Well in the Workplace
Avoid These Health Hazards at Work

Expired Meds:
When and How to Toss Them

Kids, Soccer and Safety

Could you have fibroids?
see page 12
Safety First
Your efforts to stay healthy shouldn’t stop when you head out the door for work. Watch out for these health hazards in the workplace.
by Keith Page, Anderson Hospital president and CEO

On April 21, 1974, when ground was broken for the construction of Anderson Hospital, few could have imagined what the hospital would look like on its 40th anniversary. Once the hospital’s finances allowed services and facilities to begin growing, the growth never stopped!

OUR ANDERSON FAMILY

Looking at the array of services, satellite facilities and affiliated organizations serving communities throughout Madison and Macoupin counties today, it is clear that Anderson’s Board of Trustees, medical staff, hospital staff and volunteers have been excellent stewards of this important community resource. The hospital is fortunate that several of the individuals who served during its earliest years continue to be involved today.

Although the hospital has grown from 367 employees to more than 1,400 team members throughout all the affiliated organizations, I still see a strong connection among our staff. This makes a great difference in the care we provide to our patients because it facilitates teamwork, emphasizes collaboration and promotes an environment focused on the quality of care of our patients. I am proud to say that I have been part of this hospital team for the past 21 years and look forward to our next milestone in serving the health care needs of our community.

READY FOR THE FUTURE

This will be another busy year for Anderson. The Pavilion for Women, opened 24 years ago, will receive a first-floor refresh. The hospital will also continue to update its public areas and corridors. The emergency waiting area is undergoing updates to provide warm, durable yet comfortable furnishings and finishes for the 38,000 patients who visit each year. Radiology will install a new PET/CT unit to support oncology services and the Breast Imaging Center will upgrade mammography equipment to 3-D technology. Meanwhile, Anderson Mercy Cancer Care is completing installation of the latest radiation technology in cancer treatment, a linear accelerator, in the Warren Billhartz Cancer Center. Community Hospital of Staunton will remodel six patient rooms, and a physician practice owned by the hospital will be converted to a rural health clinic.

So, as we look back on our 40th anniversary, we are working to make the next 40 years just as successful. The future is sure to bring many changes to health care, but with the exceptional team and organization in place at Anderson Hospital, we are ready to face the challenges ahead.
WHAT IS RADIATION ONCOLOGY?
Radiation oncology uses X-rays, gamma rays and charged particles to fight cancer. Like surgery, radiation oncology can be used in several ways depending on the type and location of the cancer. Certain levels of radiation work to kill cancer cells or prevent cells from growing or reproducing. This treatment may provide a cure for cancer, help control the disease or help relieve its symptoms.

Most radiation treatments are delivered from a machine outside the body and won’t make patients radioactive. Less often, a source of radiation may be put into the body for a short time.

TYPES OF RADIATION TREATMENTS
Radiation oncology is given through different methods, depending on the type of cancer, the location of the cancer and the patient’s health. Sometimes radiation oncology is used with other treatments. Different types of radiation oncology include:

- External radiation (external beam therapy). The treatment is given with a large machine that points the radiation beams directly at the tumor. The beams are often aimed at the tumor from many different angles. A radiation therapist controls the machine. Since radiation can also affect nearby normal cells, special
shields may be made to protect the tissue surrounding the treatment area. Often, more than one treatment is given. Radiation treatments are painless and usually last a few minutes.

- **Internal radiation (brachytherapy, implant radiation, systemic radiation).** A high dose of radiation is given inside the body. This is typically done as close to the cancer as possible. The radiation source may be swallowed, injected, implanted directly into the tumor or put next to the tumor through a body opening (such as the rectum). Some of the radioactive implants are called seeds or capsules. Internal radiation typically involves getting a higher dose of radiation over a shorter time when compared with external radiation. Some sources of internal radiation stay in the body for a short time (temporarily). Others stay in the body forever (permanently), but they lose their radiation energy over time.

In some cases, both internal and external radiation therapies are used.

**CRITICAL CANCER TREATMENT, CLOSE TO HOME**

“We know there are few experiences in life as significant as fighting cancer,” says Wendy McIntyre, Warren Billhartz Cancer Center director. “Our patients can feel confident knowing they are working with quality physicians and nurses dedicated to providing healing care in a comfortable and convenient location.”

Radiation oncologist Jaymeson Stroud, M.D., is part of the Anderson Mercy Cancer Care team. Dr. Stroud trained at Washington University and has been with West County Radiology for eight years. He will oversee the radiation oncology services provided to patients at the Warren Billhartz Cancer Center on Anderson Hospital’s campus.

“We have all-new equipment and state-of-the-art technology that will ensure our patients are treated with the most current therapy on this side of the river,” says Dr. Stroud.

Dr. Stroud is board certified in radiation oncology. He works with patients with all types of cancer, with an emphasis on breast cancer.

Dr. Stroud’s office is located within the Warren Billhartz Cancer Center, and is accessed via 6836 State Route 162 in Maryville. You can reach Dr. Stroud’s office at 618-288-1140.
Although apprehensive about going to the doctor after discovering a lump, she was referred to Dr. Hania Bednarski, a board-certified general surgeon who is fellowship-trained in breast oncoplastic surgery and associated with Anderson Hospital.

**IN GOOD HANDS**
Neither of us had any idea what to expect. However, from the moment my mother and I walked into the Warren Billhartz Cancer Center to see Dr. Bednarski, we both knew we were in good hands. In fact, that same day, we quickly learned we were in a team of good hands.

