

VETERANS' ADVANTAGE

Summer 1999

THE WELLNESS MAGAZINE

FOR NEW YORK /

NEW JERSEY VETERANS

- 3 Hepatitis C: Are you at risk?
- 4 Prostate cancer: Early detection saves lives
- 6 Taking VA care into the home



Looking to the new century

We are now in the last days of this century. It is appropriate that we, as Americans, look ahead to a new century with the hope that it will bring peace and prosperity for ourselves, our children and our children's children. It is also appropriate that we look back on the lessons we have learned over the past hundred years. And, finally, it is appropriate that we remember those whose service and sacrifice have brought America to this new millennium as the unchallenged leader of the world.

Seventeen years after 1900, the United States became involved in the "war to end all wars"—a war to "make the world safe for democracy." Nearly 5 million men and women fought in that war; fewer than 5 thousand survive today.

Those who live are our last physical link to the proud young doughboys who sang "Over There" as they boarded the troop transports that took them to the war. Their eyes are failing, their steps are faltering; but at least some of their memories are undimmed.

Our World War II veterans, too, have gotten older. Many of you have seen the movie *Saving Private Ryan*. It opened and closed with a scene involving a man in his seventies. In between, we saw an American youth performing feats of daring reserved for the young. Only at the end of the movie did we learn that the man at the beginning of the movie had once been one of those young men.

These men and women returned home from the war to make this nation great and prosperous. The lines in their faces are testimony to the cares of a lifetime, but they are softened now, in many cases, by the love of children and grandchildren.

Those who served during the Korean War are following closely in the footsteps of those who fought in World War II. And as we approach the end of the 20th century, our Vietnam veterans are growing older, too.

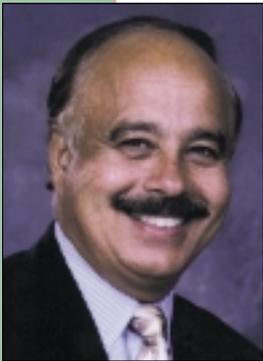
We also have younger veterans of the Gulf War, Somalia and Lebanon. Their faces, still unlined, remind us that the torch has once again been passed to a new generation of Americans.

And, if history is any guide, we will continue to have more conflicts, and therefore more veterans, in the 21st century. While we pray that this will not be the case, our nation must always remain vigilant and we must always be ready to care for them.

Thank you to all who made the supreme sacrifice for our nation—and to all of those who have served and were willing to make that same sacrifice.

James J. Farsetta, FACHE
Network Director

<http://www.va.gov/visns/visn03>



We're just a phone call away

Do you have questions about your health? Do you need information about medication dosages, undelivered mail prescriptions or prescription interactions? Day or night, you can get answers to all your healthcare questions by calling the VA Nurses Helpline, 24 hours a day, at 1-800-877-6976.

HEPATITIS C:

Are you at risk?

Hepatitis C is a virus that is carried in the bloodstream. It is usually transmitted through contact with contaminated blood. The virus can linger in the bloodstream for decades without causing any symptoms. But all along, it slowly and silently attacks the liver, in some cases doing permanent damage. Experts believe that about 4 million Americans may currently be infected, but not all of them know it.

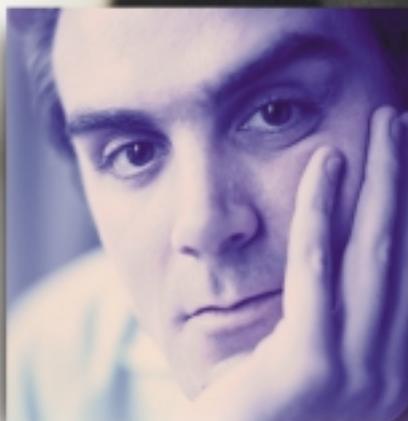
Here are answers to some questions you may have about this potentially dangerous disease:

How serious is hepatitis C?

Hepatitis C is serious for some persons but not for others. Most persons who get hepatitis C carry the virus for the rest of their lives. Some persons with liver damage caused by hepatitis C may develop cirrhosis (scarring) of the liver and liver failure. Those conditions may take years to develop.

Does hepatitis C have any clear-cut symptoms?

Not really. Many people with long-term hepatitis C have no symptoms and feel well, but should still see their doctors. For some persons, the most common symptom is extreme tiredness.



How do I know if I should be tested?

You should be tested if any of these statements apply to you:

- You had a blood transfusion or an organ transplant before 1992.
- You have injected illegal drugs or used cocaine even once.
- You are on hemodialysis.
- You have had multiple sexual partners.
- You have tattoos or multiple body piercings.
- You have come into contact with someone else's blood.

Why should I be tested for hepatitis C?

