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March + April 2014

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HEALTH

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HEALTH

matters™

Medical Breakthroughs Advance Quality Care

Patients Benefit from
New and Improved
Treatment

Find Solutions to
Eliminate Chronic Pain

Communities Mobilize
to Fight Child Abuse

Why You Shouldn't Skip Breakfast



Still feeling chronic pain from your injury or surgery?



Anyone can have chronic pain.

Sometimes surgery, an injury, or an accident can result in chronic nerve pain. Nerve pain is often described as a shooting, burning or stabbing sensation. Some of the incidents that can result in this type of nerve pain include:

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- Surgeries
- Accidents
- Falls
- Burns

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Phone: (913) 381-5225 ext 351 Study Nurse | ClinicalResearch@kcbj.com





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Liver transplant recipient returns to his love of writing after surgery.

A Remarkable Journey...

This issue marks the 9th year of publishing Our Health Matters magazine. Since we launched, the advancements in public health have added 25 years to the life expectancy of people in the United States. To celebrate this remarkable achievement, I thought it would be meaningful to see how far we've come in advances in patient care, technology and new policies that protect our nation's health and safety.

- 2004 >** The Human Genome Project that identified 100,000 genes in human DNA was completed two years ahead of schedule.
- 2006 >** First vaccine to target cause of cancer was discovered
- 2007 >** Scientists discovered how to use human skin cells to create embryonic stem cells
- 2008 >** Mental Health Parity Act amended to require full parity. Insurance companies must treat mental health conditions on an equal basis
- 2012 >** The Medicare Better Health Rewards Program Act, offered financial rewards for health choices
- 2013 >** Introduction of a handheld optical scanner to detect skin cancer and bladeless cataract surgery

As we reflect on all that has been accomplished to build a healthy nation and community, it gives us hope that the future will be even brighter. Our conversation with you—our readers and partners has made this incredible journey possible. As we enter another year of publication, we promise to not stop pressing for coverage of information that matters to you. Thanks for your continued support.



Ruth Ramsey, Publisher and CEO

To continue this conversation
visit kcourhealthmatters.com
and let us know your thoughts.



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PUBLISHER

Ruth Ramsey
ruthramsey@kcourhealthmatters.com

**EDITORIAL &
STRATEGIC PLANNING**

Donna Wood
dwood@kcourhealthmatters.com

EVENT COORDINATOR

Barbara Bartholomew
bebe@kcourhealthmatters.com

HAVING AN EVENT?

calendar@kcourhealthmatters.com

GOT QUESTIONS?

info@kcourhealthmatters.com

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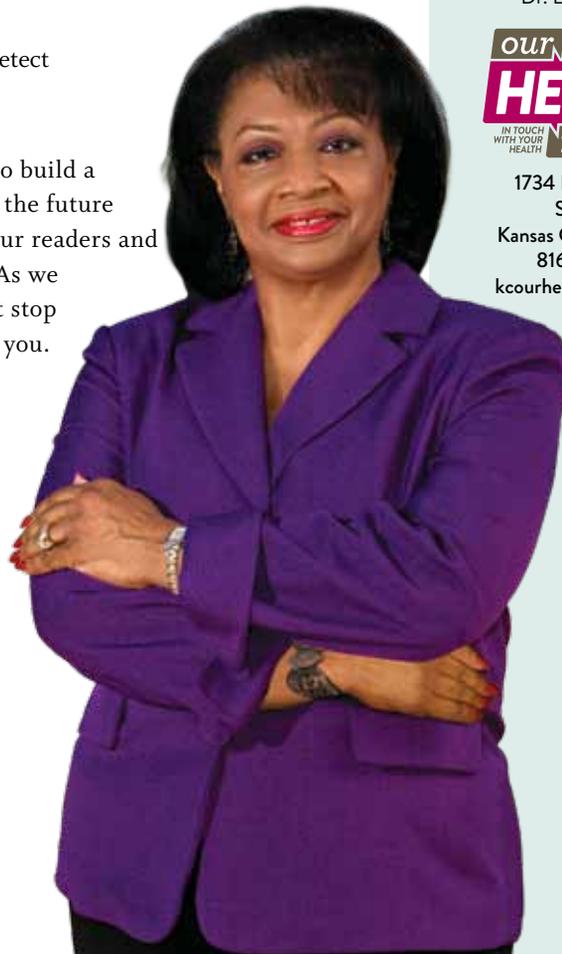
www.kcourhealthmatters.com

CONTRIBUTORS

Julie Brookhart
Aimee Bultemeier
Jill Chadwick
Child Abuse Prevention Assoc.
Dr. Michael Farber
Dr. Bradley Freilich
Rollin M. Gallagher, MD
Dale Garrison
Dr. Aaron Grantham
Kansas City Bone & Joint Clinic
Dr. Stephen Kingsmore
Sean Kumer, MD
Willie Lawrence, MD
Michelle Manual
Markisha Mitchell, RN
Autel Patel, MD
Tom Prizzo
Tim Schmidt, MD
Dr. Lamont Weide



1734 E. 63rd Street
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Kansas City, MO 64110
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Protecting Children and Building Healthy Families

Celebrate National Child Abuse Prevention Month

By Child Abuse Prevention Association (CAPA)

In April, the attention of Kansas City will turn toward child abuse prevention awareness. Child Abuse Prevention Month is a time when communities work to acknowledge the prevalence of child abuse and neglect and honor those children who have lost their lives to the trauma of abuse. For the Child Abuse Prevention Association (CAPA), it is also a time to partner with community systems and work together to reduce the risk factors of abuse, not only in April, but year-round.

Child abuse and neglect cases burden our child welfare systems and overwhelm the court, law enforcement and health

“ PARENTING IS DIFFICULT, AND PARENTING SAFELY IN THE FACE OF POVERTY, MENTAL ILLNESS AND FAMILY STRAIN CAN BE A SEEMINGLY INSURMOUNTABLE TASK. ”

care systems. A 2009 study highlighted the strain that child abuse and neglect placed on the Medicaid system, estimating that children affected by abuse, or at-risk for abuse, incurred more than \$2,600 in additional Medicaid costs compared to children not affected by abuse. In order to support holistic healing, these youth

need extra investments of psychiatric inpatient hospitalization, outpatient care and clinical care.

Parenting is difficult, and parenting safely in the face of poverty, mental illness and family strain can be a seemingly insurmountable task. CAPA's work confirms that the most promising and effective way to prevent child abuse and neglect is by investing in families, ensuring that they each have access to health care, adequate mental health services and community resources that support family success. A community response dedicated to child welfare produces positive outcomes that can prevent incidents of child abuse and neglect.

In addition to providing therapy services for survivors of child abuse, CAPA also offers proven intervention services that address risk factors of child abuse. CAPA's in-home support services program, Healthy Families Connections, meets with vulnerable, young families with children, ages pre-natal — three years of age, who are isolated from health care and community resources. CAPA connects these families with preventative health care, educates parents on healthy child development, looks for signs of family distress and mentors new parents as they adapt to their responsibilities. Programs like these are vital in making a difference, but CAPA can't do it alone.

