Smoking Cessation Program to Start for Patients

According to the American Cancer Society, more than 34 million Americans smoke cigarettes. Smoking remains the single largest preventable cause of death and illness in the world. It causes an estimated 480,000 deaths every year, while more than 16 million Americans live with a smoking-related disease. Because of these alarming statistics, the American Cancer Society hosts the Great American Smokeout. Held on the third Thursday of November each year, the Great American Smokeout affords people who smoke the opportunity to commit to healthy, smoke-free lives.

At the end of October, patients at Trinity Health will be able to get a head start. Trinity Health will unveil a smoking cessation program to inpatients and outpatients at Trinity Hospital and at our Minot clinics. Jessica DeLorme, FNP-C, a nurse practitioner with Behavioral Health, wrote the grant for Trinity Health to participate in the program. Jessica believes that clients who successfully complete the program have a better chance of maintaining their smoking cessation and not relapse. The program begins September 3 and is scheduled to run for 12 weeks each Tuesday and Friday morning.

Contingent on the grant for Trinity Health to participate in the program, the nursing staff of our Minot and Williston hospitals will offer the smoking cessation program to inpatients. The program consists of six education and counseling sessions with the patient's health care provider. The program is available to Trinity Health patients who have smoked for at least one year or current smokers who have smoked for at least 100 packs of cigarettes. The initial phase of the program will be open to both inpatients and outpatients.

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Power of Pink Cake Auction

Horn of Plenty

All About Alzheimer’s

Virtual Dementia Tour

‘Delay the Disease’ Takes Aim at Parkinson’s

Wes Plummer has achieved 11 holes-in-one during his many years as a golf enthusiast, but such feats are a breeze compared to the challenge he now faces.

The North Dakota Golf Association Hall of Fame member was diagnosed with Parkinson’s disease three years ago. He is now a charter member of a new exercise program launched by Trinity Health Exercise Physiology called Delay the Disease.

Delay the Disease is a fitness and mobility program aimed specifically at improving the physical, mental, and emotional realities of patients with Parkinson’s disease (PD). Tanya Gillen, ACE, a certified personal trainer, spearheaded the program. She said the universal benefits of exercise are well established and it’s no surprise that exercise would also hold specific benefits for people with PD.

“My experience working with Parkinson’s patients has reinforced my conviction that regular exercise is the key to managing the disease and living a better life,” she said. “Specifically, it helps by slowing the progression of the disease, managing symptoms, and avoiding isolation.”

Tanya completed a Delay the Disease certification course in July. She says the program, developed by Ohiolhiealth, consists of symptom-specific exercises designed to optimize function and restore as much independence as possible to patients experiencing the typical symptoms of tremor, muscle rigidity, and impaired balance. “We emphasize big movements, coordination, and multi-tasking,” she said, noting that each exercise session includes the key ingredients of flexibility exercises, aerobic activity, and resistance training.

Delay the Disease classes began September 3 and are scheduled to run for 12 weeks each Tuesday and Friday at the Minot Family YMCA. The program includes two class levels: a basic level at 11:00 a.m. and an intermediate level at 2:00 p.m. Program cost is $60 for YMCA members and $90 for non-members. Trinity Health’s inaugural class drew well over a dozen participants, and Tanya hopes more will sign up. “I’m excited to see how this program will impact people’s lives,” she said. “After completing the training, the first thing I said when I got back to Minot was ‘This has the potential to change people’s lives.’”

Parkinson’s disease affects patients in different ways. “I tend to go backwards, which puts me at risk of falling,” said Wes.

“One of the things we’ve worked on with Wes is developing strategies to adjust his posture and stance so when he goes backward he can stabilize himself,” Tanya said.

Wes has been an inspiration to others affected by Parkinson’s disease. Since he was diagnosed, he and his wife and care partner, have pursued every avenue to slow the effects of PD, including exercise, physical therapy, speech therapy, and a boxing training program called Rock Steady, offered where the Plummers winter in North Carolina.

“Anything we can do to keep him active is good,” Janie said. “Without it I believe he’d be walking with a walker or even be in a wheelchair.”

