
CENTRAL PA HEALTH CARE QUALITY UNIT NEWSLETTER FOR HEALTHY OUTCOMES

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CATARACTS

From Krames

What Are Cataracts?

A cataract is a clouding of the lens in the eye. The normally clear lens lets light enter the eye. As it becomes cloudy, less light enters and vision becomes blurry. Cataracts are common with age and can occur in one or both eyes. The clouding of the lens usually happens slowly over time. There are circumstances; however that it can happen quickly.

What Causes Cataracts? Cataracts may be caused by many things, including the following:

- Aging
- Diabetes or other eye diseases
- Past eye infections, injuries, or surgery
- Some medicines (such as steroids)
- Too much ultraviolet (UV) light, especially from sunlight
- Cataracts can also run in families

What Are the Symptoms? Cataracts are not painful. But you may notice these symptoms:

- Blurry vision
- Details are hard to see
- Glare when driving or reading
- More light is needed to read
- Some colors seem dull
- Your prescription for glasses keeps changing
- Double vision in one eye

When Should You See Your Eye Doctor?

Regular eye exams help your doctor see if cataracts are affecting your vision. Have exams as often as your doctor suggests. But if your vision suddenly gets worse, see your doctor right away. It could be an eye problem that needs prompt care. During your eye exams, you can discuss whether surgery is needed for cataracts. When checking for cataracts, your eye doctor will do the following:

- **Ask you questions** about your health and family history. This helps your doctor rule out other vision problems.
- **Test your vision** to tell how well you see and whether your vision is getting worse. Bring any glasses and contact lenses you wear to your exam.
- **Examine your eyes.** Drops are used to dilate your pupils. This allows your doctor to better see your eyes' lenses. It also lets your doctor check for other problems inside your eye.

Cataract Surgery

Cataracts can develop slowly and you may not need surgery right away. Your doctor may ask you to get new eyeglasses. You may need to use more light for detailed tasks like reading or sewing. But if cataracts limit your activities—such as driving, reading, or watching your favorite sports event—your doctor may suggest surgery. Surgery is the only way to remove a cataract and restore clear vision. It is usually done in an outpatient surgery center. During surgery, the clouded lens is removed. It is replaced by a clear artificial lens. Lasers are not currently used to remove cataracts. Doctors usually operate on only one eye at a time. The clouded lens may be broken apart (**phacoemulsification**) with a special instrument. The doctor removes the lens pieces through a small opening. Then a new artificial lens is placed in the eye through the same opening. After your eye has healed, your vision should be clearer although sometimes eyeglasses are used to sharpen the vision.

The information offered in this newsletter is to increase your awareness of health related conditions and situations and not intended to be a substitute for professional medical advice.

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CONGESTIVE HEART FAILURE

From Krames

Your doctor has told you that you have congestive heart failure, and you probably want to know more about it. Well, having congestive heart failure doesn't mean that your heart has stopped. It simply means that your heart doesn't work as well as it should. Congestive heart failure can make it more difficult for you to do things that may have been easy for you in the past. Some common symptoms of congestive heart failure include:

- Shortness of breath, wheezing, or coughing when you exert yourself
- Weakness or tiredness
- Problems breathing when you're lying down
- Waking up at night coughing or short of breath
- The need to go to the bathroom many times during the night
- Swollen ankles or feet
- Dizzy spells



Congestive heart failure usually happens when another problem makes the heart weak. Coronary artery disease, a condition where some of the heart's blood vessels are narrowed, is a common cause of congestive heart failure. Other conditions that can lead to congestive heart failure include heart attacks, high blood pressure, heart muscle diseases, and problems with the heart's valves.

