

# HFM Health Savvy

Inspiring you to a healthier life



LuAnn Decker says  
goodbye to acid  
reflux with the  
LINX procedure.

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**Holy Family Memorial**

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# Up close and personal with Clinical Social Worker Mary Beth.

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*Mary Beth Reynoso, LCSW*

Mary Beth Reynoso, a licensed clinical social worker who joined Holy Family Memorial Behavioral Health in August, credits her grandmother for her decision to become a social worker.

As a young child, Mary Beth often joined her grandmother during her volunteer outings. Mary Beth's grandmother volunteered for a local senior center, delivered Meals on Wheels and drove elderly patients to their appointments.

"It opened my eyes to see the difficulties some people in our community faced," said Mary Beth. "I saw how appreciative people were

when my grandmother visited. It provided me with better awareness—you don't always know how people are doing by just looking at them on the outside. Sometimes they may be dealing with something and you have to figure out how to make them feel safe and

Mary Beth focuses on building relationships with her patients and guides them to reach their personal goals. She says, "Getting to a place of health is the ability to recognize our emotional needs and how to consciously choose healthy responses—like reaching out to someone, making time for your favorite activities, or doing

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**"I enjoy empowering individuals to take the steps they need to feel more in control of their lives."**

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comfortable opening up to you."

By the time Mary Beth headed to college she knew she wanted to help people, but how exactly? After learning more about social work, Mary Beth was immediately drawn to it—the core values of the social work profession, an enormous field with many

different job opportunities, and the ability to look at clinical, social and environmental factors to improve the lives of others.

Since earning her Master of Social Work from the University of Wisconsin-Milwaukee, Mary Beth has worked in various social work capacities for nearly a decade. She is a Certified Clinical Trauma Professional with the International Association of Trauma Professionals, and has experience working with a wide range of mental health conditions, including anxiety and panic disorders, depression and trauma.

something meaningful—to make you feel connected to yourself, your community and other people in your life."

"Being a social worker can be challenging at times, but my job is incredibly rewarding," Mary Beth remarked. "I enjoy empowering individuals to take the steps they need to feel more in control of their lives. It's amazing to see my patients' transformations."

**Mary Beth Reynoso, LCSW, provides individual and family counseling at HFM Behavioral Health. To schedule an appointment with her, call (920) 320-8600 or learn more at [hfmhealth.org/behavioral-health](https://hfmhealth.org/behavioral-health).**

# Volunteering in a new community.

## Mishicot resident Dona Edmundson stays connected to her faith and community by volunteering.

Born and raised near the bustling city of San Jose, California, Dona married her husband and raised four children. Dona spent most of her life working as a housewife and her husband as a police officer. When Dona and her husband retired, they decided it was time for an adventure.

Dona said, “We sold everything: our house, our belongings and our business and purchased our 36-foot Country Coach® motorhome. After

of a community that was grounded—in faith and good people. We found a plot of land in Mishicot and chose to build our home here. I knew that if we were meant to be here, God would make it happen.”

Once settled in the area, Dona decided to volunteer with Holy Family Memorial. “I have always liked giving back to the community,” Dona explained. The nuns, statues, crosses and friendly people at HFM

“I love that I get to meet, talk with and listen to a wide variety of people from the community—I get to listen to their joys and sometimes their sadnesses,” she explains. “Volunteering has allowed me to be aware of other people’s needs and it keeps me going. Being that I wasn’t from this area, volunteering has helped me find my place in this community and let me form strong friendships that I wouldn’t have found otherwise.”

To anyone interested in volunteering, Dona says, “Just do it. You will find so much joy in helping and serving other people.”

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**“We wanted to be a part of a community that was grounded—in faith and good people.”**

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we purchased the motorhome, we spent the night in our church parking lot, went to Mass in the morning and then had our priest do a blessing for the motorhome—which became our home for the next 4 ½ years.”

With no destination in mind, Dona and her husband traveled all over the United States. About two years ago, Dona and her husband found themselves drawn to the Manitowoc area.

While they loved fishing on Lake Michigan and going to fish fries, it was their Catholic faith and the Diocese of Green Bay that attracted them to this area. Dona explained, “We wanted to be a part

just touched my heart and further connected me to my faith.”

Dona volunteers in the HFM Gift Shoppe and at the Welcome Desk.

