Healthy People Newsletter

JANUARY 2019

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ONEDIGITAL
HEALTH AND BENEFITS

This newsletter is interactive! Click a topic to jump directly to the article.

National Health Observances

JANUARY | 2019

Birth Defects Prevention Awareness Month

Blood Donor Month

Cervical Cancer Screening Month

Cervical Health Awareness

Glaucoma Health Awareness Month

Healthy Weight Week (21-25)

Drug & Alcohol Facts Week (22-27)

IV Nurse Day (25)

BETTERSAFE
WELCOA'S ONLINE BULLETIN FOR YOUR FAMILY'S SAFETY



VACCINATE, VACCINATE, VACCINATE!

The Benefits & Importance of Immunizations

There's no way to prevent all contagious diseases and sicknesses, but we are lucky enough to live in a time when vaccines can protect us from many of the most serious illnesses. Staying current on your shots helps you—and your neighbors—avoid getting and spreading disease.

Vaccines have led to large reductions in illness and death—for both kids and adults—compared with the "pre-vaccine era." Over the last 20 years vaccines have prevented millions of illnesses and hospitalizations, and hundreds of thousands of deaths in the U.S. alone.

HOW DO VACCINES WORK?

Vaccines harness your immune system's natural ability to detect and destroy disease-causing germs and then "remember" the best way to fight these germs in the future. Vaccination, or immunization, has completely eliminated naturally occurring smallpox worldwide—to the point that we no longer need to get shots against this fast-spreading, once-deadly disease. Polio too has been eliminated in the U.S. and most other nations as well, thanks to immunizations. Poliovirus can affect the brain and spinal cord, leaving people unable to move their arms or legs, or sometimes unable to breathe.

Experts recommend that healthy children and teens get shots against several diseases. With this growing list, many disabling or life-threatening illnesses have significantly declined in the U.S., including measles, rubella, and whooping cough. But, unlike smallpox, these disease-causing germs, or pathogens, still exist around the world.

These days, the risks of not being vaccinated in a developed country, like the United States, may seem superficially safe because of low rates of infection due to vaccination and other advances in public health. But we live in an era of international travel where we can be exposed to mobile pathogens. So even if you don't travel, a neighbor or classmate could go overseas and bring the disease back to your area.

When enough people are vaccinated, the entire community gains protection from the disease. This is called community immunity. It helps to stop the spread of disease and protects the most vulnerable: newborns, the elderly, and people fighting serious illnesses like cancer. During these times, your immune system is often too weak to fend off disease and may not be strong enough for vaccinations. Avoiding exposure becomes key to safeguarding your health.

There's a huge benefit to all of us getting the recommended vaccines. Number one, vaccines protect you. But they also limit the presence of disease-causing entities that are circulating in the community. So, you're helping to protect individuals who may not be capable of protecting themselves, for example because they are too young to get vaccinated.

Researchers are also working to improve existing vaccines. Some vaccines require a series of shots to trigger a strong immune response. The protection of other vaccines can fade over time, so booster shots may be needed. Some, like the flu vaccine, require a shot each year because the virus changes so that the vaccine no longer protects against new strains. So keeping up with the latest flu vaccines is important.

Ask your doctor's office whether your vaccinations are current. You may also find records of vaccinations at your state health department or schools. If you can't find your records, ask your doctor if it's OK to get a vaccine you might have received before.

Most side effects of vaccines are mild, such as a sore arm, headache, or low-grade fever. Help your community keep diseases at bay: Stay up-to-date with vaccines.



RECOMMENDED VACCINES

Talk to your doctor about staying up-to-date on shots and what you and your family may need. Here's a list of some of the more common diseases you should be vaccinated for:

- Bacterial meningitis
- Chickenpox
- Diphtheria
- Hepatitis A and Hepatitis B
- Cervical & other cancers caused by human papillomavirus (HPV)
- Influenza (flu)
- Measles, Mumps, and Rubella
- Pertussis (whooping cough)
- Pneumococcal pneumonia
- Rotavirus diarrhea
- Shingles
- Tetanus

DAY IN DAY OUT
WELCOA'S ONLINE BULLETIN FOR YOUR LIFESTYLE



GETTING YOUR ARMS
Around Acne

Acne affects most people at some point during their lives and can cause discomfort and embarrassment. Although the condition is most common in teenagers and young adults, acne can impact people of all ages.

WHAT CAUSES ACNE?

Acne starts in the skin's oil glands. The hair on our bodies comes out through canals from these glands called follicles. Oil glands make oils that emerge to the skin's surface through the follicles' openings, or pores, along with the hairs.

