Michael E. DeBakey Veterans Affairs Medical Center

VA Star

Vol. 8 No. 1 An Information Guide for the Veterans We Serve in Southeast Texas January/February 2009

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ASK NOW about your FLU SHOT

Only 5% of the doctors in the country are selected: MEDVAMC boasts 28 staff physicians plus 38 consultant and attending physicians.

66 Houston VA Docs Listed as "Best Doctors" in the Nation

HOUSTON – The medical knowledge company, Best Doctors, Inc. has included 66 physicians who provide patient care at the Michael E. DeBakey VA Medical Center (MEDVAMC) in the latest compilation of The Best Doctors in America® database.

"I am very pleased with this recognition of our physicians' clinical excellence by Best Doctors," said Blase A. Carabello, M.D., MEDVAMC acting chief of staff. "This is yet another indicator of how the Michael E. DeBakey VA Medical Center continually strives to offer the highest quality health care possible for veterans living in southeast Texas."

The MEDVAMC, located in Houston, boasts 28 staff physicians on the Best Doctors list, along with 38 physician consultant and attending physicians. **A list of the MEDVAMC staff physicians selected as the best in their field is available on page 5.**

According to its Web site, Best Doctors, Inc. is the global leader in providing information about, and access to, the best medical care in the U.S. and around the world. Founded in 1989 by doctors affiliated with the renowned Harvard University School of Medicine, the company uses continuous peer-to-peer surveys to identify specialists in more than 400 subspecialties of medicine who are considered by fellow physicians to be the most skilled in their fields and most qualified for reviewing and treating complex medical conditions. Their polling process is anonymous and confidential, qualitative, and quantitative. It provides detailed profiles of each physician, including his or her practice, research programs, and diagnostic and treatment procedures.

Best Doctors is completely independent. Doctors do not pay to be included in the database, nor does the company pay them to participate in the survey. The judgment of peers is the determining factor. Surveyors contact all currently elected physicians, including many department heads at major teaching hospitals, and ask them to rate specialists outside their own facilities. The process of peer review requires every listed physician be re-evaluated with each new survey. With person-to-person telephone interviews and proprietary polling and balloting software, more than 1.5 million evaluations are collected

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Photo by Bobbi D. Cramer, MEDVAMC Public Affairs Officer

Listed as one of the best doctors in the nation in the field of critical care medicine, Samir S. Awad, M.D., Surgical Intensive Care Unit chief at the Michael E. DeBakey VA Medical Center, examines veteran Jimmy Ray Yancey during a recent appointment. Awad is also an associate professor in the Michael E. DeBakey Department of Surgery at Baylor College of Medicine. His areas of specialty include liver, pancreas, and endocrine surgery, as well as minimally invasive surgical practices.

Approximately 70 percent of veterans with traumatic brain injury suffer some type of visual disturbance.

Retraining the Brain with Extraordinary Eyeglasses

Photo by Bobbi Cramer, MEDVAMC Public Affairs Officer

Kia B. Eldred, O.D., F.A.A.O., a Diplomate in low vision at the MEDVAMC Visual Impairment Services Center works through a prism adaptation therapy session with U.S. Marine veteran Steven Schulz, who was wounded in Iraq by an improvised explosive device.

HOUSTON – The Michael E. DeBakey VA Medical Center (MEDVAMC), a leader in the treatment and rehabilitation of veterans with traumatic brain injuries (TBI), is continuing to adapt its programs and offer cutting-edge technology to meet the needs of the men and women who have served in Operation Enduring Freedom in Afghanistan (OEF) and Operation Iraqi Freedom in Iraq (OIF). The latest breakthrough is the use of specialized prism eyeglasses that retrain the brain to treat hemispatial neglect.

Patients suffering from TBI may lose half of their vision in each eye. This type of vision loss is called hemianopsia. Patients who have hemianopsia are often aware of their vision loss and can be taught to scan their environment to compensate for the visual field loss. Patients with hemispatial neglect unintentionally ignore part of their vision because of a lesion in the visual processing section of the brain.

In the last year, Kia B. Eldred, O.D., F.A.A.O., a Diplomate in low vision at the MEDVAMC Visual Impairment Services Center began using prism

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DeBakey VA Uses Skill and Technology to Tackle Rare, Life-Threatening Medical Condition

HOUSTON – Recently, a cardiovascular team at the Michael E. DeBakey Veterans Affairs Medical Center (MEDVAMC) used their expertise, teamwork, and the latest cutting-edge technology to repair an ascending aortic pseudo-aneurysm, a rare, life-threatening medical condition.

An aneurysm is a ballooning of an artery resulting from a weakening or stretching of the arterial wall. Aneurysms may occur in any blood vessel, but the most common place is in the abdominal aorta just below the kidney arteries. The aorta is the large arterial trunk that carries blood from the heart to be distributed by branch arteries through the body. A pseudo-aneurysm is where the aorta has slightly torn and the surrounding tissue has created a sack of blood.

The patient, Bobby Ray Kelly, a 73-year old, U.S. Navy veteran from Houston, has a complex cardiac history including previous open heart surgery with aortic valve replacement and coronary artery disease.

"Treating this extremely serious medical condition traditionally requires an extensive, re-operative, open heart surgery with the use of a heart-lung machine," said Faisal Bakaeen, M.D., Cardiothoracic Surgery chief. "Mr. Kelly was very interested in an alternative where the possible benefits included reduced risk of infection, less blood loss, less post-operative pain and trauma, decreased length of stay in hospital, and swifter recovery time."

"The patient decided this was the type of procedure he wanted and underwent a minimally invasive, catheter-based approach in our state-of-the-art hybrid surgical suite to treat the aneurysm," said, Biswajit Kar M.D., Cardiac Catheterization Laboratory director. "The team placed an Amplatzer® device to close the patient's large, ascending aortic pseudo-aneurysm."

"This procedure is very unique and has only been performed a handful of times," said, Pranav Loyalka M.D., a member of the cardiovascular team. "Mr. Kelly is doing very well and went home just a few days after the procedure."

Photo by Bobbi Conner, Public Affairs Officer

Faisal Bakaeen, M.D., Cardiothoracic Surgery chief (left), and Biswajit Kar, M.D., Cardiac Catheterization Laboratory director, check up on Bobby Ray Kelly, a 73-year old, U.S. Navy veteran from Houston. Bakaeen and Kar are members of the cardiovascular team at the Michael E. DeBakey Veterans Affairs Medical Center who used their expertise, teamwork, and the latest cutting-edge technology to repair Kelly's ascending aortic pseudo-aneurysm, a rare, life-threatening medical condition.

