INNOVATIONS IN HEART VALVE SURGERY.

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February is American Heart Month, when we pay closer attention to our risk for cardiovascular disease or CVD (which includes heart disease, stroke and high blood pressure). But being “heart healthy” should be a year-round activity for men and women alike. While often considered a “man’s disease,” CVD is also the leading cause of death among women in America. In fact, one in four women die from these events, compared to one in 30 from breast cancer. CVD is also a leading cause of disability, preventing millions of people from enjoying their work and family life.

The good news is that there are many things you can do to help prevent CVD, and you can start by getting your annual check-up. Also, keep track of your blood pressure and cholesterol levels. Eat healthy — and maintain a healthy weight. Exercise regularly and don’t smoke. If you have diabetes, monitor it carefully. Above all, if you’re on a heart-related medication, be sure you take it as prescribed.

If you ever have questions about heart health, just ask your healthcare team — that’s why we’re here.

Sincerely,

Mitchell Botney, MD
Chief Medical Officer

Cover Photo

Our cover photo features James Scharff, MD, a board-certified thoracic surgeon, and Michael Mauney, MD, a board-certified general and thoracic surgeon, both on staff at Missouri Baptist Medical Center, and Nancy Nickerson, MSN, ACNS-BC, advanced cardiology nurse. See our story on page 4 about heart valve surgery.

Is There A Better Mammogram?
Yes, there is: 3D!
Learn more at missouribaptist.org/3D
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Designer: Emily Barklage/Mary Anthonis
Cover Photographer: Elizabeth White
it’s time,” Colleen Fink’s cardiologist said one day last January. Her response was matter-of-fact: “Let’s do it.”

Fink is an active, 57-year-old real estate agent who walks 15 to 20 miles per week as part of her heart-healthy exercise program. She knew the day would come when she needed heart surgery — and an echocardiogram (echo) exam had just confirmed it. She needed a mitral valve repair.

Her cardiac surgeon, James Scharff, MD, on staff at Missouri Baptist, explained she was a candidate for a minimally invasive mitral valve repair procedure. The benefits of the “mini” over traditional heart surgery include a faster recovery and smaller incision on the side of her chest — instead of down the front.

The time of year couldn’t be better, either. It was the middle of the winter, when real estate sales slow down. “It was better for me to sit on the couch then, versus in spring or summer,” she said.

**DIAGNOSIS: A “LEAKY” HEART VALVE.**

It all started some 15 years ago when at age 40, Fink began feeling light-headed and physically “strange.” She could often feel her heart beating — and three times, she believed she was going to pass out. “I thought I needed iron or something,” she laughed.

The diagnosis was mitral valve prolapse (MVP), a condition in which the heart’s mitral valve doesn’t close tightly. Sometimes MVP leads to mitral valve regurgitation or the leakage of blood backward into the left atrium of the heart.

Her cardiologist at the time put her on medication, but it exhausted her. Fink asked what her other options were, and he recommended a fitness routine to reduce her symptoms. But that didn’t solve the problem entirely. “While I never had to go back on medication, it was only when I exercised that I felt like my heart was beating normally,” she said.

**SEARCHING FOR A BETTER ANSWER.**

Fink asked her cousin, a nurse, for help and was referred to Robert Kopitsky, MD, an interventional cardiologist at Missouri Baptist. He thoroughly explained what a leaky valve is, how it
was enlarging her heart, and why she might someday need valve surgery.

Dr. Scharff explained, “Mitral valve prolapse is the most common type of mitral valve disease, with 80 percent of patients having only a mild leak of the valve, which does not require surgery to correct. However, a small percentage of patients progress to have a severely leaking valve.” Fink was one of them.

“Studies have shown a benefit to repairing these patients’ valves,” Dr. Scharff said. “Surgical repair of severe mitral leakage has been shown to increase survival, decrease the development of symptoms such as shortness of breath, and reduce the risk of developing congestive heart failure.”

UNDERSTANDING VALVE DISEASE.

There are four heart valves that regulate blood flow throughout the body. A “leak” occurs when a valve fails to properly open or close. A seriously leaking valve decreases the heart’s ability to pump blood throughout the body.

