

PACIFIC PULSE

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Pacific Pulse

Pacific Pulse
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Pacific Pulse is a professional publication of U.S. Naval Hospital Guam. Its purpose is to educate readers on hospital missions and programs. This publication will also draw upon the medical departments rich historical legacy to instill a sense of pride and professionalism among the Navy Medical Department community and to enhance reader awareness of the increasing relevance of Navy Medicine in and for our nation's defense.

The opinions and assertions herein are the personal views of the authors and do not necessarily reflect the official views of the U.S. Government, Department of Defense, or the Department of the Navy.

Guidelines for Submissions:

This publication is electronically published monthly. Please contact Jennifer Zingalie at jennifer.zingalie@med.navy.mil for deadline of present issue.

Submission requirements:

Articles should be between 300 to 1000 words and present the active voice.

Photos should be a minimum of 300 dpi (action shots preferred)
NO BADGES

Subjects considered:

Feature articles (shipmates and civilians)
Quality of Care
R&D/Innovations
Missions/Significant Events
Community Outreach

On the cover:

An automated machine called a Phoropter helps check Alyssa Speaker's eyes, at the U.S. Naval Hospital Guam's Optometry Department. A phoropter is special machine used to switch multiple lenses in front of your eyes to correct your vision. By having you look through the phoropter at a visual reference, image, or the "Big E" chart (the Snellen chart), your eye doctor will help guide you toward lenses that correct your vision impairment by switching lenses within the machine. Doctors in the Optometry Department encourage patients to have thier eyes examined at least once a year at the hospital or Branch Clinic located on Naval Base Guam.

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On the Web:

Thank you for taking the time to rate and provide us with your comments and suggestions.

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Commanding Officer **Capt. Jeff Plummer** *Readiness*

Welcome to March Madness!

There's nothing quite like the smell of a new car: nice clean lines, that modern look & feel, and of course the precision handling. Next month, we will all share in a similar experience as we move into full operations in the new, 4th edition hospital for this command: U.S. Naval Hospital Guam.

While the pace of activity may reach a "madness level" in the coming weeks, it is all for a noble cause as we close out the history for our current facility, and lead the way into the newest hospital in the Navy!

For the last 60 years, our current building has contributed much to our command's impressive history. In 1953 construction of the current Naval Hospital began on the cliffs overlooking Agaña and the Philippine Sea. The facility opened in 1954, and except for typhoons, things were quiet from its opening until September 1965, when we began receiving casualties from Vietnam. Within months, the daily census increased from approximately 100 to well over 300, and in 1968 and 1969 it often exceeded 700. To keep up with growing demand for beds, a renovation of the former Asan Point Civil Service Community was undertaken, and 65 quonset and butler buildings were added to what became known as the Asan Annex, which could care for an extra 1,200 patients. By July 1970, the hospital had received over 17,000 patients by aero-medical evacuation and returned over 14,000 to the continental United States. Naval Hospital Guam was the Landstuhl of the Vietnam era!

After the draw down from Vietnam the hospital became quiet again, serving the 10,000 military assigned to Guam and their dependents, serving as a Veterans Hospital, and also as the local trauma center. It was reawakened in 1975 to care for the 100,000 refugees from South Vietnam in Operation New Life, and again in 1991 for the evacuation of the Philippines after Mount Pina-

tubo erupted in Operation Fiery Vigil. In 1996-97, Naval Hospital Guam responded during the evacuation of Kurdish, Muslim, Iraqi, Iranian, and Turkish people from Iraq in Operation Pacific Haven. Another historical event was our disaster response in support of Korean Air Flight 801, which crashed on Nimitz Hill on August 6, 1997, killing 228 of 254 passengers and crew. Stoic and battle worn, she's had a wonderful run, but it's time to decommission her from service.

During March, the transition team will begin to guide each department through its Plan of Actions & Milestones. If you are not familiar with your POA&M or your Department has not discussed it, it's time to ask about it. We will train on and calibrate new equipment, learn about our new environment of care, and drill our emergency codes. We will work hard, work together, and keep our patients at the center of our decisions to ensure a safe transition. I ask each of you to use our TeamSTEPPS training, and help LEAD this move from the deck plates by "Leading through Communication, Engaging with Enthusiasm, Acting when the Time is Right, and Doing the Right Thing."

Our success in Navy Medicine stems, in part, from those who have gone before us: we stand on the shoulders of giants. Shipmates, you are the giants now and our upcoming work will pave the way for those who come after us for many decades. Just like those brave and pioneering Naval Hospital Guam staff during the first 115 years, we have been called to make history again.

