. "That's what makes our program unique; we've basically developed a one-stop shop that focuses on the 'whole person' experience."

Solano County's residents deserve that, Dr. Murray notes, as it is home to more adults with diabetes than any other county in California. And, unfortunately, the numbers are on the upswing. According to the Centers for Disease Control, 9.5 percent of Solano County's adult population had the disease in 2009; more recent numbers have topped 10 percent.

When Dr. Murray joined NorthBay Healthcare, the center consisted of just an endocrinologist and a dietitian. During the past six years, she has methodically assembled a team of experts skilled in diabetes management and education. The center has earned several coveted accreditations—from the American Diabetes Association and the American Association of Diabetes Educators—along the way.

The NorthBay team now includes two certified diabetes educators, dietitians, two nurse practitioners specializing in chronic diabetes care and, most recently, a second endocrinologist, Miya Allen, M.D. In addition to the expert care of an endocrinologist for the complex diabetes patient, the program benefits the less complicated by focusing on education and support, to help patients address the varied health issues they may face, and to help them develop the self-care skills so essential to diabetes management.

The program has also expanded to provide inpatient diabetes management services. The center's staff is in constant communication with a patient's primary care physician, creating a level of coordinated care not seen in many healthcare environments.

The staff's mission is to help patients understand how interconnected such things as diet, exercise, good sleep and lowered stress are, as well as how important it is to set lifestyle goals and to regularly monitor blood sugars and medications. All efforts work in combination to help control the disease and improve a patient's quality of life. "My vision was to create a complete diabetes management program," Dr. Murray explains. "We have made steady progress toward building a comprehensive program that can provide the best possible care to Solano County's residents."

For information, contact Dr. Murray or the Center for Diabetes and Endocrinology at (707) 624-7999.

### Prevention is Possible

Diabetes is a growing epidemic among Americans, but there is good news, according to Miya Allen, M.D., NorthBay Center for Diabetes and Endocrinology's newest endocrinologist. "Diabetes can be preventable."

"Our lives are busy and it may not be convenient, but with some effort it is possible to reduce your odds of being diagnosed with diabetes," she says.

"If you have a family history of diabetes, know your risk. You can reduce that risk by adopting a lifestyle that incorporates a balanced diet, healthy eating habits and daily physical activity. These changes will also support your overall well-being in the long run."

Dr. Allen notes that age, race and family history are some factors that increase your risk for acquiring diabetes, but offers the following tips to reduce that risk:

- Remember that, no matter your age or circumstance, you can make healthy changes.
- If you are overweight, aim to lose 7 percent of your body weight (or 14 pounds if you weigh 200 pounds) because even a weight loss of 10 to 15 pounds can make a huge difference.
- Exercise moderately, such as walking 30 minutes a day, five days a week but always consult your physician first to determine what level of activity is safe for you.
- · Eat a balanced diet and control your portions.
- For some people with prediabetes, early intervention can actually return blood glucose levels to the normal range.
- Know the symptoms of diabetes, and see your physician if you experience frequent urination, thirst, extreme fatigue, blurry vision, or slow-healing bruises.

For more information, call Dr. Allen at (707) 624-7999.



IN FOCUS > ANGELA LIM, D.O.

### Touch Makes a BIG Difference OMM Helps in Surprising Arenas

What do breast-feeding babies, asthmatics and people with acid reflux have in common? All can find help at the hands of Angela Lim, D.O., and her specialty practice of Osteopathic Manipulative Medicine, or OMM.

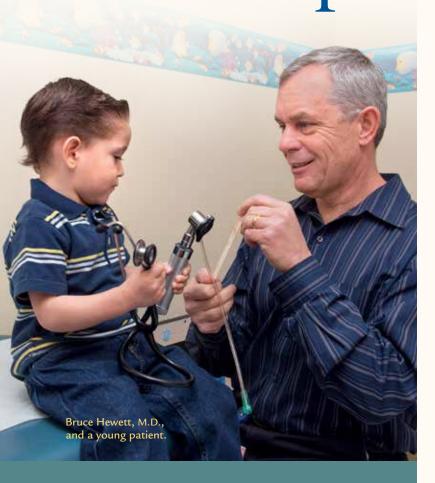
Most people understand that Dr. Lim addresses neck and back pain, but OMM can do that and so much more, she explains. Here's a quick list of some of the ailments she can address with her hands-on adjustments, aimed to coax the body back into alignment so it can function properly:

- ▼ NEWBORNS are often subject to some trauma related to their birth. If nerves at the base of the baby's skull are irritated, the infant can struggle to latch on during breastfeeding. Dr. Lim can apply craniosacral treatment—gentle pressure applied at appropriate points of the skull—to the nerves that control the baby's tongue and mouth, which can greatly improve a baby's swallowing abilities.
- BEING PREGNANT is stressful enough. Lower back pain is common, and your body can retain fluid, which can cause other issues. OMM can help ease the pain, reduce fluid accumulation and in turn promote more restful and restorative sleep.
- ▼ PATIENTS with ACID REFLUX find relief when Dr. Lim performs OMM related to abdominal tissues. In addition, patients with asthma and Chronic Obstructive Pulmonary Disease (COPD) can also find relief, especially if their medications and inhalers aren't working. "Flareups tend to cause tension in the rib cage and abdominal areas," explains Dr. Lim. "OMM can address nerve issues along the central diaphragm and rib cage, freeing up the lungs to help patients relax and breathe better."
- ▼ POST-SURGICAL PATIENTS can benefit from OMM, improving the healing response following surgery. She has especially helped joint replacement patients who are eager to put their new limbs in motion.