When a primary care physician hears a strikingly loud heart murmur during a physical, he or she will typically order an echocardiogram, which uses ultrasound to “see” valve function and pressure in the heart chambers. The procedure is commonly used to test, diagnose and measure valve disease and its progression.

According to Dr. Scharff, valve disease can develop before birth or during one’s lifetime, and its cause is often unknown. His patients are a roughly even mix of men and women. The older someone is, the greater the chances of needing a valve repair or replacement.

Not all patients with mitral valve prolapse have symptoms, but common ones include shortness of breath, palpitations, progressive fatigue or loss of endurance.
Triggers for mitral valve repair can include chronic heart failure, A-fib or atrial fibrillation, pulmonary hypertension (high blood pressure in the lungs), a markedly enlarged heart, decreased ejection fraction, or worsening symptoms.

**THE “MINI” ADVANTAGE.**

For traditional surgery, the typical recovery time is three months. But for minimally invasive surgery, it’s far less — and that was very appealing to Fink.

“I couldn’t see myself sitting on the couch for three months,” she said. “Thank God the recovery time for my “mini” was only four weeks. I also love that the scar is small and on my side, instead of my chest.”

Dr. Scharff explained, “In the past, people may not have wanted the incision in their breastbone that traditional surgery requires. Now with minimally invasive surgery, they can avoid it.” (However, Dr. Scharff was quick to point out that — although a “mini” requires just a small incision — it’s still open heart surgery.)

For a month after surgery, Fink wasn’t allowed to pick up anything over 10 pounds or use stairs. But after that, all restrictions were lifted and six months later, she felt normal again. Her endurance returned as well, and she feels fitter now than she did at 40.

Although her heart condition “forced” her to exercise, she believes it has enhanced her life in many ways. When the weather is not great for walking, she’s still motivated and goes to an indoor treadmill or track.

Besides walking, Fink loves to garden and also volunteers at a thrift store several mornings each week. “I love that and it helps keep me in shape with all the lifting.”

“Looking back, it seems like my “mini” was easy. I had a good support system at home. That February had some of the crummiest weather ever, so it was a good time to stay in,” she laughed. “I’m glad I had it done. I absolutely feel better.”

**WHO’S ELIGIBLE FOR A “MINI”?**

“Almost everybody is a potential candidate,” said Dr. Scharff. “You have to really come up with reasons not to have one.” But there are some, such as being too frail to operate from the side, having poor leg circulation or needing more complicated repairs or bypass surgery.

“Someone who is young and healthy will recover faster than someone who is older,” he said. “Minimally invasive patients don’t have to wait for the breastbone to heal, and they have a faster return to normal activity.”
INNOVATION: TAVR FOR AORTIC VALVE STENOSIS.

“Now, there are more options for aortic stenosis,” said Michael Mauney, MD, cardiothoracic surgeon on staff at Missouri Baptist. Aortic valve stenosis (AS) is the abnormal narrowing of the aortic valve opening, located between the left ventricle of the heart and the aorta, the largest artery.

For those with severe AS, the prognosis is poor without open heart surgery to replace the valve, because the heart has to generate more pressure to open the valve and pump blood. For a growing population of these patients, the answer has been transcatheter aortic valve replacement (TAVR), a leading-edge procedure that Missouri Baptist has been performing for nearly three years.

With TAVR, a tissue valve is threaded from the groin or chest into the center of the patient’s aortic valve while the heart is still beating. The new valve expands within the old valve and immediately relieves the high pressure that is produced by aortic stenosis. An entire team comes together to help ensure the best patient outcomes, including interventional cardiologists, cardiac surgeons, and both the cardiac surgical and cardiac cath lab teams.

Once available only for inoperable patients, TAVR received approval in late 2012 for “high-risk” patients as well — meaning those who have an 8-10 percent or higher mortality risk with traditional heart surgery. Most commonly this would be someone with significant pulmonary, vascular, and kidney impairment in addition to their aortic stenosis. Other ideal patients for TAVR include patients who have had high doses of chest radiation for breast cancer or lymphoma. Radiation changes to the chest make standard open heart aortic valve replacement high risk. If we can’t operate on her chest, TAVR is an option,” he said.

