health+care

A PUBLICATION FROM MERCY REGIONAL MEDICAL CENTER









At this year's 23rd annual event, over 280 survivors, family members, friends and supporters came out to run, walk and show their support during the Journey of Hope 5K Run/Walk. Held during National Breast Cancer

Awareness Month the event benefits Mercy Health Foundation's Journey of Hope Fund, which provides free mammograms to residents of Southwest Colorado who cannot afford them. For more information on the Journey of Hope Fund: Please contact Mercy Health Foundation at **970-764-2800**.





On the Cover:

Mercy Hospice House saw its first patients on October 3, 2017.

Read more on page 8.

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John Peel is a contributing writer for Health+Care.

A warm welcome

MERCY WELCOMES GENERAL SURGEON, CARDIOLOGIST, AND A FAMILY NURSE PRACTITIONER

ercy recently welcomed three new providers to the Mercy Family. Please join us in welcoming them as they provide care to the communities we serve.

In August, general surgeon Brigid O'Holleran, M.D., joined Mercy Surgical Associates which serves the urgent and often emergent needs of patients and provides essential local access to surgical procedures.

Dr. O'Holleran earned her medical degree from the University of Nebraska School of Medicine at Omaha, and completed her residency in general surgery at the University of Utah at Salt Lake City. Dr. O'Holleran says she enjoys the variety that general surgery offers.

Mercy welcomed fellowship trained, board-certified general cardiologist Robert Palusinski, M.D., to Mercy Cardiology Associates in September.

Dr. Palusinksi specializes in preventative cardiology for patients with cardiovascular disease or those who have a high risk of developing it - helping these patients make lifestyle changes and determine the best medical treatment plan to reduce symptoms. Dr. Palusinski also specializes in the treatment of high cholesterol, coronary artery disease and heart failure.

Dr. Palusinski is board-certified in internal medicine, echocardiography (a painless test that uses sound waves

to create moving pictures of your heart), nuclear cardiology (noninvasive techniques to assess myocardial blood flow, evaluate the pumping function of the heart, as well as visualize the size and location of a heart attack), and cardiovascular medicine.

He attended the University School of Medicine at Lublin, Poland, where he earned both his medical and Ph.D. degrees and completed his internal medicine residency. Dr. Palusinski completed his internal medicine residency in the U.S. at Saint Vincent Hospital in Worchester, Mass., and completed his cardiovascular fellowship at the John H. Stroger Hospital of Cook County in Chicago.

Mercy also welcomed board-certified family nurse practitioner Kelsey Lyons, RN, FNP-C, to Mercy Family Medicine. Kelsey provides care to patients of all ages at Mercy Family Medicine's Mercy Medical Plaza location. She received her Master of Science in Nursing in the Family Nurse Practitioner Program at Simmons College in Boston. Prior to joining Mercy Family Medicine, Kelsey worked for eight years as a nurse on Mercy's medical/surgical unit.

"I was born at the old Mercy, was raised here, and look forward to being able to give back to my community as a provider," Kelsey said.







Contact us

Mercy Surgical Associates Mercy Cardiology

1 Mercado St., Suite 220 Durango, Co 81301 Phone: 970-764-3450

Associates

1010 Three Springs Blvd., in Durango and Bayfield Suite 130

Durango, Co 81301 Phone: 970-764-2600

Mercy Family Medicine

Three convenient locations Phone: 970-385-9850



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CHIEF EXECUTIVE OFFICER'S LETTER

hile I've been at Mercy for the last seven years, I've served as Mercy's CEO only since last March. It has been a truly humbling and inspiring time as I have come to more fully understand the organization and the wonderful people who work here. I have enjoyed the opportunity to meet with staff from almost every department throughout the organization as part of my "listening tour." Over the first 180 days as the CEO, I heard concerns, questions, ideas and suggestions from many of our employees and providers. In those meetings, I also had the opportunity to thank staff and providers for the excellent work they do.

