

Look North

A community and wellness publication from Glen Cove Hospital

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Glen Cove Hospital
Northwell Health®

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Is your body ready for winter?

Ride out cold temps with stay-healthy tips

It's wise to winterize your home and car to withstand low temps, chill winds, snow and ice. But what about winterizing your body? A few smart prep tips can help you stay safe and healthy.

Protect against colds — and extreme cold

Most adults get the common cold two or three times during each cold season (roughly September to April), according to the U.S. Centers for Disease Control and Prevention (CDC). Children succumb even more often, and frequently “share” their germs with the grownups around them.

Frostbite certainly isn't contagious, but it can cause a lasting injury when it goes unchecked. It most often affects the nose, ears, cheeks, chin, fingers or toes.

Winterizing tips: Limit the spread of rhinovirus, the cause of the common cold, by washing your hands often. Avoid touching your eyes, nose and mouth, and steer clear of people with colds. Boost your immune system by getting at least eight hours of sleep each night, eating immune-boosting foods like dark leafy greens, cutting down on sugar and processed foods, reducing stress and exercising regularly.

Dress to prevent frostbite when you're outside. Layer your clothing, cover your head, ears and hands and top everything off with a waterproof outer layer.

Signs of frostbite include itching, stinging or hardening of skin that's exposed to cold air, or even skin turning blue. If you experience symptoms, move to a warm place indoors as soon as possible. In the meantime, warm up with body heat if possible — such as putting frostbitten fingers in your armpits.

Don't use hot water to warm up, because it could damage numb skin. In fact, the CDC notes that you can injure yourself with old-school “remedies.” So don't rub or massage a frostbitten area with snow or anything else. Don't use a heating pad directly on the skin, and don't get right up close to a heat lamp, a stove, fireplace or radiator. If you

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continue to experience numbness, pain, blisters or changes in skin color, go to an emergency department.

Practice safe shoveling

Shoveling snow poses risks beyond a sore back. There is a significant connection between heavy snowfall and the incidence of heart attacks, according to a recent study published in the *Canadian Medical Association Journal*. So respect your limits, take your time and don't be shy about asking family and friends for help. Some communities offer assistance with snow removal to seniors. Senior residents of New York City can call 311 to make a request. If you live outside of New York, check with your local public works department or faith community to see if there is assistance available near you.

Winterizing tips: Before you hit the pavement, first do some simple stretching indoors for about 10 minutes. Avoid eating a big meal or drinking alcohol, advises the American Heart Association (AHA). To protect your back, lift with your legs and don't twist at the waist.

The AHA advises against snow shoveling if you have a heart condition or chronic pain or are pregnant.

Shield your skin

Cold weather and indoor heating cause or worsen skin dryness. They can also exacerbate conditions such as eczema or psoriasis.

Winterizing tips: Use a moisturizing cream or lotion plus a gentle, moisturizing cleanser.

Building strength and endurance at Glen Cove Hospital

Rehabilitation program prepares patient to return home after long hospital stay



Matthew Malley spent 473 days at North Shore University Hospital (NSUH) for seizures, brain surgery and repeated bouts of pneumonia. After a lengthy and fearless battle, this husband and father of two was ready for the inpatient physical rehabilitation program at Glen Cove Hospital that would finally allow him to return home.

In 2016, Mr. Malley became ill with flu-like symptoms, experienced a seizure and went into a coma. After a lengthy recovery and much time spent in the hospital, he entered rehabilitation with a number of challenges, including severe frozen shoulders; limited range of motion; loss of balance; problems with speech and swallowing; and decreased lung function requiring him to use an oxygen ventilator.

Physical therapy with Shaina Flanzraich, PT, in Glen Cove's acute

inpatient rehabilitation program helped him regain his stamina and balance and improved his breathing; he no longer requires supplemental oxygen. In addition, occupational therapy helped him to better perform daily activities like showering and dressing. He also received therapy for his speech and swallowing difficulties.

