



Medical Center
of McKinney



FIVE WAYS TO FIGHT INFECTION

Germs are everywhere—here are a few simple steps to protect you and your family.

SEE PAGE 4 ►

HEALTHY LIVING

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WOMEN & STROKE

4 POINTS TO KNOW

These facts may surprise you: Each year, twice as many women in the U.S. die from stroke as die from breast cancer. And women are more likely than men to have a stroke—but are often unaware of their risk and what they can do to reduce it.

Here are four things every woman should know about stroke:

1 Stroke is a brain attack.

Like a heart attack, a stroke happens when the blood supply to the organ is cut off. Strokes are usually caused by a clogged artery that blocks the delivery of blood and oxygen to the brain. A stroke can cause brain cells to die, leading to brain damage or death.

2 Some risk factors are specific to women.

The most common risk factors for stroke for both men and women are getting older; being overweight; smoking; having a family history of stroke; not exercising; and having high blood pressure, diabetes, or high blood cholesterol.

But for women, the following can also increase stroke risk:

- Having migraines with auras.
- Having an autoimmune disease, such

as lupus, or a blood-clotting disorder.


- Using birth control pills or menopausal hormone therapy.
- Being pregnant.
- Being postmenopausal and having a waist larger than 35 inches or a triglyceride level higher than 128 mg/dL of blood.

Also, certain groups of women, such as African American and Hispanic women, are at higher risk for stroke than Caucasian women.

3 Up to 80 percent of strokes may be preventable.

You may be able to reduce your risk for stroke with a healthy lifestyle. That includes controlling your blood pressure and cholesterol levels, being at a healthy weight, exercising, and not smoking.

4 A stroke is an emergency.

 Call 911 if you or someone else shows signs or symptoms of a stroke.

Sources: American Stroke Association; National Stroke Association; Office on Women's Health

FROM THE CEO



Ernest C. Lynch III, FACHE, Chief Executive Officer


Medical Center of McKinney's (MCM) commitment to providing quality health care to north Texas residents is evident in all we do.

MAKING THE GRADE

A I'm proud to announce that this summer, national nonprofit The Leapfrog Group gave MCM an "A" Hospital Safety Score rating for quality patient care.

Leapfrog reviewed hospitals' publicly available data on patient injury, medical and medication error, and infection to rate hospitals across the nation, and MCM is the only hospital in northern Collin County to receive an "A" rating.

To learn more about the full-service health care MCM provides, visit www.medicalcenterofmckinney.com or

 call **972-547-8000**.

Unique to women

- Sudden face and limb pain.
- Sudden hiccups.
- Sudden nausea.
- Sudden general weakness.
- Sudden chest pain.
- Sudden shortness of breath.
- Sudden heart palpitations.



In both men and women

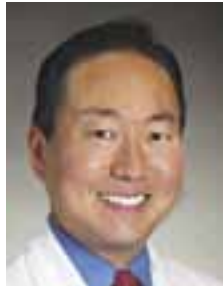
- Sudden numbness or weakness of the face, arm or leg (especially on one side of the body).
- Sudden confusion or trouble speaking or understanding speech.
- Sudden trouble seeing in one or both eyes.
- Sudden dizziness or trouble with walking or balance.
- Sudden severe headache with no known cause.

Source: National Stroke Association

Medical Center of McKinney
HEALTHY LIVING

HEART HEALTH

High-tech imaging improves our view of your heart



Dale Yoo, MD

CARDIOLOGY SERVICES AT Medical Center of McKinney (MCM) just increased its view by two. With the recent addition of the advanced biplane catheterization (cath) lab, MCM's cardiologists are now able to perform the highest level of interventional cardiology and electrophysiology at the hospital site.

"By adding this sophisticated piece of technology to our lab, MCM is clearly showing its commitment to our patients and their heart health," says Dale Yoo, MD, cardiac electrophysiologist on staff at MCM.

WHAT IS A BIPLANE CATH LAB? A biplane cath lab is an amazing piece of interventional cardiology that helps to unravel complex coronary or structural cardiac anatomy. It uses two sets of x-ray source and imaging cameras, each free to move independently, which allows two sets of images to be taken at the same time.

