

Health Matters



The Magazine of Augusta Health

Out of the Rough

How one man came back from heart failure to enjoy life on the links again / **16**

William T. McIntyre is playing golf again, thanks to the team at the Augusta Health Heart Failure Clinic.

Augusta
Health

Winter 2022

Heart Disease Demystified
Get the facts in our Q&A
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Try This: Meditation
Learn how in 5 steps
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MY THOUGHTS

Happy Heart Month!

Welcome to the first issue of *Health Matters* for 2022. February is National Heart Month, and we have filled this issue with tips and stories of cardiac care to celebrate this important topic.

On page 4, we delve into some of the most common questions when it comes

We're proud to introduce a new design for *Health Matters* that reflects the brand refresh.

to heart disease. There are many misconceptions about heart disease risk and what's healthy for your heart. Read our FAQ to get the facts. On page 10, you'll find a beginner's guide to meditation, a free and simple practice to add to your routine that has a host of benefits for your heart and mind.

On the cover, local golf enthusiast William McIntyre is happy to be back on the links doing what he loves. But not long ago, William was battling heart failure. He shares how the Augusta Health Heart Failure Clinic saved his life and got him back on the golf course on page 16.

Also in this issue, you'll meet Jim Hodge, a man who spent more than 100 days battling and recovering from COVID-19. Jim's story is both harrowing and inspiring, and the team at Augusta Health is proud to have helped him get

healthy and back home with his family.

We'll also introduce you to one of the newest faces at Augusta Health, sports medicine physician Joe O'Brien, DO. Although it might sound like he works exclusively with athletes, Dr. O'Brien has already helped patients overcome pain and injury to get back to noncompetitive activities—like crocheting. Get to know Dr. O'Brien on page 22.

On page 25, you'll get an in-depth look into the new Breast Care Center, which will be opening within our Outpatient Pavilion, scheduled for completion at the end of the year. We're excited to offer cutting-edge technology and welcome three fellowship-trained radiologists to our community.

Finally, you likely noticed that this issue looks quite different from the last. We're proud to introduce a new design for *Health Matters* that reflects the brand refresh we announced for Augusta Health last fall. We hope you enjoy the new look and, as always, learn something new to help you live a healthier, happier life.

Thanks for reading,

Mary N. Mannix, FACHE
President and Chief Executive
Officer, Augusta Health

Health Matters

The Magazine of Augusta Health

- THE MAGAZINE OF AUGUSTA HEALTH**

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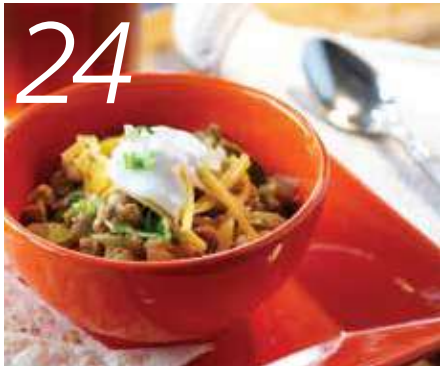
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The information contained herein is not a substitute for professional medical care or advice. If you have medical concerns, seek the guidance of a healthcare professional.

Health Matters aims to connect the community with healthcare experts within Augusta Health to learn more about issues that may be affecting your health. If you are not receiving Health Matters, you can view it or request to be added to the mailing list at augustahealth.com/health-matters.



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In the last issue of Health Matters, an article incorrectly stated that the liver produces insulin in the body. The pancreas produces insulin. We regret this error and any confusion it may have caused.

COLD Heart Facts

Vascular

When it comes to heart disease, there are a lot of misconceptions about what is healthy for your heart and what impacts your risk. Here we dispel some of the most commonly misunderstood notions about heart disease and heart health.

What are some warning signs of heart disease?

Heart disease can have a variety of symptoms depending on the cause. Some of the most common warning signs of heart disease include:



Shortness of breath, even at rest



Nausea and/or indigestion (more common in women)



Feelings of pain, numbness and coldness or swelling in your legs or arms



Extreme fatigue



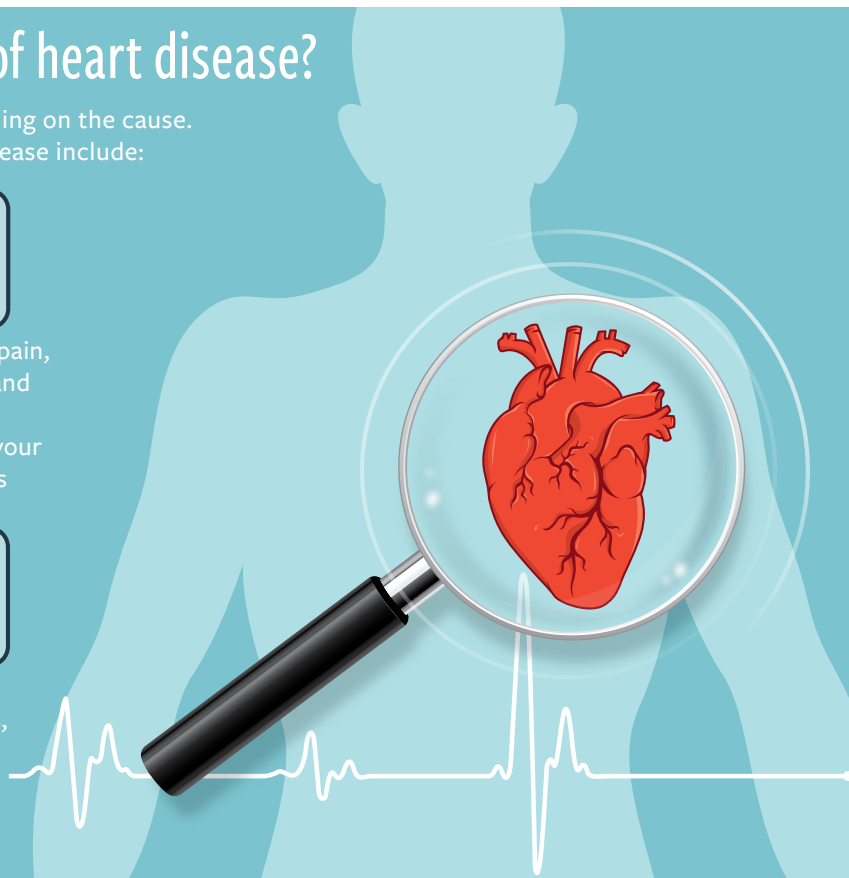
Chest pain, tightness or pressure (more common in men) or fluttering in your chest



Light-headedness, dizziness or fainting



Neck, jaw, upper-abdomen and back pain



Is heart disease reversible?