**For more information on all the ways you can give back through volunteering at HFM, contact Susan Senglaub, Director of Volunteer Services, at (920) 320-2396 or visit [hfmhealth.org/volunteer](http://hfmhealth.org/volunteer).**







# A life not easy to swallow.

**Manitowoc County resident LuAnn Decker says goodbye to acid reflux with the LINX procedure.**

For decades, LuAnn Decker found herself battling Gastroesophageal Reflux Disease (GERD)—commonly referred to as acid reflux or heartburn.

Like many people, LuAnn tried lifestyle changes for relief. She took over-the-counter medications and antacids, avoided food that might make the acid reflux worse and elevated the head of her bed to use gravity to help acid stay in her stomach.

I had a constant cough and I didn't want to go out in public."

Acid reflux affected almost every aspect of LuAnn's life. Mundane tasks, like tying her shoes, became difficult. She had to limit her movements while doing push-ups or planks because she would feel stomach acid regurgitating back into her throat, limiting her ability to exercise. She had trouble picking up her grandkids and playing with them. And when it was time

uncomfortable and worried about future health problems, LuAnn talked with Dr. Matthew Campbell, a general surgeon at HFM General and Vascular Surgery, and learned about LINX, a new treatment for acid reflux.

"Acid reflux is a 'mechanical' problem. Things that belong in the stomach—acid, bile, digestive enzymes—get pushed into the esophagus and cause heartburn, inflammation and ulceration. It makes it difficult to swallow and can lead to precancerous changes of the esophagus. The acid can also go down the trachea and lead to asthma, morning cough or difficulty breathing," Dr. Campbell explained. "Most of the time people treat this with antacids, but that only fixes small problems and does not address the mechanics of it. The LINX procedure is a mechanical solution for significant reflux disease.

**"I felt desperate. Nothing I was doing helped the acid reflux, I would wake up with it and go to bed with it. When it was bad, I would lay on the floor and roll back and forth."**

"I felt desperate. Nothing I was doing helped the acid reflux," said LuAnn. "I would wake up with it and go to bed with it. When it was bad, I would lay on the floor and roll back and forth.

for bed, even if the medication was helping her heartburn, she would feel things regurgitating up into her throat.

"I didn't feel in control of my body," LuAnn commented. Tired of being



For the LINX procedure, a ring of interconnected magnets is implanted around the esophagus to reinforce the weakened muscle. “There is a natural sphincter there that keeps stomach contents in the stomach and keeps it from going up into the esophagus. If you have GERD, that muscle is weakened. The LINX device reinforces that muscle. It restores the esophagus back to its normal strength and physiology,” Dr. Campbell described.

For LuAnn, the decision to get the LINX procedure wasn’t one she took lightly.

“I was wary because of how new the procedure was,” she recalled. “But Dr. Campbell assured me that I was the right candidate for this procedure.”

LuAnn went through extensive testing to make sure that her esophagus was strong enough for LINX. Once she passed the tests, she was cleared for surgery.

LuAnn said, “Dr. Campbell and the nursing staff always made me feel like they knew me. They thoroughly explained what the LINX procedure was before my surgery and coached me through my healing process post-surgery. They were very knowledgeable and personable—they made me feel more comfortable. With any surgery you are apprehensive, but they reassured me.”



*LINX device: a small ring of magnets*

After a short, outpatient procedure, LuAnn was able to return home and resume her normal daily activities.

LuAnn had immediate relief after the surgery, although she had to eat more slowly than normal and temporarily had to avoid hot and cold drinks. She explained, “The next day, I could do things that I couldn’t do before. I sleep better, and I can bend down and tie my shoes. I do things now without having to think, ‘Well maybe I



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**I want people who read this and think, ‘She can do that and I can’t now,’ to realize that they don’t need to suffer.**

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shouldn’t be doing this.’ I don’t need to be afraid of things coming up into my throat and making me uncomfortable.”

Seven weeks after surgery, all of LuAnn’s acid reflux symptoms were resolved. She was eating regular food and she was off all her medication. Her quality of life was improved immensely.

“I don’t have to make sure I have antacids on hand. I don’t need to have a travel bag with tons of medications or run to the store in the middle of the night to buy some. I don’t remember the last time I had a Tums®. I don’t have any acid reflux whatsoever,” she said.

