



Licking Memorial Health Systems

1320 West Main Street
Newark, Ohio 43055

Please take a few minutes to read this month's report on **Respiratory Care**.

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Visit us at www.LMHealth.org.

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Quality Report Card

Licking Memorial Health Systems

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Health Tips – 10 Tips for Better Sleep

Sleep is closely related to the quality of breathing. At Licking Memorial Hospital (LMH), sleep disorders are diagnosed in the Sleep Lab, under the direction of Sleep Specialist Eric R. Pacht, M.D., who offers the following tips for better sleep hygiene:

1. Establish a regular bedtime and wake time. Determine the optimal amount of sleep you need each night to feel well rested during the day, then maintain a regular sleep schedule.
2. Exercise regularly. Moderate exercise during the morning or afternoon can help to deepen sleep. Do not exercise within several hours of bedtime – this can disrupt sleep.
3. Avoid caffeinated beverages and foods such as cola, coffee, tea and chocolate. Caffeine is a stimulant that will disrupt sleep whether or not you realize it.
4. Avoid alcoholic beverages. Alcohol may make you feel groggy and tired, but it also disrupts the sleep cycle and can lead to a poorer quality of sleep and shorter sleep time.
5. Relax. Try to unwind before retiring for the night by reading or taking a warm bath.
6. Create a pleasant and comfortable sleep environment. Avoid bright lights as they will stimulate wakefulness. If you have difficulty falling asleep within 15 to 20 minutes, get out of bed and engage in a relaxing activity designed to promote sleep. You can return to bed when you feel sleepy again.
7. Quit smoking. Smoking is bad for the cardiovascular system and sleep quality, too. Nicotine disrupts sleep, and the other toxins can cause breathing difficulties during the night.
8. Avoid heavy meals and excessive liquids prior to bedtime. Big meals can cause heartburn or make breathing more difficult. Excessive fluids may cause a need to use the restroom during the night.
9. Avoid daytime naps.
10. See your physician if sleeping problems persist.

Respiratory Care – How do we compare?

Check out our Quality Report Cards online at www.LMHealth.org.

At Licking Memorial Health Systems (LMHS), we take pride in the care we provide. To monitor the quality of that care, we track specific quality measures and compare them to benchmark measures. Then, we publish them so you can draw your own conclusions regarding your healthcare choices.

1 Tobacco use has been linked to many serious and life-threatening conditions, such as cancer, heart disease, cardiopulmonary disease, and diabetes. An estimated 25 percent of Licking County adults smoke.⁽¹⁾ Many of these individuals want to discontinue using tobacco products, but are unable to overcome their addiction. LMHS offers free Quit For Your Health services, which include education, counseling, and tobacco cessation products, all in an effort to help improve the health of our community.

	LMH 2010	LMH 2011	LMH 2012	LMH Goal
Number of patients referred to tobacco cessation services	398	1,159	460	NA
Six-month success rate for patients who completed Quit for Your Health ⁽²⁾	NA	56%	49%	National ⁽³⁾ 25%

2 Smokers who receive advice from their physicians to quit smoking are more likely to give up smoking than those who do not, according to the National Committee for Quality Assurance (NCQA). Licking Memorial Pulmonology assesses the smoking status of all Pulmonology patients during office visits and counsels those who are actively smoking to quit. The patients are offered referral to Quit for Your Health.

	LMHP Pulmonology 2010	LMHP Pulmonology 2011	LMHP Pulmonology 2012	National ⁽⁴⁾
Smoking cessation advised for Licking Memorial Pulmonology patients who smoke	99%	100%	99%	77%

3 Asthma is a condition in which swelling or inflammation can cause narrowing of the breathing tubes, making it difficult to breathe and sometimes resulting in a medical emergency. By using the correct medications such as inhaled corticosteroids, asthma can be controlled. Use of these medications can reduce asthma-related emergency room visits, hospital admissions, and missed work/school days. LMHP Pulmonology assesses all asthma patients during their office visits to ensure that they are being treated with the correct long-acting corticosteroid.

