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In defense of ear plugs

It may seem silly, but I have been carrying pairs of those disposable foam earplugs in my purse with me since high school.

This edition's focus on hearing health offers me a chance to explain why, and to encourage you to do the same.

During symphony concerts when I am on stage right in front of the brass section, for example, they make me a much happier musician. Just remember the "O Fortuna" chorus of "Carmina Burana" and you'll understand.

Live music festivals are another example: I can only enjoy The Smashing Pumpkins if my head isn't throbbing and my ears aren't wringing.

It's not all for short-term gain, however.

Instead, every time I feel my body shake from music that's too loud, I remember my late grandfather Paul Harris.

He spent much of his life singing in a barbershop quartet, and enjoyed it immensely. I am lucky enough to have a few old recordings on cassette tape.

He also played violin and viola with the symphony at Utah State University, and passed his beautiful instrument from soviet-era Prague on to me.

But I never heard him play, and I never heard him sing. In fact, he couldn't even listen to me play, and it was because of a lack of hearing protection.

In addition to his musical pursuits, my grandfather



BY
REBECCA PALMER
EDITOR

Rebecca enjoys rock climbing indoors and in Utah's canyons, yoga and Zumba classes and gourmet cooking. She holds a bachelor's degree in journalism from Weber State University in Ogden.

worked on an old-fashioned offset press for years and spent time around many kinds of noisy machinery – never with ear protection.

By the time I came around, music sounded like cacophony to him and the hearing aids of the time could only help a little.

It is my worst nightmare to have the same thing happen to me.

Music is my therapy and my love, and I would hate to lose it. But even more importantly, if my hearing were damaged, I wouldn't

do my job well. I would be more likely to misunderstand people, more likely to miss quiet statements and much less able to communicate over the phone.

Feeling my bones quake to the bass just isn't worth taking the chance.

In this edition, we report about how local doctors are seeing and increasing number of young people who suffer from hearing loss.

One of our contributors also writes about tinnitus, and explains the many ways it can occur.

Yet another health professional said that hearing health is among the many benefits of exercise.

After we shot some beautiful photos of a Latin dance class in Kaysville, we were also inspired to write about the health benefits of bopping to the beat (even if doing so requires ear protection).

Furthermore, this time of year offers a great chance to write about light: it's well known that sun damage can cause cancer, but we offer tips on using sunless tanners and report on studies about the potential benefits of UV-free light therapy.

Depending on how close you get to fireworks and live music this summer, however, we hope you keep the health of your ears in mind.

At less than fifty cents a pair and a few ounces each, you might look into getting some of those foam earplugs for yourself.

Davis Wellness

Wellness: : the quality or state of being in good health, especially as an actively sought goal <lifestyles that promote wellness>

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On front cover: **Diosa DeAgostine** teaches a Latin dance workout during Kaysville's Arts and Music in the Park event. *Photo by Shannon Cutlip Sampson*

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SAY WHAT?

Hearing loss is not just for old folks

Hearing loss was once thought to be a symptom of old age.

It's not.

Hearing specialists are finding young people, in their 20s and 30s, and even sometimes into their teens, are suffering some hearing loss.

"They have iPods, cell phones and earphones and they turn all their devices up loud," said Dr. Niki Barwick, a doctor of audiology with Mountainwest Ears, Nose and Throat.

That's a problem because "the louder a sound is, the less time we can be around it," she said.

Statistics provided by

Utah Audiology and Hearing indicate that 65 percent of people with hearing loss are younger than 65 and six million people in the United States between 18 and 44 suffer from hearing loss.

It's not just loud music causing the problem.

BY MELINDA WILLIAMS
STAFF WRITER

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Hearing

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From jack hammers to gas-powered lawn mowers, today's world is filled with sounds people didn't hear often only a few decades ago. And they all damage hearing.

As industrialization took place, new jobs opened in construction and in mining. Even the way we fight wars changed, Barwick said, with louder weapons being used.

"In Vietnam, soldiers used to stuff cigarettes in their ears to deaden the sounds of the weapons," Barwick said. "They knew the sounds were hurting them, but the military didn't know the noise could damage their hearing."

In today's workplace, it's more important than ever to be able to hear well, Barwick said.

"Our jobs are shifting," she explained. "We're on the phone or on webinars all the time," — workplace tools we need to hear well to use.

Even our ways of recreating have become noisier.

"We have more time to hunt and do such activities as riding ATV's and motorcycles," Barwick said.

Hearing loss can be caused by something as simple as built up ear wax. Once that's cleaned out, the person can hear, Barwick said.

Some other forms of hearing loss can be corrected with surgery if they involve the eardrum or the bones in the middle ear.

Other forms of hearing loss are more permanent, Barwick said. But usually a hearing aid, or "hearing enhancement devices," as she prefers to call them, can improve hearing.

"They're not like they used to be," she said. "They're no longer big and bulky and aren't just sound amplifiers."



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She's found that elderly people don't get their hearing tested like they should.

"They wait until they're in their 80s," she said.

And baby boomers "blame everybody else for their hearing loss with excuses such as, "They speak too softly," she said.

Boomers seem reluctant to wear hearing aids.

People should have their hearing tested as often as they get their eyes checked, Barwick said.

She also suggests getting a baseline test and then being retested every year or two.

Audiologists can then watch to see how fast your hearing changes.

If there's a major loss of hearing, doctors can be more aggressive in their treatment, she said.

Wearing hearing aids shouldn't carry a stigma.

"No one thinks anything of it if you get new glasses," she said. "Hearing aids should be looked upon in the same way. It's not a negative thing."

With the popularity of devices such as Bluetooth, wearing a hearing aid has become "kind of cool," and Barwick is seeing more young people coming in for tests.

Cutting back on the noise you are exposed to is the only way to protect hearing.

Today, manufactures are putting out all kinds of new earplugs designed for whatever the wearer may be doing, whether it's riding a motorcycle, hunting or working in a noisy environment, she said.

