

SUMMER 2015

LIVE

YOUNGER | LONGER

Cartilage restoration

Can you avoid joint replacement surgery?

Sleep yourself thin

TakeTEN™

Transform your health
in just 10 days

Recovery from addiction

You can't do it alone

Fibroids

Surgery pros and cons

Sinuses

When do you need surgery?

Asthma

How to spot symptoms

BROUGHT TO YOU BY ADVENTIST HEALTH NORTHERN CALIFORNIA NETWORK



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The St. Helena Region of Hospitals, which includes St. Helena Hospital Napa Valley, St. Helena Hospital Clear Lake and St. Helena Hospital Center for Behavioral Health, has combined with Ukiah Valley Medical Center and Frank R. Howard Memorial Hospital in Willits to form the Northern California Network of Adventist Health.

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Information in *Live Younger Longer* comes from a wide range of medical experts. If you have any concerns or questions about specific content that may affect your health, please contact your health care provider.

Models may be used in photos and illustrations.



Welcome to the Latest Issue of *Live Younger Longer*



It's summer, and that means we're all outside enjoying the weather. Many of us are in a positive frame of mind these days. But as happy as this time can be, this time of year can also be challenging and stressful if you or someone you love struggles with addiction and depression.

We're here to help. This issue features one man's journey from addiction to recovery and illustrates the importance of getting your family involved in the recovery process.

This issue also features a story about TakeTEN, our innovative lifestyle medicine program that helps fuse fitness, nutrition and medicine into your personal lifestyle prescription. Other stories include new advances in cartilage restoration, a proven method to help some prevent joint replacement surgery.

St. Helena Hospital is committed to providing the patient-centered care you and your families have come to depend on. I speak for everyone on our staff when I say it's our pleasure to do just that on a day-to-day basis.

Best wishes to you and yours,

STEVEN HERBER, MD
 President & CEO | St. Helena Hospital

Can You Sleep Yourself Slim?



Forty percent of Americans get just six hours of sleep or less per night, according to a recent Gallup poll. And groggy mornings and a cranky attitude aren't the only side effects of insufficient shut-eye either —missing out on sleep can also lead to weight gain.

If you're trying to slim down or shape up, hitting the sack is just as important as sweating at the gym. These four reasons are your best excuses to hit the snooze button and get more sleep.

It reduces cravings for unhealthy food.

According to one study, the sleep-deprived group wanted foods that contained an average of 600 calories more than what they craved when they were well rested. Researchers think that getting a full night of sufficient sleep actually helps to reboot and refresh the circuits of the human brain, allowing it to make optimal food choices.

It can help you feel fuller, longer.

Getting a good night's rest not only helps you fight the urge to reach for a bag of chips, it also keeps your hunger pangs in check. According to one study, when people didn't get enough sleep, their hormone levels became unbalanced. Their levels of the hormone leptin, which is responsible for feeling full, dropped, and the levels of the appetite-inducing hormone ghrelin went up. As a result, researchers think sleep helps our bodies keep those hunger hormones in line.

You're more likely to exercise.

Losing weight takes a lot of energy, and if you are sleeping too much, it's going to impact your energy level, while sleeping too little can affect your ability to focus and concentrate on all the tasks at hand. One researcher believes that one of the main reasons getting enough sleep is linked to successful weight loss is that it provides you with the drive you need to stick to your goals.

Sleep leads to better calorie burn.

While you sleep, you're likely to burn somewhere between 50 and 100 calories an hour. Experts are now learning that getting the right amount of sleep encourages a healthy metabolism, and skimping on sleep throws it out of whack. Other research has shown that sleeping in cooler temperatures can stimulate the development of a type of fat called brown fat, which burns more calories and has been shown to improve insulin sensitivity.



