Is It a Heart Attack or Cardiac Arrest?

What do heart attack and cardiac arrest have in common? They’re often used interchangeably, but they’re not the same. Knowing the difference could help save a life.

“Cardiac arrest is a sudden electrical problem within the heart. A heart attack occurs when there is a sudden decrease in blood flow to the heart muscle. One is an electrical malfunction and the other involves the plumbing,” says Matthew Hillis, MD, Lankenau Heart Institute cardiologist at Bryn Mawr Hospital, part of Main Line Health. Both situations are medical emergencies that can be deadly. “They can happen at the same time, but they don’t have to,” Dr. Hillis says.

When It’s a Heart Attack
A heart attack occurs when a blocked artery prevents blood from flowing to your heart. Your heart can continue beating, but the blockage forces it to work harder.

Heart attack can give you a warning: pain in your chest, arm, and/or jaw; shortness of breath; nausea; or sweating. These symptoms can occur suddenly or slowly build up. “You might also not have any symptoms,” Dr. Hillis says.

Action plan: If you or someone near you has symptoms of a heart attack, call 911. Don’t waste time driving to the hospital. Immediate treatment—often right in the ambulance—can begin working to unblock the artery and prevent long-term heart damage.

When It’s Cardiac Arrest
Cardiac arrest occurs when the heart develops an electrical abnormality and suddenly stops beating and pumping blood. Someone with cardiac arrest may be fine one minute, then collapsed on the floor the next. Cardiac arrest can occur during a heart attack, as a consequence of a heart attack years later, or spontaneously in someone who has heart disease and doesn’t know it.

Action plan: If you think someone is experiencing cardiac arrest, call 911. Act fast. If you’re in a public place, ask someone to find an automated external defibrillator (AED). Using an AED within minutes of cardiac arrest can convert the heart’s electrical rhythm back to normal.

Meanwhile, perform CPR. “Providing CPR with chest compressions, even without the mouth-to-mouth breathing part, is critical until an AED or paramedics arrive,” Dr. Hillis says. Patients with cardiac arrest can be treated with a permanent implanted defibrillator, which automatically jolts the heart if it stops beating again.

TAKE THESE 3 TIPS TO HEART

Heart attack and cardiac arrest can be preventable. Here are three ways to keep your heart healthy:

1. GET AN ANNUAL CHECKUP. Well-patient checkups can help spot treatable risk factors that can lead to heart attack and cardiac arrest, such as high blood pressure, high blood sugar (diabetes), and high cholesterol. If your doctor recommends medication as part of your prevention plan, take it as prescribed.

2. QUIT SMOKING. Smoking increases the likelihood of plaque buildup in your arteries. It’s the number one cause of premature death.

3. EXERCISE REGULARLY. Physical activity, such as brisk walking, helps reduce blood pressure, keeps your weight in check, and makes you feel better, too. Who couldn’t use a well-being boost?

SAVE THE DATE!

HEALTHY MIND, HEALTHY HEART

The Women’s Heart Initiative presents “Healthy Mind, Healthy Heart.” Join us for an inspiring evening with Laura L. Barry, motivational speaker, author, and life strategist. She will be joined by our dynamic team of female cardiologists at Main Line Health’s Lankenau Heart Institute. Our physician panel will answer your questions related to stress on the heart and how to support a heart-healthy life. Fee: $12.

• November 8, 5:30–8:30 pm, Lankenau Medical Center

WED 8 NOV
Playing It Safe: Exercising Over Age 50

Getting older is no reason to slow down. Experts agree that staying active has many benefits for both your body and your mind. But as we age, it’s also important to exercise safely to avoid injury.

Christopher Dodson, MD, orthopedic surgeon at Bryn Mawr Hospital, and David Vegari, MD, orthopedic surgeon at Lankenau Medical Center, both part of Main Line Health, offer their top tips for staying active without getting hurt.

1 LIMIT LONG-DISTANCE RUNNING. Dr. Vegari says his top tip is to limit running to two to three times a week for 3 miles at most. “The pounding action of running is problematic for the knees,” he says. Instead, he suggests getting a cardio workout in other ways, such as by using an elliptical machine or bicycling, which are much safer for the knees.

