

H-3 Monthly Newsletter

January:

- Happy New Year!!!!!!
- Birth Defects Prevention Month
- Cervical Health Awareness Month
- Glaucoma Awareness Month
- Thyroid Awareness Month
- Experts Are hopeful Pandemic Could End in 2022



In His Service,
H-3 Ministry





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Throughout the New Year, and each step of the way,
 May Christ be your portion, your joy and your stay.
 With God's precious precepts your daily delight
 To lead and encourage in paths that are right.

"The Lord is my Shepherd," how precious the word!
 He'll lead in green pastures, His promise is heard.
 "Beside the still waters"—what comfort and rest!
 What peace there is found upon Jesus' breast.

His "goodness and mercy," each day may you prove,
 His comforting presence, His infinite love!
 With richest compassions, each morning anew,
 May multiplied mercies be showered on you!

"My cup runneth over," His grace so abounds,
 That fullest enjoyment in Jesus is found.
 "The Lord is my portion," this may your soul say,
 And you will be happy each step of the way.

—Lois Beckwith

W E L C O M E

Happy New Year

2022



NATIONAL BIRTH DEFECTS AWARENESS MONTH

National Birth Defects Awareness Month, observed in January, is a time to increase awareness of birth defects. We know that an individual's genetics, social and environmental factors, and behaviors can have an impact on birth defects and that not all birth defects can be prevented. There are things that can help increase a woman's chances of having a healthy, full-term pregnancy and a healthy baby.

National Birth Defects Prevention Month raises awareness among women and families regarding actions they can take to help have a healthy baby. Birth defects are health conditions that are present at birth. They can cause serious problems in your baby's overall health, how his body develops and how his/her body works. National Birth Defects Prevention Month is a time to spread the word that there are things you can do to help prevent birth defects in your baby.

In the U.S., about 1 in 33 babies is born with a birth defect each year, according to the CDC. These structural changes present at birth can affect one or more parts of the body and mostly develop in the first three months when a baby's organs are forming. Common birth defects include congenital heart defects, cleft lip and cleft palate, and spina bifida.



WHAT SHOULD I KNOW ABOUT SCREENING?

The Pap test and the HPV test can help prevent cervical cancer or find it early.

- The Pap test (or Pap smear) looks for precancers, cell changes on the cervix that might become cervical cancer if they are not treated appropriately.
- The HPV test looks for the virus (human papillomavirus) that can cause these cell changes.

Both tests can be done in a doctor's office or clinic. During the Pap test, the doctor will use a plastic or metal instrument, called a speculum, to widen your vagina. This helps the doctor examine the vagina and the cervix, and collect a few cells and mucus from the cervix and the area around it. The cells are sent to a laboratory.

- If you are getting a Pap test, the cells will be checked to see if they look normal.
- If you are getting an HPV test, the cells will be tested for HPV.

WHEN TO GET SCREENED

IF YOU ARE 21 TO 29 YEARS OLD

You should start getting Pap tests at age 21. If your Pap test result is normal, your doctor may tell you that you can wait three years until your next Pap test.

IF YOU ARE 30 TO 65 YEARS OLD

Talk to your doctor about which testing option is right for you—

- **A Pap test only.** If your result is normal, your doctor may tell you that you can wait three years until your next Pap test.
- **An HPV test only.** This is called primary HPV testing. If your result is normal, your doctor may tell you that you can wait five years until your next screening test.
- **An HPV test along with the Pap test.** This is called co-testing. If both of your results are normal, your doctor may tell you that you can wait five years until your next screening test.

IF YOU ARE OLDER THAN 65

Your doctor may tell you that you don't need to be screened anymore if—

- You have had normal screening test results for several years, or
- You have had your cervix removed as part of a total hysterectomy for non-cancerous conditions, like fibroids.

How to Prepare for Your Pap or HPV Test

You should not schedule your test for a time when you are having your period. If you are going to have a test in the next two days—

- You should not douche (rinse the vagina with water or another fluid).
- You should not use a tampon.
- You should not have sex.
- You should not use a birth control foam, cream, or jelly.
- You should not use a medicine or cream in your vagina.

TEST RESULTS

It can take as long as three weeks to receive your test results. If your test shows that something might not be normal, your doctor will contact you and figure out how best to follow up. There are many reasons why test results might not be normal. It usually does not mean you have cancer.