Glen Davison's 10 Days to Optimal Health



**“TakeTEN was
the best thing
that’s ever
happened to me.”**

Glen Davison

Not everybody gets carded at 68. But that’s what happened to Glen Davison when he asked for a senior discount while dining out. “The waitress insisted I wasn’t old enough,” recalls the Angwin, California, resident, chuckling. “I had to pull out my driver’s license.”

Don’t blame the waitress for the blunder. Davison looks — and more importantly, feels — younger than he has in a long time. “I’m a changed man,” he says. He’s not exaggerating. One year ago, Davison was 44 pounds heavier. He

was dependent on multiple prescription medicines to control high cholesterol, high blood pressure and diabetes. And he couldn’t walk to the mailbox without being winded.

Today, Davison walks up to 17,000 steps a day and heads to the gym every Monday, Wednesday and Friday. And those prescription drugs? He no longer needs them. He’s keeping his cholesterol, blood sugar and diabetes in check strictly with healthy habits. The only pills he takes are vitamins.

TakeTEN — A lifestyle medicine program



Cheryl Thomas Peters, DCN, RD, and James A. Peters, DrPH, RD, RRT, FACPM

So how did he accomplish all this? Davison credits TakeTEN, a 10-day physician-directed lifestyle medicine program at the St. Helena Lifestyle Medicine Institute, formerly known as the Center for Health, in St. Helena, California.

It's designed for people who want to improve their health — people struggling to lose weight; stop using tobacco; or manage a chronic illness or condition such as diabetes, heart disease, high cholesterol, high blood pressure, sleep

disorders and more. And it helps them succeed by teaching — and motivating — them to eat better, work on their fitness, focus on spirituality and make other lifestyle changes proven to boost health and well-being.

Says Davison of TakeTEN: “After marrying my wife of 47 years and starting a family, it’s the best thing that’s happened to me.” It was his wife, in fact, who signed him up for TakeTEN last December. “She was so concerned about my health,” says Davison. She signed up too — an option chosen by many couples.

A personal health plan



TakeTEN starts with a physician-led medical and lifestyle comprehensive assessment that uniquely combines expert medical care, traditional medicine; and the best of evidence-based lifestyle medicine, including nutrition, exercise, stress reduction and

spirituality, into a personal lifestyle prescription.

“During the TakeTEN program, participants are able to put their personalized plan into action as they learn health-promoting healing habits and replace the unhealthy habits for long-term success,” says TakeTEN co-founder Cheryl Thomas Peters. Guided by a multidisciplinary team of trained health care professionals, participants discover how to ease stress without overeating or reaching for a cigarette; lose weight without feeling starved; and fight disease by following 10 healing habits proven to help one find balance between mind, body and spirit.



Participants find hope of achieving improved quality of life with less pain, less medication, and renewed energy and confidence in their ability to practice health-promoting habits and stick to them when they go home.

TakeTEN results

By TakeTEN's final day, many participants feel great; have more energy; and have already markedly lowered their cholesterol, blood pressure and blood sugar, reducing or eliminating their need for medication. On average, they head home having:

Reduced total cholesterol by **20%**

Decreased triglycerides **39%**

Lowered blood pressure by **20%**

Lowered fasting blood sugar by **25%**

Lost 4-5 pounds

overall, including up to 3½ pounds of body fat

Smokers have a 57 percent success rate of stopping for a full year after their participation

Ready to take steps to better health? Learn more about the TakeTEN Program by calling 800.920.3438 or visiting www.lifestylemedicineinstitute.org.

From addiction to

One man's journey



When 70-year-old Loyd retired in 2008, he felt good.

“I didn’t feel like drinking or using,” he recalls, referring to the addictions to alcohol and cocaine he believed he had under control for most of his adult life. But when he injured his back in December of 2012, the Vicodin that was prescribed for pain triggered a relapse. “Within six months, I was taking 15 to 20 pills a day. I was drinking 24 hours a day. I could not stop.”

