HCQU Director, Lynn Libby Retires

It is with mixed emotions that the Health Care Quality Unit (HCQU) bids adieu to Director Lynn Libby. In 2001 Lynn was hired at the birth of the program. After 16 years of dedicated service she has made the bitter sweet decision to retire.

When you love what you do, it’s not really a job. When you know you make a difference in people’s lives, it’s hard to step away. From the ground up, Lynn has created a solid team comprised of 10 nurses, a data analyst and a secretary that are committed to improving the lives of all people with intellectual and developmental disabilities (IDD) living in our 13 county Central Pa region. Under her reign, this team provides top notch health care management services assuring the best possible physical and behavioral health care available.

Lynn is proud of her 5-star program that has provided training to more than

Auto Immune Disease – Crohn’s Disease

Crohn’s disease is a chronic inflammatory condition of the gastrointestinal tract. Named after Dr. Burrill Crohn, who first described the disease in 1932, Crohn’s disease is an autoimmune disease. With Crohn’s disease, as with other such diseases, the body’s immune response is directed against the body’s own tissues and cells, causing prolonged inflammation and subsequent tissue destruction. The GI tract normally contains harmless bacteria, many of which aid in digestion. In people with Crohn’s disease, these bacteria are

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OLD MEDICAL TERMS: You Have What?!!

From Berkeley Wellness

There was a time when millions of people around the world suffered from lumbago, dropsy, the grippe, and consumption. Actually, they still do. The diseases remain. Only their names have changed. Check out your knowledge of old fashioned complaints and what they’re called today.

- **Dropsy**: Once widely used, the word dropsy refers to swelling caused by the accumulation of fluid. Today doctors call it edema. There are many causes of edema. One of the most serious is heart failure. When the heart can’t pump strongly enough, blood pools in certain parts of the body. Fluid leaks out into nearby tissue. Fortunately, pills called diuretics can often help reduce edema.

- **Chilblains**: Your great grandma might have complained about chilblains if her hands or feet became inflamed after being out in the cold. Today the more common term for this rare condition is perniosis. Symptoms include itching, redness, swelling, and even blisters. No one knows why some people develop the condition. Smoking is a risk factor. Luckily you can easily avoid trouble by wearing gloves in cold, damp weather. Hand lotion can ease the discomfort.

- **Consumption**: The poet John Keats died of consumption. So did the fictional heroine of La Bohème. Over the years, the disease has had many memorable names, including phthisis, scrofula, Pott’s disease, and the white plague. Today we call it tuberculosis, or TB. TB remains a serious disease, especially in poorer countries. New strains have emerged that resist most antibiotics.

- **Bone shave**: This colorful term describes the excruciating pain of what is now called sciatica. The classic symptoms are pain or tingling, usually starting in your lower back and spreading down through one leg. Sciatica occurs when the sciatic nerve running through the spine becomes inflamed. Most cases go away on their own. Persistent sciatica may require surgery.

- **Lumbago**: The word derives from lumbar, the lower part of the back. Lumbago refers to any kind of back pain. Today we call it chronic low back pain. There are many causes, from simple muscle strains to deteriorating disks in the spine. Low back pain remains one of the most common complaints that bring people to the doctor’s office.

- **Catarrh**: This antiquated term describes nasal congestion and a runny nose. Today we’re more likely to say we have a cold. The term “cold” is itself a misnomer. Colds aren’t caused by being cold or damp. They’re caused by a variety of viruses that circulate year-round. The term “summer catarrh” once described what we now call hay fever. That’s also a misnomer. Hay fever doesn’t involve a fever and isn’t caused exclusively by hay. It’s an allergic reaction to a wide array of pollen and irritants that float in the air.

