

YOUR HEALTH

Patient Quarterly Newsletter

January - April 2012



Upcoming Events

DIABETES CLASSES

Saturdays 9:30am-3:00pm
(Lunch provided)

February 11, 2012
Sellwood Clinic

April 14, 2012
Sellwood Clinic

June 9, 2012
Sellwood Clinic



Senior Class
January 5, February 2,
March 1,
April 5, 2012



Great Beginnings Prenatal Class Series

First Series begins
January 16, 2012

Second Series begins
March 19, 2012

**All class schedules
may be subject to change.
To register, please call
503.659.4988**

New Lifestyles Edition

Words from our Medical Director

Dr. David McAnulty

Northwest Primary Care is always looking to expand upon the services we offer to our patients. Because of this, I am excited to announce NWPC has two physicians joining our group.

Dr. Leslie Bryden, Family Physician, will join our Milwaukie Office in February. Her interests include Geriatrics, Women's Health, Adolescent Medicine, and Preventive Care especially in regards to weight loss management.

Dr. Becca Thompson, Family Physician, will join our Sellwood Office in March. Her interests include Obstetrics, Lactation Education, and Preventive Medicine.

The role of Primary Care Medicine in the United States continues to grow. With this growth comes more responsibility, so we are continually looking at ways to improve how we care for you. We are expanding our patient education services. We want to help you to understand the importance of preventive services. We

also want to help you to understand why controlling chronic disease is vital. Our relationship with you and your family is for the long-term.

We appreciate your trust in us.



Dr. McAnulty is a graduate of the University of California at Davis. He joined Northwest Primary Care in 1991 and has served as Medical Director since 1997. He is a member of the American Academy of Family Physicians and is Board Certified.

Women's Health

February Women's Heart Healthy Month

National Wear Red Day is February 3, 2012. The Red Dress Campaign began in 2002 to raise women's awareness that between the ages of 40 to 60, when a woman's risk of heart disease starts to rise. Heart Disease is the #1 killer of American women. One in every four women die from heart disease.

The truth is...

This can largely be prevented by paying attention to basic risk factors:

- Smoking
- High blood pressure
- High blood cholesterol and high triglycerides
- Overweight/obesity
- Physical inactivity
- Diabetes and prediabetes



Questions to Ask Your Doctor

1. What is my risk for heart disease?
2. What screening or diagnostic tests for heart disease do I need?
3. What are my numbers and what do they mean?
 - Blood pressure
 - Cholesterol—total cholesterol, LDL ("bad") cholesterol, HDL ("good") cholesterol, and triglycerides
 - Body mass index and waist circumference measurement
 - Blood sugar level (could indicate risk for diabetes)
4. What can you do to help me quit smoking?
5. How much physical activity do I need to help protect my heart?
6. What is a heart-healthy eating plan for me?

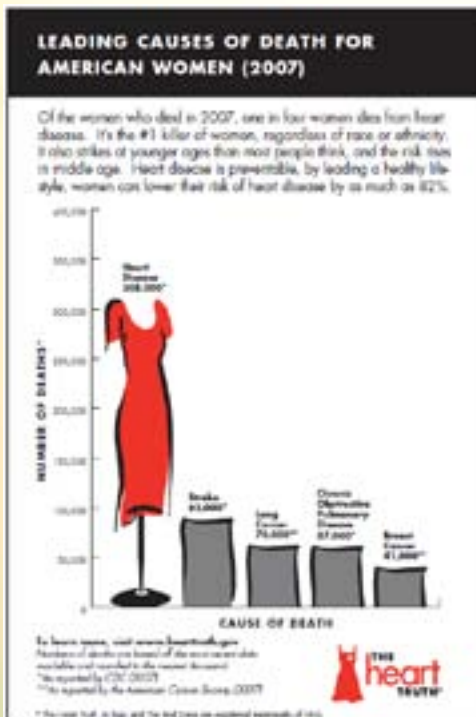
Heart disease develops over years and progresses when the heart doesn't get enough nutrient-rich blood. It can be prevented or controlled by doing just 4 things – **eating right, being physically active, not smoking, and keeping a healthy weight.** If these changes can be made, it can lower your risk of heart disease by as much as 82 percent.

