

ANGEL Network

African American Women Nurturing and Giving Each Other Life

A Chapter of Greater Stark County

July 2012

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Help is Needed!

If you have any suggestions for articles for the quarterly *ANGEL Network* newsletter, contact Linda Stevens-Butts at 330-452-6906 or email stevensL7@aol.com. Articles for the next newsletter are due by September 1, 2012.

E-Newsletter Available

Want to receive the ANGEL newsletter electronically? Submit your email address to becky.bondoni@cantonmercy.org. Help us conserve our natural resources and reduce printing and mailing costs.

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SEPTEMBER – NATIONAL SICKLE CELL MONTH

What is Sickle Cell Anemia?

Sickle cell anemia is one type of anemia. Anemia is a condition in which your blood has a lower than normal number of red blood cells. This condition also can occur if your red blood cells don't contain enough hemoglobin.

Red blood cells are made in the spongy marrow inside large bones of the body. Bone marrow is always making new red blood cells to replace old ones. Normal red blood cells live about 120 days in the bloodstream and then die. They carry oxygen and remove carbon dioxide (a waste product) from your body.

In sickle cell anemia, the number of red blood cells is low, because sickle cells don't last very long. Sickle cells usually die after only about 10 to 20 days. The bone marrow can't make new red blood cells fast enough to replace the dying ones.

Sickle cell anemia is an inherited, lifelong disease. People who have the disease are born with it. They inherit two genes for sickle hemoglobin—one from each parent.

People who inherit a sickle hemoglobin gene from one parent and a normal gene from the other parent have a condition call sickle cell trait.

Sickle cell trait is different from sickle cell anemia. People who have sickle cell trait don't have the disease, but they have one of the genes that cause it. Like people who have sickle cell anemia, people who have sickle cell trait can pass the sickle hemoglobin on to their children.

Who is at Risk for Sickle Cell Anemia?

Sickle cell anemia is most common in people whose families come from Africa, South or Central America (especially Panama), Caribbean Islands, Mediterranean countries (such as Turkey, Greece and Italy), India and Saudi Arabia.

In the United States, it's estimated that sickle cell anemia affects 70,000–100,000 people, mainly African Americans. The disease occurs in about one out of every 500 African American births. Sickle cell anemia also affects Hispanic Americans. The disease occurs in more than one out of every 36,000 Hispanic American births.

More than two million Americans have sickle cell trait. The condition occurs in about one in 12 African Americans.

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What is Sickle Cell Anemia?

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What Are the Signs and Symptoms of Sickle Cell Anemia?

The signs and symptoms of sickle cell anemia vary. Some people have mild symptoms. Others have very severe symptoms and often are hospitalized for treatment.



Sickle cell anemia is present at birth, but many infants don't show any signs until after four months of age.

The most common symptom of anemia is fatigue (feeling tired or weak). Other signs and symptoms of anemia may include:

- Shortness of breath
- Dizziness
- Headaches
- Coldness in the hands and feet
- Paler than normal skin or mucous membranes (the tissue that lines your nose, mouth, and other organs and body cavities)
- Jaundice (a yellowish color of the skin or whites of the eyes)

Signs and Symptoms Related to Pain:

Sudden pain throughout the body is a common symptom of sickle cell anemia. The pain is called a sickle cell crisis. Sickle cell crises often affect the bones, lungs, abdomen, and joints. These crises occur when sickled red blood cells block blood flow to the limbs and organs. This can cause pain and organ damage.

The pain from sickle cell anemia can be acute or chronic, but acute pain is more common. Acute pain is sudden and can range from mild to very severe. The pain usually lasts from hours to as long as a week or more.

How is Sickle Cell Anemia Treated?

Sickle cell anemia has no widely available cure. However, treatments can help relieve symptoms and treat complications. The goals of treating sickle cell anemia are to relieve pain, prevent infections and organ damage, and control complications (if they occur). Researchers continue to look for new treatments for the disease.

