MY LIFE

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Hints from Heloise and Annie's Mailbox **4C**

SECTION C

TUESDAY, AUGUST 20, 2013



DR. JEFFERSON UNDERWOOD III

Seek help for tinnitus

with the recent birth of the new Prince of England, churches from around the Kingdom celebrated by ringing their bells. Although the bells rang for only a minute, ringing in the ears for many individuals never stops. This constant ringing of the ear is called tinnitus.

Tinnitus is estimated to affect over 50 million individuals in the U.S. It is defined as a sensation of noise which, for the most part, can only be heard by the individual who is affected. Although ringing is the most common sensation heard, buzzing, chirping, whistling are some other sounds which can be constant and annoying.

In certain environments,

In certain environments, one may even hear his own heartheat. This usually occurs when the background noise is extremely low. This is known as pulsatile tinnitus. Usually, but not always, this is due to benign conditions.

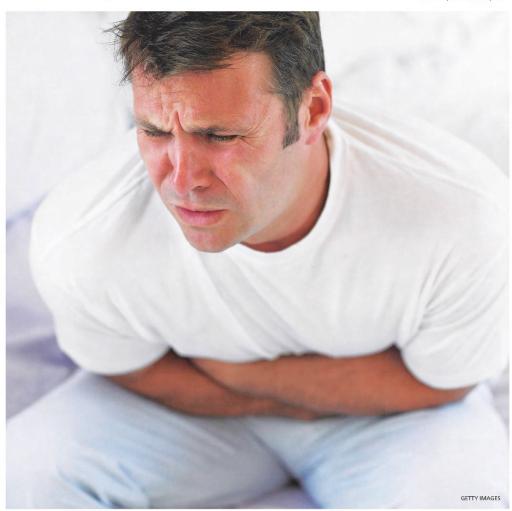
Tinnitus is frequently

Tinnitus is frequently associated with decreased hearing, and just like other hearing problems, increases with aging. Loud noise exposure is also a very common cause of tinnitus. In this day and age where almost everyone has a set of either earplugs, headphones or a cell phone in their ear, tinnitus seems to be increasing in frequency.

Other causes of tinnitus include blockages due to earwax in the canal, also referred to as a cerumen impaction. Also stiffening of the bones in the middle ear, which is integral in hearing, may lead to tinnitus. This hardening of the bones in the ear is referred as otosclerosis.

clerosis. Ménière's disease, which is a condition caused by an abnormal inner ear fluid pressure, may be associated with tinnitus. Sometimes the lower jawbone can exert an abnormal pressure on the structures of the inner ear which can lead to tinnitus. One such condition is TMJ disease.

Tumors have been known to compress blood vessels in the head leading to tinnitus. These tumors can be both malignant as well as benign.



Ounces of prevention

Hydration key to warding off kidney stones

By Nick Thomas Special to the Advertiser

f you've never experienced the agony of a kidney stone, give thanks for your good fortune. At its worst, the intense pain radiates from the lower back to the groin to become utterly debilitating, relieved only by passing the stone or, in the interim, powerful narcotics.

"My face would go white and the waves of pain would leave me exhausted," said Chris Bell of Millbrook, mas experienced kidney stones throughout his life. "Since the age of 7 I have probably averaged passing one kidney stone every four years."

The so-called "stone" is

The so-called "stone" is really a tiny crystalline mineral deposit that generally forms in the kidney over many months. As a stone grows, it can actually move around in the kidney "searching" for an exit. Problems begin when it suddenly decides to make its excruciating passage down the ureter, the ten-inch tube that carries urine to the bladder.

While some people are just more genetically prone to kidney stones, for others diet has long been considered the culprit, the result of eating too many foods high in oxalate — spinach, tea, chocolate, nuts — and/or not drinking enough water to lower the concentrations of soluble oxalate and calcium ions. The two can combine in the kidney to form insoluble calcium and the concentrations of the concentrations of soluble oxalate and calcium ions.

um oxalate stones.

Small kidney stones (around 4 mm or less) may pass unnoticed, but complications arise when larger stones head south.

They can block the ureter, which is only about 3.4 mm wide.

is only about 3-4 mm wide.
"While there are other types of kidney stones, the most common — about 80 percent — is

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"Staying hydrated is the best way to prevent kidney stones forming, because the hot climate here can lead to dehydration. Southerners also drink a lot of iced tea, which contains oxalate."