Women are not equipped with a reset button. Once you have it, you'll always have it.

Take care of yourself so that you can be there for your loved ones.

Choose a healthy lifestyle because it doesn't take up much time.

Remember to make yourself your top priority!



Patient Information Corner

- **Secure Messaging** - If your time is limited, our new internet Secure Messaging capability offered by NWPC for patients may help. Sign up for our patient portal and communicate safely and securely via email.
- **Bill Pay Online** - We now have bill pay online to make it convenient for you. Simply go to our home page and click on the Pay Your Bill link on the left side bar. It will take you to a secure site, making it easier than ever to complete your transaction.
- **Yelp** - Have you seen our videos on each of our sites on Yelp? Take a look and let us know what you think at www.yelp.com and search for 'Northwest Primary Care.'
- **Facebook** - Join us on Facebook at www.facebook.com/NWprimarycare!

Men's Health

Barefoot Running

To do or not to do...that is the question!

Barefoot running is one of the latest crazes in the running world. It gained popularity due mostly to the positive spin put on it by the book 'Born to Run' by Christopher McDougall.

What is barefoot running?

Barefoot running itself is a slight misnomer because most people are actually wearing minimal footwear. Most athletes are not running barefoot in the strictest sense of the word, but using shoes that have minimal support and coverage. Barefoot running puts today's runners on more of an even footing (no pun intended) with our ancestral people who wore little to no shoes. There are theories that our feet are designed in such a way as to deal with the forces we place on them and shoes take some of that away. Focusing on rolling the foot in a shoe puts more stress on the arch. Barefoot runners are trained to put all their weight on their feet and not roll from the heel to the balls of the feet. The most popular barefoot shoe is made by Vibram. In this shoe, each toe is cradled in its own area like a mitten. Many people have been trying this in order to try and run with less pain.

What are the risks and benefits?

There is evidence which suggest that barefoot running is associated with less injuries in the ankle and chronic foot pain, but these are not vigorous scientific studies. Chronic foot and bone injuries are rare in populations which are chronically barefoot. There is anecdotal evidence that acute ankle sprains and plantar fasciitis rates would decrease dramatically if people ran barefoot. There is a sense that the shoe gives people false sense of security and they can't feel the beginnings of pain in the feet. Of course, one of the drawbacks of barefoot running is the time associated with breaking in the feet. Years of wearing shoes have weakened the connective tissue and muscles of the feet. It takes 4-6 weeks to fully break in the foot for barefoot running. There are some athletes with foot types who should probably not do barefoot running if it can be avoided. Talk with your doctor if you intend to begin barefoot running.

BARRY RHODES, MD
SPORTS MEDICINE
NWPC MILWAUKIE CLINIC

Children's Health

Back Pack Guidelines For Children

Backpacks have become an essential survival tool for children. It's a convenient way to transport everything they need for school and other activities, but most of the time they carry more than their body should handle. This can result in problems into adulthood.

The guidelines below were developed by the American Physical Therapy Association, the American Academy of Orthopedic Surgeons, and the American Chiropractic Association. These associations also state that no one should carry more than 25lbs in a backpack.

- **lightweight:** avoid carrying more weight than necessary
- **wide padded straps:** wider straps distribute load over the shoulders and padding increases comfort
- **waist strap:** a waist strap helps to transfer load to hips rather than shoulders
- **size:** pack should not be wider/ longer than child's back (using a smaller pack also helps to avoid overloading)

Backpack Maximum Weight (for children)

Weight of Child (lbs)	Max Backpack Weight
60 lbs	5 lbs
60 - 75 lbs	10 lbs
75 - 100 lbs	15 lbs
100 - 125 lbs	18 lbs
125 - 150 lbs	20 lbs
150 - 200 lbs	25 lbs

RENAV YORK
NW THERAPY



Classes for Medicare Beneficiaries

NW Primary Care
and
Willamette Valley Benefits, Inc.