Tips for getting the rest you need

- Create a sleep sanctuary. Reserve your bedroom for sleep and intimacy. Keep it on the cool side. Banish the television, computer, cellphone or digital organizer, and other diversions from that space.
- Nap only if necessary. Napping an hour or two at the peak of sleepiness in the afternoon can help to supplement hours missed at night. But naps can also interfere with your ability to sleep at night and throw your sleep schedule into disarray.
- Avoid caffeine after noon, and go light on alcohol. Caffeine can stay in your body for up to 12 hours. Alcohol can act as a sedative, but it also disturbs sleep.
- Get regular exercise, but not within three hours of bedtime. Exercise acts as a short-term stimulant.
- Address a long-term debt. If you've skimped on sleep for decades, it could take a while to recoup your losses. Plan a vacation with a light schedule and few obligations — not a whirlwind tour of the museums of Europe or a daughter's wedding. Then, turn off the alarm clock and just sleep every night until you awaken naturally. At the beginning, you may be sleeping 12 hours or more every night; by the end you'll be getting about the amount you need to awake refreshed.
- Avoid backsliding into a new debt cycle. Try to go to bed and get up at the same time every day — at the very least on weekdays. If need be, use weekends to make up for lost sleep.

From Harvard HEALTHbeat

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ZUMBA

Shimmy, samba and merengue your way to fitness

One of the most common problems for people trying to start regular exercise routines is boredom — it's not very exciting to run the same pace on the same treadmill day after day, and not much better to lift heavy weights above your head time and again.

If you would rather have fun with your exercise, and perhaps even forget about the number of calories you're supposed to be burning, dance workouts are increasingly available and have become a popular option, for men and women alike.

Zumba, perhaps the most well-known dance workout, uses Latin steps from samba, merengue and salsa to provide a cardio workout. It was developed in the 1990s by a dancer and aerobics instructor, and the term was copyrighted in 2001 by Zumba Fitness.

In addition to the kind of cardio benefits you would get from running or cycling, Zumba offers built-in interval training. Some songs in each

BY **REBECCA PALMER**
EDITOR

workout class are fast and the moves are rigorous, and other songs or parts of songs are slower and easier.

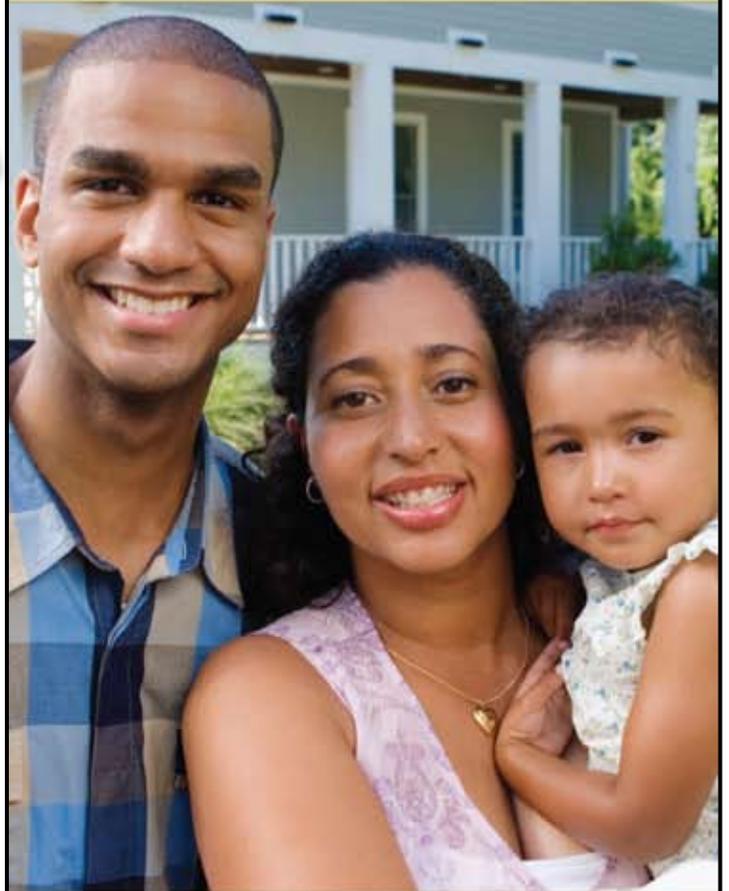
According to *Livestrong.com*, one hour of the fastest dancing can burn about 450 calories for someone who weighs 150 pounds, or about 530 calories for a 185-pound person.

"If you dance Zumba for one hour a day and eat 500 calories a day less than you need to maintain your weight, you should lose 2 lbs. weekly or 8 lbs. a month," the site explains.

■ See "ZUMBA" p. 9

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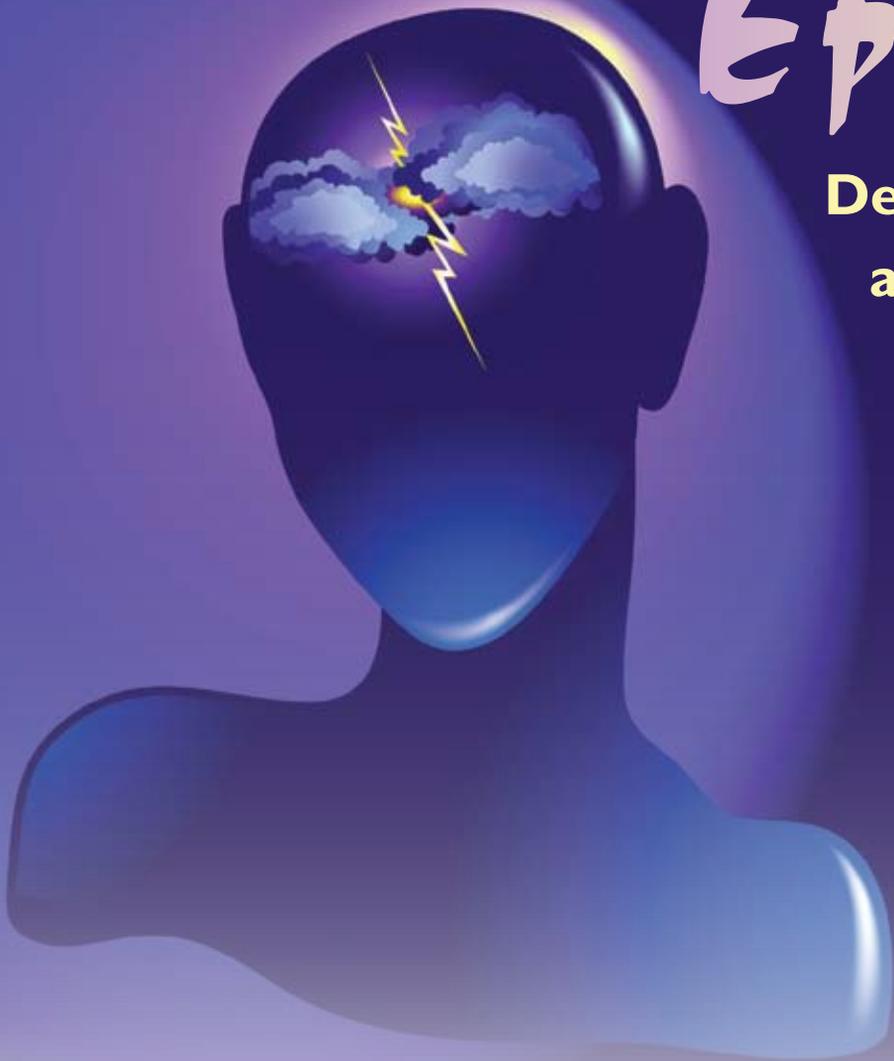