WHY DOES IT MATTER THAT MCM HAS THIS NEW EQUIPMENT? The fact that MCM now features a biplane cath lab is particularly good news for patients with heart rhythm disorders.

Cardiac terms to know



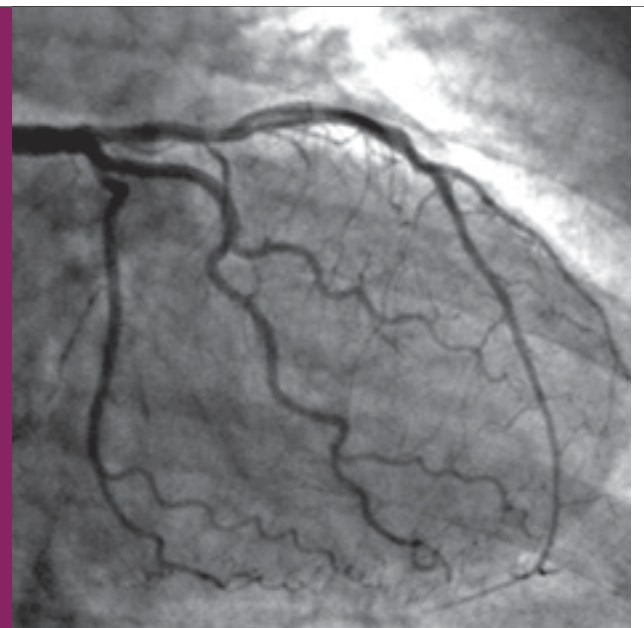
ARRHYTHMIA: a problem with the rate or rhythm of the heartbeat.



ABLATION: a minimally invasive procedure that can correct arrhythmias without the need for medications, surgery or implantable devices.



TACHYCARDIA: a heart rate that exceeds the normal range.



"The biplane cath lab enables us to perform more advanced procedures such as atrial fibrillation and ventricular tachycardia ablations for patients affected by their rhythm disturbances," Dr. Yoo says.

"Ablation typically uses catheters—long, flexible tubes inserted through a vein in the groin and threaded to the heart—to correct electrical problems in the heart that cause an arrhythmia," Dr. Yoo continues. "Through similar procedures on the plumbing side of cardiology, interventional cardiologists often can determine the extent of heart disease and what other treatments, such as angioplasty, insertion of a stent or heart surgery, might be needed."

The biplane cath lab offers additional benefits to both patient and doctor.

"It enhances my ability to get a much clearer and more precise image of the heart, while at the same time

emitting a lower amount of total fluoroscopic (x-ray) exposure to both patient and doctor," Dr. Yoo says. "The biplane cath lab enables us to view two separate planes of the heart at the same time, and often. During a cardiac

For more information about MCM's Cardiology Services, please call 972-547-8000.

catheterization, it also allows us to see multiple views with a single injection, thus saving time and limiting contrast dye and kidney damage in susceptible patients. We are very excited to provide our patients with the most advanced—and safest—technology available in interventional cardiology today."

THE 'LAND OF PLENTY' HAS PLENTY TO CHANGE

Dr. Eichhorn, MCM cardiologist, discusses metabolic syndrome

"WE ARE A country of 'plenty,' but we are also a country in the middle of a terrible obesity epidemic," says Eric Eichhorn, MD, FACC, cardiologist on staff at Medical Center of McKinney (MCM). "Evolutionarily, there wasn't always 'plenty' to eat. We had to hunt and kill our next meal, and being sedentary wasn't an option. Today, food is plentiful and eating has become our pastime."

Among the many alarming consequences of our country's obesity epidemic is a condition known as metabolic syndrome. Metabolic syndrome is a cluster of conditions including:

- A markedly increased waist circumference.
- Increased blood pressure.
- A high blood sugar level.
- Abnormal cholesterol levels.

"Having just one of these conditions doesn't mean a person has metabolic syndrome. However, those who have excess body fat around the waist as well as two of the other above-mentioned conditions, do," Dr. Eichhorn



says. "It's also important to understand that any of these conditions increases a person's risk of serious health problems, including heart disease, stroke and diabetes."

