Take this job...and LOVE it...

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As educators we wear many hats... We are...

- Clinicians
- Mentors
- Students
- Colleagues
- Informal and/or formal psychiatrists
- Moms, Dads, wives, husbands, partners...
As clinicians and educators

• We educate our students
• We educate our patients
• We educate our peers...
• We educate ourselves
We are lifelong students—we have to stay at least one step ahead of our students 😊

• Learning doesn’t stop as the door slams behind you on your way out of nursing school or graduate school...
• On-line, in the classroom, journals, on-the-job, back-to-school, professional CE seminars
We also learn from our patients...

• Ms. Bancroft, can I tell you a joke?

• Ms. Bancroft, have you ever stuck your finger in your belly button?

• My experience with a student giving her first injection
Over the years of our career...

• We have come to realize that many things have **changed** since we were students...whether it’s been 45 years ago or 4 to 5 years ago...
Embrace change as a challenge and not as a chore...

• The field of medicine and nursing is one of the fastest changing fields in the workplace

• ACCEPT THE FACT THAT NOTHING STAYS THE SAME...

• Well, maybe some things haven’t changed in 45 years...

• Nor will some things EVER change...

• As educators and nurses—we have to continually improvise with the changing times...
So what are some of the changes that have occurred over the 45+ years in nursing?

- We used aspirin for everything...And NOW?
- Not for fever...not for chronic pain...except JRA in kids
- Used today for the prevention of coronary artery aneurysms in KIDS with Kawasaki’s disease
- acute chest pain—chew it—5 minutes to inhibit 50% of the platelet aggregation effects vs. 12 minutes if swallowed; 12 minutes for 100% inhibition if chewed vs. 26 minutes if swallowed
- 81 mg daily to prevent colon cancer in high risk patients (family hx, or previous history)
- reduce the risk of pre-eclampsia
- What else?
Aspirin and primary prevention of acute coronary syndromes...

• but...something else is new...the dose is dependent on weight
  • Less than 70 kg/154 lbs = 81-100 mg/day
  • Greater than 70 kg/154 lbs – 325 mg/day

• Rothwell PM, Cook NR, Gaziano JM. Effects of aspirin on risks of vascular events and cancer according to body weight and dose: analysis of individual patient data from randomized trials. The Lancet, July 12, 2018)
Speaking of weight gain: Gender differences in weight issues are really annoying...if you’re a woman, that is...

• Guys have more lean muscle mass = faster metabolism and more calories burned; Men burn more calories just “sitting” and listening to this presentation than the woman sitting next to you listening to this presentation.

• Female body composition? More fat tissue—hips, thighs, and breasts; fat increases in size just “sitting” there—hahaha...not really, but it sure doesn’t burn more calories...

• Ladies... Word to the wise: Don’t EVER bet a man that you can lose more weight than he can in a given time period. YOU WILLLOSE.
Gender differences

• Case in point: A man and a woman who are both sedentary, both 55 years of age, both 5’8”, both 110 kg (242 pounds), and both have a Body Mass Index (BMI) of 37

• HUH? What’s the BMI?

• BMI (Body Mass Index) chart— height in inches matched with weight in pounds...5’8” 242 lbs –BMI of 37
  “According to this chart, I’m just too damn short.”
Let’s go back to our couple, sitting on the beach...

• If the two of them just sat on Laguna beach together for one day, and did absolutely NOTHING ELSE, the man would lose 300 more calories than the woman...

• SERIOUSLY????

• (Baugh M. Sports Nutrition: The Awful Truth, 2005)
HOWEVER...GUYS...WORD TO THE WISE...

• I wouldn’t be too quick to brag about it...
A recent study has found that:

- **Women who carry a little extra weight live a helluva lot longer than men who mention it.**
So what are some of the other changes that have occurred over the 45+ years in nursing?

