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Together. Supporting each other.

The last few months presented challenges unlike anything we’d seen in our lifetimes. However, it was during those unprecedented times that we saw an equally— if not more—unprecedented and remarkable response from the human spirit. Your spirit keeps our world together. The spirit of innovation. The spirit of strength. The spirit of Dayton.

During those trying times, individuals and businesses alike stepped up to support our care teams. Chalk drawings. Masks. Signs. Face shields. Meals. Hand sanitizer. And even just a word of thanks. The list goes on and on, and we can never say thank you enough. We are truly blessed, and we are in constant awe of the support you showed for our teams.

Rising to the challenge While the situation continues to change, our commitment to you never does: We are here to improve the lives of people in our communities. Our teams are trained to provide the safest, highest level of quality care, regardless of the circumstances. Every day, we see our care teams displaying courage, resolve, teamwork, and most importantly, faith. We are proud of our teams who were there through those challenging months. Because of them, the level of care you count on remained available—and still is.

Safety has always been a top priority at Kettering Health Network, and we want to reassure you that our network of locations remains a safe place to receive care. To put it plainly: We are here to help.

Our region, our state, and our nation have seen significant change over the last few months. While no one knows what the future may hold, we know the best path forward is one we walk as a community.

Together. Supporting each other.

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How should I lose weight instead?

When looking to lose weight, Michele recommends asking the question, “Can I do this diet forever?”

“Look for information that is science-based from a reputable source, such as the Academy of Nutrition and Dietetics, and that promotes weight loss of one to two pounds per week,” says Michele. People who lose weight slowly over a longer period of time are more likely to keep the weight off long-term and less likely to experience adverse health complications.

“It’s always a good idea to seek the advice of a dietitian or another medical professional,” says Michele. “Someone who is coaching you through a diet and monitoring your health will help ensure you are eating a nutrient-dense diet and avoiding deficiencies.”

Michele shares that she and all registered dietitians at Kettering Health Network Diabetes and Nutrition Centers help with a variety of concerns and can see patients for guidance with any nutritional need.
You’re sneezing and coughing. And your eyes are watery, red, and itchy. Then there’s that runny, stuffy nose. Maybe you remember having the same miserable symptoms last year when the seasons changed.

If you sneeze and sniffle whether or not you’re sick, you could be one of the 50 million Americans with allergies.

Seasonal allergies occur when your immune system incorrectly identifies foreign substances like pollen, grass, or mold as harmful and produces antibodies to try to fight off these substances. This immune response can cause your skin, sinuses, and respiratory and digestive systems to become inflamed—which leads to watery eyes, a runny nose, and a scratchy throat, among other symptoms.

Seasonal allergies refer to symptoms that are only experienced during certain times of the year.

“The most common seasonal allergy triggers are grass, pollen, and mold,” says Kettering Physician Network primary care physician Jolinda Caswell, MD. “However, many people actually develop seasonal allergies as they get older. A minority of people can grow out of their allergy symptoms, but symptoms are correlated to the allergen count, and it’s more likely that their symptoms have subsided or lessened because the allergen count is lower.”

Who’s affected “Anyone can get allergies at any time,” says Pam. “However, if one or both of your parents suffer from allergies, you have a much greater chance of suffering from them as well.”

“One common misconception is that someone is born with allergies,” says Kettering Physician Network certified nurse practitioner Pam Kraft, APRN-CNP. “Fall triggers include ragweed and mold.”

What’s causing your symptoms and how to feel better

Seek relief If seasonal allergy symptoms are interfering with your daily life, you should see your primary care provider to discuss treatment options.

“If your symptoms are mild, you should avoid your triggers as much as possible and try saline rinses,” says Pam.

“Most of the time, your primary care provider can provide symptomatic relief to help you get through the season,” says Dr. Caswell. “However, if your symptoms are persistent and severe, allergy testing may be in order.”

It is important to discuss all allergy symptoms with your doctor. Your primary care provider will work with you to develop the best treatment plan to allow you to fully enjoy the spring season.

Control your triggers There are steps you can take to minimize your seasonal allergy symptoms.

• **KEEP WINDOWS AND DOORS CLOSED.**
  As tempting as it can be to open the windows and enjoy the fresh air, that breeze can carry allergens into your home. Keep your windows and doors closed to limit your exposure.

