



Modern medicine, old-fashioned care.

O M C  
Medical Services Building  
840 N. 5th Avenue  
Suite 2100  
Sequim, WA 98382  
(360) 582-2850

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Modern medicine, old-fashioned care.

# THE Wellness REPORT

Fall 2015

## Beyond Sadness The Medical Basics of Depression

**Presenter: Dr. Josh Jones**

**Medical Director for Peninsula Behavioral Health**

**October 29, 2015**

**10:30 am – 12:00 pm**

**Olympic Medical Park**

**840 N 5th Ave, Sequim  
Second Floor Conference Room**



**Sadness is a normal part of the human experience. But depression is a medical illness that can affect all other parts of your health. Come learn the signs, symptoms, and what can be done about depressive illnesses.**

**Please call Casey at 582-2850 to sign up.**

**Family and friends welcome...**

## Happy Retirement Casey!

It is hard to say the words, but here goes....our Casey will be retiring on December 30, 2105 after over 20 years of service. We will truly miss her smiling face at the front desk. At the same time, we are so excited for her next adventure. She certainly deserves it!

So Casey...we thank you from the bottom of our hearts for all the love, laughter, thoughtfulness and dedication you have shown to us, your coworkers as well as YOUR patients here at Sequim Medical Associates. You may be leaving your chair at the front desk, but you will never leave our hearts. Wishing you a long, happy, and healthy retirement!

– Drs. Sullivan, Olsen, Reiter, Hobbs and Staff

## 2015 Holiday Schedule...

**The office of Sequim Medical Associates will be closed for the following holidays:**

November 26th – Thanksgiving  
December 25th - Christmas  
January 1st – New Year's Day

**We will be in the office for emergencies only on the following days:**

November 27th – Day after Thanksgiving  
December 24th – Christmas Eve  
December 31st – New Years Eve

**If you have a medical emergency during this time, please contact the office at (360) 582- 2850 and the answering service will forward you to the doctor on call.**

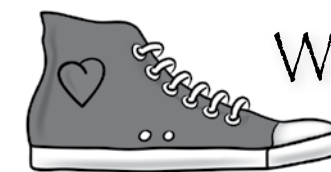
*Tell us  
how we're  
doing...*

24 HOURS A DAY, 7 DAYS A WEEK...

**(360) 582-2850**

[www.sequimmed.com](http://www.sequimmed.com)

**OFFICE HOURS:** MONDAY-FRIDAY 8:00 am to 4:30 pm  
**APPOINTMENTS:** (360) 582-2850  
**AFTER HOURS:** (360) 582-2850 or (888) 810-3116 (urgent care)  
**FAX:** (360) 582-2851  
**EMAIL:** [pam@sequimmed.com](mailto:pam@sequimmed.com)  
**REFILLS:** CALL YOUR PHARMACY  
**EMERGENCY:** **DIAL 911**



Walk to End Alzheimer's:  
A Big Success!



The North Olympic Peninsula Walk to End Alzheimer's, sponsored by the Alzheimer's Association, was held Saturday, September 26th here in Sequim under bright, blue skies. Thanks to all of our patients that came out and walked, volunteered for the morning and supported the walk with a donation! You helped make the Walk a huge success...there were 146 registered walkers, 29 teams and to date the Walk has raised over \$27,000!!! And donations are still coming in. Every dollar raised by this walk goes back to the cause to support research, continue outreach education right here in Sequim and provide support groups for families dealing with this devastating disease.

It was a family friendly event supported by lots of wonderful community volunteers. Mark your calendars now for September 24, 2016 and come be a part of the fun and THE CURE!

The mission of the Alzheimer's Association is to eliminate Alzheimer's disease through the advancement of research; to provide and enhance care and support for all affected, and to reduce the risk of dementia through the promotion of brain health.

For information on support groups in the Sequim/Port Angeles area, you may contact Senior Information and Assistance at (360) 452-3221 or Dungeness Court Alzheimer's Community at (360) 582-9309.

# Are NSAIDs safe?



Patients have been asking me this since 3 months ago when the FDA updated the labeling on over-the-counter NSAIDs, ibuprofen (Motrin, Advil) and naproxen (Aleve). These meds now carry the same warning as prescription NSAIDs regarding increased risk of cardiovascular (CV) disease (heart attacks and strokes). An important exception is aspirin which is a nonselective NSAID that has been proven to prevent CV disease. This article focuses on treatment of osteoarthritis pain.

