



## How to Know If Your Bladder Is Working Overtime

Marie-Blanche Tchetgen, M.D., Urology



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**D**o you experience possible signs of urge incontinence, or overactive bladder? Perhaps you urinate eight or more times a day or two or more times a night? Does an irresistible urge to urinate ever make you wet yourself?

An overactive bladder, like other types of urinary incontinence, is a common problem affecting women. However, it isn't normal—and, fortunately, it can be treated.

Urge incontinence sometimes signals another medical problem, such as an infection in your bladder or kidneys. Or it may stem from nerve damage during childbirth. For some women, drinking alcohol or taking certain medicines triggers an overactive bladder.

Some women suffer from mixed incontinence, in which an overactive bladder aggravates a common condition called stress incontinence. Women with stress incontinence leak urine when they cough, sneeze, or laugh.

If your physician determines that you have an overactive bladder, she may ask you to keep a diary for a few days, noting the medicines you take, when you go to the bathroom, and when you have accidents.

Treatments and self-care tips proven effective for an overactive bladder include the following:

- Perform Kegels. These simple exercises, which you can do anywhere, strengthen the pelvic floor muscles that hold in the urine. Strong pelvic floor muscles can interrupt an overactive bladder and prevent an accident.
- Train your bladder. By following a programmed timetable to urinate, you gradually increase the intervals between trips to the toilet by 15 to 30 minutes each week, until you're up to a normal time interval.
- Limit or avoid foods that may prompt an urge to urinate. These include alcohol and foods and beverages that contain caffeine, such as coffee, tea, cola, and chocolate. Other possible offenders include artificial sweeteners, tomatoes, citrus fruits and juices, and spicy foods.
- Cut down on fluid intake before bedtime.
- Take a closer look at any prescription drugs you take. If necessary, work with your physician to find substitutes for possible offenders, including diuretics, sedatives, narcotics, antidepressants, and antihistamines. If self-care steps can't curb an overactive bladder, visit a urologist to determine if surgery may be necessary. ■



## Bariatric Surgery for Effective Weight Control

**W**hen obesity is treated effectively, patients can expect significant improvement in common conditions such as hypertension, type 2 diabetes, and cardio and pulmonary disorders. Unfortunately, for many patients, interventions that rely on medically supervised diet, exercise, and behavior modification produce only modest and often transient results. For patients who meet the criteria, however, and who receive appropriate long-term, multidisciplinary support, bariatric surgery can be an effective therapeutic

alternative for weight loss, long-term risk reduction, and improved quality of life.

### Effectiveness of Bariatric Surgery

One of the common bariatric procedures in the U.S. is laparoscopic adjustable gastric banding (LAGB). This procedure restricts stomach capacity by placing an adjustable band around the most proximal region of the stomach. After LAGB, patients experience feelings of fullness as stomach capacity is approached. They may also experience nausea, discomfort, and vomiting when capacity is exceeded.

As a restrictive procedure, the sleeve gastrectomy performs in a similar manner to the gastric band but without the high maintenance of having an implanted device requiring adjustments. The stomach is divided vertically, with more than 85 percent of it being removed. The nerves to the stomach and the outlet valve (pylorus) remain intact with the idea of preserving the functions of the stomach while drastically reducing its volume.

### Selecting for Success

Successful bariatric surgery depends on proper patient selection. Current guidelines identify candidates for surgery as patients with a body mass index (BMI) of at least 40 (or a BMI of 35 with a comorbidity), a history of ineffective dietary weight control, no medical or psychological contraindications, a proper understanding of the procedure and its risks, and strong motivation to comply with the postsurgical regimen.

With the proper motivation and support, bariatric surgery can help improve health-related quality of life for morbidly obese patients.

See page 4 for dates and times of upcoming seminars. ■

### Augustus Lyons, M.D., Bariatric Surgery



Dr. Lyons is a general surgeon on staff at USMD Hospital at Arlington. To schedule an appointment with him, call (888) 444-USMD.

## WEIGHT LOSS AND EXERCISE BENEFIT PEOPLE OF ALL AGES

There are numerous benefits of losing weight and following a regular exercise program—even for individuals who are challenged by conditions such as joint pain, diabetes, arthritis, or osteoporosis. Weight loss and exercise have also been shown to be beneficial to people of all ages, as they help to lower blood pressure, lower the risks for falls and serious injuries (such as hip or wrist fractures), and slows the body's loss of muscle and bone mass. In addition, exercise helps to:

- Build stronger muscles and bones
- Boost self-image
- Relieve insomnia
- Relieve tension and stress

- Enhance cardiovascular fitness
- Control appetite
- Reduce the risk for disease

It's never too late to start a weight loss program that includes regular exercise. If you are challenged to lose weight and/or have battled obesity, however, you might consider bariatric surgery.

To help determine if bariatric surgery is an option for you, attend one of our FREE monthly bariatric surgery seminars. See page 4 for upcoming dates and times.





## Focus on Healthier Eyes

**Y**ou may be surprised to learn that much of the same advice you hear about preventing heart disease, diabetes, cancer, and lung disease also applies to protecting your vision. Some of the best things you can do to prevent or control disabling eye diseases include the following:

- **Have periodic eye exams.** A comprehensive evaluation is vital to early detection of problems that could lead to serious vision loss and blindness if left untreated. This is especially true if you have diabetes. Many eye diseases have no symptoms in their early stages, making eye exams critical.
- **Control your blood sugar if you have diabetes.** Very high blood sugar levels can quickly lead to blurred vision. If they stay elevated over time, they can lead to diabetic retinopathy. Controlling those levels through diet, exercise, medication, or other means can help you avoid expensive changes to prescription lenses as well as more serious vision loss.
- **Keep blood lipids under control.** A

standard blood test can determine the levels of cholesterol and other lipids (fat) in the bloodstream. High lipid levels may raise your risk for cataracts and other eye diseases. In those with diabetes, high lipid levels worsen the risk for diabetic retinopathy.

