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MICHIGAN MEDICAL REPORT

FROM THE PHYSICIANS AT ST. JOSEPH MERCY OAKLAND

WINTER 2010

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MichiganMedicalReport.com



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community events



ST. JOSEPH MERCY OAKLAND
SAINT JOSEPH MERCY HEALTH SYSTEM

St. Joseph Mercy Oakland is a
tobacco- and smoke-free campus.



CANCER CARE CONTINUES TO MAKE GREAT STRIDES AT SJMO



JUDIE GOODMAN,
DO

A message from Judie Goodman, DO, Medical Director, Oncology Services

Cancer care at St. Joseph Mercy Oakland (SJMO) continues to make great strides in its programming. Our vibrant, dynamic, full-service cancer program partners with a team of specialists, who provide the latest medical and surgical treatments.

It is reassuring that expert treatment is readily available close to home to help patients with cancer. SJMO's oncology program, accredited by the American College of Surgeons Commission on Cancer, has the caring staff and latest technology to help cancer patients and their loved ones through every phase of treatment.

Our patients' care is supported through our:

- Comprehensive women's imaging center
- Outpatient infusion center
- Range of inpatient and outpatient surgical options
- Affiliated radiation oncology program
- Breast cancer nurse navigator
- Internal and external support groups
- Certified cancer registry
- Multidisciplinary tumor conferences
- Cutting-edge clinical trials

STANDING OUT IN EXCELLENCE Here are just a few of our many recent program highlights:

Mercy Cancer Network. SJMO is now a member of the Mercy Cancer Network (MCN), one of the state's largest and most comprehensive networks dedicated to giving patients the most convenient access to the latest cancer diagnostics, clinical research trials and therapeutic technology.

MCN links the expertise of local hospitals and coordinates the collective cancer resources of 17 Trinity Health cancer care locations across the state. Its goal is to share technology and work collaboratively with primary care and specialty physicians at Trinity's Michigan hospitals. The benefit to patients is that as much cancer care as possible is delivered close to home, with access to additional resources as needed.

Breast cancer nurse navigator. Because a diagnosis of cancer—and the myriad appointments and tests that follow—can be overwhelming, our breast cancer nurse navigator acts as a personal advocate for our patients and assists both patients and their family members with resource needs. Our breast cancer nurse navigator guides patients through their cancer treatment journey, helps to



To learn more about our comprehensive cancer services, please call **248-858-3456**.

coordinate care, provides education about diagnosis and treatment options, and offers support.

Genetic counseling and testing. Most cancer occurs by chance. However, in some families there is more cancer than would be expected by chance alone. Statistics suggest that about 10 percent of all cancers are related to genetics. Determining which families have cancer history related to an inherited gene mutation is important, since the cancer risk in these families is much higher than in the general population.

SJMO now offers cancer genetic counseling and testing (a simple blood test) on an outpatient basis for a number of hereditary cancers. People are evaluated by a nurse practitioner, and if testing is done, results are forwarded to the referring care provider with recommendations.

Clinical trials. In these research studies, patients partner with physicians to find new, more effective ways to prevent, diagnose and treat cancer. SJMO offers access to clinical trials for every stage of cancer—including prevention, symptom management and treatment. By offering these trials, SJMO is giving patients access to innovative treatments without having to leave their own physicians or communities.

Community programs. Over the past year, we've continued to expand our outreach education and screening

programs for colon, prostate and breast cancer.

Through a grant from the Michigan Public Health Institute, we were able to partner with four churches, the Pontiac Public Library and the American Cancer Society to provide education to 180 community residents about colorectal cancer risk factors and how to change them. We also continued our free colorectal cancer screening program, with more than 2,000 people picking up testing kits during March.

We increased participation in our free faith-based, nurse-run prostate cancer screening program by more than 50 percent compared to the previous year. And we offered three free weekend mammogram clinics that targeted Oakland County residents who needed a screening mammogram and had no health insurance. Funding for the free mammogram clinics was provided in part by the Pink Ribbon Trailblazers. (See "Screenings Successful in Finding Cancer Early" on page 5 for more information about the importance of screenings and our results.)

Facebook and blogs. In July, Cancer Care became the first service line at SJMO to use social media—in our case Facebook and blogs—to promote its comprehensive services and educate our community about cancer care available at the hospital. Several of our physicians, other staff members and patients have posted articles and blogs. By mid-October we had 190 Facebook fans, and we're averaging around 100 visits per month. Our blogs continue to draw first-time visitors as well.

HERE FOR YOU Our SJMO Cancer Care team is equipped to support our patients and their loved ones throughout the cancer treatment journey.

FREE SCREENING KITS

For the third consecutive year, St. Joseph Mercy Oakland will offer free colorectal cancer screening kits to community members during March, which is National Colorectal Cancer Awareness Month.

