

# Health Solutions / Family Chiropractic Quarterly

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September, 2006

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## DOCTOR'S WORDS OF WISDOM - What is cholecystitis?

Merk's definition of acute cholecystitis is "Acute inflammation of the gallbladder wall usually as a response to cystic duct obstruction by a gallstone."

Cholecystitis involves inflammation of the gallbladder wall and nearby abdominal lining. In 90% of cases, acute cholecystitis is caused by a gallstone in the cystic duct, the duct that connects the gallbladder to the common hepatic duct. These stones obstruct the pathway where bile drains into the duodenum portion of intestine. The trapped bile becomes concentrated and causes irritation and pressure build-up in the gallbladder. This can lead to bacterial infection and perforation. Gallbladder attacks may follow a large or fatty meal. Gallstones occur more frequently in women than men, and they become more common with age in both sexes (this is taught in most medical training).

Two decades ago during my training, the way to remember cholecystitis was "the three F's syndrome," or "Fat, Forty, Female syndrome" and included pregnant women. In the past 10-15 years of my career I have witnessed this to become the disease of all ages. I have seen children as young as 2 to ten and eleven years old undergo cholecystectomy. In my opinion this condition is both over-diagnosed and preventable with change of diet and life style in our children as well as the adults.

## Symptoms:

The main symptom is abdominal pain, particularly after a fatty meal. Pain is located on the upper right side of the abdomen. Occasionally, nausea and vomiting and/or fever may occur. Early signs are usually present but ignored, such as feeling of heaviness after a large meal, persistent right sided shoulder and shoulder blade pain, bitter taste in the mouth early in the morning. However, each individual may experience symptoms differently. These symptoms may include intense and sudden pain in the upper right part of the abdomen, recurrent painful attacks for several hours after meals (especially from eating heavy, fatty foods), pain, often worse with deep breaths and extending to the lower part of right shoulder blade, nausea, vomiting, rigid abdominal muscles on the right side, slight fever, chills, jaundice (yellowing of the skin and eyes), itching (rare), loose, light-colored bowel, and abdominal bloating.

The symptoms of cholecystitis may resemble other medical conditions. Always consult your physician for a diagnosis. You may choose a medical or alternative doctor.

Cholecystitis can occur suddenly or gradually over many years. A typical episode of acute cholecystitis improves in two to three days and resolves within 1 week. If the condition does not resolve, serious complications may occur. For example, high fever, leukocytosis, and rigors with rebound tenderness or ileus suggest empyema,

gangrene, or perforation, which require urgent surgical management. When acute cholecystitis is accompanied by jaundice or cholestasis, partial common duct obstruction may result from calculi or contiguous inflammation. Amylase elevation suggests (but does not confirm) gallstone pancreatitis. Finally, in rare cases, large stones erode through the gallbladder wall and may obstruct the small intestine (gallstone ileus).

## Causes:

The causes of cholecystitis may include the following:

- Bacterial infection in the bile duct system
- Tumor of the pancreas or liver
- Decreased blood supply to the gallbladder - this may occur in persons with diabetes
- Gallbladder "sludge," which is a thick material that cannot be absorbed by bile in the gallbladder and most commonly occurs in pregnant women or individuals who have experienced a rapid weight gain or weight loss
- Severe illness, alcohol abuse and, in rare cases, tumors of the gallbladder
- During third trimester of pregnancy
- Most importantly, *BAD* diet and high level of stress

Gallstones may be the result of a complication of other conditions:

- Cirrhosis of the liver
- Crohn's disease
- Cystic Fibrosis
- Sickle Cell Anemia

Although acute cholecystitis is the most common consequence of cholelithiasis, the pathophysiology is not completely understood. Concentrations of bile, including bile salts, phospholipids, and even cholesterol, may be altered, thus inducing mucosal inflammation. Arterial occlusion and ischemia may be late changes. Acute cholecystitis is rarely caused by bacterial infection initially, and intra-operative gallbladder bile cultures during the first few days of illness are positive in less than 33% of cases. Acute cholecystitis is accompanied by cholelithiasis in more than 95% of patients.