People who have sickle cell anemia need regular medical care. Some doctors and clinics specialize in treating people who have the disease. Hematologists specialize in treating adults and children who have blood disease or disorders.

Living with Sickle Cell Anemia

With good health care, many people who have sickle cell anemia can live productive lives. They can also have reasonably good health much of the time and live longer today than in the past.

Words of Inspiration

“On the Wings of Prayer”

Just close your eyes and open your heart
And feel your worries and cares depart,
Just yield yourself to the Father above
And let Him hold you secure in His love.
For life on earth grows more involved
With endless problems that can't be solved.
But God openly asks us to do our best,
Then He will “take over” and finish the rest.
So when you are tired, discouraged and blue,
There's always one door that is open to you.
And that is the door to “The House of Prayer”
And you'll find God waiting to meet you there,
And “The House of Prayer” is no farther away
Than the quiet spot where you kneel and pray.
For the heart is a temple when God is there
As we place ourselves in His loving care,
And He hears every prayer and answers each one
When we pray in His name “Thy Will be done.”
And the burdens that seemed too heavy to bear
Are lifted away on “the wings of prayer.”

By Helen Steiner Rice

If you have sickle cell anemia, it's important to:

- Adopt or maintain a healthy lifestyle
- Take steps to prevent and control complications
- Learn ways to cope with pain

If you have a child or teen who has sickle cell anemia, you can take steps to learn about the disease and help your child manage it.

Resource: www.nhlbi.nih.gov

National Heart, Lung & Blood Institute
www.sicklecelldisease.org.

Sickle Cell Disease Association of America

Mercy Cancer Center Presented with CoC Outstanding Achievement Award

The Commission on Cancer (CoC) of the American College of Surgeons (ACoS) granted its Outstanding Achievement Award to Mercy Cancer Center as a result of surveys performed during 2011. This is the second consecutive time Mercy Cancer Center has received this award. Accreditation by the CoC is given only to those facilities that have voluntarily committed to providing the highest level of quality cancer care and that undergo a rigorous evaluation process and review of their performance. Only 30 percent of hospitals across the U.S. have accredited cancer centers, and only 22 percent of these accredited cancer centers are granted the Outstanding Achievement Award.



Mercy Recognized for Excellence in Cardiac Care

Mercy Medical Center has received the American Heart Association's Mission: Lifeline Heart Attack Receiving Center Accreditation and is one of only two in Ohio to receive the Mission: Lifeline Gold Performance Achievement Award. Mercy Medical Center Emergency Chest Pain Center (ECPC) recently received full, three-year Cycle IV accreditation with PCI (percutaneous coronary interventions), or angioplasty, from the Society of Chest Pain Centers (SCPC).

Pink in the Park

Mercy Medical Center sponsored a recent Stark County Minority Health Coalition project promoting breast health for African American women. A garden featuring pink flowers was planted in Nimisilla Park in Northeast Canton, in the same neighborhood as St. Paul Square where Mercy's medical home will open this year. The garden was dedicated with a ceremony, prayer service and presentations by Diane Wofsey, nurse coordinator of Mercy Breast Care Center, and Gerry Radcliffe, a 35-year breast cancer survivor.

Mercy Becomes First Accredited Stroke Specialty Program in Stark County

Mercy Medical Center recently received accreditation by the Commission on Accreditation of Rehabilitation Facilities (CARF) for a period of three years for the following programs:

1. Inpatient Rehabilitation Programs—Hospital (Adults)
2. Inpatient Rehabilitation Programs—Hospital: Stroke Specialty Programs (Adults)

Mercy is the first accredited Stroke Specialty Program in Stark County.



Diane's Corner

I hope everyone is having a wonderful summer! Please stay cool and safe.