As we near Child Abuse Prevention Month, CAPA hopes fellow community professionals will renew their commitment to help us continue to improve our community's welfare. Help us kick-start Child Abuse Prevention Month by participating in our annual Blue Ribbon Burgers & Brews event and take your stand to prevent abuse in our community. ●

Blue Ribbon
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& BREWS
 A BENEFIT FOR CAPA

April 4, 2014 • 6:00 - 10:00 pm

Adams Pointe Conference Center
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 Blue Springs, Missouri 64014

Tickets:
 \$60 per person
 \$70 per person at the door

Order tickets online: bit.ly/capa-brbb
 Or call CAPA: **816.252.8388**

Sponsorships still available

capa
 child abuse prevention association

Join CAPA in a night of fun and entertainment at the Blue Ribbon Burgers & Brews benefit!

Enjoy delicious food and beverages of local eateries and breweries competing for this year's first prize Blue Ribbon.

Silent auction & live band.

GET YOUR TICKETS TODAY!

All proceeds to benefit CAPA in their efforts to help children and families in Jackson County heal from abuse.

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Kansas City Bone & Joint Clinic

Research Focused on Safety and Quality Care

THE CLINICAL RESEARCH TEAM AT KANSAS CITY BONE & JOINT CLINIC HAS BEEN CONDUCTING CLINICAL TRIALS FOR SEVEN YEARS.

The group recently created a team dedicated to increased quality and focus. Under the direction of Atul T. Patel, M.D., a physical medicine and rehabilitation physician, the team and support staff brings more than 55 years of combined research experience.

Along with their commitment to quality research, team members emphasize compassion and dedication to patient care. As a focused group, they have been able to target the common goal and are poised to launch more studies.

The idea of locating this research at the physician's location provides Dr. Patel and his team valuable proximity for research. The clinic improves accessibility for close monitoring of patients and ensures the safety and care of all patients.

As a physical medicine and rehabilitation specialist, Dr. Patel treats conditions involving the muscles (weakness, muscular dystrophy), bones and joints (arthritis and sprains), nerves (neuropathy and pain), brain and spinal cord (stroke, Parkinson's disease, multiple sclerosis, cerebral palsy). He uses special tests and equipment (electromyography and nerve condition studies - EMGs and ultrasound) to help with the diagnosis of some of these conditions. His treatment focus is to improve patients' function. The research team has conducted several clinical studies in areas that include post-stroke spasticity, nerve pain as a result of trauma or surgery and cervical dystonia.

The Kansas City Bone and Joint Clinic research team is currently examining new studies and growth potential. While these opportunities present exciting changes, the commitment to patient safety and care remains unchanged.



"Patient safety and care are our top priorities."

— Dr. Atul T. Patel, M.D.



Making Medicare and the Health Insurance Marketplace Make Sense

Answers to Some of the Most Commonly Asked Questions.

Although I know that if I have Medicare I don't need to shop in the Health Insurance Marketplace, but is there still time for others to shop for health insurance in the Marketplace and still get coverage in 2014?

Thanks to the Affordable Care Act, about 85% of Americans who already have health insurance are seeing their benefits and coverage better protected and seeing enhanced benefits. For example, insurance companies can no longer impose life time limits on your health insurance benefits so your insurance company can't stop

By Julie Brookhart
Public Affairs
Specialist
Centers for Medicare
& Medicaid Services

paying their share once you hit a certain dollar amount. At least 80% of your premium dollar now has to be directed to pay for your health care benefits, and not overhead, such as salaries and bonuses for insurance company executives.

If less than 80% is used for health care benefits, your insurance

company will owe you a rebate at the end of the year. Also young adults up to the age of 26 can stay on their parent's insurance. These are just a few examples of the benefits of the Affordable Care Act law, since it was implemented in 2010.

For uninsured Americans, roughly 15% of the nation's population, they will finally gain access to quality, affordable healthcare from private health insurance companies. Initial enrollment began October 1, through a new way to shop for health insurance.

All private health insurance plans that operate in the Marketplace are required to cover a comprehensive set of benefits, including physician visits, preventive care, hospital stays, and prescriptions. Discrimination based on gender and pre-existing conditions is banned. And many individuals and families will qualify for a break on their monthly premium and other out of pocket costs, depending on their income, through advanced tax

Need a health plan?

Visit **HealthCare.gov**

Need help?

Call **816-923-5800.**

Apply by **March 31, 2014.**



credits or through cost-sharing reductions. Be sure to include your income on your application to find out if you qualify for this help.

It is important for consumers to know that starting in 2014 the law says that individuals of all ages, including children, must have minimum essential health coverage, qualify for an exemption, or make a shared responsibility payment when filing their federal income tax return, as those without health insurance cause insurance premiums to rise for all others.



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Keep in mind an accident causing a broken limb can cost upwards of \$7500 and a 3-day hospital stay can cost thousands and thousands of dollars, out of pocket, without health insurance. In some cases, emergency health care costs could bankrupt individuals and families. Health insurance coverage through the Marketplace can bring peace of mind.

To Enroll:

- > Apply online at healthcare.gov, or find in-person help from certified assisters in your area
- Call 1-800-318-2596 (TTY: 1 855-889-4325) 24 hours a day, 7 days a week, or

Enrollment deadline is March 31, 2014.

Be sure to make your first month's premium payment after you have enrolled and check directly with your plan to ensure that your application is complete and when it becomes effective. •

Caribbean Tilapia with Pears and Carnival Roasted Potatoes

Serves 4

Enjoy a taste of the Caribbean with a rainbow mix of seasoned vegetables and seasoned tilapia and pears, baked in no-fuss foil or parchment packets.

Preparation time: 45 minutes

Directions:

Heat oven to 425 °F. Scrub potatoes under running water, cut into 1-inch chunks. In a large bowl, toss potatoes with other vegetables, seasonings, and olive oil. Spread mix in a 2-quart baking dish and place in oven. Roast until potatoes and other vegetables are tender, about 30-40 minutes.

About 15 minutes after the potato dish was placed in the oven, put in the cookie sheet with fish packets, prepared as follows: Brush fish with olive oil, coat with seasoning blend. Place each filet in the center of a square of aluminum foil (or substitute foil with parchment paper). Cut pears into quarters and core; slice into thin wedges (about 8-12 per pear). Top fish with pear wedges. Bring the foil over the fish and fruit. Fold and pinch the seams. Place foil packets on a cookie sheet. Bake about 20 minutes, until tilapia is cooked to an internal temperature of 145 °F, confirmed with a food thermometer, and fruit is tender. To serve, carefully open the packet, slide contents onto individual serving plates, and add roasted vegetables. •

Serving Suggestions:

Serve with an 8 oz glass of non-fat milk.