Heart disease is treatable with lifestyle changes, medication and, in some cases, implantable devices (such as pacemakers) or replacement parts (such as valves). Treatment can help lower LDL (bad cholesterol) levels and regulate blood pressure and heart rhythm, which all lower your risk of heart attack. But when heart tissue is damaged, by a heart attack for example, it cannot regenerate. If the damage causes heart failure, devices or a heart transplant can help restore function.

Can stress cause heart disease?

More research is needed to understand the link between stress and heart disease, but we know that stress can increase your heart rate and blood pressure, which may raise your risk of heart disease. Some people cope with stress by smoking, consuming alcohol in excess, overeating or eating a poor diet, which all increase the risk of heart disease. Stress is a natural part of life, but your doctor can help you find ways to manage your stress and healthy coping strategies.

Does smoking increase your risk of heart disease?

Yes. Smoking is a major risk factor for heart disease, and according to the World Health Organization, it is the cause of 20% of heart disease deaths. Smoking increases the buildup of plaque in arteries, narrowing them and restricting blood flow. It can also thicken the blood, increasing the risk of clots.

Does being overweight increase your risk of heart disease?

Yes. Excess body fat can add to your risk of heart disease in a few ways. People who are overweight can struggle with high levels of bad cholesterol and reduced levels of good cholesterol. The excess weight can also increase their blood pressure. Being overweight also puts you at risk of diabetes, a disease that can make you five times more likely to have a heart attack.

If a person doesn't smoke and their cholesterol is within normal limits, what impact does their family history of heart attack have on their risk?

People who have a first-degree relative (parent or sibling) who had a heart attack at a young age (before 55 for men and before 65 for women) have an elevated risk of heart attack and stroke. Also, overall cholesterol is not the whole picture; if you have high LDL levels, and low HDL levels are bringing down your total, that is not a healthy balance.

Is heart disease hereditary?

Some heart conditions can be inherited. If you have a family history of heart disease, talk to your doctor about screening and prevention, so you can make a plan to manage your risk. It's difficult to calculate the impact that a family's genetics and shared lifestyles play in their common health conditions. A healthy lifestyle can counteract your genetics to an extent. Not smoking, drinking little or no alcohol, managing your weight, eating healthily and exercising can help keep your risk down.


Is salt bad for your heart?

Salt is an essential mineral to our bodies, but too much salt can increase your blood pressure. High blood pressure increases your risk of heart attack and forces your heart to work much harder. Even if you don't have high blood pressure or heart disease, Dietary Guidelines for Americans recommends limiting your salt intake to 2,300 mg per day (about a teaspoon of table salt).

Will taking an aspirin a day reduce your risk of heart disease?

A doctor may prescribe daily aspirin for someone with elevated risk for heart attack or stroke or someone who has already had a heart attack or stroke because aspirin has been shown to reduce the risk of these cardiac events. Aspirin disrupts the blood's clotting function, reducing the chances of a clot preventing blood from getting to the heart (heart attack) or the brain (stroke). There is a slight risk of brain bleeding with aspirin, so if you have not had a heart attack or stroke, don't take daily aspirin without your doctor's guidance.

Is red wine good for your heart?

The science of whether red wine is beneficial to your heart is indefinite. Red wine has antioxidants, which are thought to raise your good cholesterol levels, however, this benefit is lost if you drink wine in excess. The antioxidants found in wine can be found in other foods and supplements. If you decide to drink, and your doctor has not advised against it, you should drink in moderation, which is equal to one drink per day for women over 21 and men older than 65 and two drinks per day for men ages 21-65. 



Smoking is the cause of **20%** of heart disease deaths.

To make an appointment with a cardiologist or schedule a vascular disease screening, call (833) AHC-HLTH, or learn more at augustahealth.com/heart.

Healthy Living After a



Vascular

According to the American Heart Association, about one in five people who have had a heart attack will be readmitted to the hospital for a second one within five years. Even though you may feel better after recovery, having a heart attack significantly raises your risk for having another. That's why it's imperative for those who have suffered a heart attack to strive to live a healthy lifestyle after the event. Here are a few ways to begin that journey.

Lifestyle changes

The best way to lower your risk for another heart attack is to adjust your everyday routine. Adopting a heart-healthy diet (find tips on page 8) and switching up your exercise routine to include physical activity that helps your heart (get ideas below) are great ways to safely improve your

iStock.com/Courtney Hale/justinroque

Exercise for Your Heart

Fitness

Maintaining a healthy weight is essential for maintaining your heart health. The American Heart Association recommends that adults get at least 150 minutes per week of moderate-intensity aerobic exercise, 75 minutes per week of vigorous aerobic activity, or a combination of both spread throughout the week.

Molly Daniels, an exercise specialist at Augusta Health, says that increasing your physical activity may lower your risk of developing high blood pressure, stroke and heart attack. Here are some workout ideas to get you moving:

AEROBIC EXERCISE



Daniels suggests including 20 to 30 minutes of aerobic exercise in your workout schedule, two to three days each week. "Aerobic exercise, or cardio, is any exercise that increases your heart rate and breathing rate," she explains. Cardio helps to lower blood pressure and resting heart rate by improving circulation. There are several aerobic exercises that you can choose from, such as:

- walking
- running
- jumping rope
- biking
- swimming

"Start by exercising at a moderate intensity in which you are able to carry on a conversation, but not able to sing," Daniels says.

Heart Attack

cardiovascular health. Along with these recommendations, practicing mindfulness and meditation (learn how to meditate on page 10) can lower stress and, in turn, lower your risk of heart attack. According to a study published in the *Journal of the American Heart Association*, people who meditate regularly have lower cholesterol, more regulated blood pressure and less chance of heart disease than those who do not.

Counseling and support

Having a heart attack may bring up thoughts and emotions you have never experienced before. A cardiac event is a serious health concern, so you may be feeling uneasy about what the future holds. If you are experiencing elevated stress levels or feel wary about life after a heart attack, you are not alone. If you need assistance, ask your primary care

physician about recommended support groups or counselors who can help ease your stress. The American Heart Association also helps those who are dealing with the aftermath of cardiac events—both survivors and caregivers.

Don't skip care

Those who've suffered a heart attack can't afford to become complacent or lax with their personal healthcare. This means following your doctor's orders and advice, attending all scheduled follow-up appointments and taking the medications prescribed to you by your healthcare provider.

You may see an increase in the volume of medicines you must take daily. It may become confusing to keep track of the days, times and number of pills needed to ensure your heart is healthy. To assist with this, the American Heart Association offers a medication chart to help you keep track of all the details of your new regimen. [A](#)

To make an appointment with a cardiologist call (833) AHC-HLTH, or learn more at augustahealth.com/heart.

