

Healthy Lifestyles

Five-star health and wellness news from LeConte Medical Center | 865.453.9355 | www.lecontemedicalcenter.org

Worth the Time Women Find Specialized Care with an OB/GYN

It's just one more thing to put on the calendar. It's just one more thing you don't have time for. It's just one more thing forcing you to rearrange your day, and burn more gas. Why should you bother?

There's no doubt about it. Making time for a yearly visit with an OB/GYN (obstetrician/gynecologist) can be an inconvenience, but LeConte Medical Center OB/GYN Laura Schnegg, MD, says it's most definitely worth the trouble.

A visit to her office can help a woman understand and navigate the many complex phases of a lifetime. It's also valuable for helping a woman maintain general reproductive health. For example, during an annual exam, the OB/GYN can administer a Pap test (also called a Pap smear), which can save trouble down the road, and may even save a woman's life.

"The incidence of cervical cancer in the United States has decreased more than 50 percent in the past 30 years due to the Pap smear," Dr. Schnegg says.

"Because cervical cancer screening can detect precancerous changes of the cervix, interventions can be performed to prevent cervical cancer."

A Pap test is a way to examine cells collected from the cervix (the opening of the womb) for infection, inflammation, abnormal cells, precancerous changes, or cancer. The American College of Obstetrics and Gynecologists recommends that every woman have a first Pap test at age 21.

It's just one of the many reasons to see your OB/GYN every year or more frequently if you have specific health concerns. An OB/GYN office also offers sexually transmitted dis-

tor has to be rigorously trained in all those areas, to the point of becoming an expert. Schnegg says going to an OB/GYN is a little like bringing in an electrician, a carpenter, or

home. A general contractor can fix a myriad of home problems, but it's also good to have skilled experts who specialize in certain areas.

A woman's life is like a

help a young woman with questions and problems related to menstrual periods and premenstrual syndrome," Dr. Schnegg explains, "plus the many other health concerns that can cause stress, like acne, weight, sex and sexuality, birth control, sexually transmitted infections, and many others."

Plenty of women can speak to the value of having the help of an OB/GYN during pregnancy and childbirth. An OB/GYN can help a woman experience pregnancy in a better and healthier way by helping a mother-to-be plan ahead, confirming pregnancy, performing testing to ensure a healthy baby, giving recommendations, and ensuring a safe delivery for mother and baby.

In addition to all this, the office of your OB/GYN is a safe and private place to find help and support, whether you have concerns about your health that you don't want made public, or you just have questions you're too embarrassed to ask anyone else.

Dr. Schnegg says she strives to offer nonjudgmental help to women so they will have more than just healthcare. "I've been a strong, independent woman," Dr. Schnegg says, "and I want to be an advocate for other women to achieve independence themselves."

To learn more, or to schedule an appointment with an OB/GYN at LeConte Medical Center, call (865) 453-9355.



"Some milestones in a woman's life that an OB/GYN specializes in include puberty, pregnancy, menopause, and post-menopause."

— Laura Schnegg, MD



Laura Schnegg, MD

ease screening, breast cancer screening, depression screening, and osteoporosis screening as well as general health screening.

An OB/GYN is a physician who specializes in female reproductive organ health and surgery, delivering babies, and managing obstetric complications. In addition to graduating from medical school, he or she must complete a residency program for at least four years.

To graduate from an OB/GYN residency, a doc-

a plumber to address specific issues in your new

house that contains a complicated system of pipes and wires, bricks and mortar. It's a house that's much easier to build with the help of someone who is an expert in women's health.

"Some milestones in a woman's life that an OB/GYN specializes in include puberty, pregnancy, menopause, and post-menopause," Dr. Schnegg says. Puberty is a good time for a young woman to begin those annual visits.

"During and after puberty, an OB/GYN can



Can HPV be Prevented?

It's been almost 10 years since women first began hearing that a shot in the arm might be able to prevent cancer. Gardasil has been talked about and widely debated as it has led the way for cancer prevention vaccines.

"The vaccines Gardasil 9, Gardasil, and Cervarix are all vaccines effective against certain strains of human papillomavirus (HPV)," says LeConte Medical Center OB/GYN Laura Schnegg, MD. "They offer protection against cancers caused by HPV."

