

HealthyYou

Summer 2016



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St. Margaret's Health
St. Margaret's Hospital

SMP Health System



EMPOWERING THE PATIENT

with St. Margaret's Patient Portal

In this technological age, many of us manage a great deal of our finances, including our bank accounts, online. We even have access to them from our mobile devices. If we can manage our money via the Internet, why shouldn't we be able to take the same control over our healthcare? St. Margaret's MyCare Patient Portal empowers our patients to do just that—giving users transparency where their health is concerned.

The MyCare Patient Portal is an online tool that provides you with the flexibility to access health information and other resources at your convenience between visits. It can be accessed from virtually anywhere, whether you're at home or on the go. Concerned about privacy and protection of your confidential information? The MyCare Patient Portal is completely secure and

only you—or an authorized family member, can access your information.

As a patient of St. Margaret's, the MyCare Patient Portal allows you to securely message your medical provider's staff, view appointments, review most lab results, view other reports, update personal information, request prescription renewals, and view history and discharge information. To access the MyCare Patient Portal, visit the St. Margaret's Health website at aboutsmh.org and click on the green MyCare Patient Portal login button, located in the top left corner of the website. For more information or assistance registering or using the MyCare Patient Portal, please call (815) 664-7200 or email mycare@aboutsmh.org.

Here are some FAQs about the MyCare Patient Portal that may answer some specific questions you may have:

Access

Q: Does a patient need to obtain access through their primary care provider?

A: No. Any registration area can provide the PORTAL CONSENT form which defines the terms and conditions of the authorization for the patient or their legal representative. Once signed and returned, you will be registered and an email will arrive with information on how to set up and obtain access to St. Margaret's mycare@aboutsmh.org.

Q: Can an emancipated minor have access to their St. Margaret's mycare@aboutsmh.org account?

A: Yes, with appropriate legal documentation.

Q: If the patient does not have an email in the system, can they have access to the portal?

A: No, an email address is necessary to obtain access to the portal.

Test Results

Q: How long before test results are automatically released to a patient's St. Margaret's mycare@aboutsmh.org account?

A: Automatically by the system 36 hours after the test results or report is signed.

Q: How do I request an appointment to see my provider?

A: The patient needs to have seen a provider at one of the St. Margaret's facilities once the portal is functioning. To request an appointment, a message is sent to the provider within the portal.

PROXY FAQ

Q: Define Health Care Proxy?

A: A person that is legally designated by the patient, such as a family member, social worker or home health professional, who can view your personal health information.

Q: How do I know a patient has a health care proxy?

A: A signed authorization should be scanned to their account.

Q: Can a single adult or child under 12 proxy authorization form be signed if requesting access for more than one individual?

A: No. One form is to be signed for each proxy that you grant access to your health information.

Q: Do we grant proxy access to a grandparent, aunt/uncle, or step parent?

A: Yes, but proper proxy forms and legal documents need to be obtained prior to granting access.

Q: Do we grant proxy access to foster parents and/or case workers?

A: Not without proper legal documentation and signed proxy authorization forms: The MyCare Patient Portal Parent/Guardian Request for Proxy Access for Minor Patient 12-17 years old or the Child Under 12 proxy form.

Q: What if a patient has already signed the proxy form when they come into the office?

A: A St. Margaret's employee should witness the patient's signature on the proxy form or the form should contain a legal notary stamp. Staff must compare the signature on the form to the signature on file for validation. Note: The "Child 12-17 Proxy Authorization Form" must be signed in person at the office and a St. Margaret's employee should sign using complete signature and date.

Q: What if the adult patient is not able to make decisions for themselves?

A: If the adult patient is not able to make decisions, the Healthcare Power of Attorney would need to sign the "signature of patient" line on the "SMH mycare@aboutsmh.org Adult Proxy Form." Indicate a relationship of "Healthcare Power of Attorney" as the "relationship to patient." A current valid Healthcare Power of Attorney document must also be supplied in order for this proxy document to be valid.