People who wish to sign up for Delay the Disease, or who need more information, may contact Trinity Health Exercise Physiology at 701-857-5626.
Cake Auction Raises $12,000 for Cancer Exercise Rehab Program

A sheet cake, frosting, and a lot of hard work helped raise money for Trinity Health’s Cancer Exercise Rehabilitation Program, based at the MarketPlace Foods bakery, last month. On October 9, the bakery at the North Hill MarketPlace Foods was transformed for the Power of Pink cake auction. Here, teams from businesses and organizations throughout the community participated in decorating the cakes, which were then auctioned off, thanks to the quick set of local auctioneer Darrell Sundsbak. Representing Trinity Health in the auction were Community Ambulance, Two teams from Keycare Medical, Trinity Health CancerCare Center, and the Trinity Medical Group business Services.

A total of $12,050 was raised from auctioning off the dozens of cakes, which fetched anywhere from $125 to $3,900. Sales of different products in the store, including pink items from the MarketPlace Foods bakery, will augment the amount raised through the auction.

All proceeds from the Power of Pink event benefit the Cancer Exercise Rehab Program. “Then there are others who can start their day and do their daily activities, but when after midnight rolls around, they have to take a nap because they’re so tired. They can’t walk without losing their balance and sleep all day,” explained Russell Gust, MS, CSCS, ACSM-CET, director of Trinity Health Exercise Physiology, which manages the Cancer Exercise Rehabilitation Program. “Then there are others who have fought cancer, and those facing cancer-related side effects such as fatigue.”

“So some people have a difficult time completing daily tasks to the extreme level where they want to sit and sleep all day,” explained Russell Gust, MS, CSCS, ACSM-CET, director of Trinity Health Exercise Physiology, which manages the Cancer Exercise Rehabilitation Program. “Then there are others who can start their day and do their daily activities, but when after midnight rolls around, they have to take a nap because they’re so tired. They can’t walk without losing their balance and sleep all day,” explained Russell Gust, MS, CSCS, ACSM-CET, director of Trinity Health Exercise Physiology, which manages the Cancer Exercise Rehabilitation Program. “Then there are others who have fought cancer, and those facing cancer-related side effects such as fatigue.”

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About 50 patients participate in the program each year. Thanks to donations raised through the cake auction and the Y’s Men’s Rodeo’s auction and the Y’s Men’s Rodeo’s donation (Scroll down to the online donation form and select Turkey Drive from the drop-down menu in the designation section). Program Helps Community in Need

Elyssandra Hilden, RN

In the Fall of 2018, some fellow nursing students and I from the Dakota Nursing Program were blessed to have the opportunity to volunteer at the Horn of Plenty holiday box drive. This was a yearly event providing food and gifts to members of our community who might otherwise go without during the holidays.

Money raised through our nursing program fundraisers was donated to the Trinity Health Foundation to purchase some of the food and gift items that went into the boxes. We helped to assemble boxes and later delivered a half dozen to community members who were finding themselves in hard times during the holiday season. It was a very humbling experience only to see the faces of those receiving the boxes, but to witness our community and fellow coworkers come together and exercise the power of community. Being able to see the support and willingness of people to provide help for our neighbors in need was amazing. This yearly tradition in Minot is clearly a family event with donations of all ages help their parents package toys and food with the same excitement they might have opening their own gifts on Christmas morning. The joy of giving filled the room. As boxes were filled, they were placed in a designated area and at the end of the day we found ourselves wishing we had more food so we could fill more boxes to help even more community members in need.

A week after packing the boxes, we returned to gather the boxes and make our deliveries. One delivery was to a family who didn’t know what he was going to do for the holiday dinner. Seeing the tears gather in his eyes when he handed over the boxes and knew that he had no idea where to turn. Another delivery was to a coworker who had volunteered many years before the Horn of Plenty began. The joy of giving filled the room. As boxes were filled, they were placed in a designated area and at the end of the day we found ourselves wishing we had more food so we could fill more boxes to help even more community members in need.

Although this started as a way to volunteer our time in the community, it has become a local project we have become passionate about. The cycle of helping others when you can and accepting help when you have a need makes for a strong community. We are very proud of how strong our Minot community is. Please feel free to leave a message after hours and your call will be returned the next regular business day, or email us anytime at DR4U@trinityhealth.org
Alzheimer’s disease is the most common cause of dementia, a general term for memory loss and other cognitive abilities serious enough to interfere with daily life. The Alzheimer’s Association said that 60 to 80 percent of dementia cases are caused by Alzheimer’s.

“Symptoms include memory changes or loss,” said Mary Sadler, FNP-C, with Trinity Health Neurology. “Initially, it will be to recent events, then it will progress.”