Over the next eight weeks it's our turn to write the next chapter for this command. Thank you for your effort so far. We made it to the Final Four: the Championship is right around the corner! With all my respect, CO



Executive Officer **Capt. Mike McGinnis** *Jointness*

Hafa adai dream team! We're well in to March already and racing towards the command's busiest three months of the year. At this point we're 'all in' for the transition with every space engaged with preparations. The command is truly on final approach. This will be a busy month for all of us - blood, sweat and (perhaps sentimental) tears will be shed in getting the command ready to shift colors next door.

The CO and I ask that all of you fully engage with your department's efforts for transition. Do the hard work required, but remember that this 42 day period before us is not a sprint - take the time to do the job the right way. As we focus on the work and self-sacrifice that lies before us, continue to look out for your shipmate and yourself.

We are focused on effecting a smooth and, most importantly, safe transition. The Command is highlighting patient safety this month, kicking it off with a command-wide patient safety stand down. The Institute of Medicine captured nationwide attention when it released a report in 1999 that estimated that 100,000 people die each year from medical error. That's equivalent to having a fully loaded plane crash every day of the year! Having a loved one or being personally admitted to the hospital brings the point home - safe patient centered care is the right thing to do. The command is committed to ensuring an atmosphere exists where all staff feel safe when calling attention to a dangerous situation surrounding

a patient. We want you empowered to make a difference when it comes to delivering safe health care and continuous process improvement.

We all want to avoid any potential harm that may arise from engagement with our medical system. To provide safe high quality care, we need to have policies, procedures and systems in place that protect patients and staff alike. This issue of the Pacific Pulse highlights important ways we do this here at USNH Guam. Controlling and treating tuberculosis, comprehensive diabetes management, and avoiding harm from smokeless tobacco are important command programs. We also highlight podiatry, a new and highly valued service that we now offer our unique patient population.

I hope in future issues we can highlight innovative patient safety programs that you're currently involved in or possibly developing now.

Keep up the great work and stay safe!



Command Master Chief Robert Burton

Value

This month, March, is typically a month for negotiating orders.

Once those orders are issued the pressure begins in preparing to transfer, and for some, to move. In the Department of Defense, there has been a lot of effort in regards to Combat and Operational Stress Control to maintain readiness. This is just as important in a person's personal life as it is in their professional life.

Stresses are those things that cause disruption to the natural flow of our daily lives. How we respond determines our stress level. There is no doubt that PCS season can be stressful, that moving a household can be a strenuous event. There are many things that go along with it, from wondering about your new command, neighbors, schools for kids, and adapting to a new schedule and environment.

What is important during this time is to remember you are not alone. Did you know that more than 20,000 will also be facing a PCS too? Also keep in mind, if you have a family, everyone will be feeling the stress. The military offers many resources that can help ease stress and manage your situation, even if the time between receiving your orders and your report date is shortened. One thing to keep in mind is, there are many things you can't control, but the one thing you can control is yourself.

Some simple tips to get you started would be, making sure your paper work is completed and begin talking to your receiving command's sponsor. Ensure you communicate with your

Personal Property Office for your pack-out date. At home, you can begin to get rid of things you don't need and pack things that are not readily needed such as out of season clothing. For those of you with pets, make sure you have a copy of their shot record before you travel.

Utilize your resources, did you know the Fleet and Family Support Center offers a class called "Smooth Move?" You can also utilize militaryonesource.mil, a DOD-sponsored website that offers valuable information, check out their tab that says "Plan My Move." Talk to your children's school liaison to help ease the transition into a new school, wherever you will be stationed next. And of course utilize our Ombudsman who have a wealth of knowledge and can be very helpful to you and your family during this time.

Most importantly, remember, stress is a part of life, and nothing, no matter how well planned, is going to be perfect. So savor the moments. Allow yourself to laugh at some of the mishaps and try not to lose your cool when stress levels are high. Take some time to relax and have fun, go for a walk, get some ice cream, or watch a funny movie. The good thing is, along with the stress, there is also a bit of excitement and anticipation about a new job and a new home--wherever you are going, a new adventure awaits!

ENERGY THDRINKS

**TOO MUCH CAFFEINE, SUGAR,
AND OTHER STIMULANTS CAN
HAVE SERIOUS CONSEQUENCES**

limit your consumption
don't mix with alcohol
don't use for hydration

don't consume if you're pregnant
limit your children's consumption

**use caution with energy drinks
and energy shots**

**THINK BEFORE
YOU DRINK**

OPERATION SUPPLEMENT SAFETY
AND OPERATION LIVE WELL
ARE SPONSORED BY THE
U.S. DEPARTMENT OF DEFENSE



OPERATION SUPPLEMENT SAFETY

OPERATION
★ Live Well ★

U.S. Naval Hospital Guam Intensive Care Unit (ICU) is a

dark place, a busy place, a proving ground, and where California native, Hospitalman Justin Maschhoff finds his formula for success. Success hard earned said Maschhoff, "I have seen people not make it, it can be tough to watch. I know it's tough on their families, in the end it just drives me to try harder, and I get to see a lot of our patients leave here in great shape."