Q: I have a 19 year old mentally disabled patient whose mother is the legal guardian. Can the mother sign the adult proxy access form for the 19 year old?

A: If there are legal court documents providing guardianship information on file, the legal guardian would sign the form with her name in the patient signature field. If someone is designated as a legal guardian, it means that an individual has been declared incompetent and another person can act on their behalf. If someone is acting as a Healthcare Power of Attorney, the individual they are representing must be incapacitated for the Healthcare Power of Attorney to be active. Healthcare Power's of Attorney are more limited than legal guardians. Legal guardians have full authority to act on an individual's behalf.

Teen Proxy Access

Q: What if a child between 12 and 17 does not sign the Child 12-17 Proxy Authorization form?

A: Teen full proxy access is not granted and parent is not granted access to state specific information covered by Illinois Law.

Q: Is a patient who is 12-17 years old and has a child able to have a St. Margaret's mycare@aboutsmh.org account?

A: No. The system will not allow an activation code to be generated on any patient under the age of 18.

Q: 12 year old patients may not understand or remember the form they signed as they get older. Should 12-17 year olds that have granted teen full proxy access be advised of their rights at each visit?

A: It is up to the clinical staff to educate patients if they meet one of the qualifying conditions outlined in the state law before reaching age 18. Patients ages 12-17 have the right to revoke full minor proxy access at any time.

Q: Will there be an additional form for the patient to sign if they choose to revoke minor full proxy access?

A: Yes, the Revocation of Proxy Authorization form will be available in the event that a patient wants to revoke proxy access of the parent or legal guardian.

Q: What do I say to a parent if the child revokes minor full proxy access?

A: Explain that Illinois State Law protects a minor's (age 12-17) health information when a qualifying condition exists as they are considered to have the same legal capacity as an adult in regards to their medical treatment. SMH does not notify the proxy if access is revoked by the patient.

Q: I have a 15 year old mentally disabled patient whose mother would like proxy access. Can the mother sign the Child 12-17 Proxy Authorization Form for the 15 year old patient?

A: Yes, the mother may sign stating the patient is disabled and two staff members must witness and co-sign the form.

Revocation

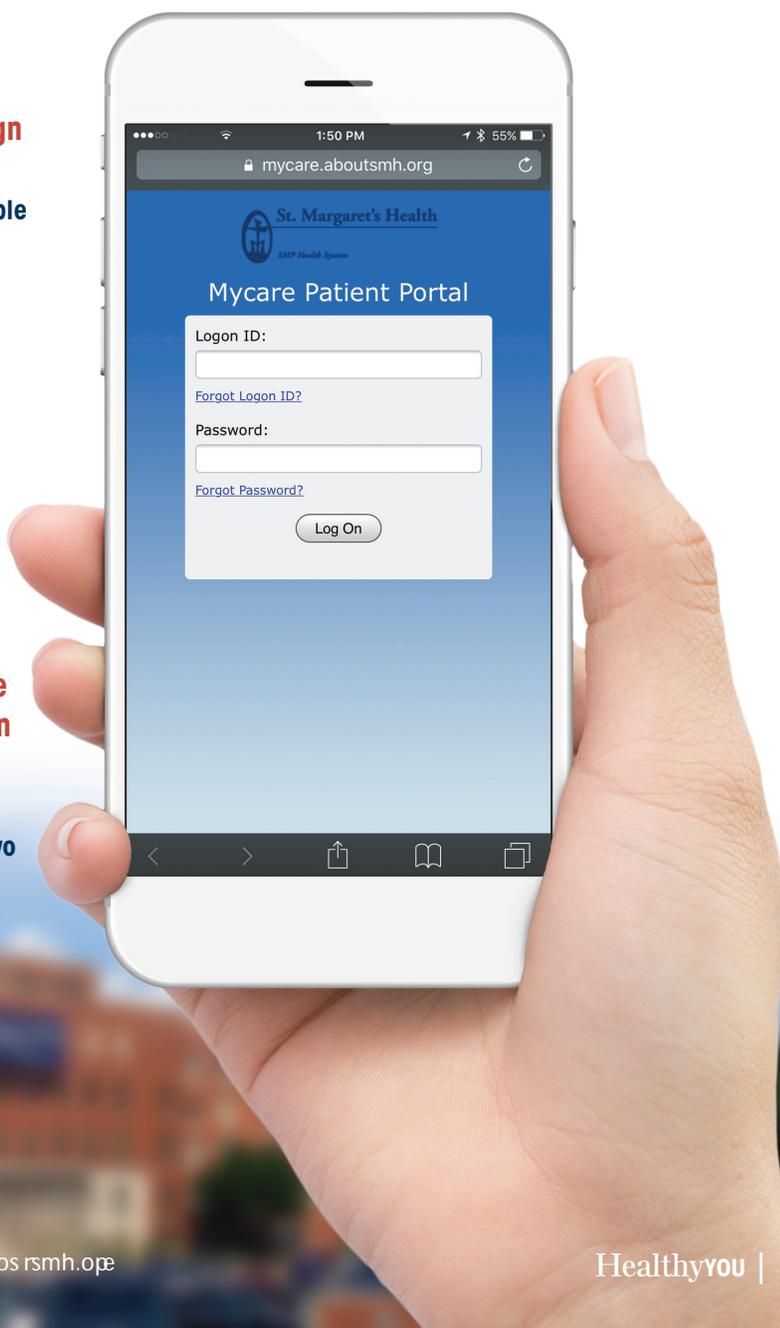
Q: How do I remove someone as my proxy?