During his six-week stay in acute inpatient rehabilitation — he left in March 2018 — Mr. Malley was able to spend quality time with his family. In fact, his kids sometimes participated in the physical and occupational therapy sessions. The family also frequently had meals together and celebrated Valentine's Day at Glen Cove Hospital. Even Murphy, the family dog, would visit him on occasion.

"It meant so much to me to be able to involve Mr. Malley's family in our therapy sessions," said Ms. Flanzraich. "He lit up around them. It was an

honor to help him return home to his family."

Today, Mr. Malley attends outpatient physical and occupational therapy with the goal of walking farther distances and for longer periods of time. Since returning home, he's also met one of his personal goals — to attend his daughter's First Communion. He was able to walk up to the altar, and instead of holding onto a walker, he was holding his wife's hand.

For more information about Glen Cove Hospital's acute inpatient rehabilitation, call (516) 674-7692.



Best breastfeeding practices Glen Cove Family Medicine is Nassau's first Breastfeeding Friendly Practice

The Family Medicine Ambulatory Care Center at Glen Cove Hospital is the first practice in Nassau County to receive the New York State Department of Health Breastfeeding Friendly Practice designation.

The center's certified breastfeeding counselor, Mary Goussis, RN, CBC, advises mothers about breastfeeding including best practices. The family medicine practice has also created policies and procedures to help more mothers exclusively breastfeed.

"When a mother comes for her initial prenatal exam, she is given literature

about breastfeeding," said Ms. Goussis. "Our staff was also trained to better understand the benefits of breastfeeding, which is encouraged exclusively for at least six months, if possible, to provide the most benefits to a baby."

Breastfeeding has been shown to lower a baby's risk of conditions such as obesity, ear infections and asthma. It also benefits mothers by decreasing their risk of Type 2 diabetes as well as some forms of breast and ovarian cancer.

Glen Cove's designation was achieved with the support of the Breastfeeding

Resiliency, Empowerment, and Engagement (BFREE) team at Cohen Children's Medical Center (CCMC) in New Hyde Park.

For more information about the Glen Cove Family Medicine Ambulatory Care Center, call (516) 674-7631. To learn more about best practices for breastfeeding, visit bit.ly/friendly-place.

Fighting fatigue

Sometimes tiredness isn't from too little sleep. Here are some surprising causes of fatigue — and how to get more energy

If you find yourself always tired, dragging in the middle of the day, looking for a caffeine boost at 2pm, it may be cause for concern. It's normal to be tired after a late night, but always feeling tired is not. Rather than making another coffee run, consider these possible causes of fatigue.

Undiagnosed illness. A discussion with your doctor may uncover symptoms of fatigue-triggering physical conditions such as sleep apnea, thyroid disease or diabetes. Exhaustion can also be a sign of depression, so talk with your primary care physician about a depression screening.

A sedentary lifestyle. Too much rest results in deconditioning. That means your muscles become weaker and your metabolism becomes less effective, so your body is not as efficient at getting oxygen to your tissues. Recent studies have shown a positive influence from exercise therapy for people with chronic fatigue. A daily brisk walk at lunch can make a big difference. Roughly 20 to 30 minutes of moderate activity a day can help curb insomnia, boost feel-good endorphins and improve cognitive function.

Dehydration. If you're draggy and foggy, thirst may be to blame. Studies show that even mild dehydration can

reduce mental clarity and cause fatigue, which may be related to reduced blood volume. Men should drink about 15 cups and women 11 cups of water (or other no-calorie/low-calorie fluid) per day, according to Harvard's T. H. Chan School of Public Health. Fresh fruits and vegetables are also a good way to hydrate.

The snack cycle. Tired bodies crave carbs that promise quick energy. But processed/packaged snacks are likely to cause a crash when your body quickly processes the sugar and your glucose levels dip. If you're the snacking type, pack small, nutritious snacks — raw carrots, almonds, low-fat cheese — that can feed the urge and prevent a trip to the vending machine.

