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### 1999: A Community Report (Inside Saint Raphael's Better Health Magazine)

Saint Raphael Healthcare System

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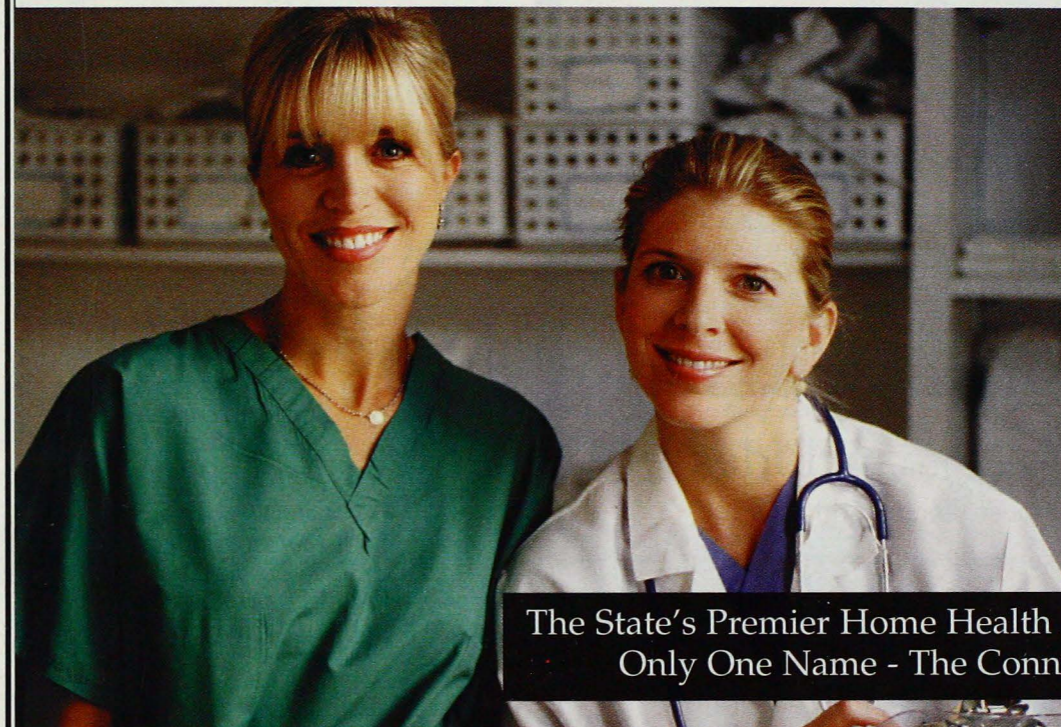


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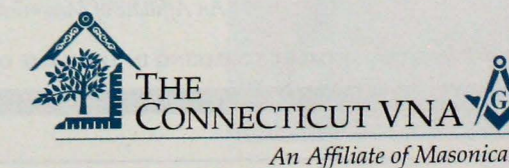
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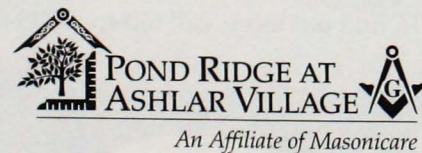






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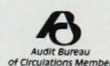
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VOL. 21 NO. 2

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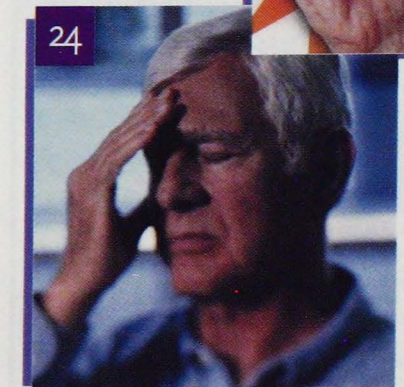
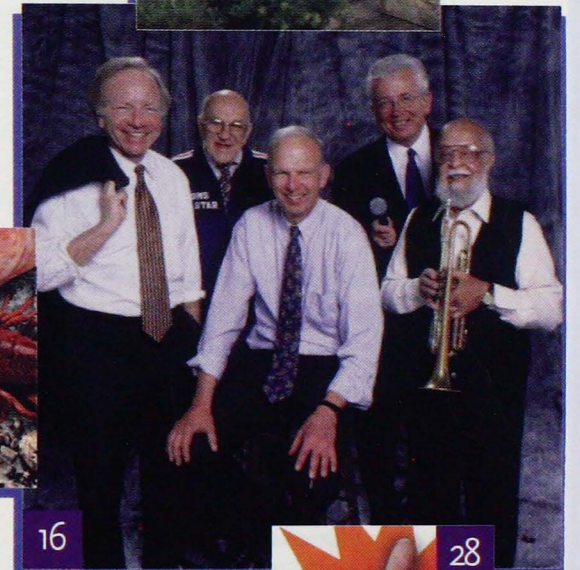
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Bill Dorfer may be confined to a wheelchair because of muscular dystrophy, but he's always on the run. A busy stay-at-home dad, he volunteers as a Cub Scout leader and advocates for people with disabilities.

Cover photo by Frank Mascari



## contributing writers

With a few years to go before he hits 50 (14 to be exact), **Bill Hanrahan**, a



reporter and columnist for the *New Haven Register*, says interviewing the 50-and-over set for this

issue's cover story made him more thoughtful about his own health. "I'm eating more fruit and actually joined a gym," he claims. "These guys could make me look bad."

Writing about food allergies only deepened **Carolyn Milazzo's** appreciation for her ability to eat scallops and peanut butter, which are among the top eight foods that cause allergic reactions. A journalist for more than 20 years, Milazzo is a freelance writer who lives in Milford with her husband and son.

**Marcia Simon** is a free-lance writer and president of MSE, a public relations and promotion company specializing in healthcare subjects and issues. She lives in Westbrook with her husband, son and Siberian Husky. As often as possible, she encourages nutritious meals, physical activity and lots of laughter for overall family and personal health.

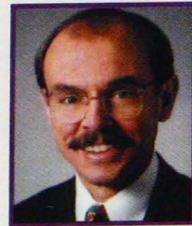
**Janet Youtt** knows all too well that changes in sleep

patterns, coupled with too much caffeine, can lead to headaches. As a new mother of twin daughters, she's suffered quite a few tension headaches recently — though much joy to off-set them, as well. Youtt, a full-time mother and part-time freelancer, lives with her husband and children in Branford.



## viewpoint Healthy children, healthy community

The bright smile of a child can reveal a wealth of information about the health of a community.



And in Greater New Haven, the lack of dental care for needy, inner city children has been well documented.

That's why Saint Raphael's put on the road in February its "Smiles to Go" mobile dental clinic. The Community Foundation of Greater New Haven is providing \$40,000 a year, for three years, toward its operating costs. And as this tractor-trailer, clinic-on-wheels travels to elementary schools in and around the city, we expect to provide basic dental care and education to more than 3,000 children in the first year alone.

Saint Raphael's was founded 93 years ago with the caring mission to improve the health status of the community. That goal still stands true today. In fact, our mission is what drives us to offer the most comprehensive range of

healthcare services available, both in the hospital itself and by going out into the community, as well as by partnering with others who share our goals.

With our energies especially focused on serving the poor, elderly and underserved, we also recently opened our second school-based clinic, this one at Dwight Elementary School. It's being run in collaboration with the Yale Child Study Center, and funded through a New Haven Board of Education and state Health Department grant. Here, children who might not otherwise have access to pediatric care receive state-required immunizations, plus sick, preventive and mental health care.

That makes us smile and improves the health status of our community.

Our goal, however, is to make sure our services have a lot of other people smiling, too.

*David W. Benfer*

David W. Benfer, FACHE,  
President and CEO  
Saint Raphael Healthcare System

## ask the m.d.

**Q: Which is better for you, butter or margarine?**

**A:** The verdict isn't final. But here's what we know. For years, researchers thought the trans fatty acids in margarine were better for you than the saturated fats in butter. Recent research, however, has shown that trans fatty acids can cause as much plaque in arteries as saturated fats. My advice is to limit your intake of both. Olive and canola oil, also used sparingly, are great alternatives.

**Q: Can I prevent swimmer's ear?**

**A:** Medically called otitis externa, swimmer's ear is an infection of the outer ear canal, caused by bacteria, allergies or fungi. Antibiotics and eardrops can treat it. But to prevent it, try putting a few drops of rubbing alcohol in your ears as you towel off,

to dry up remaining water. If you feel water in your ears, tilt your head until the water trickles out. Or, pull gently on your earlobe to straighten the ear canal and allow any water to come out easier. Never poke inside your ear with cotton swabs, or anything else that can damage your eardrum.

Mail your questions to "Ask the M.D.," *Better Health* magazine, 1450 Chapel St., New Haven, CT 06511; fax (203) 789-4053; or e-mail [StRaph@aol.com](mailto:StRaph@aol.com).

Questions were answered by Saint Raphael internist Sherri Clayton, M.D. Answers should not be used to diagnose a health problem or substitute for medical care.



## editor's note He's pretty fantastic, too

Turn to page 16, and you'll be as delighted as we were to get to know our five over-50 coverguys, who — in case you don't recognize them — include U.S. Sen. Joseph Lieberman and Channel 3 news anchor Al Terzi.

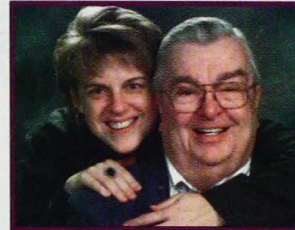
But before you flip inside, I want you to meet my most favorite over-50 fellow: my dad, Ted Wolfe.

Like many people, Dad's a few pounds overweight, likes dessert too much and doesn't exercise as regularly as he should. But he's always got one activity or another going on. And he definitely has a healthy outlook.

At 73, he just finished writing his first novel; volunteers one day a week in the New Haven Colony Historical Society gift shop; and regularly babysits my two young sons, 5 and 1. He sketches. He gardens. He spends nights at the New Haven Symphony with my mom, and often travels into New York City or up to one of the casinos with my aunt.

Like Italian filmmaker Roberto Benigni, he sees life as beautiful. And loves every minute.

So Dad has more life to live, it's



Me and my dad. He's my favorite over-50 fellow.

my job to hound him about eating better and making time to exercise at least three to four times a week — even if it's just by taking a brisk walk around his Hamden neighborhood. Physicians agree it's never too late to make these kinds of healthy

lifestyle changes, or to see their results. The key is to make them gradually and with the guidance of a healthcare professional.

You and my dad can get ideas on where to start by turning to page 10. There, we list how many daily calories you should consume, according to your age, gender and activity level. Healthy meal ideas are listed, too.

And for those who want to start adding exercise to their lives, we have a guide to alternative forms of exercise on page 30. Playing tag and gardening are two of the seven different activities that doctors recommend. So take a look.

I know what my dad's going to say when he reads it. He's going to ask why running after grandchildren isn't on the list.

*Cindy*  
Cynthia Wolfe Boynton  
Editor and publishing director

## feedback from our readers

I enjoyed reading "Could I have Hepatitis C?" (January/February), which discussed the potential seriousness of chronic hepatitis C infections. But it did not highlight the tremendous progress we've made over the past 10 years in treating this infection. Combination therapy has taken sustained response rates (loss of the virus six months after therapy) from 5 percent to more than 40 percent. With genotypes II and III infections, we are able to clear the virus from the blood in over 70 percent of those treated. Thus, we can now talk about curing patients with this chronic infection.

Dr. Cary Caldwell and myself, both

Saint Raphael physicians, are also actively involved in hepatitis C research. We have three clinical trials in progress, including one to help patients who have not responded to standard therapy. We are still actively recruiting patients to take part.

Myron H. Brand, M.D., attending gastroenterologist, Hospital of Saint Raphael

### Write to us!

We welcome feedback. Mail your letters to Feedback, *Better Health* magazine, 1450 Chapel St., New Haven, CT 06511; fax (203) 789-4053; or e-mail [StRaph@aol.com](mailto:StRaph@aol.com).

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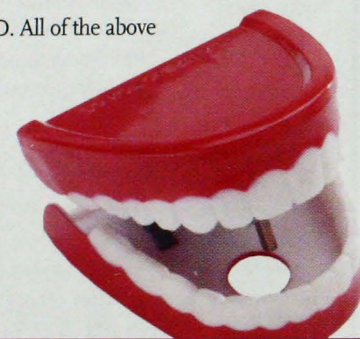


## what's your health i.q?

Circle the answers you believe are correct, and clip and mail this section to *Better Health* magazine, 1450 Chapel St., New Haven, CT 06511, or fax it to (203) 789-4053. Be sure to include your name, address and telephone number. All those with the right answers will be put into a drawing, and one lucky winner will receive a *Better Health* T-shirt.

### Bad breath can be caused by:

- A. Dry mouth      B. Dieting  
C. Hormone fluctuations  
D. All of the above



### How many miles does your blood travel each day?

- A. 120                      B. 1,200  
C. 12,000                D. 120,000

### Psoriasis is:

- A. Another name for flaky skin  
B. A fungal infection  
C. Greek for "itch"  
D. Caused by a virus

### Hives are most often caused by:

- A. A food allergy      B. Stress  
C. Bacteria in honey  
D. Being out in the sun too long

### Which is longer?

- A. Your small intestine  
B. Your large intestine

**OH NO!** We received many entries. But no one answered all five January/February questions correctly. Better luck this time around!

Answers will appear in the May/June issue. One entry per person, please. Saint Raphael Healthcare System employees and their families are not eligible to enter.

### CORRECT ANSWERS for the January/February quiz:

Gingivitis is (B) inflammation of the gums.

Your skin is your body's largest organ. If all your skin were removed, it would (A) weigh 7 to 9 pounds and stretch to about 20 square feet.

Stomach ulcers (sores in the stomach walls) are caused by (B) a bacterial infection.

There are (C) 206 bones in your body.

Eating pesticides on fruits and vegetables increases your risk of cancer. False. What increases your risk is eating too few fruits and vegetables — though it's definitely a healthy practice to always wash fresh fruits and veggies before you eat them.

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## timeout

How readers enjoy life

As a child, did you fall asleep as Mom or Dad read you a bedtime story? I did. So today, when I want to leave my cares and stresses behind, I curl up with the adult version — an audio book. Within minutes, I'm in another world. I use a portable cassette player with earphones, so I won't disturb anyone else. And if I drop off to sleep, the player shuts off automatically at the end of a tape. The sound of a someone reading to me is wonderfully soothing.

*Nancy Pfeiffer lives in North Haven*

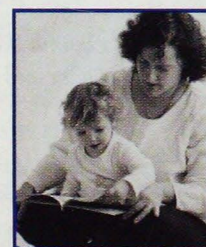
I share a small, one-bedroom apartment with three wonderful cats, Trap, Letti and Nipper. I call the smallest one Nipper because of his fondness for catnip. But all three enjoy playing with toys after I get home from work. Sometimes, we all fall asleep on the floor afterward. They are great fun to be with.

*Chris Cataldi lives in Milford*

Driving to work on busy Interstate 91 or 95, I listen to a CD of my favorite Italian tenor, Andrea Bocelli. I don't know the words he's singing, but it doesn't matter. His beautiful voice makes me forget the horrendous traffic and rude drivers. And before I know it, I'm at work and ready to start my day in a mel-low frame of mind.

*Kathy Vercellone lives in North Haven*

Write to Time Out, to dine out! Share your "secret" for relieving stress, and you might win a \$25 gift certificate to an area restaurant. Three winning entries are selected by our editorial staff each year — with the next winner announced in our May/June issue. Entries must be 150 words or fewer and mailed to Time Out, *Better Health* magazine, 1450 Chapel St., New Haven, CT 06511; faxed to (203) 789-4053; or e-mailed to [StRaph@aol.com](mailto:StRaph@aol.com).





## Exercise at home with your PC



If you think you've tried everything to keep yourself motivated to exercise, and your bike and sneakers are still gathering dust, you might consider turning to your home computer.

Sound crazy? It's not. As the Internet continues to open opportunities to improve our lives, exercising at home with your own PC may be just what's needed to keep more people moving into the 21st century.

Getting in shape is a perennial New Year's resolution. But boredom, rather than the difficulty of exercising, is what usually wears off the enthusiasm. Now, however, a variety of computer software and interactive training systems can hook up to your home computer a bike, treadmill or other fitness machines.

Some of the available programs can monitor your speed, distance and heart rate. Others, with 3-D animation,

graphics and sound, can take you bicycling in Hawaii or walking along the streets of Boston — or any other number of virtual worlds. Some programs even allow you to workout with virtual competitors, or race — via the Internet — against people all over the world.

Pretty amazing, huh?

Simpler programs can show you proper stretching and cool-down techniques, plus take you into aerobics classes. Many also offer interactive devices that tell you how much exercise you need to burn off a specific number of calories.

So next time you stop by your computer store, see what might get you moving and improve your better health. But hold off on any quick installations, no matter how excited you may be to get going. You need to talk with your physician before starting any exercise program — even a virtual one.

