

## CALENDAR FOR HEALTH

### JUNE 6

Community Blood Center Blood Drive: 2-6:30 p.m. at Helias Knights of Columbus, 1822 Tanner Bridge Rd.

### JUNE 7

Total Joint Class: 2-3:30 p.m., St. Mary's Health Center, assembly halls C and D. This class is designed for people scheduled for surgery. Contact St. Mary's for more information at 761-1111.

Chronic Arthritis Exercise Class: 10 a.m. or 2-3 p.m. at St. Mary's Sports Medicine Center at Jefferson City Medical Group. Contact James Deem for more information at 556-5770.

Community Blood Center Blood Drive: 2-6:30 p.m. at St. George church, Main St., Linn.

Support Group for Parents and Children with mental illness and brain disorders: 6-8:30 p.m. at St. Mary's Health Center board room. Contact Karen Farver for more information 634-7727.

### JUNE 8

Chronic Arthritis Exercise Class: 10 a.m. or 2-3 p.m. at St. Mary's Sports Medicine Center at Jefferson City Medical Group. Contact James Deem for more information at 556-5770.

American Cancer Society Relay for Life: Starts 6 p.m., ends 6 a.m. June 9, at Jennie Jaynes Stadium in Pettis County.

### JUNE 9

Beginning Childbirth Preparations: 9 to 5 p.m. at Capital Region Medical Center. Class fee is \$40 per couple. To register contact the OB Educator at 632-1111.

Breastfeeding Class: 8 a.m. at Capital Region Medical Center. Class fee is \$15 per couple. Contact the OB Educator at 632-1111.

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## HEALTH TIP



## A new fix for an old problem

XLIF offers minimally invasive approach to back surgery

By Angle Hutschreider  
angleh@newstrbune.com

Just a few years ago, having an anterior or lateral interbody fusion (back surgery) required about a week's stay in the hospital and months of recovery.

But Dr. Blake Rodgers, medical director of St. Mary's Health Center's Spine Center, is using a new procedure, XLIF, to help patients with severe back pain.

The XLIF procedure is a minimally invasive approach to the traditional lumbar fusions. This procedure allows access to the spine without having to move back muscles, bones or nerves and allows for more complete disc removal and spinal reconstruction, when compared to the traditional procedure.

**"It allows you to concentrate on the area with the problem instead of (using) an extensive exposure process just to get to the problem."**

**Dr. Blake Rodgers**  
St. Mary's Health Center's Spine Center

— a series of two or three small incisions about an inch and a half long are made.

The surgery is performed with the patient laying on his or her side. X-rays taken in surgery precisely identify the area to be operated on and special nerve monitors are passed in through small incisions, thus protecting the delicate nerves and making the procedure safe.

The small incisions are made to help guide the nerve-monitoring system, which is what allows this procedure to have a quicker recovery time. Patients are usually only in the hospital overnight and are back to most activities within four to six weeks after surgery, Rodgers said.

"We are able to do things differently with

Please see Spine, p. 2



The XLIF procedure, as illustrated above, provides direct access to the spine with minimal tissue or muscle disruption. The XLIF procedure is a minimally invasive approach to the traditional lumbar fusions. This procedure allows access to the spine without having to move back muscles, bones or nerves and allows for more complete disc removal and spinal reconstruction, when compared to the traditional procedure

# It's a matter of ZZZs

Do you find yourself taking a nightly shot in the ribs due to snoring? Are you well known for the fact that you can be heard around the world? You are not alone, fellow snorers.

More than 18 million American adults have sleep apnea and it is speculated that more than 50 percent of Americans are still undiagnosed.

Chronic, loud snoring, witnessed pauses in breathing, obesity and excessive daytime sleepiness are a few indicators of obstructive sleep apnea. Obstructive Sleep Apnea (OSA) is a disorder characterized by brief and repeated sleep interruptions caused by airway collapse.

During deep sleep, the muscles of your body relax. This relaxation results in the collapse and obstruction of the airway causing momentary apnea. This can result in dangerously low oxygen levels, causing the heart to work even harder. If untreated, sleep apnea increases the risk of vehicle crashes, high blood pressure, heart disease, stroke, diabetes and obesity. Sleep apnea can cause serious disturbances in normal sleep patterns, people with apnea often feel very sleepy during the day and their concentration and performance are affected.

In the spring, St. Mary's Health Center starting its part in the recognition and awareness of sleep apnea in the hospital setting. Upon admission to St. Mary's, patients are

screened with the following questions:

- Do you have loud, frequent snoring?
- Do you awaken with a choking sensation or have witnessed apnea?
- Do you have sleepiness despite adequate sleep?
- Do you have diagnosed sleep apnea?