You can’t do it alone

“Every addict has two internal conversations going on,” says Lynn Bertram, MD, a psychiatrist and the medical director at St. Helena Recovery Center. “There’s the one that’s saying they want to keep using — and the one that knows they need help.”

Loyd tried to help himself by detoxing at home. He spent almost a month in his pajamas, “shaking, shivering, sweating...wishing I was dead.”

He finally realized what addiction specialists know: He could not do it alone. That’s because addiction is a chronic brain disease that alters areas in the brain that are crucial to judgment, decision making and behavior. And like other chronic diseases — asthma, diabetes, hypertension — addiction requires lifelong daily treatment.

In desperate need of help, Loyd called St. Helena Recovery Center. “They said they had an opening in a week, and I said, ‘I’ve got to come today.’ They squeezed me in.” Loyd believes he was more dead than alive when he arrived at St. Helena. “I had one goal in mind — to survive. All I focused on was not dying.”



Lynn Bertram, MD

recovery:

Healing
Body &
Soul

Hospital care, then rehabilitation



St. Helena Recovery Center is unique because it's attached to the hospital, which gives patients access to medical services they may need. So Loyd's recovery began as it does for many patients with addiction: with medically managed detox in the hospital. "We use state-of-the-art medications and closely monitor the process," Dr. Bertram says. "This keeps people comfortable and ensures they have the least amount of side effects from withdrawal."

After detox, Loyd joined the 28-day residential program, which focuses on healing the whole person: body, mind and spirit.

Through a multistep process that includes individual and group therapy, educational

lectures and workshops, and spiritual counseling, Loyd worked to identify the root causes of his addiction. He also learned about relapse prevention. Guidance from counselors who are themselves recovering addicts — a hallmark of St. Helena's approach — was especially helpful. "When they make suggestions, you can't just say, 'You don't understand.' Because they've been where you are."

The recovery process helped Loyd see what his addiction had done to others, especially his wife and their sons. "Those of us with this disease believe we're hurting no one but ourselves," he says. "In fact, we are hurting everyone that comes in contact with us. It affected my family dramatically. I don't know why they stuck by me, but I'm grateful they did."