	LMHP Pulmonology 2010	LMHP Pulmonology 2011	LMHP Pulmonology 2012	National ⁽⁴⁾
Asthma patients assessed for appropriate inhaled corticosteroid	100%	100%	100%	90%

4 Protecting patients from hospital-acquired infections is a primary patient safety goal. LMH has many ongoing programs and safety mechanisms in place to help prevent patient infections. In accordance with the Centers for Disease Control and Prevention (CDC) recommendations, LMH monitors patients who are at high risk for infections, including those using invasive devices, such as ventilators (breathing machines). The following data reflect the number of respiratory infections associated with ventilator use, per every 1,000 patient days.

	LMH 2010	LMH 2011	LMH 2012	National ⁽⁵⁾
Pneumonia infection rate of Intensive Care Unit patients on ventilators per 1,000 patient days	1.4	1.5	0	1.2

5 A ventilator is a breathing machine that may be used in hospitals for very sick patients who may not be able to breathe on their own. The use of a ventilator can be life-saving, but also can have serious side effects, such as infections, stomach ulcers, blood clots, and dependency on the ventilator itself. To help reduce the potential for these side effects, LMH uses a “ventilator bundle” when caring for patients using a ventilator. This bundle includes several treatments used together, such as providing special medications, providing good mouth care, making sure the patient’s body is positioned correctly, and aggressively “weaning” the patient off the ventilator.

	LMH 2010	LMH 2011	LMH 2012	Goal
Complete ventilator bundle used for patients on ventilators	96%	99%	98%	greater than 90%

Data footnotes: (1) Licking County Health Department, Behavioral Risk Factor Surveillance System, 2011. (2) Tobacco-free status is self-reported by patients in a six-month follow-up after completing the Quit for Your Health program. (3) Hospitalcompare.hhs.gov national benchmarks. (4) National Committee for Quality Assurance, “The State of Health Care Quality 2012.” (5) National Healthcare Safety Network Report, Data Summary for 2010, Devices-associated Module (Medical-Surgical ICU<15 beds).

Patient Story – Jo Ann Dumolt

For nearly 47 years, Jo Ann Dumolt reached for a cigarette to help calm her nerves during stressful times. She began smoking occasionally when she was 12 years old, and by the age of 18, she was addicted to nicotine.

“I tried to quit smoking on my own ‘cold turkey’ several times,” Jo Ann said. “Usually I would quit for three to six months. Once, I even quit for five years. Then, there would be a problem at home, or some other difficulty in life, and I turned back to the cigarettes again.”

Gradually, Jo Ann’s determination was strengthening and, in 2012, she summoned the courage to inquire about the free Quit for Your Health tobacco cessation program at Licking Memorial Hospital (LMH). “I had wanted to quit for years. Smoking was dragging me down, and I was tired of feeling tired all the time. My family doctor referred me to the Quit for Your Health program. Unfortunately, there was a long waiting period at that time, so I did not sign up. However, I remembered my doctor’s recommendation. Then, one of my little granddaughters said that she wished her grandmothers would quit smoking because she loved them and did not want them to get hurt. Two weeks later, I decided to call Quit for Your Health again, and this time the wait was much shorter.”

Jo Ann met with tobacco cessation counselor Patty Wicks, R.N., B.S.N., CTTS, in April 2012, for her first appointment. “We hit it off right away. She had such a good attitude and made me feel good about myself,” Jo Ann recalled. “It was an exciting moment for me when I met her.”

Patty and Jo Ann discussed the tobacco cessation tools that were available through the Quit for Your Health program, which included counseling, education, nicotine gum, patches and lozenges. Patty recommended the nicotine patches for Jo Ann who, based on her two-packs-per-day cigarette usage, began wearing two patches on her upper arms.

Jo Ann said, “From that moment, I did not smoke any more cigarettes, and I did not even want them. Patty suggested that



Jo Ann Dumolt helps Pastor Irene Wilson (background) serve free Kids Café lunches on Tuesdays at Old Country Church in Newark.