In just the past few months, there have been several advances in the TAVR procedure, according to Dr. Mauney. Now, surgeons have three different sizes of valves to choose from, based on patient needs. And all three are easier to work with than their predecessors.

At The Heart Valve Clinic, AS patients can discuss their options for valve replacement — including TAVR — with a surgeon and cardiologist.

James Scharff, MD, is a board-certified thoracic surgeon on staff at Missouri Baptist Medical Center. He received his medical degree from Wake Forest University School of Medicine in Winston-Salem, North Carolina, and completed his residency and internship in general surgery and fellowship in thoracic surgery at Saint Louis University Hospital.

Michael Mauney, MD, is a board-certified general and thoracic surgeon on staff at Missouri Baptist Medical Center. He received his medical degree from Duke University and completed his residency in general surgery and thoracic surgery at the University of Virginia School of Medicine.
You’re Never Too Young for Heart Disease: Why ALL Women Should Pay Attention to Their Heart Health.

by Susan Evans

Heart disease has many faces. It doesn’t care if you’re a man or woman – young or old. It doesn’t care if you have good cholesterol levels, low blood pressure or no history of heart conditions in your family.

Amy Ferguson, a 45-year-old mother of two, was only 41 when she had symptoms of coronary artery disease (CAD).

“I had always maintained a healthy lifestyle. I didn’t smoke, wasn’t overweight, ate a well-balanced diet and managed my stress,” Ferguson said. “My blood pressure and cholesterol levels were normal. And other than my mother’s heart arrhythmia, I really didn’t have a family history of heart disease. It just wasn’t on my radar.”

RECOGNIZING THE WARNING SIGNS.

One night, Ferguson felt a tremendous heavy pressure in her chest and her left arm ached. At first, she shrugged it off as indigestion. But twice more that year, the symptoms returned. And that’s when she knew something was wrong.

“Unlike men, women tend to have symptoms that are atypical,” said Linda Stronach, MD, a cardiologist at Missouri Baptist Medical Center. “Atypical chest pain can be a sharper chest discomfort or feel more like indigestion. Women also may experience dizziness, unexplained weakness or fatigue, discomfort or pain between the shoulder blades and a sense that something isn’t right with their health.”

After her third episode, Ferguson sought help from her primary care physician, who ordered a stress test. When the stress test indicated a heart problem, she was referred to Dr. Stronach, who recommended a cardiac catheterization procedure to determine the severity. Ferguson learned three of her arteries were 85 percent blocked, requiring quadruple bypass surgery.

“Thankfully, Amy did the right thing by seeking medical attention,” said Dr. Stronach. “If she had continued to ignore the symptoms, she may not have survived the inevitable cardiac event that was in her future.”
HEART DISEASE

According to the American Heart Association, 42.1 million women of all ages had CAD in 2004, and approximately 461,000 died. Each year, as many as 16,000 women under 55 years old die from heart-related causes, and 40,000 are hospitalized for cardiac events. Women are so busy caring for their families that they tend to overlook their own health. Women think, “it will never happen to me.” They don’t think about heart disease until there’s a good reason to worry. And by then, it may be too late.

“One of the greatest misconceptions — for both patients and even some physicians — is that young women don’t get heart disease or don’t have to worry about the risk factors linked to heart disease. That’s just not true,” said Dr. Stronach. “You’re never too young to start tracking your heart health and paying attention to those risk factors.”

Fortunately, Ferguson is doing well since her heart surgery three years ago. She takes preventative medications for blood pressure and cholesterol, exercises and maintains a balanced diet. She also sees Dr. Stronach for check-ups every six months.

“I realize how lucky I am to have dodged a major bullet with my heart disease,” Ferguson said. “I encourage all women to pay attention to those nagging feelings and do something about it. See your primary care doctor regularly and get a baseline blood test done. More importantly, don’t think you’re immune from heart disease just because you’re young and don’t have high blood pressure or high cholesterol.”

