

## No such thing as a mild concussion

Concussions are a serious problem in all contact sports, and the equipment used by athletes falls short of protecting the brain, said Dr. Scott Johnson, a board-certified family practice physician at Sports Orthopedics and Spine.

With football season in full swing, it's important for coaches and players to be able to recognize the signs of concussions, Dr. Johnson said. It's the best way to protect athletes from further injury.

"Contact sports have an inherent risk of concussions," he said. "We only have one brain, and we have to take the best care of the one brain we have."

A concussion is a traumatic injury – it's a functional disturbance of the brain that generally resolves itself in 10 days to two weeks. It occurs when the brain is shaken violently inside the skull, which most often happens in contact sports when a player experiences a blow to the head or rotates suddenly.

But because of the nature of concussions, athletic equipment cannot prevent them, Dr. Johnson said. "Helmets and mouth guards prevent skull fractures and dental injuries, but they do not prevent concussions," he said.

Proper technique, player conditioning and enforcing rules meant to protect players can help prevent concussions, Dr. Johnson said. However, they will always be a part of contact sports.

### Recognizing the signs

Symptoms of concussions include headache, nausea, impaired vision, loss of memory, inappropriate emotions and a general feeling of foggi-ness. Dr. Johnson said people who suffer

concussions often experience a combination of symptoms.

But the symptoms can be difficult to recognize, he added. People who suffer concussions must rely on an injured organ – their brain – to identify and understand the symptoms. And, athletes are notorious for wanting to get back on the field or court to help their teammates.

But, athletes should never play with a concussion. Beyond the fact that playing with a concussion could lead to a brain hemorrhage, it could lengthen the recovery period, Dr. Johnson said. Instead of the usual 10 to 14 days, recovery could last months.

Also, athletes who play with a concussion are at a greater risk of suffering another injury, such as a broken bone or torn ligament, Dr. Johnson said. Concussions impair brain function. They cause athletes to miss a step, lose focus and play at a much-reduced capacity.

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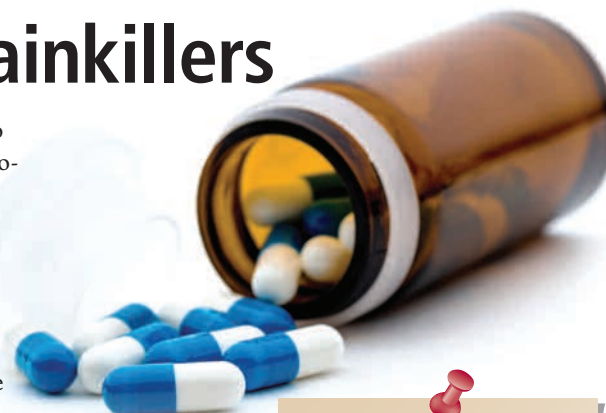


Collisions during a game, even against team members, can cause traumatic injuries, including concussions.

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# Addiction a threat with painkillers



**P**rescription painkillers, while a good resource to make patients comfortable after an injury or procedure, are extremely addictive. They ruin lives and devastate families, said Dr. Ken Warren, a family practitioner at Regional Medical Associates.

"It's extremely alarming," Dr. Warren said. "The number of people you encounter every day that you don't realize have an addiction is astounding."

Opiates are the most prescribed medications in the United States. They include OxyContin, morphine, codeine, Fentanyl, Dilaudid, Lorcet and Hydrocodone.

The path to addiction can be subtle, he said. As a patient's tolerance level increases along with his or her dependency, it often goes unnoticed by family members because the patient is typically under more stress than usual.

"Taking a regular dose of opiates for just two weeks can be enough time to start the addiction process," Dr. Warren said.

And once addiction sets in, it permanently changes the lives of the people it touches. Even if someone is able to break the addiction, it is like a switch has been flipped in their brain and it cannot be unflipped, Dr. Warren said.

"For ever and ever and ever their brain is going to subtly try to get them to take opiates again."

Doctors should be alert to their patients' potential to become addicted and closely monitor the amount of drugs they are prescribing, Warren said, adding that some doctors write too many prescriptions for too many opiates. Because of medical privacy laws, it is easy for patients to abuse the system.

