

# Healthcare is selfcare.

## THE PODCAST



### Transcript - Episode 4: Time for a tune-up.

**Aloysius Ballard** Host      **Tana Cooper, DO** Family & Occupational Medicine Physician

**Ballard:** If there's one thing we've learned it's that taking care of ourselves is key. And there are a lot of ways to do that. Selfcare has come to mean taking time for the things that make us happy, for the things that make us feel good, and for the things that keep us healthy. Healthcare is Selfcare: The Podcast presented by Singer River Health System focuses on candid conversations with medical professionals aimed at improving health and saving lives. So sit back, grab a cup of coffee, and prioritize you.

Welcome to Healthcare is Selfcare Podcast—I am today's host, Aloysius Ballard. I am the Digital Coordinator here at Singer River Health System, and I have a great guest today. Go ahead and introduce yourself.

**Cooper:** Hi, I'm Dr. Tana Cooper, I am with Singing River Cedar Lake Clinic in Biloxi on Cedar Lake Road. I'm a Family Medicine and Occupational Medicine Physician.

**Ballard:** All right, doc. Well, let's just get right to it. So today we're going to talk about why do I need a primary doctor? Can you tell me what is the role of a primary doctor?

**Cooper:** I consider myself the captain of the ship—so my job is to make sure that you are taking the best care of yourself, knowing what that means based on your age, which is different obviously as we get older. More things can go wrong, warranty starts to run out on the parts—so different screenings. And then when you have a problem, making sure I get you on the right track to the right doctor or the right specialist that can take care of that. I also think it's really important to have one person that knows the most about you. So I may not have

all the answers, but I'm going to be your first step to make sure we get the answers you need and that it's followed up on. So I also think of myself as the gatekeeper. I recently had a patient who was seeing a doctor at a different health system that left the area—she had a cancer that needed to be taken care of and she was just waiting for a call. So when I noticed the gap, I made sure my staff called to follow up and ask “What's going on with this? Have you heard from the other doctor?” And she said, “No, I've just been sitting waiting by the phone.”

So I've made sure that because I have a list of people... and my OCD kicks in and I have to make sure that these people are taken care of, especially when it comes to cancer. It was only a two week delay, but that's two weeks too long for me.

My role as a primary care doctor is making sure that things are followed up on as well. Because not everybody knows that they're about to get lost in the system.

**Ballard:** Right. Now, I love how you just explained that, because for a lot of our listeners, they may not understand the level of care that a primary doctor has. And in that, you just said a lot of things that I want to unpack, but we'll get to that. Let's talk about the spectrum of care, because for you to know the most about a patient or guest—more than anybody else in their medical field—that means you have to really start to understand their health and the status of a lot of things that are going on. So what all do you cover?

**Cooper:** So the role of a Primary Care Doctor, and in general, we're talking about pediatricians, family doctors, and internal medicine doctors...

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OB/GYNs as well, but that's only 50% of the population. Primary care is having to know a little bit about everything. So when you go to see the cardiologist, they're concentrated on your heart. Now, of course, they care about your lungs and they care about your colon cancer, but that's not their job. So it's my job to make sure I have my eyes on all of you, and making sure that you're going to see everyone you need to see, and that all is taken care of. Depending on the provider, depends on what ages they take care of. But in general, internal medicine take care of 18 and over. Family medicine doctors can take care of people of all ages. I usually limit myself to five and above because I didn't spend a lot of time in training in pediatrics. And we have some great pediatricians in the area. So I know when to stay in my lane.

And I'll let the pediatricians do that job. But primary care really encompasses everything.

Every doctor has their own scope of what they feel comfortable with. I have a lot of extra training in dermatology and I'm a skin cancer survivor. So I can spot it from a mile away. I'm also an asthmatic and I have allergies, so those are certain things that I especially can relate to patients with and know how to take extra care. Women's health, of course being a female. I did a lot of women's health in residency and still do it in my practice. So I think that different doctors have different things that they can concentrate on. But in general, your primary care doctor knows a little bit about everything.

**Ballard:** You mentioned that you start generally around age five and up. A lot of us don't really understand the proper way to transition from a pediatric doctor to a primary doctor. How and when do I move to a primary doc?

**Cooper:** So a lot of times the parents are the ones who take your hand at 13 and say, "Okay, you're done with sitting on the train bed and Snoopy on the walls." A lot of it happens during puberty—that's

when a lot of people will want to transition from seeing the pediatrician to seeing an adult doctor, as young adolescents and teenagers would put it.