STRENGTH TRAINING



Strength training, or resistance training, can help reduce body fat and create lean muscle mass. "Strength training should be performed at least two times per week, on non-consecutive days," Daniels says. "For strength training, you might include weightlifting and resistance bands. Complete two to four sets of 10 to 15 repetitions of each exercise." She recommends starting with low resistance and light weights if you've experienced a recent cardiovascular event.

Daniels urges more people to aim for making exercise a lifelong habit. "Consistency is the key to reaping the full benefits of exercise," she explains. "Meeting these exercise guidelines weekly can be challenging and may seem overwhelming. Try to make small changes over time. Keep in mind that your goals should be attainable and realistic."

INTERVAL TRAINING



Interval training is a specific method of completing sets of aerobic exercises. While interval training, alternate between less-intense activity for long intervals and short bursts of high-intensity, where your heart reaches its maximum heart rate zone. You can find your maximum heart rate by subtracting your age from 220. Continuously switching between raising and lowering your heart rate burns calories, improves vascular function and helps the body clear fat and sugar from the blood. "Interval training is highly effective for fat loss," Daniels says. [A](#)



Molly Daniels,
Exercise Specialist

Eat Hearty!

Nutrition

No plan to achieve heart health would be complete without a healthy diet. Considering your heart with every bite you take can increase longevity, prevent disease and reverse cardiovascular conditions. Augusta Health Clinical Coordinator for Outpatient Diabetes and Nutrition Education Caroline Hackley and Outpatient Dietitian Kathryn Berger offer their expert advice on snacking healthier and how to maintain a heart-focused eating plan.

1. Fill up on fruits and veggies

Hackley says this is her No. 1 tip for heart-healthy eating. “Especially leafy greens,” she says. “They protect the arteries, promote proper blood-clotting, contain lots of fiber and can help improve blood pressure.” Berries are another winner, boasting high levels of antioxidants that can protect against stress and inflammation. Whether fresh or frozen, fruits and vegetables are great choices.

2. Ditch processed foods

The key to a healthy diet is eating things in their natural, unprocessed

form. “Add in whole grains, especially oats,” says Berger. “They contain insoluble fibers that help fill you up and lower cholesterol levels.” Beans are another ideal choice. They are inexpensive, and as a prebiotic they nourish beneficial gut bacteria. As much as possible, skip the sugar (it’s linked to inflammation and obesity), and reduce sodium intake.

3. Swap in ‘good’ fats

Focus on swapping in monounsaturated fats—such as avocado, varieties of nuts and olive oil—and polyunsaturated and omega-3 fats—such as walnuts, seeds and (fresh or frozen) fatty fish like salmon, mackerel, sardines, herring and trout. Try to avoid saturated fats from animal products like red meat and dairy, and trans fats, such as vegetable shortening, which are highly processed, Berger says.


4. Rethink snacking

Quick and easy doesn’t have to mean chips. There are plenty of ways to grab a quick, satisfying snack that is also healthy. “It could be as simple as vegetables and hummus, banana and peanut butter or plain yogurt with berries,” says Hackley.

5. Start slowly

You don’t have to change your entire diet overnight. “Why not try adding a green vegetable to dinner?” Hackley says. To begin transitioning to healthier fats, Berger says to start by cooking with liquid vegetable oil, but still—at first—having some butter on your bread. Or, occasionally swap out ground beef for ground turkey or chicken.

Starting with the plate method—a plate of half non-starchy vegetables, a small portion of protein (not fried or breaded) and a small portion of a starch—can be an easy way to begin that is not too overwhelming. “Any change worth making takes time, and this is going to take time to do it right,” Berger says.

And don’t fret if you stray from your plan. “You always have another day to make another adjustment,” Berger says. “Never, never, never give up.” 



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The CHOLESTEROL Connection

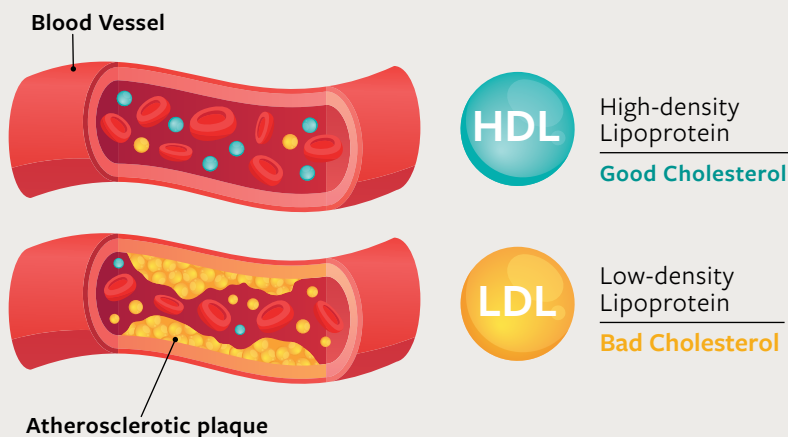
Vascular

When talking about heart health, cholesterol is a common topic. You may have heard that there is “good” and “bad” cholesterol and that cholesterol usually comes from animal products. This is all true, however it doesn’t paint the full picture of what cholesterol is, what it does in your body and how that affects your heart health.

According to the American Heart Association, cholesterol is a waxy substance that your body uses to build cells and make vitamins and hormones. It is naturally produced by your liver, and your liver actually produces all of the cholesterol you need to live. Additional cholesterol in your body comes from the foods you eat (and some liquids you drink, like milk).



Types of Cholesterol



The Good, the Bad and Your Arteries

The two types of cholesterol are low-density lipoprotein (LDL) and high-density lipoprotein (HDL). HDL is the “good” cholesterol, and LDL is the “bad” cholesterol. They are often referred to like this because you want a higher HDL level and lower LDL level. HDL cholesterol removes excess cholesterol from your system by bringing it back to your liver while LDL cholesterol increases the cholesterol in your body, creating potential heart issues.

When you have too much cholesterol in your body, it can accumulate in your arteries. This can reduce the flow of blood through your body and increase your risk for coronary artery disease, which can cause issues such as chest pain, heart attack or stroke.

Cholesterol in Foods

Elevated cholesterol in your body is connected to many of the same issues that increase your risk for heart disease in general: inactivity, obesity and an unhealthy diet. Foods with saturated fats generally make your cholesterol increase. These fats are most often found in animal and dairy products like red meat, butter and cheese; however, they can also be found in plant-based oils such as palm or coconut oil.