"It's frustrating that these drugs are on the streets and available on prescription, and are readily obtainable," Dr. Warren said. "It's just an overwhelmingly severe problem."

As a result, it's important for patients to understand the risks associated with narcotics and closely monitor themselves if they are pre-

scribed painkillers, Dr. Warren said. Family members of patients should also be aware.

It's too easy for people to become accidentally or unintentionally addicted, and it's very difficult to control "doctor shopping," Dr. Warren said.

Dr. Warren began a program in his clinic about six years ago with the goal of weaning patients off all addictive drugs completely. He uses Suboxone, a medication that was initially only allowed in institutions and through programs much like the methadone clinics.

"It's an exceptionally effective drug if used effectively and properly," Dr. Warren said.

The purpose of Suboxone is twofold. First, it helps the patient get through the withdrawal phase relatively painlessly. Secondly, it helps to curb the cravings for the opiate. The ongoing desire for opiates can be more troublesome than the withdrawal.

Dr. Warren prescribes just enough of a dosage to curb the desire. He said it's important for his patients to still be aware of the desire so they learn how to cope with it. And after 11 months, he wants his patients to have been weaned off of Suboxone completely.

"My program is not one of trading one addiction for another," Dr. Warren said.

To be able to prescribe Suboxone, a physician must acquire a specific Drug Enforcement Agency (DEA) number and additional certification from the DEA, which monitors and inspects the Suboxone programs regularly. Under the rules of the program, Dr. Warren can treat as many as 100 patients at one time.

Because of the nature of addiction, success is mixed, Dr. Warren said. Many patients beat their addictions with the help of the program, but others continue to try to abuse drugs and the system.

"For the patients that are committed to getting clean and staying clean, we have pretty good success," Dr. Warren said.

"But I have to be on my toes all the time."

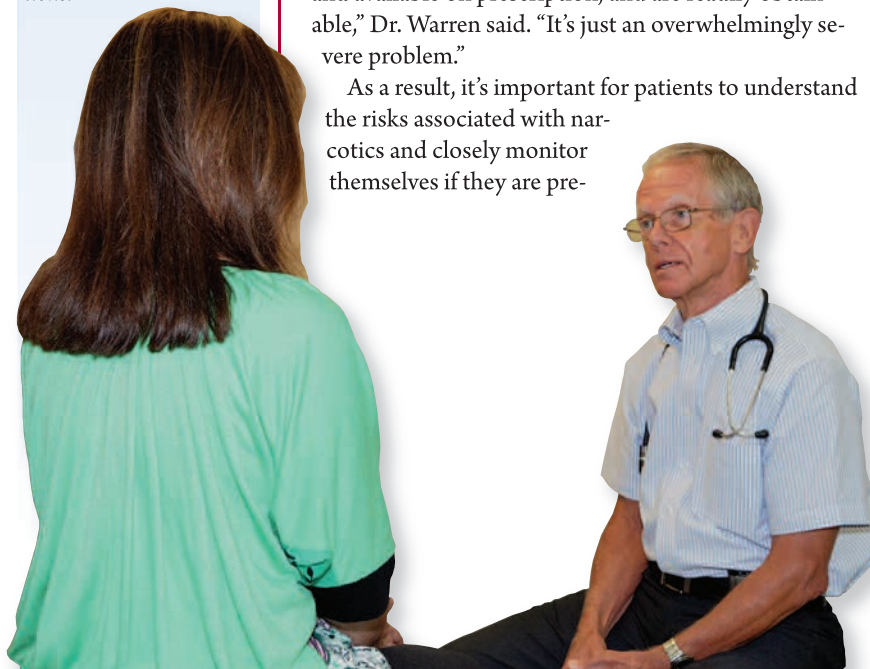
*It's too easy for people to become accidentally or unintentionally addicted, and it's too difficult to control "doctor shopping."*

— Ken Warren, M.D.

**D**r. Ken Warren, a board-certified family practice physician, practices at Regional Medical Associates at 31 Physicians Drive, in Jackson.

For an appointment, call (731) 664-0103.