What You Can Do About It

Congestive heart failure won't go away entirely, but you and your doctor can work together to help make your life more comfortable. Your doctor can prescribe medications to make your heart's work easier. You can make some changes in the way you eat and the way you live to give your heart some extra help. Pay attention to your body and how you feel, and tell your doctor when you're feeling better and when you're feeling worse. That way, your doctor will know what kind of treatment works best for you. To evaluate your heart, your doctor examines you, asks you questions, and may do some tests. Along with looking for signs of congestive heart failure, the doctor looks for any underlying condition that may have caused your heart to weaken. Certain conditions can strain the heart and make it weaken more easily. Diabetes makes coronary artery disease and congestive heart failure more likely to occur. Chronic kidney problems can cause water retention, which means the heart has to pump more fluid and do more work. The doctor uses the results of the evaluation to help develop a program to treat your heart. The doctor asks you how you've been feeling. Have you had trouble catching your breath? Have you been coughing? Do you have swelling in your feet or ankles? Be sure to tell your doctor if you're taking medications for other conditions. The doctor listens to your heartbeat and your breathing through a stethoscope. X-rays, which can show your heart's size and shape and detect any fluid in your lungs, may be taken. An **electrocardiogram** (EKG or ECG), which can show the pattern of your heartbeat and the size of your heart, may also be done.



Treatment Plan

Your doctor uses the information provided by your examination and tests to develop a treatment plan. This treatment plan is designed to relieve some of your symptoms and help make you more comfortable. Your treatment plan may include medications to help your heart work better, changes in your diet to reduce the amount of salt and sodium you eat, rest to give your heart a break, activity as recommended by your doctor, and lifestyle changes, such as stopping smoking. Smoking damages your blood vessels, reduces the oxygen in your blood, and makes your heart beat too fast. It is also important to keep track of your weight. You should weigh yourself the same time every morning before eating and after urinating. The doctor should be called if a weight gain of 2 or more pounds a day or 3 to 5 pounds a week occurs since it may be a sign of retaining water.

Call Your Doctor If:

- Your symptoms get worse
- You notice new symptoms from your medication
- Breathing becomes more difficult, or you start coughing at night
- You're getting tired faster
- You begin urinating less frequently
- Your feet or ankles swell more than usual
- You have dizzy spells or you faint
- You have tightness or pain in your chest



FOOD TIPS FOR THE YOUNG AT HEART

SOURCE: Kathleen M. Zelman, MPH, RD/LD, is director of nutrition for WebMD, and a former spokeswoman for the American Dietetic Association.

Antioxidant Super Foods

Antioxidants help prevent cellular damage. Eat plenty of foods rich in antioxidants such as almonds, berries, citrus, carrots, spinach, tomatoes, and bell peppers.

1. Top your cereal with almonds or berries; add tomatoes to sandwiches, soups or stews; layer your whole grain bread sandwich with slices of peppers and fresh spinach.
2. Pack a snack bag of nuts, baby carrots, grape tomatoes, and bell pepper slices for a nutritious pick-me-up between meals.
3. Fruit and nut granola bars stash easily into briefcases for quick energy and a tasty treat.

Calcium

Calcium is the super nutrient that keeps bones and teeth strong. Now research shows that low-fat dairy also helps people lose weight! The best sources of calcium come from the cow.

1. Start your day with café au lait made with half skim milk and half strong coffee. Or order your latte skinny at your favorite coffee house. Add a bowl of whole grain cereal topped with skim milk and fresh fruit for a breakfast of champions.
2. Snack on low-fat yogurt or cheese between meals for an energizing treat.
3. Calcium-fortified juices and cereals are excellent alternatives to meet your three-a-day requirement.



Fiber

Fiber does wonderful things for the body, from lowering cholesterol levels, keeping you regular, and perhaps preventing certain cancers. Grandma called it roughage and we need plenty of it each day.

1. Read food labels to find whole grain breads and cereals that provide three or more grams of fiber per serving. A bowl full of bran or high-fiber cereal is a great start to meeting your daily needs.
2. Load up on whole fruits and veggies for a healthy dose of fiber. Aim for five to nine servings a day. Juices don't contain as much fiber as whole fruit.
3. Beans are loaded with fiber and protein, so add them to soups, stews, salads, eggs, and salsas.



Soy

Soy can lower cholesterol, which can help prevent cardiovascular disease. This super nutrient is a newcomer on the block and is gaining in popularity.

1. Tofu takes on the flavor of foods that it is cooked with. Try a stir-fry of colorful veggies and cubed tofu with a light Asian sauce for a quick meal. You can also find cereals at the store loaded with both soy and fiber. Serve with skim milk and you'll get three super nutrients for breakfast.
2. Take a soy protein bar for a quick snack or lunch during the day. Soy nuts are another great portable snack option.