KNOWING YOUR RISK FACTORS.

While both cholesterol and blood pressure can contribute to heart disease, so can family history, being overweight, blood sugar (diabetes) and tobacco use. Also, health conditions that occur during pregnancy — such as preeclampsia and gestational diabetes — can be risk factors for heart disease later in life.

“Depression is another risk factor that’s often overlooked,” said Dr. Stronach. “According to a recent study, women under the age 55 are twice as likely to suffer a heart attack or die of heart disease if they suffer from depression.”

In Ferguson’s case, her lipids — a group of naturally occurring molecules that includes fats, waxes, sterols and fat-soluble vitamins — were the culprit behind her coronary artery disease. An advanced lipid panel test likely would have indicated that she had a problem long before any symptoms appeared.

TAKING ACTION.

Family history is the risk factor that prompted Kristina Duraski, 23, to take control of her heart health. Her family has a strong history of heart disease, and she knows her risk will only increase as she gets older. She began to focus on her heart health two years ago, after several visits to her primary care physician.
“During each visit, my blood pressure reading seemed unusually high for someone my age,” Duraski said.

That’s when her family history entered her mind. Her mother has high blood pressure, and her grandfather and uncle each died of a heart attack. After several high blood pressure readings, Duraski questioned her doctor about potential heart issues and whether medication was necessary. He suggested at first that she simply monitor her blood pressure at home and make some lifestyle changes.

“When my blood pressure readings didn’t improve, I then suggested that we check my cholesterol to see if there was something to be concerned about,” she said. “I was diagnosed with ‘moderately high cholesterol.’”

She knew she needed to find a heart specialist, and someone she could trust.

**WHEN MEDICATION IS NECESSARY.**

Duraski found Dr. Stronach through a friend. At first, the doctor worked with Duraski to get her blood pressure under control through medication, as well as track her diet and exercise to help lower her cholesterol. After six months her cholesterol levels improved, but not enough. That’s when Dr. Stronach recommended cholesterol medication.

“In Kristina’s case, her genetics play a strong role in her heart health, particularly with high blood pressure,” Dr. Stronach said. “Fortunately, she’s been able to modify her condition through diet and exercise; however, medication is necessary to help combat the genetic risk factor she faces.”

Today, Duraski’s blood pressure and cholesterol levels are normal with the help of diet, exercise and medication. She is looking forward to a much healthier future, hopefully becoming a nurse and starting a family someday.

“I’m so thankful that I took control of my heart health. With the way things were going, I easily could have had a heart attack and died in my 30’s, just like my uncle,” said Duraski. “That’s why you must be your own advocate. Be sure to talk to your family and ask questions about your history. If you’re concerned about a potential health problem, do something about it.”

**Linda Stronach, MD,** is a board-certified cardiologist on staff at Missouri Baptist Medical Center and a member of BJC Medical Group. She received her medical degree from Brown University in Providence, RI. She completed her internship and residency in internal medicine at the University of North Carolina in Chapel Hill. She also completed fellowships in cardiology and critical care medicine at the University of Pittsburgh.

For a physician referral, call (314) 996-LIFE.
Women in Missouri now are to be informed of their breast tissue density after having a screening mammogram. Facilities, like Missouri Baptist Breast HealthCare Center, which offer screening and diagnostic mammograms, need to be in compliance with a new Missouri Senate Bill 639, which makes this a requirement.

Having dense breast tissue is a relatively common condition. This Senate bill was not designed to provide women undue concern, but to raise awareness so women know their personal tissue density.

Dense breast tissue makes it more difficult to see abnormalities, if any exist. If a woman has dense tissue, and if she has other risk factors for breast cancer that have been identified, she might benefit from supplemental screening tests to rule out any breast problems.

So, what should you do if you learn you have dense breast tissue? Just discuss the presence of any risk factors, including dense breast tissue, with your physicians. Your physician can help determine if you need further testing.

