Why you need mammograms

Weinberg medical plaza, Kailua, HI 96734

KIDNEY STONES

GET RELIEF AT CASTLE 24/7

BY MELE POCHEREVA

IF YOU ARE AMONG THE ESTIMATED 10 PERCENT OF AMERICANS DIAGNOSED WITH KIDNEY STONES AT SOME TIME IN THEIR LIVES, YOU CAN APPRECIATE HAVING access to timely treatment for this painful urological disorder. Castle Medical Center’s newly expanded lithotripsy services bring 24/7 convenience for kidney stone patients.

Until this year, Castle shared a mobile lithotripter with other Oahu hospitals, offering outpatient kidney stone treatment one day every other week. Now, with its own lithotripter located in the hospital, Castle provides treatment on an on-call basis.

“Castle’s lithotripter is one of only two such machines on the island,” says David Kuchenbecker, M.D., a board-certified urologist with Castle Medical Center. “Although kidney stones usually aren’t an emergency, it’s great to have lithotripsy treatment available in Windward Oahu when our patients need it, not just twice a month.”

HOW IT WORKS

For those unfamiliar with lithotripsy, this nonsurgical treatment for kidney stones uses high-energy shock waves to break up stones into sand-size particles so that they can easily pass through the urinary tract.

The full name of the procedure is called extracorporeal shock wave lithotripsy, or ESWL, meaning the treatment is administered from outside the body. In use since the mid-1980s, lithotripsy revolutionized kidney stone treatment and has replaced surgical treatment in the majority of cases.

Today, more than a million people in the United States are treated with lithotripsy each year, according to the American Urological Foundation.

While older lithotripters had patients recline in a water bath while the shock waves were transmitted, today’s bathless units use a water-filled cylinder placed under the patient’s back at kidney level.

Performed under anesthesia, physicians use X-rays to triangulate the exact position of the stone and direct the focus of the shock waves. Dr. Kuchenbecker says. Firing off a sort of underwater sparkplug within the cylinder creates the waves.

FAST RELIEF

Until lithotripsy, people with kidney stones could anticipate a painful surgery and a lengthy recovery period. Thanks to lithotripter technology, most kidney stone disorders—depending on the size and location of the stone—now only require one to two hours of outpatient treatment.

“Lithotripsy has an 80 or 85 percent success rate in breaking up the stones, and the severe pain is usually alleviated right away,” Dr. Kuchenbecker says. “Although the patient will have some discomfort and bruising after the procedure, it is much safer and simpler than having an operation.”

David Kuchenbecker, M.D., has been affiliated with Castle Medical Center since 1989. Originally from Wisconsin, he completed medical school at the University of Wisconsin–Madison and then completed his medical residency at the University of Texas Health Science Center at Houston. His Windward Urology offices are located in the Kailua Professional Center I.

LEARN MORE ABOUT LITHOTRIPSY. CALL DAVID KUCHENBECKER, M.D., AT 261-4884.
MAMMOGRAMS

WHY YOU NEED TO GET THEM

If you’re a woman, consider this entire article a reminder—a reminder to protect your health with regular mammograms.

These low-dose x-rays help find breast cancer early, when tumors are still too tiny to feel and treatment is most likely to be successful.

In fact, the widespread use of mammograms is a major reason why, since the 1990s, the number of women dying from breast cancer has dropped steadily in this country, the American Cancer Society (ACS) reports.

“Quite simply, mammograms save lives. Research tells us that a woman who has regular mammograms can reduce her risk of dying from breast cancer by 30 percent or more,” says Debbie Saslow, Ph.D., director of breast and gynecologic cancers for the ACS.

This protection is why the ACS advises women to begin having yearly mammograms starting at age 40.

If you’re at high risk for breast cancer—for example, if breast cancer runs in your family—talk to your doctor about earlier or more frequent screening.

Also remember that mammograms provide substantial protection against dying from breast cancer only if you have them regularly.

“The occasional mammogram just isn’t adequate,” emphasizes Dr. Saslow. “Fast-growing cancer can go undetected.”

WHAT TO EXPECT

Chances are, your first mammogram will be a screening one. This routine breast x-ray is used to detect possible breast changes in women with no signs of cancer.