Dr. Lim is board-certified in OMM. She recently moved into the Center for Primary Care, a NorthBay Affiliate, at 421 Nut Tree Road in Vacaville. For appointments, call (707) 624-7500.

16 Wellspring Winter 2014 17

## Too Pooped to Parent?



Bruce Hewett, M.D., is anything but boring, yet he can help put your kids to sleep, if you give him a chance.

That's because the Vacaville pediatrician has made it his mission to help children—and frazzled parents alike—get a good night's sleep.

His advice is best shared via video. Several installments are available online at northbay.org/sleepdoc. The videos are geared to help parents of children in specific age ranges.

As a father who learned a lot in dealing with his own children (now fully grown and sleeping just fine, thank you) he draws from real-life challenges. Here is a collection of case studies from Dr. Hewett's files. The patients' names have been changed to protect their privacy.

#### Case No.1

**PROBLEM:** A mom recently asked my advice regarding her 8-month-old daughter, Maggie. She was waking up every two hours to breastfeed from midnight to 7 a.m. Despite mom's attempts to let her "cry it out" for up to 90 minutes, Maggie would not quiet down unless she was picked up and latched onto mom's breast. Within four to five minutes, she would fall asleep without really swallowing much milk.

Maggie was in a crib in her own room, but mom placed a mattress on the floor next to the crib so she could tend to her without waking up the rest of the family. Interestingly, Maggie was taking four naps during the day, up to two hours long. She was being offered solid food in small amounts twice a day, the rest of her meals consisted of nursing at various times during the day. Her bedtime routine started around 9 p.m. and consisted of a 4-ounce bottle of formula that dad gave to her. Mom was exhausted and desperate, her other two children were also young

solution: To fix the demanding night schedule, I explained to mom the best strategy is to increase the amount of calories Maggie was consuming during the day. The baby should be offered solids three times a day in amounts that provide complete satiety. Also, I encouraged her to begin to break the "sleep-suck" association by taking Maggie off the breast when she is drowsy but

and required a substantial amount of

attention during the day.

to begin to break the "sleep-suck" association by taking Maggie off the breast when she is drowsy but still awake, then place her on her back and massage her feet till she falls asleep. Mom needed to adjust the daytime naps to two hours two or three times a day so Maggie would require more sleep at night.

Finally, and most importantly, the hardest advice was asking mom not to pick her up or feed her between midnight and 7a.m. When the baby wakes during this time, I advised mom to replace the breast-feeding with a foot massage and a lullaby; gradually decreasing the amount of time she attended to Maggie during the night. Within two days Maggie was no longer demanding to nurse during the night and only required brief reassuring visits.

#### Case No. 2

**PROBLEM:** Jeremy is a 3-year-old who falls asleep on the couch while his parents watch TV each night. His dad developed the habit of carrying Jeremy to his bedroom and gently laying him into his bed without waking him up. When Jeremy woke up during the night, he immediately left his room and crawled into his parents' bed. Dad finally gave up taking Jeremy back to his room and decided to move his mattress into the boy's room.

**SOLUTION:** There are many possible solutions, depending on the parenting style. It is important that the parents understand that Jeremy needs to get comfortable falling asleep in his own bedroom. The nightly bedtime ritual must be very consistent since children are always more relaxed if they know what's coming next. Making a bedtime poster with pictures demonstrating each step of the routine will reinforce the importance of following the bedtime plan. The ritual must always end with Jeremy being placed in his own bed when he is drowsy but still awake.

The poster should have pictures showing what Jeremy should do if he wakes during the night. If he crawls into his parents' bed, they can refer to the poster that shows a picture of Jeremy returning to his own room. This strategy might need to be combined with a method to confine

combined with a method to confine Jeremy in his own room if he repeatedly defies the bedtime plan.

The parents can reassure their toddler by sitting with him briefly when they take him back to his room. It is important to slowly decrease the amount of time spent with him each night. Some crying is expected and no matter how chaotic the night goes, the wake-up time should stay the same.

Rewards for success work well for toddlers. Although the first few nights can be rough, this method has a high success rate in three to five nights.