**NSAIDs** are **Non-Steroidal Anti-Inflammatory Drugs**. Their primary effect is to block cyclooxygenase enzymes (COX-1 and COX-2) which produce prostaglandins which have different functions in different cells. Most NSAIDs block both enzymes and have some CV risk and some GI risk, but to different degrees. The risk for all of them goes up with increased doses. Of the traditional NSAIDs, naproxen consistently seems to be safest from a CV standpoint, but it does have higher GI risk. Ibuprofen has the least GI risk but the most risk for counteracting aspirin's protective effects.

**COX-1** is a "housekeeping" enzyme that is found in most tissues and regulates normal cell processes depending on the tissue. Blocking this enzyme in the stomach causes a decrease in protective mucous and an increase in stomach acid which can lead to ulcers. Blocking COX-1 in platelets reduces their ability to clump together and form clots which increases risk of bleeding.

**COX-2** is usually undetectable in most tissues and is expressed only during states of inflammation. Blocking this enzyme reduces pain and inflammation and is the main reason for taking NSAIDs for arthritis. When drugs came out that selectively blocked just COX-2, the benefit was that they had less risk of stomach ulcers and GI (gastrointestinal) bleeds. But COX-2 is a source of prostacycline which causes platelets to be stable (not sticky) and blood vessels to dilate. Blocking COX-2 causes platelets to clump together and blood vessels to constrict. Vioxx was a strong inhibitor of COX-2, but it was taken off the market because it was found to increase risk of heart disease significantly. Celecoxib (Celebrex) is a selective, but weak, COX-2 inhibitor. It has relatively less risk of GI bleeding but more risk for CV disease than traditional NSAIDs.

It is our older patients who are at greatest risk for complications from all of these meds. Unfortunately, these are the very people that are most likely to suffer from osteoarthritis, often in multiple joints and every single day. The safest course of action would be to avoid NSAIDs, but then what can you do for your chronic pain? Acetaminophen (Tylenol) is not an NSAID, and it is helpful for some, but for many, it just doesn't do the job. Opioids such as oxycodone, hydrocodone, or tramadol have risks of sedation, confusion, constipation, nausea/vomiting, dependency, and depression.

Medications may be reduced or pain better controlled if patients use other types of treatment such as heat, physical and occupational therapy. Modifying activities may help, such as swimming or walking instead of running. Assistive devices like canes or braces may take

some of the strain off joints. Injections of medications may give several months of relief. If you are overweight, a modest amount of weight loss may reduce stress on joints.

But what if you have done all of that and still live with daily arthritis pain? Joint replacement surgery may be warranted, though surgery is not without risk and some patients may continue to have pain afterwards. Patients and their doctors are often in a position where there is no ideal solution. If something can have a therapeutic or positive effect, then it can have some other undesired or negative effect. There is even risk with *not* treating. If you have frequent or constant pain, it can adversely affect your mood, mobility and sleep. There is risk of deconditioning, falls, fractures and loss of independence. So, the reality is that there is no way to eliminate all risk. But you can minimize it and make the best of available choices for your particular circumstance.

General rule of thumb: use the lowest amount that is effective, for the shortest period of time.

Patients with high risk of \*CV disease: choose naproxen, but also use a GI protective agent such as a proton pump inhibitor (PPI), like omeprazole.

For patients > 75 or those with increased \*\*GI risk: use a topical NSAID (like Voltaren gel). Some of it does get absorbed from the skin, so only use as directed and not in excess.

\*Highest risk patients for CV disease: prior heart attack, angioplasty/stent, stroke or TIA, Framingham risk 20%+. Middle age with multiple CV risk factors (diabetes, hypertension, high LDL, low HDL, smoker).

\*\*Risk factors for GI toxicity: prior bleed, age >75, use of NSAID, history of ulcer, use of aspirin, corticosteroids, SSRIs or anticoagulants. It is more appropriate to add a PPI to prevent GI toxicity than to stop aspirin or SSRI.

### Other cautions:

\*NSAIDs should be used with caution in stage 3 chronic kidney disease, avoided in stages 4 and 5.

\*NSAIDs should be avoided with congestive heart failure as they cause salt and water retention, decrease effectiveness of diuretics.

\*Hypertension: In individuals, whether and how much an NSAID raises blood pressure is a good predictor of CV risk. Ibuprofen can increase BP 5-10 points in some patients, but just 1-2 mmHg in others.

