Live well this autumn

02 United patient conquers obesity with weight-loss surgery

04 Help and hope for SAD season

14 Helping kids cope with an adult’s hospital stay

15 Know your Asthma Action Plan
Last year, Tim Smith took a big step for the sake of his health: He decided to undergo weight-loss surgery.

Now, nine months after surgery at United Hospital, he’s about 140 pounds lighter. Smith no longer needs insulin for his diabetes or any of his 10 medicines. “Absolutely, I would do the surgery again,” he said. “I’m happy with these results.”

Smith’s journey to surgery started 15 years ago when his weight got out of control and he developed type 2 diabetes. “Every day I would wake up and take insulin and 10 pills to deal with my medical problems. I hated that,” he said. “I finally decided I didn’t want to do any more damage to my health.”

Rupp, who is Smith’s bariatric surgeon, recommended the Roux-en-Y gastric bypass surgery. In late December 2011, Smith had the surgery to divide his stomach and create a small stomach pouch. This is a permanent change, reducing how much food the stomach holds and limiting the absorption of calories.

The result is lower blood sugar. “About 80 percent of our patients who are diabetic no longer need insulin three to six months after their surgery,” Rupp noted.

Weight loss also reduces or ends many obesity-related health problems, including sleep apnea, hypertension, heartburn, degenerative arthritis and limited mobility. “Obesity affects 60 diseases and conditions,” Rupp explained.

Learning healthy habits
As he recovered at United, Smith prepared for a new phase of his life. He learned about the importance of eating slowly, including taking small bites and chewing food to the consistency of applesauce. “If you overeat, it’s uncomfortable. You learn that quickly,” he said.

His weight dropped rapidly in the first few months. And after several weeks, he no longer needed insulin.

Smith often had questions for Jody Nicholson, bariatric surgery coordinator at St. Paul Surgeons. “Jody was always right there by phone when I needed help,” he said. “She and Dr. Rupp made me feel comfortable. I definitely was not just another number to them.”

**Weight-loss surgery** is best treatment for type 2 diabetes

Two studies in spring 2012 confirmed that weight-loss surgery is the most effective treatment for severely obese people with type 2 diabetes. One study showed that 85 percent of patients with a body mass index (BMI) of more than 35 no longer needed insulin after bariatric surgery. Not one patient undergoing standard treatment could discontinue insulin.

The American Diabetes Association and the International Diabetes Federation recommend bariatric surgery for adults with type 2 diabetes and a BMI of 35 or more, if their diabetes has been hard to control with traditional treatment.
LIFELONG BENEFITS
Smith described himself as a guy who loved steaks and other red meat, which he hasn’t eaten since the surgery. “I’m not missing it,” he said. “My philosophy is, don’t sweat the little things.” At the two-year point after surgery, he will be able to eat one to two cups of food at a meal.

He exercises regularly on a stationary bike and enjoys having more energy and mobility. Smith is happy with his decision to have weight-loss surgery. He offered this advice to anyone who is considering it: “You owe it to yourself to look into this.”

ATTEND A FREE MEETING ON WEIGHT-LOSS SURGERY
Sign up for a free information session to learn more about weight-loss surgery at United Hospital. Classes meet several times a month and are led by bariatric surgeons. Register by calling St. Paul Surgeons at 651-227-6351.

You may qualify for surgery if you are 100 pounds or more overweight or if your BMI is 40 or higher.

United’s program is designated as a Bariatric Surgery Center of Excellence by the American Society for Metabolic and Bariatric Surgery. Visit unitedhospital.com for more information.

Tim Smith is happy with the results of his weight-loss surgery at United Hospital. He credits Jody Nicholson of St. Paul Surgeons for helping him when he had questions.
Do you find yourself growing depressed every year during the fall and winter when there is less daylight? You could be among the estimated one in six Americans who experiences seasonal affective disorder (SAD).

SAD is depression that occurs at a specific time of the year. Experts believe it’s related to hormone regulation, body temperature and seasonal variations in sunlight. SAD is more common in northern latitudes.