In this newsletter, you'll notice another reminder about the recertification class on September 8. If you did not attend any of the three classes last summer, please mark your calendars. If you know anyone interested in becoming an ANGEL, they may also attend this class. It is very important to stay current and refresh your knowledge on the topic of breast health and breast cancer. We also need to recruit new ANGELS to ensure the continued success of our program.

Also, I'd like input from all of you on potential places or ideas you may have for future programs. I love to hear new ideas, so please come to the August 20 meeting ready to discuss them.

Finally, I'd like to thank each and every one of you for your hard work and dedication to this program.

God Bless.
Diane Wofsey

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Did You Know?

National Institute on Aging

Hospital Hints

Has your doctor said you need a medical test that has to be done in the hospital? Do you need surgery? Most people worry when they have to stay overnight in the hospital. Learning more about what to expect and about people who work in the hospital can help.

What to Bring

It's best to bring as little as you can to the hospital. You will need:

- Bathrobe and slippers (put your name on each item); most hospitals provide special hospital bed clothes.
- Comfortable clothes to wear home (they may be the same clothes you wore to the hospital)
- Toothbrush, toothpaste, shampoo, comb and brush, deodorant, and razor
- Your hearing aids or glasses
- A little cash (not more than \$10) to buy newspapers or magazines
- Make sure you bring your health insurance card and updated information about:
 1. Past illnesses and surgeries
 2. Your medicines, including prescription and over-the-counter drugs
 3. Your allergies
 4. Names and telephone numbers (home and business) to contact in an emergency

What to Leave Home

Leave jewelry (including wedding rings, earrings, and watches) extra cash, credit cards, and checkbooks at home, or have a family member or friend keep them for you. Don't bring electric shavers hair dryers, curling irons or other equipment.

Admission

Once your hospital stay is planned, many hospitals have a staff member call to ask pre-admission questions over the phone. Then, when you go to the hospital, many of the forms are already filled in.

Your first stop at the hospital is the admitting office. You will sign forms that:

- Give the hospital details about yourself, your doctor, and your insurance
- Explain your surgery, test, or procedure
- Give your okay for the medical staff to treat you

You also will be asked about advance directive. If you don't have health insurance, talk with the admissions staff about other payment methods and sources of financial aid.

A hospital bracelet will be put on your wrist by the admissions staff and checked by nurses. Look at your bracelet to make sure your information is correct.

Hospital Staff

While you are in the hospital, there may be many people who take care of you.

- **Doctors** are in charge of your overall care. The doctor in charge may be your primary doctor (the doctor you see outside the hospital), a specialist on the hospital staff, or a hospitalist who is trained to take care of you while you are in the hospital.
- Many kinds of **nurses** can take care of you.
- **Respiratory Therapists** prevent and treat breathing problems. They teach exercises that help avoid lung infections after surgery.
- **Technicians** can take blood or perform tests such as x-rays.
- **Physical Therapists** show you how to build muscle, increase flexibility and improve coordination.
- **Occupational Therapists** work with you to restore, maintain, or improve the ability to perform everyday tasks like cooking, eating, bathing or dressing.
- **Dietitians** can plan menus including special meals and teach you how to have well-balanced meals at home.
- **Clinical Pharmacists** may be consulted about the medicines you take.
- **Social Workers** assist you and your family. They can help find homecare, rehabilitation, social services, long-term care and support groups.

National Institute on Aging *(continued)*

Inside the Hospital

Because you may feel weak or tired, here are some safety tips to follow.

- If you are told to stay in bed, use the call bell or button when you need help.
- Use the controls to lower your bed before getting in or out.
- Sit on the edge of the bed for a minute or so before standing up.
- Watch out for the wires and tubes that may be around your bed.
- Try to keep the things you need within easy reach.
- Only take the medicines given to you by nurses. Don't take medicine you brought from home without your doctor's permission.
- Hold on to grab bar for support when getting in and out of the bathtub or shower and when using the toilet.

