



Taking Charge of Your Health

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The booklet talks about common health concerns that can become **BIG** health problems and what you can do to keep them from becoming problems.

It describes what you can do to live a lifestyle that can help you stay healthy.

Did you know that 54 million Americans have an activity limitation/disability associated with a long-term physical, sensory, or cognitive condition?



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Daily Health Choices and Behaviors

Although a disability can increase your risk for some health problems, you can be healthy! Having a disability does not mean you WILL get these health problems – you just have to be more careful about prevention.

Many things affect your health – your family health history; your environment; things you do each day such as what you eat, exercise, use/abuse of drugs or alcohol; and regular exams to screen for health problems such as diabetes, high blood pressure, and cancer.

If you smoke or are overweight, you might think that enjoying today is more important than worrying about tomorrow. Unfortunately, having a disability may put you at greater risk for some serious health problems such as diabetes, high cholesterol, or high blood pressure.

Each disability, too, has its own possible secondary conditions. For example, people with spinal cord injuries are at higher risk for a number of conditions including arthritis, pressure sores, osteoporosis, digestive problems. Unfortunately, African Americans, Hispanics, and Native Americans experience certain chronic health problems such as diabetes and high blood pressure more often than people from other groups.

So, it is even more important for you to make changes today that will help you be healthy for years to come.

Being healthy means feeling good physically and emotionally and being able to do the things that you need and want to do!

Weight control

If you are overweight, you are not alone... more than half of Americans have a weight problem. But extra weight can contribute to health problems such as sleep apnea, diabetes, stroke, asthma, breathing problems, and some cancers. For people with disabilities carrying extra weight puts added stress on joints and muscles, and can further restrict movement. Moving less may mean weight gain and greater restrictions.

Maintaining a stable body weight requires balancing how many calories you eat each day with how many calories you burn. You gain weight when you eat more calories (that is, food) than you burn. How many calories your body needs depends on whether you are male or female, your height, and your activity level. The more you move during the day, the more calories you burn.

So, to lose weight, follow this formula:

- Choose healthier foods
- Eat fewer calories
- Increase physical activity



Daily Calories Needed for Weight Maintenance

Value based on Dietary Reference Intakes for energy, carbohydrates, fiber, fat, fatty acids, cholesterol, protein, and amino acids, 2002

Height/Weight	Men			Women		
	Sedentary/Low action	Moderate activity	High activity	Sedentary/Low activity	Moderate activity	High activity
4.9 ft-5.3 ft. 92-124 lbs	1,800-2,200	2,200-2,500	2,500-2,900	1,600-2,000	2,000-2,200	2,300-2,500
5.4 ft-5.8 ft. 111-150 lbs.	2,000-2,500	2,500-2,800	2,800-3,300	1,800-2,200	2,200-2,500	2,500-2,800
5.9 ft+ 132-178 lbs.	2,300-2,800	2,300-3,200	3,200-3,700	2,000-2,500	2,500-2,800	2,800-3,100

Healthy diet

Unfortunately, many foods that are easy to get and cheap to buy also have a lot of calories and fat and the portion sizes are too large. A typical fast food meal of a burger, fries, and soda has about 1,230 calories – nearly a full day’s worth of calories in one meal! Below are guidelines to select healthy foods.

Eat plenty of whole grains (whole wheat bread, whole grain cereal, brown rice)

Eat 5+ fruits and vegetables a day (raisins, oranges, bananas, apples, broccoli, green beans, and peas)

Choose foods low in saturated fat and cholesterol (for example, select grilled chicken over fried chicken, use mustard instead of mayonnaise, or cut down on the amount of cheese on your sandwich)

Eat less sugar (candy bars, ice cream, and soda are high in calories and low in nutrients - try a granola bar, drink water rather than a soda, or have yogurt rather than ice cream)

Eat less salt (for example, cut down on chips and other processed foods; don’t salt your food or use less salt)



Physical activity

Being physically active is important for EVERYBODY! Regular activity reduces the risk for health problems, boosts energy, increases flexibility, controls weight, improves feelings of well being, aids sleep, helps with performing daily living activities, maintains community involvement and socialization, increases self-esteem, and improves quality of life. Being active can also relieve symptoms of disability. For instance, in one study of people with fibromyalgia who exercised regularly each week, participants said their fibromyalgia symptoms were reduced.

If you are not active, you’re not alone! More than 60% of Americans don’t exercise at all or only occasionally. And, people who experience health problems tend to be even less active.

However, the benefits of exercise are so great. Be more active! How much exercise do you need for better health? Strive for 30 minutes a day, most days of the week. If that seems overwhelming, exercise in smaller time chunks such as 10 minute-sessions, three times a day.

Find an activity you like or vary activities to keep motivated. Consider walking, yoga, tai chi, dance, swimming, or team sports like basketball, softball, or volleyball.

Also look into adaptive exercise programs for people with disabilities. These might include modified aerobics, flexibility, and coordination exercises for people with Parkinson’s disease, aquatic exercise for people with multiple sclerosis, self-defense training, and other modified programs. Consider, too, asking someone else to exercise with you.

Everyday activities such as gardening or raking leaves are considered exercise. Propelling a wheelchair, too, is exercise and improves strength and endurance.

Physical activity and exercise increase your heart rate. Some activities only increase it a little, such as casual walking. Other activities such as mowing the lawn increase your heart rate a moderate amount. Vigorous activities such as running make your heart beat so fast that it would be hard to talk during the activity.

While all physical activity is beneficial, moderate and vigorous physical activities are best for improving your health.

Before starting an activity program, think about what accommodations you may need. Do you need special equipment such as an arm ergometer instead of a regular bike? Would you be better getting a workout inside where the air quality is better?

