

Women's Care Medical Group/Stanford Children's Health

Newsletter—Spring 2019

- 1. What can you do to have a better new year? Sleep** is so important to a healthy body, a strong immune system, and a functioning brain. Time spent during deep sleep is time when our bodies and brains repair damage from daily wear and tear and transfer short-term into long-term damage. There are multiple studies that document higher mortality/shorter life expectancy in those who sleep fewer hours. **Stress management:** you can never control what is happening in the world, in our country or even in your family—but you can control how you let it affect you. There will always be “stress” but figure out how to best deal with it: use tools such as mindfulness meditation, yoga, HeartMath, and music! Yes, **music** has been shown to help you make brain waves that are restorative and calming.
- 2. “HeartMath”:** research since 1993 has focused on the relationship of stress to emotional states, and the effect of stress on the autonomic nervous system, the hormonal and immune systems, heart and brain. Stanford University has suggested that physicians read up on these inner balance tools as one technique to improve mental clarity, creativity, emotional balance and personal effectiveness. Just think— the heart has its own brain! You can get the reading material, ear clip and monitor for cell phone app usage plus much more at: www.heartmath.com. During this holiday season and all the stress of year-end planning, each one of us could use a “period of coherence”. Please check it out!
- 3. Sugar-sweetened beverages:** Did you know that sports and energy drinks are overtaking soda as the main source of liquid sugar in kids' diets? Drinking beverages that contain added sweeteners is linked to adults and children becoming overweight or obese, which increases the risk of developing Type 2 diabetes, liver disease, dental decay and other health problems. Given a choice, reach for the water and herbal teas this holiday!
- 4. “Telehealth” visits:** Women's Care is now scheduling video visits in appropriate situations. You would access the visit through your smart phone with a camera and your physician would speak to you through a camera on

5. our computer in the office. This saves you travel and parking time—a serious cause of anxiety in our crowded and busy Bay Area lives. The telehealth visits would be scheduled with the doctor and charged to you just like a regular office visit. You will be contacted by our office just before the scheduled time to complete registration. Situations where this would be appropriate are: consultations about menopause, anxiety and depression, weight and sleep issues, trying to conceive, and adjustment of medications. A video visit is not appropriate if you need a breast or pelvic exam, or if this is a postoperative visit. Phone calls lasting less than 5 minutes to review lab results will still be done as normal without cost to you without the need to schedule a telehealth visit.
6. **“Do I need an annual exam?”** There has been a great deal of debate about the answer to this question. Our answer is **YES: It is a once-a-year opportunity to “touch base”** with a physician and make sure screening and treatments are appropriate for both your illnesses and your continued great health. We make every effort to avoid potentially unnecessary tests and allow time for you to voice concerns about what is really bothering you (weight, memory, sleep, sex—or no sex!). All kidding aside, most plans offer this as a once-annual “free of deductibles or co-pays” opportunity so why waste it? Some still call it an “annual Pap” but it is SO MUCH MORE! And not everyone has to go through a pelvic exam depending on age and circumstances. Don’t let the thought of a “Pap” scare you away! **Medicare women’s annual visit:** The rules for annual exams for patients with Medicare are slightly different. Under Medicare, you are entitled to a G0101 visit every TWO years, this consists of a breast and pelvic exam, and Pap if needed to rule out cancer. This visit is completely paid by Medicare at no cost to you. However, it is not a follow-up for known gyn problems or concerns, it is a “well woman” disease check. Other visits under Medicare require that the doctor state the complaint or problem you presented and a diagnosis at the end of the visit. This is given an E/M code and is subject to co-pays and deductibles. E/M visits are unlimited under Medicare as long as all the codes are listed to justify the time spent with the doctor and the tests that are ordered or treatments that are prescribed. Sounds confusing and you do not know what is best for you? Ask your doctor: that is always

7. easiest through email in MyChart. At the beginning of any visit listed on our schedule as “annual visit” the doctor will let you know if it counts as a G0101 (free visit) or E/M visit (you will pay some portion).
8. **Primary care doctors:** Our younger patients also have a pediatrician who follows their care. Our patients over the age of 65 who have Medicare are required to have a primary care doctor who is either an internist or a family practitioner. Under Medicare rules, gynecologists are NOT primary care but are considered specialist doctors. We always send a note to YOUR primary doctor after a visit so he/she is aware of your care and condition from our perspective. Healthy patients between the ages of 18 and 65 will usually be able to use our services for all their care and we will recommend referrals to specialists for issues beyond our scope. Just ask—you can always email us through MyChart if you need answers.
9. **Pap smears:** HPV DNA testing makes it easier to accurately diagnose and predict risk of severe dysplasia and cervical cancer. Different recommendations exist based on age, risk factors and past history. Women aged 21-30 should get a pap every 3 years, co-testing every 3-5 years for women over 30. But STD screening or follow-up of abnormal paps may be more frequent. To complicate matters, some of your health plans are now telling us how often we can perform the test. Keep in mind that the “annual well women visit” for those under age 65 is still allowed under all plans, even Medi-Cal. Don't let this valuable benefit lapse: there is usually no deductible or co-pay linked to the well-woman visit but problem visits always go against your (progressively increasing) deductible.
10. **HPV and cancer:** The Centers for Disease Control and Prevention (CDC) report that cancers linked to HPV have increased significantly over the past 15 years with throat cancer now the most common HPV-related cancer: there were 43,000 new cases in 2015 alone. HPV vaccination rates around the world are also rising. Nearly half of people aged 13-17 have received all the recommended doses, and two thirds have received the first dose. Already there is a noticeable decrease in new cervical cancer cases in people who have been vaccinated. The HPV vaccine is approved up to age 45, Gardasil 9 protects against nine strains. Available at WCMG.



In partnership with



11. Shingrix: the new shingles vaccine is much more effective than earlier vaccines. It is now available in pharmacies and covered by most health plans for those over 55. Ask at your next visit: we can send a prescription to your pharmacy.

Happy Spring! And thanks for all the rain!!! from Drs. Andy Liu, Dolly Shoup, Beverly Joyce, Tanya Spirtos, Virginia Chan and Anjie Li with nurse practitioners Lindsay Pettit and Marjan Hafezi, and office manager Karen Palladino.