



CANCER ANSWERS

EVERYTHING YOUR HEALTHCARE SHOULD BE

A Balance Self-Test

Take this self-test to find out if you may be headed for a fall:

1. Have you fallen more than once in the past year?
2. Do you take medicine for two or more of the following: heart disease, hypertension, arthritis, anxiety, or depression?
3. Do you feel dizzy or unsteady if you make sudden changes, such as bending down or turning quickly?
4. Do you feel dizzy or unsteady while reading or watching movies?
5. Have you had a stroke or other neurological problem that has affected your balance?
6. Do you have seizures or blackouts?
7. Do you experience numbness or loss of sensation in your legs and/or feet?
8. Do you use a walker or wheel chair, or do you need help from others to get around?
9. Do you feel unsteady when walking or climbing stairs?
10. Do you have difficulty sitting or lying down, or rising from a seated or lying position?

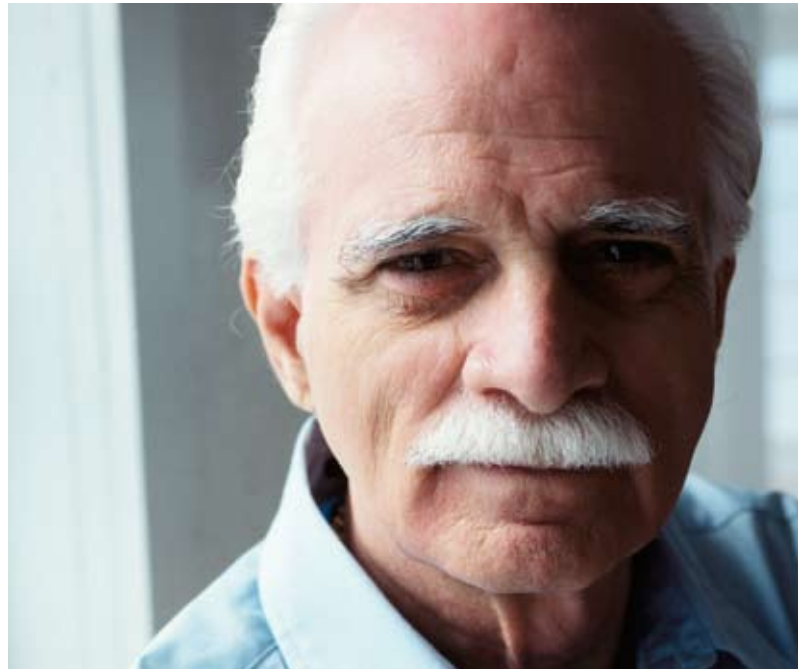
If you answered “Yes” to one or more questions, talk with your physician about your risk for a fall.

Humpty Dumpty Had a Bad Fall—You Don’t Have To

Cancer and its ensuing treatments and medications, infection, or simply advancing age can cause us to experience vertigo, lightheadedness, trouble focusing, or poor balance. These, in turn, can result in falls—which can have serious consequences, especially as we get older.

Maintaining normal balance is complex; it requires muscle strength and the integration of three different sensory systems: visual, vestibular (found in the inner ear), and somatosensory (sensations from the skin, muscles, tendons, and joints).

Because of this complexity, diagnosing a balance problem and what’s causing it can be difficult. At Memorial’s Team Therapy Rehabilitation, specialized testing can help determine the underlying cause. Videonystagmography uses infrared goggles connected to a video screen to observe and record eye movements while certain activities are performed. Computerized dynamic



posturography is a series of tests that measure the ability to maintain balance under various situations.

Designed to mimic various conditions found in everyday life, these tests isolate information from the different sensory systems and pinpoint problems. Based on the results, therapists

with the Better Balance Program will develop an individualized treatment plan that may include such options as canalith repositioning, which uses gravity to move calcium deposits from the inner ear; gaze stabilization; multisensory balance training; gait training; and coordination and strengthening techniques. ■

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For more information about the Better Balance program, ask your physician or call Memorial’s Outpatient Rehabilitation and Sports Medicine at (337) 494-2556.