My mom was fortunate to be one of the first patients to utilize Anderson Mercy Cancer Care, a joint program of Anderson Hospital and Mercy St. Louis. The wonderful and genuine care we received on day one set the tone for my mom’s treatment and associated tests. The staff who cared for my mother and the services we received during her treatment were exemplary. We were blessed to have the Billhartz Cancer Center in the Metro East community and to be able to receive top-notch attention.

**PUTTING US AT EASE**
The team worked together throughout Mom’s appointments, often accompanying us to the next office we needed to visit within the Cancer Center. One day, we had a great time picking out wigs and hats with members of the staff. To have such genuine care during this difficult time made my mom very at ease and accepting of her condition. She knew she had the best of the best looking after her.

The team of Dr. Syed Arshad and his staff, including Rhonda and Liz, Dr. Bednarski and all of her staff, the chemo treatment team (including Leslie, Susan and Tamla) were all outstanding and quickly became friends during a very frightening time. They explained everything, every step of the way, with bright smiles and hope and some laughter, too.

Unfortunately, the outcome was not what we desired, but that was out of our hands. What is important is that the Anderson Mercy Cancer Care team was on our side and fighting along with us during each visit — so caring, genuine and supportive. I thank them for bringing rays of sunshine into our lives at a difficult time.

---

**Compassionate Cancer Care**

*by Laura Scaturro*

Receiving a breast cancer diagnosis is scary for anyone, but it was especially difficult for my mom, an 82-year-old who didn’t frequent doctors much throughout her life.

---

**Cancer Care You Can Count On**

To learn more about Anderson’s cancer care, call the Warren Billhartz Cancer Center at 618-288-9044.
Laundry Pods Pose Risks to Kids

Detergent pods are a popular and convenient way to wash laundry. But they can be a danger to children, who may mistake the small, colorful pods for candy.

The detergent in laundry pods is more powerful than regular detergent, so the effects are even more serious when children ingest the detergent or get it in their eyes. To prevent poisoning, store all household products where children can’t get to them. Use locks, safety latches or door-knob covers to keep kids out of places they shouldn’t access.

Seniors Skipping Blood Pressure Drugs

A study by Centers for Disease Control and Prevention (CDC) researchers found that about one-fourth of older adults put their health at risk by skipping doses or stopping prescribed blood pressure medications.

Poor medication adherence takes 125,000 Americans' lives and costs our health care system nearly $300 billion a year. If you take medicine for high blood pressure or any other condition, always follow the prescribing physician’s instructions.

Cancers Linked to Body Fat

A research review published in the New England Journal of Medicine has found that 13 types of cancer can be avoided by maintaining a healthy weight.

The researchers looked at more than 1,000 previous studies exploring the link between different types of cancer and excess body fat. They found that excess body weight is clearly linked to cancers of the brain, breast, digestive system, reproductive organs and other body systems.

Obesity changes your hormones and cells in ways that may contribute to cancer. Reaching a healthy weight can help these systems return to normal.
Should You Co-Sleep with Your Baby?

As many new parents discover, babies are often happiest when they’re snuggled up against their mom or dad. In an attempt to keep your little one happy and catch some much needed shut-eye, it may be tempting to bring your baby into bed with you. This is known as co-sleeping or bed-sharing. Doing so, however, is extremely dangerous. Research shows that it puts your baby at risk for sudden infant death syndrome (SIDS) and other dangers such as suffocation or falling off the bed.

**SAFER WAYS TO SLEEP**

You can still keep your baby close at night without bed-sharing. The safest place for your newborn to be is near you in a bassinet or crib. That way, you can easily check on and feed your baby during the night. If you’re breastfeeding, it’s OK to do so in your bed. Just be sure to transfer your baby back to his or her own crib before you go back to sleep.

In addition, follow these safe sleeping guidelines:

- Put your baby in a crib with only a firm mattress and fitted sheet — keep toys, blankets, pillows and all other bedding out of your baby’s crib.
- Always place your baby on his or her back to sleep.
- Keep your baby’s crib in a smoke-free area.

**BONDING WITH YOUR BABY**

Despite sleeping separately at night, there are still many ways you can soothe and bond with your baby during the day. For example, wearing your baby in a baby carrier helps reduce crying, supports bonding with your baby and aids his or her development.

In addition, skin-to-skin contact, also known as kangaroo care, is another way to keep your baby close while you’re awake. Simply hold your baby wearing only a diaper against your bare chest. Cover your baby’s back with a blanket to keep him or her warm. Skin-to-skin contact can help your baby sleep, regulate his or her heart rate and breathing and reduce crying. It also has benefits for you, such as promoting breast milk production, reducing stress and making you feel more connected with your baby.

**Birth and Beyond**

The Pavilion for Women at Anderson Hospital is more than a place to give birth. Offering educational classes, breastfeeding support and more, it is your family’s support system as you welcome a new little one. Call 618-391-5980 for information.
Is Your Child Getting Enough Sleep?

What your kids do during the night has a huge impact on their daily lives. Sleep plays a key role in mental, physical and emotional health, from infancy through the teen years.

Now, experts at the American Academy of Sleep Medicine have reviewed the research and arrived at a target slumber number for each age group. Guidelines published in the *Journal of Clinical Sleep Medicine* advise the following daily sleep totals:

- 4 to 12 months: 12 to 16 hours
- 1 to 2 years: 11 to 14 hours
- 3 to 5 years: 10 to 13 hours
- 6 to 12 years: 9 to 12 hours
- 13 to 18 years: 8 to 10 hours

**REWARDS OF GOOD REST**
The right amount of sleep helps kids learn well, behave and feel happy. Adequate rest also wards off health problems like high blood pressure, extra weight and heart issues.