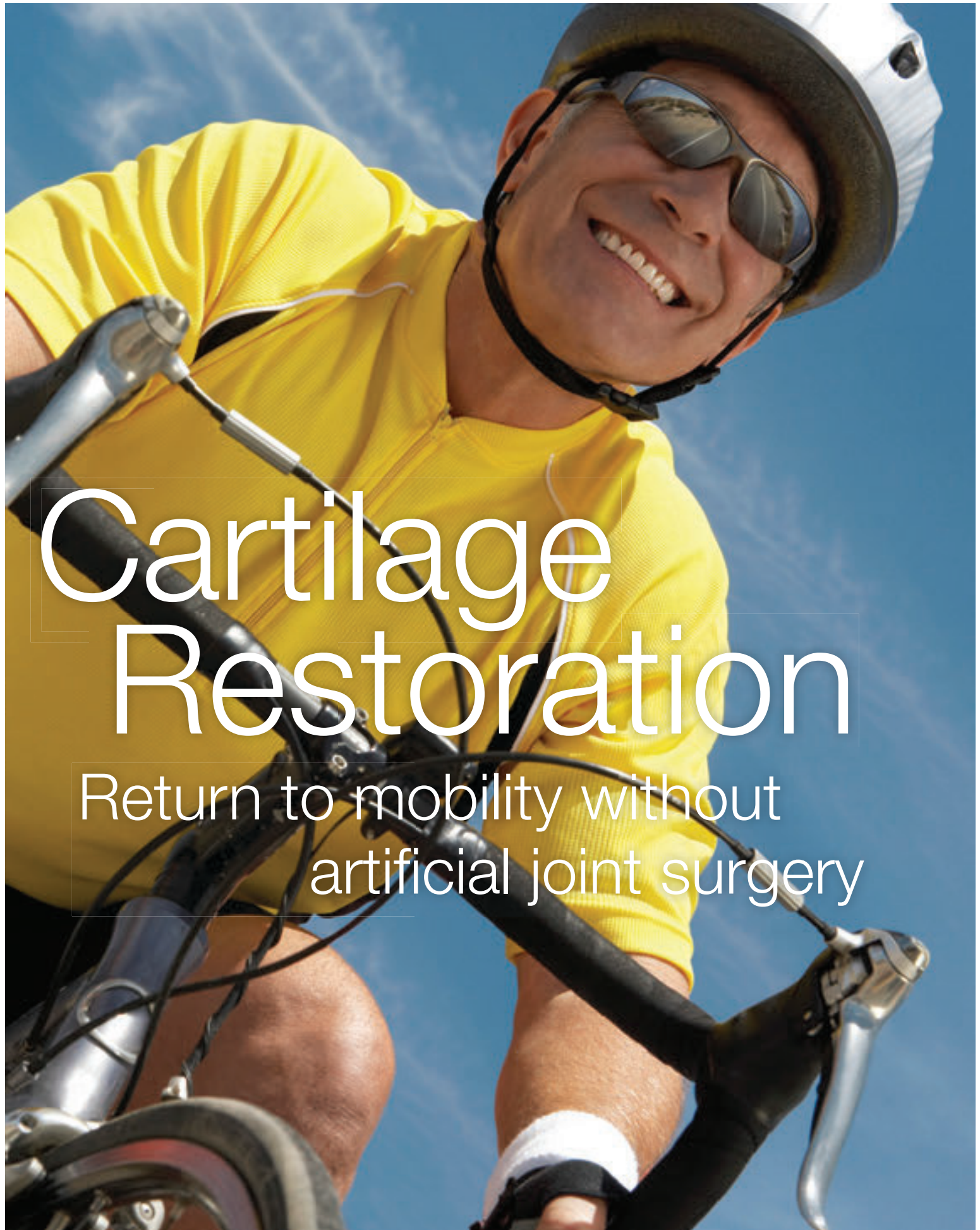
**"Physically,
emotionally, mentally,
I was a bankrupt person.
The St. Helena Recovery
Center restored my sanity.
They saved my life."
- Loyd**



Restoring physical health is another goal of recovery, which means nutrition is a priority. "Every meal was delicious, healthy food," Loyd recalls. To promote both physical and spiritual health, patients begin every day with a nature walk. "This is such a serene setting to reclaim your life," Dr. Bertram says. "It refreshes your spirit."

Loyd left St. Helena Recovery Center with his whole life refreshed. He had a vision; hope; and a game plan, which includes daily Alcoholics Anonymous meetings — a key part of his lifetime treatment plan.

For more information, please visit our website at www.sthelenarecoverycenter.org, or call 800.454.4673 to speak with a client advisor.



Cartilage Restoration

Return to mobility without
artificial joint surgery

Once upon a time, people with joint pain resulting from cartilage damage just had to grin and bear it. Today, advances in research and technology have made the repair, regeneration and replacement of cartilage possible for athletes and others with debilitating joint cartilage damage...sometimes with such success that there is no need to use artificial joints to restore mobility.

Who is eligible?

The treatment is recommended for patients with knee cartilage damage or deterioration caused by:

- Injury or trauma, including sports injuries.
- Repetitive use of the joint.
- Congenital abnormalities, meaning those that a person is born with, affecting normal joint structure.
- Hormonal disorders that affect bone and joint development, such as osteochondritis dissecans (OCD).

Cartilage repair and regeneration is treatment for an otherwise healthy knee, but not for knees affected by osteoarthritis, a condition that causes natural cartilage deterioration from aging.

Types of Cartilage Restoration Procedures

Microfracture/drilling. The goal of microfracture is to stimulate the growth of new articular cartilage by creating a new blood supply. A sharp tool, called an awl, or a high-speed drill is used to make multiple holes in the joint's surface. The holes are made in the bone beneath the cartilage, called subchondral bone. This action creates a healing response. A new blood supply can reach the joint surface, bringing with it new cells that will form the new cartilage.