Other symptoms include:
- Decreased organization
- Difficulty multitasking
- Avoiding social interactions
- Changes in behavior, such as agitation or lack of emotion
- Reduced ability to recognize own deficits while family or friends notice
- Difficulty sleeping

Symptoms of Alzheimer’s tend to first appear in most people in their mid-sixties. The National Institute on Aging stated. While estimates vary, experts suggest that more than 5.5 million Americans, most of them age 65 or older, may have dementia caused by Alzheimer’s. “As people age, there is an increased risk of Alzheimer’s disease,” Sadler said.

If you feel you are showing symptoms, speak to your primary healthcare provider, who can then refer you to neurology specialists for testing. Usually, multiple health issues need to be ruled out, Sadler said. Possible causes of memory changes can include vitamin deficiencies, issues like depression, medications that could cause a change; medical issues such as low B-12 or an infection; or other types of dementia such as Lewy Body Dementia, which can be seen in Parkinson’s, frontal temporal, vascular, or alcohol-related memory changes.

Once a diagnosis for Alzheimer’s is made, the patient works together with care providers, family, and friends to address needs, symptoms, and future plans.

Alzheimer’s disease is currently ranked as the sixth leading cause of death in the United States; recent estimates, though, suggest that it ranks third—behind heart disease and cancer—as a cause of death for older people, the National Institute on Aging said. While Alzheimer’s itself is not the cause of death, it causes complications, such as infections or blood clots, which lead to death.

Trinity Health Neurology includes Rosina Medel, MD, and Mary Sadler, FNP-C. Their offices are located at Health Center – East, Ste 303, 20 Burdick Expy W, Minot.

Virtual Dementia Tour

With an innovative program available at Trinity Homes, staff can now get the perspective of what residents with dementia see and feel.

According to Monica Padgett, RN, MSN, clinical nurse educator at Trinity Homes, the Virtual Dementia Tour allows staff to learn “more appropriate and better ways to work with people with dementia.” Dementia causes the senses to be altered, including impaired peripheral vision, and difficulty sensing light, she explained. The way senses are altered can also alter the behavior of a patient with dementia. “It may seem abnormal to us, but totally normal for them,” she said.

As part of the simulation, participants wear a pair of sunglasses that have been altered and headphones that are pre-programmed. They are placed in a room and given a list of simple tasks to complete under the constraints of the sunglasses and headphones.

“We give them eight minutes to complete those tasks,” explained Deanna Ness, RN, BSN, BCHA education coordinator at Trinity Homes. However, Monica noted, “with a diagnosis of dementia, it is more complex and a real struggle to complete.” It could take twice the time, if not longer, with dementia.

“We try to simulate those things so our caregivers can go through this tour and have a better understanding of what our residents are going through daily,” Deanna said. “And not just with vision, but the whole tour.”

Around 50 million people worldwide have dementia, with nearly 10 million new cases each year, according to the World Health Organization. Dementia and Alzheimer’s are becoming more prominent in the United States, “especially in the older generation coming into nursing homes,” Monica noted.

Over 58 percent of residents at Trinity Homes have some type of dementia diagnosis. Jamie Hammer, RN, MSN, director of nursing at Trinity Homes, promised the implementation of dementia training, as well as the Virtual Dementia Tour, to meet the required educational needs for the staff. “The goal of the training is to provide healthcare professionals with a basic understanding of the changes in memory, communication, function, and behavior that occur as a result of dementia, and the appropriate intervention strategies to enhance the care they provide to individuals with this disease,” she said. Jamie is passionate about providing a safe environment for both residents and staff, which is why her Doctorate research project focuses on dementia education and training.

Once it becomes more established, and Trinity Homes staff are trained, other Trinity Health employees, families of residents, and members of the community will be able to take part and share in the experience.

View our New Regional Healthcare Campus & Medical District Construction

Go to trinityhealth.org and click on the link.

Make the choice to protect your health.

MyChoice Health Checks are low-cost screenings that make earlier detection and familiar care possible. You can choose which screenings you want and schedule quickly and easily with our imaging experts.

MyChoice Health Checks help to identify risk factors that can lead to serious problems:
- **Heart attack**
  - Calcium Score Screening $50
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- **Abdominal aneurysm**
  - Abdominal Aortic Aneurysm (AAA) Screening $35
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  - Painful legs and feet Screening $25
- **Heart disease**
  - EKG $25

All screenings are read by board-certified radiologists and cardiologists.
A Preventable Pulmonary Disease

How many times have you found yourself breathless after doing just a little work and passed it off as being out of shape, or maybe as a side effect of smoking? How many times have you looked for that parking spot that is just a little closer, or looked for the elevator instead of taking the steps? If any of these scenarios sound familiar, you just might have Chronic Obstructive Pulmonary Disease, or COPD.