Water

Most of us don't get enough of this precious stuff. As a result, we may look peaked and feel fatigued. Our bodies are composed of more fluid than anything else, so water is a vital nutrient for our well-being.

1. Fill up a quart size water bottle each morning and keep it with you for quick and refreshing drinks throughout the day.
2. Don't rely on thirst; this sensation diminishes with age. Drink often and choose from nutritious liquids, including 100% fruit and vegetable juices, skim or low fat milk, broths, sparkling water, and teas.
3. You can also get fluids from foods, especially those that are liquid at room temperature. Try gelatin, frozen yogurt, soups, watermelon, pickles, oranges, lettuce, tomatoes, etc.



DEEP VEIN THROMBOSIS (DVT)

From Penn State – Hershey Medical Center Health Information Department

What is it?

A clot that forms in a blood vessel is called a thrombus. Deep vein thrombosis (DVT) is a blood clot in a deep-lying vein, usually in the legs. You may also see deep vein thrombosis referred to as a venous thromboembolism, thrombophlebitis, or phlebothrombosis. Only clots that form in the deep veins have the potential to be dangerous.

Who gets it?

Statistics from the American Heart association show that more than two million Americans develop deep vein thrombosis every year. It can occur as a major complication of orthopedic, pelvic, abdominal, or thoracic surgery. If an individual has cancer, severe varicose veins, is confined to bed, has suffered a recent heart attack or stroke, or has a chronic illness, such as congestive heart failure, you have a higher risk of developing deep vein thrombosis. Some people are prone to blood clots or the tendency to develop them may run in the family.

What causes it?

Deep vein thrombosis occurs when a person has increased tendency for blood to clot, usually because of some type of cancer or medication; when there is an injury to the lining of the vein; or because blood flow is slow. Blood flow usually becomes sluggish in people who are bedridden for a long period of time because of illness, injury, or surgery. However, even otherwise healthy people can develop thrombosis from sitting for a long period time, such as on a long car trip or plane flight.

What are the symptoms?

Deep vein thrombosis has no symptoms at all in approximately half of the people who develop it. When symptoms do occur because the clot has blocked a major vein, they include swelling and tenderness in the calf, ankle, foot, or thigh area. The swollen area may also feel warm to the touch. Swelling may go down at night when the legs are supported or elevated. As deep vein thrombosis becomes more severe, the skin above the ankle may appear brown. This discoloration is caused by red blood cells that have seeped out of the veins into the skin. If a blood clot is not too tightly attached to the wall of the vein, it can break off and travel with the blood to other organs in the body. This called an embolism. A pulmonary embolism is a blood clot that lodges in the lungs and blocks the lung arteries. It is one of the most serious complications of deep vein thrombosis. About 60,000 people die of pulmonary embolism each year.

How is it diagnosed?

DVT can be difficult to diagnose, either because the person has no symptoms or because its symptoms can be caused by other conditions. If your doctor suspects deep vein thrombosis, he or she will order an ultrasound of the leg veins, a painless procedure in which high frequency sound waves produce an image of the veins and show any blockages. Other diagnostic tests that are sometimes used include a test (IPG) that checks blood pressures at different locations in the leg; contrast venography in which a special dye that shows up on x-ray is injected into the veins; or CT scans of the pelvis area.

What is the treatment?

DVT is treated with a combination of drug therapy, bed rest, compression bandages, and elastic stockings. Medications include drugs that help to dissolve blood clots and anticoagulants that “thin” blood so blood clots are less likely to develop. Persons with DVT can reduce swelling and pain by keeping the legs elevated as much as possible.

Self-care tips

If you are at risk for DVT, you can prevent it by taking an anticoagulant, under the supervision of your doctor. If you must take a trip where you will be sitting for long periods of time, be sure to get up and move around at regular intervals. Flexing and extending your legs, feet, and ankles about 10 times every 30 minutes will help to keep the blood flowing in the leg veins. If elastic stockings are worn, be sure to take them off each day to wash and dry them and check the skin. The stockings should fit so there is no bunching. Elastic stockings that fit poorly will actually make the condition worse by blocking blood flow in the area where they have bunched up. Elevate the legs when sitting or lying down to keep the blood flowing. Getting up and walking as soon as possible after surgery also lowers the risk for deep vein thrombosis.