GMC – Duluth: happy anniversary!
go red for women
hungry to be thin

THREE CHEERS FOR GMC SPORTS MEDICINE
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baby on board

being a new mom is an exciting and challenging time—as Salma Hayek can attest
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flashback: 1984

“A new day dawns in Gwinnett healthcare.”


“When state-of-the-art diagnostic equipment, an expanded and versatile obstetrics ward and an emergency department capable of handling major trauma cases all now located within the county, Gwinnett residents will no longer be forced to leave the borders of Gwinnett to receive many medical services,” the newspaper reported.

The new Gwinnett Medical Center was a milestone for our community. It literally changed the face of Gwinnett healthcare for the 229,000 people who called Gwinnett home in 1984. The 426 acute hospital beds available to them were plenty, and just as the paper said—many new services were performed right here in Gwinnett.

Today, the healthcare picture in Gwinnett is very different. Our population has grown to more than 750,000. We have transformed from a rural area outside metropolitan Atlanta into a metropolitan area ourselves. Our current population’s demands have outgrown our supply. Those 426 beds of 1984 have grown to 653 beds in 2007, not nearly enough for our population.

Just as a new day dawned for Gwinnett healthcare in 1984, a new dawn is once again on the horizon.

Gwinnett Medical Center is in the midst of Project PATH, a transformation that will advance healthcare in Gwinnett. One facet of this transformation is a new 155-bed patient tower being built on our main campus in Lawrenceville. You’ll see on the opposite page the grandeur of the new facility that will open in 2009, compared with images from the original tower’s first days in 1984.

This building, along with all of Project PATH, is not just changing the look of our facility, it’s also changing the capacity and services we will be able to offer. That’s why “A new day dawns in Gwinnett healthcare” is once again relevant, and is as true today as it was 23 years ago.

Philip R. Wolfe
President and CEO
Gwinnett Medical Center
For nearly 25 years, Gwinnett Medical Center has grown with the community. Here, we present a look at GMC, then and now.

The new tower construction at GMC is well under way, as seen here in November 2007. The rendering below shows how the completed tower will look when it opens in summer 2009.

The construction of Gwinnett Medical Center in the early ‘80s culminated with a 1984 opening. Right, a nearly empty Ga. Highway 316 is seen in the foreground of the original construction.
Kelsey Hoffman didn’t expect that her first day of varsity cheerleading practice at North Gwinnett High School would be her last for the season.

But when she heard a “sickening pop”—as she described it—while executing an acrobatic move during that practice on August 14, 2006, she knew her landing would be less than comfortable.

Kelsey was injured during a stunt known as a fold, a move that consists of flipping upside down while spinning. Unfortunately, Kelsey and her spotter tangled arms and clothing in the midst of the move, resulting in her injury.

*K* quick action

Kelsey’s mother, Barbara, arrived on the scene and immediately knew where she wanted to take her daughter—to Mark Cullen, M.D., an orthopedist who practices at Gwinnett Medical Center. The Hoffman family had been connected to Dr. Cullen since he repaired Barbara’s broken wrist in 1996. Their second encounter with Dr. Cullen occurred when Kelsey visited multiple doctors for a sharp pain in her leg when she was 14. The diagnosis she repeatedly heard was growing pains. However, Dr. Cullen took a closer look and discovered a tumor in Kelsey’s leg and removed it himself, even though he was not an orthopedic oncologist.

Barbara and Kelsey arrived at Dr. Cullen’s office the night of her knee injury in hopes that he could ease her pain and her fear of never cheering again. Although Dr. Cullen was done with his work for the evening, he returned to his office to care for Kelsey. After an exam, and a few X-ray images, the doctor concluded that Kelsey’s anterior cruciate ligament (ACL) was torn.

“Kelsey’s mechanism of injury was classic for a tear of the ACL,” Dr. Cullen says. “Serious knee injuries occur two to 10 times more frequently in female athletes than in male athletes. One in every 10 collegiate female athletes and one in every 100 high school female athletes will sustain a serious knee injury every year.”

