ISSUE
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June-July
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H-3 Monthly Newsletter

Summer Months mean:

**Tips for Keeping Food Safe in Hot Weather

**Safety from the sun, Lightning, Fireworks, Etc.

June.....

- Men's Health Month
- National Migraine & Headache Awareness Month
- National Lightning Safety Awareness Month
- Firework Eye Safety & Cataract Awareness Month

July.....

- Juvenile Arthritis Awareness Month
- UV (Ultraviolet) Safety Day

In His Service,

H-3 Ministry

"Therefore, I urge you, brothers and sisters, in view of God's mercy, to offer your bodies as a living sacrifice, holy and pleasing to God—this is your true and proper worship. 2 Do not conform to the pattern of this world, but be transformed by the renewing of your mind. Then you will be able to test and approve what God's will is—his good, pleasing and perfect will."

Romans 12:1-2

TRINITY MISSIONARY BAPTIST CHURCH

Tips for Keeping Food Safe in Hot Weather

A popular way to celebrate summer holidays or any party occasion is to invite friends and family for a cook-out.

However, this type of food service where foods are left out for long periods leave the door open for uninvited guests — bacteria that cause food borne illness.

Keeping Food Safe

Basically, the idea is to keep hot foods hot and cold foods cold. This means forethought and preparation on the part of the cook, including safe food preparation, smart transportation of foods to your destination, and safely storing leftovers.

The following are some tips to help you have a safe cook-out celebration.

Safe Food Handling

Always wash your hands before and after handling food

- Keep your kitchen, dishes and utensils clean
- Always serve food on clean plates — not those previously holding raw meat and poultry. Otherwise, bacteria which may have been present in raw meat juices can cross contaminate the food to be served.

The Two-Hour Rule

Foods should not sit at room temperature for more than two hours. Keep track of how long foods have been sitting on the buffet table and discard anything there two hours or more.

And if it's above 90 degrees, then food should only be out for an hour or less.

To ensure food is not out for longer than 2 hours, cook items such as hot dogs, brats, chicken, and other grilled food in batches. This ensures that everyone is eating a fresh and warm grilled item.

Keep Hot Foods Hot

Hot foods should be held at 140°F or warmer. On the buffet table you can keep hot foods hot with chafing dishes, slow cookers, and warming trays.

A thermos can be used to keep hot foods warm when there isn't any electricity available. This works well for things such as baked beans and semi-liquid dishes. Simply put the thermos bottles in a cooler without the ice and place towels on top to help keep the food warm.

And Keep Cold Foods Cold

Cold foods should be held at 40°F or colder.

Keep foods cold by nesting dishes in bowls of ice. Otherwise, use small serving trays and replace them. And store food in the shade out of direct sunlight when possible.

If possible, have all your cooler food in watertight containers. Add water to the ice which will keep the foods and beverages colder for a longer period.

If you don't have blue-ice packs, you can fill up zip-top baggies, plastic or cardboard cartons with water and freeze ahead of time.

Be sure the food is already cold before putting into a cold cooler of ice to keep temperatures low. Warm or even room temperature foods added to a cold cooler will reduce your storage time.

Leftovers
Leftover hot foods need to be refrigerated or iced immediately to avoid bacteria contamination. Make sure you bring extra ice if you are away from home.

Headache and Migraine Diagnosis

In order to receive proper treatment for headaches and migraines, a correct diagnosis must be made. That means your doctor will first ask you about the history of your headaches. It is important to describe your headache symptoms and characteristics as completely as possible.