“Deconditioning” describes changes such as muscle loss, joint stiffness, and heart problems that happen to the body when people are not active. This increases health risks and can be prevented by resuming exercise.



Before starting exercise

- Talk with your doctor about your plans to exercise
- Assess your fitness level. How long has it been since you exercised and how did you feel? If it's been a long time, start slowly.
- Start doing just 5 or 10 minutes at a time. When you can do that without difficulty, add another 5 minutes.



Mental health

Nearly 19 million Americans — and twice as many women as men— experience depression. Although the symptoms differ depending on age and gender, depression can cause people to feel sad, experience appetite changes, fluctuate in weight, have sleep problems, lose interest in activities that used to be fun, feel hopeless and pessimistic, have less energetic, experience difficulty concentrating and remembering things, feel guilty or worthless, get irritated, have physical symptoms such as headache or chronic pain that don't go away with medical treatment, and dwell on death or suicide.

Effective treatments include antidepressant medications, “talk” therapy, and exercise. While most people feel anxious before important events like starting a new job, moving, or going on a date, more than 19 million Americans also experience an anxiety disorder.



People with these disorders feel overwhelming anxiety and fear on a regular basis and can experience panic attacks, obsessive thoughts, flashbacks of traumatic events, nightmares, and physical symptoms such as chest pain, heart palpitations, shortness of breath, dizziness, or stomach problems.



Besides prescription medication and “talk” therapy, positive ways to deal with these problems include seeking support from others, making the best of a bad situation, and changing initial perceptions. Examples of positive defenses are:

- Taking an unpleasant experience or feeling and using it to make something positive (“using lemons to make lemonade”)
- Postponing an impulse that may be destructive
- Giving to others what you would like to receive
- Allowing painful emotions without discomfort
- Thinking and feeling positive in the face of difficult situations and taking steps to reduce the negative consequences

Some women with disabilities view exercise as unpleasant, but do it for health or therapeutic reasons.



Other women with disabilities exercise to look and feel good.

Guthrie, S. R., & Castelnuovo, S. (2001). Disability management among women with physical impairment: The contribution of physical activity. *Sociology of Sport Journal*, 18, 5-20.

Smoking

It's no surprise to hear that smoking increases the risk of getting diseases such as cancer, heart disease, stroke, or chronic lung disease. But did you know that quitting can lower your chances of getting sick?

Quitting smoking is hard, and, first, you need to get ready to quit. Set a quit date. Change your environment; get rid of cigarettes and ashtrays and don't let other people smoke in your home.

Second, use over-the-counter nicotine gum or patches from the pharmacy to reduce the urge to smoke. Or, your doctor can prescribe a nicotine nasal spray, nicotine inhaler, or nicotine lozenges.

Third, ask for help! Tell people that you are trying to quit and ask others to help. Fourth, if you have a slip and smoke...don't give up!

Set a new date to get back on track. Remember quitting is hard and most people try several times before they stop smoking!

Before you try to stop, think about the following questions*

- Why do you want to quit?
- When you tried to quit in the past, what helped and what didn't?
- What will be difficult situations after you quit and how will you handle them?
- What pleasures do you get from smoking? What ways can you still get pleasure if you quit?

* Questions taken from "You Can Quit Smoking" by the Department of Health and Human Services, Public Health Service.



If you would like more resources on how to quit smoking, contact any of the following agencies for free materials.

- American Cancer Society: 1-800-ACS-2345 (1-800-227-2345)
- American Heart Association: 1-800-AHA-USA1 (1-800-242-8721)
- American Lung Association: 1-800-LUNG-USA (1-800-586-4872)
- AHRQ Publications Clearinghouse: 1-800-358-9295
- Office on Smoking and Health, Centers for Disease Control and Prevention: 1-800-232-1311
- National Cancer Institute: 1-800-4-CANCER (1-800-422-6237)

Vaccinations

Below are vaccines that the Centers of Disease Control recommends adults should get and how often. Keeping up to date with vaccines is especially important for people with chronic health problems.



Age group: 19-49 years of age

- One Tetanus/Diphtheria/Pertussis booster every 10 years
- One Influenza dose annually*
- One dose Meningococcal*
- Varicella and Measles/Mumps/Rubella if not done in childhood
- Human Papillomavirus (HPV) 3 doses through 26

Age group: 50-64 years of age

- One Tetanus/Diphtheria/Pertussis booster every 10 years
- One Influenza dose annually
- Three doses Hepatitis B (1, 2, 4-6 months)*
- Two doses Hepatitis A (0 and 6-12 months)*
- One dose Meningococcal*
- Varicella and Measles/Mumps/Rubella if not done in childhood

Age group: 65 years of age and older

- One Tetanus/Diphtheria/Pertussis booster every 10 years
- One Influenza dose annually
- Three doses Hepatitis B (1, 2, 4-6 months)*
- Two doses Hepatitis A (0 and 6-12 months)*
- One dose Meningococcal
- Varicella and Measles/ Mumps/Rubella if not done in childhood

* if medical condition requires

Disability-related health problems are referred to as **SECONDARY CONDITIONS**.

Most are preventable.

But preventing secondary conditions requires that you watch for symptoms and see a doctor when needed.

Health Problems Related to Disability

As more people are living with chronic conditions and disabilities, health providers are focusing on reducing disability's effect on health and functioning. An important part of being healthy is preventing or reducing the occurrence of health problems related to the disability. Here are some disability-related health problems to watch out for:



Pressure sores

Also called skin ulcer, bed sores, decubiti, or decubitus ulcers, these red areas or cuts on the skin occur because of too much pressure. This can happen from laying down or sitting in one place for too long, scraping the skin when moving, or wearing too tight clothes. Pressure keeps blood from getting to the skin and causes it to die.