If your test results show cells that are not normal and may become cancer, your doctor will let you know if you need to be treated. In most cases, treatment prevents cervical cancer from developing. It is important to follow up with your doctor right away to learn more about your test results and receive any treatment that may be needed.

If your test results are normal, your chance of getting cervical cancer in the next few years is very low. Your doctor may tell you that you can wait several years for your next cervical cancer screening test. But you should still go to the doctor regularly for a checkup.



**Glaucoma
Awareness
Month**
January

WHAT WE ALL SHOULD KNOW DURING “GLAUCOMA AWARENESS MONTH”

January is National Glaucoma Awareness Month, which aims to spread awareness about the disease.

According to the Glaucoma Research Foundation, more than 3 million people in the United States currently have glaucoma; however, experts estimate that half of those with glaucoma don't know they have it. The National Eye Institute projects this number of those with glaucoma will reach 4.2 million by 2030, a 58 percent increase. Glaucoma may not have any symptoms initially, but if left untreated, it can take away your vision over time.

Combined with our aging population, we can see an epidemic of blindness if awareness is not raised about the importance of regular eye examinations to preserve vision. The numbers prove the harsh reality about leaving glaucoma untreated — the World Health Organization estimates that 4.5 million people worldwide are blind due to glaucoma. Specifically, glaucoma is the leading cause of blindness among individuals 60 and older.

In this article Unicity Healthcare would like to share the information seniors and their caregivers should know about this dangerous eye condition, and how to protect your vision and maintain good eye health. Here's what you can do to protect yourself and your senior loved ones from the threat of glaucoma.

WHAT IS GLAUCOMA?

Glaucoma is a group of diseases that causes the fluid levels in the eye to rise, which in turn gradually steal sight, often without warning. Although the most common forms primarily affect the middle-aged and the elderly, glaucoma can affect people of all ages.

Vision loss is caused by damage to the optic nerve. This nerve acts like an electric cable with over a million wires. It is responsible for carrying images from the eye to the brain. Like many organs, the eye requires a balance of fluid to maintain its function. However, too much fluid in the eye causes a buildup of pressure around the optic nerve. If the pressure isn't relieved, the optic nerve is irreparably damaged.

While there is currently no cure for glaucoma, medication or surgery can slow or prevent further vision loss. The appropriate treatment depends upon the type of glaucoma among other factors.

TYPES OF GLAUCOMA



There are two main types of glaucoma: primary open-angle glaucoma (POAG), and angle-closure glaucoma. These are marked by an increase of intraocular pressure (IOP), or pressure inside the eye. When optic nerve damage has occurred despite a normal IOP, this is called normal tension glaucoma.

Secondary glaucoma refers to any case in which another disease causes or contributes to increased eye pressure, resulting in optic nerve damage and vision loss.

TWO MAIN TYPES OF GLAUCOMA: PRIMARY OPEN-ANGLE GLAUCOMA AND ACUTE ANGLE-CLOSURE GLAUCOMA

In the most common form, there are virtually no symptoms. Vision loss begins with peripheral or side vision, so if you have glaucoma, you may not notice anything until significant vision is lost.

1. Primary open-angle glaucoma often goes unnoticed until significant vision loss has occurred. Most commonly, peripheral vision is affected first. Over time, central vision can also be impacted. Primary open-angle glaucoma is the most common type of glaucoma. It happens gradually, where the eye does not drain fluid as well as it should – and as a result, eye pressure builds and starts to damage the optic nerve. This type of glaucoma is painless and causes no vision changes at first.

Some people can have optic nerves that are sensitive to normal eye pressure. This means their risk of getting glaucoma is higher than normal. Regular eye exams are important to find early signs of damage to their optic nerve.

2. Acute angle-closure glaucoma occurs rapidly and presents a variety of symptoms:

- Sudden vision loss
- Eye or brow aches
- Headaches
- Eye redness
- Nausea
- Vomiting
- Dilated pupil

If you're experiencing symptoms consistent with acute angle-closure glaucoma, it's vital to schedule an eye exam immediately. Vision loss associated with glaucoma cannot be reversed, but treatment can slow the disease's progression.

