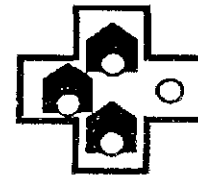


# ❖ GENNESARET FREE CLINIC ❖

## NEWS



Volume 8 Issue 4 "And all those who touched Him were healed." Mark 6:58 August-Sept., 1995

### *Health Care Education*

## Two Top Speakers in Indigent Health Care here on September 16

The 5th Annual "Health Care for the Homeless and Poor Conference" will feature the two most sought after speakers in the field.

**Dr. Jack B. McConnell** has been featured in the national press (NBC Nightly News, Parade Magazine, The New York Times) for his work in founding the Hilton Head, S.C. **Volunteers in Medicine Clinic**. His innovative and charismatic work has brought national acclaim and interest. He is frequently asked to speak to groups contemplating starting a health clinic. His southern charm and wit hold his audiences on every word.

**Dr. Pedro Jose Greer** will be our second keynote speaker. "Joe" has been one of the early leaders in indigent health care from his days of residency in **Miami**. He began seeing the homeless there by driving his now famous "white jeep" to the homeless under bridges and in the "jungles" of Miami. For his

(continued p. 2)

### *Volunteer Health Care for the Poor and Homeless*

## GFC Expansion Creates Financial Need

This year GFC has seen significant change with the addition of full-time professionals supplementing the work of our hundreds of health profession volunteers. This has allowed for increased interaction with allied agencies in the community, the delivery of social services to female clients, and soon the implementation of a more helpful medical records system.

However, these changes have created an increased financial need for GFC. Our GFC budget for next year will be 2 to 3 times larger than last year.

GFC members have always risen to the occasion in the past. Please consider a first time gift to GFC or an increase in your next gift; the homeless and poor will benefit.

## Conference Workshops Have Something for All

With 16 workshops at this year's "Health Care for the Homeless and Poor Conference," a multitude of topics will be covered in indigent health. There will be topics in each of 4 workshop time periods in clinical, administrative, social work, and general interest categories. Physicians, nurses, social workers, case managers, administrators, and interested persons should find topics to suit themselves with this approach.

Call 929-3733 to register!  
Workshops are as follows:

- |       |  |
|-------|--|
| 10am  | Upper Respiratory Track Diseases<br>Prenatal Care Coordination<br>Fund Raising<br>Domestic Violence                |
| 11 am | GI diseases<br>Indigent Pharmaceutical Programs<br>Medicaid Managed Care<br>Medical & Nursing Student Clinics      |
| 2 pm  | Primary Care Dermatology<br>Migrant Health Care<br>Engaging the Community<br>Cultural Diversity                    |
| 3 pm  | Psychiatric Outpatient Treatment<br>HIV/AIDS and the Homeless<br>Medical Mobile Models<br>Foreign Medical Missions |

Clinics at Dayspring Center, Lighthouse Mission, Salvation Army Adult Rehab, Holy Family Shelter, Allison Christian Community Center, and Mobile Unit. Office at Indianapolis Medical Society, 631 E. New York Ave., Indianapolis, IN 46202  
Phone (317) 262-5645. Rebecca Seifert- Executive Director

## ♦ News

**Happening around**

**W**e thank Wayne Oteham, as he leaves the Board of Directors, for his significant contributions. Through Wayne's hard work we have handled payroll in a professional manner, budgeted for the tremendous changes in GFC structure and now can plan for the new health programs envisioned to help the poor of Indianapolis. Thanks for all your work, Wayne.

**D**uring the 1995 Black EXPO health fair, the GFC mobile unit was on proud display. Thanks to all the volunteers who staffed the van during the EXPO. And a special thanks to the directors who washed the van - during a cloud burst! If washing a car causes rain; washing a 33ft RV must have caused such a down pour.