#### Case No.3

Tips for a Good Night's Sleep

**PROBLEM:** David is a 12-year-old who is difficult to wake up on school mornings. His weekday routine consists of getting out of bed with difficulty at 6:45 a.m. He is generally tired when he gets home from school, so he takes a one-hour nap. His bedtime is 9:30 p.m. but he isn't drowsy so he watches TV in bed and typically falls asleep around midnight. The parents are worried because the falling asleep time has been trending later and later. The

parents have allowed David to sleep late into the morning on weekends, hoping he would get caught up on his sleep and be more energetic during the upcoming school week, but the problem is getting worse.

**SOLUTION:** David has a common problem referred to as Circadian Rhythm Sleep Disorder, caused by persistently poor sleep habits. Rather than having a consistent daily sleep routine, David's sleep is reduced during the week and extended on the weekends. This disorder can be extremely difficult to treat because it requires a lot of motivation by David and support by his family.

The treatment is focused on restoring a normal bedtime and most importantly a wake-up time that is adhered to seven days a week. Naps must be eliminated. Exercising daily and outside exposure to sunlight is very important and will help ensure David is tired at bedtime.

Parents must limit the TV/video games, especially watching from bed because the wavelength of light from the TV causes the brain to stay awake long after the TV is turned off. David's pattern can be readjusted in seven days if he follows the plan closely.

18 Wellspring Winter 2014 Wellspring Winter 2014



IN FOCUS > ANA CHERRY, M.D.

### Alternatives are Her Specialty

Not every patient wants to walk out of their physician's office with a prescription in hand, says Ana Cherry, M.D., family practitioner at the Center for Primary Care, a NorthBay Affiliate, in Vacaville.

"There are a lot of options besides medicine," she says. "I am willing to help my patients find out what those options may be, if that is their wish. If we can find a way to tune into the body's natural defenses without the side effects that may come from pills or tablets, how great would that be?"

This is especially true for Dr. Cherry's female patients who are struggling with symptoms of menopause, such as depression, wild mood swings or hot flashes. "Some of my menopausal patients have become so fed up, all they want is the Prozac," she laughs, while others still want drug-free choices. The same may be true for some patients who are exploring alternatives to natural birth control or infertility.

To better serve these patients, Dr. Cherry recently underwent intensive training in "menstrual awareness," or natural family planning as prescribed through the Creighton Model's Fertility Care System (CrMS).

With this system, women are taught how to maintain a daily record of their menstrual cycles. The daily charting helps give a clearer picture of the woman's individual cycle, by identifying times when she may be most fertile, or where she may be in her cycle, in terms of estrogen and progesterone levels.

Having a more accurate picture of hormone levels throughout a woman's cycle could spotlight hormone deficiencies to determine if that was the cause of the problem, and if so, when would be the best time in the menstrual cycle to treat the symptoms with either doses of bioequivalent estrogen or progesterone.

"Natural family planning has a bit of a stigma," Dr. Cherry admits, but she says it has been worth learning more about, especially if it can help her patients who follow certain religious practices or just want another way to care for their bodies. And, for Dr. Cherry, "since half the population is involved in family planning, I want to help not only those patients, but the other half of the population they interact with."

For an appointment, call Dr. Cherry at the Center for Primary Care at (707) 624-7500.

### Mastering Menopause

### Trio Says Don't Just Cope, There's Hope

Everybody knows about hot flashes. And then there's the mood swings. *Night sweats...* 

But did you know that burning tongue syndrome can be a menopause-related issue and is highly treatable? So is brain fog, restless leg syndrome and a whole lot more.

Women "going through the change" often don't realize those symptoms are part of the package deal that is menopause. They often just cope and hope their troublesome tribulations will fade away.

But they don't have to put up with that. That's the message of three NorthBay Healthcare physicians, all certified as menopause experts.

Drs. Teresa Whitley, Lauren Weber and Michelle Katzaroff have all earned their certifications as menopause practitioners through the North American Menopause Society and are ready to help menopausal women do more than cope. They are up to date with the latest research on hormonal and non-hormonal treatments.

"We want to find the best treatment for each woman. The tricky part is that one size does not fit all," says Dr. Whitley. "Their problems are different, and the solutions are different."

Dr. Weber agrees. "We can't help them if they don't speak up. We encourage women to come and talk about their concerns. Women going through menopause do not need to suffer in silence. In many cases, we can offer relief."

"There's a lot of misinformation out there about the effects of estrogen," says Dr. Katzaroff. "Many women don't realize that getting help can be as easy as a trip to their local pharmacy."

Some of the lesser-known symptoms of menopause:

- ❖ Hair loss, skin changes
- Sleep disturbances, restless leg syndrome, snoring
- **❖** Anxiety, depression
- **❖** Painful sex
- & Urinary incontinence, frequent urinary tract infections
- **♦** Chest pain/palpitations
- **☆** Brain fog (difficulty concentrating)
- **❖** Crawling skin sensation
- Burning tongue syndrome

And although not a symptom of menopause, these physicians all encourage women experiencing postmenopausal bleeding to come in for a consultation.