Many patients do not seek out medical attention for the symptoms of COPD until a significant amount of their lung function has been lost. Statistics show that most COPD patients will not seek out help until half of their lung function is gone. November is COPD Awareness Month and gives us another opportunity to remind people how serious COPD is. It is estimated that more than 15 million people have COPD, which is now the third leading cause of death in the United States. Nearly 7 percent of North Dakota’s population has COPD. The stark truth about all of this is that for nearly all of these people, COPD is preventable. Cigarette smoke is implicated in over 90 percent of cases of COPD. Even second-hand smoke has been shown to be a risk factor. While there are some inheritable diseases that cause COPD and some environmental or industrial exposures that are linked to COPD, those causes pale in comparison to the devastating effects of cigarette smoke.

COPD causes the airways of the lung to not function correctly and ultimately obstructs normal airflow. These patients have shortness of breath; as the disease worsens, even simple activities become difficult because of dyspnea. A cough and sputum production can accompany the shortness of breath. The symptoms of COPD can vary from day to day, and exacerbations can make breathing very difficult at times.

There is no cure for COPD. The changes to the lungs tend to be permanent. The best approach to COPD is to prevent the damage to the lungs through smoking abstinence or early cessation. In this case, the adage that an ounce of prevention is worth a pound of cure would be truer. There are many therapies that can help treat the symptoms of COPD. A medical provider can help you make the best decisions for what treatments will work best for you. In some cases oxygen may be prescribed. All patients benefit from exercise and activity. Some patients may also benefit from pulmonary rehabilitation where trained professionals assist patients with exercise and education.

To diagnose COPD, a spirometry test is needed. This is a breathing test that allows medical providers to assess airflow. There are also other tests such as x-rays that a healthcare professional may order.

If you feel that you may have COPD, or if your shortness of breath is concerning to you, contact your primary care provider or Trinity Health Pulmonology: Jeffrey Verhey, MD; Heidi Bender, DNP, APRN, FNP-C; and Dwight Remington, DNP, APRN, FNP-C. They are located at Health Center – East, Ste 203, 20 Burdick Expy W, Minot. They can be reached at 701-857-5741.

Smoking continued from page 1

program. She often works with patients who have a “dual diagnosis,” in which they may have a behavioral health issue, as well as some sort of substance use, such as nicotine.

The program works this way: When a patient comes to the emergency room or a clinic, nursing staff will perform documentation screens and will ask if the patient is a nicotine user. A tobacco treatment specialist – most likely a respiratory therapist or a pharmacist, although DeLorme “and a few others” are interested in training for this – will then visit the patient, talk about their nicotine use history, and talk to them about getting help to quit. “At that point, we’ll be able to send them home with free nicotine patches or gum.”

In the past, patients who were interested in smoking cessation would call the North Dakota Quits program and supplies would be sent to them three to seven days after. “At that point, they have to pay out of pocket for those supplies, or try to abstain,” DeLorme said. “It’s very expensive to pay out of pocket.”

After the initial consultation, North Dakota Quits will call the patient every month and have a brief phone call to follow up on how the cessation is progressing and supply the patient with more cessation aids, if needed, DeLorme said, adding that the program will not incur a cost to the patient.

After another training next January, DeLorme hopes to get staff from Trinity Health’s outlying clinics to participate so the program can grow beyond Minot.

According to the most recent statistics from the North Dakota Department of Health, about 19 percent of adults (18 years or older) living in the city or county of Minot smoke cigarettes. Those figures include 7,030 of the 36,806 adults living in the city. In Ward County, 9,213 of the 51,756 adults, or 17.8 percent, smoke cigarettes, as do 111,059 of the 581,459 (or 19 percent) adults living in the state of North Dakota.

If you are interested in participating in smoking cessation, call your healthcare provider or Jessica DeLorme to set up a screening. DeLorme can be reached at 701-857-2286.
Trinity Health Welcomes Dr. Brewley

Trinity Health is pleased to announce the addition of Earl Brewley, Jr., MD, to our team of orthopedic surgeons. Dr. Brewley is a board-eligible, fellowship-trained orthopedic surgeon who specializes in treating complex diseases of the upper extremity. His expertise includes advanced shoulder and elbow arthroscopy as well as primary and revision joint replacement surgery of the upper extremity.