3D mammography also is a new technology that may be particularly beneficial for women who have dense breasts. Doctors can examine breast tissue layer by layer, to look for any signs of cancer. 3D mammograms provide images with improved resolution and visualization.

Finding cancers in the earliest stages increases one’s chances of survival. 3D helps doctors find smaller cancers sooner — especially in dense breast tissue.

For more information, visit missouribaptist.org/3D.
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<td>Staying Safe in Your Home, Advanced Center of Excellence, 11:30 a.m.-1 p.m. (p. 16)</td>
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<td>Cholesterol &amp; Glucose Screenings, Manchester/Lafayette Dierbergs, 10 a.m.-1:30 p.m. (p. 19)</td>
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<td>On the Move, Hilton Frontenac, 6:30-8:30 p.m. (p. 17)</td>
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<td>Infant Massage, 10 a.m.-noon (p. 21)</td>
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<td>Cholesterol &amp; Glucose Screenings, West Oaks Dierbergs, 1:30-5 p.m. (p. 19)</td>
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<td>Nutrition Check Up: Alphabet Soup!, Longview Farm, 6:30-8 p.m. (p. 17)</td>
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<td>Osteoporosis, Kirwood Community Center, 1-3 p.m.</td>
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<td>Heart of the Family, MoBap, 9 a.m.-1 p.m. (p. 14)</td>
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Join us for
Heart of the Family.
Saturday, Feb. 7, 9 a.m.-1 p.m.

MARK YOUR CALENDAR AND REGISTER YOUR FAMILY TO

HEART2HEARTS FROM OUR EXPERTS:

Heart2Heart Chats with Our Clinicians

9:30 a.m.
Aortic Issues including Aortic Reconstruction
Joshua Baker, MD

10:30 a.m.
Heart Valve Treatment
Michael Mauney, MD, and Arun Thukkani, MD

11:30 a.m.
Heart Rhythm Disorders
Andrew Krainik, MD, electrophysiologist

12:15 p.m.
Taking Care of Your Heart Health
Christopher Speidel, MD, Ashley Goggin, DPT, and Sherri Hoyt, RD

Caryn K. Dugan, St. Louis Veg Girl, demonstrates a one pot meal, Southwest Quinoa with Black Beans and Kale

10:15 a.m. and Noon
Cooking Demo with St. Louis Veg Girl
A Plant on Every Plate
STLVegGirl, Caryn Dugan, is a plant-based (vegan) chef whose mission is to put “A Plant on Every Plate.”

She adopted her plant-based diet in 2008 after the untimely death of her father due to cancer. Ten weeks later, she too, was diagnosed and knew that she had to take control of her health.
We’ve been having Heart2Heart talks with our neighbors for more than 20 years. Ready for yours?

Come join us for our annual Heart of the Family Event on Saturday, Feb. 7th, where for over 20 years we’ve had Heart2Heart talks with our neighbors about the best way to lead a heart-healthy life.

Be sure to bring the kids and tell your friends — so you can be strong of heart today, and all the tomorrows to come.

THE FAIR WILL FEATURE:

FREE HEALTH SCREENINGS
Glucose, Cholesterol (total cholesterol and HDL — no fasting required) and blood pressure

BODY COMPOSITION
Quick analysis of your body composition including percent body fat, muscle mass and muscle development.

TASTE-A-RAMA
 Delicious, heart-healthy food samples for both kids and adults. Sponsored by Dierbergs Markets (our heart-healthy partner for over 25 years!), Morrisons and Missouri Baptist.

FUN FOR KIDS OF ALL AGES
Join our friends from St. Louis Children’s Hospital and Dierbergs Market.

• Listen to our cardiologist share the latest on prevention and new treatments for arrhythmias and valve disease.
• See how eating healthy and staying active is the best medicine of all.
• Get a hands-on demonstration of CPR and AED, and learn when to call 911.
LUNCH AND LEARN.