2 CROSS-TRAIN. Dr. Dodson suggests cross-training as one of the best ways to avoid overuse injuries that are common with aging. “It’s important to mix it up and not just do one type of exercise,” he says. Dr. Dodson recommends a weekly exercise program that consists of at least one day of flexibility exercises such as yoga or stretching, one day of low-weight (5 lb. or less) strength training, and one day of aerobic training, for an hour each.

3 WARM UP AND COOL DOWN. “As we age, our tendons and muscles get less flexible, and we’re more prone to injury,” says Dr. Dodson. This makes a proper warm-up and cooldown especially important. He recommends starting and ending your workout with a few minutes of light jogging or stretching.

4 KEEP CORE MUSCLES STRONG. “These large muscles act as shock absorbers and help prevent injury to tendons and joints,” says Dr. Vegari. For example, strengthening the quadriceps will help prevent knee injuries, and strengthening your core muscles with sit-ups or yoga can help prevent back problems.

Diet Soda and Stroke: The Risk Is Real

A recent study published in the journal Stroke found a link between drinking diet soda and an increase in stroke risk. In the study, which included more than 4,000 people older than age 45, drinking one can of diet soda or more each day was associated with a three times greater risk for stroke and dementia over 10 years, compared with people who didn’t drink artificially sweetened beverages.

If you sip diet soft drinks on a regular basis, you may be concerned about what this means for your health. “There’s long been a suspicion that diet sodas may be harmful,” says Stephen Gollomp, MD, neurologist and Louis & Elizabeth Pipi Endowed Chair in Neurology at Lankenau Medical Center, part of Main Line Health. “This is just one more study that points in that direction.”

Dr. Gollomp says although the study is epidemiological, which means it can define a possible association but cannot explain the exact cause and effect, the results are still worrisome. He says the takeaway is to be cautious about diet soda. “Ideally, I would say it is best not to drink it at all, but if you must, limit yourself to one 12 oz. soda a day.”

Dr. Gollomp notes that there are other things that have a greater impact on your stroke risk, such as smoking, diabetes, or high blood pressure. “These are obviously more important risk factors, but not drinking diet soda is one more risk factor you can control.”

Keeping You Moving
Dealing with bone or joint pain? A Main Line Health orthopedic doctor can help get you back into action. Find a doctor or learn more about the conditions we treat at mainlinehealth.org/orthopedics.
Do you try not to laugh or sneeze in public? Stay close to the restrooms at social gatherings for fear of having an accident? If so, you are in good company. Half of all women experience some kind of pelvic floor disorder—when the muscles and tissues that hold the pelvic organs in place are weakened or injured. Symptoms vary but often include having to urinate urgently or frequently, or feeling that you need to have several bowel movements during a short period of time.

Thankfully, there’s a variety of effective treatments for pelvic floor problems, and Main Line Health experts can help.

“Bladder control issues and pelvic organ prolapse—when the pelvic muscles can no longer support one of the pelvic organs—are the two most common pelvic floor disorders. Childbirth increases the risk, but anyone can develop them,” explains Marc Toglia, MD, urogynecologist and Chief of Female Pelvic Medicine and Reconstructive Pelvic Surgery for Main Line Health. “It’s important to know these disorders are very treatable.”

Get Help Early
When it comes to pelvic floor disorders, don’t be embarrassed to tell your doctor as soon as you experience a problem.

“The sooner a woman seeks treatment, the quicker and easier that treatment is,” says Deborah Wiegand Snyder, physical therapist at Bryn Mawr Rehab Hospital, part of Main Line Health. “If you notice even a dribble of urine when you cough, sneeze, or laugh, talk with your doctor. Typically, these problems don’t improve on their own.”

Snyder, who works with Dr. Toglia, is specially trained in helping women overcome pelvic floor problems with physical therapy such as bladder retraining, biofeedback, electrical stimulation, targeted exercises, and massage. She also counsels women on how lifestyle changes can affect pelvic floor health.

Modify Your Diet and Exercise
“Lifestyle factors can play a major role in both preventing and treating pelvic floor problems,” explains Snyder. “For example, maintaining a healthy weight can avoid extra pressure on the pelvic floor. And
developing a strong core through exercises like Pilates or yoga strengthens the entire pelvic area, which can improve or prevent problems.”