## Garlic is great for cooking, but that's about it

Over the past 10 years, word has spread that a diet rich in garlic might lower your cholesterol level. Natural and health food stores have been selling an increasing amount of garlic oil and garlic supplements. A more recent study, however, has failed to show any

cholesterol-lowering effects from garlic. So, if you like to cook with garlic (and don't mind its effects on your breath), fine. But don't expect it to cause any cholesterol-lowering effects.

Source: "Harvard Medical School Family Health Guide"



## Hand washing 101

Frequent hand washing is absolutely the No. 1 germ fighter. But believe it or not, few people know how to wash their hands correctly. Here's how health experts say it's done:

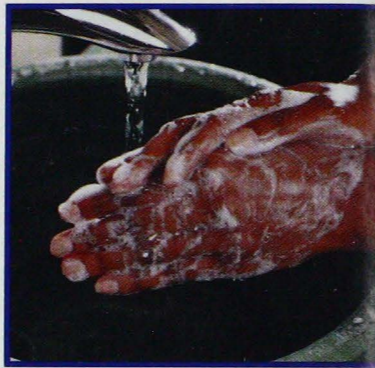
1. **Go for the soap.** The slippery lather made by soap's detergent loosens germs, so they wash off more easily. Antibacterial soaps kill germs, too.

2. **Get every nook and cranny.**

It's not the broad, flat surface of the palm that hides germs — it's the moist, warm valleys between fingers. Make sure you scrub around and under your fingernails, too.

3. **Rinse well.** Since most germs can't withstand much heat, use water as hot as you can stand. Then, use a paper towel or air dry. And avoid cloth towels. They'll only transfer new germs to your now germ-free hands.

According to the Centers for Disease Control, you should always wash your hands before preparing food, eating, changing a diaper, attending a wound or injury, handling an infant or inserting or removing contact lenses. You should always wash your hands after using the bathroom, changing a diaper, handling uncooked foods (especially meat, poultry or fish), playing with a pet, visiting someone who is ill, sneezing or blowing your nose, and whenever your hands do not feel clean.



## Uuuuuuggggh! Another ugly cold sore

Cold sores. Yuck. We often feel the slight tenderness and tingling they cause before we actually see them. But while there's little we can do to avoid cold sores, there are things we can do to make outbreaks easier to live with.

Cold sores are fluid-filled blisters that generally appear near the edge of the mouth, although they can also develop on the inner cheeks, gums, roof of the mouth or near the nostrils. At least half of all adults experience cold sores at one time or another, although they typically last a week to 10 days, first developing into a painful, swollen, and contagious red lump. After a day or two, the area blisters, bursts and crusts over.

Cold sores are caused by the herpes simplex type 1 virus, which is different from the one that causes genital herpes. Because the cold sore virus lies dormant in nerve cells after the

first outbreak, new sores can recur as frequently as every few weeks or as infrequently as every few years. They also usually appear in the same place every time.

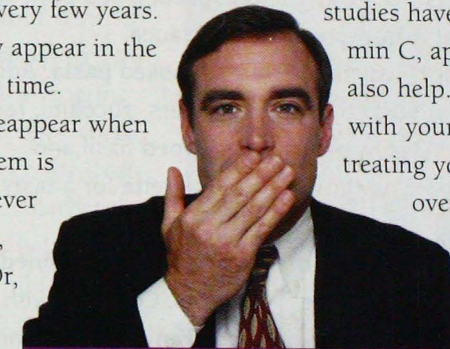
Sores often reappear when the immune system is depressed by a fever or viral infection, such as a cold. Or, they can be triggered by anxiety, fatigue, hormonal changes or overexposure to sun or wind.

Although non-prescription, topical antiviral medicines are available to treat cold sores, physicians aren't convinced of their effectiveness. Holding an ice cube to the affected area for a few minutes

several times a day can help reduce pain and dry out the cold sore. And studies have suggested that vitamin C, applied topically, may also help. But be sure to talk with your physician before treating yourself, or buying any over-the-counter creams or ointments.

Call your doctor immediately if you have a cold sore and develop eye pain or sensitivity to light. This may mean the virus has spread to the eyes, where it can damage vision.

Also don't hesitate to call if your cold sores last longer than two weeks, or recur often. You may need a prescription antiviral medication.



**Touching blisters can spread the virus. So can sharing towels, razors, drinking glasses and toothbrushes.**

## Tired of counting sheep, but just can't get to sleep?

■ Avoid caffeine, alcohol and tobacco — all of which can interfere with sleep and inhibit your body's ability to get the rest it needs.

■ Exercise regularly. Exercise helps tire your body in a natural way, promoting sleep. It's best to exercise in the late afternoon, not the evening.

■ Establish a normal sleep regimen to help your body regulate itself. When you go to bed a few hours later on any given evening, you accumulate "sleep debt," which cannot be erased by sleeping late Saturday morning.

■ Avoid eating immediately before bed. Don't go to bed hungry, but light snacks are preferable to heavy foods or large meals before bed.

■ Establish a "winding down" period. Try to relax

before hitting the sheets by reading, watching television or meditating.

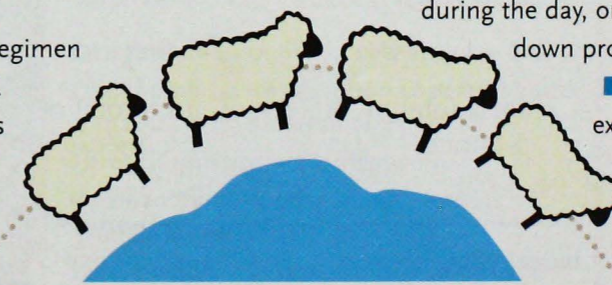
■ Avoid naps. Sleep during the day can often prevent good nighttime sleeping.

■ Avoid bedtime worrying by taking care of worries during the day, or setting aside time to write down problems and solutions.

■ Avoid sleep medications, except during periods of temporary stress. In the long run, sleep inducers can be habit forming and make sleep problems worse.

■ If sleep doesn't come within 15 minutes, get up and do something until drowsiness returns.

If you're following these suggestions and still have sleep problems, talk with your physician.





## minitopics

### Try these healthy time savers for dinner

Looking to whip together a quick, but healthy, dinner? Try this list of meal ideas from the "Great Adventures in Food" cookbook published in December by St. Martin's Press. All of them can be made with leftovers, and tailored for your taste buds.

**Cooked rice.** Make quick fried

rice by sautéing cooked rice with scallions; cooked, chopped carrots; cooked, diced pork or chicken; and soy sauce.

**Cooked pasta.** Add chopped red peppers, zucchini, red onion, chopped basil and vinaigrette for a tasty cold salad.

**Cooked or canned beans.** Combine with chicken stock, zucchini, chopped parsley and cooked couscous.

**Vinaigrette.** Steam spinach or arugula in vinaigrette for 1 minute and use to top broiled fish.

**Chopped herbs.** Puree chives with

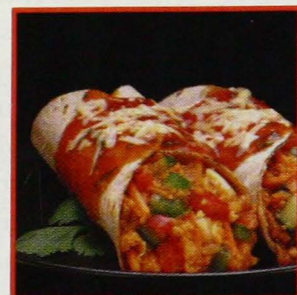
olive oil and drizzle over broiled flounder or other fish.

**Tomato sauce.** Cook with chopped eggplant, onions and olives, then spoon over ziti.

**Canned tuna.** Sauté with garlic, peas, white beans and chopped parsley, then toss with pasta and grated Parmesan cheese.

**Tortillas.** Roll up with chopped lettuce, tomatoes, onions and cooked meat, then top with low-fat sour cream and salsa.

**Rice salad or pasta salad, store-bought.** Add sautéed mushrooms and shrimp.



### How much should you eat today?

	Less active women, older adults	Children, teen girls, active women, less active men	Teen boys, active men
<b>Calories</b>	About 1,600	About 2,200	About 2,800
<b>Bread group</b>	6 servings	9 servings	11 servings
<b>Vegetable group</b>	3 servings	4 servings	5 servings
<b>Fruit group</b>	2 servings	3 servings	4 servings
<b>Milk group</b>	2-3 servings*	2-3 servings*	2-3 servings*
<b>Meat group</b>	2, for a total of 5 ounces*	2, for a total of 6 ounces	3, for a total of 7 ounces

\* Women who are pregnant or breastfeeding, teen-agers and young adults to age 24 need three servings

Source: American Dietetic Association

### Older kids may need help stopping thumb-sucking

Thanks to folklore and to Freud, people have all sorts of ideas about the significance of thumb-sucking in children. But there's no evidence that thumb-sucking is anything but a normal and typically harmless behavior of infancy and childhood, health experts say.

Roughly one out of every three children ages 1 to 4 will suck his or her thumb at least sometimes. About one in five children will still be doing so at age 5 or older. The habit is harmless if the child does it occasionally, such as during "tuck in" at bedtime, or in association with a stressful event.

But older children who suck their thumb or finger chronically may need guidance from parents or a dentist to stop the habit. That's because chronic finger-sucking can cause the child's permanent teeth to become crooked.

If you're in doubt, discuss the matter with your dentist. You may be reassured to learn that if your child is tapering off the thumb-sucking, there is probably no need for treatment. That's particularly true if the child still has baby teeth.

Oftentimes, children themselves will want help to stop. It has to do with social acceptance. Studies have shown that children are less likely to want to sit next to, or be in a class with, another child who is sucking his or her thumb.

If you think your child has a problem, you might want to ask a dentist or pediatrician for advice on some of the following methods to deal with the habit:

- Initially, try ignoring the behavior. In other words, don't give the child attention when he or she thumbsucks. Some children unconsciously

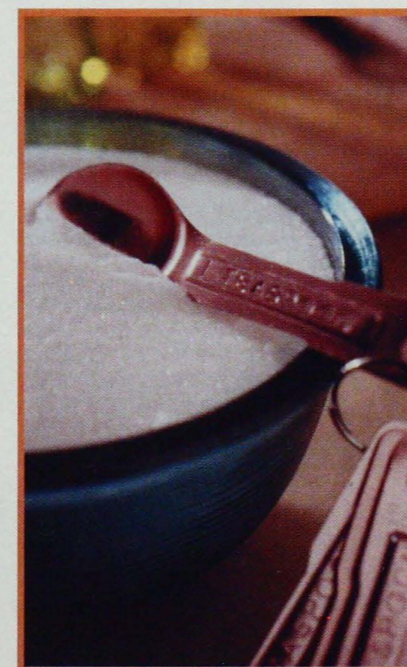


suck their thumb to get attention, even if it's disapproving attention.

- Put an obstacle on the child's hand. You might try a sock or glove, possibly secured with tape. You can also buy specially designed mittens, or a plastic thumb-guard that makes sucking difficult.

- Provide rewards. Mark a star on a calendar when the child goes without thumb-sucking for a day or leaves the sock or glove on all night.

Your healthcare providers can also give you advice about how to gradually phase out the use of these methods to keep the habit from returning.



**Don't have a scale or measuring cup handy to size up your servings? You can use your hand to make rough estimates:**

- One thumb** = 1 ounce of cheese
- One thumb tip** = 1 teaspoon of peanut butter, mayonnaise, butter or sugar
- Three thumb tips** = 1 tablespoon
- One handful** = 1 ounce of nuts, raisins or other snack foods
- Two handfuls** = 1 ounce of chips or pretzels
- One fist** = 1 cup cereal, pasta, vegetables or cut fruit
- One palm** = 3 ounces of meat, fish or poultry

**Did you know?**

Hemorrhoids can be the result of overzealous cleaning of the anal area, which inflames the veins. Good but gentle hygiene is important. Use moistened toilet tissues or baby wipes to clean after a bowel movement.

Source: Reader's Digest's "The Healing Power of Vitamins, Minerals and Herbs"



# A winning foursome!



Each year, tremendous sponsors, many generous friends, and 136 very special golfers team up with Saint Raphael's Auxiliary at the sell-out Men's Golf Tournament. They make a fabulous foursome — and in 1999, raised \$82,000 to benefit the patients and programs at Saint Raphael's Father Michael J. McGivney Center for Cancer Care.

**Special thanks to gold sponsors** Dimeo Construction Company; Hudson United Bank; MedSpan, Inc.; NEC; New Haven Savings Bank; and Physicians Health Services (PHS).

**Thanks and appreciation to silver sponsors** BeneCare Benefit Management, Inc.; CNS, Inc./CISCO; and Roosevelt & Cross; **hole-in-one sponsors** American Medical Response, Inc.; Arthur Andersen, LLP; BankBoston; BVH Engineers, Inc.; Fleet Bank; Elmer Laydon Construction Co.; Merrill Lynch; New Haven Radiology Associates; Pfizer USP; Prudential Securities; Spring Glen Medical Center & Whitney Surgical and Medical Center; and Titan Mechanical Contractors; and **eagle sponsors** Bergman, Horowitz & Reynolds, P.C.; Aldo DeDominicis Foundation; and Wiggan & Dana.

To these extraordinary friends and the many others — including birdie, par, and tee sponsors — who supported our tournament, a heartfelt thanks from the Auxiliary, Saint Raphael's, and most importantly, the patients who are helped by your thoughtfulness.

Save the date for 2000: August 28  
Racebrook Country Club, Orange, CT



Representing NEC — one of our most generous corporate friends and annual sponsor of the golf carts — were John Goodwin, Bill Cauley and Paul Marino.

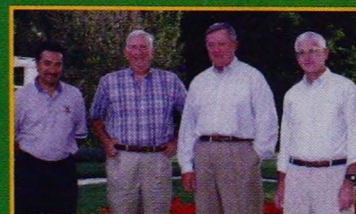


We proudly welcomed Hudson United Bank as a gold sponsor in 1999. Dr. Richard J. Dean celebrated a great day of golf with Hudson players Ken Luciani, Donald Camerato, Donald Calcagnini, and Stu Bush.



Our sincere thanks to MedSpan, Inc., a gold sponsor in 1999 after many years as a silver sponsor. Players were John Springer, Kevin Kelly, Trevor Reeves, and Jack Gioglio. MedSpan generously provided shirts for our golfers.

Gold sponsor Physicians Health Services helped introduce women to the tournament; its foursome included Michael Sansone, Kay Norbeck, Alex Garnett, and Margie Melillo.



Representing multi-year gold sponsor New Haven Savings Bank were Joseph Pauloski, Jr., Kenneth P. Kaminsky, Bill O'Brien, and Jerry Liba. This tremendous sponsor also gave each player a beach towel.

Playing for second-year gold sponsor Dimeo Construction Company were Don Cassin, Lee Blackwell, Tony DeMatteo, and Chris Migliaro.



## spotlight Faith can help make you healthy

Here's another good reason to make time for religion. According to national studies, people who attend religious services at least once a month live significantly longer than those who don't.

One reason for this: Church- and temple-goers generally take better care of their bodies. They're more like to be nonsmokers, physically active and the right weight. Health experts also believe that taking part in rituals and prayer, and being part of a community, can help reduce stress and create feelings of belonging and self-worth. And that, in turn, may spur you to take better care of yourself.

"Everyone talks about how important it is to take a holistic approach to life," says the Rev. Gerard Schmitz from Saint Margaret Church in Madison, a Catholic parish. "And spirituality is an important part of that approach. When our spirit is well, our bodies tend to follow."

Father Schmitz recently spoke with *Better Health* Editor Cynthia Wolfe Boynton about how being involved with a church or temple can lead to better health.

### BH: Obviously, this is a complex issue. But what's the correlation?

GS: For starters, the faith that comes along with believing in God, or a higher being, helps build inner strength. And a lot of people use their religious beliefs and practices, and that inner strength, to help them cope on a daily basis. If you want to cite statistics, a *USA Today* poll last year showed that 30 percent of men and 40 percent of women believe spiritual well-being is the most important ingredient in overall wellness.

### BH: What are the more every-day wellness benefits of attending services?

GS: How about this: Going to church or temple services makes us feel good. It gives us a break from our crazy lives and over-booked schedules to have quiet, quality time with our family. It allows us to sit back and think about all that we can be thankful for.

It allows us to make friends, and to be with people who share our same beliefs, values and morals.

Just think about what an incredible experience it is to go to a worship service. There's singing, rituals, prayers, fellowship and beauty everywhere. That creates a pretty amazing experience that takes you away from the everyday world, and allows you to let go of the stresses that consume your everyday life. And there, at your house of worship, you'll find people who will support you in hard times; shoulders to lean or cry on in times of crisis. Your faith community can be the best support group in the world.

There's also an education component. When you attend a religious service, you usually learn something. It's a place that makes you feel good about yourself, and in turn take better care of yourself.

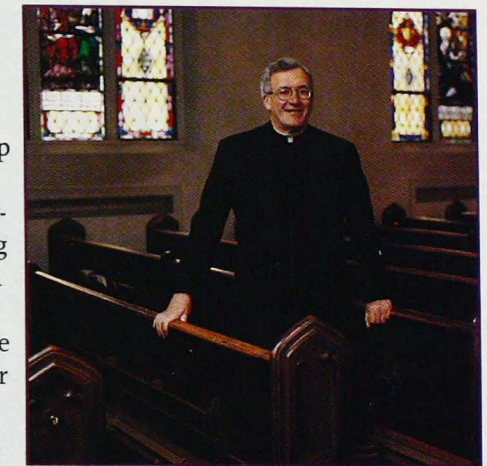
### BH: How do communities benefit?

