



July 29-31, 2014 Delaware Coalition Against Domestic Violence (DCADV) 20<sup>th</sup> Anniversary Institute -Integrating Health, Prevention, and Trauma-Informed Practice into Our Work Dover, Delaware Contact Stephanie Ferrell at 302-658-2958, sferrell@dcadv.org, or visit www.dcadv.org for more info.

August 7, 2014 9:00 a.m. - 4:00 p.m. WIC World Breastfeeding Conference 2014 Dover Downs Conference Ctr. Dover DE Contact Ida Lewis at DPH WIC Offices, 302-741-2900 or email ida.lewis@state.de.us

The Office of Women's Health (OWH) Newsletter:

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### 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 <u>OWH@state.de.us</u>

#### SPREAD THE WORD:

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



Providing information and awareness about women's health issues.



### A Heartfelt Message from Tara Hilton

Hello, my name is Tara. I have Severe Stage IV Endometriosis and Frozen Pelvis. I have been through over 10 surgeries, spent months in the hospital, and undergone many procedures, treatments, and medicines to battle this ugly disease. Now, clean-up surgeries are no longer an option, and I have limited treatment options left to me. This disease has invaded my bowels, bladder, kidney, and liver areas. It has consumed my abdominal cavity.

While I battle a less common and more severe form of this disease, Endometriosis affects five million women in the United States. This is a disease that needs much more research and awareness, even within the medical community. There are so many doctors not educated about this disease that women with Endometriosis don't always receive adequate health care. And many people believe it's "Just a bad period" or that you can "Just get a hysterectomy," but that's not the case at all. Endometriosis damages you. It causes infertility, and so much pain. This is why it is so important to bring awareness to this disease and to help find a cure!



Tara Hilton

Tara Hilton lives in Wilmington, Delaware. She is the 2014 Million Woman March for Endometriosis' Hero of the Year. To learn more, go to: <u>http://www.millionwomanmarch2014.org/</u> Also, look for Tara Endomarch Hilton on Facebook.



For more information about endometriosis, go to <u>womenshealth.gov</u> or call at 1-800-994-9662

(TDD: 888-220-5446).



Over five million women in the United States experience the pain and frustration of an often misunderstood disease known as Endometriosis. This disease can affect menstruating girls and women at any age, but is most common for women in their 30's and 40's.

Endometriosis occurs when the tissue lining the uterus, which is normally expelled during menstruation, grows outside of the uterus on other organs in the body. As a result, the body forms scar tissue in these areas, sometimes to a point where it disrupts organ function, or actually fuses organs together, causing bowel and bladder issues, infertility, and many other health problems.

The four stages of Endometriosis are based on diagnosing the location, amount, depth, and size of the endometrial growths. Stage 1 is mild, while Stage 4 is severe. At any stage, the pain can be severe.

Such pain can interfere with daily life. Women with Endometriosis know that such severe pain is not a normal part of menstruation, but may suffer in silence because society for so long has viewed "menstrual cramps" as a way of life, an equal burden all women share. But this pain is different. Those who have Endometriosis live a life around pain, missing social events, and even skipping work and school. Personal and work relationships can suffer.

The most common symptoms for Endometriosis are pain, especially excessive menstrual cramps felt in the abdomen or lower back; or pain during intercourse, urination or bowel movements, an abnormal or heavy menstrual flow, infertility, fatigue, and/or other gastrointestinal problems, such as diarrhea, constipation, and/or nausea. If you have any of these symptoms, it's time to see your doctor. If you feel your concerns are in any way dismissed, persist until you have a diagnosis or see another doctor.

Endometriosis has no cure, but treatments to relieve symptoms and better manage pain can be selected once a diagnosis can be confirmed, and the progression of the disease is known. http://www.womenshealth.gov/publications/our-publications/fact-sheet/endometriosis.html

The Office of Women's Health was created to increase the health knowledge for all Delaware women and engage them in leading healthier lives.





