

# INFINITE WISDOM

**INSIDE THIS ISSUE:**

<i>Liver (meet your)</i>	2
<i>Free Concert!</i>	2
<i>CBT</i>	3
<i>Sunscreen</i>	3
<i>Promotion!!</i>	4
<i>Tuberculosis Screen</i>	4

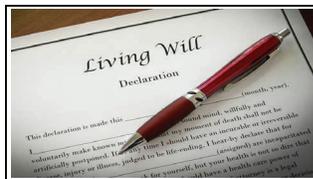
**Special points of interest:**

- Individualized health care when you need it.
- Same day or next day appointments.
- Want to talk to your own doctor? Call.
- See your doctor, not a random on call doc in the office

 Like us on Facebook  
 Follow us on Twitter  
 Follow us on Pinterest  
 @infinityhealth8

## LIVING WILLS

It has been a while since we covered this but it is worth readdressing. Everyone should get a living will. It does not need an attorney or notary. A “will” is a document that you and your attorney draw up that directs where parts of your possessions or ‘estate” goes when you die. In Louisiana that is defined in law to a certain degree. A will makes certain of your wishes specific. Your relatives cannot override the will after your death. If some part of the will is illegal then that can be corrected posthumously. A “Living Will” is a document where you write down what you would like to have done to you should you become incapacitated. For example, if you are in a



terminal condition in a hospital and hooked up to various forms of artificial life support do you want the docs to “keep you going forever” or “pull the plug?” Or if you are in a terminal and hopeless condition and rapidly declining, do you want to be placed on a breathing machine and have feeding tubes inserted to keep you alive? A “living will” is your way of defining that in writing BEFORE you ever get to that condition. When you get to that condition you may be in a coma or a state where you cannot tell anyone what to do. If the

doctors caring for you have nothing clear to go by then they have to look to the next of kin. This puts an undue burden on the next of kin to come up with that decision when you could have made it clear in a living will. There is no reason to subject other kinfolks to that heavy decision. Talking now about your wishes “if that should ever happen to me” is a wise thing to do, but put it writing. Don’t trust that things will just take care of themselves. You take the initiative. Go to my website at: [InfinityHealth.MD/documents](http://InfinityHealth.MD/documents) and look in the “Medical” section where you can download the form. Bring it to your doctor to discuss if you have any questions. Your doctor will also sign it and keep it on file.

## OPIOIDS AND PHARMACEUTICALS

In the ongoing opioid crisis story there are a lot of news media articles that blame the pharmaceutical industry for causing this issue. The claim is that the drug industry coerced doctors to prescribe certain narcotics. After all, someone has to be blamed in today’s society. And if we can successfully blame them then maybe we can extract money from them.



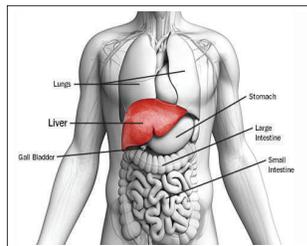
The implication is that doctors will prescribe anything that a drug salesperson will market to them! This is rather offensive as if physicians have no capacity to make their own judgment to

use medications where they are appropriately indicated. Certainly there are sloppy doctors out there but to paint us all with the same brush is absurd. I have seen many pharmaceutical reps where I have never used their drugs they were marketing. Doctors use drugs that are FDA approved to be used!  
**(Continued on pg 2)**

## ORGAN CORNER...

*“Two major things destroy the liver. One is alcohol usage and the other is hepatitis, especially hepatitis C.”*

In this issue we review the liver. The liver does about 500 things and can be considered the main area where certain chemicals are detoxified. It also manufactures certain hormone chemicals and proteins. The liver produces bile, a chemical that is secreted into the small intestine to help with digestion of fats. For those who still have a one, the bile is temporarily stored in the gall bladder. The liver is in the upper right side of the abdomen and weighs about 3 pounds. It forms in the embryo as an out-



pocket from the GI tube or gut. In the developing fetus the main blood supply to the liver is nutrients carried from the mother's placenta through the umbilical vein which passes into the fetus through a hole where your belly button is now. After birth the primary blood flow to the

liver is from the veins that leave the intestines which makes sense because the liver has to process a lot of chemicals and nutrients that are absorbed from the intestines.