Headache History

Your headaches can be better diagnosed if you tell your doctor:

- How old you were when the headaches started
- How long you have been experiencing them
- If you experience a single type of headache or multiple types of headaches
- How often the headaches occur
- What causes the headaches, if known (for example, do certain situations, foods, or medications trigger the headaches?)
- Who else in your family has headaches
- What symptoms, if any, occur between headaches
- If your school or work performance has been affected by the headaches

It is also important to tell your doctor how you feel when you get a headache and what happens when you get a headache, such as:

- Where the pain is located
- What it feels like
- How severe the headache pain is, using a scale from one (mild) to 10 (severe)
- How long the headache lasts
- If the headaches appear suddenly without warning or with accompanying symptoms
- What time of day the headache usually occurs
- If there is an aura (changes in vision, blind spots, or bright lights) before the headache
- What other symptoms or warning signs occur with a headache (such as weakness, nausea, sensitivity to light or noise, appetite changes, changes in attitude or behavior)
- How frequently you get headaches

You should also tell your doctor if you've been treated in the past for headaches and what medications (both prescribed and over-the-counter) you have taken in the past and what medications are currently being taken. Don't hesitate to list them, bring the bottles, or ask your pharmacist for a printout.
Studies performed by other doctors who may have evaluated your headaches in the past, including X-rays and other imaging tests, are also very important; you should bring these to your appointment. This may save time and repeated tests.

Physical and Neurological Exams to Diagnose Headaches

After completing the headache history portion of the evaluation, the doctor will perform a complete physical and neurological exam. The doctor will look for signs and symptoms of an illness that may be causing the headaches, such as:

- Fever or abnormalities in breathing, pulse, or blood pressure
- Infection
- Nausea, vomiting

- Changes in personality, inappropriate behavior
- Mental confusion
- Seizures
- Loss of consciousness
- Excessive fatigue, wanting to sleep all of the time
- High blood pressure
- Muscle weakness, numbness, or tingling
- Speech difficulties
- Balance problems, falling
- Dizziness
- Vision changes (blurry vision, double vision, blind spots)
- Brain abscess (an infection of the brain)
- Hemorrhage (bleeding within the brain)
- Bacterial or viral meningitis (an infection or inflammation of the membrane that covers the brain and spinal cord)

Neurological tests focus on ruling out diseases of the brain or nerves that may also cause headaches and migraines. The vast majority of headaches turn out to be benign in nature. Some of the tests look for a physical or structural abnormality in the brain that may cause your headache, such as:

- Tumor
- Pseudotumor cerebri (increased intracranial pressure)
- Hydrocephalus (abnormal build-up of fluid in the brain)
- Infection of the brain such as meningitis or Lyme disease
- Encephalitis (inflammation and swelling of the brain)
- Blood clots
- Head trauma
- Sinus blockage or disease
- Blood vessel abnormalities
- Injuries
- Aneurysm (a "bubble" in the wall of a blood vessel that can leak or rupture)

Psychological Evaluation for Diagnosing Headaches

An interview with a psychologist is not a routine part of a headache evaluation, but it may be done to identify stress factors triggering your headaches. You may be asked to complete a computerized questionnaire to provide more in-depth information to the doctor.