Drs. Whitley and Weber have offices at the Center for Women's Health. Call (707) 646-4100 for appointments. Dr. Katzaroff has an office at the Center for Primary Care, a NorthBay Affiliate, in Green Valley. To book an appointment, call (707) 646-3500. Read Dr. Weber's blog on women's health issues at www.northbay.org.



20 Wellspring Winter 2014 Wellspring Winter 2014 21

## Comforting Care

In the late 1980s, as one of the first family physicians ▲ to practice at the newly opened VacaValley Hospital, Terrell Van Aken, M.D., specialized in treating entire families. "From birth to death, I'd be there through their whole life cycle."

But, during the next decade, Dr. VanAken found his interest shifting toward patients at their life's end.

That change led him to help build and develop NorthBay's unique set of programs that care for Solano County's chronically and terminally ill patients.

Dr. VanAken became medical director of NorthBay Hospice & Bereavement in 2002, where the goal is to provide compassionate care in a patient's final months of life. "In my new role, I found I could be much more 'hands-on' with my patients, by conducting home visits and spending more time with them and their families."

The program is unique among others in the area, Dr. Van Aken says. "Unlike national, for-profit hospice organizations, or those that serve patients in large geographic areas, our services are for Solano County residents only, and we're a nonprofit organization. We are, basically, a 'hometown hospice.'"



But, not all patients can measure time in days or just a few months; others have serious and complicated illnesses they must manage for years. In 2007, recognizing this special need led Dr. VanAken and his team to help develop another program: NorthBay Bridges Supportive Care Service of NorthBay Healthcare, which is a palliative care program.

The program aims to more adequately serve patients with serious and chronic illnesses who are in the last years of their lives, but not necessarily within the last months of their lives.

Palliative care is a growing movement, Dr. VanAken says. Some studies have shown that patients in palliative care report better quality of life, are less depressed, and usually spend fewer days in the hospital or have fewer visits to the emergency room.

Dr. Van Aken finds his biggest challenge is in educating people on the difference between hospice and palliative care, because they both start with a similar goal—pain management, symptom control and psychosocial and spiritual support. "But, it's easy to see that the lines can be blurred," he concedes, "especially when people 'Google' palliative care and the first thing that pops up is 'hospice.' Without knowing the subtle differences, it can cause concern." Hospice is actually the conclusion of ongoing palliative care. 🥸

Ask Your Doctor About

### Palliative Care

- ✓ If you have a progressive, advanced illness, such as cancer, Alzheimer's disease, HIV/ AIDS, Lou Gehrig's Disease, congestive heart failure, COPD, multiple sclerosis.
- ✓ If you have multiple diseases with complex and significant symptoms.
- ✓ If you have multiple emergency room visits or hospitalizations within a year.
- ✓ If you or your family are uncertain about goals of care.
- ✓ If you need additional support in end-of-life decision making.

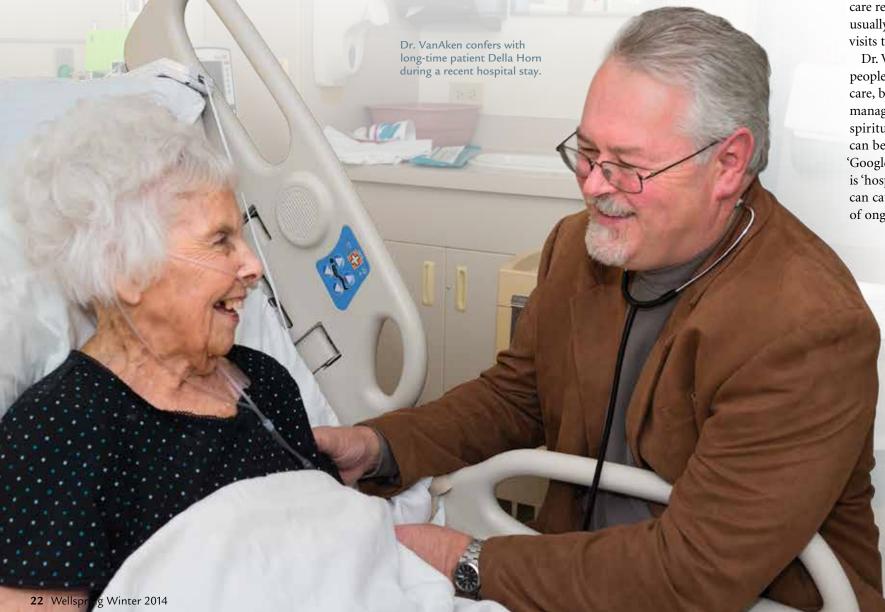
Dr. VanAken finds his biggest challenge is in educating people on the difference between hospice and palliative care, because they both start out with a similar goal—pain management, symptom control and psychosocial and spiritual support.

#### **KEY DIFFERENCES**

#### Between Hospice & Palliative Care

Both hospice and palliative care will provide patients with pain management, symptom control, psychosocial support and spiritual care. But, there are key differences between the two, according to Dr. VanAken.