TAKE ACTION If you have metabolic syndrome or any of the components of metabolic syndrome, aggressive lifestyle changes can delay or even prevent the development of serious health problems.

"Simply said, we are eating the wrong things in excess and are not exercising enough," Dr. Eichhorn says. "Our consumption of meat products, sugar, and fast and fried foods has

grown three- to fourfold in the last 100 years. As a result, the number of obese people in this country has risen exponentially, particularly during the last 10 to 15 years.

"I hate to use the word *diet* with my patients, because typically people go on and off diets and gain the weight back," Dr. Eichhorn continues. "The only way to treat

the underlying cause and reverse the effects of metabolic syndrome is to make some serious lifestyle changes."

Healthy lifestyle changes to help reverse metabolic syndrome include:

- Adopting a regular exercise program.
- Avoiding meat and dairy products, sugar, and fried foods.
- Incorporating more fresh vegetables, fruits, beans, nuts and seeds.



Eric Eichhorn, MD, FACC

LEARN MORE Unfortunately, the obesity epidemic does not discriminate.

"Metabolic syndrome affects both genders and people of all ages—including children," Dr. Eichhorn says. "It's never too early to teach our kids to incorporate exercise and healthy eating habits into their daily lives. The longer bad habits have been in play, the harder it is to reverse the havoc they inflict on our health."

Everyone likes to watch movies, right? Here are two Dr. Eichhorn highly recommends to enlighten the entire family: *Forks over Knives* and *Supersize Me*.

"Don't let the word *documentary* scare you off," he says. "These are both riveting must-sees for everyone... They do an excellent job of getting a very important message across."

For more information about metabolic syndrome or the services available at MCM, please call 972-547-8000.



TOP-NOTCH FOR JOINT CARE

Medical Center of McKinney leads the way in total joint replacement excellence



Charles Toulson, MD

Granted, receiving The Joint Commission's Gold Seal of Approval for health care quality for its Total Hip and Total Knee Replacement programs sounds impressive—but does it really matter to patients? In a word, yes. ♦ Medical Center of McKinney (MCM) has voluntarily

undergone extensive, on-site evaluations by Joint Commission reviewers and is independently reviewed and certified for excellence in care, outcomes and patient satisfaction. We are the first hospital in Dallas, Collin, Grayson and Fannin counties to earn this prestigious distinction.

ACCREDITATION MEANS BETTER CARE “Quite simply, this certification shows MCM’s level of dedication to our patients,” says Charles Toulson, MD, medical director of orthopedics for MCM. “It tells our patients that our team is consistently providing gold-standard care. This certification not only indicates that MCM has an excellent program but excellent facilities and outcomes as well.”

MCM has undergone the rigorous Joint Commission accreditation process twice now, as recertification is required every two years. “Each certification presents different challenges from the previous one, since the industry standards are always changing,” Dr. Toulson says. “So, as a result, we are continuously getting better!”

ABOUT THE JOINT COMMISSION The Joint Commission is a nonprofit organization that helps maintain and elevate health care delivery standards throughout the nation. The Joint Commission’s favorable assessment of MCM’s joint replacement program was based on:

- Adherence to consensus-based national standards.

- Effective use of established clinical practice guidelines to manage and optimize care.
- An organized approach to performance measurement and improvement.
- The high volume of procedures performed.

From start to finish, the certification process typically takes about six months.

“If there was ever a prime example of teamwork, this is it,” Dr. Toulson says. “From MCM’s surgeons, anesthesiologists, nurses, therapists, nutritionists and volunteers, it takes the entire hospital to pull together to achieve this prestigious designation. As the first hospital in the area to be certified by The Joint Commission, MCM leads the community in the standard for hip and knee replacements.”

In addition to the Joint Replacement Center, MCM has several other Centers of Excellence. These include Chest Pain, Sinus, Stroke and the Texas Ten Step Program (designed to help hospitals and birthing centers support mothers in breastfeeding).



Is it time for a new knee?

The pain in your knee has become—well, a pain. And more than once you’ve said to yourself you’d like to trade that knee in for a new one. Now you’re wondering if it’s time to actually do so.

