



9/27/14
The Face of Addiction:
Across the Ages
7:30 a.m. - 1:30 p.m.
Chase Center, Riverfront,
Wilmington, DE

http://tinyurl.com/FaceofAddiction

10/18/14 Monster Miles for a Cause Run/Walk

Registration 10:00 a.m. Dover Downs International Speedway

www.debreastcancer.org Contact Cheryl Doucette 302-672-6435

11/19/14 DE Dementia Conference

8:00 a.m. – 4:30 p.m. Dover Downs Hotel & Conference Center Contact Katie E. Macklin

katie.macklin@alz.org

The Office of Women's Health (OWH) Newsletter

- Karen McGloughlin Editor
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TO SUBSCRIBE CALL

(302)744-4703 or e-mail request to: OWH@state.de.us

HAVE A SUGGESTION?

If you have an idea, resource, news item, or event you would like to share with the Office of Women's Health, please contact

OWH@state.de.us

SPREAD THE WORD:

Please forward this email to a friend. Effective community partnerships depend upon the sharing of resources. The Delaware Office of

WOMEN'S HEALTH

Providing information and awareness about women's health issues.

Caregiving in Delaware

Many of us, like state employee Carol Barnett, will find ourselves becoming caregivers for a loved one in the next few years. Caregiving responsibilities can change how you live your life, so it's a smart move to figure out how you will handle the added tasks. Caregivers often have to make tough decisions, but the state is here with resources to assist you.

The Delaware Division of Services for Aging and Adults with Physical Disabilities (DSAAPD), part of Delaware Health and Social Services (DHSS), focuses on serving both Delawareans age 60 and over and adults age 18 and over who have or who acquire a physical disability. With three offices statewide in Newark, New Castle, and Milford, we



Carol Barnett is a DHSS employee and caregiver for her younger brother Steve Slotkin, who is 50 and has cerebral palsy.

can assist you in making plans for the future. In-home services are also available that allow people to live safely within their community.

DSAAPD maintains the Delaware Aging and Disability Resource Center (ADRC). Call 800-223-9074 with any questions or concerns about taking on a caregiving role for your loved ones, or for a list of caregiver resources. Or you may email us at DelawareADRC@state.de.us. You can also visit the DSAAPD web site at http://dhss.delaware.gov/dhss/dsaapd/index.html, and an ADRC web site at www.delawareadrc.com - both full of important information about the range of services available to Delawareans, and how to connect with them.

Our Caregiver Assistance Respite Education (CARE) Delaware program has federal funding to support caregivers with resource centers, caregiver training, and support groups throughout the state. You may also join the Delaware Division of Libraries' listserve of over 200 agencies to start receiving information about programs and activities throughout the state. Contact Katie McDonough at events@lib.de.us for further information.

- In 2009, an estimated 42 million family caregivers in the US provides about 40 billion hours of unpaid care to adults with limitations in daily activities. (AARP, 2013)
- More than 90% of older people getting community care rely on unpaid family care, either alone or in combination with paid help. (AARP, 2013)
- It's estimated that 22% of Delaware's population, or 202,000 people served in a caregiving role for a relative or friend. (Family Caregiver Alliance, 2012)
- Average DE Caregiver: 52 year old woman who has been providing care for an average of 18 years and provides an average of 65 hours per week of care for a person between the ages of 2 and 90. (Family Caregiver Alliance, 2012)
- A 2011 report reveals that family caregivers for a loved one with Alzheimer's had a 25% increase in the use of all type of health services for the caregiver, with the median cost of healthcare averaging \$4,766 more per year than non-caregivers. In other words, caregiving takes its toll on caregivers. (Family Caregiver Alliance, 2012)



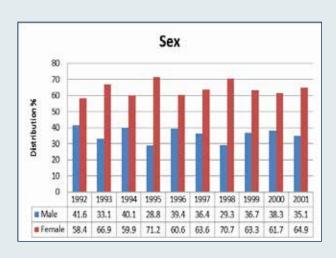
Work & Family Related Health Challenges Facing Women

Although men still outnumber women in the workforce, things have changed in the last 50 years. According to the Bureau of Labor Statistics (BLS) the percentage of U.S. women working has steadily increased from 34 percent in 1950s to 60 percent today. In addition, women are marrying later in life, staying in school longer, delaying childbirth, and having fewer children than in previous years. More women are choosing to continue working while also balancing the traditional parenting responsibilities.

Women face different health challenges in the workplace than men. The BLS indicates women generally have more work-related cases of carpal tunnel syndrome, tendonitis, respiratory diseases, infectious and parasitic diseases, and anxiety and stress disorders. Social, economic, and cultural factors also put women at risk for injury and illness. For example, women are more likely than men to do additional work part-time, temporary, contract. Compared to workers in traditional job arrangements, these contingent workers have lower incomes and fewer benefits. Like all workers in insecure jobs, women may fear that bringing up a safety issue could result in job loss or more difficult work situations. Within America's workforce, immigrant women are a particularly at-risk group and face additional barriers to good health. Sexist treatment and gender discrimination in the workplace can greatly affect a woman's physical and mental health. Sexual harassment can lead to anxiety, depression, lower self-esteem, alienation, insomnia, nausea, and headaches.