And I think that's a great time because I think that there are a lot of health issues that used to be strictly adult issues now affecting our adolescents—diabetes, high blood pressure, high cholesterol. And so I think that we, as family doctors, we are more trained in that than probably the pediatricians because they didn't have to deal with that. Now, they do, unfortunately.

But, you know, that's when we start talking about sex, drugs, and rock 'n roll. Sometimes that's hard to talk about with that pediatrician that's known you forever and maybe still takes care of your younger brother or younger sister.

A lot of the parents will then say, "Okay, we're going to transition to see Dr. Cooper." A lot of times it's just for a sick visit—they get a cold. Unfortunately, that's when a lot of adolescents get lost. They just come in when they're sick. They're no longer doing their wellness exam every year and making sure that they're going to the dentist, and we talk about seatbelt use, drinking and driving, cell phone use, and those social things that are very important still at that age. We talk about them as adults as well. The easiest thing is, you know, for an adolescent to talk to their parents.

They'll probably end up seeing their parent's physician. It's usually how it goes. Now, once you're an adult, then all you have to do is just pick up the phone, call the office and make an appointment. It's that easy.

I mean, I have to admit, I saw my pediatrician until I was 23 and he kicked me out. He said, "You're going to medical school, you're no longer allowed to see me." And that scared me to death because he was the only doctor that I really knew growing up. So I understand that it is scary and that's where sometimes going to somebody that your parents know can be less scary because there's a relationship there.

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**Ballard:** Now, once we get that phone call in and an appointment set up, what are some main things that we should have checked out by our primary doc once we establish that relationship?

**Cooper:** I always say there's two types of first appointments that you have with the doctor. The first one is something's wrong with you. You know, you've sprained ankle, your allergies are flared up... something like that. If there's nothing wrong with you and you want to establish a doctor, the best thing to do is schedule a wellness exam and your insurance covers that once a year. Based on your age, there's certain bloodwork and screening exams that we would do. But we discuss other things—you know, how much alcohol are you intaking, what's your diet like? You know, there's all these fad diets out there. Are you vegan? So are you getting enough nutrients and vitamins? Are you exercising? And what does that mean? You know, drugs, they're out there. People are doing them. Some more and more are becoming legalized, so we have to talk about it that and see what lifestyle you're leading.

I always say it's just a good way to have a roadmap of "This is what's to be coming up in your life. This how often you should be doing this stuff." And it's a good way to get a general roadmap of your own health. We talk about family history, which is really important. If you don't know your family history, it's time to start asking and figuring out, because those things we see pop up younger and younger—things that affected my grandparents started affecting my parents 10-15 years younger and are affecting my generation 10-15 years younger. Whether it's diabetes or cancers, we have to look at that too and make sure that we are screening you appropriately based on your family history.

**Ballard:** Now we offer a very unique service, to pair to that, right? At Singing River?

**Cooper:** Yes. Singing River has in some of their offices and at the Imaging Centers, a genetic screening tool that we do. If you qualify, based on your family history and personal history, there is a test that most insurances cover (100% or at a low cost) and it covers 34 different genetic markers that would make you more susceptible to certain types of cancer. We offer this at my office and we usually screen that on new patients. And then if you're there for a specific issue that might potentially be a cancer situation. And obviously at your wellness, we'll go through your family history again and see. Because family history changes, it's an evolving thing. "Has anything changed in the family history? And do you qualify for this?" It's a simple blood or saliva test and it checks for 34 different markers. Not everybody is positive. A very low percentage is positive. But if it is positive, we would change what kind of screening we do on you in the ages that you would qualify for that screening.

**Ballard:** Let's talk about blood pressure. Why is blood pressure something that you and your primary doctor should be aware of?

**Cooper:** Blood pressure is a silent killer. People will say, "Well, I don't feel bad." Well, your blood pressure is going to sneak up on you. And it's going to raise a little bit, a little bit, little bit. If I see a huge raise, then something has gone on. I think especially post-COVID, we have seen hypertension, significant hypertension in people that did not have it before, and certainly a younger population because everybody's getting COVID. It's not just older individuals. So knowing what your blood pressure is, watching it over the years, which we would do at every visit, we check it, is important. If every time you're sick and you come in, I don't count that as an accurate blood pressure.

