ONE MAN’S GREAT LOSS
IS HIS HUGE GAIN

It's the lighter side of life for Leslie Young, who managed a 165-lb. weight loss with the support of an AHS Adult Bariatric Clinic. Now, along with improved health, Young is enjoying things he couldn’t do before — among them, horseback riding and skydiving.

MANO-A-MANO:
ABOUT MANOPAUSE

Guys: you have no trouble getting your blood pressure or cholesterol checked, but what about checking your T, as in testosterone? Low T is associated with manopause and is linked to lowered libido, energy and muscle mass.

HOSPITAL MARKS
125 YEARS
OF GREAT CARE

Ken Wou photo

Medicine Hat resident Jean Schattle, right, and Judy Winquist, member of the Nurses’ Alumnae and garbed in a vintage nursing uniform, share smiles and memories at Medicine Hat Regional Hospital’s 125th anniversary celebrations. The two were among more than 120 current and former patients, physicians and staff attending the event, including Medicine Hat Mayor Ted Clugston, who has a special connection to the hospital. His father, Dr. Keith Clugston, began practice at the hospital in 1967 and played a pivotal role in the lives of patients right up until his passing in 2001. Join us on a walk through history.

WE’VE EXPERIENCED MANY
CHANGES ... OVER THE
YEARS, BUT WHAT HASN’T
CHANGED IS THE COMMITMENT
DEMONSTRATED BY THE STAFF

Linda Iwasiw, AHS Senior Operating Officer,
Acute Care East South Zone

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Your entire health care team needs a complete medication list: prescribed medications, inhalers, patches, ointments, eye drops, vitamins, supplements — even that ‘special’ herbal tea.
PREVENTION, PROMOTION AND POTTERY

Having a hand in building healthy communities

J

anine Blair’s hands-on approach to life began as a farmer’s daughter in Major, Sask., and continues in her position as Director of Public Health for South Zone. “I was the outdoors type,” says Blair. “I milked the cows and worked in the field. It was expected that you knew what your responsibilities were and you worked hard to get it done.”

Although she decided to become a nurse instead of a farmer, she says her interest in Public Health began early on in her career, while working on the surgical ward at the Holy Family Hospital in Prince Albert, Sask.

“A young boy came in following an ATV rollover,” recalls Blair. “He was under 16 years old and died on the operating table. It shocked me.

“I remember thinking, ‘This is totally preventable and should not have happened.’”

Blair moved to Medicine Hat in 1995 and now, she and her team of 274 public health nurses, health promotion facilitators, community health representatives, home visitation advocates, and support staff work across South Zone helping others prevent illness and injury, promoting health and wellness and protecting the health of the population.

They lead a number of health promotion and injury prevention events, including tobacco reduction/cessation support, bike rodeos, helmet and car seat inspections, and water and farm safety events.

“Prevention can be a tough sell when the emphasis is more toward illness,” says Blair. “We often don’t think about our health until we lose it. Our job is to maintain and improve the health status of the entire population, reduce the incidence of disease and injury and to eliminate inequities in health status among population groups. Investing in the health of the population today will save money tomorrow.”

And that hands-on approach continues into Blair’s spare time, where she says she enjoys her hobby as a skilled potter.

“Pottery is a great way to unwind. You need balance on the pottery wheel to mould and shape the clay just as you need to balance work and leisure to create a healthy life.”

In her spare time, Janice Blair, South Zone’s Director of Public Health, unwinds at the Medicine Hat Cultural Centre moulding clay into works of art on the pottery wheel.

Start your year healthy, and stay that way:

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A career in health care can be extremely rewarding. Visit the AHS website for career details. www.albertahealthservices.ca
Leslie Young has a new lease on life after losing 165 lbs. with help from an AHS Adult Bariatric Specialty Clinic

Leslie Young is half the man he used to be. And he couldn’t be happier.

After losing 165 lbs. with the support of Alberta Health Services (AHS) Adult Bariatric Specialty Clinic in Calgary, Young is embracing adventures he never dreamed possible, including horseback riding, whitewater rafting and skydiving.

“I’m on a better track in my life than I have ever been before,” says Young, who has maintained a healthy weight for more than a year. “I’m just having too much fun not to stay here. I think I want to try ziplining and bobsledding next.”

There are five Adult Bariatric Specialty Clinics across Alberta, located in Medicine Hat, Calgary, Edmonton, Grande Prairie and Red Deer.