Daniel Thomason, PsyD, LP, a clinical psychologist with Aspen Medical Group – Inver Grove Heights, recommends that people with SAD symptoms see their primary care physicians. Your doctor can rule out things like vitamin D deficiency, high blood sugar or thyroid problems. If SAD is the main issue, light therapy may be prescribed.

Thomason said light therapy usually starts working in about four days and there are few side effects. If you try it and your symptoms don’t improve, your doctor may suggest prescription antidepressants or psychotherapy.

“It’s uncommon to find that SAD is the only thing a patient is dealing with,” Thomason said. “Many times, they have a chronic condition, such as diabetes or substance dependence. If you can barely struggle through the day and you’re not participating in any social activities, it’s time to consider medicine.”

Thomason works with SAD patients on things like outdoor exercise and reducing stress. “I try to sort it out for them. How is SAD affecting them and how are they functioning?” he said.

Light Therapy: A Bright Solution to SAD

Exposure to bright light, called phototherapy, is an effective way to treat seasonal affective disorder (SAD). A doctor’s prescription will tell you what kind of light to get and how many minutes a day to use it. Health insurance often covers the cost of light therapy, unless you already take an antidepressant.

Two styles of lights and replacement bulbs are available at the Allina Home Oxygen & Medical Equipment (HOME) showroom, 1055 Westgate Drive in St. Paul. The light box on a stand rents for $3.60 per day. A smaller, pyramid-shaped box, SunLight Jr., is available for $227, which is 30 percent less than the regular retail price.

“We had one patient who used light therapy for four years and said it was the best thing ever,” said Tina Rasmussen, customer service representative at the Westgate HOME showroom. “We are seeing growing demand for phototherapy products.”

For Information or to order light therapy lights, visit homestore.allina.com. Or call 651-628-4800 to speak with a HOME representative.

Check These SAD Symptoms

Do you experience some or all of these SAD symptoms at about the same time every year?

- appetite changes, often with a craving for sweet or starchy foods
- weight gain
- low energy
- low sex drive
- fatigue, sleepiness at work or in school
- trouble sleeping or a tendency to oversleep
- poor concentration
- irritability and anxiety
- avoiding social activities
- drinking or other self-medication.

Need More Daylight?

Strategies, Treatment Options for SAD Season
Health care is changing. These days, there’s an increased emphasis on preventing illness and improving community health while still providing care for individuals who are sick or injured. Allina Health is a part of this change and is committed to creating healthy communities. And this goal takes teamwork.

“Preventing illness and improving the health of the communities we serve has always been core to the Allina Health mission,” said Ellie Zuehlke, director of Community Benefit & Engagement. “Through partnerships and collaborations, Allina Health is working to improve the health not only of patients but also the broader community.”

MEETING HEALTH NEEDS
In 2011, Allina Health invested in a variety of programs and services aimed at meeting community health needs. One example is the partnership between Allina Health and Free Bikes 4 Kidz, a local not-for-profit organization. This collaboration provides gently used bikes, new helmets and concussion prevention education to underserved children throughout the Allina Health service area.

Allina Health partnered with more than 100 not-for-profit organizations to identify children in need of bikes. Free Bikes 4 Kidz helped with the collection, refurbishing and distribution of the bikes. This effort engaged more than 1,000 volunteers and provided more than 4,000 children throughout Minnesota and western Wisconsin with bikes and helmets, as well as information on how to prevent concussions. The program was such a success that Allina Health is doing it again this year.

This is just one example of how Allina Health is partnering with communities. “We’re engaging with our communities like never before,” Zuehlke said. “These partnerships are helping pave the way to healthier communities.”

HAVE A BIKE TO DONATE?
Look for information about our Free Bikes 4 Kidz event Saturday, Oct. 13, by visiting allinahealth.org/community.

check out our 2011 annual report!
You can read about additional community work in Allina Health in the Community, our 2011 Annual Report. Visit allinahealth.org/community.
This year, an estimated 226,160 new cases of lung cancer will be diagnosed, representing almost 14 percent of all cancer diagnoses. According to the American Lung Association, active smoking contributes to 90 percent of lung cancer cases. But other causes exist as well. Did you know that about 10 percent of lung cancer cases are attributed to radon, a colorless, odorless gas that can seep into basements?