Many children — and adults — don’t get enough sleep. But snoozing too much also poses health risks, such as obesity and diabetes. The guidelines can help you steer your child into the healthy range.

**TIPS FOR SUCCESSFUL SLUMBER**
Most kids fight back against bedtime. Help them make friends with the sandman with:

- **MODELING.** Kids learn by watching you. Show them you value sleep and they’ll start to understand its importance.
- **ROUTINE.** Keep the times for sleep, waking, naps and play around the same time every day. And develop soothing nighttime rituals such as reading.
- **NO SCREENS.** Ban phones, TVs and tablets from kids’ bedrooms. Shut them down at least 30 minutes before bedtime.
Soccer Injuries on the Rise: Keep Your Kids Safe

Baseball may be America’s pastime, but soccer seems to be America’s future. More than 3 million U.S. youth ages 18 and younger play on a soccer team. But the rise in soccer’s popularity has also sparked an increase in soccer injuries.

A recent study published in the journal *Pediatrics* looked at soccer-related injuries reported in U.S. emergency departments between 1990 and 2014. The rate of injuries more than doubled during that time period.

**CONCUSSION RISK**

A concussion is a potentially serious brain injury caused by a blow to the head. During the study period, the rate of concussions increased by more than thirteenfold. Concussions accounted for about 7 percent of soccer injuries overall.

*Why the increase?* Players and coaches may be more educated about concussion symptoms, the researchers explain. Aggressive play may also be a factor.

**KEEP YOUNG PLAYERS SAFE**

Injuries can happen in any sport. Take these steps to help your children and teens avoid sports injuries:

- Buy the right equipment for the sport. Make sure it’s in good condition and fits well. Safety equipment for soccer includes shin guards and plastic or rubber cleats.
- Make sure young athletes follow their coaches’ advice for sports safety.
- Teach players the symptoms of a concussion following a bump to the head. These include headache, dizziness and memory problems.

> Physical Therapy Just for Kids

Kids have their own special health needs. That’s why Anderson Hospital’s Pediatric Therapy Services, in cooperation with Cardinal Glennon Children’s Hospital, offers physical therapy just for patients ages 18 and younger. Call 618-288-5436 or visit [www.andersonhospital.org/services.aspx](http://www.andersonhospital.org/services.aspx) to learn more.
How Much Do You Know About Concussions?

1. A concussion is just another way of saying “a bump on the head” and is nothing to worry about.
   a. True  b. False

2. How many high school athletes are thought to suffer a concussion each year?
   a. 50,000  b. 100,000  c. 125,000  d. 150,000

3. As awareness of concussions grows, hospitals around the country are seeing:
   a. Fewer hospital visits for concussions  b. More hospital visits for concussions  c. The same amount of hospital visits for concussions  d. No hospital visits for concussions

4. Girls are less aggressive than boys; therefore, they aren’t at risk for concussions while playing sports.
   a. True  b. False

5. Concussions are common in certain sports, particularly:
   a. Track and field  b. Swimming  c. Volleyball  d. Football

6. Symptoms of a concussion don’t always appear right away. How long can it take for some symptoms to show up?
   a. Days  b. Weeks  c. Months  d. All the above

7. Which of the following is not a symptom of a concussion?
   a. Difficulty thinking or feeling “fuzzy-headed”  b. Headache, nausea, vomiting and sensitivity to light  c. Stiffness in the joints and difficulty walking  d. Anxiety, irritability and trouble sleeping

8. Most of the time, a person who suffers a concussion will not lose consciousness.
   a. True  b. False

9. What should you do if you suspect someone has a concussion?
   a. Shake the person until they snap out of it  b. Have the person lie down and take a nap  c. Contact a health care professional  d. All the above

ANSWERS
1—B. FALSE. A concussion is a head injury, and all head injuries should be treated seriously.
2—B. 100,000.
3—B. MORE HOSPITAL VISITS FOR CONCUSSIONS. As athletes, coaches and parents become more aware of the dangers of concussions, they’re more likely to report these injuries.
4—B. FALSE. In sports like soccer, where boys and girls play by the same rules, girls are actually more likely to suffer concussions than boys.
5—D. FOOTBALL. Other sports, such as rugby and hockey, also have high incidences of concussions.
6—D. ALL THE ABOVE. Concussion symptoms can be easy to miss and are often overlooked. They may also take a long time to appear.
7—C. STIFFNESS IN THE JOINTS AND DIFFICULTY WALKING.
8—A. TRUE.
9—C. CONTACT A HEALTH CARE PROFESSIONAL.

For more information, visit the Centers for Disease Control and Prevention at www.cdc.gov/headsup.
Q. WHAT ARE FIBROIDS?
A. Fibroids are noncancerous tumors inside the wall of the uterus. They are very common; as many as 70 percent of white women and 90 percent of African-American women may be affected, though only 30 percent report having symptoms. A woman may have one or several tumors. Fibroids vary in size, from less than an inch to 8 inches or more across.

Q. WHAT CAUSES FIBROIDS?
A. Experts don’t know for sure what causes them. But being overweight or obese may play a role. Because fibroids sometimes run in families, genes also may be a factor. African-American women have a three to five times greater risk for fibroids than white women.

Q. HOW CAN I TELL IF I HAVE FIBROIDS?
A. Some women with fibroids have symptoms, such as:
   • Heavy or painful periods
   • Pelvic pain or pressure
   • Low back pain
   • The need to urinate frequently
   • Difficulty getting pregnant

But other women with fibroids have no symptoms at all.

Fibroids may be detected during a routine gynecological exam. Imaging tests, such as X-rays or ultrasound, can often confirm if a woman has fibroids.