People age 50 and over—or those with other high-risk factors, such as a personal or family history of colitis

or Crohn's disease, colorectal cancer or adenomatous polyps—are encouraged to pick up the test.

ABOUT COLORECTAL CANCER Colorectal cancer is the second leading cause of cancer-related deaths in the U.S., claiming more than 56,000 lives each year. The disease is most common in both men and women age 50 and over.

The good news is that when detected early, colon cancer

is 90 percent curable with treatment.

Participation is easy! A list of participating locations will be available in March by calling **800-372-6094** or by visiting **stjoesoakland.org**.

MICHIGAN MEDICAL REPORT SPEAKERS BUREAU

The Michigan Medical Report Speakers Bureau has qualified health care professionals who speak on a wide range of topics to community organizations.

If your group would like to have a speaker on a particular topic, please call St. Joseph Mercy Oakland Public Relations Specialist Heidi Press at **248-858-6662**. Speaker appearances are free of charge.

SJMO COMMUNITY EVENTS

COMMUNITY ORTHOPEDIC SEMINARS

One Tuesday a month
6 to 7 p.m.

St. Joseph Mercy Oakland
Franco Communications Center,
44405 Woodward Ave.

Pontiac
Free

- "Total Joint Replacement," Safa Kassab, MD, Feb. 23
- "Shoulder," Paul Lewis, DO, March 23
- "Arthritis and Back Pain," Bruce Henderson, MD, April 27
- "Total Joint Replacement," Shivajee Nallamothu, DO, May 25
- "Shoulder," Matt Bahu, MD, June 22

- "Birmingham/Total Hip Replacement," Bill Kohen, MD, July 27

Registration is required; call **800-372-6094**. Light refreshments will be provided.

METABOLIC NUTRITION AND WEIGHT MANAGEMENT PROGRAM

Second and fourth Tuesdays of each month

6:30 p.m.

St. Joseph Mercy Oakland
Franco Communications Center,
44405 Woodward Ave.

Pontiac
Free

Conducted by Tom Rifai, MD, Medical Director, SJMO Metabolic Nutrition and

Weight Management. These seminars teach how to attain optimal health, well-being and control of weight-related issues.

WOMEN'S HEALTH EXPO

Thursday, Feb. 4

7 p.m.

Congregation Shir Tikvah

3900 Northfield Pkwy., Troy

\$8 (Make check payable and send to CST Sisterhood, 3900 Northfield Pkwy., Troy, MI 48084.)

Event includes:

- A panel of SJMO physicians to address women's health issues
- Simple health screenings
- Health education
- Dessert afterward

PRIMARY CARE PHYSICIANS: YOUR FIRST STOP IN HEALTH CARE

We see medical specialists for a wide range of health concerns. But which physician tells us how to be and stay healthy? The primary care physician.

A primary care physician (PCP) helps us maintain our health through preventive care. A PCP is often the first medical practitioner we contact.



GEORGE ARTZBERGER, DO



STACEY GORMAN, MD



HORIA TATU, MD

He or she has a medical degree (doctor of medicine or doctor of osteopathy), post-graduate training in a primary care program, and often a subspecialty. Most are also board-certified. The four kinds of PCPs are:

- A family medicine or general practice PCP, who specializes in general family care.
- An internal medicine PCP, who can diagnose and treat diseases not requiring surgery in people ages 18 and older.
- A pediatrician, who provides care for children from birth through the teen years.
- An obstetrician/gynecologist, a medical doctor who is specially trained to provide medical and surgical care to women.

THE ROLE OF A PCP George E. Artzberger, DO, a St. Joseph Mercy Oakland (SJMO) family medicine physician, says the PCP "is your go-to, starting point or home for medical care."

The PCP provides health

promotion; disease prevention; health maintenance; health counseling; and nonsurgical treatment of common illnesses, such as the flu, and medical conditions, such as diabetes. A PCP will do a physical exam, take family and medical histories, perform diagnostic tests, administer vaccines, and advise you on how to live a healthy lifestyle.

PCP VS. SPECIALIST A PCP will build a relationship with you, be familiar with your physical and psychological makeup and lifestyle, and provide consistency in your health care. He or she will monitor your health, educate you about healthy eating and the need for exercise, and refer you to a specialist if needed.

"Preventative medicine is important," says Stacey Gorman, MD, an SJMO pediatrician. "Early intervention makes such a big difference in a patient's health."

PCPs see their patients regularly, so they know what's normal for you and what's not. For example, a PCP may notice symptoms that you may not notice or catch early warning signs of disease, such as high blood pressure. At the same time, if "patients have a medical condition that needs to be checked, like diabetes or hypertension, they should see their PCP," Dr. Artzberger says.