The MEDVAMC's hybrid surgical suite combines endovascular, cardiac catheterization, cardiac surgical, and radiological capabilities, allowing maximum flexibility and speed in the treatment of patients with even the most complicated cardiac and vascular conditions. Many veterans with complex aortic aneurysms, for instance, may undergo multiple procedures including open surgical and minimally invasive catheterization procedures utilizing high-tech imaging technology.

"The hybrid surgical suite enables less invasive, more accurate, and very precise treatment of cardiac and vascular diseases and conditions," said Peter Lin M.D., Vascular Surgery chief. "Using a digital angiography system to reconstruct arteries, physicians can manipulate images and obtain a better vision of complex anatomy or overlapping blood vessels."

During this procedure to repair the ascending aortic pseudo-aneurysm, the doctor makes a small incision in the groin and threads the delivery system and implant through blood vessels to the site of the defect. When the doctor is certain the device is placed properly, the implant is released from the delivery system and opened so the defect is sandwiched and closed by the mesh discs. The implant remains in the body and the delivery system is removed. Once the device is in place, tissue will eventually grow over it.

"I have been so impressed with each and every doctor and nurse at the Michael E. DeBakey VA Medical Center," said Kelly. "Dr. Bakaeen and Dr. Kar are two of the best physicians I have ever met and I am very grateful for their absolute focus on my care and recovery."

"The positive outcome of this very unique and difficult case is a perfect example of the multidisciplinary team approach that exists between the Cardiology and Surgical specialties at the Michael E. DeBakey Veterans Affairs Medical Center," said Biykem Bozkurt, M.D., Cardiology Section chief.

In 2007, the MEDVAMC received praise from the VA Continuous Improvement in Cardiac Surgery Program for decreasing its already exceptionally low cardiac surgery mortality rate despite increased patient load caused by the 2005 hurricanes and from the VA Inpatient Evaluation Center for having a significantly low standardized mortality rate in its Surgical Intensive Care unit for fiscal years 2005 and 2006.

"We strive to offer our veterans the latest and the best in the field of surgery and medicine," said David Berger, M.D., Operative Care Line executive. "Our surgery service handles a high volume of patients and has been recognized for its excellent patient outcomes." ♦

A Word from the Director . . .

Get Involved with National Salute Week

Edgar L. Tucker, Medical Center Director

HOUSTON - February 8 through 14, 2009 is a special time at Department of Veterans Affairs Medical Centers across the nation. Established as an official VA program in 1978, this week is known as National Salute to Hospitalized Veterans and is an annual event designed to increase awareness of hospitalized veterans and the sacrifices they have made for our nation. Here in Houston, it is an opportunity for the public to visit the Michael E. DeBakey VA Medical Center (MEDVAMC), meet America's veterans, and explore the various aspects of our facility's volunteer program.

Columnist Ann Landers initiated a movement several years ago encouraging school children and adults alike to write a special note of thanks to hospitalized veterans in a Valentine's Day greeting. We take great care in distributing these cards to veterans and displaying them throughout our hospital during this particular week.

In many cases, students deliver their Valentines in person. It is touching to see how young children brighten the lives of hospitalized veterans with their colorful Valentines. Cards come in every shape and size - and are made with everything from tissue paper, stickers, and colored doilies to crayons, construction paper, and stamps. One thing all of these cards have in common is they are made with love and respect for our nation's veterans.

In addition to school children, hospitalized veterans and those with outpatient clinic appointments receive visits and enjoy special programs provided by community and area veteran service organizations, ROTC and Junior ROTC members, elected officials, celebrities, and local personalities throughout the week. These visits have traditionally included personal time together sharing stories and interests, playing cards or board games, and distribution of U.S. flags.

National Salute also draws awareness to the role of MEDVAMC in the community, as well as the many important volunteer opportunities at the facility.

I encourage you to consider sending a Valentine to a hospitalized veteran or scheduling a visit to the MEDVAMC in support of the week's special activities. I know you will enjoy the wonderful atmosphere created by staff and volunteers to honor our nation's heroes. The cheer and well wishes spread to hospitalized veterans is quite 'contagious' and is a 'prescription you can fill!'

Contact our Voluntary Service Program at (713) 794-7135 or *vhahouvolunteer@va.gov* for more information.♦

Refill Your Prescriptions Online

It's fast, easy, convenient, and secure!

Visit *www.myhealth.va.gov* on the Internet and register today.

Houston VA Collaborates with Military Blood Bank to Save Precious Resource

HOUSTON – The Michael E. DeBakey VA Medical Center recently began collaborating with the Robertson Blood Center, a U.S. Army Blood Bank based at the Carl R. Darnall Army Medical Center at Ft. Hood, Texas to save taxpayer money and maximize the use of a valuable and perishable resource.

Medical technology has provided many life-saving discoveries over the years, but there is still no substitute for blood. In a medical emergency, often the most important element is the availability of blood. Blood not used in a timely manner must be discarded.

The Robertson Blood Center provides blood not immediately needed by the U.S. Army, to the Michael E. DeBakey VA Medical Center.

"This partnership between the U.S. Army and the Michael E. DeBakey VA Medical Center not only saves a tremendous amount of money and prevents waste of a precious resource; but more importantly, our joint commitment helps save the lives of our nation's heroes," said Michael M. Ittmann, M.D., Ph.D., Pathology and Laboratory Medicine chief.

Serving the Carl R. Darnall Army Medical Center and supporting the Global War on Terrorism, the Robertson Blood Center is the premier blood donor center in the United States Army and the Department of Defense.

"From May 2008 until today, the Michael E. DeBakey VA Medical Center has saved more than $300,000. In the month of May, we bought less blood than any other time in the past," said Molla Shibeshi, Blood Bank supervisor. "This was possible because our staff's can-do attitude and the cooperation of Mrs. Tribia Parham, the Robertson Blood Center supervisor."