Q. DO FIBROIDS CAUSE CANCER?
A. Having fibroids does not raise a woman’s risk for cancer of the uterus.

Q. HOW DO DOCTORS TREAT FIBROIDS?
A. If a woman is not bothered by fibroids, she may not need treatment. Or she may need only an over-the-counter pain reliever to ease mild symptoms.

For fibroids that cause problematic symptoms, the traditional cure has been hysterectomy, or surgery to remove the uterus. However, there are several treatments available to treat fibroids. These include prescription medications and less invasive surgical procedures, some that can maintain a woman’s fertility.
State-of-the-Art Surgery

Anderson Hospital offers state-of-the-art operating suites outfitted with the latest technology and equipment. We were the first hospital in Southern Illinois to acquire the da Vinci Si Surgical System — a robotic platform that allows surgeons to perform even the most complex and delicate procedures through a small incision with minimal blood loss. To learn how we can make your surgery a success, call 618-391-5492 or visit www.andersonhospital.org/services/surgical_services.aspx.

'The Pill' and Depression

Women who use hormonal birth control may have an increased risk of developing depression, according to a large recent study. The researchers studied several forms of birth control that use hormones to prevent pregnancy, including:

- Birth control pills
- Birth control patch
- Vaginal ring
- Hormonal intrauterine device (IUD)

A DEPRESSION CONNECTION

The study, published in JAMA Psychiatry, tracked more than 1 million Danish women ages 15 to 34 over a 14-year period. The results provide the best insight yet into how the use of hormonal birth control may affect women’s moods.

None of the women in the study had a depression diagnosis at the outset. Those who used any form of hormonal birth control were more likely than nonusers to be diagnosed with depression or take antidepressants later.

Teenagers seemed to be particularly vulnerable. Those who took birth control pills were up to twice as likely as non—pill users to take antidepressants later. As women grew older, however, the increased risk for depression lessened.

WORTH THE RISKS?

All birth control methods have pros and cons. For many women, easing anxiety about an unplanned pregnancy may more than offset a slightly increased risk for depression. Additional factors to consider include effectiveness, convenience and the potential for other side effects.

Weigh your birth control options carefully with your doctor. If you have a history of depression, be sure to let your doctor know. This will need to be factored into your decision.
Men and Osteoporosis: Bone Health Isn’t Just a Concern for Women

Most people think of osteoporosis as a woman’s disease. But about 6 percent of U.S. men ages 65 and older have this bone-thinning disease. Millions more stand a high chance of developing it.

AGING AND OTHER RISK FACTORS

Both men and women reach peak bone mass in their 30s. Because men in their 50s don’t go through menopause, which causes a rapid hormone shift that affects bone health, they tend to lose bone mass at a lower rate than women.

By age 65 or 70, however, men start to lose bone mass at the same rate as women. At this point, we all become less efficient at absorbing calcium, a mineral essential to bone health. Other risk factors for weak bones include:

- Excessive alcohol use
- Low testosterone levels
- Smoking
- Family history
- Chronic diseases affecting the kidneys, stomach, lungs or intestines
- Taking glucocorticoids — drugs to treat asthma, rheumatoid arthritis or other conditions
WARNING SIGNS
Osteoporosis has no symptoms until a fracture occurs. Even broken bones, especially in the spine, can take you by surprise. Common warning signs are sudden back pain, loss of height or a change in posture. Men who experience these symptoms, know they’ve broken a bone or have risk factors for weak bones should talk with their doctors about osteoporosis.

A bone mineral density test can detect osteoporosis. Treatment includes medications and lifestyle changes to prevent fractures and preserve your ability to move well and live independently.

4 WAYS TO PROTECT YOUR SKELETON
Start boosting your bone strength today:
1. Don’t smoke, and avoid alcohol abuse.
2. Do weight-bearing exercises such as walking, hiking, weight training or dancing.
3. Get enough calcium and vitamin D in your diet. Men ages 31 to 70 need 1,000 mg of calcium and 600 IU of vitamin D daily. Older men may need more.
4. Talk with your doctor or pharmacist about your prescription drugs and their effects on bone health.

>> Need to Find a Doctor?
Anderson Medical Group is accepting new patients. Explore available specialties or find the right primary care physician for you at www.AndersonMG.com.
WATCH OUT for These Workplace Hazards

You mind your health and safety at home. Shouldn’t you be doing so at work, too?

Your efforts to stay healthy shouldn’t stop the minute you head out the door for work. After all, you may spend eight or more hours per day at your job.

Although you might associate workplace safety efforts with warehouses or factories, potential threats can lurk even in an office environment. Read on to learn about health hazards that could greet you in the workplace so that you are better prepared to avoid them.

**SLIPPERY SPILLS**

Slips, trips and falls cause most industrial accidents — and you can encounter them in office settings, too.

**Smart moves:**
- Wear stable shoes with no-slip soles.
- Don’t carry anything that blocks your vision.
- Clean up or ask for help anytime you spot a spill.

**OFFICE CLUTTER**

Cubicles seem safe, but office workers actually face a greater risk of falling than those in other settings.

**Smart moves:**
- See your eye doctor.
- Wear prescription glasses or contacts as directed.
- Adjust your computer monitor so that its brightness matches the light level in the room. Make sure you are about 25

**EYESTRAIN**

Surveys show that up to three-fourths of computer users experience eye discomfort. Your eyes may feel sore, tired and dry. You may also have blurry vision and headaches. The reason? Electronic media has smaller type, bright backlighting and lower contrast. We may also blink less often when looking at digital vs. print materials.