Pressure sores are “graded” from 1 (less severe) to 4 (most severe) to indicate how bad the sore is. Grade 1 sores are red or discolored, but the skin is not broken. Grade 2 sores are broken areas of the skin. Grade 3 sores are skin breaks that go deeper than the first layer of skin. Grade 4 sores are skin breakdown that goes down to the muscle or bone.

At risk: People who experience diabetes, difficulty walking, or paralysis are at risk for getting pressure sores.

Prevention: Relieve pressure and avoid prolonged pressure on any area of body by doing wheelchair push-ups (using hands to push up) every 30 minutes, getting turned in bed every 1-2 hours, shifting weight to arms, being more mobile, using a water mattress, avoiding sliding, having soft bed sheets, keeping dry, drinking 8 to 12 glass of water daily, eating nutritiously, inspecting skin for sore signs, and watching weight – if you are too thin you have less padding between your skin and bones and if you are too heavy, the extra weight can put more pressure on your skin.

Screening: Watch for reddened skin. If you find a red spot, watch to see if it goes away in several hours or stays. If it stays, this may indicate the beginning of a sore and need for medical attention.

Treatment: Follow your doctor's treatment advice. You may need to stay off the area for awhile, apply a special covering over the area, or use special cushioning. Monitor antibiotic effectiveness.



Urinary tract infections

Common and treated by antibiotics, urinary tract infections (UTIs) happen when bacteria gets into the urinary system and cause an infection. Symptoms include urge to urinate frequently, burning sensation during urination, discolored urine, and discomfort even when not urinating (women feel it on their pubic area, and men feel fullness in their rectum). Fatigue, fever, rib or back pain, and vomiting also can be symptoms.

At risk: People who have diabetes, use a catheter, or have an enlarged prostate are at increased risk for this type of infection.

Prevention:

- Drink plenty of water or cranberry juice. If you have had enough to drink, your urine will look clear like water, or be only slightly yellow. Dark yellow urine is a sign to drink more water.
- Go to the bathroom when you have the urge.
- If using a catheter, catheterize yourself every 2-4 hours.
- Keep catheters clean (wash your hands and equipment well before and after you use the catheter) and change it frequently to keep bacteria from growing.
- Women should wipe the area from the front to the back, to avoid contamination from feces, and shower rather than bathe in tubs.

Bladder cancer occurs more frequently in people with spinal cord injuries, perhaps because of urinary tract infections.

To prevent bladder cancer, minimize the frequency of urinary tract infections, consider catheter use, and have a yearly cancer screening.



Screening: Urine tests detect the infection.

Treatment: Urinary tract infections are treated with antibacterial drugs.

Muscle contractures

Contractures happen when the muscles, skin, or tendons tighten and make it difficult to move a joint. Any joint can have a contracture, which is a permanent shortening.

At risk: The most common causes of contractures are scarring from burns and immobilization. Contractures also occur from nerve damage or diseases such as muscular dystrophy, stroke, brain injury, or cerebral palsy.

Prevention: Positioning, splints, and range of motion exercises can help reduce muscle shortening.

Screening: A healthcare professional will do a physical exam looking for restricted structures within the joint. The joint also may be measured with a goniometer or examined with x-rays.

Treatment: Typically, physical therapy such as stretching, massage therapy or use of continuous passive motion machines is used as are casting, splinting, orthopedic braces, and surgery.

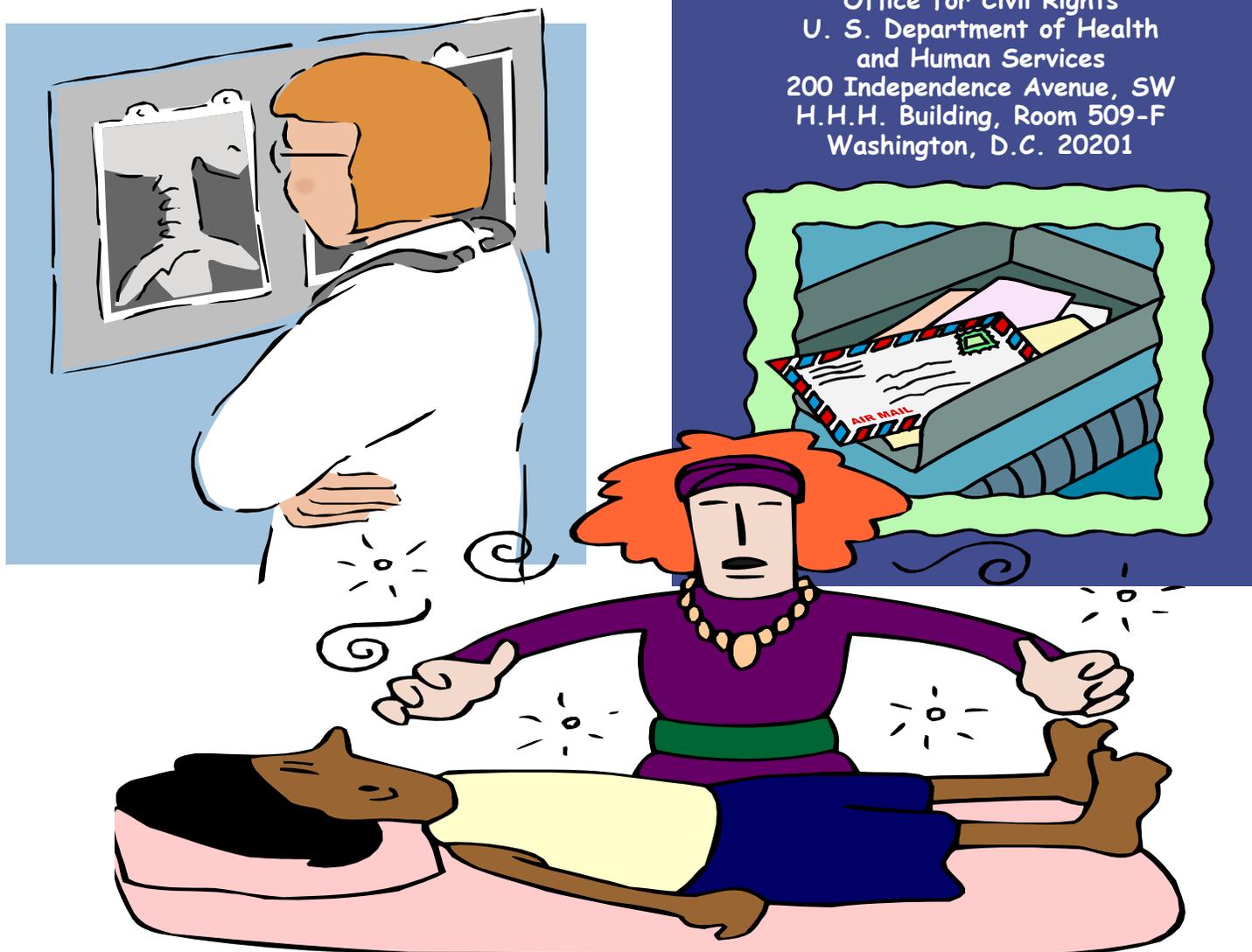
The Americans with Disabilities Act (ADA) protects people from not getting services because of their disability.