If a patient answers "yes" to any of these questions, further assessment is completed. Respiratory therapy and nursing then work together to ensure patient safety by providing continuous oxygen and heart monitoring, medication management, and body positioning for the patient.

Continuous Positive Airway Pressure (CPAP), the gold standard of care, is introduced to every high-risk patient. CPAP delivers constant and continuous air that is adjusted to prevent the throat from collapsing. When CPAP is stopped or used improperly, apnea episodes return.

A respiratory therapy consult is ordered on all high-risk and diagnosed sleep apnea patients. Respiratory therapists provide education, training and assistance to these patients while in the hospital. All high-risk patients are recommended to follow-up with their primary care physician for a sleep study.

If you fell asleep while reading this article or often feel fatigued during the day, and/or are part of the loud snorers club, sleep apnea could be keeping you from an energetic life. It is important that you speak with your physician, or a sleep disorder center, to ensure that a proper diagnosis and treatment are provided.

*Kendra Simmons, BHS, RRT, RPSGT is the director of St. Mary's Sleep Center, St. Mary's Health Center.*

**JSE CALL**



*a Simmons*

# Spine: Performed on elderly patients

Continued from p. 1

XLIF," Rodgers added. "It allows us to avoid a lot of muscle damage. That was necessary to expose the spine with our older techniques.

"Part of surgery is how you get to the part of the body where you need to work. It's a lot like traveling by car — if you have a choice of taking the interstate or a dirt road, it is going to be better to take the interstate.

"It is just about how we get access to the spine."

The inch and a half scar is about the size of a quarter and allows the physician to protect the nerves without additional scarring or damage to muscles and nerves.

"It allows you to concentrate on the area with the problem instead of going through an extensive exposure process just to get to the problem," Rodgers said.

The probe is passed through the muscle, instead of having to cut the muscle, as is done in the traditional surgery. Once the probes are in place, a tissue retractor is paced over them and is locked to the surgical table, a process that also allows better visibility and instrument access to the area.

Then, Rodgers prepares to remove the disc and replaces it with a plastic box filled with calcium putty.

Once the implant is in place, titanium screws are used to secure it further. The retractor is then removed and final X-rays are taken and the incisions are closed.

This surgery is only performed after the patient has undergone all of the conservative treatments with no success. Those eligible for the surgery include people suffering from scoliosis, degenerative disc diseases, instability of the spine, arthritis in the disc or spinal stenosis.

Marylin Pellham has spent

most of her life suffering from debilitating back pain. Almost 30 years ago, she had surgery to help curb that pain. But the recovery was long and painful itself.

When the back pain returned once again in 2005, Pellham tried all of the conservative treatments, even visiting a pain clinic for cortisone shots and various painkillers.

"I was on various narcotics for the pain, and I did not like that," she said. "By April of this year, I had already gotten three cortisone shots and you are only allowed three a year."

Pellham had been told by other physicians that she would just have to live with the pain for the rest of her life.

She expected to do just that, simply because she remembered the pain and long recovery time and did not want to have the traditional surgery again.

But in April, Pellham found and got the relief that she may not have been able to in the past.

"I am sorry I waited so long," she said. "This procedure was so much easier and I was able to recover so much faster."

The traditional surgery was very invasive and posed a serious risk to elderly patients. Rodgers said some elderly patients have told him they actually were informed they probably couldn't survive the traditional procedure.

"I would agree they should not have surgery using the traditional techniques," he said.

The XLIF procedure, however, allows Rodgers to intervene in early- or late-stage back problems.

Out of the almost 90 patients Rodgers has performed the surgery on, 22 were over the age of 70 and five were older than 80. The oldest patient he performed the sur-

gery on was 87, and that person went home the next day.

Rodgers cautions this surgery is not quick fix, and not everyone is eligible for the XLIF procedure.

"This is not the answer to chronic back pain. It is a great thing to have when you need it — but you do not want to have it done until then," Rodgers said.

This procedure typically takes a little longer than the traditional surgery, but Rodgers says that is simply because of the preparation time for the surgery and the strict safety requirements.

"The safety requirements are so demanding it takes a little longer to get ready," he said.

Patients not eligible for the procedure include anyone who is not an adult, has not tried all conservative treatments available or those who have treatable back problems that would not involve surgery.

While XLIF is the cutting-edge form of back surgery for these conditions, Rodgers still performs the traditional fusion surgeries, though he is doing fewer of those procedures all of the time.