- We gave meperidine (Demerol) for pain PRN (too little, ...then ATC...then finally PCA...and NOW?
- Demerol is no longer used; PCA pumps are the norm
- Oxycontin became the "go to" pain pill—"they" said it wasn’t addicting..."they lied"...and the opioid crisis has become a nightmare
- Oxycontin was $80 per pill; heroin was $10 for a “fix”...
- Synthetic opiates have take over (cut with heroin)--Fentanyl and carfentanil (elephant tranquilizer)
Lethal doses of carfentanil vs. size of a penny; heroin vs. Fentanyl lethal doses (2016--fentanyl overdoses became the #1 cause of death from drug use in the U.S.)
So what are some of the other changes I have noticed in my 45+-year career?

• We watched patients “complete” their stroke...washcloths were the mainstay of treatment for spastic “claw” hands—HUH?

• Today? Thrombectomy within 24 hours of the stroke...Stent/clot retrievers yank the clot out before permanent neurologic damage

• ACT FAST because...
TIME IS BRAIN

• In the first minute of a stroke, your brain loses an estimated $1.9$ million cells, resulting in the loss of $14$ billion synapses and $7.5$ miles of pathways—what you would lose in three weeks of normal aging. (January 2006 Stroke)

• But the loss continues every minute the stroke is left untreated. If a stroke runs its usual $10$-hour course, it can kill $1.2$ billion nerve cells—what a normal brain loses over the course of $36$ years. (UCLA neurologist Jeffrey Saver) (Interview) 2007:34(2).
Time is BRAIN!! Act FAST

• Facial symmetry – ask the patient to smile. Does one side droop?
• Arms--raise both arms ... does one arm drift downward
• Speech—can a person repeat a single sentence? Is the speech slurred?
• Time—call 911 (U.S. and Canada) (New Zealand it’s 111; there are lots of 112s); however, in CHAD? 2251-4242—seriously?) immediately if you suspect a stroke; note the time the symptoms began; travelers—note the number in your country
So what are some of the other changes I have noticed in my 45+-year career?

• IV bags with plastic tubing—counting drops with the little thumb roller on the IV tubing...and now?
AND NOW?

• The next time someone says: “You’re just a nurse...
• ...remember there isn’t a physician alive that can set this ‘shit’ up, let alone monitor it...”
So what are some of the other changes I have noticed in my 45+-year career?

• New Names for Old Conditions... heart attacks... Now? ACS
• Heart attack—either subendocardial or transmural; myocardial infarction, either STEMI or Non—STEMI; acute coronary syndrome—seriously?
• What do people still call it? HEART ATTACK...
• Timing is everything—biological rhythms and ACS--An ACS in the a.m. causes more damage than any other time of day...--20% more tissue death between 6 a.m. and 12 noon than any other time of day (proteins called salvage kinases usually protect the heart from damage...less salvage kinases produced in the a.m. -- (Ibanez B. Heart DOI:10:1136/hrt.2010.212621)
And the new ED is the new name for the old “impotence”

• Sildenafil (Viagra)(24)
• Tadalafil (Cialis)(36-48)
• Vardenafil (Levitra)(24)
• Avanafil (Stendra)(24)
Remember...

• The combination of an ED drug with a nitrate can be deadly
• Tell the whole truth, nuttin’ but the truth!!
• “Two hours ago, but don’t tell my wife…”
• 2nd interesting case—brand name for tadalafil for pulmonary arterial hypertension is Adcirca; 62-y.o. female with chest pain arrived in ER; ER doc asked her about medications—”Only Adcirca” she said...gave her NTG...YIKES!
• The case for teaching patients generic names!
Old name? Heartburn; New name? GERD

• Old causes of heartburn? Spicy foods, peppermint, chocolate, tomatoes
• New causes of heartburn? DRUGS, DRUGS, and more DRUGS
• NTG (nitric oxide opens the LES), Calcium channel blockers (open the LES), anti-cholinergic drugs (open the LES), tadalafil (boosts nitric oxide and opens the LES) (Cialis)
• Any other new causes of GERD?
• BEFORE YOU TREAT!!!