GS: In countless ways. First, there are the social services that most church or temple congregations perform, such as donating foods to soup kitchens and food banks; collecting clothes for poor children; bringing meals to families in crisis; and generally reaching out to those in need. There's a lot of reaching out involved, helping people both within and outside the congregation meet physical needs.

And that sense of giving to others, and to the progress of a community, makes us feel great. It makes us have a healthier outlook on our lives, and what we can accomplish. And it makes our community a nicer place. Who doesn't want that to happen? I believe firmly that regularly attending services makes all the difference in the world, to the world.

### How can we help?

- If you don't belong to a church or temple, consider joining one. If you don't know where to start, thumb through the Yellow Pages or ask a family member or friend.
- If you already belong to a house of worship, get involved in activities there — and involve your children.



The Rev. Gerard Schmitz of Saint Margaret Church in Madison.

### BH: So how do you convince people to make the time?

GS: There's no doubt that religion is an important part of most of our lives. Polls show that more than 90 percent of people in the United States believe in God or a higher power. But the downside is that only about half of those people regularly attend religious services. And they're missing so much. Sports and rest are fine on weekends, but shouldn't be done at the sacrifice of attending a worship service.

We need to prioritize our lives, so they include time for worship. There are so many competing factors with service times, especially with youth activities. But with a little ingenuity and rearranging, services can fit in, too. Many churches and temples offer multiple times to worship, so everyone can find a convenient time to attend.

There's no doubt that there are a lot of good people who don't go to services; who don't carve out the time. But look at the benefits. They're indisputable. Maybe heaven can wait, but going to church or temple can't. ☺



By Carolyn Milazzo

# Take a bite out of FOOD ALLERGIES

When Matt Tarby became violently ill at age 11 after eating a platter of fried scallops, he thought he had gotten a bad batch.

About six months later, Tarby ordered fried scallops again and devoured them, only to be faced with the same set of troubling symptoms as before: projectile vomiting, a tightening in his throat and shallow breathing.

Undaunted, Tarby ate scallops one more time at age 14 and suffered the same terrifying consequences. "I guess I was a little dense. I thought it was something I'd grow out of," says Tarby, 33, of Seymour. "Now I don't touch scallops, and I stay away from seafood stuffing and seafood platters. I just figure it's easier to live without them."

Tarby learned the hard way that he has a food allergy and is now following medical experts' advice for avoiding another attack — strict avoidance of the offending food. But while avoidance seems like an easy solution, health professionals warn that food allergies are nothing to sneeze at. Their symptoms — including nausea, itchy hives, breathing difficulty and swelling — can be miserable. And in extreme cases, food allergies can be deadly. According to the national, non-profit Food Allergy Network, an estimated 125 Americans die each year from food allergies.

Although surveys show that up to 33 percent of Americans believe they have food allergies, only about 1 to 2 percent of adults and 5 percent of children have true food allergies, according to the National Institutes of Health. So why do as many as one in three people believe they're allergic to certain foods? The answer lies in the confusion between a food allergy and what is more likely a

food intolerance.

"The term *food allergy* is used very broadly and incorrectly," explains Anne Munoz-Furlong, who founded the Food Allergy Network in 1991, after her infant daughter was diagnosed with severe allergies to milk and eggs.

Adds Marianne Wiese, chief clinical dietitian at the Hospital of Saint Raphael: "A lot of people have self-imposed food allergies. They've been told by someone that they have a food allergy, but they've never been tested and have no true symptoms of a food allergy, which can be life-threatening."

## Here's the difference

Simply put, a food allergy is any severe, adverse reaction to a specific food (usually a protein), where the immune system creates antibodies. These antibodies release histamines and other chemicals

## 8 most common food allergy triggers

Peanuts	Milk	Eggs	Wheat
Soy	Tree nuts	Fish	Shellfish

that cause allergic reactions, including hives, rashes, eczema, nausea, diarrhea, vomiting, sneezing and shortness of breath. More serious symptoms are swelling of the lips, tongue or mouth; itching and tightness in the throat; labored breathing; asthma and wheezing.

Very allergic individuals may experience anaphylaxis, a life-threatening reaction that appears within minutes of ingesting the allergic food. When this happens, immediate medical treatment to open up airways and blood vessels — usually injections of epinephrine (adrenaline) — is critical. So call 9-1-1 to get to the nearest hospital emergency department.

About 175 foods or additives, including the spices cumin, coriander, oregano and fennel, plus certain food dyes, have been found to cause these kinds of allergic reactions. However, the culprits for 90 percent of food allergies are peanuts, milk, eggs, wheat, soy, tree nuts (almonds, walnuts, pecans, etc.), fish and shellfish.

Food intolerances are also adverse reactions to foods, but don't involve the immune system, are far less severe and much more prevalent. Roughly 28 percent of Americans suffer from a food intolerance, which most commonly is caused by the lack of a specific digestive enzyme. For example, people who are lactose intolerant lack the enzyme lactase, which is needed to digest milk sugar. Symptoms of lactose intolerance include gas, bloating, diarrhea and abdominal pain.

Many people who suffer from migraine headaches have an intolerance to tyramine, an enzyme found in hard cheese and wine. People with an intolerance for the sugar saffrose suffer gastrointestinal distress, including gas, when they eat peas or beans.

Medication and a restricted diet can help stop the uncomfortable, painful or annoying symptoms that can come with a food intolerance. But both food allergies and intolerances can strike at any age and without warning, says James Rosen, M.D., an allergist with the Connecticut Asthma and Allergy Center in West Hartford.

Some people, for example, develop lactose intolerance after a severe gastrointestinal virus, which strips from the gut the enzyme needed to digest milk products. Thus, it's imperative that people who exhibit even minor symptoms of a food intolerance or allergy — a tingling

tongue or itchy mouth after eating peanuts, for example — to be properly diagnosed and have a management plan put in place. For those with a food allergy, subsequent exposures to the trigger food can cause more and more severe attacks, or even be fatal.

Rosen recounts the case of one woman who knew she was allergic to pine nuts, but went out to dinner and ate a plate of pesto, which she didn't realize was made with pine nuts. She died that same night from an allergic reaction.

Another fatality occurred when a man who knew he was allergic to walnuts ordered a cinnamon raisin bagel at a doughnut shop, but was mistakenly given one with walnuts. After eating the bagel, the man developed difficulty breathing and called his doctor, but died in his car.

Both fatalities occurred because the victims made the same mistake made by many with food allergies, Rosen says. They failed to carry a prescription emergency allergy kit to combat an exposure.

These kits (which should be checked periodically for damaged, old or expired supplies) usually include emergency doses of epinephrine and an antihistamine like Benadryl. They're something people with food allergies should have with them at all times. And friends and family members should know where they're kept, too.

Young people diagnosed with food allergies are particularly negligent about carrying their medicine, "and that's both sad and foolish," adds Rosen, who's board-certified in allergy and immunology and pediatrics. "Accidental exposures can occur at any time."



Nabbing the culprit

One of the biggest stumbling blocks facing those with food allergies or intolerances is identifying the problem, experts say. "A lot of people have symptoms of food allergies or intolerances, but then don't connect the dots," Rosen explains.

That was the problem facing Roger Wilson, a 35-year-old construction company project manager from Madison. When Wilson became plagued with stomach aches and severe bouts of diarrhea last year, he chalked it up to bad fish and later, stress. But when his gastrointestinal problems persisted over a period of months, he finally went to his doctor and was diagnosed with lactose intolerance.

Wilson was shocked by the diagnosis because he never before had problems eating cheese and ice cream, two of his favorite foods. Although his doctor prescribed medicine to help control the problem, Wilson finds it easier to just avoid milk products.

"Whenever I try to eat ice cream or cheese, it just upsets my stomach," Wilson says. "It got to the point where the reward of having something you like is not worth four days of feeling ill."

Now, I know what to avoid so I don't get these symptoms."

While Wilson's food intolerance resulted in days of discomfort and time off from work, the condition was much more severe for Sue DiMassa, a 39-year-old mother of three and dietary aide from Hamden.

After tests showed she was severely anemic, and iron pills failed to correct the problem, doctors found she had an intolerance to gluten, a protein in wheat, which was preventing her body from properly absorbing iron and other fat-soluble vitamins.

After her diagnosis, DiMassa cut wheat, rye, barley and oats from her diet — initially a difficult task because she's always loved pasta, pizza, pies and breads. But she says she's learned to adjust to a new diet, which consists of more rice, fruits and vegetables.

## Eating safely

Since strict avoidance of foods that trigger allergies and intolerances is the best way to avoid reactions, experts recommend that people read labels on foods, drinks and even medicines. And since most life-threatening allergic reactions to foods occur when eating away from home, it's important to explain your situation to your host or food server.

In addition, people who suspect they suffer from food allergies or intolerances should be properly diagnosed by a physician certified by the American Board of Allergy and Immunology. To make a diagnosis, doctors will often take a thorough medical history, analyze a food diary and conduct a series of exams, including skin pricks, blood screenings and food challenges (using different foods to test for allergic reactions).

"I'm eating a lot healthier now," says DiMassa, who suspects she had the intolerance for several years before she was finally diagnosed. "And I'm a much more careful consumer. I read every ingredient on every label." ☺

Want more information on food allergies and intolerances?  
Contact The Food Allergy Network at 1-800-929-4040 or [www.foodallergy.org](http://www.foodallergy.org).



## Bill Bowie

At 81 years old, Bill Bowie says there's only one thing he doesn't do: make enough money.

"I feel like I'm 50, maybe 45," says the veteran trumpet and piano player who teaches youngsters part-time at the Neighborhood Music School in New Haven. "My cardiologist tells me my heart's like that of a 45-year-old man. I'm glad to hear that."

Bowie says he still lifts barbells and always eats right. But what keeps him young is something a bit more intangible.

"Music has always kept me going," Bowie says. "Music gives you a chance to build on success. A little kid comes in and he can't make a sound. But then when he leaves, you've got him or her making a sound, or playing a whole scale. Occasionally, I pick up my horn and show them what I think is a good sound. I think they can see I'm genuine and that I love them, no matter what their ability is."

Bowie also doesn't take for granted the influence of his wife, Elsie, 79, on his vitality. "She'll say I can have a scoop of ice cream today, but I can't have any tomorrow."

Bowie's diet, which clearly includes a steady dose of humor, consists of oatmeal for breakfast and one multivitamin every day. Also aiding his good health are his good feelings toward life. Bowie describes himself as the kind of guy who likes to talk with people on the sidewalk, and old age isn't curtailing his sociability.

"The longer men live, the more their smartness comes out," he adds. "As men get older, they learn how to live."



# Five over

# 50

## They're fit, feisty and fantastic

By William Hanrahan

**F**ifty can be a turning point for many men.

It's the half-way mark, so to speak, when career dreams can suddenly be dashed by realistic limitations, and the inevitable aging process can start to wear you down. Male menopause (yes, it does exist) can hit, causing your sex drive to dip, along with your general spirits. And for some, it's a time that just feels old.

But 50 and far beyond can also be a time for powerful awakenings and great personal achievements. After all, you're only as old as you feel, people say. And the experts say anyone with average health and the right mindset can find their 50s an exciting and invigorating port-of-entry to their vintage years.

"Life is just beginning for me," says Baba David Coleman, a 52-year-old West African drummer and drum maker who teaches percussion to children and adults at New Haven's Neighborhood Music School. "I'm discovering so many new things."

For Coleman, the beauty of life has come into clearer focus with age. He quit smoking a few years ago and now takes vitamins daily and drinks lots of water. But those habits are just anecdotal to his well-being. The realization that you only live once is what brought about a deeper change.

"I've got a 9-year old daughter," Coleman explains. "And my wife reminded me that if I want to spend time in the future with my child, I have to be mindful of how I treat myself. She was right."

### A new beginning

Doctors agree 50 is the perfect time for men to assess their phys-

ical and mental health. But before you start making improvements — deciding to start running three miles a day, changing your eating habits or joining a gym — you need to make an appointment with your physician for a complete physical exam.

"Age 50 should be kind of a red flag," asserts Stephen Atlas, M.D., medical director of the Primary Care Center at the Hospital of Saint Raphael.

Doctors will typically evaluate a 50+ man based on his family medical history, such as whether there's reason to suspect heart trouble or cancer. A head-to-toe physical, including an overall skin exam, will be performed, as well as preventive screenings. These generally include a:

- **Testicular exam.** Checks for cancer, hernias and other problems.
- **Urinalysis.** Measures sugar and protein levels in the urine; tests kidney function.
- **Complete blood count.** Measures red blood cell count for anemia.
- **SMAC blood test.** Tests liver, heart and kidney functions; measures blood sugar, cholesterol, blood gases and electrolytes.
- **Electrocardiogram.** Tests the heart's electrical impulses, measuring how well it moves blood through the chambers.

Age 50 is also the right time for a colon exam to test for precancerous polyps, as well as a prostate exam for prostate cancer. Anyone who's ever engaged in unprotected sex should also be tested for HIV.

"The tests are quick," says Atlas, who's board-certified in internal medicine. "The worst part is thinking about them."

Establishing a rapport with a physician is also beneficial. This way as you continue to age, your

doctor knows you, and you know your doctor. "The cliché about an ounce of prevention being worth a pound of cure is absolutely true," Atlas adds.

But there's more to a healthy person than just the physical.

According to Branford psychiatrist Boris Rifkin, M.D., an attending physician at the Hospital of Saint Raphael, it's particularly important for men over 50 to watch for signs of depression.

Good mental health is vital, Rifkin says, because the lack of it can lead to physical problems. Real depression can cause difficulties at work, problems with family and complications with chronic health problems, such as diabetes and high blood pressure.

"It affects the heart, immune system and brain function. People have to understand that depression is a total body dysfunction, not just mood," explains Rifkin, who's board-certified in psychiatry. "Depressed people are more likely to have strokes and heart attacks."

Thankfully, depression can be treated successfully with many forms of medication, therapy and also some lifestyle changes. "You have to feel that you can do something to alter the odds if you see them against you," Rifkin says. "People may have misgivings about turning 50, but the depressive impact of 50 shouldn't be exaggerated. It's still a young age."

## Sen. Joseph Lieberman

Do you know what U.S. senators really do in Washington?

"I do push-ups in my office three or four times a day, just to revive myself — just to get my blood pumping," says U.S. Sen. Joseph Lieberman. "Your fellow workers may think you're nuts, but you can do push-ups anywhere, any time."

Push-ups are just one trick Connecticut's junior senator uses to stay sharp in a public world that's busier and more demanding than most. "One of the most important attributes is to be in good shape," says Lieberman, a New Haven resident.

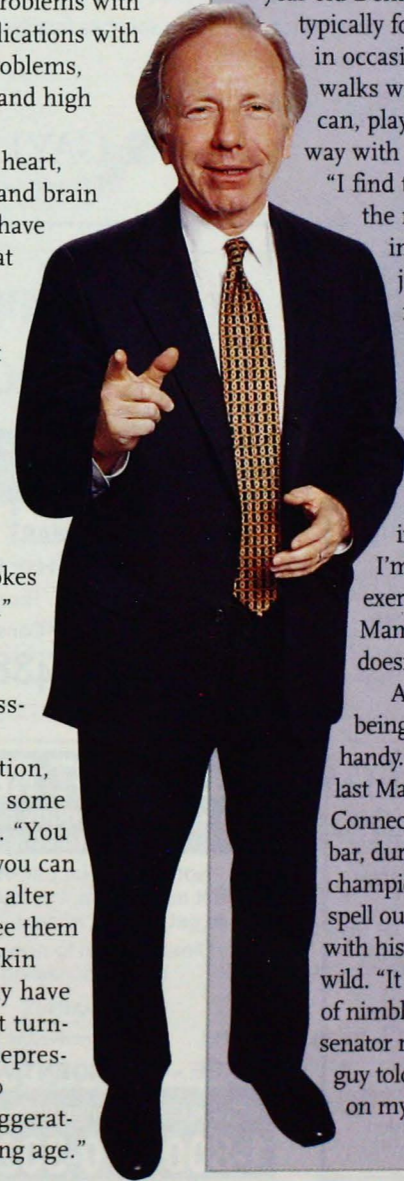
"Particularly when you're campaigning. It's very physically and mentally demanding."

Three to four times a week, the 57-year-old Democrat also goes for a jog, typically for a half-hour. He mixes in occasional morning swims, walks with his wife and, when he can, plays basketball in the driveway with his 11-year-old daughter.

"I find that the busier I am and the more tired I am, the more important exercise is. It just sort of regenerates me," Lieberman says.

He first began appreciating the importance of exercise and stretching watching his father, a liquor store owner, who regularly did calisthenics in the store. "I just feel like I'm more alert every day if I exercise," he adds. "Like Mama's chicken soup, it sure doesn't hurt."