*Dr. Ken Warren, below right, counsels a patient about the overuse of prescription pain medications.*





*Dr. Garrison Smith, a board-certified general surgeon, examines a patient after abdominal surgery.*

## Need special medical care? Most likely, you'll find it here in Jackson

**M**edical care in West Tennessee continues to advance, and patients are finding more services available in Jackson without the need to travel to Memphis or Nashville.

Dr. Garrison Smith, a general surgeon at Jackson Surgical Associates, said doctors in the region are striving to provide more options for patients.

"There are people who want to stay here for their care, and I think we should be able to offer it to them," Dr. Smith said. "The goal is trying to improve care for the whole community of West Tennessee."

Improving care consists of using new methods that result in better patient outcomes and experiences, as well as providing complete care for patients, Dr. Smith said.

"We try to use a multiple-disciplinary approach using oncologists, surgeons, interventional radiologists and pathologists."

Jackson Surgical Associates also is pioneering new procedures with new equipment that previously was unavailable in Jackson. One such instrument is called a Habib device, which uses heat-producing radio frequencies in surgeries to remove portions of the liver.

Liver surgery carries a higher risk of a leak in the bile duct or inoperative blood loss, which can be fatal. "It is a potentially disastrous operation," Dr. Smith said.

But, he said, the heat produced from the Habib device seals biliary and blood vessels and allows doctors to make a much safer liver resection. Dr. Smith was the first

surgeon in Jackson to use the handheld Habib instrument when he operated on a patient in spring 2013.

Other new techniques in Jackson include a minimally invasive laparoscopic procedure to remove lymph nodes and parts of the colon in patients with colon cancer. Instead of one long incision in the abdomen during an open colectomy, surgeons make a series of smaller incisions and use special instruments to remove the cancer.

The procedure reduces the length of the hospital stay for most people. Patients also experience less postoperative pain and are back on their feet earlier, Dr. Smith said.

In Jackson, when one clinic offers a service or procedure that results in better patient outcomes and experiences, other clinics generally follow. When they do, it strengthens the region's status as a medical community and provides patients with more options.

Instead of traveling to Memphis or Nashville, people can find the same level of care closer to home, Dr. Smith said.

"Doctors in the community are committed to staying current, and their technical skills are such that patients can stay in Jackson for most procedures," Dr. Smith said.

"As a medical community, we're making the effort to offer the latest proven technologies and techniques in advanced medical procedures and surgeries."

**J**ackson Surgical Associates is pioneering new procedures with new equipment that previously was unavailable in Jackson. One such instrument is a Habib device, which uses heat-producing radio frequencies in surgeries to remove portions of the liver.

**D**r. Garrison Smith practices at Jackson Surgical Associates with Drs. Dean Currie, David Villarreal, David Laird and Daniel Day.

For an appointment, call (731) 664-7395.

# No such thing as a mild concussion

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## Suffering multiple concussions

For high school athletes, Dr. Johnson said they can generally suffer one concussion and return to play at some point later in the season. If they suffer a second concussion in the same season, they should sit out a full calendar year.

If they suffer a third concussion in a year's time, they should find another sport. "Give it up," Dr. Johnson said.

Those guidelines change for college and professional athletes, who play for higher stakes on a much bigger stage, he said. "The younger an athlete is, the more conservative you are with him in his return to play."

The science around concussions is advancing, and the medical community has a better understanding of them, Dr. Johnson said. But there are still many questions and uncertainties, especially with the long-term effects of one or many concussions.

One thing that is known, however, is that athletes who suffer a concussion are at a higher risk of suffering another concussion. "The more concussions you have, the more likely you are to suffer another concussion with a smaller hit."

## Treatment

Dr. Johnson said it's critical for players to have their treatment managed by a knowledgeable doctor – like the physicians at Sports Orthopedics and Spine. "If you suffer a concussion, go see somebody who knows what they're talking about when it comes to concussions," he said.

Clinics like Sports Orthopedics and Spine can administer a neuropsychological test to determine the effects of the concussion and help doctors determine

*Dr. Scott Johnson, far right, administers a neuropsychological test to determine the extent of a brain injury and whether it will have lasting effects.*

when an athlete is ready to return to the field.