When it comes to lung cancer, Allina Health works with patients and a team of experts. Pulmonologists evaluate a patient’s lungs and breathing. Genetic counselors talk with patients about their family risk for cancer. Pathologists study tissue samples. Cancer nurse coordinators help patients get appointments and find their way to the right doctors for the right reasons. We have the resources and expertise to help you every step of the way.

**SYMPTOMS**
Adults may dismiss some mild symptoms of lung cancer as no big deal, said Jill Wines, RN, of Mercy and Unity hospitals at Allina Health. But she said people should pay attention to their bodies and be aware of their risks, even if they never smoked or if they quit many years ago.

“Symptoms aren’t always obvious,” Wines said. “It may just be a cough, a funny feeling or a fever. It could be shortness of breath or chest pain when you laugh or cough. There could be hoarseness or fatigue. Other symptoms include coughing up blood or unexpected weight loss in a short time.”

**THE DIAGNOSIS**
If any of these symptoms are present, see your primary care provider right away.

**LITTLE-KNOWN LUNG CANCER RISK FACTORS**
While the majority of lung cancers are related to smoking, about 10 percent are related to environmental exposures, according to the American Lung Association. Here are some lesser-known lung cancer risk factors:

- **RADON EXPOSURE**: This is the second-leading cause of lung cancer after smoking. The U.S. Environmental Protection Agency estimates that radon exposure accounts for about 20,000 lung cancer deaths per year in the U.S.
- **THIRDHAND SMOKE**: While secondhand smoke refers to fumes from another person’s cigarette, thirdhand smoke comes from the cancer-causing chemicals lingering in furniture, clothing, carpets, bedding, upholstery and even pet fur, according to the American Cancer Society. Both secondhand and thirdhand smoke are considered to be cancer-causing agents.
- **POOR AIR QUALITY**: Air pollution can be present in big cities and small communities alike. According to the National Institute of Environmental Health Sciences, air pollution has been linked to an increased risk for lung cancer. Visit [airnow.gov](http://airnow.gov) to check the air quality in your city.
away, Wines said. You will likely be referred to a specialist. Allina Health pulmonology specialists use X-rays and computed tomography (CT) scans to see what’s happening inside the lungs. If tests detect a tumor, it is measured and staged. Staging tells doctors how fast a tumor is growing or if the cancer has spread beyond the lungs. Stage 1 is the least aggressive. Stage 4 is the most serious. The earlier the stage of the tumor, the more likely it can be treated.

**TREATMENT OPTIONS**

“If lung cancer is diagnosed, no matter the cause, treatments are the same,” said Lee M. Kamman, MD, chairman of the Lung Cancer Program at Allina Health. He explained that treatment includes a mix of chemotherapy, radiation and surgery, depending on the stage of the cancer. For example, surgeons may need to remove only a portion of the lung and deliver chemotherapy to kill any surrounding cancer cells. When surgery is not an option, chemotherapy may be used in combination with radiation. Allina Health patients have access to healing coaches, who provide information about complementary therapies.

**BEYOND SMOKING**

Although smoking remains the leading cause of lung cancer, as many as 24,000 Americans who have it have never smoked (see sidebar on Page 6). Genetics and the environment may explain which nonsmokers are at risk of developing lung cancer, Kamman said.

“Having a first-degree relative with lung cancer automatically puts you at higher risk,” Kamman said. “Being exposed to secondhand smoke, radon, asbestos or diesel fumes also increases the risk for lung cancer in nonsmokers.”

Radon tests can evaluate a home basement. If radon levels are too high, a radon abatement service can be hired. Reducing exposure to secondhand smoke, as well as asbestos and diesel exposure, can also reduce your risk.

“We need to reduce the stigma around lung cancer,” Kamman said. “Not all lung cancers are associated with behavior. We need to develop better screening tools to help those at risk.”