And you never know when being in shape will come in handy. The senator was called on last March to lead a University of Connecticut cheer in a Hartford bar, during the men's national championship game. He had to spell out each letter in "UConn" with his body, as young fans went wild. "It required a certain degree of nimbleness and flexibility," the senator recalls. But, he added, "one guy told me I need a little work on my Ns."





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## Al Terzi

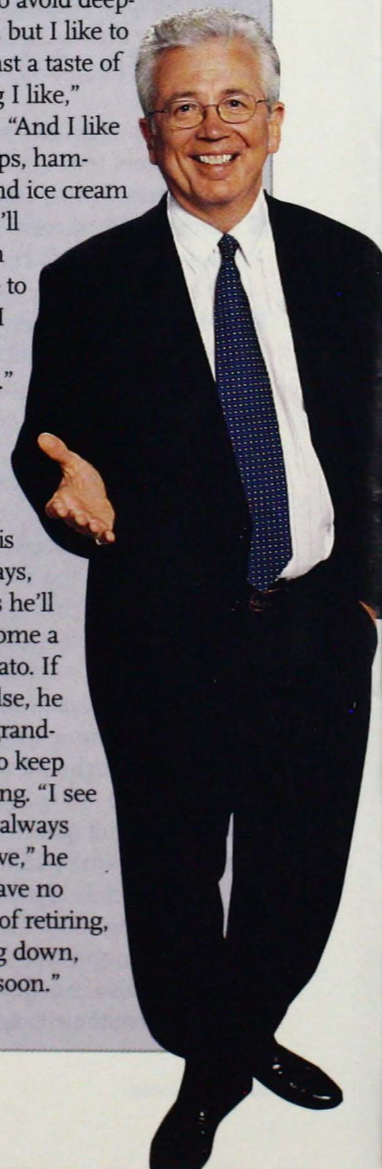
Channel 3 newsmen Al Terzi says being on TV requires a sharp mind and a sharp look — both of which he could lose if he didn't stay healthy.

So to stay at his peak, this 57-year-old Southington resident regularly plays golf, runs, walks, and even stretches and wiggles his toes to stay loose. "In this job, you have to stay reasonably fit not only for performance, but for appearance," he says. "It's pretty intense. The creative juices have to be flowing. I think the biggest thing is keeping the oxygen flowing to the brain."

Terzi also eats right. But his definition of a good diet is to get at least a little of everything he likes.

"I try to avoid deep-fried stuff, but I like to have at least a taste of everything I like," says Terzi. "And I like potato chips, hamburgers and ice cream sundaes. I'll have them from time to time, but I don't go overboard."

Terzi admits he used to work out more in his younger days, but insists he'll never become a couch potato. If nothing else, he has four grandchildren to keep him moving. "I see myself as always being active," he adds. "I have no intention of retiring, or slowing down, any time soon."



FIVE OVER 50

## Start with healthy habits

Assuming that many 50-year-olds can emerge from their doctor's offices with good check-ups, how can that good health be made even better?

There's little denying that giving up smoking, controlling your drinking and watching what you eat are essential to better health. And just about everybody knows this drill: not too much fat or cholesterol, and easy on the sugar, caffeine and salt. It's all about moderation.

The benefits of these and other healthy habits are that they can add to your life expectancy, experts say. According to one study involving almost 7,000 adults in Alameda County, Calif., there was a difference of 11 years in life expectancy between people who maintained healthy habits and those who didn't.

But exercise may be the biggest key of all, experts say. The benefits of aerobic exercise can ripple throughout the body, affecting everything from brain efficiency to sexual vitality.

New Haven Savings Bank President Charles Terrell, an active 58-year-old, says people need to find a form of exercise that's fun — not a chore. He recommends working out with others, or joining a team. He also suggests doing different kinds of exercises to avoid monotony.

Bruce Walker, head of the Silent Dragon Kung Fu and Tai Chi School in West Haven, believes that using your whole body as much as possible — such as in tai chi — is the secret. "If you ignore it, it goes away," he says. "Again, it's use it or lose it."

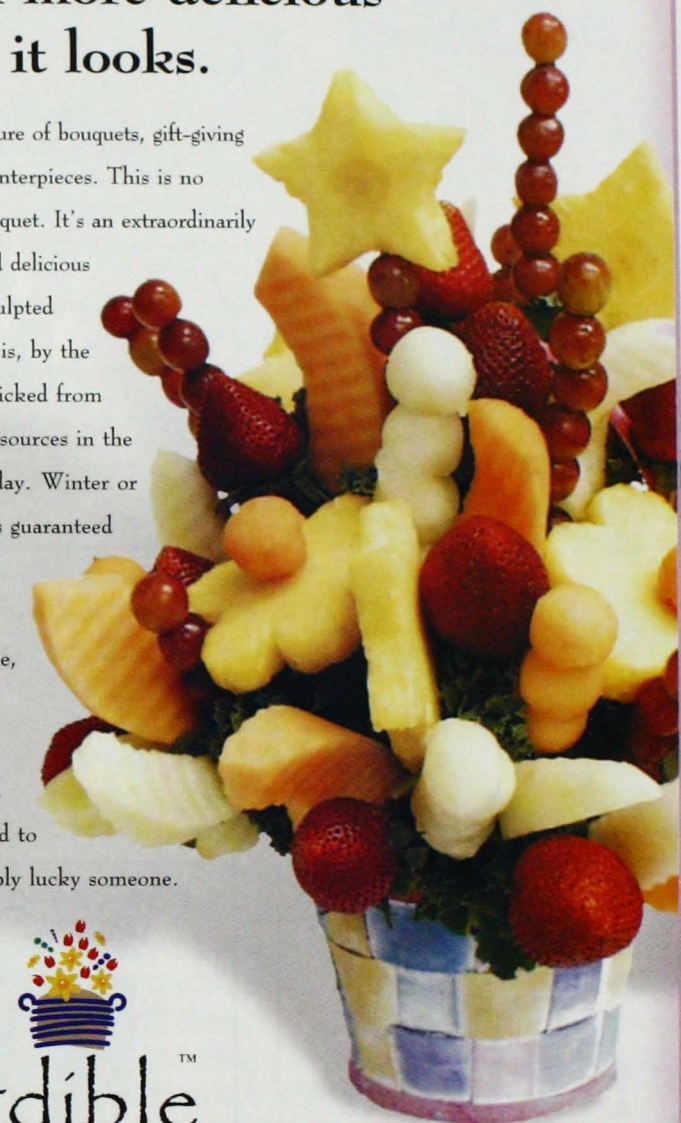
## Ready, set, go!

But do you have the determination to be the person you want to be?

People typically re-evaluate their lives at the decades, and sometimes they don't like what they see, says Marian Stansbury, Ph.D., a counselor based in Milford. Getting the motivation to improve one's life is the first step, she says. Many people may not suffer from clinical depres-

## Even more delicious than it looks.

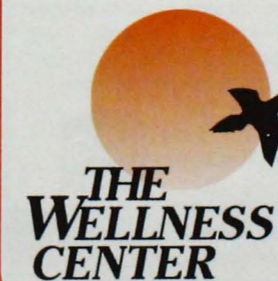
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(203) 387-2522

### Charles Terrell

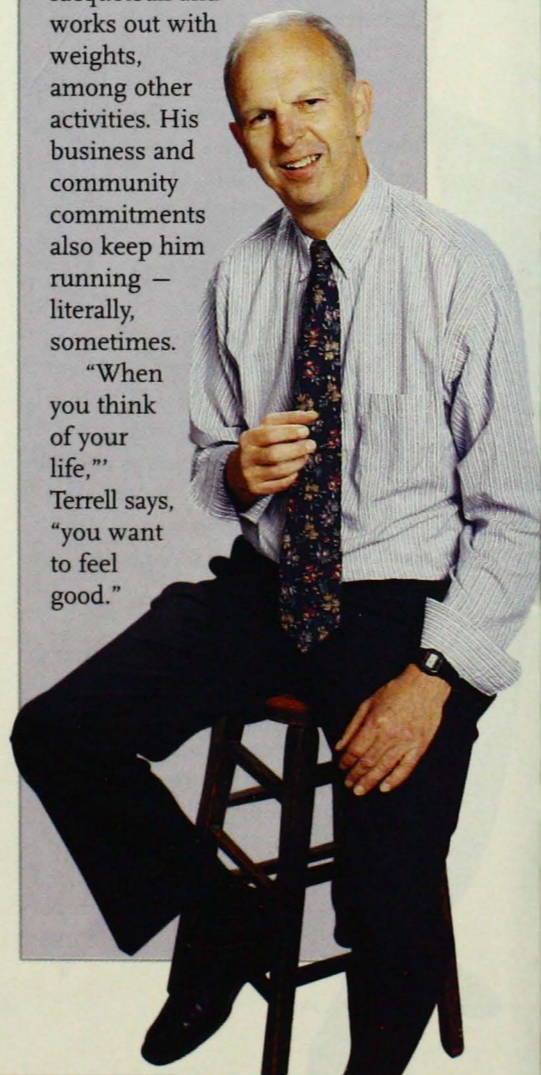
New Haven Savings Bank President Charles Terrell has one bit of advice for the couch potatoes of Greater New Haven: Get moving.

"People who haven't experienced an 'aerobic high' — the great, great feeling that comes from exercising — just don't know what they're missing."

Terrell, 58, started working out seriously in his 30s, not long after his 50-year-old father died of a heart attack. But what started out as a preventive strategy turned into a healthy addiction. And these days, he just doesn't feel right if he goes more than a day or two without working out.

The key to keeping up a regular exercise regime, Terrell says, is variety. He plays soccer in an over-40 league, runs, bicycles, plays racquetball and works out with weights, among other activities. His business and community commitments also keep him running — literally, sometimes.

"When you think of your life," Terrell says, "you want to feel good."



1999: A Community Report

# Advancing the Art of Healing

### Dear Friends:

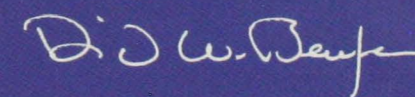
Welcome to "Advancing the Art of Healing," a report to our community. As we greet the new millennium, we want to share some of our activities and accomplishments of the past year. Yet, even as we look back, it is important to realize that our story is ongoing. It began 93 years ago, and continues, uninterrupted, every single day.

Every day at Saint Raphael's, we provide sophisticated, compassionate health care to a diverse community. Every day, in collaboration with our physicians and staff, we make a difference in people's lives. And every day, we strive to fulfill the mission adopted by our founders and sponsors, the Sisters of Charity of Saint Elizabeth. That mission calls on us to improve our community's health by stewarding our resources according to the principles of dignity, charity and justice, with special concern for the poor, the elderly and the needy. Many things change with the passage of time, but our mission does not. It is as vital today as it was nearly one century ago.

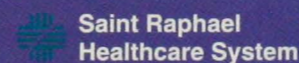
It was my pleasure to join Saint Raphael's last July as president and chief executive officer. Sister Anne Virginie, now vice chairperson of the Saint Raphael Healthcare System Board and president of the Saint Raphael Foundation, is focusing her attention on forging community linkages. She remains an essential and highly visible member of our team. We salute Sister Anne for leading Saint Raphael's to its position of prominence, and for her 50 years as a Sister of Charity.

Some people say that healing is an art. At Saint Raphael's, we strive to advance that art in an ever-changing world. This report reflects some of our efforts, our vision, and our successes.

Sincerely,



David W. Benfer, FACHE  
President, Hospital of Saint Raphael  
and Saint Raphael Healthcare System





## Connecticut's only Top 100 Hospital—and more

Generations of patients have turned to Saint Raphael's. They trust in, and depend on, Saint Raphael's for excellent care. So when we were singled out by national organizations for the quality of care we provide, and the efficiency in which that care is delivered, we were pleased — but not surprised. These distinctions included:

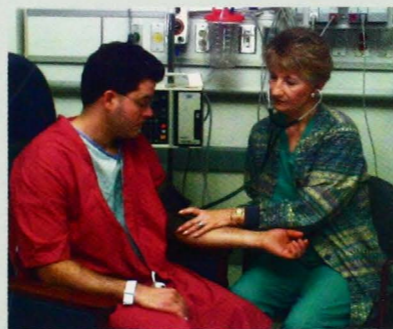


M.D.s Mark Schoenfeld and Mark Maritz in Saint Raphael's electrophysiology laboratory.

- Only Connecticut hospital named as one of the Top 100 U.S. Hospitals for overall services. We are one of only 15 major teaching hospitals chosen. This is the second consecutive year we've been recognized by HCIA, an independent, national research firm.
- One of the Top 100 U.S. Hospitals for cardiac services (HCIA).
- One of the Top 100 U.S. Hospitals for orthopedic services (HCIA).
- One of "America's Best Hospitals" (top 50) by *U.S. News & World Report* in cardiology/cardiac surgery, hormonal disorders, and respiratory disorders.

## New surgical center responds to growing demand

Saint Raphael's opened a new surgical center in November on its New Haven campus to meet the growing demand for outpatient surgery. The facility, designed with patient convenience, comfort and privacy in mind, offers easy parking, pre- and post-op areas, and separate recovery areas just for children. Over the past decade, outpatient surgeries at Saint Raphael's have increased 59.1 percent, compared with a statewide increase of 51.6 percent. During fiscal 1999 alone, Saint Raphael's — as the region's leading provider of surgical services — performed almost 17,500 surgeries, including 9,000 ambulatory procedures. The surgical center is part of Saint Raphael's new ambulatory/surgical facility, which also houses a new outpatient radiology area and 200-seat auditorium. The three-story, 88,000-square-foot facility also includes portions of the Emergency Department and Trauma Center.



Joan Wnek, R.N., takes the blood pressure of ambulatory surgery patient Anthony Rodriguez of East Haven.

## Especially for seniors

Saint Raphael's continues to be the provider of choice for seniors in Greater New Haven. In addition to addressing their acute care needs, Saint Raphael's offers older adults many programs and activities. One of the most popular is

CareCard member Elizabeth Roland of Woodbridge gets ready to strike.



CareCard, a free health and wellness program. CareCard members can participate in a variety of programs: health screenings; educational seminars; income tax assistance; exercise and recreational programs, like a new weekly bowling league; or programs like "Best Benefits," which offers discounts on prescription drugs and medical supplies, such as eyeglasses. With about 22,000 members, CareCard is the largest program of its kind in the state. Among Saint Raphael's other services for seniors are Project Eldercare, providing convenient primary care and social services at seven elderly housing complexes and senior centers; and the ElderSource library, offering information on everything from nutrition to assisted living facilities.

## Focusing on quality...and care with dignity



Gina Tolibas, R.N., shares a warm moment with the Rev. John Horgan, a resident of Saint Regis Health Center.

Patients and their families rightfully expect that any care delivered within the Saint Raphael Healthcare System will be of the highest quality, compassionate and respectful of each patient's dignity. While this is our commitment to all patients, we are particularly mindful of this at Saint Regis Health Center — our 125-bed skilled nursing facility and New Haven's only Catholic nursing home. We've embraced the national, proactive emphasis on quality care established by the Joint Commission on Accreditation of Healthcare Organizations and the Health Care Financing Administration. Nurses like Gina Tolibas, R.N., in working with residents such as the Rev. John Horgan, closely monitor such quality indicators as prevalence of patient falls, medication use, nutrition, use of restraints, skin care, and physical functioning. Comparing our data with, and striving to exceed, national "best practices" is the best way to show our residents how much we care.

## Traveling miles for children's smiles

We're on the road again. Smiles to Go, Saint Raphael's dental clinic on wheels, made its inaugural visit to a New Haven school recently, providing basic dental care to children who lack access to such services. The full-size tractor-trailer, housing two examination/treatment rooms, is visiting schools in Greater New Haven where there is a demonstrated need. In its first year, it is expected to provide dental care, education and related services to 3,000 children. Data from the Greater New Haven Partnership for a Healthy Community, and local and state health departments, show a great need for these services, because not enough area dentists accept Medicaid, and many families lack dental insurance or transportation. Lack of proper dental care can lead to serious health problems, including heart and gum disease. Smiles to Go resembles Saint Raphael's award-winning Project MotherCare clinic-on-wheels, which travels throughout the city and surrounding communities to provide prenatal and primary care.

## Smiles to Go!



Saint Raphael's Mobile Dental Clinic

## Fighting cancer on multiple fronts

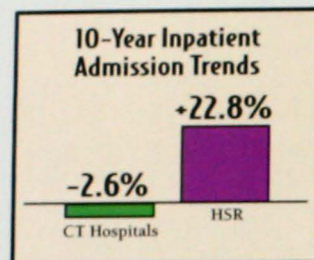
The exceptional care provided in Saint Raphael's Father Michael J. McGivney Center for Cancer Care takes many directions. In addition to state-of-the-art technology to diagnose and treat cancer, patients and their families can now find the most up-to-date information on cancer right at their fingertips. The Center hosts a patient resource center sponsored by the South Central Connecticut/Middlesex chapter of the American Cancer Society. A computer provides access to the vast resources of the Cancer Society's information database, covering everything from cancer treatments to nutritional information, risk factors, screenings and support groups. The database is updated every morning, and volunteers help those who aren't comfortable using a computer. On another front, Saint Raphael's is participating in one of the largest studies ever on breast cancer prevention. The national STAR trial is assessing the effectiveness of specific drugs in preventing this disease.