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Epilepsy

Defeat stereotypes associated with this common condition



According to the Epilepsy Foundation, epilepsy is the third most common neurological disorder in the U.S. after Alzheimer's disease and stroke. In addition, approximately 1 in 26 people will develop epilepsy in their lifetime, and one in three adults knows someone with the disorder. These are startling statistics, which makes it hard to imagine why such a common disorder is still among the least understood of major chronic medical conditions.



BY HELEN BARKAN, M.D. PH.D.

Helen Barkan is an associate professor of Neurology at the University of Utah and co-director of the university's Surgical Epilepsy Program (SEP).

Simply defined, epilepsy is episodic occurrence of seizures, which are anomalous synchronous discharges in the cerebral cortex, involving a large number of neurons (generalized seizures) or a smaller, variable number of neurons (partial seizures), which temporarily impair brain function. However, epilepsy is complex,

and may have features and clinical characteristics that are drastically different from person to person. A seizure is not only what lay people call "grand mal" or "petit mal" (these are outdated, historical terms for generalized convulsions and for absence seizures, respectively) – but just about any clinical manifestation is pos-

sible. Examples include gelastic (laughing) seizures, seizures that manifest with burning pain in a limb, seizures that cause hallucinations, and many others.

Fortunately, treatment options for epilepsy have improved significantly over the last several decades. It can be managed well with seizure-preventing medications, surgery, diet, complementary therapies, or neuro-stimulation, including the FDA-approved modality of vagus nerve stimulation (VNS), a procedure in which a pacemaker-like device is surgi-

■ See "EPILEPSY" p. 8

Epilepsy

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cally implanted under the skin on the patient's chest. Other neurostimulation methods are being investigated, including DBS (deep-brain stimulation) and RNS (responsive nerve stimulation).

Through the Comprehensive Epilepsy Program at University of Utah Hospital, patients gain access to a multidisciplinary team of physicians and medical professionals that specialize in the diagnosis and management of epilepsy. This team includes board-certified epileptologists, functional neurosurgeons, neuroradiologists, neuropsychologists, and a dedicated team of nurses and technicians.

Regardless of the methods used, the goal of all epilepsy treatment is to prevent further seizures and make it possible for people to lead active and fulfilling lives.

Even with modern advancements, those who suffer from epilepsy face an uphill battle because of the variety of stereotypes and misconceptions about it, misunderstandings that have been around since the ancient times, when it was called the "sacred disease." Sadly, one of the hardest aspects of living with epilepsy can be dealing with reactions and prejudices of people who are not aware that epilepsy is a condition that needs to be dealt with like any other chronic condition, and should not prevent one from living their life to the fullest.

BREAKING DOWN THE MISCONCEPTIONS:

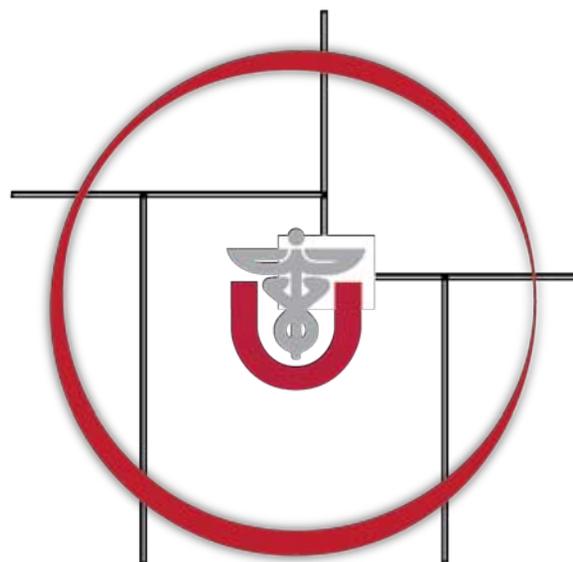
- Only three to five percent of people with epilepsy have their seizures triggered by flashing or flickering lights, video games, or television. However, those who do can be helped with special spectacles and with behavioral adjustments.
- Some seizures are so subtle that only the person having the seizure would recognize them.
- It is uncommon for someone to die simply by having a seizure. SUDEP (sudden unexpected death in epilepsy) is a rare and possibly preventable tragedy, the causes of which are being investigated.
- People with epilepsy are capable of doing the same activities and achieving the same levels of education and employment as those not living with epilepsy. Women with epilepsy can have children and mother them well.
- No connection has been proved between epilepsy and permanent brain damage; however, prolonged or frequent generalized seizures do cause death of neurons and cognitive and memory decline.
- Most forms of epilepsy are genetic, and are due to inherited or acquired mutations of certain proteins involved in signal transmission in the brain. Epilepsy also occurs as a result of other genetic conditions, strokes, trauma, and brain tumors.
- Epilepsy is not a mental illness, and epilepsy is not known to cause aggression or other behavioral disturbances.
- In many cases, epilepsy can be controlled by medications or treated with surgery, and many patients are seizure-free as a result of treatment.