Dr. Johnson added, however, that testing shouldn't be the only factor in determining when an athlete can play again.

Proper management is important, but many people rely on out-of-date guidelines to determine when athletes can return to play, Dr. Johnson said.

Players and coaches should be educated about the risks associated with the injury and further harm that can be done if a player returns too early.

In a nutshell, Dr. Johnson said, do not return to play the same day after suffering a concussion. Go see a professional who understands current medical knowledge about concussions, and follow a gradual return-to-play program, he said.

And finally, don't try to gauge the severity of the injury by the severity of a hit, he said. A concussed brain is a brain that no longer functions properly. There is no such thing as a "mild" concussion.

"A concussion is a concussion, and that is our medical approach."

**D**r. Scott Johnson practices at Sports Orthopedics and Spine with Drs. Keith Nord, John P. Masterson, G. Bradford Wright, David Yakin and Timothy Sweo.

For an appointment, call (731) 427-7888.



# Athletes at risk for facial injuries

## The most frequent sports for face injuries are baseball for men, cheerleading for women

Facial injuries are common in sports. They occur throughout the year but tend to peak when certain sports – such as football and cheerleading – are in the height of their seasons.

While facial trauma is most common in baseball for men, football is the leading cause of men's sports injuries in general, said Dr. Karl Studtmann, an ear, nose and throat specialist with the West Tennessee ENT Clinic. Cheerleading and gymnastics are far and away the most common source of injury for women.

"They aren't wearing protective gear, and they're tumbling over hard surfaces," Dr. Studtmann said. "They need to be cautious when they're tumbling and when they're stunting."

The equipment worn in football does a good job in protecting players – especially their faces. But Studtmann said he sees several avoidable injuries this time of year suffered outside of Friday night games when players run through plays without a helmet.

"Wear the equipment in practice," Dr. Studtmann said.

Regardless of the season, a nasal injury is the most common trauma for athletes across all sports. If a player suffers a nosebleed, coaches need to assess the severity of the injury. In some cases, the player can continue to play, but the nose could also be broken and require surgery.

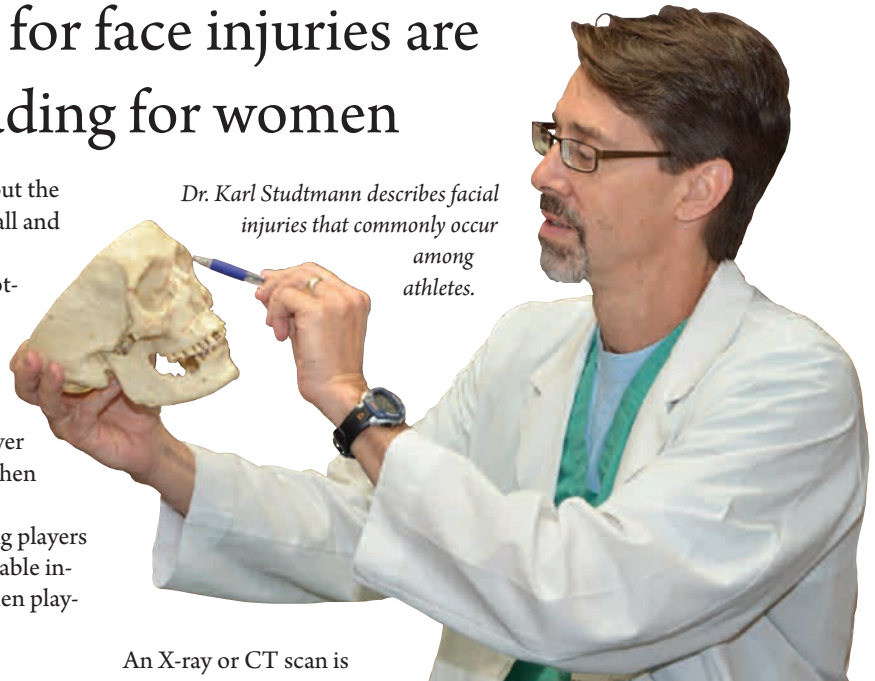
For nosebleeds, the player or trainer should pinch the soft skin around the nostrils for one minute to stop the bleeding. If it bleeds again, pinch it for 10 minutes. If it's still bleeding, the player needs to be seen by a doctor right away.