Abrasion arthroplasty. Abrasion arthroplasty is similar to drilling. Instead of drills or wires, high-speed burrs are used to remove the damaged cartilage and reach the subchondral bone.

Autologous chondrocyte implantation (ACI).

ACI is a two-step procedure. New cartilage cells are grown and then implanted.

First, an arthroscopic surgery is performed and a small amount of healthy cartilage tissue is harvested. The tissue, which contains healthy cartilage cells, or chondrocytes, is then sent to the laboratory. The cells are cultured and increased in number over a three to five week period.

A surgical procedure, or arthrotomy, is then performed to implant the newly grown cells.

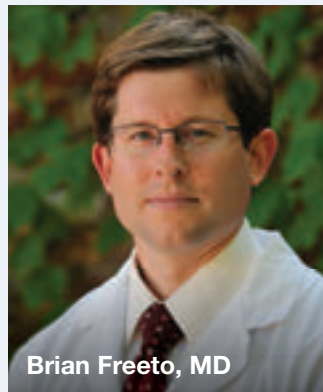
ACI is most useful for younger patients who have single defects larger than 2 centimeters in diameter. ACI has the advantage of using the patient's own cells; however, it does have the disadvantage of being a two-stage procedure.

Osteochondral autograft transplantation. In this procedure, cartilage is transferred from one part of the joint to another. Healthy cartilage tissue — a graft — is taken from an area of the bone that does not carry weight (non-weight-bearing). The graft is then matched to the surface area of the defect and impacted into place. This leaves a smooth cartilage surface in the joint.

Osteochondral allograft transplantation.

If a cartilage defect is too large for an autograft, an allograft may be considered. An allograft is a tissue graft taken from a deceased donor. Like an autograft, it is a block of cartilage and bone. In the laboratory, it is sterilized, prepared and tested.

These are just a few of many techniques available today. There is vast research being done on new techniques which will continue to change the way we think and treat cartilage injuries.



Brian Freeto, MD

To learn more about new advances in cartilage restoration, contact Brian Freeto, MD, at 707.967.9011.

Fibroids

Common and Treatable

Tumors in the uterus, known as fibroids, are surprisingly common. In fact, they are the most common noncancerous tumors in premenopausal women, reports the National Institutes of Health (NIH).

They grow in the muscle of the womb — on the outside or inside of the uterus wall or within the wall itself. No one knows for sure what causes them, but both hormones and genetics play a role.

Though they are rarely cancerous, fibroids can be painful and disruptive. Fortunately, there are many options for treatment.

Painful periods

In many cases, fibroids don't cause symptoms and might not require treatment. But about 30 percent of women between the ages of 25 and 44 have symptoms, according to the NIH. Symptoms include:

- Longer, more frequent or heavier periods.
- Bleeding between periods.
- Pain or pressure in the lower back or belly.
- Pain during sex.
- Constipation.
- Difficult or frequent urination.
- Infertility, miscarriage or preterm labor.

Fibroids are usually diagnosed with the use of imaging tests, such as ultrasound or x-ray.



Get relief

There are many effective therapies for fibroids, including:

Medications. Over-the-counter drugs, such as ibuprofen or acetaminophen, may help relieve mild pain.

Prescription hormones, including birth control pills, may help lessen bleeding. But they can sometimes cause fibroids to grow larger.

Hormone-blocking drugs can stop periods and shrink fibroids. However, they may cause side effects similar to menopause, so they are typically used for six months or less.

Myomectomy. Fibroids grow inside of the uterus muscle but can be separated from the uterus itself. In myomectomy, the uterus is opened and the fibroid is removed, leaving the remainder of the uterus intact.