Doing too much. A packed calendar can poop you out, even when it's peppered with fun stuff. Take time to reset with proven relaxers such as reading, meditating, deep breathing and yoga.

Are you SAD?

If you feel noticeably more fatigued as winter edges closer, the culprit may be seasonal affective disorder (SAD). SAD is a form of depression that's related to months of weaker sunlight and shorter, colder days.

SAD can cause fatigue as well as depressed feelings, loss of interest in activities and difficulty concentrating. You may find yourself oversleeping and gaining weight.

If this sounds like you, visit your doctor. Treatment can include sitting in front of a special lamp, which is believed to boost serotonin levels in the brain, improving mood. Some doctors recommend vitamin D supplements and others prescribe antidepressants to relieve symptoms of SAD.

You can help relieve symptoms of SAD by exercising for at least 30 minutes, three days a week, and going outside for short periods when the sun is shining.

▶ Sleep more soundly

Visit bit.ly/sleep-doc to find a Northwell Health sleep specialist.

Fast forward

Can regular fasting really be *good* for you?

People have fasted for millennia, but intermittent fasting gives the practice a new spin

Unlike traditional fasts — not eating for extended periods — intermittent fasting (IF) limits food intake within shorter blocks of time.

According to a 2015 review of 40 clinical trials published in *The Journal of Molecular and Cellular Endocrinology*, some individuals have found IF effective for weight loss. IF increases the body's response to insulin, a hormone that regulates blood sugar, according to a recent study published in *Cell Metabolism*. A pilot study in *The Journal of Immunology* indicated that intermittent fasting can alleviate mild asthma symptoms in adults.

IF works with healthy eating plans and is adaptable to vegetarian, vegan or gluten-free menus. Proponents like that flexibility.

The safest format restricts all food intake to within a daily window of eight, six or four hours. You don't eat for the balance of the day, but can still drink calorie-free beverages. Other IF formats restrict calories severely for two or three nonconsecutive days. Though the early research is promising, we don't recommend jumping into such a drastic change in diet without consulting a registered dietitian, nutritionist or physician.

Many intermittent fasters avoid refined carbs and alcohol. If you try IF, be sure to drink water

and other calorie-free beverages to help reduce hunger levels. *The American Journal of Clinical Nutrition* published data suggesting that increased water consumption helped people lose weight.

More studies need to be completed to determine IF's effectiveness in the long term. One ongoing clinical trial is studying how IF calorie restriction affects insulin-resistant women between 55 and 70 years old. Furthermore, researchers at Intermountain Medical Center in Utah have been studying how IF may reduce the risk of developing Type 2 diabetes and heart disease, and help reduce cholesterol levels in people who are prediabetic.

IF is not recommended for pregnant women, children, teens, seniors or those with a history of eating disorders or Type 1 diabetes. Please check with your doctor before starting intermittent fasting or any other new eating plan.

Find out if intermittent fasting is right for you. Search for "registered dietitian" on bit.ly/my-pcp.



Expanding rehabilitative possibilities Glen Cove Hospital's G-EO System

A new and innovative gait robot, the G-EO System (Reha Technology), is helping patients at Glen Cove Hospital get moving again.

“The G-EO System is unlike any other gait robot out there,” said Carey Otterstedt, OTR/L, CBIST, administrative director of rehabilitation services at Glen Cove Hospital.

Other units consist of a treadmill and require patients to be placed in an exoskeleton, “like a Transformer,” she explained. In contrast, the G-EO places patients in a harness supported from above, while they move on what is best described as an elliptical trainer you find at the gym, said Ms. Otterstedt. “With

the elliptical format, patients can move as if they are ascending or descending stairs, which you can't do with any other system.”