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ZUMBA

Continued from p. 6

Zumba classes and other similar dance workout classes abound in Davis County.

You can also find DVDs and original workout sessions to try out the steps at home, and look for special events such as Kaysville's recent Zumba in the park event.

Edward R. Laskowski, M.D., from the Mayo Clinic, writes that when dancing, ass with any exercise, if a certain movement or position causes you pain, try to modify the workout to avoid it.

He also said that proper technique is vital, and he doesn't mean just pointed toes.

"Don't get so caught up in the dance rhythm that you forget proper form," he cautioned.

If Latin rhythms aren't your style, consider dance workouts such as hip-hop, belly dancing, jazzercise or even ballet.

WHERE TO FIND DANCE WORKOUT CLASSES IN DAVIS

South Davis Recreation Center

550 N. 200 West, Bountiful

Gold's Gym Bountiful

250 W. 1500 South, Bountiful

Healing Hearts Studio

254 E. Pages Lane, Centerville

Skills Fitness

1525 N. Main Street, Bountiful

GPP Fitness

40 E. Pages Lane, Centerville

Illuzions Dance Academy

1492 S. 800 West, Woods Cross

Centerville Curves

178 W. Parrish Lane, Centerville

Expressions Dance

3221 S. Highway 89, Bountiful

Groove the Academy

445 N. 700 West, Suite 104, North Salt Lake

Pink! Fitness for Women

1620 W. Hill Field Rd., Layton

Snap Fitness

2940 N. Church Street, Suite 101, Layton

Performance Dance Studio

201 E. 2150 North, Layton

Performax Gyms

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Research Rundown

By Nala Rogers, Science and Wellness correspondent

“Hands-free” tech still deadly, says auto club

New research has revealed so much driver impairment from the use of hands-free technology that the American Automobile Association (AAA) is calling for regulations. The results are alarming given the rise of vehicle infotainment systems that let drivers text, make dinner reservations, or update Facebook using voice commands.

The new study compared the effects of various activities on simulated and real-life driving ability. According to the study, using a voice-to-text system to check and send email is more distracting than talking to passengers or using a handheld or hands-free cell phone. Problems with driver distraction include slower reaction times and “tunnel vision” in which people fail to notice potential obstacles even while looking at the road.

The study was commissioned by AAA and conducted at the University of Utah. AAA is now circulating its report and using it as a launching pad for discussions with car companies, safety advocates, and policy makers.

“There is a looming public safety crisis ahead with the future proliferation of these in-vehicle technologies,” AAA President and CEO Robert L. Darbelnet said in a statement. “It’s time to consider limiting new and potentially dangerous mental distractions built into cars, particularly with the common public misperception that hands-free means risk-free.”



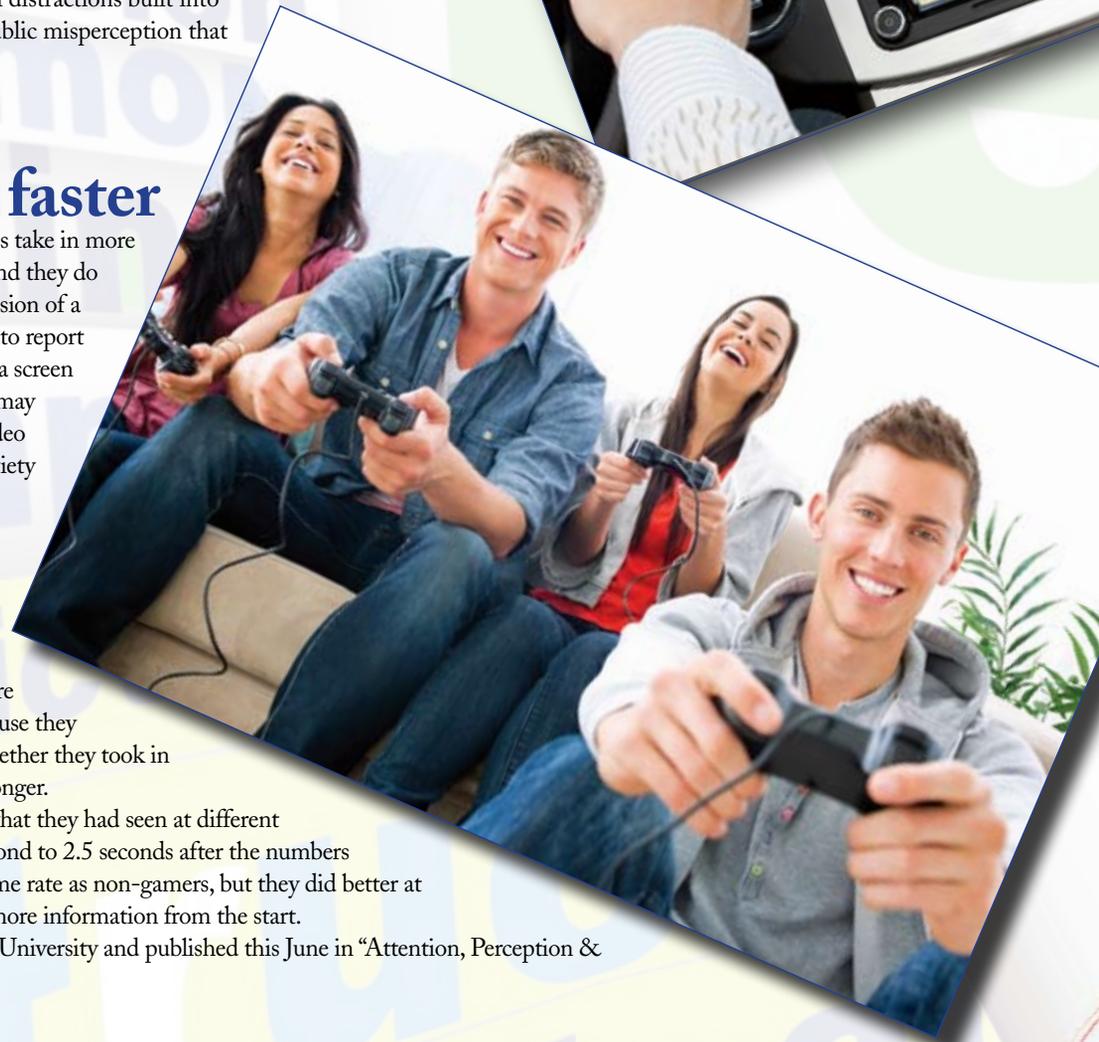
Gamers see it faster

People who play action video games take in more visual information than non-gamers, and they do it at lightning speed. This is the conclusion of a new study in which people were asked to report on the position of numbers flashed on a screen for just a tenth of a second. The study may explain why people who play action video games outperform non-gamers at a variety of visual and spatial tasks.