Snyder also helps women learn how to identify and reduce bladder irritants in their diets such as caffeine, alcohol, artificial sweeteners, and acidic foods like grapefruit and tomato sauce.

“Sometimes one appointment is all it takes to correct a problem or learn how to prevent one,” says Snyder.

Know Your Options

Although some women are successfully treated with physical therapy alone, others require surgery.

“Surgical treatment has improved significantly in the past 20 years, resulting in less invasive and more successful surgical options,” says Dr. Toglia. “The key is to find a urogynecologist with expertise and experience in treating the problem.”

Dr. Toglia and his team perform a number of advanced surgical procedures for stress urinary incontinence, pelvic organ prolapse, and more.

“Treatment is focused on the underlying cause of the pelvic floor problem,” explains Dr. Toglia. “Your sister or friend may have the same symptoms, but the causes may be different. That’s why our treatment of each patient is unique.”

4 WAYS TO DECREASE YOUR RISK

Pelvic floor disorders are common, but you can lower your risk. Here are four key steps to take.

1. MAINTAIN A HEALTHY WEIGHT.
   Being overweight increases your risk of developing a pelvic floor disorder, and extra weight can make symptoms worse.

2. EAT A HEALTHY DIET.
   Include lots of fluids and high-fiber foods. Try eating 25 to 30 grams of fiber per day. This can keep your bowels functioning normally, preventing constipation. Constipation and chronic straining during bowel movements can stretch some of the tissues of the pelvic floor, so preventing constipation can help reduce the risk of developing some pelvic floor disorders.

3. WORK OUT YOUR PELVIC FLOOR.
   Pelvic floor exercises, or Kegel exercises, help keep pelvic floor muscles toned, decreasing your risk of developing a disorder. To do Kegel exercises, lie on the floor and squeeze the muscles you would use if you were trying to stop yourself from passing gas. Pull in these pelvic muscles and hold for three seconds, then relax for three seconds. Work your way up to 10 or 15 repetitions of this, three times a day.

4. AVOID TOBACCO.
   People who smoke may develop a chronic cough, which puts stress on the pelvic floor. Talk with your doctor about getting help to quit.

Take Charge

At Main Line Health, our female pelvic medicine team offers both surgical and nonsurgical treatments to help you get back to living your life more fully. Don’t wait to get help. Learn more about pelvic conditions and find the right doctor for you by visiting mainlinehealth.org or calling 1.886.CALL.MLH. In addition, Bryn Mawr Rehab offers pelvic floor outpatient therapy in Collegeville, Exton, Media, and Wynnewood. Call 484.596.5000 or visit mainlinehealth.org/pelvicfloorrehab.
WELLNESS AND PREVENTION

Health Screenings
With The Food Trust, Lankenau Medical Center is sponsoring seven large Philadelphia farmers’ markets this fall. On market days, health educators provide free nutrition information, seasonal recipes, and family wellness activities. They also offer blood pressure screenings for adults and provide health information and connections for follow-up care. For market locations and dates, visit mainlinehealth.org/farmersmarkets.

Live Healthy Seminars at Free Library of Philadelphia
Lankenau Medical Center has joined with the Free Library of Philadelphia to offer Live Healthy Seminars to families at the Wynnewfield and Overbrook branches. Each seminar is nutrition-focused and highlights the Deaver Wellness Farm. Blood pressure screenings are also offered for adults. For dates, visit mainlinehealth.org/freelibrary.

Mindful Eating
What you eat may not be as important as why you eat when it comes to maintaining a healthier weight. Led by Gretchen Skwer, registered dietitian.
● October 11, 6:30–7:30 pm
Main Line Health Center
at Exton Square

Stay Healthy with Talbots and Paoli Hospital
Warm up for winter with modern, classic styles and a discussion on heart-healthy, waistline-friendly winter recipes. 10% of pretax sales donated to Paoli Hospital Auxiliary.
● October 12, 4:00–7:00 pm
Talbot’s in Paoli

Cooking with a Mediterranean Flair
A culinary nutrition session on the health benefits of the Mediterranean diet, complete with recipes and food tastings. Led by Judy Matusky, RDN, LDN. Fee: $10.
● October 24, 6:00–7:30 pm
933 Haverford Road, Bryn Mawr

SmokeFREE
Main Line Health’s FREE six-week behavior modification program is designed to help smokers quit. Participants may be eligible for free nicotine replacement therapy. Call 484.227.FREE to register.