The LINX procedure gave LuAnn her family time back. LuAnn said, “My grandkids are everything to me. I can interact with them so much better. I used to have to sit down while playing ‘Head, Shoulders, Knees and Toes’; I couldn’t bend down and grab their toys. Now, I can lean over if they drop

something and can grab a toy while on my hands and knees.”

LuAnn explained, “I want people who read this and think, ‘She can do that and I can’t now,’ to realize that they don’t need to suffer.”

If you are suffering from GERD, don’t ignore it.

“We need to consider reflux a serious disease,” Said Dr. Campbell. “Lots of studies have shown that, over their lifetime, reflux patients spend twice as much on healthcare, they miss work more often, and they have an overall lower quality of life. But whether that is the disease, or the side effects of the disease, we tend to blow off reflux as ‘just heartburn’ and people tend to self-medicate. It has become something that patients don’t talk to their doctor about. Acid reflux is something that shouldn’t be overlooked—it is serious.”

**Learn more at [hfmhealth.org/linx](http://hfmhealth.org/linx) or call (920) 320-3165 to schedule an appointment.**

# Back to the “full me”

**Bill Kramer feels better faster with new enhanced recovery after surgery protocols.**

For Bill Kramer, dealing with diverticulitis was nothing new.

The 67-year-old lifelong Manitowoc resident had been diagnosed with the condition a decade ago. But aside from keeping an eye on his diet and experiencing occasional mild abdominal pain, it didn't keep him from living an active lifestyle, and he barely ever thought twice about having the condition.

That is, until Easter Sunday of 2019.

Everything changed for Bill this past Easter. After a day filled with family, food and celebration, he began to experience severe abdominal pain. By that night, the pain became unbearable and his family rushed him to the HFM Emergency Department.

After a short time in the emergency department, Bill was admitted and first met HFM General Surgeon Dr. Matthew McFarlane. Dr. McFarlane explained that he was experiencing a complicated diverticula burst, where a perforation or burst was causing the bacteria within his colon to spread into his abdomen. Ultimately, because of his diverticulitis history and the severity of the situation at hand, Dr. McFarlane recommended opting for a surgical approach versus treating with medication only. And in Bill's case, that actually meant undergoing two surgeries over a period of months.

“Dr. McFarlane was an absolute gentleman,” Bill recalled. “And along with his friendly, personal nature, I also quickly felt very confident in his recommendation, even though it entailed two separate surgeries. He clearly laid out the reasons why the surgical approach was the best option, and I trusted I was in good hands.”

With Bill's blessing, the first surgery was completed successfully later that day. And while it repaired the damage done by the perforation, it also left him with a colostomy bag. However, that was only temporary, as the second surgery reversed the need for the bag.

Bill's postoperative recovery got off to a great start but was quickly derailed when he experienced an ileus—a painful paralysis in the intestines that commonly occurs after abdominal and colorectal surgeries.

“I ended up in the hospital for 17 days,” Bill explained. “And even after that, it took me six weeks to finally start to feel like myself again.”

As Bill continued his first postoperative recovery, HFM was busy at work getting ready to launch a new initiative specifically tailored for colorectal surgeries, called Enhanced Recovery After Surgery protocols—commonly referred to as ERAS.

ERAS relies on a patient-centered, evidence-based, multidisciplinary team approach to surgeries in order to improve surgical outcomes while speeding patient recovery times. In its simplest form, ERAS is just an acronym for a three-phase total care approach for a patient undergoing surgery—an approach that gets everybody involved and on the same page, using research-proven practices to make sure patients have the best surgical experience possible and recover quicker.



As Bill's surgeon and a member of the ERAS implementation team, Dr. McFarlane has unique insights into the new initiative at HFM.

“It's not that we weren't doing part of the ERAS protocols before—we just didn't have a formal process,” Dr. McFarlane noted. “Now, we've looked at every phase of the surgical process—before, during and after—and we've made sure that everyone involved is working together in a standardized way to get patients the best outcomes through a more comprehensive, consistent approach. It's an exciting development, since ERAS breaks care out of the patient and doctor bubble, and includes nurses, anesthesiologists, pharmacists and many others. And together, we've clearly defined the specific goals of what we want to have happen at each phase of the process.”