Balancing work and family tasks puts additional stress on women, who in many families still take primary responsibility for childcare and eldercare. When family and work demands collide, the resulting stress can lead to physical health problems such as poor appetite, lack of sleep, increase in blood pressure, fatigue, and increased susceptibility to infection. It can also result in mental health problems such as burnout and depression.

For more information about work related health issues and stress visit http://www.cdc.gov/niosh/topics/women/.



How did anxiety, stress, and neurotic disorders differ by sex of worker during 1992–2001?

Distribution of anxiety, stress, and neurotic disorder cases involving days away from work in private industry by sex, 1992–2001. Female workers accounted for the majority of anxiety, stress, and neurotic disorder cases during 1992–2001; from a low of 58.4% in 1992 to a high of 71.2% in 1995; likely due to the combined stress of discrimination and family responsibilities,

Sources: BLS [2003a,b]; Booth-Jones et al. [2003a].

http://www.cdc.gov/niosh/docs/2004-146/pdfs/2004-146.pdf



Poor People With Diabetes More Likely to Lose a Limb

Researchers from the University of California, Los Angeles, found the odds of having a toe, foot or leg amputated was up to 10 times higher for diabetics who live in low-income neighborhoods. Most of these amputations are preventable if patients are diagnosed and get proper medical care sooner, the study noted.

Millions of people have undergone preventable amputations due to poorly managed diabetes. Uncontrolled diabetes can weaken the immune system and cause neuropathy - nerve death or damage. As a result, a small cut could go undetected and quickly progress to a life-threatening infection. The early diagnosis of diabetes, proper management of the disease and expert wound care can help prevent complications that could lead to amputation.

In conducting the study, the researchers analyzed U.S. Census Bureau data on household incomes and state hospital discharge data that tracked amputations due to diabetes by ZIP code. This information was cross-referenced with information from a survey, which estimated the number of people who had diabetes in various low-income areas to create a map that revealed diabetes-related amputation rates by neighborhood for patients aged 45 and older.

In most cases, the investigators found, diabetic patients who needed a limb surgically removed were most likely to be black or non-English speaking men who were over the age of 65.

http://1.usa.gov/1mDkz44

The Office of Women's Health

Emergency Department Visits for Drug Related Suicide Attempts Rise

Suicide continues to take lives without regard to age, income, education, social standing, race, or gender. Emergency department visits for drug-related suicide attempts more than doubled from 2005 to 2011 among people aged 45 to 64. The reports by the Substance Abuse and Mental Health Services Administration (SAMHSA) show that overall there was a 51 percent increase for these types of visits among people 12 and older. Visits involving 18 to 29 year olds increased by 58 percent. Visits involving people aged 45 to 64 increased from 28,802 in 2005 to 58,776 visits in 2011 - a 104 percent increase.

The report characterized these visits and found that the majority (96 percent in 2011) of these 45 to 64 age group visits involved the non-medical use of prescription drugs and over-the-counter-medications. In 2011, these drugs included anti-anxiety and insomnia medications (48 percent), pain relievers (29 percent) and antidepressants (22 percent). Other substances involved in these drug-related suicide attempt emergency department visits during the same year included alcohol (39 percent) and illicit drugs (11 percent).

The report also found that these visits by patients aged 45 to 64 doubled for both men and women during this time period.

SAMHSA's Suicide Prevention Resource Center at http://www.sprc.org provides information on a wide range of suicide prevention programs and resources who are dealing with this issue can draw upon. SAMHSA's National Suicide Lifeline at 800-273-TALK (8255) or

http://www.suicidepreventionlifeline.org/provides real time, toll free, confidential suicide prevention counseling services 24/7 all year round to people in immediate crisis, or who may know someone who they fear might be considering suicide.

SAMHSA's Visits to Emergency Departments for Drug-Related Suicide Attempts Increased report is available at: http://www.samhsa.gov/data/spotlight/spot150-suicide-attempts.pdf.



Fetal Alcohol Disorders: Attention and Behavior Problems in Kids

When a woman drinks heavily during pregnancy, the harmful effects on her child's brain development appear to continue over time, a new study indicates. The findings point to a possible reason for the persistent attention and behavior problems experienced by children with fetal alcohol spectrum disorders.

There were significant differences in developmental brain activation over time, according to the researchers at the Children's Hospital in Los Angeles. While the healthy control group showed an increase in signal intensity over time, the children with [fetal alcohol spectrum disorders] showed a decrease in brain activation.



The findings show that drinking during pregnancy can change how a child's brain signaling develops during childhood and the teen years, long after being exposed to alcohol in the womb. The investigators added that the reduced brain activation in children with fetal alcohol spectrum disorders could explain why they have persistent attention and behavioral problems as they mature. The study was published on August 4, 2014 in the journal Cerebral Cortex.

Source: Children's Hospital Los Angeles, news release, Aug. 4, 2014
For more information about FASD please visit www.nih.gov or the FASD
Center for Excellence at http://www.fasdcenter.samhsa.gov/.