Registration is required for most programs unless otherwise noted.
To register for an upcoming event in this calendar, call toll-free 1.888.876.8764 or visit mainlinehealth.org/events, where you’ll find a complete list of classes.

CHILDBIRTH AND CHILD CARE

We’re here to help you prepare for your newest addition with a variety of classes.

Preparing for Childbirth and One-Day Classes
Preparation for labor and delivery is offered in this Lamaze-type class. A tour of the hospital maternity unit is included. Schedule this class at approximately eight months of pregnancy. Class size is limited; please enroll early. Fee: $110.

Prenatal Breastfeeding
Learn the steps to successful breastfeeding. Partners encouraged to attend. Fee: $45.

Baby and You Series
This class increases confidence in new parents in caring for their babies. Class includes a visit from a Main Line Health pediatrician. Please enroll early. Fee: $90.

Preparing for Multiples
For those expecting multiples, learn about birth and postpartum. Fee: $45.

Advanced Comfort Measures
Beyond breathing and relaxation. Fee: $45.

Sibling Preparation
For 3- to 7-year-old siblings to learn about becoming a big sister or brother. Fee: $30 for one child; $10 for each additional child.

Keeping Baby Safe
Creating a safe and healthy environment. Fee: $45.

The Happiest Baby
Learn ways to calm a crying baby. Fee: $90.

Grandparents as Sitters
Designed for grandparents caring for their grandchildren ages newborn to 6 years. This course covers safety, child care equipment, CPR, and choking. Fee: $40/person, $60/couple. Held at Riddle Hospital.
● September 23, 8:30 am,
● November 18, 8:30 am

Safe Sitter Babysitting
An intensive one-day training program for boys and girls ages 11 through 14. Adolescents learn how to care for younger children and prevent injuries while babysitting. Held at Riddle Hospital.
● November 24, 9:00 am
● December 27, 9:00 am

DISEASE MANAGEMENT

Diabetes and You
This daytime and evening program held at Riddle Hospital is designed to help you gain better management of diabetes. Cost is covered by most insurance companies. To register, call 484.227.3769.
At 12:30 pm:
● October 11, 18, 25
● November 8, 15, 29
● December 6, 13, 20
At 6:00 pm:
● October 10, 17, 25
● November 7, 14, 29

Better Breathers Club
Monthly support group meets Wednesdays 10:00 to 11:30 am at 101 South Bryn Mawr Avenue, Bryn Mawr. Call 484.337.3358 or email mullalya@milhs.org to register.
Prediabetes
This diagnosis is a wakeup call that you’re on a path to diabetes. But it’s not too late to turn things around. Led by Janet Wendle, Diabetes Program Manager.
- October 3, 6:30–7:30 pm
Main Line Health Center at Exton Square

Diabetes 101
Learn the symptoms, causes, treatments, and tests for Type 2 diabetes. Led by Janet Wendle, Diabetes Program Manager.
- November 7, 6:30–7:45 pm
Main Line Health Center at Exton Square

Look Good, Feel Better
Women being treated for cancer are invited to this free program. Get information on makeup, wigs, head wraps, and more! Registration required; call 1.800.227.2345.
- November 6, 10:00 am
933 Haverford Road in Bryn Mawr
- October 16, 11:00 am
Riddle Hospital

Taking Care of Your Heart
Join Donald Ferrari, MD, cardiologist, for prevention tips and information about new and innovative procedures for heart disease and stroke.
- September 26, 6:30–7:30 pm
Main Line Health Center at Exton Square

Wound Healing
Learn about the major strides being made in wound healing, led by Sharon Hannum, Wound Healing Program Manager.
- October 24, 6:30–7:30 pm
Main Line Health Center at Exton Square

FOR OLDER ADULTS

Senior Entertainment
Fun and informative evening for the over-60 crowd. Light snacks served. Held 5:00–6:30 pm at Paoli Hospital. Fee: $5/person.
- September 27: Watergate
- October 18: Aaron Burr

Senior Suppers
An evening of dinner, conversation, and a healthy living seminar for the over-60 crowd. Fee: $7/person.
At Paoli Hospital, 5:00–7:00 pm:
- October 4
- November 6