A: The REVOCATION OF PROXY AUTHORIZATION form needs to be signed and witnessed at one of the SMH facilities. (The witness must sign full name and date the form to make this valid.)

Discrepancy with Proxy Information

Q: What do I do if I see something on the portal that does not look correct?

A: Contact your provider and discuss this with him/her. In the event that documentation needs to be amended/corrected, ask for a REQUEST FOR ADDENDUM OR CORRECTION form. This form needs to be completed by the patient (or designated legal representative) and returned to the provider. The provider will review the form. They may not agree with the changes but will respond to your request in writing with their decision.



ZIKA VIRUS This Summer

Did you know that in relation to human deaths, the mosquito is considered the most deadly organism in the world?

According to the World Health Organization (WHO), mosquito bites account for the death of over 1 million people each year. While their bites themselves don't cause death, they are notorious carriers of a number of deadly diseases and viruses that do, including, Malaria, West Nile Virus, Dengue Fever, and Yellow Fever, among others. Another mosquito-borne virus, the Zika virus, has been causing concern in the US in recent months due to the rise of reported cases in popular travel destinations for US travelers. Furthermore, the virus has been linked to a neurological birth disorder affecting the babies of infected pregnant women. In this article, we are going to share all you need to know about the Zika virus and what precautions you can take to avoid it.

According to the Centers for Disease Control and Prevention's (CDC) website, the Zika virus was first identified in Africa in 1947. The CDC further reports "in May of 2015, the Pan American Health Organization (PAHO) issued an alert regarding the first confirmed Zika virus infections in Brazil" and "currently, outbreaks are occurring in many countries and territories." The CDC expects the virus to continue to spread with little predictability as to how and where it will spread.

While the virus has been around for some time now, much of the more recent concerns involving the Zika virus are directed towards pregnant women, women who are trying to conceive, and those with compromised immune systems. The CDC reports that during pregnancy, the virus can be transmitted from the mother to her fetus, and as mentioned earlier, the virus is known to cause a neurological birth disorder called microcephaly, as well as other severe birth defects. Aside from mosquito bites from infected insects and from mother to child during

pregnancy, the disease may also be spread through sexual contact from men to his sexual partners (the Zika virus is present in semen longer than in blood) and during blood transfusions (there are no reported US cases involving a blood transfusion).



