



SMMC CERTIFIES DAYCARE CENTERS

SOME 20 EMPLOYEES FROM THE ST. MAARTEN MEDICAL CENTER GAVE A COMPREHENSIVE EDUCATIONAL COURSE “CARING FOR THE CHILD IN DAY CARE CENTERS” TO 125 EARLY CHILDCARE PROFESSIONALS FROM 35 DAYCARES ON THE ISLAND.



Photo at top: Some of the instructors
Photo below: CPR training in session

The 20 hours course and examination was conducted over a period of four weeks, every Saturday in May. The first day, Saturday May 7th, was the most intense; the instructors covered a series of subjects on health and safety situations experienced on a daily basis. Due to the large number of attendees, the attendees were divided in four groups for trainings on the second and third day. [more on page 8](#)

Has someone ever coughed near you and you were afraid that you would get a respiratory tract infection?

Did you know that respiratory viruses are frequently transmitted by hand to hand contact and less so by coughing?



ACUTE RESPIRATORY TRACT INFECTIONS

ST. MAARTEN MEDICAL CENTER (SMMC) INTERNIST DR. MAARTEN VISSCHERS TALKS ABOUT RESPIRATORY TRACT INFECTIONS

What is the respiratory tract?

The respiratory tract is the part of the body that is responsible for the uptake of oxygen and expulsion of carbon dioxide. It extends from the nose and the throat, which are the upper airways, until the small airways and lung tissue; which form the lower respiratory tract. Usually, the upper airways, which are closest to the outside world, are always colonized with bacteria. The body tries to keep the lower airways clean of any bacteria and viruses, as this is where the oxygen and carbon dioxide exchange with the blood.

What are respiratory tract infections (RTI) and what causes them?

An infection is a situation where tissue is damaged in the presence of bacteria or viruses. This can be caused by overgrowth of bacteria which normally reside in small amounts in the airways like the pneumococcus bacteria. Most people carry these bacteria with them in the airways, and only in a certain condition this bacteria can multiply rapidly and lead to damaging of the airways and a respiratory tract infection. [more on page 3](#)



Mr. Kees Klarenbeek, General Director

DIRECTOR'S DESK

Dear reader,

We are mid-year! This is only our second issue of Care Connect but I feel that we are already friends.

It has been an exciting year for us at SMMC thus far. Every day we connect with individuals in a personal way to improve health. I like to say that the St. Maarten Medical Center is an institution that has perhaps done more to improve lives than any other institution in this country. Our commitment to serving, caring and healing has not changed over the 25 years of our history.

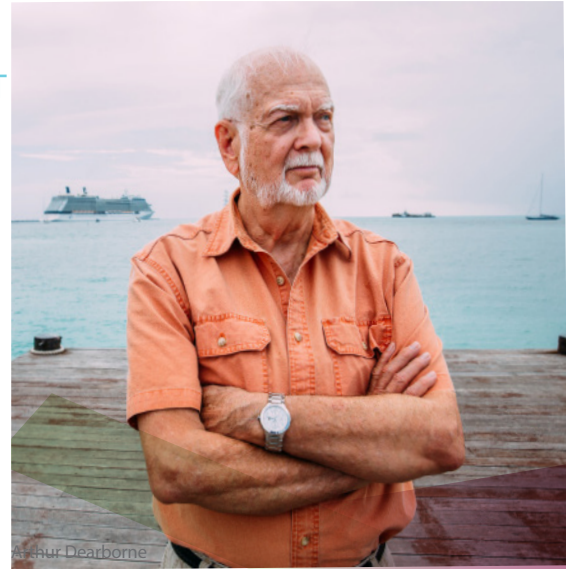
This year we have been widening our reach in various ways including this newsletter to connect to individuals even before they walk through our doors. You see, we have recognized that our role as a health care provider goes beyond the clinic or bedside care but influencing our community to take an active role in their own health and change behavior.

We hope that you are onboard with us. If you are, then I am encouraging you to connect with someone else. Share this newsletter with someone who can also encourage you to live a healthy life. There is strength in unity. Don't forget: We care together!