- ♥ Both hospice and palliative care are available to patients with serious, chronic, and progressive diseases.
- ♥ Hospice is most appropriate for patients with a life expectancy of months, not years. It emphasizes comfort care, rather than a cure.
- ♥ Hospice is most appropriate when you and your family determine that you wish to no longer receive life-prolonging treatment.
- ♥ Patients receiving palliative care may continue to pursue further curative therapies.
- ♥ Palliative care helps patients identify community resources that can assist them with advance care planning, with making decisions about treatment plans, and with managing the physical, emotional and spiritual symptoms of their illness.
- ♥ Hospice services are provided where the patient resides: in their home, or at an assisted living facility, nursing home or hospital.
- ♥ Cancer patients receive palliative care from Symptom Management Service of the NorthBay Cancer Center, which consults with Dr. VanAken.





Advanced trauma services and emergency care for children continue to grow in NorthBay Healthcare's two hospitals. In late October, both emergency departments achieved designation as Emergency Departments Approved for Pediatrics, or EDAP, concluding a yearlong effort to focus on enhanced care for young patients.

Both emergency departments achieved designation as Emergency Departments Approved for Pediatrics, or EDAP, focusing on enhanced care for young patients. At the urging of NorthBay clinical leaders, Solano County Emergency Medical Services officials began setting criteria for EDAP hospitals earlier in 2013. "Studies across the state and nation were showing emergency rooms simply weren't focusing on the difference between adult and pedi-

atric patients," explained Daman Mott, director of Trauma and Emergency Services. "We brought it to the attention of county officials who agreed something should be done."

Meanwhile, NorthBay Medical Center's Level III Trauma Center by far remains the busiest emergency department for the most critically injured. It sees three to four patients for every one who travels to the county's Level II trauma hospital on the eastern edge of Vacaville. NorthBay continues to develop new services that align with the trauma program—including neurosurgery and the NorthBay Center for Neuroscience, said Kathy Richerson, vice president and chief nursing officer. "These programs, built to complement and support a trauma program, are standing strong on their own. Dr. Jeffrey Dembner sustains a busy practice, proving that there was a need here."

An EDAP comprises enhanced staff training, refined pediatric patient safety, policies and protocols, standardized equipment, supplies and medications. "It complements our trauma program and the expansion of advanced medicine we have brought closer to home," Richerson said.

"NorthBay's Fairfield hospital is the only one in northern Solano County with a full-spectrum pediatric program—around-the-clock pediatric hospitalists, in-patient services, labor and delivery, and neonatal intensive care," explained Deborah Sugiyama, president of NorthBay Healthcare Group.

Children's Hospital Oakland and UC Davis Medical Center, where the most seriously injured children continue to receive care, continue to be good partners.

"Even with our higher, more sophisticated designation, and our very busy NorthBay Trauma Center in Fairfield, seriously injured pediatric patients will best be treated at those specialty hospitals because of the complexity and extraordinary care they need," Richerson added.

### High-Tech Tool in War Against Breast Cancer

Thanks to an investment in some high-tech software, Solano Diagnostics Imaging (SDI) in Vacaville is the first entity in Solano County to offer 3-D mammography, a tool that is especially helpful in diagnosing or ruling out cancer in women with dense breasts.

In April 2013, California passed a law requiring patients with "Heterogeneously Dense Breasts" or "Extremely Dense Breasts" to be notified of their density score and possible risk for breast cancer. It is estimated that nearly 50 percent of all women who receive mammograms will soon learn they have dense breasts.

Breasts are composed of fatty tissue, milk lobules, milk ducts and

connective tissue. The more milk ducts, milk lobules and connective tissue, the denser the breast.

"If a woman knows she has dense breasts, she can elect to come to SDI in Vacaville for a 3-D mammogram instead of relying on a standard mammogram," explains Adrian Riggs, director. "If she gets a standard mammogram, there's a good chance her doctor will refer her to have images taken using the 3-D technology. She might as well go right for the best technology first."

Rather than taking two images, as is done in standard mammography, breast tomosynthesis takes multiple low-dose images of the breast and synthesizes them into a Breast tomosynthesis takes multiple low-dose images of the breast and synthesizes them into a three-dimensional image.

three-dimensional image. This allows radiologists to examine the breast in very thin layers.

The digital image lets the radiologist rotate the tissue in front of or behind an abnormality, making detection easier. In addition, overlapping tissue that may appear abnormal on a standard mammogram can be determined to be benign in a 3-D image.

On a mammogram, denser breast tissue appears white, while fatty tissue is gray, explains Dr. Jason Marengo, an oncoplastic surgeon with the North-Bay Specialty Practice. "Typically when a cancer is found on a mammogram, it is also white. With very dense breasts, it can be difficult to clearly see cancer. It's like trying to find a white snow-flake against a white background."

For the patient, getting a 3-D mammogram translates into fewer "call backs" for additional mammographic views, fewer unnecessary biopsies, detection of concerning masses that may have been obscured by surrounding breast tissue and fewer sleepless nights, says Dr. Marengo.