Uterine artery embolization (UAE). With UAE, tiny particles are injected into the blood vessels of the uterus. They block the blood supply to fibroids, causing them to shrink. UAE reduces the chance that fibroids will develop in the future. But, in about one-third of cases, fibroids return within five years.

There is a small risk that UAE will cause early menopause or raise the risk of miscarriage, so it may not be the best choice for women who still want to get pregnant.



John H. Kirk, MD

“There are many effective ways to treat fibroids, and the type of treatment chosen will depend on the severity of your symptoms and the fibroid size, number and location,” says Candace Westgate, DO, OB-GYN at St. Helena Women’s Center. “Your preference and desire for future childbearing also enters into the treatment discussion. Not all treatments are recommended for all women.”

—Candace Westgate, DO



Candace Westgate, DO

Hysterectomy. If other treatments fail or if fibroids are very large, hysterectomy (removal of the uterus) may be necessary. It is the only sure way to cure fibroids, according to the NIH. After a hysterectomy, a woman can no longer have children.

“There are many advantages to UAE,” says John H. Kirk, MD, OB-GYN at St. Helena Women’s Center. “It preserves the entire uterus and ovaries and it is performed as an outpatient procedure with local anesthesia with sedation. This means the woman experiences minimal recovery time and can return to work and life faster and with less pain.”

—John H. Kirk, MD



Vitamin D May Protect Against Fibroids

Getting enough vitamin D may reduce a woman’s risk of developing fibroids, according to a study from the National Institutes of Health.

Adequate levels of vitamin D have been associated with a reduced risk of several diseases, including heart disease and colon cancer. But this is the first study to examine the link between vitamin D and fibroids. These noncancerous tumors of the uterus are the leading cause of hysterectomies in this country.

Researchers used blood tests to determine the vitamin D levels of 1,036 women ages 35 to 49. They found that women with vitamin D levels above 20 nanograms per milliliter — typically considered an adequate amount — were 32 percent less likely to develop fibroids than women with vitamin D below this level.

Foods fortified with vitamin D, such as milk and cereal, are good sources of this vitamin. The body also makes vitamin D when skin is exposed to sunlight.



To learn more about treatment options for fibroids, call 707.963.5006 or visit www.sthelenahospital.org/womenservices.

Sinuses: When You Need Surgery

When sinuses become infected, medicine is the first line of defense. Nose drops, saline washes, steroid sprays, antibiotics and other medications often help reduce swelling and knock down infections. But some people develop sinus problems that become chronic. Months — or years — of headaches, pain and misery can follow. Uncontrolled infections can travel to sensitive areas near the sinuses, including the eyes and brain. If aggressive use of medications fails, your doctor may suggest sinus surgery.

The goal of surgery

If sinuses don't drain properly, pus and other secretions can build up and become infected. Air also needs to move freely through the sinuses, or it can become trapped or cause a vacuum. Any of these conditions can lead to pressure and pain.

The goal of surgery is to improve drainage and reduce blockages so that the complex pathways between the sinuses and the nose work better.

Surgery helps by:

- Enlarging the natural openings of the sinuses.
- Correcting anatomical problems.
- Removing growths, called polyps.

Types of surgery

Today sinus surgery is usually done entirely through the nose, with no external scars. Surgeons use techniques that cause much less pain and downtime than older surgical techniques.

Sinus surgery options include:

- **Functional endoscopic sinus surgery (FESS)**, which involves inserting a very thin, lighted tool called an endoscope through the nose.

This allows the surgeon to see the sinuses. Using microinstruments, small amounts of bone or tissue are removed to enlarge and clear blocked areas to improve drainage. Sometimes the inside anatomy of the nose needs to be repaired too.

- **Image-guided surgery**, which involves a multidimensional mapping system, CT scans and infrared signals to guide surgeons through the sinus passages. The signals and scans help surgeons know exactly where to fix the sinus passages.
- **Balloon catheter sinuplasty**, a minimally invasive technique that uses a soft, flexible wire threaded through the nose to reach the sinuses. A small balloon attached to the wire is then gradually inflated to gently reshape the blocked areas.