EXCELLENT CARE WHEN WE NEEDED IT MOST

Mr. Dearborn's visit to the Caribbean was unexpected. A week after he told his two sisters to enjoy their Caribbean cruise; he did not expect to meet them at the St. Maarten Medical Center. While enjoying her vacation, one of his sisters suffered a hip injury and was taken to the SMMC. There she underwent surgery and was admitted for a few days.

Mr. Dearborn and his wife flew in as a 'rescue team' to provide their sisters with support and ensure that they were receiving the best of care. "It is unfortunate that it [her injury] had to happen, but fortunate that it happened here," says Mr. Dearborn. He continues, "The staff are kind and caring to my sister and that is good enough



for me. Despite being in a hospital, my sister is happy with the care that she is receiving. She is always commenting on the cleanliness and we see that too!"

"We are satisfied with the health care that is also cost effective. I am glad that the facility to provide her with the best of medical care was here when she needed it."

JULY 28TH



WORLD HEPATITIS DAY



Visit www.worldhepatitisday.org to learn more

2016

RESPIRATORY TRACT INFECTIONS continued from page 1

Certain viruses like the influenza virus is able to produce infection; mostly because the immune system overreacts to the presence of a strange “guest” in the airways, in this case it’s not the virus that causes the tissue damage but rather the overreacting immune system.

Who is at risk for respiratory tract infections?

Anyone who has a condition that damages the inner lining of the respiratory system is at increased risk for these infections. For example:

- The bedridden and the elderly have the risk to develop pneumonia because they don’t inhale and exhale properly.
- All patients who have a weakened immune system because of cancer or the treatment of cancer (chemotherapy), or other conditions like HIV/AIDS. Also, sickle cell patients have a defect in their immune system which makes them vulnerable for certain lung infections. And uncontrolled diabetes leads to a general slow-down of the immune system and puts people at risk especially of some bacterial infections
- Persons with difficulty swallowing; normally the throat prevents the gastric juices from entering the lung system. If this mechanism is not functioning well the gastric contents can damage the inner linings of the respiratory system, with subsequent pneumonia.
- Smokers; smoking damages the lining of the lungs.
- People with asthma and chronic bronchitis; the inner linings of their lungs are also compromised.

What are the signs and symptoms and how is it treated?

As doctors we try to make a distinction between upper and lower respiratory tract infections. The upper respiratory tract infec-

tions are mostly caused by viruses, and antibiotics don’t work against viruses; only against bacteria. For a viral infection we can only advice people to take adequate rest and take preventative measures not to infect other people.

When we suspect a lower respiratory tract infection we more easily prescribe antibiotics, as about half of all pneumonias are caused by a bacterial infection; and in that case antibiotics will help. In general, it is good to have adequate rest when suffering from an RTI; but try to make your lungs active because laying in bed can make the situation only worse. Even if you feel sick while having pneumonia, try to sit up for a few hours a day to make your lungs “exercise”.

Are there long term consequences for RTI?

Usually, individuals recover completely from a RTI. The whole recovery can take 1-2 weeks for upper RTI and up to six weeks in certain lower RTI.

What are some misconceptions to RTI?

Some persons think that they always need antibiotics to treat respiratory tract infections. As already explained, in many cases this is not necessary as upper RTI are usually caused by a virus and even a lot of lower RTI as well. Overuse of antibiotics lead to antibiotic resistance, and this can be very dangerous as later another infection cannot be treated with standard antibiotics.

What steps are being made locally to lower the risk of pneumonia? Everyone on this island has a responsibility to protect risk groups from pneumonia, as this infection can be life-threatening. In collaboration with SMMC, the SZV decided that certain risk groups like sickle cell patients can get coverage for vaccinations that can protect them against pneumonia. We are happy we can offer this protection to this risk group.



Rafael Antoine

DEDICATION TO A CAREER OF NURSING FOR 25 YEARS

Nurse Rafael Antoine has been an employee of St. Maarten Medical Center from day one, March 17, 1991.