Radon home testing

Levels of this invisible gas increase during the winter months. Radon detectors are not expensive and can be found at local hardware stores. To learn more, visit the Environmental Protection Agency website at [epa.gov/radon](http://epa.gov/radon).

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**NEW LUNG NODULE CLINIC OFFERS PEACE OF MIND**

Patients at the Lung Nodule Clinic benefit from the combined expertise of a team of specialists and a coordinated approach that ensures streamlined care.

Lung nodules are small spots on the lung that can be seen on an X-ray or CT scan. They are often discovered when a patient is being evaluated for an unrelated issue. Most are benign (not cancer), but all deserve careful attention in order to rule out more serious conditions.

The Lung Program at the Virginia Piper Cancer Institute® has developed a Lung Nodule Clinic, which includes a team of experts — lung specialists, lung surgeons and cancer specialists — who use evidence-based guidelines to evaluate and monitor patients.

Call today

To contact us with questions or to make an appointment, call 612-863-7583 (Abbott Northwestern) or 763-236-5600 (Unity).
With early detection and advancements in treatments, more people than ever are living today as cancer survivors. This good news is accompanied by the challenges of regaining function and improving quality of life following a cancer diagnosis and treatment.

Sister Kenny® Rehabilitation Institute is the first rehabilitation center in Minnesota to receive STAR (Survivorship Training and Rehabilitation) Program certification. The program provides an evidence-based model of cancer rehab care.

Patients with cancer may develop medical concerns that include lymphedema, fatigue, skin problems, musculoskeletal pain, joint stiffness, weakness, cognitive problems, balance problems, and issues with communication, swallowing or eating.

“Our patients have different needs from other traditional rehabilitation patients, which requires a different rehabilitation skill set to most effectively care for them,” said Nancy Hutchison, MD, medical director of the Sister Kenny Cancer Rehabilitation and Lymphedema Program.

Marlene Miller, a cancer survivor and patient in the STAR Program, agreed. “As a result of my breast cancer treatment,” she said, “I had lymphedema and other side effects. The Sister Kenny STAR Program has helped me with that, as well as with balance issues and side effects of medicine, including joint aches and fatigue. I now have a quality of life I would not have had without the Sister Kenny STAR Program.”

For more information on cancer rehabilitation services at Allina Health, please visit allinahealth.org/cancerrehab.

For more information about the STAR Program, visit allinahealth.org/cancerrehab or call toll free 1-866-223-0149.
In August 2011, Melanie Hartman was told she had neuroendocrine carcinoma, a rare form of cancer with no known cure. Just 40 years old at the time, Hartman said her world stopped upon hearing the diagnosis. “When you are told you have cancer, you don’t even know what questions to ask,” she said. “But the longer you live with the diagnosis, the more information you want.”

Since her diagnosis, Hartman has learned as much as she can about her cancer and treatment options. Fortunately, she is not doing it alone. Her cancer nurse coordinator serves as a constant source of information, support and strength.

“I tell patients their cancer diagnosis is like being thrown on a roller coaster without a seat belt. I am their seat belt. I am there to keep them in the car, on the track and moving forward,” said Jill May, RN, Hartman’s nurse coordinator.

**PROVIDING SUPPORT**
In addition to providing shoulders to lean on, cancer nurse coordinators help inform patients about their options, schedule appointments, provide access to resources within the community and coordinate patients’ care.

“I’m very fortunate in terms of all the care I have received through this process,” Hartman said. “When you go through this, it’s nice to know that someone has your back. Jill will call me out of the blue just to check in and see how I am doing.”

**IN THE RIGHT PLACE**
The first time the two met, May was wearing the zebra-patterned awareness ribbon that represents Hartman’s rare form of cancer. Hartman took that as a sign that she was on the right track.

“When I saw her, I knew I was in the right place,” Hartman said. “I have never felt like a number. In my world, I’m not a number. I am a mother, a wife and a businessperson. It’s nice to be validated.”

May said helping people like Hartman navigate their treatment is what she was meant to do. “It can be overwhelming, but every day is a day of survivorship. I want my patients to understand that I am here for them.”
After being discharged, the last thing any patient wants is to end up back in the hospital. One important way Allina Health is helping patients avoid readmission is by providing them with an After Visit Summary.

