

# Windward Health

JOURNAL OF WELLNESS AND GOOD HEALTH CARE

FALL 2007

## Health Link



**A BREATH OF FRESH AIR** Some cleaning products contain potentially harmful vapors. When cleaning, be sure that the room is well ventilated. Run the exhaust fan in the bathroom, and open any windows.

University of California, Berkeley

### HAPPY PEOPLE MAY AVOID THE SNIFFLES

In one study, researchers found that people with a positive attitude were less likely to catch a cold than people with a more negative outlook on life.

Psychosomatic Medicine



### TELEVISION SAFETY

Every year, thousands of U.S. children visit an emergency department due to injuries from having a TV fall on them. Be safe and place your set on a sturdy, low base. And secure TV stands and entertainment units with anchors.

U.S. Consumer Product Safety Commission



PRINTED IN HAWAII

## HIGH BLOOD PRESSURE IT'S A WOMEN'S ISSUE

There was a time when high blood pressure and heart disease were in the same category as the toolbox in the garage: They were something for men to worry about. ♦ But even if you still don't care what a socket wrench looks

like, you might want to know that:

- Heart disease is the No. 1 cause of death for women in America today.
- High blood pressure is a major risk factor for heart disease.
- High blood pressure becomes more common among women than men after age 50.

### THE BASICS OF BLOOD PRESSURE

Blood pressure is the force with which blood pulses against your artery walls.

It's measured in two numbers. The first, systolic, is the pressure on your arteries as your heart pumps blood. The second, diastolic, is the pressure of blood flow when your heart is at rest.

But high blood pressure is far more than just a matter of numbers.

Hypertension can damage your artery walls, causing the formation of plaque. High blood pressure—especially if it's not well controlled—can also lead to heart



attack, stroke, heart failure, kidney damage and blindness.

Emotions such as nervousness or excitement can temporarily increase your blood pressure.

But if either number is consistently higher than normal, so is your risk for health problems.

You are more vulnerable to developing hypertension if you are:

- Pregnant.
- Overweight.
- Postmenopausal.
- African American.

### TALK TO YOUR DOCTOR

Blood pressure can often be lowered with changes in lifestyle, such as losing weight, avoiding alcohol, increasing your exercise and changing your diet. Medication may also be necessary.

The first step, however, is to see your doctor. Find out what your blood pressure is, and review your risk factors.

Your doctor can give you the tools you need to stay heart-healthy.

Source: American Heart Association

**High blood pressure becomes more common among women than men after age 50.**

### Is my blood pressure normal?

Normal blood pressure is less than 120/80 mm Hg.

Both numbers in the measurement are important. If just one of them is consistently above normal, your blood pressure is considered too high.

Higher-than-normal blood pressure can fall into one of the following categories:

■ **Prehypertension: 120-139/80-89 mm Hg.** Having prehypertension makes you more vulnerable to developing high blood pressure.

■ **Stage 1 hypertension: 140-159/90-99 mm Hg.**

■ **Stage 2 hypertension: 160 or higher/100 or higher mm Hg.**

There is an exception to the above numbers: For people with diabetes or chronic kidney disease, high blood pressure starts at 130/80 mm Hg.

Source: National Heart, Lung, and Blood Institute

**YOU'RE INVITED**

**NĀ WĀHINE OLA PONO—see page 4**  
A health fair for women and their families

# AT RISK FOR A STROKE? TAKE THIS QUIZ

**THE SYMPTOMS OF** a stroke may appear suddenly, but in most cases the stroke itself was a long time coming.

The vast majority of strokes result from a combination of risk factors. Some of them—such as age or family history—are unchangeable. But others—such as high blood pressure or smoking—are within our power to modify. Controlling those latter modifiable risk factors could prevent most strokes.

If you aren't sure of your risk factors, take the quiz below. Then learn what you can do to lessen the likelihood of stroke in your future.

## High blood pressure is the biggest risk factor for stroke.

The following questions come from the American Stroke Association and American College of Physicians. Put a check in the box by each question if the answer is yes. The more boxes you check, the higher your risk for stroke.

- Do you have high blood pressure?
- Do you smoke?
- Do you have high cholesterol?
- Do you have atrial fibrillation, a condition in which your heart beats rapidly and unevenly?
- Do you have diabetes?
- Are you African American?
- Are you older than 50?
- Are you overweight?
- Do you exercise fewer than three times a week?
- Do you often eat fried, greasy or salty foods?
- Has a parent, sibling or grandparent had a stroke?
- Has your father or brother had a heart attack before age 55?
- Has your mother or sister had a heart attack before age 65?
- Have you ever been told you have any of the following: carotid artery disease, disease of the leg arteries, high red blood cell count or sickle cell anemia?
- Have you had a stroke or transient ischemic attack?