If you have a diet high in these foods, or other risks for heart disease, talk to your doctor about your cholesterol levels. High cholesterol typically has no symptoms, so you may not even know you have it. There are many ways you can manage your cholesterol, including diet and lifestyle changes and medication. The most important thing to do is take the first step and get your cholesterol levels checked. Then, discuss the numbers with your doctor. If they’re too high, your doctor can help you create a plan to bring them down. [A](#)

Try This: **MEDITATION**

Mindfulness

Stress can be damaging to our health and well-being. One way to combat stress, fears and anxiety is by meditating to calm your mind and release tension in your body.

More and more physicians are helping their patients understand that the connections between mind and body have profound effects on things like heart health. When you are stressed, your body releases hormones that prepare your body to react to a perceived threat by raising heart rate and blood pressure, in what is known as the “fight-or-flight” response.

This is a helpful response when faced with physical danger—just as our hunter-gatherer ancestors had to do ages ago. But we can’t really fight or run away from an angry boss or a loved one who needs care, so we need to find a healthy way to bring stress levels down and protect our hearts.

When you first start meditation, you can begin with five-minute sessions and then add time as you become more comfortable with the practice. Setting aside time for meditation every day is also an important goal. [A](#)

Apps to Guide Meditation

There are several apps available to help with your meditation practice. Some have specialized guidance for heart health, depression, chronic pain, sleep health and more.

(Note: Many apps let you get started for free and then ask if you want a paid subscription for additional features.) Here are a few options:


- **Let’s Meditate**
- **Insight Timer**
- **Healthy Minds Program**
- **Calm**

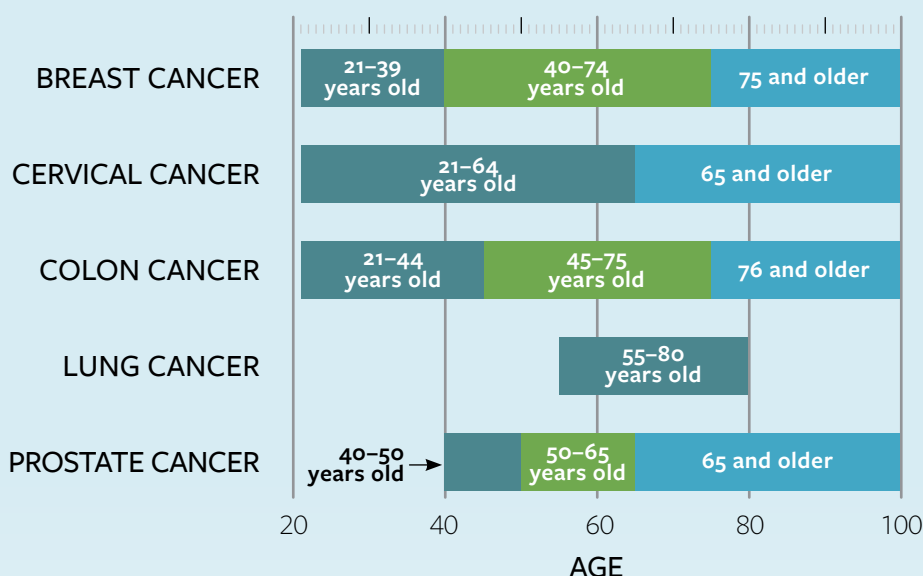
THERE ARE MANY FORMS OF MEDITATION, BUT HERE IS A SIMPLE METHOD FOR GETTING STARTED:



When Should I Get Screened for Cancer?

Health Screenings






Cancer can be a deadly disease, but treatments that help people live longer—and in some cases defeat cancer—continually emerge. No matter the cancer, the best chance for successful treatment relies on early detection. Use this chart to determine when you should start screening for cancer, and talk to your doctor about your risk. 



KEY

- Screening for cancer at these ages is only recommended if you are at elevated risk. Family history of the disease, genetic disorders, age and race can all impact risk.
- Screening is recommended for everyone in these age ranges.
- Screening for cancer at these ages may be right for some people. Talk to your doctor to determine if screenings are right for you.

Make an appointment with a provider to get the screenings you need today. Call (833) AHC-HLTH.

 BREAST CANCER	 CERVICAL CANCER	 COLON CANCER	 LUNG CANCER	 PROSTATE CANCER
All women should be screened for breast cancer from ages 40–74 with annual mammograms. The American Cancer Society recommends a baseline mammogram between the ages of 35–40. After age 75, consult with your doctor about the risks and benefits of continued screening.	All women should have an HPV test every five years or a Pap smear every three years starting at age 21, unless they had their cervix removed for reasons other than cervical cancer or pre-cancer. People with a serious cervical pre-cancer history should be screened for 25 years after diagnosis. People who've had regular cervical cancer testing with normal results during the previous 10 years can stop screening at 65.	Everyone ages 45–75 should be screened for colon cancer. There are multiple testing options. Ask your doctor which test is right for you and how often you need to be screened. Most people can stop screening after age 85.	Starting at age 55, people with a smoking history should talk to their doctors about annual low-dose CT scans for lung cancer. Screening may benefit people who smoke now or have quit within the past 15 years and have a 20 pack-year smoking history.	Men may be screened for prostate cancer at age 40 if they have more than one close relative who was diagnosed with prostate cancer before age 65. All men ages 50 and older should talk to their doctor about the risks and benefits of screening.



Life's riches are treasured by the heart.
Let us take care of yours.





Jim Hodge, right, and his wife, Lee, left, are grateful for Jim's health after a harrowing battle with COVID-19.

Back Home Again

One man's triumphant battle with COVID-19 lasted more than 100 days

Photography/Dominique Attaway



Jim got sick with COVID-19 just weeks before vaccines began being distributed in Virginia.

Intensive Care

Independence Day 2021 was particularly special for Jim and Lee Hodge. The Staunton couple spent the holiday at their family farm in Deerfield, listening to John Denver's "Back Home Again" on the front porch and weeping with gratitude. Only a few months earlier, they didn't know if Jim would survive a battle with COVID-19.

The Diagnosis

Jim contracted COVID-19 in January 2021. He was one of the thousands of Virginians who were hospitalized with the disease. When Lee took Jim to the ER on January 13, and he was admitted to the hospital, the Hodges unknowingly stepped onto what would be a four-month rollercoaster.

Strict visitation protocols were in place, so Jim couldn't have visitors. Lee could only get updates by phone, and she says Jim was anxious, agitated and distressed. He couldn't see because he was unable to wear his glasses while connected

to a CPAP machine. He tried to talk to Lee, but it was difficult to communicate through his mask. Within two days, he was moved to the COVID intensive care unit (ICU).

Doctors transitioned Jim to a ventilator, and for about two weeks, his condition was stabilizing, and his outlook seemed bright. Then his blood pressure dropped, and his kidneys became endangered by the medication needed to raise it. As one of his doctors put it to Lee, "Jim has been skating on thin ice, and the ice is getting thinner," she recalls. But seemingly by a miracle, Jim's blood pressure stabilized on its own.