Habits for Longevity
Namrita Gogia, MD, internal medicine
Thanks to advances in public health and disease prevention, more individuals are living healthy, productive lives well into their 80s. Learn how you can stay physically, mentally and emotionally healthy, as well as maintain independence as you age. Lunch provided.
Friday, Feb. 27, 11:30 a.m.-1 p.m.
Longview Farm House
13525 Clayton Road

Staying Safe in Your Home
West County Fire & Ambulance EMS; Dale Thuet, DPT, OCS, physical therapist
Everyone wants to be safe in their own home. Join a West County Fire Fighter for a refresher on how to keep yourself and your loved ones safe from the threat of fire. Joining him, a Missouri Baptist physical therapist will discuss simple things you can do to prevent falls. Lunch provided.
Wednesday, March 4, 11:30 a.m.-1 p.m.
West County EMS & Fire Protection District
223 Henry Avenue

Early Detection of Lung Cancer
Mitchell Botney, MD, pulmonologist
Are you a current smoker or have you ever smoked? Do you have concerns about your risk for lung cancer? Join our physician to learn about ways to lower your risk and diagnostic improvements for early detection, including the low dose CT Scan. Lunch provided.
Wednesday, April 15, 11:30 a.m.-1 p.m.
Longview Farm House
13525 Clayton Road
EVENING PROGRAMS.

On the Move: Learn About Reducing Pain in Your Hips and Knees
Micah Hobbs, DO, orthopedic surgeon
Ryan Pitts, MD, orthopedic surgeon
Remember all the things that you used to do so easily, until your hip or knee started slowing you down? Well, imagine doing all those things again. Join us and learn what you can do to reduce your joint pain, as well as the latest procedures in joint replacement surgery. Light refreshments served.
Wednesday, March 12, 6:30-8:30 p.m.
St. Louis Hilton Frontenac
1335 South Lindbergh

Nutrition Check-Up: Alphabet Soup!
Sherri Hoyt, RD, Missouri Baptist registered dietitian
From amaranth to zatar — what are the foods you really want to eat, but simply don’t know how to eat? Join our dietitian as she demystifies these and other trendy foods and shows you how to bring them to your plate — all in good taste! Enjoy samples of the recipes. Light refreshments served.
Thursday, March 26, 6:30-8 p.m.
Longview Farm House
13525 Clayton Road

Heading Off Sinus and Allergy Issues
Hamsa Subramanian, MD, allergist and immunologist
Are you having allergy and sinus symptoms in the winter and wondering why? What can you do to prepare for the “hay fever” season in spring? Join our physician panel as they discuss common allergies and sinus problems and remedies to reduce your symptoms. Light refreshments served.
Tuesday, March 31, 6:30-8:30 p.m.
Hilton St. Louis Frontenac
1335 South Lindbergh
COOKING DEMONSTRATIONS/CLASSES.

Heart & Souls Lift Your Spirits
What a dreary winter day needs is a toast to delicious and heart-healthy dishes with an extra splash of fun and flavor.

Fee: $32

Spinach Salad with Orange & Tequila Dressing • Braised Irish Beef Stew • Chicken Piccata • Maple Bourbon Sweet Potatoes • Amaretto Green Beans • Chocolate Cake with Chocolate Wine Sauce

Classes are 6-8 p.m., and taught by a Missouri Baptist registered dietitian and a Dierbergs culinary staff professional.

JANUARY.

WEST OAK
Thursday, Jan. 15, 6-8 p.m.
Nancy Raben Allen, DTR,
Dierbergs staff culinary professional
Michelle Pasia, RD,
Missouri Baptist Medical Center registered dietitian

BOGEY HILLS PLAZA
Thursday, Jan. 22, 6-8 p.m.
Nancy Raben Allen, DTR,
Dierbergs staff culinary professional
Dana Medaris, RD,
Missouri Baptist Medical Center registered dietitian
Cholesterol & Glucose Screenings at Your Neighborhood Dierbergs.

Cardiologists recommend that you monitor your cholesterol and glucose on a regular basis. To make it easy, Missouri Baptist will provide FREE screenings in the pharmacy department at your neighborhood Dierbergs Markets. This screening is FREE and measures your glucose, total cholesterol and HDL. No fasting is required — appointments are recommended.