• Spanx under-garments, in some women, are so tight that they can trigger acid reflux, bloating, gas and bladder issues as they compress the stomach, intestines and bladder. Those at highest risk already have problems with gastrointestinal and bladder issues. (John Kuemmerle, MD, Gastroenterologist, Virginia Commonwealth University Medical Center, Richmond, VA (2014)
So what are some of the other changes I have noticed in my 45+-year career?

• There were only 2 “VD’s” (Venus, goddess of LOVE) when I was a nursing student.
• Gonorrhea and syphilis...” TODAY?
• Everything with an H _____ V in it...HPV, HIV, HSV, HBV, (HCV—not a lot but some)
• Yadda, yadda, yadda...
Drug-resistant gonorrhea

• Oral transmission!
Reduced risk with condom use with oral sex, but...

- 26-year-old woman with s & s of acute appendicitis
- Surgery removed her appendix with a condom blocking the opening

- Ya’ GOTTA love this job!
So many advances in the world of medicine...why can’t we figure out a better prep for the colonoscopy?

• Time to drink the Prep...split dosing...why?
Dietary fiber and colon cancer protection

• It’s not just aspirin!
• Pump up the fiber
• Get the food IN, and get the food OUT!
The GI transit time: How long does it take to get a meal into the toilet?

• Hard to tell since what goes down from the plate does not look like what comes out in the toilet
• What is stool? Bacterial carcasses, water, undigested fiber and a kernel of corn
• Fatty foods stay in the GI tract for a longer time trigger inflammation and subsequent DNA changes
• GI (gastrointestinal) transit time...should be less than 72 hours
• How can you tell what meal is hitting the toilet bowl? Eat corn tonight...
• When you see the first kernel?
I don’t know if I want to do this job anymore...

• Ya’ think the grass is always greener on the other side?
It’s NOT...Back in the day...Diabetes (Greek) for “to siphon”

• In the 13\textsuperscript{th} century it was referred to as the “pissin’ evil”...

• “\textit{Doc, I’m peein’ too much}…”
Adding a descriptor to the word “diabetes”—either “mellitus” or “insipidus”

- In 1674, Dr. Thomas Willis, a renown English physician declared that clinicians should use their special senses to diagnose patient maladies
- He stated: “Taste thy patient’s urine, for if it be sweet…”
- Of course, Dr. Willis DIDN’T do the tasting…
‘Mellitus’ was added by Dr. Thomas Willis in the 17th century

• “NURSE!! Take a swig of that…”

• “Love to, Dr. Willis…”
Diabetes Mellitus vs. Diabetes Insipidus

• If it tasted sweet it was called Diabetes Mellitus— mellitus means “sweet” or “honeyed”

• If it had absolutely NO taste it was called Diabetes Insipidus— insipid means “tasteless”

• It took another 217 years to finally discontinue using “thy special senses”.

• Taste tests for “sweetness” were finally discontinued 217 years later-- 1891

The grass is NOT always greener...
Said every nurse everyday...

• “I wear bodily fluids that are NOT mine, I work weekends and holidays, I get screamed at and I have my hands in other peoples orifices. Tell me again how hard you work?”
Back to the many hats we wear... We’re parents...
We’re “psychiatrists”…

• Not formally trained, of course, but flying by the seat of our pants...

• Our patients are tired, anxious, depressed, apathetic, grouchy, ecstatic (rarely)...and we do our best to cope with every mood

• So, here’s your 10 minute psychiatry lesson on depression (as taught to me by a psychiatrist in my NP program)...
If a patient has all sorts of disparate complaints

- My back hurts
- I have a pimple on my chin
- I’m 3 pounds too heavy
- This hair cut is too long on the left side...

- REMEMBER the “10 minute rule...”
- If within 10 minutes...you’re depressed--that’s the diagnosis
The “If within 10 minute” rule expanded...

