

Atlanta Medical Center

Your intown health care partner



LIVING well

Summer 2006



Summer health tips

Detecting
skin cancer

Treating
uterine
fibroids

In touch with the community

We'd like to introduce you to our Community Advisory Board members. This dedicated group of men and women meet regularly to provide us with insight about changes within our community, advise us on how we can better serve community needs and act as a sounding board for future plans.

Current members are:

■ **Allison Ashe**

Vice President of Development
Big Brothers/Big Sisters of
Greater Atlanta

■ **LaDana Latham Carter**
Remax of Greater Atlanta

■ **Stephen Clemons**
Managing Member

Sunrise Construction and
Design Company

■ **Walter O. Coffey**
President and CEO

Greater Association of Homes

and Services
for the Aging

■ **Jerica
Covington**

Assistant to the
Commissioner,
District 6,
Commissioner
Nancy Boxill

■ **Steve Foster**

Urban Advisor

Community and Economic Development
Georgia Power

■ **Charles H. Green**
Sunrise Bank of Atlanta

■ **Delmar Harrod**

Managing Partner, Business Development
Total Solutions Government Affairs and
Business Development Consulting

■ **Sharla Jackson**

Senior Assistant District Attorney,
Community Prosecutor



Atlanta Mayor Shirley Franklin was a featured speaker at the opening of the newly renovated and expanded Emergency/Trauma Center at Atlanta Medical Center. The \$7.5 million project added nine treatment rooms and provided a number of updates. Atlanta Medical Center is a level 2 trauma center.

■ **Derek Matory**
President

Neighborhood Planning Unit M

■ **Rev. Raphael G. Warnock**

Senior Pastor

Ebenezer Baptist Church

We would like to thank this group of individuals for all their hard work as we strive to make Atlanta Medical Center your intown health care partner.



**William T.
Moore, CEO**

Message from the CEO

Dear Neighbor,

There's a lot going on here at Atlanta Medical Center (AMC), and I want to take this opportunity to tell you about some of

our recent news.

This spring we conducted a telephone survey to find out what people living near AMC thought about our hospital. We followed that survey with a focus group. I must say this was an eye-opening experience. One of the most important pieces of information the survey revealed is that Atlanta Medical Center isn't very well-known in our community, despite the fact that we've been here for more than 100 years. So it's time to let you in on one of the best-kept secrets (that wasn't really a secret)—Atlanta Medical Center—your intown health care partner.

Why "your intown health care partner"? You told us that many of you call the part of town we live and work in "intown," and we want to be your health care partner. One of the things a partner does is listen. We've been doing that and will continue to listen to your ideas about how we can improve our services to better serve the needs of our community.

In late April we opened the doors of our \$7.5 million emergency room renovation. This project allowed us to increase the number of treatment rooms from 18 to 27. We were privileged to have the honorable Shirley Franklin, mayor of Atlanta, speak at our event. This much-needed expansion will help us meet the increasing need for treatment areas in our emergency and trauma department. Over the past several years, we have been treating an increasing number of emergency and trauma patients. In fact, our trauma center has one of the highest volumes of any trauma center in the state

of Georgia. Even if you don't need our trauma services, you and your family can expect quality care from our experienced emergency care team.

We've also added the equipment for stereotactic breast biopsies. There's a new medical spa, Tranquility Spa, in the Health Pavilion that provides services to our patients as well as the general public. So if you're looking for some stress relief or pampering, check it out.

If you have ideas on how we can improve or just want to learn more about the services we offer at AMC, let us know. We're here to listen. You can send an e-mail to DL-AMC-Charlottes.Web@tenethealth.com or call us at **(404) 265-6855**.



William T. Moore
Chief Executive Officer

Meet AMC's Governing Board

Our new members

Debi M. Starnes, Ph.D.