“I started my nursing career in St. Maarten at St. Rose Hospital. At that time, I was the only male employed as a registered nurse in St. Maarten,” says Antoine. “Shortly after, I went to specialize in several areas; in pediatric nursing, neonatal nursing and diabetic nursing, then I returned for employment at the opening of the new hospital, SMMC. Since then I’ve dedicated my career to nursing care in St. Maarten.”

Antoine’s nursing career expands beyond the hospital’s walls. For many years, he was the commandant of St. Maarten Red Cross Association. Even now, Antoine juggles his busy hours in the Emergency Room (ER) with work in the Ambulance Department, Air Ambulance and his family. [more on page 4](#)

DEDICATION TO A CAREER OF NURSING FOR 25 YEARS continued from page 3

Antoine is married to his wife of 25 years, Winia Antoine-Lourens, and has two adult sons. "I am never too tired to work. I love being a nurse, it is a calling," he says.

"I like working in the ER and with the Ambulance because of the adrenaline and the constant need to be alert and respond quickly to our patients when their health is at risk. We do our best to see that the patient is on the path to recovery and I am happy when I see that person in good health, days, weeks and years later." I do not need a 'thank you' for the work that I do, but when I am greeted with a hug and kind words from a past patient or family member, it gives me an affirmation of the good work that me and my colleagues do. But when I work, it is not in expectation of anything, I do it with love.

"That's why I was so surprised when I was nominated for the Nurse Orris Jack-Bell award. Some months before, I received an award in

recognition of my community service – so it was really a surprise to be recognized again! I appreciate the award and the affirmation I received from my colleagues."

For many nurses, it is not easy to pick out one memorable experience in their career. But after some thought Antoine could recount two encounters that impacted him more greatly, of teenagers requiring medical evacuation.

"When you are nurse, especially in critical care, you have to be prepared for anything - even in flight. We were prepared; we used our skills and worked hard and got positive outcomes. That is the best reward for hard work!"

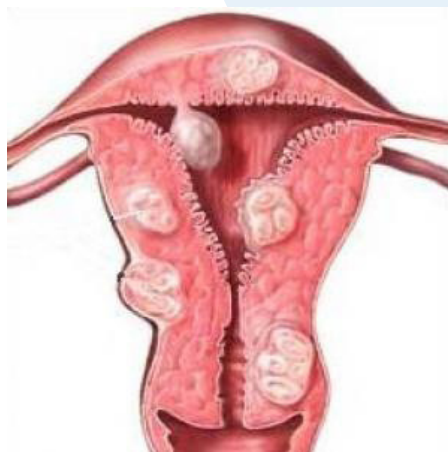
Antoine's love for nursing is equal to his love for physical exercise and training. He has been a physical trainer for many years. "It keeps me young! I know I don't look my age and I don't think I'm retiring from nursing anytime soon," he says.

AN INSIGHT ON UTERINE FIBROIDS

FIBROIDS ARE A VERY COMMON GYNECOLOGIC PROBLEM. MOST WOMEN WILL HAVE FIBROIDS AT SOME POINT IN THEIR LIFETIME BEGINNING IN THE 20S. FIBROIDS START TO SHRINK AFTER MENOPAUSE BECAUSE OF THE DECREASE IN ESTROGEN LEVELS. RESEARCH HAS SHOWN THAT IT IS MORE COMMON IN AFRICAN WOMEN-THE DARKER THE SKIN TONE THE HIGHER THE RISK, WHY THIS IS SO, IS STILL UNCLEAR. DR. DORETTE COURTAR SPEAKS ON THE TOPIC.

What are uterine fibroids?

Fibroids are growths of the uterus, or womb. They are also called uterine leiomyomas or myomas. The uterus is made of muscle, and fibroids grow from the muscle. Fibroids can bulge from the inside or outside of the uterus. They are not cancerous and are not thought to be able to become cancerous.



What causes Fibroids?

Fibroids seem to respond to the female hormones estrogen and progesterone; some women have specific genes that may predispose them, and lifestyle and reproductive factors also influence fibroids. Some fibroids grow with time and others shrink.