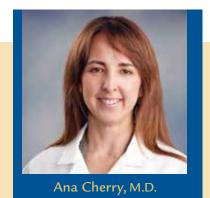
A patient doesn't have to be a NorthBay Healthcare patient to get a 3-D screening at SDI in Vacaville, notes Riggs. "Just ask your doctor for a referral."



24 Wellspring Winter 2014 25

#### NORTHBAY HEALTHCARE NEWS

### Welcome New Physicians



Ana Cherry, M.D., is a family practice physician located at the Center for Primary Care in Vacaville. Dr. Cherry earned her medical degree from the University of Southern California. She completed her internship and residency in family medicine at Harbor-UCLA Medical Center in Torrance. She is board-certified in family practice.



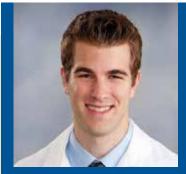
Archana Goyal, M.D., M.P.H

Archana Goyal, M.D., M.P.H., practices internal medicine at the Center for Primary Care in Green Valley .Dr. Goyal earned her medical degree from the University of Southern California. She completed her internship and residency in internal medicine at UCLA-Olive View Medical Center in Sylmar. She also completed a master's degree in Public Health and International Medicine at Harvard University in Boston. In addition to English, Dr. Goyal is fluent in Hindi and Spanish.



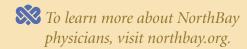
Tin C. Ngo, M.D.

Tin C. Ngo, M.D., is a urologist with NorthBay Specialty Care in Fairfield. Dr. Ngo earned his medical degree from the Wake Forest University School of Medicine in Winston-Salem, N.C. He completed an internship and residency in general surgery and a residency in urology at Stanford University School of Medicine. He also completed a fellowship in urologic oncology at the MD Anderson Cancer Center in Houston, Texas.



Eric Niemeyer, PsyD

Eric Niemeyer, PsyD, is a psychologist at the Center for Primary Care in Vacaville. Dr. Niemeyer earned his doctorate in clinical psychology at Argosy University, San Francisco Bay Area Campus. He holds a bachelor's degree in psychology from UC Davis. Dr. Niemeyer works with patients of all ages and offers individual, group and family therapy, as well as tests and assessments.





Sandra Skates, D.O.

Sandra Skates, D.O., practices osteopathic medicine at the Center for Primary Care in Vacaville. Dr. Skates earned her doctor of osteopathy degree at the College of Osteopathic Medicine of the Pacific in Pomona. She completed her internship at Tucson General Hospital in Tucson, Ariz., and a residency in family practice at Pacific Hospital of Long Beach. She is board-certified in family practice and neuromuscular medicine/osteopathic manipulative medicine. Prior to joining NorthBay, Dr. Skates was in private practice in Vacaville for several years.



Lauren Weber, D.O.

Lauren Weber, D.O., a family practice physician at the Center for Women's Health in Fairfield, earned her doctor of osteopathy degree at Edward Via Virginia College of Osteopathic Medicine in Blacksburg, Va. She completed an internship and residency in emergency medicine at St. Barnabas Hospital in Bronx, N.Y., and a family medicine residency at Broward General Medical Center in Fort Lauderdale, Fla. She also completed a Women's Health Fellowship at the Cleveland Clinic in Ohio. She is board-certified in family medicine and osteopathic medicine.

### Second Cath Lab Enables New Procedures

NorthBay Medical Center is now home to two cardiac catheterization labs, which does a lot more than just double cardiologists' ability to schedule and treat patients.

It means new procedures, new equipment, additional staff and improved efficiencies, says Kim Williamson R.N., director of Cardiology Services.

After a roughly \$5 million investment, NorthBay Medical Center opened its second cardiac catheterization lab in August 2013. The new lab is specifically focused on cardiac procedures, while the older lab handles cardiac as well as vascular procedures.

Having two labs means one can host routine procedures, such as diagnostic

heart catheterizations and the placement of stents in arteries while the other lab can be scheduled for longer cases, such as vascular procedures and cardiac implants, which can take up to several hours.

"It gives us much more flexibility, when an emergency comes in the door," says Williamson.

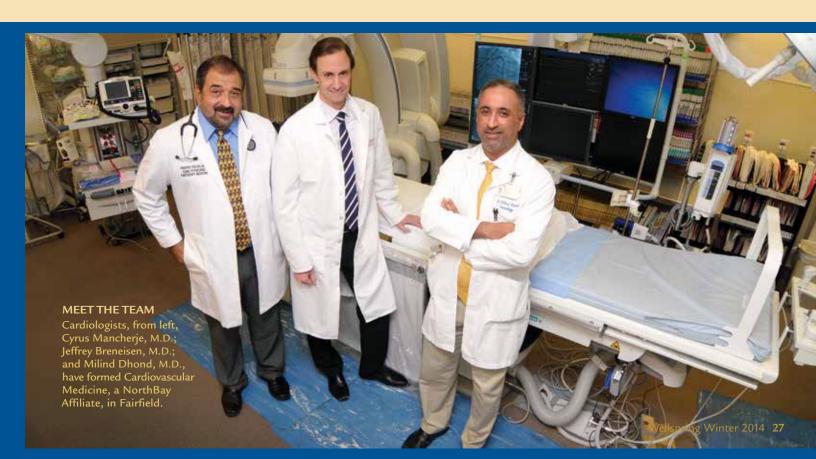
With this new lab, NorthBay physicians are now "stenting" or opening chronic coronary artery occlusions. Chronic Total Occulsions or "CTO"s occurs when an artery has been blocked with plaque longer than three months.