In this season of giving thanks, I am reminded of the many things that we have to be grateful for. Looking back on Mercy's last fiscal year, which ended June 30th, I've highlighted a few of the things for which I am grateful:

- The outstanding people that have chosen to work at Mercy and serve our community.
- Mercy's exceptional care, which was recognized by multiple outside organizations including the following, among others:
 - o The Centers for Medicare and Medicaid Services rated Mercy with five stars for overall hospital quality (Mercy was the only hospital in Colorado and in the Four Corners region to receive the highest rating);
 - Becker's Hospital Review named Mercy one of the nation's "100 Great Community Hospitals" for the second year in a row;

- o The Leapfrog Group gave Mercy its 10th-consecutive 'A' grade for patient safety.
- Mercy's successful implementation of an entirely new, top-tier medical record system. The implementation was an enormous undertaking for all of our providers and staff, requiring months of planning, training, and extra work.
- With the help of generous donors and Mercy Health Foundation, Mercy's Breast Care Center upgraded its diagnostic capability with a state-ofthe-art 3-D mammography machine.
- Thanks to many generous donors, Mercy Health Foundation's Hospice of Mercy Experience (HOME) campaign was fully funded and construction began on Mercy Hospice House. The new hospice residence is now complete and saw its first patients last month.

I am honored to work for such an outstanding organization. It's not only Mercy's employees and providers who deserve the credit for these successes, but also the generous people and organizations that donated to Mercy Health Foundation, and the thousands of patients who chose Mercy for their care. Thank you all.

(All manage

Sincerely,

By the Numbers

With more than 1,300 dedicated employees and health care professionals working to provide care, the following statistics show how many individuals turned to Mercy Regional Medical Center for care in fiscal year 2017 (July 1, 2016, to June 30, 2017).



109,732

Outpatient visits



19,837

Emergency department visits



5,081

Hospital admissions



4,553

Outpatient surgical cases



1,422

Inpatient surgical cases



949

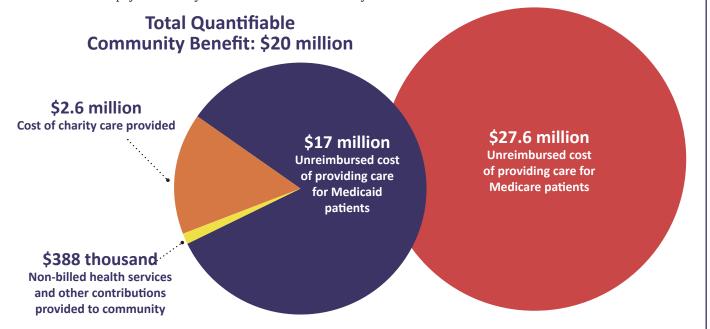
Babies delivered

Community Involvement and Giving

(For the 12-month period ending June 30, 2017)

Caring for the community has been an integral part of Mercy Regional Medical Center since it was founded in 1882. Mercy is not reimbursed for a significant portion of the cost incurred in providing care. In fiscal year 2017, Mercy Regional Medical Center provided community benefits at a total value of more than \$20 million. Much of this involved providing care to patients with no insurance or to patients with insurance that did not fully reimburse Mercy's costs.

Mercy also provided care for thousands of patients covered by Medicare. The total cost to Mercy of providing that care far exceeded the payment Mercy received from the Medicare system.





After years of working in Native-American health, she had some trepidation about the transition to Mercy – would she be as effective with non-Native patients?

"It didn't take long to realize, people are people," she said. "I think my experience helps. I've had to adapt to many situations."

She grew up in a ranch and rodeo environment, yet her mother was an accountant – two very different influences. After that rural beginning, she's since lived in the Los Angeles area, where she attended Pomona College for an undergraduate education; Albuquerque, where she attended medical school; Northern California, for her residency; back to the Navajo Reservation, where she was chief of family medicine at the Fort Defiance Indian Hospital for several years; and now Durango. And that's an incomplete list.

She went to Pomona thinking she'd be a veterinarian, but redirected her focus toward human medicine. After getting a master's in community health at the University of Arizona in Tucson, she began medical school. A residency took her back to California, and after achieving her license she practiced for several years at an Indian Health Services clinic in Chico, California.

When she visited family in Fort Defiance and gave a public talk, she was bombarded with offers to return and work. By then she was married, with children. She and her husband,

John Reece, decided to make the exciting transition back to her hometown. Dr. Reece was honored to serve her hometown community, and worked hard to live up to expectations – the community's and her own.

Julianna and John dove into community-based activities. They started small recycling and gardening projects, coached soccer, tee-ball and high school sports, and started a mountain biking group. Both are CrossFit trainers, and in Fort Defiance they started a "functional fitness" gym that focuses on high-intensity workouts. The Reeces are thrilled that the gym continues to operate, and are proud of their contributions in improving the community's health and fitness.