What are the symptoms of Fibroids?

Not all fibroids are problematic. Fibroids can range in size from the size of the pea to the size of a watermelon, but the location of the fibroid is the more problematic factor than size. An apple size fibroid on the outside of the womb may give no problems while another person with a pea sized fibroid may have more symptoms.

Most complains are increased menstrual bleeding and pelvic pressure and pain. Larger fibroids can cause a sense of pelvic pressure or fullness in the abdomen. If a fibroid is pressing on the bladder, the woman may feel like she needs to urinate frequently. Similarly, a fibroid pressing on the rectum can cause constipation.

Fibroid symptoms tend to get better when a woman no longer has menstrual periods,

at menopause.

Does fibroids affect fertility or pregnancy?

Most women with fibroids are able to become pregnant without a problem. However, certain fibroids that change the inside of the uterus can cause trouble becoming pregnant or miscarriage. Removing these fibroids can optimize fertility. Women with fibroids and reproductive problems should go through a basic infertility evaluation before concluding the fibroids are responsible for the problem. Most women with fibroids have a completely normal pregnancy without complications.

However, women with a large fibroid (greater than 5 to 6 cm) or more fibroids might have an increased risk of specific pregnancy complications, for example premature delivery.

How does the doctor know if a woman has fibroids?

A doctor may suspect fibroids if the womb is enlarged or has an irregular shape. A pelvic ultrasound is needed to confirm that fibroids are present. [more on page 6](#)

BREAST FEEDING AWARENESS MONTH AUGUST 2016

Breastfeeding is a healthy way of providing young infants with the nutrients they need for healthy growth and development. Most mothers can breastfeed, provided they have accurate information, and the support of their family, the health care system and society at large.

Nurses of the St. Maarten Medical Center’s breast feeding committee are celebrating ‘World Breast Feeding Awareness Month’ this August 2016. This committee is committed to providing mothers with the key information necessary to make breastfeeding a much more rewarding experience. The theme of this year’s Breast feeding Awareness month is “Breast Feeding; the key to sustainable development”. Committee members aim to educate new and expectant mothers on the joys, challenges and emotions during their journey.

The month will start with a Breastfeeding Support Group where all parents, medical professionals and persons very much interested in breastfeeding can attend. Demonstrations will be carried out by several OB/GYN nurses of SMMC. Vital information necessary to nursing mothers such as storing of their breast milk, proper latching of the infant and much more will be presented to participants. Nursing mothers or new mothers will have plenty of opportunity to ask questions and share their knowledge pertaining to breast-feeding. Other activities will continue throughout the entire month of August.

Activities will end with the annual Breast Feeding Expo that will take place at the SMMC. The expo is open to the public and will include professionals from the islands of Anguilla, Saba, and Statia as well as the Louis Constant Fleming General Hospital on French St. Martin. An array of vital information booths will be on display with nurses, doctors, and other related professionals will be present to share information and help mothers with their journey.

Calendar of Activities for the St. Maarten Breast Feeding Awareness Month August 2016

DATE	TIME	ACTIVITIES
1st August	6:00pm	BREASTFEEDING SUPPORT GROUP AT SMMC PATIO
5th August	4:30pm	BINGO ON THE OBGYN WARD
9th August	10:00 am	RAFFLE AT DR CALLO CLINIC
11th August	10:00am	RAFFLE AT DR FRIDAY OFFICE
13th August	1:00pm	BREASTFEEDING MOTORCADE STARTING AT RAOUL ILLIDGE
15th August	6:00pm	BREASTFEEDING LECTURE FOR THE STAFF
19th August	10:00am	RAFFLE ON THE OBGYN WARD
27th August	2:00-7:00pm	BREASTFEEDING EXPO AT SMMC PATIO

Do you know the 5 Gynecologic Cancers?



LEARN the symptoms

LISTEN to your body

ACT by seeking care from an oncologist if you suspect or have been diagnosed with a GYN cancer.