By mid-February, Jim was no longer contagious with COVID-19, but he was still in a coma and fighting double pneumonia. His doctors were struggling to wake him without his anxiety sending him into a tailspin. "The doctors told me, 'Jim is his own worst enemy,'" Lee says. "I said, 'if he could just see a familiar face and hear a familiar voice, that might help.'"

A Light in the Storm

Lee was permitted to visit Jim in the ICU, and almost instantly, he began improving. “He doesn’t remember I was there, but he responded to me,” says Lee. “He would nod his head, and he would mouth ‘I love you.’”

“If it hadn’t been for Lee being there every day, I don’t know if I’d be here,” says Jim.

In early March, doctors inserted a feeding tube into Jim’s stomach. The procedure was routine, but shortly after, Jim began bleeding from his abdomen—so much so that his blood pressure plummeted, and Lee called their minister, anticipating the worst.

Jim’s doctors thought the source of the bleeding might be ulcers and opened him up to investigate. After surgery, the doctor told Lee the bleeding had spontaneously stopped. They weren’t sure what caused it, but Jim was OK. “To me, that was an act of God,” Lee says.

‘Small Miracles’

Jim has no memory of his time in the hospital from January to March, but from the details his family has shared, he feels incredibly lucky. “There were so many small miracles like that,” he adds.

By early March, Jim had turned a corner, and plans for his rehabilitation began to come together. Jim was transferred to UVA Transitional Care Hospital, and within two weeks, he came off the ventilator. “I remember the day I walked in, and they had put the speaking valve in his throat,” says Lee. “The sound of his voice was music.”

By mid-April, Jim was ready to transition to a skilled nursing inpatient physical therapy program. At first, it seemed like he was bound for a faraway facility in Richmond, but his doctor at UVA decided to postpone Jim’s transfer by just one day, and that was all it took for a spot to open at Augusta Health.

Road to Recovery

Jim checked back into Augusta on April 15, and shortly after, his physical therapy team determined May 14 would be his go-home date. The finish line was in sight. “I was thrilled,” says Lee. “That was only four weeks away.”

It was a tough four weeks. When Jim began physical therapy, he could hardly pick up a pen. His muscles had deteriorated, and he had lost about 70 pounds. “His legs looked like broomsticks,” Lee recalls. But Jim pushed through, doing exercises to regain his strength even in his down time. “I joked with the physical therapist that the nurses upstairs were good to me, but the PTs were good for me,” Jim says.

Homeward Bound

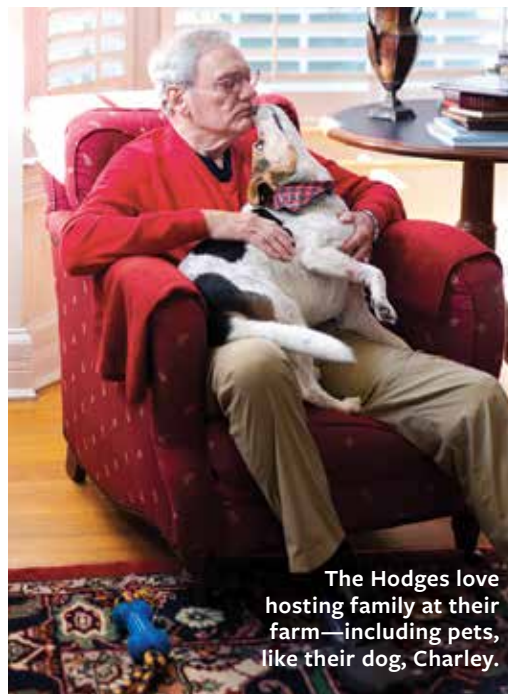
Finally, on May 14, Jim walked out of Augusta Health to the sound of doctors, nurses, therapists and staff cheering

and clapping. As he left, he saw the faces of all the people who had stood by him and his family throughout his journey. “Everyone I came in contact with, from the cafeteria to the security people, was so nice and caring,” Lee says.

In all, Jim spent 121 days in the hospital and rehabilitation.

Today, Jim is almost back to his old self. He still has some mobility issues, and a little bit of lung damage, but his doctor says he is cleared to do anything—“short of running a marathon or trying out for the Olympics,” Jim says. He’s glad to be able to vacation at the farm again, a place that brought tears to his eyes when Lee would show him pictures of it in the hospital. July 4, 2021, was their first visit since Jim’s return from the hospital, but the Hodges are looking forward to hosting many family Thanksgivings there in the years to come. [A](#)

“If it hadn’t been for Lee being there every day, I don’t know if I’d be here.”



The Hodges love hosting family at their farm—including pets, like their dog, Charley.

Make an appointment with a provider today. Call (833) AHC-HLTH.

Out of the Rough

How one man came back from heart failure to enjoy life on the links again

Cardiology



Experts in Heart Failure

The American College of Cardiology (ACC) has recognized Augusta Health for its expertise in treating patients with heart failure. Augusta Health was awarded heart failure accreditation in April 2020. Hospitals that are heart-failure accredited have been able to reduce time to treatment and can identify and predict high-risk patients while also reducing length of stay and hospital readmissions.

William T. McIntyre has been playing golf since he was in high school and has more holes-in-one than most—14 to be exact.

But one of the most meaningful rounds of golf in the 84-year-old Staunton native's career was probably in June 2020, when he and his wife, Ann, hit the links with Augusta Health radiologist Thomas Zumsteg, MD.

That day, McIntyre was awaiting the results of an X-ray, which his primary care provider had ordered to investigate the shortness of breath he had been experiencing. "I thought I had the coronavirus because everyone talked about shortness of breath as one of the symptoms," McIntyre says. "I told Dr. Zumsteg about my symptoms and the X-rays. He said he would read the X-rays, and once he saw them, he said, 'You need to see a cardiologist.'"

McIntyre made an appointment with Tami Collins, nurse practitioner in the Augusta Health Heart Failure Clinic.

"When he came in, Mr. McIntyre had an elevated, irregular heart rhythm, which put him at risk of stroke, and he was not on any blood-thinning medication. I didn't feel he was stable, so I sent him to the emergency room," Collins says.

From the ER, McIntyre was admitted to the hospital, where he met a team of doctors he says saved his life. Cardiologist Lewis Siegel, MD, was on duty when McIntyre arrived. "Mr.

McIntyre came in with atrial fibrillation, which he couldn't tolerate on a long-term basis," Dr. Siegel says. "I formulated a plan to get him back in rhythm and control his heart failure."