## Why you must act fast for a stroke

Most strokes occur when a blood clot disrupts blood flow to the brain. Starved of blood, brain cells start to die.

By providing timely treatment, however, doctors may be able to stop the stroke by using medicine to dissolve the clot, according to the

National Institute of Neurological Disorders and Stroke.

But this treatment must be administered quickly—within three hours after stroke symptoms start—for the best chance of successful recovery.

Therefore, call 911 immediately if you think you or anyone else might be having a stroke. The signs come on suddenly and include:

- Numbness or weakness of the face, arm or leg—especially on one side of the body.
- Confusion or trouble speaking or understanding someone's speech.
- Trouble seeing in one or both eyes.
- Dizziness, trouble walking, or a loss of balance or coordination.
- Severe headache with no obvious cause.

Now, take the completed quiz to your doctor. Together, you can work on a treatment plan to reduce your risk for having a stroke. Some things you might talk about: ● Switching to a healthy diet that includes less saturated fat and more fruits and vegetables. ● Losing weight. ● Getting more exercise. ● Avoiding alcohol. ● Quitting smoking. High blood pressure is the biggest risk factor for stroke,

and all of the lifestyle changes previously mentioned can help lower it. If making these changes doesn't help or if your blood pressure is particularly high, your doctor might also prescribe medication.

He or she also might talk to you about taking aspirin regularly to lessen the risk for blood clots, which can cause stroke.

Additional source: U.S. Food and Drug Administration

## HOW TO FIND US

call us:  
808-263-5500

e-mail us:

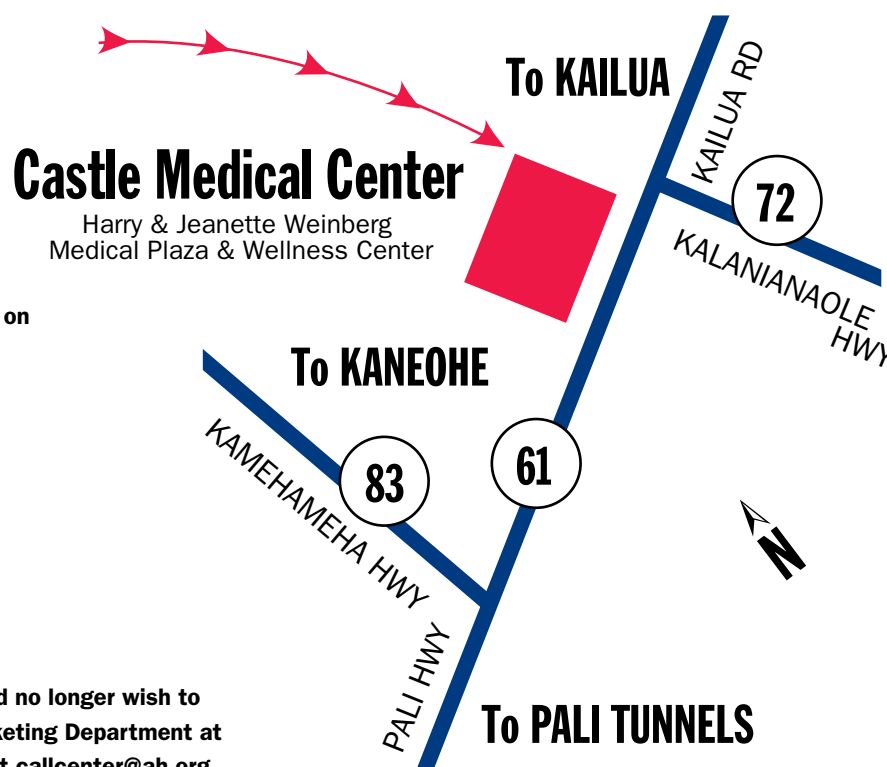
Visit our Web site at [www.castlemed.org](http://www.castlemed.org) and click on "Contact Us." We'd be happy to hear from you!

- Send us a comment.
- Request a Castle brochure.
- Request a physician directory.

write or visit us:

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640 Ulukahiki St.  
Kailua, HI 96734-4498

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Information in WINDWARD HEALTH comes from a wide range of medical experts. If you have any concerns or questions about specific content that may affect your health, please contact your health care provider.

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WindwardHealth

FALL  
2007

CHOLESTEROL 101

# The good and the bad

Few words get more play than *cholesterol*. But how much do you really know about this waxy, fatlike substance?

If your answer starts and stops with, "It's bad for you," you don't know enough. Consider: One type of cholesterol is actually beneficial, so your answer wasn't entirely correct.

Because of cholesterol's strong association with heart disease—the leading cause of death in this country—a superficial understanding of cholesterol just isn't enough.

The good news: What follows will bring you up to speed.

**A crucial distinction** Cholesterol is found in every cell in your body, and it travels through your bloodstream. It hitchhikes a ride with two special carriers.