Typically, a screening mammogram involves two x-rays of each breast—a top-to-bottom view and a side-to-side view. Plastic plates attached to the machine will compress each breast for a few seconds. This compression spreads out your breast so that small abnormalities won’t be hidden.

To best prepare for a screening mammogram:

- If you’re still menstruating, schedule your test for the week after your period, when breasts are the least tender.
- Don’t wear deodorant. It can show up as white spots on the film and can interfere with the reading of the film.

If a screening mammogram picks up any unusual changes—or you or your doctor detect a lump in your breast—you’ll need what’s called a diagnostic mammogram.

Diagnostic mammograms involve more views of the breast than screening ones, and they also may produce more detailed pictures. Doctors use them—as their name implies—to help diagnose breast changes that may or may not require a biopsy.

Speaking of changes, if you do notice something different in your breast (such as a lump, thickening or change in size), alert your doctor right away. Do so “even if you had a normal mammogram yesterday,” says Dr. Saslow.

Such follow-through is essential because mammograms do occasionally miss cancerous tumors.

Schedule your mammogram with R2 CAD and Mammopad today! Call Kailua Imaging Center at 263-3389 or Castle’s Imaging Services at 263-5166.

New imaging technology IMPROVES ACCURACY, comfort

Castle Medical Center (CMC) Imaging Services has acquired the R2 CAD (Computer-Aided Detection) System, which allows them to digitally double read mammography films. Director of Imaging Services Brian Matsusaka says that studies indicate that the R2 CAD—equipped with the latest software—can detect up to 6 percent more cancers.

“Breast cancer is one of the most difficult cancers to detect,” Matsusaka says. “This technology provides our radiologist an additional tool for interpreting mammograms.”

In addition to this technology, CMC also has acquired the Mammopad, which dramatically reduces some of the discomfort associated with a mammogram. The Mammopad allows CMC technologists to achieve proper compression—the key to producing high-quality images that allow physicians to detect breast cancer in its early stages—while reducing the discomfort.

“Women have come to expect the very best in health care,” Matsusaka says. “Now they can be assured that CMC’s Imaging Services is doing our part to fulfill this expectation.”

EXPERIENCE THE DIFFERENCE

The R2 CAD and Mammopad are available at the Kailua Imaging Center (KIC) and Imaging Services at CMC. Call 263-3389 (KIC) or 263-5166 (CMC) to schedule your appointment and experience the difference a softer touch makes.
OSTEOPOROSIS

Testing for bones at risk

You may not realize that you have the bone disease osteoporosis until something dramatic calls attention to it—something like a broken bone, for instance, or realizing you're now looking eye to eye with a friend who had always been shorter than you.

But you don't have to wait to find out if you have osteoporosis—or to do something about it.

A closer look Tests to measure bone mineral density (BMD) can tell you and your doctor how strong your bones are and whether you are at risk for fractures.

If you are being treated for osteoporosis, the same tests can also help doctors see how well the treatment is working.

The most accurate test is the DEXA (dual energy x-ray absorptiometry), notes the U.S. Agency for Healthcare Research and Quality. DEXA measures bone density at the hip and spine.

Similar tests that measure bone density but at other sites, such as the wrist or heel, are available.

These tests are usually less expensive and can be useful but may not be as precise as the DEXA, according to the American Academy of Orthopaedic Surgeons (AAOS).

What's the score? The results of a BMD test are usually given as a T score. The T score is a comparison of your BMD to that of a healthy young adult. A T score of zero is considered normal. Scores below normal are given in negative numbers.

A score between -1 and -2.5 means you have low bone mass and are at increased risk of osteoporosis. If your score is -2.5 or lower, you have osteoporosis.

In general, the further below zero your T score is, the higher your risk of experiencing a fracture, according to the AAOS.

For example, a T score of -1 indicates twice the risk of fracture, and a score of -2 carries a risk four times greater than normal.

Call 263-5166 to schedule your DEXA test at CMC.

Time to check The vast majority of people who develop osteoporosis are older women. Therefore, most women should start regular osteoporosis screening at age 65.

