

# LIVE

younger | LONGER

ST. HELENA HOSPITAL –  
NAPA VALLEY

## RECOGNIZED AS TOP IN THE WEST

*more inside*  
**winter 2013**

Anesthesia: Surgery with compassion and safety  
Improving for you  
Wellness, one habit at a time

Brought to you by  
NORTHERN CALIFORNIA NETWORK OF ADVENTIST HEALTH  
AND ST. HELENA HOSPITAL NAPA VALLEY





# THE LATEST CHANGES AND IMPROVEMENTS FOR YOU

Welcome to the winter issue of *Live Younger Longer*. I hope you will find this issue as inspiring and informative as I do.



**Terry Newmyer**  
President/CEO

In these pages, I invite you to get acquainted with two of our newest physicians, Dr. Stewart G. Allen, cardiology/internal medicine, and Dr. John Kirk, OB/GYN. These doctors look forward to getting to know you as they serve our community.

You'll also meet the doctors of Calistoga's Vermeil Clinic, internal medicine specialist Dr. Lisabeth Hall and family practice specialist Dr. Jeanette Williams, as well as doctors from the Railroad Clinic, Dr. Thomas E. Siles and Dr. Afsaneh Kahlili, who provide a team approach to primary care. Their love for their work and small-town community represents the very best in health care.

We'll also update you on progress and events throughout our health care community, including Project Transform, building projects to expand access to top-quality care, and the progress of our new Adventist Heart Institute. I'm especially pleased to present two significant accomplishments of our dedicated staff, donors and volunteers. As you will read, our annual Charity Gala has broken all previous records, a true testament to the incredible generosity and spirit of our community. Additionally, our patients have chosen St. Helena Hospital as Top in the West, an unexpected honor that reflects the commitment and skilled efforts of so many at every level. Please join me in thanking all those who gave of their time and means to accomplish these milestones for our community.

I'd also like to introduce you to three important services. St. Helena Hospital offers some of the most advanced surgical care anywhere, and a key part of those services is our anesthesiology department, headed by Dr. Timothy Lyons. St. Helena Hospital also offers an innovative approach to healthy living and preventive medicine through two programs you'll read about here, TakeTEN and Live Well.

As always, I hope you enjoy this update, and I look forward to continuing to serve and support our community's health care needs.

Terry Newmyer  
President/CEO

Northern California Network of Adventist Health and St. Helena Region Hospitals

## | In this Issue |

Harmony Gala .....	P3
Anesthesia: Surgery with compassion and safety .....	P4
Top in the West .....	P6
Welcome new doctors .....	P7
Improving for you .....	P8
10 simple resolutions for a healthier body and mind .....	P9
Wellness, one habit at a time .....	P10
<b>IN THE NETWORK</b>	
Life-saving emergency care .....	P12
Building a strong health foundation through primary care .....	P14



**ST. HELENA HOSPITAL**  
NAPA VALLEY

The St. Helena Region of Hospitals, which includes St. Helena Hospital Napa Valley, St. Helena Hospital Clear Lake and St. Helena Hospital Center for Behavioral Health, has combined with Ukiah Valley Medical Center and Frank R. Howard Memorial Hospital in Willits to form the Northern California Network of Adventist Health.

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Terry Newmyer President/CEO • Steven Herber, MD, FACS Executive Vice President • Joshua Cowan Vice President of Marketing • Nicole Britain Marketing Manager of Interactive Media

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Harmony Gala honorees Jeff Gargiulo and Valerie Boyd.

# HARMONY GALA HONORS VALERIE BOYD AND JEFF GARGIULO

St. Helena Hospital's 18<sup>th</sup> annual Foundation gala at Silver Oak Cellars in Oakville on Nov. 3 broke all past records, raising more than \$1.5 million.



*Thanks to our amazing and generous community, over*

**\$13.5 MILLION  
HAS BEEN RAISED  
FOR THE HOSPITAL**

*through the gala since 1995.*

*To donate, please contact the St. Helena Hospital Foundation at (707) 963-6208 or visit our website, [www.shhfoundation.org](http://www.shhfoundation.org).*

*All of your tax-deductible gift goes directly to St. Helena Hospital.*



THE NAPA VALLEY VINTNERS, THROUGH ITS CHARITABLE EVENT, AUCTION NAPA VALLEY, GRANTED \$400,000 TO ST. HELENA HOSPITAL. BECAUSE OF THIS GRANT, WE ARE ABLE TO HELP UNINSURED PATIENTS IN OUR COMMUNITY. THANK YOU, NAPA VALLEY VINTNERS!

The event, named Harmony in honor of Valerie Boyd and Jeff Gargiulo, was a testament to the couple's commitment in support of cardiovascular services at St. Helena Hospital Napa Valley and the Adventist Heart Institute's comprehensive cardiovascular care in Northern California.

This year's gala, chaired by David Duncan and co-chaired by Elaine Sczuka, featured entertainment by three of Nashville's Grammy Award-winning country artists, Billy Dean, Monty Powell and Anna Wilson. Close friends of the Gargiulos, the performers added a surprise for guests when they performed a song composed by David Duncan. Impassioned bidding during the live auction led to netting an all-time high of \$260,000 for two truffle dinners with the Araujos. The evening concluded with the Fund-a-Need, raising funds for state-of-the-art cardiac care equipment. Both Valerie and Jeff affirmed that "It was truly a magical night of irrational generosity."

The Foundation Board and team were thrilled about the financial success of the gala adding to a banner year for St. Helena Hospital Napa Valley, which was recently named by NRC Picker as a 2012 "Top performing hospital, by patients" (see page 6).