Dr. Brewley earned his medical doctorate from Howard University College of Medicine in Washington, DC, and completed his orthopaedic residency at Albany Medical Center. Under their supervision, Dr. Brewley performed over 150 shoulder replacements and over 100 arthroscopic shoulder procedures. Upon graduation, he completed additional training in Japan under Hiroyuki Sugaya, MD, and Teruhisa Mihata, MD, PhD, to learn additional arthroscopic techniques, including superior capsular reconstruction for irreparable rotator cuff tears. Dr. Brewley's research interests include age-related outcomes in shoulder arthroplasty, alternative treatments for post traumatic elbow arthritis, and biomechanics stability in revision shoulder arthroplasty. He is a fellow member of the American Shoulder and Elbow Surgeons and an editorial reviewer for the Journal of Shoulder and Elbow Surgery.

In his leisure, he enjoys reading, hiking, writing poetry, and cheering for the New York Yankees. November is Lung Cancer awareness month. Lung cancer kills more people annually than breast, prostate, and colorectal cancers combined. In 2019, the American Cancer Society expects 228,350 new cases of lung cancer nationally and 430 new cases in North Dakota. Men are diagnosed more often with lung cancer than women, but lung cancer in women is on a significant rise. Every five minutes, a woman in the United States is told she has lung cancer. Despite this fact, only three percent of women surveyed identified lung cancer as a pressing health concern. Smoking is directly attributable to about 80 percent of death from lung cancer. Compared to non-smokers, those who smoke have a 15 to 30 times higher risk of developing lung cancer.

The most important part of lung cancer prognosis is the individual's age and how early the lung cancer is diagnosed. Lung cancers identified at an early stage provide more options for a cure with surgical intervention. Survival rates are directly linked to screening and early diagnosis. However, only 16 percent of lung cancers are diagnosed at an early stage.

Lung cancer screening is the newest cancer screening recommended by the United States Preventative Services Task Force. Patients who are identified as candidates for lung cancer screening undergo a computed tomography (CT) study of the chest using low-dose radiation. These studies use 90 percent less radiation than a conventional computed tomography study. The screenings have been shown to decrease lung cancer mortality by identifying lung cancers at an earlier stage.

Though lung cancer screenings have been available since 2015, utilization remains low. In 2017, only about four percent of eligible individuals received lung cancer screenings. To be eligible:

- Individuals must be between the ages of 55 and 77 years of age.
- Individuals must have a 30-pack-year smoking history. (Pack-year smoking history is calculated by multiplying the number of years smoked by the number of packs per day smoked).
- If the individual is a former smoker, they must have quit smoking within the last 15 years.

If you feel you are a candidate for a low-dose lung cancer screening, schedule a consultation with your primary care provider or a pulmonology specialist. During this consultation, you and your provider will assess your eligibility as a candidate and any questions you may have about the screenings. If you would like to schedule an appointment for the lung cancer screening consultation, please call Trinity Health Pulmonology at 701-857-5741 or contact your primary care provider.

Trinity Health Pulmonology providers available to help you include Jeffrey Verhey, MD; Heidi Bender, DNP, APRN, FNP-C; and Dwight Remington, DNP, APRN, FNP-C, and are located at Health Center – East, Ste 203, 20 Burdick Expy W, Minot.

Fashion Heart Fundraiser

Heidi Zdeblicka, Tanya Gillen, Julie Road, and Heather Altringer, with Trinity Health’s Trinity Health Auxiliary’s Healthy Hearts Club.

Trinity Health Speaker’s Bureau

Call Community Education at 701-857-5099 to check for available dates and topics.

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Early Diagnosis Can Help Fight Lung Cancer

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Tough Enough To Wear Pink

More than $36,000 was raised for the Trinity Health Cancer Exercise Rehabilitation Program through this year’s Tough Enough to Wear Pink campaign. The program, which is provided by Trinity Health Exercise Physiology at the Minot Family YMCA, helps cancer patients fight the fatigue caused by cancer treatment.

Pictured from left to right: Joon Lee, MD, radiation oncologist with Trinity CancerCare Center; Cassie Helmstad, SRT; Brenda Lee, WGO; Russell Gust, director of Exercise Physiology; and Jake Hansen, Minot Y’s Men’s Rodeo, SRT and WGO are among the major sponsors who help fundraise for the program. Standing in the truck are, from left to right: Rae Jurick, Alexa Louser, Loni Steele, Kristi Abrahamson, Connie Sundby, and Laura Volk, all of whom were or are participants in the Cancer Exercise Rehabilitation Program.
Reducing Risk of Stomach Cancer

While rates for it have fallen worldwide, stomach cancer is still an important malady to watch out for. The American Cancer Society estimates that about 27,510 cases (17,230 men and 10,280 women) of stomach cancer could be diagnosed in 2019, causing roughly 11,140 deaths (6,810 men and 4,340 women). The rates have decreased 1.5 percent each year over the past 10 years.