**Smart moves:**
- Close file cabinets and desk drawers after using them.
- Move electrical cords and wires from walkways.
- Report loose or damaged carpet.
inches away from the screen and can look slightly down at it.

• **Follow the 20-20-20 rule:** Shift your vision to a spot 20 feet away for at least 20 seconds every 20 minutes.

**LOUD NOISE**

Hearing loss from high levels of noise is the most common work-related illness in the United States. Miners, construction workers and those in the manufacturing industry (about 22 million Americans) have the highest rates of hearing loss. But anyone in a loud environment faces a risk.

**Smart moves:**

• Wear hearing protectors at work, such as earplugs or earmuffs.
• Visit your doctor or a hearing specialist to have your hearing checked.
• Use hearing aids and other assistive devices as recommended.

**WORKING TOO MUCH**

Research has shown that the more hours per week a person works, the greater his or her risk for cardiovascular disease. Spending long hours at work can raise blood pressure, damaging the heart and arteries over time. People who work a lot are also less likely to exercise.

**Smart moves:**

• Ask for support. Talk with your manager or human resources department about ways to better manage your workload.
• Take regular breaks for physical activity. If possible, walk or bike to work, even part of the way.
• Mind your stress levels. See page 19 to learn how you can meditate at work.

**MOBILE MALADIES**

As use of laptops, tablets and smartphones has skyrocketed, so have aches and pains associated with them. Tilting your head downward to stare at a screen puts stress on your neck and shoulders. The repetitive motion of typing can cause pain, numbness or tingling in your fingers or wrists.

**Smart moves:**

• Take frequent breaks from devices.
• Watch your posture. Position your computer screen so that you can keep your head bent only slightly forward.
• When typing on a tablet or small laptop, use a wireless keyboard.
• Keep typed messages brief. Use voice-to-text apps or have a phone conversation instead of always texting.

**SITTING**

Too much time spent sitting has been linked to obesity, heart disease-related death and other health conditions. Unfortunately, sitting is also necessary at many jobs. The
good news? Just an hour a day of moderate-intensity activity can reduce the effects of a sedentary lifestyle.

**Smart moves:**
- Take short, frequent breaks to stretch or walk around the office.
- Take an exercise class or go for a walk at lunchtime.
- Consider using a standing desk.

**UNHEALTHY LUNCHES**
Grabbing lunch with coworkers can build camaraderie and provide a change of scenery. But eating out regularly can be costly to both your wallet and your health. Portion sizes at many types of restaurants have grown in recent years, contributing to overeating. Eating out also means you have less control over what ingredients go into the meal.

**Smart moves:**
- Suggest eating in your break room or outdoors. That way, you can socialize with colleagues but have a healthier, less costly meal from home.
- When you do dine out, order an appetizer instead of an entrée or take part of your meal home.
- Avoid “all-you-can-eat” buffets.

**ASTHMA TRIGGERS**
Many people have asthma that is triggered by irritants or allergens in the workplace. Those might include irritants like fumes, gases, smoke, chemicals and metals or allergens like animal dander, dust or mold.

**Smart moves:**
- Speak with your manager about changes that could lessen your exposure to irritants — for example, working in a different part of the building or working different hours when less irritants are present.
- For more tips or assistance, visit the Occupational Safety and Health Administration (OSHA) website at www.osha.gov.

**Breathe Easier**
Anderson Hospital’s Health Management Center hosts Air Link, a social club for individuals with pulmonary-related conditions, on the third Wednesday of most months. For dates and locations, please call 618-391-6715.

3 Mistakes to Avoid at Work
Could your career path be blocked by how you behave around coworkers? Don’t let social errors erode your professional reputation. If you’re committing these three blunders at work, correct course to aid your chances for long-term success.

1. **FREQUENT COMPLAINING**
Things could always be better. But fixating on the negative — and whining about it incessantly with your coworkers — tends to tank performance and won’t win you points at your next review. Be open to new thinking and try not to be dismissive of different ways of doing things.

2. **GETTING TOO PERSONAL**
Camaraderie with coworkers is great, but sharing too many details about your personal life is not. Maintain appropriate levels of privacy when speaking in groups and think before you write.

3. **NEGLECTING YOUR BOSS**
If you don’t regularly engage the person you report to, your opportunities for advancement may dry up. Follow the lead of people in your boss’s good graces. Periodically assess your efforts and amp up your game if necessary. Don’t forget to share your successes.
WORKING ODD SHIFTS
As many as 15 million Americans work evenings and nights. Such schedules can take a toll on mental and physical health. Lack of quality sleep tops the list of shift work-related problems. And that could be to blame for the higher rate of ulcers, diabetes and heart disease among late-shift workers.

**Smart moves:**
- Create a sleep routine. Stick to a set bedtime and do something relaxing before hitting the hay, such as taking a bath or reading.
- Avoid caffeine and alcohol close to bedtime.
- Eat nutritiously and exercise regularly.
- Keep lights bright while you work to help your body’s internal clock adjust.

Make Meditation Part of Your Workday

Sneaking in some meditation during your workday can make a difference in how you feel. Research shows that meditation can lower your blood pressure, boost your mood, reduce pain and help you sleep. No one even needs to know you’re doing it. Here’s how:

1. **Scan your body.** Breathe in as you tense the toes of one foot. Exhale and release those muscles. Slowly work your way up one leg, inhaling as you tense each muscle group and exhaling as you release. Repeat on the other leg and then move on to the muscles all the way up your body. Notice the sense of relief you feel in your body each time you let go of the tension.