Upon reporting to the ICU, Corpsman are put through a rigorous orientation spanning three months where they learn requirements of their rate, as well as those of the nurses serving with them. Now a team leader, and overseeing four other Corpsman, Maschhoff has seen his share of pain. "In the ICU I have learned that people can be taken from you in an instant. I feel I have matured a lot since I have joined (the Navy) and am more appreciative of the things I have."

According to Maschhoff, there are other things he could be doing but he finds his motivation inside the Navy. "Without the Navy I would probably be working in the oil fields, but even if I could go back to luxury, I wouldn't. Going back knowing I can somehow serve more, do more for my fellow Sailors, I don't think I could leave like that," he said. Said Hospital Corpsman 2nd Class Derrick Riner, Maschhoff's Leading Petty Officer, "Maschhoff

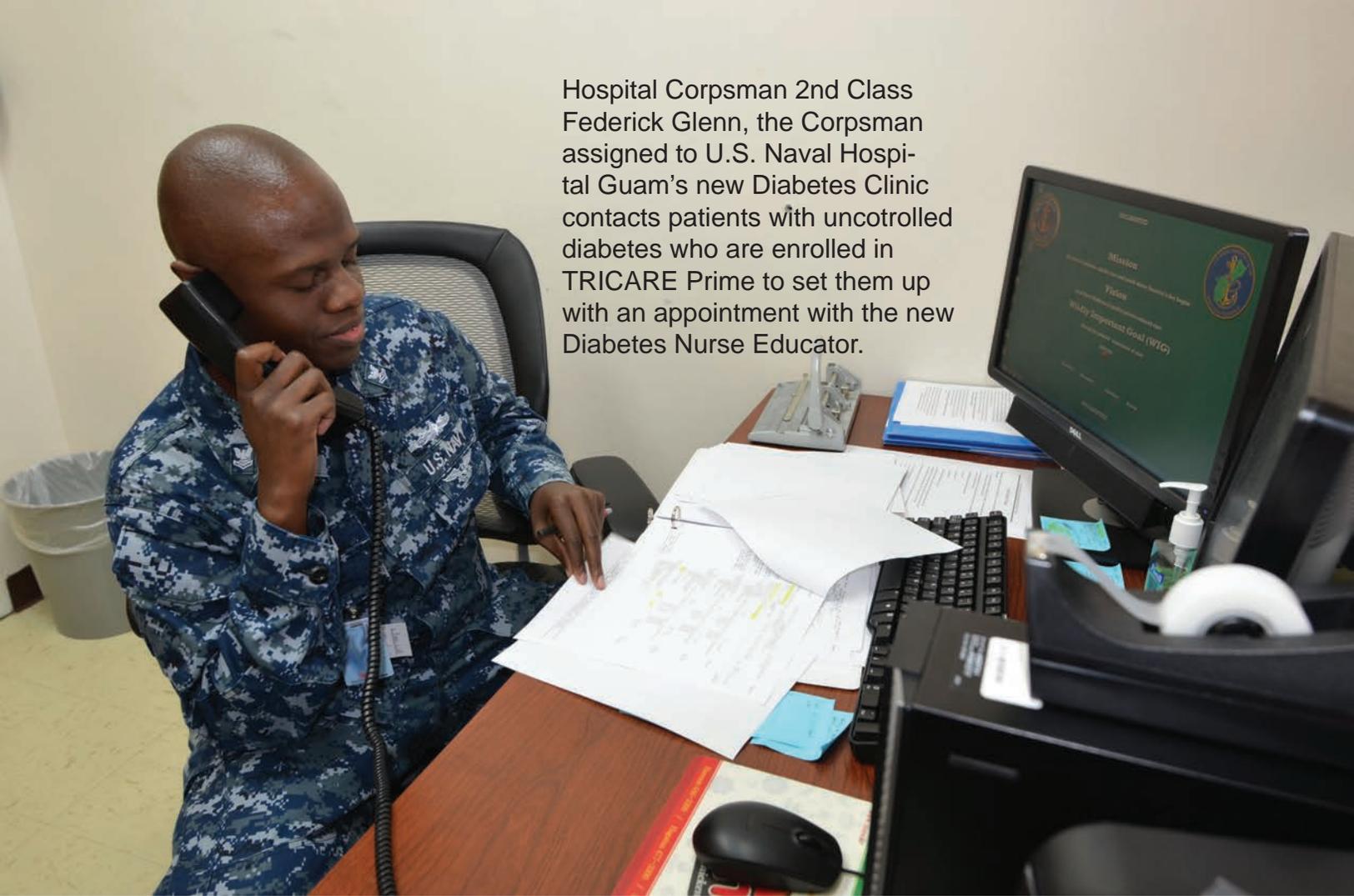
shows great potential and a knowledge base that can only be obtained from working in the most challenging area of the hospital."