Many people with angle-closure glaucoma develop it slowly. This is called chronic angle-closure glaucoma. There are no symptoms at first, so they don't know they have it until the damage is severe or they have an attack. Angle-closure glaucoma can cause blindness if not treated right away.

THE IMPORTANCE OF REGULAR EYE EXAMS



Regular eye exams are especially important for those at higher risk for glaucoma, and may help to prevent unnecessary vision loss. The best way to protect your sight from glaucoma is to get a comprehensive eye examination. Then, if you have glaucoma, treatment can begin immediately. Glaucoma is the second leading cause of blindness in the world, and is a leading cause of blindness for people over 60 years old. But blindness from glaucoma can often be prevented with early treatment.

RISK FACTORS

Those at higher risk include people of African, Asian, and Hispanic descent. Other high-risk groups include: people over 60, family members of those already diagnosed, diabetics, and people who are severely nearsighted.

Individuals with a family history of glaucoma are also at higher risk. If you have diabetes, hypertension, or take corticosteroids for health conditions, you may also be at higher risk. It's important to visit your eye doctor twice per year, especially for those who have a higher than normal risk of getting glaucoma. This includes people who:

- are over age 40
- have family members with glaucoma
- are of African, Hispanic, or Asian heritage
- use long-term steroid medications
- have corneas that are thin in the center
- have high eye pressure
- are farsighted or nearsighted
- have had an eye injury
- have thinning of the optic nerve
- have diabetes, migraines, high blood pressure, poor blood circulation or other health problems affecting the whole body

If you're over the age of 65, you should schedule regular eye appointments to check your eye pressure. It's also important to stick to treatment plans if you have been diagnosed with the disease.

For many seniors, transportation to doctors' appointments is a challenge. A trusted home care provider or assisted living facility can help your senior loved one get the care they need as they age.



PROTECTING YOUR VISION

While anyone can develop glaucoma, those who are overweight, diabetics, people with high blood pressure, seniors and African-Americans are at significantly higher risk to suffer from glaucoma-related vision loss.

Here's what everyone can do to protect their eyesight:

- **Watch Your Weight** – Maintaining a healthy body weight lowers your risk of developing diabetes or high blood pressure which, in turn, decreases your likelihood of developing classic glaucoma or glaucoma-like retinopathy. Stick to a balanced diet and try to exercise regularly.
- **Monitor And Control Your Blood Pressure** – If you have hypertension, check your pressure every morning and every night (you can purchase a home blood pressure monitor at your local pharmacy). Keep a log of your pressures and see your doctor if your pressure spikes, or if you have chronically elevated pressures. Regular exercise, low-sodium and low-calorie diets can help you control your blood pressure and minimize the risk of developing hypertension-related glaucoma.
- **Have An Annual, Thorough Eye Exam Ever Year** – Make sure that you see your optometrist or ophthalmologist every year for an eye exam, and that he/she tests you specifically for glaucoma.

TREATMENT OPTIONS FOR GLAUCOMA

Most glaucoma can be managed with medication, some of which are as simple as taking eye drops. When medications aren't working or the glaucoma is severe, doctors use a procedure called selective laser trabeculoplasty, which opens up the eye to drain. If lasers cannot be used or are ineffective, surgery can also help to create drainage by removing a piece of tissue from the eye or installing a mini-shunt (about the size of a grain of rice.)



In the United States, approximately 120,000 are blind from glaucoma, accounting for 9% to 12% of all cases of blindness. You can learn more about glaucoma at the Glaucoma Research Foundation's website, where you can receive updates on glaucoma research, treatments, news and information.

Every year, countless people will suffer from this preventable vision loss. Thus, National Glaucoma Awareness Month is the perfect opportunity to gain information in order to help your loved ones understand what glaucoma is, as well as help to ensure they see their ophthalmologist regularly.



Thyroid Awareness Month

Spread Awareness

JANUARY IS THYROID AWARENESS MONTH: CALLING ATTENTION TO THYROID DISEASE IN SENIORS

January is “Thyroid Awareness Month,” which calls attention to the various health problems connected to the thyroid. Most of us have heard about thyroid glands, but we may not realize the importance of the gland or that we may have symptoms of this disease. Therefore, this month is dedicated to talking about thyroid disease – the conditions and symptoms, importance of diagnosis and treatment, as well as the many issues thyroid issues face day-to-day. In addition, health experts hope that publicizing information about thyroid diseases will educate people and encourage them to visit their physician for a simple blood test to determine if they need treatment.