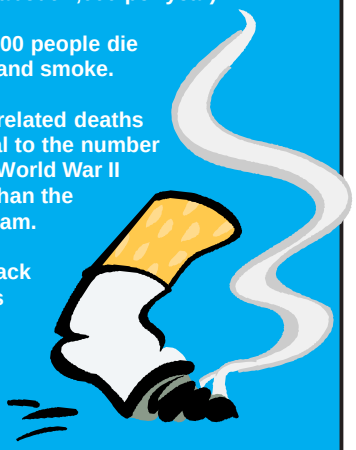
"I am very proud of the job the Blood Bank staff does here at the Michael E. DeBakey VA Medical Center. Our personnel are dedicated and we take seriously the job of serving those who have served our country," said Meena Vij, M.D., Diagnostic and Therapeutic Care Line executive. ♦

Photo by Bobbi Gomez, MEDVAMC Public Affairs Officer

Collaborating with the U.S. Army Robertson Blood Center has not only saved the Michael E. DeBakey VA Medical Center a substantial amount of money, but has maximized the use of a valuable and perishable resource. "From May 2008 until today, the Michael E. DeBakey VA Medical Center saved more than $300,000. In the month of May, we bought less blood than any other time in the past," said Molla Shibeshi, Blood Bank supervisor.

Did You Know?

- **Smoking kills more than 440,000 people per year in the U.S. alone. That's more than alcohol, cocaine, herion, homicide, suicide, car accidents, and AIDS combined.**
- **About 90% of lung cancer cases are linked to smoking.**
- **More than 90% of all deaths from chronic obstructive pulmonary diseases are attributable to smoking.**
- **Dropped cigarettes are the leading cause of residential fire fatalities (about 1,000 per year).**
- **It is estimated about 50,000 people die each year from second-hand smoke.**
- **The number of smoking related deaths in one year is about equal to the number of U.S. military deaths in World War II and about 7 times more than the military death toll in Vietnam.**
- **At $3 per pack and one pack per day, a smoker spends about $1,100 per year.**



SOURCE: NIDA Research Report Series: Tobacco Addiction. NIH Publication #06-6342. Revised, 2006 and VA Office of Public Health and Environmental Hazards

Talk to your primary care provider about programs to help you stop smoking during your next appointment or call 1-800-Quit-Now.

Travel Reimbursement Increases

WASHINGTON, D.C. – The VA announced last November that eligible veterans will see an increase in the mileage reimbursement they receive for travel to VA facilities for medical care.

The mileage reimbursement was raised from the 28.5 cents per mile to 41.5 cents per mile for all eligible veterans.

Congress, which mandates such increases, recently provided funding to VA to increase the reimbursement rate effective November 17, 2008. Service connected veterans, veterans receiving VA pensions, and veterans with low incomes are eligible for the reimbursement.

While increasing the payment, the current deductible amounts applied to certain mileage reimbursements will remain frozen at $7.77 for a one way trip, $15.54 for a round trip, and capped at a maximum of $46.62 per calendar month.

On January 9, 2009, these deductibles decreased to $3 for a one way trip, $6 for a round trip, with a maximum of $16 per calendar month. Deductibles may be waived if they cause a financial hardship to the veteran.

Veterans, living in southeast Texas who have questions about this increase or mileage reimbursement, may call (713) 794-7897 or send an e-mail to *erick.smith@va.gov*. ♦

Study Shows Need for Increased Education about Panic Attacks

HOUSTON – The symptoms of panic attacks are frequently confused by physicians with other problems, indicating a need for better education in that area of medicine, said researchers at Michael E. DeBakey VA Medical Center (MEDVAMC), who surveyed physicians on the topic.

"Because symptoms of panic attacks can be confused with those of other medical problems related to the heart and gastrointestinal tract as well as neurological problems, a lack of knowledge about panic attacks can lead to unnecessary referrals and tests," said Ellen Teng, Ph.D., a clinical research psychologist.

Researchers evaluated 95 surveys received from cardiologists, gastroenterologists, and neurologists in the Houston area. The survey questions included information about those most at risk for panic attacks and treatment options.

The physicians answered only half of the survey questions about panic attacks correctly. There was no difference in knowledge among the three specialty groups.

While 94 percent recognized medication as a way to treat panic and anxiety symptoms, only about 30 percent recognized cognitive behavioral therapy to educate patients about panic attacks and their symptoms and give them tools to deal with the problem as the treatment of choice.

"Medication does treat the short-term aspects of panic attacks such as shortness of breath and a racing heart, but cognitive behavioral therapy treats panic disorder in the long-term," said Teng.

Only slightly more than half of the physicians surveyed believed psychologists could treat panic attacks directly and effectively through this technique.

Teng called for increased awareness of panic disorder among physicians and recommends providing resources and literature for physicians to make appropriate referrals to psychologists.

Common symptoms of a panic attack include heart pounding, shortness of breath, trembling, and light headedness. Panic disorder develops when several panic attacks occur out of the blue. Patients then worry about what the attack means and when the next one will take place, which may cause them to avoid certain places or events.

If a panic attack does occur for the first time, Teng recommends seeing a physician to rule out the risk of heart disease or another serious problem.

Others who took part in this research study include Drs. Angelic D. Chaison, Sara D. Bailey, Joseph D. Hamilton, and Nancy Jo Dunn, all of Baylor College of Medicine and the MEDVAMC. Funding for this work came from the VA South Central Mental Illness, Research, Education and Clinical Centers. ♦

Recognizing Suicidal Behavior

HOUSTON - By the time you finish reading this article, at least one person in the U.S. will have attempted suicide. It is estimated that someone attempts suicide once every minute, and one person dies by suicide about every 16 minutes. Suicide is a preventable tragedy, so it is important to recognize the warning signs. They include:

- Talking about wanting to hurt or kill oneself.
- Seeking access to pills, weapons, or other means.
- Talking or writing about death, dying, or suicide.
- Increasing alcohol or drug abuse.
- A general feeling of hopelessness.

Most people who commit suicide give some warning sign. If you think someone may be suicidal, you can help:

- Do not leave them alone.
- Listen and acknowledge their distress and concerns.
- Let them know you care about them and how they feel. Try to get them to seek immediate help.

Recognizing that a call for help needs immediate response, VA established a 24-hour National Suicide Prevention Lifeline: 1-800-273-TALK (8255). Staffed by mental health professionals, there is always someone available to talk to at the Lifeline.

In addition, the Michael E. DeBakey VA Medical Center (MEDVAMC) operates the VA Network Telecare Center at (713) 794-8985, (713) 791-1414 ext. 2458, or toll-free 1 (800) 639-5137. Seven days a week, 24 hours a day, registered nurses with specialized training are ready to answer health care questions, provide medical and emotional support plus emergency counseling assistance, and help with stress and anxiety.