After nearly seven years in Fort Defiance, they moved to Southwest Colorado, with an eye on meeting the educational needs of their children. Dr. Reece took a position at the Southern Ute Health Center in Ignacio in 2014, then in 2017 transitioned to Mercy Family Medicine.

Dr. Reece is passionate about tending to underserved populations, regardless of ethnicity or culture. Her background can be an asset.

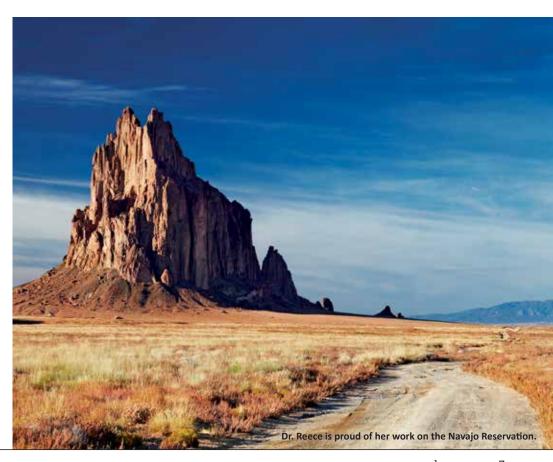
"I have a different perspective and a different understanding of health and human challenges across the board," she says. "I think that's really valuable as far as my communication style and approach to health issues as a whole."

Another passion is integrating behavioral health into medical care. For example, back pain can lead to depression, which may go untreated if a doctor is focused only on the back pain. Mental health experts are useful as part of a team approach.

She co-authored a book released this year titled "Integrated Care: A Guide for Effective Implementation." It is edited by psychiatrist Dr. Lori Raney, former medical director for Axis Health System in Durango.

"Fragmented care leads to bad outcomes and poor care," Dr. Reece says. "So being able to close those health-care gaps and have a more team-based focus is important."

For more info: Mercy Family Medicine, **970-385-9850**.





Hospice: The earlier the better

f you think that hospice care is simply about administering morphine in the final hours of life, then it's time for you to graduate to the modern world of care for the dying.

"Most of the beautiful work we do as a hospice team is done well before their death," says Dr. Lauren Loftis, medical director of Hospice of Mercy.

This team is gratified and honored to be working in a new, state-of-the-art hospice residence that opened in October on the Mercy Regional Medical Center campus. In the eight-bed hospice residence, called Mercy Hospice House, the team can provide a level of around-the-clock care previously unavailable in the region.

For the team of doctors, nurses, therapists, chaplains and others, the focus of hospice hasn't changed. The goal is to keep patients active and enjoying their favorite activities as long as possible.

"We don't spend a lot of time talking about dying," says Dr. Anne Rossignol, Mercy's director of palliative care. "We really help patients focus on living, and giving them quality of life, to take their focus away from their medical problems."

HOSPICE CARE BASICS

Hospice is generally defined as care for those who have been diagnosed with medical conditions that will be terminal within six months. Such patients are no longer receiving curative treatment, but simply managing symptoms to provide a better remaining quality of life. The latter is called palliative treatment.

The residence is available for hospice patients at three defined "levels" of care, based on Medicare guidelines:

- Routine. For patients who will be living at the residence until they pass. "If people aren't able to care for loved ones in their own home environment, we'd like them to come to our home," says Tina Gallegos, director of Hospice of Mercy, Mercy Home Health, and Mercy Palliative Care.
- Respite. To give family caregivers a break, so they can refresh and take care of themselves, respite care is available five days per month.
- General inpatient. For those having severe symptoms, pain, or an acute episode of a disease that can't be managed at home. This stay could be for one or just a few days to get symptoms managed, and get medications balanced.

Gallegos calls the new residence a gift from the community. "It's like



the nicest home you've ever been in." She invites anyone to come and tour the facility.

For Mercy Health Foundation, which raised money through numerous fund drives over several years, the residence is "our dream and our vision really coming true," says Chief Development Officer Karen Midkiff. "We kept that vision alive for this community, and they came through."

'SPIRIT CAN STILL SOAR'

Mercy has offered hospice care for decades, and has established a stellar reputation. Hospice Chaplain Dan Straw unabashedly calls it "the finest team I've worked with. And I've been around a bit."