• **DO SOME CLEANING.**
  If dust is a trigger, try dusting, vacuuming, and regularly washing your bedding to cut down on the number of dust mites in your home.

• **KEEP A DIARY.**
  Write down when you experience symptoms and what you were doing before or during that time. This can help you identify your triggers so you can avoid these allergens in the future.

COLD OR ALLERGY?

Unlike the common cold, symptoms of seasonal allergies occur only during certain times of the year.

Allergy symptoms include:

- **Runny or stuffy nose**
- **Watery, red, or swollen eyes**
- **Sneezing**
- **Scratchy throat**
- **Itchy eyes, nose, or roof of mouth**

Need a checkup or help for your allergies? Find a primary care provider by calling 1-888-726-2372.
Cancer CARE

CANCER as a family

Reassuring ways to explain a cancer diagnosis to a child

Cancer is difficult for adults to understand, let alone children. So how much do you tell a child when someone they know receives a diagnosis? Parents want to shield their children from anything that is scary or worrisome, so it is a natural response to want to keep details from children regarding a loved one’s cancer diagnosis. However, withholding information about a family member’s health can be damaging.

“When information is withheld or kept secret, a child still knows something is wrong,” says DeAnn Gallatin, MS, LSW, an oncology social worker at Kettering Health Network. “Secrecy can prompt a child to believe something is their fault, and a lack of information can result in the child developing anxiety.”

“Knowledge is power”

Talking to a child about the outward effects of cancer and treatment is also significant. Children need to understand that the disease and the treatment can be hard on the body. Let children know that nausea, vomiting, hair loss, and fatigue can all occur to someone going through cancer treatment, and emphasize that the doctors will help by giving the loved one medicine for some of these side effects. Telling a child ahead of time will ease their fears, should the loved one have any of these symptoms.

“Knowledge gives children power, and that power can be used to help their loved one as they go through the cancer journey,” says DeAnn. “It can also be used to help children deal with their own emotions.”

Tips for a tough discussion

How much information to provide about cancer depends on the level of interest of the child and who in their life has received a diagnosis.

• Let them know their loved one has cancer and that the doctors are helping.
• Try to keep the child’s routine as consistent as possible.
• Identify a regular caregiver who can devote time each day to the child.
• Let the child tour the medical facility and meet providers.

Children’s Lives Include Moments of Bravery

When a loved one is going through cancer treatment, it is stressful for the entire family, which is why it is important to lean on local support and resources.

Kettering Health Network offers a six-week program for kids who have a loved one going through cancer, called CLIMB® (Children’s Lives Include Moments of Bravery). This program gives children, ages five through 12, a safe environment to express how they feel while being supported by trained experts and other children going through a similar experience.

The CLIMB® program focuses on three C’s:

1. You can’t CATCH it.
2. You didn’t CAUSE it.

To learn more about this program, call 1-888-681-5610.
On-Demand Care is staffed by physician assistants and nurse practitioners who provide convenient access to urgent-care-like services at the same affordable rate as your primary care provider. New and existing patients are welcome.

On-Demand Care centers treat the following:

- Fever, headache, and rashes
- Allergies, sinus, cough, flu, and bronchitis
- Pink eye, sties, ear infections, and ear wax removal
- Minor wounds, cuts, scrapes, bug bites, bee stings, abscesses, and boils
- Injuries and pain from pulled muscles, sprains, strains, arthritis, and possible minor fractures
- Diarrhea, constipation, nausea, vomiting, and heartburn
- Bladder infections, STDs, and yeast infections

WHEN YOU NEED CARE

Life doesn’t always go as planned, so when you wake up in the middle of the night with sudden and severe abdominal pain or take a fall and can no longer bear weight on your leg, how do you know where to go for medical attention? When you need care now, deciding whether to go to an urgent care center or an emergency center can be confusing—both names carry a meaning of needing prompt care for an unexpected ailment.

It is important to select the appropriate location for medical treatment so you—and others—can receive the right care at the right time.

Lifesaving care: “The emergency department is for emergencies, such as sudden, complex medical and surgical care and trauma,” says Nancy Pook, MD, emergency physician at Kettering Health Network. “We are specially trained to rapidly identify and treat life-, limb-, or organ-threatening emergencies with expertise and efficiency.”

Providers at emergency centers are prepared and equipped to save lives at any time, day or night.