If the nose is broken but doesn't require a trip to the emergency room, it needs to be treated by a physician within three days of the injury.



Dr. Karl Studtmann, above, checks for facial fractures when examining a patient. USJ cheerleaders, including Dr. Studtmann's daughter, Maddie, standing far right, practice stunts. Cheerleading is one of the most injury-prone sports for women.

Dr. Karl Studtmann describes facial injuries that commonly occur among athletes.



An X-ray or CT scan is sometimes necessary to determine the extent of the injury. Noses don't always need to be fixed unless there is a cosmetic deformity or if the patient has difficulty breathing.

If surgery is required, it is usually a quick recovery and athletes can often return to play the next day. However, they need to wear an external nasal splint for the first week, and it takes six to eight weeks for the bone to completely heal.

"If you wait six to eight weeks, it will be just as strong as it ever was."

Beyond a broken nose or nosebleed, other facial traumas include lacerations, dental injuries and a perforated eardrum, which can cause dizziness and hearing loss. Perforated eardrums often heal by themselves, but there is a risk of infection, and the injury could require surgery.

Other, more serious injuries, include jaw fractures and broken eye sockets. These injuries could also require surgery, and athletes should avoid sports until their face has healed.

During the course of his career, Dr. Studtmann said he has seen sports-related facial injuries increase. It could be that more kids are playing sports and more sports are available to kids.

But some sports, such as baseball, basketball and soccer, are played throughout the year as the community's best athletes travel to face the best athletes from other communities, he said. These elite sports leagues also play a hand in the rise in injuries.

"I think it's a matter of intensity of exposure, and kids are playing at a higher level for their age because of the way the teams are formed."

Dr. Studtmann practices at the West Tennessee ENT Clinic with Dr. Keith Wainscott. Both are board certified in otolaryngology and specialize in treating the ears, nose and throat.

For an appointment, call (731) 424-3682.

# Jackson has some really great doctors. We are proud to call them members.

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- Alan DeJarnatt, M.D.

## Anesthesiology

**Professional Anesthesia: 424-1408**

- Ben Anderson, M.D.
- Charles Freeman, D.O.
- Lauri Anne Gorbet, M.D.
- Timothy Hutchison, M.D.
- Michael Lam, M.D.
- Michael Martindale, M.D.
- Charles Poole, M.D.
- Todd Seabrook, M.D.

## Cardiology

**Adv Cardiovascular: 215-1281**

- Alexander Alperovich, M.D.

**Apex Cardiology: 423-8200**

- Henry Lui, M.D.

**Cardiovascular Clinic: 256-1819**

- Adey Agbetoyin, M.D.
- Mohsin Alhaddad, M.D.

**Mid-South Heart Center: 423-8383**

- Louis Cunningham, M.D.
- Tommy Miller III, M.D.

**Skyline Cardiovascular: 410-6777**

- Ronald Weiner, D.O.

## Dermatology

**Dermatology Clinic: 422-7999**

- Mac Jones, M.D.
- Patrick Teer, M.D.

## Family Practice

**Northside Medical Clinic: 668-2800**

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- Elizabeth Londino, M.D.

**Patient Centered Care: 215-2888**

- Kim Howerton, M.D.

**Kenneth Warren, M.D.: 664-0103**

## Gastroenterology

**TransSouth Health Care: 661-0086**

- Allan Menachem, M.D.
- Bob Souder, M.D.

## General Surgery

**Jackson Surgical: 664-7395**

- Daniel Day, M.D.
- Dean Currie, M.D.
- David Laird, M.D.
- Garrison Smith, M.D.
- David Villarreal, M.D.

**Madison Surgical Clinic: 660-6101**

- Thomas Edwards, M.D.

## Gynecology/Obstetrics

**Jackson Reg. Women: 668-4455**

- Sandra Boxell, M.D.
- Pam Evans, M.D.
- Keith Micetich, M.D.
- Lane Williams, M.D.