Previous research has revealed gamers’ superior skill at tasks such as tracking multiple objects, searching complex scenes, counting objects quickly, and detecting changes in a scene. However, researchers were unsure whether gamers performed better because they took in more visual information, or whether they took in the same amount but remembered it longer.

In this study, subjects were asked what they had seen at different time points, from a hundredth of a second to 2.5 seconds after the numbers had vanished. Gamers forgot at the same rate as non-gamers, but they did better at every time point, indicating they had more information from the start.

The study was conducted at Duke University and published this June in “Attention, Perception & Psychophysics.”



Science noses ahead in flu fight

Scientists have a new weapon in the fight against influenza: gene therapy nasal spray. The spray completely protected mice and ferrets from many seasonal and pandemic strains, including the ones that caused the 1918 “Spanish” flu and 2009 swine flu pandemics.

Existing vaccines only work on specific flu strains, and they are often useless in pandemics because they take too long to develop. The new spray could be stockpiled and deployed quickly to halt a spreading pandemic. It could also protect vulnerable people such as the elderly from seasonal flus.

The key to the spray is an antibody that attaches to flu viruses and tags them for destruction by the immune system. The antibody was first developed in 2011, but until now there was no good way to deliver it to the body. Scientists from the University of Pennsylvania made the flu-fighting spray by inserting a gene for the antibody into a harmless virus. The engineered virus infects cells in the lining of the nose and turns them into antibody-making machines.

The study was published in the May 29 edition of “Science Translational Medicine.”

Obese and pregnant? Grandkids may suffer

A mother’s weight has profound effects on her family’s health, but those effects may skip a generation, according to a new study from the University of Edinburgh. Female mice became obese and developed diabetes-related symptoms when fed a diet high in fat and sugar. While their immediate offspring were similar to those of normal-weight mice, the grandchildren of obese mice showed complex changes in weight, body composition, and metabolism.

Previous research has suggested that obesity may affect multiple generations in humans, according to the authors of



the study. However, in humans it is hard to know how much is due to obesity itself and how much is due to the fact that families share similar genes and lifestyles. By using mice, the researchers were able to control these factors and pinpoint the grandmother’s diet as the cause.

Specific effects of obesity on grandchildren included lower birth weight and changes in the expression of genes involved in fat metabolism. Grandsons in particular showed high insulin and a higher percentage of their body weight made up by fat.

The study was published May 21 in the early online edition of “Endocrinology.”

Music frees intensive care patients from heavy sedation

Music may ease anxiety and reduce the need for sedative drugs in critically ill patients, according to a new study. Linda Chlan and colleagues offered CD players with a choice of relaxing music to intensive care patients on ventilators, and found that they reported 37 percent less anxiety and were prescribed fewer sedatives than patients without access to music. Fewer sedatives is good news because ventilator patients often suffer serious side effects from heavy, prolonged sedation.

The patients were asked twice a day if they would like to hear music and encouraged to listen whenever they liked, but they chose the music and controlled when it was played. Ventilator patients have little say in most aspects of their care, so this element of choice may have been key to the therapy’s success. The researchers found similar benefits from noise-canceling headphones, though music was better at reducing sedation.

The study appeared online this May in “The Journal of the American Medical Association.”

Sunless tanning

Tips and tricks for getting that safe, healthy glow

Sunless tanning is a practical alternative to sunbathing. Find out how sunless tanning products work, including possible risks and how to get the best results.

Don't want to expose your skin to the sun's damaging rays, but still want that sun-kissed glow? Consider trying sunless tanning products. Start by understanding how sunless tanning products work — and the importance of applying them carefully and correctly.

How do sunless tanning products work?

Sunless tanning products, also called self-tanners, can give your skin a tanned look without exposing it to harmful ultraviolet (UV) rays. Sunless tanning products are commonly sold as lotions and sprays you apply to your skin. Professional spray-on tanning also is available at many salons, spas and tanning businesses.

The active ingredient in most sunless tanning products is the color additive, dihydroxyacetone. When applied, dihydroxyacetone reacts with dead cells in the skin's surface to temporarily darken the skin. The coloring typically wears off after a few days.

Sunless tanning products might or might not contain sunscreen. If a product does contain sunscreen, it will only be effective for a couple of hours. The color produced by the sunless tanning product won't protect your skin from ultraviolet rays. If you spend



time outdoors, sunscreen remains essential.

What about sunless tanning pills?

Sunless tanning pills, which typically contain the color additive canthaxanthin, are unsafe. When taken in large amounts, canthaxanthin can turn your skin orange or brown and cause hives, liver damage and impaired vision.

Is sunless tanning safe?

Topical sunless tanning products are generally considered safe alternatives to sunbathing, as long as they're used as directed.

The Food and Drug Administration (FDA) has approved dihydroxyacetone for external application to the skin. However, the FDA hasn't approved the use of dihydroxyacetone for application to areas near the eyes, mouth or nose. If you're using a sunless tan-

ning lotion, it's easy to avoid these areas. With spray tanning, this might be more difficult — since the product is usually applied to the whole body to ensure even color. Spray tanning might also cause you to inhale the product.

Further research is needed to determine the risks — if any — of this type of exposure. In the meantime, protect your eyes, mouth and nose when spray tanning and avoid inhaling the product. Be sure to wear goggles and nose plugs, and hold your breath while the spray is being applied.