## Improving Your Health Literacy

Health literacy is not only about being able to read or speak the same medical language; it's about understanding difficult health terms and issues as well as navigating a complicated and confusing health care system. Even highly educated people can have trouble understanding health care information. In fact, nine of every 10 American adults have some problems with health literacy. Anyone can have trouble at some point, especially when sick or after being told they have a disease.

When a person doesn't fully understand the information about their or a loved one's health care, they may have problems managing the condition, or taking medicines correctly. They may have a decreased chance of receiving important preventive or diagnostic tests, need more hospital care, have poorer general health, and spend more time seeking and receiving health care.

In a national effort to make health information more straightforward and understandable, the Agency for Healthcare Research and Quality (AHRQ) developed tools to help doctors and their staff improve communications with patients so they can better understand a doctor's instructions and other important medical information. Another AHRQ tool helps pharmacists talk to patients about how to use drugs safely. While these efforts help improve communications from medical personnel, you can take steps as well. You can:

- Ask questions, making sure you get and understand the answers! If you don't understand, ask for more information. See this list of questions you can take to the doctor, pharmacist, or hospital.
- Repeat directions given to you by the doctor or nurse back to them, in your own words, to clarify the information. Simply say, "Let me see if I understand this." Repeating back what you heard in your own words can help avoid potentially serious mistakes.
- Take all your medicines to your next doctor's visit. Ask your doctor to go over all of your drugs and supplements, including vitamins and herbal medicines. More than one third of adults struggle to understand how to take their medicines. Reviewing your medicines can help you and your doctor. You may even discover some mistakes, such as two drugs that shouldn't be taken together.
- Have another adult with you, especially when you expect to receive important information.
- Tell the doctor's office you need an interpreter if you don't speak or understand English very well. You have a right to an interpreter, at no cost to you. Even if you speak some English, tell the doctor's office what language you prefer when you make an appointment.
- Make a Pill Card to keep track of medicines. For step-by-step instructions for individuals, parents, or caretakers to create an easy-to-use medication record, visit <u>Pill Card</u>. Keep it with you so it is available in case of emergency.

Find the full article at:

http://www.ahrq.gov/news/columns/navigating-the-health-care-system/090710.html

Historically, most medical research has been conducted on white men, making it difficult to know how to treat conditions that affect other populations, particularly women. For example, doctors routinely prescribed long-term use of the hormones estrogen and progestin to help women manage menopause symptoms because it helped women feel better — yet lacked the research to know the long-term effects on the women treated. But in 1991, the National Institutes of Health launched the largest study ever focused exclusively on women to determine whether hormones were helping women more than they were hurting them...

# The Women's Health Initiative

In the Women's Health Initiative (WHI) research project, 68,132 postmenopausal women were divided into groups. Some took just estrogen, some took both estrogen and progestin, and some took placebos. After a decade of observation, the researchers stopped the trials early — because it was so clear that hormones posed serious health risks to the women.

But researchers did continue other aspects of study with this group, such as the effects of low-fat diets, and taking vitamin D and calcium. And in 1998, an additional component of the WHI was launched, with another 93,676 participants, to study even more aspects of women's health. Much of the data collected since is now accessible to other researchers. Here are five lessons learned from the WHI:

1. Long-term use of estrogen and progestin increases the risk of breast cancer, heart attack, stroke, and blood clots, but decreased the risk of hip fractures and colon cancer in the main WHI trial. While these results caused doctors to largely stop prescribing long-term hormone replacement, women should make a personal decision based on their own risk factors. The data revealed hormone use may extend the life expectancy for women who have had hysterectomies. Women should talk to their doctor about their own specific needs.

2. The researchers found that a low-fat diet alone was not enough to significantly impact women's risk of cardiovascular disease, breast cancer, or colorectal cancer. The conclusion was that more dramatic lifestyle changes, including increased exercise, may be necessary to lower risks for these diseases.