PICKING A PCP "People need to have a PCP before they're sick, so they have someone to go to for advice and treatment," Dr. Artzberger says.

So how do you find a PCP?

- Ask relatives, friends and co-workers for a referral.
- Ask a specialist you see regularly for a recommendation.
- Ask your health insurance company for a referral.
- SJMO can help you locate a PCP in your area with your criteria, including specialty, gender, experience, location and language.

Horia Tatu, MD, an SJMO internal medicine physician, says patients "should see their PCP at least two times a year, provided there's no chronic illness involved."

On a first visit, patients should bring information about their past medical, surgical, social and family histories and an accurate list of medications and allergies.

Dr. Gorman says patients need to feel comfortable with their PCPs. And communication is important, too.

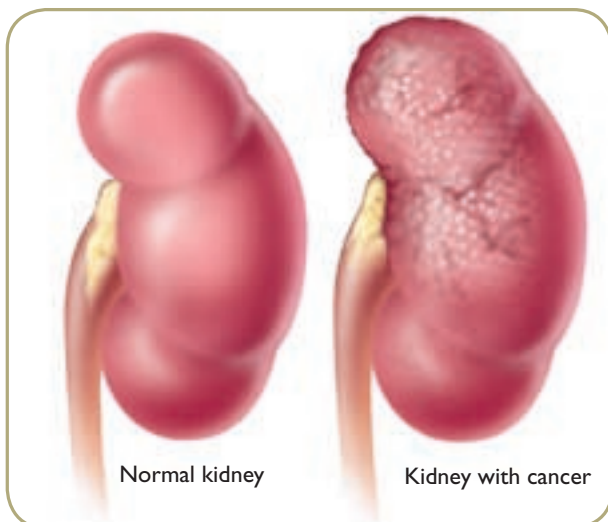
"Don't feel intimidated," Dr. Tatu says. "Patients should feel free to ask questions. It helps the physician know that patients understand what they're told."



For a referral to an SJMO PCP, call **800-372-6094**. You can also find a PCP at **MichiganMedicalReport.com**.

CANCER

Finding it early. Treating it fast.



TARGETING KIDNEY CANCER



RAJAN KRISHNAN, MD

There are many ways to treat cancer, but when it comes to renal cell cancer, or kidney cancer, “targeted therapies” are proving to be very successful. Targeted therapies fall into a new category of medication that differs from chemotherapy.

KIDNEY CANCER: A PRIMER Kidney cancer is a disease in which cancer cells are found in the lining of very small tubes in the kidney. These tubes function to filter and clean

the blood, take out waste products, and make urine.

Symptoms may include: ● Abnormal, brown or rusty urine ● Pain in the groin area ● An abdominal mass ● Weight loss ● Loss of appetite ● Anemia ● A high red blood cell count. In men, symptoms also may include enlargement of the left testicle, vision abnormality and high blood pressure. Women may discover an unusual amount of facial hair. Obesity or family history of kidney cancer may lead to having the disease.

Rajan S. Krishnan, MD, St. Joseph Mercy Oakland hematologist/oncologist, says there is no known cause of kidney cancer and that there is no correlation between kidney stones and kidney cancer. However, some risky behaviors can lead to the disease, according to the National Cancer Institute (NCI). These include smoking; misuse of some pain medications, including those purchased over the counter; and some genetic conditions.

Found mostly in patients age 55 to 84, kidney cancer is one of the 10 most common cancers. The risk is higher in men than in women.

To test for kidney cancer and its stage (how far it has spread), the physician will order a physical exam with patient history, a blood chemistry study, a urinalysis, a liver function test, an ultrasound, a CT scan, magnetic resonance imaging or a biopsy.

The physician may also order an intravenous pyelography procedure, which involves injecting dye into the body so that

x-rays will show if cancer or blockages are present. Test results and the general medical condition of the patient will guide the physician as to the type and scope of treatment.

FIGHTING BACK WITH TARGETED THERAPIES Several treatments are available to treat kidney cancer, according to the NCI. These include surgery (from excising only the cancer to removal of the entire kidney); radiation therapy; chemotherapy; biologic therapy (using the patient's immune system to fight off the disease); and targeted therapy, the newest of the treatments.

Targeted therapy is a type of treatment that uses drugs or other substances to identify and attack specific cancer cells without harming normal cells.

Targeted therapies are generally administered in pill form and sometimes, although rarely, intravenously. Each targeted therapy has a different function. These include: ● Stopping the growth of blood vessels that feed the cancer ● Halting the molecules that help the cancer grow ● Blocking the protein that stimulates cell growth ● Slowing the growth of new blood vessels.

Patients may experience some side effects from the drugs, Dr. Krishnan says. These may include a skin rash, low-grade diarrhea, and occasionally some loss of appetite and fatigue.

