



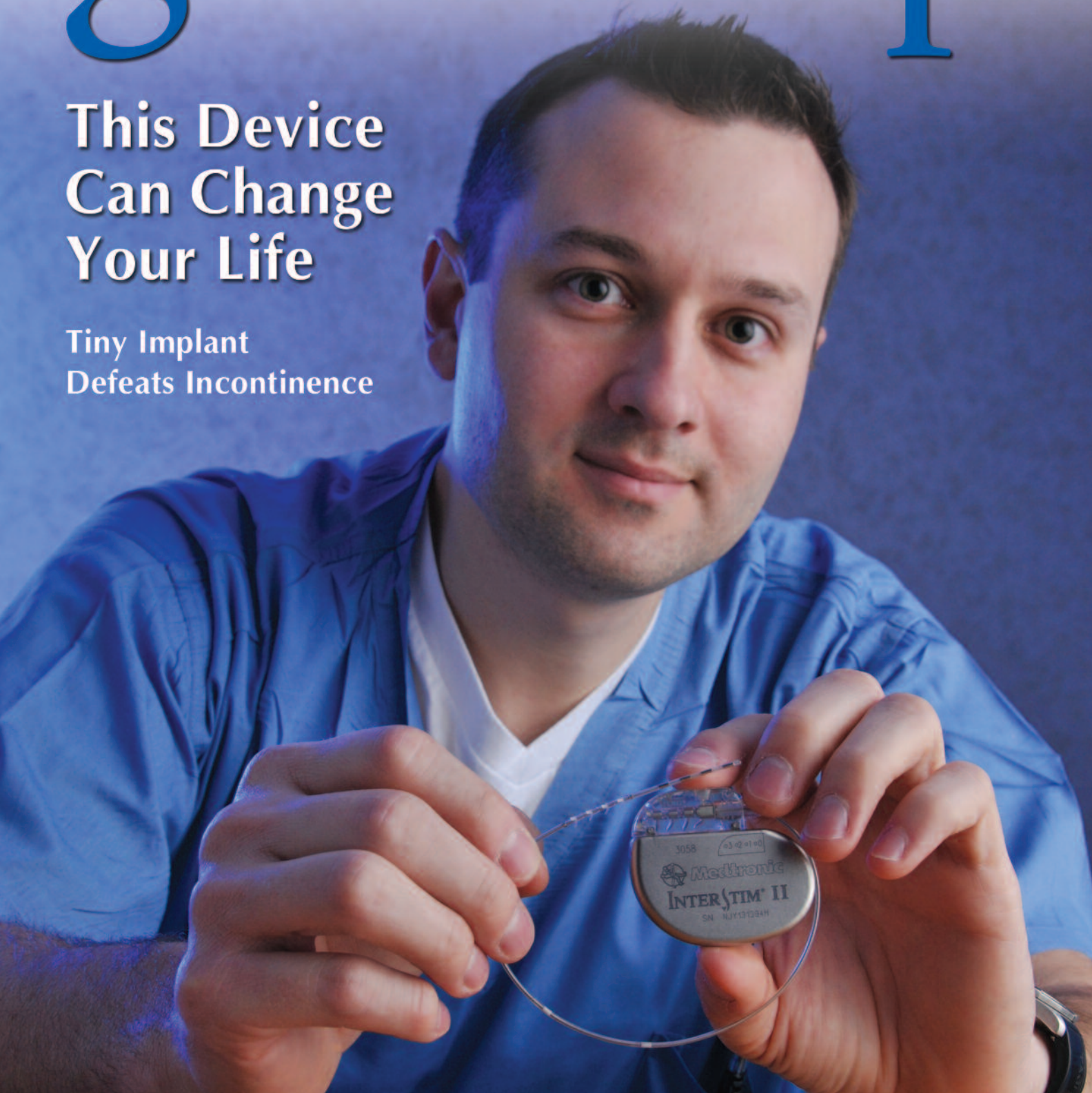
OUR LADY OF BELLEFONTE HOSPITAL
Bon Secours Kentucky Health System

Winter 2010

good help™

**This Device
Can Change
Your Life**

**Tiny Implant
Defeats Incontinence**





CEO corner

Another year is winding down. This annual rite of passage always brings a time of reflection, and as we prepare to say goodbye to 2010, I've been reflecting on what a great year it has been at OLBH.