What's the best way to apply a sunless tanning lotion?

For best results, follow the package directions carefully. In general:

- Exfoliate first. Before using a sunless tanning product, wash your skin to remove excess dead skin cells. Spend a little extra time

exfoliating areas with thick skin, such as your knees, elbows and ankles.

- Apply in sections. Massage the product into your skin in a circular motion. Apply the tanner to your body in sections, such as your arms, legs and torso. Wash your hands with soap and water after each section to avoid discoloring your palms. Lightly extend the product from your ankles to your feet and from your wrists to your hands.

- Wipe joint areas. The knees, elbows and ankles tend to absorb more of sunless tanning products. To dilute the tanning effect in these areas, gently rub them with a damp towel.

- Take time to dry. Wait to dress at least 10 minutes. Wear loose clothing and avoid sweating for three hours.

—By Mayo Clinic staff

INFRARED LIGHT THERAPY

Benefits include faster healing, increased metabolism and pain relief

Did you know that light has a profound effect on our bodies? The biological importance of light has been recognized for quite some time. Most of us know that sunlight absorbed by human skin generates vitamin D. Experiments conducted by NASA in the early 1990's showed that when astronauts were exposed to infrared light therapy on long-term space flights, they had less muscle

atrophy and improved wound healing.

Since then, new products have been developed to make these benefits available to anyone. Many types of infrared and laser therapy devices are available. The infrared light devices filter out UV radiation, and they aren't tanning beds. The devices are used in spas, hospitals and during physical therapy sessions – for various reasons.

BY **CARRIE BAUGH**

Baugh owns Planet Beach
Contempo Spa in Centerville

INFRARED THERAPY REDUCED ARTHRITIS PAIN

A 2009 study published in "Clinical Rheumatology" reported that among rheumatoid arthritis (RA) and ankylosing spondylitis (AS) patients, pain and stiffness were lessened during infrared therapy treatments at a statistically significant level. The patients were treated with a series of eight infrared treatments over four weeks.

During those four weeks, many patients reported feeling comfortable and had less stiffness and pain, but the results were not statistically significant and "no relevant changes in disease scores were found," showing that the disease had not progressed.

"In conclusion, infrared treatment has statistically significant short-term beneficial effects and clinically relevant period effects during treatment," reads the study's abstract.

DIABETICS REPORTED BETTER QUALITY OF LIFE WITH SAUNA THERAPY

A June 2010 study in the "Journal of Alternative Complementary Medicine" found that far-infrared therapy in the form of sauna treatments improved the quality of life for type II diabetics in terms of stress, fatigue, general health and social well-being.

Volunteer study participants from the Fraser Lake Community Health Center in British Columbia, Canada were surveyed before and after a three-month period during which they received three 30-minute sauna sessions weekly.

The study was not statistically significant, but the authors, including lead researcher Richard Beaver, wrote that sauna treatments "may be associated with improved quality of life in people with type II diabetes mellitus."

HERE IS WHAT INFRARED THERAPY HAS TO OFFER



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Get up, stand up

Start walking with this 12-week plan

Are you looking to ease into getting in shape? This 12-week walking schedule from the National Heart, Lung, and Blood Institute can start you on the path to better health. But before starting this walking plan, talk with your doctor if you've been sedentary for a long time or you have serious health issues.

Try to walk at least five times each week. Always start with a five-minute, slower paced walk to warm up and end with a five-minute, slower paced walk to cool down.

Start at a pace that's comfortable for you. Then, gradually pick up speed until you're walking briskly — the equivalent of 3.5 miles an hour. You should be breathing hard, but still able to carry on a conversation. Each week, add two minutes to your walking time.

As you become more fit, you'll want to add strength training exercises, such as pushups and lunges, to your routine to meet the physical activity level recommended for healthy adults.

-By Mayo Clinic staff

Week	Warm-up	Brisk walking	Cool-down
1	5 minutes	5 minutes	5 minutes
2	5 minutes	7 minutes	5 minutes
3	5 minutes	9 minutes	5 minutes
4	5 minutes	11 minutes	5 minutes
5	5 minutes	13 minutes	5 minutes
6	5 minutes	15 minutes	5 minutes
7	5 minutes	18 minutes	5 minutes
8	5 minutes	20 minutes	5 minutes
9	5 minutes	23 minutes	5 minutes
10	5 minutes	26 minutes	5 minutes
11	5 minutes	28 minutes	5 minutes
12	5 minutes	30 minutes	5 minutes

GET MOVING GET BETTER



BY TOM BUSSELBERG
ISLANDER EDITOR

Exercise improves quality of life, experts say

Exercise increases a person's quality of life, medical professionals agree.

That goes for anyone, regardless of the shape they are in, their age or fitness goals, said Ryan Dudley, a personal trainer with Anytime Fitness in Woods Cross.

"It really just improves quality of life in every way,"

he said. "Even when you go out, you feel better."

It helps with everything from being able to easily get out of a chair to making housework less of a chore, Dudley said.

"Hardly anyone goes to the gym with the intention to be a Mrs. or Ms. Olympia," he said. "They want to feel better, have more energy. Maybe they haven't taken care of themselves, or something happened in their life" that detoured them from a previous exercise regimen.

Many people spend time in the gym in the cold-weather months because they want to be in shape to enjoy the mountain biking or hiking, water skiing, or other outdoor pursuits, he said.

Dudley has been active in athletics his entire life. For instance, he played football, basketball and baseball in high school.

"People should start out very slow" when taking on an exercise routine, he advised. "The worst thing they can do is come to the gym and try to lift as much weight as possible. Your muscles and ligaments aren't used to that."

Such an unexpected shock to the body can lead to injury, Dudley said.

Proper diet is also essential to reaching fitness and life goals, he said:

"It's got to be a lifestyle change. Most people I train are looking for that."

Dudley is certified through longtime local resident and former world bodybuilding champion Larry Scott.

Resources for exercise routines, diet and more are available from such websites as jimstoppioni.org or anytime-fitness.com.