Symptoms of the disease may include a fever, rash, joint pain, and conjunctivitis (red eyes), as well as muscle pains and headaches; however, the symptoms are usually minor and only rarely require hospitalization. In fact, many times, the mildness or complete lack of symptoms altogether might even cause the virus to go undetected. The Zika virus only remains in the blood of an infected person for a week, but can sometimes last longer. According to one of our five board certified OB/GYN's, Ralph Narinedhat, MD, "There is no vaccine to prevent or medicine to treat Zika virus" that is currently available. The CDC recently issued travel advisories for Mexico, the Caribbean, Central America, the Pacific Islands, South America and other popular tropical destinations due to the Zika virus. "If you have recently traveled, be sure to tell your healthcare provider where and when you traveled," cautions Dr. Narinedhat. If you have visited a location where Zika is found and develop any of the symptoms mentioned earlier, visit your doctor or healthcare provider.

Recent concerns involving the Zika virus are directed towards pregnant women, women who are trying to conceive, and those with compromised immune systems.

Along with the warmer summer months come the pesky bugs and insects that can make a summer outing miserable if you become their choice meal. With the latest concerns in the media about the Zika virus, many people have feared that the mosquitos in the United States will begin spreading the disease. According to the CDC, "no local mosquito-borne Zika virus disease cases have been reported in US states, but there have been travel-associated cases." However, the number of Zika virus cases from US travelers is expected to rise, and as such, local spreading of the virus could potentially affect some

areas of the United States. Use cdc.gov as a reliable resource for keeping up-to-date on the latest news regarding the Zika virus. If you want to avoid becoming infected by the Zika virus, we recommend avoiding travel to areas known to have the Zika virus. This is especially imperative to pregnant women and women who are trying to conceive. Also, while the spread of Zika virus through mosquito-borne transmission has not yet emerged in the United States, it is always a good idea to protect yourself from their bites, which can often become infected. (contd.)

Ways to Avoid Bug Bites:

- Cover exposed skin as much as possible.
- Avoid bugs wherever you are residing or staying. Be sure to book hotel rooms and other accommodations that are air-conditioned or have sufficient window and door screens that bugs cannot get through.
- When outdoors, use area repellents (such as mosquito coils) that contain metofluthrin or allethrin.

Here's What the CDC and St. Margaret's Health Recommend You Can Do to Protect Yourself and Others

Use Insect Repellent:

- Use insect repellents that are in accordance with the regulations of the US Environmental Protection Agency (EPA). According to the CDC, products containing at least 20% DEET (such as Cutter Backwoods and Off! Deep Woods) to deter against mosquitoes, ticks, and other bugs.
- Products that protect against mosquitoes, but not other insects and bugs (such as ticks), contain active ingredients, such as picaridin, IR3535, and some oil of lemon eucalyptus and para-menthane-diol.
- If you are not keen on the strong scent of most insect repellent products, St. Margaret's board certified OB/GYN, Donna Sweetland, MD, recommends the Avon Skin-So-Soft product, which has a nicer scent. NOTE: this product only protects against mosquitoes.
- Be sure to apply insect repellent to both your exposed skin and clothing (do not apply repellent underneath clothing).
- Re-apply insect repellent according to the instructions on the product label.
- Never use repellents on cuts, wounds, or irritated skin and avoid contact with your eyes and mouth. Apply lightly around your ears.
- Do not spray repellent directly on your face. Instead, spray the repellent in your hand first and then apply to the face.
- Do not allow children to handle or spray the repellent product. When using on children, apply the product to your own hands first and then put it on the child.
- Do not apply repellents to a child's hands to avoid them getting it in their eyes and mouth.
- Do not use repellent on persons under the age of 2 months old. Instead use mosquito netting with a tight elastic band that can go over their carrier to protect them from mosquitos and other bugs.
- It is important to note that heavy application does NOT give you superior or longer-lasting protection.
- Upon returning indoors, wash the treated skin with soap and water or bathe.
- If you or your child develop a rash or other reaction from a repellent, stop use at once, wash it off with mild soap and water, and call your local poison control center for further guidance. If you seek medical attention, it can be helpful to bring the repellent with you.
- Use the EPA's website for more information on the effectiveness of insect repellents and to find the EPA-registered insect repellent that suits you and your family best.