Volunteer Bert Bockley helps patients access a database of cancer information.



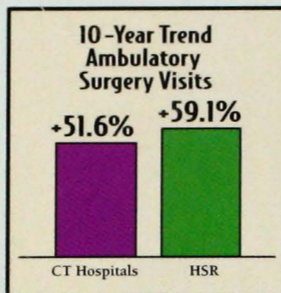


### More patients than ever are turning to us



Saint Raphael's mission calls on us to improve the health status of our community by providing a comprehensive range of quality health-care services. We're working hard to fulfill this pledge. Drawn by our nationally-recognized care and role as a teaching hospital affiliated with Yale University School of Medicine, the demand for services offered by the Saint Raphael Healthcare System is very strong...and growing. The Hospital of Saint Raphael — through its wellness, occupational medicine, outreach, and acute care services, both on our campus and in community-based pro-

grams — cared for more patients than ever in 1999. Saint Regis Health Center, Saint Raphael's skilled nursing facility, provided care with dignity to its 125 residents. And the nurses, aides, therapists, and other caregivers of our homecare partners, Regional Visiting Nurse Agency and Shoreline VNA, helped more patients than ever recuperate, or stay well, at home. And in doing so, they provided peace of mind to their families.



### Reaching out to meet diverse community needs

Nine community representatives have joined our Minority Health Advisory Committee, chaired by Roberta Saunders-Gray, the Hospital of Saint Raphael's chief operating officer. This special group is helping us better meet the healthcare needs of our minority communities. Committee members share their insights and thoughts on the needs of these diverse groups. They also serve as a link between Saint Raphael's and other community agencies, act as a sounding board for our goal of improving the community's health status, and guide us in our efforts to promote equity and justice in public policies. By working directly with community representatives, we are attempting to ensure that our efforts are on target. The top priority identified by committee members so far is ensuring that everyone has access to health care, with a special emphasis on children and families.



Representatives of Saint Raphael's Minority Health Advisory Committee.

### Y2K was A-OK

The new millennium arrived at Saint Raphael's without a hitch; there were no major problems with equipment anywhere within our healthcare system. This smooth transition resulted from three years of hard work and planning spearheaded by our Information Services team. The staff time commitment organization-wide over the three years totaled more than 50,000 hours, and the incremental expense was more than \$3 million. Special teams assessed and tested equipment and critical systems at the Hospital, Saint Regis Health Center and our affiliated homecare agencies. Non-compliant equipment was modified or replaced. The Y2K team also helped individual departments prepare contingency plans, in case of equipment or infrastructure failure, either within the system or outside. When the clock struck midnight, teams were standing by to tackle potential problems. However, the thorough preparations paid off and both patients and staff enjoyed a happy, if uneventful, New Year's Eve.



Julius Gallo, clinical engineering technician, in the Y2K testing laboratory.

### Bringing quality care conveniently to you



An architectural rendering of Saint Raphael's Hamden Surgery Center, now under construction.

Many of our patients come from Hamden, North Haven and adjacent communities. To provide them with a convenient alternative to our New Haven campus, we've opened a blood drawing station in Hamden, and will be opening a freestanding ambulatory surgery center there this spring. The blood drawing station, in the Spring Glen Medical Center, 2200 Whitney Ave., is open six days a week, with walk-in patients welcome. The surgery center, at 2080 Whitney Avenue, has four operating rooms and a minor procedures room, each equipped with state-of-the-art technology. There are also special play and recovery areas for pediatric patients. A comprehensive array of surgical procedures will be performed there, by the same doctors who practice at our New Haven campus. Patients will receive the same compassionate care and respect for their dignity that they expect from Saint Raphael's. Just closer to home.

### H.O.P.E. program earns national recognition

Saint Raphael's H.O.P.E. program earned the national "Extraordinary Program Award" from the American Society of Directors of Volunteer Services. H.O.P.E. stands for "Having an Opportunity to Prepare for Employment" — and that's exactly what the program does. It helps community women make the transition from welfare to work through counseling, one-on-one mentoring, job skills training, and education. More than 100 women have graduated since H.O.P.E. began in 1996. A H.O.P.E. offshoot program — We Mean Business — helps H.O.P.E. participants prepare for entry into the workforce by providing them with clothing suitable for job interviews. We Mean Business is a collaborative effort between the H.O.P.E. program and the Saint Raphael Auxiliary, which has set aside space in its Thrift Shop for business attire.



Auxilian Louise Manfreda and H.O.P.E. participant Dorothy Hawley eye outfits for We Mean Business.

### Working with our legislators so we can continue to care for you

Healthcare providers across the nation grappled with serious financial challenges during 1999. The Balanced Budget Act of 1997 mandated \$116 billion in reductions from the Medicare program over five years. These cuts were helping balance the federal budget. Yet they were forcing hospitals, home health agencies and nursing homes to cut back on services and staff, ultimately hurting healthcare consumers. At Saint Raphael's, Medicare payment cuts totaled \$77.8 million over five years. Our patients, employees, physicians, volunteers, trustees, and friends responded, sending letters and petitions to Washington. Their message: The healthcare needs of this community and country need to be a priority. And Congress, including U.S. Rep. Rosa DeLauro, responded by passing legislation restoring a modest amount of Medicare funding. Not a final solution, but a meaningful step in the right direction.



David W. Benfer and Sister Anne Virginie present U.S. Rep. Rosa DeLauro (center) with petitions seeking to restore funding to hospitals.



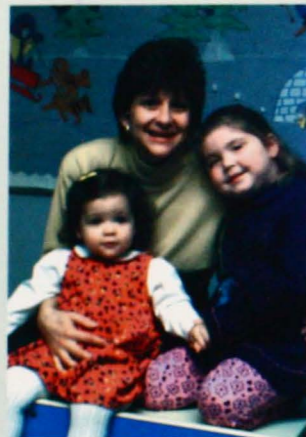
### There's no place like home

When you're recovering from surgery and no longer need a hospital, there is often no place like home...your own bed, familiar surroundings, family or friends close by. Thanks to a collaborative program between Saint Raphael's and one of its homecare partners, the Regional Visiting Nurse Agency, some patients who have had total joint replacement surgery are successfully going directly home from the hospital, rather than to a sub-acute care facility. With patient evaluation, classes, and a home assessment prior to surgery, coupled with post-procedure home visits by a registered nurse and a physical therapist, patients can achieve optimal results in safe and comfortable surroundings — their own home!



Physical Therapist Joe Buteau works with Clotilda Cognetta in her Orange home.

### A great place to receive care, a great place to work



Mary Joyce with her daughters, Kristen and Danielle.

Saint Raphael's, this region's fourth largest employer, was named one of the 100 Best Companies for Working Mothers, a national recognition program sponsored by *Working Mother* magazine. Other recipients include Ford Motor Company, IBM and Bristol Myers Squibb. The award is based on six criteria: parental leave opportunities, flexible work arrangements, child care, work/life balance, advancement opportunities for women, and pay. Why Saint Raphael's? Ask Mary Joyce, R.N. Our daycare center's extended hours suit a hospital, where many employees start early in the morning. The center also cares for infants and toddlers — like Mary's 15-month-old. And when Mary's 4-year-old, Danielle — also a center attendee — was diagnosed with leukemia and had to temporarily stay home due to a suppressed immune system, Saint Raphael's allowed Mary to take a leave of absence and provided a video hookup so Danielle can participate in her childcare class activities. Caring for and about people

— employees, their families and patients — is what Saint Raphael's is all about.

### Whenever you need us, we're here

Staffing an emergency department in which patients are treated and admitted, regardless of their ability to pay, is one of the ways a provider like Saint Raphael's demonstrates its commitment to the community, according to the national Catholic Health Association. Last year, 47,552 people were cared for in Saint Raphael's Emergency Department. Whether it was relieving flu symptoms, mending broken bones, or restarting broken hearts, our skilled clinicians were here, 24 hours a day, seven days a week. We also brought all of our skills to bear for the most seriously injured in our federally-designated Level II Trauma Center, led by John Bonadies, M.D. And we spread a message of prevention through "Let's Not Meet By Accident," a program helping high school students understand the implications of drinking and drugs, particularly while driving. Because while we are committed to caring for you in an emergency, we'd rather help you stay safe and well.



Emergency Nursing Director P.J. Conway discusses an incoming trauma case with Trauma Director John Bonadies, M.D.

### Helping our neighborhood, one employee at a time

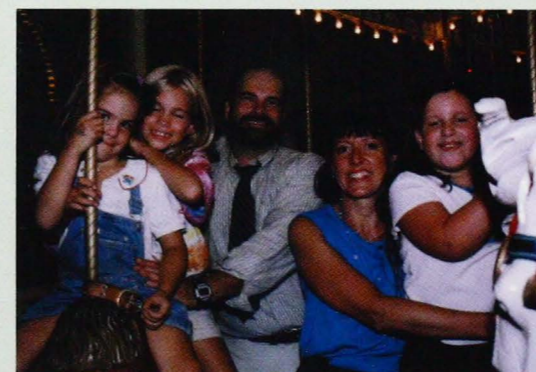
Saint Raphael's has proudly called New Haven and the Greater Dwight neighborhood home for 93 years. We're committed to this community, and work closely with neighborhood groups and organizations equally dedicated to its well-being. In 1994, we implemented our Employee Neighborhood Home Ownership Program, which encourages Saint Raphael employees to purchase and live in neighborhood homes by providing financial and other support. Iris Barnaby, a patient service associate on the Obstetrics/Gynecology nursing unit, has taken advantage of this program. She's one of 16 Saint Raphael employees to purchase a neighborhood home; hers is on Edgewood Avenue. The program helps employees get established — many are proudly buying a home for the first time. And since owner occupancy is required, it brings additional stability to our neighborhood.



Iris Barnaby in her Edgewood Avenue home.

### Generosity that touches many

The Saint Raphael Foundation, which provides philanthropic support for the Hospital of Saint Raphael and Saint Regis Health Center, marked its 25th anniversary in 1999. And there was much to celebrate. Thanks to thoughtful donors — individuals, corporations and community organizations, as well as physicians and Saint Raphael employees — almost \$8 million has been raised toward a long-term endowment goal of \$25 million for The Campaign for Saint Raphael's. Income from this endowment will be used to strengthen Saint Raphael programs, and to provide financial flexibility to meet new needs that will emerge in the future. Cancer care, cardiac care, care for seniors, and the training of tomorrow's doctors, as well as facilities renewal and the purchase of medical equipment, are among the areas of endowment focus.



Peter Duffy and Judy Catalano, who co-chaired employee giving for The Campaign for Saint Raphael's, celebrate its success with their families at the Lighthouse Point Park carousel.





## Helpful Phone Numbers

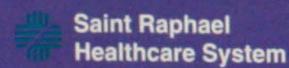
CareCard/Senior Services	(203) 789-3777
Hamden Drawing Station	(203) 407-1087
Hamden Surgery Center	(203) 288-2555
Need-A-Physician?	(203) 789-4304
Saint Raphael Foundation	(203) 789-3242
Volunteer Services	(203) 789-3480
HOMECARE PARTNERS:	
Regional Visiting Nurse Agency	(203) 288-1623
Shoreline VNA	(203) 245-0436

HealthLink, Saint Raphael's 24-hour audio health library: 1-800-622-5922

Press "1," then press "2" to enter any of the four-digit codes listed below. Or, enter "1000" for a directory of information.

CODES FOR SOME OF OUR MOST POPULAR TAPES:

- 6129 Heart Attack
- 6109 Cardiac Arrest
- 6130 Eating Healthy
- 6147 Low Cholesterol Diet
- 2532 Prostate Implants
- 6417 Colon Cancer
- 4234 Hip Replacement
- 4235 Knee Replacement
- 2560 Trauma Center at Saint Raphael's
- 6406 Breast Cancer



### Men's preventive health guide

	Those 40 to 49	Those 50+
<b>In the doctor's office</b>		
Complete physical with skin exam	Every year	Every year
Blood pressure test	At least every 2 years	At least every 2 years
Fasting plasma glucose (diabetes)	Every 3 years after age 45	Every 3 years
Cholesterol (total and HDL)	Every 5 years	Every 5 years
Immunizations	Tetanus booster every 10 years	Influenza every year; tetanus booster every 10 years; pneumonia vaccine 1 time after 65
Fecal occult blood	—	Every year
Digital rectal exam (for prostate cancer)	As recommended by your doctor	Every year
Prostate specific antigen test	As recommended by your doctor	Every year
Eye exam	—	Every 2-4 years
Colorectal cancer test	—	Every 5-10 years
<b>Self exams</b>		
Testicular	Every month	Every month
Skin (for changes, new growths)	Every month	Every month

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ORANGE: Liberty Square, 501 Boston Post Rd., (203) 799-3371



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FIVE OVER 50

sion — just malaise. A bad job or a bad relationship can make other healthy efforts seem far too daunting or even irrelevant.

"I had a guy call me once and say, 'My life is out of balance,'" Stansbury recalls. "I would hope that person would consider calling a life coach or a personal counselor or a mentor — someone who can offer guidance. We need to tend to our mental and our emotional health."

The first step toward that healthy balance, Stansbury says, is to set a vision of what you want to accomplish, then create a strategy to achieve your goals. For someone who isn't in shape, it could be taking that first walk around the block. It could be finding a new hobby that gets you away from the television. It could be turning down dessert, or skipping that slab of butter on your bread.

"People need to ask themselves how satisfied they are with the different aspects of their lives," Stansbury adds. "If part of your life is out of balance, then you're going to have a bumpy ride."

The ride can get very unsettling for those who wallow or become bored, says Rifkin. He's in his 60s, works part time and plays golf regularly. "You've got to find a lot of interesting things in life," he adds. "People go back to school in their 70s. Others write. You just have to keep busy. But that can be particularly hard for some men."

While not every man can do all the things professionals say are required for a fit body and mind, what's most important is to take the steps that work for you. The key is to do something.

So don't put it off any longer. Find some gusto in your life. Bang on your own drum, as Coleman might say. Walk if you can't run. Smoke less if you can't quit. Take deep breaths. Stretch those limbs. Wiggle your toes. "Fifty's the perfect new start for all of these things," adds Atlas. "And more." ☼

### Gus Langner

Gus Langner is 96. Most days, he swims a mile before his 8 a.m. breakfast, which generally consists of prunes and a bowl of oatmeal.

Thanks at least in part to these health habits, Langner, a Milford resident, holds all kinds of world records in his age group — the 95-to-100 bracket — for competitive swimming. "Yeah, sure," he says with a smile. "I've outlasted all the competition."

Langner gives most of his gold medals to his grandchildren and to neighbors' kids. "The recognition is the last thing I care about," Langner says. "I go to the meets to associate with good friends."

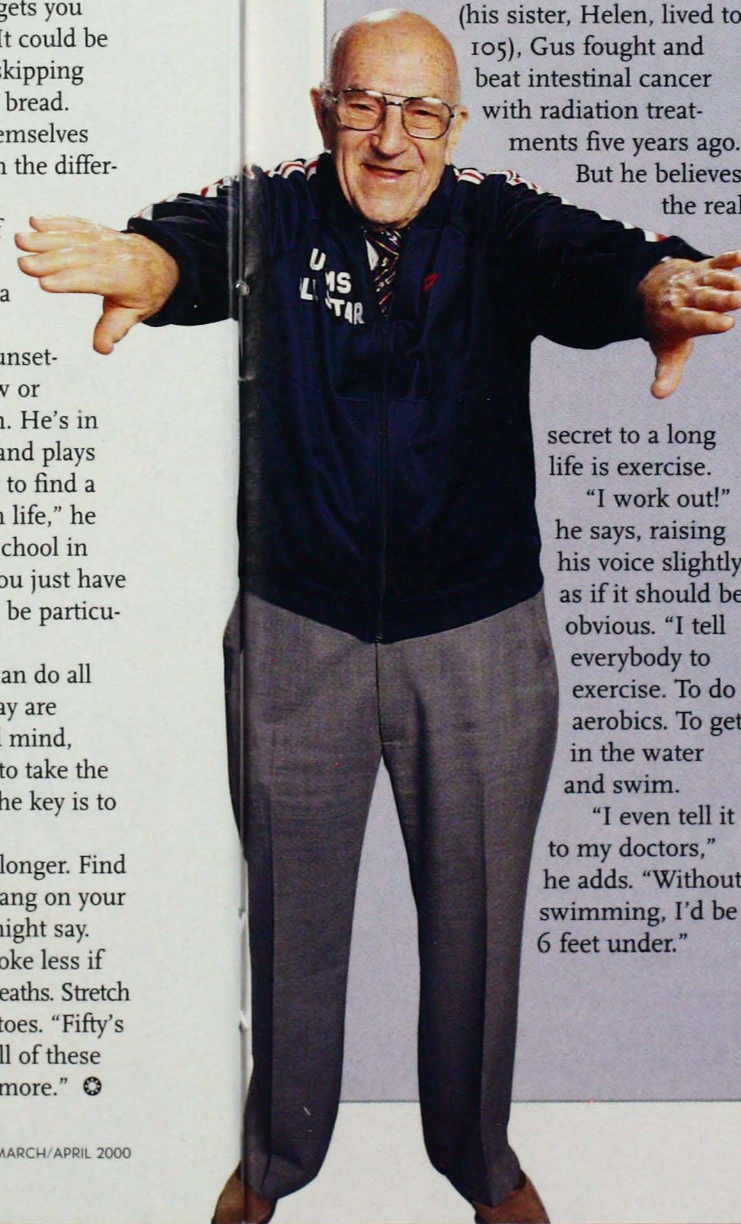
Although he definitely takes good health seriously, too. While longevity runs in his family (his sister, Helen, lived to 105), Gus fought and beat intestinal cancer with radiation treatments five years ago.