• If within 10 minutes you’re laughing...they’re bipolar
• If within 10 minutes you’re scared...they’re psychotic
• If within 10 minutes you want to choke them...they’re borderline personality
Within 10 minutes of turning on FOX news and you’ll immediately see an individual that fits a few definitions in the DSM V—

• Definition of psychosis:

• “Disruption of the ability to distinguish between the internal experience of the mind and the external reality of the environment...”

• Not to mention he’s also a...pathological liar
Could we actually be the crazy ones?

• *The statistics on mental disorders are that one out of every four persons is suffering from some form of mental illness.*

• *Think of your three best friends – if they’re ok then it’s you.*
And sometimes? Our patients make US crazieeeeee... 

• “OMG. A patient almost died in front of me today. But then I counted to 10 and put the scissors back in my pocket. She never even knew.”
The benefits of humor and our job...

• Keeps us mentally loose, limber, and creative
• Each humor event you experience makes you grow a little bit—the brain has expanded and taken on new connections (plasticity)
• Humor is a wonderful way to reduce the stress of our jobs—it decreases circulating cortisol (the hormone of stress), increases serotonin (the neurotransmitter of happiness) and decreases depression
• Humor boosts the immune system
• Boosts memory!!
BOTOX and camels

• **LMAO.** The judges were set to hand out millions of dollars in cash prizes to the breeders of the most toothsome camels in a popular beauty contest in Rumah during Saudi Arabia’s annual King Abdulaziz Camel Festival. However, shortly before awarding the cash, it was found that some owners had cheated by injecting the upper and lower lips, nose and jaw of their camels with Botox. Twelve camels were summarily disqualified from the pageant for ”using”...HAHAHAHAHA...you just can’t make this stuff UP!! Seriously. Dying here. (January 24, 2018 BBC News
Find humor in patient experiences...

• NP student: How are your periods?
• Patient: ok, I guess.
• NP: Are they regular?
• Patient: I guess so.
• NP: What kind of flow do you have?
• Patient: HUH?
• NP: *What kind of FLOW do you have?*
Humor reduces high cortisol levels and the toxic effects of stress...

Q: What did the nurse say when she found a rectal thermometer in her pocket?

A: Some asshole has my pen.
We’re colleagues...

• The art of healing is a collaborative art—the “team” needs to work well together

• The team? Professors, Clinical Nurses, Physicians, RDs, PTs, Respiratory therapists, Housekeeping, Social Workers, Radiology, Pharmacists...
This gets you NOWHERE...Fast.
We’re leaders...

Lead by example

• Leadership is action, not position...
SO, wearing all of these hats can be quite the juggling act

• FIRST PRIORITY?

• YOU

• You need to be taking care of yourself in order to be an effective caretaker of everyone else--your patients, your family, your friends, your friends friends, your pets, your friends pets...
To be effective in all of our roles, we need to learn how to deal with stress

• “Stress management is the key to maintaining a healthy balance in life and the key in preventing career burnout.”

• In 2012, 65 percent of Americans cited work as a top source of stress, according to the APA’s annual Stress in America Survey.
Barb, I can’t deal with all of this...

• I’m so totally stressed out...
Uh. Huh.

• “Stress management is the key to maintaining a healthy balance in life and the key in preventing career burnout.”

• Stress is contagious!! You’re stressed? So are your pets, your kids, your spouses, your students! MIRRORING...
Start HERE

Stress Reduction Kit

Bang
Head Here

Directions:
1. Place kit on FIRM surface.
2. Follow directions in circle of kit.
3. Repeat step 2 as necessary, or until unconscious.
4. If unconscious, cease stress reduction activity.
Chronic stress takes a huge toll on the body

• When stress becomes chronic, cortisol takes over as the hormone of chronic stress
• Cortisol levels today are 50% higher than they were in 1970...
Chronically elevated cortisol levels boost inflammatory mediators...

• Inflammation is “bad” when the word “chronic” is used as a descriptor. Chronic inflammation contributes to:
  • Cardiovascular disease
  • Alzheimer’s disease
  • Depression
  • Diabetes
  • Metabolic syndrome
  • Cancer
  • Premature aging
Chronic stress/inflammation accelerates aging...