The decision to have knee replacement surgery to address severe pain from arthritis or an old injury isn’t one you should make hastily. But when surgery is called for, it’s not a decision to delay either.

“If you wait too long, you’ve done yourself a disservice,” says Adam S. Bright, MD, spokesman for the American Academy of Orthopaedic Surgeons (AAOS).

Muscles around your joint can contract and weaken, and your fitness level can decrease. Then, the outcome of surgery may not be as good as it otherwise could be.

Surgery ahead. If you have knee pain that cannot be controlled, it’s time to consider knee replacement. That’s also the case if the pain keeps you up at night.

Yet another reason to consider surgery is if you’re becoming less and less active because of your knee pain. “You need to maintain your health through exercise,” Dr. Bright says. “It’s important for your psychological and physical well-being.”

Lasting benefits. Knee replacement surgery is a major operation. It involves removing damaged cartilage and bone above and below your knee and replacing the joint surfaces with strong metal and plastic parts.

You may experience increased pain for a few weeks after surgery, Dr. Bright says. But according to the AAOS, more than 90 percent of those who have knee replacement surgery ultimately report dramatic pain reduction and significant improvement in their ability to go about their daily activities.

Talk to an orthopedic surgeon if you think your time for knee surgery has arrived.

For more information about MCM’s certified Joint Replacement Center, please call **972-547-8000**.



Brian Snow, MD, and Charles Toulson, MD, demonstrate the new MAKOplasty robotic system.



FREE SEMINARS MAKOplasty robotic surgery

Medical Center of McKinney has recently added the state-of-the-art MAKOplasty robot for advanced hip and knee surgeries. Join us for one of our free seminars focusing on robotic surgical options for the hip and knee, anterior hip replacement surgery, hip resurfacing, partial knee replacement, osteoarthritis of the knee, and more.

- Seminars will be held:
- Wednesday, Nov. 14
 - Wednesday, Nov. 28
 - Tuesday, Dec. 4
 - Tuesday, Dec. 18
- Seminars will take place at

Medical Center of McKinney, 4500 Medical Center Drive, classrooms 3 and 4. Seating is limited, so please call **855-296-6265** to make a reservation.



5 FOR FIGHTI



Germs have been making people sick since ... well, since forever. ♦ Ancient Greeks wrote about the miseries of malaria. And around 1300 B.C., an Egyptian carved a description of polio onto a stone. ♦ The germs that cause both those diseases are still around today. And while you're not likely to pick up either of those at the office, there's probably a cold or flu virus lurking nearby. Or maybe some strep bacteria to inflame your throat. ♦ The unfortunate fact is that germs have been—and likely will continue to be—everywhere. Most are harmless. But some can make you sneeze, come down with a fever or even worse. ♦ Here's the fortunate part, however: There are simple steps you can take to help protect yourself and your family from some common infectious diseases. ♦ Try these five germ busters.

Vaccines prevent disease. Are you up-to-date? To find a doctor at Medical Center of McKinney, call 855-296-6265.

PREVENTING INFECTION

1 LATHER, RINSE, REPEAT Washing your hands is a great way to stop the spread of disease.

Why? Because it gets rid of germs that may have glommed on to you when you touched something or someone. The trick, however, is remembering to wash your hands well and often—before you plant those germs in your mouth, nose or eyes and before you share them with someone else.

According to the Centers for Disease Control and Prevention (CDC), it's particularly good to wash your hands before you:

- Eat.
- Prepare meals.
- Treat someone's wound.
- Handle contact lenses.

And after you:

- Use the bathroom.
- Change a diaper.
- Touch germ-filled items, like trash cans or cleaning rags.
- Handle food.

It's not enough to just splash your hands with water, either. You need to scrub them all over with soap and warm water for at least 20 seconds. Rinse and dry with a paper towel. No soap? An alcohol-based sanitizer will do in a pinch, advises the CDC.



Download a QR reader to your smartphone and scan this link to watch a video from the CDC about handwashing.


2 PRACTICE SAFE FOOD You've seen the headlines about salmonella, *E. coli* and Listeria. Foodborne illnesses caused by these and other bugs are considered infectious diseases too.