Just one week later, Kelsey was in surgery, and the rest of her cheerleading season was spent on the sidelines. In spite of this frustrating situation for an athlete, Kelsey remained positive and did everything she could to support her cheerleading teammates.
“Every time I passed a test, I could move forward to the next level.”

She continued with rehab with her goal in mind—to cheer on the varsity squad for her senior year. “Kelsey worked extremely hard to get back to the skill level she was at prior to her injury,” Johnson says. “Kelsey is known as a talented and gifted gymnast among her peers, and to get back to that level was a long and difficult process that she hoped would pay off in the end.”

The sports medicine team at GMC was successful. To Kelsey’s relief, Dr. Cullen released her in time to attend summer cheerleading camp in May 2007. “Dr. Cullen and his team didn’t just care about fixing my knee,” Kelsey says. “They truly wanted me to cheer again.” To her delight, she was a varsity cheerleader for the kickoff of North Gwinnett’s football season in 2007.

Although Kelsey’s injury put her on the sidelines for her first year on the varsity squad, it also gave her a year to understand what an injured person must go through, and how hard the road is to recovery. In Kelsey’s words, she was inspired to help others. And, she felt lucky to be able to be as active as she was prior to her injury.

Looking toward the future, Kelsey plans to enroll in a sports medicine program. “I want to be a trainer or physical therapist,” Kelsey says. “That way, I can help others get back on their feet, just like Dr. Cullen and the sports medicine team at GMC helped me.”

Cheering from the sidelines
“Kelsey was a positive leader from the sidelines,” says Kathy Johnson, Kelsey’s varsity cheerleading coach at North Gwinnett. “She helped the other girls whenever possible.” Kelsey was known as the “cooler girl” because she sat on the cooler throughout the season, encouraging her fellow cheerleaders. For nearly seven months, Kelsey went through weekly rehab sessions in Duluth to strengthen her knee so that she might cheer again. “I thought of it like a game,” Kelsey says.

Following an ACL tear and treatment by Mark Cullen, M.D., Kelsey Hoffman returned to the sport she loves most—cheerleading.

Prevention in practice
Both Mark Cullen, M.D., and Gwinnett Medical Center support Sportsmetrics training to decrease ACL and serious knee injuries in women. Sportsmetrics is a scientifically proven program that improves jump and landing mechanics to minimize risk of serious knee injuries.

Kelsey Hoffman completed this program prior to returning to full cheerleading activities at North Gwinnett High School. GMC Sports Medicine encourages all female athletes to consider this program to decrease their risk of injury and improve their sports performance.

For more information on Sportsmetrics at GMC, call Gwinnett SportsRehab at 678-312-2803.
Too many people think of heart disease as being only a killer of men. But if you’re a woman, taking care of your heart is more important than you might know. Heart disease is, in fact, the No. 1 killer of men and women—both in Gwinnett and nationwide.

But there is good news: Heart disease can often be prevented.

Go Red for Women is the American Heart Association’s nationwide movement that celebrates the energy, passion and power of women to band together and wipe out heart disease. Thanks to the participation of millions of people—from across the country and right here in Gwinnett—the red dress and the color red have become linked with the ability all of us have to improve our heart health and live longer, stronger, healthier lives. Spreading the Go Red for Women message to “love your heart” raises awareness of heart disease and empowers women to reduce their risk by learning the steps to prevent it.

Encouraging women to go red in their own fashion is about finding a personal way to take part in the fight against heart disease in women. Whether it’s visiting your healthcare provider, eating a healthier diet, increasing your exercise, purchasing products that support the cause, supporting the HEART for Women Act or wearing red on Feb. 1 for National Wear Red Day, you can do something special to love your heart.

“There are many things women can do to prevent heart disease,” says Sheila Woodhouse, M.D., a cardiologist at Gwinnett Medical Center. “Education is the key to winning this battle against the deadliest disease in America.”

First, learn that heart disease is the No. 1 killer of American women.

Next, live by understanding the importance of eating a diet low in cholesterol, or getting

5 simple ways to love your heart

It’s not hard to reduce your risk for heart disease. Start today with small, simple actions like these:

1. CELEBRATE WITH A CHECKUP. Let each birthday remind you that it’s time for your yearly checkup and a talk with your doctor about how you can reduce your risk for heart disease.