Physical therapists typically use the G-EO with stroke patients or those with traumatic brain injury, Parkinson's, multiple sclerosis, hydrocephalus, cardiovascular disease or orthopedic injury.

The system helps these individuals stand, bear weight, build muscle and improve their range of motion. The G-EO's computer software can also improve mobility by detecting when patients haven't completed a step cycle. It “fills in the blanks for them,” said Ms. Otterstedt.

The physical therapist's role is to modify G-EO treatment sessions. “We get to assess patients and make real-time changes to their intervention,” said John Santoro, a Glen Cove staff physical therapist.

Notably, the machine enables patients to take 800 steps in 30 minutes. Company research indicates that the 800-step threshold is when the brain starts to remember, helping patients recover from injury, said Ms. Otterstedt.

For more information about Glen Cove Hospital's rehabilitative services or the G-EO System, please call (516) 674-7692.



Detecting colorectal cancer Choose the right screening option for you

The third most common cancer diagnosed for both men and women in the United States is one few people want to discuss, and even fewer want to be tested for. According to the American Cancer Society, there have been 97,000 new cases of colon cancer and 43,000 cases of rectal cancer in 2018 alone.

The good news: Through regular checkups, not only can this cancer be detected in early, treatable stages, but it can actually be prevented. Most colorectal cancers begin as polyps, or growths in the lining of your colon and large intestine. Often benign or premalignant, polyps can be

removed before they turn into cancer. The U.S. Preventive Services Task Force (USPSTF) advises people between ages 50-75 to have regular colon cancer screening.

The risk is real, as the numbers attest, so people who fit the criteria – especially those with a family history of the disease – should not have any apprehension about being examined. There are a few options for colorectal cancer screening, including stool-based tests. This diagnostic tool is a less invasive test that checks for signs of cancer. Stool screening options include getting a fecal immunochemical test (FIT) each year (which is recommended by the USPSTF).

Other options include visual exams of the colon and rectum via a scope to look for any abnormalities. These tests include colonoscopies every 10 years, which is the gold standard for screening and the test recommended for those at higher-than-average risk. CT colonography every five years and flexible sigmoidoscopy (FSIG) every five years are other options but not as reliable as the colonoscopy. Because there are multiple options, consult with your doctor to choose what screening method is best for you.

The Centers for Disease Control and Prevention (CDC) recommend that people who have a family history of colorectal polyps or colorectal cancer, inflammatory bowel disease such as Crohn's disease or ulcerative colitis or a genetic syndrome such as familial adenomatous polyposis (FAP) or hereditary nonpolyposis colorectal cancer (Lynch syndrome) be screened sooner than age 45, preferably at age 40.

Glen Cove Hospital offers many of these colorectal screening methods to provide patients with a comprehensive colorectal cancer screening and treatment program.

Get in touch with your doctor and pick a screening plan that works best for you.

— Barbara Keber, MD, chair of family medicine at Glen Cove Hospital and assistant professor at the Zucker School of Medicine at Hofstra/Northwell

To learn more about our endoscopic and colonoscopy services or to schedule an appointment, call the Division of Gastroenterology at Glen Cove Hospital at (516) 674-7300.

Good to the bone

You can slow down — and even reverse — bone loss as time passes

Bones are your hardest body part, but over your lifetime they're continually breaking down and rebuilding themselves.

Loss of bone density may accelerate as time passes, but you can take steps in your 30s, 40s, 50s and beyond to help fortify skeletal strength and prevent the worst effects of bone loss.

It helps to think of bone loss and rebuilding as a cycle. In youth, you build bone mass faster than you break it down. Bone loss occurs when bone-building mode is slower than break-down mode. This may lead to osteopenia or osteoporosis — low bone density and bone weakness. Both conditions increase your risk of falls and fractures. According to the National Osteoporosis Foundation, one in two women and up to one in four men will break a bone in their lifetime due to osteoporosis.

Women's bone mass peaks around age 30. Bone loss begins gradually after that and speeds up after menopause. Men typically achieve greater peak bone mass, but they lose bone mass over time, too.