Early diagnosis is important so you can be:

- counseled about how to prevent transmission of the disease to others
- checked for liver disease and get treatment, if necessary

Is there a vaccine to prevent hepatitis C?

No. That's why it's especially important to prevent the disease from spreading. ■

For more information...

contact your VA primary care provider. See the back page for the number of a VA medical facility near you.



Prostate Early

Yankees manager Joe Torre's recent bout with prostate cancer has surely caused some men to think about what they can do to protect themselves against the disease. It's a question well worth exploring because prostate cancer is the second most common cancer in men (after skin cancer) and the second most deadly (after lung cancer).

Because experts don't yet know what may cause prostate cancer, men cannot do much to prevent the disease. That leaves early detection as their main weapon—fortunately, it's a powerful one. Thanks to improved screening, prostate cancer can be caught earlier than ever, when treatment can do the most good.

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Catching it early

The best way to find prostate cancer early is by using a combination of two tests. Together, these tests can pick up 70 percent of prostate cancers when they can still be cured. The first test is the digital rectal exam, or DRE. In this test, a doctor feels the prostate through the wall of the rectum to check for areas that feel unusually firm or otherwise irregular.

The second test is the prostate-specific antigen (PSA) test, a blood test that measures a protein made by the prostate. Normal PSA readings are less than 4 nanograms per milliliter (ng/ml), borderline read-

cancer: *detection* saves lives



VA screening guidelines

Screening for prostate cancer is very important because the cancer usually causes no symptoms in the early stages, when the chance for a cure is highest. The VA recommends that veterans be counseled about screening beginning at age 50. Men at high risk (African Americans, those with a family history of prostate cancer or those with symptoms) should begin yearly screenings beginning at age 40.

ings are between 4 and 10 ng/ml and anything more than 10 is considered high. The higher the PSA level, the more likely the presence of prostate cancer.

It's important to understand that the PSA test is not foolproof. That's because conditions other than cancer, such as benign prostatic hypertrophy (an enlarged prostate) or prostatitis (a prostate infection), can also cause the prostate to boost production of the PSA protein. This means that further testing, such as an ultrasound exam, a biopsy or another type of PSA test, is usually needed for a definite diagnosis.

Treatment options

Once prostate cancer has been diagnosed, treatment depends on several factors, such as whether the cancer has spread, the man's age, his overall health, his expected life span and concern about possible

treatment side effects.

Radiation therapy and/or surgical removal of the prostate gland (and, if the cancer has spread, the testicles) may be recommended. Some men may be candidates for

internal radiation therapy, which involves implanting radioactive pellets about the size of a grain of rice directly into the cancer (see box below). Others may benefit from hormonal and other drug therapies. Older men with small, slow-growing cancers may be watched closely to determine if treatment might be needed later.

The bottom line

Don't wait until it's too late to find out you may have prostate cancer. For more information about prostate cancer or to schedule a screening, contact your VA health-care provider. See the back page for the number of a VA medical facility near you. ■

Seeds of life—new prostate therapy now available

Prostate cancer patients are now offered another form of therapy in the management of their disease. The Brooklyn campus of the New York Harbor HCS recently began an interstitial prostate brachytherapy program, commonly called "seed implantation."

The process works by implanting radiation seeds, which emit low-level radiation continuously over a period of one year, directly into the prostate. Patients are admitted to the hospital for an ambulatory stay and are routinely discharged within 24 hours. Both urologists and radiation oncologists perform the procedure, which typically lasts one hour. When patients are carefully selected, published reports suggest comparable control of disease and survival compared with existing therapies.

Dr. Isamettin A. Aral, Chief of Radiation Oncology, believes this procedure will become increasingly popular, as patients require no surgical incision, have a markedly reduced chance of both urinary incontinence and impotence, and may resume normal activity within one to two days following the procedure.



Taking VA care into THE HOME

Can modern technology help paralyzed veterans receive unique attention without leaving home? A cutting-edge VA study is about to learn the answer.

The Bronx VA Medical Center as well as the VA Hudson Valley and VA New Jersey Healthcare Systems will be at the center of the study, called the VA Telemedicine in Home Care Program. The goal of the study, says Arthur Cytryn, M.D., VISN chief of spinal cord injury services, is “to decrease the veteran’s need to come into the medical center to be seen by his or her health-care provider. Although telemedicine is not a substitute for a face-to-face doctor’s visit when a patient isn’t feeling well, it’s ideal for monitoring his or her general health status and evaluating whether a visit to the medical center may be necessary.”

Veterans selected to participate in the study will receive a special computer that will be hooked up to a telephone line. The computer features a 4" video screen and a simple series of buttons by which the patient can activate the blood pressure cuff, an electronic stethoscope and a pulse oximeter, a device that measures blood oxygen levels. “The computer will allow the patient to teleconference with multiple caregivers,” says Dr. Cytryn. “That means the veteran will be able to talk with his or her social worker, nutritionist and doctor at the same time.”