For more information visit:
www.foundationforwomenscancer.org

SEPTEMBER IS GYNECOLOGICAL CANCERS AWARENESS MONTH

FOOD FOR THOUGHT



Coconut Rice & Peas

Recipe for 6-8

Ingredients:

- 1 Tbsp. olive oil
- 1/2 yellow onion, chopped
- 4 garlic cloves, chopped
- 2 cups long-whole grain rice
- 1 teaspoon salt
- 1 cup water
- 1 cup low sodium chicken stock (or vegetable stock for vegetarian option)
- 2 cups unsweetened coconut milk
- 1 15-ounce can kidney beans, rinsed and drained
- 2 teaspoons dried thyme

Directions:

Heat the oil in a medium pot over medium-high heat. Add the onions and sauté for 4-5 minutes, until they begin to brown on the edges.

Add the rice, stir well and cook for another 2-3 minutes, stirring often.

Add the salt, water, stock and coconut milk and stir well. Add the kidney beans and sprinkle the thyme over everything.

The rice should be done in about 15-20 minutes, depending on the type of rice you are using (some long grained rice takes longer to cook). Check after 15 minutes. Once done, remove from heat and cover for 10 minutes. To serve, fluff with a fork.

Note: Remember to keep 1/2 of your Plate Vegetables, 1/4 Starches, and 1/4 Protein



Carmelita Lichtenburg (in center, standing) flanked by students

GOING THE FULL MILE

25 YEARS AND COUNTING

Nurse Carmelita Lichtenburg describes herself as 'someone who goes the full mile'. "I guess that's why I am still working at SMMC today," she says smiling.

When Carmelita moved with her family to St. Maarten from Suriname, she started at the St. Rose Hospital. "I was glad to be part of the transition to St. Maarten Medical Center and I decided that this is where I wanted to be.

"All over the world, administering an intramuscular injection is the same but

what changes is your attitude and how you deliver care. I work a lot with nursing students and take joy in doing that. I always tell them that there are many opportunities to do so many things in life but they only have one life to live and make a difference in people's life. I have chosen to do so with my nursing career, I started very early at the age of 17.

"As a nurse for over 40 years, I have numerous unforgettable patient encounters. [more on page 8](#)

AN INSIGHT ON UTERINE FIBROIDS [continued from page 4](#)

How are fibroids treated?

Fibroids can be treated with medication or surgery. Most medical treatments are used to reduce heavy menstrual bleeding. A few also shrink the fibroid and some are focused on reducing pain or correcting anemia. Medical treatments are often recommended before surgical treatments. Some medical treatments offered at SMMC are:

- Iron and vitamins
- Hormonal birth control
- Implant
- Antifibrinolytic medicines
- Nonsteroidal antiinflammatory drugs (NSAIDs)
- Hormonal intrauterine device
- Shot
- Gonadotropin-releasing hormone agonists

Surgical or interventional treatment is recommended to preserve fertility if the fibroid is located inside the womb. It may also be recommend if a woman has fibroid-related heavy menstrual bleeding, pain, or pressure that does not get better with medical treatments.

Can Fibroids be prevented?

The cause of fibroids is unknown so there is no sure way to prevent them. What is known is that fibroids are negatively influenced by female hormones. Depending on your nutrition you can surge your hormones more than necessary. In my clinic, I confront the patient with her own responsibility. Living a healthy and balanced life contributes to a good overall health and influences the growth of fibroids. Regular exercise and reducing BMI, reduces the amount of circulating estrogens.

If you strive to achieve optimal health then you will ultimately reduce the positive environment needed for fibroids to grow.

IT WAS LIKE I NEVER LEFT!



Altagracia Williams

I was one of those first persons who started on the very onset of the St. Maarten Medical Center, March 17, 1991. I had previously worked at the St. Rose Hospital for 8 years as an administrative assistant.

Everything in the new hospital was very modern and we had to get adjusted to the new set-up and equipment. Another colleague and I were responsible for setting up the admissions discharge and medical archives department. This was a challenge but such a memorable experience to be able to get everything operative.