• Shortens telomeres on the chromosomes
• As the telomeres shorten, so does your cellular lifespan
• In addition to chronic stress, what else contributes to rapid telomere shortening?
SUGAR shortens telomeres! Soda being a major contributor to the intake of sugar in the “average” American...

• A can of non-diet Coke contains 39 grams of carbohydrates, all from sugar. Regular Coke has 63% market share of the combined diet and non-diet Coke market

• Average number of cans consumed per person, per year in the U.S. is 266 cans or 14.4 pounds of sugar

• Using the July 2009 US Census Bureau estimate of the total US population at 307,006,550, this translates to 2.0 billion kg or 2.21 million tons of sugar from Coke per year.

• Cigarettes, cannabis, fast food diets
Chronic stress and the brain

• A healthy brain maintains a balance between synaptoclastic (breaking down synapses) and synaptoblastic (building up synapses) factors

• Chronic stress/chronic inflammation/insulin resistance/aging— all increase the synaptoclastic activity (Type 2 diabetes is a combination of aging, chronic inflammation and chronic stress...in fact, just having blood sugars in the upper limits of normal increases synaptoclastic function—chronic stress alone can elevate blood sugars into the high normal range)

• SOOOOO...how can we change the balance in favor of synaptoblastic function to protect our brain from chronic stress?
MEND program: Metabolic Enhancement for NeuroDegeneration (Dale Bredesen’s program (UCLA Professor of Neurology, Easton Laboratory for Neurodegenerative Disease Research): How to boost synaptoblastic function

- Meditating twice a day and beginning yoga to reduce stress—decreases cortisol, increases synapses
- Dozens of studies show that mindfulness, prayer, and other meditative practices are great ways to reduce stress and cortisol levels.
MEND program: Metabolic Enhancement for NeuroDegeneration (Dale Bredesen’s program (UCLA Professor of Neurology, Easton Laboratory for Neurodegenerative Disease Research) : How to boost synaptoblastic function

• One of the simplest ways to meditate is to sit comfortably, either in a chair or on the floor, and to focus on your breath as it passes in and out of your body. If your mind wanders, don’t worry; simply refocus on breathing. Do this for 10 minutes each day, increasing your time as it’s comfortable. You can also meditate while walking or doing some other relaxing activity (like fishing); the point is to empty your mind and focus on your breathing.

• As a general rule, you’ll feel the benefits more strongly the longer you practice—but at least one study suggests that this ritual can begin lowering cortisol in as few as four days.
MEND program: Metabolic Enhancement for NeuroDegeneration (Dale Bredesen’s program (UCLA Professor of Neurology, Easton Laboratory for Neurodegenerative Disease Research): How to boost synaptoblastic function

• sleeping seven to eight hours per night, up from four to five—maintains synapses, boosts neurogenesis, decreases insulin resistance—

• the glymphatic system; twice as effective at cleaning out beta amyloid protein during sleep as during it is during wakefulness.
Having trouble sleeping? Get rid of the blue light blues

• Nearly everyone in a survey conducted by the National Sleep Foundation in 2011 used a television, computer, cell phone or other device within 1 hour of going to bed at least a few nights during the week.

• 89% of adults and 75% of kids have at least one electronic device in their bedroom, with a significant number answering texts and sending texts after initially falling asleep (Jabr F. Blue Light Blues. Scientific American November 2016)
Blue light blues

• Interacting for just 2 hours with a computer screen before bedtime is enough to prevent the typical nighttime rise in melatonin—

• E-readers vs. paperback book readers prior to bedtime—e-readers were more alert, took longer to fall asleep and slept less deeply than those who read a paperback book

• Use orange glasses to read eReaders at night
Other helpful hints for a good night’s sleep