**A**nnouncing Elizabeth Ann Abrahms 6lbs 3 oz on 7/27/95 to BOD Dr. Mary Ann Abrahms and Michael. Congrats!

**C**ondolences to GFC Secretary Mary Jo Battreall and family with their loss of mother-in-law Anne Marie.

**T**his summer, Anne Marie Pridget from Normandy, France volunteered at the GFC warehouse helping sort medications for the homeless. She is an English teacher escorting 20 students in a cultural

exchange program studying American family life. We hope she benefitted from her experience with many of Indianapolis' finest volunteers who are a tribute to the best of American values.

**New GFC Volunteers**

We welcome the newest GFCers. Ann Plata, clerk; Christina Jenkins, driver, clerk; Lea Rae Herron, RN; JoAnn Arbuckle, RN; Elizabeth Grant RN; James Duke, clerk; Jean Smith, RN; Sue Terry, clerk; Anne Marie Bernstein, RN; Elaine Pauley, RN; Barbara Weillhamer, clerk; Linda Nagdhi, RN; Donna Fischer, RN; Libby Grant, RN; Richard Most, driver, clerk; Frank Seger, driver, clerk; and pharmacists Maria Mikulta, Margaret Straford, Gretchen Schassberger, Julie Quinn, Ed Miller, Laura Need, Angela Gruden, Cynthia Green, and Keith Daehler.

**GFC Donors**

Thanks to all GFC contributors: Wayne Jones, Kappa Kappa Kappa, Zeta Sigma, J&D Reeder, Immaculate Heart Church, St Pius Church, J&L Trippi, Indianapolis Continuity of Care, J&D Etienne, Charles Test, C&M Cosia; and in memory of Anne Marie Battreall: Michael Columbe, C & D O'Donnell, Friends at Adminstar, V Battreall, Maryan Mulcahy, K & M Murphy, Dorothy Nelson - Bridge Club Group, Catherine Edwards, Columbe & Lantrip families, S & B Cravens, Thelma Niehoff, Janet Dusthimer.

**Conference Workshops  
(continued)**

work, Dr. Greer has been recognized by **Newsweek** as one of America's top fifty young leaders and called an "unsung hero." He has served on national committees promoting health care for the indigent including President Clinton's Health Care Reform Committee. His excellent message and outstanding wit make him a favorite speaker.

This year's conference will be videotaped. We will be providing videotapes to clinics around the country with our keynote addresses. Their messages are so important that many will now be able to hear them. Dr. McConnell plans to use excerpts from the videotape in a 3-part video production on initiating a clinic for the homeless and poor, fund raising and sustaining a clinic, and the culture of caring.

**Director's Column**

Partnership is the act of joining together with another person, group or entity. When I think of partnership, words like "sharing," "common cause," and "mutual benefit" come to mind. In order for a partnership to be functional, the people in that partnership need to feel a sense of belonging and ownership. They need to know that they are valued and listened to and that their input counts.

GFC is built upon partnerships. Without our volunteers, our donors, and other community health and human service agencies GFC would not exist. GFC is successful because of the work on the part of all. I like our willingness to work together. I like the fact that we are generous in the sharing of our gifts and talents. You, the GFC volunteer, are to be applauded for your ability to be a meaningful partner.

## Hypertension: Treatment choices

by Dr. Richard Hahn

Systemic hypertension (HTN) is rampant in our adult population, affecting 25% of Americans. It is defined as a persistent blood pressure (BP) greater than 140/90. More than 90% is "essential" - that is, having no identifiable cause. HTN is a risk factor for strokes, heart attack, and heart or renal failure and thus requires diagnosis and treatment.

Initial evaluation includes several BP measurements during the first visit and perhaps over several weeks. Some drugs might interfere with BP control; patients should be asked about including decongestants, oral contraceptives, appetite suppressants, and anti-inflammatory agents. Nonpharmacologic therapy should include weight reduction, moderate salt reduction, alcohol restriction, regular exercise, and stress reduction.