To help protect yourself and your family from food poisoning, follow the handwashing advice above. Four other actions you can take:

- Avoid cross-contamination. Keep raw animal products away from other foods. Start at the grocery store by putting meat, poultry, fish and eggs in plastic bags before loading them into your cart. Refrigerate raw foods in containers when you get home. And when preparing foods, dedicate one cutting board to animal products only. Use a different board for cutting other foods, such as fresh produce.
- Thaw it right. Never defrost food at room temperature—meaning don't leave it on the counter or in the sink. You can safely thaw food in the refrigerator, under



cold running water or in the microwave. Plan accordingly: Food thawed in cold water or in the microwave needs to be cooked immediately.

- Heat it up. Cook foods at recommended temperatures to kill any harmful bacteria. Use a food thermometer,  and check the cooking guide at www.isitdoneyet.gov.

- Cool it down. Cold slows the growth of bacteria, so keep your refrigerator at 40 degrees or below. Refrigerate leftovers quickly. And use ice packs when taking food on the road to picnics or potlucks.

3 CLEAN—AND MAYBE EVEN DISINFECT The floor may look clean enough to eat from, but that doesn't mean you should try it.

And not just because it's a floor. Cleaning removes germs from surfaces, but it doesn't kill them. Disinfecting does.

Disinfectants obliterate bacteria, viruses and other germs. They're powerful enough that they have to be registered with the U.S. Environmental Protection Agency (EPA).

In fact, that's one way to identify a true disinfectant: Check the label for an EPA registration number. Also, look for words like *germicidal*, *antimicrobial* or



antibacterial on the label.

There's no need for germ overkill, however; cleaning with soap and water is fine for many surfaces, advises the CDC. But it does recommend using disinfectants—especially when someone in the household is ill—in areas where germs tend to cluster, such as kitchens and bathrooms.

4 KEEP UP WITH IMMUNIZATIONS


We're doing a decent job of vaccinating children in the U.S. against infectious



diseases such as chickenpox, measles and mumps, reports the CDC. But that's not necessarily the case with adults.

On average, about 50,000 adults in the U.S. die from vaccine-preventable diseases or their complications every year, according to the National Foundation for Infectious Diseases.

Vaccinations are one of the most effective ways to prevent illness. That's why you should make sure all members of your family—children, teenagers and adults—are up-to-date on their shots. And don't forget an annual flu shot for just about anyone in the family.

You can find the recommended immunization schedules for all ages at  www.cdc.gov/vaccines.

5 ANTIBIOTICS: USE AS NEEDED

One of the most important things to remember about antibiotics is this: They only work for bacterial infections—not viruses like the flu, a cold, bronchitis, or most sore throats and ear infections.

There's no doubt that antibiotics have been powerful tools against infectious diseases. Their effectiveness has been something of a double-edged sword, however: They've worked so well against so many

diseases that we've often misused them.

We may have asked our doctors to prescribe them whenever we felt ill—even when we didn't need them. We may not have always finished our prescriptions. Or sometimes we may have given leftover pills to sick friends.

As a result, germs grew stronger.

Antibacterial resistance—germs learning to fight back against antibiotics that once treated them—is a growing health threat that affects everyone. But we can all help stop it.

How? Don't expect your doctor to offer antibiotics every time you or your child gets sick, advises the CDC.


If your doctor does prescribe antibiotics, follow the directions. Take them every day, as many times as stated on the label, for as long as stated. If you're feeling better, that's great. But some germs may be lingering in your body, so finish the prescription.

And keep in mind that if you're infected, you can infect others. Stay home from work and other public places until



you're well. If your illness caused a fever, wait at least 24 hours after it's gone before mingling with others.

WHAT ELSE YOU CAN DO Ask your doctor about other things you can do to help prevent infectious illness—such as using insect repellent to avoid bites from ticks and mosquitoes. Find out why it's important for pregnant women not to clean cat litter boxes and why you need to keep an eye on kids' hands when visiting animals at a petting zoo or county fair.

You also can learn more about infectious diseases at the website of the National  Institute of Allergy and Infectious Diseases, www.niaid.nih.gov.