More About Cancers of the Reproductive System

While cervical cancer is the leading type of female reproductive cancer in the world, uterine cancer is the leading type in the United States and other developed countries. But the one that claims the most lives is ovarian cancer, because it is usually discovered at later stages when it's beginning to spread.

Symptoms of ovarian cancer may be vague or common to other medical

conditions, so it's more difficult to diagnose. Ovarian cancer symptoms include (but are not limited to) bloating, gas, nausea,

loss of appetite, diarrhea, constipation, urinary frequency, vaginal bleeding, shortness of breath, and fatigue.

Symptoms of cervical cancer may include (but are not limited to) abnormal vaginal bleeding, heavier menstrual bleed-

ing, vaginal discharge, and painful intercourse.

Uterine cancer symptoms frequently include vaginal bleeding or abnormal vaginal discharge between periods and after menopause, pelvic pain, and pain during intercourse.

Consult a doctor if any of these symptoms are new and persist.



Physicians at Your Fingertips.
Call. Click. Connect.

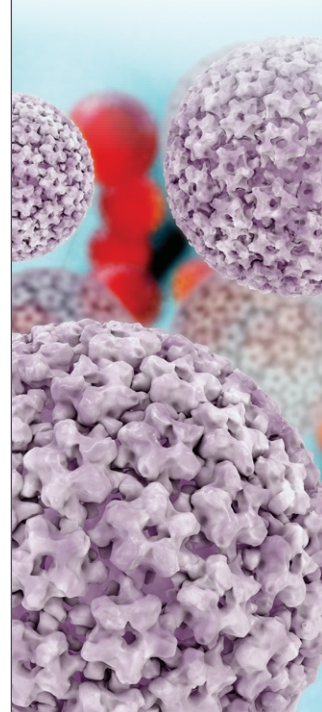
Call (865) 453-9355 for a physician referral.

Click www.lecontemedicalcenter.com/physicians for full physician profiles.

Connect on your mobile device at m.lecontemedicalcenter.com.



Count on LeConte



Cold or Flu?

Learn the Difference and How to Protect Yourself

How is a cold different from the flu? A cold and the flu (influenza) are two different illnesses. A cold is relatively harmless and usually clears up by itself after a period of time, although sometimes it may lead to a secondary infection, such as an ear infection. However, the flu can lead to complications such as pneumonia and even death. What may seem like a cold, could, in fact, be the flu. Be aware of the differences in the table at right.

Viruses that infect the nose, throat, and lungs cause illnesses like the flu and colds. They're usually spread from person to person when an infected person coughs or sneezes. They also can spread when a person touches cold or flu viruses deposited from another person on a desktop, doorknob, desk, telephone receiver, or handrail. Some viruses and bacteria can live for two hours or more on hard surfaces. If the person then touches his or her eyes, mouth, or nose before washing his or her hands, the viruses or bacteria enter the body and infection can occur.

Keep you and your co-workers healthy this flu season with these helpful tips:

Protect Yourself

- Wash your hands often with soap and warm water for 20 seconds.

Cold Symptoms	Flu Symptoms
Low or no fever	High fever
Sometimes a headache	A headache very common
Stuffy, runny nose	Clear nose
Sneezing	Sometimes sneezing
Mild, hacking cough	Cough, often becoming severe
Slight aches and pains	Often severe aches and pains
Mild fatigue	Several weeks of fatigue
Sore throat	Sometimes a sore throat
Normal energy level or may feel sluggish	Extreme exhaustion

Keep an alcohol-based hand sanitizer on your desk or with you at all times. After coughing, sneezing, or blowing your nose, wash your hands or rub sanitizer into them until they are dry. Clean your hands after using public transportation or conference room equipment.

- When soap and water aren't available, use alcohol-based throw-away hand wipes or gel sanitizers. For the most effectiveness, check that the product is at least 60 percent alcohol. If using a gel, rub it into your hands until they're dry.
- Do not touch your eyes, nose, or mouth with your hands.

Keep your work surface clean. Use a household disinfectant to wipe down your desk, keyboard, mouse, telephone, and other objects you touch often. Follow the directions on the label.

- If possible, do not use coworkers' offices, desks, or supplies. If you need to use them, wipe them down with disinfectant first.
- Get the flu vaccine as soon as it is available in your area.