XLIF was developed by Luis Pimenta, a Brazilian neurosurgeon, early in this decade. XLIF made its way to the United States in 2005 and was first performed by Rodgers at St. Mary's in 2006.

More of these procedures have been performed at St. Mary's than at any other hospital in Missouri, Rodgers said.

"This is not the end of back pain for everyone, but it certainly is great for those it works on," he added.

According to Pellham, the surgery more than worked for her.

"I am at 100 percent," she said. "I am certain Dr. Rodgers will be making the rest of my life much better because of this new procedure."

# Lendar: Two Relay for Life events June 15

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**Ending Bliss: An elegant evening at Show Me Yoga Class** 8-10 p.m., at 101A W. St. A silent auction will be held throughout the evening. Tickets are \$12 in advance and \$15 at the door. Proceeds go to Show Me Yoga Foundation. Call 636-3566 for more information.

at 636-2181 ext. 106 for reservations.

**Alzheimer's Support Group:** 10 a.m., St. Mary's Health Center. Call 761-7100 for more information.

**American Red Cross Blood Drive:** 2-7 p.m. at Knights of Columbus Hall, Tipton.

**Stroke Support Group:** 3:30-5 p.m. location varies. Call 632-5348 for meeting place and information.

\$15. Call 761-7035 to reserve your spot.

## JUNE 17

**Pulmonary Hypertension Support Group:** 1-3 p.m., at the First Assembly of God, 1614 Southwest Blvd. For more information, call Florine Tripp at 635-8640.

## JUNE 18

**Survivor's Support Group:** 6:30 p.m. in the back room of Panera Bread, 2226 Missouri Blvd. call 636-2088 for more information.

**Aquatic Arthritis Exercise Class:** 10-11 a.m. or 2-3 p.m. at St. Mary's Sports Medicine Center at Jefferson City Medical Group. Contact James Deem for more information at 556-5770.

## JUNE 19

**Heart to Heart Support Group for Cardiac patients:** 1 p.m., Capital Region Southwest campus, 1432 Southwest Blvd. Call 632-5488 for more information.

**Aquatic Arthritis Exercise Class:** 10-11 a.m. or 2-3 p.m. at St. Mary's Sports Medicine Center at Jefferson City Medical Group. Contact James

## JUNE 14

**Encouragement Through Caring (ETC) Breast Cancer Support Group:** 6:30 p.m. at the Community Breast Care project Breast Cancer house, 712 East Capitol.

**Aquatic Arthritis Exercise Class:** 10-11 a.m. or 2-3 p.m. at St. Mary's Sports Medicine Center at Jefferson City Medical Group. Contact James Deem for more information at 556-5770.

## JUNE 15

**Aquatic Arthritis Exercise Class:** 10-11 a.m. or 2-3 p.m. at St. Mary's Sports Medicine Center at Jefferson City Medical Group. Contact James Deem for more information at 556-5770.

**American Cancer Society Relay for Life:** Starts at 7 p.m.

## JUNE 11

**American Red Cross Blood Drive:** 2-7 p.m., Knights of Columbus Hall, Hermann.

**Aquatic Arthritis Exercise Class:** 10-11 a.m. or 2-3 p.m. at St. Mary's Sports Medicine Center at Jefferson City Medical Group. Contact James Deem for more information at 556-5770.

**Cooking and Easy Express Cooking vs. Fast Food:** 5:30-6:30 p.m. at CRMC. Contact James Deem for more information at 632-3566.

## JUNE 12

**Aquatic Arthritis Exercise Class:** 10-11 a.m. or 2-3 p.m. at St. Mary's Sports Medicine Center at Jefferson City Medical Group. Contact James Deem for more information at 556-5770.

# Vitamin C could be good for heart

Cox News Service

WEST PALM BEACH, Fla. — Heart disease is the No. 1 killer in the United States, and it seems no matter what drug we take, how much we exercise, or how often we get checkups, this killer remains triumphant.

That's why those people with an open mind might want to read "Stop America's 1 Killer!" by Dr. Thomas E. Levy.

His theory is that heart disease is caused by a lack of vitamin C, what he calls arterial scurvy.

Levy is a cardiologist with degrees from Johns Hopkins University and Tulane University and a law degree from the University of Denver.

Meagadases of vitamins

naturally through the ingestion of fruits and vegetables.

Suggestions in the book include taking 3,000 to 6,000 mg. of vitamin C daily, as well as more than 20 other supplements. This routine would

likely prove unwieldy for the average harried person.

But his theory that a depletion of vitamin C is a deadly culprit is intriguing, and even though some of his suggestions aren't new.

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