At Riddle Hospital, 4:30 pm:
- September 27
- October 25
- November 29

A Matter of Balance
Eight-week program provides strategies to reduce the risk of falling and remain active and independent. Registration required; for Paoli Hospital, call 484.565.8328. For other locations, call 1.888.876.8764.
- Thursday, September 28 to November 16, 10:00 am–12:00 pm
933 Haverford Road in Bryn Mawr
- Thursday, September 28 to November 16, 1:30–3:30 pm
Paoli Hospital
- Tuesdays, October 3 to November 21, 2:00–4:00 pm
Lankenau Medical Center
- Mondays, October 16 to December 4, 1:00–3:00 pm
Paoli Hospital

Understanding Your Risk for Falls
Reduce your fear of falling and learn prevention strategies. Join us to learn how to keep the spring in your step, with Lisa Eckenrode, trauma injury prevention and outreach coordinator at Paoli Hospital.
- September 20, 10:00–11:00 am
Paoli Hospital

Falls Prevention
Keep the spring in your step! Reduce your fear of falling and learn fall prevention strategies with Donna Levan, Orthopedic Program Manager, Paoli Hospital.
- October 16, 6:30–7:30 pm
Main Line Health Center at Exton Square

Healthy Steps for Older Adults
Evidence-based falls prevention program for adults 50 and older that assesses and discusses fall risks. Two-day program from 9:00 am to 12:00 pm; you must attend both sessions.
- November 6 and 7, Paoli Hospital
- December 11 and 13, Paoli Hospital

Mature Driving AARP
Safety program addresses the challenges of drivers older than 55. Fee: $15/person AARP members; $20/person nonmembers. Checks made out to AARP. The full course is over two days with four hours per day. You must attend both classes to be certified. Registration required.
- September 20 and 21, 10:00 am
933 Haverford Road in Bryn Mawr
- October 2 and 3, 9:00 am
Paoli Hospital
The renewal course is one four-hour session. You must bring proof that you attended the full course previously.
- October 12, November 9, or December 14, 9:00 am, Riddle Hospital
- November 8, 10:00 am,
933 Haverford Road in Bryn Mawr
- November 13, 9:00 am,
Paoli Hospital

CPR AND FIRST AID

CPR Heartsaver AED
This American Heart Association course teaches CPR and AED use in adults and children, relief of choking in adults and children, and CPR and relief of choking in infants. Participants receive certification upon completion that is valid for two years. Fee: $65. Held at Riddle Hospital.
- November 25, 9:00 am

COMMUNITY PROGRAMS

10th Annual Carol H. Axelrod Memorial Blood Drive
The Carol H. Axelrod Memorial Blood Drive works to ensure that blood products are always available for those who need them. The drive is heading toward a big milestone—saving as many as 10,000 lives since 2008! Schedule your appointment to donate by emailing info@chablooddrive.org.
- October 9 and 10
Lankenau Medical Center

Girls’ Night Out
Gingy’s of Malvern will showcase fall fashions. Tapas, sweets, and door prizes. Donation of $15 benefits Nursing Excellence Program. Call 484.476.2173.
- September 27, 4:00–7:30 pm
Lankenau Medical Center

Perinatal Loss Service of Remembrance
All those who have experienced a perinatal loss are welcome, regardless of how long ago or where it occurred.
- October 15, 2:00–4:00 pm
240 North Radnor Chester Road, Radnor

The Opiate Crisis and Treatment Options
Join us for an overview of the current opiate and overdose epidemic, background and statistics, and where we go from here, led by Jessica Cirillo, Mirmont Treatment Center.
- October 19, 6:30–7:30 pm
Main Line Health Center at Exton Square

All About Strokes
Learn about the causes, treatment, and prevention of stroke. With Lisa Springer, manager, Paoli Hospital Stroke Program.
- October 30, 6:30–7:30 pm
Main Line Health Center at Exton Square

Caring for Aging Parents
Get tips on caregiving and planning ahead, led by Gloria Recchi, Main Line Health HomeCare & Hospice.
- November 8, 6:30–7:30 pm
Main Line Health Center at Exton Square

Back and Neck Pain
Learn some simple ways to lessen the likelihood of back and neck injury. Body mechanics and treatment options will be covered by Donna Levan, Orthopedic Program Manager, Paoli Hospital.
- November 13, 6:30–7:30 pm
Main Line Health Center at Exton Square

Relapse and Relapse Prevention
Learn about relapse syndrome and prevention skills to produce better outcomes, led by Jessica Cirillo, Mirmont Treatment Center.
- November 29, 6:30–7:30 pm
Main Line Health Center at Exton Square
Chances are, breast cancer is on your radar. But lung cancer? Maybe not so much. Still, it should be, especially if you’re a current or past smoker. Every year, more than 40 percent more women die from lung cancer than from breast cancer in the U.S., according to the American Cancer Society.