2. GET UP OFF THE COUCH. Step, march or jog in place for at least 30 minutes most days of the week—you can even do it while watching TV.

3. QUIT SMOKING IN FOUR STEPS. Can’t go cold turkey? Cut the number of cigarettes you smoke each day in half; then cut that number in half; cut it in half again; finally, cut down to zero!

4. DROP A POUND OR TWO. Cutting out just 200 to 300 calories a day—about one candy bar’s worth—can help you lose up to two pounds per week and gradually bring you closer to a heart-healthy weight.

5. BECOME A SALT DETECTIVE. Check out the Nutrition Facts panel on packaged foods to see how much sodium (salt) they contain. Aim for a total intake of no more than 2,300 milligrams (about a teaspoon of salt) per day.

Gwinnett Medical Center wants you to

love your heart
When you join the Go Red for Women movement, you become part of the fight against heart disease. Your involvement can help save lives of mothers, sisters, aunts, daughters, grandmothers, best friends and other women just like you!

Signing up is free, and you’ll get these great Go Red for Women benefits:

- A red dress pin that you can wear proudly to show you are part of the Go Red for Women movement.
- A monthly e-newsletter filled with heart-healthy tips, events and programs, news, recipes, promotions and more.
- Access to Go Red merchandise, special member programs and local events.

For more information about Go Red for Women, please call 678-224-2000 or visit goredforwomen.org.

30 minutes of exercise a day and understanding our risk of developing cardiovascular disease. This is where the Go Red Heart Checkup comes in. The free evaluation of overall heart health can help us now and in the future.

Love your heart by knowing your numbers, assessing your risks and working with your doctor to significantly reduce your chances of getting heart disease tomorrow, next year or 30 years from now.

How does it work? First you need to know your numbers or general ranges (blood pressure; total, LDL and HDL cholesterol; triglycerides; fasting glucose; height, weight and waist circumference). Next, you can assess your heart risk using the Go Red Heart Checkup personal heart-health assessment. Finally, work with your doctor to reduce your risks and chart a path to lifelong heart health.

Every woman counts! Join more than 300,000 other women and take the Heart Checkup. You’ll know your numbers and help us reach ours: One million women! Visit goredforwomen.org and take the Go Red Heart Checkup today!

**go red in your own fashion**

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**open heart at GMC**

GMC is seeking to bring open heart services to Gwinnett. Support the cause at OpenHeartGwinnett.org.
Whether you’re receiving trauma care in the emergency department or getting ready for surgery, you can have a positive impact on the care you receive. How? By being an active member of your healthcare team and taking part in every decision about your care.

Keeping patients safe is the top priority in Gwinnett Medical Center’s proven track record of high-quality care. Our physicians and staff practice evidence-based safety precautions to prevent mistakes from happening. Building a culture of safety at all levels of our organization has enabled us to discover new and better ways to provide safer, more effective care.

Some of the ways we’re doing that include:

- **Conducting a time-out.** Prior to any invasive or surgical procedure, each patient’s surgical team conducts a verbal and written double-check of every aspect of a patient’s care plan before proceeding.
- **Embracing new technologies.** Our pharmacy robot, with a 99 percent accuracy rate, controls the drug dispensing process, and the automated medical dispensing machines on patient floors offer fast access when patients need medications.
- **The right medication to the right patient.** Bar-code technology ensures that patients receive the right medications in the right dosage amounts at the right times.
- **Adopting nationally recognized best care practices.** By continually improving caregiver education and communication, a safer healthcare environment is created.

Gwinnett Medical Center goes the extra mile to provide the safest environment possible.

**improve your own care**

You can make your care safer and more effective by speaking up if you have questions or concerns. It’s your right! Here are some ways to be safe and informed:

- Keep and bring a list of all the medicines you take.
- Ask why you need a test or treatment. You have a right to know how it will help you.
- Ask about the results of your tests.
- Make sure you know exactly what will be done if you need surgery.
- Confirm that you are receiving the correct treatments and medicines.
- Tell your doctor about any allergies and adverse reactions you have had to medicines.
- Make sure the healthcare providers involved in your care have important health information about you.