“Number one in the areas where VA healthcare is ahead of general healthcare is in dealing with spinal cord injuries,” says VA Network Director James Farsetta.

Indeed, Dr. Cytryn agrees that this cutting-edge technology holds much promise for treating patients with SCI. “We feel that telemedicine will help ease the transition from hospital care to home care, particularly for new SCI patients,” he says. “It will enhance their quality of life and reassure them that it isn’t necessary to come to the medical center every time they feel something may be going wrong. With telemedicine, we will be able to evaluate them right at their bedside.” ■

TELEMEDICINE
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GENERAL
HEALTH.

TO LEARN MORE

After July 1, 1999, veterans who would like more information about the VA Telemedicine in Home Care Program or would like to find out if they can participate may call Dr. Arthur Cytryn at 718-584-9000, ext. 5389, or 973-676-1000, ext. 1564.

Imagine having your doctor check your blood pressure, your pulse and the oxygen levels in your blood without your having to leave home. We’re not talking about an old-fashioned house call, because in this case, your health-care provider won’t even be in the same room. Thanks to telemedicine, which relies on the latest computer technology to connect health-care providers and patients, this kind of “virtual checkup” can happen today. In fact, this summer, VA, in partnership with the Paralyzed Veterans of America, is embarking on a study to find out how telemedicine can improve home care for veterans with spinal cord injuries (SCI).

CONGRATULATIONS to Norman Rosenshein, Promise of Freedom award recipient

ELIZABETH, N.J., RESIDENT **NORMAN ROSENSHEIN**, Past Commander of New Jersey's Jewish War Veterans, was recently presented the third annual Department of Veterans Affairs New Jersey Healthcare System (VA NJHCS) Promise of Freedom Award.

The award was presented by Network Director James J. Farsetta, FACHE, and the Director of the VA New Jersey Healthcare System, Kenneth H. Mizrach. The award represents outstanding achievement by a veteran stakeholder on behalf of New Jersey's veterans.

Mr. Rosenshein serves as a Member of the Network Management Assistance Council (MAC). The group is composed

of leaders of New York and New Jersey veterans organizations and meets regularly with network and medical center management. Mr. Rosenshein is active in many veterans and civic organizations. ■



Pictured left to right: James J. Farsetta, FACHE, Network Director, Veterans Integrated Service Network (VISN #3); Norman Rosenshein, recipient of Promise of Freedom Award; Kenneth H. Mizrach, Director, Department of Veterans Affairs New Jersey Healthcare System

VA network director wins national AHA award

THE AMERICAN HOSPITAL ASSOCIATION'S (AHA) Section for Federal Hospitals has awarded James J. Farsetta, Director of the NY/NJ Healthcare System for the Department of Veterans Affairs (VA), with the annual Award for Excellence. He received the award at its national conference in Chicago. As director, Farsetta manages the delivery of healthcare services for eight Veterans Administration medical centers and numerous outpatient clinics, nursing homes

and homeless veterans rehabilitation residences. Despite significant budgetary challenges last year, the network has remained a leader in service to veterans by improving quality and increasing outreach and access to veterans. The NY/NJ Network cares for more than 175,000 veterans each year, employs more than 11,000 staff and has an annual operating budget of nearly \$1 billion. Through creative management and consistent vision, Farsetta has managed to maintain the network's financial outlook while serving 25,000 new patients and offering more and improved services. ■

Health INSIGHTS



Q: I say cigar smoking is less harmful than cigarette smoking. My wife says I'm wrong. Can you settle this?

A: Your wife is right. Even though cigar smokers don't inhale directly into the lungs, nicotine enters their bloodstream through the mouth lining. Cigar smokers also are at high risk for cancers of the mouth, larynx and esophagus, which can be deadly. Secondhand smoke from cigars also puts friends and family at risk: The smoke wafting from the tip of one cigar sends more cancer-causing particles into the air than the smoke from three cigarettes.

Q: How can I exercise safely during hot weather?

A: First, dress properly. Wear lots of light, loose-fitting layers that allow you to perspire. Second, drink at least 16 ounces of water two hours before you plan to exercise and another 8 ounces about 15 minutes before your activity. During your workout, drink 4 to 8 ounces every 15 minutes. Try to schedule your activities for early morning or late evening, when it is cooler. And on extremely hot and humid days, plan on doing an indoor activity instead.

Q: I'm a little nervous about my upcoming mammogram—my first. What can I do to make the experience more pleasant?