Protect Others

- Keep tissues on your desk and cough or sneeze into a tissue.
- Stay at home if you feel sick with flu-like symptoms like a fever

or chills and a cough or sore throat. Other symptoms include runny nose, headache, fatigue, diarrhea and vomiting. Contact your health care provider to find out whether you should be tested or treated for the flu.

- Stay at home until at least 24 hours after your temperature stays below 100°F (38°C) or higher without the use of fever-reducing medicine. Some symptoms may remain.
- If you have a family member who has the flu but you feel well, it is safe to go to work. Check your health daily and stay home if you start to feel sick.



UNIFORM SCRUB & SHOE SALE

SEPT. 22 & 23
7 a.m. - 4 p.m.

in the LeConte Medical Center Classrooms

742 Middle Creek Road
(Park in Lot A for easy access to the classrooms.)

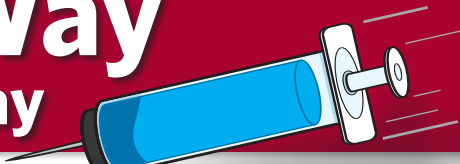
Get your gear at great prices! Join the volunteers at LeConte Medical Center for a uniform scrub and shoe sale. Everyone is invited to shop a great selection by McFarland on Main.



September is Prostate and Ovarian Cancer Awareness Month



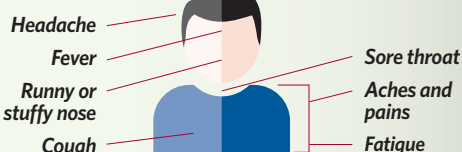
A Simple Way to Keep the Flu Away



The single best way to avoid the flu is to get a flu vaccination each season.

DO I HAVE THE FLU?

Common symptoms of the flu include:



HOW SHOULD I GET THE VACCINE?

There are two vaccine types, both of which protect against the same virus strains:

Flu Shot

Approved for all people older than 6 months of age

Nasal Spray

Approved for healthy people ages 2 to 49 years.

Exceptions:

- Pregnancy
- Diabetes
- Weakened immune system
- Heart problems
- Chronic respiratory disorders like asthma

AM I AT HIGH RISK?

Everyone 6 months of age and older should get the flu vaccine, but some people are at an even higher risk for complications from the flu:



- Children 6 months to 59 months
- Adults ages 50 and older
- Anyone with a chronic disease
- Anyone who lives in a nursing home or other long-term care site
- Health care workers
- People who are often in contact with elderly adults or the chronically ill
- Women who plan to be pregnant during flu season

WAIT!

BEFORE YOU VACCINATE Talk with your health care provider first if you:

- Have a severe allergy - like an anaphylactic reaction - to chicken eggs
- Have previously developed Guillian-Barré syndrome in the 6 weeks after getting a flu shot
- Currently have an illness with a fever
- Children younger than 6 months of age should not be immunized against the flu. Flu vaccines haven't been approved for that age group.

ROOTING OUT RUMORS We've all learned you can't always believe what you read (or hear!), and the same is true with the flu:

- Truth:** Vaccinating can prevent and reduce illness and prevent time lost from work
- Rumor:** I should wait to get vaccinated until I have symptoms of the flu
- Truth:** Flu viruses used in flu shots are inactivated, so they cannot cause infection
- Rumor:** The flu shot can give me the flu
- Truth:** People should get a flu vaccine as soon as they're available because it takes about two weeks for antibodies to develop

Get your influenza vaccination.

Call the Sevier County Wellness Clinic (865) 366-4554
Visit "Current Events" at www.covenanthealth.com/seviercounty

Early Detection of Prostate Cancer May Make Treatment Easier

Prostate cancer is the most common cancer in men in the United States, after skin cancer. It is the second leading cause of death from cancer in men. Most men with prostate cancer are older than 65 years, with the disease occurring more often in African-American men than in white men.

Almost all prostate cancers are adenocarcinomas (cancers that begin in cells that make and release mucus and other fluids), usually growing very slowly and often with no early symptoms.

Talk to your doctor about your risk of prostate cancer and whether you need screening tests.