Factors that increase your risk of osteopenia or osteoporosis:

- Menopause
- Family history of osteoporosis
- Small stature and thin frame
- Caucasian or Asian ethnicity
- Smoking
- Overactive thyroid
- Excessive alcohol consumption
- Lack of exercise, especially strength training
- Low calcium and vitamin D intake
- Certain medications such as steroids and antacids
- Past cancer treatment such as chemotherapy or radiation



Dietary musts for strong bones

You can prevent or reverse bone loss with a diet that's rich in nutrients and minerals that are key to building and maintaining bone: calcium, vitamin D and phosphorus.

Calcium is constantly removed and replaced through a bone "remodeling" process, but it isn't made by the body. Good dietary sources of calcium include dark leafy greens such as collard greens and kale, dairy products including milk, cheese and yogurt and fish, especially sardines and salmon. In addition, many foods are fortified with additional calcium. Women over 50 and all adults over 70 should ingest 1,200 mg a day of calcium. If choosing supplements to augment your dietary calcium, the National Institutes of Health recommends 1,000 mg daily for most adults.

Vitamin D works with calcium to help build and maintain strong bones. There is very little vitamin D in food, but some good natural sources are cod liver oil, salmon and tuna, fortified milk, egg yolks and liver. Vitamin D is known as the sunshine vitamin because our bodies can synthesize the vitamin with exposure to sunlight. It doesn't take much — studies suggest that 30 minutes of midday sun exposure outside on your arms and face twice a week can maintain healthy vitamin D levels. While experts normally suggest wearing sunblock in direct sun, it actually inhibits the process. So use your judgment — enjoy the sunshine in short bursts, and if you're especially fair-skinned, consider supplements. As with calcium, you can goose your vitamin D intake with a supplement; the NIH recommends 600 IU (international units) daily.

Phosphorus helps to maximize calcium's ability to strengthen bones. Find it in protein-rich foods such as tuna, tofu, milk, chicken, lentils, pumpkin seeds and quinoa. Adults should get 700 mg of phosphorus daily, which is easy to accomplish with a balanced diet.

Workouts that build bones

Weight-bearing exercise, which is any activity that makes you work against gravity, builds and maintains bone density. Enjoy high-impact dancing, jogging, running or tennis. If you prefer low-impact workouts, try walking (outside or on a treadmill), hiking or elliptical or stair-climbing gym equipment. Resistance training with free weights, machines or a resistance band also builds bone, particularly in your upper body and spine.

Performing at least 30 minutes of physical activity most days of the week is good not only for your bones, but also for your overall health. Be sure to consult a physician before starting any exercise program.



Good health habits

You can help reduce your risk for developing osteoporosis by eliminating unhealthy habits, including smoking, which has been associated with bone loss. In fact, studies have shown that smoking increases the risk for fracture. Similarly, chronic, heavy alcohol intake may also increase the risk for developing osteoporosis. Consult your physician for help in quitting smoking and reducing or eliminating your alcohol intake.

Bone density testing

More than 53 million people in the U.S. are living with osteoporosis or are at high risk, according to the National Institutes of Health's

Osteoporosis and Related Bone Diseases National Resource Center. Sometimes you don't have symptoms until you break a bone. If you think you're at risk, ask your doctor if you should have a bone densitometry test, which is a low-dose X-ray that measures the density of bone. This painless scan takes 10 to 20 minutes to perform.



If you have questions about your bone health, we can help. Find a primary care physician with Northwell Health Physician Partners. Visit bit.ly/my-pcp.



Healthy recipes for family gatherings

You'll feel good about serving these appealing yet nutritious dishes

You can enjoy yourself during the holidays without putting on extra pounds. Watch your portions and follow a few simple strategies provided by the Academy of Nutrition and Dietetics:

1. Don't skip meals. You may believe that skipping a meal means you'll take in fewer calories for the day. But it actually makes you hungrier and leads to overeating. It's wiser to eat moderate portions at all your meals.

