01 November

H-3 Monthly Newsletter

November is:

- National Diabetes
 Awareness Month
- National Bladder Health Month
- National Alzheimer's Awareness Month
- National Family Caregivers Month
- National Lung Cancer Awareness Month
- The GREAT American Smokeout, Thursday, November 21

In His Service,



"Therefore we do not lose heart.
Though outwardly we are wasting
away, yet inwardly we are being
renewed day by day."

2 Corinthians 4:16



Linking Diabetes and Cardiovascular Disease

Adults with diabetes are nearly twice as likely to die from heart disease or stroke as people without diabetes. This is because over time, high blood glucose from diabetes can damage your blood vessels and the nerves that control your heart. The good news is that the steps you take to manage your diabetes can also help lower your chances of having heart disease or a stroke:

- Stop smoking or using other tobacco products.
- Manage your A1C, blood pressure, and cholesterol levels.
- Develop or maintain healthy lifestyle habits be more physically active and learn ways to manage stress.
- Take medicines as prescribed by your doctor.



Two common health problems affecting the bladder are **urinary incontinence** and **overactive bladder (OAB)**.

URINARY INCONTINENCE

Urinary incontinence touches more than 25 million people in the U.S. The severity of urinary incontinence ranges from leaking urine when you cough or sneeze to having that strong "gotta go" urge or feeling. For most, simple lifestyle changes or health care treatments can ease your symptoms or stop urinary incontinence.

OVERACTIVE BLADDER

Our bladder serves two roles - 1)store urine and 2)empty urine. With OAB, these functions are not as effective and can cause strong, sudden urges to go to the bathroom and, for some patients, result in urinary incontinence or leakage. OAB isn't a disease - it's the name given to a group of troubling urinary symptoms. With more than 33 million adults in the U.S. with OAB symptoms, it's very common.

BLADDER HEALTH TIPS

While bladder health is not often top of mind, there are ways to keep your bladder healthier year-round. Below are a number of tips to help keep your bladder in good shape.

DRINK PLENTY OF WATER

- Strive to drink 6 to 8 cups of water each day.
- Cut down on the amount of caffeine and alcohol you drink these may upset your bladder.

Limit your intake of coffee, tea or cola as these can heighten bladder activity and lead to leakage.

USE GOOD BATHROOM HABITS

- It is normal to go to the bathroom 4 to 8 times a day and no more than twice a night.
- Women should sit to go to the toilet they should not hover over the toilet seat.
- Take your time when on the toilet so that your bladder can empty if you rush, and do not empty your bladder fully, over time, you could get a bladder infection.

STAY AWAY FROM FOODS THAT BOTHER THE BLADDER

Some foods can worsen incontinence. Skip foods like chocolate (also a source of caffeine), as well as spicy or acidic foods like tomatoes and citrus fruits.

LOOK AFTER YOUR PELVIC FLOOR MUSCLES

• Keep your pelvic floor muscles strong with pelvic floor muscle training.

STOP SMOKING

- It is of great value to stop smoking for your bladder health using tobacco is a major cause of bladder cancer.
- Cigarette smokers are two to three times more likely to be told they have bladder cancer, than nonsmokers.

SPEAK FREELY

Tell your healthcare provider about your symptoms. You may feel embarrassed; but keep in mind, your healthcare provider is used to hearing about all kinds of problems. They are very common and there are a number of treatments available. Many bladder conditions can be handled through simple lifestyle changes, behavior modifications, medication, bladder retraining or surgery. If you feel you may have symptoms of OAB or urinary incontinence, be sure to talk to your doctor about which treatment is right for you.

DID YOU KNOW?

In a recent survey of 1,000 American adults funded and developed with collaboration by Astellas Pharma US, Inc., researchers found many of us are not comfortable talking about urination. The survey also found:

• Americans use code words to discuss urination, most commonly using phrases like "using the bathroom" (62%), "peeing" (55%), "taking a leak" (19%), or "going potty" (17%).