If you think you are not getting services because of your disability, call the Office of Civil Rights at the Department of Health and Human Services 1(800)368-1019, TDD 1(800)537-7697.

You can also write a complaint that describes how, why, and when you believe you were discriminated against and any other important information; the name and address of the place you believe discriminated against you; and your name, address, and telephone number. You must sign your name to the letter.

Send the letter to:

Director
Office for Civil Rights
U. S. Department of Health
and Human Services
200 Independence Avenue, SW
H.H.H. Building, Room 509-F
Washington, D.C. 20201



Chronic Conditions

Health problems that can't be cured are chronic conditions. Nutrition, exercise, and stress management can help prevent these conditions or help control them if they occur. Know that you can and should be regularly tested for many common chronic conditions. Being tested is important because there are good treatments for many of these conditions and they can be serious if they aren't treated. The following information details some conditions you can watch out for and protect yourself against.

High Cholesterol

A waxy, fat substance in the bloodstream that helps form cell membranes and hormones, cholesterol is produced by the body. It also is found in foods such as meats, milk products, egg yolks, and some fish. At high levels, cholesterol accumulates on veins and arteries, which can cause strokes and other circulatory blockage.

Too much cholesterol causes a lipoprotein called LDL to increase, which can clog blood vessels. Normal values should be below 130. HDL, another lipoprotein that carries cholesterol, unclogs blood vessels. Normal values should be 35 or higher.

At risk: People who are overweight, smoke, inactive, past menopause, and eat foods high in saturated fats tend to have too much LDL and not enough HDL. They also may have a family history of unhealthy cholesterol levels.

Prevention: Besides abstaining from alcohol and from smoking, the National Cholesterol Therapeutic Panel recommends the Therapeutic Lifestyle Change, to help lower cholesterol levels that focuses on diet (eat low cholesterol, low saturated fat foods such as skim milk, lean meat, fish, skinless poultry, fruits, and vegetables); weight control (stay within your optimum range to reduce LDL and increase HDL); and exercise (do any physical activity for at least 30 minutes a day).

Screening: The National Institutes of Health recommends to check your cholesterol levels. For men, check five years after age 35 and more often after 45. Women should check every five years after age 45 and more often after 55. If they have risk factors, both men and women should begin checking cholesterol levels at age 20.

High Blood Pressure (hypertension)

Your blood pressure indicates how hard your heart is working to move blood through your body. A blood pressure reading gives 2 numbers: the top number is called systolic pressure and represents the pressure while the heart is beating while the bottom number is the diastolic pressure and represents the pressure when the heart rests between beats. According to the American Heart Association, blood pressure should be $< 120/80$. Those whose blood pressure is $> 140/90$ are considered to have high blood pressure.

At risk: In the United States about 1 in 5 Americans has hypertension. African Americans tend to get high blood pressure earlier and have more severe high blood pressure compared to other groups. Other risk factors are excess weight, being male over the 45 years old, being a female over the age of 55, family history of high blood pressure, and prehypertension (120-139/80-89).

Prevention: See Treatment

Screening: Anyone over 18 years old should routinely have their blood pressure checked. Blood pressure may be taken at several times to get an average reading.

Treatment: For high blood pressure caused by essential hypertension or prehypertension, a proper diet, weight loss, exercise, and salt and alcohol reduction are recommended. If these strategies alone are not enough, your health care provider can prescribe medication to lower your blood pressure.



High Blood Sugar/Type 2 Diabetes

Diabetes occurs when the body does not produce or properly use insulin. Insulin is important for breaking down sugar so that our bodies can use it for energy. People with diabetes cannot convert sugar into energy and so have too much sugar in their body. Unfortunately, diabetes can cause many other health problems including heart disease, blindness, amputations, and kidney failure. Symptoms include thirst, frequent urination, fatigue, weight loss, slow healing sores, dry skin, tingling or loss of feeling in feet, blurry eyesight, and other signs.