Women at high risk for the disease should start earlier, at age 60, recommends the U.S. Preventive Services Task Force.

If you have osteoporosis, several effective drugs are available that can help prevent further bone loss or even help rebuild bone.

Join the Windward Arthritis Walk

Sunday, April 22
Registration, 7:30 a.m.
Walk, 8:30 a.m.
Windward City Shopping Center

The Arthritis Walk is the Arthritis Foundation's nationwide team walk event to increase awareness of arthritis and raise funds for local programs and research. The Arthritis Walk is a noncompetitive, fully accessible 1-mile mall-walk.

Castle Medical Center is sponsoring the Windward Arthritis Walk, and Joint Care Center and Rehabilitation Services staff will be at the walk with teams and displays.

Companies can organize teams of co-workers, vendors, family and friends to raise money and to walk in the event. Or you can donate online at www.kaneohearthritiswalk.com.

For more information about how you can be involved in this year's arthritis walk, contact Jennifer DeMarre at 596-2900 or e-mail jdemarre@arthritis.org.

LOCAL FOUNDATIONS SUPPORT CMC WITH GENEROUS GRANTS Castle Medical Center (CMC) recently received a $10,000 capital grant from the Alexander & Baldwin Foundation. The check is the last of three capital grants, totaling $30,000, from the foundation to support construction of CMC's new hospital patient care wing and renovations of existing hospital facilities.

The Harry & Jeanette Weinberg Foundation also presented Castle Medical Center with a grant—$1.5 million toward the completion of the new wing, which has been named the Harry & Jeanette Weinberg Patient Care Wing. The foundation formally presented the check at a recent luncheon it hosted at the Sheraton Waikiki.

COMMUNITY TREE LIGHTING DRAWS RECORD CROWD Castle’s Community Tree Lighting drew record crowds to the hospital's campus and Kailua. Festivities included a concert by the 98-voice Kamehameha Schools Children’s Chorus; a live nativity by the Windward Faith Baptist Church; music by the Windward Adventist School’s Bell Choir and Ukulele Chorus; healthy holiday tips dispensed from the Wellness on Wheels Van; and a visit by Santa and Mrs. Claus. KAIM 95.5 broadcast the event live, and visitors caroled at the baby grand piano in the lobby.

Hundreds stood in line for the five trolleys sponsored by Kaneohe Ranch and the Castle Foundation that made continuous round-trips between Castle Medical Center and Kailua Town.

The event was co-sponsored by Kaneohe Ranch, Castle Foundation, First Hawaiian Bank, Thurston-Pacific, Ameron Hawai’i and Starbucks.
How many times have you tried to overhaul your diet? Do you jump right in with drastic changes but soon find yourself back with your old eating habits and wondering where you got derailed?

If that’s your typical cycle of diet “improvement,” you could be making things harder than they need to be.

“People feel like they have to do a complete dietary overhaul to eat well. But it’s really not so,” says Elisa Zied, M.S., R.D., spokeswoman for the American Dietetic Association (ADA).

“You just need to do little things one at a time. It’s really important to break it down into small steps. Make small changes that are realistic. Just one little thing at a time will make a big difference,” she adds.

With that in mind, you might want to start planning some changes to improve how you eat.

But this time keep it simple, with a two-step approach in a few key areas of nutrition. Start with step 1 in each area, then progress to step 2 when you feel ready.

Choose Fats Wisely

You’ve probably heard by now: All fats are not created equal.

There are the bad ones—namely saturated and trans fats—which are primarily found in meats, full-fat dairy products, and baked and snack foods. They are the artery cloggers, responsible for promoting high cholesterol levels and increasing the risk of heart disease.

Then there are the good fats—namely polyunsaturated and monounsaturated fats. These are found mostly in plant foods and in oils made from olives, canola and peanuts. Good fats may actually help lower cholesterol levels—a boon to your heart’s health.

To make the transition to healthier fats, try these ideas:

Step 1. Make the obvious switch. If you use butter, opt instead for canola oil, olive oil or soft margarines that don’t have trans fats.

