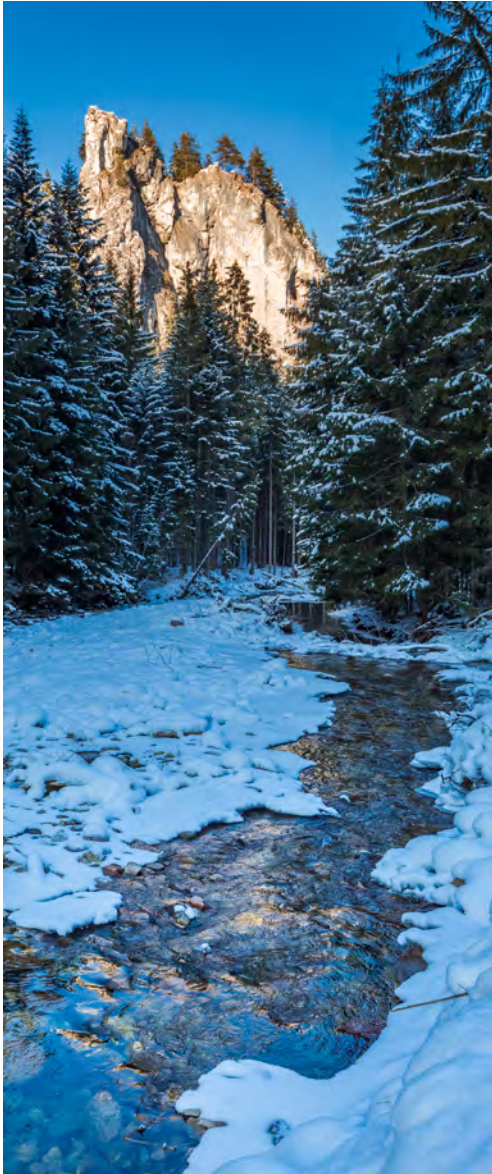


HEALTHY YOU!

A Family of Providers Caring for a Family of Patients



Our Specialties

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We're experts in our field.

We're experts in our field with over 90 providers in 18 specialties at 23 locations. All of our providers are board-certified or board-eligible.

Hitting the slopes? Keep those feet dry!

Shoe gear should fit properly and offer arch support

Northwesterners treasure the many opportunities we have to enjoy the outdoors during the winter. Cold temperatures and moisture, however, can deliver a dangerous one-two punch to foot circulation and foot health. A few basic precautions can help prevent foot trauma or cold injuries to foot tissue.

WWMG podiatrist Dr. Kristen Boyce explains that keeping your feet dry is the most important priority. "If you have wet socks, or wet shoes or boots, it takes more energy to keep the toes warm. The body starts to decide that it's more important to keep the foot warm, or the core, so circulation can decrease to the extremities, causing blood vessels there to constrict."

That can result in tissue damage, which is not always apparent right away. "It can start with wet shoes on a hike, and several days later, you may notice some discolored tenderness in the toes. Let's say a month goes by, and you again hike in wet shoes. Then you may get small, red or purplish blisters on your toes, or sores. With repeated events, it's easier to have it happen more frequently."

No matter if it is hiking, sledding, snowshoeing, skiing, or snowmobiling, it's crucial to start any cold-weather outdoor activity with dry shoe gear and dry socks. "Cotton holds moisture. Synthetic fibers or merino wool are preferable because they wick it away from the skin."

Another important factor is proper fit. Tight athletic shoe gear can compress the front part of the foot, causing nerve pain, ingrown nails, or corns. "Some people lose toenails every year because of ill-fitting shoe gear, or improper support; their foot is sloppy and hits the front of the boot, causing trauma."

Arch support ensures proper alignment and position of the foot, lessening the risk of injury. In the case of skiing, it also results in better function and improved performance. "There is a range of options, from going with what the ski shop sells, to working with a podiatrist for custom-fitted orthotics. Even people who do not require orthotics for their daily footwear can benefit from wearing them for skiing."