A: If you're still menstruating, schedule the exam for the first two weeks of your cycle, when your breasts will be less sore. Also, don't use talcum powder or deodorant the day of the exam because either may interfere with the test. If you're uncomfortable about disrobing, wear a two-piece outfit so you will only have to remove your top. You may experience some discomfort while your breasts are compressed during the test, but that shouldn't last more than a few seconds. ■

Where YOU CAN FIND US—ANYTIME

Bronx

VA Medical Center
130 West Kingsbridge Road
Bronx, NY 10468
(718) 584-9000

**Department of Veterans Affairs
Community Clinic**
23 South Broadway
White Plains, NY 10601
(914) 421-1951

Yonkers Community Clinic
118 New Main Street
Yonkers, NY 10705

VA Harbor Healthcare System

VA Medical Center
800 Poly Place
Brooklyn, NY 11209
(718) 836-6600

VA Medical Center
423 East 23rd Street
New York, NY 10010
(212) 686-7500

VA Extended Care Center
179th Street & Linden Boulevard
St. Albans, NY 11425
(718) 526-1000

Veterans Health Care Center
40 Flatbush Avenue—8th Floor
Brooklyn, NY 11201
(718) 439-4300

Veterans Health Care Center
21 Water St.
Staten Island, NY 10301
(718) 815-2500

Harlem VA Care Center
55 West 125th Street—11th Floor
New York, NY 10027
(212) 828-5265

SoHo VA Care Center
245 West Houston Street
New York, NY 10014
(212) 337-2569

VA New Jersey Healthcare System

VA Medical Center
385 Tremont Avenue
East Orange, NJ 07018-1095
(973) 676-1000

VA Medical Center
151 Knollcroft Road
Lyons, NJ 07939
(908) 647-0180

James J. Howard Outpatient Clinic
970 Route 70
Brick, NJ 08724
(732) 206-8900

VA Primary Care Clinic
654 East Jersey Street — Suite A
Elizabeth, NJ 07206
(908) 994-0120

VA Primary Care Clinic
171 Jersey Street—Building 36
Trenton, NJ 08611-2425
(609) 989-2355

VA Primary Care Clinic
385 Prospect Avenue
Hackensack, NJ 07601
(201) 487-1390

VA Primary Care Clinic
115 Christopher Columbus Drive
Jersey City, NJ 07302
(201) 435-3055

VA Primary Care Clinic
317 George Street
New Brunswick, NJ 08901
(732) 729-9555

VA Hudson Valley Healthcare System

FDR VA Hospital
Montrose Campus
Route 9A/P.O. Box 100
Montrose, NY 10548-0100
(914) 737-4400

VA Medical Center
Castle Point Campus
Castle Point, NY 12511
(914) 831-2000

**VA Clinic—Community General Hospital
of Sullivan County**
Bushville Road
Harris, NY 12472

VA Clinic
150 Pike Street
Port Jervis, NY 12771

VA Clinic
20 Squadron Boulevard
New City, NY 10970

VA Clinic
65 Gleneida Avenue
Carmel, NY 10512

VA Eye Clinic
Somers Professional Bldg.—
Route 100
Somers, NY 10589

VA Mobile Clinic
Call 1-800-269-8749

Northport (Long Island)

VA Medical Center
79 Middleville Road
Northport, NY 11768
(516) 261-4400

Lynbrook Satellite Clinic
235 Merrick Road
Lynbrook, NY 11563
(516) 887-3666
(Mon. & Thurs. only)

Riverhead Satellite Clinic
89 Hubbard Avenue
Riverhead, NY 11901
(516) 727-7171 (Tues. only)

Lindenhurst Satellite Clinic
560 N. Delaware Avenue
Lindenhurst, NY 11757
(516) 884-1133
(Mon. & Thurs. only)

Islip Satellite Clinic
39 Nassau Avenue
Islip, NY 11751
(516) 581-5330 (Wed. only)

Patchogue Satellite Clinic
269 Baker Street & S. Ocean Avenue
Patchogue, NY 11772
(516) 475-6610 (Tues. & Fri. only)

**Mt. Sinai Satellite Clinic
Mt. Sinai Community Center**
North Country Road
Mt. Sinai, NY 11766
(516) 473-4068 (Mon. only)

**Plainview Satellite
& Primary Care Clinic**
1535 Old Country Rd.
Plainview, NY 11803
Mental Health Component:
(516) 572-8567 (Wed. & Fri. only)

Primary Care Component:
(516) 694-6008 (Mon.–Fri.)

Sayville Satellite Clinic
400 Lakeland Avenue
Sayville, NY 11782
(516) 563-1105

NY/NJ Veterans Integrated Service
Network 3
130 W. Kingsbridge Road
VISN Office
Bronx, NY 10468

<http://www.va.gov/visns/visn03>

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