Presents:
**Medicare Muddle;
Clarity Navigating the Maze**

1. Learn about the 4 parts of Medicare: A, B, C, D
2. Understand how they pertain to you
3. Protect yourself from abusive marketing
4. Action during enrollment periods
5. Clarification on Part "D" and the "Donut Hole"

Wednesdays 6:06 PM

March 7 Milwaukie Senior Center
April 4 NWPC Talbert Clinic
May 2 NWPC Administration Building
June 6 NWPC Sellwood Clinic

Medicare De Mystification; Does It Have To Be THIS Confusing?

1. Learn protection against abusive marketing schemes
2. Determine what to do during annual enrollment periods
3. Navigate and understand the terms: HMO, Managed Care, Medical Home
4. Reduce your cost on prescription medications

Tuesdays 10:06 AM

March 6 NWPC Sellwood Clinic
April 3 NWPC Administration Office
May 1 NWPC Talbert Clinic
June 5 NWPC Sellwood Clinic

Classes are FREE!

If you or someone you know is 65 or turning 65, please have them call to sign up for this class!
503.659.4988

Seniors

Medicare Beneficiaries or Soon to Be!

Medicare In The News...

What's Real?
How do I tell the difference?
Is it really that complicated?

For anyone who is getting close to Medicare age, the stacks of information arriving is overwhelming!

Surfing through the acronyms and terms alone is difficult. Understanding how they affect you is even more confusing. HMO, PPO, Medigap, Medicare Supplement, Donut Hole, TROOP, Out of Pocket Maximum, Managed Care, Fee For Service represent a whole new language to learn.

Discussions with friends going through the same sea of paperwork are just as confused and often have a different insurance plan. So which one is the best? How do you compare the plans and understand that what you have will cover your medical needs.

These educational classes will answer the questions you have about your options and help you to understand how this affects YOU. We will also discuss when and how you should start preparing to make your decision.

Join us for free Medicare Educational Workshops being sponsored by NWPC and Willamette Valley Benefits, Inc. The workshops will be held monthly.

Willamette Valley Benefits speakers Elma Friend and Wendy Shaw will be your presenters.

To sign up for these free classes please call 503.659.4988. For questions regarding medicare, please email medicareinfo@nwpc.com.

These classes are only for educational purposes and no plan, specific benefits or details will be shared.



New Doctors Coming to NWPC!

Rebecca Thompson, MD, MSc

After more than 25 years in my native New England, I got in the car and headed west in 1999. All clichés aside about life being a journey rather than a destination, I arrived at Stanford to begin medical school 7541 miles later, having swum in Lake Superior, forded the mighty Mississippi at its diminutive source in Minnesota, stargazed in the Badlands of South Dakota, and spent a birthday watching thunderstorms roll across the orange hoodoos of Bryce Canyon in Utah. My journey to medicine followed a similarly scenic route. After an undergraduate anthropology degree at Harvard, an editorial assistantship at New England Journal of Medicine, many volunteer sessions at children's oncology camps, and a graduate degree in clinical epidemiology at Stanford, I moved to Oregon and completed two residencies at OHSU in Public Health & Preventive Medicine and in Family Medicine.

In my practice, I enjoy collaborating with the whole family to support wellness and to offer guidance in times of illness. My strongest interests include women's health, obstetrics (including attending deliveries), fertility, pregnancy loss issues, child development, nutrition, integrative medicine, preventive care, and wilderness and travel medicine. I am an International Board Certified Lactation Consultant (IBCLC) and look forward to helping families negotiate the everyday as well as the more complex challenges of breast-feeding. I also plan to continue my work in public health and environmental health policy.

When we moved to Portland in 2006, my husband and I had been seeking an excuse to relocate to the Pacific Northwest for a long time. We love wandering through green spaces and secret neighborhood staircases and will never exhaust the opportunities for hiking, canoeing, back country skiing, and scuba diving that this beautiful part of the world has to offer. We now drag our two small children (a preschooler son and a newborn daughter) on adventures with too much gear and too little sleep. We hope to make Portland our home for a very long time, and I am honored to be joining NWPC to serve our community.

