

MEDICAL BRIEFS

Summer shape-up

Make this summer your season for success with the HMR® Weight Management Program at St. Mary Mercy Hospital. HMR is a medically supervised program to manage weight loss through weekly classes and support.

Participants are required to attend a free one-hour orientation session on any of the following dates before joining a class:

- Tuesday, June 4 from 4:30 to 5:50 p.m.
- Wednesday, June 12 from 12 to 1 p.m.
- Tuesday, June 18 from 4 to 5 p.m.
- Wednesday, June 26 from 4 to 5 p.m.

All sessions are held in Community Outreach Classroom 11 located in the lower level. To pre-register, call 734.655.1783. St. Mary Mercy Hospital is located at 36475 Five Mile Road at Levant, Livonia. Please use the Five Mile Road Entrance.

Improve your marriage

Women's Health Services of Saint Joseph Mercy Health System will offer a four-part series that will offer suggestions to improve marriage. The series is for those who are newly wed or those who have been together for decades. The program will explore the differences in how men and women communicate, how to effectively manage disagreements, ways to resolve power struggles, and balancing emotional and physical intimacy.

Part one - *Understanding Each Other* - will be held 7-8:30 p.m. Wednesday, June 12, in the Education Center, St. Joseph Mercy Hospital, 5301 East Huron River Drive. Cost is \$15 per person, per each session of the four-part series.

Upcoming sessions include *Fighting Fair, Power Balances and Imbalances, and Emotional Intimacy and Sexuality*. To register or for more information, call the Saint Joseph Mercy HealthLife toll-free at (800) 231-2211.

No smoking

The Southeast Michigan Clean Indoor Air Network is proclaiming World No Tobacco Day on May 31. Take the Smoke-Free Home Pledge...at least for one day.

Secondhand smoke is the third leading cause of preventable death in Michigan, killing at least 1,000 non-smokers every year. The burning end of a cigarette contains over 4,000 chemicals and substances that cause cancer. Children exposed to secondhand smoke have an increased risk of developing serious lung problems, including asthma, bronchitis and pneumonia.

Call the toll-free Smoke-Free Home Pledge Hotline at (800) 513-1157 for a free smoke-free home kit that contains:

- Tips on keeping your home smoke-free
- Smoke-free home magnet
- Smoke-free home certificate

World No Tobacco Day is an opportunity to promote tobacco-free environments. It's a day to ensuring that no one will ever again have to suffer the pain and devastation of tobacco addiction. For more information, call the Michigan Department of Community Health at (617) 335-8373 or the American Cancer Society at (248) 657-5353.

Making connections

There are several ways you can reach the Observer Health & Fitness staff. The Sunday section provides numerous venues for you to offer noteworthy information including Medical Databook (upcoming calendar events), Medical Newsletters (appointments/news items in the medical field), and Medical Briefs (medical advances, short news items from hospitals, physicians, companies). We also welcome noteworthy ideas for health and fitness related stories. To submit an item to our newspaper you can call, write, fax or e-mail us.

CALL:
(248) 901-2576

WRITE:
Observer & Eccentric Newspapers
(Specify Databook, Newsletters or Briefs)
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Falls present a significant threat to senior citizens

BY RENEE SROGLUND
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For senior citizens, a fall can mark the end of independence. Hip fractures, the most common trauma of a fall, often result in hospital stays of two or more weeks. Sadly, half of all older adults hospitalized for hip fractures never return home or live independently after their injuries.

"Falling is one of the leading causes of death among seniors," said Gary P. Jacobson, director of Henry Ford Hospital's Risk of Falls Clinic in Detroit. "And with the population aging, the problem will become progressively worse."

According to Jacobson, 20 percent of elderly in this country who

sustain a hip fracture from a fall will die within a year; another 20 percent will be moved to an impatient long-term care center; and of those who sustain hip fractures, 49 percent will die within six months.

And in a country that equates health care with dollars, the cost of caring for seniors injured from falls is estimated at close to \$20 billion.