Tests to detect (find) prostate cancer:

- **Digital Rectal Exam (DRE)** – This is an exam

of the rectum. The doctor or nurse inserts a lubricated, gloved finger into the lower part of the rectum to feel the prostate for lumps or anything else that seems unusual.

- **Prostate-Specific Antigen (PSA)** – This is a test that measures the level of PSA in the blood. PSA is a substance made mostly by the prostate that may be found in an increased amount in the blood of men who have prostate cancer. The level of PSA may also be high in men who have an infection or inflammation of the prostate or benign prostatic hyperplasia (BPH; an enlarged, but noncancerous, prostate).

It is important to remember that your doctor does not necessarily think you have cancer if he or she suggests a screening test. Screening tests are given when you have no cancer symptoms. Screening tests may be repeated on a regular basis.

If a screening test result is abnormal, you may need to have more tests done to find out if you have cancer. – Source: National Cancer Institute

For more information about prostate cancer screening, visit LeConte-MedicalCenter.com or contact East Tennessee Urology at (865) 446-9675.

Risk Factors for Prostate Cancer

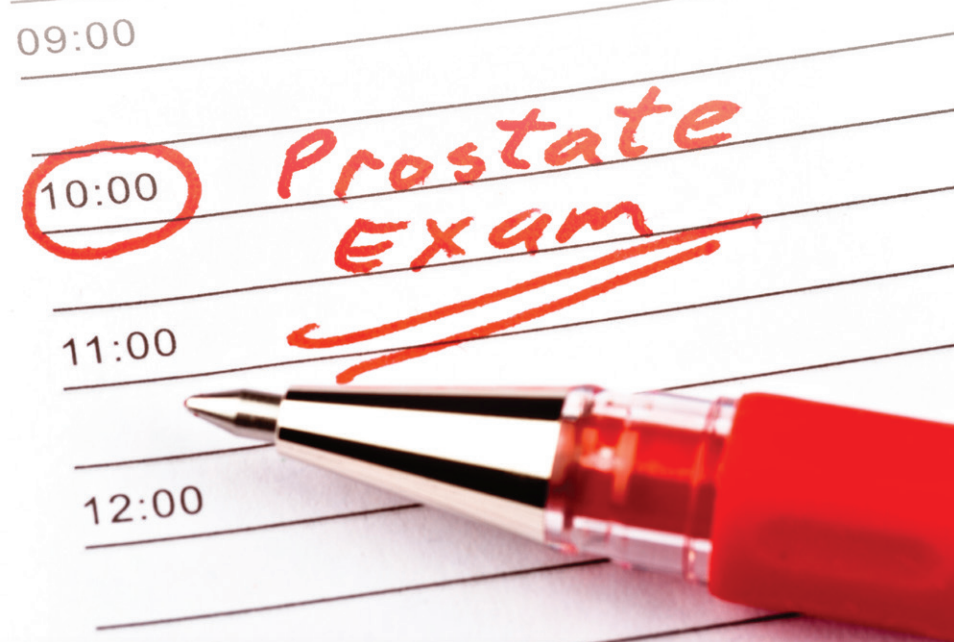
- **Sex.** Prostate cancer is only a risk if you are male.
- **Age.** Men ages 50 and older are at higher risk. Almost two-thirds of all prostate cancers are found in men over age 65.
- **Race and nationality.** Prostate cancer is more common in African-American men. It is less common in Asian-American and Hispanic men. Asian men in the U.S. are at higher risk than Asian men living in Asia.
- **Diet.** Men who have a diet high in red meat or high-fat dairy foods and low in vegetables and fruits may have a greater chance of getting prostate cancer.
- **Obesity.** Obesity has been linked with a higher risk of a more aggressive type of prostate cancer.
- **Chemicals in the workplace.** Men who are in contact with toxic chemi-

cals at work may have a higher risk for prostate cancer.

- **Genes.** Men with certain inherited gene changes are at higher risk for prostate cancer. But only a small amount of prostate cancers are strongly linked to gene changes.
- **Family history of prostate cancer.** Having a father or brother with

prostate cancer greatly raises a man's risk for the disease. The risk is even higher if more than one family member has the cancer, especially if at a young age.

What are your risk factors? Talk with your health care provider about your risk factors for prostate cancer and what you can do about them.