• Even if experiencing signs of an overactive bladder, which can include sudden, unexpected urge to urinate that cannot be controlled and waking up at night to urinate, the survey showed that many Americans would not talk to anyone about these symptoms.

WHAT IS ALZHEIMER'S DISEASE?

Alzheimer's disease is a type of dementia that leads to memory, thinking, and behavior problems. It is the most common form of dementia, accounting for 60 to 80 percent of all cases. It is also the sixth leading cause of death in the United States.

AlZheimer's Awarenes Alzheimer's disease gets worse over time and eventually comes to a point where a person can no longer accomplish daily tasks. In the beginning, memory problems are mild, but as the disease progresses, patients become unaware of their environment and may no longer be able to carry on a conversation. Once their symptoms become noticeable, Alzheimer's patients typically live an average of eight years, but can survive for as many as 20 years depending on other health factors.

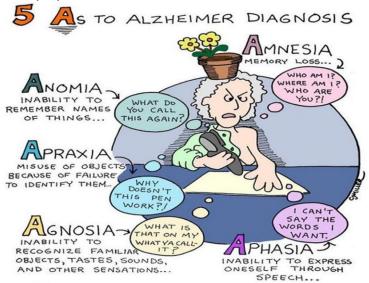
Although those ages 65 and older are more likely to develop Alzheimer's disease, there are thousands of others under the age of 65 who have early-onset Alzheimer's.

Is There a Cure for Alzheimer's Disease?

There are no drugs or treatments to cure Alzheimer's disease, but there are treatments that can slow down its progression. Researchers are constantly looking for new treatments as they search for a cure for this mind-robbing disease.

ALZHEIMER'S DISEASE SYMPTOMS

Part of Alzheimer's disease awareness is knowing the symptoms so you can know whether a loved one may be developing it. The symptoms include:



HELPING PEOPLE WITH ALZHEIMER'S DISEASE

Although there is no cure for Alzheimer's disease, there are things you can do to help a loved one, especially if the disease is still in its early stages.

- **Keep a Daily Routine** This helps to avoid confusion and lets the person know what can be expected. Alzheimer's patients like routines.
- **Don't Overstimulate** Keep things simple. Say one thing at a time. Present only one idea so that the person can understand it the best they can.
- **Be Reassuring** Always try to make the person feel safe and comfortable. Sometimes even saying the words, "You are safe with me" is enough to make that person feel at ease.
- **Don't Yell or Argue** As frustrated as you may get, imagine how the patient feels. They can no longer grasp what is going on inside their own heads. Don't yell or argue out of frustration. Be the calming voice they need.

While you may be able to care for an Alzheimer's patient in the early stages of the disease, doing so as it progresses can become more challenging. Many times the patient can present a danger to himself by <u>wandering off</u> or forgetting to turn off the stove. If this is the case it may be time to consider a memory care facility that can monitor and manage the patient.

"CAREGIVING AROUND THE CLOCK."

November is National Family Caregivers Month. It is a time to recognize and honor family caregivers across the country. This year's theme is "Caregiving Around the Clock."



This special observance enables us to do the following:

- raise awareness of family caregiver issues,
- celebrate the efforts of family caregivers,
- educate family caregivers about selfidentification, and
- increase support for family caregivers.

"Caregiving can be a 24-hours-a-day, seven-days-a-week job," states the Caregiver Action Network, which spearheads National Family Caregivers Month. "Providing care around the clock can crowd out other important areas of life."

What challenges do family caregivers face, and how do they manage them day and night?

• Morning: The average family caregiver is a working mother of school-aged children. Mornings become a tricky balancing act of getting the kids ready for school, making sure your loved one has what they need for the day, and then getting yourself out the door for work.