SOURCES:

[who.int/mediacentre/factsheets/zika/en/](https://www.who.int/mediacentre/factsheets/zika/en/)
[cdc.gov/zika/](https://www.cdc.gov/zika/); [cdc.gov/travel/page/zika-travel-information](https://www.cdc.gov/travel/page/zika-travel-information)
[cdc.gov/travel/page/avoid-bug-bites](https://www.cdc.gov/travel/page/avoid-bug-bites)



EatingHEALTHY

Healthy Berry Fro-Yo Pops are not only a delicious treat that can help cool you down during the warmer months, but their ingredients also offer numerous health benefits that make them a must this summer.

Strawberries, blueberries, blackberries and raspberries (all of which can be used to make your favorite Healthy Berry Fro-Yo Pop flavors), are rich in nutrients, antioxidants and phytochemicals. They are also a good source of dietary fiber. Having berries in your diet has been shown to help fight and prevent many forms of cancer, lower your risk for heart disease and offer numerous other health benefits. In this recipe, sugar is replaced by honey as a sweetener, which is a natural energy source and immune system booster that will still satisfy your sweet tooth.

<http://www.goodhousekeeping.com/food-recipes/easy/a33378/berry-best-fro-yo-pops/>

Healthy Berry Fro-Yo Pops

Makes 6-8 popsicles

Ingredients:

1 1/2 c. reduced-fat plain Greek yogurt

6 oz. blackberries

6 oz. blueberries

3 tbsp. honey

1 tsp. vanilla

Directions:

Blend yogurt, blackberries, blueberries, honey, and vanilla until combined but still chunky.

Divide among ice pop molds; add sticks.

Freeze until solid, about 6 to 8 hours.

ENJOY a fruity smoothie and cool summertime treat all together!

Also, you can combine your family's favorite berry flavors to stock up delicious varieties for all summer long.



Recommended by Jennifer Scully, RD, LDN - St. Margaret's dietitian.

Summer Safety

Summer is here, and many people want to get outside and enjoy the beautiful weather while they can. After the long months of winter spent inside, though, some may be a little too eager and overdo the activities just a bit. Some of the more common injuries seen at the St. Margaret's Center for Physical Rehab this time of year include muscle strain, usually due to general exercise; shoulder and elbow injury due to baseball or softball; lower back injury, thanks to golf and yard work; and hip and knee injury as people return to running outside and hiking.

The staff at the St. Margaret's Center for Physical Rehab have identified some tips for staying healthy and preventing common summer injuries:

- It is always important to continue exercising year round, even if you change the type and intensity during the colder months. By continuing to use and work your muscles and joints, it will not be such a shock to them when you spend all day on the golf course!
- If time has been taken off from exercising, start off slow with low-impact activities like walking, stretching, cycling, or swimming. These exercises are less stressful on the joints.
- Make sure to also prevent over-training. Be honest with yourself; you know how active you may or may not have been in the last few months. Do not try to make up for winter inactivity within one week of nice weather!
- Get the proper amount of rest.
- Focus on good body mechanics, whether lifting a wheelbarrow or bending to weed your garden. Always avoid bending at your back to lift something, rather lift with your legs.
- Always listen to your body! If you are getting sore, change positions or take a break.



Another tip that is always important is to stay hydrated, but it becomes absolutely crucial in the summer months. It is true that over 75% of the human body's weight is due to water. Dehydration is a condition that can occur when the loss of body fluids exceeds the amount that is taken in. People and animals lose water every day in the form of water vapor in the breath we exhale, and as water in our sweat, urine, and stool. Along with water, small amounts of salts or electrolytes are also lost through normal activity. Our bodies are constantly readjusting the balance between these losses with fluid intake. When we lose too much water, our bodies may become out of balance or dehydrated, which can cause the body to lose its ability to function normally.

Although infants and children are at highest risk for dehydration, many adults and especially the elderly have significant risk factors. Many conditions may cause rapid and continued fluid loss and lead to dehydration, such as fever, heat exposure, and too much exercise; vomiting, diarrhea, and increased urination due to infection; and diseases such as diabetes.