Research shows that patients who are more involved in their care tend to get better results. You have the power, so use it to make a positive difference in your care.
any cost, you can see how easily an unhealthy relationship with food begins," Covey says.

Eating disorders can start with preoccupations with food and body weight and quickly escalate to controlling food to compensate for overwhelming emotions. Dieting, binging and purging can seem harmless enough, but these activities can lead to major damage to physical and emotional health.

Anorexia nervosa and bulimia nervosa are the two most common eating disorders, but many exhibit characteristics of either or both. While treatment is available, recovery can be a painfully slow process, underscoring the importance of prevention.

The first step of prevention is knowing the warning signs of eating disorders. “Normal eating simply means eating when you’re hungry and stopping when you’re full. All foods fit into a healthy diet,” Covey says.

The second is not to criticize or dwell on eating, weight or appearance. Instead, consult a primary care provider to make sure your child’s health is not at risk. Be firm and remind yourself that you are responsible for your child’s well-being. wv

warning signs
Eating disorder warning signs include:

• Fear of eating or becoming fat
• Constant dieting, skipping meals or refusing to eat entire food groups
• Very unhappy with size or body shape
• Exercising to an extreme
• Weighing multiple times per day
• Using laxatives or vomiting to lose weight

“The other day, a client came in and told me she had skipped lunch every day to restrict her calories for weight loss. She even said she’d formed a support group of friends with the same goal,” says Renee Covey, R.D., L.D., CDE, of the Diabetes & Nutrition Education Center at Gwinnett Medical Center. “They ignored the hunger signals from their bodies and praised each other for allowing no food to pass their lips. She believed this was a simple plan for weight loss. In reality, my client was severely underweight, already diagnosed with anorexia nervosa, and only 11 years old.”

Approximately 7 million women and 1 million men have been diagnosed with an eating disorder in the United States. Of those, 86 percent were diagnosed by age 20, but the range includes ages 6 to 76. Studies show that 50 percent of girls in first through fifth grades are already dieting to lose weight.

Dieting is one of the most powerful triggers for eating disorders. “In an environment where the ever-increasing focus is on the desire to be thin at any cost, you can see how easily an unhealthy relationship with food begins,” Covey says.

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eat right!
The registered dietitians at GMC’s Diabetes & Nutrition Education Center provide nutrition counseling for eating disorders. For more information, call 678-312-7660.
A woman's body is different from a man's. Even deodorant commercials have realized this fact with catchy advertising slogans. Sometimes, to fit a need, things just need to be different.

Medical technology has taken a giant step in realizing this difference as well. Women with the need for knee replacement surgery now have the option of an implant that sports a thinner profile, allowing for more natural movement of the kneecap. The new "gender knee" also has a shape specially contoured for women—an exclusive design that prevents the implant from overhanging the bone, causing discomfort or damage to surrounding tendons and ligaments.

"The contours match the narrower shape of a woman's knee, allowing a precise fit," says Todd Zeigler, M.D., of Gwinnett Orthopedics. "The distinctly different knee anatomy of women frequently results in a different angle between the hip and knee, compared to men. The women's knee implant takes this difference into account and allows for more natural movement."

**know your knees**

Your knees are the largest joints in your body. They're also a complex network of bones,

Brenda Wallington of Buford was Dr. Zeigler’s first gender knee recipient, receiving her knee replacement in February 2007. "I was up and walking two days after the surgery,” says Wallington. "I actually prefer my new knee to my other one now—it’s much stronger."
cartilage, ligaments, muscles and tendons that must work together to keep your knees flexible and free of pain. When any part of this structure is compromised, pain is your first sign of trouble.