“The emergency department is the only high level of medical care that can be accessed 24/7/365,” says Dr. Pook. “We have the unique ability to connect patients of all ages to specialty care when an emergency condition is identified.”

Same-day care: If you are experiencing an illness or injury that is interfering with your daily life but is not life-threatening, Kettering Health Network primary care offices offer same-day appointments for existing patients. Your primary care provider knows you best, so it is beneficial to call and schedule with them first, if possible.

If your primary care provider does not have any appointments readily available, urgent care or our On-Demand Care centers are your next options.

- **URGENT CARE CENTERS** evaluate and treat many of the same conditions that primary care providers do, but on a walk-in basis. Minor wounds, infections, and flu can all be treated at an urgent care center.

- **ON-DEMAND CARE CENTERS** are staffed by advanced practice providers who evaluate and treat ailments that need same-day care and are not life-threatening. On-Demand Care centers have the added benefit of providing walk-in care at the same affordable rates as primary care.

While it can be overwhelming to have so many options, each one has a specific purpose and level of care to help you get back to healthy. Going to the right place for treatment will help you receive the care you need, when you need it.

Turn to page 12 to find out where to go for care.

BE PREPARED

In the event of an emergency, call 911.

Find your nearest emergency center at ketteringhealth.org/emergency

Find your nearest urgent care center and save your spot online at ketteringhealth.org/urgentcare

Find your nearest On-Demand Care clinic at ketteringhealth.org/ondemand
Change is unavoidable—but that doesn’t mean it’s always easy. “When change occurs, whether it’s unexpected or planned, it takes us out of our comfort zone,” says Jackie Scanlan, psychotherapist with Kettering Health Network. “All of us like to be in control, and change can quickly make us feel out of control.”

Fortunately, some specific strategies can help you navigate change well.

Prepare for the change “Depending on the situation, you might be able to educate yourself ahead of time to feel more prepared,” Jackie says. For example, before an upcoming move, Jackie recommends doing some research to become familiar with a new setting. Is there a specific coffee shop, store, or workout studio that you like? Locate where you can find one in your new surroundings. If you’re starting a new job, try driving to your new office on a day before work begins so that you know where to go and how long it takes to get there.

Find healthy outlets for stress Change can make anyone feel anxious or stressed. “Make sure that you maintain your normal health habits, stay on medication, or continue seeing a therapist if needed,” Jackie says.

She also suggests finding a healthy outlet to exert built-up energy. For some, calming activities like meditation or yoga help alleviate anxiousness. For others, more intense activity like running works well. “Make sure you’re sleeping well, getting to bed on time, and eating a nutritious diet,” Jackie says. “When our bodies feel good, our minds work better, too.”

Know that fear is normal Many of us resist feeling sad in the face of an upcoming change, trying immediately to force ourselves to feel better. But feelings of fear or sadness are normal, whether a transition is unexpected or planned.

“We don’t always allow ourselves to grieve over what’s changing. Change might be exciting, but it’s OK to miss something,” Jackie says. “Try to remind yourself: You’ve gone through other changes before and you’ve been OK.”

See pages 10 and 11 for details about the different types of care.

To connect with a counselor or find more mental health resources, call 1-855-788-2895 or visit ketteringhealth.org/mentalhealth
Years ago, doctors routinely visited patients in their own homes. When they could no longer fit their equipment in a portable black bag, such visits became increasingly rare. But with new technology comes a new version of the house call.

Welcome to telehealth, where medical providers use communication technology to meet with their patients wherever they are.

**What is telehealth?**
When you schedule a telehealth visit, you’ll use your personal electronic device (smartphone, tablet, or computer with an internet connection and video capability) to have a face-to-face appointment with your provider. “Most patients are pleasantly surprised by how easy it is,” says Melissa Butler, MD, a primary care provider with Kettering Health Network.

A nurse will contact you ahead of time to explain the process, and about 10 to 15 minutes before your appointment, you’ll receive an email or text message with a link. Simply click on the link to enter a virtual “waiting room” where your provider will join you. From there, your appointment will proceed much as it would in person, especially if it’s a routine check-up.

**Efficient and convenient** “Many things we do don’t really require coming into the office,” says Kettering Health Network urologist David Hadley, MD. Going over test results, monitoring medication changes, and following up on previous procedures are a few examples.