As you'll read in this issue of *Good Help*, OLBH is leaving 2010 on a high note, having received much good news regarding the hospital and its services. OLBH received multiple awards from HealthGrades, which analyzes patient outcomes at nearly all of the hospitals in the United States. You can learn about all the recognitions OLBH received from HealthGrades on the back of this magazine, but several placed us as number one in the entire state of Kentucky while other recognitions are ones that have been earned repeatedly, year after year. To me, this is indication that not only are we serving our patients and their needs, but that we continue to do so as we strive to always provide what our patients have come to expect of us.

The quality that is expected at OLBH is further validated, as you'll also read on page four, by the most recent data the federal government gathers so consumers can compare hospitals. Using this data that all hospitals must report to the government, OLBH was ranked the best hospital in the Ashland area in virtually every comparable category.

The honors are nice and have made 2010 another banner year for OLBH. Yet, the honors point to the larger issue...the quality of our services. It's this quality in which the staff of OLBH takes the most pride. As CEO, I know I am proud to work with a staff of professionals who work so tirelessly on behalf of the sick who seek our help. So I thank you for your continued trust in OLBH. We commit to make 2011 another year of service to you and our community.

I'll close by saying that the honors achieved and the patients cared for are all in service of a larger purpose. At OLBH, everything we do is a result of our faith. With this in mind, on the next page we present to you the Biblical Christmas story. It is not only the reason for the season, but the reason for OLBH's existence. We hope you enjoy it and share it with your family during the upcoming holiday.

Merry Christmas and Happy New Year.

Sincerely,

Kevin Halter, CEO, Our Lady of Bellefonte Hospital

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On the Cover:

Urologist Brian DeFede, D.O., shows a device being used to help people with incontinence. See page 6 for the full story.

Do you know where OLBH's free health screenings, classes and other opportunities are taking place? If not, make certain you are receiving OLBH's monthly calendar.

The calendar is the best way to keep up with the latest happenings at OLBH.

The latest calendar can be viewed at www.olbh.com or you can receive the calendar by mail by calling the OLBH CareLine at (606) 833-CARE (2273).





on a mission

The Christmas Story

As told by Matthew

(Matthew 1:18 - 2:23 New International Version)

This is how the birth of Jesus Christ came about: His mother Mary was pledged to be married to Joseph, but before they came together, she was found to be with child through the Holy Spirit. Because Joseph her husband was a righteous man and did not want to expose her to public disgrace, he had in mind to divorce her quietly.

But after he had considered this, an angel of the Lord appeared to him in a dream and said, "Joseph, son of David, do not be afraid to take Mary home as your wife, because what is conceived in her is from the Holy Spirit. She will give birth to a son, and you are to give him the name Jesus, because he will save his people from their sins."

All this took place to fulfill what the Lord had said through the prophet: "The virgin will be with child and will give birth to a son, and they will call him Immanuel" – which means, "God with us."

When Joseph woke up, he did what the angel of the Lord had commanded him and took Mary home as his wife. But he had no union with her until she gave birth to a son. And he gave him the name Jesus.

After Jesus was born in Bethlehem in Judea, during the time of King Herod, Magi from the East came to Jerusalem and asked, "Where is the one who has been born king of the Jews? We saw his star in the East and have come to worship him."