Straw has heard from many families who wish they'd gotten on hospice sooner. A team-based approach offers care not just for the patient's physical needs, but for social and spiritual needs, and needs of family members. Straw says that although the body may be in decline, "the spirit can still soar. ... We help people to be alive spiritually."

Hospice chaplains honor all religions, and those with no religion. The goal is to listen, to be non-judgmental, to get people to a place where they can celebrate their lives while facing the reality that they're about to be separated from loved ones.

"It's very powerful, wonderful work," Straw says. "Some days it's difficult, but it's very rewarding. It's been a privilege for me."

One of Straw's patients was Betty Jung, who died in July 2016. Betty's daughter, Marcie Jung, became her caretaker in 2012 when Betty moved to Durango.

Marcie Jung lauded the hospice team, from the case manager to the chaplains to the nursing assistants who bathed and did other tasks for Betty.

The help continued after Betty's death with the support of the hospice's grief group.

"I would really recommend that for everyone," Marcie said. "Grieving is such a strong emotion and comes in so many packages."

"The experience was so rich," Marcie said. In all, Betty spent a total of 15 months under hospice care.

From a medical perspective, Drs. Rossignol and Loftis both say the sooner the patient turns to hospice, the more the doctors and nurses can do to alleviate symptoms, pain and nausea. If it's important to be there for your grandson's fourth birthday, says Loftis, "Let's get you to the party."

For more information, call **970-764-1700**.





CEO Will McConnell and family cut the ribbon at the Mercy Hospice House opening.

Staff and volunteers at Mercy Hospice House, the region's first and only hospice residence, were pleased to start accepting hospice patients on October 3, after 18 months of construction.

The official opening was preceded by a series of events for staff, donors, and the public. The first event was a blessing ceremony held on Wednesday, September 27th, for staff and volunteers who will work at the facility.

That event was followed the next day by two "sneak peek" open houses for Mercy employees, and then on Friday evening, Mercy Health Foundation, which raised all the money for construction of the new facility, held a very well attended donor appreciation event. Mercy CEO Will McConnell, his wife Jennifer, and their three children had the honor of cutting the ribbon before attendees were invited to tour Mercy Hospice House. Finally, a public open house was held the following day, when Mercy Hospice House saw a steady stream of visitors despite the rainy weather.

Mercy hospice staff and volunteers were on hand at the events to give tours and answer questions about the 11,000-square-foot building and the services offered there.

Since opening, staff at Mercy Hospice House have cared for a number of hospice patients and their families. The building was designed with features including a community kitchen and dining area, a large shared living room, private patios adjacent to each of the eight patient rooms, an art collection, and other amenities that help Mercy Hospice House to feel more like home.

Screening Screen Time

HOW MUCH IS TOO MUCH FOR YOUR KIDS?

utting limits on children is one of parents' toughest jobs. You know that too much "screen time" is bad, but how much is too much? When is the proper time to say, "Close that laptop!"

"Electronic devices have become a mainstay of our lives," said Dr. Patrick Kearney of Mercy Family Medicine. "Sometimes they control things more than we would like."

Here are a few guidelines on children and digital devices, and a few tips on unhooking them.

UNDER AGE 7

Some kids start learning to use smart phones, iPads and such at shockingly young ages. The devices are attractive, things move, you can hear grandma on the other end. Even 2-year-olds can start getting very interested.

For kids under 6 or 7, it's best to limit screen time to one hour or less a day, according to the American Academy of Pediatrics. And this usage should be high quality, with an educational component, Dr. Kearney said. Parents should be around to discuss what's being

viewed and help kids absorb the information.

Kearney mentioned two apps he lets his young grandkids use: "Super WHY! The Power to Read," from a PBS Kids series, and Starfall ABCs (there are several educational Starfall apps on reading, math, and more).

AGE 7 AND OVER

Parents should set limits on usage, and be consistent. If a child is using a computer for homework, that's fine. But parents should supervise, and be aware of their child's usage.

"With children," Dr. Kearney said, "the important thing to do is set the rules early, stick with them, and lead by example."

Lisa Isenberg, certified pediatric nurse practitioner with Mercy Family Medicine, said she advises parents that a focus on screens and social media can potentially stunt a child's development of social skills and ability to interact emotionally.