In fact, Dr. Hadley adds, telehealth visits are particularly well-suited for some of these tasks. “Because the patient’s chart and the patient are both on my screen, I can make eye contact more easily while going over test results with them. Or I can use screen-sharing to show patients their X-rays as we discuss them,” he says.

Wellness visits and new patient exams also work well as telehealth appointments.

Telehealth visits can help manage diseases such as diabetes or hypertension that could get out of control if patients put off regular appointments. “Often, they cancel because it’s hard for them to come in,” Dr. Butler says. “They have transportation or mobility issues like being in a wheelchair or having to carry oxygen with them.

Or maybe they’re in a lot of pain that day, or there’s inclement weather. Being able to meet with their provider without leaving home decreases the frequency of missed appointments because all of those reasons are gone.”

Patients who live far away from their provider’s office or who have obligations that make it hard to schedule appointments during the business day also benefit from the convenience of telehealth visits. “They can call in on their smartphone during a break,” Dr. Butler says.

**More advantages to telehealth** Dr. Hadley adds that the no-travel convenience gives providers the ability to work last-minute appointments into their schedules if a patient needs one. Before telehealth, he was never able to do office visits on days he performs surgeries because he is at the hospital all day. But with telehealth, he can fit them in between surgeries.

While not every appointment can be handled through telemedicine, house calls have definitely made a comeback—only now the iconic black doctor’s bag is an electronic device that fits in the palm of one’s hand.

**Set yourself up for success** To help your telehealth appointment go smoothly:
- Make sure you have the necessary equipment—a smartphone, tablet, or computer with both audio and visual capability. “If you’ve been using your computer for Skype or Zoom visits with the grandparents, you have the capability,” says Dr. Butler.
- If you aren’t entirely comfortable with the technology, practice ahead of time, and/or ask a more tech-savvy family member to be present at your first visit.
- Have with you anything you’d normally bring to an in-person appointment, such as medication lists, symptom notes, and questions.
- Choose a quiet location so you and your provider can hear each other clearly and without distraction.

**Need a primary care provider?** Call 1-888-726-2372 or visit ketteringhealth.org/telehealth.
Pain is an uncomfortable feeling that can ruin anyone’s day in an instant. For Laurie Cornett Cross, that four-letter word had become part of her everyday vocabulary. “I was in such chronic, debilitating pain and I had such limited mobility that I had to leave my job,” she shares. “This was all I was focused on, and I just needed to get control of it. I felt like I’d hit rock bottom. I’m like, please, somebody help me.”

Laurie was suffering from pain associated with a herniated disk, and she was referred to Kettering Brain & Spine for treatment.

When she called the facility, a team member set up an appointment with neurosurgeon Siddharth Shetgeri, DO, and immediately put her at ease. “My first impression of the whole organization was just, ‘Wow, this is really great service,’” she says. “Health care can be difficult, but she was great and made everything so easy.”

Laurie’s trust in the team continued to grow after she met Dr. Shetgeri and other members of the Brain & Spine team. “He’s kind and caring. I could tell right away that he was extremely competent,” she says. “They were all just so welcoming and caring, and I just felt comfortable right away.”

After living with the pain for so long, Laurie was surprised to learn that her treatment could be performed as a minimally invasive, outpatient procedure. She was scheduled for surgery at Grandview Medical Center. “For somebody in my position where I literally had lost control of my life because I was trying to deal with this issue, it was nothing short of a miracle to get the right treatment, the right doctor, the right facility, the right follow-up care,” she expresses. “All of that was just incredibly important to me.”

Consistently kind Laurie had a few follow-up appointments in the weeks that followed to ensure everything was going well as she continued to heal. And once again, she was blown away by the kindness of the staff. “Everybody in there looked at me like they knew what my procedure had been,” Laurie says. “[Dr. Shetgeri’s scheduler] knew my name, she knew my procedure, and she knew why I was there that day because she asked me how I was doing. Those are the kind of touches that I think set Kettering Health Network apart.”

Laurie was so impressed with her care that she has encouraged her family members to seek help from Kettering Brain & Spine. “I don’t really refer people to doctors very often,” she says. “But I had such a high comfort level with his whole practice and his whole staff. If anyone can get it taken care of, I absolutely trust them.”

Finding the right treatment made all the difference not only for Laurie, but for her entire family. “I feel so much better, and I can get back to life. I have two teenage boys and a husband, and I mean, life’s busy, right? I was just on the sidelines of it,” she says. “It wasn’t just a miracle for me. This is what my family needed.”