CHANCES OF WINNING The stage of the cancer and size of the tumor will determine the patient's survival rate, Dr. Krishnan says. “The chance for a good prognosis is at the early stage,” he says.

GENES AND YOUR HEALTH



ROMAN FRANKLIN, MD

Your genes, those little pieces of DNA found on your chromosomes, determine what you look like and your health status. But if a certain disease runs in your family, you may have an inherited genetic disorder. In that case, it's time to go for genetic testing.

HOW DOES TESTING WORK?

Genetic testing is performed in a physician's office, usually with a blood test, although body fluids, skin and tissues may be tested as well. It is used to diagnose and determine treatment for genetic diseases.

If you get a positive result, you don't necessarily have the disease; you are just more likely to develop it. If you test negative, it's more likely that you will not have the disease.

Tay-Sachs disease, sickle cell anemia, hemophilia and Huntington's disease are genetic disorders. According to the Centers for Disease Control and Prevention, there

are more than 1,700 known genetic diseases, with 1,400 tests to diagnose them. In addition, about 10 percent of cancers have a genetic component, most commonly breast, ovarian and colon cancers.

How do you know if you need genetic testing? Your physician will take a family history and will look for the following:

- Does a blood relative have a particular disease, and does it run in your family?
- Are you from a particular ethnic group in which this disease commonly occurs?
- Is this a rare disease?

WHY YOU MIGHT NEED TESTING Roman Franklin, MD, a St. Joseph Mercy Oakland (SJMO) hematologist/oncologist, says a patient needs to go for genetic testing “depending on what disease you're talking about. It has to do with the patient history and the family history. The test will show a predisposition for disease or a disorder.”

For example, if you have the BRCA gene, “you have a

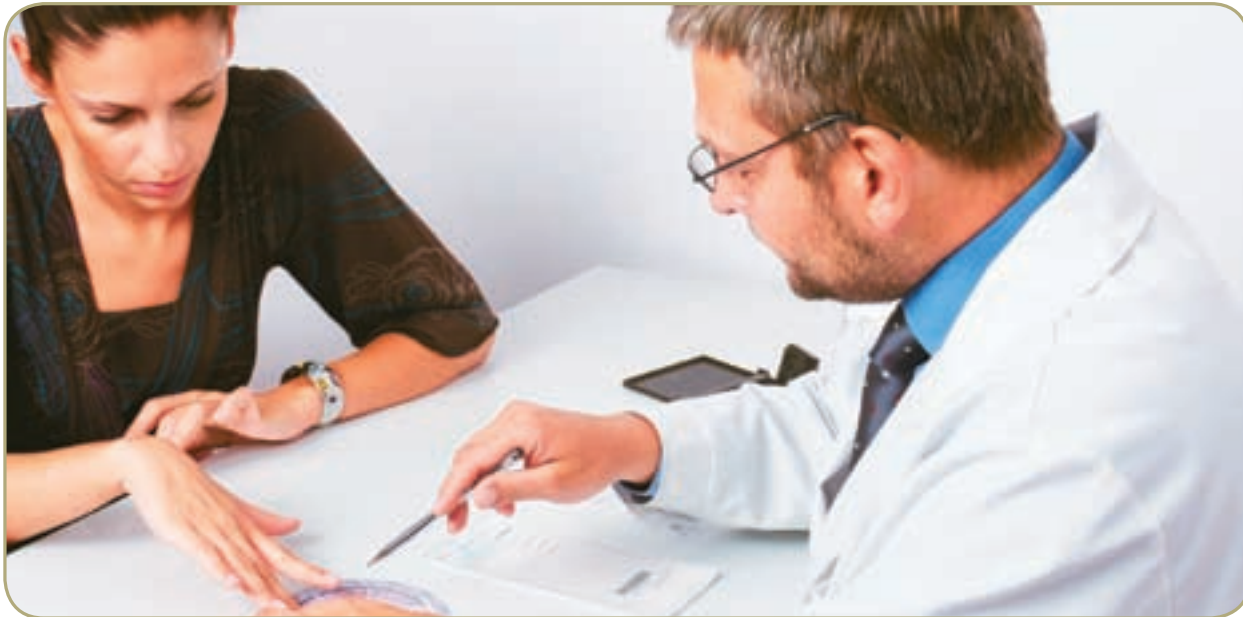
higher risk of developing cancer of the ovary or breast,” he says.

The National Human Genome Research Institute lists several reasons for having a genetic test:

- To confirm a diagnosis if you show signs or symptoms of a genetic disease
- To show who has a higher chance of getting a disease before symptoms appear
- To show which family members are at risk for a certain genetic condition
- To determine if you are a carrier of a gene alteration for an inherited disorder
- To screen pregnant women for common genetic disorders

MOVING FORWARD AFTER RESULTS If the test proves positive, the next step is to see a genetic counselor, who will counsel you and perhaps your family about treatment, care and early intervention.