The signs and symptoms of dehydration range from minor to severe and include:

- **Increased thirst**
- **Dry mouth and swollen tongue**
- **Weakness**
- **Dizziness**
- **Palpitations (feeling that the heart is jumping or pounding)**
- **Confusion**
- **Sluggishness or fainting**
- **Inability to sweat**
- **Decreased urine output**

If you believe someone is suffering the effects of dehydration, try to get them to take in fluids by sipping small amounts of water, drinking carbohydrate/electrolyte-containing drinks such as Gatorade or Pedialyte, or sucking on ice chips. If the person's temperature is elevated, try to also cool them down by removing or loosening clothing, moving them to air-conditioned areas, and using a spray bottle and lukewarm water on exposed skin surfaces.

When dehydration is treated and the underlying cause is identified, you will recover normally. Dehydration caused by heat exposure, too much exercise, or decreased water intake is generally easy to manage. The foremost treatment for dehydration is prevention and anticipating the need for increased fluid intake. Plan ahead and take extra water to all outdoor events and work where increased sweating, activity, and heat stress will increase fluid losses. Try to avoid exercise and exposure during high heat index days. If you must be outside, wear light-colored and loose-fitting clothing and break up your exposure to hot temperatures when possible.

We look forward to summer all year. These few small tips and precautions can help everyone enjoy summer safely and pain-free.

It is important to know that you should take the person to the Emergency Room if the following situations occur:

- **Fever higher than 103 degrees**
- **Confusion**
- **Headache**
- **Seizures**
- **Difficulty breathing**
- **Chest or abdominal pains**
- **Fainting**
- **No urine in the last 12 hours**



Make Advanced Care Planning

PART OF YOUR ESTATE PLANNING

According to a recently released Pew Research study based on 2015 data, "millennial" - defined as those aged 18-34 in 2015 - outnumbered "baby boomers", or those born 1947-1964, for the first time ever. While the difference was marginal, 75.4 million to 74.9 million, it is significant. As baby boomers age, it can be presumed that those who fall in the millennial group will not only be taking care of them in healthcare settings, but also making

some of the healthcare decisions on the behalf of those loved ones. Advanced care planning may be a difficult subject to bring up, but the relief it can bring your loved ones at a difficult time for them makes it very important. The National Institute on Aging states that more than one out of four older Americans face questions about medical treatment near the end of life but are not capable of making those decisions.

Advance care planning is not just something to worry about when you get older. At any age, a medical crisis could leave someone too ill to make his or her own healthcare decisions. Making healthcare plans for the future can make sure that you get the medical care you would want, even when doctors and family members are voicing those decisions for you. Advance care planning involves learning about the types of decisions that might need to be made, considering those decisions ahead of time, and then letting others know about your preference. The most important part of advanced care planning is the talk that you have with your family and doctor. This will help provide them with the knowledge and confidence they need to make care decisions for you in the future. The second most important part of the planning is an advance directive.

An advance directive is a legal document that goes into effect only if you are incapacitated and unable to speak for yourself. It is also a flexible document that can be adjusted as your situation changes because of new information or a change in your health. Modern technology and new medications have changed the ways we treat and cure diseases, but sometimes they can cause extra burden for little or no benefit when the disease is advanced and there is no cure.

Start by thinking about what kind of treatment you do or do not want in a medical emergency. It might help to talk to your doctor about how any present health conditions might influence your health in the future. If you don't have any medical issues now, taking family history into account may also provide clues to some medical situations you may face. When a doctor believes a cure is no longer possible and you are dying, decisions must be made about the use of emergency treatments to keep you alive. Some of these decisions may involve any artificial treatments necessary, and some of these

treatments can include CPR, ventilator use, artificial nutrition or hydration, and comfort care. Your decisions to handle any of these situations may be different at age 40 than at age 80, which is why it is important to understand that decisions can be changed as long as the documentation supports those changes.