2. Add fiber. Foods that are high in fiber are high in volume, yet lower in calories. Fiber-rich foods like fruits, vegetables and whole grains can help satisfy your hunger.

3. Eat moderate portions. It's easy to lose track of the calories you're consuming when you're presented with large platters of food. Be sure to eat in moderation so you don't blow your caloric budget. Try using a smaller plate.

4. Set priorities. Get plenty of lower-calorie foods, like salad or vegetables, before you dive into the entree and sides. This can keep you from binging on less healthy options at the dinner table.

5. Get moving. Work off some calories with an after-dinner walk or a game of catch with family and friends.

6. Serve healthy meals. If you're cooking this year, opt for some nutritious recipes like those you see here.

Hot spiced apple cider

A festive scent, too

Makes 8 servings.

Per serving: 120 calories, 0 g total fat (0 g saturated fat), 30 g carbohydrate, 0 g protein, 0 g fiber, 8 mg sodium.

Ingredients

- 8 cups fresh sweet apple cider
- 8 t grated fresh ginger
- 8 t grated fresh turmeric
- 1 medium lemon peel, pith (white part of peel) included

Directions

In a small saucepan, combine cider, ginger, turmeric and lemon peel. Over medium-high heat, heat until a ring of bubbles appears around edge of pan, 3 minutes.

Cover pan and set aside to steep for 5 minutes.

Pour hot spiced cider through fine tea strainer into mugs. Serve immediately.

Herb-roasted turkey breast with vegetables

Serve up to 10 guests with this delicious alternative to a whole turkey

Makes 10 servings.

Per serving: 380 calories, 13 g total fat (3.5 g saturated fat), 19g carbohydrate, 43g protein, 5 g fiber, 390 mg sodium.

Prep time: 20 minutes

Cook time: 2 hours

Ingredients

- 2 (2.5 lbs each) bone-in, skin-on turkey breasts (1 whole turkey breast split in half)
- 2 T olive or canola oil
- 4 sprigs fresh rosemary or 1.5 t dried rosemary
- 3 sprigs fresh sage or 1 t dried sage
- 5 sprigs fresh oregano or 1 t dried oregano
- 4 cloves garlic or 1 ½ T minced garlic
- 1 t salt
- ½ t black pepper
- 6 shallots peeled and halved length-wise
- 1 cup low-sodium chicken broth
- 2 large sweet potatoes, scrubbed and chopped into 1-inch cubes
- 1 ½ lbs Brussels sprouts, halved
- 1 lb whole small carrots, tops removed and sliced in half length-wise

Directions

Preheat oven to 425 degrees F. Add oil, rosemary, sage, oregano, garlic, salt and pepper to a small food processor (or blender). Pulse until finely chopped.

Gently pull skin back from turkey-breast halves. Rub half of the oil-herb mixture all over turkey breasts, both under the skin and then on top.

Arrange 6 shallot halves on each of two separate large, deep baking pans. Set turkey breasts on top of shallots and add ½ cup chicken broth to each pan. Roast for 60 minutes. While the turkey is roasting, toss the sweet potatoes, Brussels sprouts and carrots with remaining oil-herb mixture in a large bowl.

Remove turkey from oven and transfer turkey and shallots to cutting board. Carefully drain the broth (and save for gravy, if desired). Spread the sweet potatoes, Brussels sprouts and carrots on baking pans in an even layer. Place turkey and shallots on top of vegetables and roast until turkey registers 165 degrees F on instant-read thermometer and vegetables are golden brown, about 60 to 75 minutes more (if skin or vegetables are starting to burn, lightly tent the turkey in foil).

Transfer turkey to clean cutting board and let rest at least 10 minutes before slicing. Serve with roasted vegetables.