Advancing Brain Tumor Treatments



James Maze, MD

In 2007, Lake Charles Memorial Hospital's Cancer Center introduced the revolutionary Trilogy system. Using advanced

imaging techniques to verify patient and tumor position, the system delivers high doses of radiation directly to cancer cells by varying the intensity of the radiation beam.

Most recently, the Trilogy added stereotactic radiosurgery to the Cancer Center's arsenal. This approach delivers high doses of radiation in a very precise beam during a single session. Generally used on smaller lesions and metastases, it is ideally suited to treating brain lesions and abnormalities.

"The Trilogy provides treatment more precisely than ever before," said James Maze, MD, a radiation oncologist on staff at Memorial Hospital. "The result is that small tumors, discovered in early stages, may be able to undergo treatment that wasn't previously available."

At the core of the Trilogy system is a high-powered medical linear accelerator, which rotates around the patient, delivering radiotherapy from different angles at higher doses, more quickly, and with greater precision. Doctors are better able to target the tumor, sparing more healthy tissue around it.



For more information, call the Cancer Center at (337) 494-2121.

Navigating a New Reality



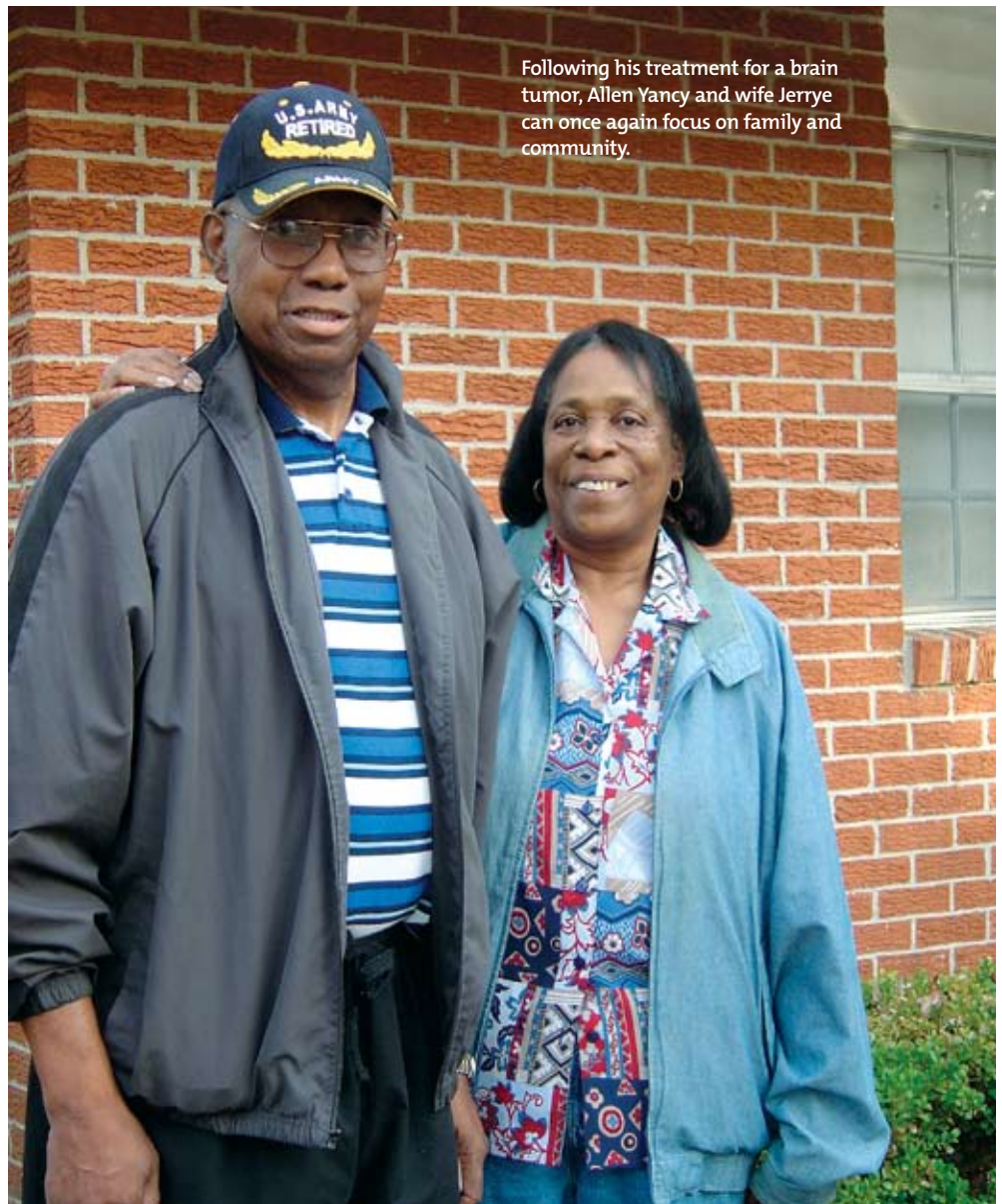
Gregory Rubino, MD, FACS

When Allen Yancy joined the Army in 1963, he turned away from college and a basketball scholarship to serve his country. "But it was the best thing that ever happened to me," he declared.

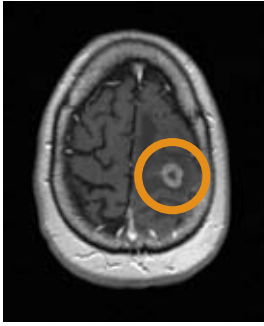
The Path to a Diagnosis

Over a career that spanned 23 years, the Natchez, Mississippi, native won the heart of Jerrye Johnson—a young teacher from DeRidder—served two tours in Vietnam, was a drill sergeant at Fort Polk, and spent 15 years recruiting in Iowa, Michigan, Wisconsin, and Illinois.

When retirement finally arrived, Allen and Jerrye opted to return to DeRidder and a life of children, grandchildren, and community service. But in 2003, a chronic cough and pain in his side led Allen to an Army doctor at Fort Polk. Surgery, two weeks of intensive care, and months of chemotherapy followed at Lake Charles Memorial Hospital. The tumor in Allen's lung was small and found early; the prognosis was good.