Starting in October 2012, patients at Allina Health hospitals will receive one user-friendly document during discharge. It contains a seven-day plan and gives patients easy-to-understand information about their medical needs. It covers why they were in the hospital and explains how to care for themselves at home.

“It’s a fundamental change from having patient instruction being totally the responsibility of nurses to a shared responsibility among doctors, nurses and other health care providers,” said Steven Bergeson, MD, Allina Health quality medical director.

GIVING PATIENTS WHAT THEY NEED
Studies show that preventable readmissions add a high cost to the U.S. health care system. One way to help patients, their families and hospitals reduce costs is by providing the right tools to manage the recovery after a hospital stay with clear discharge instructions. Allina Health designed the After Visit Summary with input from the Patient Advisory Council. Patients requested this simplified information to help them take better care of themselves after they leave the hospital.

“We took a look at what was being given to our patients as they left the hospital. Then we talked with patients and health care providers,” said Karen Tomes, RN, Allina Health hospital care management director. “We realized we could do better.”

PERSONALIZING CARE
The summaries are color-coded and organized into easy-to-read sections. They include everything from the types of foods and beverages patients should eat and drink to clear guidelines on medicine and exercise. Also, the After Visit Summary provides signs and symptoms that indicate a patient’s condition is worsening and whom to call.

“Instead of this information being a standard template based on the patient’s diagnosis, doctors can tailor the instructions to the unique needs of each patient,” Bergeson said. “They can choose exactly what is right for that patient.”

In addition to informing patients about their care, the After Visit Summary provides important details about a patient’s hospital stay to the doctors who will provide follow-up care. The discharging doctor must double-check the summary to make sure it is correct.

“The new summary will empower patients to follow through on their treatment plans,” Tomes said. “This is their passport to return to their lives.”

After a stay in the hospital, you can access your After Visit Summary online through MyChart. To get started, sign up for MyChart at allinahealth.org/mychart.
VACCINES: Adults need them, too

If you think immunizations are for infants and children only, think again. Adults also need to protect themselves from vaccine-preventable diseases. Immunity can fade over time, and as people age, they may be at greater risk for new and different diseases.

MAINTAINING IMMUNITY
“Part of my job is to keep patients informed and remind them about the importance of vaccinations,” said Sumner McAllister, MD. McAllister practices family medicine at Quello Clinic Savage, part of Allina Health. He said the specific vaccines adults need depend on age, health, lifestyle, travel plans and the immunizations they’ve already received. When you get your flu shot this year, ask your doctor which vaccines are right for you.

“Vaccines might hurt for a second, but the benefits last a long time,” McAllister said. “One of the most effective ways to stay healthy is through vaccinations. The easiest illness to treat is the one you never get.”

### AGE VACCINATIONS

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<td>PCV13*</td>
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<td>HIB*</td>
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<td>15 months</td>
<td>MMR*</td>
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<tr>
<td>18 months</td>
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<td>Hep A</td>
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**Recommended every year for everyone**

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<tr>
<td>Adult 65 years and older</td>
<td>PPSV23</td>
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</table>

* Vaccines included in the Minnesota School Immunization Law.

Consider for high-risk patients at any age: Hep B, Hep A, PPSV23, MCV4. High-risk and immigrant populations: For more information, go to cdc.gov/vaccines or health.state.mn.us/immunize.