Cardiologist Christopher Bunn, DO, applied electrical charges to get McIntyre's heart back into a regular rhythm. About a month after his hospital stay, cardiologist Glenn Brammer, MD, saw McIntyre to insert an implantable cardioverter defibrillator, a device that monitors his heartbeat and delivers an electric shock if it gets out of rhythm.

While he was in the hospital, McIntyre and Dr. Siegel connected over their shared interest in golf—and McIntyre's health. "I try to find something of interest with patients to help ease some of the concern about being in the hospital," Dr. Siegel says. "Mr. McIntyre's a very active guy, so it's always gratifying to get someone like that back to the activity level they want to be at."

Today, McIntyre's diet is a little different. He no longer uses salt and has lost 35 pounds. But he still enjoys golf with his favorite playing partner, his wife, and continues to add to his tally of holes-in-one (most recently in June 2021). He's happy to have settled into a new rhythm of seeing Dr. Siegel every few months, and he is grateful for all the providers who helped bring him back from the brink.

"We didn't always have a place to get heart care here in Staunton," McIntyre says. "I just feel so lucky that I can get that care close to home at Augusta Health. I love that they have a team concept at the Heart Failure Clinic. I was just floored by all the nurses and doctors who came in to help me and gave me the chance to have another lucky hole-in-one." **A**

What Is Heart Failure?

Heart failure is a chronic and progressive condition where the heart is unable to pump enough blood to meet the body's needs for blood and oxygen.

"Often, this is the result of coronary disease," says Tami Collins, nurse practitioner in the Augusta Health Heart Failure Clinic. "Symptoms of heart failure include shortness of breath at rest, with exertion and when lying flat; cough; fluttering in the chest; chest pain; and swelling that causes bloating in the abdomen or jewelry to fit tightly. Some people can have no symptoms."

While it is a serious condition, heart failure can be treated with medicine, implantable devices like a pacemaker and lifestyle changes.

Make an appointment with a provider today. Call **(833) AHC-HLTH**.



Tami Collins,
Nurse Practitioner



Lewis Siegel,
Cardiologist

William enjoys playing golf with his wife, Ann, and is grateful to be back on the links chasing more holes-in-one.

Photography/Dominique Attaway

4 Unexpected Health Benefits of Quitting Smoking

Kicking tobacco can help more than your lungs

Tobacco Cessation

Many people know that smoking damages the lungs and quitting tobacco reduces a person's risk of lung cancer, but did you know it could even make diabetes easier to manage? It's true. And that's just one lesser-known benefit of cutting cigarettes from your life. Read on to learn the surprising ways you can improve your health when you stop smoking.



Make Diabetes Easier to Manage

People who smoke and have type 2 diabetes may struggle to regulate their blood sugar even more so than those with diabetes alone. According to the Food and Drug Administration, nicotine and the inflammation caused by cigarette smoke can decrease the effectiveness of insulin. However, insulin effectiveness can be improved just eight weeks after quitting smoking, according to the Centers for Disease Control and Prevention (CDC).

istock.com/PixelImage/Skorpioni/bymuratdeniz



Reduce Your Risk of Heart Disease

“Most people think of lung cancer when they think of smoking, but there are multiple conditions you can reduce your risk for by quitting smoking, including heart attack, stroke and peripheral vascular disease,” says

Jason Lawrence, MD, pulmonary critical care physician at Augusta Health and medical director of Quit at Augusta Health, the Augusta Health tobacco cessation program. Smoking is one of the leading causes of death by heart disease, but according to the CDC, quitting smoking can dramatically reduce heart attack risk in just one year, and most smokers lower their risk of stroke to almost the same as nonsmokers within five years of quitting.



Reduce Your Risk of All Cancers

When cancer-causing agents are inhaled, they get carried around the body by oxygen that enters the blood, spreading cancer risk to many different organs. That’s why quitting smoking can reduce more than just

lung cancer risk. People who quit smoking can reduce their risk of lung cancer by half after about 10 years. But even sooner than that (5 years), they can reduce their risk of mouth, throat and larynx cancer.



Boost Your Mood and Mental Health

Nicotine withdrawal can cause anxiety, which can kick in 30 minutes after your last cigarette. This means people who smoke are constantly dealing with yo-yoing anxiety levels. While withdrawal symptoms like anxiety

are intense for the first two weeks after quitting tobacco, they improve over the long term, and tobacco cessation programs, like Quit at Augusta Health, can help people cope through those rough patches.



Insulin effectiveness can be improved just eight weeks after quitting smoking

Don’t Quit on Tobacco Cessation

According to the CDC, most people who smoke want to quit, but only a small percentage are successful. Quitting tobacco is not easy, and many people have to try multiple times before they can completely stop. “I have patients tell me they were able to quit drugs and alcohol but not cigarettes,” says Dr. Jason Lawrence. “This speaks to how addictive they are, and because of that, I recommend an all-hands-on-deck approach to quitting.”

Quit at Augusta Health provides a comprehensive support system for people who want to stop smoking. Participants receive a comprehensive evaluation to determine a treatment plan that will support their cessation goals. Throughout their journey, participants have access to certified tobacco treatment specialists who can counsel them through challenging times, answer questions and modify their treatment as necessary.

“Quit at Augusta Health is a place of supportive help, not judgment,” says Kevin Lawrence, MD, pulmonary critical care physician at Augusta Health. “They’re not there to tell you you’re doing the wrong thing. They’re there to help you choose to do the right thing.” [A](#)



Kevin Lawrence,
Pulmonary Critical Care
Physician



Jason Lawrence,
Pulmonary Critical Care
Physician


People interested in learning more about quitting smoking or speaking with someone from Quit at Augusta Health can ask their physician for a referral or self-refer by calling (540) 245-QUIT (7848).

powered by **Gratitude**

Dr. Angela Sutton

Wife, Mother, Dog Mom,
Inspired by faith, fitness enthusiast,
beach bum, music lover

**Diabetes and
Endocrinologist
Specialist**



*“Gratitude closes a loop, it completes a circle.
Gratitude is a gateway to connect with others.”*

Powered by Gratitude is an initiative to identify and celebrate gratitude for Augusta Health physicians, nurses, caregivers and team members. **Tell us your gratitude story at:**
ahfoundation@augustahealth.com or (540) 332-5174