One of these carriers is LDL (low-density lipoprotein) cholesterol, also called bad cholesterol. That's a well-deserved name, because LDL clogs arteries. The higher your LDL level, the greater your risk of a heart attack or stroke.

In contrast, HDL (high-density lipoprotein)—the other carrier, which is sometimes called good cholesterol—protects your health.

It helps clear excess LDL from your arteries and transports LDL to the liver for removal from your body. The higher your HDL level, the lower your risk of heart disease.

**The triglyceride connection** Like LDL and HDL, triglycerides—a form of fat—also circulate in your bloodstream. Increasingly, doctors view high triglyceride levels as an independent risk factor for heart disease, meaning excess levels are dangerous.

High levels appear to be especially risky for women.

**Numbers to aim for** Obviously, you want to keep both your cholesterol and triglyceride blood levels in a healthy range. But what's healthy?

Generally, your LDL should be less than 100 mg/dL of blood; your HDL between 40 and 59 mg/dL (even higher is better); and your total cholesterol less than 200 mg/dL. Your triglycerides should be less than 150 mg/dL.

Certain people—such as those who have already had a heart attack—may want to lower their LDL to less than 70 mg/dL. Ask your doctor what's best for you.

Sources: American Heart Association; National Heart, Lung, and Blood Institute



## School bus safety lessons

Childhood is filled with firsts—first smile, first words, first steps and eventually a first school bus ride.

How can you make sure this ride, and every one that follows, is a safe one?

That's an important question. While federal officials describe school buses as one of the safest forms of transportation available, serious accidents do happen. Every year some 17,000 U.S. children are treated in hospital emergency departments because of school bus-related injuries.

To help protect your child, teach your youngster to:

- Line up safely. Children should wait for the bus in a line that starts about six feet from the curb.
- Wait for the OK. Tell your child never

to step into the street until the bus driver opens the door and signals that it's OK to board. Under no circumstances should your child venture out into the street sooner.

● Stay seated. If the driver has to stop suddenly, your child is less likely to be injured if he or she is sitting rather than standing.

● Show respect. Loud talking or roughhousing can be dangerously distracting for the driver.

● Be careful exiting. If children must cross the street, they should always walk in front of the bus, never behind it. Also, your child should cross at least 10 feet in front of the bus—and only when the driver signals it's safe to do so.

Source: American Medical Association

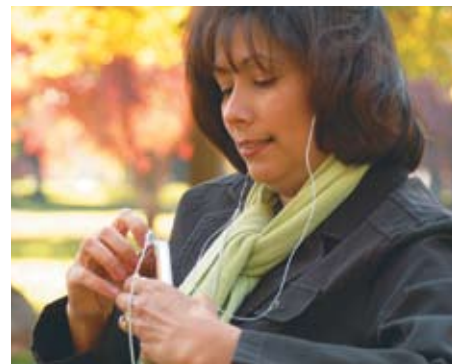
## Now hear this! We enhance your listening experience

Castle Medical Center has custom earpieces available for your iPod or other MP3 player that make wearing them more comfortable while running, biking or simply just enjoying listening to your music.

We also have many sports earpieces, including those used by motorcyclists to reduce wind noise and by hunters to reduce noise exposure—as well as molds for swimmers and surfers, to allow sound to be heard at virtually normal levels, even while wearing the earpieces in the water.

And if you like going to concerts and want to enjoy the full spectrum of sound but at a lower volume, the Musician earpieces were made for you!

And we have Bluetooth-enabled hearing aids that allow you to listen to your iPod



or other MP3 player as well as to your Bluetooth-enabled cell phone.

Technology is progressing rapidly, and Castle Audiology Services is "hear" to help you.

Call Castle's Audiology Department at **263-5055** for more information, and stay tuned in.



**LAB GETS EXEMPLARY REVIEW** Castle Medical Center's Laboratory Services recently completed a successful survey by the Joint Commission and received an exemplary review. The Joint Commission evaluates and accredits nearly 15,000 health care organizations and programs in the United States. An independent, not-for-profit organization, it is the nation's predominant standards-setting and accrediting body in health care.

Lab Director Michael Perry also announced the launch of PathNet, a system that integrates the laboratory with the hospital's medical records, increasing the results available to physicians and moving the medical center closer to the corporatewide initiative to move to a paperless environment.



From left: **Tatiana Grant; Roman Pearl; Vince Ritson, M.D.; Jayceleen Ipenuk; Dale Northrop; Travis Mainaupo-Eugenio; and Kathy Raethel**

**HEPA 2007 SCHOLARSHIPS PRESENTED**

Roman K. P. Pearl and Travis Mainaupo-Eugenio, Kahuku High School; Jayceleen Ipenuk, Kalaheo High School; and Tatiana Grant, Castle High School, were the recipients of \$1,000 scholarships presented by the Hawai'i Emergency Physician Education Foundation and Castle Medical Center. The foundation funds the annual scholarships to encourage Windward students to obtain a college education.