## Diagnosis:

In addition to a complete medical history and medical examination, diagnostic procedures for cholecystitis may include the following:

- Ultrasound (Also called sonography)
- Hepatobiliary scintigraphy - an imaging technique of the liver, bile ducts, gallbladder, and upper part of the small intestine
- Cholangiography - x-ray examination of the bile ducts using an intravenous (IV) dye (contrast)
- Percutaneous Transhepatic Cholangiography (PTC) - a needle is introduced through the skin and into the liver where a dye (contrast) is deposited and the bile duct structures can be viewed by x-ray
- Endoscopic Retrograde Cholangiopancreatography (ERCP) - combines x-ray and the use of an endoscope - a long, flexible, lighted tube. The scope is guided through the patient's mouth and throat, then through the esophagus, stomach, and duodenum. The physician can examine the inside of these organs and detect any abnormalities. A tube is then passed through the scope, and a dye is injected,

which will allow the internal organs to appear on an x-ray

- Computed tomography scan (CT or CAT scan) - a diagnostic imaging procedure using a combination of x-rays and computer technology to produce cross-sectional images (often called slices), both horizontally and vertically, of the body. CT scans are more detailed than general x-rays
- Abdominal palpation
- Oral Cholecystogram
- Gallbladder radionuclide scan
- CBC blood work-up to detect infection by studying white blood cell count.

**Treatment:**

Specific treatment for Cholecystitis is determined by your treating physician based on:

- your age, overall health, and medical history
- extent of the disease
- your tolerance for specific medicines, procedures, or therapies
- your decision, opinion or preference

Treatment for acute cholecystitis usually involves a hospital stay to reduce stimulation to the gallbladder. Antibiotics are usually administered to reduce the inflammation and/or fight the infection. Most often, the gallbladder is surgically removed.

Other medical treatment options may include:

- oral dissolution therapy - drugs made from bile acid are used to dissolve the stones
- medications to prevent the formation of gallstones
- low-fat diet

Although cholecystitis may clear up on its own, surgery to remove the gallbladder (Cholecystectomy) is usually recommended by mainstream medical doctors when inflammation persists or recurs.

Cholecystectomy is usually performed using a laparoscope. In more complicated cases where there is a significant amount of inflammation, or difficulty defining the anatomy, the operation is performed through a larger incision on the abdomen. Emergency surgery may be necessary if gangrene (tissue death), perforation, pancreatitis (inflammation of pancreas), or inflammation of the common bile duct occurs.

**Expectations (prognosis):**

With surgical intervention, the outlook is usually good and the condition will not occur again in most patients. However, the risks associated with any surgery such as adhesions and internal bleeding, and the complications thereafter should be a concern. Chronic diarrhea is the most common aftermath of this procedure. Unfortunately these are often not discussed with patients until after the fact, when it is too late to reconsider and give a less aggressive approach a chance.

More serious and less common complications include: Empyema (pus in the gallbladder), peritonitis (inflammation of the lining of the abdomen), gangrene of the gallbladder (tissue death), injury to the bile ducts draining the liver (rare).

In some individuals, complications may arise if other organs are involved. Gallstones can return in the bile duct system after surgical removal of the gallbladder.

**What is my approach to this ailment?**

I believe every disease has a degree of stress attached to it. Our diet is a main cause of the rapidly growing cases of digestive disorders such as IBS, Crohn's, GERD, ulcerative colitis, colitis, cholecystitis and many more.

As I have repeatedly said in all my newsletters every one of us is responsible for his/her own health and destiny. Take charge of your life, and remember a simple fact: GARBAGE IN, GARBAGE OUT!!!