### One Additional caution:

\*Phenocane is marketed as a "natural COX-2 inhibitor" and likely does help with pain relief. Curcumin and its other ingredients appear to have numerous beneficial effects when studied alone and in vitro, but much is still unknown. Caution is warranted as the complex interactions between its ingredients has not been adequately tested in human beings. Although many web sites recommend it using identical propaganda from the mfr. which claims it is proven safe and effective in 'hundreds of studies', none of these actually tested the product Phenocane or the specific combination of ingredients in the same doses and proportions. Might be wonderful. Might have adverse effects. Nobody objective is keeping track as they were when another COX2 inhibitor, Vioxx, was removed from the market.

# Let Me Introduce Myself...



**MY NAME IS TINA** and I have never regretted my decision to enter the medical field. It has proven to be both rewarding and exciting.

In 1994 I began my career in the front office of Sequim Family Practice.

I found that patient care was where I wanted to be and in 2001, I completed the Medical Assistant program thru Peninsula College. Shortly after, I went to work with

Dr. Claire Haycox at Valley Dermatology and then found my way back home to Drs Sullivan and Olsen at Sequim Medical Associates. I am so excited to rejoin them and their staff providing quality, personalized care to the patients of the Olympic Peninsula.

I was born and raised in Sequim and married my high school sweetheart and now have 2 beautiful daughters Chloe and Bobbi. I love spending my time watching them play sports all year long, walking the beaches of the Peninsula, reading and time with family and friends.

## HAVE YOU HEARD OF VIPS?

Did you know that the Visually Impaired Persons of Sequim (VIPS) is a non-profit, volunteer chapter of the National Federation of the Blind, assisting blind and visually impaired persons in acquiring the skills of independence and educating the community in recognizing their capabilities and challenges?

VIPS meets once a month to bring visually impaired people together to share their experiences and discuss problems and solutions and keep them up to date regarding the current information available to them. In addition, VIPS members develop a current database to keep both Local and National Authorities informed of the needs of visually impaired persons.

Everyone is invited to the monthly meetings on the first Saturday of each month, 12:30 PM to 2:00 PM which is held at the Bell Creek Bar & Grill, 707 E. Washington Ave., Sequim (former Mariner's Restaurant). Membership in VIPS is not a requirement for attendance, but if you wish to join, the fee is \$24 per year.

For further information about VIPS, please call 360-582-6931, or email nfbclallamcounty@gmail.com.

Flu Season...  
Get Vaccinated!!

Sequim Medical Associates will be providing flu shots at your scheduled visit beginning October 1st. The vaccine loses its effectiveness after 6 months so getting too early is not advised. For your added convenience, we will also have a dedicated nurse available on Tuesdays and Thursdays for the month of October from 8:00 to 11:00 for administering the vaccine on a first come, first serve basis.

**Cover Your Coughs and Sneezes**

Use a tissue to cover your sneezes and coughs.

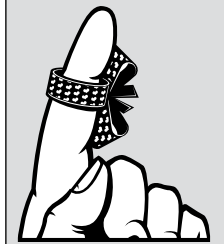
Sneeze or cough into your sleeve if you do not have a tissue.

Clean your hands often.

When needed, wear a mask to protect yourself and others from germs.

[www.publichealth.va.gov/InfectionDontPassItOn](http://www.publichealth.va.gov/InfectionDontPassItOn)

**A suggested website for allergy forecast: [www.Pollen.com](http://www.Pollen.com)**



## Remember...

We're here to provide you quality healthcare. Part of our job is to educate and assist you with your healthcare needs. Use the numbers below to get in touch with the people who can answer your questions.

Office . . . . . 582-2850

Office Fax . . . . . 582-2851

After Hours  
(Urgent Care) 582-2850  
or 888-810-3116

Email:  
pam@sequimmed.com  
FOR NONURGENT NEEDS ONLY

Monthly Fee Questions,  
Pam . . . . . 582-2850

Insurance Billing Questions  
Deck . . . . . 582-2850

Referrals  
Stacey . . . . . 582-2850

Prescription Coverage  
Becky . . . . . 582-2850

Protime/Cholesterol/  
Hemoglobin A1C  
Mon, Wed & Fri  
8-12, 1-4  
Haley . . . . . 582-2850

**Sequim Medical Associates, PLLP**

840 N. 5th Avenue  
Suite 2100  
Sequim, WA 98382

[www.sequimmed.com](http://www.sequimmed.com)

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