Step 2. Take it a step further—start reading food labels when you shop. Look for products with minimal or no saturated fat and trans fats listed on the label. And always look for the lower-fat options when choosing meats or dairy products, notes Zied, author of So What Can I Eat?? (Wiley, 2006).

Aside from using heart-healthy oils, there are other ways to incorporate healthy fats into your diet, says Marisa Moore, R.D., also a spokeswoman for the ADA.

Eating oily fish, such as salmon and tuna, is one way. Another is to enjoy small amounts of nuts, avocados and olives, says Moore.

Go For The Grains

Grains—especially whole grains—are rich in fiber, vitamins and minerals. They may help protect you from heart disease, stroke, type 2 diabetes and some cancers.

Most people should aim to eat at least three servings of whole grains each day. And that’s not much: One serving is just a single slice of bread or half a cup of oatmeal or whole-wheat pasta, says Moore.

To fit in more whole grains, try these steps:

Step 1. Make the switch to whole-grain bread. For this step, it’s essential to read
labels, as products that say “stone ground whole grain” or “cracked wheat” aren’t necessarily whole grains.

Look at the ingredients list, and make sure that the first thing listed is a whole grain, such as whole wheat, whole oats or whole rye. There are many varieties of whole-grain bread available, so shop around until you find one that suits your taste buds.

Step 2. Start swapping out other refined grains with whole grains until you're eating at least three servings a day of whole grains.

It doesn't hurt to incorporate whole grains into your diet slowly.

For example, you might mix whole-grain brown rice with processed white rice until you get accustomed to the different taste of the brown rice.

Or try mixing one half cup of sugary cereal with one half cup of a whole-grain cereal to ease the transition, recommends Zied.

And don't overlook some other sources of whole grains that you might not have thought of—such as popcorn and whole cornmeal and quinoa, to name a few.

ADD COLOR WITH PRODUCE

Most people need to double the amount of fruits and vegetables they eat each day, according to the National Institutes of Health.

That's a good goal, since fruits and vegetables are excellent sources of vitamins, minerals and fiber as well as disease-fighting phytochemicals.

For the most part they are also low in calories and high in fiber, so eating plenty of produce instead of high-calorie foods can help you lose or maintain weight.

Most people need at least five to nine servings of produce each day. That may sound like a lot, but keep in mind how small one serving is: just one medium-size piece of fruit, half a cup of chopped fruits or veggies, half a cup of 100 percent fruit or vegetable juice, or 1 cup of leafy greens.

Pump up your produce intake with these steps:

Step 1. Start out small by drinking a 6-ounce glass of 100 percent fruit juice at breakfast and eating a piece of fruit at lunch.

Step 2. Try to eat a variety of fruits and vegetables throughout the day, including meals and snacks. Aim to “eat a rainbow,” as the various colors of fruits and veggies hold unique health benefits.

Choose an array of reds (tomatoes, pink grapefruit, watermelon), greens (broccoli, spinach, collard greens), oranges/yellows (sweet potatoes, mangoes, carrots), blues/purples (blueberries) and whites (onions, garlic, leeks).

To make it even easier, try adding fruits and vegetables to foods you already enjoy—tomatoes and onions on your sandwiches, or blueberries and bananas in your cereal, for example.

FIND THE FIBER

It may not be the most glamorous part of your diet, but fiber deserves some extra attention.

In addition to keeping you regular and helping to prevent constipation and hemorrhoids, fiber has a host of other potential health benefits. It may help lower your cholesterol, notes the American Academy of Family Physicians, as well as lower your risk of heart disease, diabetes and certain cancers.

One little problem: Most Americans get only about half the recommended amount of daily fiber that they need. You should be getting between 20 and 35 grams each day.

The good news is if you started in on the steps mentioned above for eating more whole grains, fruits and vegetables, you are well on your way to getting more fiber already. Most of those foods are excellent sources of fiber.

You can also incorporate these steps to up your fiber quotient:

Step 1. Start your day off with fiber. Whole-grain toast is one quick and easy option. Look for breads that contain at least 3 grams of fiber per slice, says Moore. Bran cereal and low-fat bran muffins are great choices too.

Step 2. Keep your focus on plant-based foods. In addition to fruits, vegetables and whole grains, make a point to eat more beans, nuts and seeds.