Suzanne Jermstad, MSN, FNP-BC, OCN, a St. Joe certified nurse practitioner trained in cancer genetics, says, “People need to be aware of screening and early detection.”



MICHAEL HICKS, MD



ANISSA MATTISON, DO

the most effective.

Regular, thorough pelvic exams to look for signs of gynecologic cancer also play an important role in safeguarding women's health, Dr. Mattison says.

SEEK OUT A SPECIALIST "If you suspect or are diagnosed with a gynecologic cancer, your physician should refer you to a gynecologic oncologist, who is a specialist in both the diagnosis and treatment of women with cancer of the reproductive organs," Dr. Mattison says.

SJMO serves as the primary practice site for one of only 19 board-certified gynecologic oncologists in Michigan. Michael Hicks, MD, directs a team that also includes nurse practitioners, oncology-certified nurses, gynecologic surgery nurse coordinators, cancer research nurses and support staff.

PERSONALIZING TREATMENT "Gynecologic oncology brings together the expertise of a multidisciplinary team of health professionals to coordinate the best possible treatment, individualized for each patient," Dr. Hicks says.

Depending on the type of tumor, gynecologic cancers typically are treated with surgery (radical, minimally invasive and reconstructive). Chemotherapy (both intravenous and oral) and radiation therapy (high-dose-rate [HDR] brachytherapy, external beam, etc.) may also be part of the treatment plan, Dr. Hicks says.

GYNECOLOGIC CANCER: GET THE FACTS

Estimates are that about 80,000 women in the United States are diagnosed with gynecologic cancer each year. It affects roughly one in 20 women and is the fourth most common type of cancer in women. Gynecologic cancers are cancers of the female reproductive organs, which include the ovaries, endometrium, uterus, cervix, vagina and vulva.

Risk factors for gynecologic cancer include smoking, aging, family history, human papillomavirus infection (HPV), diethylstilbestrol exposure (DES), estrogen use, HIV/AIDS infection, hypertension, diabetes, infertility and obesity.

KNOW THE SYMPTOMS Many people believe there are no warning signs in the early stages of gynecologic cancer. However, some common symptoms have been identified.

They include:

- Unusual vaginal bleeding or discharge
- A sore in the genital area that does not heal
- Constant or frequent indigestion or chronic abdominal pain or bloating
- Pelvic pain or pressure
- A lump or thickening in the pelvic region

Pay attention to your body, and see your doctor right away if you experience any of these symptoms, says Anissa Mattison, DO, a St. Joseph Mercy Oakland (SJMO) obstetrician/gynecologist (OB/GYN). They may mean something entirely different, but it is best to be proactive about your health and to check out the reasons for the symptoms. When gynecologic cancer is diagnosed early, treatment is

To make an appointment with an SJMO cancer specialist or to schedule a cancer screening, call **800-372-6094**.

SCREENINGS SUCCESSFUL IN FINDING CANCER EARLY



ALAA OWAINATI, MD, PHD

St. Joseph Mercy Oakland (SJMO) truly lives its mission "...to improve the health of our communities..." Nowhere is that more evident than our extensive cancer screening and education programs.

Over the past year, SJMO's cancer program has expanded our outreach education and screening programs for colon, prostate and breast cancer. Some of these screenings have been targeted to specific populations that have a higher incidence of certain types of cancer.

"Cancer screenings play a vital role in detecting cancer early, when the chances for survival and a cure are the greatest," says Alaa Owainati, MD, PhD, SJMO oncologist. "Early detection is considered one of the best weapons available against cancer. Often, by the time a person exhibits symptoms, the cancer has spread, making it harder to cure."

Because we know that screening saves lives, it's important for people to be aware of which screenings they need and when to get them, Dr. Owainati says. For example, both

men and women at average risk of colorectal cancer are encouraged to undergo screening beginning at age 50. Women of average risk of breast cancer or cervical cancer are urged to begin mammograms at age 40 and to get Pap tests by age 21 or as soon as they are sexually active.

Here is a report on SJMO's free cancer screening program results in 2009:

COLORECTAL CANCER SJMO partnered with more than 80 Oakland County churches and physician offices to make free fecal occult colorectal cancer screening kits available during the month of March, which is National Colorectal Cancer Awareness Month.

More than 2,600 kits were distributed to community members, who returned 968 completed screening tests to the hospital for testing, which was a return rate of nearly 35 percent. Seventy returned samples—or 7.2 percent—tested positive for blood in the stool. All were notified and referred for further testing.