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Many people swear by the CrossFit exercise program, attributing their swift metamorphosis from chubby and unfit to svelte and powerful to the high intensity and constant switch-up of its workouts. Many athletes and military personnel use it to take their fitness to the next level. Some celebrities are reportedly fans, too, including Brad Pitt, Matt Damon, Cameron Diaz, and Kelly Clarkson. Should you join the CrossFit craze—or sit it out and just watch the CrossFit games on ESPN?

The basics of CrossFit

With some 13,000 training centers (called “boxes”) worldwide, this uber-popular and uber-intense strength and conditioning regimen incorporates elements from different exercise disciplines, including power lifting, Olympic weightlifting, gymnastics, and interval training, along with endurance activities like running and rowing. Participants do the “functional movements” in rapid succession with little or no recovery time in between. Aside from using your own body weight to power your workout, the program utilizes a variety of equipment, from barbells and medicine balls to jump ropes and elastic bands.

The idea with CrossFit—whose motto is “Forging Elite Fitness”—is for the extreme workouts to vary day by day to maximize your endurance, speed, strength, power, agility, and coordination. You’ll be coached through the “workout of the day” (WOD), which includes doing a certain number of repetitions of specific exercises as quickly as possible, or as many repetitions as you can in a set amount of time. You may do deadlifts, front squats, and shoulder presses on one day, for example, and box jumps and wall-ball shots on another. Classes, which last about 30 to 60 minutes, also include a warm-up, skill session, instruction for doing the movements, and cooldown.

CrossFit is said to be a philosophy, not just exercise. People who do it like the competitive atmosphere that pushes them beyond their comfort zone and the camaraderie and feeling of community that it fosters.

Risky business?

If you manage to stick to the program—which novices and athletes alike find grueling and exhausting—you’ll undoubtedly burn a lot of calories, reduce body fat, and get more fit. In a small study commissioned by the American Council on Exercise of people ages 20 to 47, men burned an average of 21 calories a minute during a CrossFit workout, while women burned 12 calories (more than your typical aerobics class), with heart rate climbing to 90 percent of their heart rate maximum (the higher end recommended for improving cardio endurance).

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Pressure ratings on the packages mean.

Here, a quick guide to this sometimes confusing category of products.

Who should wear compression stockings?

The clearest benefit is for people with certain leg problems or at risk for blood clots in the legs, known as deep vein thrombosis (DVT). Many factors can increase the risk of these clots, including prolonged bed rest (such as after surgery), sitting for long periods (such as on a plane), use of birth control pills or hormone replacement therapy, pregnancy, family history of DVT, inflammatory bowel disease, and certain genetic clotting disorders. Compression stockings are also sometimes used in people who have an acute DVT, to prevent a group of symptoms known as post-thrombotic syndrome that includes leg pain and swelling. But the American College of Chest Physicians says there’s insufficient evidence to support using the stockings for this purpose.

Other groups that can benefit from wearing compression stockings include people with varicose veins, leg ulcers (referred to specifically as venous leg ulcers), or leg swelling (edema), as well as those with circulatory problems. People who spend a lot of time on their feet may feel that the stockings improve comfort, even if they don’t have a clear health benefit in those cases. They’re also popular among some athletes, such as runners and basketball players.

How do they work?

Blood in your veins has to work against gravity to flow back to the heart. Anything that impedes that flow—such as circulation problems, lack of movement (especially after an injury or surgery), or weakness in the walls of the veins of the legs (referred to as venous insufficiency)—results in blood pooling in the veins of the lower legs or feet, leading to leg swelling, achiness and leg fatigue; it could also predispose you to a venous clot. By squeezing the leg tissues and walls of the veins, compression stockings can help blood in the veins return to the heart. They can also improve the flow of the fluid that bathes the cells (referred to as lymph) in the legs. Improving the flow of lymph can help reduce tissue swelling. The stockings may improve comfort in some healthy wearers even if they don’t have a discernible health benefit. For example, improving the flow of blood and lymph flow may make legs feel...
Compression Stockings…

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less tired in some people. Though runners and other athletes sometimes wear compression stockings to improve athletic performance or prevent injury, there’s little evidence that they help in this way.

