

## HEALTH EVENTS

### Free educational seminars on weight loss surgery

Sibley Memorial Hospital will host free educational seminars on weight loss surgery at 6:30 p.m. today at the Sibley Memorial Hospital, 5255 Loughboro Road NW, Washington. Seminars will be held in conference room 1, and parking is validated. Call 202-370-6565 or visit [weightloss.sibley.org](http://weightloss.sibley.org).

### Arthritis Walk

Rain or shine, the Arthritis Walk check-in begins at 9 a.m. and walk starts at 10 a.m. May 30 at the Sylvan Theater, 15th Street and Independence Avenue SW, Washington. Choose from 3-mile or 1-mile walk route. There is no registration fee; however, participants are urged to raise money. Prizes available for anyone who raises \$250 or more. Visit [letsmove.togetherdc.kintera.org](http://letsmove.togetherdc.kintera.org) for more information.

### Free kidney screenings

The Holy Name Catholic Church is sponsoring an informational health event from 10 a.m. to 2 p.m. June 6 and June 13 at 920 11th St. NE, Washington. There will be free kidney screenings, and information on diabetes, cancer, Alzheimer's and more. Free to the public. Call 202-397-2525, visit [kidneyfund.org/get-tested](http://kidneyfund.org/get-tested) or e-mail [tstewart@kidneyfund.org](mailto:tstewart@kidneyfund.org).

### Tee off for Hospice of Chesapeake

Area golfers can play for the nonprofit 8:30 a.m. June 8 at the Chartwell Golf & Country Club, 1 Chartwell Drive, Severna Park. Registration for golfers is \$225 — \$850 for foursomes — and includes greens fees, cart, continental breakfast, lunch, awards banquet and an Under Armour golf shirt. For registration, contact Chris Wilson, Community & Corporate Relations, at 443-837-1530 or [cwilson@hospicechesapeake.org](mailto:cwilson@hospicechesapeake.org).

### Walk to cure Crohn's and colitis

The Crohn's and Colitis Foundation of America Greater Washington D.C./Virginia Chapter is hosting its annual Take Steps Walk from 4:30 to 7:30 p.m. June 20 at the Washington, D.C., Tidal Basin at the Sylvan Theater. For more information, e-mail Marcy Fritter at [mfritter@ccfa.org](mailto:mfritter@ccfa.org), call 703-865-6130 or visit [ccfa.org](http://ccfa.org).

## TEMPTING THE PALATE

# Hearty food needed to keep cancer patients' pounds up

By Lauran Neergaard

The statistic is shocking: Severe malnutrition and weight loss play a role in at least one in five U.S. cancer deaths. Yet nutrition too often is an afterthought until someone's already in trouble.

A move is on to change that, from hospitals that hire gourmet chefs to the American Cancer Society's dietitians-on-call phone service.

With cancer, you've got to "bring a lot more nutrients to each spoonful of food," Certified Master Chef Jack Shoop is learning. A former restaurateur, he is newly in charge of the kitchen at the Cancer Treatment Centers of America in Philadelphia.

Don't underestimate the added temptation should the result resemble pictures in a glossy food magazine: "The visual heartiness, and the actual hardness, of these foods has to be understood for them to embrace it," Shoop insists.

Tempting the palate is a huge hurdle: At diagnosis, up to a quarter of patients already have their appetite sapped, and most treatments can bring side effects that worsen the problem. Aside from the well-known nausea, vomiting and diarrhea, some cancers inhibit absorption of the nutrients patients force down. Not to mention strangely altered taste, mouth sores, dry mouth, difficulty swallowing and constipation.

About half of all cancer patients eventually suffer serious weight loss and malnutrition, a wasting syndrome called cachexia where they don't just lose excess fat but vital muscle. A healthy person's body adjusts when it doesn't get enough calories, slowing metabolism to conserve nutrients. A cancer patient's body doesn't make that adjustment; metabolism even may speed up.

The National Cancer Institute estimates cachexia is the immediate cause of death for at least 20 percent of cancer patients, although

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advanced cancer might have eventually claimed many of them.

How much weight loss is too much? The institute defines patients as at-risk when they've lost more than 10 percent of their usual weight. Other research suggests that patients who lose more than 5 percent of their pre-cancer weight have a worse prognosis than people who can hang onto the pounds.

The American Cancer Society urges patients to ask to be assessed by a registered dietitian up front, right at diagnosis. While that's com-

mon at designated cancer centers where dietitians work on-staff, it is not routine elsewhere and surveys suggest just a third of patients have access to cancer nutritionists where they're being treated.

"Patients who are well-nourished as they're going through treatment have shorter hospital stays, are better able to tolerate treatment," not to mention have better quality of life, says Colleen Doyle, nutrition chief at the society, which offers nutrition advice through its hot line at 1-800-ACS-2345. —AP

## ADVERTISEMENT

### ASK THE DOCTOR

**Dr. Virginia E. Lee, DMD**  
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## DENTAL IMPLANT

Whether you were in an accident or had extractions, the loss of a tooth can be an uncomfortable experience. When you lose any of your teeth, whether it's a new situation or something you have lived with for years, chances are you have never become fully accustomed to losing such a vital piece of yourself.

My job as an Oral & Maxillofacial Surgeon is to provide my patients with a solution to the problem at hand. This is why I recommend dental implants. Dental implants are designed to provide a foundation for replacement teeth that look, feel and function like natural teeth. Implants allow my patients to regain the ability to eat virtually anything, preserve facial structure and smile with confidence again.

So what exactly is a dental implant? The implants themselves are titanium posts that are surgically placed into the jawbone where teeth are missing. These metal anchors act as tooth root substitutes. The bone joins with the titanium, creating a strong foundation for artificial teeth. Small posts that protrude through the gums are then attached to the implant. These posts provide stable anchors for artificial replacement teeth, also known as crowns.

For most patients, the placement of dental implant involves two surgical procedures. First, the implants are placed within your jawbone. For the first three to six months following surgery, the implants are beneath the surface of the gums gradually joining with the jawbone. During this time most patients can wear a temporary denture.

After the implant is bonded to the jawbone, the second phase can begin. I will uncover the implants and attach small posts that protrude through the gums and will act as anchors for the crowns. When the crowns are placed, these posts will not be seen. The entire procedure usually takes six to eight months. Most patients experience minimal disruption in their daily lives.

Implants are a team effort between an Oral & Maxillofacial Surgeon and your dentist. While I would perform the actual implant surgery, initial tooth extractions, and bone grafting if necessary, the restorative dentist fits and makes the permanent product.

If you would like more information on dental implants and how they could be a perfect fit in your life, please contact my office at (202)296-6600. If you have a question that you would like answered in an article to come please e-mail me at [prexec.cof@gmail.com](mailto:prexec.cof@gmail.com).

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