BABY STEPS

Remember, it’s OK to start out small when overhauling your diet. Over time, those little steps will add up to some big improvements.

GET YOUR DIET ON TRACK WITH NUTRITION COUNSELING AT CASTLE. CALL 263-5400 TO LEARN MORE.

More milk, please!

WHAT’S MISSING FROM your child’s diet? Chances are that calcium, at least, is in short supply, says the American Academy of Pediatrics (AAP).

Close to half of the body’s peak bone mass is formed during the teen years, and calcium is a key component in that bone formation.

Developing strong bones is important because kids who have them may be less prone adults to fractures and to the brittle bone disease osteoporosis. Yet most kids don’t take in enough calcium, putting the long-term health of their bones at risk.

According to the AAP, children need the following amounts of calcium each day:

- 500 milligrams for ages 1 to 3.
- 800 milligrams for ages 4 to 8.
- 1,300 milligrams for ages 9 to 18.

FIND THE CALCIUM

Just three servings of dairy foods a day provide enough calcium for most kids, notes the AAP. Teens need about four servings to reach their recommended amount.

You can help your child—and everyone else in your family—get more calcium by providing a well-rounded diet that includes fruits and vegetables and a variety of other good sources of calcium, such as:

- Low-fat or fat-free milk, yogurt or cheese.
- Dark, leafy greens, such as kale, broccoli, bok choy and turnip greens.
- Calcium-fortified juices or fortified soy milk.

Finally, the body needs vitamin D to help it retain and absorb calcium.

Children and teens need 200 international units (IU) a day of vitamin D. The body makes vitamin D when skin is exposed to the sun.

But you can also find vitamin D in fortified foods, such as milk, eggs and breakfast cereals.

Kids + Calcium = Stronger Bones

CASTLE OFFERS WEIGHT MANAGEMENT FROM AN INDIVIDUAL POINT OF VIEW

Castle Medical Center’s comprehensive weight-loss program includes:

- One-on-one nutrition counseling with a registered dietitian.
- Personalized menu planning.
- Cooking classes.
- Body composition analysis.
- Two books on weight management.
- A packet full of weight-loss and healthy lifestyle materials, including information about psychological obstacles, meal planning, food-label reading, recipe modification, food preparation, dining out, physical activity and more to help you achieve your goals.
- A personal computerized nutritional analysis report that includes recommendations for adjusting your current diet to lose weight. The report also includes the following tests: blood pressure, total cholesterol, HDL and LDL cholesterol, total cholesterol/HDL ratio, blood fats (triglycerides), and blood sugar (glucose).
- Personal time with a Castle fitness instructor to discuss an exercise plan tailored to you.
- Two months FREE membership in the exercise and fitness classes at the Wellness Center. Membership includes admission to all fitness classes, including low-impact aerobics (beginners to advanced) and yoga.
- Membership in Castle’s Weight Management Attitudinal Healing Support Group.

For fee information and registration, call 263-5400 or visit www.castlemed.org.
TREATING DEPRESSION

ANTIDEPRESSANTS CAN HELP

Despite what many people think, depression is more than just the blues. It is a seriously debilitating illness that can affect work and home life if left untreated.

Fortunately, up to 90 percent of people with depression can get better with treatment, reports the American Psychiatric Association (APA).

Along with counseling, medication is one of the most effective treatments for depression.

Although antidepressants help many people overcome their depression, studies show that the drugs can increase the risk of suicide in some people who take them. Children and teens taking antidepressants appear to be at highest risk, according to a study in Archives of General Psychiatry.

Because of that risk, the U.S. Food and Drug Administration (FDA) advises that anyone taking antidepressants—child or adult—should be watched closely for signs of worsening depression or of suicidal thoughts and behavior.

It’s especially crucial to keep an eye on someone if he or she is just beginning antidepressants or if the person’s medication dosage is increased or decreased, says the FDA.