President and CEO Terry Newmyer was pleased to see that many of the attendees of the gala have been patients at the hospital and their positive survey responses are, in part, responsible for the achievement of this important award.

"We are so grateful to all the gala attendees for opening up their hearts," says Valerie Boyd. "They bid high and often, and with such enthusiasm. This generous support will enable the Heart and Vascular Center at St. Helena Hospital Napa Valley to keep expanding and improving its services to benefit all the residents of Napa, Lake and Mendocino counties."

"This achievement represents a unique, dynamic partnership between the community and St. Helena Hospital," says Steven Herber, MD, FACS, Executive Vice President of St. Helena Hospital. "We have strong hospital advocates in our Foundation Board members, who listen to the community about its concerns and needs for health care. And we have community members who give with amazing generosity to fund improvements and leading-edge equipment and technology to ensure that everyone in the community has access to top-quality health care."





# ANESTHESIA: SURGERY WITH COMPASSION AND

Many medical procedures, from major tests to surgery, require subjecting patients to uncomfortable or even painful procedures in order to identify and treat serious conditions. A major goal in modern medicine is to reduce pain and discomfort for such procedures, while increasing patient safety and improving outcomes. The result has been the rapid growth and continued evolution of the specialty of anesthesia.

**T**he development of safe, effective anesthesia has had a transformative influence on modern medicine.

Procedures that were once prohibitively painful or difficult have become routine, and patient outcomes have improved in tandem with advances in anesthesia.

"Anesthesia is one of the safest things you can do," says Dr. Timothy Lyons, MD, chief of anesthesia at St. Helena Hospital Napa

Valley. "It's safer now than it's ever been, and every year something comes out that makes it even more so. Everything we do is customized to the patient's condition and body size, and exactly tailored for the procedure so that we provide enough to keep the patient comfortable, but no more than is needed. One hundred percent of our attention during surgery is focused on monitoring the patient and maintaining safety and comfort from

before the surgery starts until the patient is recovering."

Dr. Lyons compares the surgeon's job to that of a mechanic who has to work on the car while it's running. In that case, he says, the anesthesiologist's primary role is to make sure it keeps running, and to provide a safe operating environment and a comfortable patient for the surgeon to operate on. Effective anesthesia creates an environment for the surgeon to get his or her job done efficiently and safely.

Anesthesia covers a broad spectrum that ranges from simple sedation to general anesthesia, and may involve more than one method for a given procedure.

## SEDATION

Sedation anesthesia is a continuum where intravenous and/or oral drugs are given to provide relaxation and blunt pain sensation.

*“We have an incredibly talented team with a lot of continuity, and we’re very proud of our department.*

**I’D LET ANY ONE OF THEM TAKE CARE OF ME OR MY FAMILY,**

*and you can’t get a higher recommendation than that.”*

— Timothy Lyons, MD,  
Chief of Anesthesia

## SAFETY

During any sedation, the patient is fully monitored. The lowest level is light sedation, known as MAC (monitored anesthesia care), where the patient is made comfortable and relaxed but remains able to answer questions and breathe on his or her own. MAC, also known as twilight anesthesia, is often combined with a local or regional anesthetic to directly numb the area of the procedure.

Moderate sedation makes patients relaxed and sleepy, but still able to respond verbally or with movement. This level of sedation is often accompanied by a lack of memory of the procedure, which is part of the medicine, and is often used for brief procedures such as dealing with joint dislocations. Deep sedation involves a short anesthetic and produces a deeper state of sedation where the patient can’t be roused easily and may need some help breathing.



### REGIONAL ANESTHESIA

For some procedures, the anesthesiologist will apply an anesthetic directly to a specific area of the body or nerves to cause a deep numbness. Common forms of regional anesthesia include nerve blocks, where an anesthetic is injected near the spinal cord or a major nerve, such as spinal, shoulder, arm or epidural blocks. Regional anesthesia can provide pain relief that extends well beyond the surgery itself, and is usually used in conjunction with some level of sedation and/or general anesthesia. When used with general anesthesia, a regional anesthetic allows a lower overall level of anesthesia to be used.

### GENERAL ANESTHESIA

With general anesthesia, a sedative is first administered, followed by injectable drugs to bring about a deep sleep. The patient is then kept asleep with anesthetic gas and muscle relaxants, and usually requires breathing assistance. Throughout anesthesia, the patient’s heart function, breathing, blood oxygenation, blood pressure and other vital signs are monitored for safety and to keep the patient pain-free.

### SAFETY

The safety of anesthesia has increased steadily, with risks dropping more than 95 percent over the past 25 years, according to the American Society of Anesthesiologists. Advancements in drugs and dosage, monitoring technology and physician knowledge have all contributed to the improvements.

“The risks of anesthesia are generally determined by the patient’s underlying health condition, much more so than factors such as age,” Dr. Lyons says. “We’ve learned how to take those factors into account

through an in-depth risk assessment, and in general we can administer anesthesia safely to even the sickest patients. Some of the things we’ve learned are very simple — for instance, that pre-operative counseling, by itself, seems to improve outcomes slightly. Just talking over your upcoming surgery with your anesthesiologist actually makes things better. Others are more complex, like using additional monitoring methods for more complicated surgeries. With any modern surgery, the area of least risk is actually the anesthesia.”

The anesthesia department at St. Helena Hospital is one of unusual depth, led by two doctors — Dr. Lyons and Dr. Dan Huber — who both have multiple board certifications. The team also includes several part-time partners and nurse anesthetists. This allows more than one person to monitor and care for the patient during surgery.