Maschhoff plans to continue in his carrier and is currently looking into a flight program. He is taking classes on helicopter aviation and working towards his dream of flying helicopters for the military. He is also preparing for a Warrant Officer program, and next year will attend Field Medical Training Battalion before reporting to 1st Marine Air Wing.

As Guam is his first duty station, he can still remember a time before the Navy, "Home isn't the physical place, it's the friends and family I left behind, I just miss being with my loved ones", he said. "But, I am very thankful for where I am today."



HN Maschhoff
Best Foot Forward



Hospital Corpsman 2nd Class Frederick Glenn, the Corpsman assigned to U.S. Naval Hospital Guam's new Diabetes Clinic contacts patients with uncontrolled diabetes who are enrolled in TRICARE Prime to set them up with an appointment with the new Diabetes Nurse Educator.

New Diabetes Clinic

Staying in control is important; most diabetics probably know that better than most.

In March, U.S. Naval Hospital Guam (USNH) stood up a Diabetes Clinic to provide more comprehensive care to patients with uncontrolled diabetes. The clinic is run by a doctor, a Corpsman and a Diabetes Nurse Educator. Additional support includes staff from the Optometry, Podiatry and Nutrition Department.

“Our goal is to decrease the amount of patients with uncontrolled diabetes by improving our patient’s health. In helping them control their diabetes, we decrease their risk of heart attacks, we improve their quality of life and overall health,” said Lt. Dustin Smith of USNH Guam’s Family Practice and the physician tasked with getting the Diabetes Clinic off the ground.

According to Smith, uncontrolled diabetes is when a person has an A1C greater than 9. However, for some diabetics this number can be dependent upon other medical issues and their goal A1C may be less than 7 or 8. A1C is glucose (sugar) attached to hemoglobin, a protein found in red blood cells that transport oxygen to the body. A test is performed to measure the average blood sugar a person has over a two to three month period, the higher the number, the greater a person’s risk of complications such as heart disease.

While the clinic is getting established, it is only accepting patients with an A1C greater than 9 who are enrolled in TRICARE Prime. Patients are being contacted by Hospital Corpsman 2nd Class Frederick Glenn to schedule an appointment with the Diabetes Nurse Educator. Eventually the clinic has plans to ex-

Diabetes continued from page 8

pand to all patients with uncontrolled diabetes.

The Diabetes Clinic will also be in line with the Medical Home Port concept, with diabetes patient care being managed by their primary care manager (PCM). According to Smith, a diabetic with uncontrolled diabetes should be seen every three months. However, the Diabetes Nurse Educator will be available for more frequent contact and closer interval follow ups within the time they are not being seen by their PCM. She will also be able to help assess the amount of control being implemented for the diabetic and provide recommendations for medication adjustments and other things that can provide better overall support to the patient.

“We want to empower the patient and give them the tools they need, to self manage their diabetes.”

Smith said that on Guam, there tends to be a higher number of incidents of diabetes, and the hospital also sees a large number of younger patients with diabetes. Because the Navy evaluates how hospitals manage patients in areas such as screening and chronic medical issues such as diabetes, the diabetes clinic will also allow the hospital to more efficiently track these patients.

“Because uncontrolled diabetics need to be seen more often, there can be a tendency for them to fall through the cracks,” said Smith. “The Diabetes Clinic will ensure more contact with patients, in the hopes that with more

A1c



frequent contact, the patient will in turn make sure they are getting in to be seen or are being contacted by someone on a regular basis. We care about their health and we want to make sure their diabetes is being properly controlled.”

Even though the clinics’ focus is those with uncontrolled diabetes, the Diabetes Nurse Educator will also provide group classes and educational opportunities for people with all types of diabetes. In the meantime, Frederick will continue to contact patients with uncontrolled diabetes to ensure they are up to date on their screenings such as a physical, foot, and eye exams and get them in to see the nurse.

“The ultimate goal is self management,” said Smith. “We want to empower the patient and give them the tools they need, to self manage their diabetes. Sometimes that is just a simple reminder that they need to.”