The MEDVAMC also has two suicide prevention coordinators on staff:

Kathy Molitor, LCSW
Suicide Prevention Coordinator
713.791.1414, ext. 3415
Molitor.Kathleen@va.gov
www.mentalhealth.va.gov

C. Brent Arnspiger, LCSW
Suicide Prevention Coordinator
713.791.1414, ext. 6282
Clifton.Arnspiger@va.gov
www.mentalhealth.va.gov

Suicide is not the answer. It is an irreversible solution to a temporary problem. Veterans need to know that with treatment, it is possible to find their way back to a happier life. VA understands what veterans have been through and is here to help.♦

Extraordinary Eyeglasses

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adaptation therapy to treat veterans suffering from hemispatial neglect. Eldred is a member of the Visual Impairment Services Outpatient Rehabilitation (VISOR) program in the MEDVAMC Eye Care Line.

"Prism glasses are intended to shift the image to the right in order to retrain the visual and motor system to become aware of objects on the left side," said Eldred.

Marine Cpl. Steven Schulz was serving his second tour in Iraq in April 2005 when an improvised explosive device left him blind in his right eye and suffering from TBI.

"The vision in my left eye isn't that good. My brain forgets to look to the left so I bump into stuff," said Schulz. "About a month ago, I began working with Dr. Eldred, Tonya who is a low vision therapist, and the prism glasses to retrain my brain. I do the exercises twice a day at home and have already noticed an improvement."

Advances in armor and Kevlar helmets have reduced the number of fatal gunshot wounds but still leave the brain vulnerable to improvised explosive devices, land mines, and mortar attack. TBI, the signature injury of recent combat, can result when the brain ricochets inside the skull during the impact of an object or blast waves.

A recent Rand Corporation report estimated that 320,000 of the 1.64 million troops deployed in Iraq and Afghanistan are affected by TBI. Of those, approximately 70 percent suffer some type of visual disturbance.

"Improving field of vision dramatically increases a veteran's ability to respond to rehabilitation programs and function more independently," said Tonya A. Mennem, O.T.R., S.C.L.V., a low vision therapist at the MEDVAMC. "We want to maximize a veteran's quality of life, reduce dependence on family and community, and address patient safety issues such as falls, burns, and medication errors."

In anticipation of increased demand for visual impairment services by OEF/OIF veterans, the MEDVAMC continues to expand its rehabilitation programs for low vision and blind veterans. This past spring, the MEDVAMC opened a new, 2,900 square foot Visual Impairment Services Center to provide a wide variety of services, including an intermediate nine-day rehabilitation program offering skills training, orientation and mobility, and low vision therapy.

"Dr. Eldred and Ms. Mennem are working in an area that tends to be overlooked in many patients with traumatic brain injuries. This is basically because health care providers concentrate on the life-threatening aspects first. However, these often ignored problems create much difficulty in the long-term health and function of these patients," said Silvia Orengo-Nania, M.D., Eye Care Line Executive. "The work VISOR Director Bill Johnson and his team are doing for TBI patients is incredible and will make a huge difference in our veterans' daily lives. I am very proud of the work they do." ♦

Infection:
Don't Pass It On!

Wash your hands before eating, after using the restroom, after coughing or sneezing, after blowing your nose, before and after handling food, after being near somone sick, or after touching trash.

High Blood Pressure: What Those Numbers Mean

HOUSTON - People with high blood pressure are at higher than normal risk for heart attack and stroke. As many as 60 million Americans (one in four adults) have high blood pressure. Many people with high blood pressure do not know that their pressure is elevated because they often have no symptoms at all. Eventually, uncontrolled high blood pressure will cause serious complications.

Blood pressure refers to the pressure the circulating blood applies to the inner walls of the arteries. Arteries carry blood from the heart to other organs and parts of the body. Untreated high blood pressure increases strain on the heart and arteries, eventually damaging these tissues. In addition, high blood pressure is dangerous because it makes the heart work too hard. This is why high blood pressure increases the risk of heart failure, heart attack, and stroke.

Blood pressure is based on two values: the systolic pressure (top number) measures pressure as the heart contracts or beats, and the diastolic pressure (bottom number) measures the pressure as the heart relaxes between beats. In general, normal blood pressure is less than 120/80.

High blood pressure is diagnosed when the top number is greater than or equal to 140 and/or the bottom number is greater than or equal to 90. The diagnosis of high blood pressure is made by checking your blood pressure at your health care provider's office.

Treatment of high blood pressure includes reduction of salt in your diet, weight loss if you are overweight, avoiding excess alcohol intake, stopping smoking, regular exercise, and medication. There are many different medications to treat high blood pressure. If you work with your health care provider to find the right combination of treatments, your blood pressure can be controlled.

If you have high blood pressure, talk to your health care provider about how to reduce your risk of heart attack and stroke. Controlling your blood pressure today will help ensure a healthier tomorrow.♦

Nation's "Best Doctors" Work at Houston VA

(continued from page 1)

annually. Only five percent of the doctors in the country are actually selected to become "Best Doctors." — *portions of this article courtesy Best Doctors, Inc., www.bestdoctors.com*

Daniel Albo, M.D.
Operative Care Line
Specialty: Surgical Oncology

Kimberly A. Arlinghaus, M.D.
Mental Health Care Line
Specialty: Psychiatry

Samir S. Awad, M.D.
Operative Care Line
Specialty: Critical Care Medicine

Elizabeth F. Baze, M.D.
Eye Care Line
Specialty: Ophthalmology

David H. Berger, M.D.
Operative Care Line
Specialty: Surgical Oncology

Timothy Boone, M.D.
Operative and
Spinal Cord Care Lines
Specialty: Urology

Blase A. Carabello, M.D.
Medical Care Line
Specialty: Cardiovascular Disease

Rabih Darouiche, M.D.
Medical and Spinal Cord Care Lines
Specialty: Infectious Disease

Charles S. DeJohn, M.D.
Mental Health Care Line
Specialty: Psychiatry

Donald T. Donovan, M.D.
Operative Care Line
Specialty: Otolaryngology

Bruce L. Ehni, M.D.
Operative Care Line
Specialty: Neurological Surgery

John A. Goss, M.D.
Operative Care Line
Specialty: Surgery

David Y. Graham, M.D.
Medical Care Line
Specialty: Gastroenterology

Richard J. Hamill, M.D.
Medical Care Line
Specialty: Infectious Disease

Michael H. Heggeness, M.D., Ph.D.
Operative Care Line
Specialty: Orthopaedic Surgery

Helene K. Henson, M.D.
Rehabilitation Care Line
Specialty: Physical Medicine & Rehabilitation

Thomas R. Kosten, M.D.
Mental Health Care Line
Specialty: Psychiatry

Mark E. Kunik, M.D.
Mental Health Care Line
Specialty: Psychiatry

Douglas L. Mann, M.D.
Medical Care Line
Specialty: Cardiovascular Disease

Daniel M. Musher, M.D.
Medical Care Line
Specialty: Infectious Disease

Photo by Fran Burke, MEDVAMC Public Affairs Specialist

Listed as one of the best doctors in the nation in the field of urology, Timothy Boone, M.D., staff physician at the Michael E. DeBakey VA Medical Center, examines veteran Alton Williams during a recent appointment. Boone's clinical interests include impotence , incontinence , neuro-urology, urinary divertion, and urinary reconstruction.