Stomach cancer usually begins in the mucus-producing cells that line the stomach. The most common form of stomach cancer is gastroesophageal junction cancer, which occurs in the area where the top part of the esophagus and the lower end of the esophagus meet. According to Mayo Clinic, gastroesophageal junction cancer is associated with having gastrointestinal reflux disease (GERD), and, less strongly, with obesity and smoking.

It mostly affects older people, with the average age at diagnosis being 68; about six out of 10 people diagnosed with this form of cancer are over the age of 65. Men are more likely to develop stomach cancer, with the ACS estimating that men have a 1-in-95 chance of developing it, compared to a 1-in-189 risk for women. It mostly affects older people, with the average age at diagnosis being 68; about six out of 10 people diagnosed with this form of cancer are over the age of 65. Men are more likely to develop stomach cancer, with the ACS estimating that men have a 1-in-95 chance of developing it, compared to a 1-in-189 risk for women.

Symptoms of stomach cancer include:
- Fatigue
- Feeling bloated after eating
- Feeling full after eating small amounts of food
- Severe, persistent heartburn
- Severe indigestion always present
- Unexplained, persistent nausea
- Stomach pain
- Persistent vomiting
- Unintentional weight loss

According to Mayo Clinic, risk factors for stomach cancer include:
- A diet high in salty and smoked foods
- A diet low in fruits and vegetables
- Family history of stomach cancer
- Infection with Helicobacter pylori
- Long-term stomach inflammation
- Pernicious anemia
- Smoking
- Stomach polyps

Stomach cancer is more common in less developed countries, but is less common in the United States. However, it was one of the leading causes of cancer deaths in the United Kingdom in 1950. According to the ACS, some attribute this decrease due to the increased use of refrigeration for food storage (reducing the need for salted and smoked foods) and making fresh fruits and vegetables more available.

Mayo Clinic said while there is no clear cause for gastrointestinal junction or stomach cancer, there are steps to help reduce the risk through small lifestyle changes:
- Exercise: Regular exercise is associated with a reduced risk of stomach cancer. Try to fit physical activity into your day most days of the week.
- Eat more fruits and vegetables. Try to incorporate more fruits and vegetables into your diet each day. Choose a variety of colorful fruits and vegetables.
- Reduce the amount of salty and smoked foods you eat. Protect your stomach by limiting these foods.
- Stop smoking. If you don’t smoke, don’t start. Smoking increases your risk of stomach cancer, as well as many other types of cancer. Quitting smoking can be very difficult, so ask your healthcare provider for help.
- Ask your doctor about your risk of gastroesophageal junction or stomach cancer. Talk with your healthcare provider if you have an increased risk of gastroesophageal junction cancer or stomach cancer. Together, you may consider periodic endoscopy to look for signs of stomach cancer.

Stomach cancer can be treated through several options, including surgery, chemotherapy, immunotherapy, and radiation therapy. The modality of treatment can depend on where the cancer started and how far it has spread. (As stomach cancer becomes more advanced, it can metastasize through the bloodstream to organs such as the liver, lungs, and bones, which makes it harder to treat.)

Trinity Health Gastroenterology includes Edmundo Justino, MD; Ira Paul Michelson, MD; Kelly Dickson, FNP-C; and Bonnie Ler, FNP-C. Their offices are located at Health Center – Medical Arts, 400 Burdick Expwy E, Minot. For appointments or questions, please call 701-857-7389.

Trinity Health Employees Exemplify Customer Service Standards

On October 7, Trinity Health held its annual ServiceFIRST awards to honor Trinity Health staff for promoting the tenets of ServiceFIRST principles: Focus, Identify, Respond, Satisfy, and Take Ownership.

The ServiceFIRST Awards are coordinated by Trinity Health’s Employer of Choice Committee, which aims to improve job satisfaction through engagement and participation, increase employee retention, and enhance patient satisfaction.

The Awards and Winners

Care Provider: The ServiceFIRST Care Provider Award honors employees with years of practice, experience, and dedication. The nominees demonstrate strengths of character, competence, and commitment to their profession. These employees portray ServiceFIRST qualities.