Moreover, the benefits of compression stockings are dependent on wearing the stockings properly—and evidence suggests that many people don’t. In a study published in the *American Journal of Nursing*, among 142 hospitalized people who were told to wear compression stockings after surgery to prevent DVT, 26 percent were given the wrong size and 29 percent were not wearing them correctly—for example, the socks were worn wrinkled. That could lead to new or worse problems, since bunching or wrinkling can exert excess pressure on the skin. In addition, patients reported finding the socks or stockings uncomfortable, especially if they were thigh-high as opposed to knee-high. ■

Old Medical Terms…

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- **Infantile paralysis:** Once a dreaded scourge of childhood, this disease has been largely vanquished around the world. Its modern name: polio. Polio is caused by a virus that attacks nerve cells. As recently as the 1950s, polio was a fact of life for children. Some victims ended up in so-called “iron lungs,” fighting for breath, or crippled for life. The polio vaccine protects against the virus, and since 1988 the number of cases worldwide has declined 99 percent.

- **Falling sickness:** This descriptive term refers to what is now called epilepsy, a group of brain disorders that cause seizures, sometimes causing people to fall down. The word epilepsy comes from an ancient Greek word meaning “to seize, possess, or afflict.” In many causes, the underlying cause of epilepsy remains a mystery. Fortunately, medication can help lower the risk of seizures.

- **Grippe:** Epidemics of the grippe used to occur every year. Today we call the disease influenza. Flu remains an annual scourge. Just when our immune systems have become resistant to one strain, another emerges. Annual flu vaccines are engineered to protect against the most likely circulating strains.

- **Hydrophobia:** The word hydrophobia literally means “fear of water.” It describes one of the classic symptoms of what is now called rabies. Rabies virus invades the brain, causing inflammation. Victims often experience painful spasms of the throat when they try to drink water. Rabies has been eliminated in much of the world, thanks to mandatory rabies vaccines for dogs. Yet the disease still kills tens of thousands of people a year worldwide, mostly in poorer countries.

- **Quinsy:** This whimsical-sounding word derives from words meaning “sore throat” and “to strangle.” It refers to what is now called peritonsillar abscess, a rare and potentially serious complication of tonsillitis.

- **Lockjaw:** Like many outdated terms, this one describes a symptom: a severe spasm that locks up the jaw muscles. The cause: what we now call tetanus. Spread by bacteria commonly found in soil, tetanus affects the nervous system. In some cases, it causes muscle spasms so severe that they fracture bones. Most of us are protected by the tetanus vaccine, a combination shot that also protects against pertussis and diphtheria.

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mistaken for harmful invaders and the immune system responds. Cells travel out of the blood to the intestines and produce inflammation that does not subside, leading to chronic inflammation, ulceration, and thickening of the intestinal wall. With Crohn’s disease, lesions within the gastrointestinal system are often patchy, or cobblestone in appearance. Inflammation commonly extends through the entire thickness of the wall of the affected area. Crohn’s Disease can occur in patches in multiple places along the GI tract at the same time. The diseased areas are not often connected.

RISK FACTORS

The cause of autoimmune diseases, including Crohn’s disease, are unknown. However, certain risk factors may place individuals at increased risk for Crohn’s disease, including:

Age: Crohn’s can occur at any age, but most commonly becomes apparent in young adulthood, particularly in the patient’s 20 to 30s. A second smaller peak often occurs at approximately 50 years of age.

Gender: Crohn’s disease occurs in men and women equally. This gender balance is different than is found in other autoimmune diseases. In the vast majority of autoimmune diseases, women are affected more often than men. For example, for every man who develops myasthenia gravis, an autoimmune disease that affects skeletal muscles, two women develop it. With another autoimmune disease, systemic lupus erythematosus (lupus) that attacks organs and joints throughout the body, affects nine times as many women as men.