The Risk of Falls Clinic is part of the Henry Ford Hospital's Department of Otolaryngology. It is believed to be the first clinic of its kind in metro Detroit that offers patients a comprehensive assessment of risks associated with falling, from specific diseases or conditions such as Parkinson's

Disease, osteoporosis and depression to balance impairment, vision problems and the cumulative effect of multiple medications.

There's been a tremendous amount of research about the risks of falling, said Jacobson. However, coordinating and applying this research in a clinical setting is new. "There is beginning to be a greater awareness of falls being more than accidental. But we've been looking at it nearsightedly instead of being multi-focused."

Society's myopia may be changing. Since the clinic's inception last fall, over 50 patients have been evaluated. Their average age is 75, and most of them are women.

Risk factors

Jacobson sees two classes of patients in the Risk of Falls Clinic: Those who have a fear of falling or who previously have been evaluated for risk of falling and those who have already experienced a fall. The latter class is most at risk for falling again, according to American Academy of Family Physicians.

Jacobson and his colleagues administer a battery of outpatient tests over two days to evaluate a patient for risks. Their assessment includes the following:

- **History** - This includes previous falls, medication use, gait problems or weaknesses, dizziness/vertigo/loss of consciousness, major illnesses and problems in the home environment, such as loose throw rugs, improper lighting and lack of safety bars.

- **Cognitive** - Is the patient aware of his immediate environment? Does she forget to hold onto the handrail while walking down the stairs or to turn on the bedroom light while navigating to the

Please see FALLING, C6



Gary P. Jacobson,

■ 'Falling is one of the leading causes of death among seniors. And with the population aging, the problem will become progressively worse.'

Gary P. Jacobson
Director, Henry Ford Hospital's
Risk of Falls Clinic, Detroit

Reduce older adults' risk of falling

■ Maintain a regular exercise program. Exercise improves strength, balance and coordination.

■ Take steps to make living areas safer. Remove tripping hazards and use non-slip mats in the bathtub and on shower floors. Have grab bars put in next to the toilet and in the tub or shower. Have handrails put in on both sides of all stairs.

■ Ask their doctor to review all of their medicines in order to reduce side effects and interactions.

■ Have an eye doctor check their vision each year. Poor vision can increase the risk of falling.

Source: Centers for Disease Control and Prevention



STAFF PHOTO BY BRYAN MITCHELL

Preventing falls: Dr. Bharati Srivastava, a geriatric specialist with Saint Joseph Mercy Health System, discusses risk factors for falling with patient Mildred Nix of Livonia at SJM's Senior Health Clinic in Canton.

Achievement award

U of M doctor receives highest honor in surgery

■ 'Hundreds of people at the U of M deserve credit for this award.'

Dr. Robert Bartlett
Professor, general surgery and chief,
Division of Critical Care

Bartlett was recognized for his contributions in the care of the critically ill patient, and specifically for developing Continuous Hemofiltration for the treatment of kidney failure and Extracorporeal Life Support, commonly known as Extracorporeal Membrane Oxygenation or ECMO. These techniques use artificial organs (heart, lung and kidney) to sustain the life of critically ill patients while their own injured organs can recover. The techniques developed at the University of Michigan Medical School are now used in intensive care units worldwide, saving the lives of thousands of patients each year.

"Hundreds of people at the U of M deserve credit for this award," Bartlett says. "The U of M provides a unique environment that supports the laboratory and clinical research - and the clinical practice - which makes this type of scientific progress possible."

Bartlett's research on artificial

organs in intensive care has been supported by the National Institutes of Health since 1972. The progression from bench laboratory studies to successful clinical practice is now called "translational research." In 1992, the NIH cited the development of ECMO as a prototypic example of how high-tech medicine should be brought from concept to worldwide practice.

ECMO has been used most extensively for newborn infants with respiratory failure. Every major children's hospital has an ECMO program. In the last decade, ECMO has been successfully extended to older children and adults with respiratory and cardiac failure.

Currently the U of M Extracorporeal Life Support team is conducting trials

Please see AWARD, C7



Dr. Robert Bartlett