The No. 1 cause of knee pain is arthritis, and around 40 million Americans cope with its effects. Arthritis may be caused by an injury, a disease or simply the passing of time. “There are more than 100 diseases that can be put in the arthritis category, and they all cause pain, stiffness and swelling from inflammation in or around joints,” Dr. Zeigler says.

quick fixes
By making some lifestyle changes, you can have a positive impact on your knee pain. Consider these tips:

• EXERCISE. Establish a daily fitness routine to keep yourself moving and to help your knees stay flexible.
  This may help reduce your pain, improve your movement, cut down on fatigue and help you feel better.
• CONTROL YOUR WEIGHT. By reducing the stress on your joints, you can help reduce your knee pain.
• PACE YOURSELF. Don’t go overboard. Try to alternate physical activity with rest to protect your knees from repetitive tasks.
• USE HEAT AND ICE. Hot or cold compresses may give you short-term relief from stiffness and pain.
• PROTECT THOSE JOINTS. You can avoid extra stress on your joints by walking with a cane or avoiding heavy lifting to guard against joint degeneration.
• BUILD SELF-HELP SKILLS. Learn ways to cope with the emotional effects of arthritis by talking with family and friends about your feelings, doing mental exercises or joining a local arthritis support group.

picture of pain
Your orthopedist will use X-rays and magnetic resonance imaging (MRI) to determine the source of your knee pain. Knee X-rays provide a two-dimensional picture of the bones in the knee and can detect broken bones, bone fragments or late-stage osteoarthritis. An MRI uses magnetic waves to stimulate knee tissues to produce signals that are picked up by a scanner and analyzed by a computer to create cross-section views. MRIs are very helpful in finding damage, disease or inflammation of soft tissues like ligaments and muscles.

added relief
There are many over-the-counter and prescription drugs that can help relieve knee pain and help you sleep. Still others can actually change the way arthritis affects your body. Medications that are effective in relieving knee pain include aspirin-free pain relievers, anti-inflammatory drugs and sleep medications.

by the numbers
Every year, more than 400,000 people undergo knee replacement surgery worldwide. The procedure is considered routine, and 90 percent of those who have the surgery see an improvement in knee pain and function. While most knee replacement patients are between the ages of 65 and 70, people of all ages have knee replacement surgery. For those with severe pain or advanced joint disease, knee replacement surgery is very successful in relieving pain and restoring knee function.

the big step
The effects of injury, arthritis or infection can take a toll on your knees. When the cartilage is damaged and bones grind against each other, joint stiffness, inflammation and pain can increase significantly.
  “If walking or doing simple activities such as getting dressed is difficult, it’s probably time to think about knee replacement surgery,” says Dr. Zeigler. “We’ve been very pleased with the success of the gender knee implant in relieving pain and restoring joint function. Women who receive the gender knee implant typically have a smaller scar, a shorter stay in the hospital and a quicker recovery.”

find a surgeon
To find an orthopedic surgeon specializing in gender-specific knee replacements at GMC, call HealthLine at 678-442-5000, or visit gwinnettemedicalcenter.org and click “Find a Doctor.”
interventional radiologists at Gwinnett Medical Center help treat cancer and save lives. here's one woman's story

“The unknown is what we fear. It hit me so hard. I had no idea, because no one in my family ever had it.”

That was the response that Joanne Strichard gave when asked how she felt after being diagnosed with colon cancer five years ago. Joanne's story is one with a happy ending, because of two lifesaving procedures offered by Gwinnett Medical Center’s interventional radiology department.

*the battle with colon cancer*

Within days of her diagnosis, Joanne underwent an emergency surgical resection colostomy, in which David Schmidt, M.D., removed the diseased portion of her colon. Following the procedure, Joanne required the use of a colostomy bag for the next three months. “That bag didn't slow me down! I still went on my two-week Alaskan cruise,” she says.

Following the use of the colostomy bag were 18 treatments of chemotherapy at three to four hours each, overseen by

Joanne Strichard meets with James York, M.D., an interventional radiologist at GMC, who used both radiofrequency ablation and cryoablation to destroy her tumors.
on

amazing interventions

There are several advantages to interventional radiology. Here are a few of the most common:
• Procedures do not require large incisions; they are usually performed through a small nick the size of the lead tip of a pencil.
• Since there is no open surgery, there are no large scars following the procedures.
• Most procedures can be performed on an outpatient basis or require only a short hospital stay.
• General anesthesia is not usually required.
• Risk, pain and recovery time are often significantly reduced.
• The procedures are sometimes less expensive than surgery or other alternatives.

Alexander Saker, M.D., an oncologist at Suburban Hematology and Oncology.