Race and Ethnicity: Crohn’s disease can occur in any race or ethnicity. However, the incidence is higher among whites, with rates steadily increasing among African-Americans. It is less common among Latinos and Asians. Jewish people of Ashkenazi (Eastern European) descent are at 4 - 5 times higher risk, than the general population, to develop Crohn’s disease. The fact that Crohn’s disease is more common in some ethnic groups than in others suggests that genetics play an important role.

Genetics and Familial Tendency: There is evidence to suggest genetics plays a role in the development of Crohn’s disease. Researchers have identified more than 200 different genes that are more common in people with Crohn’s disease than in the general population. There is also evidence

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poorer countries.

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But with the benefits come risks—which is not surprising considering the emphasis on fast, high-intensity movements and a constant push to boost performance with even faster speeds and heavier weights. A paper in the Orthopaedic Journal of Sports Medicine found an injury rate close to 20 percent in nearly 400 CrossFit participants, with shoulders, low back, and knees most commonly affected. Another paper, in the Journal of Strength and Conditioning Research, cited an even higher rate of injury—similar to that of power-lifting and gymnastics.

Any exercise program, especially a high-intensity one, is inherently risky. What makes CrossFit potentially more so is that many of the movements require near-perfect form to prevent excess strain and injury—but you may not have the stamina, especially if you’re a newbie, to maintain good form, and you may not be coached well in proper techniques. Though one study reported that trainer involvement reduced injuries, the skills and ability of the trainers vary widely, since the only requirement to open a facility is to be CrossFit-certified—which involves taking a costly two-day course and passing a multiple-choice test; no other experience or education is needed. While many trainers might be more experienced and excellent, bad ones are out there, too. Moreover, the facilities operate as independent affiliates and have the freedom to create their own programs with little or no oversight.

CrossFit cautions

This extreme program is not for the weak of heart—literally. We don’t recommend CrossFit if you have cardiac disease, pre-existing injuries (such as back problems, an old ACL tear or other knee injury, or elbow tendinitis), biomechanical issues, osteoporosis, or any other health conditions that might preclude vigorous, high-impact activity. And it is not a good beginner workout for people who are out of shape. If you have been sedentary or have health concerns but still want to try it, get your doctor’s okay first. If you get the all-clear, you can take an introductory class, usually free.

Crucial to keeping it safe is to evaluate the skills, experience, and attentiveness of the trainer—and scale the workouts to fit to your own ability and pace. That is, don’t get caught up in the competitive nature of the CrossFit culture (and it’s there!). And don’t buy the claims of the Paleo diet that CrossFit endorses on its website. You can find several locations at map.crossfit.com; the website also provides resources, including the WODs and demos of the exercises. Good luck!
Lynn Libby…
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160,000 people (both caregivers and individuals) since its doors opened. Wholeheartedly she believes each and every training makes a difference. Her stellar ability to lead and mentor her team did not go unrecognized. Recently she earned a spot in Geisinger’s top leaders based on the 2016 employee engagement survey. We are grateful she has shared her passion and expertise in this special field. Her commitment to this program and the others she supported was visible every day.

Lynn has left the HCQU in very capable hands. Cheryl Callahan, RN, CDDN, Regional HCQU nurse for Northumberland County has been chosen to succeed Lynn. Cheryl comes with an impressive background of experience layered with expertise in the field along with outstanding work ethics. Cheryl is excited to continue to build on the HCQU foundation and secure the legacy.

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that Crohn’s disease tends to run in families. Anywhere from 5 to 20 percent of patients with Crohn’s disease have a close relative—mother, father, sister or brother, who also has this disease.

Cigarette Smoking: Smoking or a history of smoking is seen in over 50% of patients with Crohn’s disease. Smoking, including exposure to passive smoke, is not only believed to increase the risk of developing Crohn’s disease, but can also worsen the course of the disease.