Laurie’s experience at Kettering Brain & Spine was right from the start.
HIP, HIP AWAY!
People can usually resume driving a car with an automatic transmission four to eight weeks after having hip replacement surgery. Putting a plastic bag on the seat makes sliding in and out easier.

American Academy of Orthopaedic Surgeons

As people get older, stiff joints, aches, and pains become more common. But what if joint pain is disrupting your life? Matthew Kauffman, DO, an orthopedic surgeon with Kettering Physician Network Orthopedics & Sports Medicine, shares that there are two primary indications that it may be time to consider a joint replacement: severe arthritis and acute pain.

“This type of pain interferes with your day-to-day life and limits normal activities,” he explains. Normal activities can cover a wide range—maybe you struggle when cleaning your home, carrying laundry up and down the stairs, or mowing your yard. “It may be as simple as walking from your car into the grocery store,” says Dr. Kauffman. “If your life is severely affected by pain, it might be time to talk about a joint replacement.”

Two kinds of surgery
Joint replacement surgery of the knee falls into two major categories: partial, or unicompartmental, joint replacement and total joint replacement. During a partial knee replacement, only the affected compartment of the joint is replaced. A total joint replacement involves surgery on the entire joint. Your surgeon will determine which procedure is best based on a number of individual factors.

Dr. Kauffman notes that the three biggest questions he hears from patients regarding surgery have to do with their recovery. “Patients want to know: ‘When will I start walking? How long will I be in the hospital? And how long until I’m back to normal?’”

These questions have become more common as outpatient joint replacement surgery has become more prevalent.

No overnight stay
Unlike traditional surgery, outpatient joint replacements do not require an overnight stay in the hospital. Instead of resting in bed after surgery, now patients sit up, get up, and walk the same day of the operation.

All patients who have either an inpatient or an outpatient joint replacement at Kettering Health Network receive help from nursing and therapy staff to get moving on the day of their surgery, as early mobility leads to improved outcomes.

“If you’re in good health and have a strong family environment to help you when you get home, you and your surgeon can discuss if you’re a candidate for an outpatient replacement,” Dr. Kauffman says. “If you have a more complex health history, you may need to be monitored in the hospital for a day or two.”

A smooth recovery
No matter what type of surgery you have, it’s important to understand that everyone moves at their own pace during recovery.

“I always tell my patients that recovery is individualized. My ultimate goal is to get rid of their pain and increase their function and activity level,” Dr. Kauffman says.

He adds that a significant part of having surgery is mental preparation. Having realistic expectations is also essential. “It helps patients to understand that, as your surgeon, I’m here to help you through this process,” he says. “I believe it’s critical to listen to my patients so that I’m doing the right thing for the right reason on the right person. To help people, you have to listen to what they’re saying.”

Recovery from a joint replacement focuses on restoring range of motion and getting used to moving with the new joint.

Dr. Kauffman notes that “The goal of surgery is to help improve a person’s quality of life so they can stay active.”

HELPING YOU PREPARE
Patients who are scheduled for a joint replacement at Kettering Health Network attend a class to help them get ready for surgery.

FEEL RENEWED
Need a new joint? To schedule an appointment with an orthopedic specialist, call 1-877-930-9354.

SIZED RIGHT.
When shopping for athletic shoes, try shoes on after a workout or at day’s end, when feet are largest. Also, wear the type of socks you’d use for your activity.
Concerned about your cycle?

What to know about irregular periods

Periods are not necessarily the most comfortable part of a woman’s life—and sometimes, abnormalities such as an irregular cycle length or severe pain can be a significant hindrance. But how do you know if your cycle is considered normal? And when is it time to seek help? Here are some answers.

What’s normal In general, a cycle of 28 to 30 days is typical for women, explains Beverly Alten, MD, an OB-GYN with Kettering Physician Network Women’s Health.

“Of course, everyone is different,” she says. “Women don’t need to be concerned about variations in their cycle unless their periods are closer than three weeks apart or longer than three months apart.”

A certain amount of irregularity is still considered normal. Women may get their period anywhere between four and six weeks apart.

“Even if periods are two months apart, but you’re still ovulating, it’s OK, as long as you’re not trying to get pregnant,” Dr. Alten explains. “But if periods are occurring every two weeks, that can be a disruption for women.”