2. **Be mindful.** Sitting quietly, focus on the feeling of your breath flowing in and out of your nose. Keep your attention on your breath. As thoughts come up, let them go without judging or reacting to them.

3. **Use your imagination.** Close your eyes and picture yourself in a relaxing place. For example, see yourself lying on a warm beach or walking through a calm forest. Use all your senses to imagine yourself in the soothing environment.

---

**Great News for Employers — And Employees!**

Anderson Hospital offers worksite health promotion. Investing in the health of your workforce can improve employee satisfaction and retention, reduce absenteeism and turnover, boost productivity and contain health care costs. To learn more, please call the Health Management Center at 618-391-6710.
Expired Medication — Keep or Throw Away?

So you’ve woken up with a headache. That bottle of pain relievers that’s been sitting in your medicine cabinet might sound like the simple fix, right? Well, before you grab that dose, check whether it’s expired.

Why does that expiration date matter? Simply put, outdated drugs might not give you 100 percent of the benefits because they’re not as potent. And that may not sound so dangerous when it comes to treating minor aches and pains with ibuprofen. But consuming expired medications that treat chronic or life-threatening illnesses such as heart conditions, seizures or COPD can be a dangerous oversight, since they’ll have lost their strength and won’t work as well to keep you healthy.

Other medications that should always be taken at full strength include:

• **Oral nitroglycerin (NTG),** a medication used for angina (chest pain): This drug loses its potency quickly once opened.

• **Insulin** (controls blood sugar in those with diabetes): Insulin may stop working after its expiration date.

• **Eye drops:** Bacteria can grow in expired products.

• **Antibiotics:** Subpotent prescriptions can fail to treat infections, leading to more serious illness and antibiotic resistance.

Not sure where to look for medication expiration dates? Check the label on the bottle or look for a stamp on the bottom of the package. The expiration date can be found in either of those places. You might also see the letters “EXP” next to the date.
As for disposing of expired medications safely, follow these simple steps:

1. Mix uncrushed medicines with an unpalatable substance such as dirt or coffee grounds.
2. Place the mixture in a sealed container, such as a plastic bag.
3. Throw the container into the trash.
4. Scratch out any personal information on the prescription label of your empty bottle or package. Then throw it into the trash.

The FDA recommends that some medications be flushed down the toilet or sink because they can be especially harmful (even fatal) to a child or pet who consumes them accidentally. For an FDA-approved list of medications that should be disposed via flushing, visit [www.fda.gov](http://www.fda.gov).

Proper storage of your medication is also key to keeping you and your family safe. Check your medication labels for specific storage instructions, as certain medications need to be kept in the refrigerator and others cannot be exposed to extreme heat. Although a bathroom cabinet is a common place for storage, it’s best to store most medications in a cool, dry place, such as a kitchen cabinet far from the stove or a closet shelf.

---

**Health at Your Fingertips**

With Anderson Hospital’s MyHealth interactive web portal, patients and families can take a more active role in their care. The portal provides convenient, secure access to health information. With MyHealth, you can:

- View laboratory and radiology results
- Find a list of current medications and allergies
- View and preregister for upcoming appointments
- Update personal information

To enroll, visit [www.andersonhospital.org](http://www.andersonhospital.org) and select “MyHealth.”
Most people know that drinking too much alcohol can damage the liver. But so can these lesser known hazards:

**EXTRA POUNDS**

Fat cells appear to release toxic proteins that harm liver tissue. Eventually, this can lead to a disease that mimics the effects of alcohol on the liver. Obesity can even contribute to cancer in the liver and other areas of your body. If you’re heavy, losing even a small percentage of your body weight can improve your health.
HERBAL SUPPLEMENTS
While medications must pass strict safety standards, dietary supplements hit shelves without the same testing. This means they sometimes contain ingredients that are toxic to cells in your liver. Always tell your doctor about all the medicines and supplements you take. Seek immediate medical attention if you feel tired, have a poor appetite or develop yellowish eyes or itchy skin soon after taking a supplement. These could be signs of liver damage.

What Is Alcohol-Induced Liver Disease?
Alcohol-induced liver disease is common, but can be prevented. There are three types. Many heavy drinkers progress through these three types over time:
- Fatty liver is the build-up of fat inside the liver cells. It leads to an enlarged liver. It’s the most common alcohol-induced liver problem.
- Alcoholic hepatitis is an acute inflammation of the liver. There is death of liver cells, often followed by permanent scarring.
- Alcoholic cirrhosis is the destruction of normal liver tissue. It leaves scar tissue in place of the working liver tissue.

MEDICATION
It doesn’t matter if it’s prescription or over-the-counter, taking too-high doses or mixing medicines can strain or injure your liver. Some drugs pose a greater risk, including acetaminophen. Always follow instructions from your doctor and on drug labels. If you take multiple medications, make sure they don’t have the same active ingredient.

SMOKING
Cigarettes damage cells in the liver. This makes conditions like cirrhosis and fatty liver disease worse. Smoking can decrease your liver’s ability to remove toxins from your body. If you don’t smoke, don’t start. If you do, talk with your doctor about ways to quit.

>> A Variety of Care
Find a physician by specialty, gender, name or location. Visit www.andersonhospital.org and select “Find a Physician.”
Fruit may well be a perfect food. It’s virtually fat-free, packed with nutrients and available in a wide range of flavors and textures worldwide.

Fruit is rich in vitamins, including A, B1 (thiamine), B2 (riboflavin), B3 (niacin), B5 (pantothenic acid), B6 (pyridoxine), B9 (folic acid), C and E. These vitamins have an essential role in cell reproduction, bone and tooth health and the function of the digestive, nervous and immune systems.