### VACCINES AND BRANDS

- **DTaP, Hep B, IPV** diphtheria, tetanus and acellular pertussis + hepatitis B + inactivated poliovirus vaccine (Pediarix®)
- **PCV13** pneumococcal 13-valent conjugate vaccine (Prevnar 13®)
- **HIB** haemophilus influenza type b conjugate vaccine (ActHIB®)
- **RV1** rotavirus vaccine, oral (Rotarix®)
- **Hep A** hepatitis A vaccine (Havrix®)
- **DTaP** diphtheria, tetanus and acellular pertussis vaccine (Infanrix®)
- **MMR** measles, mumps, rubella vaccine (MMR II®)
- **VAR** varicella (Varivax®)
- **Tdap** tetanus + diphtheria toxoids and acellular pertussis vaccine, adolescent/adult (Boostrix®)
- **MCV4** meningococcal conjugate vaccine, quadrivalent (Menevo®)
- **DTaP, IPV** diphtheria, tetanus and acellular pertussis + inactivated poliovirus (Kinrix®)
- **HPV4** human papillomavirus vaccine (Gardasil®)
- **TIV or LAIV** trivalent influenza vaccine — TIV (Fluzone®) or live attenuated influenza vaccine — LAIV (FluMist®)
- **Td** tetanus + diphtheria toxoids (Decavac®)
- **ZOS** herpes zoster (Zostavax®)
- **PPSV23** pneumococcal (Pneumovax®)

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*good to know*

ask the experts

If you’re not sure what immunizations you or your family needs, talk with your doctor. It’s also a good idea to have a list of other questions on your mind whenever you see your doctor. Be prepared at your next appointment by visiting allinahealth.org/beprepared.
SNEAK IN EXTRA NUTRIENTS

We all know that summertime brings with it juicy tomatoes and delicious berries. But don’t let your fruit and veggie intake suffer during the fall and winter. Here are some tips to help you reach your daily fruit and veggie goal:

• Add sliced bananas or thawed frozen berries to your morning cereal.
• Heat frozen blueberries or strawberries in the microwave for a toaster waffle topping.
• Add frozen peas or broccoli to your pasta dishes.
• Top low-fat frozen yogurt with canned peaches.
• Blend frozen fruit with yogurt, low-fat milk and ice for a tasty and healthy smoothie.

Try something new for dinner tonight. Visit allinahealth.org/recipes for quick, healthy and satisfying recipes for the whole family.

Fruits and vegetables:
FRESH, FROZEN OR CANNED?

For eye appeal and taste, fresh produce is hard to beat. But surprisingly, it may not always be the best choice. Fruits and veggies fresh from the garden or the local farmers market will usually provide the most nutrients. But as time from harvest to table lengthens, important vitamins and minerals are lost. On the other hand, frozen vegetables and fruits, processed soon after harvesting, should retain most of their nutrients. This makes it easy to keep fruits and veggies in your diet year-round.

CAN THE CAN?

While some vitamins and minerals are destroyed when fruits and vegetables are canned, most of their nutritional value remains. In fact, canned tomatoes, corn, carrots and spinach beat out their fresh counterparts on some key nutrients, such as vitamins A, K and E, and lycopene and lutein.

MYPLATE GUIDELINES
Dietary guidelines emphasize eating a variety of fruits and vegetables every day, no matter what form. According to the U.S. Department of Agriculture’s MyPlate, half of your plate should consist of fruits and vegetables. For a healthy diet, women need 1½ to 2 cups of fruit and 2 to 2½ cups of vegetables a day. Men need 2 cups of fruit and 2½ to 3 cups of vegetables a day. Fresh, frozen, canned, dried or juice — they all count toward the daily recommendation.

U.S.D.A. DAILY GUIDELINES

For women:
• 1½ – 2 cups of fruit
• 2 – 2½ cups of vegetables

For men:
• 2 – 2½ cups of fruit
• 2½ – 3 cups of vegetables

Try something new for dinner tonight. Visit allinahealth.org/recipes for quick, healthy and satisfying recipes for the whole family.

At Allina Health, we’re dedicated to preventing and treating illness. If you’re interested in making a difference, consider joining our award-winning health care team. Visit allinahealth.org/jobs today to view our current openings and apply online.

Allina Health is dedicated to the prevention and treatment of illness and enhancing the greater health of individuals, families and communities throughout Minnesota and western Wisconsin. A not-for-profit health care system, Allina Health cares for patients from beginning to end of life through its 90-plus clinics, 11 hospitals, 15 pharmacies, specialty care centers and specialty medical services that provide hospice care, oxygen and home medical equipment, and emergency medical transportation services. Learn more at allinahealth.org.
UNLESS OTHERWISE NOTED, CALL ALLINA HEALTH CLASS REGISTRATION AT 1-866-904-9962 OR VISIT ALLINAHEALTH.ORG/CLASSES FOR MORE INFORMATION OR TO REGISTER.