(Dr. Boyce is the newest podiatrist at WWMG Podiatry. He is also an outdoor enthusiast and he welcomes sports enthusiasts of all kinds. 3802 Broadway, Suite B, Everett, WA. 425-259-0855)



Dr. Kristen Boyce

Seeking meaningful outcomes in orthopedics

Non-surgical options that focus on patients' goals

In medical school, Dr. Catherine Yee admired how surgeons communicated with their patients about tough issues that had significant impact on their quality of life. When she did a Physical Medicine and Rehabilitation rotation, she came to the realization that there was a whole field dedicated to function as it affects people's daily activities. That's where she found her calling.

At the WWMG Orthopedics, Sports, Spine & Hand Center, Dr. Yee works in non-surgical orthopedics. "My focus is to restore function and help patients achieve an outcome that is meaningful to them, by combining medication, therapies, and interventions."

"As physicians, we often have to focus on certain specific goals. That's the right thing to do, but the patient may not find it quite as meaningful. I like to be in that junction where we are also focusing on the patient's goals." She finds it especially rewarding to help people, as they age, to maintain or restore their ability to do the activities they enjoy, "be it hiking, biking, beekeeping, knitting, or crocheting."

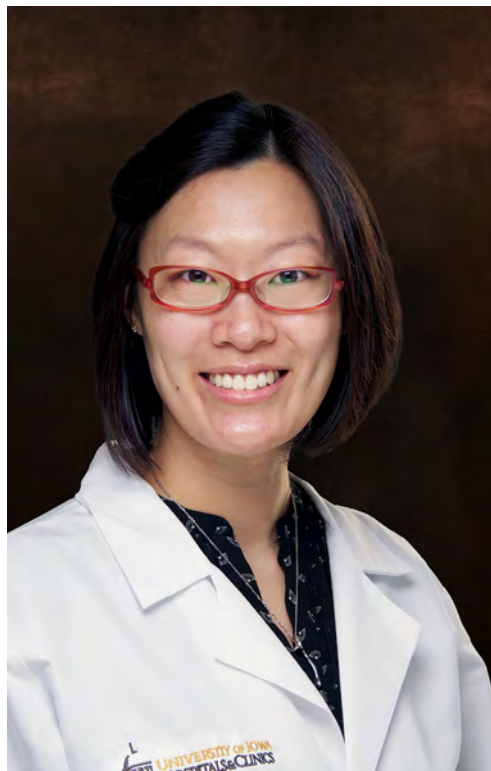
"What I enjoy doing is helping patients with therapies and making sure that they're getting the right types of exercise or focused physical activity using non-narcotic medications to help support that long-term recovery plan."

Pain can limit patients' participation in the rehabilitation therapies and exercises that they need to achieve their functional goals. If they may

benefit from an intervention, Dr. Yee offers same-day procedures for targeted drug delivery to pain generators, such as epidural steroid injections, joint injections, diagnostic nerve blocks, and radio frequency ablation. She performs these interventions at the Gateway Surgery Center.

"I also provide diagnostic testing called EMG/NCS (electromyography/nerve conduction study.) It's a two-part functional test. First, I use electrical stimulation to determine how a nerve is functioning. The second part is electromyography, which uses a small pin that acts like a microphone, so I can listen to the muscles. The combined results can help to localize the problem."

(Dr. Yee is WWMG Orthopedics, Sports, Spine & Hand's newest provider and she welcomes new patients. **425-317-9119.**)



Catherine Yee, M.D.

Diabetes Education – what is it?

Diabetes is a chronic disease and managing it well means making many decisions and performing specific activities on a daily basis. These can be confusing or very overwhelming when you're trying to figure out "how do I fit my life around diabetes?"

That is exactly where the Diabetes & Nutrition Education Center team at Western Washington Medical Group (WWMG) comes in. The team partners with you and provides education to enhance the skills and abilities necessary for diabetes self-care. They also provide support, offer additional resources, and strategize ways to modify or adopt new behaviors to sustain your diabetes self-care on an ongoing basis. This is accomplished by considering your unique health beliefs, cultural needs, current knowledge, physical limitations, emotional concerns, family support, financial status, medical history, and other factors that may affect your life. Instead of the approach "do this, do that", we will guide you through the why and how so you will instinctively understand what to do. You will no longer feel you have to fit your life around diabetes – rather we will collaborate with you to develop a realistic plan for diabetes to fit into your life. This education can help improve your health and reduce the risk of diabetes related complications.