After these treatments, Joanne required follow-up CT and PET/CT scans every three to six months to be sure that the cancer did not return. To her dismay, in May 2005, she was told that the colon cancer had spread to her lungs. Four nodules were found, two on each lung.

※ an intervention at GMC

Dr. Saker referred Joanne to James York, M.D., an interventional radiologist at GMC. After spending four years at MD Anderson Cancer Center in Houston, Dr. York became dedicated to bringing the latest interventional oncology treatments to the Gwinnett community. His treatment plan for Joanne included a relatively new therapy for cancer in which tumors are destroyed, or “ablated”—radiofrequency ablation (RFA).

The nodules were treated with RFA over six months. In this procedure, radiofrequency energy, a form of electrical current that is safely tolerated by the human body, is supplied by a generator, which is attached to a needle electrode. The needle electrode is inserted through a tiny nick in the skin and placed in the proper position using CT imaging guidance. The needle has tines on the end, which spread out when inserted into the tumor. When the generator is turned on, the radiofrequency energy is passed from the tines of the electrode into the tumor. Heat is created, destroying the tumor. Over time, the body absorbs the destroyed tumor cells.

Joanne was again considered cancer-free for two years, until June 2007 when two additional nodules were found. One nodule was treated with RFA, but because of the proximity of the second nodule to her rib, it was treated with a similar procedure called cryoablation.

※ ice or heat?

Dr. York elected to use cryoablation to destroy the remaining nodule because use of energy and heat could cause permanent damage to the tissue surrounding her rib. Cryoablation uses freezing temperatures to destroy diseased tissue. Similarly to RFA, a cryoprobe is inserted through a small nick in the skin. The cryoprobe is attached to a source of nitrogen or argon, which super-cools the tip of the probe. The probe is then placed in the proper position using CT imaging guidance, and the cancerous cell is frozen until it is destroyed.

In Joanne’s case, Dr. York chose to use cryoablation because it allowed him to see the sharp line of the ice and took it right up to the critical structure without harming it. In contrast, when heat is delivered to tissue it can cause permanent damage to the surrounding tissue. “Mrs. Strichard was a great candidate for both radiofrequency and cryoablation treatments due to the relatively small size of her nodules,” Dr. York says. “She did fantastic throughout all of her treatments.”

The procedures left Joanne Strichard free of cancer, without needing the chemotherapy or radiation treatments. Should more nodules appear in the future, she has the option to undergo the same lifesaving procedures again. Joanne credits her family, friends, cats and mostly her faith for giving her the strength to get through this time of illness. She says she has made many friends at Gwinnett Medical Center.

“I can’t say enough about my doctors and Gwinnett Medical Center,” she says. The radiology team was wonderful. Nothing upset me and I credit my well-being to my faith in Dr. York.”

interventional radiology at GMC

Gwinnett Medical Center’s interventional radiologists are board-certified physicians who specialize in minimally invasive, targeted treatments that are performed using image guidance. Interventional radiologists use their expertise in reading medical images to guide small instruments through blood vessels or other pathways to treat disease.
Gwinnett Medical Center – Duluth celebrates a legacy of giving at its one-year anniversary

Gwinnett Medical Center – Duluth, which opened last fall as north Atlanta’s first all-digital hospital, celebrated its first anniversary on Oct. 18, 2007. The 81-bed facility replaced the more than 60-year-old Joan Glancy Memorial Hospital, which was the first hospital in Gwinnett County.

“GMC – Duluth has been a major success, showing the community just a glimpse of what we’re aiming to do through Project PATH,” says Phil Wolfe, president and CEO. “A great community hospital, Joan Glancy Memorial Hospital took its caring nature and has become one of the finest modern health-care facilities in the Southeast. We have even bigger plans, but a great deal of the success of GMC – Duluth is due to the support we’ve gotten from Gwinnett.”

Community members and associates celebrated this milestone as Legacy Campaign donors lauded the philanthropic support that helped build the facility. Those in attendance praised the one-year-old hospital, many saying what a benefit it was to the area.