Dr. Lyons points out one other advantage. “For a small hospital, we do some very complex surgery, including difficult vascular surgeries and joint replacements. Not many hospitals of this size do the degree of surgery that we do. And the advantage of that is that once you deal with really complex and sick patients, it improves your decision making across the board. You learn to recognize risks before they really develop, and you have that ability to make the quick decisions that save people’s lives. It increases your ability to take care of everybody.

“We have an incredibly talented team with a lot of continuity, and we’re very proud of our department,” Dr. Lyons concludes. “I’d let any one of them take care of me or my family, and you can’t get a higher recommendation than that.”



WHERE PASSION AND COMPASSION MEET

# ST. HELENA HOSPITAL — NAPA VALLEY RECOGNIZED AS TOP IN THE WEST

It takes a community to make a great hospital, an ongoing collaboration between health care providers, hospital staff, patients, volunteers and donors, working together to continuously improve the health of the community. Which is why the recent recognition of St. Helena Hospital — Napa Valley by its patients as the Top in the West means so much to those who work here.

“It was an honor for the hospital and for nursing that our patients feel this way,” says Norma Zavala, RN, Heart and Vascular Unit, one of the team that traveled to Chicago to receive the award. “This was completely unexpected, and it’s both very humbling and very rewarding to see that what you’re giving is appreciated. This was truly an awesome thing for patients to consider us in this way, a validation that we’re making a difference each day.”

In September, NRC Picker, a division of National Research Corporation, awarded the hospital its 2012 Path to Excellence award for “Top performing hospital with 100 to 300 beds.” The award is patient-driven, from the designation of the categories of achievement deemed most important, to the selection of award recipients. The award, which goes to the top two hospitals

nationwide in each of three size categories, is bestowed on hospitals ranked by patients themselves as being top performers. On a zero-to-10 scale, St. Helena’s patients gave their hospital an overall rating of 9.7, and rated their willingness to recommend the hospital to others at 9.9.

## GRATEFUL FOR TEAMWORK AND COMMUNITY SUPPORT

Among staff at St. Helena, there’s a sense of humility and gratitude toward the patients and community. There’s also a strong sense of gratitude for the teamwork that made this award possible.

“This is an amazing accomplishment by the whole team at the hospital,” says Heather Anderson, RN, Director of the Medical-Surgical Unit and Orthopedics. “This isn’t any one person, it’s a collaboration by everyone — the lab team, respiratory team, nurses, doctors, registration, administration, housekeeping — everyone. It starts at the front door, greeting patients and getting them checked in and to their rooms, and goes on through their entire experience. Everybody plays a part in how patients perceive us. It’s truly an honor that patients see us this way.”

Danny Vorsaph, Environmental Services Team Leader, agrees. “I think what contributes most is the teamwork. My department is housekeeping, and the nurses and housekeeping — everyone, really — work very well together. They help each other, and they’re outstanding when things need to get done,” he says. “I’ve been doing this for a long time, and I’ve never worked in a hospital where people call you up when they finish something and ask if there’s more they can do. The

attitude is amazing. That’s what really makes this place what it is.”

“People step up and come when something happens,” Zavala adds. “You don’t have to call them. It seems so natural to us here, this culture of cooperation, that we take it for granted. We don’t realize it’s extraordinary until we have visitors from another hospital, and they’re struck by the level of teamwork. Patients comment on the difference in culture — that people smile more, nurses and doctors are easy to talk to. Even something as simple as a doctor taking a few minutes to actually sit down on the patient’s bedside to answer his questions and talk with him. That kind of passion for care is everywhere here, and it makes a difference.”

## TRUST BEGETS TRUST

One significant source of the passion and commitment to excellence found among the St. Helena Hospital community is the trust placed in hospital workers at all levels by hospital administration. In an effort to remove barriers imposed by a structured hierarchical approach to decision making, the hospital instituted a new management philosophy based on the Hebrew Circle, which encourages and empowers individual ownership for solutions, in the moment of need. From doctors to housekeepers, each is empowered to solve patient problems on the spot, and participate in planning and implementing strategies for improvement. The result has been a wave of creative innovations that have quietly transformed patient experiences in the hospital in ways both large and small.

It also comes down to heart. St. Helena emphasizes its mission to provide



*Heather Anderson, RN, Director of the Medical-Surgical Unit and Orthopedics, shows off the award.*





*Norma Zavala, RN; Danny Vorsaph, Environmental Services Team Leader; and Heather Anderson, RN.*

whole-person care to each person who comes through its doors, and staff members live out that mission on a daily basis. That dedication extends to every level, from direct care to support staff.

"We have great housekeepers, for instance," Zavala explains. "They not only keep things clean and in good order, but they share themselves with the patients, and help provide comfort to them. They're an essential part of the care team. And our nurses provide much more than physical care, they provide emotional and spiritual care as well. Things like holding a patient's hand during a procedure, helping to find a solution to a problem, or taking a moment to comfort a family member. People come back, and they remember those moments."

Heather Anderson agrees. "This is such a distinguished award to receive from our patients, a recognition of the efforts our people make every day. There's so much teamwork and cooperation here. I really appreciate the team that I have, and this award shows that our patients appreciate their dedication as well. It's an inspiring thing, to see how what we do each day makes a difference."

### WORKING TOGETHER

That teamwork extends into the community at large. St. Helena Hospital has one of the most active donor communities in the region, individuals and organizations who give of their time and means to ensure that everyone in the community has access to top-quality health care.

"This achievement represents a unique, dynamic partnership between the community and St. Helena Hospital," says Terry Newmyer, CEO of St. Helena Hospital. "We have strong hospital advocates in our volunteer Foundation Board members who listen to the community about its concerns and needs for health care. And we have community members who give with amazing generosity of their time and means to fund improvements and leading-edge equipment and technology to benefit all our patients."