CANCER CARE

The Breast Cancer Support Group
Call 651-241-8375.

Reach to Recovery
This American Cancer Society program offers one-on-one support for women and men who have had a mastectomy or lumpectomy. Call 651-241-6408.

Prostate Cancer Support Group
Call 651-241-8328.

CHILDBIRTH AND PARENTING

• All About Babies
• Birth Center Tour
• Breastfeeding Preparation
• Childbirth Preparation
• Childbirth Preparation: Twins, Triplets or More
• Expectant Father
• Expectant Grandparents
• Father and Baby
• Infant and Child CPR
• Infant Massage
• New Brother/New Sister
• New Parent Connection
• Refresher Birth and Parenting Preparation

Baby Cafe
Free weekly drop-in center for expert help with breastfeeding. Call 651-241-5088 for details.

Postpartum Depression Support Group
Call 612-863-4770 before your first visit or for more information.

Pregnancy After a Loss Support Group
Call 651-241-6206 before your first visit or for more information.

Pregnancy and Infant Loss Support Group
Call 651-241-6206 before your first visit or for more information.

HEALTH IMPROVEMENT

ExerCare Fitness Center
Milton M. Hurwitz ExerCare Fitness Center provides a place for past patients, their families and other community members to exercise in a medically supervised environment. Offerings include Pilates, yoga and yoga/Pilates fusion classes. Call 651-241-8080.

HEART

HeartSaver/CPR Class
A 2½-hour (noncertified) course to learn CPR and how to use AEDs.

The Women’s Heart Center
A personalized assessment for women to determine risk for heart disease. Call 651-241-8108. $95

NEUROSCIENCE

Brain Tumor Support Group
Call 651-241-8575.

Parkinson Support Groups
The American Parkinson Disease Association at United Hospital partners with support groups throughout Minnesota. For a support group list, call 651-241-8297 or 1-888-302-7762 or visit allinahealth.org/APDA.

Stroke Support Group
The Sister Kenny® Rehabilitation Institute offers support groups for stroke survivors and their families. Call 612-863-4996.

ORTHOPEDICS

Total Knee and Hip Replacement Program
HELPING KIDS
during an adult’s hospital stay

A parent’s or grandparent’s hospital stay creates stress, worry and fear for children in the family. “Why is Dad at the hospital?” and, “Is Grandma going to die?” are typical questions kids ask.

Colleen Lacey is a child life specialist at United Hospital who is professionally trained in child development. She offers a range of ways to help families understand and respond to the needs of children and teens, especially during sudden or traumatic medical events.

During these difficult times, it’s easy to overlook children’s needs. The danger for children, Lacey said, occurs when they overhear information and create misconceptions based on their fears and lack of understanding.

Parents are often unsure how much to tell a child. Lacey emphasized the importance of being honest and communicating in a way the child can understand.

This conversation should include:

• A broad, accurate statement, such as “Dad (Mom, Grandma or Grandpa) is seriously ill.” This opens the door for the child to talk about what he or she is feeling.

• The name of the illness or injury. Use the correct term and age-appropriate words. This will help the child retell the story to friends or teachers.

• Your best understanding of what will happen at the hospital and how this might affect the child. Be hopeful, yet honest. For example, “My doctor wants me to stay in the hospital until my infection is gone. Daddy will be home with you.”

Be sure to ask what your child wants to know and answer honestly. “Kids aren’t harmed when you’re honest. Parents often are surprised that the conversation is easier than they thought,” Lacey explained.

“Should my child visit the hospital?” is another common question. Start by asking whether the child wants to visit. “Either choice is OK,” Lacey said. Prepare your child by describing the sights, sounds and smells in the hospital room. If you can, take a few photos from a child’s eye level and show them before the visit.