A highlight of the event was the unveiling of the permanent capital campaign marker, which will stand in the lobby to recognize Gwinnett Medical Center Foundation’s generous donors of $10,000 or more to the Legacy Campaign. The campaign was named to represent the caring and giving that have been such a part of the healthcare in the community since the closing of Joan Glancy Memorial Hospital.

“As chairman of the Legacy Campaign Committee, I want to give my thanks to those who have given so generously to this campaign,”

by the numbers

Compared with 2006 numbers from Joan Glancy Memorial Hospital, GMC – Duluth has shown major statistical increases in its first year, including a:

- 44 percent increase in patient days (22,696)
- 76 percent increase in admissions (2,577)
- 61 percent increase in inpatient surgeries (961)
- 70 percent increase in laboratory tests (234,601)
- 58 percent increase in cardiology procedures (16,762)
On the one-year anniversary of GMC – Duluth, Kathryn Parsons Willis, GMC board member, stands with Miles H. Mason, III, M.D., president of the GMC medical staff, at the unveiling of a marker to recognize major donors that helped the hospital become a reality.

says Miles H. Mason, III, M.D. “The donors have been instrumental in helping to continue the legacy of caring that built the county’s first hospital over 60 years ago.

“As a physician, I’ve been able to see first-hand the great care provided day in and day out at GMC – Duluth,” Dr. Mason says. “I can honestly say that this hospital is providing the best care that can be found anywhere. This is a hospital that the people of Duluth and Gwinnett County deserve and will meet the healthcare needs of this generation and the next.”

GMC – Duluth was the first step of Project PATH, GMC’s vision to transform healthcare in Gwinnett County. A year later, as a new patient tower is being built in Lawrenceville and the hospital is seeking to provide open heart services, the impact in Duluth is clearly visible.

“We’ve had a fantastic first year,” says Lea Bay, administrator of GMC – Duluth. “Since the day we opened, we’ve heard a tremendous amount of positive feedback for the care provided by our outstanding staff and physicians in this beautiful 21st century hospital. We have successfully combined the latest medical technology with the family atmosphere from the days of Joan Glancy Memorial Hospital.”

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donors to the Legacy Campaign

**Gifts of $250,000 or more**
- Jim & Billie Ellis
- Henry & Barbara Howard

**Gifts from $100,000 - $249,999**
- The Brand Banking Company
- Frances Wood Wilson Foundation
- Scientific Atlanta Foundation
- SunTrust Bank

**Gifts from $50,000 - $99,999**
- James & Jeanine Gullett
- Gwinnett Community Bank
- Dr. Miles H. Mason, Ill
- The Peachtree Bank
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Most major events in our lives require planning, including:

- Selecting a school
- Planning a wedding
- Buying a home
- Taking a new job

Having a child is one of the biggest decisions you will ever make and one that will affect the rest of your life, as well as the life of your new arrival. Through Gwinnett Medical Center’s Preconception Workshop you can learn steps to give your baby the best possible start in life.

❖ topics covered include:
- Achieving optimal health
- Preconception nutrition
- Fitness
- Reducing risks of problems with conceiving
- Other complications
- Preparation for parenting and beyond

How ready are you for children? Discover what changes you need to prepare for in your lifestyle, priorities, responsibilities and how those changes will fit in with the others in your life.

❖ financial aspects
Your baby will affect your income and expenses. Things to consider as you prepare include your leave policy at work and changes in your health insurance.

❖ selecting obstetrical care
Considering an obstetrician or midwife? Are you at high risk? Know your options and what is right for you.

To find out when the next Preconception Workshop is offered, call 678-442-5000, or visit the “Classes and Events” section at gwinnettmédicalcenter.org.

To find more upcoming community offerings from Gwinnett Medical Center, visit the Classes and Events section at gwinnettmédicalcenter.org.
When you're giving it all you've got on the court and putting everything on the line, injuries can be a common occurrence. Gwinnett Medical Center provides physicians for Gwinnett County schools to keep local athletes healthy and at the top of their game.

When injury strikes, our plan is to provide you with the highest quality of care to get you back in the game. From diagnostic testing to rehab, Gwinnett Medical Center has a team of expert healthcare professionals to serve you.

Your Game - Our Plan.