"The support from our community members is so important to our mission," adds Steven Herber, MD, Executive Vice President. "St. Helena Hospital is able to provide a level of care far beyond the norm for a community of our size through their investments in advanced technologies and top-quality people. The Path to Excellence award is an achievement shared by our entire team: physicians, staff, volunteers, donors and community members. We humbly thank each of you, and we pledge to continue to provide the health care excellence that you deserve."

## Welcome NEW DOCTORS



### STEWART GLENN ALLEN, MD, MS, FACC

Dr. Allen earned his medical degree from Wake Forest University School of Medicine in Winston-Salem, N.C., in 2001. He completed his internship and residency in internal medicine at Medical University of South Carolina and served as chief resident in internal medicine at

Thomas Jefferson University, Frankford-Torresdale Hospital in Philadelphia. He received a Masters in Health Sciences Research after a fellowship program in clinical cardiology and cardiovascular research. He also completed training in interventional cardiology.

Dr. Allen's expertise in interventional cardiology includes advanced coronary interventions, peripheral artery interventions, and ASD/PFO closure. Dr. Allen also has a strong interest in a patient-specific, preventive approach. He has served as a spotlight series speaker for the American Heart Association and has given numerous lectures on preventive health and risk factor modification. He has also been designated as a specialist in clinical hypertension by the American Society of Hypertension.

Board certification:

Cardiovascular disease

Internal medicine



### DR. JOHN KIRK, MD, FACOG

Dr. Kirk earned his medical degree from Yale University School of Medicine in 1994. He completed his residency in obstetrics and gynecology at Cedars-Sinai Medical Center and served as chief resident from 1997-1998. Dr. Kirk helped found Northern California's first

Robotic Gynecologic and Minimally Invasive Surgery Center of Excellence at Queen of the Valley Hospital Robotic & MIS Center of Excellence, where the team performed more than 600 cases.

As medical director of Robotic Surgery at Glendale Adventist Medical Center, he directed a fledgling robotics program. Dr. Kirk also runs a gynecology practice focused on minimally invasive surgical solutions, robotic surgical applications and holistic and complementary medical options for female patients in all age groups. He also continues to serve as an educator and lecturer on the DaVinci Robotic Surgery platform.

Board certification:

Obstetrics and gynecology

# IMPROVING FOR YOU

Adventist Health's Northern California Network, which includes hospitals from Vallejo to Mendocino County, is moving ahead with a number of projects to improve access and care for its communities. All told, we're spending about \$100 million on construction projects, including revamped emergency departments at St. Helena Hospital Clear Lake and Ukiah Valley Medical Center, as well as a complete \$62 million rebuild of Howard Memorial Hospital in Willits. These improvements represent a dynamic partnership between our health system and our communities.



**FRANK R. HOWARD  
MEMORIAL HOSPITAL**

Crews broke ground Aug. 13, 2012, on the construction of a new facility that will replace the current 25-bed critical access hospital originally built in 1928. With two stories and 74,000 square feet, it will provide more than double the space. Site work has been completed, and the building pad and footings are underway. The first concrete pour was completed Oct. 15. Structural steel is anticipated to be erected early in 2013. An animation of the final structure can be found at [www.howardhospital.org](http://www.howardhospital.org), and its progress can be viewed on the hospital's website at [www.howardhospital.org/construction\\_cam.php](http://www.howardhospital.org/construction_cam.php).

"It is really satisfying to visit the site and observe signs of progress each day that bring us closer to our goal of opening our new hospital in late 2014," says Rick Bockmann, CEO at Howard Memorial Hospital.



**ST. HELENA HOSPITAL CLEAR LAKE**

The newly expanded emergency department at St. Helena Hospital Clear Lake is nearing completion. According to Brian Curry, Project Manager, the eight new private exam rooms, new entrances and new waiting area are anticipated to be completed and in use this spring. Construction began in October 2011.

"This will provide a much more patient-friendly environment and smoother, more seamless access to critical services," Curry says. "These improvements will allow our emergency medicine team to provide top-quality, no-wait care for even the most challenging situations. Home-like amenities will also allow patients and family members a better experience for traumatic care."

On completion of the current phase of construction, a final phase that includes renovation of the five original exam rooms and the offices and staff areas will begin, and is expected to be completed in May. Along with the space renovations, the nurse call, code blue and fire alarm systems and air conditioning will be upgraded, and all areas of the hospital will receive a facelift. View progress at [www.newerforyou.com/our\\_progress](http://www.newerforyou.com/our_progress).



**ST. HELENA HOSPITAL NAPA VALLEY**

Project Transform, a major initiative to modernize the hospital, broke ground in 2011 and has made significant progress since. Although highly rated for patient experience and cutting-edge medicine, the hospital's facility, which was built in 1948, was in need of refreshing.

A new main lobby, named for local vintner and dedicated hospital supporter Joseph Phelps, has already been completed. Among the areas targeted for improvement are upgrades to the orthopedics unit, mental health unit, medical-surgery unit, family birthing unit, the 12-bed intensive care unit and the post critical care unit. Capacity will be added to 130 of the hospital's 151 beds, without increasing the hospital's size. The project is on track to meet its scheduled completion in the first quarter of 2014.

"The main portion of the project is starting now," says Tricia Williams, Former Vice President of Operations and Planning and now the Regional Vice President for Behavioral Medicine and Population Health. "This renovation is primarily about the patient experience and the healing environment. Our goal is to provide comprehensive whole-person care, and we feel environment is a really important component of that level of health care."