"[Kids looking at a screen] don't see facial expressions or hand gestures," Isenberg said. "They



don't see if kids are angry or if they hurt their feelings." Physically interacting with other kids is important to social development, she said.

DIGITAL-FREE TIMES, PLACES

"I think it's also important to have digital-free times, ideally during meals, so they can actually have face-to-face conversations," Dr. Kearney said. It doesn't take long for everyone at a table to begin playing with a device and ignoring those around them.

Also, consider designating digitalfree places, such as the bedroom. How easy is it for a kid to lie in bed for hours playing games on their phone – and lose sleep? Speaking of sleep, Dr. Kearney suggested shutting down screens 30 minutes before bedtime. That gives kids time to wind down, and perhaps read a book.

'ELECTRONIC BABYSITTERS'

When you're waiting for food at a restaurant, or on a road trip, it's easy to hand your kid a smartphone or tablet to keep them occupied.

"Figure out other ways that involve interaction with them," Dr. Kearney recommends.

Play tic-tac-toe on a kids menu. Play "travel bingo," where you look for an object starting with each letter of the alphabet. The Kearney family had a "20 Questions" game, in which an adult would come up with a mystery, and the kids would get 20 yes-or-no questions to solve it.

And perhaps, hardest of all, be that role model. If you use your phone while driving, eating, or watching TV, guess what?

"Kids are going to do what you do," Isenberg said.

ON THE WEB:

American Academy of Pediatrics recommendations for children's use of media: http://bit.ly/2eUUttI

Avoiding Arthritis IT STARTS IN HIGH SCHOOL

rthritis is traditionally something that hobbles you in old age. But it's never too early to think about warding off the long-term effects of athletic pursuits. Mercy's orthopedic team is already considering arthritis when working with high school athletes.

"I'm not thinking about it because they have it," said Dr. Matthew Smith, a recent addition to Mercy Orthopedic Associates. "I'm thinking about it because I want to prevent it."

As he views it, the best treatment begins before the injury.

Smith is part of the Mercy team that works on the sidelines and in the exam room with the region's high school and college athletes. After spending a year working with Denver Broncos and Colorado Rockies as part of a fellowship with the Steadman Hawkins Clinic-Denver, he brings his expertise in arthroscopy and arthroplasty (replacement) of the hip, knee, and shoulder joints to Southwest Colorado.

Arthritis is the wearing away of the articular cartilage, the smooth, gliding cartilage that caps the ends of joints. It often happens after an injury alters the normal mechanics of a joint. When cartilage wears away, the resulting bone-on-bone rubbing can be painful. Want to see actual cartilage? Smith pointed out, "It's the shiny stuff you see at the ends of chicken bones."

Here is a brief look at a few common injuries that can lead to arthritis, and possible remedies, courtesy of Dr. Smith.





KNEE

Anterior cruciate ligament (ACL) and meniscus tears are perhaps the most common knee injuries that can lead to arthritis.

An ACL tear is often a "global" injury to the knee, meaning that it includes damage to the cartilage and meniscus. In this case "the die may be cast" when you walk (or limp) into the office, Smith said. Tears of the meniscus, a rubbery padding that keeps the knee centered, can lead to greater wear on the cartilage and, thus, arthritis.

Replacing the meniscus is a possibility in some cases. For those with major arthritis pain, joint replacement is a final solution. But Dr. Smith is big on treatment by prevention, starting with prescreening.

For athletes from soccer and football players to runners, prescreening considers biology, family history, and motion analysis of the knee and hip in space. From there, sport-specific and athlete-specific exercises can be designed. Exercises focus somewhat on the muscles around the knee, but a common misconception is to stop there, Smith said. He emphasized that core and hip musculature is vital to holding the knee in space, whether you're playing soccer or hiking downhill. Yes, doing those crunches can help prevent knee injuries.

HIP

Tears of the hip labrum (a ring of cartilage rimming the hip socket) can lead to joint cartilage damage and arthritis. A healthy labrum holds the hip ball securely in the socket.

Dr. Smith brings expertise in surgical repair of labral tears. He believes that such surgery can help prevent arthritis, but notes that it has not yet been proven by research. He doesn't perform labral surgery to prevent arthritis, but that could prove to be an added benefit.