Eat well and healthy as often as you can. Become active in your health matters. Reduce your fast food and precooked meals. Depend on your ability to prepare food from fresh fruits and vegetables daily. Avoid all additives and food colorings. Avoid canned food. Reduce white sugar/ white bleached flour intake. Every day eat at least two meals freshly prepared filled with love just like grandma's homemade food!!!

Sometimes illness occurs without any good reason. In these cases you should always consider the least aggressive approach and become more aware of your treatment options. In case of cholecystitis, there are several old fashioned recipes to eliminate the gallstones. I have two favorite ones and will be happy to discuss them with you if you are suffering from this condition.

**Update on my lectures**

This summer, I am taking it very easy. No traveling to Texas, no lectures. I am enjoying life with my girls - so far it has been great.

**Office updates:**

A few changes have taken place in my office since December 2005. We are:

- A Medicare provider as of December 6, 2005
- A BCBS Insurance provider as of December 1, 2005
- A Health-Link provider as of AUGUST 1, 2006

And, of course, I have been a First Health provider for many years.

**TWO OFFICES TO SERVE YOU**

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## **Update on the restaurant IT'S HERE !!!!!**

Hodge Podge Café dug her feet deep into the ground and opened on Tuesday, July 5, 2006, next door to my Newton office (604 W. Washington St.). Prior to their opening, my family and I enjoyed the menu sampling and practice. Tiffany and I had to “suffer” through the period when lunch, drinks and deserts were served in our Newton office daily, and we were forced to eat them! Now my family is enjoying weekly outings, especially my two daughters Leah and Shauna (10 & 8). For thirteen years I had successfully removed ice cream from my diet (my only addiction). Since the restaurant opened, I have been BAD! They have NO additives in their ice cream (what a phenomenon!). My favorites are COFFEE and Cinnamon. So I have to try both weekly to decide which I like better. Those who know me well know that when it comes to food I take my time to evaluate the sample thoroughly! A month later and I remain undecided!!!! Every time I taste these I cannot help but say Ummmm, Ummmmm, it is delightfully delicious and healthy too. (except for sugar of course!)

Once in a while when it gets busy, you may see me there working as, what I like to call, “Sous chef”. Sounds important to me!!

I have asked my sisters' permission to include the menu on the newsletter. Keep in mind that the menu will change frequently to allow different taste experiences.

## **Hodge Podge Café Menu**

**602 W. Washington St.  
Newton, IL 62448  
618-783-8408**

### **Appetizers**

**Eggplant and Tomatoes (Persia).** Roasted eggplants sautéed to perfection with fresh tomatoes, chunks of eggs and garlic. Served with French bread.

**Babaghanooge (Middle East).** Roasted eggplants with Tahini sauce and garlic. Served with Greek pita bread.

**Humus (Mediterranean).** Chick peas (garbanzo beans) combined with Tahini sauce and garlic. Served with Greek pita bread.

**Tortilla Platter (TexMex).** Served with black bean mole', black beans, salsa, guacamole', sour cream and cheese.

**Shabu Shabu (Japanese Fondue).** Rich beef stock with Japanese flavors served fondue style with shrimp and assorted steamed vegetables. Enjoy with friends and family.

### **Salads**

**Garden Salad.** Head lettuce, tomatoes, cucumbers, carrots. Served with house dressing.

**Greek Salad.** Romaine hearts, tomatoes, onions, feta cheese, olives, pepperoncini. Served with traditional Greek dressing.

**Avocado Salad (Hodge Podge original).** Chunks of avocado, tomatoes, onions smothered in Noni dressing over a bed of Romaine hearts.

**Shirazee Salad (Persia).** Tomatoes, cucumbers and onions in traditional dressing.

**Ultimate Protein Salad (Persia).** Romaine hearts loaded with eggs and black beans with traditional dressing.

### **Soups**

**Lentil Soup (Persia).** Lentils cooked to perfection and flavored with olive oil and lemon juice.

**French Onion Soup.** Rich beef broth loaded with caramelized onions topped with toasted French bread and creamy cheese.