"It's tougher to work through the blockage," explains Williamson, "and requires a more complex treatment."

Another new tool is the Impella catheter, which has a tiny pump at one end. In a procedure performed by the physician, the catheter is guided to the heart from the groin. It pulls up to 4 liters of blood per minute from the left ventricle and delivers it into the patient's ascending aorta for circulation throughout the body.

It eases the burden on the heart while doctors address significant issues such as heart failure, a massive heart attack or cardiogenic shock.

And, as of Jan. 1, physicians are using the lab to place pacemakers and implantable cardioverter defibrillators, instead of having to schedule time in a surgery suite. 💸



#### Wine & Food Jubilee Moves to Fairfield

The 27th Annual Solano Wine & Food Jubilee is moving! After several years at the Nut Tree Complex in Vacaville, this year's gala will be held at the newly opened Specialty Event Center in Fairfield, on April 25.

The facility, located at 300 Chadbourne Road, is large enough to easily accom-

WINE & FOOD 2,000-plus ticket-

modate the Jubilee's holders, the more than 120 wine, brew and food vendors, an array of silent auction tables, a

special VIP area and, for those fans of The Time Bandits, an expanded dance floor.

The Jubilee Raffle will feature a top prize of a choice between two new cars a Nissan Altima and a Buick Encore courtesy of Vacaville Buick/Dodge/Nissan.

The Solano Wine & Food Jubilee, organized by the NorthBay Healthcare Foundation to support the programs of NorthBay Hospice & Bereavement, has become the biggest and most popular fund-raising event in Solano County.

Funds raised enable NorthBay to provide physical, emotional and spiritual care for the terminally ill, regardless of their ability to pay. With this support, these patients and their families are able to live their final days as peacefully and comfortably as possible.

Presenting sponsors for 2014 are Theatre DeVille, Gold's Gym, Vacaville Buick/Dodge/Nissan, Freeman Family & Cosmetic Dentistry and Al and Patt Shaw.

The Solano Wine & Food Jubilee, a black tie-optional affair (denim discouraged), begins at 6:30 p.m. Tickets, for those ages 21 and over, must be purchased in advance and are \$75 before March 17 and \$100 afterwards.

For tickets, call (707) 646-3133, or visit www.wineandfoodjubilee.org. 🖇



### Grand Opening in Green Valley

NorthBay Healthcare's newest medical office building opens this month on the Green Valley campus at 4520 Business Center Drive in Fairfield. The 37,141-square-foot, two-story structure is connected by a walkway to the Green Valley Administration Building at 4500 Business Center Drive.

NorthBay Health at Home and Hospice, Bereavement, and Gastroenterology will be located on the ground floor, while the Center for Primary Care (CPC), a NorthBay Affiliate, will move into the second floor.

The CPC will include physicians Gilbert Chang, M.D.; Michelle Katzaroff, D.O.; Archana Goyal, M.D.; Ehsan Ghods, D.O.; and Alina Hongsakaphadana, M.D., with room for three more doctors. Gastroenterology, a NorthBay Affiliate, includes Mounzer Al Samman, M.D.; and Tawhid Gazi, M.D.

The building is owned by NexCore Group, with construction by DPR Construction. It is the second of four buildings slated for the medical campus.

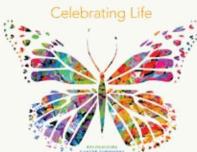
#### Cancer Survivors Day is June 1

Surviving cancer is certainly something to celebrate and survivors and their families around the nation will do

NorthBay Cancer Center is proud to sponsor Solano County's 18th annual Cancer Survivors Day "Celebration of Life," Sunday, June 1, at The Clubhouse Rancho Solano in Fairfield. Pre-registration is

just that on the first Sunday in June.

required. Watch for details...



### Community Health Education Classes

The Art of Breastfeeding · Learn the "how- to's" of breastfeeding. This class addresses the health benefits for mom and baby, the role of the father, the working mom and more. Cost: \$15. Call (707) 646-4277.

Brothers & Sisters To Be · Prepare children ages 3-9 for the arrival of a new baby. Cost: \$10 per family. Call (707) 646-4277.

C-Section Preparation • Individual counseling available to women delivering at NorthBay Medical Center who may require a C-section. Cost: Free. Call (707) 646-4277.