SHOULDER

Rotator cuff tears, particularly large tears, can lead to arthritis. When a large tear occurs, it alters the mechanics of the shoulder, and big muscles such as the deltoid take over the job of keeping the shoulder in its socket. But the deltoid is so strong it pulls the shoulder ball up, where it rubs the cartilage away in a particular spot.

While small rotator cuff tears can often improve with physical therapy, large tears often require surgery if you want to stave off arthritis and further pain.

MERCY SPORTS MEDICINE CLINIC

The clinic is available to those needing advice and wanting to get back to action as quickly as possible. Call **970-764-9200** to schedule an appointment or for more information.

CALLING ALL ATHLETES

Whether you compete professionally or just like to exercise occasionally to stay fit, you'll be at home at the new Mercy Sports Medicine facility in Durango. The 7,000-squarefoot space, conveniently located in Durango's Centennial Center (a few doors down from Office Depot) offers a variety of services from physical therapists, athletic trainers, strength and conditioning coaches, a massage therapist, and others who interact with athletes of all ages and abilities. The facility's stateof-the-art technology includes an "anti-gravity" treadmill that allows those with lower-body injuries to walk or run while bearing a fraction of their body weight. In addition to acute rehabilitation for injured athletes, individual and group programs are available to promote wellness, reduce injuries, and optimize sports performance are also offered. Mercy's sports performance testing, performance enhancement, sports nutrition consulting and concussion-related services are also offered at the facility. For a complete list of services available at Mercy Sports Medicine, visit mercydurango.org/ sportsmedicine



What's the deal with Coffee?

offee is said to be this country's second-most-consumed beverage, behind only water. Judging by the number of local coffee shops, perhaps that's no surprise. With all this coffee being sipped and guzzled, it's important to know the health benefits and detriments.

THE GOOD

Coffee contains the stimulant caffeine (duh!), somewhere around 145 milligrams for a standard 8-ounce cup. Caffeine acts quickly, and it wakes you up, or keeps you awake, and if that's what you need, then you've made a decent choice.

Also, coffee, especially when brewed, is rich in antioxidants, which act to decrease inflammation in the body.

If you need that caffeine rush, pick coffee over Mountain Dew or Red Bull every time, advised Joanna Kriehn, registered dietician and diabetes educator with Mercy's Diabetes Education and Nutrition Therapy. Coffee doesn't have the sugar, the additives, or the artificial

sweeteners found commonly in soda and energy drinks.

Unless ...

THE BAD

... you're going to Starbucks or elsewhere and getting those fancy lattes. In that case, you've just added a bunch of sugar, fat and calories, Kriehn said.

Starbucks' 16-ounce Vanilla Latte grande, which includes 2 percent milk, has 250 calories, 6 grams of fat, and 35 grams of sugar. (Which still might be better than a 12-ounce can of Mountain Dew and its 46 grams of sugar.) A standard cup of coffee has no fat or sugar and a negligible amount of calories – unless you add sugar or milk/cream.

Kriehn emphasized the point that coffee affects individuals differently. Those with anxiety or sleep issues would be advised not to drink coffee, or at least to understand how much they can handle before encountering problems. Do a self-study on coffee's effects by keeping notes or a journal to see cause-and-effect.

THE UNKNOWN

The research is mixed, and that makes it confusing for patients, said Clayton Labaume, a physician's assistant who is a bone health expert at Mercy Orthopedic Associates. High levels of caffeine intake can affect the absorption of calcium, which is excreted in urine. That could lead to bone loss and osteoporosis, particularly in post-menopausal women, he said.

A good goal is to keep your caffeine intake under 300 milligrams per day, around two cups of coffee or three cups of tea, Labaume said.

On the potential upside, some research shows that coffee can increase the rate of glucose metabolism and raise insulin secretion, thus reducing the risk of diabetes, Kriehn said.

In conclusion, there are no guarantees when it comes to the risks and benefits of coffee and caffeine.

The key word Labaume and Kriehn both used: "moderation."

PREGNANCY NUTRITION CLASS



Calling all mothers-to-be! Good nutrition is essential for growth and development of babies in the womb. Eating during pregnancy affects fetal growth; organ development and functioning; resistance to infection and disease; and the ability to repair bodily damage or injury. Women who are pregnant or plan to become pregnant are invited to join Mercy's registered dietitians to learn how to manage a healthy diet before and during pregnancy. The class, "Eating for Two: Healthy Nutrition for Moms-To-Be," will be offered Wednesday, November 29, and again on Wednesday, December 20, from 4:00 to 5:00 p.m. at Mercy. Space is limited. Please call **970-764-3415** to register.