Like the six in 10 Canadian adults who are overweight or obese, Young’s weight was preventing him from fully enjoying life. After seeing his doctor for numbness in his leg, the 39-year-old was told he had nerve damage due to his weight, which he had lost 385 lbs.

“My leg felt like it was on fire,” says Young, who was referred to the Adult Bariatric Specialty Clinic in November 2012. "I balked at first. I didn’t think it would work because I’ve lost weight before and I’ve never been able to keep it off.”

But this time, things were different.

The clinic – which offers support from a variety of health care providers, including dietitians, exercise specialists, psychologists and others – gives patients the medical management needed to effectively treat obesity.

"Obesity is a chronic disease," says Wendy Shah, a registered dietitian who worked with Young at the clinic. "We need to treat it that way and that’s where a team of health professionals can really help people be successful.”

Young couldn’t agree more.

“Obesity is a condition. For me, a meal plan is like the instructions on a pill bottle. This program has been my prescription to managing my condition.”

Since his weight loss, Young’s leg pain is completely gone, he has more energy and has felt more productive at work and in life.

Through one-on-one and group education, the Adult Bariatric Specialty Clinic provides counselling for nutrition, physical activity and mental health, teaching tools and techniques like food journaling, meal planning, understanding calorie intake and promoting activity.

In addition to weight management education, the clinic also supports those undergoing bariatric surgery as a treatment for severe obesity.

Young says he will never consider himself cured of obesity; he realizes it will be a lifelong commitment to managing his health.

He says he doesn’t consider himself done with the clinic as he continues to attend monthly support group meetings as often as he can.

“The nicest that I can now go back and help inspire other people in their weight-loss journey.”

A GREAT WEIGHT HAS BEEN LIFTED

Leslie Young, above, has lost 165 lbs. with the help of an AHS Adult Bariatric Specialty Clinic. Inset: A picture of Young when he weighed about 385 lbs.

Leslie Young has a new lease on life after losing 165 lbs. with help from an AHS Adult Bariatric Specialty Clinic

Story by Tara Grindle | Photos by Paul Rotzinger and courtesy Leslie Young
LENDING A HAND IN HAITI

Caring is her work and her life: Alberta Health Services home care manager Laura Bernhart travels to Haiti to help the country’s poorest

Story by Sherri Gallant | Photo courtesy Laura Bernhart

In her work as a home care case manager for Alberta Health Services (AHS), Laura Bernhart has always felt grateful for the care options her clients have access to across the province. But Bernhart, who works in Bow Island, began to appreciate Alberta’s health care system even more after volunteering in Haiti in 2013, where even the most basic of services are lacking.

While she was there, and after returning from the church mission trip, Bernhart, 41, says she was compelled to continue to help. “It was overwhelming,” she recalls. “They don’t have a waste-handling program, and garbage builds up in the streets. There’s a lot of respiratory illness and malaria. There are people lying in the streets.

“The majority of the people in Haiti live in tents. Everything has to be made with rebar and cement because of the earthquakes, and those materials are expensive, so there are half-made houses everywhere. There are no foundations, just dirt floors, and the wind blows right through.”

Bernhart joined forces with Leonard Jean Gilles, a translator who helped the group her church was aligned with in Haiti. Shortly after she met him, Jean Gilles founded Organization Sokey Lespwa (OSL), with a focus on education in Haiti. Back in Alberta, Bernhart developed a sponsorship program and got the ball rolling by persuading friends and family to each commit to $50 US a year, which pays a teacher’s salary and buys basic school supplies.

“Last year, 67 children were sponsored, and I did enough fundraising on my own to sponsor 50 more,” says Bernhart.

This year, two women from the U.S. began signing up sponsors and now 290 children of all ages are going to school.

Bernhart returned to Haiti in June and has plans for another trip this year. “There are some kids going to school now who are 13 and 14 years old and they’re just in Grade 3,” she laments, over the lack of sponsored education.

While Bernhart raises funds for OSL and works toward attaining Canadian charitable status, those on the front-lines in Haiti have been busy, mounting a micro-credit program for women to start small businesses, a goat program, road expansion, cyber café, tree nursery and planting program, adult literacy and more.

Hopes are high to eventually build a medical facility.

“The nearest medical clinic is about a three-hour drive away, and most people have to walk or ride a donkey, which takes days.”

Bernhart says visiting Haiti has had a profound effect on her personal life.