SOURCE: Produce For Better Health Foundation



INGREDIENTS:

Carnival Roasted Potatoes

- > 2 small red potatoes
- > 2 small Yukon potatoes
- > ½ yellow bell pepper, cut into 1" chunks
- > 1 cup green beans (fresh, frozen, or canned)
- > 1 Roma tomato, cut into wedges
- > 2 tbsp chopped white onion
- > 1 garlic clove, minced
- > ½ tsp cumin
- > ¼ tsp salt (optional)
- > 1 tbsp olive oil

Tilapia Oven Packets

- > 4 4-oz (1 lb total) tilapia fillets, fresh, or frozen
- > 1 tbsp salt-free Caribbean citrus seasoning blend
- > 2 tsp olive oil
- > 3 D'Anjou pears

Nutrition Analysis (per serving)

Calories.....	380
Total Fat.....	8.0g
Saturated Fat.....	1.5g
Trans Fat.....	0.0g
Polyunsaturated Fat.....	0.0g
Monounsaturated Fat.....	0.0g
Cholesterol.....	55mg
Sodium.....	220mg
Carbohydrates.....	54g
Fiber.....	8g
Sugars.....	7g
Protein.....	28g

Blood Pressure & You!

One woman's story of success.

By Ciara O'Brien Murray, American Heart Association

Tisha thought she was pretty healthy, despite her junk food diet. After a while, she began to notice problems with balance and dizziness. When her computer screen seemed blurry, she told herself she must need new glasses. "I finally went to the doctor, and when I walked in my blood pressure was 190 over 120. I was a walking stroke."

Tisha made some important changes and now she controls her risk factors much better. She stays physically active by dancing – something she's always loved. Tisha has made other positive lifestyle changes too, including taking blood pressure medication.

"High blood pressure is the single most significant risk factor for heart disease. Bottom line, it is a silent killer", said Dr. Willie Lawrence, Interventional

Cardiologist at the Midwest Heart Associates, in Kansas City.

High blood pressure, also known as hypertension, means the blood running through your arteries flows with too much force and puts pressure on your arteries, stretching them past their healthy limit.

Uncontrolled high blood pressure can injure or kill you. It's sometimes called "the silent killer" because it has no symptoms. Unfortunately, about 90 percent of all Americans will develop hypertension over their lifetime and one in three adults has high blood pressure, yet, many people don't even know they have it.

However, there is good news! High blood pressure is manageable. Normal blood pressure is less than 120 mm Hg systolic AND less than 80 mm Hg diastolic or <120/80. Eating a heart-



"If we want to prevent heart disease, stroke and kidney disease within the African American community, we need to focus on high blood pressure."

- Willie Lawrence, MD
Interventional Cardiologist for
Midwest Heart Associates, Kansas City

healthy diet, which includes reducing sodium; enjoying regular physical activity and maintaining a healthy weight; managing stress; limiting alcohol; avoiding tobacco smoke are all simple lifestyle modifications that can help you live a heart-healthier lifestyle. •

Learn how to **Check. Change. Control** your blood pressure and start tracking your blood pressure today.

Visit www.heart360.org/kansascity-hypertensionproject to enter your numbers and get more information.

Uncontrolled high blood pressure can cause a stroke.

These two conditions affect African-Americans at a greater rate than they affect white people.

The prevalence of high blood pressure in African-Americans is among the **highest in the world**, and *it is increasing*.

Don't wait. Learn your risk and how to manage and treat high blood pressure today.

heart.org/hbp
powertoendstroke.org



Check.
Change.
Control.

Heart Disease and Stroke Statistics—2013 Update - American Heart Association

3 Breakfast Benefits

There are good reasons for eating the most important meal of the day.

By OHM Staff

Breakfast is the most important meal of the day, and for good reason. People don't eat breakfast in the morning for many reasons, such as not feeling hungry or to try to limit calories. However, skipping breakfast can lead to a number of problems. If you are trying to achieve or maintain a healthy weight, consider the following reasons to eat breakfast every morning.

Increases Your Metabolism

Eating breakfast gets your metabolism working well all day long. When your body receives food in the morning, it tells your brain that you need to start working to digest it. This wakes up the system and warms up the metabolism so it's ready to work throughout the day. When you don't eat breakfast, your body thinks it needs to conserve the energy it has because it isn't getting any more through nutrition. This actually slows your metabolism down, which results in a decrease in the amount of calories you burn.

Prevents You from Binging

Not eating breakfast may save you calories in the short run, but it sets you up for failure throughout the rest of the day. After not feeding your body for several hours overnight, and not eating in the morning, you will be grumpy and hungry. By lunch time, you're more likely to choose something high in fat and calories to satisfy your food cravings. If you can hold off through dinner, chances are you will feel an overwhelming urge to snack, which can really pack on the calories.

Improves Your Mood

Eating a morning meal will lift your spirits throughout the day for a number of reasons. First, after you eat a nutritious breakfast, your body won't think it's starving, so it's easier to get in a good mood. It also provides energy to help you get



regulate your blood sugar levels through lunch time, which also plays a vital role in your mood.

Eating something for breakfast is better than eating nothing at all. The more balanced your meal is, the better it is for you. Instead of a breakfast of bacon, eggs and toast that will leave you feeling heavy and sluggish, consider having a fruit smoothie and a bowl of oatmeal topped with fresh berries.

Breakfast is the one meal you do not want to miss. ●

through your daily tasks, which can help keep your mood light and optimistic. A healthy meal in the morning can also help

BREAKFAST STATISTICS 2013 USDA, FOOD & AGRICULTURAL ORGANIZATION

Percent of Americans who eat breakfast every day	44 %
Percent of breakfast skippers who are obese.....	22 %
Percent of Americans who believe breakfast is the most important meal	93 %
Percent of breakfast meals that include eggs.....	12 %
Percent of children who eat sweetened cereal for 1 or more breakfasts a week.....	73 %
Percent of parents who eat breakfast with their children	79 %
Percent of school children who eat breakfast regularly.....	80 %
of those, Percent who ate breakfast at home.....	59 %
of those, Percent who ate breakfast at school.....	31 %
of those, Percent who ate food from a local store	18 %
Percent of fast food sales that are breakfast meals	21 %

Source: www.statisticbrain.com/breakfast-eating-statistics/

New Solutions in Pain Management

Advances in medicine and technology offer better solutions for chronic pain relief.

By OHM Staff

Pain is experienced differently from person to person, it is often difficult to diagnose and treat. If you are living with chronic pain, here's some important news. Today's specialists in pain management use sophisticated new treatments -- from effective drugs to implants and electrical stimulation -- to provide relief from chronic pain.

Chronic pain – a condition shared by 100 Million Americans, is defined as the type that lingers for weeks, months or years. Recent advancements have emerged, as researchers gain a greater understanding of chronic pain and how it develops. The origins of chronic pain are varied: including sports injuries, back injuries, accidents and health conditions like migraines, diabetes, arthritis, shingles and cancer.