Labor of Love • A six-week prepared childbirth class for moms and dads or coaches; register in fourth month of pregnancy or earlier. Cost: \$75. Call (707) 646-4277.

Labor of Love in Review · One-session childbirth refresher course for moms and labor partners. Pre-requisite: previous attendance in a prepared childbirth education course. Cost: \$20. Call (707) 646-4277.

**Labor of Love — Weekend Class** • A prepared childbirth class for moms and dads or coaches. Held Friday evenings and Saturdays. Cost: \$75. Call (707) 646-4277.

Prenatal Care • Expectant mothers learn important information about pregnancy. Topics include nutrition, exercise, fetal growth and development, "pregnancy do's and don'ts," and much more. It is recommended this class be taken as early in pregnancy as possible. Cost: \$10. Call (707) 646-4277.

**Newborn Care** • Expectant parents are instructed on daily care, nutrition, safety and development for the first few months of life. One-session course. Cost: \$15. Call (707) 646-4277.

Maternity Orientation and Tour · A tour of the NorthBay Medical Center's maternity unit. Information about hospital registration, birth certificates, and available birthing options provided. Cost: Free. Call (707) 646-4277.

Siblings' Birthing Preparation • Parents who are considering having children present during delivery can have one-on-one counseling. Cost: Free. Call (707) 646-4277.

**Breastfeeding Support Group** • A postpartum support group for moms meets weekly in Fairfield. Cost: Free. Call (707) 646-4166.

**Healthier Living:** • A six-week class offered several times during the year, taught in conjunction with Solano Public Health and the Area agency on Aging. Classes are free but space is limited. Call (707) 646-5469 for information or to register or visit NorthBay.org/healthierliving.

Caregivers' Support Group • For anyone involved in caring for a loved one with Alzheimer's disease or a dementia-related illness. Meets second Wednesday of month, 7 to 9 p.m. at the Adult Day Center. Cost: Free. Call (707) 624-7971.

**Grief and Bereavement Support Groups • Four** adult support groups meet on a weekly basis in Fairfield, Cost: Free, Call (707) 646-3517.

SAND (Support After Neonatal Death)

Friendship and understanding for parents experiencing grief for the loss of a pregnancy or infant. Cost: Free. Call (707) 646-5433.

#### Teen & Children's Bereavement Support

**Groups** • A teen support group meets every other Monday 6:30 to 8 p.m. Children's support groups are scheduled, as needed. Cost: Free. Call: (707) 646-3517.

Adult Grief Support Class, Journey Through Grief • Class meets weekly for eight sessions. Limited to 12 people per group. Participants follow a step-by-step approach using a book and journal. Cost: Free. For schedule and to register, call (707) 646-3517.

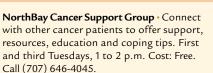
Grief & Bereavement Support Group for Adults Who Have Lost a Loved One to Suicide Group Meets every other Monday from 6 to 7:30 p.m. Cost: Free. Call (707) 646-3517.

New Beginnings Support Group • For stroke survivors, caregivers and family members. Third Tuesday of the month, 10 to 11:30 a.m. in the NorthBay Medical Center Annex, Fairfield. Cost: Free. Call: (707) 432-5710h.

Journey to Health • A seven-week class offered several times during the year, taught by physicians, registered dietitians, a physical therapist, a psychologist and nurses. Cost is \$60 per person, or \$100 for two family members. Teens welcome to attend with a responsible adult. Call (707) 646-5489.

Nutrition Class for Cancer Patients • Join NorthBay Dietitian Rhonda Buckles, R.D., to learn what to eat before, during and after cancer treatment and how to eat to enhance vour response to treatment. Cost: Free, Call (707) 646-4014.





Look Good, Feel Better • A program to help women currently undergoing cancer treatment cope with appearance-related side effects of treatment. To register, call the American Cancer Society, (800) 227-2345. Cost: Free.

Laugh Out Loud · A class on urinary incontinence. Do you control your bladder or does your bladder control you? Learn the latest treatment options, including pelvic floor exercises. Cost: Free. For class dates and to reserve your seat, please call: (707) 646-4150.

Pulmonary Education Series · A three-session course that meets on Wednesdays from 10 a.m. to noon at NorthBay Medical Center in Fairfield. A new course begins each month. Cost: Free. Call (707) 646-5072.

### You'll love our passion for compassion.

At NorthBay Healthcare, we believe that healthcare should still care. That's why we've created an environment that cultivates your commitment to compassionate care and allows

We offer opportunities in:

it—and you—to flourish.

- Allied Health
- Clerical
- Management
- Nursing
- Service

For more information about us or our employment opportunities in Fairfield and Vacaville, visit www.northbayjobs.org. EOE

You'll love it here.





c/o NorthBay Healthcare Group 1200 B. Gale Wilson Boulevard Fairfield, CA 94533-3587 Telephone (707) 646-3336 www.NorthBay.org