The liver is essential. Life is not possible without it. Two major things destroy the liver. One is alcohol usage and the other is hepatitis, especially hepatitis C. The chronic inflammation from those causes the liver to scar or fibrose. This eventually to a scarred or cirrhotic liver which is a serious matter.

## WATCH THIS 7 CONCERT

*“I am sure we will embarrass ourselves.”*

On Saturday, June 9th at 4:00 PM my quartet, Southern Tradition, and myself will be presenting a music concert, “Watch This 7.” As you might guess it is the 7th in our series. It is a FREE concert with a variety of different performers. I am sure we will embarrass ourselves. It will be held at St. Matthews United Methodist Church



at 6017 Camphor St. in Metairie in the Airline Park area. Southern Tradition Quartet has been singing together for twenty years now. We put together a

concert a couple times a year and invite various folks to perform. It is strictly fun and solid music with some really awful humor (but clean!) Our quartet sings barbershop harmony but a variety of other types of music too. We have great guests again this time. Bring a friend or just some random stranger.

## OPIOIDS...CONTINUED

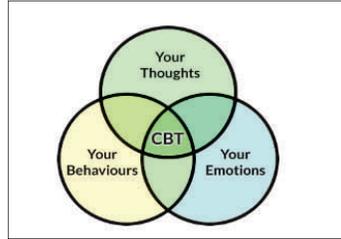
Back when these potentially addictive narcotics were being more commonly prescribed the whole concept of pain management was different. It was not just the drug companies pushing these drugs. Article upon article told physicians how we were not assessing and treating pain enough. Stanford U. said that pain was a “vital sign”

and had to be addressed and treated. Medical articles said narcotics were OK. SO even though the pharmaceutical industry has done some shady and illegal things, blaming them for this crisis is ludicrous. We were never bribed or coerced into prescribing. When somebody said they hurt, narcotics were prescribed. The

quack “pill mill” docs should be kicked out of medicine and jailed but that is an extreme minority. The DEA knows exactly who they are. There are a lot of reasons as to why the crisis is where it is but very little of the blame goes to the manufacturers. They can't prescribe the drugs. Let's not oversimplify this and blame the drug companies.

# COGNITIVE BEHAVIORAL THERAPY

Cognitive behavioral therapy (CBT) is the term for a form of psycho-social intervention that is used to help people with a number of issues regarding mental health. It can be a self-help item but is clearly more effectively delivered by a licensed professional counselor, or therapist. It does not focus on some older Freudian psychoanalytic models of subconscious causes of behavior or what happened to you when you were 4 years old. Instead the focus is on specific thoughts, behaviors and emotions you



have now and on practical ways of how to change them. It is proven to be helpful in depression, attention deficit disorder, substance abuse, post-traumatic stress disorders and the like. CBT works with a patient to identify reflex responses our brains have to certain triggers. Then useful strategies and tools are taught on how to interrupt the

learned way we respond to things. It creates a practical “toolbox” on how to take control back over our own mind. It is a way of retraining our brain away from bad thoughts, feelings and behaviors. This is not the type of therapy where you sit back and just explain what is wrong with you as “talk therapy.” This is not a “venting” session. CBT is an active insightful exercise in how to recognize our adverse habits and practical ways on how to break our ingrained and broken thought patterns.

*“CBT works with a patient to identify reflex responses our brains have to certain triggers..”*

## SUN SCREEN

This is the reminder to prevent all that sun exposure. It’s getting rather old having to freeze off little mini skin cancers from the skin. I’ll do it but prefer to retire my liquid nitrogen gun! Use hats. Baseball caps don’t cover your ears so they are still sticking out there getting fried by ultra-violet (UV) light from the sun. There is plenty of ear



cancer going around. Apply sunscreen liberally. Remember that we sweat so some of the screen may need to be reapplied. It is a good idea to have some form of sunscreen

in your car so you can have it handy in a pinch. UV light can also cause rosacea, a non-cancerous red rash of the face. Rosacea can also cause a thickening of the skin of the nose that makes the nose bigger. Plus years of UV makes wrinkles and leathery skin. If you must be in the sun use shade, a hat and sunscreen.