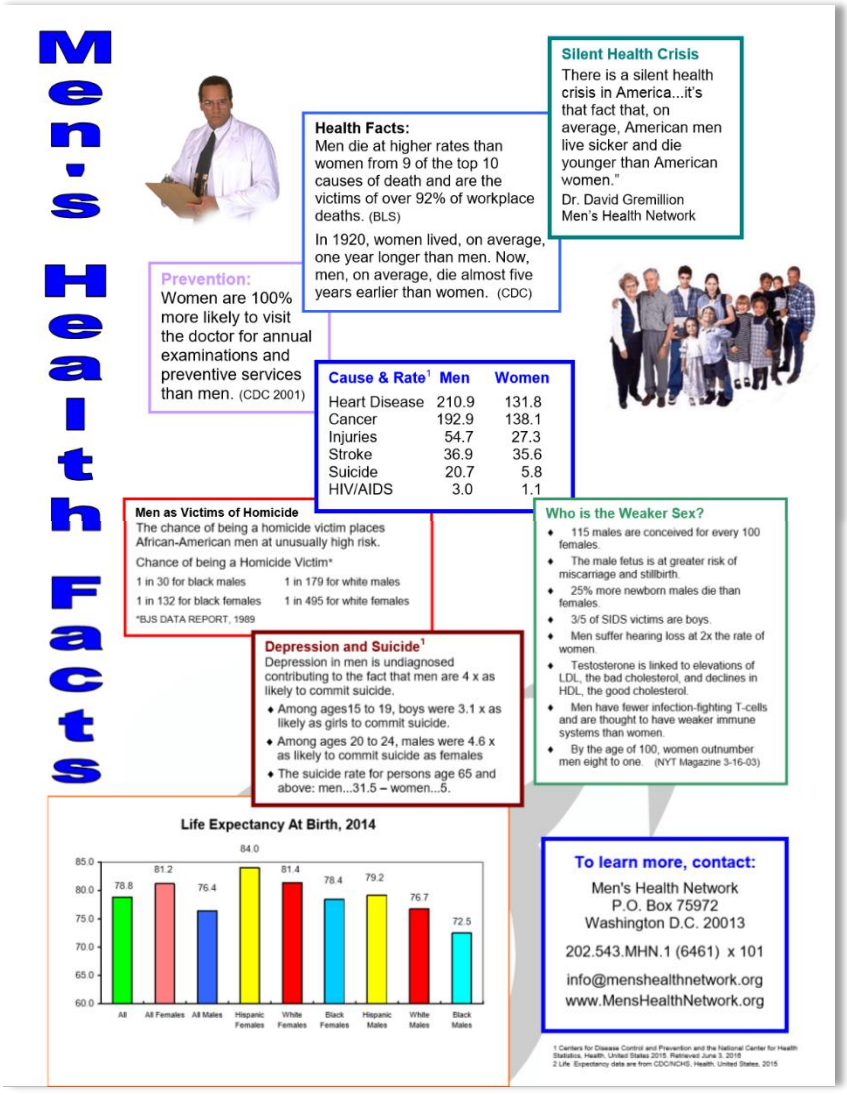
After evaluating the results of the headache history and physical, neurological, and psychological exams, your doctor should be able to determine the type of headache you have, whether a serious problem is present, and whether additional tests are needed. Possible additional tests you may be given include diagnostic tests.

Tests for Diagnosing Headaches

Additional tests may be needed to look for other medical conditions that may be causing your headaches or migraines. These tests are listed below. Keep in mind that most of these laboratory tests are *not* helpful in diagnosing migraine, cluster, or tension headaches.

- **Blood Chemistry and Urinalysis.** These tests may determine many medical conditions, including diabetes, thyroid problems, and infections, which can cause headaches.
- **CT Scan.** This is a test in which X-rays and computers are used to produce an image of a cross-section of the body. A CT scan of the head may be recommended to rule out other conditions if you are getting daily or almost daily headaches.

- **MRI.** This test produces very clear pictures, or images, of the brain without the use of X-rays. MRI uses a large magnet, radio frequency (RF), and a computer to produce these images. A MRI may be recommended if you are getting daily or almost daily headaches. It may also be recommended if a CT scan does not show definitive results. In addition, a MRI scan is used to evaluate certain parts of the brain that are not as easily viewed with CT scans, such as the spine at the level of the neck and the back portion of the brain.
- **Sinus X-Ray.** Although the CT scan and MRI provide more details, your doctor may use this test if your symptoms seem to indicate sinus problems.
- your doctor suspects you are having seizures.
- **Eye Exam.** An eye pressure test performed by an eye doctor (ophthalmologist) will rule out glaucoma or pressure on the optic nerve as a cause of headaches.
- **Spinal Tap.** A spinal tap is the removal of spinal fluid from the spinal canal (located in the back). This procedure is performed to look for conditions such as infections of the brain or spinal cord.



Overview: Lightning Safety

There is no safe place outside when thunderstorms are in the area. If you hear thunder, you are likely within striking distance of the storm. Just remember, “When Thunder Roars, Go Indoors!” Too many people wait far too long to get to a safe place when thunderstorms approach. Unfortunately, these delayed actions lead to many of the lightning deaths and injuries in the U.S.

The best way for you to protect yourself from lightning is to avoid the threat. You simply don’t want to be caught outside in a storm. Have a lightning safety plan, and cancel or postpone activities early if thunderstorms are expected. Monitor weather conditions and get to a safe place before the weather becomes threatening. Substantial buildings and hard-topped vehicles are safe options. Rain shelters, small sheds, and open vehicles are not safe.