Children can get bored in a hospital room, so it’s important to bring toys or art materials. A bonding activity, like snuggling up with a parent to watch a movie, can reassure the child.

RESOURCES FOR MORE INFORMATION

Raising an Emotionally Healthy Child When a Parent Is Sick, by Paula Rauch and Anna Muriel, 2005
With asthma, ONE SIZE DOESN’T FIT ALL

It can start with a chronic cough, wheezing, tightness in the chest or shortness of breath. It can be triggered by allergies, respiratory infections, exercise, chemical sensitivities or even strong emotions.

Asthma, a chronic inflammatory lung condition, is different for everyone. That’s why a customized “asthma action plan” written by your doctor can be helpful.

The Asthma Action Plan for Adults and Children used by Allina Health features a green-yellow-red system to remind you when to take different medicine. If your child has asthma, the school nurse should have a copy of the action plan.

“I try to give an action plan to every asthma patient. It focuses on what to do next if your symptoms escalate. It’s a reassurance,” said Paul Dahlberg, MD, an allergy and asthma specialist at Aspen Medical Group’s Bandana Square and Maplewood clinics.

“Most people who pay attention to symptoms and triggers, take their medicine and treat asthma with respect can manage well,” Dahlberg said. “But long term, asthma does reduce lung function. And if you don’t pay attention, it can be lethal.”

Dahlberg often uses allergy shots as a treatment tool. Three to five years of shots is often enough to build up a permanent tolerance to allergens, he said.

KNOW YOUR ASTHMA ACTION PLAN

Do your symptoms say stop, go or caution?

GREEN
• Go ahead with normal activities
• Symptom-free
• Take daily medications.

YELLOW
• Caution
• Some symptoms
• Add medications.

RED
• Danger
• Severe symptoms
• Call your doctor.

To learn questions to ask your doctor if you or your child has asthma and get the action plan, visit allinahealth.org.

When you need more help with asthma

People who think they might have asthma can start by seeing a primary care doctor. Your doctor can refer you to a specialist if needed. Patients who are already being treated should see the doctor if they:

• have had an asthma-related emergency room visit or hospital stay
• wake up at night more than twice a month because of asthma
• need a rescue inhaler more than twice a week.
QUICK TAKES: Tips for staying healthy this fall

Margelusa Alexa, MD
Internal Medicine
Allina Medical Clinic – Woodbury
651-241-3000

Ask your doctor to check your vitamin D level. Low vitamin D is a risk factor for osteoporosis, obesity, diabetes, certain cancers and depression. You may need supplements. Eat foods fortified or naturally rich in vitamin D.

Susan Fagre, MD
Pediatrics
Aspen Medical Group – Highland Park
651-241-9600

Make sure your children’s physicals have been done and that their shots are up-to-date. Children 6 months of age and older should receive the influenza vaccination every year, and fall is a great time to get it. Flu shots can greatly decrease hospitalizations for very young children.

Syed Hasan, MD
Geriatric Medicine
Aspen Medical Group – Maplewood
651-241-9500

As a geriatrician, I advise older people to take advantage of the season and exercise more. The golden rule: Start low and go slow. Walking builds cardiovascular and muscle strength. To stay active into your 70s and 80s, focus on aerobics, stretching, balance and weight training. Get a checkup before starting anything strenuous.

Sherri Oetken, DO
Family Medicine
Allina Medical Clinic – Farmington
651-463-7181

Fall is a challenging time for many people with allergies to ragweed pollen. To prevent symptoms, track pollen counts in your area, stay indoors and try to avoid exposure. If your allergy symptoms don’t improve with over-the-counter medicine, blood testing can identify individual allergens, and allergy shots may be effective.

Maria Stanislaw, DO
Pediatrics
Allina Medical Clinic – Hastings (Nininger)
651-480-4200

My No. 1 tip is hand washing because 75 percent of colds are transferred by touch. I recommend washing for 30 seconds, long enough to sing the alphabet or the “Happy Birthday” song. Kids will stay healthier if they cover their cough, wash their hands frequently and use a water bottle instead of the drinking fountain.