But he believes the real

secret to a long life is exercise.

"I work out!" he says, raising his voice slightly, as if it should be obvious. "I tell everybody to exercise. To do aerobics. To get in the water and swim.

"I even tell it to my doctors," he adds. "Without swimming, I'd be 6 feet under."



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By Janet Youtt

# Rx for an aching head

Graphic by Karen DeFelicis

For some, they arrive like unwanted houseguests with no plans to leave. For others, they come on suddenly and disappear just as fast. For most people, however, headaches arrive at the end of a long, stress-filled workday.

"If I'm having a crazy day — when everything is piled up and I'm running around — I can almost guarantee a headache by 5 p.m.," says 50-year-old Michael DiLullo of Branford, a supervisory inspector for the state Division of Criminal Justice. "Thankfully, I can also get rid of it by the time I go to bed with a little R&R and two aspirin."

Of all medical conditions, headaches may be the most common. They're referred to as a "universal plague" by many health experts. And here's why: More than 70 percent of



Americans suffer head pain, which can range from an occasional annoyance to a chronic, debilitating condition.

Americans spend almost \$4

billion a year trying to get rid of headaches. And according to the Chicago-based National Headache Foundation, headaches are responsible for an estimated 157

million missed work days each year.

Despite how common headaches are, everyone experiences them a little differently. Health experts, however, have defined three general categories of chronic headache pain: tension, cluster and migraine. These are different from the occasional headaches that might accompany a cold or the flu, or be associated with sinus pain, allergies or fatigue.

Although just the thought of learning about these categories can cause your head to hurt, relax and read on. Knowing which type of headache you're prone to — especially if the pain is chronic — will help you manage your pain more effectively, and hopefully get rid of it all together.

"Many people are under the huge misconception that if you suffer from headaches, you just have to deal with them and the pain. That's wrong," says internist Barbara Ross, M.D., who's board-certified in internal medicine, pediatrics and gastroenterology. "Headache pain can be managed. But the first step is to figure out what kind of headache you have."

## Tension headaches

Tension headaches are the most common kind, affecting men and women equally. They occur when muscles in the head and neck contract and stay tense, usually during times of anxiety. Often, the pain strikes the top of your head or back of your neck, bringing with it a feeling of pressure, as if someone were pulling a tight band around your head.

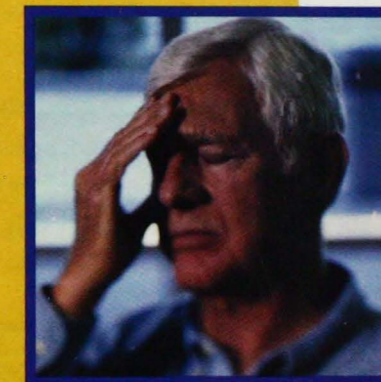
## What can trigger a headache?

Everything from lifestyle to diet can trigger a headache. If you have chronic headache pain, keep a "headache diary" to try to pinpoint — and then avoid — your headache trigger. The most common are:

**Stress:** especially for chronic tension or migraine sufferers. This stress can come from major life events, such as a death or divorce, or from the daily grind.

**Diet:** especially for migraine sufferers. Alcoholic beverages, especially red wine and beer, can also cause headaches, as can chemicals found in aged cheeses, pickled herring and chocolate. Caffeine is also a culprit, plus food additives like sodium nitrite in hot dogs and luncheon meats; monosodium glutamate in many processed foods.

**Other triggers** include changes in the weather, season or altitude; changes in sleep patterns and meal times; fluctuations in hormone levels during the menstrual cycle, pregnancy, menopause or use of oral contraceptives; sensory irritants like strong or flickering lights; unusual odors; polluted air; and stuffy rooms.



computer all day, make it a definite point to get up and stretch.

■ And when a co-worker or family member has your blood boiling, cool down and find a way to communicate.

"Fighting headaches requires a well-rounded approach," Haak adds. "Don't just try to stop pain once it starts. Eat right, exercise regularly, get enough sleep and

take proactive steps to stop them from ever starting."

## Cluster headaches

Arriving with very little warning, cluster headaches produce one of the worst head pains

imaginable. They are relatively uncommon, but still

There is no cure for tension headaches, but their symptoms respond well to massage, hot showers, relaxation, a balanced diet, rest and regular exercise. Over-the-counter medications such as aspirin, acetaminophen or ibuprofen can also help. But healthcare experts warn to take only the minimal dose needed to relieve your pain. Overuse can actually cause chronic headaches called "rebound headaches," says Bruce Haak, M.D., section chief of Neurology at the Hospital of Saint Raphael, who's board-certified in internal medicine and neurology.

If over-the-counter, non-prescription pain relievers fail to control your headache, your doctor may prescribe medication. Health experts may also suggest the following:

- If your job requires a lot of driving, try using a headrest.
- If you sit hunched over a desk or

affect about 1 million Americans. They are more common in men than women, according to the National Headache Foundation.

Cluster headaches are characterized by intense burning, drilling pain in or around one eye and temple, and occasionally in one cheek or jaw. Your affected eye may become bloodshot and teary; the nostril on that side may become blocked or run profusely. Sometimes your pupils shrink, eyelids droop and face flushes.

Pain from a cluster headache comes in spurts usually lasting 30 to 45 minutes each. Although a cluster headache can come on abruptly at any time, they most often occur about three hours after you've fallen asleep.

Part of the woe is that cluster headaches can recur for consecutive days, weeks, or months — often at the same time each day — before a remission occurs. In rare cases, they



## Headache + doctor = relief

There is no reason to live with pain, or the threat of an underlying medical condition. The National Headache Foundation says you should schedule an appointment with your physician if your headache pain is:

- Sudden and severe.
- Affects one side of the head.
- Is associated with pain in the eye or ear.
- Is accompanied by nausea, vomiting, hallucinations or sensitivity to light and sound.
- Recurs in a definite pattern — if the time of day, circumstances and duration of pain are consistently similar.
- Causes confusion or loss of consciousness.
- Is persistent, when previously you've been headache-free.
- Interferes with your ability to function at work or in social situations.
- Is similar to headaches suffered by other members of your family.
- Is different from other headaches you've previously experienced.

can occur for a year or more without any remission.

Although doctors aren't sure what causes these headaches, many believe their onset might be linked to seasonal changes and amounts of daylight. They need to be treated by a physician and with prescription medication. So call your primary care physician immediately if you believe you're experiencing them, says Ross.

"The medications available today can make all the difference to headache sufferers, turning a painful life into a pain-free one," says Suzanne E. Simons, National Headache Foundation executive director.

### Migraines

Rarely a week goes by when Regina Cerillo, 49, of East Haven, doesn't have a headache. In fact, she's suffered from migraines since she was 14 years old.

About 26 million Americans experience migraine headaches, which affect three times as many women as men. Their pain can be totally debilitating, bringing your life to a stop.

Health experts can't pinpoint what causes migraines. But many suspect they're related to body chemicals or hormones, and that they can be triggered by emotions such as fatigue or depression; certain foods; and specific smells.

For Cerillo, stress, strong odors of perfume or smoke, or the start of her menstrual period can mean a migraine.

"Unless you have migraines, you have no idea how debilitating they can be. Sometimes, I'm down for up to three days," Cerillo says. "I can't make many long-term plans, because I never know when I might get one and have to stop everything."

Most migraines begin in the early morning or during the day with intense, gripping pain on one or both sides of your head. This pain often spreads. And once it reaches its peak of severity, it can last for hours or days unless treated. Often, migraines are accompanied by nausea and vomiting and/or sensitivity to light, sound or smell.

Some sufferers experience a warning sign, called an aura, that a migraine is coming on, Haak explains. This aura is usually a visual disturbance of some kind, such as seeing sparkling flashes of light, zigzag lines or slow-spreading blind spots. Other auras include dizziness; or a weakness or tingling on one side of your face or body.

There are many prescription medications available today to help migraine sufferers, Ross says. But also affective are sleeping in a dark, quiet room; pressing an ice pack to the back of your neck; and applying gentle pressure to painful areas.

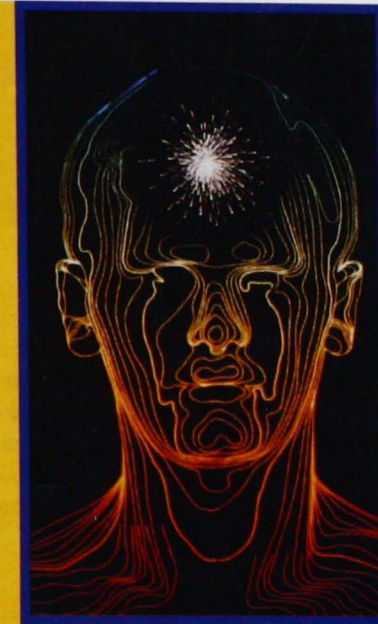
## A headache can have different characteristics:

**Severity.** Pain can range from mild to unbearable, annoying to debilitating.

**Frequency and duration.** It can strike occasionally or daily, lasting a few minutes, a few hours or even a few days.

**Related symptoms.** It can be accompanied by other problems, such as nausea, vomiting or changes in vision or hearing.

**Location.** Pain can be in just one spot or take over the entire head.



"If you understand what kind of headache you have, and then talk with your doctor about treatments

available, you can stop the pain," says Haak. "You can control your pain, rather than have the pain control you." ☺

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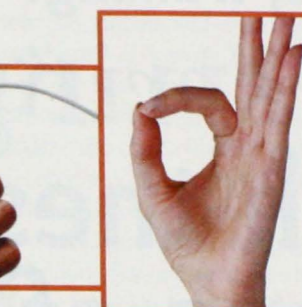


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By Marcia Simon

# Give your hands a HAND



Graphic by Karen DeFelle

The butcher, the baker, the candlestick maker. What do they have in common with the musician and the data entry worker? Well, if they've been at their skill for a long time, they could easily be at risk for any number of common hand and wrist problems.

Take, for instance, carpal tunnel syndrome. We hear a lot about it today because of widespread computer use. But it's hardly a new condition. Assembly line workers and meat packers have long experienced the sensation, although they may not have known what to call it.

Why do some people get repetitive motion strain injuries and others don't, even when working side by side doing the same job? No one knows for sure, but we do know that it's not just job-related. For Mary Ingarra of North Branford, the shooting pains that traveled from her thumb up her forearm came after her daughter was born.

"I got in the habit of holding my daughter with my left hand while doing things, like talking on the phone, with my right. It got to the point that every time I'd grab something or pick up my daughter, I'd get this sharp, excruciating pain. It felt like my thumb was going to pop right out of the joint."

Ingarra's doctor told her she had tendonitis, one of the common hand/wrist conditions that fall under the category of repetitive stress syndrome, also known as repetitive motion trauma, overuse syndrome, cumulative trauma disorder and repetitive strain injury.

Since our hands are so important, any abnormality should be a cause for concern and shouldn't be ignored. So like Ingarra did, call your doctor if you experience any chronic pain or change in hand function. In the meantime, to

give your hands a hand, here's an overview of the most common hand problems, plus advice from the experts on how they're treated.

## Tendonitis of the hand and wrist

Tendonitis is simply an inflammation of the tendon, the part of the muscle that attaches to the bone.

"If somebody has tendonitis, we need to identify what's causing it," explains John Aversa, M.D., section chief of Orthopedics at the Hospital of Saint Raphael. "If you're a musician, for example, you should come into the doctor's office with your instrument, and see if there's anything unusual with the fingering."

Over-the-counter anti-inflammatories help reduce swelling. Or, your doctor can prescribe something similar, but stronger. An injection of cortisone (a steroidal anti-inflammatory) sometimes works, but side effects can include stomach discomfort or a bleeding ulcer in some people.

"More important than shots or pills is to recognize the cause, and either stop doing that activity or learn how to do it a different way," says Aversa, who's board-certified in orthopedic surgery. Occupational therapists can help you find hand positions and techniques that feel comfortable and natural. Physical therapy to soothe pain and strengthen supporting muscles is also often effective, while a night splint helps keep the affected area in a natural, relaxed position while you sleep.

## 'Wear and tear' osteoarthritis

Osteoarthritis occurs when the protective cartilage between your joints deteriorates, causing swelling as the bones rub together. Unfortunately, some people are predisposed to this condition.

And repetitive motion can aggravate or hasten the onset.

Aspirin or ibuprofen may provide relief for the stiffness and pain, but they can also cause an upset stomach if taken on a regular basis. Topical over-the-counter creams might help, too, says Thomas Moran, M.D., a board-certified orthopedic surgeon. But he recommends new, stronger prescription drugs now on the market. "They're a real breakthrough because they provide relief without the GI (gastrointestinal) upset," he adds.

Stretching your hands, "working" them to keep the motion fluid, and immersing them in warm water also all help in some cases. An occupational therapist might additionally do a paraffin treatment, using warm wax to penetrate and soothe. However, this should never be done at home because the risk of burning yourself with hot wax is too great.

## Carpal tunnel syndrome

Carpal tunnel syndrome is different than arthritis and tendonitis because it has more to do with the nerves in the hand than with swelling. It's caused by pressure in the median nerve as it enters the hand through the carpal tunnel in the wrist.

Symptoms can include weakness in your hand or a numb, tingling sensation. You might feel clumsy; drop things; have trouble gripping; or, your hand may just feel uncomfortable before it progresses to cause serious pain.

Orthopedic surgeon Phillip Luchini, M.D., sees carpal tunnel syndrome most frequently in people who work at a computer and can't control how much they use their hands.

"If you're feeling discomfort, give your hand a rest and see what happens.

If it persists, get an evaluation," advises Luchini, who's board-certified in orthopedic surgery. "Sometimes we do an X-ray or electrodiagnostic studies to measure nerve function."

Simple treatment often consists of an injection of cortisone and/or a splint to limit movement. "If it continues to hurt and becomes a problem for daily function because you lose your fine motor control, surgery to cut the transverse carpal ligament and take the pressure off the median nerve is an option," Luchini says. "But surgery is a last resort."

## Trigger finger

Trigger finger is associated with carpal tunnel syndrome. It's tendonitis of the flexor tendons that come into the finger and allow it to bend and straighten.

With trigger finger, tendons become inflamed and enlarged like a nodule or knot, says Richard Bernstein, M.D., a board-certified orthopedic and hand surgeon. These knots cause the finger to lock down in a quick, triggering manner, hence the name. It's not necessarily painful — until you try to straighten the finger.

It's a condition more common among older people, and not one that creeps up gradually. You wake up one morning, and it's there.

As with other types of tendonitis, an anti-inflammatory medication may be enough to do the trick. Bernstein says a single cortisone injection, if needed, is also effective 75 percent of the time. Rarely is surgery required to release the tendon.

## Ganglion cysts

A ganglion cyst looks like a lump, most commonly on the back of the wrist. It's

filled with a jelly-like material and has a wall or lining around it. When you flex your wrist, the cyst is accentuated. It can be unsightly and uncomfortable.

Aversa explains that these cysts rise from a tendon sheath or a joint, where an irritant of some sort has caused fluid to build up. Treatment is typically simple, with two needles used to remove

**'Since our hands are so important, any abnormality should be a cause for concern and shouldn't be ignored.'**

the jelly material, so the cyst shrinks.

Ganglion cysts are associated with repetitive trauma, and can fluctuate in size. They may go away on their own, or can be removed surgically if recurrent.

## Repetitive stress syndrome

Joseph Cifferelli is a New Haven artist who has been cutting mat board for over 25 years. When his wrist starts to hurt, he wraps an Ace bandage around it and carries on. He's not exactly sure what's causing his pain.

"That's not a good idea," says Luchini. "You can wrap too tightly and can cause more problems. You need the blood flow for good healing."

Christopher Rollins of Guilford has been styling hair for decades. Now, at middle age, he's doing fewer time-consuming color foils because he feels it in his fingers. So he lets the younger people in his salon do that. Besides, he says, "they really get into it." Rollins still does a few foils for special clients, but mainly sticks with hair design, cuts and running the business.

No matter what your ambition, "most stress can be controlled by limit-

ing use. It usually gets better," Luchini says. The important part is to take a break when you feel symptoms. The longer you ignore the problem, the worse it gets. Advanced repetitive trauma of the hand can keep you out of work for months, or have you searching for an entirely new stress-free vocation.