David T. Netscher, M.D.
Operative Care Line
Specialty: Hand & Plastic Surgery

Ida F. Orengo, M.D.
Medical Care Line
Specialty: Dermatology

Silvia D. Orengo-Nania, M.D.
Eye Care Line
Specialty: Ophthalmology

Robert B. Parke, Jr., M.D.
Operative Care Line
Specialty: Otolaryngology

Maria C. Rodriguez-Barradas, M.D.
Medical Care Line
Specialty: Infectious Disease

Theodore Rosen, M.D.
Medical Care Line
Specialty: Dermatology

Robert S. Tan, M.D.
Extended Care Line
Specialty: Family Medicine

Mitchell P. Weikert, M.D.
Eye Care Line
Specialty: Ophthalmology

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Heart Healthy Eating at Restaurants

HOUSTON - After a long week at work, eating out at a favorite restaurant usually sounds quite appealing. But, eating out is not always the best choice for your heart health. Restaurant foods are often high in fat and salt; both bad for your heart. Fortunately, by following a few tips, making heart-smart choices at restaurants is possible, if not healthy and enjoyable.

Try to select a restaurant where food is cooked to order, rather than a fast-food or buffet-style chain, where the food is made ahead of time.

When ordering a beverage, choose water, diet soda, or low fat milk instead of a high sugar drink that only adds calories.

When eating out with family or friends, think about sharing or splitting the appetizer, a meal, or a dessert. Sharing lowers the amount of calories and fat each person consumes. Besides, eating too much fat can lead to fat build-up in your body and increases the chances of developing heart disease. Therefore, sharing is a better choice than eating an entire menu item by yourself.

It is also a good idea to request a "to-go" box when ordering and place half in the box to save for another meal. Most importantly, eat slowly, enjoy the time and conversation with your family or friends, and stop eating when you are full.

When ordering your main meal, choose items that are baked, grilled, dry-sautéed, broiled, poached, or steamed. These items are usually lower in fat and calories. If you are not sure how your food will be prepared, ask.

Select meals that have fruits or vegetables as a side dish. They are low in calories as well as filling. Choose soups and sauces that are not cream-based such as those made with broth and tomato sauces for pasta dishes.

If available, ask for meals seasoned with fresh herbs instead of butter, oil, and salt. Not only will this reduce calories and fat, but will decrease the amount of sodium in your meal. Sodium can increase your blood pressure which is also hard on your heart. Avoid high sodium foods like pickled or smoked foods and sauces such as cocktail, broth, au jus, soy, or teriyaki sauce.

Ask your server what type of oil foods are prepared with. Liquid vegetable oils such as canola, olive, soybean, and sunflower oils are better choices.

For dessert, choose fresh fruit, fruit ice, sherbet, gelatin and angel food cake instead of fat- and cream-laden desserts. Use milk in your coffee instead of cream or half-and-half.

Request all your sauces, dressings, and gravies, usually high in fat and calories, be placed on the side. Salads can be a healthy choice, but not when drenched in dressing. 'On the side' will allow you to limit the amount placed on your food.

If no healthy choices are available on the menu, ask your waiter for suggestions or other options. Restaurants strive to keep their customers happy and will try to meet requests. Many restaurants will honor requests for low-salt, low-saturated-fat versions of certain dishes.

Finally, choosing a healthy meal before going to the restaurant is now possible using the Internet. Look up the restaurant's menu online to pick out the healthy meal options. To find healthier menu choices at different restaurants, visit *www.healthydiningfinder.com.*

Also, the American Heart Association has tips on their Web site, *www.americanheart.org*, for dining out. Heart healthy eating out is possible by making the right choices as well as eating smaller portions. ♦ *Kirsten Kahler, MEDVAMC 2008-2009 Dietetic Intern*

Why is Fiber Important for Better Health?

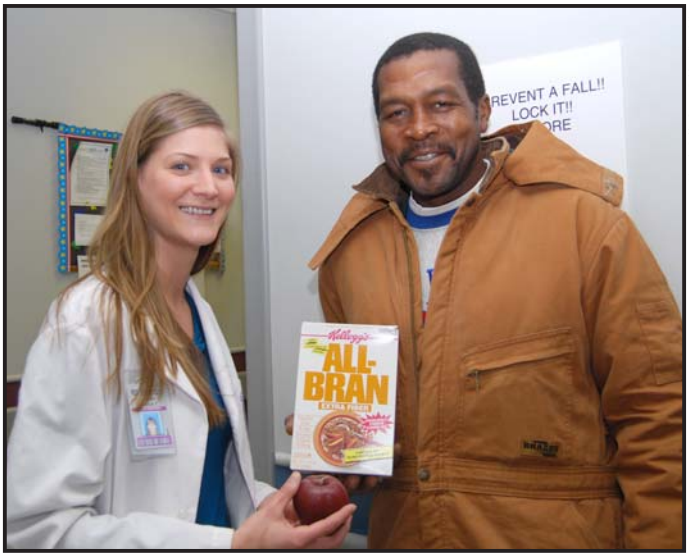

Photo by Bobbi Gruner, Public Affairs Officer

MEDVAMC Dietetic Intern Monica Landry discusses the benefits of a diet rich in fiber with Marine veteran Lation Charles. For more information about healthy eating, talk to your primary care provider or a registered dietitian at the Michael E. DeBakey VA Medical Center at (713) 791-1414, ext. 4295 or ext. 6166.

HOUSTON - Dietary fiber, also known as roughage or bulk, is a complex carbohydrate found only in plant products. Examples include fruits, vegetables, legumes, whole grains, cereals, nuts, and seeds. There are two types of fiber: (1) fibers soluble in water, and (2) fibers insoluble in water. Both are important for health, digestion, and preventing diseases.

Most plant foods contain both, but may have more of one type than the other. Oats, barley, beans, and some fruits and vegetables are high in soluble fiber, while wheat bran, whole grains, and cereals are high in insoluble fiber. The skins of many fruits and vegetables are also high in insoluble fiber.

Our bodies cannot break down and absorb fiber; however, the importance of dietary fiber is so well known that it is required to be listed on the Nutrition Facts Label.