Medical Center of McKinney
HEALTHY LIVING



NECK PAIN: WHAT CAUSES IT AND WHEN TO GET HELP

FROM THE BOTTOM OF THE SKULL to the top of the torso, there's an elaborate series of bones, disks, nerves, muscles, ligaments and other tissues that all combine to make up the neck.

But when something goes wrong with any of these intricate moving parts, it can result in pain. For some, it's a straightforward ache, tenderness or stiffness. Others report shooting sensations, electrical feelings, tingling, or weakness in the arms or hands.

What's behind most neck pain? According to the American Academy of Orthopaedic Surgeons, the two most common causes are injury and long-term wear and tear.

Injury. Motor vehicle accidents, falls, diving mishaps and sports injuries are just some of the activities that can cause neck injury and pain.

Neck injuries commonly involve muscles and ligaments, though severe injuries can result in broken bones, spinal cord damage and paralysis.

Wear and tear. Cervical stenosis is the gradual narrowing of the spinal canal that can lead to pressure on the spinal cord and other nerves, resulting in pain.

Stenosis is often caused by aging, reports the American Association of Neurological Surgeons.


As people age, the structures designed to cushion the bones in the neck degenerate, and bones and ligaments

get thicker, all of which narrows the spinal canal. These changes may also prompt bone spurs to form, further compressing nerves.

TIME TO SEE A DOCTOR Experts say it's time to talk with a doctor if neck pain: ● Is caused by an injury. ● Comes with a fever or a headache. ● Shoots down your arm. ● Doesn't get better with over-the-counter medications. ● Doesn't get better in a week.

You also should also see a doctor if stiffness keeps you from lowering your chin to your chest or if there is tingling, numbness or weakness in your arms, hands or legs.

DIAGNOSING NECK PAIN To figure out what's causing your pain, your doctor will likely ask about your medical history and do a physical exam. He or she may also recommend one or more diagnostic tests. For example: ● X-rays may be needed to find fractures or bone spurs. ● Magnetic resonance imaging scans can help locate a disk or nerve problem. ● Electromyography can pinpoint nerve damage. ● Computed tomography scans may aid in the diagnosis of persistent neck pain.

For more information about neck pain, go to  www.orthoinfo.aaos.org.

Neck pain: Is it time to consider a surgical solution?

You've tried medications, injections, exercises and other therapy, but your neck pain won't go away. What's next?

For some people with persistent—or worsening—neck pain, the best option may be surgery.

But before suggesting surgery, your doctor will weigh a number of factors, including: ■ Your age.

■ Your medical history. ■ How long you've had your neck problem. ■ The success or failure of previous treatments.

Surgical treatments vary depending on the nature of the problem. For example, people with pain caused by spinal instability may benefit from spinal fusion.

This procedure involves fusing

two or more vertebrae together using bone or bone substitutes. The goal is to ease pain by creating a stronger, more stable section of bone.

Not every neck problem can or should be corrected by surgery. Ask your doctor about the potential risks and benefits of surgery.

Source: American Association of Neurological Surgeons

YOUR GALLBLADDER

LOVE IT OR LEAVE IT



David Lambert, MD

If you must part with yours, MCM offers minimally invasive laparoscopic surgery

IT'S CONCEIVABLE (and quite common) for a person to go years with digestive symptoms and never realize they may be related

to a gallbladder problem. According to David Lambert, MD, general surgeon on staff with Medical Center of McKinney, that's because they are so interwoven with other digestive symptoms, such as indigestion, gas, bloating, constipation, diarrhea and nausea.

WHEN YOUR GALLBLADDER GOES ON THE BLINK The gallbladder's most common malfunction is gallstones, which affect more than 25 million Americans. There are 1 million new cases diagnosed annually, according to the American Gastroenterological Association.

A gallstone is a solid crystal deposit that forms in the gallbladder. Gallstones vary in size and chemical structure and may be as tiny as a grain of sand or as large as a golf ball. Common and usually harmless, gallstones can sometimes cause pain, nausea or inflammation.

There are other malfunctions of the gallbladder in addition to gallstones; yet, regardless of the diagnosis of your gallbladder disease, most of the symptoms will be similar.