## 10

SIMPLE RESOLUTIONS  
FOR A HEALTHIER BODY **AND** MIND

It's that time again — a new year, a fresh start! Resolutions to exercise more and lose weight are popular. These simple lifestyle changes can help you move in a positive direction.

10

**EAT MORE FRUITS AND VEGETABLES.** The United States Department of Agriculture (USDA) "MyPlate," which replaced the food pyramid, recommends making half your plate fruits and veggies. To view the daily recommendations of fruits and vegetables for your age, plus the valuable nutrients and health benefits fruits and vegetables provide, visit [www.choosemyplate.gov](http://www.choosemyplate.gov).

9

**DRINK MORE WATER.** Do you drink six to eight 8-ounce glasses of water a day? You may not think about drinking water during the cooler months of the year, but your body depends on water to survive. Water helps your cells and organs function properly, regulates body temperature and moves food through your intestines. Try replacing an extra cup of coffee or a can of soda with a glass of refreshing water instead. Keep a reusable water bottle with you as a reminder.

8

**TAKE BREAKS FROM SITTING.** Spending hours each day at a desk or behind the wheel doesn't do your waistline or heart any favors. Over time, it can contribute to weight gain and heart disease.\* Stand up, stretch and walk around — often. Park farther away, take the stairs, refill your water bottle, sit on a stability ball, talk to co-workers instead of emailing them, use a bathroom on another floor — whatever it takes to help you move more.

7

**CUT BACK ON SODIUM.** The average American gets 3,400 mg of sodium or salt a day, but 1,500 mg or less is recommended.\*\* Too much sodium can lead to fluid retention and increases pressure on your heart and kidneys. Limit your sodium intake by using less table salt and reading food labels, as sodium lurks in many processed foods. Talk to your doctor about how much sodium is appropriate for you.

6

**MAKE TIME TO LISTEN TO MUSIC AND LAUGH.** A recent study showed that one-hour music and laughter sessions lead to a drop in blood pressure (readings were taken before and after the sessions). Cortisol levels (markers for stress) also decreased.\*\*\* Lift your mood and help your heart by listening to music during your commute, going to a concert, watching funny videos or taking in a comedy show or movie.

5

**FLOSS YOUR TEETH EVERY DAY.** Flossing helps reduce plaque buildup and keeps your gums healthy, which can help you avoid painful and expensive dental procedures. Flossing regularly may also help reduce your risk of pneumonia and diabetes complications.\*\*\*

4

**GROW A GARDEN.** Gardening can be a rewarding activity. It can help you spend time outdoors and appreciate nature, enjoy nurturing something and seeing it grow, be physically active and provide nutrition if you grow fruits and vegetables. The National Gardening Association at [www.garden.org](http://www.garden.org) can provide inspiration to get started!

3

**WEAR A HELMET.** Make sure everyone in your family protects their skull and brain with a helmet when they bike, skate, ride a motorcycle or participate in any other activity that could spell disaster for your head (or life) if you're injured.

2

**TELL SOMEONE WHY YOU LOVE THEM.** A note or letter that includes the reasons why you love someone can be one of the most meaningful and uplifting gifts you can give a significant person in your life.

1

**SCHEDULE YOUR ANNUAL CHECKUP.** Your doctor is your partner in your overall health and well-being. Seeing him or her at least once a year helps you understand important numbers, make sure your prescriptions are correct, know when to have screenings that can help save your life and more. By following your healthy resolutions, you'll have good news to share!

\* Source: *European Heart Journal*.

\*\* Source: American Heart Association, 2010 Dietary Guidelines.

\*\*\* Source: MedlinePlus, [www.nlm.nih.gov/medlineplus](http://www.nlm.nih.gov/medlineplus).





*James Peters, MD, DrPH,  
RD, RRT, FA CPM, and  
his wife, Cheryl Thomas  
Peters, DCN, RD,  
co-founders of the  
TakeTEN program  
through the St.  
Helena Center  
for Health.*



# WELLNESS, ONE HABIT AT A TIME

One of the basic principles of providing whole-person care is the role of prevention, empowering individuals to live life on their own terms, free of the constraints of disease and illness.



The statistics are as sobering as they are familiar, a litany of chronic diseases pressing downward on Americans' quality of life. Heart disease. Stroke. Cancer. Diabetes. Obesity. Arthritis. According to the Centers for Disease Control and Prevention, seven out of 10 deaths among Americans each year are from chronic diseases. In 2005, 133 million Americans — almost one out of every two adults — had at least one chronic illness. Chronic diseases are among the most prevalent, costly and preventable of all health problems. Tobacco use is the single most preventable cause of death and disease in the United States.

There is, however, a bright ray of hope in this picture.

"The good news is that none of us need be prisoners of our genes or circumstances, destined to experience ill health — we actually have a lot of personal power to make changes that improve health," says James Peters, MD, DrPH, RD, RRT, FA CPM, Medical Director of the St. Helena Hospital Center for Health. "The majority of diseases that affect modern Americans are chronic diseases, and the factors involved in these diseases are largely affected by how we live — what we do, what we eat, how we sleep. This gives each of us a tremendous opportunity to improve our health simply by making basic choices each day. Many of the health problems we see today could be eliminated if everyone did this."

The seemingly simple countermeasures are as familiar as the statistics: Eat right. Exercise. Reduce stress. Get enough sleep. Stop smoking.

According to CDC calculations, if everybody in the U.S. changed just one such habit, there'd be a 47% drop in yearly mortality. Yet, millions of Americans live with less than the health that they could have, because it can be complicated to change established patterns of behavior.

"It all comes down to habits," says Dr. Cheryl Thomas Peters, DCN, RD, Director of the Center for Health. "When people implement very basic lifestyle changes, it can result in large improvements in health, but we find it takes some focus. What we've found is that making one simple change in lifestyle can often lead to the desire to make many more changes."