Along with talking or writing about suicide, signs that someone may be contemplating suicide can include:

- Worsening depression symptoms, such as feelings of hopelessness or dramatic mood changes.
- Withdrawing from family, friends and society.
- Taking unnecessary risks.
- Increased use of alcohol or drugs.
- Giving away personal possessions.
- Seeking access to firearms, pills or other means of harm.
- Increasing use of alcohol or drugs.
- Mental health experts advise that if you suspect someone is considering suicide, take the person seriously. Listen without being judgmental, and provide as much emotional support as possible.
- Try to persuade the person to go to a doctor or mental health professional for help.
- If you suspect someone is in immediate danger of committing suicide, call for emergency help right away.

FREE SEMINAR:

‘Recognizing Depression’

Presented by Thomas A. Cummings, Ph.D.

Monday, April 30, 7 p.m.

Free

Learn to recognize the signs and symptoms of depression before it gets worse. This seminar includes information about the causes of depression, how to get help and the implications of taking antidepressant medication.

Seating is limited and registration is required. For more information or to register, call 263-5400 or visit www.castlemed.org.

ANTIDEPRESSANTS AND THE RISK OF SUICIDE

The most commonly prescribed antidepressants come from a group called selective serotonin reuptake inhibitors (SSRIs). These medications increase the levels of a brain chemical called serotonin. Examples of SSRIs include Prozac, Zoloft, Paxil and Lexapro.

Other types of antidepressants, such as Effexor and Wellbutrin, are also popular.

THE RIGHT MEDICATION FOR YOU

When choosing a medication, your doctor will take several factors into account, such as your depression symptoms and their severity, your personal health history and the health history of your family. Your doctor will also work to select an antidepressant with the fewest side effects.

Side effects vary by medication and can be different for every person. Generally, they can include:

- Nausea
- Bladder problems
- Sexual dysfunction
- Constipation
- Dizziness
- Drowsiness
- Dry mouth
- Changes in sleep patterns
- Restlessness
- Most side effects tend to go away within a few days of starting the medication. But if they continue for more than a short period, talk with your doctor. You may need to take a different dosage or another medication altogether.

Different people respond differently to antidepressants, so finding the right medication for you can take time. You may need to try several antidepressants to find one that works for you.

According to Dr. Stotland, it’s not uncommon to try a second or even third medication if the first one doesn’t work.

“Most likely you’ll eventually find one that will help you, though,” she says.

STAY THE COURSE

In most cases, antidepressants need to be taken for at least six months. However, your doctor can determine the length of time that will work best for you.

Keep in mind that it can take several weeks before you begin to feel better. Once you start to see improvement, it’s important to continue taking your medicine as prescribed. Going off medication too soon can mean a higher chance of depression coming back, warns Dr. Stotland.

Most important, continue working with your doctor if you reach a point where you feel ready to stop taking medication. Your doctor can help determine how to taper off the medication gradually.

CMC’s Behavioral Services can help you overcome depression. Call 263-5400 to get on the road to wellness.
NEW KNEES PROVIDE RELIEF

S

ometimes, the only way to fix a stubborn gate is to replace a rusty hinge. That's true even when the bad hinge is in your knee.

The fix is more complicated, of course, but knee replacement surgery can be a good way for some people hobbled by sore knees to walk, work and play again—free of pain.

“The goal of surgery is pain relief,” says Melvyn Harrington, M.D., a fellow of the American Academy of Orthopaedic Surgeons (AAOS). “The top 10 reasons to have a knee replacement are all ‘pain.’”

ARTHRITEIS AND THE KNEE

Usually, the pain comes from osteoarthritis, a degenerative disease that can gradually wear away cartilage in the knee joint. Without that cushion of cartilage, bones rub together, causing pain and making it hard to walk, climb stairs and do other everyday activities.

Doctors typically steer people with knee pain to over-the-counter remedies first. Nonsteroidal anti-inflammatory drugs, such as aspirin and ibuprofen, can be very effective in the early stages.

Other nonsurgical treatments include using a cane or walker, cortisone injections and physical therapy.

“You want to try all of the nonsurgical options first,” Dr. Harrington says. “You want to make sure you’ve exhausted all of those measures, because [knee replacement] is a major surgery.”

Most people who get knee replacements are between 60 and 80 years old, according to the AAOS. The ideal candidate is someone of normal weight who is not highly active and will put minimal demand on the new knee.