Leslie Bryden, MD

I grew up in bustling city of Tulsa, OK. As much as I enjoyed life in the Midwest, I was eager to explore the rest of the country. After finishing undergrad in St. Louis, MO with a degree in Spanish, I moved to Washington DC where I spent a year studying the genetics of Alzheimer's disease at the National Institutes of Health. I then went on to study medicine in Philadelphia where I chose to specialize in Family Medicine and then hopefully made my final move here to Portland for residency at Oregon Health and Sciences University.

I enjoy family medicine because it allows me to get to know my patients and their families as well as treat a wide range of acute and chronic illness. I always said I would have been a teacher had I not pursued medicine, but family medicine gives me the opportunity to do both. I am especially interested in geriatrics, women's health, and adolescent medicine. I also feel that diet and exercise are a fundamental part of a healthy lifestyle and enjoy working with patients towards their goal and helping to prevent chronic illness.

Personally, I feel I have found my home here in the Northwest. I enjoy hiking with my dog, cooking, reading, and spending time with family and friends.

LifeStyle Transformations

The new year is here and everyone's thoughts turn to New Year's resolutions. Our plan is always to start the new year in a healthy way. We think about losing weight, starting a new exercise regime, and make a promise to ourselves to do a better job of taking care of our emotional, physical, and spiritual needs.

Changing our habits can be difficult, but even if you start out with "one day a week I will eat healthy", it is really a big deal! I have patients who are in their 80's, but look 50 and I always ask them their secret. It is always the same: they eat healthy, drink alcohol in moderation or none at all and they all are walking for exercise. The really fun part is hearing how excited they are to share their secret!

One thing that I really see that makes a huge difference is to encourage cooking at home as a way to eat healthy and bring families together. I have many patients who don't cook and especially avoid cooking fish because of their limited knowledge on how to do it. Most fish is simple and easy to prepare.

It's also a great time to get the whole family involved, especially kids. Kids have fun chopping and mixing and gives them the gift early in their lives that the food we cook can be fast and taste really good.

Here's a super easy recipe for fish that is so good and super fast. I don't like to use measuring devices because that is just more work and takes longer to clean. Make it easy and fun!

Mexican Fish

1. Sauté ½ onion (and carrots or other veggies if desired) in olive oil in a skillet that has a lid
2. Rinse fish in cold water and debone (I keep a clean set of needle nose pliers in the kitchen just for deboning fish)
3. Place Red Snapper or Cod on the top after the onion is browned and cover with red or green verde salsa.
4. Cover pan with a lid and steam on medium heat until the fish feels firm to touch, usually about 15 min.

This dish is amazing when served with mashed potatoes or brown rice. My favorite is fish tacos and kids love this. Try it with crispy taco shells or fresh tortillas just wrapped in foil and heat in the oven. Top the fish with your favorite taco toppings. I like a bit of lettuce and guacamole. For quick guacamole just smash some avocado and add lemon juice, fresh minced garlic, salsa verde, and salt and pepper to taste.



It's a quick healthy dinner for those busy evenings!

**BETH LEBERT, FNP
NWPC SELLWOOD/MORELAND CLINIC**

NWPC In The News

Clackamas Review

When is the Right Time? Contemplating Pregnancy

As a family medicine doctor who delivers babies, I am always excited to get the chance to talk to couples who are thinking about becoming pregnant. Many couples ask me, "When is the right time?" As a mom of 3, the perfect time to start a family is a good question and the mom side of me believes that you just have to jump in the deep end. However, as a physician, I believe there is a lot of potential to have a smoother pregnancy and have a healthier baby by planning ahead.

My first recommendation is if you're thinking about having a baby now, start the prenatal vitamins right away. Being on prenatal vitamins before you are pregnant can decrease the risk of some diseases and preterm delivery. Our bodies need the folic acid the most in those first 6 weeks even before the pregnancy test comes back as positive.