*“If you must be in the sun use shade, a hat and sunscreen.”*

## ENROLLMENT PROMOTION!! REMINDER

A reminder about last month’s promotion offer. I am looking to expand the panel of patients that call Infinity Health their medical home. If you are satisfied with the concept of having “your doctor” then spread the word to friends and family. I am accepting new patients up to a certain limit so that I do not get “too full.” I also want to see the concept of di-



rect primary care gain more traction as I think it is better care and what patients deserve. The health care system will get better if we, the docs and patients, can steer the ship.

*If a member does refer a patient who enrolls and stays a member for at least two months then that referring member will get a \$50 Visa Gift Card as a thank you.*

*Offer good only for 2018*

*“If a member does refer a patient who enrolls and stays a member for at least two months then that referring member will get a \$50 Visa Gift Card as a thank you.”*

Infinity Health, LLC  
200 W. Esplanade Ave.  
Suite 307  
Kenner, LA 70065

Phone: 504-467-3404  
Fax: 504-467-3244  
E-mail:  
contact@infinityhealth.md



*An Invitation:  
If you know of a friend or family member that would be interested in becoming a member, please have them contact us for a free non-medical meet-and-greet visit.*



A

Direct Primary Care  
Practice

Newsletter

written and published  
by Karl N. Hanson, MD

Previous Newsletters  
[www.InfinityHealth.MD/documents](http://www.InfinityHealth.MD/documents)

*Infinity Health is a Direct Primary Care practice developed by Dr. Hanson. Dr. Hanson has been in medical practice since 1987 and has been a solo practitioner since 1990 in the conventional insurance-based model.*

*The concept of dealing or contracting directly with the patient is a bit of a throwback but it places the relationship where it should be, with the patient. There is no point in Dr. Hanson or our office wasting time interacting with insurance companies unless it directly contributes to your health. Instead we developed a medical home which has its focus on the patient's health regardless of their insurance status. Infinity Health is a product of Dr. Hanson and is not affiliated with any other organization. We are a membership-based practice. Direct Primary Care is not the same as typical "Concierge" practices which charge a fee AND bill your insurance company.*

*Dr. Hanson is Board Certified by the American Board of Family Medicine, a Fellow in the American Academy of Family Physicians and a member of the Alpha Omega Alpha Medical Honor Society. He completed his recertification process in April 2016.*

## USPSTF CORNER: TB SCREENING

Tuberculosis (TB) was at one time a common infection. It is primarily an infection of the lungs although it may involve other parts of the body. Long ago everybody seemed to be checked for TB. Most of us remember the little needle injection in the forearm or the pin pricks that would have to be checked 2 or 3 days later. Those were tests that were done on people who had no symptoms of TB but we were checking to see if they had a silent or "latent" form of TB. Maybe a TB that hadn't progressed yet. The thought is to start treatment early before you even had symptoms. We especially didn't want people with mild TB walking around spreading it to others.

Since TB has become relatively rare in the population it was felt no longer worthwhile to check everyone for it. Those who did have it



were successfully treated and were no longer carriers or "spreaders" of TB. The US population was doing well. A rise in TB cases occurred from foreign born people who immigrated to the US, especially those from Mexico, Vietnam, India, China and the Philippines. Guatemala and Haiti also have more TB.

Health care workers may be at increased risk because they are in contact with ill patients. Screening is now directed at higher risk individuals named above. We also screen people with HIV and who are about to receive any drug that may weakened the immune sys-

tem as using that drug may cause the latent TB to flare up acutely.

Currently we still use the TB skin test injection. We also have a blood test that is available to aid in the screening for TB. Either is valid.

The USPSTF currently recommends that only individuals at increased risk of latent TB infection should be screened.

*The U. S. Preventive Services Task Force (USPSTF) is an expert panel which reviews the current evidence to help us docs recommend counseling, medical screenings and preventive medications. It is funded by the U.S. Department of Health and Human Services.*