Ergonomic considerations are important for people required to do repetitive work, such as computer operators. The height of the terminal, the position of the keyboard, and the height and support of the

chair are extremely important for reducing cumulative trauma disorders.

"People who pound the keyboard are more likely to suffer cumulative trauma than those with fluid motion. It's not what you do, but how you do it," explains Peter Amato, M.D., medical director at the Hospital of Saint Raphael's Department of Occupational Health. Amato emphasizes the importance of taking short, "micro" breaks and regularly stretching.

If gripping is a problem at home, try some of the ergonomically improved carving knives and utensils that give your hands a more neutral position for grabbing.

Your primary care physician or an orthopedic can help diagnose your exact hand problem, only a few of which have been described here. As Aversa points out: "There's more recognition today of these types of hand problems. Workplaces are required by OSHA (the federal Occupational Health and Safety Administration) to address hand problems, and we physicians understand them better. So there's no reason not to get treated." ☺



Tired of walking? Don't like gyms?

# Try springing into action with these alternative forms of exercise

## PUT ON YOUR DANCING SHOES

Whether you like to two-step, waltz, hustle or hip-hop, dancing is a great way to exercise. Of course ballroom dancing isn't going to give you the same kind of cardiovascular workout as line or disco dancing, but it's still a good way to keep your muscles flexible, your balance steady, and your stress level at bay — not to mention burn off some calories. Dancing also causes your brain to release hormones called endorphins, which make you feel great (and smile!) as they boost your energy level. Perhaps the best part of dancing: You can do it anywhere, anytime. All you need is the music in your head.



## GO 'FORE!' IT AND GOLF

Early birds shouldn't waste their mornings watching talk shows, says John Merritt, M.D., Saint Raphael's section chief of Geriatrics. Instead, they should be out swinging — swinging golf clubs, that is. Walking a nine- or 18-hole course offers great cardiovascular benefits, plus a good deal of muscle work to carry your clubs. It can strengthen your shoulders, arms and wrists and increase lower-back flexibility, yet it's low-impact, meaning it puts little stress on joints or the surrounding muscles and cartilage. Because of these benefits, the American Academy of Orthopedic Surgeons recommends golfing as a great sport for joint replacement patients. Merritt warns, however, that those with heart disease or other health problems must be careful about overdoing it by carrying a golf bag. So talk with your physician before heading off to the course for the first time. This should be the rule for anyone starting any kind of exercise program. "Always play it safe," Merritt adds. "And always remember to wear a sunscreen with a 30 SPF protection level or higher."

## CATCH THE INLINE EDGE

Inline skating not only gets you moving, fast, but offers a great workout for your legs and heart; burns off calories; and is a terrific way to improve your balance. Don Andrews of New Haven loves to skate around East Rock Park and enjoys the fact that you can go at your own pace. But since inline skating does require flat, hard pavement, health experts warn it should never be done without a helmet, knee pads, elbow pads and wrist pads. Adds Andrews: "Watch out for the leaves on the road!"

By Annick Winokur

## SWOOSH INTO SHAPE

Like spring skiing? Then find a trail for some cross-country skiing, before it gets too warm. Cross-country skiing offers an excellent full-body workout. It's more strenuous than running, yet has a low risk of injury; the movements are gliding, not bouncy. But if you've never tried it before, take it slow. You'll need lessons to learn proper techniques. And many health experts advise a few trips to the gym first to strengthen muscles, tendons and ligaments around the shoulders, hips and knees. Once out skiing, remember to dress warmly and in layers; wear sunglasses to protect your eyes from the snow's glare; and cover any exposed areas of skin with a high-protection sunscreen, usually a 30 SPF or higher. You can also simulate cross-country skiing, and gain all its aerobic benefits, on many home exercise machines.

## GREEN THUMB IT AND GARDEN

You can take extra pleasure knowing that gardening not only gives you healthy fruits and vegetables, but a good workout, too. The movements involved in gardening increase strength, muscle tone, mobility and flexibility. In fact, the American College of Sports Medicine recommends gardening as a great exercise to help maintain a healthy skeleton and decrease your odds of developing osteoporosis. Gardening also helps increase a person's coordination, cognitive and perceptual skills and range of motion, as well as sharpens the senses. While gardening, health experts recommend wearing gloves and using a stool to prevent back and knee injuries. And if you need medication for allergies or asthma, be sure to take it at least 30 minutes before heading outside, or as recommended by your physician.

## TAG! YOU'RE IT

Next time you send your kids out to play, run out with them for a game of tag. It's one of the oldest, but best, forms of exercise, providing a great cardiovascular workout. Before you start, make sure everyone playing — parents, too! — have on sturdy shoes with knotted laces to help prevent falls and sprained ankles. Also check whether everyone has applied plenty of sunscreen — even on chilly or overcast days. The ultraviolet rays that can cause sunburn and skin cancer are as dangerous on cloudy days as when the sun is out. So use a lotion with a SPF of 30 or higher. "Then, have a ball," adds internist Joseph Balsamo, M.D.



## TRY INDOOR ROCK CLIMBING

Now here's something you might not have thought about. But indoor rock climbing is becoming increasingly popular as an exceptional cross-training tool, building strength, endurance and balance. It also gives a great mental boost, says Mark Talbott of New Haven. He regularly brings his son, 6, and daughter, 8, to climb at Prime Climb in Wallingford. "It challenges them to overcome their fears, and then they have the great feeling of reaching their goal, once they make it to the top," Talbott says. "And that makes all of us feel great." Before you make your first climb, however, make sure the facility you choose is run by experienced professionals who will take time to train you. Also make sure to stretch, cautions orthopedic surgeon Joseph Wu, M.D. And as with any sport, start slowly. Don't take on an indoor Mount Everest on your first try.



By Cynthia Wolfe Boynton

North Haven resident  
Etta Pittala in the  
Looking Forward  
boutique at Saint  
Raphael's Father  
Michael J. McGivney  
Center for Cancer Care.



# Living with ovarian cancer

North Haven resident Etta Pittala has no intention of joining the ranks of women who die each year from ovarian cancer.

It's a star-studded list, with comedienne Madeline Kahn and Gilda Radner, former Connecticut Gov. Ella Grasso and *Harper's Bazaar* Editor Liz Tilberis among the most noteworthy. But Pittala, 42, is determined to stay right where she is as a full-time mom to her 5-year-old daughter, Danielle, and a part-time volunteer for Saint Raphael's Looking Forward patient education, support and wellness program at the Father Michael J. McGivney Center for Cancer Care.

"I have a ton of faith, and I don't want to waste time dwelling," says Pittala, who in April 1995 was diagnosed with late-stage ovarian cancer that had spread into her lymph nodes. "Why me? I don't know why. But I want to go on living."

Approximately 25,000 women are diagnosed annually with ovarian cancer, while more than 14,000 die from it. It's the fifth most prevalent cancer in the United States, and also one of the most insidious. Most women experience few, if any, symptoms in the early stages of the disease. In fact, it's so difficult to detect that only 24 percent of cases are diagnosed, and treated, before the cancer has spread.

But that doesn't mean there aren't reasons to be hopeful.

Pittala says she's proof that people can not just survive ovarian cancer, but live fully with it. "Attitude and outlook are everything," she says.

Medical researchers are also making progress developing better screening tests. And surgery, followed by new combinations of chemotherapy drugs, have brought about improved survival rates in recent years, says oncologist Andrea Silber, M.D., director of Saint Raphael's Cancer Control and Early Detection Unit.

"There are always reasons to be hopeful," says Silber, who's board-certified in medical oncology. "Everyone involved is taking steps in the right direction."

## How it forms

Every woman has two ovaries, which produce eggs and the female hormones estrogen and progesterone. They're located in the middle of the pelvic cavity,

## 'Why me?'

### I don't know why. But I want to go on living.'

about 4 or 5 inches below the waist, and are each about the size of an almond.

Cancerous tumors form when ovarian cells grow uncontrolled or abnormally. Most ovarian cancers develop in the epithelium, the thin layer of tissue that covers the ovaries, and are called epithelial tumors. Other types of ovarian cancer include germ cell tumors, which form in the egg-producing cells, and stromal tumors, which form in the tis-

sues that hold the ovary together and produce hormones.

In its early stages, ovarian cancer produces few, if any, symptoms. But as a tumor enlarges, Silber explains, it can put pressure on the bowel, bladder or other organs in the abdomen. This causes vague symptoms that are easily confused with other conditions, or often ignored by the woman experiencing them. They can include:

- Abdominal pain, swelling
- Bloating or pelvic pressure
- Indigestion, gas or nausea
- Change in bowel habits
- Unexplained weight loss, gain

## How to prevent it

Although there is no easy or ideal screening for ovarian cancer, a pelvic exam allows a physician to check the vagina, rectum and lower abdomen for masses or growths. Blood tests can help strengthen a doctor's suspicion.

But surgery is required to confirm whether a cancerous tumor is present; what stage the disease is at; and whether the cancer has spread.

Like most ovarian patients, Pittala has had both surgery and chemotherapy to treat her cancer. It's the best practice, Silber says.

And if her cancer comes back again — so far she's had four recurrences — she'll again undergo whatever treatment is needed.

"Everybody is going to die some time. The difference is that I'm faced

LIVING WITH OVARIAN CANCER

with it," Pittala says. "But I fight it by living in the present and taking care of myself. I also keep planning. Cancer may have robbed me of a future, but I'm going to keep planning like I have one."

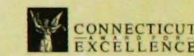
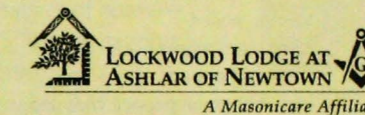
"And who knows what will happen," she adds. "I'm in remission now. The most frustrating part is that I have no control."

Researchers haven't yet pinpointed what causes ovarian cancer. Genetics could be to blame. And a number of studies have reported a link to fertility drugs. But nothing has been proven.

What have been proven, however, are the factors that help women reduce their risks of developing ovarian cancer. Among them are giving birth, breast feeding and undergoing a hysterectomy. Perhaps the most important step, Silber asserts, is to have yearly pelvic exams, and to discuss concerns with your physician. ☺



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## chefs' corner Favorite recipes from neighborhood restaurants

### Polenta loaf with tomato porcini sauce

Friends & Co.

#### For polenta mixture:

- 1 1/4 cups cornmeal
- 3 1/2 cups water
- 1/2 tsp. salt
- 1/3 tsp. basil
- small pinch red pepper flakes
- 1/4 tsp. pepper
- 1 tsp. extra virgin olive oil
- 1/2 oz. Romano cheese

#### For the filling:

- 3 artichoke hearts, sliced
- 3 oz. mushrooms, sliced
- 2 tsp. olive oil
- 5 oz. spinach, stemmed and chopped

#### For tomato porcini sauce:

- 3/4 oz. dried porcini mushrooms (soak in hot water for 30 minutes and drain)
- 1 24-oz. canned whole, peeled plum tomatoes
- 1/4 cup white wine
- 1 tsp. thyme
- 1/4 tsp. pepper
- 1/4 tsp. salt
- 1 tsp. balsamic vinegar
- 1/2 cup shallots, minced
- 2 tsp. olive oil
- 1 tsp. garlic, chopped

First, make filling: Sauté artichokes, mushrooms and spinach in oil until liquid is almost gone. Set aside. Make polenta mixture. Boil water and whisk in cornmeal, salt, basil and peppers. Cook until thick, stirring to avoid burning bottom. Stir in oil and cheese; take off heat. Remove 3 oz. polenta mix and mix with filling. Divide most of remaining polenta into four parts, and press into four compartments of muffin tin, making a

pouch in center of each. Spoon filling into pouches. Top with remaining polenta, smooth each one down, and cover. Make tomato porcini sauce: Seed and break tomatoes over mushrooms. Sauté shallots in oil. Add remaining ingredients and cook until thickened. Put in blender until smooth. Reheat on medium low before serving. To serve, cut each loaf in half. Heat halves in microwave, and top with tomato porcini sauce and a shaving of asiago cheese. Serves four.

*Calories 391; Protein 10.5G; Carbohydrates 57G; Total Fat 7G; Saturated Fat 2G; Monounsaturated Fat 2G; Polyunsaturated Fat 3G; Cholesterol 50Mg; Sodium 1000Mg; Fiber 4.5G.*

### Keysir Selata (beet salad)

Lalibela Ethiopian Restaurant

- 2 medium potatoes, boiled
- 2 carrots, boiled
- 2 16-oz. cans whole beets, drained
- 1 shallot, chopped
- 1 long, hot green pepper, chopped
- 1 clove garlic, crushed
- 2 tbsp. olive oil
- 2 tbsp. lemon juice
- 1/2 tsp. salt

Coarsely grate beets, potatoes and carrots. Place oil, lemon juice, garlic and salt in jar with tight-fitting lid and shake. Just before serving, toss vegetables with lemon juice mixture. Dish can be prepared up to four hours in advance. Cover and refrigerate beet mixture and lemon dressing separately. Serves four.

*Calories 195; Protein 3.7G; Carbohydrates 29.8G; Total Fat 7.05G; Saturated Fat 1.0G; Monounsaturated Fat 4.8G; Polyunsaturated Fat 1.2G; Cholesterol 0Mg; Sodium 300Mg; Fiber 4G.*

### Baked swordfish with tomatoes and green olives

Carmela's

- 3 tbsp. olive oil
- 4 6 oz. swordfish steaks
- 1 small onion, minced
- 1 rib celery, cut in thin slices
- 1 28 oz. can peeled Italian plum tomatoes in juice, pureed in blender
- 1/4 tsp. crushed red pepper
- 1/3 cup green olives, drained and pitted
- sea salt and fresh ground pepper to taste

Preheat oven to 450°. In large skillet, heat oil. Add swordfish. Cook 2-3 minutes per side. Salt and pepper after browning and place in baking pan. In same skillet, cook onion and celery on medium heat until clear (4-5 minutes). Stir in tomatoes and red pepper. Cover and simmer 15 minutes or until thickened. Stir in olives; season to taste. Cover swordfish with foil and bake for 30 minutes. Serves four.

*Calories 400; Protein 36G; Carbohydrates 20G; Total Fat 22.2G; Saturated Fat 3.2G; Monounsaturated Fat 13.5G; Polyunsaturated Fat 5.5G; Cholesterol 66Mg; Sodium 900Mg; Fiber 1.2G.*



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## inside saint raphael's Hospital news & information

### New team stands ready to fight strokes

Seconds count, especially when your brain is under attack.

That's why the Hospital of Saint Raphael has launched a new program to ensure that people who suffer strokes (also known as brain attacks), receive the most high-tech, sophisticated and appropriate treatment available when they reach the hospital's Emergency Department.

A new stroke team will spring into action upon a patient's arrival to quickly determine the severity of the stroke and if the patient can benefit from sophisticated "clot-buster" drugs, which greatly improve the odds of recovery. The team includes everyone from nurses to neurologists, as well as trauma physicians and radiologists.

"It's very important to recognize the signs of stroke, and to seek treatment immediately by dialing 911," says Kenneth C. Fine, M.D., Saint Raphael's chairman of Emergency Medicine. "That's because clot-busting medication is only effective within the first three hours of the actual stroke. After that, these medications can do more harm than good."

#### Call 911 immediately if you experience:

- Sudden numbness or weakness of face, arm or legs, especially on one side
- Sudden confusion, trouble speaking or understanding
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or coordination
- Sudden severe headache with no known cause

Remember, if you receive treatment within three hours of the first stroke symptom, you have a better chance of recovery.

That three-hour window is something everyone should remember, experts say. People should dial 911 at the first warning sign, and not wait to see if symptoms disappear on their own.

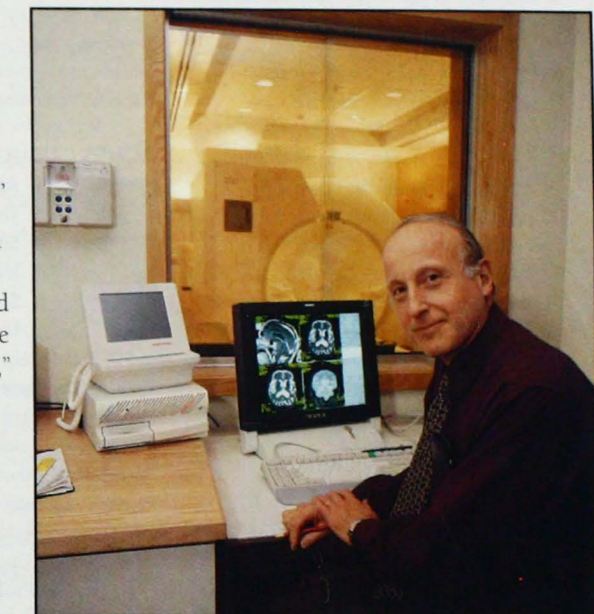
"Brain attacks should be treated with the same urgency as heart attacks," says Bruce Haak, M.D., Saint Raphael's section chief of Neurology. "The earlier we intervene, the better the chances of recovery."

Neurointerventional radiologist Gary R. Spiegel, M.D., puts it this way: "Saving time can save brain function."