But the surgery can be successfully done on people of all ages, sizes and activity levels, Dr. Harrington says.

TYPES OF REPLACEMENTS

Not everyone with persistent knee pain needs a total knee replacement.

About 10 percent of patients can get by with a unicompartmental—or uni—knee replacement. The best candidates for this have arthritis in only one of the knee’s three compartments.

The uni is inserted through a relatively small incision, making rehabilitation faster and hospitalization shorter than with a total knee replacement.

Even if you’re not a good uni candidate, your doctor might be able to do a total knee replacement through a smaller-than-normal incision. This minimally invasive approach may also mean a shorter hospital stay, less pain and quicker rehab.

BETTER QUALITY OF LIFE

Ninety percent of those who have had a total knee replacement are happy with the operation, reporting pain relief, improved mobility and a better quality of life, says the U.S. Food and Drug Administration.

Depending on how heavily the new joint is used, an artificial knee can be expected to last between 10 and 20 years.

“[The surgery] is not going to make you 18 again,” Dr. Harrington says, “but it’s going to make your knee better than it was.”

To learn more about total knee replacement, call our Joint Care Center at 263-5432 or visit www.castlemed.org.

“The goal,” he says, “is to get people back to doing things they want and need to do.”

OUR JOINT CARE CENTER CELEBRATES FIRST DECADE

had surgery on one day; the next day the pain was gone. I should have had it done 10 years ago!”

“Castle—wow!—what an experience!”

“The nurses went out of their way to calm my anxiety and make me comfortable.”

“Even though I was in pain, it was like being in a hotel, not a hospital.”

“I don’t think I’ve met anyone who hasn’t said wonderful things about the Joint Care Center.”

Enthusiastic responses like these are typical from patients who have had surgery at Castle Medical Center’s Joint Care Center. Established in 1997 as the first center in Hawaii dedicated to hip and knee replacement procedures, the Joint Care Center celebrates its 10th anniversary in May.

During its first 10 years, the Joint Care Center has completed more than 1,170 joint replacement procedures and has grown to serve more than 175 patients each year.

Unlike a general surgical floor, the Joint Care Center’s specially trained team of professionals attends to the patients throughout their stays.

Care begins the Friday before surgery when each new group of five or six patients gathers for a comprehensive pre-operative orientation so they know what to expect after their surgeries. This meeting is the first step in team-building among the patients, an important part of the center’s treatment program to speed patients’ recovery.

Surgery takes place the following Monday. Then for the next four days, patients gather for daily group physical therapy sessions, a catered lunch on Wednesday and a gourmet “aloha” dinner on Thursday before going home on Friday.

The Joint Care Center was designed with the understanding that its patients aren’t sick, just recovering from surgery.

Patients are encouraged to wear their own clothes throughout their stays, and a comfortable environment promotes positive attitudes among patients, motivating them to take an active interest in their recovery. Private rooms, a daily newsletter, and complimentary flowers from the staff and physicians are among the services enjoyed by the patients.

Jessie Silao, CNA, and Shirley Estrella, R.N., have been part of the Joint Care Center staff since it opened in 1997. “I enjoy…the continuity of care and seeing the progress our clients make,” Estrella says.

Ninety percent of those who have had surgery at Castle Medical Center’s Joint Care Center celebrate their 10th anniversary in May.

Patients who have had surgery at Castle Medical Center’s Joint Care Center celebrate their 10th anniversary in May.

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Spring is a time for new beginnings. Let this season be your healthy beginning. Castle Medical Center can help you get and stay healthy for life. We invite you to register for a health-promoting class or seminar or call for a physician referral. Take charge of your health. Call 263-5400 or visit our Web site at www.castlemed.org.

**FEATURING EVENTS**

**ROYAL HAWAIIAN BAND**
Sunday, April 15, 6-30 p.m.
CMC Front Lawn
The Royal Hawaiian Band will begin Castle Medical Center’s annual Spiritual Emphasis Week with a free concert that is open to the public. Activities during the week also include a display of paintings by Hawaii’s artist Patrick Ching and inspirational quilts from the Hawaii Quilt Guild in the hospital’s main corridor on April 16. For more information call 263-5400.