“The people there basically have nothing. Now, whenever I am shopping, before I buy anything I ask myself, ‘Do I really need this, or do I just want it?’ Choices are I just want it, and so I won’t buy it now.”

Bernhart can be reached through email, at Lkembernhart@gmail.com.

THERE’S A LOT OF RESPIRATORY ILLNESS AND MALARIA. THERE ARE PEOPLE LYING IN THE STREETS

– Laura Bernhart, AHS home care case manager, of conditions in Haiti, where she has done volunteer work

VISIT US ONLINE

BECAUSE YOU CARED

Don’t miss this amazing and uplifting video of an Edmonton couple who returns to the Royal Alexandra Hospital to thank a neonatal intensive care nurse who provided them extraordinary support four years ago when their first child was born after only 27 weeks gestation.

This is one of a series of Because You Cared videos showing the gratitude of Albertans to the AHS front-line caregivers who’ve helped them battle adversity in the face of trauma, disease, or chronic conditions. The stories will warm your hearts. Go to http://www.albertahealthservices.ca/10691.asp.

BETTER CHOICES, BETTER HEALTH

Alberta Health Services has launched a free online version of Better Choices, Better Health, a self-management workshop for those living with chronic conditions at https://betterchoicesbetterhealth.ca.

Better Choices, Better Health – Online provides opportunities to those who are not able to attend an in-person workshop due to barriers like rural or remote locations, transportation issues or health conditions.

Similar to in-person classes, Better Choices, Better Health – Online is led by facilitators who also have chronic conditions, covering topics including:

• Solving problems and setting goals.
• Handling pain and fatigue.
• Managing medication.
• Eating healthy and increasing activity.

FACBOOK

STORY OF SURVIVAL

This St. Paul dad overcame cancer and three heart attacks, and thought the worst was over. Then he got influenza. Read his story of survival and why immunization means so much to him and his family: www.albertahealthservices.ca/10684.asp

TWEETER

Follow your zone at AHS_SouthZone:

• Medicine Hat students draw liquor store bags with the message: ‘Don’t drive and drive.’ Go to http://t.co/OSCmySukZA.
• Influenza immunizations are still available. Get yours today: albertahealthservices.ca/influenza #fightflu #fluchamp. Get protected, not infected.

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• Health care locator
• More…

www.albertahealthservices.ca/mobile.asp

Laura Bernhart sits with some of the youngsters she worked with on a mission trip to Haiti.
Menopause is a well-known change that happens to women. It's when a woman's menstrual cycle permanently stops, thereby marking the end of her fertility. Average age of onset is 51, and symptoms include changes in periods, hot flashes and mood swings.

"Manopause" or andropause, on the other hand, is not such an obvious shift for men, although manopause is an increasingly popular term.

"There isn't clear consensus in the medical community whether such a thing occurs," says Dr. David Keegan, associate professor in family medicine at the University of Calgary.

"Menopause is a part of life that women will invariably go through, but is there the same kind of major transition for men? No, I've never seen any clear evidence the same thing happens to men."

Manopause refers to a drop in testosterone levels as a man ages. It's linked to symptoms such as lower levels of energy, muscle mass and sex drive, as well as reduced mental quickness. While testosterone decline does occur as men age, the degree to which this happens and when it happens is unclear.

"Over time, the average man will decrease the amount of sperm he produces, but nevertheless there are 80-year-old men who can still have children," says Keegan.

Middle-aged men who don’t feel quite as strong, virile or sexually interested as they once were may wonder if they’re going through manopause.

But daily lifestyle decisions – how much you sleep and exercise, how stressed you get – also affect testosterone levels.

Symptoms of low testosterone, or low T, can also be linked to health issues that have nothing to do with aging.

Take erectile dysfunction.

"It could be the first indication of some kind of disease," Keegan says. "A good chunk of men with this issue have a significant underlying cause such as diabetes or high cholesterol."

That's different from what the burgeoning low-T market suggests.

Heaps of low-T products make it seem as if popping a pill, taking an injection or slathering on a gel are easy remedies to conditions such as muscle loss and decreased libido.

But "naturally managing the average guy who's feeling a little less frisky than before is far superior to medical methods," affirms Keegan.

"We look at diet, the way someone is sleeping, help them identify issues with their partner, build an achievable model of physical activity; basically show them the holistic way to go. Or there's Option B: switching to massive supplementation of hormones that we don't have any long-term studies on safety or efficacy."

Low T is still a valid concern.

