

SPRING 2006

VOLUME 8, NO. 1

UCI MEDICAL CENTER SeniorHealth

INSIDE: SeniorHealth

QUARTERLY NEWS FOR SENIORS

www.ucihealth.com/seniors

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CLOCK IS TICKING FOR ENROLLMENT IN PRESCRIPTION PLAN

Have you decided yet whether to enroll in Medicare Part D, the new prescription drug program? Unless there is a last-minute extension of the enrollment deadline (pending at press time), seniors must submit their forms by May 15 or face a penalty for filing late.

Evaluate your individual needs and seek free help understanding whether the program is beneficial to you, advises Julie Schoen, an attorney with the Health Insurance Counseling Advocacy Program. For more information, call the Center for Medicare Services at 1-800-MEDICARE or go online at www.medicare.org. Locally, the Council on Aging-Orange County is assisting seniors at 1-800-434-0222 or ww.coaoc.org.



A Leg Up on Vascular Disease

Peripheral artery disease (PAD) – like its close relative, heart disease – develops slowly and quietly. An estimated 8 million to 12 million people in the United States have PAD, yet about 75 percent have no symptoms. Even those who do have symptoms often mistake their leg or hip pain after walking or climbing stairs as normal muscle fatigue or cramping.

“Even minimal PAD is an indication of plaque buildup and arterial disease elsewhere in the body, which increases the risk of heart disease and stroke,” says UCI vascular surgeon Dr. John S. Lane. Fortunately, improved screening and new treatment technologies have drastically improved the lives of those with PAD.

So what is PAD? It is a disease in which fatty plaque builds up inside the arteries of the arms and legs—the peripheral arteries—and restricts or blocks blood flow. Symptoms include pain in the legs or arms during or after exercise and changes in skin color and temperature. In severe cases, this may progress to pain at rest, ulcers, gangrene or loss of the limb.

However, older adults with sedentary lifestyles often don’t discover the problem on their own. “They might not feel anything unless they exercise vigorously or go on a longer-than-normal walk,” says Lane, who is conducting clinical research into PAD. “They have cramps or muscle soreness, but they would expect that, so they think nothing is wrong.”

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Colon Cancer: Hope with Prevention, Early Treatment

If there is such a thing as a preventable cancer, colon cancer is it. “It’s a tragedy that in this age, anyone should die from colon cancer,” says Dr. C. Gregory Albers, gastroenterologist at with the H.H. Chao Comprehensive Digestive Disease Center at UCI Medical Center.

The reason? Ordinary lifestyle modifications, such as diet and exercise, and simple screening procedures reduce colon cancer rates up to 90 percent.

“That’s the good news—there is tremendous hope,” Albers says. “Here’s a more sobering fact: A lot of people don’t get the message.”

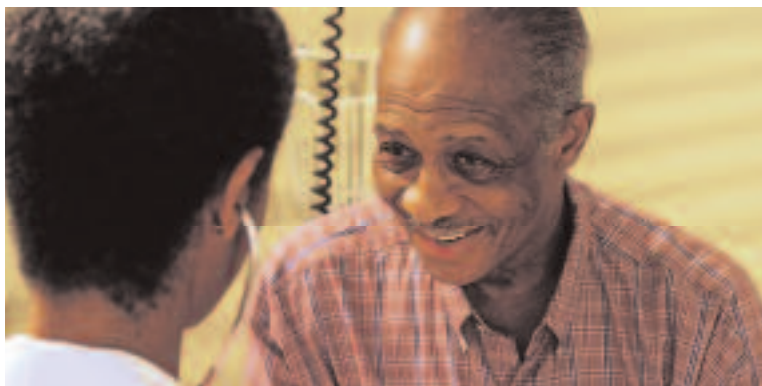
Diet and exercise alone may prevent cancer of the colon in 50 to 70 percent of people. A balanced diet should be low in fat, high in fiber and include calcium, vitamin D, selenium and folic acid. And any exercise is beneficial.

Everyone 50 and older (45 and older for African-Americans) should see a doctor for a colonoscopy, a 20-minute procedure that not only detects colon cancer, but also finds precancerous polyps. The polyps can be removed immediately, which has shown to prevent 76 percent to 90 percent of colon cancers.

Other screening methods that are possibly simpler—but less effective—include annual fecal occult blood testing alone or in combination with sigmoidoscopy, barium enema, virtual colonoscopy or fecal DNA testing.

“Anyone with symptoms, especially rectal bleeding, should be seen for a diagnostic colonoscopy,” Albers says. “Early treatment can be extremely effective. There is so much hope for these patients.”

To learn more about colorectal cancer, plan to attend Taking Charge of Your Health Care, UCI Medical Center’s annual senior health event. See registration materials in this newsletter for details.



Osteoporosis: No Cure, But Treatments Offer Relief

Treating osteoporosis is a challenge because there currently is no cure for the bone-thinning disease, only treatments for its complications. Surgical and nonsurgical procedures offer some relief.

Two surgical procedures help repair spinal bone fractures: vertebroplasty and kyphoplasty. In both, a doctor injects bone cement directly into the fracture site through a large needle-like tube called a cannula. This stabilizes the bone, relieves pain and helps the patient stand straighter.

“They are both minimally invasive procedures with very good results for pain relief,” says Dr. Laura Paré, neurological surgeon at UCI Medical Center.