Diagnosing thyroid disease in seniors can be difficult because some of the symptoms are also associated with aging or other medical conditions — however, these can also be signs of thyroid disease, as well.

In our blog, Unicity Healthcare will discuss the importance of “Thyroid Awareness Month” — as well as the function of the thyroid gland and the various thyroid health concerns that can arise, especially for seniors adults.

WHAT IS THE THYROID?

The thyroid is a gland in the neck in charge of your metabolism and creating new proteins. The gland is part of the endocrine system, which directly affects almost every single organ. It is responsible for regulating skin integrity, menstrual cycles, calcium levels, and the nervous system, heart and cholesterol levels. In addition, it controls brain development, your body temperature, respiration, metabolism and fat production. Thyroid problems begin to occur when the thyroid gland produces too much hormone or not enough.

There are several illnesses and diseases related to the thyroid, including hyperthyroidism, hypothyroidism, Hashimoto’s disease, Graves’ disease, and goiter, and thyroid cancer.

The thyroid may be only a small gland in your lower neck area, but it has a huge impact on your health. This butterfly-shaped gland makes thyroid hormones that help your body use energy and stay warm, according to the American Thyroid Association. Thyroid hormones also keep the brain, heart, muscles, and other organs working properly.



TYPES OF THYROID DISEASE

Today, some 30 million Americans are affected by thyroid disease. If you think you or a loved one may have a thyroid condition, you should learn about diagnosis, symptoms and treatments.

HYPERTHYROIDISM

Hyperthyroidism is where your thyroid works more actively than it should. Hyperthyroidism is most common in patients under age 50, and is marked by an enlarged thyroid gland, plus insomnia, a rapid heart rate, anxiety, weight loss, increased appetite, excessive perspiration, and diarrhea. However, the senior hypothyroidism patient may only have one or two of these symptoms, which can delay or prevent accurate diagnosis.

Although hyperthyroidism is associated with more energy, the body breaks down after a while, leading the person to feel more tired.

Other symptoms of hyperthyroidism include:

- Increased sweating
- Anxiety
- Oversensitivity to heat
- Palpitations
- Diarrhea
- Increased appetite
- Weight loss
- Dry, thin skin
- Hair loss
- Shakiness/trembling
- Fatigue
- Nervousness
- Insomnia
- Dry or gritty eyes/double vision

HYPOTHYROIDISM

Hypothyroidism means that your thyroid is working slower than it should. Hypothyroidism is most common in patients over 60, and the incidence of this disease increases with age. Symptoms in the older patient are often unspecific; and since older adults can also suffer memory impairment, weight loss, loss of appetite, it's easy to see why hypothyroidism is so under-diagnosed.

Symptoms of hypothyroidism include:

- Tiredness/fatigue
- Sensitivity to cold/heat
- Weight gain and inability to lose weight
- Constipation
- Depression
- Anxiety
- Slow movements, speech and thoughts
- Itchy and/or sore scalp
- Muscle aches, pains and weakness
- Poor appetite
- Dry and tight feeling skin
- Brittle hair and nails
- Numbness in limbs

There are many possible causes of hypothyroidism, including an autoimmune disease, certain medicines, or even surgical removal of a part of the thyroid gland.

HASHIMOTO'S DISEASE

Hashimoto's disease is also known as chronic lymphocytic thyroiditis. It's the most common cause of hypothyroidism in the United States, affecting about 14 million Americans. It can occur at any age, though it's most common in middle-aged women. The disease occurs when the body's immune system mistakenly attacks and slowly destroys the thyroid gland and its ability to produce hormones.

Some people with mild cases of Hashimoto's disease may have no obvious symptoms. The disease can remain stable for years, and symptoms are often subtle, which means they also mimic symptoms of many other conditions.

Symptoms include:

- fatigue
- depression
- constipation
- mild weight gain
- dry skin
- dry, thinning hair
- pale, puffy face
- heavy and irregular menstruation
- intolerance to cold
- enlarged thyroid, or goiter

THYROID DISEASE DIAGNOSIS



If you think you or your loved one may have an undiagnosed thyroid condition, you can start by doing a self-check of your (or your loved one's) neck for lumps, which could be an indication of a thyroid condition.