Smokeless Tobacco

More Deadly Than Most Realize

By the Promotional Health Department

There are many reasons to stop using spit (also known as smokeless) tobacco. Here are just a few:

- Smokeless tobacco IS NOT a safe alternative to smoking. It is just as addicting; containing more nicotine than cigarettes, and it has at least 28 cancer causing substances. Smokeless tobacco leads to serious health risks, including cancer of the mouth, tongue, throat and pancreas, gum disease, tooth decay and heart disease.¹
- Quitting can save you money! Use this [cost savings calculator](#) to determine how much you could save by quitting smokeless tobacco and begin to imagine all the ways you could spend your extra cash.
- Your significant other will no longer think kissing you is gross.
- Brighter teeth and fresher breath.
- Improved readiness. Among many other benefits, you will be faster and have better endurance thanks to your increased lung capacity, experience less injuries and illness, and have improved night vision.

Although quitting tobacco is never easy, there are many of resources available to help:

- * Call 344-9124 to obtain assistance from the command's tobacco cessation facilitator
- * Visit the Navy and Marine Corps Public Health Center [Tobacco Free Living website](#).
- * Check out the [UCanQuit2 website](#) to determine if you are addicted to tobacco, develop a quit plan, find games to help you through the cravings, and get 24/7 support.
- * Go to [Smokefree.gov](#) to talk to an expert, find quit guides and sign up for text messaging support.
- * Call your [TRICARE regional quit line](#). All non-Medicare-eligible beneficiaries can receive assistance with smoking cessation through the TRICARE® toll-free Smoking Quitline, available 24 hours a day, 7 days a week, including weekends and holidays.

<http://www.choosemyplate.gov/food-groups/downloads/TenTips/DGTipsheet1ChooseMyPlate.pdf>



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Good Questions for Getting the Right Diagnosis

Part of the Ask Me 3 Patient Safety Series

When you talk with a health care provider, use these **Ask Me 3** questions to help get the right diagnosis

Write the answers here:

1. What could be causing my problem?

2. What else could be it?

3. When will I get my test results, and what should I do to follow up?

When to Ask Questions

You can ask questions when:

- You see a doctor, nurse, pharmacist, or other health care provider
- You prepare for a medical test or procedure
- You are admitted to the hospital
- You are in the emergency room
- You visit a physician office or health care clinic

What If I Ask and Still Don't Understand?

- Let your health care provider know if you still don't understand what you need to do.
- You might say, "This is new to me. Will you please explain that to me one more time?"

Who Needs to Ask 3?

Everyone wants help with health information. You are not alone if you find things confusing at times. Asking questions helps you understand how to stay well or to get better.



Optometry

Cmdr. Peter Im, an Optometrist uses a Diagnostic Lens (in hand), and a Slit Lamp to get a magnified view, which allows him to examine the back of Hospital Corpsman 2nd Class Melonie Fiesta's eye (Retina).

The deadliest weapon on the battlefield, the sniper, can be shot or killed because they do not have clear vision. According to Cmdr. Peter Im, "Having an eye exam before a person is sent into an operational environment is important. A sniper wants to have the clearest vision possible because under stress, a suboptimal visual system can cause their site to be blurry. Thus, with a proper prescription and clear vision, they can better rely on training, situational awareness and doing the right thing at the right time."

Im should know because he is a doctor of Optometry which is the study of vision and vision perception. As an Optometrist he can examine, diagnose, treat and manage diseases, injuries and disorders of the visual system, the eye and its associated structures.

Although most of Im's patients are not snipers, many of them are active duty and need to maintain their readiness. "It is important for everyone to have a complete eye exam once a year or every other year," he said. This is because although the front of the eye is very sensitive, the back of the eye, on the other hand, has no pain receptors, only light receptors.

"If someone has a tear in the back of the eye they won't feel it, then one eye will make up for the vision of the other eye. Potentially, if they didn't know they had a tear, and did some really strenuous activity, that tear could become a huge detachment and they could potentially lose vision in that eye," he said. The good news is that most eye problems can be prevented through having an eye exam. This is because the Optometrist will look for tears, holes, and even cancerous tissue in the eye.

continued on page 14



YOU EAT. WE'LL FUEL.



Healthy Eating

Just as high-octane fuel is important for Navy jets, healthy eating is crucial for fueling the human body. The Health Promotion and Wellness Department of the Navy and Marine Corps Public Health Center understands the barriers to eating healthy. We have the educational resources and materials you need to help you select nutrient-dense, healthy food for optimal performance, disease prevention, and recovery.