When inside, do not touch anything that is plugged into an electrical outlet, plumbing, and corded phones. Cell phones and cordless phones are safe. Also, keep away from outside doors and windows and do not lie on a concrete floor. Lightening can often travel through electrical systems, radio/television reception systems and metal wires/bars used to strengthen concrete flooring or walls.

Understanding the Threat

The threat that someone will be struck by lightning depends on their behavior when thunderstorms are in the area. The graphs below provide some insight into why and when people are struck by lightning and what can do to lower their risk.

In the first graph, the threat of lightning increases as a thunderstorm approaches, reaches a peak when the storm is overhead, and then gradually diminishes as the storm moves away. At the same time, it's people's behavior that determines the risk of a fatal lightning strike. While some people move inside at the first signs of a thunderstorm, many people wait far too long to get to a safe place. Some wait until the thunderstorm is overhead and it starts to rain. Others, due to poor planning, are caught outside and can't get to a safe place. Although most people get inside, some put themselves at risk by touching items that could become electrified by a nearby lightning strike. Finally, many people go outside too soon after the storm has seemingly passed, often only waiting for the rain to become lighter or end. It is all of these unsafe behaviors that put people at risk when thunderstorms are in the area.

Minimizing the Risk

To minimize your personal risk of being struck by lightning, when going outside, plan ahead so that you can get to a safe place quickly if a thunderstorm threatens. If the sky looks threatening or if you hear thunder, get inside a safe place immediately. Once inside, avoid contact with corded phones, electrical equipment, plumbing, and windows and doors. Finally, wait 30 minutes after the last lightning or thunder before going back outside. If everyone followed those simple rules, the number of lightning casualties in this country could be greatly reduced.

Remember, it is your behavior when thunderstorms are in the area that determines your personal risk of being struck by lightning. **When Thunder Roars, Go Indoors!**

Lightning Victims

If someone is struck by lightning, they may need immediate medical attention. Lightning victims do not carry an electrical charge and are safe to touch. Call 911 and monitor the victim. Start CPR or use an Automated External Defibrillator if needed.

Fireworks Eye Safety & Cataracts Awareness Month

June marks Fireworks Eye Safety and Cataracts Awareness Month. Fireworks cause more than 9,000 injuries a year, and cataracts (a vision-clouding area in the lens of the eye) are one of the leading causes of blindness in the United States, according to the American Academy of Ophthalmology.

With 4th of July celebrations coming up, it's extremely important to know and understand Firework Safety. If you are attending/hosting a firework show, you should always:

- Remain at least 500 feet away
- Do not allow any running or horseplay
- Set off fireworks outdoors in a clear area- away from houses, trees, dry leaves, and other flammable materials
- Keep a bucket of water nearby
- Do not try to relight "dud" fireworks- soak them in water and throw them away
- Never light fireworks in a container
- Never have your body directly over a firework while lighting
- Do not experiment with homemade fireworks
- Do not touch exploded fireworks. Wait at least 20 minutes for them to cool and soak in water before disposing
- Wear safety glasses while lighting fireworks

Sparklers are often thought of as the ideal safe firework for children. Sparklers burn at very high temperatures and one spark in the eye could harm a child's vision permanently. They should never be used without adult supervision, and preferably never in the hand of a child.

The sun is just as dangerous to your vision as fireworks. Without proper eye protection, the sun can cause cataracts, which are the most

common cause of vision loss for individuals over the age of 40. Here are some tips to help prevent the development of cataracts:

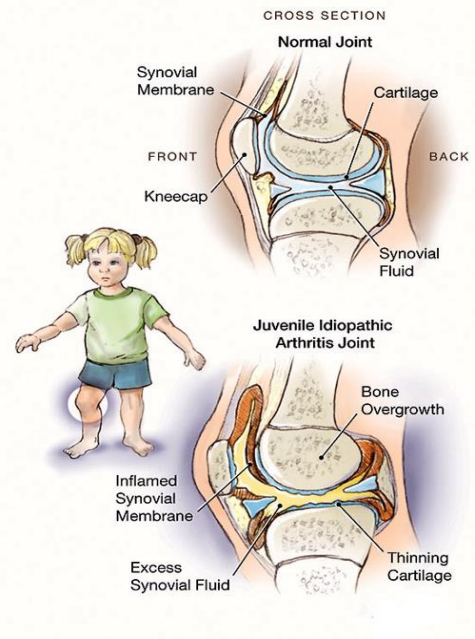
- Eat Right: Introduce more antioxidant and glutathione-rich (a detoxifying antioxident) foods into your diet such as broccoli, asparagus, spinach, brussels sprouts, avocados, grapefruit, and strawberries. Drink plenty of water also helps flush out harmful toxins.
- Wear Protective Glasses: The suns UV rays are harmful to your eyes, and researches have confirmed that UV rays can cause cataracts by damaging proteins within the lens of your eyes. Whichever brand or style you choose, make sure they offer 99%-100% protection against UVA and UVB rays.
- Avoid Smoking: Everyone knows that smoking is harmful to your heart and lungs, but smoking can also harm your eyes. Free radicals are created in your eyes when you inhale smoke. When you smoke, good chemicals in your body are consumed, encouraging the production of toxins that cause cataracts.

Of course, the answer to maintaining eye health for all the above is the receive regular eye exams. Partaking in regular eye exams can help doctors catch early eye diseases, inform you of preventative measures, and keep your overall eye health on track while aging.

Juvenile Arthritis

What is Juvenile Arthritis?

Juvenile arthritis (JA) is not a disease in itself. Also known as pediatric rheumatic disease, JA is an umbrella term used to describe the many autoimmune and inflammatory conditions or pediatric rheumatic diseases that can develop in children under the age of 16. Juvenile arthritis affects nearly 300,000 children in the United States.



Although the various types of juvenile arthritis share many common symptoms, like pain, joint swelling, redness and warmth, each type of JA is distinct and has its own special concerns and symptoms. Some types of juvenile arthritis affect the musculoskeletal system, but joint symptoms may be minor or nonexistent. Juvenile arthritis can also involve the eyes, skin, muscles and gastrointestinal tract.

Types of Juvenile Arthritis

- **Juvenile idiopathic arthritis (JIA)**. Considered the most common form of arthritis, JIA includes six subtypes: oligoarthritis, polyarthritis, systemic, enthesitis-related, juvenile psoriatic arthritis or undifferentiated.
- **Juvenile dermatomyositis**. An inflammatory disease, juvenile dermatomyositis causes muscle weakness and a skin rash on the eyelids and knuckles.
- **Juvenile lupus**. Lupus is an autoimmune disease. The most common form is systemic lupus erythematosus, or SLE. Lupus can affect the joints, skin, kidneys, blood and other areas of the body.
- **Juvenile scleroderma.** Scleroderma, which literally means “hard skin,” describes a group of conditions that causes the skin to tighten and harden.
- **Kawasaki disease.** This disease causes blood-vessel inflammation that can lead to heart complications.

- **Mixed connective tissue disease**. This disease may include features of arthritis, lupus dermatomyositis and scleroderma, and is associated with very high levels of a particular antinuclear antibody called anti-RNP.
- **Fibromyalgia.** This chronic pain syndrome is an arthritis-related condition, which can cause stiffness and aching, along with fatigue, disrupted sleep and other symptoms. More common in girls, fibromyalgia is seldom diagnosed before puberty.

Juvenile Arthritis Causes

No known cause has been pinpointed for most forms of juvenile arthritis, nor is there evidence to suggest that toxins, foods or allergies cause children to develop JA. Some research points toward a genetic predisposition to juvenile arthritis, which means the combination of genes a child receives from his or her parents may cause the onset of JA when triggered by other factors.

Juvenile Arthritis Symptoms

Each of the different types of JA have their own set of signs and symptoms. You can read more specifics about the diseases by following the links above, and by visiting the Arthritis Foundation's website dedicated to pediatric rheumatic diseases, KidsGetArthritisToo.