### BUILDING HEALTH

How, then, does one identify those habits and make changes that will improve health, well-being and eventually longevity?

The St. Helena Center for Health TakeTEN program is designed to immerse guests in learning how to identify habits and make changes that will improve their health immediately. Grounded in proven research, TakeTEN focuses on the concept that building health in turn prevents or reduces disease.

Beginning with an in-depth medical assessment, both Dr. James Peters and Dr. Cheryl Thomas Peters and their staff determine the health and nutritional needs of each participant, and identify any barriers that may be preventing them from achieving greater health. Risk factors and existing conditions are identified, and participants help craft a personalized road map to better health. The plan is based on a hierarchy of intervention

that starts with nutrition and lifestyle to address the causes of disease, and reserves medication for what can't be fixed with lifestyle changes.

"This is an exciting area of medicine," Dr. Cheryl Thomas Peters says. "Everything we do is based on a number of studies that have proven that there are 10 basic habits that can have a tremendous impact on health, quality of life and longevity. These are very simple habits, like breathing fresh air, not smoking, being active and eating more plant-based foods, yet making the changes can be complicated. TakeTEN is about personalizing those habits and making them work, based on that individual's own health condition, preferences and needs."

Both doctors emphasize that TakeTEN is a positive model that allows people to experiment with changes and discover the benefits. "We treat the core of what the body needs," says Dr. James Peters. "What makes this a very satisfying area of medicine is the ability to clearly see how rapidly people begin to feel better, reinforced by objective measures of health progress, and without reliance on medications. By the end of the first week, we see cholesterol drop, blood pressure fall, significant weight changes, reduced pain and rising energy. Diabetes gets better, heart disease gets better."

"And all without a sense of deprivation," says Dr. Cheryl Thomas Peters. "We don't tell people what not to do, we help them discover what to do more of, and how that benefits them directly. It's amazing to see the power of that."

## Grounded in medicine

While the core of the program is implementing simple lifestyle changes to improve and maintain health, TakeTEN is still serious medicine. "Everything we do is evidence-based, a blend of two worlds — the standard medical model and lifestyle medicine," Dr. James Peters says. "Our team has a lot of clinical experience taking care of people, and great depth in the science and practice of what we do."

Dr. Peters is board certified in preventive medicine, with decades of experience as a primary care physician. He holds a second doctorate in public health with special emphasis in health promotion and prevention,

and is a registered dietitian. As a doctor of clinical nutrition, director Cheryl Thomas Peters specializes in nutrition science as medicine with a focus on prevention and treatment of chronic diseases, and is also a registered dietitian. Dr. Lisa Hinz, clinical psychologist, provides expert support on the psychology of lifestyle change, and Dr. John Hodgkin, a renowned pulmonary rehabilitation expert board certified in internal medicine, pulmonary disease and critical care medicine, oversees the center's smoking cessation program.

In the end, participants in the TakeTEN program become their own best physician.

"What we really do is help people identify what changes will help them the most, and demonstrate how those changes can be made, but we don't actually make those changes. We try to empower people to say, I can do this for life. We can't really take credit for it, because it's all there, when people tap their own physical, mental and spiritual strengths. It's truly amazing the results people can bring about in their own health," says Dr. Cheryl Thomas Peters.

For more information about the St. Helena Center for Health and the TakeTEN program, please call **800-920-3438** or go to [sthehlenacenterforhealth.org](http://sthehlenacenterforhealth.org).





“I REMEMBER WAKING UP IN THE ER AT HOWARD [HOSPITAL]. TWO WOMEN HAD THEIR BACKS TO ME, AND ONE OF THEM SAID, ‘**IT’S A MIRACLE.**’ I REALIZED THEY WERE TALKING ABOUT ME. BUT I’LL TELL YOU, **THESE GALS ARE THE MIRACLE. THEY’RE MY GUARDIAN ANGELS.**”



# LIFE-SAVING EMERGENCY CARE

On Feb. 15, 2012, Linda Asman was lying on a gurney in Frank R. Howard Memorial Hospital's (HMH) Emergency Room. The last thing she remembers about her near-death experience is hearing a nurse say, "Look at her color." Linda looked at the color of the skin on her hand, and it looked white. She thought, "Uh oh" and blacked out.

Months earlier, Linda had been a happy, healthy hairdresser in her 50s with the energy to be on her feet all day. When her energy started to decline and her weight began to increase, she thought age might be catching up with her. However, when she began feeling short of breath and noticed her ankles swelling, she realized something was wrong.

"I've spent a lifetime dieting, so I know when I should be gaining weight and this didn't make sense," she says. "Then it got so I could hardly talk. I could only say two words at a time before I ran out of breath." She made an appointment with her doctor, who diagnosed her with asthma and bronchitis. She underwent several breathing treatments, but her symptoms didn't go away.

On Feb. 2, she became so short of breath that she felt she needed emergency care. Her sister, Susan Grubb, drove her to the HMH Emergency Room. "I saw Dr. Medvin in the ER," she says, "and he diagnosed me." After several tests, Linda was transferred by ambulance to a bigger hospital to be treated for cardiac tamponade.

## DIAGNOSIS AND TREATMENT

Tamponade is pressure on the heart that occurs when blood or fluid builds up in the space between the heart muscle (myocardium) and the outer covering sac of the heart (pericardium). If not treated quickly, the patient can die.