**Woman's Clinic: 422-4642**

- Brad Adkins, M.D.
- Madhav Boyapati, M.D.
- Michael Epps, M.D. (GYN ONLY)
- Paul Gray, M.D.
- Andrea Harper, M.D.
- Molly Rheney, M.D.
- Ryan Roy, M.D.
- David Soll, M.D.

## Hand Surgery

**Plastic Surgery Clinic: 668-2490**

- Marshall Yellen, M.D.

**West TN Bone & Joint: 661-9825**

- Michael Dolan, M.D.

## Internal Medicine

**Eze Clinic: 661-0067**

- Gift Eze, M.D.

**Goodwin & Associates: 668-9791**

- Stephen Goodwin, M.D.

**Ultimate Health: 265-1997**

- Samuel Bada, M.D.

**John Woods, M.D.: 664-7949**

## Nephrology

**West TN Kidney Clinics: 668-4337**

- Susan Alex, M.D.
- Ram Chary, M.D.
- Shirish "Joe" Joglekar, M.D.
- R. Mulay, M.D.
- Murty Narapareddy, M.D.

## Neurology

**Greystone Medical: 661-0131**

- Marcus DeSio, M.D.

## Oncology/Hematology

**Cancer Care Center: 668-1668**

- Brian Walker, D.O.
- Archie Wright, D.O.

**Hematology/Oncology: 234-2425**

- Omar Ahmad, M.D.

## Ophthalmology

**Eye Clinic: 424-2414**

- Mark Bateman, M.D.
- Hilary Grissom, M.D.
- Bruce Herron, M.D.
- Sean Neel, M.D.
- Jason Sullivan, M.D.
- Art Woods, M.D.

**Hughes Eye Center: 664-1994**

- David Underwood, M.D.

## Orthopedic Surgery

**Craig Orthopedic Clinic: 661-0061**

- Jim Craig, M.D.

**Sports/Orthopedics: 427-7888**

- Scott Johnson, M.D.
- John Masterson, M.D.
- Keith Nord, M.D.
- Timothy Sweo, M.D.
- Bradford Wright, M.D.
- David Yakin, M.D.

**West TN Bone & Joint: 661-9825**

- Harold Antwine III, M.D.
- Michael Cobb, M.D.
- John Everett, M.D.
- Doug Haltom, M.D.
- Jason Hutchison, M.D.
- David Johnson, M.D.
- David Pearce, M.D.
- Kelly Pucek, M.D.
- Adam Smith, M.D.
- Lowell Stonecipher, M.D.

## Otolaryngology

**West TN ENT Clinic: 424-3682**

- Karl Studtmann, M.D.
- Keith Wainscott, M.D.

## Pediatrics

**Child Care Clinic: 664-8080**

- Kay Joglekar, M.D.

**Children's Clinic: 423-1500**

- Todd Blake, M.D.
- Bruce Maley, M.D.
- Amelia Self, M.D.
- David Self, M.D.
- Theresa Smith, M.D.

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- Ron Bingham, M.D.
- Miles Johnson, M.D.

**EMG Specialty Clinics: 668-9899**

- Remy Valdivia, M.D.

**West TN Rehab Group: 664-7744**

- Davidson Curwen, M.D.

## Plastic Surgery

**Plastic Surgery Clinic: 668-2490**

- Marshall Yellen, M.D.

## Podiatry

**East Wood Clinic, Paris: 642-2025**

- David Long, D.P.M.

**Podiatry Clinic: 427-5581**

- Terry Holt, D.P.M.

## Rheumatology

**Arthritis Clinic: 664-0002**

- Jacob Aelion, M.D.
- Satish Odhav, M.D.

## Spine Surgery

**Adv. Spine Institute: 506-4607**

- Robert Talac, M.D.

## Urgent Care

**Physicians Quality Care: 984-8400**

- Jimmy Hoppers, M.D.
- Melanie Hoppers, M.D.

## Urology

**Jackson Urological: 427-9971**

- David Burleson, M.D.
- John Carragher, M.D.
- Raymond Howard, M.D.
- Peter Lawrence, M.D.
- Donald McKnight, M.D.
- Scott Yarbro, M.D.