Both types of fiber, soluble and insoluble, are good for your overall health and well-being, but each plays a different role. Soluble fiber slows digestion and helps your body absorb vital nutrients from foods. It also helps to bind cholesterol in the stomach as well as to lower cholesterol levels in the blood; thus, reducing the risk of heart disease.

In a Harvard study of more than 40,000 male health professionals, researchers found that a high total dietary fiber intake was linked to a 40 percent lower risk of coronary heart disease, compared to a low fiber intake.

Fiber, particularly soluble fiber, can slow the absorption of sugar, which for people with diabetes, can help improve blood sugar levels. A high-fiber diet may also reduce the risk of developing type 2 diabetes.

Insoluble fiber is what is referred to as "roughage" and adds bulk to the stool, helping foods pass more quickly through the stomach and intestines.

Consequently, roughage promotes regular bowel movements, prevents constipation, and reduces the risk of digestive conditions such as hemorrhoids.

In fact, dietary fiber can help you lose weight. Insoluble fiber passes through the stomach intact, as a result providing few calories. In addition, high-fiber foods are more filling so people eat less of them.

The American Dietetic Association reports the typical American consumes only 11 grams of fiber a day. This is not enough to provide the healthy benefits of bulk. The current recommendation for fiber is 25 to 35 grams per day from a variety of plant foods.

Americans should aim to "bulk" up their diet with fiber. However, a word to the wise when trying to increase fiber intake - move slowly! Adding fiber too quickly may cause gas, bloating, cramps, and constipation. Therefore, try replacing one low fiber food with a high fiber food each week and drink extra water as you add fiber to your diet.

To reach your fiber goals, try eating whole grain cereals, more than five grams of fiber per serving, for breakfast. Eat at least two servings of whole fruit per day. Try adding berries or raisins to your cereal. Switch to whole grain products such as whole wheat bread or spaghetti and try brown rice instead of white. Add beans to soups, stews, or salads. Snack on raw vegetables like broccoli or carrots or nibble on almonds, peanuts, or other nuts. Make one or two meals a week vegetarian.

If you are looking for high fiber recipes, visit *www.mayoclinic.com/health/high-fiber-recipes/RE00099* or talk to a registered dietitian at the Michael E. DeBakey VA Medical Center at (713) 791-1414, ext. 4295. ♦ *Monica Landry, MEDVAMC 2008-2009 Dietetic Intern*

Support Group Listing

Support groups can be extremely helpful when coping with an injury or illness. Talk with a social worker on your nursing unit or in your Primary Care Clinic about available support groups, meeting times, and locations.

Vet to Vet Support Group
Meets every Wednesday, 6-7 p.m. and every Thursday, 9-10 a.m. & 11 a.m. - noon. Veteran facilitator. POC: Dr. Sara Allison, (713) 791-1414, ext. 2328

Parkinson's Disease Education/ Support Group
Contact facilitators for information: Naomi Nelson, (713) 794-8938 & Lisa Whipple, (713) 794-7951

Cancer Support Group
Meets 2nd Tuesday every month, 2-3 p.m., Cancer Center Family Room, Room 4C-365. Facilitators: Maria Lozano-Vasquez, (713) 791-1414, ext. 5273 & Chaplain Douglas Ensminger, (713) 794-7200

Better Breather's Club
Meets last Wednesday every month, 1:30 p.m., Room 3C-371, Home Oxygen Clinic. Facilitator: Paula Denman, (713) 794-8979

Fibromylgia Education & Support Group
Contact facilitator for information: Gabriel Tan, (713) 794-8794

Pain Relaxation Training Group
Meets every Wednesday, 1 p.m., Room 5C-215. Facilitator: Gabriel Tan, (713) 794-8794

Prostate Cancer Support Group
Meets 3rd Wednesday every month, 10 a.m., Cancer Center Conference Room, 4C-345. Facilitators: Tonjala Seals, (713) 791-1414, ext. 6227

Hepatitis C Support Group
Meets 1st Friday every month, 1:30 p.m., Primecare Clinic 5. Facilitators: Garfield Norris, (713) 791-1414, ext. 6189 & Jodi M. Francis, (713) 791-1414, ext. 3394

Pain Management for Women
Meets every Friday, 1 p.m., Room 5C-215. Group facilitator: Gabriel Tan, (713) 794-8794

Pain Education Group
Meets every Wednesday, 2 p.m., Room 5C-215. Facilitator: Gabriel Tan, (713) 794-8794

Pain Coping Skills Training Group
Meets every Tuesday, 1 p.m. , Room 5C-215. Facilitator: Gabriel Tan, (713) 794-8794

Amputee Support Group
Meets 4th Wednesday every month, 3 p.m., Nursing Unit (NU) 2A Dining Room. Facilitators: Betty Baer, (713) 794-7793 & Stacy Flynn, (713) 791-1414, ext. 4441

Alcoholics Anonymous (AA)
Meets every Wednesday, 7 p.m., Room 6C-105. Facilitator: Bo Cook, (713) 791-1414, ext. 6987

Depression and Bipolar Disorder Support Group
Meets every Monday, 8:30 a.m., Room 6B-111. (713) 600-1131

HIV Support/Educational Group
Meets every Tuesday, 2 p.m., Clinic 4, Room 1A-442. Facilitator: Kathy Molitor, (713) 791-1414, ext. 6177 & Belinda Rainer, ext. 5292

Stroke Support Group
Meets 3rd Tuesday every month, 3 p.m., Nursing Unit (NU) 2A Day Room. Facilitator: Kathryn Kertz, (713) 794-7793

Heart Disease Support Group
Meets 3rd Thursday every month, 11 a.m., Nursing Unit 2A Dining Room. Facilitators: Patricia Suarez, (713) 791-1414, ext. 6101 & Tommie Gonzalez, ext. 5254

Breast Cancer Support Group
Meets last Tuesday every month, 12 noon, Cancer Center Conference Room, 4C-345. Facilitators: Magdalena Ramirez (713) 791-1414, ext. 5287 & Shirley LaDay Smith, (713) 794-7926

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New, Revamped VA Web Site: www.houston.va.gov

Homeless Veterans Receive Assistance and Helping Hand at Annual Stand Down

HOUSTON - The Michael E. DeBakey VA Medical Center (MEDVAMC), in cooperation with the City of Houston - Convention & Entertainment Facilities Department, City of Houston – Office of Veterans Affairs, Coalition for the Homeless, George R. Brown Convention Center, Harris County Hospital District, Harris County Veteran Services, Houston Police Department, Salvation Army Harbor Light Center, Task Force for Houston Area Homeless Veterans, U.S. Veterans Initiative, VA Regional Office, and Vet Centers recently hosted the 8th Houston-Area Stand Down for homeless veterans.