Advance directives are legally valid throughout the United States. While you do not need a lawyer to fill out an advance care plan, your directive becomes legally valid as soon as you sign it in front of the witnesses. Healthcare providers must follow your advance directives as long as they are not against the provider's ethical and religious standards for care. There are two main elements in an advance directive - a living will and a durable power of attorney for healthcare. There are also other documents that can supplement your advance directive, and it is your choice which ones to create depending on how you want these decisions made.

A living will is a written document that helps you tell your doctors how you want to be treated if you are dying or permanently unconscious and cannot make decisions about emergency treatment. In a living will, you can say which procedures - such as CPR, feeding tubes, etc - you would or would not want, and under which conditions each of your choices applies.

A durable power of attorney for health care is a legal document naming a healthcare proxy, someone to make medical decisions for you at times when you might not be able to do so. Your proxy, or agent, should be familiar with your values and wishes. This means he or she will be able to decide as you would when treatment decisions need to be made. A durable power of attorney for health care enables you to be more specific about your medical treatment than a living will. *(contd.)*

You may also want to prepare separate advance care planning documents to express your wishes about a single medical issue or something not already covered in your advance directive. Two common medical issues that might arise at the end of life are a do not resuscitate order (DNR) and organ and tissue donation wishes. A DNR tells medical staff in a hospital or nursing facility that you do not want them to try to return your heart to a normal rhythm if it stops or is beating unevenly. Even though a living will may state that CPR is not wanted, it

can be helpful to have a DNR order as part of your medical file. Organ and tissue donation wishes allows those parts of a generally healthy person who has died to be transplanted into people who need them. If it is your wish to be a donor, even if you have signed up with the Illinois Secretary of State's "Life Goes On" registry, it is always beneficial to tell your loved ones and make it part of your advance care planning documents.

If you decide to declare a healthcare agent, think about people you know who share your views and values about life and medical decisions. They might be a family member, a friend, your lawyer, or someone with whom you worship. You can also decide how much authority your agent has over your medical care and whether that is a wide range of decisions or just a few specific ones. If you do not declare an agent, the state will assign someone to make medical decisions on your behalf.

This will probably be your spouse, your parents, or your adult children, or the state will appoint someone to represent your best interests if these options are not available.

Once your advance directives are complete, there are key people that need to have a copy, in addition to keeping one for yourself. Give a copy to your power of attorney for health care agent, your family members, pastor, and doctor. The more you make your family and friends aware that these documents exist, the greater the likelihood they will be used when needed. It is also a good idea to review your planning decisions from time to time, as you might want to make adjustments if you receive a severe diagnosis or if you endure a life-changing event such as death, marriage, or divorce. If any of your preferences or agent changes, make sure to destroy all outdated copies and replace with the new ones.

If you would like to talk more about all of your options, or if you would like to set up a consultation to get advance directives paperwork completed, please call St. Margaret's at **815-664-1486** and ask for an Advanced Care Planning Facilitator.

Pelvic Floor Dysfunction:

Treatments are Available

One out of every five Americans, of all ages, experience some form of pelvic floor dysfunction at some point during his or her life. You might assume that adult women are the only people susceptible to pelvic floor dysfunction, but men and children are at risk as well. In fact, millions of Americans actually suffer with the disease; however, many times it goes undetected and untreated.

What is pelvic floor dysfunction?

First, you must understand a few things about the pelvic floor. The pelvic floor is a sort of bed made up of muscles and tissue that extend from the pubic bone to the tailbone. It aids in supporting the abdominal and pelvic organs, and it helps in bladder control, as well as, bowel and sexual activity. As such, pelvic floor dysfunction is pain and disruption of bladder, bowel, and/or sexual function caused by restrictions of the muscles and nerves of the pelvis. Pelvic floor dysfunction can include a varied range of medical issues that arise when muscles of the pelvic floor are weak, tight, or there is a deficiency with the sacroiliac joint, low back, coccyx and/or hip joint.