Used alone, sinuplasty doesn't require cutting, so it preserves the original nasal tissue. But depending on the location, extent and cause of sinus problems, doctors may use a hybrid approach, combining sinuplasty with other sinus surgery techniques for the best results.



Stephen Marc Gugenheim, MD

“Patients typically return to their regular activity within a few days after sinus surgery,” reports Stephen Marc Gugenheim, MD, Otolaryngologist. “Most have better quality of life after sinus surgery.”

— Stephen Marc Gugenheim, MD

To learn more about treatment options for chronic sinusitis, contact Stephen Marc Gugenheim, MD, at 707.224.7400.

Could It Be Asthma?

How to spot the symptoms and breathe easy

Imagine the challenge of trying to breathe through a straw for minutes or hours on end. That's how breathing can sometimes feel for people who have asthma — a chronic lung disease that causes the airways to narrow, making it difficult to breathe.

It's important to recognize the symptoms of asthma and to get medical help for it. People with asthma — both young and old — can lead normal, active lives. The key to doing so is learning how to manage the disease.

More than 25 million Americans now live with asthma, and that number continues to rise.

What are the signs?

Sometimes asthma symptoms are mild and go away on their own. But at other times, symptoms can get worse and trigger an asthma attack.

Common asthma symptoms include:

- Coughing.
- Wheezing.
- Chest tightness.
- Shortness of breath.

“Not all people with asthma have the same symptoms. And having these symptoms doesn't always mean someone has the disease...”

— Hossein Razavi, MD



Hossein Razavi, MD

“Not all people with asthma have the same symptoms. And having these symptoms doesn't always mean someone has the disease,” says Hossein Razavi, MD, pulmonologist and critical care and sleep medicine specialist. “If you suspect you have asthma, see a doctor. Your doctor can use your medical history, a physical exam and a simple lung function test to determine whether you have the disease.”

What causes it?

The cause of someone's asthma isn't always known. But a number of things — known as triggers — can bring about or worsen symptoms.

Common triggers include:

- Allergens, such as dust mites; animal dander; mold; and pollens from trees, grasses and flowers.
- Cigarette smoke, air pollution and certain chemicals.
- Respiratory infections.
- Physical activity.
- Stress.

If your doctor confirms that you do have asthma, he or she can help you identify your particular triggers and give you advice on how to avoid them.

Treating asthma

There is no cure for asthma. But it can be successfully managed if you learn how to control your asthma, get ongoing care and watch for signs that the disease is getting worse.

Asthma is treated with two types of medicines:

- Quick-relief medications, which provide temporary relief from asthma symptoms.
- Long-term control medications, which are taken daily to control airway swelling.

It's important to follow your doctor's advice on the proper use of asthma medications.

Most of the time you can treat asthma symptoms on your own. But if you have trouble walking or talking because you are out of breath or if you develop blue lips or fingernails, you need to seek immediate medical attention.

By working with your doctor and learning how to manage your asthma, you can breathe freely and live an active life.

To learn more or to reach Hossein Razavi, MD, call 707.963.0267.

Join Us for a Free Diabetes Education Class



Learn how living with diabetes is not about “no,” it’s about “how”

Our four-week series helps you learn about your body and how it responds to medications; exercise; and delicious, health-conscious foods.

Set daily and long-term goals

You’ll learn how to set goals; check and record blood sugar levels; track exercise; and know when, what and how much to eat and drink based on your short- and long-term goals.

Make more informed decisions about your lifestyle

Making simple changes in lifestyle can be easy once you understand how they impact your body. Changes such as nutrition and physical activity can reduce the need for medication and can help medications work even better.



Meet with a registered dietitian

Meet one-on-one with a registered dietitian where you’ll work together to tailor a plan around you and your lifestyle.