- **Rein in high blood pressure.** Long-term hypertension raises the risk for vision loss from a number of causes. In addition, there's a strong link between higher blood pressure levels and diabetic retinopathy in people with type 2 diabetes.
- **Quit smoking.** Smoking is a major cause of heart disease and lung disease—and it has been linked to age-related macular degeneration (AMD), cataracts, and diabetic retinopathy, among other eye diseases.
- **Limit exposure to ultraviolet light.** Even at low levels, UV light has been linked to increased risk for some kinds of cataracts. Wear sunglasses that filter out 99 to 100 percent of both UVA and UVB rays.
- **Adopt a healthy lifestyle.** A healthy diet, regular exercise, and weight control can help prevent or manage diabetes (and its related vision threats) and may reduce your risk for AMD.

Your physician can help you determine which risk factors you may need to address. He or she can also help you create a plan for managing those risks. ■

## RELIEF FOR DRY, IRRITATED EYES

When eyes always fail to produce enough tears, dry eye can result. Symptoms include a constant burning or irritation. Many say it feels like having sand or an eyelash stuck in their eye.

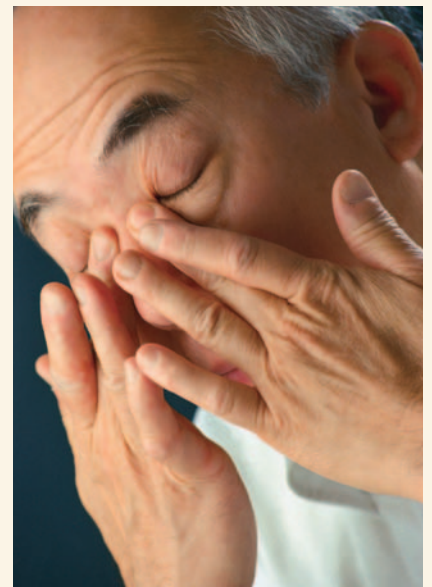
Possible causes include:

- Contact lenses
- Allergies
- Extended computer use
- Certain diseases and medications.

The problem becomes more common as people age, because eyes are less efficient at producing tears. In women, pregnancy also can bring on hormonal changes that affect tear production.

To relieve symptoms:

- Use over-the-counter artificial tears
  - Avoid or shield eyes from smoke, air conditioning, hair dryers, and other irritants
  - Use a humidifier when the air is dry
  - Remember to blink when using a computer
- If symptoms persist, see a doctor.



### Everett Moody, M.D., Ophthalmology



Dr. Moody is an ophthalmologist on staff at USMD Hospital at Arlington. To schedule an appointment with him, call (888) 444-USMD.



## SEMINARS

The following **FREE** seminars will be offered at USMD Hospital at Arlington.

### ED and Incontinence Seminar

Dr. Price and Dr. Johnson  
February 8 at 6:30 p.m.  
Learn about treatments for erectile dysfunction and urinary incontinence, from new drugs to penile implants.

### Bariatric Seminar

Dr. Lyons and Dr. Dyslin  
6 p.m.  
• February 17  
• March 17  
• April 21  
Find out if procedures such as adjustable gastric band placement or sleeve gastrectomy are an option for you.

To sign up for one of these **FREE** seminars, visit our website at [usmdarlington.com](http://usmdarlington.com) and click on "Seminars & Events."

## LIVING healthy

*Living Healthy* is published by USMD Hospital at Arlington to educate readers about issues important to their health. It is not intended to replace consultation with a personal physician.  
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## Hospital Named One of the Best Places to Work

*"Pleasure in the job puts perfection in the work."* –ARISTOTLE

**U**SMD Hospital at Arlington consistently receives extraordinary patient satisfaction ratings (currently 98 percent), of which we are very proud. We have one of the top five Robotics programs in the country, which is a major accomplishment. We have won awards like the Press Ganey Compass Award for patient satisfaction, and we have Top Docs on our Medical Staff. However, one of the most important awards USMD Hospital at Arlington has ever won was being named one of the 100 *Best Places to Work in Texas!*

You are probably wondering what this has to do with you as a patient or potential patient. Why would you care if everyone who works at our hospital loves being there? Well, that is precisely my point: Our employees love working here, love what they do, love this facility, and that means they love taking care of you, our patients.

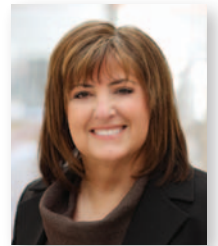
Companies are selected based, in part, on their workplace policies, practices, and demographics, but most importantly 75% of an organization's final score is based on a survey of its employees.

We are very excited about USMD Hospital at Arlington being named to the top 100 list of *Best Places to Work in Texas*. This honor affirms for us—and I hope for you—that our hospital has suc-

cessfully created an environment that attracts top quality employees who have the desire and the skill set to deliver exceptional patient care day in and day out.

We understand our patient satisfaction ratings are a reflection of our world-class physicians, cutting-edge technology and beautiful facility, but our ratings may be tied most directly to the people who work here. I truly believe our hospital's ability to deliver extraordinary patient care is tied to the attitude and commitment of every one of our employees.

If you have a medical need, I hope you will choose one of our dedicated physicians. If treatment requires a hospital setting, I hope USMD Hospital at Arlington will be your hospital of choice. We welcome the opportunity to demonstrate why both patients and staff give the hospital rave reviews. ■



**Karen A. Fiducia, FACHE, President, USMD Hospital Division and CEO, USMD Hospital at Arlington.**

For a physician referral or more information about the hospital, call **(888) 444-USMD.**