 **Augusta Health
Foundation**



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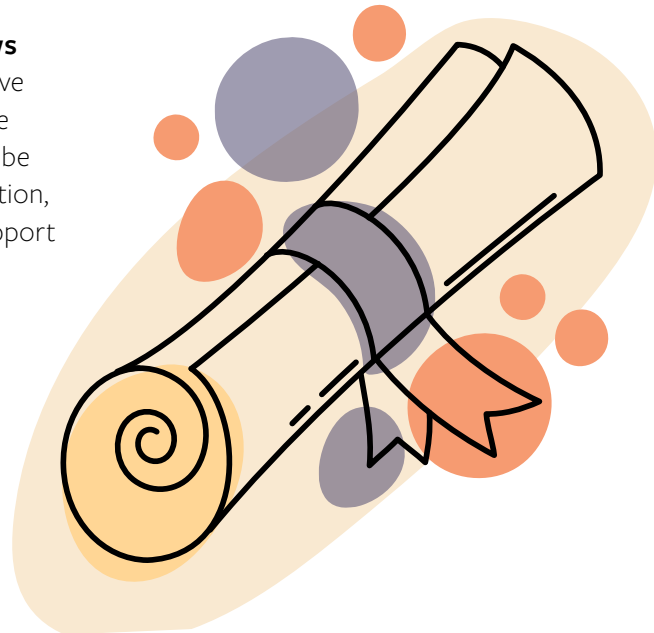
Philanthropy offers valuable estate planning advantages and allows donors to create a lasting legacy for the community. One way to leave a legacy is planned giving. A planned gift is decided on now and given in the future. Typically, planned gifts are executed through wills or trusts and can be gifts of equity, life insurance, real estate, personal property or cash. In addition, depending upon the donor's interests, these gifts can be designated to support specific services, programs, buildings or scholarships.

Kent-Holbert Scholarship Fund

In 2009, Jean Kent established the Kent-Holbert Scholarship fund to honor her late husband, Kenneth “Kenny” Nelson Kent, and her parents, Summerson B. and Nannie B. Holbert. Jean was born in Staunton and was a graduate of Wilson Memorial High School and Valley Vo-Tech Business and Secretarial School. She retired from General Electric in Waynesboro. According to Larry and Sue Smoot, longtime friends of Kenny and Jean Kent, the Kents were very interested in helping young people who couldn’t further their education because of financial need. Jean met a young woman who was enrolled in a licensed practical nurse program, but because of unexpected circumstances, the woman could not afford to continue her education.

This prompted Jean’s idea for the scholarship fund that assists students who reside in Nelson or Augusta

counties and are pursuing medical careers. Upon Jean’s death in 2014, she established a permanent endowment with the Augusta Health Foundation in her last will and testament, leaving a lasting legacy for her family and a scholarship that will continue to benefit students in the area for years to come. 



The Kent-Holbert Scholarship is awarded annually with oversight from the Scholarship Committee at Augusta Health. To date, the fund has awarded **\$13,000** in scholarships to area students.

To learn more about the Augusta Health Foundation Planned Giving Program, visit plannedgiving.augustahealth.com, and sign up for our free estate planning guide.



Joe O'Brien, DO

Get to know one of the newest faces at Augusta Health

Joe O'Brien, DO, has worked with elite baseball players from the Baltimore Orioles and Pittsburgh Pirates, but he's not just a doctor to the stars. At Augusta Health, he helps patients of all ages and activities return to the things they love doing, whether it be playing sports or crocheting.

Born in northern Virginia, Dr. O'Brien attended the University of Virginia for his undergraduate studies and fell in love with

the Shenandoah Valley. After teaching for a year in New York, he decided to go back to school and pursue a medical degree.

He earned his master's degree in physiology at Georgetown University and met his wife (who works in the Augusta Health emergency room). Next, he headed to Florida, where he earned his doctor of osteopathic medicine degree at Lake Erie College of Osteopathic Medicine. The location gave him the opportunity to work with



Dr. O'Brien holds his son Dean, and his wife, Karen, holds their son Sean.

professional athletes during spring training. After his classroom education, Dr. O'Brien completed his residency at Bryn Mawr Hospital near Philadelphia and his fellowship at Lehigh Valley in Allentown, Pennsylvania.

"I always wanted to come back to this area of Virginia," Dr. O'Brien says. "My wife and I interviewed at multiple area hospitals, but the vibe and the people were the best by far at Augusta."

Being able to work at the same hospital as his wife is a unique dynamic. "Something like one-fifth of ER visits are musculoskeletal related," says Dr. O'Brien, "so we share patients sometimes."

Dr. O'Brien and his family, including two sons, Dean, 3, and Sean, 1, are enjoying the outdoor adventures the community has to offer. He and his wife like to visit local wineries and restaurants. Dr. O'Brien is looking forward to coaching Dean's soccer team this year and getting involved with athletics programs at the local schools. "We like to be very much involved in our community," he says. "My favorite part about medicine and being here is making time to meet everyone." 🏡



"My wife and I interviewed at multiple area hospitals, but the vibe and the people were the best by far at Augusta."

Dr. O'Brien



Can I see a sports medicine doctor if I'm not an athlete?

Yes! Sports medicine is a broad specialty for treating musculoskeletal ailments and helping people return to activities after injury. For some patients, this can mean a return to competitive athletics, but for others, it can be a return to work—or even leisurely activities like knitting.

Some common conditions that you might seek a sports medicine physician for include:

- acute or chronic joint pain/injury
- muscle strain
- sports-related concussion
- arthritis
- tendonitis
- nutrition
- injury prevention



Patients of all ages—from pediatrics through geriatrics—can be referred to Dr. O'Brien by a primary care physician or self-refer. Call (833) AHC-HLTH to make an appointment.

Heart-Healthy Turkey Chili Verde

Make this chili to warm up a cold day. With low-fat fixings and lean ground turkey, this is a heart-healthy spin on a winter favorite.



Serves 4

PER SERVING:

Calories **408**

Protein **31g**

Carbohydrate **56g**
(12g fiber)

Fat **6g** (1g sat, 5g
mono/poly)

Sodium **136mg**

Ingredients

- | | |
|---|--|
| 1 tablespoon olive oil | 2 green onions, chopped |
| 1 medium onion, chopped | fine with green portion |
| 3 cloves garlic, minced | 1 12-ounce can |
| 1 green bell pepper, chopped | tomatillos, seeded and |
| 2 ounces canned whole green chilies, seeded and chopped | chopped, with juice |
| 8 ounces ground turkey breast | 1 tablespoon chili powder |
| 2 1/4 ounces canned white beans, drained and rinsed | 1 tablespoon ground cumin |
| | 1 teaspoon dried oregano |
| | 4 tablespoons fat-free sour cream |
| | 1/4 cup low-sodium, low-fat cheddar cheese, shredded |

Directions

1. Heat olive oil in large saucepan over medium heat.
2. Add onions, garlic, bell pepper, chilies and ground turkey. Sauté until turkey is lightly browned and vegetables are soft, about 8–10 minutes.
3. Add white beans, tomatillos, chili powder, cumin and oregano. Bring to a boil, then turn heat down and simmer for 30 minutes.
4. Serve and add sour cream. Garnish with cheddar cheese and green onions.