Catherine Haas | Registered Dietitian

Free Live Well With Diabetes Four-Week Series

Contact us for our next available class and to reserve your space at 707.963.6577.

Inglewood Village
821 S. St. Helena Highway, Suite 208
St. Helena, CA 94574

Limited space available.

The classes are provided by St. Helena Hospital for free. There is a fee for individual meetings with a registered dietitian. These meetings are covered by most insurance plans. Scholarship monies are available to cover the meeting expenses. Please do not let the lack of coverage keep you from this life-saving program.

Community Calendar

<p>Bariatric Information Session/ Support Group</p>	<p>Childbirth Education Classes</p>	<p>Infant/Child CPR Classes</p>	<p>Free Diabetes Self-Management Program</p>
<p>Wednesdays, Information Session 5 to 6 p.m. Support Group 6 to 7 p.m. Sept. 2, Oct. 7, Nov. 4, Dec. 2</p> <p>Well Now Showcase 1200 Main St. St. Helena, CA</p>	<p>Tuesdays, 6:30 to 8:30 p.m. Sept. 1, Nov. 3</p> <p>Well Now Showcase 1200 Main St. St. Helena, CA</p> <p><i>Classes are given in a four-week series.</i></p>	<p>Tuesdays, 6:30 to 8:30 p.m. Sept. 29, Dec. 1</p> <p>Well Now Showcase 1200 Main St. St. Helena, CA</p>	<p>Wednesdays, 5:15 to 7:30 p.m. Sept. 9, Oct. 7, Nov. 4</p> <p>Adventist Health Inglewood Village 821 S. St. Helena Highway, Suite 208 St. Helena, CA</p> <p><i>Classes are given in a four-week series.</i></p>
<p>RSVP: Call 707.967.9307 to register.</p>	<p>Call 877.596.0644 for dates and to register.</p>	<p>Call 877.596.0644 for dates and to register.</p>	<p>Call 707.963.6577 for dates and to register.</p>

<p>Martin-O'Neil Cancer Center Programs</p>		
<p>Circle of Support for Caregivers</p> <p>Every Monday, 11 a.m. to noon</p> <p>Martin-O'Neil Cancer Center 10 Woodland Road St. Helena, CA</p>	<p>Bend, Stretch and Breathe</p> <p>Every Tuesday, 10:45 to 11:30 a.m.</p> <p>Martin-O'Neil Cancer Center 10 Woodland Road St. Helena, CA</p>	<p>Music Therapy</p> <p>Every other Wednesday 10:30 a.m. to noon</p> <p>Martin-O'Neil Cancer Center 10 Woodland Road St. Helena, CA</p>
<p>RSVP: Colleen Winters, MSW, OSW-C 707.967.5791</p>	<p>RSVP: Colleen Winters, MSW, OSW-C 707.967.5791</p>	<p>RSVP: Colleen Winters, MSW, OSW-C 707.967.5791</p>

Tomato-Cucumber Salad With Parsley and Mint



Ingredients

4 medium ripe tomatoes, seeded and chopped
 ½ medium cucumber, peeled, seeded and chopped
 ½ cup diced red onion
 2 tablespoons fresh parsley, chopped
 2 tablespoons fresh mint, chopped
 1 tablespoon red wine vinegar
 2 teaspoons olive oil
 1 teaspoon Dijon mustard
 Salt and freshly ground black pepper to taste

Directions

- In a large bowl, combine tomatoes, cucumber, red onion, parsley and mint.
- In a small bowl, whisk together vinegar, oil and mustard.
- Add to tomato mixture and toss to coat.
- Season to taste with salt and black pepper.
- Serve chilled or at room temperature.

Makes 4 servings.

Nutritional information

Serving size: ½ cup. Amount per serving: 59 calories, 3g total fat (1g saturated fat), 8g carbohydrates, 2g protein, 2g dietary fiber, 45mg sodium.

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