What's new

Past generations often have heard that their chronic pain was “all in their heads,” says Rollin M. Gallagher, MD, MPH, director of pain management at the Philadelphia VA Medical Center.

Today's pain specialists understand how the sensation of pain occurs – how the nervous system, including the spinal cord, interacts with the brain to create that sensation, according to Gallagher.

The chemical messengers that pass nerve signals to the brain have opened the door for new methods of chronic pain relief. Scientists have learned how to control those chemical messengers. This has led to using antidepressants and other drugs to work with specific brain chemicals that affect emotions and help scientists in understanding pain.



With advances in magnetic resonance imaging (MRI), researchers can clearly demonstrate that the changes in the brain are very real. These images can show exactly where the sensation of pain is occurring in the brain when it is activated by stimuli. Now it's possible to see the effects of pain on emotion and emotion on pain.

Another new discovery is “central sensitization” occurs when initial pain from an injury is not adequately treated, the pain signals are sent repeatedly. Dr. Kwai-Tung Chan, a pain specialist and professor of physical medicine and rehabilitation at Baylor College of Medicine in Houston, says this lack of treatment leads to changes in the central nervous system, increasing sen-

sitivity. “Over time, even the gentlest touch can become very painful.”

Field of Experts Bring More Relief

Pain specialists transform the way people with pain get the care they need and deserve. Prescribed treatments relieve moderate-to-severe chronic pain from many angles ranging from innovative drugs, targeted nerve-zapping procedures, to drug pumps that deliver strong painkillers to the nerve root. Doctors today also endorse the use of psychotherapy, relaxation techniques, music and art therapies, supported by growing evidence of the mind-body connection in chronic pain relief. ●

For more information visit The American Academy of Pain Medicine www.aapainmanage.org



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University of Utah Bioethicist

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trumed.org

Exploring Physical Therapy Careers

Helping people regain the ability to carry out daily life activities creates great professional satisfaction.

By OHM Staff

What Physical Therapist Do

Physical Therapists (PTs) provide services that help restore function, improve mobility, relieve pain and prevent or limit permanent physical disabilities of patients with injuries or disease. PTs work closely with patients and clients to restore, maintain and promote their overall fitness and wellness for healthier and more active lifestyles. Patients may include accident victims and individuals with disabling conditions such as low back pain, fractures, head injuries, arthritis, heart disease and cerebral palsy.

PTs take the patient's/client's history and conduct a systems review. They also perform tests to measure capabilities to identify potential and existing problems, including strength, range of motion, balance and coordination, posture, muscle performance, respiration and motor function. Based on the examination and evaluative judgment, PTs determine a patient diagnosis, prognosis and plan of care that describes evidence-based treatment strategies and the anticipated functional outcomes.

PTs may consult with other medical-care providers, including physicians, occupational therapists and social workers. Finally, as a part of the plan of care, PTs determine the patient's ability to be independent and reintegrate into the community or workplace after injury or illness.

Education and Training

Physical therapists entering the profession need a Doctor of Physical Therapy (DPT) degree. All states require physical therapists to be licensed.

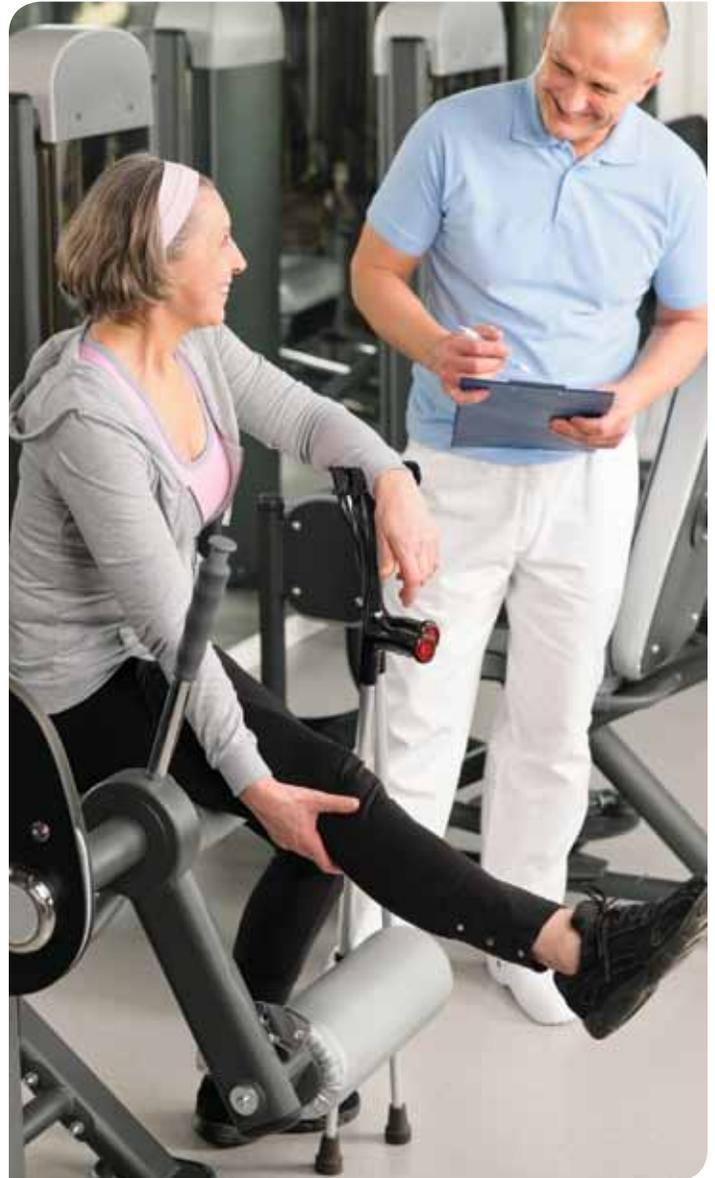
Working Conditions

Physical Therapists practice in a variety of settings, including hospitals, outpatient clinics, private offices, home health agencies, schools, sports and fitness facilities, work settings and skilled nursing facilities. Most full-time PTs work a 40-hour week, which may include some evenings and weekends.

This position can be physically demanding, because PTs often have to stoop, kneel, crouch, lift and stand for long periods. In addition, physical therapists move heavy equipment and lift patients or help them turn, stand, or walk.

Salary

The median annual wage for physical therapists was \$79,860 in 2012, according to the Bureau of Labor Statistics. The best-paid 10 percent of workers in the category made \$112,020, while



the bottom 10 percent made \$55,620. The highest wages are for home health care and consulting positions. The best-paid physical therapists live in Las Vegas, Nevada; Fairbanks, Alaska; and Jacksonville, Florida.