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Tinnitus

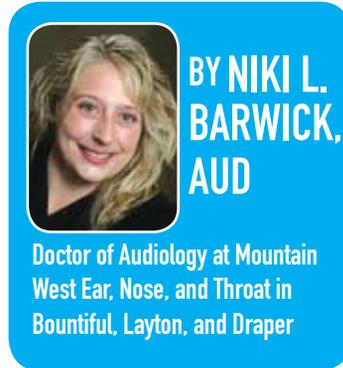
Causes range from too much ear wax to nerve damage

Tinnitus refers to the perception of sound in one or both ears without the presence of any actual external sound. It is most often described as a ringing in the ear, but some people compare it to a hissing, roaring, whooshing, buzzing, or whistling noise. It can be intermittent, appearing or disappearing randomly, or a constant background annoyance, ranging in severity from a barely perceptible nuisance to a full-fledged distraction. Tinnitus affects approximately 50 million Americans.

Tinnitus is considered a symptom of an underlying condition rather than a disease. It can't be traced to one single cause; instead, a number of factors can trigger tinnitus. Common causes include aging, noise exposure, head or

neck trauma, excessive buildup of earwax, cardiovascular disease, ototoxic medications, and a number of disorders (e.g., thyroid conditions, Meniere's disease, Lyme disease, fibromyalgia).

Some people report a rhythmic pulse that appears to keep time with their own heartbeat. This is known as pulsatile tinnitus and is fairly uncommon. It is usually caused by abnormal blood flow in the inner ear, or other vascular irregularities. The most common form of tinnitus, most likely caused by nerve damage to the ear, is called nonpulsatile.



Successful treatment of tinnitus often involves home remedies. Making changes to your diet – reducing or eliminating alcohol and caffeine, for instance – can make a difference. Giving up smoking, taking up exercise, and avoiding aspirin are other proven ways to reduce tinnitus. Avoid noisy situations whenever possible, and wear ear protection if

you can't. To help you sleep, try a white noise machine or other masking techniques.

Tinnitus is often a symptom of hearing loss. Treatment depends on the type and degree of hearing loss experienced by the patient. Many people believe hearing loss is strictly related to old age, but in reality there are many different causes that can affect people of all age groups and lifestyles.

Conductive hearing loss affects the outer and middle ear, and is usually treatable with medication or surgery. It can be caused by earwax buildup, skin and ear infections, and abnormalities of the outer ear or ear canal.

Sensorineural hearing loss affects the inner ear, and is the more

■ See "TINNITUS" p. 17



Tinnitus

Continued from p. 16

common type. Causes include noise exposure, birth defects, viruses and infections, reactions to medications, hereditary and genetic factors, and natural aging. While irreversible and nonresponsive to drugs and surgery, individuals with sensorineural hearing loss can benefit from hearing aids and assistive listening devices.

Mixed hearing loss involves a combination of the two main types.

The severity of hearing loss is measured in degrees; treatment depends upon the degree and source of the hearing loss. Degrees range from mild (difficulty understanding soft speech, especially when background noise is a factor) to profound (inability to understand amplified speech or even the loudest environmental sounds).

The good news is that there is help available! There are many treatment options for both hearing loss and tinnitus so it is important you are evaluated by an Ear, Nose, and Throat Physician and your Audiologist to find the best personalized treatment plan.

Hearing loss **Tricky anatomy terms defined**

Hearing professionals:

ENT Physician: Medical doctor specializing in ear, nose and throat health

Audiologist: a trained professional who can fit hearing aids and measures hearing loss.

Parts of the ear:

Auricle (pinna): Fleshy exterior of the ear

Lobule: Ear lobe

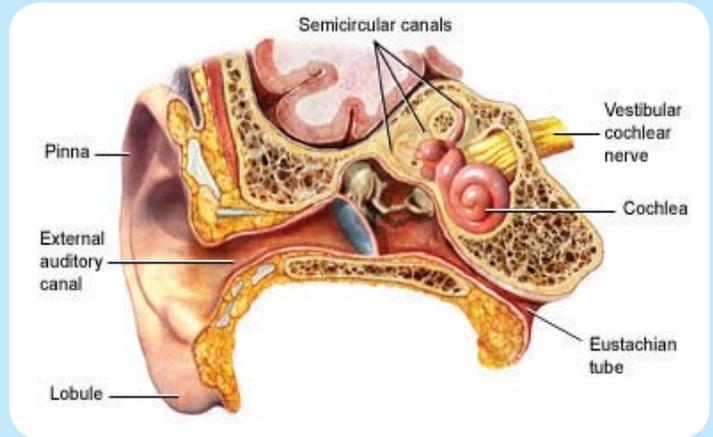
External auditory canal: Outer canal leading to the middle ear

Ear wax: Also known as cerumen, this is the yellow waxy secretion from the glands of the external ear.

Eustachian Tube: Narrow tube attached to the middle ear that acts like a pressure valve

Ear drum (tympanic membrane): Thin piece of tightly stretched skin that separates the outer ear from the middle ear and ossicles

Hammer (malleus): Part of the ossicles attached to the eardrum



Stirrup (stapes): This is smallest bone in the ossicles and is attached to the incus, or anvil

Anvil (incus): Part of the ossicles attached to the malleolus, or hammer

Cochlea: Small tube in the inner ear that translates vibration into nerve signals, lined with tiny hairs

Semicircular canals: Three fluid-filled bony channels in the inner ear.

Vestibular cochlear nerve: The nerve that supplies hair structures in the cochlea and helps with balance

Things TO DO ...

Priority _____ Date: _____

- ~~Plant a garden~~
- ~~Buy birthday gift~~
- ~~Grocery shopping~~
- ~~Oil change~~
- Get Hearing Checked**
- ~~Clean out the attic~~

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ROBOTIC SURGERY

New da Vinci system ups cost but shortens recovery times

Surgical equipment new to Lakeview Hospital in Bountiful may drastically improve recovery times for patients who undergo procedures such as hysterectomy and cholecystectomy (removal of the gallbladder.)

The robotic tool is known as the da Vinci Surgical System and is manufactured by Intuitive Surgical. Doctors slide up to a console and insert their fingers into special controls, all while looking through a display that shows three-dimensional images.

Commands from that console are transmitted to a large gray machine with four arms, which do the slicing, stitching and more during the surgery.