The winners are Rhonda Walter, vice president and administrator at Trinity Homes; Gina Weaver, LPN; Sandy Holzer, administrative assistant with materials management; Wyrene Ramirez; and Manilee Knack, coding coordinator.

Novice to Expert: The “Novice to Expert” Award honors employees who are newer to their profession and have practiced for less than three years. The nominees demonstrate leadership and contribute energy, commitment, and enthusiasm to their profession.

The winners are Samantha Mead, occupational therapist with home health; Cheryl Arellano, optician with Trinity Regional Eyecare – Western Dakota; Elin Ellefson, RN; and Crystal Watham, patient access manager for admitting.

Visionary: The “Visionary” Award honors employees who use creative thinking to build the pathway for development and implementation of new processes that contribute to improved patient care. The nominees serve as role models and motivate others to blaze new trails for providing services.

The winners are Monica Padgett, RN, MSN, clinical nurse educator at Trinity Homes; Deanna Ness, RN, CNA education coordinator at Trinity Homes; Carolyn Seehafer, director of pharmacy at Trinity Hospital; and Jamie Hammer, RN, MSN, director of nursing at Trinity Homes.

Outstanding Team: This award is presented to outstanding teams, committees, or units that consistently demonstrate exceptional teamwork and recognize the value of interdisciplinary practice. The actions of this 16 teams are especially helpful in reinventing our work process to achieve improved outcomes and patient/staff/physician satisfaction.

The winners are Trinity Homes 3 East, Trinity Homes Business Office (Brandi Nickle and Christine Clark), the orthopedic clinic, and Trinity Hospital 5 East.

The winners of the ServiceFIRST Awards were chosen from an anonymous review of nominations submitted by Trinity Health employees.
A cardiac stress test is often considered a universal starting point for assessing a patient’s cardiac health. This test can uncover the first indication of a problem that otherwise might be overlooked.

For this reason, the purpose of the Trinity Health Foundation’s Year-End Appeal is to raise $45,000 to purchase a new cardiac stress testing system for cardiology services at Trinity Health. While the equipment costs $11,000, the Foundation has already received two grants totaling $26,000 for this project. See Evan, director of the Trinity Health Foundation.

Once the system is purchased, Trinity Health will be able to provide this service in Minot and at Trinity Community Clinic – Western Dakota, which will provide patients in western North Dakota with more timely access to this service. “By increasing our access to and timeliness of this procedure in our locations in Minot and Williston, our hope is to show a decrease in stroke and cardiac mortality in the northwest corridor region of North Dakota,” explained Darren Armstrong, director of therapy services at Trinity Health.

The test shows how the heart works during physical activity, “because exercise makes your heart pump harder and faster and exercise stress tests can reveal problems with blood flow within your heart,” Armstrong said. “This testing usually involves walking on a treadmill or riding a stationary bike. Your heart rhythm, blood pressure, and breathing are monitored.”

The cardiac stress test can offer important insights that may lead to the early diagnosis and treatment of cardiovascular disease and atherosclerosis, Armstrong noted. “This early interventional tool for providers and patients will benefit this region’s community by promoting better cardiovascular health to patients.”

Having timely access to a cardiovascular stress test allows patients and physicians with the successful acquisition and interpretation of cardiac conditions. “This testing allows patients and physicians exceptional testing, accuracy, and interpretation of real-time ST-segment monitoring, arrhythmia detection, and resting ECG interpretation,” Armstrong said. “The delivery of these crucial data through each state of the stress test is crucial for interpretation of cardiac abnormalities in adults, adolescents, and children.”

A physician may recommend a stress test if the patient has signs or symptoms of coronary artery disease or an arrhythmia, or an irregular heart rhythm. “This testing may also guide treatment decisions and help plan for the next step in course of treatment,” Armstrong said.

To donate toward the Foundation’s Year-End appeal, call the Foundation office at 701-857-5432 or 701-857-5430, mail to Trinity Health Foundation, P.O. Box 5020, Minot, ND 58702-5020; drop off at Trinity Hospital – St. Joseph’s, 407 3rd St SE, 2nd floor, Minot, or donate online at: www.trinityhealth.org/foundation/donate-to-the-foundation/how-to-make-a-gift/.