Cutting-edge Breast Care CLOSE TO HOME

One in eight women in the U.S. will develop breast cancer in her lifetime, but early detection can make treatment much more effective.

The Breast Care Center in the new Augusta Health Outpatient Pavilion will make cutting-edge technology and highly trained physicians more accessible than ever, raising the bar in screening, treatment and prevention.



which improves cancer detection and can help in the workup of cancer and suspicious findings, will also be available. Rounding out the technology will be a new MRI machine, which will provide higher-quality imaging for diagnosing and staging cancer.

The center is being designed with patient experience at the forefront, says Scott Crabtree, Augusta Health assistant vice president of professional services.

At registration, new technology will expedite check-in.

A secondary waiting room will have a spa-like feel, where patients can wait peacefully in a comfortable space. And oncologists, surgeons and genetic counselors will be on site for convenient consultations with patients who need follow-up care.

“Our women’s imaging staff and breast radiologists have been involved at a granular level in laying out this center,” Crabtree says. “Our two female breast radiologists have worked in other facilities that hit on all cylinders, and they brought a fresh perspective.”

The Outpatient Pavilion is set to open at the end of the year. Until then, holistic breast care and cancer treatment are still available in the hospital at Augusta Health.

HONORING Dr. Bill Thompson

It is not too much to say that William “Bill” Thompson, MD, had the vision and determination to bring specialized breast care to Augusta Health. In 2009, Dr. Thompson began the Augusta Health Cancer Center Breast Program, which expanded on his specialty, breast surgery, and gave patients dedicated care for breast health concerns, including cancer diagnosis and care.

accredited the program in 2010, making it the only accredited breast center in the region at the time. The program was reaccredited in April 2021. Vice President of Operations Karen Clark says a key element of the accreditation is the inclusion of a breast cancer navigator who supports and guides patients as they move through the breast health journey.

Moving forward, Dr. Thompson will be sharing leadership of the program with Shannon Tierney, MD, an experienced breast surgical oncologist, who will ultimately take on the director role.



William Thompson,
Surgeon

“Dr. Thompson has been the champion for breast care here at Augusta Health for a number of years,” says John Girard, director of the Center for Cancer & Blood Disorders. “He was the physician leader who pushed our organization to move toward accreditation.”

The National Accreditation Program for Breast Centers first

WALK-IN CARE

Staunton Urgent Care
(540) 245-7470

851 Statler Blvd.
Staunton, VA 24401

Waynesboro Urgent Care
(540) 245-7940

201 Lew Dewitt Blvd., Suite A
Waynesboro, VA 22980

Stuarts Draft Urgent Care
(540) 245-7880

2570 Stuarts Draft Highway,
Suite 100
Stuarts Draft, VA 24477

Crozet Urgent Care
(434) 823-7896

540 Radford Lane, Suite 250
Charlottesville, VA 22903

Weyers Cave Urgent Care
(540) 453-0040

1140 Keezletown Road
Weyers Cave, VA 24486

PRIMARY CARE

Augusta Health Family Practice, Churchville
(540) 213-9260

3881 Churchville Ave.
Churchville, VA 24421

Buena Vista Primary Care
(540) 261-1315

2054 Sycamore Ave.
Buena Vista, VA 24416

Augusta Health Family Practice, Verona
(540) 245-7425

1 Green Hills Drive
Verona, VA 24482

Augusta Health Internal Medicine, Fishersville
(540) 213-2630

22 North Medical Park Drive
Fishersville, VA 22939

Augusta Health Maury River Family Practice
(540) 258-1800

730 McCullough St.
Glasgow, VA 24555

Augusta Health Primary Care Clinic, Crozet
(434) 823-7896

540 Radford Lane, Suite 250
Charlottesville, VA 22903

Augusta Health Primary Care, Fishersville
(540) 332-5687

53 South Medical Park Drive
Fishersville, VA 22939

Augusta Health Primary Care, Lexington
(540) 463-3381

55 Comfort Way, Suite 1
Lexington, VA 24450

Augusta Health Primary Care, Stuarts Draft
(540) 245-7870

2570 Stuarts Draft Highway,
Suite 101
Stuarts Draft, VA 24477

Augusta Health Primary Care, Waynesboro
(540) 245-7950

201 Lew Dewitt Blvd., Suite B
Waynesboro, VA 22980

Augusta Health Staunton Medical Associates
(540) 245-7730

42 Lambert St., Suite 511
Staunton, VA 24401



SPECIALTY CARE

Center for Cancer & Blood Disorders (540) 332-5960

78 Medical Center Drive
Fishersville, VA 22939

Heart & Vascular Center

Cardiology Practice

(540) 245-7080

Cardiac & Pulmonary Rehab

(540) 332-4107

Cardiovascular Services

(540) 245-4127

78 Medical Center Drive
Fishersville, VA 22939

Center for Diabetes & Endocrinology

(540) 245-7180

15 Sports Medicine Drive,
Suite 100

Fishersville, VA 22939

Gastroenterology

(540) 245-7350

70 Medical Center Circle,
Suite 302

Fishersville, VA 22939

Infectious Disease

(540) 245-7030

70 Medical Center Circle,
Suite 107

Fishersville, VA 22939

Metabolic Weight Management Clinic

(540) 213-2630

22 North Medical Park Drive
Fishersville, VA 22939

Neurology

(540) 932-5878

70 Medical Center Circle,
Suite 206

Fishersville, VA 22939

Otolaryngology (ENT)

(540) 245-7010

70 Medical Center Circle,
Suite 211

Fishersville, VA 22939

Pain Management

(540) 332-5747

70 Medical Center Circle,
Suite 305

Fishersville, VA 22939

Palliative Care

(540) 245-7262

43 Pinnacle Drive

Fishersville, VA 22939

Pulmonology & Critical Care

(540) 245-7190

70 Medical Center Circle,
Suite 308

Fishersville, VA 22939



Rheumatology

(540) 245-7170

70 Medical Center Circle,
Suite 210

Fishersville, VA 22939

Sleep Clinic

(540) 332-4169

57 North Medical Park Drive
Fishersville, VA 22939

Spine Clinic

(540) 245-7400

70 Medical Center Circle,
Suite 103

Fishersville, VA 22939

Surgery (540) 245-7705

70 Medical Center Circle,
Suite 213

Fishersville, VA 22939

Wound Healing & Hyperbaric

(540) 245-7230

78 Medical Center Drive
Fishersville, VA 22939

AUG-035

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I was there when you woke up.

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