Prostate Cancer By the Numbers

- The rate of prostate cancer is about 60 percent higher in African-American men than white men. African-American men are also more than twice as likely to die from prostate cancer. The reasons why are not known. But some risk factors may play a part, such as differences in genes.
- About 220,000 men in the U.S. will get prostate cancer this year. It is the most common cancer in men, not including skin cancer. Nearly two-thirds of these

- men will be age 65 or older.
- More than 90 percent of all prostate cancers are found while they are either only in the prostate (local) or near the prostate (regional). The five-year survival rate for men with these kinds of prostate tumors is nearly 100 percent.
- Several decades ago, the five-year survival rate for prostate cancer was 68 percent. Now it's almost 100 percent.
- Nearly all men with prostate cancer survive at least

five years. And 98 percent survive at least 10 years. Ninety-four percent survive at least 15 years. This includes all stages and grades of prostate cancer. It also includes all treatments.

- Prostate cancer is the second-leading cause of cancer death in men in the U.S. after lung cancer.

Source: American Cancer Society

STAGES of PROSTATE CANCER

Once your health care provider knows you have cancer, the next step is to find out the grade and stage of the cancer. Grade is a way to note how abnormal the cancer cells look under a microscope. Staging of cancer is a method of noting the extent of the cancer. The stage tells how big the cancer is, and if it has spread. Grade and stage are determined when a biopsy (tissue sample) and other tests are done on the cancer. Staging and grading of cancer is important for deciding how to treat it, and how curable it is.

Grades of prostate cancer

The grade refers to how the cancer cells look when compared to normal prostate cells. The grade of your cancer will help your health care provider predict how fast the cancer may grow and spread. The Gleason scale of 2 to 10 is used to grade prostate cancer. The lower the number, the more the cancer cells look like normal cells. This means the cancer can be easier to treat and cure. This is because cancer cells that look more like normal cells tend to grow and spread slowly. Higher grades of cancer look very different from normal prostate cells. These grades of cancer are harder to treat. Most prostate cancers are graded at least 6. Prostate cancers with low scores are less likely to spread to other organs than those with high scores.

Stages of prostate cancer

The stage of your cancer

describes the size of a tumor, and how much it has spread. Health care providers use different rating systems to stage cancer. The American Joint Committee on Cancer (AJCC) staging system is used most often for prostate cancer. It's called the TNM system:

- **T** stands for tumor. This category notes the size of the tumor and if it has spread into nearby areas.
 - **N** stands for nodes. Lymph nodes are small organs around the body. They help the body fight infections. This category notes if cancer cells have spread to the nearby lymph nodes.
 - **M** stands for metastasis. This category notes if the cancer has spread to other organs in the body. This may include a lung, your bones, liver, or brain. It also includes lymph nodes that are not near your kidneys.
- Numbers from 0 to 4 are assigned to the T, N, and M categories. Once your health care provider has determined your T, N, and M values, he or she then determines your stage grouping. The lower numbers mean smaller cancers and that are easier to treat and cure.

There are two types of stages for prostate cancer:

- **Clinical stage.** This measurement helps your health care provider decide on the best treatment options for you. For prostate cancer, your clinical stage is determined from a digital rectal exam (DRE), biopsies, and imaging scans, and your blood PSA level.

- **Pathological stage.** This measurement is based on an exam of your prostate after it has been removed by surgery. In some cases, the pathological stage may be higher than the clinical stage. This happens if the cancer has spread more than thought during clinical

to as early-stage prostate cancer. Stages III and IV are sometimes called advanced prostate cancer.

STAGE I. In this stage, one of the following is true:

- The tumor can't be felt by digital rectal exam (DRE) or seen on an ultrasound. It is found during tests or surgery done

less than half of one side of the prostate. It has not spread beyond the prostate. The Gleason score is 6 or less. The PSA level is less than 10. (T2a, N0, M0)

STAGE IIA. In this stage, one of the following is true:

- The tumor can't be felt by digital rectal exam (DRE) or seen on an ultrasound. It is found due to tests or surgery done for another reason. It has not spread beyond the prostate. The Gleason score is 7. The PSA level is less than 20. (T1, N0, M0)
- The tumor can't be felt by digital rectal exam (DRE) or seen on an ultrasound. It is found due to tests or surgery done for another reason. It has not spread beyond the prostate. The Gleason score is 6 or less. The PSA level is at least 10 but less than 20. (T1, N0, M0)
- The tumor can be felt by DRE or seen on ultrasound. It is confined to one side of the prostate. It has not spread beyond the prostate. The Gleason score is 7 or less. The PSA level is less than 20. (T2a or T2b, N0, M0)

STAGE IIB. In this stage, one of the following is true:

- The tumor can be felt by DRE or seen on ultrasound. It is in both sides of the prostate. It has not spread beyond the prostate. The Gleason score and PSA are any number. (T2c, N0, M0)

- The tumor has not spread beyond the prostate. The PSA level is 20 or higher. The Gleason score is any number. (T1 or T2, N0, M0)
- The tumor has not spread beyond the prostate. The Gleason score is 8 or higher. The PSA is any number. (T1 or T2, N0, M0)

STAGE III. In this stage, the tumor has spread outside of the prostate. Cancer cells may be in some of the glands that produce semen (seminal vesicles). It has not spread to lymph nodes or anywhere else in the body. The Gleason score and PSA are any number. (T3, N0, M0)

STAGE IV. In this stage, one of the following is true:

- The tumor has spread outside of the prostate and seminal vesicles. It has reached nearby tissues such as the bladder's external sphincter, rectum, or the wall of the pelvis. It has not spread to the lymph nodes or distant parts of the body. The Gleason score and PSA are any number. (T4, N0, M0)
- The cancer has spread to the lymph nodes. It has not spread to distant parts of the body. The Gleason score and PSA are any number. (Any T, N1, M0)
- The cancer has spread to distant parts of the body. The Gleason score and PSA are any number. (Any T, any N, M1)



staging. The stages are defined by Roman numbers I through IV. The lower the number, the less the cancer has spread. The higher the number, the more the cancer has spread. Stages I and II are sometimes referred

for another reason. It has not spread beyond the prostate. The Gleason score is 6 or less. The PSA level is less than 10. (T1, N0, M0)

- The tumor can be felt by DRE or seen on ultrasound. It is confined to



We Built LeConte

The Emergency Department at LeConte Medical Center is one of the busiest in our region, caring for residents and tourists who visit Sevier County each year. Last year LeConte managed over 51,661 emergencies.

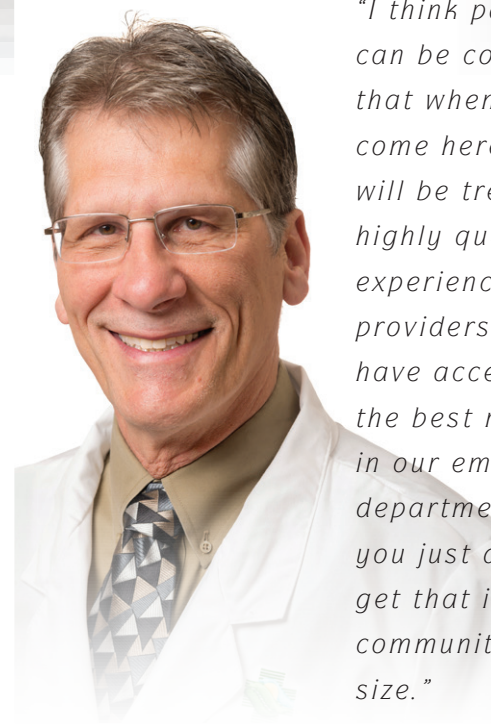
LeConte is “stroke ready,” complete with immediate robotic stroke diagnostic capabilities, and neurologists available 24/7. Our partnership with Fort Sanders Regional Medical Center, the region’s only comprehensive stroke center to be accredited by the Commission on the Accreditation of Rehabilitation Facilities and certified by The Joint Commission, allows our patients direct access to the most elite stroke resources possible.

We built an outstanding emergency department, and we’re still growing.

We Built LeConte.



Count on LeConte



“I think patients can be confident that when they come here, they will be treated by highly qualified, experienced providers who have access to the best resources in our emergency department. And you just don’t get that in other communities our size.”

— Steven Dronen, MD
Emergency Medical Director