Job Outlook Excellent

- > Average Salary \$80,000
- > Years in School 6 - 7

Career Outlook

Job opportunities look good in the field, and employment is expected to grow much faster than average, thanks to rising demand for such services among older baby boomers. By 2022, the Bureau of Labor Statistics projects physical therapist employment growth of 36 percent, with the field adding 73,500 more jobs. Driving this demand for physical therapists are older people who experience heart attacks, strokes and other injuries that require rehabilitation. Physical therapists are also increasingly being called upon to help manage chronic conditions, including diabetes and obesity. •

For more information on pursuing a career in this field, visit the American Physical Therapist Association website (www.apta.org). For a partial list of local academic institutions offering training in this field go to www.kcourhealthmatters.com

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Kansas City, MO 64108

Northland Family Medicine & WIC Services
4820-A North Oak Trafficway
Kansas City, MO 64118

Clay County Family Medicine & Dental
800 Haines Drive
Liberty, MO 64068



Medical Breakthroughs Advance Quality Care

Patients Benefit from New and Improved Treatment

It's common knowledge that medical breakthroughs are good news, especially when they offer hope for you or someone you know. Even better news is that some of them are happening in the Kansas City area.

MANY OF TODAY'S FINDINGS also offer ideas that you can use to improve your own health. They can help keep you well and offer more options if you face a medical decision.

A good example involves a new technique at Saint Luke's Hospital for treating complete blockage of an artery to the heart.



Dr. Aaron Grantham

Dr. Aaron Grantham notes that blocked coronary arteries have been treated for years, but total blockage means that traditional methods won't work. Now, the team at Saint Luke's is using special techniques to follow microscopic detours and restore blood

flow to the heart that can keep patients alive and improve their quality of life.

One catch is that the technique is so new there are only about 50 operators worldwide. Dr. Grantham and others are working on that, too. "This can make a big difference in someone's life," he concluded. "We want everyone to have options."

Saving Children

One of the most dramatic breakthroughs began over the past several years at Children's Mercy Hospitals and Clinics in Kansas City. In the Center for Pediatric Genomic Medicine, Dr. Stephen Kingsmore is leading studies that



Dr. Stephen Kingsmore

are unlocking genetic diseases in children and helping identify mysteries that once brought sickness and death.

Genetic diseases like cystic fibrosis or Down syndrome affect about three percent of all children and account for approximately 15 percent of childhood hospitalizations. Until recently, each disease needed its own test. “You had to test for one at a time and that can take years,” Dr. Kingsmore said. “And all that time, your child is getting worse.”

Children’s Mercy is also working to make the techniques available to the estimated half a million patients who could use it every year. “Families that face these diseases have been in a horrible nightmare,” he concluded. “Now there is hope.”

Mind and Body

Mental health is something many may want to ignore, but it affects one out of every four people sometime during their life. One of the most dramatic breakthroughs involves a link between mental and physical health.

On average, people with a serious mental illness die 25 years earlier than the rest of the population and face medical expenses such as more emergency room visits that often cost everyone. Making sure they are tested for widespread conditions like diabetes is important.

Solutions include programs like the new Healthcare Home at Tri-County Mental Health Services. CEO Tom Petrizzo said the effort is part of a new initiative across Missouri that began two years ago. “We’re looking at the whole person,” he explained. “Prevention and early treatment really make a difference. That’s important for people’s health and reduces hospital and emergency room visits. That helps all of us.”



Tom Petrizzo

Complex Battle

Diabetes is another illness that affects millions and is growing at alarming rates. Among its symptoms is nerve damage that often results in tingling or pain in the feet and other areas.

At the University of Kansas Medical Center, a diverse team studied the effect of exercise on this condition that cripples thousands each year. Their findings indicate that a little exercise can reduce pain and even reverse some damage that causes the problem in the first place.



From left:
Doug Wright, Ph.D.
Patricia Kluding, Ph.D.
Mamatha Pasnoor, M.D.

The team is composed of Doug Wright, Ph.D., neuroscientist; Patricia Kluding, Ph.D., associate professor of physical therapy and rehabilitation science; and Mamatha Pasnoor, M.D., assistant professor of neurology and co-director of the University of Kansas Neuropathy Center.

“People with diabetes are prone to problems like foot ulcers, infections and even amputation,” Dr. Kluding said. “But they not only tolerated the exercise, they also enjoyed it and had a decrease in pain and improved quality of life. They could go out and enjoy things.” There are even indications that damaged nerves improved.

The team is currently seeking a grant to fund expanded studies. They also see links to other conditions such as fibromyalgia, where evidence indicates similar benefits are possible.

Early Intervention

Diabetes is also grabbing a lot of attention because of a near epidemic in Greater Kansas City and nationwide. Dr. Lamont Weide at



Dr. Lamont Weide

Numbers Tell the Story

The Center for Disease Control and Prevention estimates 3.2 million persons in the United States have chronic Hepatitis C virus infection.

- > The National Diabetes Information Clearinghouse (NDIC) reports that diabetes affects 25.8 million people of all ages in the United States, or approximately 8.3 percent of the population.
- > The Center for Disease Control estimates that 12.9 million people have coronary heart disease.
- > The American Heart Association reports that about 600,000 people die from heart disease each year.
- > The National Institute of Mental Health estimates that about one in four adults ages 18 and older —suffer from a diagnosable mental disorder in a given year and approximately one in 17, suffer from a serious mental illness.

Where to Find More Information

- > Hepatitis Foundation International, www.hepfi.org
- > The American Diabetes Association, www.diabetes.org
- > The American Heart Association, www.heart.org
- > National Alliance on Mental Illness, www.nami.org
- > Missouri Department of Mental Health, www.dmh.mo.gov

Truman Medical Center said improvements in treatment have arrived just in time. One of the most important breakthroughs involves aggressive, early treatment.

“We’ve had a tremendous increase in patients diagnosed with diabetes,” he said. “But we know that if we get good control of diabetes early, that can have impact even beyond the immediate improvement. Long-term risks like heart disease go down, and other factors improve as well.”

One significant shift involves insulin, long considered a treatment of last resort.

“In the past, both the doctors and patients looked at insulin as failure,” Dr. Weide said. “Now we know that, with early control, the patient can prolong his or her health. Insulin is not for every patient, but we’re taking a broader view.”

Truman is partnering with Joslin Diabetes Center to get that word out to physicians. As with patients, education may be the biggest breakthrough of all.

“Our goal is to give people the knowledge and tools to take care of themselves the best they can,” he said.

Wonder Drug

Another persistent, often deadly disease is hepatitis. One strain, hepatitis C, is especially widespread in baby boomers because of factors ranging from past drug use to blood transfusions done before the 1990s when hep C blood tests were not effective.

In December 2013, a major breakthrough came with a new medication, Sofosbuvir. The new drug offers a huge improvement over earlier treatments like interferon—if people get tested and use it.

“The new drug can eliminate the need for interferon or shorten its use by months,” said Dr. Bradley Freilich of the Hepatitis Treatment Center, Research Medical Center. “And unlike interferon, it doesn’t have severe side effects. This is dramatic.”