Sometimes hair, oil, and dead skin cells come together to plug a follicle. The plugged pore provides the right conditions for bacteria that normally live on the skin to thrive. When the body's immune system attacks the bacteria, pain and swelling can result. That's how a pimple forms.

Doctors don't know why only some people get acne. They do know what raises the risk for acne. Increases in certain hormones can cause oil glands to get bigger and make more oil. These hormone levels go up during puberty. Because of this, acne is most common in adolescents and young adults. Hormone changes caused by pregnancy or by starting or stopping birth control pills can also trigger acne.

But people of all ages can get acne. For most, acne goes away by the time they reach their 30s. However, some people in their 30s, 40s, and 50s still get acne. Although acne is usually not a serious health threat, it can be upsetting, and severe acne can lead to permanent scarring.

TREATMENT & PREVENTION

There are things you can do to prevent acne. Doctors recommend that people with acne avoid skin products that contain petrolatum, a type of oil. Instead look for creams and lotions labeled "noncomedogenic." These are less likely to clog pores. A lot of people think certain foods can

cause acne breakouts. However, research has not been able to confirm this in most cases.

While there are plenty of home remedies for acne, it's better to start with proven over-the-counter treatments for mild acne. These products can contain benzoyl peroxide, resorcinol, salicylic acid, or sulfur.

People with severe acne should discuss prescription drug options with a doctor. These include antibiotics to kill bacteria or drugs called retinoids, which can be given as a topical to apply to the skin or as an oral medication.

PIMPLE PREVENTION

These good habits can help prevent and treat acne:

» **Be gentle.** Avoid scrubbing hard when washing your face.

» **Hands off.** Resist the temptation to squeeze or pick at pimples.

» **Avoid oily skin products.** Choose lotions and make-up labeled "noncomedogenic." These are less likely to clog your pores.

» **Wash your hair.** If you have oily hair, washing it every day can reduce oil on the skin.

» **Loosen up.** Avoid pressure from tight-fitting clothing, sports equipment, or backpack straps, which can irritate the skin.



If you have acne-prone skin, look for creams and lotions labeled "noncomedogenic."



TAKECHARGE
WELCOA'S SELF-CARE BULLETIN



MID-LIFE CHANGES:
What Women Need to Know about Menopause

Many women start their monthly menstrual periods in their early teens or even before. However, during midlife, a woman's menstrual periods grow further and further apart. At some point, they stop completely, and she can no longer get pregnant. This is because the ovaries aren't releasing eggs and making hormones like estrogen anymore. After 12 months without a period, a woman can say she's gone through menopause.

WHEN DOES IT START?

Typically, menopause occurs between ages 45 and 55. This means women can expect less frequent periods and other symptoms at some point during their 40s. But it's different for every woman. There's no lab test to predict when in life it will start or how easy it will be.

WHAT ARE THE SIGNS?

Along with unpredictable periods, a woman may have other symptoms—both physical and emotional. Hot flashes, poor sleep, and mood changes are common. Some women have vaginal dryness, weight gain, and thinning hair. Bone density may also start to decrease. However, most people don't have severe symptoms or they have mild or less frequent symptoms.

HOT FLASHES

Hot flashes are a common symptom during the midlife transition. Many women have these for several years after menopause. Some experience hot flashes for 10 or more years.

A mild hot flash feels like being embarrassed. There's a wave of heat sensation that rises to your head and chest, and sometimes you look red, feel hot, and then it's gone. A not-so-mild hot flash can make your skin appear very red. Your head, neck, and chest may become hot and sweaty.

There are some medicines that reduce hot flashes. The most effective FDA-approved treatment is low-dose hormone therapy. Some women are given estrogen or estrogen with another hormone, progestin. Women take hormone therapy for the shortest time that they need it. Not every woman can take hormone therapy. Another option is an antidepressant that is FDA-approved for treating moderate to severe hot flashes. A doctor can help determine which medicine might work best.

TROUBLE SLEEPING

During midlife, women may start having trouble sleeping because of changes in hormone levels. Hot flashes and night sweats can also cause women to wake up.

In people who have hot flashes at night, their sleep is disrupted throughout the entire night. It's like a ripple of a sleep irritation throughout the whole night. A woman may feel tired the next day as a result.



The medicines that help with hot flashes may also help ease sleep issues. But other things can help, too. If a hot flash or anything else wakes you up, avoid looking at a clock. It's much easier to fall back to sleep if you don't know what time it is.