EARN YOUR TURKEY AT THE ANNUAL TURKEY TROT

One of Durango's most popular running races for over 25 years, the Turkey Trot, sponsored by Mercy Sports Medicine, is a holiday tradition for the whole family. Come join us for a healthy activity before your big meal! The Turkey Trot features

a five-mile race beginning at 10:00 a.m. and a one-mile fun run for the kids beginning at 11:00 a.m. All of the proceeds go to great local charities. To register, visit **durangorunningclub. org/events/turkey-trot/**

PRE-DIABETES CLASS

Have you been diagnosed with prediabetes? Do you know you are at a higher risk of developing type 2 diabetes and cardiovascular disease? However, effectively managing prediabetes can help prevent diabetes. In fact, studies have shown that the risk of developing type 2 diabetes can be significantly reduced through weight loss and exercise, which is shown to be more effective in managing prediabetes than medication alone.

Anyone identified as having prediabetes is invited to attend a FREE class with Sheena Carswell, CNS, BC-ADM, and Marge Morris, RD, CDE, offered on the first Friday of every month from 9:00 to 11:00 a.m. in suite 140 of Mercy's Medical Office Building. Attendees will learn how to manage prediabetes and help prevent the onset of type 2 diabetes. To register, call Cristina Briceno at **970-764-3415**.

BALANCE CLASS —

As you age, you naturally lose muscle strength and balance. If you feel this could be happening to you join Mercy Integrated Physical Therapy for "Six Weeks to Better Balance and a Strong Self." The class is designed for anyone who wants to improve their balance, and is geared toward those who are starting to decondition as a result of aging. The program involves one hour of circuit training twice a week. To register or learn more about the program, call **970-385-0644**.



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The latest skinny on fats



Beginning more than a half-century ago, fats got a bad reputation in the medical world. The thinking: Ingesting fats led to high levels of cholesterol, which led to an increased risk of heart attacks.

More recent research, however, shows little link between fat intake and cardiovascular disease mortality. Instead, higher carbohydrate intake was linked to higher mortality rates.

Fats aren't exactly off the hook, and like all studies, this one is hotly debated.

But perhaps a keener focus should be on carbohydrates.

"For me, putting all the pieces together, it seems logical that a highcarb diet puts people at greater risk," said Dr. Sarah Goodpastor, with Mercy Internal Medicine.

A large, recent study published in *The Lancet*, a renowned, peer-reviewed medical journal, offered somewhat surprising results. In the study of 135,000 people in 18 countries, those eating high-carb diets had a nearly 30 percent higher death rate than those eating low-carb diets. Meanwhile, those eating

high-fat diets had a 23 percent lower death rate during the study period.

The study will challenge those setting nutritional guidelines, said Goodpastor, who is a doctor of both internal medicine and obesity medicine. And if fats actually lower death rates, as the study in *The Lancet* indicated, people are bound to ask, "So what fats do you want me to eat?"

'GOOD' FATS

One answer to that question is to focus on a Mediterranean diet, one that is high in

unsaturated fats. Although eating saturated fats (animal fats, butter, whole milk) may be OK in moderation, unsaturated fats (olive oil, cashews and other nuts, many types of fish) are healthier.

A good rule, Dr. Goodpastor said, is to eat foods that are minimally processed or not processed at all. That applies to both fats and carbs. For fats, that means to stay away from processed meats, hydrogenated oils, and trans fats (scheduled to be banned in the U.S. next year – sorry, Twinkie lovers). For carbs, that means to ease off the boxed and bagged foods that Americans typically dive into for snacks and meals.

The truth is that as far as medical researchers and professionals have come in their understanding of cardiovascular disease in the last half-century, no one has all the definitive answers.

The recent *Lancet*-published study is "so large it's hard to ignore," but its results will certainly be bandied about, discussed and debated for years to come, Dr. Goodpastor said.

"We should be doing our best to eat as many quality fruits and vegetables as possible," she said. "It's not the fruits and vegetables that are going to get you in trouble. It's all of the processed stuff."

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To schedule an appointment at Mercy Internal Medicine, call **970-764-9300**.