Sofosbuvir delivers success rates greater than 90 percent compared to previous benchmarks of 50 percent. The new compound works more quickly, with positive results within two to three months compared to a year or more.

“It’s brought on a whole new era of treating people,” Dr. Freilich said. “It’s made a big difference.”

This makes it critical for people to be tested, especially people between 48 and 68 years old. “Two-thirds of the people don’t even know they have hepatitis,” Dr. Freilich said. “That’s why there’s a big push to screen everyone at least once, especially

baby boomers. Seventy-five percent of those with hepatitis C were born between 1945 and 1965.”

Finding Solutions

Liver disease has other causes, including the growing problem of obesity. Also at Research Hospital, Dr. Michael Farber is among physicians using new equipment to test for liver damage without surgery. The equipment is called magnetic resonance elastography or MRE.

“MR elastography can help determine if they have fat in the liver and have inflammation and stiffening of the liver,” Dr. Farber said. “This also gives us a larger sample, which is important.”

Hopefully, you or a family member won’t face serious health decisions. But with many diseases, the odds are that you or a loved one will at some point. But almost everyone can improve their odds of avoiding or beating a disease with immunization, regular tests, prevention and moderate exercise. If you do face them, these and new medical advances bring reason for hope.

“People underestimate what they can do themselves,” Dr. Freilich concluded. “It’s important to take advantage of what’s available.” •



Dr. Michael Farber



Dr. Bradley Freilich



What You Should Know About Pain Management Centers

Treating the total person is the focus of these healthcare facilities.

By OHM Staff

According to the Centers for Disease Control (CDC) there are 50 million Americans (1 in 5) living with chronic pain. If you have been trying to treat your pain and it doesn't provide relief, a pain clinic may help.

A pain clinic is a health care facility that focuses on the diagnosis and management of chronic pain. Some specialize in specific diagnoses or in pain related to a specific region of the body. Also called pain management clinics, pain clinics often use a team of specialists to help people take an active role in managing their pain and regaining control of their life. These programs are focused on the total person, not just the pain.

What Does a Pain Clinic Do?

Pain clinics differ in their treatment options, most involve a team of health care providers that can help you with a variety of solutions to manage your pain.

The team of health care providers is likely to include doctors of different specialties as well as non-physician providers specializing in the diagnosis and management of chronic pain. These providers may include psychologists, physical therapists, and complementary and alternative therapists such as acupuncturists or massage therapists. Together, they will put together a pain management plan designed specifically for you.

What to look for in a Pain Clinic

There are many forms of pain treatment and not all centers offer the same services, it's important to do your homework before



you consent to treatment. Find out what types of pain therapies are offered, what the specialists' credentials are, and if they have successfully helped others with your type of pain.

When checking out a pain clinic, schedule an appointment to meet with the team. If you feel comfortable with them, it will be much easier for you to make progress. Asking yourself the following questions can also help you determine if a pain clinic is right for you.

Here are five things to look for

1. Does the staff treat me with compassion and respect?

2. Does it develop treatment plans based on individual needs?

3. Does it involve me in designing treatment and monitoring my progress?

4. Will my health care team communicate frequently and effectively with me, my family, and my primary care physician?

5. Does the clinic provide timely follow-up?

If you've been suffering with chronic pain, understand that there is hope and there is help. Seek out a medical provider who can help you with a variety of solutions to treat your pain. •

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Left to Right: Dr. Sharon Lee, Dr. Leslie Fields, Dr. Jasper Fullard
Directors of the Black Health Care Coalition

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What You Should Know About Adult & Children's Immunizations

As part of its mission to promote health and prevent disease, the Centers for Disease Control (CDC) publishes written recommendations for vaccinating U.S. children and adults. These recommendations are set to protect infants, children, adolescents, and adults against vaccine-preventable diseases.

Medical and public health experts review available data on newly licensed and existing vaccines. These experts, who include vaccine experts, scientists, doctors, and public health professionals, form the Advisory Committee on Immunization Practices (ACIP).

ACIP meets 3 times each year to discuss vaccine recommendations. They consider

- How safe and effective the vaccine is when given at a specific age
- The severity of the disease the vaccine prevents
- How many people get the disease if there is no vaccine
- How well the vaccine helps the body produce immunity to the disease



The Mother & Child Health Coalition Programs, Kansas City Healthy Start and Mid America Immunization Coalition, want to help families stay informed about immunizations.

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Recommended immunization schedule for persons aged 0 through 18 years – United States, 2014.

Vaccine	Birth	1 mo	2 mos	4 mos	6 mos	9 mos	12 mos	15 mos	18 mos	19–23 mos	2–3 yrs	4–6 yrs	7–10 yrs	11–12 yrs	13–15 yrs	16–18 yrs
Hepatitis B ¹ (HepB)	1 st dose	2 nd dose							3 rd dose							
Rotavirus ² (RV) RV1 (2-dose series); RVS (3-dose series)			1 st dose	2 nd dose	See footnote 2											
Diphtheria, tetanus, & acellular pertussis ³ (DTaP; <7 yrs)			1 st dose	2 nd dose	3 rd dose				4 th dose			5 th dose				
Tetanus, diphtheria, & acellular pertussis ³ (Tdap; ≥7 yrs)													(Tdap)			
Haemophilus influenzae type b ⁴ (Hib)			1 st dose	2 nd dose	See footnote 5				3 rd or 4 th dose, See footnote 5							
Pneumococcal conjugate ⁶ (PCV13)			1 st dose	2 nd dose	3 rd dose				4 th dose							
Pneumococcal polysaccharide ⁶ (PPSV23)																
Inactivated poliovirus ⁷ (IPV) (<18 yrs)			1 st dose	2 nd dose					3 rd dose			4 th dose				
Influenza ⁸ (IV; LAIV) 2 doses for some: See footnote 8																
Measles, mumps, rubella ⁹ (MMR)									1 st dose			2 nd dose				
Varicella ¹⁰ (VAR)									1 st dose			2 nd dose				
Hepatitis A ¹¹ (HepA)																
Human papillomavirus ¹² (HPV2: females only; HPV4: males and females)																
Meningococcal ¹³ (Hib-Men-CY ≥ 6 weeks; MenACWY-D ≥ 9 mos; MenACWY-CRM ≥ 2 mos)																

Range of recommended ages for all children
Range of recommended ages for catch-up immunization
Range of recommended ages for certain high-risk groups
Range of recommended ages during which catch-up is encouraged and for certain high-risk groups
Not routinely recommended

This schedule includes recommendations in effect as of January 1, 2014. Any dose not administered at the recommended age should be administered at a subsequent visit, when indicated and feasible. The use of a combination vaccine generally is preferred over separate injections of its equivalent component vaccines. Vaccination providers should consult the relevant Advisory Committee on Immunization Practices (ACIP) statement for detailed recommendations, available online at <http://www.cdc.gov/vaccines/hcp/acip-recs/index.html>. Clinically significant adverse events that follow vaccination should be reported to the Vaccine Adverse Event Reporting System (VAERS) online (<http://www.vaers.hhs.gov>) or by telephone (800-822-7967). Suspected cases of vaccine-preventable diseases should be reported to the state or local health department. Additional information, including precautions and contraindications for vaccination, is available from CDC online (<http://www.cdc.gov/vaccines/recs/vac-admin/contraindications.htm>) or by telephone (800-CDC-INFO [800-232-4636]).