From left: **Kenji, Karly, Kaelyn and Kristin Andrade**

**ER PREPARED FOR FAST DELIVERY**

Baby Kaelyn Andrade surprised her parents and Castle's Emergency Room staff when she was born on a busy Monday morning in the hospital's emergency lobby driveway. Staff members happily reported that the delivery was quick and without incident.

# Nā Wāhine Ola Pono (Women Who Live Well)



## A health fair for women and their families

An afternoon of information and activities focusing on issues important to women and their families, including breast health and mammography, heart disease, osteoporosis, childbirth and parenting, nutrition, bariatric surgery, skin care and more.

New Dimensions Fashion Show  
Entertainment & Refreshments

Keiki Activities  
Free screenings  
Food Samples  
Exercise demonstrations  
Drawings & Giveaways

Call 263-5400 or visit [www.castlemed.org](http://www.castlemed.org)  
for updated information.

**Castle Medical Center**

**Adventist  
Health**

*Exceptional Medicine  
by Exceptional People*

- A Under the Main Tent**
  - New Dimensions Fashion Show (3 p.m. start)
  - Entertainment
  - Refreshments
- B WOW Van**
  - Skin Cancer Screening (2 – 4 p.m.)
- C Tumblebus**
  - Fun for Keiki!
- D Wellness Auditorium**
  - Mammography & Breast Health, Castle Imaging Services
  - Birth Center Classes & Lactation Product Display, Women's Center
  - Surgical Weight Loss, Castle Surgical Weight Loss Institute
  - Heart Disease and Women, Cardiopulmonary
  - Blood Pressure Screening
  - Body Fat Composition Testing
- E Ohana Room**
  - American Cancer Society, Windward Unit
  - Arthritis Foundation of Hawaii
  - Kidney Foundation of Hawai'i
  - Waimanalo Health Center
- F Women's Center Lanai**
  - Chair Massages, Enchanted Lake Massage Clinic
- G Castle Performance & Rehabilitation Center**
  - Rehab Medicine and Wellness & Lifestyle Medicine
    - Stretching & Weight-bearing exercises
    - Osteo-size
    - Hearing Screens
  - Joint Care Center
  - Castle Home Care
- H Kenner Dermatology**
  - Open House
- I Main Hospital Corridor**
  - Spiritual Wellness Information Display
- J (Lower Level) Hallway**
  - Nutrition Information for Men and Women (Includes Food Samples)  
CMC Dietitians and the Hawai'i Dietetic Association