**BREASTFEEDING**
Thursdays, April 12, May 10 or June 14 6 to 8:30 p.m.
Taught by a certified lactation consultant. $25, or free with a childbirth class.

**FAMILY**

**BIRTH CENTER TOUR**
Wednesdays, April 4, May 2 or June 6 5 to 6 p.m.
Call for reservation.

**CHILD BIRTH BASICS**
Wednesdays, April 18 or May 30 5 to 10 p.m.
Intensive class providing a basic overview. Individuals: $50; couples: $65; rates discounted if delivering at CMC.

**GENERAL NEWBORN CARE**
Tuesdays, April 24 or June 5 6 to 9 p.m.
Learn about bathing, crying, sickness, diaper changing and other basics. $25

**INFANT CPR AND SAFETY**
April 3, May 2 or June 7 6 to 9 p.m.
Does not provide certification. $25

**LAMAZE PREPARED CHILDBIRTH**

- **Monday beginning dates:** April 2 or May 21 6:30 to 9:30 p.m.
- **Sunday beginning dates:** April 29 (no session on Mother’s Day, May 13) or June 10 4:30 to 7:30 p.m.
The classic six-part childbirth preparation class. $75; $65 if delivering at Castle.

**FITNESS**

WELLNESS CENTER monthly and quarterly memberships are available for fitness classes. Free for Windward YMCA members. Please call to register.

**BODY SCULPTING/FITNESS CLASSES**

- **FREEDOM OF MOVEMENT:** For those with Parkinson’s disease or ataxia or those who may have difficulty performing usual activities, including reaching, transitional movements and walking. Can be done sitting or standing, and family members or caregivers are welcome to accompany. Medical clearance required.

**LONGER LIFE, HEALTH AND WELLNESS**

- **FITNESS CLASS**
  - Excellent for seniors. Gentle exercises increase joint flexibility, range of motion, muscle strength and cardiovascular endurance. Exercises can be done sitting or standing. Participation requires medical clearance.

**NUTRITION**

- **INDIVIDUALIZED NUTRITION COUNSELING**
  - Ongoing, by appointment
  - Medical nutrition therapy helps you get on a healthy diet and nutrition program for optimal health. Topics of focus include weight loss, diabetes (covered by many HMSA plans), heart disease and cholesterol reduction, women’s wellness, and nutrition and herbal supplements.

**WEIGHT LOSS**

- **WEIGHT-LOSS SURGERY SEMINAR**
  - Wednesdays, April 11, May 9 or June 13 7 p.m.
  - Learn about Castle’s new comprehensive surgical weight-loss program from bariatric surgeon Steven Fowler, M.D., and other members of the bariatric team, including a dietitian, nurse coordinator, and fitness and wellness specialists. Registration is required.

**JOINT CARE**

KNEE AND HIP PAIN SEMINARS
- **Day seminar:** Tuesdays, April 10, May 22 or June 19 10 to 11 a.m.
- **Evening seminar:** Tuesday, April 17, or Wednesdays, May 16 or June 27 7 to 8 p.m.

Learn about the causes of hip and knee pain and how you can reduce pain using diet, exercise, medication or joint replacement surgery. Free

**SUPPORT GROUPS**

- **ATTITUDINAL HEALING**
  - For the stress of daily life and healing relationships.

- **BEREAVEMENT SUPPORT GROUP**
  - For cancer patients, survivors and loved ones.

- **PARKINSON’S SUPPORT GROUP**
  - For people with Parkinson’s disease and their caregivers.

**HEALTH EDUCATION**

- **BREATHE FREE PLAN TO STOP SMOKING**
  - May 8, 10, 13 to 17, 22, 29 7 to 8:30 p.m.
  - Castle Center for Nicotine Dependency Treatment, Wellness & Lifestyle Medicine Center

This dynamic, comprehensive approach is clinically tested and proven successful. Learn how to quit without gaining weight. $100 for nine sessions; includes all materials and ongoing group support sessions. HMSA’s “Ready, Set, Quit!” stop-smoking program covers the fees.