This schedule is approved by the Advisory Committee on Immunization Practices (<http://www.cdc.gov/vaccines/acip>), the American Academy of Pediatrics (<http://www.aap.org>), the American Academy of Family Physicians (<http://www.aafp.org>), and the American College of Obstetricians and Gynecologists (<http://www.acog.org>).

For more information, call toll free **1-800-CDC-INFO** (1-800-232-4636) or visit <http://www.cdc.gov/vaccines>



2014 Recommended Immunizations for Adults by Age

Talk to your healthcare professional about these vaccines:	If you are this age,					
	19-21 years	22-26 years	27-49 years	50-59 years	60-64 years	65+ years
Influenza (Flu) ¹	Get a flu vaccine every year					
Tetanus, diphtheria, pertussis (Td/Tdap) ²	Get a Tdap vaccine once, then a Td booster vaccine every 10 years					
Varicella (Chickenpox) ³	2 doses					
HPV Vaccine for Women ^{3,4}	3 doses					
HPV Vaccine for Men ^{3,4}	3 doses	3 doses				
Zoster (Shingles) ⁵						1 dose
Measles, mumps, rubella (MMR) ³	1 or 2 doses					
Pneumococcal (PCV13) ⁶	1 dose					
Pneumococcal (PPSV23) ⁷	1 or 2 doses					
Meningococcal	1 or more doses					
Hepatitis A ³	2 doses					
Hepatitis B ³	3 doses					
<i>Haemophilus influenzae</i> type b (Hib)	1 or 3 doses					

Boxes this color show that the vaccine is recommended for all adults who have not been vaccinated, unless your healthcare professional tells you that you cannot safely receive the vaccine or that you do not need it.
 Boxes this color show when the vaccine is recommended for adults with certain risks related to their health, job or lifestyle that put them at higher risk for serious diseases. Talk to your healthcare professional to see if you are at higher risk.
 No recommendation

Shingles Vaccine

Shingles vaccine is recommended by the Advisory Committee on Immunization Practices (ACIP) to reduce the risk of shingles and its associated pain in people 60 years old or older. Shingles is a painful localized skin rash often with blisters that is caused by the varicella zoster virus (VZV), the same virus that causes chickenpox. Anyone who has had chickenpox can develop shingles because VZV can reappear years later causing shingles. Shingles most commonly occurs in people 50 years old or older, people who have medical conditions that keep the immune system from working properly, or people who receive immunosuppressive drugs.

Baby's Development 7-12 Months

Be alert to your baby's development milestones—treasure every moment!

Most doctors schedule regular well-baby checkups during the 9th and 12th months. Your baby's weight, length and head circumference will be measured and compared with previous measurements to check for healthy growth patterns. Immunizations will be discussed and may be administered. In addition to the physical exam, the examiner will ask questions and observe your baby to ensure that developmental milestones are being met.



By Markisha Mitchell, RN

Developmental milestones are sets of functional skills or tasks that most children can do at a certain age range. Your baby's gross and fine motor, social, cognitive and language development are all considered.

Between the 7th and 9th month, most babies will be able to:

- > Sit without support
- > Stand with support
- > Work to get a toy (or anything of interest) that's out of reach
- > Respond to his/her name
- > Clap, play and enjoy social games
- > Understand simple words including "mommy," "daddy," "bye-bye" and "no"
- > Babble in a more complex way ("ga-ga," "da-da")
- > Develop the ability to grab at and pick up small objects
- > Move when placed on the floor by crawling, scooting or creeping

Between the 10th and the 12th month, most babies will be able to:

- > Use thumb and forefinger to "pinch" objects, such as picking up a piece of cereal

- > Pull to standing position
- > Cruise around while holding on to furniture, or walk independently
- > Follow directions such as waving goodbye
- > Drink from a cup
- > Readily imitate sounds
- > Use gestures or point to have needs met
- > Say and understand one or more words ("Ma-ma" and "Da-da" are used appropriately)

Children meet developmental milestones at their own unique time. However, parents and other caregivers can be instrumental in fostering baby's development. Encourage gross motor skills by creating an environment that's safe

for baby to "cruise" and explore. Foster language development by singing, reading and talking to your infant. Engage their senses and cognitive development by providing toys with varying colors, shapes, sizes and textures. Cultivate social development by making eye contact and playing peek-a-boo.

Contact your child's pediatrician if you have questions or concerns about your child's development or their general health.

Children grow and develop quickly. Cherish the time you have with your little one. ●

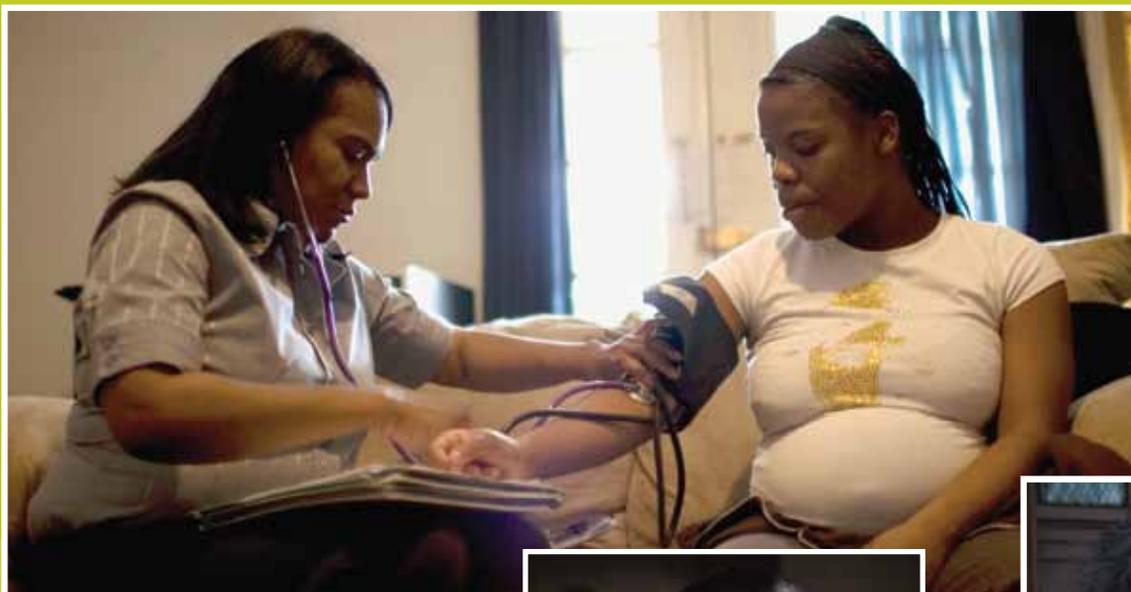
Markisha Mitchell is pediatric nurse providing skilled care to children with long-term illnesses. She currently resides in Houston, Texas.