To learn how our programs can help keep you fit for service and improve your overall health, visit us at WWW.MED.NAVY.MIL/SITES/NMCPHC/HEALTH-PROMOTION

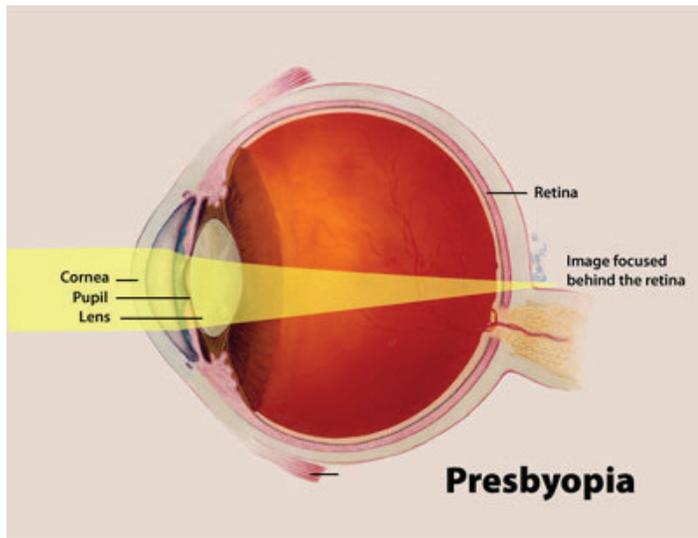
U.S. Naval Hospital Guam Health Promotions
point of contact: Luis Martinez: 344-9124

NAVY AND MARINE CORPS PUBLIC HEALTH CENTER
PREVENTION AND PROTECTION START HERE



Optometry continued from page 12

Active duty members are not the only ones who need eye exams but beneficiaries as well. “As we age there is a condition called presbyopia, basically a flexible lens made of collagen inside the eye that gets hard, and eventually, the eye can’t focus and this leads to needing reading glasses,” said Im. Beneficiaries of all ages can get eye exams and prescriptions through the Optometry Department.



Eye exams are also important for patients with diabetes. According to Im, the most affected organ within a person’s body from uncontrolled diabetes, is the blood vessel which feed the entire body from the eyes to the fingers and the toes. When there are high amounts of sugar in the blood, for long periods of time, it can damage the blood vessels. According to Im, the smallest blood vessels, which are located in the back of the eye can be adversely affected by uncontrolled diabetes.

He explained that often a diabetic can have damage in the back of the eye, even bleeding; however the patient will still be able to see because, as mentioned earlier, there are no pain receptors in the back of the eye, however not treating the eye can cause permanent loss or damage. “Prevention is about the person, it is important for the patient to feel empowered and take action on preventive measures to maintain optimal health,” he said.

Believe it or not, preventative measures for good health include everything from good nutrition, to exercise and staying on track for check-ups. “You exercise for your blood ves-



Hospitalman Ryan Wyss, adjusts the frames on a pair of glasses he is making for an active duty member in the U.S. Naval Hospital Guam’s fabrication lab.

sels,” said Im. “When you intake food there is a spike in the sugar in your blood vessels, then you have to allow for your sugar levels to come down. The muscle is the best way to get rid of sugar because there are stores of sugar in your muscles. Muscles do not get damaged by sugar, they actually want sugar stored in them all the time (due to a survival mechanism), but you have to burn those calories by moving around after each meal.”

He explained when a person eats, the food breaks down into sugar and ends up in the blood vessels. Then, if a person walks, or rides a stationary bicycle at a moderate level for 15-30 minutes after the meal, the exercise will

Continued on next page

Optometry continued from page 14

use up some stored sugar from the muscles. This will make room for the excess sugar in the blood vessels to be used up and stored in the muscles.

Optometry services are available at both the hospital and the Branch Clinic that is located on Naval Base Guam. The hospital has two Optometrists and one Ophthalmologist who can perform surgical procedures such as the removal of cataracts. The hospital does not offer Lasik surgery which requires a specialized laser in order to perform the surgery.

The department can prescribe glasses to all patients and make prescription glasses for active duty military at the onsite fabrication lab. Bifocals, however, are not made in house and those who may require them will see approximately a two week turn around in receiving their glasses.

Whether shooting down wind or reading ones favorite novel, Im believes eye care is essential for everyone and encourages patients, if they haven't already, to be sure they get their annual eye exam.

Optometry

Hours of Operation

7:30 a.m. to 4 p.m.

To schedule an appointment, call
Central Appointments at: 344-9202

Follow-up appointments should call:
344-9212

Hospitalman Andrew Gathihi uses a lenseometer on a bland lense to read the power of the lense in the U.S. Naval Hospital Guam's fabrication lab.





Lt. Cmdr. Christopher Pulliam, a Surgical Podiatrist of the Orthopedics Department at U.S. Naval Hospital Guam explains how a bunion, which is a “bump” on the joint at the base of the big toe, is formed when the bone or tissue at the big toe joint moves out of place.

Feet are the Foundation

When it comes to heavy lifting, feet get the brunt of the load.

Feet not only carry the full body weight of a person but in the process they are compressed, pressured and rubbed. Over time the foot can develop thick skin in areas such as the ball of the foot, heels and toes or develop things such as callous and corns.