My second recommendation is to see your doctor. Make sure you are up to date on your vaccines, tetanus and flu shots. Some vaccines are safe in pregnancy while some are not (like Measles, Mumps and Rubella). These preventable diseases can be devastating to your unborn child if you become infected with it during pregnancy. Also, make sure you're up to date on your pap smear. Cervical cancer is something that can be treated if caught early, but is much more difficult to manage when you're pregnant. If you are on any medications, we will determine if they are safe while you are pregnant or breast-feeding and find alternates if they are not. Childbirth education classes also are always a great way to understand pregnancy and promote a happy healthy family.

My third recommendation is to develop a healthy lifestyle. Childhood obesity is on the rise right now and it stems from unhealthy eating habits children develop. As parents, we are their role models and we have to remember to pass on good habits early. Increase your real foods such as fruits, vegetables, and things your grandmother would recognize and reduce your intake of prepared meals, sugar and fast food. Since it's very hard to make time for exercise once you have a baby, you would be wise to develop the habit of doing some exercise at least



30 minutes 4 days of the week and be conscious of what you're eating. It's a lot easier to continue these habits during pregnancy if you start now. Not only will you be healthier, but you will be teaching your baby good nutritional habits and keeping your significant

other healthy too. Plus, you'll have the additional satisfaction of seeing your children develop those healthy habits as they get older.

The first four to six weeks of pregnancy are critical for development. This is when the baby is forming his or her organs and all of this is happening before that first pregnancy test is positive. Quit smoking and drinking now. Start a prenatal vitamin (they make them in chewable forms now!) and eat healthy. If you're thinking about becoming pregnant in the next year or two, please see your family doctor so we can help you with your family's health.

ALISHA SAULTZ, DO
NW PRIMARY CARE
503.659.4988

*The following article is a reprint
courtesy of
OHSU's Family Medicine Newsletter*

JADECOM and NWPC Share Medical

The Japanese Association for the Development of Community Medicine (JADECOM) recently visited Northwest Primary Care (NWPC) and Oregon Health & Science University (OHSU) to discuss the medical requirements and challenges at rural clinics.

Dr. Subra Seetharaman, NWPC, JADECOM, and the OHSU Department of Family Medicine, have jointly developed the International Residency Exchange Program. Dr. Seetharaman, as a family practice resident, had an opportunity to visit Japan and has



remained active in the program. JADECOM programs include hosting residents and offering a clinical rotation between Oregon and Japan. "This created an insightful collaboration between two communities sharing the same struggles in rural areas in very different cultures", said Dr. Seetharaman. "I believe we learn a lot with the exchange of ideas to promote better general health and well-being in the smaller population centers."

In Japan, a nationalized healthcare system allows everyone access to medical care. The cost to patients and families is very affordable with world class standards available to all levels of the society. Although the most modern medical care is available to citizens in the main population centers, Japan's mountainous rural area remain under served as Japanese practitioners have traditionally studied specialized skills and seldom become the family medicine generalists we know in the USA. This exchange leads to a better understanding of the health care system throughout Japan and the USA.



Free Childhood Immunization Clinic

February 4, 2012
9 AM - 2 PM

New Hope Community Church
11731 SE Stevens Road
Happy Valley, OR 97086

All immunizations required by the State of Oregon for children. Please bring any immunization records you have to the clinic, including the school exclusion letter if you received one from Clackamas County.

Vaccines will be provided free of charge to children with no health insurance or children with insurance that does not cover the cost of immunizations.

A parent of guardian must be present and sign an authorization form for children under age 15.

Spanish and Russian interpreters will be available.

Appointments not taken. Questions? Call 503.513.8386



Clinic Locations

10024 SE 32nd Ave.
Milwaukie, OR 97222

3033 SE Monroe St.
Milwaukie, OR 97222

6327 SE Milwaukie Ave.
Portland, OR 97202

12360 SE Sunnyside Rd.
Clackamas, OR 97015

To make an appointment at any of our medical clinics, please call 503.659.4988 or go to nwpc.com.

NORTHWEST SLEEP HEALTH
13518 SE 97th Ave., Clackamas, OR 97015
503.353.1272 | nwsleephealth.com

NORTHWEST THERAPY
12119 SE Stevens Ct., Happy Valley, OR 97086
503.353.1278 | nwtherapy.net