At risk: About 18 million people in the United States have diabetes. Type 2, the most common form, affects minorities, overweight people, and the elderly the most. Native Americans are 2.2 times more likely and African Americans are 1.6 times more likely to get diabetes than whites. Other risk factors for the disease are having high blood pressure, family history, high cholesterol, and inactivity.

Prevention: Exercise, selecting healthier foods, and weight loss help prevent diabetes.

Screening: Diabetes is detected by a glucose screening test or Fasting Plasma Glucose test that measures glucose in the blood after not eating for at least 12 hours. If results are borderline or suspicious, a repeated Fasting Plasma Glucose (FPG) should be done on a separate date to confirm a diabetes diagnosis and also on patients with normal FPG but possible diabetes. Normal blood sugar levels should be between 70 to 110.

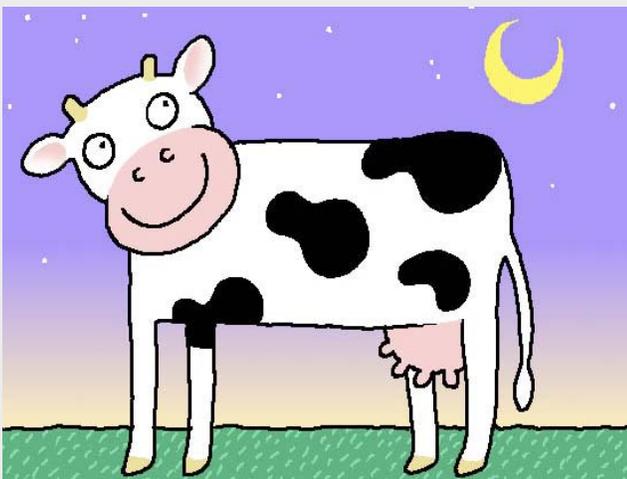


Osteoporosis

Osteoporosis is a disease that affects people (80% are women) as they age. The disease causes bones to weaken and break easily. Unfortunately, with few symptoms, people may not know they have it until they break a bone.

At risk:

- Women, especially after menopause because of the changes in hormones
- Age, the older you are the greater your risk; bones become thinner and weaker as you age
- White and Asian women have high risk, but Hispanic and African American women are at risk.
- Family history, if someone in your family has osteoporosis you may be at higher risk.
- People with disabilities are at higher risk and at an earlier age than the rest of the population because of not getting enough physical activity and medications that increase bone loss, such as some anticonvulsants or corticosteroids. Also evidence suggests that women with epilepsy or Down syndrome may reach menopause at an earlier age or not have menstrual periods, which increases their risk.



Prevention: Hormone supplements (for women past menopause), especially for women with disabilities. Also, ask your doctor if your medications may cause osteoporosis, and discuss ways to minimize side effects. Be sure to take enough calcium and vitamin D daily, avoid caffeine and too much alcohol because they affect your body's ability to use calcium. Weight-bearing activities also help build and maintain bone strength – so try and get more activity. Or if you use a wheelchair or having difficulty walking, strength exercises can help.

Screening: A bone mineral density test (BMD) measures bone strength, and the most common test is done with x-ray (DXA test). Women should be screened at 65 years old, or 60 if they have other risk factors.

Arthritis

Arthritis affects people's joints and causes pain, stiffness, inflammation (swelling), and damage to the joint cartilage. Of the 43 million Americans have arthritis, women are more likely than men to have arthritis. With more than 100 types of arthritis, the most common forms are osteoarthritis and rheumatoid arthritis. Whites and African Americans experience the same risk for getting arthritis, and Hispanics have a somewhat lower risk. African Americans and Hispanics who get arthritis typically have more limitations such as more pain and more work and activity limitations.

Osteoarthritis (OA) typically affects the fingers, knees, hips, and spine (back) but can also affect the wrists, elbows, shoulders, and ankles. Symptoms include joint pain, stiffness after being inactive such as after sleeping, swelling or tenderness in 1+ joints, and crunching or feeling bones rub together when the joint is used. This form of arthritis is caused by a breakdown of cartilage in the joints, which can happen due to getting older or from an injury to the joint.



Rheumatoid arthritis (RA) affects people between the ages of 20 and 50 and is 2-3 times more common in women. RA can affect many different joints, and body structures, including the blood, lungs, and heart. Joint pain in RA results from inflammation (swelling) of the joint lining (called the synovium). Symptoms include pain; stiffness that lasts more than an hour; swelling at the wrist and finger joints closest to the hand (although joints of the neck, shoulders, elbows, hips, knees, ankles, and feet can be affected as well); warmth; redness; fatigue; and symptoms that last for long periods of time. This form of arthritis is due to an autoimmune disease and for reasons scientists don't understand, the body attacks healthy joint tissue causing joint inflammation and damage.

At risk: Risks for OA include being older, overweight, and female. For RA the risk factors include a family history, and being female.

Prevention: To keep cartilage as healthy as possible, keep moving to lubricate and protect joints. Lose excess weight to avoid stress on key body parts and to reduce joint stress. Also build muscle, which supports joints and stabilizes knees, hips, and shoulders.

Screening: This disease is usually diagnosed based on symptoms such as joint pain and swelling. Screening tests can include x-rays, or blood and urine tests.

Treatment: Treatment consists of rest, exercise, healthy diet, medication, instruction about conserving energy or changing how you do the activity that causes the pain.

Cancer

Cancer is a disease where cells in a part of the body grow out of control and form a tumor. A *benign tumor* is one that is not cancerous and won't spread to other sites. However, a *malignant tumor* is cancerous and the cells can move to another site and cause the cancer spread or metastasize.