When King Herod heard this he was disturbed and all Jerusalem with him. When he had called together all the people's chief priests and teachers of the law, he asked them where the Christ was to be born. "In Bethlehem in Judea," they replied, "for this is what the prophet has written: 'But you, Bethlehem, in the land of Judah, are by no means least among the rulers of Judah; for out of you will come a ruler who will be the shepherd of my people Israel.'" Then Herod called the Magi secretly and found out from them the exact time the star had appeared. He sent them to Bethlehem and said, "Go and make a careful search for the child. As soon as you find him, report to me, so that I too may go and worship him."

After they had heard the king, they went on their way, and the star they had seen in the East went ahead of them until it stopped



over the place where the child was. When they saw the star, they were overjoyed.

On coming to the house, they saw the child with his mother Mary, and they bowed down and worshiped him. Then they opened their treasures and presented him with gifts of gold and of incense and of myrrh. And having been warned in a dream not to go back to Herod, they returned to their country by another route.

When they had gone, an angel of the Lord appeared to Joseph in a dream. "Get up," he said, "take the child and his mother and escape to Egypt. Stay there until I tell you, for Herod is going to search for the child to kill him."

So he got up, took the child and his mother during the night and left for Egypt, where he stayed until the death of Herod. And so was fulfilled what the Lord had said through the prophet: "Out of Egypt I called my son."

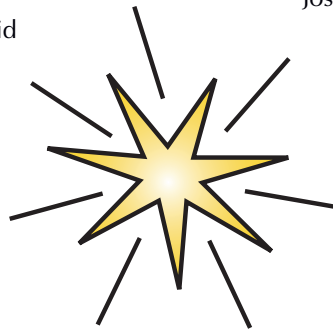
When Herod realized that he had been outwitted by the Magi, he was furious, and he gave orders to kill all the boys in Bethlehem and its vicinity who were two years old and under, in accordance with the time he had learned from the Magi.

Then what was said through the prophet Jeremiah was fulfilled: "A voice is heard in

Ramah, weeping and great mourning, Rachel weeping for her children and refusing to be comforted, because they are no more."

After Herod died, an angel of the Lord appeared in a dream to Joseph in Egypt and said, "Get up, take the child and his mother and go to the land of Israel, for those who were trying to take the child's life are dead."

So he got up, took the child and his mother and went to the land of Israel. But when he heard that Archelaus was reigning in Judea in place of his father Herod, he was afraid to go there. Having been warned in a dream, he withdrew to the district of Galilee, and he went and lived in a town called Nazareth. So was fulfilled what was said through the prophets: "He will be called a Nazarene."



IMMANUEL
God with Us



“To exceed national averages nearly across the board is a compliment to the care at OLBH.”

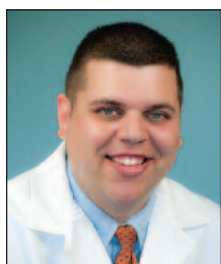
Government Comparison: OLBH Best in Ashland

The United States Department of Health & Human Services has published its latest hospital comparison information and has established OLBH as Ashland’s leading medical facility in nearly every measurable category, including the care of pneumonia, heart failure, heart attack/chest pain, surgical standards of care that reduce post-surgery infections and overall hospital experience.

In the areas of pneumonia, heart failure, heart attack/chest pain, surgical standards and hospital experience, the government’s recent data included 34 measurable subcategories that can be compared in Ashland. In those 34 categories, OLBH scored the same percentage in two categories and bested other Ashland hospitals in 24 of the categories. When compared to scores of other Kentucky and national hospitals, OLBH exceeded the state and national averages in 30 of the 34 comparable categories.

The Department of Health and Human Services published its findings on its site Hospital Compare (www.hospitalcompare.hhs.gov). “Hospital Compare is a great resource and provides consumers information that can assist in choosing a healthcare provider,” **Peggy Smith**, OLBH director of Care/Quality Management, said. “To exceed national averages nearly across the board is a compliment to the care at OLBH. It’s also quite an accomplishment for the OLBH staff and physicians that our overall scores in 26 of the 34 comparable categories matched or exceeded those of other Ashland hospitals.”