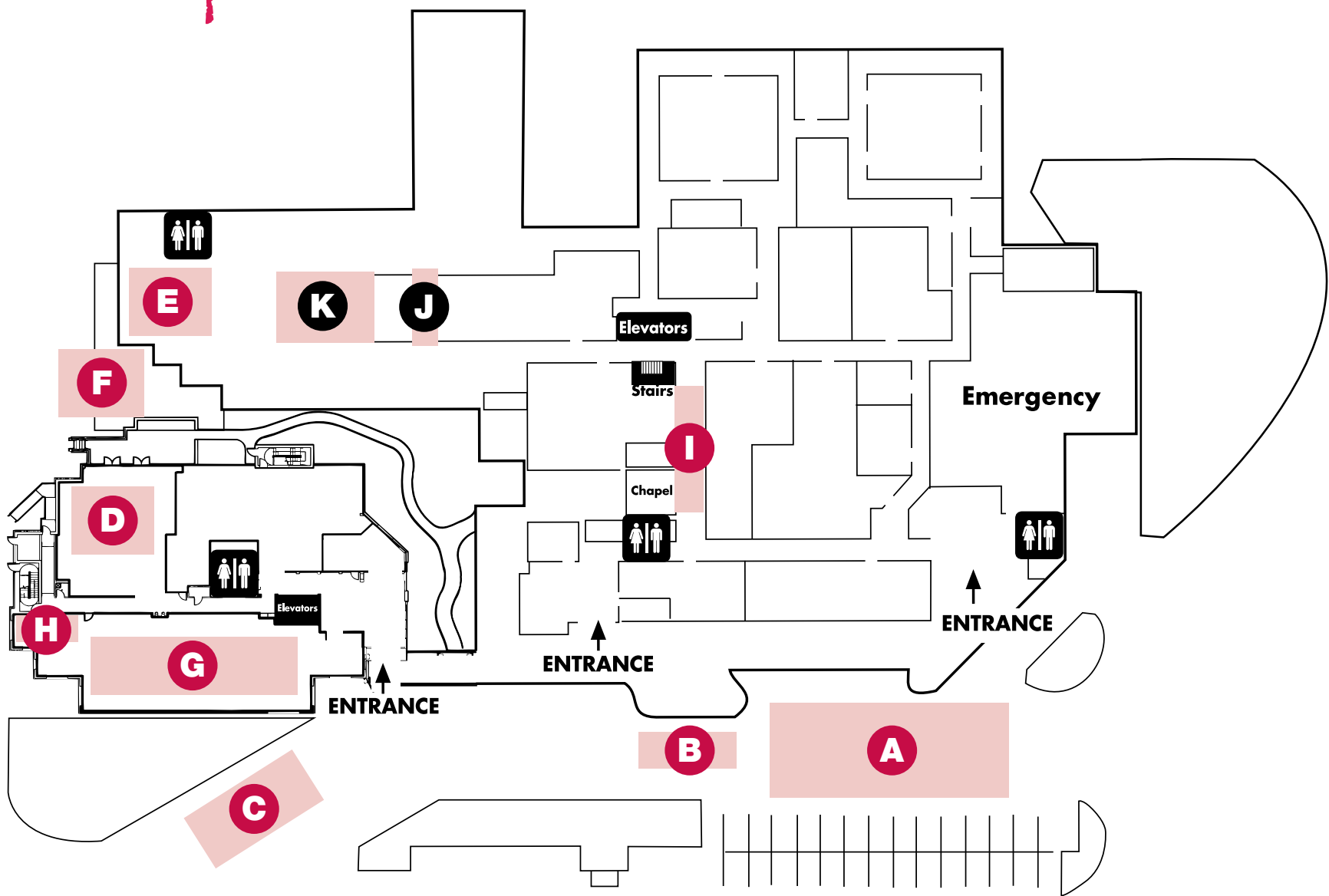


Philip Hellreich, M.D.

# SUNDAY • SEPTEMBER 30



2 to 5 p.m. • Castle Medical Center



**K** (Lower Level) Auditorium  
Health Seminars



**2 p.m.**  
**Heart Disease  
& Women**  
Maria Markarian,  
D.O.



**2:30 p.m.**  
**Women's Health**  
Susan Chapman,  
M.D. (OB/GYN)



**3:30 p.m.**  
**Women &  
Colonoscopy**  
Naoky Tsai, M.D.



**4 p.m.**  
**Skin Care**  
Julie Kenner, M.D.



**Bariatric Surgery**  
Steven Fowler, M.D.



**4:30 p.m.**  
**Body Recontouring  
After Weight Loss**  
Shim Ching,  
M.D., MSc, FRCSC



**IRRITABLE BOWEL SYNDROME**

# TAMING THE IRRITATION

**IT'S GONE BY** many names in the past—such as colitis, spastic bowel and nervous colon.

Today it's known as irritable bowel syndrome, or IBS. It affects more than 58 million Americans, most of whom are women, according to the American College of Gastroenterology (ACG).

For some people, IBS is an occasional mild annoyance. But for others, its symptoms can force absences from work or school, cancel social activities, prevent travel and lead to numerous dietary changes.

As its list of names suggests, IBS has a long history of being poorly understood. But today, IBS has more than just a new name—it's also more easily diagnosed and treated.

**WHAT IS IBS?** IBS is a functional disorder. That means "there is no structural abnormality that we can see, like an ulcer or cancer. We don't have a blood test or x-ray that can confirm it," says Alben Halpert, M.D., an instructor of gastroenterology and internal medicine at Boston University School of Medicine and IBS researcher.

Instead, IBS is a problem in how the colon works.

Water and salts are absorbed from digested products in the colon over the course of several days. The remaining stool is then moved through the colon in a series of contractions.

This colon movement is called motility. It is stimulated, in part, by nerve signals between the brain and bowel.

In people with IBS, normal colon function appears to go awry because of problems with motility, hypersensitivity to stimulation or incorrect nerve signaling.

The predominant problem for some people with IBS is motility, says Dr. Halpert. Their colon might move too slowly, too quickly, too weakly or too forcefully.

For others, hypersensitivity causes the colon to overreact to certain triggers, such as particular foods or stress.

"It also appears that the nerve signaling between the brain and gut is altered," says Dr. Halpert.

These dysfunctions, often present in combination, can cause a variety of symptoms, the most common of which are: ● Recurring constipation or diarrhea, or a combination of the two. ● Abdominal discomfort. ● Bloating and gas. ● Urgency of bowel movements. ● Mucus in stool.

**DIAGNOSIS AND TREATMENT** Because there is no test for IBS, it's diagnosed mostly by its symptoms.

Tests may be used to rule out other conditions, but this is more likely to be done when symptoms not typical of IBS are present. These can include fever, weight loss or blood in the stool, Dr. Halpert says.

Symptoms also determine treatment, which can include medications and changes in diet and lifestyle.

"If someone has mild IBS, sometimes it's enough to identify and avoid triggers," says Dr. Halpert.