Beet, carrot and apple salad

A colorful, easy, affordable starter

Makes 4 servings.

Per serving: 112 calories, 8 g total fat (<1g saturated fat), 11 g carbohydrate, 2 g protein, 2 g fiber, 330 mg sodium.

Ingredients

- 1 medium beet (or ¼ cup preshredded beets)
- 2 medium carrots (or ¼ cup preshredded carrots)
- 1 large Granny Smith apple, peeled
- ¼ cup walnut halves, chopped
- 3 T chopped flat-leaf parsley or dill or combination
- 1 T fresh lemon juice
- ½ t salt
- Freshly ground black pepper, to taste
- 1 T extra virgin olive oil

Directions

Place each hand in a plastic sandwich bag to avoid staining your hands while you prep the beet. Peel beet using a swivel-blade vegetable peeler. Using the coarse side of a box grater, shred the beet to ¼ cup. Save any remaining beet for another use. Shred carrots and apple. Place shredded beets, carrots, and apple in a mixing bowl and mix to combine. Add walnuts and green herbs and set bowl aside.

For dressing, whisk lemon juice and salt in a small bowl until the salt dissolves. Add 3 to 4 grinds of pepper. Whisk in the olive oil. Pour the dressing over the salad and mix well. Serve the salad within one hour.

Find more festive, healthy recipes with easy-to-find ingredients and simple directions at bit.ly/festive-flavor.

Glen Cove Hospital support groups

Arthritis Education and Exercise Class

Every Thursday.
All meetings held in 1 South Dining Room, 10:30am – 11:30am.
For more information, call Laura Marrone, (516) 674-7696.

Brain Injury Support Group

Every last Wednesday of the month.
4pm – 5pm.
For more information, call Dr. Vazquez-Casals, (516) 674-1739.

Bereavement Support Group

Every first Tuesday of the month.
All meetings held in the Oak Room, 4pm – 5pm.
For more information, call Elizabeth Kruppenacker, (516) 812-4777.

Cancer Support Group

Every first Thursday of the month.
All meetings held in the Oak Room, 4pm – 5pm.
For more information, call Elizabeth Kruppenacker, (516) 812-4777.

Caregiver Support Group

Every third Wednesday of the month.
Meetings held in St. Andrew's Conference Room, 1pm – 2:30pm.
For more information, call Kettly Meekins, (516) 674-7435.

Diabetes Club

Every third Wednesday of the month.
Meetings held in the Maxwell Board Room, 12pm – 1pm.
For more information, call Chris Reynolds, (516) 674-7907.

Also every first Tuesday evening of the month.
Meetings held in the Oak Room, 7pm – 8pm.
For more information, call Mary Muscarello, (516) 674-7324.

Healing Circle

Every second Thursday of the month.
Meetings held in the Maxwell Board Room, 4pm – 5pm.
For more information, call Elizabeth Kruppenacker, (516) 812-4777.

Lung Club Group

Every third Thursday of the month.
Meetings held in the Maxwell Board Room, 2pm – 3pm.
For more information, call Thomas P. Howard, Jr., (516) 674-7745.

Please call your support group contact or Glen Cove Hospital's main number, (516) 674-7300, during inclement weather to see if your support group is canceled. If the meeting location isn't indicated, please call the group contact or for more information, please visit northwell.edu.

Please call Elizabeth Kruppenacker at (516) 812-4777 if you would like to attend a support group.



Family medicine is expanding thanks to ongoing donations

Meeting the health needs of patients throughout their lifetimes

Family medicine doctors will be better able to provide patients with the care they need because of generous donations from the community. These funds are allowing Glen Cove Hospital to renovate much needed space on the third floor.

"We like to say this specialty is so important because we care for people from womb to tomb," said Barbara A. Keber, MD, a family medicine physician. This means doctors offer prenatal and pediatric care as well as comprehensive health care for adults throughout their lifetimes.