In a military environment members are constantly moving about on their feet whether performing missions or participating in physical activity to maintain their readiness. Because of that U.S. Naval Hospital Guam recently welcomed Lt. Cmdr. Christopher Pulliam, a Surgical Podiatrist of the Orthope-

tics Department. Podiatry is a medical specialty that treats any ailment of the foot and sometimes the ankle.

When a patient comes to Pulliam, he believes in treating the problem instead of only addressing the symptom. “It is important to manage foot correction biomechanically,” he said. Biomechanics focuses on the relationship between abnormal foot function and normal foot function.

If a patient has foot pain, Pulliam will evaluate their neuro-vascular status, which is the ability to wiggle the toes, ensure the skin is the right color and temperature, and see how sensitive the foot is to the touch. He then examines the patient’s musculoskeletal strength, or rather checks the strength of the muscles

groups in the foot.

“I provide a full physical exam on your foot and identify the structures involved causing the pain, once that is completed then I can alter the biomechanics of the foot to change the gait (a person’s manner of walking),” said Pulliam. “Most of the time, a patient’s gait or shoes are what is causing the issue so by altering their gait I can correct the problem and the pain goes away.”

Foot care is especially important for people with specific conditions like diabetes. Pulliam works frequently with the diabetic patient population and is a part of the hospital’s Wound Care Team and Diabetes Clinic. “When a diabetic patient comes to see

Continued on next page

me I stress the importance of doing regular daily foot exams. It is important for them to note anything that wasn't there the day before such as red spots and blisters. This is also because some diabetic patients do not have sensation in their feet. Something could puncture their foot and they wouldn't even know it."

Pulliam treats many things from ingrown toenails to flat feet. Although Sports Medicine is his passion he also enjoys performing surgery as he provides surgical treatment of traumatic, chronic, acquired conditions and deformities such as bunions, or hammer toes. Pulliam says he most often treats sports injuries and plantar fasciitis which is the inflammation of the thick tissue on the bottom of the foot.

"It's important for people to realize there is a distinct difference between soreness and being broken," he said. "Soreness is just muscle fatigue but broken is just that." According to Pulliam, a pain in your foot could be a good indication that something is seriously wrong and should not be ignored. A person's feet are important, and in order for the feet to provide the best support to the body, they must be cared for.

Pulliam also recommends that everyone wear adequate shoes. "If a person has a high arch they should look for a stability shoe or a cushioning shoe. If they have a medium arch or no arch a motion control shoe would be a better choice." He does not recommend for people to run in the five fingered shoes.

As a Podiatrist, Pulliam believes no matter what age a person is, foot care is not only important, it is a step in the right direction.

Some Foot Care Tips for People with Diabetes

1 | Check Your Feet Every Day

Wash Your Feet Every Day | 2

3 | If you can see, reach, and feel your feet, trim your toenails regularly.

Wear shoes and socks at all times. | 4

USNHCG

Preventive Medicine

Understanding Force Health Protection

World TB Day

An editorial by Lt. j.g. Richelle Magalhaes, U.S. Naval Hospital Guam, Preventive Medicine Dept.

March 24th is World TB Day. TB is the shortened moniker for tuberculosis. TB is a bacterial infection that can spread through the lymph nodes and bloodstream to any organ in your body. It is most often found in the lungs. It is spread through the air when someone coughs, sneezes, and can be spread even through speaking, and singing.

TB is a major cause of illness and death worldwide, especially in Africa and Asia. In 2012, an estimated 8.6 million people developed TB and 1.3 million died from the disease. The number of TB deaths is unacceptably large given that most are preventable. Tuberculosis (TB) is second only to HIV/AIDS as the greatest killer worldwide due to a single infectious agent.

Guam has high rates of TB per Guam Department of Public Health Services (DPHSS), roughly 15 times more than that of the U.S. and six times more than that of Hawaii. The World Health Organization (WHO) estimates that out of 100,000 people in the US, three will have an active case of TB per

year, as opposed to Guam which will have 42 cases. In the Federated States of Micronesia, our close neighbors, there will be 212 cases of TB per 100,000 people per year.

TB is generally classified as being either latent or active. Latent TB is when the bacteria are inactive but present in the body. The patient has no symptoms and is not contagious. Active TB is when the bacteria are active and make the patient ill. Active TB is contagious. Most active cases come from nearby islands and countries that do not have the access to medical care that more developed countries do.

Unfortunately, there is no vaccine for TB, but eating a healthful diet that boosts the immune system, having regular TB tests if you work or live in a high risk environment, and completing a TB medication regimen are good methods to help prevent contracting it or prevent relapses for those who have had it before. Additionally, if you have TB, to prevent transmitting the disease to others: stay home, cover your mouth, and ensure proper ventilation.