Strokes occur when a blood vessel carrying oxygen and nutrients to the brain bursts or is clogged by a blood clot or other particle. When blood flow is interrupted, the brain is deprived of oxygen. Nerve cells in the affected area die within minutes, often leading to dysfunction in the rest of the body because the brain can no longer control those areas. These dead cells aren't replaced, so the devastating effects of a stroke are often permanent.

"You have a limited amount of time to restart blood flow to the area of the brain affected by the stroke," Fine explains. "The more time that passes, the more chance that there will be damage to the brain tissue."

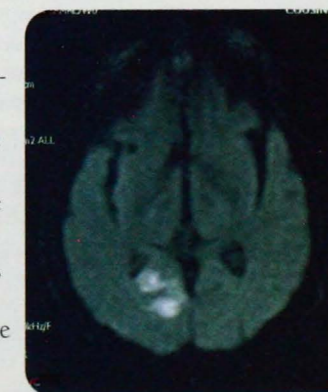
Most patients who arrive at the Emergency Department with stroke



Neurologist Gary R. Spiegel, M.D., puts it this way: "Saving time can save brain function."

symptoms will be quickly sent for an MRI, the ideal method of diagnosing a stroke.

"By viewing the brain with this scan, you can actually see where the stroke has occurred," says neurologist Helmuth Gahbauer. "Sometimes, you find a small area of the brain has been damaged, but there is a larger area at risk. This is when it's ideal to intervene, and try to save the larger area."



An MRI scan showing a stroke in a patient's brain.

About 1,180 Connecticut residents die from strokes each year, and thousands experience brain damage or other resulting physical disabilities.

Often strokes are preceded by "mini-strokes," or transient ischemic attacks. A person who has had a TIA is almost 10 times more likely to have a stroke. TIA symptoms are similar to those of an actual stroke, and should be treated with the same urgency — by dialing 911. ☼



## new physicians

### NEERJA ARGRAWAL, M.D.



**Associate of:** Hospital of Saint Raphael, 1450 Chapel St., New Haven, (203) 789-3203  
**Specialty:** Internal Medicine

**Medical School:** Federal University of Paraiba, Brazil, 1993

**Training/Experience:** Hospital Universitario Alcides Carneiro, Brazil, Intern/Medicine 1993; Easton Hospital/Hahnemann Hospital, Easton, Pa., Intern/Resident/Medicine 1996-99; Hospital of Saint Raphael, Attending 1999

### MARK BLITZER, M.D.



**Associate of:** Arrhythmia Center of Connecticut, 330 Orchard St., Suite 210, New Haven, (203) 867-5400  
**Specialty:** Cardiology

**Medical School:** Harvard Medical School, Boston, 1991

**Training/Experience:** Brigham & Women's Hospital, Boston, Intern/Resident/Internal Medicine 1991-94; Columbia Presbyterian Medical Center, N.Y., Fellow/Cardiology 1994-97, Fellow/Electrophysiology 1997-99; Hospital of Saint Raphael, Attending 1999

### MATTHEW COHEN, M.D.



**Associate of:** Gastroenterology Center of Connecticut, 2200 Whitney Ave., Suite 360, Hamden, (203) 281-4463  
**Specialty:** Gastroenterology

**Medical School:** University of Massachusetts School of Medicine, Worcester, Mass., 1991

**Training/Experience:** Strong Memorial Hospital, Rochester, N.Y. Intern/Resident/Medicine 1991-94; Yale University School of Medicine, New Haven, Fellow/Digestive

Diseases 1994-97, Associate Research Scientist 1997-present; Hospital of Saint Raphael, Attending 1999

### AGNES CZIBULKA, M.D.



**Associate of:** Ear, Nose & Throat Medical and Surgical, 31 Broadway, North Haven, (203) 234-1324  
**Specialty:** Otolaryngology

**Medical School:** University of PECS, Hungary, 1977

**Training/Experience:** University of PECS, Hungary, Resident/Otolaryngology 1977-82, Assistant Professor 1982-89; Yale University, Postdoctoral Associate 1989-91, Associate Research Scientist 1991-92, Research Affiliate 1992-95; Yale-New Haven Hospital, Intern/Surgery 1994-95, Resident/Otolaryngology 1995-99; Hospital of Saint Raphael, Attending 1999

### HARISH GUNDLURU, M.D.



**Associate of:** Hospital of Saint Raphael, 1450 Chapel St., New Haven, (203) 789-3203  
**Specialty:** Internal Medicine

**Medical School:** Kurnool Medical College, India, 1988

**Training/Experience:** AIIMS, New Delhi, India, Junior Resident/Orthopedics 1990-92, Senior Resident/Physical Medicine & Rehabilitation 1993-94; Hospital of Saint Raphael, Intern/Resident/Medicine 1995-99, Attending 1999

### DWIGHT LIGHAM, M.D.



**Associate of:** Advanced Diagnostic Pain Treatment Center, P.C., 60 Temple St., New Haven, (203) 624-4208  
**Specialty:** Anesthesiology/Pain Management

**Medical School:** State University of New York, Syracuse, 1992

**Training/Experience:** St. Joseph's Hospital Health Center, Syracuse, Intern/Transitional 1992-93; Yale-New Haven Hospital, New Haven, Resident/Anesthesiology 1993-96; Cayuga Medical Center, Ithaca, N.Y., Attending 1996-98; Clinical Fellow/Pain Management 1998-99; Hospital of Saint Raphael, Attending 1999

### LLOYD SABERSKI, M.D.



**Associate of:** Advanced Diagnostic Pain Treatment Center, P.C., 60 Temple St., New Haven, (203) 624-4208  
**Specialty:** Anesthesiology/Pain Management/

Internal Medicine

**Medical School:** New York Medical College, Valhalla, N.Y., 1982

**Training/Experience:** Albany Medical Center, Albany, N.Y., Intern/Resident/Medicine 1982-85, Resident/Anesthesiology 1985-87, Fellow/Pain Management & Obstetrical Anesthesiology 1987-88; Albany Medical Center, Assistant Professor 1988-89; Yale University School of Medicine, New Haven, Associate Research Scientist 1989, Assistant Professor 1989-95, Associate Clinical Professor 1995-98, Associate Professor 1998-present; Hospital of Saint Raphael, Attending 1999

### NEIL TISHKOFF, M.D.



**Associate of:** New Haven Radiology Associates, 670 George St., New Haven, (203) 789-3124  
**Specialty:** Radiology

**Medical School:** State University of New York at Stony Brook, N.Y., 1992  
**Training/Experience:** University of Rochester, N.Y., Intern/Medicine 1992-93; University of Pittsburgh Medical Center, Resident/Radiology 1993-97, Fellow/Neuroradiology 1997-99; Hospital of Saint Raphael, Attending 1999

## New Patient Service Center in Hamden offers convenient blood testing

To better serve those who live outside New Haven, the Hospital of Saint Raphael recently opened a blood drawing center in Hamden at the Spring Glen Medical Center, Suite

110, 2200 Whitney Ave. This Patient Service Center offers a full range of blood testing services, free parking, and no appointments are needed. It's open 8 a.m. to 6 p.m. Monday

through Friday; 9 a.m. to 1 p.m. Saturdays. Most major insurance plans are accepted, including MedSpan, WellCare and Connecticare. For more information, call (203) 407-1087.

## Saint Raphael's again a 'Top 100 hospital'

The Hospital of Saint Raphael was recently named one of the top 100 acute-care hospitals in the country for overall services for the second consecutive year. It's the only Connecticut hospital on the list. The honor came in the seventh annual "100 Top Hospitals: Benchmarks for Success," which identifies U.S. hospitals that deliver the highest quality and most cost-effective medical care. The objective study was conducted by HCIA, a Baltimore-based healthcare information company. This most recent award comes on the heels of Saint Raphael's being named a Top 100 hospital for cardiac and orthopedic care in two separate studies released by HCIA during the past several months.

## Saint Raphael's ready to open surgery center

To meet patients' increased demands for sophisticated outpatient surgical services, the Hospital of Saint Raphael will open in April the Hamden Surgery Center.

Physicians will perform a wide variety of surgical procedures at this 2080 Whitney Ave. facility, including cardiac; orthopedic; ophthalmologic; ear, nose and throat; and plastic surgery. Services offered here will be especially convenient for Hamden, Cheshire, Wallingford and North Haven residents, as well as others who live within Saint Raphael's service area. The location is easily accessed from both the Merritt Parkway and Interstate 91.

Look for details about the Hamden Surgery Center opening in the May/June *Better Health*.

## Caring outreach, medical skills save young man from dying

Saint Raphael's skilled caregivers and caring mission helped save 21-year-old David Melendez from bleeding to death.

Sister Peggy O'Neil, a member of the Sisters of Charity of Saint Elizabeth — the same order of nuns who founded and continue to sponsor the Hospital of Saint Raphael — met Melendez while she was doing missionary work in Suchitoto, El Salvador. Melendez was hospitalized there, bleeding as much as three pints of blood an hour from an unusual adolescent nasal tumor called juvenile nasopharyngeal angiofibroma.

He needed an operation quickly to prevent further blood loss. But El Salvadoran medical technology was not advanced enough to handle this delicate operation. Doctors told his parents he had a 90 percent chance of dying.

When Sister Peggy learned of Melendez's situation, she contacted Sister Anne Virginie, vice chairperson of the Saint Raphael Healthcare System Board of Trustees, who in turn enlisted the help of ear, nose and throat specialist Howard Boey, M.D. The result: Melendez and his mother, Marta, came to Saint Raphael's, and Boey removed the very large, non-cancerous tumor without any complications. Melendez today is back home in El Salvador and doing great. "My son would have died without this operation," says Marta Melendez. "It's as if God opened the doors, and everyone came out like angels to help us."



David Melendez with ear, nose and throat specialist Howard Boey, M.D.

## coming next issue

### ABCs of artery disease

Pain in your legs or buttocks could be a sign of peripheral artery disease, which reduces blood flow to your lower body and causes muscles to cramp. Learn how this condition develops, plus how the circulatory system works.

### When the kids are sick

Coughs and fevers mean not just days home from school for your kids, but missed work days for you, too. Here's how both kids and parents can — hopefully! — get and stay well for the rest of the cold season.

### I have cancer

These words can be devastating to anyone. But they're unfortunately what thousands of people have to tell friends and loved ones every day. Read how your neighbors have dealt with this diagnosis, and their hopes for the future.

### Understanding endometriosis

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inside saint raphael's

**Hospital installs second MRI**

Saint Raphael's has installed a second magnetic resonance imaging (MRI) machine to meet increased demands for cardiac, abdominal, vascular and neurological imaging. This sophisticated equipment shows physicians the inside of the body much better than conventional x-rays. It works using signals from a very large magnet, called a radiowave transmitter, and a computer to create detailed pictures. The MRI is housed in Saint Raphael's Orchard Medical Center.


**Saturday mammograms now available**

Mammograms are now being offered on Saturdays from 8 a.m. to 4 p.m. in Saint Raphael's Radiology Department. Appointments are needed for basic screenings, and in-depth diagnostic exams require a physician referral. Most medical insurances are accepted. For more information or to make an appointment, call 789-5154.

**Auxiliary hosts St. Patrick's Day brunch, auction**

The Saint Raphael Auxiliary will host a St. Patrick's Day brunch and silent auction at 11 a.m. Sunday, March 12, at the New Haven Country Club, 160 Hartford Turnpike, Hamden. For tickets, costs and more information, call Mary Leigh Sabshin at (203) 389-1952.

*Inside Saint Raphael's is written by Wayne Harris, Department of Public Information*




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## What's your risk for Breast Cancer?



Yale Cancer Center and the Hospital of Saint Raphael are participating in a breast cancer prevention trial. Women over age 35 who are post-menopausal and at increased risk for breast cancer may be eligible.

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\*Study of Tamoxifen and Raloxifene in the prevention of breast cancer. (HIC#10960)

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Through the pages of Better Health, the Saint Raphael Foundation's Gifts in Remembrance program has grown to be an important source of funds in support of the Hospital of Saint Raphael and Saint Regis, the Saint Raphael nursing home. At the same time, it has given donors a fitting way to pay tribute to a family member, friend or associate at the time of death, and also to celebrate a special occasion — perhaps the birth of a child, an anniversary, birthday or other significant event.

Due to production deadlines, this listing reflects gifts received by December 15. To make a donation, simply complete the coupon below, and return it to the Saint Raphael Foundation. Or, for immediate action, call us at 789-3242. Acknowledgement cards will be mailed according to your instructions.

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## a survivor's story wheelchair-bound, he rolls over the blues

Bill Dorfer of West Haven may be confined to a wheelchair because of muscular dystrophy, but he's always on the run. This busy stay-at-home dad volunteers as a Cub Scout Den leader and advocates for people with disabilities. And he's known in the community for his good cheer.

Some days, however, he can't help but feel down. Muscle pains and physical limitations constantly remind him that he has an incurable disease, and that he'll never be able to play ball with his 6-year-old son, Billy, or stroll through the sand with his wife, Joan. But that's when the love of his family, and faith in God, remind him of just how blessed his life has been.

Dorfer, 55, recently spoke with Better Health writer Janet Youtt about living with this degenerative disease.

It's not easy to watch your muscles waste away. I've been doing it for the past 40 years. And to say the least, it's emotionally draining. With muscular dystrophy, you can't plan for the future because you don't know how you'll be.

I knew something wasn't right with me at 13, when I couldn't climb ropes with the other boys. I figured my muscles needed to catch up to my quickly growing body. But then in high school, when I played football, I was always the slowest one.

As an adult, I joined the Navy and planned to make it my career. But during boot camp, I couldn't do the mandatory exercises and was sent to the military hospital for evaluation. They determined that I contracted polio as a child, which left my muscles weak, and gave me an honorable discharge.

So I went to college, landed a job on Wall Street and lived comfortably in New York. But that's where my life changed drastically in many ways.

First, my eyes were opened to the plight of the poor. Every day I was walking by homeless and poor people — some days literally stepping over the bodies of those living on Skid Row. And that made me realize I didn't want to be in the corporate world. I wanted to help others. So I quit my job and became a fund-raiser for a non-profit agency. But

there were other things going on inside me, too. I found myself losing my stamina. I was tired all the time. Climbing stairs took more effort. I would lose my balance. I could actually feel my muscles deteriorating.

I soon moved to Bridgeport, where I was hired to start a soup kitchen, and there, everything came to a head. I was literally tripping over cracks in the sidewalk and got scared. So I went to a doctor. And at age 30, I was diagnosed with FSH — facioscapulohumeral — one of 40 types of muscular dystrophy.

I needed a cane and plastic leg braces to walk, and they worked well for me for 10 years. But then my muscles weakened to the point where I could no longer stand up. I had to buy a wheelchair. And when I sat in it, I began to cry. My disability had finally become a reality.

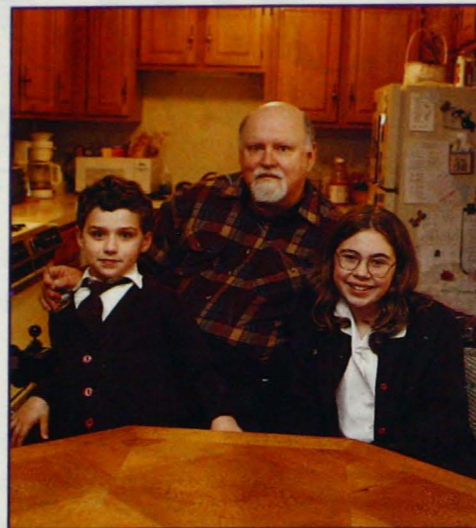
*'I've never once asked God to make me better. I know it won't change anything.'*

I stopped working all together about nine years ago, because my body just wasn't capable of working a full day. MD sucks every bit of energy out of you. And it's not easy to have to depend on others. I want to do everything myself,

but can't. When I drop an egg on the floor, I have to cover it with a paper towel and wait for someone to clean it up.

What's hardest, though, is being a father from a wheelchair. I've never been able to pick up my son without help or run after a soccer ball. He and I spend quality time together in other ways — doing homework, reading and telling each other stories. But I'd be lying if I didn't say I wished we could do more.

I choose not to get bitter over my disability. And I've never once asked God



Bill Dorfer at home with his son, Billy, and niece, Lindsay.

More than 1 million Americans suffer from **MUSCULAR DYSTROPHY**, an incurable disease characterized by progressive weakening and shrinking of muscles, most commonly in the arms, legs and spine. There are 40 forms of MD, but all stem from the lack of a key protein necessary for muscle function. Some MD disorders are severe at birth and lead to early death, while others follow a slow, progressive course over many decades. Symptoms can include muscle weakness, lack of coordination, clumsiness, inability to walk or climb stairs and difficulty raising the arms over the head. And in most cases, the disease progresses to where spinal muscles are deformed, and the patient is confined to a wheelchair. For more information, contact the national Muscular Dystrophy Association at (800) 572-1717 or [www.mdusa.org](http://www.mdusa.org), or the state chapter at (203) 985-4400.

to make me better. I know it won't change anything. Instead, I hope I can use my sickness to give others courage to overcome the obstacles in their lives. ☺

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