"I was at Sutter for two weeks. They drained 40 pounds of fluid in the first three days," Linda says. She had been retaining fluid around her heart and throughout her body. After two weeks, she was discharged home. Again, her sister, Susan, came to stay with her to help out while Linda recovered; and it's a good thing she did. The next morning, Linda felt weak, tired, sweaty and nauseated. Susan begged her sister to let her take her to the ER, and Linda finally relented.

The team at HMH took one look at Linda and knew she needed immediate attention. That's when Linda remembers one of the nurses saying, "Look at her color," before she blacked out.

Linda's sister had gone to the hospital chapel to pray. When she returned a short time later, Linda's condition had deteriorated and

Susan was asked to leave the ER. The ER team became a high-intensity, life-saving machine.

## LIFE-SAVING CARE

Linda was the highest level of trauma HMH had seen in eight years, a level not normally seen in small, rural hospitals and Linda's symptoms did not follow the classic presentation for tamponade.

Linda's case was complicated in part because she was hemodynamically compromised (the chambers of her heart were compressed). The fluid around Linda's heart had rapidly increased and her heart couldn't handle the pressure. The reason Linda doesn't remember anything is because her blood pressure dropped to zero.

Her sister was terrified. She went back to the chapel and prayed and prayed. "Several doctors and nurses from the ER came and told me what had happened and reassured me that Linda would be alright," she says. "They were really nice to me."

The team at HMH wasted no time. Having accurately diagnosed what was happening, they were able to resuscitate Linda. She was quickly transferred via helicopter to a hospital that provides the level of cardiac care Linda needed. She had more than a liter of fluid drained from around her heart within an hour, relieving the pressure and stabilizing her condition. She then had an additional procedure; a flap was cut into the heart sac allowing fluid to escape from around her heart.

## GUARDIAN ANGELS

While she was recovering, several people who had cared for her at HMH called to check on her.

"I was in the ICU for three days. The first morning I was there, I got a call from a nurse at Howard [Hospital] asking how I was doing. The next day, another one called. That was pretty special," she says. "When I got home, I got more calls. One of them said, 'I did your EKG. I'm glad you're okay.'"

Linda said, "I remember waking up in the ER at Howard [Hospital]. Two women had their backs to me, and one of them said, 'It's a miracle.' I realized they were talking about me. But I'll tell you, these gals are the miracle. They're my guardian angels."

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# BUILDING A STRONG HEALTH FOUNDATION THROUGH PRIMARY CARE

Every building needs a strong, solid foundation. In medicine, that foundation is primary care. Primary care physicians fill a variety of roles — mystery solver, health coach, advocate, care coordinator, interpreter, communications master and more. Specialty training helps them focus on identifying and managing health issues across the spectrum of a patient's life.

**F**or adults, primary care is offered through specialists in family medicine or internal medicine. The difference between the two can be confusing for patients, according to Jeanette Williams, MD. "Family medicine, my area of training, covers the cradle to the grave, I like to say, so I specialize in everyone from pregnant women to babies to adult care to geriatric care, and everything in between. I can care for the entire family. Internists specialize in adult medicine. Internists and family medicine doctors both treat conditions such as diabetes, heart failure, chronic lung or liver disease, and provide preventive health care maintenance. Both specialties also provide foundational care, and fulfill a coordinating role when other specialties are involved."

Internists often have areas of special interest as well, where they have additional training in specific health challenges. According to internist Lisabeth Hall, MD, "It's called primary because it's the starting point for all care, the first critical stop in health care maintenance, from ensuring basic screenings, to preventive care and health management, to coordinating care between providers."

## A RELATIONSHIP TO BUILD ON

Building an ongoing relationship is the key to good primary care, says internist Thomas E. Stiles, MD. "People need to have somebody who knows about them as a person. A critical part of what we do is provide continuity of care," he explains. "If a patient has a chronic medical problem and needs a reference point to have someone help with the management, we are that reference point. As diagnostic specialist, we serve as the starting point, and an ongoing point of continuity."

"All patients should have a relationship with a primary care doctor," Dr. Hall adds. "Primary care is the hub where everything comes together, a foundation of trust that provides a context for their illness. Ideally we find the mysteries, then, if necessary, initiate consultations and coordinate care from there."

A good primary care physician develops the ability to sift through a patient's story and put the pieces together while drawing out important additional details, much like a detective. "Primary care is exam-based," says Dr. Stiles. "A large part of our role is listening

to the presentation of the problem and making observations in that context. We collect and correlate data from the patient's story, an examination and possibly test results, and begin to understand what the problem might be and how to address it. We're mystery solvers."

## COORDINATING THE BEST CARE

That ability to bring together the pieces of a story is more critical than ever as advances in medical knowledge and technology have increased the role of specialized medicine. It can be all too easy for the big picture of a patient's health to be reduced to a single disease or system. "Our focus is naturally on the patient as a whole person — we don't just see a heart patient or a cancer patient, we're privileged to know the full spectrum of a patient's health situation," says Dr. Hall. "One of our most vital roles is coordination, ensuring that all providers are in the communication loop so that the patient gets the most effective treatment."

Primary care doctors are also ardent patient advocates. "For us, it's important to always be there for our patients," adds internist Afsaneh Khalili, MD. "They should never have to feel alone with a health problem or a difficult diagnosis. A large part of our role is to talk about problems and come up with a plan and help patients get through and manage. This is what I really enjoy about practicing medicine."

## FOCUSING ON THE WHOLE PERSON

That focus on whole-person care is one reason that the greatest emphasis in primary care is prevention of disease. "Our main focus is on reaching patients before they get sick, so we can identify and change lifestyle factors such as diet so diseases never develop," says Dr. Khalili. "We can teach people the tools to stay healthy. For instance, we have a new term, 'diabesity,' that refers to the combination of diabetes and obesity, which is on the rise. We work with our at-risk patients to understand diabesity and make lifestyle changes to avoid it and maintain optimal health. We also focus a lot on prevention. I really enjoy working together with my patients to help them learn the tools to stay healthy and live longer with a good quality of life."