For more severe IBS, daily medication might be needed to prevent attacks.

It's important to work patiently with your doctor and trust that, through this partnership, the two of you will find the treatment that works best for you.

Additional sources: American Academy of Family Physicians; American Society of Colon and Rectal Surgeons



## Treatments for IBS can vary, depending on symptoms

**How your doctor treats your irritable bowel syndrome (IBS) will depend largely on your symptoms.**

**You might be asked to make changes in your diet or lifestyle. Your doctor might also prescribe medication. Or your treatment might be a combination of all three.**

**"There is no one magic [treatment] for IBS," says Alben Halpert, M.D., an IBS researcher and instructor of internal medicine at Boston University School of Medicine.**

**Diet. If constipation is a problem, drinking more fluids and adding fiber to your diet can help. Limiting foods such as onions, broccoli and cabbage can reduce gas, as can avoiding carbonated drinks. Talk to your doctor about the benefits of reducing your intake of fats and of eating smaller, more frequent meals.**

**You might want to keep a food journal for a few weeks to track what does and doesn't help.**

**Lifestyle. If stress increases your IBS symptoms, ask your doctor about relaxation techniques. Physical activity also can reduce anxiety, as can engaging in hobbies or other activities you enjoy.**

**Medication. Drugs can decrease symptoms of IBS. Laxatives may be prescribed for constipation. If you have diarrhea, your doctor might prescribe medications such as diphenoxylate with atropine or loperamide. Antidepressants may reduce abdominal pain, but they can worsen constipation.**

Additional sources: American Academy of Family Physicians; American College of Gastroenterology

# PREPARING FOR YOUR COLONOSCOPY

*Worrying about the procedure may be the worst part of all*

**WHEN LISA WILSON** turned 50, her doctor suggested she have a colonoscopy.

She had the procedure done nearly two years later.

Why the long delay?

"I built up all this anxiety about it," Wilson says. "So I kept putting it off."

Finally, after much urging, she had the colonoscopy. And while Wilson describes the preparation for it as "tedious," the procedure itself was forgettable—literally.

"I have no memory of it. As far as I know, I slept through it," she says. "The worst part turned out to be worrying about it for so long."

**WHAT IS A COLONOSCOPY?** A colonoscopy is an examination of your entire large intestine, or colon.

A doctor inserts a colonoscope—a long, flexible, lighted tube—into your rectum and guides it through your approximately 5 feet of large bowel.

**Be sure to ask any questions you have about colonoscopy, even during the days of your preparation.**

As the scope travels, it blows air into your colon, inflating it for easier passage. A camera lens on the end of the scope sends images from inside your colon onto a video screen.

If a polyp is found, the doctor can pass a snare through the scope and remove it. He or she also can take tissue samples for biopsy.

All of this is done under sedation, often with medications that may cause amnesia, says Alben Halpert, M.D., a gastroenterologist at Boston University School of Medicine.

"Most people don't remember much of anything about their test," she says.

What they may remember, however, is the preparation for it.

**THE PREPARATION** Your colon has to be completely empty before a colonoscopy can be done.

That requires following a liquid diet for one to three days leading up to it. Written instructions will spell out what you can and can't have. Certain colors of gelatin, soda, ice pops and other items may not be allowed.

The day before your colonoscopy, you'll take one or more laxatives. These might include pills as well as a special cleansing solution that you drink.

Be sure to ask any questions you have about colonoscopy, even during the days of your preparation, Dr. Halpert advises. The more you know, the less anxiety you are likely to have.



**E**nough already. ♦ You've gotten the message—loud and clear—that being overweight is bad for your health. In fact, you've heard it so many times that you may have stopped listening.

But tuning out the dangers of excess weight is risky, because carrying too many pounds really can take years off your life.

What's more, while you may know generally that extra pounds are not good for you, the specifics of how they jeopardize

# THE DANGERS OF BEING OVERWEIGHT

health may surprise you—perhaps enough to lose some of that unwanted weight.

**THE CANCER CONNECTION** For example, if you're a woman, you might be surprised to discover that being overweight after menopause raises your breast cancer risk. It also increases the chances that breast cancer—if it develops—will be fatal, the National Cancer Institute reports. Here's a likely reason why:

Before menopause, a woman's ovaries produce most of her estrogen, a hormone that spurs the growth of cancerous breast cells. But after a woman's menstrual periods stop, fat tissue—which also produces estrogen—becomes her most important source of the hormone.

Thus, being overweight after menopause increases estrogen levels, which, in turn, appear to make breast cancer both more likely and more deadly.

Breast cancer is not the only cancer linked with excess weight, however. Being too heavy also raises the risk of cancers of the kidney, uterus, gallbladder and colon.

In fact, overweight and obesity may account for 20 percent of all cancer deaths in American women and 14 percent in men, the American Cancer Society (ACS) cautions.