Other symptoms to note if a period lasts for more than 10 days or if women have to change a tampon every one to two hours for longer than a day or so, these are also signs of irregularity. “If you have severe cramps, cramping between periods, or extreme PMS symptoms, those can all be addressed with your OB-GYN,” says Dr. Alten. Irregular symptoms can point to underlying conditions. In some cases, women may have a thyroid disorder. In other cases, the underlying issue may be an overproduction of prolactin, the hormone the brain produces when a woman is breastfeeding.

“We always start with checking hormone levels, and of course, always rule out pregnancy,” says Dr. Alten. “There’s also a possibility of uterine polyps. In the case of severe cramping, there could be a diagnosis of endometriosis or adenomyosis.”

However, it’s important for women to understand that, sometimes, none of these underlying conditions are at play, and treatment will focus on symptom relief.

When to see a doctor There’s no one-size-fits-all for defining a normal period. But if cycles are closer than three weeks apart, from day one to day one, or longer than three months apart, schedule an appointment with an OB-GYN. A women’s health care provider can also offer treatment options for heavy bleeding, pelvic pain, and severe cramps.

“Most of the time, period irregularities are not caused by an underlying condition. Rather, it’s usually a hormonal issue,” notes Dr. Alten. “Even though hormonal problems can’t be cured, they can be controlled. You don’t have to suffer through your symptoms.”

Treatment options

“Because irregular periods are often secondary to irregular hormone fluctuations, the first line of treatment is usually oral contraceptives, intrauterine devices (IUDs), implants, or another form of treatment to help regulate hormones,” explains Dr. Alten. “Hormonal treatments don’t necessarily cure any underlying problems, but something as simple as the birth control pill can provide significant relief for irregular or heavy periods.”

If women are done having children, they may also consider endometrial ablation or, in some cases, a hysterectomy.
Varicose veins can develop anywhere in the body but are most common in the legs. It is a common condition that typically affects women and people with occupations that require standing or sitting for long periods of time.

Varicose veins occur when the valves in the veins do not work correctly, causing blood to pool, resulting in swelling and discoloration of the affected veins. Symptoms include cramping, aching, and heaviness in the legs—but some people report no symptoms at all.

Women, especially if pregnant, and people who are older or overweight are at more risk. Many people with varicose veins don’t like how they look, but are they more than a cosmetic concern?

**Self-care** for varicose veins that are causing discomfort, there is a home remedy you can try first. “Patients can wear compression socks throughout the day to relieve symptoms. Compression is also a great preventive measure for those who are at risk for developing varicose veins,” says Alyssa Bonta, MD, a vascular surgeon with Kettering Health Network.

Even if varicose veins aren’t causing pain, they can get worse over time if left untreated. Varicose veins that are only a cosmetic concern, Dr. Bonta recommends trying compression socks for six to eight weeks to see if they improve the look of your varicose veins.

However, if you notice bleeding or an ulcer on the skin, you should see a doctor. “If the vein is bleeding through the skin or there is an ulcer, this means there is venous inefficiency, and the vein won’t heal until a doctor takes care of it,” says Dr. Bonta. “At this point, the vein needs to be taken care of immediately.”

**Medical options** When compression isn’t enough to relieve symptoms, Dr. Bonta recommends scheduling an appointment for further testing to determine if a procedure would be helpful. Kettering Physician Network Heart & Vascular has many options available:

- **VENASEAL™** and **VARITHENA** are injectable adhesives that close the affected vein. Both are minimally invasive, outpatient procedure with a quick recovery period; patients can resume normal activities within 48 hours.

- **ABLATION** is a catheter that uses radiofrequency or a laser to cauterize the vein, causing it to close. Ablation is also a minimally invasive, outpatient procedure, and normal activities can be resumed 48 hours after the procedure.

- **PHLEBECTOMY** is a small incision is used to remove the affected vein. Phlebectomies are done in an operating room and are typically an outpatient procedure. Recovery takes approximately one to two weeks.

Want to know more about procedures to remove varicose veins? Visit ketteringhealth.org/varicoseveins
"It was nothing short of a miracle..."

Read Laurie’s story on page 16.

Your health is unique, so your health care should be too. That’s why our providers get to know you as an individual, creating a personalized plan to improve your wellness. By working with a health care provider, you can get a jumpstart on a healthier future to help you avoid illness and improve your overall health.

Get started today. Your new partner in health is waiting.