I keep something in my mouth to suppress the ‘hand-to-mouth’ habit, so I always had sugar-free cinnamon balls or lemon drops handy. I also found it helpful to keep my hands occupied, and I began to play lots of Christian Internet games.”

“The patches worked very well for me,” Jo Ann added. “There were no side effects. I even got to the point where I forgot to put the nicotine patches on sometimes because I no longer needed nicotine.”

Throughout four months of nicotine replacement therapy, Jo Ann visited Patty for monitoring and counseling. Patty provided tips

to deal with future tobacco cravings, such as finding new interests and hobbies. Jo Ann took the advice to heart and began enjoying daily walks with her cockapoo/spaniel mixed breed dog, Abby. She also joined Old Country Church in Newark and began volunteering with their Kids Café free meal program. She explained, “Before I quit smoking, I did not want to do anything. Now, I enjoy taking Abby to The Dawes Arboretum or fishing at T.J. Evans Park. I honestly do not miss smoking. Food tastes better. I can breathe better, and I have more stamina. I feel so much better now.”

Jo Ann is grateful to her granddaughter for giving her a little nudge to call LMH’s Quit for Your Health program. “My granddaughter told me that she is proud of me,” Jo Ann said. “That made me feel really good.” Altogether, Jo Ann has four grown children, 15 grandchildren and one great-granddaughter. She is concerned about family members and friends who are still smoking. “Now that I quit smoking, I really notice the odor on other people, so even if I do not see them with cigarettes, I know. I am going to have to talk to them about that,” she said.

LMH’s Quit for Your Health program is staffed by certified tobacco cessation counselors. Studies have shown that tobacco users who participate in an evidence-based cessation program are more likely to be successful in their attempt to quit. For more information about LMH’s Quit for Your Health program, please call (740) 348-7848.

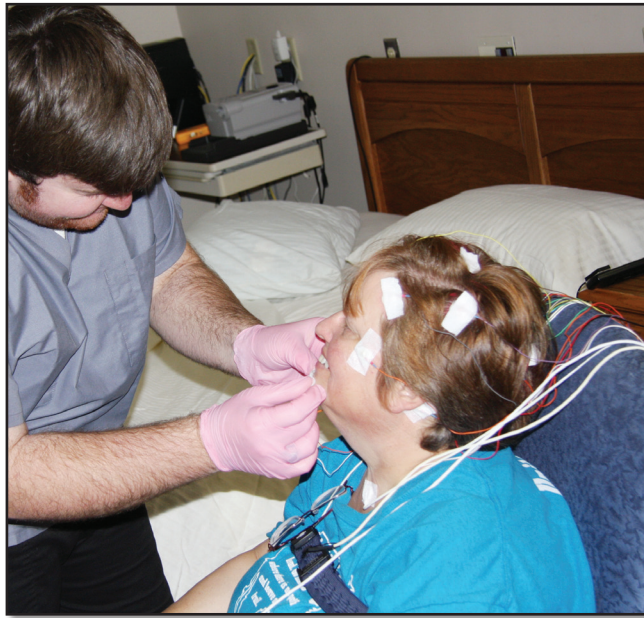


Licking Memorial Hospital’s (LMH) Tobacco Cessation Program, Quit for Your Health, is designed to help people stop using tobacco at no cost. For most individuals, this requires the support of a professional counselor. Our counselors utilize evidence-based techniques to help participants develop a plan that will offer an opportunity to become tobacco-free.

For more information, please call (740) 348-QUIT (7848).

Sleep Study at LMH Reveals Sleep Disorders

One out of five adults in the U.S. is affected by a sleep disorder, according to an estimate reported by the National Institutes of Health. With more than 50 million Americans trying to function while sleep deprived, the National Heart, Lung, and Blood Institute reports that the nation's health is at risk. Long-term health problems, such as heart disease, stroke, diabetes, obesity and depression, have all been linked to chronic lack of sleep. In addition, driving while drowsy, which is a direct consequence of sleep deprivation, is responsible for an estimated 1,550 fatalities and 40,000 injuries each year in the U.S. To help individuals improve their quality of sleep and daytime alertness, the comprehensive Sleep Lab at Licking Memorial Hospital (LMH) offers overnight sleep studies on an outpatient basis that can reveal the cause of chronic sleeplessness and tiredness.