That means 90,000 cancer deaths might be prevented each year if people in this country could maintain a healthy weight.

Yet, according to an ACS survey, just 1 percent of Americans identified main-

## YOU MAY BE SURPRISED AT HOW THOSE EXTRA POUNDS AFFECT YOUR HEALTH

taining a healthy weight as a way to reduce cancer risk.

**MORE RISKS** Of course, carrying too many pounds does more than make you vulnerable to cancer. It also raises the risk of a long list of health problems, such as:

- Heart disease. Extra pounds make you susceptible to clogged arteries, chest pain and heart attacks. One reason is that heavy people are prone to having high blood pressure, high levels of LDL (the bad cholesterol), and low levels of HDL (the good cholesterol)—all of which are risk factors for heart disease.

Also, scientists are learning that fat is biologically active.

"Rather than merely adding inches, fat cells appear to function like a gland or organ. They pump out immune system chemicals that appear to heighten heart disease risk," says Caroline Apovian, M.D., 2007-2010 secretary-treasurer of NAASO, The Obesity Society.

- Stroke. Weight gain often triggers high blood pressure, a major cause of stroke.

- Diabetes. More than 80 percent of people with type 2 diabetes are overweight, says the National Institutes of Health. Excess fat interferes with the body's ability to use insulin, the hormone that keeps blood sugar at healthy levels.

- Osteoarthritis. Being overweight puts stress on knees and hips, wearing away the shock-absorbing cartilage that protects them and causing pain and stiffness.

- Liver disease. Fat can build up in the liver and damage it, causing scar tissue to form. Sometimes the scarring becomes so severe that it blocks blood flow to the liver—a condition known as cirrhosis. Cirrhosis is normally associated with heavy alcohol use. But it can also occur in obese people who don't abuse alcohol.

**LITTLE LOSSES, BIG GAINS** If these health risks unnerve you, focus on this: "Losing only a modest amount of weight can reduce your risk of many of the complications of obesity," says Dr. Apovian.

So what's modest? As little as 5 to 10 percent of your body weight, says Dr. Apovian. That's all it takes to lower your blood pressure; reduce your risk of heart disease, stroke and diabetes; and keep arthritis from progressing.

The bottom line: Taking off a few unwanted pounds is good medicine.

**Being too heavy raises the risk of cancers of the breast, kidney, uterus, gallbladder and colon.**

We have a variety of weight management and nutrition programs to help you reach your optimal health and wellness:

- **Effective Long-Term Weight Loss** Learn about our popular weight management program. Visit [www.castlewellness-hp.tsfl.com](http://www.castlewellness-hp.tsfl.com) for details on Medifast®. To schedule a taste testing and consultation with a dietitian and learn about program discounts, call 263-5050.

- **Individualized Lifestyle Weight Management Program** This comprehensive weight-loss program includes four one-on-one nutrition counseling sessions with a registered dietitian, four one-on-one personal training sessions with a certified exercise specialist, personalized menu planning, fitness classes and body composition analysis. Call 263-5050 for more information.

- **Weight-Loss Surgery Seminar** Wednesdays, Oct. 10, Nov. 14, Dec. 12, at 7 p.m. Learn about Castle's new comprehensive surgical weight-loss program from bariatric surgeon Steven Fowler, M.D., and other members of the bariatric team, including a dietitian, a nurse coordinator, and fitness and wellness specialists. Preregistration required—call 263-5400.

- **Body Recontouring After Bariatric Surgery** Wednesday, Oct. 3, 6 p.m. Shim Ching, M.D., M.Sc., FRCSC, a cosmetic and reconstructive plastic surgeon, presents information on surgical treatments available to address problems associated with major weight loss. Preregistration required—call 263-5400.

HOW WE CAN HELP

# TAKE TIME FOR YOUR HEALTH

Castle Medical Center

Adventist Health

Start a fabulous fall at Castle Medical Center. Our fall events, classes and programs can help you get and stay healthy for life. We invite you to register for a health-promoting class or seminar or call for a physician referral. Take charge of your health. Call 263-5400 or visit our Web site at [www.castlemed.org](http://www.castlemed.org).

sign up  
online  
[castlemed.org](http://castlemed.org)

## EVENTS CALENDAR

### FEATURED EVENTS



#### Breathe Free Plan to Stop Smoking Castle Center for Nicotine Dependency Treatment Nov. 6, 8, 11-15, 20, 27; 7 to 8:30 p.m.

This nine-session dynamic stop-smoking program takes a total-lifestyle approach to quitting smoking, and it can help you quit without gaining weight. \$100 for nine sessions; includes all materials and ongoing group support sessions. Fee covered by HMSA's Ready Set, Quit! stop-smoking program.