OLBH Medical Staff News



Zachary Underwood, D.O., has joined Bellefonte Primary Care in South Shore (U.S. 23 at Indianola Avenue) and is providing family care services at the facility. Dr. Underwood is a graduate of the Pikeville College School of Osteopathic Medicine in Pikeville, Ky. He completed both his residency and internship at Southern Ohio Medical Center where he served as chief resident. He is a member of the American

Osteopathic Association. An area native, Dr. Underwood is a graduate of Greenup County High School and the University of Kentucky. Bellefonte Primary Care in South Shore is open 8 a.m. to 4:30 p.m., Monday through Friday. For appointments, contact the facility at **(606) 932-3159**.



Jeremiah Miller, D.O., has joined Bellefonte Primary & Urgent Care in Cannonsburg (12470 U.S. Route 60) and is providing family care services at the facility. Dr. Miller is a graduate of the West Virginia School of Osteopathic Medicine in Lewisburg, W.Va. He is a graduate of OLBH’s residency program. He is a member of the American Osteopathic Association, the Kentucky Osteopathic Medical Association and the

American College of Osteopathic Family Physicians. Bellefonte Primary & Urgent Care in Cannonsburg is open Monday through Friday, 8 a.m. to 6 p.m., and Saturdays from 8 a.m. until 1 p.m. For appointments, contact the facility at **(606) 928-1881**.



Timothy Damron, M.D., cardiologist, has joined the practice of Ashland-Bellefonte Cardiology on the OLBH campus. Dr. Damron earned his medical degree from the Marshall University School of Medicine in Huntington, W.Va. He completed both his internship and a residency at the Marshall University School of Medicine as well as a fellowship in cardiovascular medicine. Dr. Damron is certified by the

American Board of Internal Medicine with a subspecialty certification in cardiovascular disease. He is a fellow of the American College of Cardiology. Ashland-Bellefonte Cardiology is accepting new patients at 800 St. Christopher Dr., Suite 1, Ashland, Ky. Office hours are Monday through Friday 9 a.m. to 5 p.m. For appointments, call **(606) 836-9613**.

Studio 21 Opens on Campus



Studio 21 Salon & Spa has opened on the OLBH campus in the Firm Fitness facility located in Bellefonte Pavilion (2000 Ashland Drive).

The new satellite location offers the same quality of services area residents have learned to expect from Studio 21’s main location in downtown Ashland.

Studio 21 at Bellefonte Pavilion offers a variety of hair care services for both men and women including styles, cuts, color and hi/low lights. Massage therapy services are available in varying time increments and stone massage also is available. Other services at the new Studio 21 location include waxings and dermalogica micro zone treatments.

“The new Studio 21 location allows us to expand our reach in the community and to provide our award-winning day spa and salon quality services from a convenient location,” **Gary Donalson**, Studio 21 president/owner, said.

Studio 21 at Bellefonte Pavilion is open Tuesday through Friday, 10 a.m. to 7 p.m. For appointments, call **(606) 327-1171**.

Welcoming Bishop Gainer

In August, **the Most Rev. Ronald W. Gainer**, bishop of the Diocese of Lexington, Ky., visited OLBH. Gainer’s visit underscored the continuing relationship between the hospital and the diocese. “I want to show my support and assure the people here the church supports their work,” Gainer said. Gainer met with the OLBH leadership team and employees and talked about the hospital’s ethical responsibilities as a faith-based institution.



From left, Kevin Halter, CEO; Marguerite Gilner, OLBH VP of Mission; Bishop Gainer, and The Rev. John Noe are pictured during a tour of the hospital campus.



Did You Know...