Starnes is a community and organizational psychologist and president of EMSTAR Research, Inc., an applied research firm that specializes in program evaluation. She received her bachelor's and master's degrees from East Tennessee State University in Johnson City, Tenn., and her doctorate from Georgia State University. Her professional work has concentrated on designing and evaluating programs in such diverse areas as substance abuse prevention, child abuse

prevention, childhood immunizations and training programs for state agencies. Her firm has been successful in obtaining more than \$12 million for local programs in Atlanta.

Starnes was also elected to the Atlanta City Council in 1993 and represented District 2 for 12 years.

A native of Greeneville, Tenn., she has been in Atlanta since 1981 and has been very active in community issues. She is married to Jim Emahoff, and they have one daughter, Emily. In addition to her work as a community psychologist, she and her husband operate Sugar Magnolia Bed & Breakfast in historic Inman Park.



Debi M. Starnes, Ph.D.



Steve Foster



Theresa Schroeder

Architecture Alumni Committee.

Foster holds a bachelor's degree in building construction from Georgia Tech. He is a 2003 graduate of Leadership Midtown. He and his wife, Sherie, have three grown children.

Theresa Schroeder

As community affairs director for Turner Construction's Atlanta Business Unit, Schroeder is responsible for implementing various initiatives geared toward developing relationships with minority- and women-owned businesses. These initiatives, which include technical support, training, and loan guarantee programs through government and private sources, are designed to facilitate Minority and Women Owned Business Enterprise Program participation in each Turner project.

Schroeder ensures that Turner Construction remains active in minority trade organizations, community-based organizations and schools. She works closely with the company's human resources department to execute recruiting and retention programs to ensure a diverse workforce.

Schroeder earned her bachelor's degree in communications and English from Sacred Heart University in Fairfield, Conn. She is a member of a number of organizations and special programs, including the National Association of Female Executives, National Association of Minority Contractors, the Georgia Governor's Mentor/Protégé program and the Georgia Black Chamber of Commerce. She serves on the board of directors for the National Association of Women in Construction.

Board members

A dozen men and women serve as members of the Governing Board for Atlanta Medical Center. We'd like you to meet some of our newest members. The Governing Board consists of:

- **Debbie Starnes**
Community member
- **Frank R. Don Diego, M.D.**
Physician
- **Paul L. Douglass, M.D.**
Physician
- **Daisy Harris**
CEO, West End Medical Center
- **Daniel Hillegass, CPA**
Gifford Hillegass & Ingwersen, P.C.
- **Wendell Hackney, M.D.**
Physician
- **Edward Mason, M.D.**
Physician
- **Thomas Schoborg, M.D.**
Physician
- **David M. Williams, M.D.**
CEO, Southside Medical Center
- **Steve Foster**
Urban Advisor, Community and Economic Development
Georgia Power
- **Theresa A. Schroeder**
Community member
- **The honorable Sam Zamarripa**
Georgia State Senator

Steve Foster

As an urban adviser for Georgia Power's Atlanta Metro North and Metro West Regions, Foster assists existing businesses with expansion projects and helps communities with economic development, business retention and quality growth strategies. He also advises Georgia Power on the implications of emerging growth trends in the metro area and assists with community development strategies to respond to those trends.

Foster began at Georgia Power in 1977 as an engineering associate in the construction department. He worked in construction for more than 11 years, and he joined economic development in 1990 as a senior project manager.

He is a founding member of the Georgia Biomedical Partnership, a member of the Technology Association of Georgia and the Georgia Association of Water Professionals. He also is a member of the Urban Land Institute, where he serves on the Quality Growth Task Force. He is on the executive committee for the Southeastern chapter of the American Electronics Association and the Georgia Institute of Technology's College of



Treating uterine fibroids: What women need to know

For many women it's a common problem. Noncancerous (benign) growths called fibroids grow on the wall of the uterus, causing pain and heavy bleeding. The fibroids can be very small or may grow to the size of a cantaloupe. The location of the fibroids within the uterus as well as their size help determine whether the woman has symptoms and their severity.

Fibroids typically affect women in their 30s and 40s, and as many as 20 to 40 percent of women older than 35 have some fibroids. For some reason, African American women are especially prone to fibroids, with nearly 50 percent having fibroids of significant size.