The Girls Night Out 5K, organized by the Woman's Clinic, is one of the fastest-growing races in Jackson. Up to 350 runners are expected to participate this year.

## Woman's Clinic 5K supports breast cancer

Up to 350 runners – many of whom will be wearing pink – are expected to participate in the annual Take Your Girls Night Out 5K on October 3, said Woman's Clinic Administrator Jon Ewing.

The race, which also features a one-mile walk and fun run, is organized by the Woman's Clinic and will begin at 6:30 p.m. in the clinic's parking lot at 244 Coatsland Drive. All proceeds will benefit the American Cancer Society's efforts to promote breast cancer research.

The race is run in conjunction with the beginning of National Breast Cancer Awareness Month.

Last year, the 5K featured 250 runners and raised \$6,000 for breast cancer research, and Ewing said he hopes for more this year. This is the fourth year the Woman's Clinic has organized the race.

"It's one of the fastest-growing 5Ks in Jackson," Ewing said. "Everyone knows someone that's been affected by breast cancer."

The course begins at the Woman's Clinic and follows Summar Drive to Skyline Drive. Runners loop around the neighborhoods near Jackson-Madison County General Hospital for 3.1 miles before ending the race back at the Woman's Clinic.

Besides raising money for research, the race also raises awareness. Participants often wear pink to honor women battling breast cancer.

Pre-registration is \$20 and ends September 5. After September 5, the cost to register is \$25.

## 500-mile ride benefits breast cancer patients

Dr. Brad Adkins from the Woman's Clinic and Administrator Jon Ewing are gearing up for another 500-mile bike ride. The pair will leave the West Clinic in Memphis on October 5 with 16 other cyclists for a five-day ride to Rosemary Beach, Florida.

The event is a fundraiser for Wings Cancer Foundation – a referral center for many patients from the Woman's Clinic who need cancer-related surgery. Dr. Adkins and Ewing also completed the ride in 2012, which raised \$65,000 for the foundation.

The purpose of the 500-mile trek is to promote cancer awareness, encourage healthy lifestyles and raise money for Wings' health and wellness programs. In cities and towns along the way, riders will encourage people to support Wings and help raise cancer awareness.

"All the suffering we go through on the ride pales in comparison to what cancer patients go through," Ewing said. "If we can help make a difference in their lives, it's worth it. It is an honor to ride this epic journey for our patients and for this great cause."

Dr. Michael Epps, Paul Gray, Brad Adkins, Molly Rheney, Madhav Boyapati, David Soll, Ryan Roy and Andrea Harper practice at the Woman's Clinic. All are board certified in obstetrics and gynecology.

For an appointment, call (731) 422-4642.

## Help save lives during a premier black-tie event

The American Cancer Society's annual Runway for a Cure fundraiser starts at 5:30 p.m. October 8 in the Carl Perkins Civic Center.

The black-tie fashion show also features an elegant dinner, late-night dancing and an auction. Individual tickets are \$45, and group pricing is available. The event raises money and awareness for breast cancer research. To purchase tickets or donate to the cause, visit [www.runwayforacure.org](http://www.runwayforacure.org).

"The Runway for a Cure is such a crucial part of the fight against cancer," said Donna Stines, executive director of the American Cancer Society's Jackson office.



*West Tennessee Physicians' Alliance members who are listed as sponsors of the event at press time include:*

- Woman's Clinic (Premier Sponsor)
- Drs. Kay and Shirish Joglekar (Diamond Sponsor)
- Jackson Surgical Associates (Diamond Sponsor)
- Jackson Regional Women's Center (Gold Sponsor)
- Plastic Surgery Center of Jackson (Silver Sponsor)

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## *Our physicians treat your whole family*



The West Tennessee Physicians' Alliance represents more than 100 Jackson physicians who practice 24 different specialties in independent clinics.

Check us out at [www.wtpa.com](http://www.wtpa.com).

For an appointment call your doctor's clinic.

Doctors and clinics are listed on Page 6 of this newsletter.