MARGARET VEREB MONTGOMERY UROLOGIST

MULTIPLE MYELOMA

The Central Alabama Multiple Myeloma Support
Group meets from 10 a.m. to noon the second Saturday of every month at Frazer Memorial United Methodist Church. Interested patients, family members and friends are encouraged to come. For more information, contact David and Lori Martin at 462-4183 or by email at dmartin1@ch2m.com.

ALZHEIMER'S/ DEMENTIA

An Alzheimer's and dementia caregivers' support group at Frazer Memorial United Methodist Church meets at 10:30 a.m. on the first Thursday of each month in Room 3103. For information, call the church at 272-8622.

A dementia day care is held from 9:30 a.m. to noon each Thursday in Room 3101 at Frazer Memorial United Methodist Church. Each participant may bring a sack lunch. There is no charge. Registration is required. Call the Congregational Care office at 272-8622

VETERANS

Veterans OEF/OIF Caregivers Support Group. This group provides support and understanding for those caring for veterans of Operation Enduring Freedom and Operation Iraqi Freedom. Meeting will be from 11 a.m. to 1 p.m. on the third Wednesday of each month at Frazer Memorial United Methodist Church, 6000 Atlanta Highway, Room 3108. For more information, call LaQuana Edwards, caregiver support coordinator at CAVHCS, at 727-0550, extension 5350.

ALS/PLS

Amyotrophic lateral sclerosis (ALS) and primary lateral sclerosis (PLS). Group has started meeting at 2:30 p.m. on the fourth Monday of the month at Legacy Anglican Church, 2323 Bell Road. Group is for patients and their families. For more information, call Lynn Sanderson, BSW, ALS Association, Alabama chapter, at 205-937-4415.

Email additions or deletions to this list to Allison Griffin at algriffin@gannett.com or fax to 261-1548.

Stones

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calcium oxalate," said Montgomery urologist Margaret Vereb. As for the severe pain,

she says there are two causes. "Stones can block the flow of urine which then backs up, causing the kidney to dilate. While kidneys don't have pain receptors - you can poke them with needles and feel nothing — they do have sensitive stretch receptors which causes the incredible pain. The other factor is when the ureter tries to push the stone through. If you're a stone for-

mer like Bell, then the South is probably the worst place to live. "We call it the 'stone belt,' "Vereb said. "Staying hydrated is the best way to prevent kidney stones forming, because the hot climate here can lead to dehydration. Southerners

also drink a lot of iced

tea, which contains oxalate."

However, folks in the North are not immune. Though she now lives in Montgomery, Marty Dougherty experienced her first kidney stone 18 years ago in Chicago.

"I didn't know what was happening," recalled Dougherty, who was just sitting, reading, at the time the pain struck. She says it was "worse than having a baby, but you don't get a baby! Nothing helped relieve it — sitting, walking, or lying down."

Over-the-counter analgesics have no effect, either, and even strong narcotics such as morphine may just reduce pain to tolerable levels.

To prevent future stones, Dougherty was advised to drink ten glasses of water a day and reduce her intake of sodium (salt) because sodium increases calcium levels in the urine and the likelihood of stone formation.

Although current kidney research is helping to better understand the stone formation mechanism, "very little has developed in the area of stone treatment," said Amy Krambeck, a Mayo Clinic urologic surgeon and researcher in Rochester, Minn. "There have been no new medications approved by the FDA for the prevention of stone disease."

In the past, patients were advised to avoid calcium rich foods such as dairy products. But the role played by calcium has now been reevaluated by researchers.

"In recent years we have moved away from the recommendation of a low calcium diet and recommend that patients maintain a normal calcium intake," said Krambeck. "Findings from the time of a low calcium diet actually demonstrate an increased risk of stone disease."

That advice is strong-

ly echoed on the National Kidney Foundation web site, which also indicates that curtailing oxalate intake may not be as important as once thought.

Vereb now recommends patients drink a little milk with meals, especially if foods high in oxalate are consumed. "The calcium in milk will bind with the oxalate in the food and be passed in the stool, rather than absorbed in the kidney," she said.

The bottom line, said Vereb, is to remain hydrated. "The quantity of water ingested isn't as important as the color of your urine. If it's pale, you're probably okay. If it's dark, drink more."

Four-time kidney stone survivor and Auburn Montgomery professor **Nick Thomas** has written for more than 300 magazines and newspapers. Contact him at his blog: getnickt.blogspot.com