"Stand Down" is military terminology referring to the brief period of time a soldier leaves an active combat area in order to rest and regain strength. Stand Downs are one part of the Department of Veterans Affairs' efforts to provide services to homeless veterans.

During this two day event held at John P. McGovern Veterans Health Care and Service Center located at 1418 Preston Street and the George R. Brown Convention Center, 395 homeless veterans including 12 women veterans received services from 45 community agencies such as Harris County Hospital District, Soldiers' Angels, Dress for Success, Goodwill, the Salvation Army, Prevent Blindness Texas, and the Houston Volunteer Lawyers Program.

Photo by Agnes Barnett, Media Section

"As an Army veteran and an employee of the Michael E. DeBakey VA Medical Center, I feel it is my obligation to give back and help support fellow veterans who may be going through a difficult time," said Sebrina Felder, (above right) who assisted with the distribution of meals during the Stand Down.

"It was the tireless efforts and dedication of more than 100 volunteers and dedicated community agencies helping homeless veterans get back on their feet that made this event such a success," said Terri Riha, L.C.S.W., Houston Area Stand Down chairperson.

Veterans enjoyed hot meals, clean clothes, and health screenings. More than 80 veterans received information on Tuberculosis, 50 received flu vaccinations, and 112 veterans received eye exams. VA and Social Security benefits counseling, legal aid, and referrals to a variety of other necessary services, such as housing, employment, and substance abuse treatment were also available. Eight veterans obtained employment through Goodwill Industries.

The Health Care for Homeless Veterans (HCHV) Program at the MEDVAMC is committed to assisting homeless veterans with chronic mental illnesses to reach their highest level of functioning. HCHV staff assists veterans with securing safe housing and employment reflective of their abilities and preferences, as well as assistance with obtaining skill development services.

Treatment goals for each veteran are individualized and may include meeting their immediate basic needs of food and protective housing, stabilization of mental health problems including substance abuse treatment and sobriety maintenance, individual and group psychotherapy, evaluation for financial disability benefits, vocational assessment, gainful employment, and schooling or a training program.

Houston is one of 30 communities where the VA takes its substance abuse services directly to the area's homeless. Under its HCHV Program, the MEDVAMC has an addiction therapist working in homeless shelters, counseling veterans with substance abuse problems.

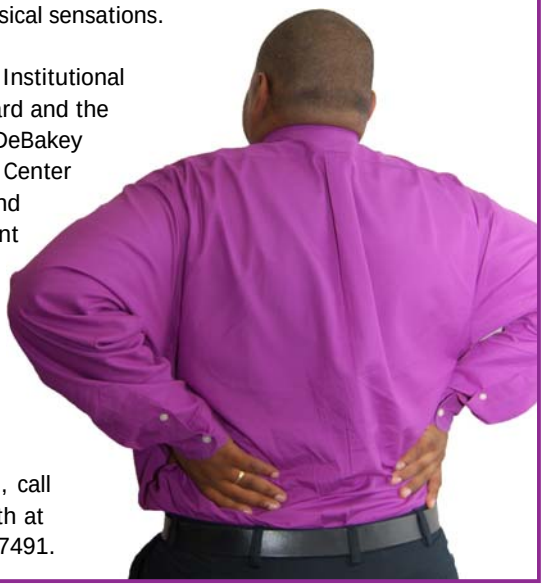
"As an Army veteran and an employee of the Michael E. DeBakey VA Medical Center, I feel it is my obligation to give back and help support fellow veterans who may be going through a difficult time," said Sebrina Felder, who assisted with the distribution of meals at the Stand Down. ♦ *Frances M. Burke, Public Affairs Specialist*

Do You Suffer from Chronic Lower Back Pain?

If you have experienced lower back pain for at least six months, you may be eligible to participate in a new research study at the Michael E. DeBakey VA Medical Center.

This study will assess the effectiveness of hypnosis and/or biofeedback in the treatment of pain. Hypnosis involves entering an altered state of consciousness; whereby, suggestions made while an individual is in an altered state can lead to changes in behavior or, in the case of pain, altered physical sensations.

The Baylor Institutional Review Board and the Michael E. DeBakey VA Medical Center Research and Development Committee have approved this study.



For more information, call Donna Smith at (713) 794-7491.

Houston VA Laboratory Earns Accreditation from College of American Pathologists

HOUSTON – The laboratory at the Michael E. DeBakey VA Medical Center (MEDVAMC) has been awarded accreditation by the Commission on Laboratory Accreditation of the College of American Pathologists (CAP), based on the results of a recent on-site inspection.

Edgar L. Tucker, MEDVAMC director was advised of the national recognition and congratulated for the "excellence of the services being provided." The MEDVAMC Laboratory is one of the more than 6,000 CAP-accredited laboratories nationwide.

The CAP Laboratory Accreditation Program, begun in the early 1960s, is recognized by the federal government as being equal to or more stringent than the government's own inspection program. It is the most respected and recognized laboratory accreditation program in the world and has long been considered the "gold standard" against which others are measured.

Inspectors examine the records and quality control of the laboratory for the preceding two years, as well as the education and qualifications of the total staff, the adequacy of the facilities, the equipment, laboratory safety, and laboratory management to determine how well the laboratory is serving the patient.

"I am very proud of the job the laboratory staff does here at the Michael E. DeBakey VA Medical Center. Our personnel are very dedicated and we take seriously the job of serving those who have served our country," said Michael M. Ittmann, M.D., Ph.D., MEDVAMC pathology and laboratory medicine chief.

The College of American Pathologists is a medical society serving nearly 16,000 physician members and the laboratory community throughout the world. It is the world's largest association composed exclusively of pathologists and is widely considered the leader in laboratory quality assurance. The CAP is an advocate for high-quality and cost-effective medical care. ♦

NATIONAL SUICIDE PREVENTION LIFELINE™
(1-800-273-8255)

Veterans' Questions

Answers provided by Consumer Affairs Room 1B-270 (713) 794-7884 or email vhahougeneralquestions@va.gov

Question: I have questions about my exposure to Agent Orange. Is there a special VA office I can call?
Answer: Yes, call the VA at 1-800-749-8387 to get more information on such special issues as Gulf War, Agent Orange, Project Shad, Mustard Agents and Lewisite, and Ionizing Radiation.