Exercise can also help women sleep better at night. It's best to avoid caffeine and alcohol for several hours before bedtime, too. Both can disrupt sleep. For women who have a hard time falling asleep, relaxation breathing can help. Slowly breathe in through your nose. With a hand below your ribs, feel your stomach push your hand out. Slowly exhale through your mouth. You can do this for several minutes to relax.

MOODINESS

During perimenopause, many women become irritable or feel moody. Some may feel sad and anxious and unable to enjoy things as much as they used to.

If a woman has these symptoms day after day for at least 2 weeks, she may be dealing with a clinical depression. Although most women don't have a problem with depression during this transition, changes in hormones can bring a negative mood for some women.

Set up a plan for how to look for symptoms of depression. That way, you can enter midlife prepared to act. Experts recommend anyone who has a depressed mood to seek help from a primary care doctor or mental health professional.

MIDLIFE WELL-BEING

The midlife transition is a phase of life that brings gradual changes. Many women don't have problems during this transition.

You can make midlife your time for optimizing well-being by eating well, exercising, and getting quality sleep. The healthier you are at midlife, the more successful you'll be combating age-related changes and diseases.

TOYOURHEALTH
WELCOA'S ONLINE GENERAL WELLNESS BULLETIN



WHAT YOU NEED TO
Know about Dementia

Forgetfulness, temporary confusion, or having trouble remembering a name or word can be a normal part of life. But when thinking problems or unusual behavior starts to interfere with everyday activities—such as working, preparing meals, or handling finances—it's time to see a doctor. These could be signs of a condition known as dementia.

Dementia is a brain disorder that most often affects the elderly. It's caused by the failure or death of nerve cells in the brain. Alzheimer's disease is the most common cause. Although age is the greatest risk factor for dementia, it isn't a normal part of aging. Some people live into their 90s and beyond with no signs of dementia at all.

Dementia really isn't a disease itself. Instead, dementia is a group of symptoms that can be caused by many different diseases. Symptoms of dementia can include problems with memory, thinking, and language, along with impairments to social skills and some behavioral symptoms.

Several factors can raise your risk for developing dementia. These include aging, smoking, uncontrolled diabetes, high blood pressure, and drinking too much alcohol. Risk also increases if close family members have had dementia.

WHAT ARE THE SIGNS?

Symptoms of dementia might be reversed when they're caused by dehydration or other treatable conditions. But most forms of dementia worsen gradually over time, and there is no treatment. Scientists are searching for ways to slow down this process or prevent it from starting in the first place.

The two most common causes of dementia in older

people are Alzheimer's disease and vascular dementia, a condition that involves changes to the brain's blood supply. Vascular dementia often arises from stroke or arteriosclerosis (hardening of the arteries) in the brain. Other causes of dementia include Parkinson's disease, HIV, head injury, and Lewy body disease. (Lewy bodies are a type of abnormal protein clump in brain cells.)

Dementia in people under age 60 is often caused by a group of brain diseases called frontotemporal disorders. These conditions begin in the front or sides of the brain and gradually spread. A rare, inherited form of Alzheimer's disease can also occur in people in their 30s, 40s, and 50s.

The symptoms of dementia can vary, depending on which brain regions are damaged. In general, the left side of the brain is involved in language, and the right side is very involved in social behavior. In the case of a frontotemporal disorder, if it begins in the left side of the brain, you tend to have worsening language problems; if it starts on the right, it affects behavior and might be mistaken for a psychiatric condition. Damage to specific brain regions can cause people to become apathetic, lose their inhibitions, or show no consideration for the feelings of others.



With Alzheimer's disease, memory-related areas in the lower and back parts of the brain tend to be affected first. Other types of dementia can affect regions that control movement.

DIAGNOSIS

Because different types of dementia can have overlapping symptoms, and some people have more than one underlying condition, it's best to see a clinician who has expertise in diagnosing dementia.

To make a diagnosis, physicians usually ask about a person's medical history and do a physical exam including blood tests. They also check for thinking, memory and language abilities, and sometimes order brain scans. This evaluation will determine if the symptoms are related to a treatable condition—such as depression, an infection, or medication side effects.

With some types of dementia, a clear diagnosis can't be made until the brain is examined after death. In fact, there's no single blood test or brain scan that can diagnose Alzheimer's disease or some other types of dementia with certainty. In these cases, a definite diagnosis can be made only at autopsy.

SIGNS OF DEMENTIA

- Repeating the same story or question over and over.
- Getting lost in familiar places.
- Delusions or agitated behavior.
- Problems with language, movements, or recognizing objects.
- Memory or concentration problems.
- Difficulty following directions.
- Getting disoriented about time, people, and places.
- Neglecting personal safety, hygiene, and nutrition.


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