**JANUARY.**

Dierbergs Lemay Plaza  
2516 Lemay Ferry Road  
Wednesday, Jan. 14, 10 a.m.-1:30 p.m.

Dierbergs Warson Woods  
9701 Manchester Road  
Wednesday, Jan. 21, 10 a.m.-1:30 p.m.

**FEBRUARY.**

Dierbergs Brentwood Pointe  
8400 Eager Road  
Wednesday, Feb. 11, 1:30-5 p.m.

Dierbergs West Oaks  
11481 Olive Blvd.  
Wednesday, Feb. 25, 1:30-5 p.m.

**MARCH.**

Dierbergs Manchester @ Lafayette Cntr.  
421 Lafayette Center  
Wednesday, March 11, 10 a.m.-1:30 p.m.

*Register for a cooking class, see a full listing of classes, or get more information, by visiting Dierbergs.com or call 636-812-1336 (in Missouri) or 618-622-5353 (in Illinois).*
OASIS PROGRAMS

Osteoporosis: Do’s and Don’ts of Everyday Movement – Plus, Exercises to Avoid to Protect Your Spine
Katherine Meirink, BJC Homecare Physical Therapist
If you have osteoporosis or osteopenia, did you know some of the movements you do could cause a fracture? In this class, taught by a physical therapist, learn how osteoporosis fractures happen and how to avoid them with some simple modifications to your everyday movements. Learn how to use your joints wisely and protect your bones and joints from unnecessary injuries.
Kirkwood Community Center
Wednesday, February 11, 1-3 p.m.

Standing Tall – Tips for Improving Your Posture
Katherine Meirink, BJC Homecare Physical Therapist
Did you know poor posture can be a cause of pain, can lead to organ problems and can make you look older? Learn from a physical therapist, how to check your own posture along with techniques to instantly improve your posture, posture exercises and about devices available to help you stand tall.
Kirkwood Community Center
Wednesday, March 11, 1-3 p.m.

AARP Smart Driver Course
Dennison Staub, AARP certified instructor
This four-hour training will help you tune up your driving skills, update your knowledge of the rules of the road, learn about normal age-related physical changes and ways to adjust for these changes and reduce traffic violations, crashes and chances for injury. Some insurance companies also offer a discount to participants! Space is limited.
Town & Country Municipal Center
1011 Municipal Center Drive
Tuesday, Feb 24, 9 am.-1 p.m.
Fee: $15 for AARP Members; $20 for non-AARP members, payable to AARP the day of training.
PROGRAMS OFFERED BY
ST. LOUIS CHILDREN'S HOSPITAL
AT MISSOURI BAPTIST.

Pre-registration for these classes is required; please call 314-454-KIDS.

Family and Friends® CPR
This video-guided program is for parents, grandparents and teenagers who babysit (ages 10-15 if accompanied by an adult). Course instructors use the American Heart Association material and provide instruction and hands-on practice for infant, child and adult CPR, first aid for choking and the use of AEDs when appropriate. Course includes a 65-page student manual. Course does not include certification. $25/person.

(all 6:30-9 p.m.)
Thursday, Jan. 8
Tuesday, Jan. 20
Monday, Feb. 9
Thursday, Feb. 26
Wednesday, March 11
Tuesday, March 24
Wednesday, April 1

Babysitting 101
This class is a great introduction to the basics of babysitting. A 28-page workbook is provided. $30/child.

Saturday, Feb. 21, 9 a.m.-1 p.m.
Saturday, April 11, 9 a.m.-1 p.m.

Infant Massage
Parents and expectant parents will learn hands-on massage techniques that promote relaxation and help develop a stronger bond with their infant (newborns through age 15 months). Parents who are not able to bring their child will be given a doll for hands-on practice. The class is taught by St. Louis Children’s Hospital certified infant massage instructors. Each family will receive the illustrated guidebook titled Baby’s First Touch: Step-by-Step Instruction for Infant Massage, as well as a bottle of massage oil. $20/family.

Saturday, Jan. 10, 10 a.m.-noon
Saturday, March 7, 10 a.m.-noon
What is peripheral arterial disease?