Moreover, Glen Cove family medicine physicians believe in a patient-centered, team-based approach. This means physician faculty and residents collaborate with social workers, nurse practitioners and clerical staff to provide the best possible medical care.

Specialists in podiatry, cardiology, nephrology and nonsurgical urology, among others, may also be part of the healthcare team. However, this collaboration requires space, and prior family medicine facilities did not offer enough.

Now, after two years of fundraising, family medicine at Glen Cove is renovating a larger area on the third floor of the hospital. Improvements include:

- Additional exam rooms so providers can see more patients
- Accessibility for patients from an elevator in the lobby
- Meeting areas so teams of providers can better coordinate patient-centered care
- Space for shared patient education appointments

- Procedure rooms so family medicine providers can perform more dermatologic procedures, including mole and wart removal, and gynecologic procedures such as intrauterine device placement and endometrial biopsies

- Office space that allows faculty and residents to work side by side, improving communication and patient care

Family medicine providers hope future donations will help them acquire more laboratory equipment so they can offer on-site flu swabs, strep tests and A1C testing for diabetes, among other services.

If you're interested in contributing to family medicine at Glen Cove, please contact Nora Perry, vice president of development at the Northwell Health Foundation, at (631) 968-3478 or nperry@northwell.edu.

Look North

Michael Dowling
President and CEO,
Northwell Health

Susan Kwiatek, DNP
Executive Director,
Glen Cove Hospital

Terry Lynam
Senior VP and
Chief Public Relations Officer,
Northwell Health

Maria Conforti
Director, Editorial Services and
Executive Communications,
Northwell PR

Alexandra Zendrian
Regional Public Relations
Director and Editor

101 St. Andrew's Lane,
Glen Cove, NY 11542
(516) 674-7300
www.northwell.edu

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Step up to prevent **substance misuse**



If you know someone who has a substance misuse problem, you can make a difference with the right tools and information.

First, it's important to understand that having a drug or alcohol problem is not a failure of willpower or a sign of personal weakness. Rather, it's a chronic and complex condition that affects brain function and makes it harder to quit and to "stay quit."

Here's how you can spot danger signs and learn to intervene promptly and empathetically.

Physical signs

Watch for bloodshot eyes, coordination problems, large or small pupils, slurred speech and sudden, unexplained weight changes.

Behavioral signs

People with substance misuse problems tend to have relationship issues and difficulties handling daily responsibilities. Note changes in performance at work or school, abrupt changes in energy (too much or too little), shifts in sleeping and

eating patterns, withdrawal from family and friends and a sudden lack of care about personal hygiene.

Emotional signs

Substance misuse and addiction can affect mood and personality. Look for unusual mood swings, dramatic outbursts, irritability, fatigue, nervousness, anger, sadness or a lack of motivation.

If a loved one has a substance use problem

1. If you see some of these signs and are concerned, confide in a trusted family member or friend.
2. If they agree there's a problem, contact a mental health expert or social worker, physician or substance abuse professional for guidance. Contact the Substance Abuse and Mental Health Services Administration (SAMHSA) National Helpline at (800) 662-HELP.
3. With an expert's guidance, calmly and empathetically tell the person (when sober) how you and other loved ones

are affected by his or her unhealthy choices.

4. Provide suggestions for getting help.
5. If your loved one resists treatment or is not ready to admit to a problem, it isn't your fault. You may want to consider joining a support group for families of people with substance use issues. Find out more at Al-Anon Family Groups (al-anon.org) or Nar-Anon Family Groups (nar-anon.org/naranon).

We ask everyone

Northwell Health clinicians screen all patients for potential risk of substance misuse. If needed, we make referrals for treatment. Called SBIRT (Screening, Brief Intervention and Referral to Treatment), this initiative receives grant support from SAMHSA, the New York State Office of Alcoholism and Substance Abuse Services and the Center for Addiction and Substance Abuse. Learn more at samhsa.gov/sbirt.