Ask Questions

During your hospital stay, you may have questions about what's happening. You may want to ask your doctor or nurse:

- What will this test tell me? Why is it needed and when will I know the results?

- What treatment is needed and how long will it last?
- What are the benefits and risks of treatment?
- When can I go home?
- When I go home, will I have to change my regular activities or diet?
- How often will I need checkups?
- Is any other follow-up needed?
- Who should I call if I have other questions?

Patient Rights

Before you go to the hospital, you might want to think about writing an advance directive. An advance directive says what medical treatment you want if you can't speak for yourself. It also lets you name who you want to make medical decisions. Two common kinds of advance directives are:

- Living will
- Durable power of attorney for health care

In a living will, you list the kind of medical care you want (or don't want); it's called a living will because it takes effect while you are still alive.

In a durable power of attorney for health care, you name someone else



(a family member or friend, for example) to make your medical decisions if you are unable to make them for yourself. You also can list any treatment you don't want.

If you have an advance directive, bring a copy of it with you to the hospital. Make sure your doctor has a copy and check to make sure your wishes are part of your medical records. If you have a durable power of attorney to health care, be sure to give a copy to the person you've chosen to act on your behalf.

Going Home

When you are ready to go home, you'll get discharge plans from the medical team and a release form from the hospital business office. Sometimes people go from the hospital to a rehabilitation (rehab) center before going home. The social worker can help you go home or arrange admission to a rehab center.

Resource: National Institute of Aging Information Center (www.nia.nih.gov)



Upcoming Events & Dates to Remember

Please mark your calendars!

2012-2013 ANGEL Network Meeting Dates

Mercy Hall Auditorium

August 20, 2012
5:30 p.m.

November 19, 2012
5:30 p.m.

February 18, 2013
5:30 p.m.

May 20, 2013
5:30 p.m.

August 19, 2013
5:30 p.m.

November 18, 2013
5:30 p.m.

IMPORTANT! ANGEL Recertification Training

September 8, 2012

9 a.m. – 4 p.m.

Mercy Hall Auditorium

* All ANGELS who did not complete their recertification in 2011 must attend this training.

Annual Diversity Health Fair

August 10, 2012

9 a.m. – 3 p.m.

Lillian Beane Center

(1711 16th St. SE, Massillon)

American Heart Association Heart Walk

September 15, 2012

8:30 a.m.

Kent State University Stark



Susan G. Komen Race For the Cure

September 15, 2012

Wolstein Center, Cleveland

Akron/Canton 2012 Walk to Cure Diabetes

September 22, 2012

8:30 a.m.

Kent State University Stark

Faith in Action of Western Stark County Health & Wellness Fair

September 27, 2012

8:30 a.m.

Massillon Recreation Center

2012 Senior Citizens Forum

October 4, 2012

9 a.m. – 1 p.m.

Mayfield Senior Center

Faith In Pink

October 13, 2012

11 a.m. – 1:30 p.m.

Mercy Hall Auditorium

THE ANGEL NETWORK

The ANGEL Network mission is to reduce the number of deaths within the African American female population by offering early detection programs, access to screening, and empowering African American women on breast health practices so that they will take an active part in their own health care.

All women are at risk for breast cancer.

But statistics show that although there is a lower incidence of breast cancer in African American women, there is a much higher mortality rate as compared to women of other races.

What is an ANGEL?

- One Voice At A Time – Women raising awareness in our community about the ANGEL Network and Susan G. Komen Breast Cancer Foundation and Northeast Ohio Race for the Cure.
- Certified breast health advocates provide education and guidelines on good breast health to women of all ages, but especially those 40 and older. ANGELS are breast health advocates teaching instructional breast exams to fellow women.
- ANGELS help women navigate the health care system so they have easy access to mammograms, breast exams and pelvic exams.
- ANGELS identify fellow women who need breast exams, mammograms, transportation and sometimes just a comforting and understanding ear.
- ANGELS help with the ANGEL education booth at health fairs and community events.