It’s little wonder, then, that the U.S. Department of Agriculture (USDA) recommends 2 cups of fruit each day. You can add more fruit to your diet by:

• Drinking 100 percent fruit juice or eating homemade fresh fruit cocktail with breakfast
• Making a fruit smoothie for breakfast or an afternoon snack (throw in some veggies to add more nutrients)
• Having a fruit salad or a piece of fruit instead of potato chips with a sandwich
• Stocking up on dried, plain, frozen and canned fruits (just make sure they are packed in 100 percent juice or water and don’t contain added sauces and seasonings)
• Setting fruits in bowls in the kitchen, making them more visible
• Taking prewashed cut snacks of fruit with you to work or shopping
• Choosing fresh fruit prepared in a fun way as dessert

Score the Freshest Fruit

During the local growing season, why not pick up your fruit at a farmers market? These local events offer produce at just-picked freshness — when it has the best flavor and the most nutrients.

Shopping at a farmers market also supports your local community. You can ask the grower questions about what you’re buying. And the prices are generally lower than what you’ll pay at the grocery store. Go early in the day for the best selection.

You can find a farmers market near you using the USDA’s website. Go to http://search.ams.usda.gov/farmersmarkets and enter your ZIP code to find locations, hours and details.
Stacked Fruit Salad for One

Ingredients
2 tbsp. fat-free vanilla yogurt
2 tbsp. fat-free ricotta cheese
¼ cup crushed pineapple, drained
¼ cup blueberries
¼ cup mandarin oranges
Half a small kiwi, peeled and sliced
1 ring spiced apple

Directions
Mix the yogurt and ricotta cheese in a small bowl. Use a small spatula to smooth each layer as you add it to a parfait glass. Spread ¼ cup of drained pineapple in the bottom. Spread half the yogurt-ricotta mixture over the pineapple. Top with a layer of blueberries. Mandarin orange segments come next, then another yogurt-ricotta layer. Arrange slices of peeled kiwi. Top with the spiced apple ring. Cover loosely and refrigerate, unless you’re ready to eat it at once.

Makes one serving. Each serving contains about 175 calories, 0 g total fat (0 g saturated fat, 0 g trans fat, 0 mg cholesterol), 56 mg sodium, 38 g carbohydrate, 3 g fiber and 7 g protein.
**Peach Melba Smoothie for Two**

**Ingredients**
1 cup sliced peaches, fresh, frozen or canned (drained and rinsed)
1 cup fat-free vanilla yogurt
1 cup crushed ice
1 cup fresh or frozen unsweetened raspberries. Set aside six berries for garnish.

**Directions**
Put peaches, yogurt, ice and all but six raspberries into blender and purée. Serve in tall glasses. Garnish with reserved berries. The smoothie will be so thick, they can float on top. Add fresh mint leaves if you have them.

*Makes two servings. Each serving contains about 125 calories, 0 g total fat (0 g cholesterol), 63 mg sodium, 16 g carbohydrate, 5 g fiber and 5 g protein.*

---

**Yogurt Fruit Cups**

**Ingredients**
1 cup vanilla low-fat yogurt
2 tbsp. crystallized ginger, finely chopped
4 small navel oranges, peeled
8 ripe strawberries, hulled (other berries or chopped fruit may be substituted)
2 medium-sized bananas, peeled

**Directions**
Place the yogurt in a small bowl. Add the ginger and stir briskly for one minute or until the yogurt has a saucelike consistency. Set aside.
Cut each orange crosswise into five slices. Cut each strawberry lengthwise into four slices. Cut each banana crosswise into 14 slices. Spoon ¼ cup of the ginger sauce onto each of four 8-inch dessert plates and spread the sauce over each plate. Arrange the fruit equally on each of the plates and serve.

*Makes four servings. Each serving contains about 197 calories, 1 g total fat (0 g saturated fat, 0 g trans fat, 3 mg cholesterol), 44 mg sodium, 45 g carbohydrate, 5 g fiber and 5 g protein.*

*Source: Health and You magazine*
ANDERSON HOSPITAL’S ANNUAL

Baby FAIR

Free Gifts
Vendor Booths
Car Seat Safety
Kid Safety
Local Physicians
Win Prizes

Join us at the Collinsville Gateway Center

Free Admission

Sunday
April 30
1–4 p.m.

You are invited to the area's largest party for moms and moms-to-be!
Serving Mothers and Babies for 40 Years

On January 5, Anderson Hospital celebrated 40 years of service to the community. On that day in 1977, the doors officially opened and staff were ready to accept patients. In addition to the years of planning and building, staff were working prior to opening day to ready the way. One of those original staff members still enjoys working at the hospital today.

THERE AT THE BEGINNING
Ella Ahrens, R.N., began her career at Anderson on December 20, 1976, as an obstetrics (OB) nursery nurse. She describes the days leading up to opening as exciting. “We cleaned, stocked our departments and even had scavenger hunts so staff could easily find their way around the hospital,” she explains. “It was the first and only time that all the staff of Anderson Hospital had Christmas Day vacation!”

Ella had the privilege of caring for the first of 500 babies born at Anderson that year. Jennifer Shadwick was born to Kathy and Garry Shadwick of Troy, Illinois, at 17 minutes after midnight on January 7, 1977. “I remember being given a flashlight to use the restroom because some of the electricity was not yet hooked up,” Mrs. Shadwick recalled during an interview in 1997. “And the cafeteria had not been finished, so hospital food was not an option.”

In the past 40 years, Ella has played a nursing role in all aspects of the obstetrics department. “I’ve worked in the nursery, labor and delivery, postpartum, even made a home visit,” she says. “I’ve come full circle. I’m back in the nursery, where I love it the most.”