So, I would say checking it at home, if we notice it's elevated and, you know, some people hate to commit themselves to taking medicine every day, but sometimes genetics kick in and there's nothing you can do about it. But certainly diet, exercise, watching the salt and caffeine intake are

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things that you can do. But when genetics kick in unfortunately that's where I come in with the script pad and we got to start you on medication. Because untreated hypertension over the years will cause eyesight issues, kidney issues, heart issues, brain issues because your blood vessels are too tight. So blood is not getting to the appropriate areas and it has to work too hard to get there.

**Ballard:** I thought about this earlier when you were speaking in the conversation. Really, your primary doctor is almost like your attorney—medically. Really, there's nothing that you should withhold from me, so I can protect you on all fronts. Like, if you're smoking, if you're drinking—because a lot of times young adults will hide things from their parents or they may not say everything that they're doing—but for you to properly do your job, I need to be as transparent as possible about how I live. Is that correct?

**Cooper:** Absolutely, yeah. It doesn't help to try to put on a good show for me because then I can't help you. I don't know what's going on. If you tell me something's only been bothering you a week and it's really been a year because that changes my meter of how much I care about something. Like, if you've had blood in your stool for one day, I may not think the most of it just yet. But if it's been there for a year, I have alarms going off. So that's where it's very important to be as honest as possible.

Especially about your social history.

I don't care. I'm not going to judge. I've heard everything twice, every day. Just be honest with me about it—your sexual history, about drugs you've used in the past, because that might make you susceptible to certain diseases that we need to screen for—anything that you might think is pertinent or if you're not sure it's pertinent, bring it up. Just bring it up. And I'll say, "Okay, we'll make note of that." It's not a mark in your chart with big 'X' or anything because we all haven't lived as a nun.

**Ballard:** All right. Well, this is the part of the show where I want to shift gears a little bit. So I want to start out with something simple. Where did you go to college? Where did you do your residency?

**Cooper:** I grew up in central Kentucky, a small, picturesque town...very rural! And then I went to college in South Carolina at Furman University. It was a small liberal arts college and loved it, but went back to Kentucky and went to graduate school at Western Kentucky University. And then went to medical school in Pikeville, which is in Eastern Kentucky. So I've been all over Kentucky. And then I went to residency in Detroit, Michigan where it was very cold. A huge city. I loved it there. I had the best education and the best training. I had the best friends up there, but I cannot do that weather. And so I moved down here almost 13 years ago and this is home for me.

**Ballard:** What is the most played song on your playlist?

**Cooper:** Oh my gosh, probably "The Way You Make Me Feel" by Michael Jackson. I am a huge Michael Jackson fan. Always have been.

**Ballard:** Seriously?

**Cooper:** I remember when I was five or six years old—I was hiding behind the couch—watching *Thriller* when it came on TV. Because that's how you watched music videos. I mean, it came on ABC or something. And I just remember being behind that couch watching that and being in awe of it. I just grew up a huge Michael Jackson fan. Yeah. I would have to say, "The Way You Make Me Feel."

**Ballard:** That is a great way to end this podcast. Before we get out of here, is there anything you want to say to our listeners before we go?

**Cooper:** I would strongly encourage you to—healthcare is selfcare—I think that's really important that Singing River is pushing that because we have put things off because of COVID. My colleagues and I have talked about how in the past couple of months we have seen such bad disease—whether it's diabetes, hypertension, or cancer, it's just

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amazing. There seems to be this backlog from us putting things off during the past couple years. So, if you don't have a primary care doctor...get one. Start with a wellness exam. If you have one already, go in and get your wellness exam. Don't put things off. We have to take time off work to take care of ourselves. And I get it.

A lot of people wait until they're on their deathbed to come to the doctor, but sometimes that's too late and sometimes we've done damage we can't undo and doctors can only do so much.

So I always say you have to be 50% of this relationship with me. There's going to be times that I'm going to be 100% of it for you when you can't hold yourself up...but I need you to be at least 50% in the beginning for us to form that relationship and get you on to the path of good care and longevity.

**Ballard:** So how can they get in touch with you, doc?

**Cooper:** So it's as easy as calling the Singing River Medical Clinic-Cedar Lake at 228-205-6814. Schedule a new patient appointment and we start there.

**Ballard:** Well, Doc, I appreciate you taking time to sit down with me for the podcast. It was a great conversation. Thank you.