However, after 9 years working at SMMC I had to leave my job to support my family's business. It was a bittersweet moment for me and my colleagues as no one wanted to see me go. I was very sad when I had to leave, I loved it here at the hospital.

Who would have thought that after 15 years, I would find my way back here. And the amount of support that I got from my colleagues blew me away. It was as if I never left.

I love working at SMMC, I enjoy working with my colleagues and most importantly lending a helping hand to our patients. It is a great experience having been here from the beginning, and now seeing the growth of the hospital as it is today.

A STORY OF FAITH AND MEDICAL EXPERTISE

Shirley Carty made a 360 degrees turn and miraculously recovered from an almost three-week critical state in the Intensive Care Unit at St. Maarten Medical Center joining the long list of success stories coming out of the hospital and becoming a living miracle.

Her miraculous recovery from what many thought would have been her demise, earned her the title of "Miracle Woman," and "Cat with Nine Lives," aptly crowned by the health care professionals who toiled at her bedside 'twenty four seven' for her conditions to improve.

Carty's journey began when a sharp abdominal pain hit her by surprise while at work. She visited her house doctor who later sent her to SMMC's emergency room where she was promptly admitted. After several x-ray's and other tests failed to diagnose her condition a decision was taken to have emergency surgery.

Once the procedure got underway, the surgical specialist discovered that her appendix was perforated and one and a half litres of "pus" had seeped into her system resulting in severe 'septic shock'. And in her case it wreaked havoc.

Her condition deteriorated following the surgery with her life hanging by a thread. Like all success stories though, this one had a happy ending. After sometime in ICU her condition slowly improved. Due to the determination of the nursing staff and everyone involved they were able to get her stabilised.

She showered praise to the hardworking team at SMMC and God for her recovery. "God works in mysterious ways," Carty said, "Sometimes I pinch myself to see if I'm really here. Other times I just cry." I turned over a new leaf and I thank God everyday for bringing me back into this world."

SMMC staff who played an important role



Shirley Carty

in the recovery of Carty all shared one common sentiment – that positive case is just one of many success stories coming out of the hospital and the team fuelling the operations at SMMC does their utmost when offering health care services to the community.

(previously published in The Daily Herald, 2005)

GOING THE EXTRA MILE, 25 YEARS AND COUNTING continued from page 6

One unforgettable encounter is of an elderly woman who after being discharged never stopped saying 'thank you'; every month she would send Carmelita a letter with 5 guil- ders to show her appreciation.

"In her I saw the same quality I have. I would always take the role of a mother; always caring and giving. Once you choose this profession it has to be 'in you' otherwise you really cannot perform. As a nurse you do not only think about yourself and your family, but also of your fellow men."

The nomination for the Nurse Orris Jack Bell award was a bit of a surprise. "I know what I am worth. So that did not surprise me," says Carmelita. "What surprised me is that I was noticed. I am usually quiet and the efforts I make in our community outside of work, I do so unnoticeably."

"A good nurse starts at the bedside; it is important - having good contact with the patients and being able to observe and meet the needs of the patient without being asked," Carmelita concludes.



SMMC CERTIFIES DAYCARE CENTERS continued from page 1

The subjects on those days were first aid and CPR training respectively. The theoretical and practical exam took place on the fourth and final Saturday.

"The objective of the course was to educate and train the professionals on maintaining a safe and healthy environment in the daycares. Now they can serve as each other's 'shadow' and educate the families of the children," says Mr. Antonio Pantophlet, Manager Patient Care and Education at SMMC.

The subjects covered in the course were Care for the Breastfed Infant, Hygiene, Safety, Nutrition for infants and preschoolers, Gastroenteritis, Diabetes, Asthma, First Aid and CPR for Infant, Child and Adult.

Office Manager of St. Maarten Early Childhood Development Association, Ms. Khalila Aventurin, says that the course was well received. "It surpassed our expectations! I would not hesitate to contact the hospital when we need a refresher course in the future." She continues, "The evaluation of the course was scored high by participants. They see the benefits and I am confident that they are applying the knowledge."

Photo below: Childcare professionals at first training



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