Question: What is the fastest, easiest way to get my prescriptions refilled?
Answer: The fastest, easiest way is to use the Pharmacy's Automated Telephone Prescription Refill System, available seven days a week, 24 hours a day. The telephone number is (713) 794-7648 or toll-free 1 (800) 454-1062.

You will need a touch-tone telephone, your social security number, and your prescription number. Your prescription number is located on the top left corner of your prescription container. Please note not all phones are touch-tone compatible. If you attempt to access the automated telephone refill system and have trouble, please check your telephone for touch tones.

Question: What is the difference between VA disability compensation and VA pension?
Answer: VA compensation and a VA pension are not the same thing. The simplest explanation is VA compensation is a benefit paid on the basis of the kind and severity of a disability that happened as a result of your active duty in military service. VA pension is a benefit paid on the basis of a disability that was not a result of active service in the military, or because of age. Pension is also based on income.

There are other criteria that may apply to deciding eligibility for VA pension. That is why it is a good idea to contact a representative at VA regional office to discuss your situation, or go to a national, state, or local veterans service organization for help. The Houston VA Regional Office may be contacted at 1-800-827-1000 or (713) 383-1999.

Question: Where did the Release of Information Office move to? Exactly what does this office do?
Answer: In order to improve services, the Release of Information (ROI) Office has been relocated to Room 1B-304A. This is near the blue elevators and around the corner from the Agent Cashier. The office is open Monday - Friday, 8 a.m. - 4:30 p.m. The telephone number remains the same at (713) 794-7776. For more information, contact Sandra Ivery, Supervisor, ROI Unit at (713) 794-7284.

The Release of Information staff assists with access to your medical records, obtaining copies of your medical records, requests to amend your medical records, and completion of forms for benefits, insurance, and other reasons. Medical information can only be released with your written consent (or by power of attorney). Because forms must contain an original signature, e-mailed forms and faxes are not accepted.

Question: How do I apply for VA health care?
Answer: You can apply for enrollment at any VA health care facility, VA Regional Office, or Veterans Service Office, or you may apply via the Internet at *www.va.gov/elig*.

You can apply for VA health care by completing VA form 10-10EZ. The 10-10EZ form may be obtained by visiting, calling, or writing any VA health care facility or veterans' benefits office. You can also call toll-free 1-877-222-VETS (1-877-222-8387) or access the form on the Internet at *http://www.va.gov/1010ez.htm*. Completed applications must be signed and dated.

We will need a copy of your DD214 or Military Discharge Certificate to verify your eligibility. After applying, you will receive a letter from the VA confirming your enrollment and identifying your Priority Group.

Question: I had a sore throat and went to the emergency room. Why was the wait so long?
Answer: The Emergency Room (ER) at the Michael E. DeBakey VA Medical Center functions under an Emergent Care Triage Protocol System. This means **critical cases** such as cardiac emergencies, pneumonia, and difficulty breathing are seen before non-critical ones – no matter when a patient came in. This may result in **very long waits** for patients with non-life threatening illnesses such as colds, ingrown toenails, rashes, minor cuts, prescription refills, or minor illness that have been present for several days.

The ER is not designed to serve as a primary care provider for patients. Patients are assigned a Primary Care Team to ensure continuity of care. Prime care providers are supported by a team of nurses, clerks, social workers, dietitians, pharmacists, and other skilled professionals to assure patients receive well-coordinated medical care.

If you have a medical problem after hours and cannot wait until your next appointment, call the VA Network Telecare Center at (713) 794-8985 or toll-free 1 (800) 639-5137. Professionally trained, registered nurses are ready to help answer health care questions 24 hours a day, 7 days a week.

Question: How do I get more VA news and information?
Answer: Send an e-mail to *bobbi.gruner@va.gov* to sign up to receive news releases and information. You can also visit *www.houston.va.gov* and click on the "News Center" symbol.

Question: Do I have to check in when I have a appointment? Do I have to stay in the clinic area during my wait?
Answer: You are asked to check in and remain there until called for your appointment. When you leave the waiting area and are not available when called, you may be skipped and the next patient on the list called. You then may face a longer wait time because you must be worked back into the schedule later.

Important VA Telephone Numbers

Michael E. DeBakey VA Medical Center	(713) 791-1414
	or toll-free 1-800-553-2278
VA Network Telecare Center	(713) 794-8985
	or toll-free 1-800-639-5137
Beaumont VA Outpatient Clinic	(409) 981-8550
	or toll-free 1-800-833-7734
Charles Wilson VA Outpatient Clinic (Lufkin)	(936) 637-1342
	or toll-free 1-800-209-3120
Conroe VA Outpatient Clinic	(936) 522-4000
	or toll-free 1-800-553-2278, ext. 1979
Galveston VA Outpatient Clinic	Call Texas City VA Outpatient Clinic for assistance.
Texas City VA Outpatient Clinic	(409) 986-1129
	or toll-free 1-800-310-5001
Pharmacy Refills	(713) 794-7648
	or toll-free 1-800-454-1062
Pharmacy Helpline	(713) 794-7653
Suicide Prevention Hotline	toll-free 1-800-273-TALK (8255)
Appointment Center	toll-free 1-800-639-5137
Automated Appointment Information	(713) 794-7648
	or toll-free 1-800-454-1062
VA Eligibility & Enrollment	(713) 794-7288
Health Care for Homeless Veterans Program	(713) 794-7848
Homeless Veterans Drop-In Center (1418 Preston St.)	(713) 794-7533
Operations Enduring Freedom & Iraqi Freedom Support Team	
Team Members	(713) 794-7034/8825/7928
Vet Center (701 N. Post Oak Road)	(713) 682-2288
Vet Center (2990 Richmond Ave.)	(713) 523-0884
Patient Advocates	
Houston/Texas City	(713) 794-7884
Beaumont	1-800-833-7734, ext. 113
Conroe	(936) 522-4010, ext. 1952
Lufkin	(936) 633-2753
Houston VA National Cemetery	(281) 447-8686
VA Regional Office	(713) 383-1999
	or toll-free 1-800-827-1000

National Salute to Hospitalized Veterans Week

February 8-14, 2009

National Salute to Hospitalized Veterans is a great opportunity for community members and organizations to visit the Michael E. DeBakey VA Medical Center, meet America's veterans, and explore various aspects of the facility's volunteer program.

Don't forget to send your Valentine's Day cards and letters to veteran inpatients by mailing them to MEDVAMC, Mailcode: 580/00X, 2002 Holcombe Blvd., Houston, TX 77030.

For more information, call (713) 794-7135.