Symptoms May Include:

Bladder:

- Interstitial Cystitis
- Urethral Syndrome
- Urgency-Frequency Syndrome
- Urinary Incontinence
- Urinary Retention

Bowel:

- Constipation
- Diarrhea
- Inflammatory Bowel Disease (IBD)
- Irritable Bowel Syndrome (IBS)
- Fecal Incontinence
- Hemorrhoid Pain
- Rectal Prolapsed or Anal Fissure

Women:

- Painful Intercourse
- Vaginismus
- Vestibular Pain

Men:

- Erectile Dysfunction
- Testicular/ Penile Pain or Numbness

SOURCES:

Uchospitals.edu; Emhphysicaltherapy.com;
Beyondbasicsphysicaltherapy.com;
columbiasurgery.org/calorectal/pelvic-floor-disorders-frequently-asked-questions

What causes pelvic floor dysfunction?

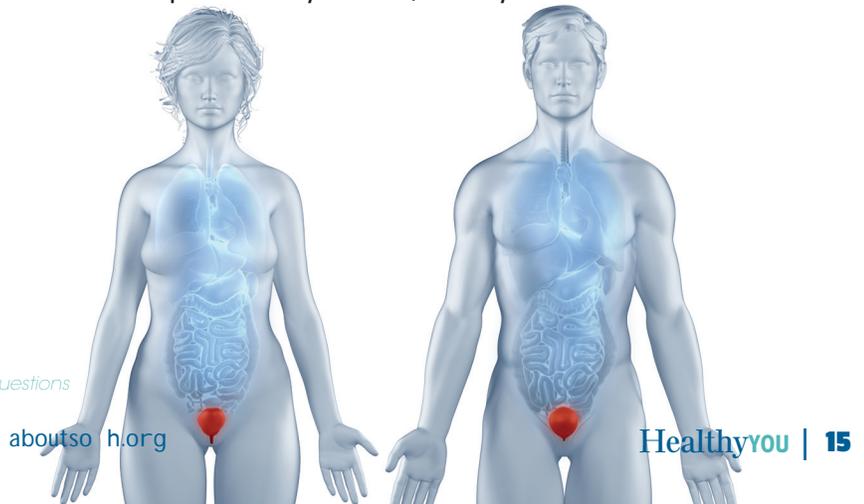
One of the most frequent causes of pelvic floor disorders is giving birth to a child. In fact, a woman's risk of developing a pelvic floor disorder increases with the number of times she has given birth. In addition to childbirth, women who are overweight or considered obese are also at greater risk. Pelvic surgery or radiation treatments, which can impair nerves and tissues, can also cause these conditions. Repetitive heavy lifting, genetics, and even chronic constipation, are other factors that can raise your chances of developing pelvic floor dysfunction.

Treatment can make a huge difference for those suffering with pelvic floor dysfunction. For most, the treatment involves primarily behavioral changes, such as refraining from pushing or straining when urinating or having a bowel movement, medication (such as a muscle relaxer), and physical therapy that can teach a patient how to relax and coordinate movement of your pelvic floor muscles. Our

"this has proven to be beneficial for many patients of varying ages and for multiple reasons."

— Donna Sweetland, MD

board certified OB/GYN, Donna Sweetland, MD, for one, is pleased treatments are now available at St. Margaret's: "I am very excited that St. Margaret's has added the addition of Pelvic Floor Therapy to their Physical Therapy Department. Michelle Zens, Physical Therapist, has received certification for this program. Sweetland says, "I have utilized this for the past several years for my patients." She further adds that "this has proven to be beneficial for many patients of varying ages and for multiple reasons." "Anyone interested in pursuing this program can be referred by their medical physician, midlevel provider, gynecologist, obstetrician, or urologist," she states. If you or a family member are experiencing any of the symptoms mentioned earlier and are concerned about pelvic floor dysfunction, talk to your doctor.





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Expected this Fall

Donna Sweetland, MD, Board Certified in Obstetrics and Gynecology, will be moving to our all new St. Margaret's Obstetrics & Gynecology Center - Peru located next to Culver's and our Center for Physical Rehabilitation facility.



Donna Sweetland, MD



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St. Margaret's Health

Obstetrics & Gynecology Center - Peru

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