HOW TO PERFORM A SELF-CHECK:

Hold a hand mirror towards your neck, above the collarbones where you can see the area below your Adam's apple.

1. Tilt the head back, and take a sip of water.
2. Swallow the water, and watch your neck for signs of bulging.
3. Repeat the steps a few times to make sure you don't see obvious signs of bulging.
4. If you discover a bulge, nodule or an enlarged gland, contact your physician.

The only way to know for sure if you have thyroid disease of any type is to have a blood test that measures your thyroid hormone levels. To confirm whether there is a thyroid concern, your physician may perform a thyroid-stimulating hormone test. This blood test measures whether the gland is working properly. It is highly recommended to get tested if you are a senior over 60, have family members diagnosed with the disease or believe you have symptoms.

Diagnosing thyroid disease in seniors can be difficult because some of the symptoms are also associated with aging or other medical conditions. It is natural to assume symptoms such as memory issues, constipation or weight gain are part of the aging process. However, these can also be signs of thyroid disease.

CAUSES & TREATMENT OF THYROID DISEASES

There are several causes, but some common causes can be attributed to autoimmune disease, certain types of medications, thyroid surgery or radiation therapy. Anyone can develop thyroid problems, but women who are 60 years of age or older seem to be more susceptible.

Hypo- and hyperthyroidism can be treated with medication, iodine, or hormones, and the other conditions can be addressed with therapy or surgery. Both hypo- and hyperthyroidism can be treated with medicine or other approaches, which can greatly improve quality of life.

Luckily, thyroid prescriptions can usually get symptoms under control. However, it's important that family members and caregivers of senior loved ones keep abreast of new symptoms that may occur, because medications often times need to be changed, or dosages increased or decreased.



HELPING SENIORS WITH THYROID DISEASE

Caregivers and loved ones should know the signs and symptoms of thyroid disease, as it is more common than diabetes or heart disease and often under-diagnosed in seniors.

Caregivers should carefully monitor and discuss thyroid symptoms and aging complaints with seniors or elderly people in their charge. Professional caregivers are usually trained about the need to take care these concerns. If you're responsible for a senior that is taking thyroid medication, you need to see that the medication is taken the same exact time every day.



THE PANDEMIC COULD END IN 2022 — HERE'S WHAT 'NORMAL' LIFE MIGHT LOOK LIKE SOON, ACCORDING TO MEDICAL EXPERTS

Almost two years into the Covid-19 pandemic, an end might finally be in sight.

Experts say that Covid will likely lose its “pandemic” status sometime in 2022, due largely to rising global vaccination rates and developments of antiviral Covid pills that could become more widespread next year.

Instead, the virus will likely become “endemic,” eventually fading in severity and folding into the backdrop of regular, everyday life. Various strains of influenza have followed a similar pattern over the past century or more, from the Spanish flu pandemic of 1918 to the swine flu pandemic in 2009.

Covid will probably remain dangerous once the pandemic ends — much like the flu, which killed as many as 62,000 people in the U.S. between October 2019 and April 2020, according to the Centers for Disease Control and Prevention.

But barring any major developments, “normal” post-pandemic life could arrive soon. Here’s what you can expect from the next year and beyond:

Covid could become much more seasonal

Once endemic, Covid won’t dictate your daily decision-making as much, as billionaire health philanthropist Bill Gates described in his end-of-year blog post last week: “It won’t be primary when deciding whether to work from the office or let your kids go to their soccer game or watch a movie in a theater.”

Endemic illnesses are always circulating throughout parts of the world, but tend to cause milder illness because more people have immunity from past infection or vaccination. You might get a cough and sniffles, but if you’re up-to-date on your vaccinations, you’ll be protected enough to prevent severe illness or hospitalization.

Like other respiratory viruses, there will be times of year when Covid infections peak — most likely the colder fall and winter months, meaning Covid and flu seasons could regularly coincide going forward.

WHEN SICK, YOU’LL BE ADVISED TO KEEP WEARING MASKS AND STAYING HOME

If the virus does become more seasonal, wearing a mask on public transit and indoors during Covid season could become the norm — potentially even in offices, says Shaun Truelove, an infectious disease epidemiologist at Johns Hopkins Bloomberg School of Public Health and member of The Covid Scenario Modeling Hub, a team of researchers who make Covid projections.