Contact us at: **425-791-3087**

Winter darkness can change sleep patterns.

Temperature and holiday partying also contribute

Humans hibernate. It's been shown that, in the winter, we sleep more than two hours longer than during the summer.

"We know that less daylight affects sleep patterns," explains Dr. Robert McCoy of WWMG Pulmonary/Asthma and Sleep Medicine. "When daylight hours are shorter, we have higher levels of melatonin, which makes many of us feel sleepier and more fatigued."

Severe symptoms may signal SAD (seasonal affective disorder.) "We know that darkness decreases our serotonin, a chemical associated with a sense of well-being. On weekends, people with SAD may sleep almost three hours more than in the summer."

The first line of treatment is light therapy. "It takes only about 30 minutes in the morning. It can be ambient light that you put in your bathroom, or on the counter for breakfast. But the amount of light is important: you must have at least 10,000 lux."

For those who can, it's even better to walk those 30 minutes in natural daylight, even on overcast or rainy days. "That's the recommendation, of course. We're all busy. We go to work in the dark, we go home in the dark."



Temperature also affects sleep during the winter. Artificial heat dries out humidity and our mucus membranes. That makes us more susceptible to airway irritation and infections.

Holiday partying can make us sleep deprived, which in turn can lead to overeating. "Sleep deprivation drives down our levels of leptin, the hormone that satisfies our appetite, and drives up our levels of ghrelin, the appetite stimulant."

Dr. McCoy has a final recommendation for parents of teenagers, whose natural biorhythm is longer than 24 hours. "They can't help but be night owls. Their bodies are telling them to stay up late. Kids need the electronics out of their bedroom if they're going to get any sleep."

The way to a patient's heart is through questions

Benefits of communication, counsel, and education

Many of WWMG cardiologist Dr. Andrea Vitello's patients first go see her because they can't follow their usual lifestyle. They may be having difficulty breathing, or may not be able to exercise. During the process of diagnosis and treatment, patients' questions make Dr. Vitello happy. Questions are signs that patients are motivated to take an active role in their own health care.

"It's a partnership, and sometimes, there can be a disconnect between what we know as health care providers, and how well patients understand why we make our recommendations. The more we counsel our patients about what cardiovascular disease is, what causes it, and ways to avoid it, the more likely they are to think about it personally."

Dr. Vitello sees the fear that cardiovascular disease can cause in many people. "If I can help alleviate some
(continued page 4)



Andrea Vitello, M.D.

of those fears, or at least address them in the best honest way possible, then that helps to identify the most productive path forward."

Regarding Internet research by her patients, she finds that "it brings up great discussion and great questions because it's part of their own internal process. Some of the information on the Internet is good and some is not. It's an opportunity for me to clarify possible misunderstandings and redirect patients to good sources of appropriate information.

I think it's always a good thing when patients look into what's causing their disease process."

Although she does not perform interventional procedures herself, Dr. Vitello often advises patients about available therapies provided by her colleagues, including catheter-based interventions. Whether or not someone is a good candidate for a given procedure depends on many factors, and she feels that it's important to maximize non-invasive options first.

Her approach to helping patients with heart failure is similar. "I have a strong interest in heart failure. I find it a privilege to get to know my patients very well by providing close follow-up and understanding what has or hasn't worked for them in the past." Dr. Vitello's goal is to use as many outpatient resources as possible to avoid the need for hospitalization. That includes patient education and communication with other providers. "It's an ongoing discussion. It always changes. That's why I find heart failure particularly interesting."

(continued below)



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Heart failure can impact all age groups, and can have a genetic component. Other conditions that can lead to heart failure include cardiovascular disease in general, heart attacks, or problems with arrhythmias.

Dr. Vitello is a member of the Heart Failure Quality Committee at

Providence Regional Medical Center in Everett. The committee's purpose is to help clarify why some patients with heart failure need to be readmitted after being discharged from a hospital stay. "What aspect of their care could we have improved to prevent that from happening? Was it home

care, education, dietary guidance, communication between inpatient and outpatient providers, or follow-up? Many factors can play a role, and there's always room for improvement."