Although cancer, which affects different parts of the body, is the second-leading cause of deaths in this country, many common cancers can be treated effectively if caught early. Get screened regularly...to increase the chance of beating cancer if you have it!

Some cancers may have a genetic link (meaning your risk is higher for getting the disease if someone in your family has the disease). But many occur because of lifestyle behaviors such as smoking, eating a poor diet, being inactive, or getting too much sun.



2007 Top Three Types of Cancer Cases and Deaths

Men # diagnosed each year	Men # deaths each year	Women # diagnosed each year	Women # of deaths each year
Prostate (218,890)	Lung and bron- chus (89,510)	Breast (178,840)	Lung (70,880)
Lung (114,760)	Prostate (27,050)	Lung (98,620)	Breast (40,460)
Colon/rectum (79,130)	Colon/rectum (26,000)	Colon/rectum (74,630)	Colon/rectum (26,180)
<i>Source: American Cancer Society</i>			

Lung cancer. Symptoms of lung cancer include a cough that does not go away, shortness of breath, chest pain that worsens with deep breathing, weight loss and loss of appetite, hoarseness, rust or bloody sputum or spit, and frequent infections, such as pneumonia and bronchitis

- **Prevention:** The best way to avoid lung cancer is to avoid smoking and exposure to tobacco smoke – the number one cause of lung cancer. Exposure to pollution in the air and chemicals such as asbestos and radon also increase risk.
- **Screening:** Chest x-rays, CT scans, and microscopic analysis of mucus produced from coughing are recommended, especially for those who are over age 50, currently do or used to smoke, have had cancer in the last 5 years, have a lung disease, or have been exposed to asbestos.

Colon and rectum cancer. Symptoms of colorectal cancer include changes in bowel habits such as diarrhea or constipation, blood in the stool, feeling that the bowel is not completely empty, abdominal discomfort, weight loss for no reason, and tiredness. Having a family history of colorectal cancer, personal history of colon polyps or cancer (colon, rectum, ovary, endometrium, or breast), history of inflammatory bowel disease, a diet high in fat and low in fiber, and being a smoker. Also, people with mobility problems or sedentary lifestyles are at increased risk. Following a healthy diet low in calories and fat and high in fruits and vegetables (fiber) and removing polyps in the colon have been shown to reduce colorectal cancer risk. Some studies indicate that taking female hormones after menopause may help protect women against colon cancer but not against cancer of the rectum. Everyone over the age of 50 needs to be screened, but those at higher risk should be screened earlier. The American Cancer Society recommends the fecal occult blood test (FOBT) every year that can reveal blood hidden in your stools and a sigmoidoscopy every five years after a negative exam in which the rectum and lower colon are examined with a lighted instrument called a sigmoidoscope. A colonoscopy, which examines the rectum and entire colon, is recommended if either test indicates possible problems.

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Breast cancer. Breast cancer can occur in both men and women, but is much more common in women. Breast cancer is the leading cancer in U.S. women and the exact causes are not known.

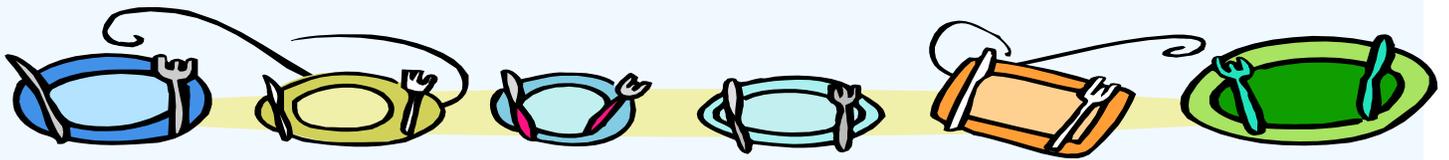
- **Risk factors:** Being over 50, having a close relative with this cancer type, having breast changes such as a lump, drinking excessive alcohol, taking estrogen replacement, being overweight (especially after menopause), being African American, having radiation therapy to the chest, and not getting physical activity. The age at the time a woman had her first child, first period, or age at menopause also has been linked to breast cancer.
- **Screening:** For early breast cancer detection, mammograms, which are done with low-level x-rays, are recommended annually for non-pregnant women 40 and older. Self-breast exams one week after each period end and at annual exams are also recommended with follow up, if needed, with ultrasonography, magnetic resonance imaging, biopsy, etc..

Prostate cancer. The most common cancer in U.S. men, this cancer usually grows slowly and responds well to treatment. Symptoms include constipation, painful ejaculation, blood in urine, and/or difficulty to start urination.

- **Risk factors:** A diet high in fat and low in fiber, being African American, family history of prostate cancer — especially having a brother with the disease, and age — it increases rapidly after the age of 50.
- **Prevention** Scientists do not know the exact causes of prostate cancer, but some think it may relate to diet. So, besides following a healthy diet, eat tomatoes, pink grapefruit, and watermelon because they are high in lycopene, a substance that reduces damage to genes.
- **Screening:** Detection is done with a blood sample to determine the level of Prostate Specific Antigen (PSA) and also with digital rectal examination. The American Cancer Society recommends that men over the age of 50 should have these two tests done every year, unless at risk.