- Throughout the Day: Up to 70 percent of the time, the family caregiver manages the medications. The more serious the condition, the more likely it is that the family caregiver manages the medications for the patient. This means ensuring their loved one is taking medication correctly and maintaining an up-to-date medication list.
- During the Workday: Six out of 10 family caregivers work full or part time in addition to juggling their caregiving responsibilities at home. Most say they have to cut back on working hours, take a leave of absence, or quit their job entirely.
- Evening: Evenings are for family time and mealtime. Nutrition is as important for caregivers as it is for their loved ones. Proper nutrition helps maintain strength, energy, stamina and a positive attitude.
- Late at Night: This might be the only time that family caregivers get a few minutes for themselves to rest and recharge. The chance to take a breather and re-energize is vital so they can be as good a caregiver tomorrow as they were today.
- Middle of the Night: If loved ones may need to go to the emergency room in the middle of the night on occasion, family caregivers should be prepared ahead of time with what they need to know and what they need to have with them.

During National Family Caregivers Month, we recognize the challenges family caregivers face when their loved ones need "Caregiving Around the Clock." The <u>Caregiver Action Network website</u> (link is <u>external</u>) provides promotional materials for general use, including a media kit, posters and sample proclamations.

The <u>Caregiver Action Network (link is external)</u> (the National Family Caregivers Association) began promoting national recognition of family caregivers in 1994. President Clinton signed the first National Family Caregivers Month Presidential Proclamation in 1997, and every president since has followed suit by issuing an <u>annual proclamation (link is external)</u> recognizing and honoring family caregivers in November.

The Caregiver Action Network (CAN) is the nation's leading family caregiver organization working to improve the quality of life for the more than 90 million Americans who care for loved ones with chronic conditions, disabilities, disease, or the frailties of old age. CAN serves a broad spectrum of family caregivers, from the parents of children with special needs and the families of wounded soldiers to a young couple dealing with a diagnosis of MS and adult children caring for parents with Alzheimer's disease. The nonprofit organization provides education, peer support and resources to family caregivers across the country free of charge.



SIGNS AND SYMPTOMS OF LUNG CANCER

Most lung cancers do not cause any symptoms until they have spread, but some people with early lung cancer do have symptoms. If you go to your doctor when you first notice symptoms, your cancer might be diagnosed at an earlier stage, when treatment is more likely to be effective.

Most of these symptoms are more likely to be caused by something other than lung cancer. Still, if you have any of these problems, it's important to see your doctor right away so the cause can be found and treated, if needed.

THE MOST COMMON SYMPTOMS OF LUNG CANCER ARE:

- A cough that does not go away or gets worse
- Coughing up blood or rust-colored sputum
- Chest pain that is often worse with deep breathing, coughing, or laughing
- Hoarseness
- Loss of appetite

- Unexplained weight loss
- Shortness of breath
- Feeling tired or weak
- Infections such as bronchitis and pneumonia that don't go away or keep coming back
- New onset of wheezing

If LUNG CANCER SPREADS TO OTHER PARTS OF THE BODY, IT MAY CAUSE:

- Bone pain (like pain in the back or hips)
- Nervous system changes (such as headache, weakness or numbness of an arm or leg, dizziness, balance problems, or seizures), from cancer spread to the brain
- Yellowing of the skin and eyes (jaundice), from cancer spread to the liver
- Swelling of lymph nodes (collection of immune system cells) such as those in the neck or collarbone

Some lung cancers can cause **syndromes**, which are groups of specific symptoms.

HORNER SYNDROME

Cancers of the upper part of the lungs are sometimes called **Pancoast tumors**. These tumors are more likely to be non-small cell lung cancer (NSCLC) than small cell lung cancer (SCLC). Pancoast tumors can affect certain nerves to the eye and part of the face, causing a group of symptoms called Horner syndrome:

- Drooping or weakness of one upper eyelid
- A smaller pupil (dark part in the center of the eye) in the same eye
- Little or no sweating on the same side of the face

Pancoast tumors can also sometimes cause severe shoulder pain.

