

Occupational therapists help return patients to daily routines

BY NICK ULANOWSKI
nulanowski@hfchronicle.com

Allen Davenport originally was skeptical about occupational therapy, but he said he saw its benefits after just two sessions with occupational therapist Miranda Palmer at Franciscan Health in Olympia Fields.

Davenport, a 53-year-old auto mechanic, underwent triceps tendon reattachment surgery on Nov. 12 to repair an injury suffered in a bicycle accident. He had lost strength in his arm, and he was unable to bend his elbow properly.

Davenport, a mechanic at Goodyear in Tinley Park, said he works on commission and his body needs to be in tip-top shape. His injuries greatly reduced his ability to do his job.

Davenport said when he started occupational therapy with Palmer, he was planning to go for only two sessions.

"I really didn't believe in therapy because I work out in the gym," Davenport said. "I was like 'it's just some exercises and different stuff.' I go to the gym. I know how to work out. I can do this. I don't need nobody's help."

After two sessions, Davenport said



NICK ULANOWSKI/H-F CHRONICLE
Occupational therapist Miranda Palmer in her office at Franciscan Health in Olympia Fields.

he realized there were many benefits to occupational therapy, which is designed to help people recover their upper body functioning after surgery or injuries.

Davenport said he continued to go to hour-long occupational therapy sessions three days a week from December to March. The therapy sessions included electronic stimulation, various tricep exercises, grip strengthening routines and other therapy, Davenport said.

"Miranda was very knowledgeable. [...] I knew she knew what she was talking about," Davenport said. "Over time, I was glad to go. I was looking forward to going because I knew it was getting me to where I needed to be."

Davenport was confident he was ready to return to work in mid-March.

Palmer, of Homewood, has been on the Franciscan Health staff for about 10 years and has helped countless patients. She said occupational therapy is just like physical therapy, except that physical therapy is treating the lower body while occupational therapy is treating the upper body. It often focuses on specific areas, such as shoulders, elbows, wrists or fingers, that suffered an injury limiting the patient from performing their daily activities.

Occupational therapy begins with an evaluation that includes examining the amount of swelling, range of motion and pain levels, Palmer said. She then establishes a therapy plan, including exercises and frequency. Treatment includes both at-home therapy and sessions with Palmer at Franciscan Health.

In her profession, Palmer said the word "occupational" doesn't just refer

to someone's job. It means "who you are and what you do on a daily basis," Palmer said. "That can mean dressing yourself. That can mean combing your hair or brushing your teeth. Putting on your clothes. Driving. [...] it's everything you do, that you need to do and you love doing."

Palmer said she also has a special certification for treating lymphedema.

According to the Mayo Clinic, "lymphedema refers to tissue swelling caused by an accumulation of protein-rich fluid that's usually drained through the body's lymphatic system. It most commonly affects the arms or legs, but can also occur in the chest wall, abdomen, neck and genitals."

Not all therapists hold this certification. Palmer earned hers after seeing breast cancer patients whose arms were swollen because of lymphedema.

A written referral from a doctor is required for occupational therapy in the outpatient department at Franciscan Health. Most patients come to Palmer after receiving a referral from a Franciscan Health Olympia Fields doctor, but about 20% of them come from referrals by other doctors, she said.

Primary care physicians help navigate a complex health system

BY ERIC CRUMP
ewcrump@hfchronicle.com

The health care system can be essential to maintaining wellness. It can also be frustratingly complex. When people seek to get value from the system, it helps to have a friend in their corner.

That's where primary care physicians come in. Think of them as professional friends in the most important game people play, their health.

They are guides, advocates, teachers, coordinators and friends all rolled into one, according to Dr. Crystal Hines-Mays, a primary care physician with Specialty Physicians of Illinois.

The numbers of people who have primary care physicians trending downward in recent years, according to an oft-cited 2015 study. It found that about 25% of Americans do not have a primary care physician.

Hines-Mays thinks people might have incomplete understanding of the role PCPs can play in their health care. PCPs see patients as much more than a health history on a chart.

"My goal is to have a relationship with the patient, for them to feel comfortable



Dr. Crystal Hines-Mays

with telling me whatever bothers them, whether that be physical, mental, things that are going on at home, things that are going on at work," Hines-Mays said. "All of that impacts your life. All of that impacts your health."

Being inquisitive and caring about patients' whole life is what helps PCPs provide the best guidance, she said, because they learn what patients' health goals are and understand the context in which they are pursuing those goals.

They invite patients to share information about their work life, home life, hobbies and hopes. The stories patients tell about themselves add depth to the detailed medical history each patient has and help inform recommendations for everything from routine screening tests, treatments and recommendations for consultations with specialists.

A PCP also asks patients about their

life and health goals. Hines-Mays said she seeks to become a partner with her patients to help them understand how they can achieve their goals.

For example, when a PCP refers a patient to a specialist, that's not the end of the journey. After the patient visits the specialist, the PCP will continue to provide guidance, helping the patient understand and act on the specialist's diagnosis and recommendations.

Pandemic underlines the mission

Like all health care workers, the COVID-19 pandemic has put PCPs under tremendous strain during the past two years, but Hines-Mays said the crisis has also helped renew her sense of mission to be there for her patients.

"It is not just a job it's a passion," she said. "You're dealing with a pandemic where people are frightened."

The rapidly changing conditions of the pandemic meant that new information was coming fast and from multiple sources, making the PCP's role as a source of clarity even more important.

Plus, Hines-Mays found that many of her patients were not only frightened and uncertain, they were lonely.

"They were isolated. A lot of times I would just call them or do a video chat just to say hello. They were happy with that."

Mind and body

The value of those informal connections continued even when patients could return to the office, she said, and that underlines an aspect of PCP work that many people might not realize: They are trained to help patients with mental and emotional struggles as well as physical wellness.

"We have been trained on how to diagnose some of the more common mental health illnesses like depression, anxiety, bipolar disorder and even recognizing schizophrenia," she said.

A PCP can provide treatment options for those conditions or might refer a patient to a mental health specialist, depending on the situation.

The main thing PCPs do is help patients achieve the "best version" of themselves, she said.

"I feel rewarded to be able to have this relationship with the patients, not only taking care of their physical needs but that friendship is important to me," she said. "It's a professional friendship but it's a great relationship."