The best nonsurgical therapies, according to UCI geriatrician Dr. Sonia Sehgal are:

- Exercise plus consumption of calcium and vitamin D, in addition to drug therapy.
- Biphosphonate drugs Fosamax and Actinel. They help strengthen the bones and prevent further bone loss, but must be taken with caution to prevent gastrointestinal complications.
- Forteo, an injected synthetic parathyroid hormone, which helps stimulate bone growth and increase density.
- Calcitonin, administered by nasal spray or injection, that helps prevent bone loss as well as alleviate discomfort from bone fractures.

Hormone replacement therapy, once commonly prescribed to treat osteoporosis, is now frowned upon because of excessive complications, Sehgal says.

“Weight-bearing exercise is one of the best ways to prevent bone loss,” Sehgal says. “It increases bone density, strength and balance, which reduces the risk of fall.”

Hear Dr. Sonia Sehgal discuss osteoporosis at UCI Medical Center’s annual senior health event, Taking Charge of Your Health Care, on May 16. To register, send in the card included in this newsletter.

FREE SEMINARS

TRAVEL MEDICINE

Dr. Sonia Sehgal

UCI geriatrician

Wednesday, April 26 • 11:30 a.m.

Jewish Community Center
of Orange County
1 Federation Way, Irvine

SLEEP DISORDERS

Dr. Marcel Hungs

UCI neurologist

Monday, May 8 • 10 a.m.

Lakeview Senior Center
20 Lake Road, Irvine

ACUPUNCTURE AND ACUPRESSURE THERAPY

Dr. Wadie Najm

UCI geriatrician

Friday, May 26 • 1 p.m.

Oasis Senior Center
800 Marguerite Ave.
Corona del Mar

DIABETES

Dr. Andrew Reikes

UCI endocrinologist

Wednesday, June 7 • 10:30 a.m.

Jewish Community Center
of Orange County
1 Federation Way, Irvine

SKIN CARE TREATMENTS

Dr. Garrett Wirth

UCI plastic surgeon

Wednesday, June 21 • 1 p.m.

Oasis Senior Center
800 Marguerite Ave., Corona del Mar

BALANCE DISORDERS AND FALL PREVENTION

Tudy Trgovac, OTR/L

UCI occupational therapist

Three presentations:

Wednesday, June 28 • 11 a.m.

Tustin Senior Center
200 South C Street, Tustin

Wednesday, July 26 • 10:30 a.m.

Jewish Community Center of Orange County
1 Federation Way, Irvine

Tuesday, September 26 • 1 p.m.

Florence Sylvester Senior Center
23721 Moulton Parkway, Laguna Hills

AVOIDING MEDICATION MISADVENTURES

Bradley Williams, PharmD

UCI pharmacist

Two presentations:

Tuesday, August 29 • 1 p.m.

Florence Sylvester Senior Center
23721 Moulton Parkway, Laguna Hills

Wednesday, September 13 • 10:30 a.m.

Jewish Community Center of Orange County
1 Federation Way, Irvine

For more information, visit

**www.ucihealth.com/seminars or call toll free
1-877-UCI-DOCS (1-877-824-3627).**

University Hospital: A Change on the Horizon

The new university hospital of UCI Medical Center is indeed on the rise. Until now, construction work has been largely out of sight, as workers excavated tons of dirt and poured 19,000 cubic yards of concrete into the huge pit. But starting this month, large uprights of steel will emerge from the subterranean foundation, as the structural skeleton of the new university hospital begins to take shape.

A total of 5,500 tons (11 million pounds) of steel will be used to build the seven-story tower, under construction on the north side of the existing medical center, which remains fully functional during construction. The \$371 million new university hospital is expected to open its doors in early 2009, offering the most modern, patient-friendly features and the latest in medical technology to support patient care, research and education.

For more information about UCI Medical Center's new university hospital, please visit www.ucihealth.com/newhospital. UCI thanks patients and visitors for their understanding during this time of transformation.



www.ucihealth.com/seniors

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SAVE THE DATE

Register Now!

TUESDAY, MAY 16, 2006

**7th Annual Taking Charge of
Your Health Care Conference
Crystal Cathedral, Garden Grove**

You won't want to miss Orange County's largest senior health care event. Register yourself and a friend. Look inside this newsletter for registration cards and more information.

UCIrvine

Certified Commitment to Excellence

UCI Medical Center's Stroke and Cerebrovascular Center and orthopedic hip and knee replacement program have been recertified with a "Gold Seal of Approval™" from the Joint Commission for the Accreditation of Healthcare Organizations (JCAHO), signifying compliance with the highest national standards for safety and quality of care. UCI has the only JCAHO-certified Primary Stroke Center and joint replacement program in Orange County.

Vascular Disease (CONTINUED FROM PAGE 1)

To reach more older adults for testing, UCI is participating in a vascular screening program on May 18 instituted by the American Vascular Association that focuses on detecting PAD and two related and potentially dangerous vascular conditions—carotid artery disease and abdominal aortic aneurysm. For more information about the screening, call 714-456-5453 by April 30.

Screening for PAD is easy and painless for the patient. The doctor or nurse simply takes the blood pressure in the patient's feet and compares it to the blood pressure in the arms, a test called the ankle-brachial index. An abnormal ratio indicates likely PAD.

Exercise is the most effective early treatment for PAD, especially in combination with a low-cholesterol, low-fat diet and an end to tobacco smoking. Doctors might also prescribe cholesterol-lowering drugs, aspirin and blood-pressure lowering medications.

For more severe cases, Lane says, a traditional bypass graft in the limb or a minimally invasive angioplasty or stent-placement surgery are effective. About half of PAD patients receive the minimally invasive procedure, which offers faster recovery.

PAD will be one of the topics of discussion at UCI Medical Center's annual senior health event, Taking Charge of Your Health Care, on May 16. For more information and to register, please see the card included in this newsletter.