Peripheral arterial disease (PAD) is the narrowing or blockage of arteries that supply major organs or large groups of muscles. Carotid artery stenosis is an example of PAD that affects the brain and may lead to a stroke.

Another example is blockage of the artery to the legs, called peripheral atherosclerosis. It may be associated with exertional leg cramping, open wounds to the lower extremities or pain in the calf or foot.

What are the key risk factors?

Five main risk factors known to cause atherosclerosis and PAD are hypertension, diabetes mellitus, high cholesterol, smoking and premature family history (having a primary relative under age 50 with atherosclerosis). Controlling risk factors can help prevent, delay or slow down the progressive narrowing of the arteries.

Atherosclerosis is inflammation of the artery with activation of blood and tissue cells that are trying to heal the damage caused by the risk factors.

How is PAD treated?

Treatment of PAD consists of controlling risk factors, through exercise, diet and drug therapy, thereby preventing inflammation and progressive arterial narrowing. Medications that deactivate activity in blood platelets decrease blood clots in narrowed arteries and maintain an open vessel.

Once a significant narrowing in an artery occurs, treatment may be necessary to open the artery. Procedures such as angioplasty (ballooning), atherectomy (removing plaque), stenting (bridging the artery open), laser therapy (vaporizing plaque), and surgery can be performed.

If you experience symptomatic leg pain, do not delay getting medical advice. Patients with severe blockages of lower extremity arteries have a five-year 30% mortality due to the diffuse nature of atherosclerosis.

K. Bryan Trimmer, DO, is a board-certified interventional cardiologist on staff at Missouri Baptist Medical Center. He earned his medical degree from Texas College of Osteopathic Medicine in Fort Worth, Texas, and completed his residency in internal medicine at Pontiac Osteopathic Hospital in Pontiac, Michigan, and cardiology fellowship at Detroit Osteopathic Hospital.
Other Community Services and Classes.

MOBILE MAMMOGRAPHY VAN SERVICES.
Our breast healthcare services come to your neighborhood by way of the van. Here are a few locations the van is scheduled to visit:

JANUARY.
31 Frontenac Plaza for Living Fit Expo
   East Parking Lot (10 a.m.-3 p.m.)

FEBRUARY.
4  City Place 3
   Three City Place Drive
11 Dierbergs Heritage Place
   12595 Olive Blvd
28 Dierbergs Warson Woods
   901 Manchester Rd. (9 a.m.-2 p.m.)

MARCH.
24 Four Seasons Dierbergs
   Olive & Woods Mill Rd.
28 Dierbergs Manchester
   421 Lafayette Center (9 a.m.-2 p.m.)

Please check with your insurance provider to verify your benefits and eligibility.

In collaboration with the Susan G. Komen® St. Louis, Missouri Baptist offers free mammogram screenings and breast health education to women in need in the St. Louis area and several surrounding communities.

For appointments at the Breast HealthCare Center, call (314) 996-5170 or 800-870-5731. Unless otherwise noted, screenings are available from 9 a.m.-3 p.m.

CHILDBIRTH PREPARATION CLASSES & MORE.
- Preparation for Childbirth (evening, weekend and refresher available)
- Breastfeeding Classes
- Grandparenting & Sibling Class
- Mom’s MoBap Morning
- CPR for Families & Friends
- Multiples and More
- OB Tours
- Happiest Baby on the Block

For a complete listing, visit MoBapBaby.org or call (314) 996-LIFE.
Important Phone Numbers.

Missouri Baptist Medical Center
3015 North Ballas Road
St. Louis, Missouri 63131
MissouriBaptist.org
(314) 996-5000

Breast HealthCare Center at Missouri Baptist
(314) 996-7550

Digestive Disease Center
(314) 996-4343

Emergency Department
(314) 996-5225

Missouri Baptist Outpatient Center-Sunset Hills
(314) 525-0500

Pediatric Emergency Care
(314) 996-5437

Physician Referral
(314) 996-LIFE

For a referral to a Missouri Baptist Medical Center physician, call (314) 996-LIFE (314-996-5433) or 800-392-0936.