SUPERIOR VENA CAVA SYNDROME

The superior vena cava (SVC) is a large vein that carries blood from the head and arms down to the heart. It passes next to the upper part of the right lung and the lymph nodes inside the chest. Tumors in this area can press on the SVC, which can cause the blood to back up in the veins. This can lead to swelling in the face, neck, arms, and upper chest (sometimes with a bluish-red skin color). It can also cause headaches, dizziness, and a change in consciousness if it affects the brain. While SVC syndrome can develop gradually over time, in some cases it can become life-threatening, and needs to be treated right away.

PARANEOPLASTIC SYNDROMES

Some lung cancers make hormone-like substances that enter the bloodstream and cause problems with distant tissues and organs, even though the cancer has not spread to those places. These problems are called paraneoplastic syndromes. Sometimes these syndromes may be the first symptoms of lung cancer. Because the symptoms affect other organs, a disease other than lung cancer may first be suspected as causing them.

Paraneoplastic syndromes can happen with any lung cancer but are more often associated with SCLC. Some common syndromes include:

- SIADH (syndrome of inappropriate anti-diuretic hormone): In this condition, the cancer cells make ADH, a hormone that causes the kidneys to hold water. This lowers salt levels in the blood. Symptoms of SIADH can include fatigue, loss of appetite, muscle weakness or cramps, nausea, vomiting, restlessness, and confusion. Without treatment, severe cases may lead to seizures and coma.
- Cushing syndrome: In this condition, the cancer cells make ACTH, a hormone that causes the adrenal glands to make cortisol. This can lead to symptoms such as weight gain, easy bruising, weakness, drowsiness, and fluid retention. Cushing syndrome can also cause high blood pressure, high blood sugar levels, or even diabetes.
- Nervous system problems: SCLC can sometimes cause the body's immune system to attack parts of the nervous system, which can lead to problems. One example is a muscle disorder called Lambert-Eaton syndrome. In this syndrome, muscles around the hips become weak. One of the first signs may be trouble getting up from a sitting position. Later, muscles around the shoulder may become weak. A less common problem is paraneoplastic cerebellar degeneration, which can cause loss of balance and unsteadiness in arm and leg movement, as well as trouble speaking or swallowing. SCLC can also cause other nervous system problems, such as muscle weakness, sensation changes, vision problems, or even changes in behavior.
- High levels of calcium in the blood (hypercalcemia), which can cause frequent urination, thirst, constipation, nausea, vomiting, belly pain, weakness, fatigue, dizziness, and confusion
- Blood clots



Again, many of these symptoms are more likely to be caused by something other than lung cancer. Still, if you have any of these problems, it's important to see your doctor right away so the cause can be found and treated, if needed.



Persistent Cough









Breathlessness



ABOUT THE GREAT AMERICAN SMOKEOUT

The American Cancer Society Great American Smokeout® is an annual event that encourages and offers support to smokers to make a plan to quit smoking or to quit smoking on the day of the event – the third Thursday in November each year. By quitting – even for one day – smokers will be taking an important step toward a healthier life and reducing their cancer risk.

The American Cancer Society Great American Smokeout®

takes place on the third Thursday in November - November 21, 2019.

To learn more about the Great American Smokeout campaign and to explore event tools, resources, and where to get help to quit smoking, please visit:

https://www.cancer.org/healthy/stay-away-from-tobacco/great-american-smokeout.html.



resources this issue

Resources: https://www.niddk.nih.gov/health-information/communication-programs/ndep/partner-community-organization-information/national-diabetes-month

https://www.urologyhealth.org/careblog/november-is-bladder-health-month

https://www.seniorliving.org/memory-care/alzheimers/awareness/

https://www.npaonline.org/november-national-family-caregivers-month

https://www.cancer.org/cancer/lung-cancer/detection-diagnosis-staging/signs-symptoms.html

https://www.tobaccofreecampus.org/the-great-american-smokeout