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Transplant Patient Receives a Vital Gift

According to the American Liver Foundation, more than 6,000 liver transplants are performed each year in the United States.

When Troy Guffey first got the call to tell him there was a donor match for his liver transplant, he said he wasn't ready emotionally.

"I told them to give it to someone with a family," Guffey, a single man from Butler, replied. "But, the voice on the other end of the phone softly said, 'No, this is your liver.'"

By Jill Chadwick
The University
of Kansas Hospital

Troy Guffey was the 100th transplant for the year 2013 at The University of Kansas

"The number of transplants performed is important to the community and hospital because it represents patients' lives saved," said Tim Schmitt, MD, associate director of surgery and director of transplantation at The University of Kansas Hospital Center for Transplantation.



Smiling patient Troy Guffey, after a successful transplant.

Timothy Schmitt, MD, Director of Transplantation at The University of Kansas Hospital (left) Sean Kumer, MD, PhD, Surgical Director of Transplantation at The University of Kansas Hospital (right) perform 105th transplant during 2013.

surgery and surgical director of transplantation. Behind every transplant are dozens of people who have worked together as a team, perfecting their skills and enhancing patient outcomes. That team includes nurses, coordinators, anesthesiologists, hepatologists, nephrologists, nutritionists, pharmacists and surgeons.

"It could not be possible without the support of the community who put faith in us to treat the patients," Dr. Schmitt said. "Most importantly, it could not be possible without the generous gift of life that the donors and their family give."

Liver transplant patients can self-refer to The University of Kansas Hospital Center for transplantation. To learn more, call 1-800-332-6048. ●

To learn more about liver transplant surgery go to: KCourhealthmatters.com.

Hospital. His surgery was December 10th. Today Troy is back to his normal activity of writing science fiction stories. His mother Joyce states he is doing well. She is recovering after a brief illness and was grateful that Troy was well enough to care for himself while she recovered. Following Guffey ten more transplant patients received the gift of a donor liver, setting a record 110 transplants in 2013.

"Based on our volume, KU will likely be among the top 10 transplant programs in the U.S. this year," Jim Kindscher, MD and professor of anesthesiology, said. "Patient outcomes are some of the best in the country with growing volumes."

"Efficiency in the operating room continues to improve our overall patient experience and long-term outcomes," added Sean Kumer, MD, assistant professor of

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Nurse's Kidney Donation is the Ultimate Gift

A living donor finds fulfillment of life's purpose through organ donation.

Nursing Assistant Aimee Bultemeier has worked with many transplant patients during her 16 years with the Mid-America Heart Institute at Saint Luke's Hospital. After caring for and connecting with several patients who were awaiting life-saving transplants, she decided to become a donor herself.

By Michelle Manuel
Saint Luke's Health
System

"I spent a great deal of time caring for transplant patients and became very passionate about it," said Bultemeier. "I couldn't imagine being a young, single mom who required a new organ to live. I felt blessed in my own life, and came to realize that becoming a donor was something God was calling me to do."

While Aimee primarily worked with patients who needed hearts, she realized that as a living donor she could donate a kidney or liver. She approached the Midwest Transplant Network to find out how she could get involved.

Aimee underwent thorough testing to ensure she was in great health. Those tests included chest x-rays, lab tests, mammogram, EKG and submitting personal health records. Additionally, she received

a psychological evaluation, a review of her family history and consultation with a social worker.

Aimee feared failing one of the tests more than she feared the surgery itself.

"I was never afraid of the procedure. I was really excited about becoming a donor. I felt like this was God's purpose for my life, and I was sure that this was something I was meant to do," said Bultemeier.

Aimee donated her kidney to an anonymous recipient during surgery at Saint Luke's Hospital. Her hospital recovery lasted one week, and her recovery at home another seven weeks. By the fifth week she had regained her strength.

"The support of my family and friends was so important throughout the entire process. Family support is essential for anyone considering becoming a donor," said Bultemeier.

Someday Aimee hopes for the opportunity to meet the person whose life she saved. The male recipient sent her a letter following the procedure to thank her and tell her that her gift gave him a new start in life.

Aimee says she donated her kidney to save a life. She feels that she has done something good for humanity. "I have no regrets about becoming a donor. I only wish I had another kidney to spare," said Bultemeier. •



Saint Luke's Hospital nurse Aimee Bultemeier (left) lives a normal, healthy life after becoming a living donor. Photo by Dean Shepard

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Our Health Matters is committed to helping you meet the future with greater knowledge and opportunity to improve your health status and quality of life. In April and May there are numerous health observances of which to take notice. For more on these health observances, visit the website of the specific health organization.

APRIL-MAY HEALTH OBSERVANCES

APRIL

Alcohol Awareness Month

National Council on Alcoholism
and Drug Dependence, Inc.

national@ncadd.org
www.ncadd.org

National Distracted Driving Awareness Month

National Safety Council
www.nsc.org

National Minority Health Month

Office of Minority Health
USDHHS
www.minorityhealth.hhs.gov

Sexual Assault Awareness and Prevention Month

Rape, Abuse & Incest
National Network (RAINN)
www.rainn.org

APRIL 7 - 13

National Public Health Week

American Public Health Association
nphw@apha.org
www.nphw.org

APRIL 26 - MAY 03

National Infant Immunization Week

National Center for Immunization
and Respiratory Diseases
Centers for Disease Control and Prevention
www.cdc.gov/vaccines/events/niiw/index.html

MAY

Arthritis Awareness Month

Arthritis Foundation
www.arthritis.org

Hepatitis Awareness Month

Division of Viral Hepatitis, Centers
for Disease Control and Prevention
www.cdc.gov/hepatitis

Mental Health Month

Mental Health America
www.mentalhealthamerica.net/go/may

National Asthma and Allergy Awareness Month

Asthma and Allergy Foundation of America
www.aafa.org/display.cfm?ID=5&Sub=105&Cont=457

National Osteoporosis Awareness and Prevention Month

National Osteoporosis Foundation
www.nof.org

National Physical Fitness and Sports Month

President's Council
on Physical Fitness and Sports
www.fitness.gov www.presidentschallenge.org and
www.adultfitness.org

MAY 7

National Bike to School Day

National Center for Safe Routes to School
www.walkbiketoschool.org

MAY 11 - 17

National Women's Health Week

Office on Women's Health U.S. Department
of Health and Human Services
www.womenshealth.gov

MAY 28

National Senior Health & Fitness Day®

Health Information Resource Center
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2013 Reader Survey, SJ Insights.

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