Juvenile Arthritis Diagnosis

The most important step in properly treating juvenile arthritis is getting an accurate diagnosis. The diagnostic process can be long and detailed. There is no single blood test that confirms any type of JA. In children, the key to diagnosis is a careful physical exam, along with a thorough medical history. Any specific tests a doctor may perform will depend upon the type of JA suspected.

Juvenile Arthritis Treatment

Unfortunately, there is no cure for juvenile arthritis, although with early diagnosis and aggressive treatment, remission is possible. The goal of treatment is to relieve inflammation, control pain and improve the child's quality of life. Most treatment plans involve a combination of medication, physical activity, eye care and healthy eating.

Juvenile Arthritis Self Care

An important part of JA treatment is teaching the child the importance of how to follow the treatment prescribed by the healthcare team. Self care also involves helping the child address the emotional and social effects of the disease. Self management encompasses the choices made each day to live well and stay healthy and happy.

Safety journey – July is UV safety month

Your skin is your body's largest organ. It protects you against heat, sunlight, injury, and infection. The sun's ultraviolet (UV) rays can damage your skin in as little as 15 minutes yet, some of us don't consider the necessity of protecting our skin. By using a layered approach for sun protection consisting of shade, clothing, a hat, sunglasses and sunscreen, we can significantly reduce our exposure and risk for skin cancer. According to the Centers for Disease Control, skin cancer is the most common cancer in the United States, however, most skin cancers are preventable. Every year, nearly five million people are treated for skin cancer at a cost of more than $8 billion. There are about 72,000 new cases of which 9,000 are melanoma deaths, the deadliest form of skin cancer. It doesn't matter your skin tone, anyone can get skin cancer.

July is UV Safety Awareness Month, but it is also important to remember skin protection throughout the whole year. According to the American Cancer Society (ACS), ultra-violet (UV) radiation exposure is the root cause of most skin cancers.

Sun safety has been on former Philadelphia Phillies third basemen Mike Schmidt's mind since he was diagnosed with stage 3 melanoma in 2013. For the past five years, the MLB Hall of Famer has been advocating for staying protected in the sun and has even advocated for the implementation of sunscreen dispensers in Citizens Bank Park, as well as throughout parks and public spaces in Philadelphia. However, sunscreen should not be the first – and definitely not the only – line of defense against the sun. The ACS stressed that it is also important for individuals to wear protective clothing, and find time in the shade, when possible.

Knowing your risk of skin cancer is crucial, too. One *CURE* contributor found out that she was at a higher chance of developing skin cancer since she was a breast cancer survivor with a BRCA2 genetic mutation. Now, she is sure to get annual dermatology checkups, and practices her own sun safety, which includes protective clothing, sunscreen and hats!

There are steps that individuals can take between dermatology checkups, too. Recent research conducted at NYU Langone Health explained how patients and their caregivers are on the "frontline" of melanoma monitoring. Many individuals will notice a suspicious mole or lesion before a health care professional will, so it is crucial to know what to look for.

While being in the sun can offer some health benefits, such as an uptake in vitamin D, it is important to talk to your health care provider about any particular risks you might face regarding exposure. And remember, be smart in the sun!

resources this issue

Resources: https://www.biblegateway.com/passage/?search=Romans+12%3A1-2&version=NIV
https://www.uwhealth.org/news/tips-for-keeping-food-safe-in-hot-weather/20549
http://www.menshealthnetwork.org/library/menshealthfacts.pdf
https://www.webmd.com/migraines-headaches/guide/making-diagnosis-doctors-exam
https://www.weather.gov/safety/lightning-safety-overview
https://eyecenterinc.com/blog/fireworks-eye-safety-cataracts-awareness-month/
https://www.arthritis.org/about-arthritis/types/juvenile-arthritis/
https://www.fs.fed.us/inside-fs/safety-journey-july-uv-safety-month
https://www.curetoday.com/articles/be-sun-smart-during-uv-safety-awareness-month