3. Study results showed that taking vitamin D and calcium supplements increased the bone density in the hip, but did not significantly decrease the number of hip fractures women experienced. Nor did taking supplements lower the risk of colorectal cancer, according to the paper published in the New England Journal of Medicine. They did, however, increase the risk of kidney stones.

4. Post-menopausal women who reported drinking two or more diet sodas per day had a higher risk of heart attack, stroke, and other heart problems. The WHI researchers couldn't show a direct link as cause, but diets that include fake sugars are linked to the same risks for type 2 diabetes, stroke, and weight gain as is a diet which includes large amounts of real sugar.

5. It was concluded that women who took aspirin regularly had a 20 percent lower risk of melanoma than women who did not. The correlation was strong — the longer the women took the drug, the lower their risk. Aspirin has its own benefits (preventing subsequent heart problems) and risks (increased risk of bleeding), so women should seek their doctors' advice first.

In the years since this fascinating study, over 550 publications are based on the WHI and its findings. To learn more, go to: <u>www.nih.gov</u>



## The Health Risks of STDs... for Women

Although preventable, and despite the serious health risks they pose, approximately 19 million new sexually transmitted disease (STD) infections occur each year — most frequently in young women between the ages of 19 and 24.

The health effects of STDs can be far more serious than the genital burning, itching, and discomforts for which they are known. STDs can cause infertility, ectopic pregnancy, pelvic inflammatory disease (PID), heart disease, damage to brain function, different types of cancers, and even death.

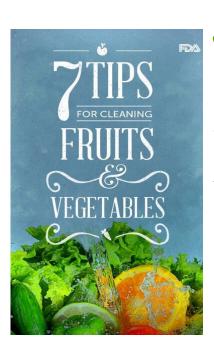
According to the U.S. Centers for Disease Control and Prevention (CDC), the most common STDs in women are Chlamydia, Gonorrhea, Genital herpes, Syphilis, and HIV/AIDS.

A woman with an STD is more vulnerable to infectious agents like viruses and bacteria, so it's not uncommon for women to be infected with more than one STD.

While abstinence from all sex is the surest way to prevent the transmission of STDs, safer sex is vital for those who are sexually active. Always use a new condom. Seek a mutually monogamous relationship. Get tested. If you have an STD, get treated. And in case of the Human Papillomavirus (HPV), you can even get vaccinated. Taking the necessary precautions to protect yourself can help ensure a safer, healthier future for you and your partner.

Learn more by visiting these websites:

- www.everydayhealth.com/womens-health/health-risks-of-stds-for-women.aspx
- www.cdc.gov/std/
- <u>www.womenshealth.gov</u>



Jederal health officials estimate that nearly 48 million people are sickened by food contaminated with harmful germs each year—and even healthy produce can be the culprit in outbreaks of foodborne illness.

Produce can become contaminated in many ways. While growing, fruits and vegetables can be contaminated by animals, or harmful substances in the soil or water. In harvesting and packaging, contamination can occur from poor hygiene among the workers who handle it. Contamination can occur even after the produce has been purchased, through inadequate storage or in the food preparation.

But we need our fruits and vegetables, at least five per day. How do we lessen our risk for illness? First, choose produce that isn't bruised or damaged, and make sure that pre-cut or bagged items are refrigerated or on ice both in the store and at home, to a temperature at or below 40 degrees. And then follow these tips:

- Wash your hands for 20 seconds with warm water and soap before and after preparing fresh produce.
- Cut away any damaged or bruised areas before preparing or eating.
- Gently rub produce while holding under plain running water. There's no need to use soap or a produce wash.
- Wash produce BEFORE you peel it, so dirt and bacteria aren't transferred from the knife onto the fruit or vegetable.
- Use a clean vegetable brush to scrub firm produce, such as melons and cucumbers.
- Dry produce with a clean cloth or paper towel to further reduce bacteria that may be present.
- Throw away the outermost leaves of a head of lettuce or cabbage.

For more tips, go to: <u>http://www.fda.gov/forconsumers/consumerupdates/ucm256215.htm</u>