Cervical cancer. The cervix, at the base of the uterus, can have abnormal cells that are detected easily

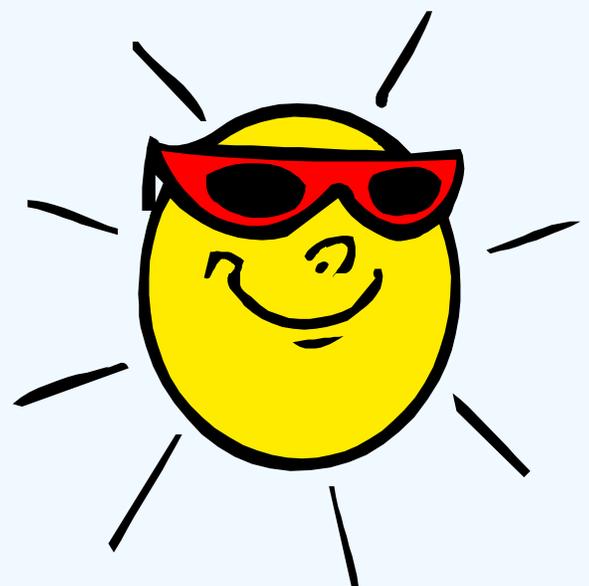


but do not produce symptoms in the early stages of cervical cancer. Advanced cancer here may produce unusual discharge, blood spots or light bleeding (that is not your period), and bleeding or pain during sex.

- **Risk factors:** Infection with Human Papilloma Virus (HPV) through unprotected sex, especially at an early age, increases the risk as does having many sex partners, smoking, having Human Immunodeficiency Virus (HIV), Chlamydia, diets low in fruits and vegetables, being overweight, having several babies, using birth control pills long term, being the daughter of a woman who took diethylstilbestrol between 1940 and 1971 to prevent miscarriage, and having a family member with the disease.
- **Screening:** A Pap smear, a sample of mucus and cells scraped from the cervix, is the most common test and recommended annually.

Skin cancer. Occuring most often in areas that are exposed to the sun such as the face, neck, hands, and arms, skin cancers fall into two groups: those unlikely to spread to other parts of the body nonmelanomas, the most common, and those that can spread to other organs (melanomas). Nonmelanomas are the most common forms of skin cancer.

- **Risk factors:** Being in the sun a lot without protection and having fair skin (freckles easily, blond or red hair, and blue or green eyes) and being a smoker increases risk.
- **Prevention:** Avoid excessive sunlight during outdoor activities, even on cloudy days, and wear sunscreen. Also, monitor your skin and know the difference between a normal mole and one that may be cancerous. An abnormal mole may be asymmetrical, have irregular borders, vary in color, and be larger than ¼ of inch.
- **Screening:** Each month, examine your skin in a well-lit room to look for any changes in moles, blemishes, freckles, and other marks. If you find an abnormality, tell your doctor who will do a more thorough examination, and possibly do a biopsy, which is a sample of the skin examined by microscope.



Screening Checklist and Ranges

The following table lists screening exams you should have regularly. For each test listed in the table, numbers are given to help interpret your results.

Test results, often reported as numbers, have ranges that identify results as “normal,” “below normal,” “at risk,” or “abnormal.”

Condition or Parameter	Normal or Good Values	Abnormal Values
BMI (Body Mass Index)	≤ 25 kg/ m ²	Overweight: 25-29.9 kg/m ² Obese: ≥ 30 kg/ m ²
Blood sugar or glucose	between 70 and 100 mg/dL	consistently ≥ 126 ml/dL
Total cholesterol	≤ 200 mg/dL	Borderline high: 200-239 mg/dL High: ≥ 240 mg/dL
LDL cholesterol	≤ 100 mg/dL	Near optimal: 100-129 mg/dL Borderline high: 130-159 mg/dL High: 160-189 mg/dL Very high: ≥ 190 mg/dL
HDL cholesterol	good: 40 - 59 mg/dL optimal: ≥ 60 mg/dL	low: ≤ 40 mg/dL
Blood pressure (results given as 2 numbers) Systolic pressure (top number) Diastolic (bottom number)	Systolic Pressure 120 mmHg Diastolic Pressure 80 mmHg	High (hypertension) Systolic pressure ≥ 140 mm Hg Diastolic pressure ≥ 90 mm Hg

* \geq symbol means equal to more than; \leq symbol means equal to or less than

Because our bodies undergo constant wear, it's a good practice to have annual physical check-ups to discuss concerns, monitor ongoing conditions, and pinpoint potential diseases early enough to limit to most effectively eliminate them.

At these check-ups, health personnel perform screening tests to determine any abnormal health conditions.

If the screening warrants further examination, then diagnostic tests are done to determine any problems.



Doctor Visits and Your Rights

Being informed means you know about your health or are willing to learn when there is something that you don't know. Sometimes that means asking your doctor to explain things you don't understand or if you just want more information about a topic.

Although doctors and nurses have spent a lot of time learning about health, you are the one in charge of your health care! Ask questions if you don't understand what the doctor or nurse is telling you. Remember, it's your health!

Making decisions about your treatment is important. So, be sure you understand what the doctor or nurse says.

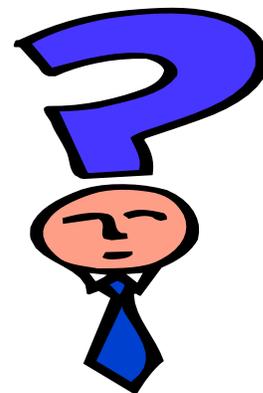
Your doctor may be in a hurry, but you have the right to ask questions if you don't understand what they say. If English is not your first language or if you are deaf, you have the right to ask for an interpreter.

If you use a wheelchair, ask about equipment that will accommodate your needs, such as a scale you can be weighed on, an exam table that can be raised or lowered, or mammography machines that accommodate someone who is seated.

The following are some questions you might ask during a medical appointment.

- What is my (blood pressure, cholesterol, blood sugar numbers, etc.) goal?
- How long will it take to reach my (blood pressure, cholesterol, blood sugar numbers, etc.) goals?
- How often should I have my (blood pressure, cholesterol, blood sugar numbers, etc.) levels checked?