**Dave Rasmussen, D.Min.,** director, Spiritual Life

#### Surviving the Death of a Loved One Chaplain Dave Rasmussen Monday, Oct. 29, 7 p.m.

When we are faced with the pain of loss, our lives are changed forever. A seminar for those whose lives have been touched by loss and are looking for support, insight or direction. Pre-registration required.

#### Castle Medical Center Tree Lighting Ceremony

Wednesday, Dec. 5, 7 p.m. (Marine Forces Pacific Band Concert, 6:15 p.m.)

Castle Medical Center hosts its annual Community Tree Lighting ceremony, kicking off the holiday season in Kailua Town. The event will include caroling, holiday refreshments, a visit from Santa and Mrs. Claus and free trolley rides sponsored by the Kaneohe Ranch. Live Nativity by Faith Baptist Church.



### FAMILY

#### Lamaze Prepared Childbirth (6 sessions)

Mondays, Oct. 15–Nov. 12 or Nov. 19–Dec. 19  
6:30 to 9:30 p.m.  
Sundays, Nov. 4–Dec. 9  
4:30 to 7:30 p.m.

Fee: \$75 per couple, or \$65 if delivering at Castle.



#### Childbirth Basics Seminar

Nov. 15, 5 to 10 p.m.

Fee: \$55 or \$65 per couple, \$45 or \$50 for single.

#### General Newborn Care

Oct. 23 or Dec. 18  
6 to 9 p.m.

Fee: \$25 per couple.

#### Infant CPR and Safety

Oct. 17, Nov. 13, Dec. 12  
6 to 9 p.m.

Does not provide certification. Fee: \$25 per couple.

#### Breastfeeding

Oct. 11, Nov. 8, Dec. 6  
6 to 8:30 p.m.

Taught by a certified lactation consultant. Fee: \$25 (free with a childbirth class).

#### Birth Center Tour

Oct. 10, Nov. 7, Dec. 5  
6 p.m.

Call for reservation.



### NUTRITION

#### Nutrition Counseling

Ongoing, by appointment

Medical nutrition

therapy to help you get on a healthy diet and nutrition program for optimal health. Focuses include: weight loss, diabetes (covered by many HMSA plans), heart disease/cholesterol reduction, women's wellness, and supplements. Call 263-5050 for more info.

### FITNESS

Registration required (may include a medical clearance and physical therapy screening).

#### Body Sculpting/ Fitness Classes Freedom of Movement

For those with Parkinson's disease or other movement disorders who have difficulty with usual activities, including reaching, transitional movements and walking.

#### Longer Life, Health & Wellness

Excellent for seniors. Gentle exercises increase joint flexibility, range of motion, muscle strength and cardiovascular endurance.

#### Morning Stretch

Stretching exercises designed to improve muscle balance and increase flexibility and range of motion, leading to improved posture, circulation and reduced risk of injury.

#### Osteo-cise

Gentle weight-bearing and muscle-strengthening exercises designed for those with osteoporosis or who are at risk for developing the disease.

#### Qigong

#### Steady on Your Feet

Addresses balance challenges in standing or walking and stretching and strengthening key balance muscles.

### JOINT CARE

#### Joint Care Seminars

Day seminar: Thursday, Nov. 8, Auditorium  
10 to 11 a.m.

Evening seminars: Oct. 4, Ohana Room; or Dec. 11, Auditorium  
7 to 8 p.m.

Learn about the causes of hip and knee pain and how you can reduce pain using diet, exercise, medication or joint replacement surgery. Discover tips about diet and exercise that can help reduce pain, and get information on available treatment options, such as medication and joint replacement surgery.

### HEALTH SCREENING & EDUCATION

#### HMSA HealthPass

Oct. 4, Nov. 1, Dec. 6

An in-depth assessment of your current lifestyle and health risks. Body measurements and blood screening included to create a personalized health guide. Free to HMSA members. Call 948-6456 to schedule.

### HMSA Health Education Workshops

Classes held 12 to 1 p.m.

Sept. 25: "Take a Look at Stress"

Discover the sources of stress, and learn to apply some simple yet highly effective breathing techniques (including laughter!) that are practically guaranteed to reduce stress symptoms.

Oct. 16: "Think Fit"

Get started on your plan for fitness; learn basics about aerobic exercise, strength training and flexibility. Try simple exercises, and take home your free resistance band.

Nov. 13: "Understanding Diabetes"

You will also get tips on how to prevent this disease or, if you have it, how to control it to live a full and productive life.

Dec. 11: "Navigating the Farmers' Market"

Learn how you can support local farmers and acquire fresh foods as well as how these new foods can add nutrition to your table.

### SUPPORT GROUPS

Free and open to the public.

#### Attitudinal Healing

For the stresses of daily life and healing relationships.

#### Cancer Support Group

For cancer patients, survivors and loved ones.

#### Parkinson's Support Group

#### Bereavement Support Groups