Fortunately, Main Line Health offers a screening test—the low-dose computed tomography (CT) scan—that can help monitor the health of your lungs. The test has been shown to reduce the risk of lung cancer death by 20 percent. “Lung CT screening is a breakthrough in identifying lung cancer early, when it’s most treatable,” says Patrick Ross, MD, PhD, thoracic surgeon and System Chief of Surgery at Main Line Health.

The Inside Story
Low-dose lung CT uses an extremely low dose of radiation to take an image of your lungs. It can potentially identify tumors that are as small as 2 to 5 millimeters—the size of the tip of a crayon or the head of a pencil eraser. The screening involves lying on an exam table, which slides in and out of a short tunnel. The scan is painless, doesn’t require intravenous contrast, and takes just minutes.

Combined with special software, the scan allows radiologists to precisely identify the size, shape, and position of any lung tumors. If something is found on your scan, your Main Line Health team coordinates with your primary care doctor and specialists to make sure you get the follow-up care you need. Small tumors are tracked over time with repeat scans. Larger tumors require more extensive diagnostic testing.

Are You a Candidate for Lung CT?
Low-dose lung CT is recommended for men and women who are smokers with at least 20 “pack years” of cigarette exposure (this means smoking 20 cigarettes per day for 20 years). Even if you quit smoking years ago, you’re still a candidate for low-dose lung CT.

Main Line Health Recognized for Cancer Care
The Commission on Cancer (CoC), a quality program of the American College of Surgeons, has granted Three-Year Accreditation with Silver-Level Commendation to Main Line Health Cancer Care. To earn this accreditation, a cancer program must meet 34 quality care standards, be evaluated every three years, and maintain levels of excellence in the delivery of care.

“This award reflects the incredible work and dedication of our oncology team across our system,” says Michael Walker, MD, thoracic surgeon and Main Line Health Cancer Care Medical Director. “Our cancer experts focus on providing high-quality care, ensuring our patients have access to advanced technology for the best possible outcomes.”
Help—and Hope—for Rheumatoid Arthritis

Early diagnosis of rheumatoid arthritis (RA)—an autoimmune disease in which the body’s own immune system attacks healthy tissues—can help slow down devastating joint damage.

“Treatments for RA have advanced tremendously. We can now help people return to their active, busy lifestyles,” says Jennifer G. Kwan-Morley, MD, a board-certified rheumatologist at Paoli Hospital, part of Main Line Health. “The earlier RA is recognized and treated, the better the long-term outcomes. People are less likely to have erosive disease (the first step to joint destruction) and joint deformities.”

RA affects 1.3 million Americans. It’s more common in women than men and often strikes people in their 40s, 50s, and 60s. “If you have worrisome signs such as warmth, swelling, or redness in your joints, or morning stiffness that lasts an hour or more, you should see a rheumatologist for an evaluation,” Dr. Kwan-Morley says. Blood tests and joint X-rays can help determine if it’s RA. Treatment usually includes medications along with rest and exercise.

At the Lankenau Institute for Medical Research (LIMR), part of Main Line Health, scientists are focused on new RA therapies, investigating an enzyme called IDO2. In a recent study published in the journal Clinical Immunology, lead author Lauren Merlo, PhD, a research assistant professor, and a team of scientists led by associate professor Laura Mandik-Nayak, PhD, found that an antibody therapy greatly reduced IDO2’s ability to provoke joint-destroying inflammation in preclinical models.

“We are now looking at human tissue samples to see whether IDO2 works the same way in people with RA,” Dr. Mandik-Nayak says. “If it does, then IDO2-targeted therapies have great potential to prevent or slow the disease process of RA—potentially with fewer side effects than current treatments.”