The benefits of ERAS protocols are research-proven. Anesthesiologist Dr. Jonathan Klatt, Medical Director of Surgical Services and founder of the ERAS implementation team, helps shed light on the many benefits.



## ERAS protocols are broken into three phases:

### 1 Preoperative

The first phase includes educational elements like setting expectations, explaining the surgery to the patient, discussing pain management and nutrition for before and after surgery and getting medications and any other prep items needed.

### 2 Day of Surgery

The second phase deals with everything that happens the day of the surgery, from the anesthesiologist using blocks to minimize the need for narcotics during surgery, to the surgeon and nursing staff limiting the amount of fluids and interventions to improve and enhance recovery.

### 3 Postoperative

The third phase requires adhering to and following specific goals, like getting patients up and moving and off of IV fluids sooner, eating and drinking normally quicker, chewing gum to stimulate the gut and using less medication.

“When we utilize ERAS, patients use less pain medication during and after surgery and experience fewer complications. They also go home sooner after surgery—from a six- to seven-day average down to two or three days. Everything we do through ERAS streamlines processes, keeps things patient-centered and ultimately gets our patients back to ‘normal’ life quicker.”

Four months after Bill’s initial surgery it was time for the second surgery to reverse his need for the colostomy bag. This time, there were two substantial differences—the procedure wasn’t under emergency circumstances, and it would be one of the first done following HFM’s new ERAS protocols.

“Approaching the second surgery, things couldn’t have been more different,” Bill explained. “It truly was a night and day difference all around. The preoperative education I received from Dr. McFarlane, the nurses and the pharmacist was very comprehensive, and the prep was easy enough. Then, for the surgery itself and post-surgery, I didn’t even receive any narcotics. I was walking the halls almost immediately following the procedure—I never got sick, never got tired, felt better sooner

and was able to go home quicker. And I was never, ever in the dark. I knew what was going on every step of the way. I truly believe that helped speed my healing process.”

Certified Registered Nurse Anesthetist Megan Ingersoll, who was a major contributor to launching ERAS protocols at HFM, sums up the initiative’s importance in simple terms—“The whole point of ERAS is to make you better quicker and get you home and back to normal faster.” And Bill couldn’t agree more.

“While the circumstances of my surgeries were quite different, I have to believe that ERAS helped me recover quicker, stay healthy post-surgery and regain my energy so I could get back to my normal life,” Bill concluded. “Now just weeks after the second surgery, I’m active as ever and back enjoying the things I love—spending time with my wife, kids and grandkids, working around the house and driving bus for Roncalli High School, where I worked for 29 years as the head of maintenance. Just getting to live life as usual feels better than you can imagine.”

“As strange as it may sound, if I had a

choice to do it all over again, I would without a doubt,” Bill explained. “I can’t say enough about the doctors, nurses and the rest of the staff at HFM. They’re absolutely phenomenal and provided the best, genuine care I’ve ever experienced. They helped me make the best out of a bad situation and got me back to being the ‘full me’ quicker than I could have ever hoped for. For that, I’m eternally grateful.”

**At HFM, we’re dedicated to offering the latest and most advanced treatments and procedures to help you live your best life, while committed to always doing better. That includes introducing ERAS protocols to all of our colorectal surgical procedures. Moving forward, we are implementing ERAS protocols into our other service lines, including orthopaedics and OBGYN. Stay up to date at [hfmhealth.org](http://hfmhealth.org), or call (920) 320-2011 for more information.**

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## Upcoming Events

### First Friday for Veterans—First Friday Each Month, 8-10 a.m.

**Thank you for your service!** Please join Holy Family Memorial the first Friday of every month. Enjoy a cup of coffee on us and camaraderie with fellow veterans and Todd Brehmer, Manitowoc County Veterans Service Officer. Stop in the Espresso Connection at Holy Family Memorial Medical Center and let the barista know you are a veteran.



### HFM Lean on the Lakeshore Kickoff—Sunday, January 5, 10 a.m.-2 p.m.

HFM Lean on the Lakeshore is a 100-day weight loss challenge open to anyone who is interested in living a healthier lifestyle or losing weight. This is the Kickoff event, but the entire program runs until April. Learn more or register at [leanonthelakeshore.com](http://leanonthelakeshore.com)