**Chili (TexMex).** Ground chuck cooked with caramelized onions, celery, bell peppers and pinto beans, flavored with chili seasoning.

**Soup of the Day.** Please ask your server about today's special.

### **Lunch**

*Served from 11:00 a.m. to 1:00 p.m.*

In addition to these entrées, all soups and salads are available for lunch.

**Panini (Italy).** Provolone cheese, roasted red bell pepper and tomatoes grilled in toasted bread panini style. Served with potato chips and pepperoncini.

**Eggplant and Tomato Sandwich (Persia).** Roasted eggplants sautéed with fresh tomatoes, chunks of eggs and garlic on a hoagie roll.

**Polish Sausage (Eastern Europe).** All beef polish sausage sautéed in olive oil served on a hoagie roll and topped with pickles, onions, sauerkraut, tomatoes. Served with condiments and potato chips.

**Gyros (Greece).** Slices of lamb served on Greek pita with lettuce, tomatoes, onions and cucumber sauce. Served with potato chips.

**Philly Cheese Steak (Philadelphia).** Thinly sliced Rib Eye steak cooked on the griddle with onions and Provolone cheese. Served on hoagie roll. Side of potato chips.

**Humus Sandwich (Mediterranean).** Chick peas (garbanzo beans) combined with Tahini sauce and garlic. Served on Greek pita bread with pickles, lettuce and tomatoes.

**Kofta Kebab (Greece).** Ground chuck seasoned with herbs and spices, cooked on the griddle and served on Greek pita with lettuce, tomato, cucumber sauce and pepperoncini.

### **Dinner Entrées**

*Served from 5:00 p.m. to 8:00 p.m.*

*All dinner entrées are served with garden salad, French bread and butter.*

**Roasted Vegetables with Rice (Morocco).** (No meat products) Fresh bell peppers, onions, mushrooms, and other vegetables roasted to perfection then infused with Moroccan flavors. Served with aromatic aged Basmati rice.

**Baked Rotini with Roasted Vegetables.** (No meat products) Fresh roasted vegetables baked with Rotini pasta in a succulent marinara sauce and topped with rich, creamy mozzarella cheese. A taste of Italy.

***Shrimp in Herb Sauce (Hodge Podge Original).***

Shrimp cooked in aromatic herbs and spices, served with Basmati rice.

***Linguini and Shrimp in garlic sauce.*** Linguini pasta tossed with sautéed shrimp in garlic sauce. Simple, tasty and aromatic. A taste of Italy.

***Bulgogi Steak.*** Tender strip steak marinated in oriental herbs and spices and grilled. Served with Sesame fried rice, kimchee (Korean cucumber sauce), and Bulgogi sauce. A taste of Korea.

***Mousaka.*** Roasted eggplant pieces topped with a delectable meat and tomato sauce and creamy cheese. Served with garlic bread. A taste of Greece.

***Goat Cheese Enchiladas.*** Tortillas filled with goat cheese stuffing, baked in tomato sauce and topped with Monterey Jack cheese. Served with black bean mole', guacamole', sour cream, salsa, salsa rice, black beans. A taste of Mexico.

***Chimichanga.*** Tortilla filled with ground chuck and pan-fried. Served with black bean mole', guacamole', sour cream, salsa, salsa rice and black beans. A taste of Mexico.

***Fettuccini Alfredo.*** Fettuccini pasta in creamy Alfredo sauce. Served with garlic bread. A taste of Italy.

- With chicken strips sautéed with garlic and red pepper

- With shrimp sautéed with garlic and red pepper

***Sautéed Beef Nested in Potato Sticks.*** Tender pieces of Sirloin steak sautéed with caramelized onions and topped with sour cream and crunchy potato sticks. A taste of Persia.