Preventing falls at home can seem basic: Make sure you’ve got the right nonskid rugs, install guard rails for older adults ... but despite increased awareness around efforts like these, falls are still a common problem. In fact, according to the National Council on Aging, an older adult dies from a fall every 19 minutes.

“Falls are the leading cause of injury among older adults,” says Erin Kemm, physical therapist with Bryn Mawr Rehabilitation Hospital, part of Main Line Health. “Many patients and their families don’t realize there are some simple steps they can take to decrease the risk of a fall around the home.”

Here are four tips that can help:

1. **Check your medication.** Some medications cause dizziness, which could increase the risk of falling. Talk with your primary care doctor if you’re experiencing this.

2. **Get moving.** Aim for exercises that promote slow movements to help improve your balance and coordination. Try low-intensity workouts like walking, swimming, or yoga.

3. **Skip the slippers.** High heels and sandals aren’t the only shoes that put you at greater risk for falling. Try to avoid wearing slippers or socks when walking around the house. Opt for a pair of supportive shoes with nonskid soles.

4. **Let there be light.** It’s easy for anyone to fall in the dark. Keep lamps within reach of the bed or sofa, and install night lights in the bedroom and bathroom.

Let Main Line Health help you reduce your risk of falls. For a full listing of upcoming fall prevention and balance programs, visit mainlinehealth.org/events.
May DeGeorge was in a tough situation. After total knee replacement surgery at Bryn Mawr Hospital, part of Main Line Health, she was unable to tolerate strong pain medications because of gastrointestinal issues.

The medications made her so nauseous that she was unable to finish a physical therapy session the day after surgery. She returned to her hospital room feeling defeated and miserable.

Then, a nurse came by and asked if she’d like a Reiki treatment. DeGeorge had signed up for Reiki while completing her presurgical paperwork. In this therapy, an experienced practitioner uses touch to channel energy into the patient in order to encourage healing or restore well-being.

“The nurse began the Reiki treatment with aromatherapy, using essential peppermint oil to ease my nausea,” DeGeorge says. “Then she channeled energy through her hands to my body, and 20 minutes later, I felt like I was transported somewhere else. It renewed my confidence, and I felt determined to get through recovery.”

The Right Touch
Reiki and aromatherapy are two of the integrative therapies offered to Main Line Health patients at no cost. Other therapies may include therapeutic music, pet visitation, art therapy, and guided imagery and are available across all Main Line Health locations.

Ann Blaney, BSN, RN-BC, Clinical Coordinator of Integrative Therapies at Bryn Mawr Hospital, says that integrative therapies blend “high-tech” with “high-touch” and address a patient’s mind, body, and spirit.

Main Line Health embraced integrative therapies several years ago, when Barbara Byrne Notte, RN, BSN, HN-BC, a Reiki master teacher and certified holistic nurse at Bryn Mawr Hospital, conducted a research project on the value of Reiki therapy for patients.

“The project enabled us to prove that Reiki encourages the body’s healing ability, offers pain relief, and promotes relaxation,” says Notte.

Since then, more than 300 nurses across all Main Line Health hospitals have received aromatherapy training, and more than 50 nurses have been Reiki certified.

Power to Ease Pain
Integrative therapies are also being considered as an adjunct to pain management in the face of the current opioid crisis.

“For example, about 74 percent of patients who receive Reiki treatments report a decrease in pain and anxiety,” says Blaney. “We offer these integrated services when people need them most. Our goal is to provide a superior patient experience, and sometimes that means a relaxing hand massage or Reiki treatment to help our patients feel better in the hospital.”

Caring for Body, Mind, and Spirit
To learn more about our holistic approach to patient care, visit mainlinehealth.org/integrativetherapy.

HEALING THROUGH MUSIC
Donna Streisfeld doesn’t mind if a patient falls asleep while she’s playing the harp at his or her bedside.

As a certified music practitioner with Main Line Health’s Integrative Therapies program and harpist at Bryn Mawr Hospital, Streisfeld is trained to work with patients in a therapeutic setting. Depending on the needs of the patient, she plays a variety of soothing music. Her goal is to relax patients enough that their pain and anxiety lessens.