You can stay up-to-date on the latest happenings at OLBH by following the hospital on Facebook? Join the conversation and be the first to hear of OLBH classes and offerings by joining the OLBH Facebook community at www.facebook.com/ourladyofbellefonte.

ask the doctor

with Dr. Eugene DeGiorgio

Q: I'm a 52-year-old female whose mother died of a heart attack when she was about my age. Needless to say, I worry about my own heart and am trying to lose weight and do other things to benefit my heart. I've seen your cardiac CT ads and it made me wonder about whether or not I should have one. How is this test different/better than any others I may have? How accurate is it?

- Nancy, Grayson

A: First, the short answers: yes, you should have a CT angiography. Though heart disease can strike at any age, women's risk for heart disease rises sharply after menopause. You also mentioned risk factors, such as weight and family history, which would make you a candidate for this test. In addition to the risk factors you exhibit, those at greater risk for heart disease who should consider a CT angiography include people with high blood pressure, high cholesterol or a high stress jobs or lifestyles.

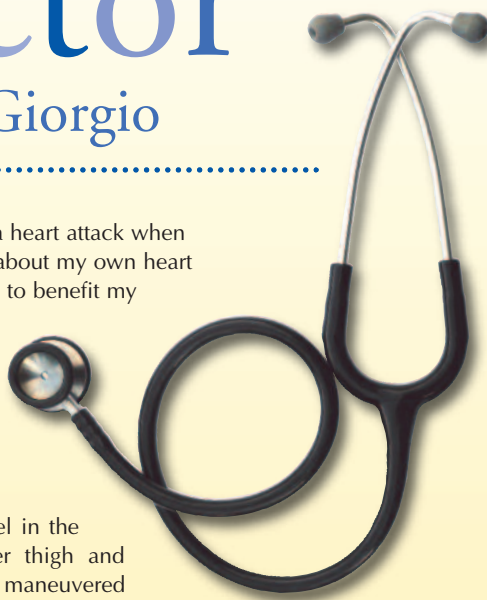
Cardiac CT angiography is painless and takes clear pictures of the heart to detect abnormalities by determining whether either fatty or calcium deposits have built up in the coronary arteries, which supply blood to the heart muscle. Left untreated, such build-ups, called plaques, can cause heart muscle disease. Heart muscle disease can lead to fatigue, shortness of breath, chest pain and/or heart attack.

At OLBH, we utilize a 64-slice CT for our CT angiographies. The CT creates 64 high-resolution anatomical images as thin as a credit card. These images are combined to form a three-dimensional view of a patient's heart for OLBH physicians to analyze. In 10 seconds, we can obtain a complete, detailed scan at clarity sometimes not possible even through the most complex procedures.

As for how a CT angiography differs from other heart tests you might be more familiar with, cardiac CT angiography is more sophisticated than calcium scoring tests in identifying the soft plaque that can cause sudden death. Another of the most common heart tests is the coronary angiogram, better known as cardiac catheterization. This test is more invasive and requires more patient recovery time than CT angiography. Patients who receive coronary angiograms must have a catheter threaded into their coronary arteries, which run along the outside of the heart. The catheter typically is inserted into a blood

vessel in the upper thigh and then maneuvered up to the coronary arteries. The catheter is used to inject dye needed for the test, which uses X-rays to exam the interior of the coronary arteries.

Based on your question and risk factors, you should consider a CT angiography. The cost for the test is \$495 and can be scheduled without need of a doctor referral by calling the OLBH **CareLine** at (606) 833-CARE (2273).



Eugene DeGiorgio , M.D., is a radiologist and medical director for OLBH's Radiology Department. He earned his medical degree from Loyola Stritch School of Medicine in Maywood, Ill. Dr. DeGiorgio completed his residency and internship at the University of Chicago Billings Hospital in Chicago. He is certified by the American Board of Radiology.