Because SJMO wanted not only to test for colorectal cancer but also to provide education about high-risk behaviors and ways to alleviate risks of developing the disease, the

hospital sought and was awarded a grant from the Michigan Public Health Institute. The target population for the grant project was the city of Pontiac. SJMO partnered with four churches, the Pontiac Public Library and the American Cancer Society to provide education to 180 community residents. The project culminated with a healthy recipe contest and the publication of a cookbook.

BREAST CANCER SJMO offered three free screening mammogram clinics during 2009 and screened 76 women. The clinics were targeted at Oakland County residents who had no health insurance. Each attendee received both a digital mammogram and a breast examination by a female breast surgeon. After the first three screenings, one case of breast cancer had been identified and the patient was undergoing treatment.

PROSTATE CANCER Our free September Prostate Cancer Screening Clinic drew 89 men, up more than 50 percent from the previous year. The men all received a prostate-specific antigen blood test and a digital rectal examination performed by an SJMO urologist. Of the 89 men tested, 29 were found to have abnormal results. Appropriate referrals were made for all abnormal cases.

THERE'S HOPE FOR BRITTLE BONES



SHIVAJEE
NALLAMOTHU, DO

Osteoporosis, which means “porous bones,” is a condition in which bones become weak and fragile. People with advanced osteoporosis have such brittle bones that they can fracture from simple, everyday tasks such as cleaning or even coughing!

Osteoporosis most often occurs in older adults—more in women, but not exclusively—as bone mass decreases and bone tissue deteriorates. These deficits lead to an extreme fragility of the bones that may—and often does—lead to fractures from slight impacts, such as those from minor falls.

“The hip, spine and wrist are the most susceptible sites for a fracture,” says Shivajee Nallamothu, DO, a St. Joseph Mercy Oakland (SJMO) orthopedic surgeon. “However, osteoporosis can affect every bone.”

DEVELOPING THE DISEASE From childhood until your mid-30s, you continue to acquire bone mass. Minerals in your bones, such as calcium and phosphorus, determine how strong your bones are. Moreover, the bone mass that you develop and obtain from your mid-20s to your mid-30s acts as your bone bank and determines your risk for developing osteoporosis later.

After your mid-30s, you begin to lose bone mass more quickly than you gain it. Additionally, women experience

a marked decrease in bone loss as estrogen levels drop after menopause. Furthermore, people who did not have a diet rich in vitamin D and calcium, or did not participate in regular exercise, are more likely to develop osteoporosis.

“Unfortunately, there is no apparent symptom of osteoporosis,” Dr. Nallamothu says. “People cannot feel their bones getting weaker and often do not discover that they have the condition until they break a bone. However, the good news is that there are steps that everyone can take to strengthen their bones, regardless of age.”

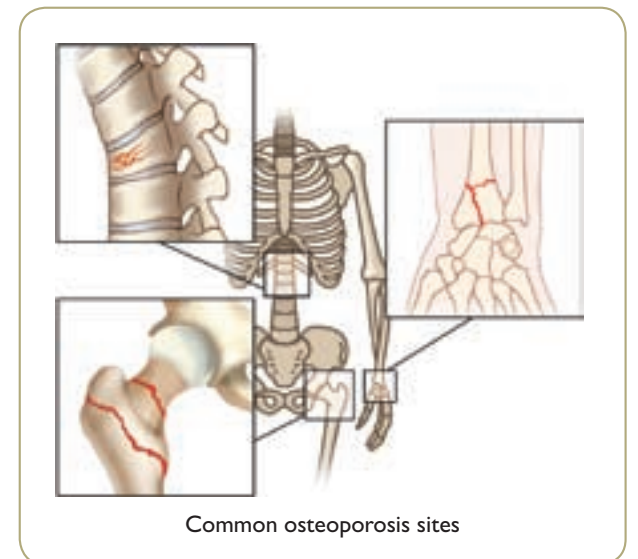
GET STARTED ON PREVENTION It is never too early or late to begin to take care of your bones! Below are steps that you can take to help strengthen your bones:

- Get the daily recommended amounts of calcium and vitamin D. Calcium is essential to creating strong bones. Vitamin D helps your body to absorb and use calcium.
- Make exercise a part of your routine, and be sure to incorporate both weight-bearing and muscle-strengthening exercises. Weight-bearing exercises are those that you do on your feet that work your bones and muscles. Examples include: brisk walking and jogging; aerobics; tennis; and team sports such as soccer, volleyball and basketball. Muscle-strengthening exercises have you stretch, push, pull or lift.
- Avoid smoking and excessive alcohol consumption. Men with a history of alcoholism are most at risk for osteoporosis, as alcohol interferes with the body’s ability to absorb calcium.