In addition to cutting tools, the ends of the arms are fitted with special cameras that allow the doctors on the other end to see what they are doing.

Lakeview Hospital has been using the equipment since January, but held an event last month to allow the public to try out the machine.

Valeria Rumposa, surgical services director at the hospital, said this machine improves over previous robotic surgery options because of its visual acuity, zoom in and zoom out functions and the activity of its “fingers.”

“Our fingers are bigger than the instrumentation on the surgery,” she said.

Barbara Edsinger had a colonectomy using a da Vinci system at Davis Hospital in Layton early this year.

“The recovery time was amazing,” she said. “I’m doing everything now.”

Her recovery took just two days, compared to the expected recovery time of 12 to 14 days with traditional open surgery.

The improved recovery times are possible because incisions of

BY
REBECCA PALMER
EDITOR

only a few centimeters are necessary in many cases. All the needed instruments can go through the same opening and, in the case of removal, tissue can be brought back through the same small hole.

The machines can cost up to \$2 million, plus maintenance fees, and surgeries completed with them can be more costly than alternatives, such as laparoscopy.

According to the manufacturer, 2,585 da Vinci Systems are installed in more than 2,025 hospitals worldwide.

The so-called robotic surgeons bring the promise of many benefits, but have also brought some criticism.

An expose by NBC’s “Rock-Center” reported that “the majority of the hundreds of thousands of robotic surgeries performed in the U.S. each year are done safely” but that the “U.S. Food and Drug administration has received more than 200 reports since 2007 of burns, cuts and infections – including 89 deaths – after robotic surgery.”

It did not cite comparable rates for laparoscopy and open surgery, as these figures are less readily available from government sources.

In March, the FDA began an investigation into an increase in adverse reports with da Vinci. Two months later, Intuitive released an “Urgent Medical Device Notification” to its customers about the curved scissors used by one of the da Vinci robotic arms, warning of micro-cracks that “could create a pathway for electro-surgical energy to leak to tissue.” The company is studying new silicone tip covers, media

sources report.

Also in March, the American Congress of Obstetricians and Gynecologists warned against the high cost of treatments.

“While there may be some advantages to the use of robotics in complex hysterectomies, especially for cancer operations that require extensive surgery and removal of lymph nodes, studies have shown that adding this expensive technology for routine surgical care does not improve patient outcomes,” a statement released by the doctors reads.

“Consequently, there is no good data proving that robotic hysterectomy is even as good as — let alone better — than existing, and far less costly, minimally invasive alternatives.”

A study published in February in “The Journal of the American Medical Association” found that complication rates for robotically assisted hysterectomies were similar to other hysterectomies but that patients were less likely to be hospitalized for longer than two days.

It also found that “total costs associated with robotically assisted hysterectomy were (on average) \$2189 more per case than for laparoscopic hysterectomy.”

For Edsinger, the extra cost was less important than her ability to return to normal life so quickly.

“It was about a three-hour surgery and then I had results in three days,” she said. “It’s amazing.”

In August
Davis Wellness
focus on
Eye Care

HEALTH

COMING in August

The Islander

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Active Living

in Davis



Fun fitness events are around every corner and up every hill in Davis County
Clockwise, from top left, Annie Hedberg runs with children in South Davis Community Hospital's Superhero Run, *courtesy photo*. Brayden Sales, 13, from West Point, enjoys fishing at Steed Pond, and a fisher floats in Holmes Creek Reservoir in Layton, *photos by Brandi Lee-Cimino*. Ellison Barlow and Zach Jaruis enjoy an early morning Zumba class, *photo by Shannon Cutilip Sampson*. Cyclists take on hills in Three Kings Event in North Salt Lake, *photo by Louise R. Shaw*.

Faster, better, safer

Local emergency rooms add tech to improve patient care

BY MELINDA WILLIAMS
STAFF WRITER

You fall and twist your ankle.

It's likely only a sprain and not life threatening. But a doctor should take a look at it.

In the past, you may have headed to the emergency room and waited.

Beginning this week though, a new emergency room check-in service at Davis Hospital and Medical Service will make getting treatment faster and may eliminate some of the wait time.

InQuicker is a service that allows patients with non-life threatening emergencies to log into *UtahER.com* and check in to Davis Hospital and Medical Center or one of four other Wasatch Front hospitals from home.

InQuicker is new to Utah, but is up and operational, according to Melinda Meier, Davis Hospital and Medical Center spokeswoman.

"When you log on, you choose which hospital you want to go to, and the next screen that pops up asks you to explain in detail what your problem is," Meier said.

The system then can assign a time for you to come in. Many patients feel more comfortable waiting in their own home, Meier said, and it can possibly save a person with a sprained ankle from being exposed to others in the waiting room who may have a virus.

With the information provided online, the emergency room staff may be able to prepare for you should your problem be something that needs special equipment to treat.

"It has far-reaching benefits," Meier said.

InQuicker is not an appointment or reservation service, as the nature of emergency rooms and urgent care triage does not allow for the scheduling of medical treatment, a press release from Davis Hospital and Medical Center said.

Should a person having a heart attack be wheeled into the emergency room just as you arrive with your sprained ankle, the medical team will treat the heart attack victim first, Meier said.

"We think most people understand that," Meier said.

Still, in this technologically advanced society, it's one more tool people can use. In addition to a computer log-on, there's a smart phone app, which people can use if they're not near a desktop computer.

That may come in handy during the summer. With so many outdoor activities, people often get hurt while recreating. They can use the app to sign in at the nearest hospital with the system, Meier said. They include Salt Lake Regional Medical Center, Jordan Valley

Medical Center, Pioneer Valley Hospital and the Davis Hospital Weber campus.

People living in south Davis County can benefit from emergency room improvements made closer to home at Lakeview Hospital in Bountiful.

In addition to remodeling the facility and adding services to help heart attack patients, the hospital makes ER wait times available on its website at *lakeviewhospital.com* and on electronic billboards throughout the county.

Furthermore, patients expecting a baby, scheduling a mammogram or scheduling a procedure can pre-register online and can check if the hospital accepts their insurance plans. If you simply have questions, you can also search a database of medical knowledge from the site.

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