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**Recipes for Fall Cooking**

**Roasted Squash**

**Ingredients**
- 3 large butternut squash (about three pounds), peeled and seeded and cut in 1-inch chunks
- 3 tablespoons good olive oil
- 2 teaspoons kosher salt
- 1 teaspoon freshly ground black pepper

**Instructions**
1. Preheat the oven to 400 degrees F.
2. Place the squash on a sheet pan and drizzle with the olive oil, salt, and pepper and toss well. Arrange the squash in one layer and roast for 25 to 30 minutes, until the squash is tender, turning once with a metal spatula.

**Sautéed Red Cabbage**

**Ingredients**
- 2 tablespoons extra-virgin olive oil
- 1 small onion, sliced
- 1/2 red cabbage, shredded
- 1/3 cup white or apple cider vinegar
- 1 tablespoon sugar
- Salt and pepper

**Instructions**
1. Heat a skillet over medium high heat. Add oil and onion, sauté 2 minutes.
2. Add cabbage and turn in pan, sautéing it until it wilts, 3 to 5 minutes.
3. Add apple juice to the pan and turn the cabbage.
4. Sprinkle sugar over the cabbage and turn again.
5. Season with salt and pepper and reduce heat a bit. Let the cabbage continue to cook 10 minutes or until ready to serve, stirring occasionally.

**Healthy Baked Apples**

**Ingredients**
- 2 large apples
- 2 tablespoons brown sugar
- 1 tablespoons butter, melted
- 2 tablespoons quick cooking oats (not instant)
- 1 tablespoons chopped nuts
- 1/2 teaspoon ground cinnamon
- 1/4 teaspoon ground nutmeg
- 1/2 cup apple cider

**Instructions**
1. Preheat oven to 350 degrees F.
2. Cut the apples in half around the middle. Remove the core and seeds with a small spoon, knife, or melon baller. Place the apples in an ovenproof baking dish.
3. In a small bowl, combine the brown sugar, butter, cinnamon, nutmeg, oats, and nuts. Spoon this mixture into the centers of your apple halves. Pour water or apple juice into the baking dish.
4. Bake apples for 30-45 minutes, or until the apples are tender when pierced with the tip of a sharp knife.
5. Serve warm and enjoy!
Antibiotics Aren’t Always the Answer

Antibiotics save lives, but they aren’t the answer to every illness; in fact, when antibiotics are taken unnecessarily, they can cause harm.

Antibiotics Awareness Week is November 18-24. It’s an annual one-week observance that raises awareness of the importance of appropriate antibiotic use to combat the threat of antibiotic resistance, one of the most urgent threats to the public’s health.

“Antibiotic resistance occurs when bacteria change in response to the use, and usually overuse, of antibiotics,” said Terry Alttringer, PharmD, Trinity Health pharmacy clinical services supervisor. “When bacteria become resistant, antibiotics cannot fight them, and the bacteria can flourish.”

According to the Centers for Disease Control and Prevention, an era that existed before antibiotics were developed. Antibiotic resistance is on the rise.

According to the Centers for Disease Control and Prevention, each year in the United States, at least two million people get infected with antibiotic-resistant bacteria, and at least 23,000 people die as a result.

“Antibiotic resistance occurs when bacteria develop the ability to withstand the effects of antibiotics,” said Terry. “This can occur naturally, or through the overuse and misuse of antibiotics.”

Additionally, anytime antibiotics are used, side effects can occur. Common side effects include rash, dizziness, nausea, diarrhea, and yeast infections. More serious side effects include clostridium difficile infection and severe and life-threatening allergic reactions. The CDC says that reactions from antibiotics are slowly increasing in number, and if left unchecked, could usher us back into an era that existed before antibiotics were developed.

A flu shot is currently available at the Health Center – Medical Arts.

Finally, Terry advises people to stay healthy by getting their annual flu shot and washing hands frequently with soap and water or cleansing rubs.


<table>
<thead>
<tr>
<th>Condition</th>
<th>Antibiotics</th>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>Upper Respiratory Infections</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strep throat</td>
<td>X</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Whooping cough</td>
<td>X</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Urinary tract infection</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skin infection</td>
<td>X, Maybe</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Middle ear infection</td>
<td>X, Maybe</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Bronchitis/cough</td>
<td>X</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Sore throat (except strep)</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flu</td>
<td>X</td>
<td>No</td>
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</table>

After receiving antibiotics, people should follow up with their doctor if they develop any side effects. If you aren’t prescribed an antibiotic, doctors do not recommend antibiotics, but doctors do not recommend antibiotics.

Terry said that while most of these resistant bacteria are not common in our hospitals and communities yet, “they are increasing in number, and if left unchecked, could usher us back into an era that existed before antibiotics were developed.”

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