For more information about uterine fibroid embolization, call 1-888-836-3848.

Diagnosing fibroids

Fibroids are generally diagnosed during a woman's routine gynecological exam. Imaging studies, such as computerized tomography (CT) and magnetic resonance imaging (MRI), can be used to confirm the diagnosis.

If you have any of these symptoms, you should talk to your doctor about whether you might have fibroids:

- Heavy, prolonged menstrual periods.
- Unusual monthly bleeding with clots.
- Pelvic pain, including pain during intercourse.
- Pain in the back or legs.
- Bladder pressure that makes you feel like you need to urinate.
- Problems with constipation or bloating associated with pressure on the bowel.
- Abnormally enlarged abdomen.

Treatment options

For some women with mild or no symptoms, the best treatment is called "watchful waiting," where the fibroids are monitored during regular checkups.

If the fibroids are causing some of the problems listed above, your doctor may try medications including nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen, birth control pills or hormone therapy. Medication therapy often is the first line of treatment for problem fibroids.

If medications don't work, there are other options. Surgery to remove the fibroids (myomectomy) may be an option. Generally, myomectomy helps control symptoms and is about 80 percent effective. However, studies have shown that about 10 to 30 percent of the fibroids grow back after several years. The procedure can be done in several ways, with recovery time varying

from two to six weeks.

Hysterectomy, either open or laparoscopic, is commonly used for fibroids. About one-third of all hysterectomies in the U.S. are because of fibroids. However, hysterectomies are major surgical procedures and remove the entire uterus. A three- to four-day hospital stay is required, and recovery time is about six weeks.

A minimally invasive approach

Another treatment option, called uterine fibroid embolization (UFE), treats the underlying cause of the problem fibroids. Sean T. O'Brien, M.D., an interventional radiologist who practices at Atlanta Medical Center, describes the procedure: "We use a catheter to access the blood supply to the fibroid and cut off the supply of blood. By depriving the fibroid of blood, the fibroid shrinks."

Uterine fibroid embolization uses minimally invasive techniques that may help reduce recovery time and leaves the uterus intact. The doctor makes a small





cut in the skin in the groin and threads a catheter (a small, flexible tube) into the femoral artery up to the artery supplying the fibroid. A special x-ray helps guide the doctor to correctly place the catheter. Once the catheter is in place, tiny plastic particles are injected to block the blood to the fibroid.

Embolization requires an overnight stay in the hospital. Medications to control pain and swelling are prescribed. “Women may experience cramps, pain and fever following the procedure. Other rare side effects include infection and injury to the uterus that may result in a hysterectomy,”



Sean T. O'Brien, M.D., interventional radiologist

Dr. O'Brien says. A few women in their mid-40s or older (less than 2 percent) have begun menopause after UFE.

After a few days, you can resume light activities and generally resume normal activities within a week to 10 days. The majority of women treated with embolization (85 to 90 percent) have significant reduction in the heavy bleeding and pain associated with fibroids. Only in rare cases do the treated fibroids return.

In some cases, women who have been treated with UFE have been unable to become pregnant. However, the studies on fertility have not yet been confirmed.

What treatment is right for me?

If you think you may have uterine fibroids, you should talk to your primary care physician or gynecologist and discuss available treatment options. Your doctor will need to refer you to an interventional radiologist for treatment using UFE. If you'd like to learn more about uterine fibroid embolization at Atlanta Medical Center, call 1-888-836-3848.

Treating Uterine Fibroids

Learn about treatment options at our free seminar. Thursdays, Aug. 17 and Sept. 21 6:30 to 8 p.m. Health Pavilion Letton Auditorium



Did you know that more than 100 physicians representing 35 specialties have offices at Atlanta Medical Center?

If you're looking for an intown health care professional, look no farther. We can even help you with a free, confidential referral to any of these physicians. Just call us at 1-888-836-3848 or use our online physician finder at www.atlantamedcenter.com/doctors.