Gallbladder "attack" or disease symptoms include the following:

- Moderate to severe pain under the right side of the rib cage.
- Pain that radiates through to the back or to the right shoulder.
- Severe upper abdominal pain (biliary colic).
- Nausea, queasiness or vomiting.
- Gas, burping or belching.
- Attacks at night, after overeating, or after eating a fatty or greasy meal.
- Pain that worsens with deep inhalation.
- Attacks that last anywhere from 15 minutes to 15 hours.

LAPAROSCOPIC SURGERY Since the late 1980s, the most common approach to removing gallbladders is of the laparoscopic variety. The procedure involves removing the gallbladder and gallstones through several small incisions in the abdomen. During the surgery, a lighted scope attached to a video camera (laparoscope) is inserted into an incision near the belly button. The surgeon then uses a video monitor as a guide while inserting surgical instruments into the other incisions to remove the gallbladder.

"Unless there are other factors that may complicate the surgery, laparoscopic gallbladder surgery is by far the least invasive and most effective method of treating gallstones," Dr. Lambert says. "Following surgery, patients generally go home on the same day and may expect to return to work and/or their normal routine in a week or two."

To find a physician who can help, call our Physician Referral Line at 855-296-6265.

KNOW THY THYROID



Shane Pahlavan, MD

WHILE IT'S TRUE that the incidence rate of thyroid cancer has increased, it's also a fact that those diagnosed with it have the best prognosis of survival than any other form of cancer.

"I think the incidence of thyroid cancer has risen because we are much better at detecting it early," says Shane Pahlavan, MD, otolaryngologist and head and neck surgeon on staff at Medical Center of McKinney (MCM). "The good news is that if thyroid cancer is detected, minimally invasive techniques and new surgical tools have been developed to reduce scar size and recovery time."

Located in the lower part of the neck, the thyroid is one of the body's largest endocrine glands. The thyroid comprises two thyroid lobes connected across the trachea by a small thyroid isthmus.

"Thyroid gland tumors usually appear as bumps in the neck, called nodules. If the nodule is greater than one centimeter, a biopsy is performed to determine if it is cancerous. If cancer cells are found, we will surgically remove the thyroid gland," Dr. Pahlavan says. "If a nodule is four centimeters or larger, it meets absolute criteria for surgical removal whether or not cancer cells are found. This is because a nodule of this size generally causes discomfort by pushing on nearby structures in the neck and throat and has a higher chance of malignancy."

Symptoms of thyroid cancer may include:

- A lump in the neck.
- Neck pain, sometimes going up to the ears.
- Hoarseness.
- Difficulty swallowing.
- Difficulty breathing.
- Persistent cough.
- Enlarged lymph glands in the neck.

Please bear in mind these symptoms do not automatically mean thyroid cancer, as they may also be caused by other, less serious conditions. Nonetheless, it's a good idea to contact your doctor if any of the above-mentioned symptoms sound familiar.

OTHER THYROID DISORDERS

How active is your thyroid? It seems the symptoms of an underactive (hypothyroidism) or overactive (hyperthyroidism) thyroid can be as hard to determine as the diagnosis itself. Yet, one thing is for certain: How active—or inactive—your thyroid is can dictate how you feel, day in and day out.

Symptoms of **hyperthyroidism** (overactive thyroid):


- Sudden weight loss.
- Rapid or irregular heartbeat.
- Increased appetite.
- Nervousness, anxiety and irritability.
- Tremor—usually a fine trembling in your hands and fingers.
- Sweating.
- Increased sensitivity to heat.
- Changes in bowel patterns, especially more frequent bowel movements.
- An enlarged thyroid gland (goiter), which may appear as a swelling at the base of your neck.

Symptoms of **hypothyroidism** (underactive thyroid):

- Fatigue.
- Sluggishness.
- Increased sensitivity to cold.
- Constipation.
- Hoarse voice.
- An elevated blood cholesterol level.
- Unexplained weight gain.
- Muscle aches, tenderness and stiffness.



- Pain, stiffness or swelling in joints.
- Muscle weakness.
- Brittle fingernails and hair.
- Depression.

 To find an ear, nose and throat specialist, please call our Physician Referral Line at 855-296-6265.