● Have a bone density test. A bone density test relies on a type of x-ray called a DXA (dual-energy x-ray absorptiometry) scan, which can detect changes after only a 1 percent loss. According to the National Osteoporosis Foundation, the following people should have a bone density test:

- People over the age of 65
- People with vertebral abnormality
- Postmenopausal women and those who experienced early menopause
- People with type 1 diabetes, kidney disease, liver disease, thyroid disease or a family history of osteoporosis

The test is only prescribed to men on a case-by-case basis because of the low risk rate.



Common osteoporosis sites

SJMO HEMATOLOGY/ONCOLOGY SPECIALISTS

Patricia A. Ball, MD
Hematology/Oncology
● 44038 Woodward Ave.
Suite 1010
Bloomfield Hills
248-858-2271
● 8391 Commerce Rd.
Suite 107
Commerce Township
248-360-8244

Robert E. Bloom, MD
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22301 Foster Winter Dr.
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Southfield
248-552-0620

Anibal Drellichman, MD
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● 31500 Telegraph Rd.
Suite 225
Bingham Farms
248-552-0620
● 47601 Grand River Ave.
Suite 2 South
Novi
● 22301 Foster Winter Dr.
Second Floor
Southfield

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Suite 110
Farmington Hills
248-553-0606
● 6770 Dixie Hwy.
Suite 106
Clarkston
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● 70 Fulton St.
Pontiac
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Lake Orion
248-391-9220



PREVENTION—NOT PANIC—WARDS OFF FLU



SHAMLA KALYAN,
MD

“Don’t panic,” says Shamla Kalyan, MD, SJMO infectious disease specialist. “Caution is the appropriate word.”

Rather than fearing the seasonal and 2009 H1N1 flu, empower yourself with knowledge for how to prevent and treat these viruses.

Below are frequently asked questions regarding both the seasonal flu and the 2009 H1N1 strain. In addition, you can help prevent the spread of the illnesses by staying home from work or school if you have a fever or other symptoms, such as body aches, sore throat, diarrhea or vomiting. You should also be fever-free for 24 hours before returning to work or school.

Q How long can the flu virus live on objects (for example, books and doorknobs)?

A Studies have shown that the flu virus can survive on environmental surfaces and can infect a person for two to eight hours after someone with the virus on their hands touches the surface.

Q What kills the flu virus?

A Common household cleaners, including bleach-based products, hydrogen peroxide, standard disinfectants and alcohol-based products, can kill the flu virus. The products must be used according to their instructions for maximum effectiveness.

Q What if soap and water are not available and all I have are alcohol-based products?

A Studies have shown that alcohol-based hand cleaners are just as effective as soap and water in killing the influenza virus on hands as long as they are rubbed in until dry.

Q What surfaces are most likely to be sources of contamination?

A Surfaces most likely to be sources of contamination are door handles, telephones, computer keyboards, tables and desks. Any hard surface will harbor a germ for up to four hours.

Q How should used tissues and other items be handled to prevent the spread of influenza?

A It is recommended that tissues and other disposable items used by an infected person be thrown into the trash immediately. People should wash their hands with soap and water after touching used tissues.

Q What household cleaning should be done to prevent the spread of influenza?

For more information about
2009 H1N1 or seasonal flu,
visit cdc.gov.



A It is important to keep household and work surfaces (especially bedside tables, surfaces in the bathroom, kitchen counters, phones, keyboards, desktops and toys) clean by wiping them down with a household cleaner.

Q How should linens, eating utensils and dishes used by people infected with influenza be handled?

A Linens (such as bed sheets and towels) should be washed in hot water with household laundry soap and tumbled dry on a hot setting. People doing the laundry of others who are ill should place the linens into a basket to carry and avoid hugging laundry prior to washing it. People should wash their hands with soap and water or alcohol-based hand rub immediately after handling dirty laundry.

Eating utensils should be washed either in a dishwasher or by hand with hot water and soap.

A WORD ABOUT VACCINES “Consider vaccinating all members of your family between the ages of 6 months and 49 years against the H1N1 virus,” Dr. Kalyan says. “If you or a family member are outside of that age range, contact your primary care physician.”

THE WHYS OF A WELL-WOMAN EXAM



ESTHER
ZEKMAN, DO

You’re feeling pretty good. Maybe you can stand to lose a few pounds. You haven’t had any “female” problems. All in all, your health is good. Why, then, would you need a well-woman exam?

Conducted by your obstetrician/gynecologist (OB/GYN), an annual well-woman exam is aimed

at keeping you that way—well and healthy. Using a variety of age-appropriate screenings, your physician can ensure that your general and reproductive health is not at risk.

MOTHERS AND DAUGHTERS Esther S. Zekman, DO, a St. Joseph Mercy Oakland OB/GYN, says it’s never too early to start the conversation.

“Mothers should start to explain the importance of gynecological health to their daughters at an early age,” she says. “Going to the gynecologist is often an anxiety-producing experience, and having this conversation can help alleviate some of this anxiety.”