HEALTHY EATING

A recipe from OLBH's Clinical Dietetics Department



Maple-glazed Sweet Potatoes

Number of Servings: 6; Serving Size: 1/6 of recipe

Ingredients:

- 3 cups Sweet Potatoes
- 1 cup Crushed Pineapple (in own juice)
- 6 tbsp. Sugar-Free Syrup

Directions:

1. Pour canned sweet potatoes into 8x8 pan.
2. Toss remaining ingredients together in small bowl then spoon over sweet potatoes.
3. Bake at 400° for 20-22 minutes until heated through.

<p>Nutrition Information (per serving):</p> <p>Calories: 122 Total Fat: 2g Saturated Fat: 0g Sodium: 70mg Total Carbohydrate: 28g Dietary Fiber: 2g Protein: 1g</p>
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Helen Snedegar visits with friends at OLBH's Information Desk. Snedegar's life has returned to normal thanks to InterStim Therapy.

New Procedure Provides Freedom from Incontinence

It is not a normal part of aging. It is not something that should be the source of embarrassment. Yet what is more important than what urinary incontinence isn't, is what it is – treatable.

Urinary incontinence (a lack of bladder control) is a stigmatized, underreported, underdiagnosed, undertreated condition erroneously thought to be a normal part of aging. Due to such beliefs, two-thirds of men and women age 30-70 have never discussed bladder health with their doctors despite an estimated 33 million adult Americans having experienced incontinence symptoms such as loss of urine when coughing, sneezing, etc.; the sudden urges to urinate; urinary frequency; or the inability to empty the bladder leading to dribble.

Helen Snedegar's bladder issues began several

years ago and worsened as she aged. At 86, Snedegar first thought her issues were a byproduct of her age. Though her incontinence did not cause her issues during the day, it was during the night where the problem began taking its toll. "I was losing so much rest," Snedegar said. "And believe me, at my age I need my rest to get through tomorrow!"

The frequency with which Snedegar would have to return to the bathroom made good sleep impossible. "I might go and then in a little while have to go through the whole process again," Snedegar said. "One night it was every hour on the hour. That's when I made the decision. I decided I don't care how old I am, I'm going to do something about it."

Snedegar spoke about her issues for the first time with her family physician, who referred

her to urologist **Brian DeFade, D.O.** Dr. DeFade suggested Snedegar might be a candidate for Medtronic InterStim Therapy, which targets the communication problem between the brain and the nerves that control the bladder. "Bladder control problems can be a result of childbearing or aging, and you don't have to just live with them," Dr. DeFade said. "You have choices, including Interstim Therapy."

Medtronic was the company that developed the pacemaker, and the Medtronic InterStim Therapy system acts as a pacemaker for the bladder. During an assessment period, a percutaneous sacral nerve stimulation test (PNE Test) utilizes an external neurostimulator with implantable leads to determine if the therapy will work. If successful, a small neurostimulator is placed underneath the skin, along with the lead that stimulates the nerves. "The unit we give patients like Helen provides mild electrical pulses to stimulate nerves in the sacral area, just above the tailbone," Dr. DeFade explained. "It is believed that one possible cause of overactive bladder is miscommunication between the brain and these nerves, known as the sacral nerves. When the brain and sacral nerves don't communicate correctly, the nerves cause the bladder to function incorrectly, which can cause bladder control problems."

Snedegar experienced instantaneous results during the assessment period. Her voiding diary showed a significant improvement in her symptoms through the three days of the PNE Test. "I was so elated," she said. "I slept all night for two nights." Snedegar began using the external unit on a Thursday and by the next day she was so satisfied that her surgery to implant the small unit into her lower back was scheduled for Monday. The implantation is a same-day procedure, so Snedegar was able to return home right after the procedure having experienced "no pain whatsoever."