The doctor is in

■ Cardiothoracic Surgery

Michael Smith, M.D.

■ Colon-Rectal Surgery

Clarence Hixon, M.D.

■ Dermatology

Wesley Wilborn, M.D.

■ Endocrinology

Israel Orija, M.D.

Robert Osburne, M.D.

■ Ear, Nose and Throat (ENT)

James Fortson, M.D.

■ Family Practice

Cecil Bennett, M.D.

Paul Cox, M.D.

Delphanie Head, M.D.

Philip Nowlin, M.D.

■ Family Practice and Sports Medicine

Lawrence Golusinski Jr., M.D.

■ Gastroenterology

Celestine Maiki, M.D.

■ General Surgery

Ijeoma Acholonu-Ejeh, M.D.

Ignatius Akpele, M.D.

Celio Burrowes, M.D.

Titus Duncan, M.D.

Larry Hobson, M.D.

Edward Mason, M.D.

Brian Organ, M.D.

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Sarah Hosford, M.D.

■ Gynecology

Carla Crawford, M.D.

Gerald Rehert, M.D.

■ Gynecology/Infertility

Daniel McBrayer, M.D.

■ Hematology/Oncology

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Gerald Goldklang, M.D.

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Dennis Melton, M.D.

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F. William Dowda, M.D.

Deborah Hammond-Wickfall, M.D.

Carisa Hines, M.D.

Lonnie Jenkins, M.D.

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Khalid Iqbal, M.D.

Muhammed

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Sandea Greene, M.D.

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Wendell Hackney, M.D.

Rhonda Latif, M.D.

Min Lee, M.D.

Tracey Lemon, M.D.

John Lue, M.D.

Steven Saltzman, M.D.

Gregory Smith, M.D.

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Augustus Stephens, M.D.

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Vincent Boswell, M.D.

Eric Furie, M.D.

John Harper, M.D.

■ Orthopedics/Spine

Christopher Edwards, M.D.

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Valrie Honablu, M.D.

■ Pulmonary Disease/Pulmonology

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William Crossland, M.D.

Jonne Walter, M.D.

■ Sleep Diagnostics

Francis Buda, M.D.

■ Surgical Oncology

George Fuhrman, M.D.

■ Urology

Donald Culley, M.D.

Thomas Schoborg, M.D.

■ Vascular Surgery

David Rosenthal, M.D.

Eric Wellons, M.D.

Detecting skin cancer: Moles and marks

Although the golden rule is a good one to know and follow, there is another rule that can actually help save your life: the ABCDE rule.

The ABCDE rule helps you check any moles or marks on your skin and is useful for detecting early signs of skin cancer. According to George Fuhrman, M.D., surgical oncologist and director of the surgical residency training program at Atlanta Medical Center, skin cancer is the most common kind of cancer in the United States. "Prevention and screening can make a difference in successful treatment. It may even save your life," Dr. Fuhrman says.

Know your ABCs

The American Academy of Family Physicians explains the ABCDE rule:

- **A is for Asymmetry.** When both sides of the mole don't look the same.
- **B is for Border.** The edges of a mole are blurry or jagged.
- **C is for Color.** The color of a mole changes—if it's darker than before, the color spreads, goes away or more than one color appears.
- **D is for Diameter.** When a mole is larger than a quarter of an inch (about the size of a pencil eraser).
- **E is for Elevation.** When a mole is raised above the skin and has a rough surface.

In addition to these warning signs, you should contact your physician if you have a mole that bleeds, grows fast or itches. Also, a scaly or crusty growth on the skin, a sore that won't heal, or a spot on your skin that feels rough should be reported to your physician. These are signs that your skin is changing and could possibly indicate early skin cancer.

Follow the rules

You should examine your skin monthly. Check your head and face. Look at your neck, chest, torso and under the breasts. Inspect your arms, elbows, underarms, hands and fingernails. With the help of a friend or the use of a mirror, check the back of your neck, shoulders, upper arms, back, buttocks and legs. Last, inspect your genitals, legs, tops and bottoms of your feet, and your toenails. Look for any changes in the moles or marks that you already have, the presence of new moles or marks, or any other changes in the skin's appearance. If you find any new growths or changes, make an appointment with your physician to have them further examined.