“Most patients and their families are surprised but delighted when they hear live music,” she says. “When people are in emotional or physical pain, the sound can take them out of the here and now, and that’s a special experience in a hospital setting.”
Advance Care Planning: Have You Made the ‘Wish List’ That Truly Matters?

Wish lists for gifts are common. But if you’re like most people, you haven’t created the wish list that can matter the most to you and your loved ones: an advance care plan.

An advance care plan states your wishes about your future medical care. It’s used if you’re unable to speak for yourself due to injury, illness, or disease. According to Seth Rubin, MD, primary care doctor with Bryn Mawr Family Practice, part of Main Line HealthCare, advance care planning is “truly a gift to your loved ones.” It spares them the distress of making decisions on your behalf if you’re incapacitated. “When people are already upset in these situations, it can be extremely difficult to determine a course of action for someone they love,” explains Dr. Rubin. But with an advance care plan, you’ve already stated what kind of care you want. Knowing this makes things easier for everyone—patients, family, and doctors.

Be Your Own Advocate
Understandably, it’s difficult to think about having a debilitating condition. But not facing that possibility doesn’t make it go away. It just means someone else will be burdened with making the hard choices.

The technologies of modern medicine can extend life. But it may not be a quality of life that matches your values and beliefs. Should I have CPR if my heart stops? What about living on a ventilator or feeding tube? How do I feel about palliative care or hospice? Advance care planning prompts you to think through your preferences—before decisions need to be made.

“Ideally, every patient should be their own advocate … empowered to consider their choices, talk about them with loved ones, prepare their documents, and make sure their doctor is aware,” says Dr. Rubin.

Involving Your Doctor
The right time to create an advance care plan is now, says Karl Ahlswede, MD, FACS, Medical Director of Palliative Care at Bryn Mawr Hospital, part of Main Line HealthCare. He recommends people do an advance care plan when they turn 18, then renew it every five years as long as they’re healthy, or every two years if not. After age 70, it’s best to renew your plan every year.

An advance care plan does no good if it’s hidden away. Your loved ones and your doctors should understand your wishes and have copies of your plan. In fact, your primary care doctor is there to help guide you through the process. Don’t hesitate to bring up the topic at your next checkup. Or schedule a separate appointment to have the conversation.

Of course, no form can capture every possible situation that may arise. “That’s why discussions are such an important part of the process,” says Dr. Ahlswede.

Start Planning with Our Free Guide
To help you prepare your advance care plan, Main Line Health offers a free guide and forms that are easy to read and understand. Download them at mainlinehealth.org/advancecareplanning. Or phone 484.337.4144.

Know the Terms
Living will, advance directive, DNR, POLST ... there are several ways to document and communicate your advance care plan. Learn more about your options at mainlinehealth.org/advancecareplanning.
Most people who get the flu feel sick for several days, then fully recover. However, the flu can often cause serious complications, including pneumonia, inflammation of major organs, and even death. While some patients such as children, the elderly, and those with chronic illnesses have an increased risk of becoming severely ill if they get the flu, it can happen to anyone. But there is a way to improve your odds of staying flu-free.

What the Research Shows
Getting a flu shot reduces your risk of catching the flu. Now, new pediatric research shows getting vaccinated saves lives.

In a recent study reported in the journal Pediatrics, researchers found that of the pediatric patients who died of flu, only 26 percent were vaccinated against it. Analysis of the research showed that getting a flu shot could prevent about two-thirds of childhood deaths from the flu.

Your Best Shot
The Centers for Disease Control and Prevention recommends that everyone ages 6 months and older get an annual flu vaccine.

“Both children and adults should get a flu shot every year,” says Anthony E. Di Marco, DO, primary care physician at Main Line Health Center in Concordville. “It’s important to remember that the viruses that cause the flu are always changing. The flu vaccine that’s available each year is designed to protect against the most prevalent flu viruses expected that year. It is our best defense against a flu epidemic.”

Most U.S. Kids Who Die of the Flu Aren’t Vaccinated

Children ages 6 months to 8 years who are getting vaccinated for the first time or who have previously received only one dose of the flu shot need two doses. The first dose should be given as soon as the vaccine becomes available—usually in October. The second dose should be given at least 28 days after your child receives the first one. If your child needs two doses and only receives one, he or she will have less or possibly no protection at all against the flu that year.