Ryan Shea, a technician's assistant in LMH's Sleep Lab, prepares Lanette Dennis for an overnight sleep study.

LMH's Sleep Lab services are contracted through Sleep Care, Inc., and overseen by Eric R. Pacht, M.D., of Licking Memorial Pulmonary and Sleep Medicine. "There are many different types of sleep disorders, and the most common one that we see in the LMH Sleep Lab, is obstructive sleep apnea (OSA)," Dr. Pacht said. "With OSA, the soft tissues in the back of the throat collapse, and the patient's breathing stops, or becomes extremely shallow, during sleep. The pauses in breathing may last anywhere from a few seconds to more than a minute before the patient resumes normal breathing, often with a loud snort or choking sound. This pattern can be repeated many times, even hundreds of times throughout the night. The patient may not fully awaken during these episodes, and as a result, may not be aware that it happens unless there is someone else around to witness it. Patients with severe OSA often wonder why they are so fatigued throughout the day because they do not realize how much their sleep is being disturbed. The sleep study measures those episodes of non-breathing that the patient does not even know are happening."

Loud snoring is one of the main signs of OSA. Patients who are most at risk are male, overweight and over the age of 40, although it can occur in anyone, including children.

The Sleep Lab at LMH is located on the sixth floor. For a sleep study, the patient arrives at the Hospital at 7:45 p.m., reports directly to the Sleep Lab, and is shown to a hotel-like private patient room that is equipped with a shower and cable television. After the patient changes into comfortable, loose-fitting sleeping attire, a technician's assistant uses adhesive tape and water-soluble medical glue to attach approximately 25 electrode sensors to the patient's legs, chest, head and face. In addition, a cloth belt with sensors is placed around the waist.

Patients are invited to relax by reading, watching television or other soothing activities to re-create their usual bedtime routine as much as possible. "However, no cell phones or pagers are permitted in the room during the study," Dr. Pacht explained. "We want the patient to sleep as much as possible for the study."

As the patient drifts off to sleep, monitors are gathering and recording information about brain waves, eye movements, heart rate and rhythm, air flow, oxygen levels, body temperature, chest movements, leg movements, abdominal movements and body positioning. A small camera feeds live video to the

polysomnograph technician's desk to monitor the patient's sleeping activities and safety, and an intercom is available if the patient needs to speak to the technician at any time.

If the patient has severe sleep apnea during the first half of the night, the technician will start continuous positive airway pressure (CPAP) during the second half of the night to treat the sleep apnea. The CPAP delivers a steady flow of air to keep the airways open and prevent periods of non-breathing. The technician may make several adjustments to the CPAP to attain optimal air pressure while the patient continues to sleep.

The next morning, many patients choose to go straight from the Sleep Lab to their places of work. They meet with Dr. Pacht in a follow-up appointment for a complete explanation of their study results and their treatment options.

Dr. Pacht said, "With very mild cases of OSA, I may recommend that a patient first try losing weight or a different sleeping position. Episodes of sleep apnea are more prevalent in obese patients, especially if there is excessive girth around the neck. In addition, sleep apnea is often worse when the patient is sleeping flat on his back. It may be helpful to sleep on the side or with the head of the bed elevated. For cases of severe sleep apnea, however, the CPAP is the gold standard of treatment and offers the best relief of symptoms." If a CPAP was not tested on the patient during the first sleep study, a second sleep study may be required.

In addition to overnight sleep studies, LMH offers briefcase-sized take-home kits. These kits are well-suited for patients who cannot visit LMH, or whose medical insurance requires an in-home study.

The LMH Sleep Lab is nationally accredited by the American Academy of Sleep Medicine. Sleep studies are painless and are performed Monday through Thursday evenings. For an appointment, please call (740) 348-1805.