Fall 2014

Million Hearts Delaware

Many women fear breast cancer – but did you realize females are eight times more likely to die from heart disease? The Centers for Disease Control and Prevention report that despite increases in awareness over the past decade, over half of women don't recognize that heart disease is their number one killer. For women, statistics on heart disease in the First State are far from stellar - heart attack and stroke combined are the leading cause of death.

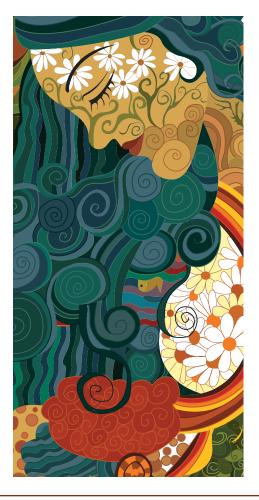
Million Hearts Delaware, a coalition of over 50 partners throughout the state, is supporting the national goal to prevent 1,000,000 heart attacks and strokes by 2017. Female Delawareans tend to have a lot more risk factors for cardiovascular disease. Fortunately, many risk factors can be reduced or eliminated with lifestyle changes. Loss of excess weight, increased physical activity, and smoking cessation all reduce a woman's risk for a heart attack or stroke.

Million Hearts Delaware has several key messages for women: know your numbers, connect with care and ask your doctor specific questions, and get help to quit smoking. Two important easily-obtained numbers are your blood pressure (BP) and waist circumference. A healthy BP is less than 120/80. For women, your waist circumference (measured right above your belly button) should be less than 35 inches. Work with your physician and discuss your risk, asking questions about the ABCS - Aspirin when appropriate, Blood pressure control, Cholesterol management and Smoking cessation. Women are frequently viewed as nurturers; make sure you're paying attention to your own health, especially your heart.

Strive to be One in a Million – one of the ones that were saved from having a heart attack or stroke. For more information, go to http://millionheartsde.com. While there, take the pledge and add your first name and zip to the list of Delawareans that have heard the message.







What Should You Know About Blood Disorders in Women?

While bleeding and clotting disorders affect men and women, these conditions pose unique problems for women because of the impact they can have on their reproductive health and quality of life. Current data estimate that as many as one percent of women in the United States may have a bleeding disorder and many are unaware of their condition.

The most common bleeding disorder affecting women is von Willebrand disease (VWD), which results from a deficiency or defect in the body's ability to produce a certain protein that helps blood clot. Although VWD occurs in men and women equally, women are more likely to notice the symptoms because of heavy or abnormal bleeding during their menstrual periods and after childbirth. VWD and other blood disorders may also cause women to experience recurrent fetal loss, heavy bleeding during dental procedures, frequent nosebleeds, and heavy bleeding during or after surgery.

Women with heavy menstrual bleeding (menorrhagia) or VWD are at increased risk for anemia, pain during menstruation, hospitalizations, blood transfusions, limitations in daily activities, time lost from work or school, and a reduced quality of life. In addition to VWD, other rare bleeding disorders and more common platelet function disorders may also be responsible for bleeding symptoms in women.

Although there are no cures for bleeding disorders, treatment is available to control symptoms and help women avoid complications and invasive procedures. Visit the CDC web page for more information: http://www.cdc.gov/ncbddd/blooddisorders/women/index.html.

The Office of Women's Health



Christiana Care Presents Every Woman Matters - A Breast Health & Wellness Conference

Newark, Del. – Every Woman Matters is a breast health and wellness conference for all women including breast cancer survivors who would like to learn more about breast health, genetics, breast cancer screenings, treatment, and survivorship. The event is scheduled for Saturday, October 4, 2014 from 8:00 a.m. – 2:30 p.m. at the John H. Ammon Medical Education Center on the Christiana Hospital campus, 4755 Ogletown-Stanton Road, Newark, DE 19713.

The conference is free and includes continental breakfast and lunch. For more information or to register online visit www.christianacare.org/every-woman-matters or call 302-623-CARE (2273). Seating is limited so register today.

In addition to the conference, the Breast Center will be open on Oct. 4 from 8 a.m. - noon for mammogram appointments. No prescription is needed but an appointment is required. Call 302-623-4200 today to make an appointment.

Christiana Care Health System Presents the 9th Annual Latinas Conference on October 25, 2014

The 9th Annual Strong and Healthy Latinas (Latinas Fuertes y Saludables): Love Yourself, Love Your Family, is a special program in Spanish for women of all ages and their families to inspire, encourage, and offer hope on breast health. It will also provide information on breast cancer, importance of family history, raising healthy babies, and creating healthy homes.

The event is being held 9:00 a.m. - 3:00 p.m. on Saturday, Oct. 25 at Bayard Middle School, 200 South DuPont Street, Wilmington, Delaware.



Highlights include:

- Local health experts available answer your questions.
- Flu vaccines available (ages 9 and older) from Delaware Division of Public Health.
- Free lunch and free tests including blood pressure, cholesterol, and diabetes.
- Certified medical interpreters and bilingual staff available.

Register for the event at www.christianacare.org/latinaconference or call en Espanol 302-623-CARE (2273).

Fall 2014