"During the trial period (PNE Test), if a patient's symptoms decrease by at least 50 percent and the patient is pleased with the results, that person is a candidate to receive the implantable InterStim system," Dr. DeFade said. "Patients may have to fail other therapies first, such as anticholinergic drugs or kegel exercise before their insurance companies will cover the procedure. The biggest difference between the trial assessment and long-term InterStim Therapy is the type of neurostimulator used and its location. During the trial assessment, you wear a temporary, external neurostimulator box on your waistband. In long-term InterStim therapy, the long-term neurostimulator is placed under your skin during a minimally invasive,



The InterStim therapy procedure is performed at OLBH by urologists **Brian DeFade, D.O.**, (left) and **E.W. Unnikrishnan, M.D.**

"Bladder control problems can be a result of childbearing or aging, and you don't have to just live with them."

– Dr. DeFade

outpatient procedure, so the neurostimulator is underneath the skin rather than outside your body. You control the neurostimulator with an external patient programmer that works like a remote control to turn the stimulation up and down or on and off. Helen's results during her trial were so dramatic, I knew she would be a candidate for the system."

"I'm sleeping well now," Snedegar said. "When the morning comes I'm ready to get up. It's the way I used to be when I was younger. How about that!" Snedegar reports not only satisfaction with her new "pacemaker for the bladder" but with the physician and staff that helped resolve her bladder issues. "Dr. DeFade was so good to listen to me," she said. "He wanted me to call for any questions; he didn't care how small they were to me; they were important to him."

Snedegar encourages anyone who experiences symptoms of incontinence to seek help. "The embarrassment leaves after a while," she said. "It is more important to get this corrected, and it can be corrected. I've told many of my friends during this time of having this problem that I realize we all have to live with something, but I just want everyone to know you don't have to live with this problem."

The InterStim procedure is performed at OLBH by Dr. DeFade and **E.W. Unnikrishnan, M.D.** Dr. DeFade's office can be reached at **(606) 833-6235** and Dr. Unnikrishnan can be contacted at **(606) 836-2311**.



Is your bladder controlling your life?

If bladder control problems are keeping you from enjoying your life, you're not alone. More than 33 million people in America – one in six adults – suffer from bladder control issues.

To find out if you might be a candidate for Medtronic InterStim Therapy, visit www.everyday-freedom.com.



OLBH Honors:

Cardiac:

- Five-Star Rated for Treatment of Heart Failure (2nd straight year)

Gastrointestinal (GI):

- Ranked Number One in Kentucky for GI Services
- Ranked Number One in Kentucky for GI Surgery
- Ranked Among the Top 5% in the Nation for GI Services
- Ranked Among the Top 5% in the Nation for GI Surgery
- Ranked Among Top Five in Kentucky for GI Medical Treatment
- Five-Star Rated for GI Procedures and Surgeries (3rd consecutive year)
- Five-Star Rated for Treatment of Bowel Obstruction
- Five-Star Rated for Cholecystectomy

Pulmonary:

- HealthGrades Pulmonary Care Excellence Award
- Five-Star Rated for Treatment of Pneumonia (9th straight year)
- Ranked Among the Top 5% in the Nation for Overall Pulmonary Services
- Ranked Third in Kentucky for Overall Pulmonary Services
- Five-Star Rated for Overall Pulmonary Services
- Five-Star Rated for Treatment of Chronic Obstructive Pulmonary Disease

Critical Care:

- HealthGrades Critical Care Excellence Award
- Ranked Among the Top 10% in the Nation for Critical Care
- Ranked Among the Top Five in Kentucky for Critical Care
- Five-Star Rated for Treatment of Sepsis (8th straight year)
- Five-Star Rated for Treatment of Respiratory Failure (4th straight year)



OLBH's award-winning Cardiology team



The Awards Just Keep Coming for OLBH Services...

Creating and maintaining excellent services is what we strive for daily at OLBH. The accolades and trophies are nice, but there's no better reward than helping our patients feel better.

Visit www.healthgrades.com to see the results.

Based on the 13th annual Hospital Quality in America study by HealthGrades, the leading independent healthcare ratings organization.



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