- How does exercise affect my (blood pressure, cholesterol, blood sugar numbers, etc.) levels?
- What type of foods should I eat to improve my (blood pressure, cholesterol, blood sugar numbers, etc.)?
- What foods should I avoid?
- Do I need to lose weight, and if so, how much?
- Will I need (blood pressure, cholesterol, blood sugar) lowering medicine?
- What kind of medicine should I take?
- How will this new medicine affect the other medications I also take?
- Can I take the generic form of the medicine?
- What should I know about the medicine?
- What are the side effects?
- How do I know if it's working?
- What if I forget to take the medicine?
- Should I avoid any foods or other medicines?
- Can I drink alcohol?
- How long will I need to take my medicine?



Anxiety disorder: State of the mind and body associated with worry, tension, and nervousness that becomes overwhelming and interferes with daily living.

Autoimmune disease: Conditions caused in the body by the body's response to its defense against bacteria, viruses, and substances that appear foreign and harmful.

Biopsy: Removal of a sample of tissue from the body for examination.

Blood pressure. Force in the arteries when the heart beats (systolic pressure) and when the heart is at rest (diastolic pressure). When measured, the systolic pressure is the first or top number, and the diastolic pressure is the second or bottom number (for example, 110/80 or "110 over 80.")

Blood sugar/glucose: Amount of glucose (sugar) in the blood.

Breast cancer screening exams: Looking for cancer before symptoms become noticeable. This can be done in *self-breast exams* to feel for lumps or *mammograms*, an x-ray of the breast.

Cartilage: Type of dense connective tissue that covers the joint surfaces and acts as shock absorber.

Cervical cancer: Abnormal cell growth that begins in the lining of the cervix, the lower part of the uterus that opens at the top of the vagina, and is mostly caused by HPV (human papilloma virus).

Chronic conditions: Health problems that last more than three months and may be life long such as heart disease, diabetes, or chronic respiratory diseases

Chlamydia: Common sexually-transmitted disease caused by the bacterium that affects men and women.

Colon cancer screening techniques: Number of examinations, tests, and screening methods used to detect colorectal cancer such as Fecal Occult Blood Test(FOBT), flexible sigmoidoscopy, barium enema with air contrast, or colonoscopy.

Contractures: Joint that becomes rigid because the muscles that cross the joint have shortened and the fluid-filled spaces inside the joint shrink and dry up restricting full joint movement.

Deconditioning: Multiple changes in the body such as muscle loss, joint contractures, and heart problems that come about from inactivity and that can be reversed by activity.

Depression: Illness that involves the body, mood, and thoughts with symptoms such as sadness, loss of interest or pleasure in previously enjoyable activities, weight changes, sleeping difficulty, and energy loss.

Diabetes: A condition where the body does not produce or use insulin correctly.

Diastolic blood pressure: Blood pressure when the heart rests between beats.

Digital rectal examination: A gloved finger is used to check for abnormalities of organs or other structures in the pelvis and lower abdomen.

Glucose: Sugar in the blood

High cholesterol: Over accumulation of cholesterol, the waxy, fatlike substance naturally present in the body, that can restrict blood flow in the arteries.

DEFINITIONS

- Hormones:** Powerful chemical messengers that can cause big changes in cells or even the whole body.
- Human Immunodeficiency Virus (HIV):** Member of a virus group called retroviruses that kill or damage cells in the body's immune system
- Human Papillomavirus (HPV).** Common viruses that can cause warts or cancer. Although most are harmless, about 30 sexually-transmitted types can affect the genitals with warts or cancers of the cervix, vulva, vagina, and anus in women and cancers of the anus and penis in men.
- Insulin:** Hormone produced in the pancreas that moves sugar from the blood into other body tissues where it is needed for energy and also helps the body to process carbohydrates, fats, and proteins from the diet.
- Lycopene:** Bright red element in tomatoes and other red fruits that is a powerful antioxidant.
- Mammogram:** Low level x-ray tests for breast cancer
- Melanoma:** Serious form of skin cancer that is nearly 100 percent curable if caught early.
- Menopause:** The time in a woman's life when menstrual periods permanently stop
- Metastasize:** Spread from one part of the body to another such as when cancer cells move to another body part.
- Non melanoma:** Skin cancer that develops from the pigment-producing cells of the skin.
- Osteoarthritis:** Joint disease that mostly affects cartilage and causes pain, swelling and reduced motion in joints.
- Osteoporosis:** Disease of bone in which the bone mineral density is reduced causing bones prone to fracture
- Pap smear:** Test done to check for signs of cancer of the cervix.
- Polyps:** Abnormal growth of tissue (tumor) projecting from a mucous membrane.
- Pressure sores:** Areas of skin damage resulting from a lack of blood flow caused by pressure.
- Prostate:** Body part that makes part of seminal fluid and located in front of the rectum and under the bladder and surrounding the tube through which urine flows.
- Prostate Specific Antigen:** Protein produced by the cells of the prostate gland.
- Rheumatoid arthritis:** Form of arthritis causing joints to ache and throb and eventually become deformed.
- Risk:** The probability that something will happen.
- Saturated fat:** Fat made of hydrogen atoms found mostly in foods from animals and some plants that is the main dietary cause of high blood cholesterol.
- Sleep apnea:** Sleep disorder characterized by pauses in breathing during sleep.
- Systolic blood pressure:** Blood pressure when the heart is beating.
- Urinary tract infection:** Infection that begins in urinary system that can be serious if spreads to kidneys.
- Vaccines:** Preparation that contains killed or weakened disease-causing organisms used to establish immunity to disease the organisms cause.
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