The Guam DPHSS has robust programs in place to try to combat the high TB rates on the island. One of their approaches is to educate



World TB Day
March 24

**Find
TB.
Treat
TB.**

Working together to eliminate TB.

National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
Division of Tuberculosis Elimination



the community so that they can spot cases and try to prevent the spread from person to person. Additionally, there are Guam Public Laws (GPL) focused on case investigations, isolation, quarantine and testing. GPL 22-130 requires all students attending public/private schools, college and university on Guam provide a report of TB skin test or screening. Students who are entering from the U.S. or states or its territories are required to show proof of TB screening conducted 6 months prior to enrollment. If a student is found to have a positive PPD skin test, a certificate of TB evaluation is required. Contact Guam DPHSS for additional information.

Annual TB tests are required for students and adults that require a Health Certificate to work on and off base. Active duty personnel stationed on Guam must also have an annual Mantoux test. This a simple skin test in which a small amount of purified protein derivative (PPD) tuberculin is injected into the forearm. After 48 to 72 hours, a doctor or nurse looks for a reaction at the injection site. For those people who have a reaction to the PPD, they will undergo a series of tests, and maybe even chest x-rays, to decipher if they have an active or latent case of TB. The Immunizations Department at USNH Guam can administer the PPD tests and the Preventive Medicine Department can read these tests for all who need them.

What does TB have to do with Preventive Medicine? We all know that USNH Guam is a special Military Treatment Facility (MTF). Not only does the hospital admit military members, but also retirees, veterans, and their dependents and, in some emergencies, civilians. The Preventive Medicine Department conducts disease investigations for any illness seen at the hospital that is infectious or highly contagious. TB qualifies as an infectious disease. Once it is determined that a patient has active TB, we conduct an investigation to determine where they may have contracted it and to whom they may have given it. We also assist the Providers in administering TB medications and assuring that the patients adhere to the treatment program.

Many exceptional situations can arise when people travel all over the world. Diseases that are somewhat rare in some parts of the planet are still rampant in other parts. TB is not something that is emphasized in US education due to the scarce occurrence and unlikelihood that it would be seen professionally in the States; however, it is very real here in the Pacific.

Normally, March 24th would go by unnoticed, but since we live in a part of the world where TB is still a disease threat, World TB Day is a day to understand what unique diseases are still plaguing humanity right in our backyard.

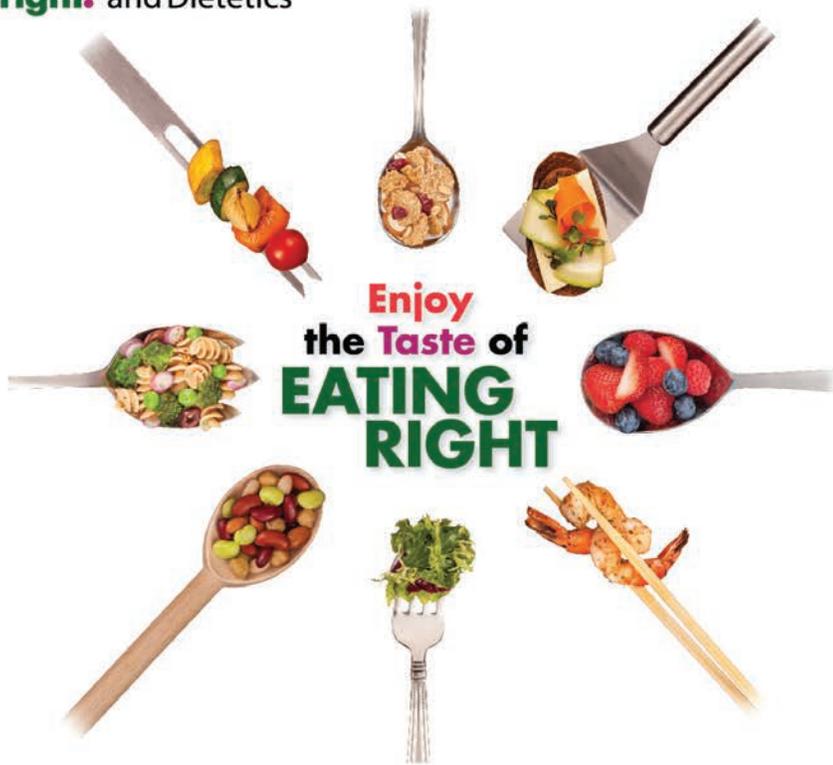
Global Fast Facts:

TB is one of the world's deadliest diseases.

- One third of the world's population are infected with TB.
- In 2011, nearly 9 million people worldwide became sick with TB disease, most of whom (82%) live in one of the 22 high burden countries for TB.
- TB is a leading killer of people living with HIV (PLHIV).

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