Other familiar prevention strategies, like regularly washing your hands and maintaining distancing practices in high-risk settings, could also stick around.

“We don’t necessarily have to come up with new interventions [to prevent Covid],” Dr. Timothy Brewer, a professor of epidemiology at the UCLA Fielding School of Public Health, told CNBC Make It last week. “It’s just that we’ve got to do a better job continuing to do the things we know that work.”

To that end, Truelove hopes people “take a little bit more personal responsibility and stay home when they’re sick,” he says. That could mean working from home if you’re symptomatic but still able to work, or taking a sick day when you know you need to rest, he adds.

COVID TESTS COULD GET MORE AFFORDABLE AND ACCESSIBLE

If you've ever waited in a long line to get a Covid test, or stressed about getting your results back in time for an event, you know firsthand how the country has been "hamstrung by the delays and challenges with getting PCR tests," Truelove says.

In early December, President Joe Biden announced a plan to require private insurance companies to cover the cost of rapid at-home Covid-19 tests. If you're one of the 150 million people in the U.S. with private health insurance, you could potentially one day get reimbursed for a Covid test that you buy at the drug store.

The plan is imperfect, experts say, because not everyone can afford to wait for reimbursement — and the responsibility would fall on consumers to figure out how to file a claim. At-home Covid tests approved by the Food and Drug Administration are widely available now, but the tests can cost upwards of \$20 a pop.

Elsewhere around the world, you can get a rapid Covid test for free, a model that some experts say could be replicated in the U.S.

MORE KIDS WILL BE ABLE TO GET VACCINATED AGAINST COVID

On November 2, children ages 5 to 11 finally became eligible to get the Covid vaccine. Seven million shots have been administered to those kids so far in December alone, CDC director Dr. Rochelle Walensky said during a press briefing Monday.

If you have children under age 5, you might wonder when vaccine eligibility will expand to those young children. Scientists are currently working on getting you an answer, by determining an appropriate dosage for the age group.

It's an important determination. Too high of a dosage could lead to unwanted side effects, while too low of a dosage won't effectively protect your child.

Pfizer anticipates having data on its Covid vaccine in this age group by the end of this year, and potentially getting federal authorization in early 2022. Moderna's researchers won't have enough comparable data to move forward until mid-January, Dr. Bill Hartman, a principal investigator for UW Health's KidCOVE Moderna pediatric vaccine trial, told TODAY last week.

ANNUAL COVID BOOSTERS COULD BECOME A REALITY

On Monday, Walensky touted boosters as the best available defense against the threat of new Covid variants like omicron. Currently, 27% of fully vaccinated people who are eligible for booster shots have gotten them, according to the CDC.

There's a chance you might need to get regular Covid boosters going forward. Some experts say that Covid vaccines could become an annual occurrence, similar to your flu shot.

This might be a good thing: If new Covid variants keep popping up, each year's booster can be specifically designed to fight whichever variant is dominant at the time.

But convincing people to follow through could prove challenging. It's hard enough to convince people to get their annual flu shots: During the last flu season before Covid, only 48% of American adults got a flu vaccine, according to the CDC.

The CDC currently recommends annual flu vaccinations for anyone 6 months or older.

"People in a pandemic can accept things," Ali Ellebedy, an associate professor of pathology and immunology at Washington University School of Medicine in St. Louis, told STAT on Wednesday. "But I think if you're talking about a regular vaccine that's not really needed because of a pandemic, I'm not sure if people would be more accepting of that."

Correction: *This story has been corrected to reflect that it is nearly two years into the pandemic.*

Resources:

<https://www.personalizedcause.com/health-awareness-cause-calendar/national-birth-defects-prevention-month>

https://www.cdc.gov/cancer/cervical/basic_info/screening.htm

<https://www.unicityhealthcare.com/what-we-all-should-know-during-glaucoma-awareness-month/>

<https://www.unicityhealthcare.com/january-is-thyroid-awareness-month-calling-attention-to-thyroid-disease-in-seniors/>

<https://www.cnn.com/2021/12/15/what-living-with-endemic-covid-will-look-like-in-2022-and-future.html>