But the key is to rule out other potential factors first, and consider a natural approach before jumping to a hormone boost, which requires continued treatment to maintain desired results.

"The No. 1 therapy is really good exercise," says Keegan. "It has to be five to seven days of exercise to make cardiovascular gains, build muscle and stamina, and natural testosterone starts building."

What it comes down to is that if it’s worth it, you have to work for it. There is no quick fix."

Bottom line?

"Do an honest appraisal of yourself," recommends Keegan.

If you think you might be experiencing manopause, neither the cause nor the treatment is obvious. So talk to your doctor.
The Crowsnest Pass Health Centre emergency department is putting a bright light on eye injuries.

Called a slit lamp, this specialized piece of equipment is a diagnostic tool for examining parts of the eye using an upright microscope and a concentrated beam of light. It’s used in both emergency and non-emergency situations, primarily to view the cornea.

Dr. Colin Muscat, a family physician at the health centre, explains the benefits of the lamp.

“We use the lamp to examine a variety of conditions and injuries, such as foreign bodies being lodged in the eye or scratches to the cornea.”

The slit lamp has been in the emergency department since August 2014 and features a number of upgrades proving beneficial in treating eye injuries and conditions.

“Slit lamps are common tools in emergency departments and our old one just didn’t have the capacity to treat patients effectively anymore,” Muscat says, estimating the lamp helps treat more than 100 patients a year. “The new lamp has increased magnification power, and more options for size, width and concentration of the beam of light.”

Funded through the Crowsnest Pass Health Foundation, the lamp cost $15,000. “With the type of industry we have in our area we see a lot of eye injuries due to accidents from welding, grinding, woodworking and chemical burns,” says Muscat. “The precision of the new lamp allows us to see the injury more clearly than with the old lamp, helping us diagnose and treat our patients more efficiently.”

Becky Rinaldi, Crowsnest Pass Health Foundation, is pleased with the community support and donations.

“We have a great community that always steps up to the plate and looks after community health care needs,” Rinaldi says. “Nothing is too big or small for our community to support.”

For more information, visit www.albertahealthservices.ca/give.

“THE PRECISION OF THE NEW LAMP ALLOWS US TO SEE THE INJURY MORE CLEARLY ... HELPING US ... TREAT OUR PATIENTS MORE EFFICIENTLY”

– Dr. Colin Muscat
TRAINING’S STARRING ROLE

Alzheimer's disease is a complex, progressive brain disease that affects memory, thinking, and behavior. Home care staff must be able to recognize and treat symptoms of Alzheimer’s disease effectively.

Home care staff must be able to recognize anaphylactic reactions when they provide medications to patients in their homes as people may not always be aware they are allergic to a particular medication.

The training involves use of STARS mobile patient simulators that speak and breathe, blink and have reactive pupils; a heartbeat and pulse; and accurately mirror human responses to such procedures as CPR, intravenous medication, intubation, ventilation and catheterization.

For more information, visit www.albertahealthservices.ca options.

SOUTH ZONE

South Zone executive leadership team:
Dr. Vanessa Maclean
Sean Chilton

AHS embraces local leadership and zone-based decision-making. Right here in southern Alberta, front-line physicians and other clinical leaders at every level of the organization have joint planning and decision-making authority with operational leaders, meaning faster decision-making closer to where care is provided.

EDMONTON ZONE

Population: 1,186,121
• Life expectancy: 81.8 years • Hospitals: 13

COMMUNITIES:
• Beaumont
• Devon
• Edmonton
• Edminton
• Fort Saskatchewan

CALGARY ZONE

Population: 1,408,606
• Life expectancy: 82.5 years • Hospitals: 14

COMMUNITIES:
• Airdrie
• Buffalo
• Black Diamond
• Calgary
• Canmore

SOUTH ZONE

Population: 289,661
• Life expectancy: 80.3 years • Hospitals: 14

COMMUNITIES:
• Bassano
• Blairmore
• Binbrook Island
• Brooks
• Canmore
• Cold Lake

HERE’S HOW TO REACH US

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To see South Zone News online, please visit www.albertahealthservices.ca/5827.asp

Zone News – South Zone is published monthly by Alberta Health Services to inform Albertans of the programs and services available to them, and of the work being done to improve the health care system in their communities.

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Dr. Vanessa Maclean
Sean Chilton

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Emergency is here for you if you need it. Use it wisely.

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Be sure to visit our website for health advisories around the province.