In addition to your monthly self-checks, you should also get a skin screening during your annual physical. Screening tests are done when symptoms aren't present, because there may not be any symptoms present in the early stages of cancer. And the early stages of skin cancer are the most responsive to treatment.

So while rules can seem like they take away all the fun, some make sure that you're still around to have fun. Take a few minutes to examine your skin each month, be smart about sun protection and follow the ABCDE rule. It just may be a rule that ends up saving your life.

For more information about moles and marks or detecting early signs of skin cancer, talk to your physician or call us at **1-888-836-3848**.

To receive a free one-time-use SPF-30 sunscreen towelette, call **1-888-836-3848**.



For a free mini-first aid kit, call us at 1-888-836-3848. You must be 18 or older to receive a kit, and there is a limit of one per household.



Summer emergencies

Summers in Atlanta are made for fun in the sun, but there can be problems.

Hot days combined with extensive physical activity can cause heat exhaustion. "Heat exhaustion occurs when a person's heart and circulatory system cannot cool the body fast enough," says Mark Waterman, M.D., medical director of emergency services at Atlanta Medical Center (AMC). "Heat exhaustion can come on suddenly, sometimes causing its victims to collapse while playing a sport outside on a hot day. Once it happens, it can leave you feeling exhausted for days on end."

Some of the warning signs of heat exhaustion are dizziness, weakness and nausea. Excessive sweating, cool and clammy skin, stomach cramps, and headaches are also symptoms of heat exhaustion. If signs of heat exhaustion begin

to set in, you need to sit down, rest and drink lots of liquids.

Heatstroke is a more serious condition than heat exhaustion. Heatstroke occurs when the body system that regulates temperature shuts down from too much heat, and the condition can be life-threatening. One tell-tale sign of heatstroke is an inability to sweat. "A person suffering from heatstroke will have hot, dry skin and an exceptionally high temperature," says Toni Colvard, R.N., nurse manager of AMC's emergency services.

Eventually, heatstroke will cause the person to become uncoordinated, confused and maybe even lose consciousness. People with heatstroke need to be professionally treated as soon as possible. You can help to decrease your chances of heatstroke by staying out of the sun and drinking loads of water.

AMC's newly expanded and renovated emergency room is open for your summertime emergencies.

Summer safety tips

Parents can brush up on more summertime safety with this list:

- Never leave a child alone in a pool area, even for one second.
- Keep babies out of direct sunlight, and try to keep children out of the sun between 10 a.m. and 4 p.m., when the sun's rays are strongest.
- Apply sunscreen of at least SPF 15 at least 30 minutes before going outside.
- Make sure that the person supervising children in a pool area is familiar with CPR.
- Enclose your pool with a five-foot-tall fence and self-locking gates that are too high for children to reach.
- Just because a child is able to swim and able to keep his or her head above the water doesn't mean that he or she is safe from drowning.
- Be prepared for cars to get hot on the inside and outside. Never leave a child alone in a car.
- Provide children traveling alone or attending summer camp with a copy of their medical information.
- Keep the movable parts of playground equipment that might pinch or trap children out of their reach.
- Never leave your child alone with a dog, and seek medical attention immediately if he or she is bitten.

If you have a true medical emergency, regardless of the season, call 911. For minor emergencies, the emergency services team at AMC is ready to help.

LIVING WELL is published as a community service for the friends and patrons of ATLANTA MEDICAL CENTER, 303 Parkway N.E., Atlanta, GA 30312, (404) 265-4000, www.atlantamedcenter.com.

William T. Moore | Chief Executive Officer
Jeff Freygang | Chief Development Officer

Information in LIVING WELL comes from a wide range of medical experts. If you have any concerns or questions about specific content that may affect your health, please contact your health care provider. Models may be used in photos and illustrations.

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