WHAT HAPPENS DURING AN EXAM Once a patient arrives for her appointment, she should expect her physician to perform a general examination, consisting of

a review of height, weight, body mass index and blood pressure. The physician also will do a breast exam to look for masses or abnormalities and a pelvic exam, which will include a Pap test, used to detect and monitor the growth of any abnormal cells on the cervix.

“Women should have their first Pap test by age 21,” Dr. Zekman says.

Depending on your age, your physician may also do an exam of the uterus and ovaries—to evaluate the size, shape and consistency of the cervix, uterus and ovaries—and a rectal exam.

Your physician also may test cholesterol, blood sugar levels and the size of your waist and do additional screenings for blood, urine and sexually transmitted infections to get a total picture of your current health.

COMMUNICATION IS KEY Dr. Zekman says that it’s important to establish a good relationship with your gynecologist.

“Opening up to your physician allows him or her to provide you with better and more complete care,” she says.

For women considering becoming pregnant, she advises them to see their physician for counseling before conceiving. The physician can start them on a regimen of folic acid and prenatal vitamins as well as counsel them about how to have a healthy pregnancy.

WHICH SCREENINGS DO I NEED?

Obstetrician/gynecologist Esther S. Zekman, DO, recommends women have screenings as follows:

- Pap test to check for precancerous cells of the cervix or cervical cancer beginning at age 21
- Annual clinical breast exam
- Mammogram: Begin screening at ages 35-40, with an annual mammogram after age 40
- Annual pelvic exam (internal and external) and genital exam to detect rashes, bumps or masses
- Annual rectal exam beginning at age 40 to check for masses, colorectal cancer or blood in the stool
- Bone-mineral density screening to test for osteoporosis after menopause and/or if you have certain risk factors
- Annual blood screening



To locate an
OB/GYN near
you, call the
SJMO referral
line at
800-372-6094.

WELCOME, NEW DOCTORS

St. Joseph Mercy Oakland (SJMO) is constantly searching for physicians to bring you the best care. Listed below are some of the recent additions to our medical staff. Please visit our Web site at stjoesoakland.org for the most up-to-date information about SJMO physicians. You also may call our physician referral line toll-free at **800-372-6094**.



Malaz Almsaddi, MD
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Bloomfield Hills
248-812-1920
● 27483 Dequindre
Suite 306
Madison Heights
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Timothy P. Baessler, DPM
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29433 Ryan Rd.
Warren
586-574-0500



Leena M. Bahu, DDS
Dentistry
6765 Orchard Lake Rd.
West Bloomfield
248-851-6166



Anibal Drelichman, MD
Hematology/Oncology
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Bingham Farms
248-552-0620
● 47601 Grand River Ave.
Suite 2 South
Novi
● 22301 Foster Winter Dr.
Second Floor
Southfield



Holly Gilmer, MD
Neurosurgery
● 3577 W. 13 Mile Rd.
Suite 206
Royal Oak
● 29275 Northwestern Hwy.
Suite 100
Southfield
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Jeffrey S. Marshick, DO
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Amy L. Martin, MD
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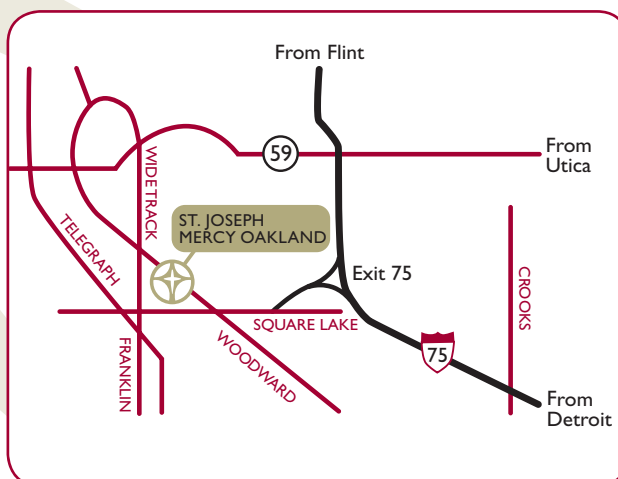
Find a doctor who is right for you. Click on "Find a Physician" at stjoesoakland.org.

NORTHERN OAKLAND COUNTY'S HOSPITAL OF CHOICE.

To learn more about St. Joseph Mercy Oakland, a Thomson Reuters Top 100 Hospital award winner, visit our Web site at stjoesoakland.org or call **800-372-6094**.

OUR MISSION

We serve together in Trinity Health, in the spirit of the Gospel, to heal body, mind and spirit, to improve the health of our communities and to steward the resources entrusted to us.



MICHIGAN MEDICAL REPORT

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