Following his treatment for a brain tumor, Allen Yancy and wife Jerrye can once again focus on family and community.



Before it was removed, this small tumor caused Allen Yancy to lose his short-term memory and to develop persistent shaking in his hand.

Navigating the Brain

Because the tumor was located under the primary motor cortex, Dr. Rubino used two highly sophisticated surgical tools to safely remove it. Computer neuronavigation provided critical information about the location of the tumor prior to the first incision, as well as the quickest and least damaging pathway to the tumor during the procedure, and intra-operative cortical mapping tested Mr. Yancy's motor function with direct electrical stimulation. "Neuronavigation provides a structural road map, and cortical testing adds the functional road map," said Dr. Rubino. "The combination of these technologies during brain surgery greatly enhances our ability to safely remove complex tumors that were once considered inoperable. And patients with brain tumors no longer have to travel out of town to receive cutting-edge neurosurgical treatment."

Before Allen was out of the recovery room, he demonstrated that his motor function was intact. Over time, his short-term memory has returned, the shaking has gone, and his life once again focuses on children, grandchildren, and community service. ■



For more information on treating brain tumors, ask your physician or call Memorial's Neurosurgical Institute of Lake Charles at (337) 494-4720.

Did You Know?

Women Smokers Are At Risk For Head and Neck Cancer, Too

It's not news that smoking puts people at risk for lung cancer. But that's not all. A study of nearly 500,000 people found that smoking is also a leading risk factor for head and neck cancer. What's more, smoking seems to make women especially prone to these diseases. Researchers found that smoking caused 75 percent of head and neck cancer in women, as opposed to 45 percent in men.

Cancer Beliefs Could Keep You From Preventing It

About half of all American adults think "almost everything" causes cancer. More than one in four say there's not much a person can do about it. And nearly three-quarters believe it's hard to know which preventive measures to follow. Holding these mistaken beliefs makes people less likely to exercise, avoid smoking, and eat more fruits and vegetables—all proven preventive measures.