• Close all Facebook, Instagram, Pinterest, Twitter... two hours before bedtime...why?
• Computer screens, TV screens, cell phones, iPads, e-readers are all bright artificial LED lights that wreak havoc with sleep patterns
• Blue light characteristic of morning and afternoon sunshine suppresses melatonin production more than any other visible wavelength, leaving us more alert
• Dim, orange glow in the evening boosts melatonin production
• f.lux—an app that makes it easier to wind down at night
MEND program: Metabolic Enhancement for NeuroDegeneration (Dale Bredesen’s program (UCLA Professor of Neurology, Easton Laboratory for Neurodegenerative Disease Research) : How to boost synaptoblastic function

• reinstate hormone replacement therapy, even if previously discontinued
MEND program: Metabolic Enhancement for NeuroDegeneration (Dale Bredesen’s program (UCLA Professor of Neurology, Easton Laboratory for Neurodegenerative Disease Research): How to boost synaptoblastic function

- optimizing oral hygiene by flossing and using an electric toothbrush
- Alzheimer’s and periodontal disease—chronic inflammation with *Porphyromonas gingivalis*
MEND program: Metabolic Enhancement for NeuroDegeneration (Dale Bredesen’s program (UCLA Professor of Neurology, Easton Laboratory for Neurodegenerative Disease Research) : How to boost synaptoblastic function

• exercising for a minimum of 30 minutes, four to six days per week*
• OUTSIDE...is best...flora and fauna, parking lots and
• BTW, that 30 minutes can be 3-10 minute sessions...
• *a hormone produced by bone during exercise boosts memory storage and retrieval (at least in mice)
MEND program: Boosting synaptoblastic function...dietary recommendations

• Eliminate all simple carbohydrates, gluten and processed food from the diet, and eating more vegetables, fruits and non-farmed fish

• **Fasting** for a minimum of 12 hours between dinner and breakfast, and for a minimum of three hours between dinner and bedtime

• taking melatonin, methylcobalamin* (B12)(1000 mcg/day), vitamin D3 (1000 IU/day), fish oil (1 gm per day/1000 mg); and coenzyme Q10 each day

• *No evidence that methyl is any better than cyanocobolamin at this point
If you don’t believe that stress contributes to the aging process—inside and OUT?

• Check out our last few Presidents! SLICK WILLY, W, Obama, and...
STRESS and memory problems—TMI out there today...

- TMI, TMI
- Google-ing
- Facebook fanatics
- Pinterest
- Instagram
- You Tube...
- The twitterization of our culture
- How much information can you assimilate?
- Multi-tasking reduces your IQ by 8 points...
- OMG! WTF?
On the other hand, marijuana only reduces your IQ by 4 points...

• And my point is?
• It’s better to smoke dope than to multi-task...
That’s it...I’m finished with nursing!!

• So, if you feel like you’ve hit a brick wall...
Not so fast...

• One of the most amazing benefits of being a nurse today is that there are many paths to take in the field of nursing...if one is waaaay too stressful and you are completely burned out (educator, 😊)...consider a career change

• But you don’t even have to leave nursing—

• NP, CNS, Nurse anesthetist, Legal Nurse Consultant, Management (really?)...so many different and diverse opportunities—outpatient, inpatient, home care, palliative care, hospice care, ICU, PACU, ED, Peds, LTC, and MORE...rep for Healthcare companies...on, and on, and on...
STRESS FREE = HEALTHY!!

• Taking care of yourself requires you to set priorities...
• No excuses...
• I don’t have time for my mammogram
• It’s impossible to get my flu shot this week...
• I can put the colonoscopy off another year...
Regular check-ups are a priority

• Blood pressure screenings
• Hemoglobin A1C
• Vaccines
• Cholesterol testing
• Vitamin D levels
• TSH, especially the ladies
• Prostate exams
• C’mon ladies…don’t put off your mammograms…
In summary, stay healthy and keep loving the job

• longer and longer...
• Still loving my job after all these years...
• Plus the fact that NONE of us has enough money to retire!!!
Thank you. We’ve all come a long way together.

• Congratulations!
• 2018 Gerber BABY Lucas Warren
• KUDOS to GERBER

• Barb Bancroft, RN, MSN, PNP
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