10 SIGNS YOU MIGHT HAVE A HEARING PROBLEM



SOME THINGS IN life are worth keeping. Your hearing is one of them.

It's important to seek help if your hearing is less than ideal: Treatments, such as hearing aids, medicines and surgery, can help. A hearing problem that is ignored may only get worse.

How do you know if you might be losing your hearing? The National Institutes of Health recommends asking yourself the following 10 questions:

- 1 Do you have a problem hearing on the telephone?
- 2 Do you have trouble hearing when there is noise in the background?
- 3 Do you have trouble following a conversation when two or more people are talking at the same time?

- 4 Do people complain that you turn the television up too loud?
- 5 Do people you talk to seem to mumble or not speak clearly?
- 6 Do you find yourself asking people to repeat themselves?
- 7 Do you have trouble understanding the speech of women and children?
- 8 Do you hear a ringing, roaring or hissing sound a lot?
- 9 Do some sounds seem too loud?
- 10 Do people get annoyed because you misunderstand what they say?

If you answer yes to three or more of these questions, you should schedule an appointment with your doctor to have your hearing checked.

Medical Center of McKinney
HEALTHY LIVING



WOMEN'S SERVICES

NEWLY RENOVATED FACILITY IMPROVES PATIENT EXPERIENCE



Gerald Luciani, MD

MEDICAL CENTER OF MCKINNEY (MCM) has invested more than \$5.6 million renovating its Women's Services unit. And while the interior may be inviting and homey, it's what goes on behind the surface that truly matters. And the facility's updates allow the expert staff at MCM to provide the very best in care.

"It is overall quality—nurses, physicians, anesthesiologists, neonatologists, nurse educators, lactation consultants and pediatricians—the completeness of the Women's Services care team is what makes the difference," says Gerald Luciani, MD, an obstetrician-gynecologist on staff at MCM.

According to Dr. Luciani, more than ever, the overall birth care experience at MCM can be summed up as "beautiful, comfortable and happy."

The newly renovated unit features all private rooms, wood floors, and warm and inviting decor. It also features comprehensive services and amenities that have the staff prepared for any emergency.

ALWAYS READY "Medical Center of McKinney is a full-service hospital that can support anything that may happen during delivery," Dr. Luciani says. "Most expectant moms don't anticipate needing the behind-the-scenes services, like a level 3 neonatal intensive care unit (NICU) or a blood bank, but it's available if you need it."

As part of the renovation, MCM added a 7-bed level 3 NICU, which allows for the care of babies born at

28 weeks and beyond. Neonatologists are readily available around the clock to ensure babies have access to the best medical care.

"The fact this advanced level of neonatal care is available in this community is significant. We no longer have to put a pregnant mom or preterm baby on a helicopter to get care. The care is available right here—a first for McKinney"

EDUCATION MATTERS Preparing patients for the complete birth care experience, the hospital offers free birth care education classes and lactation support for moms. Last year, the hospital achieved the Texas Ten Step Program recognition for offering outstanding breastfeeding education and support for new mothers.

"Birth care classes are a vital part of the delivery experience," Dr. Luciani says. "It's important to hear about the different forms of induction, what to expect during the delivery process, and training on how to perform infant CPR. It's reassuring and a stress reliever, knowing what to expect."

To learn more about the Women's Services unit renovations or to sign up for birth care classes, email mcm.familyresource@hcahealthcare.com or call **972-540-4555**.

MEDICAL CENTER OF MCKINNEY

Main Campus

4500 Medical Center Drive (Hwys 75 and 121)

Main..... 972-547-8000

Metro..... 972-569-8000

Billing 866-656-8784

Scheduling 972-758-6200

Medical Office Building

4510 Medical Center Drive (next to hospital)

Outpatient Therapy..... 972-547-8081

Sleep Lab 972-547-8060

Medical Center of McKinney-Wyong Campus

120 and 130 Central Expressway

Main..... 972-548-5300

Psychiatric

Services 972-547-8888

Medical Arts Imaging

4201 Medical Center Drive, Suite 100

Main..... 972-540-4200

Women's

Imaging 972-540-4380

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