Dr. Williams agrees. "As primary care doctors, of course we treat a whole variety of illnesses, but we try to focus a lot on prevention and health rather than just disease. I like to point out to my patients that it's a lot easier to stay healthy than it is to reverse the damages caused by an illness! Using their personal medical history, lifestyle, family history and various screening tests, we can come up with an individualized plan to do just that — keep them healthy."

For the doctors who choose primary care medicine, the rewards are intrinsic. "I love primary care because it's the key to providing comprehensive and cost-effective care," says Dr. Hall. Dr. Williams agrees. "Primary care allows us to practice the most personal kind of medicine," she adds. "I tell people I'm the luckiest person ever, because I love my job. I don't know how many people get to say that."



**Dr. Jeanette Williams and Dr. Lisabeth Hall**  
both practice at the  
**Verneil Clinic in Calistoga.**

913 Washington Street  
Calistoga, CA 94515  
707-942-6233



**Dr. Afsaneh Khalili and Dr. Thomas E. Stiles** both  
practice at the **Railroad Clinic in St. Helena.**

1530 Railroad Avenue  
St. Helena, CA 94574

Dr. Stiles: 707-963-8842  
Dr. Khalili: 707-963-5294



## Health and Events Calendar

### Health & Wellness

**FAMILY BIRTH PLACE  
INTRODUCTION TOURS**  
6 to 7 p.m., at St. Helena  
Hospital. Call 707-967-7536  
for four times and to sign up.

### Childbirth Education Classes

March 6, May 1, July 3, Sept.  
4, Nov. 6, 6:30 to 8:30 p.m. A  
four-week series to prepare the  
expectant mother and her coach  
for labor and birth. Classes are  
taught by registered nurses.  
Free to mothers delivering at St.  
Helena Hospital; \$50 for others.  
Call 707-963-5006 for available  
space and dates.

### INFANT AND CHILD CPR

1200 Main Street, St. Helena  
April 3, May 29, July 31, Oct.  
2, Dec. 4, 6:30 to 8:30 p.m.  
Cardiopulmonary resuscitation  
techniques for infants and children.  
Parents, grandparents and child-  
care providers will benefit from  
this non-credentialing course. \$15

per person. Call 707-963-5006  
for available space and dates.

**Support Groups**  
**ALCOHOL AND CHEMICAL  
RECOVERY FAMILY  
PROGRAM AND  
VISITING HOURS**  
Saturdays and Sundays  
St. Helena Recovery Center  
at St. Helena Hospital  
Call 800-454-4673.

**WOMEN'S CANCER  
SUPPORT GROUP**  
Tuesdays, 5 to 6:30 p.m.  
Martin-O'Neil Cancer Center.  
For more information, call  
707-967-5721.

**CIRCLE FOR CAREGIVERS**  
Mondays, 11 a.m. to noon  
Martin-O'Neil Cancer Center.  
For caregivers of cancer patients.  
For more information, call  
707-967-5721.

**MINDFULNESS MEDITATION  
AND GUIDED IMAGERY**  
Tuesdays, 2 to 3 p.m.  
Open to cancer patients

or caregivers. Martin-O'Neil  
Cancer Center. For more  
information, call 707-967-5721.

**HEALING BREATH AND  
RESTORATIVE MOVEMENT**  
Tuesdays, 11 a.m. to noon  
Open to cancer patients or  
caregivers. Martin-O'Neil  
Cancer Center. For more  
information, call 707-967-5721.

**MUSIC THERAPY**  
Every other Wednesday, 10:30 a.m.  
to noon Martin-O'Neil Cancer  
Center. For more information,  
call 707-967-5721.

**PAWS FOR HEALING**  
Wednesdays, 11 a.m. to noon  
Martin-O'Neil Cancer Center.  
For more information, call  
707-967-5721.

For information about more  
support groups, please visit our  
website: [www.sthelenahospitals.org/services-and-programs/cancer-support-services](http://www.sthelenahospitals.org/services-and-programs/cancer-support-services) or call  
707-967-5791.

### HEALTH INFORMATION AT YOUR FINGERTIPS

Search for specific treatments  
offered here at the hospital—  
whether you're expecting a  
baby or in need of emergency  
services. For your convenience,  
search for conditions and  
treatments on our website at  
[www.sthelenahospitals.org](http://www.sthelenahospitals.org).  
In addition, please check out our  
Health Library, which will provide  
you with information and a guide to  
Living Younger Longer.™

### FREE HEALTH SCREENINGS FOR SENIORS

Supported by a grant from  
Auction Napa Valley.  
Jan. 10, 10 a.m. to noon at  
Rianda House, 1475 Main  
Street.  
Jan. 16, 9 to 11 a.m. at  
Calistoga Community Center,  
1307 Washington Street.





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[www.sthelenahospitals.org](http://www.sthelenahospitals.org)



IF YOU ARE INTERESTED IN A CAREER AT ST. HELENA HOSPITAL,  
PLEASE VISIT [WWW.STHELENAHOSPITALS.ORG/CAREERS](http://WWW.STHELENAHOSPITALS.ORG/CAREERS).

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Our TakeTEN® live-in lifestyle program can playfully encourage you to achieve your personal health goals. Struggle with diabetes, heart disease, cancer, weight management or other metabolic conditions such as high blood pressure or high cholesterol? Spending ten days with us will be a life-changing experience.

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\*Medical services, laboratory and diagnostic tests may be covered by your individual plan.