During her decades at Anderson, Ella has gotten engaged, married, had children, and even lost loved ones. “Anderson has played a major part of my life,” Ella says. “I am proud of our OB department’s reputation in our community and even prouder of being a part of an amazing team of coworkers.”

GROWING TO SERVE FAMILIES
Ella has seen Anderson Hospital’s obstetrics department grow from a small unit on the second floor above the main entrance into its current home at the Pavilion for Women. The original space featured semi-private beds and an atrium where daylight flooded the nursery.

As the community grew, so did the number of families who chose Anderson Hospital for the birth of their children. In 1993 the hospital opened the Pavilion for Women, carefully designed to meet the needs of expectant moms, their families and their newborns. The unit originally contained seven private suites where mothers would labor, deliver, recover and remain throughout their stay. Over the
years, the Pavilion has expanded twice and now covers two floors.

Today the Pavilion delivers over 1,500 babies each year. It features private birthing suites, each equipped with a private bath. After birth and immediate recovery, mother and baby are moved to a private mother-baby suite where they remain for the rest of their stay. Moms who require a cesarean delivery enjoy private, cozy post-cesarean birth suites where they can recover and enjoy their new babies. The advanced Level II newborn nursery assures parents that Anderson can care for their new babies even in the unlikely event of a more complicated birth. This allows mom and baby to stay together and bond during the precious first hours following birth.

LOOKING AHEAD
In 2017, first-floor rooms will undergo a needed refresh, which will outfit them with similar décor and amenities as those used in the new private patient suites.

>>Doing Best for Families
The Pavilion for Women at Anderson Hospital is specially designed to ensure the comfort and safety of mothers, babies and families. For more information on our facilities and services, call 618-391-5980 or www.andersonhospital.org/pavilion.

Throughout its history, Anderson Hospital has responded to the needs of Madison County residents. Each new service and every expansion has been in direct response to community needs. Anderson Hospital’s Pavilion for Women is proud to be a pillar in this community, with roots firmly planted in the area it serves.
Community Calendar
SPRING/SUMMER 2017

Anderson Hospital offers a wide variety of services, programs and support groups to help you get well and stay healthy. For more happenings around Metro East with Anderson, keep up with us on Twitter @AndersonHosp and on www.facebook.com/AndersonHospitalIL. Sign up for our email newsletter at www.andersonhospital.org.

PRENATAL CARE AND FAMILY COURSES
For a full list of Prenatal Care and Family course offerings, dates/times and costs, and for online registration, visit www.andersonhospital.org/pavilion or call 618-391-5983.
• Preparation for Childbirth
• Sibling Class
• Breastfeeding Class
• Prep School for Dads
• Here Comes Baby!

Babysitting Class
618-391-6700

Outpatient Lactation Services/ Lactation Supplies
By appointment.
618-391-6057

SCREENINGS
Cholesterol and Blood Pressure Screenings
$25 per screen. Call for more information.
618-391-6710

Prostate Screenings
$10 per screen. Call for more information.
618-391-5900

AWAKE (Alert, Well And Keeping Energetic)
Support group for people affected by sleep apnea. 618-288-6124

Grief Support Group
Monthly support group in the hospital chapel. Meetings are held on the second Tuesday of every month at 7 p.m.
618-391-6456

Ostomy Support Group
Monthly meetings led by certified wound and ostomy nurses.
618-391-5941

SUPPORT GROUPS
Air Link
A social club for individuals with pulmonary-related conditions meeting every other month.
618-391-6715

Save the Date
Anderson Hospital Foundation Golf Tournament
Sunset Hills Country Club, Edwardsville, IL
May 8
Registration 9 a.m.
Shotgun Start 10 a.m.

Anderson Hospital Foundation Sporting Clay Classic
NILO Farms, Brighton, IL
June 10
Registration 7 a.m.
Shoot Times 8:30 a.m., 12:30 p.m.

Wine Down with Anderson Hospital
Wine Tasting Event
Leclaire Room, Edwardsville, IL
September 8
6 to 9 p.m.

Meet Me in St. Louis
Anderson Hospital Foundation Gala
Four Seasons Hotel St. Louis
January 28, 2018
Cocktails 5:30 p.m.
Pregnancy and Infant Loss Support Group
Meetings are held the fourth Tuesday of every month. 618-391-5984

SHARE (Support Has A Reinforcing Effect)
Monthly support group for women who have been diagnosed with breast cancer. 618-391-5900

Stroke Support Group
618-391-5230

DIABETES SUPPORT
Online Diabetes Support Forum
Looking for support in dealing with diabetes? Ask the experts at Anderson Hospital. We support the diabetes community by providing important information and helpful tips to help you live a healthier life. Call 618-391-6711 for more information.

Diabetes Services
618-391-6711

Dietitian Services
618-391-6710

Phase 2 Cardiac and Pulmonary Rehabilitation
618-391-6715

Phase 3 Supervised Exercise Program for Adults
618-391-6715

Wound and Ostomy Care Services
618-391-5941

Pregnancy and Infant Loss Support Group
Meetings are held the fourth Tuesday of every month.

SHARE (Support Has A Reinforcing Effect)
Monthly support group for women who have been diagnosed with breast cancer.

Other Programs
Community Health Education
618-391-6712

Congestive Heart Failure Program
618-391-6715

CPR, ACLS, PALS Courses
618-391-6700

www.AndersonMG.com
Your FREE Health & You magazine from your friends at Anderson Hospital

A mammogram more likely to get it right the first time.

3D Mammography

Now Offered at Anderson Hospital!