Signs and Symptoms of a Brain Tumor

Brain tumors are often difficult to diagnose because their symptoms often appear gradually and frequently mimic other diseases. In general, the symptoms of a brain tumor depend on the size of the tumor and the part of the brain affected.

Symptoms may include:

- A new seizure in an adult
- Gradual loss of movement or sensation in an arm or leg
- Unsteadiness or imbalance, especially if it is associated with headache
- Loss of vision in one or both eyes, especially if the vision loss is more peripheral
- Double vision, especially if it is associated with headache
- Hearing loss, with or without dizziness
- Speech problems that start gradually

Other symptoms may include nausea or vomiting that is most severe in the morning, confusion and disorientation, and memory loss.

If you are concerned that you or someone you know might have a brain tumor, call your doctor right away. Early detection and treatment may increase the chance for survival.



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1701 Oak Park Blvd.
Lake Charles, LA 70601

Upcoming Events

Free Colorectal Cancer Screening

The test is easy to take and can be done in the privacy of your home. Recommended for men and women ages 50 and older.

For information, call (337) 494-6767.

Memorial/LSU Health Services Center

Family Practice Center

March 11, 12, and 13 by appointment

Miles Perret "Mobile Miles"

Medical supplies, nutritional supplements, wigs, prostheses, and other resources to patients—at no charge, regardless of financial circumstances or type of cancer. For information, call (337) 984-1920.

Tuesdays, March 10, April 14, May 12, June 9
10 a.m. – 2 p.m.

Look Good...Feel Better®

A program to heighten women's spirits while they're undergoing chemotherapy or radiation. For details, call the American Cancer Society at (337) 433-5817.

Mondays, March 16, May 18, July 20
11 a.m.

Coping with Cancer

A support group for those who are newly diagnosed or undergoing treatment, or who have completed treatment. For more information, call Memorial's chaplain, Rev. David DeWitt, at (337) 802-1933.

Tuesdays, March 17, April 21, May 19,

June 16, July 21, and August 18

Noon

Now You See It ... Now You Don't

For the past year or so, John LaBove has endured the pain and irritation caused by a pterygium (pronounced *te rijjee em*), a benign growth at the side of his eye that obstructed his vision. A degenerative condition of the cornea, this small triangular patch of tissue was difficult to endure: His eyes were constantly red, itchy, inflamed, dry, and painful. His vision was often blurred, and as the pterygium grew, so did the pain and distortion.

An emergency medical technician in Cameron Parish, John needed to focus on his patients—not on his own problem—so he sought help from Dr. A.J. O'Byrne, an ophthalmologist with The Eye Clinic.



A.J. O'Byrne, MD

"Pterygium typically occurs by exposure to ultraviolet light, such as the sun, and dust. The growth is not cancerous, but the condition can be painful and definitely bothersome for sufferers," Dr. O'Byrne explained.

An avid hunter and fisherman, John knew exactly how the pterygium developed. "But I wear sunglasses all the time now," he vowed.

In the past, John's treatment options would have been few and bleak. The painful surgery was often considered ineffectual in the long-term, so doctors

typically advised patients to learn to endure the difficult condition. If surgery was performed, the growth typically recurred in 50 percent of cases.

Now, Dr. O'Byrne performs a relatively new, minimally invasive procedure at Lake Charles Memorial Hospital. He removes the pterygium and grafts on a new amniotic membrane. The procedure is followed by a short course of low-dose radiation therapy.

"In addition to the low recurrence rate, this type of radiation is comparable to an X-ray, so it's virtually painless and very low-risk," Dr. O'Byrne explained. The Eye Clinic is the only practice in Louisiana that currently performs the treatment.

For John, the new procedure was like a sleight of hand—now you see it, now you don't. "I was back at work in three or four days," he said. ■



For more information or an appointment with Dr. O'Byrne, call The Eye Clinic at (337) 478-3810.

DID YOU KNOW?

Garlic may help protect you from colorectal cancer. In a recent study, a high intake of garlic (more than five cloves a week) was linked with a lower risk for the disease.