Sustained HTN, after these measures have been tried, requires pharmacologic therapy. Many effective agents are available and those listed below are safe and effective, and generally require only monitoring for response and clinical side effects:

**beta blockers** - Propranolol/Inderal (40-160 mg BID-QID); Inderal LA (80-320 mg QD); Nadolol Corguard (40-480 mg QD); Metoprolol/ Lopressor (50-100 mg BID); Toprol XL (QD); Atenolol/Tenormin (50-200 mg QD); Labetolol/Normodyne, Trandate (200-400mg BID); and Acebutolol/Sectral (200-1200 QD) are available. Watch for depression, fatigue, and sleep disturbance. Avoid in bronchospasm, heart failure, and bradycardia.

**calcium channel antagonists**- Nifedipine/Procardia XL, Adalat CR(30-90mg QD); Diltiazem /Cardizem CD, Dilacor SR(120-300mg QD); Verapamil/ IsoptinSR, Verelan, Calan SR (180-480mg QD); Isradipine/ Dynacirc (5-10mg BID); Felodipine/ Plendil (2.5-10 mg QD), Amlidopine/ Norvasc (5-10mg QD). Beware of flushing peripheral edema, and GI disturbances.

**vasodilators**- such as Hydralazine/Apresoline (10-100mg BID-QID) and Minoxidil/ Loniten (5-100mg QD) are very effective but can lead to fluid retention, tachycardia, headache, and nausea.

**alpha blockers**-include Minipress, Hytrin and Cardura. A principal side effect is syncope.

Other agents include diuretics, ACE inhibitors which are also effective, but require monitoring of electrolytes and renal function on a regular basis.

## Personnel Profiles

by Mary Ann Wyand

Ken and Carole Weir of Carmel enjoy volunteering together, and helping with the GFC ministry to the homeless and poor of Indianapolis is one of their favorite community service opportunities.

They have been volunteering for the GFC for about five years.

A registered nurse employed at the Indiana University Medical Center, Carole helps with the GFC ministry about every 6 to 8 weeks as a mobile medical van staff member on Sundays and at Salvation Army's Lighthouse Mission on Mondays.

Ken, who works in pension sales, doubles as a driver and clerk for the GFC van and also volunteers as clerk at the Lighthouse Mission because he enjoys helping his wife and the volunteer physician care for people in need.

"We saw a story in the paper about the clinic," Ken recalled. "It serves a very valuable purpose. When you volunteer, you're returning something to the community. You're fulfilling an important need."

During the past five years, he said, they have met a number of wonderful GFC patients who just happen to need some medical help.

Ken and Carole said their GFC ministry at Lighthouse is rewarding.

"Even if Ken can't come with me, I am never afraid to go downtown to the Lighthouse Mission," Carole said. "Those men treat the GFC volunteers very nicely; they always have. They appreciate our help. They are grateful for that touch of a hand when you're doing a pulse rate or putting on a blood pressure cuff. It shows them that you care about them, and it may encourage them to go out and try to do better for themselves."

About their joint experience on the mobile unit, Ken said, "there are people who have been coming to the van for five years. We seem to have a more steady population there. Some are transient people, but there are a lot of repeat patients and we get to know some of these people pretty well. We know some of the people well enough to sit and talk with them. Many of the people need some type of medical attention, but they don't have any serious health problems. They just appreciate having someone to listen to them and pay attention to them."

Without violating patient confidentiality, Carole shared a story about a clinic patient she has gotten to know quite well. The woman suffered from throat cancer, which was diagnosed during a GFC medical examination, and she also was alienated from her family.

"She's had a long, hard time," Carole said. "It's been two years now. She didn't want to tell her family that she was sick. We had several long talks, and she finally went back to her family and talked to her mother and children. I think it helped her because she was afraid she wouldn't make it, and she was happy to reconcile with her family."

The woman had throat surgery to remove the cancerous cells during the fall, Carole remembered, and on Mother's Day the following spring she came back to the van with a carnation as a gift of thanks.

"It wasn't just a physical repair that we were able to help her with," Carole, a parishoner of Our Lady of Mt. Carmel, said. "It was also a spiritual and a personal victory because she was able to get back with her family in a way she hadn't been able to before. She still comes to the van, and it's really nice to see her."