

The Delaware Office of WOMEN'S HEALTH Newsletter

Providing information and awareness about women's health issues.

A message from the Office of Women's Health director, Karen McGloughlin

Season's Greetings from the Office of Women's Health (OWH).

As OWH director, my focus is to provide leadership and advocate for programs and services that promote health and wellness of women and girls in Delaware throughout their lifespan. This focus includes special groups such as those with disabilities, adolescents, and minorities. This newsletter was created to keep you aware of issues and activities that promote women's health.



Karen McGloughlin,
director of the Office
of Women's Health

OWH is part of the Office of Health Equity (OHE). The OHE and its partners work to remove social barriers to health, such as inadequate access to healthy food or safe housing. Achieving good health should be equally possible for everyone, and OHE is committed to this end.

I hope you find our newsletter informative. Please contact me at 744-4703 if you have any suggestions or comments. Until then, I wish you and yours a safe and healthy holiday season!

KEM

POINTS of INTEREST:

LIFE CONFERENCE XV
Thursday, January 17, 2013
8:00 a.m. - 3:45 p.m.
Sheraton Dover Hotel
Rt. 13 North
Dover, Delaware, 19901

Delaware's premier conference
for persons with disabilities and
those who support them.

To register:
www.lifeconferencede.org

January is
National Blood Donor Month
American Association
of Blood Banks
www.aabb.org



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TO SUBSCRIBE PLEASE CALL
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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.

Intimate Partner Violence The Harsh Reality



care because they have become unable to recognize bodily signals of distress.

What distinguishes domestic violence is its hidden, repetitive character and its immeasurable ripple effects on the woman, our society, and on family life. It cuts across class, race, culture, sexual orientation, and geography, and is all the more pernicious because it is so often concealed and so frequently goes unpunished. But the cycle can be broken.

Through therapy, support, and safety-planning measures, patients can walk away from violent relationships and homes and begin to lead happier, healthier lives.

Intimate Partner Violence (IPV)

also called domestic violence, is the emotional, physical, sexual, or psychological harm to a partner. IPV occurs in all communities and in all types of relationships, and it has extensive physical, mental health, social, and economic consequences. Sadly, IPV is under-reported due to shame, stigma, and fear that reporting will escalate violence.

IPV is neither a spontaneous act of anger nor a one-time occurrence; it is about gaining control over another. The perpetrators tailor the abuse to the specific vulnerabilities of the partner, choosing whatever means necessary for them to dominate.

This repetitive and well-hidden style of assault does immeasurable harm to its victims. IPV can increase the risk of anxiety disorders, social isolation, eating disorders, alcohol and substance abuse, suicide, and a host of obvious and possibly permanent physical health issues - even death.

Abusive partners may also keep survivors from regular health care and medical attention to injuries, or survivors may not seek

Domestic Violence / Rape Crisis 24 Hour Hotline Numbers

- New Castle County Domestic Violence**
(302) 762-6110
- New Castle County Rape Crisis**
(302) 761-9100
- Northern Kent County Domestic Violence**
(302) 678-3886
- Kent and Sussex Counties Domestic Violence**
(302) 422-8058
- Kent and Sussex Counties Rape Crisis**
(800) 262-9800

TDD (800)787-3224 / Bi-lingual Hotline (302)745-9874
If you feel you are in danger, call 911.

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

Sleeping Beauties

Women have more trouble falling asleep than men and get less sleep overall, according to the National Sleep Foundation. Women also suffer more insomnia, more restless leg syndrome, and, of course, the sleep disruptions due to menopausal changes. Sleep apnea, which is more common in men, begins increasing in women after age 50; by age 65, it affects one in four women.

Those zzzs matter. Insufficient sleep doubles the risk of hypertension in women, according to a 2007 University of Warwick study, upping the risk of heart disease, diabetes, and obesity (The male study did not reflect these changes).

Older women with sleep apnea have an 85 percent greater risk of developing dementia, according to a 2011 JAMA report.

Silver lining: The sweet spot for adding years to your life through sleep is more than 5 hours a night but less than 8.5, according to an analysis of Women's Health Initiative data done at the University of California, San Diego.



Carpal tunnel syndrome



Women are three times more likely to have **Carpal tunnel syndrome (CTS)** than men. CTS is the name for a group of problems that includes swelling, pain, tingling, and loss of strength in your wrist and hand. A person's dominant hand is the one that is usually affected, however, nearly half of CTS sufferers have symptoms in both hands.

The U.S. Department of Labor reported that in 2003 the average number of missed days of work due to CTS was 23 days, costing over **\$2 billion a year**. Approximately **3.7 percent of the general public** in this country suffer from CTS.

Symptoms of CTS typically begin with feelings of burning, tingling, and numbness in the wrist and hand.

The areas most affected are the thumb, index and middle fingers. At first, symptoms may happen more often at night. Many CTS sufferers do not make the connection between a daytime activity that might be causing the CTS and the delayed symptoms. Another symptom of CTS is weakness of the hands that gets worse over time. Some people with CTS find it difficult to grasp an object, make a fist, or hold onto something small. The fingers may even feel like they are swollen even though they are not. Over time, this feeling will usually happen more often. If left untreated, those with CTS can have a loss of feeling in some fingers and permanent weakness of the thumb. Thumb muscles can actually waste away over time. Eventually, CTS sufferers may have trouble distinguishing hot and cold temperatures by touch.

If you are having any of the symptoms of CTS or suspect that you may have it, please see your doctor. For more information, go to: www.cdc.gov/niosh/topics/ergonomics/

According to a 2012 article in Plus Model Magazine, the average fashion model today weighs 23 percent less than the average woman.

We're just sayin...

Link: http://www.plus_model_mag.com

Women have greater risks for developing alcohol-related health problems like heart disease or alcoholic hepatitis. A woman's body has less water than a man's, and it's the water that helps to dilute the alcohol and the damaging effects. Hormones and aging also affect how women metabolize alcohol.

Overindulgence in alcohol consumption for anyone is extremely unhealthy, but moderate amounts of alcohol is fine. In fact, the federal Dietary Guidelines for Americans suggest no more than two drinks daily for a man, and one drink daily for a woman!

NOTE: Red wine is full of recommended antioxidants. For more information, go to: www.niaaa.nih.gov



Diabetes

is responsible for about three percent of all female deaths in the United States.

In Delaware alone, over eight percent of the population struggles with this disease. Diabetes affects almost 25 million Americans, some 12.5 million of those being women aged 20 or older. Women of color are at highest risk for the condition. However, almost one quarter of these women have not yet been diagnosed. It is important to be diagnosed and receive care for this disease in order to prevent complications.

The signs of diabetes are:

- Being very thirsty
- Urinating a lot
- Feeling very hungry
- Feeling very tired
- Losing weight without trying
- Having sores that are slow to heal
- Having dry, itchy skin
- Numbness or tingling in the hands or feet
- Having blurry vision

If you have one or more of these signs, see your doctor. Type 2 diabetes is the most common form of the disease, but it is preventable!

To reduce your risk, be sure to maintain a healthy lifestyle and a healthy weight, exercise, and have your fasting blood sugar levels checked regularly to allow for early diagnosis.

<http://www.womenshealth.gov/publications/our-publications/fact-sheet/diabetes.cfm#f>

Spice it up!



Some of us have already discovered that metabolism slows steadily after age 40; we accept it as another age-related challenge. But even if we can't control our age or genetics, there are some spicy ways to give our metabolisms a boost!

Work out in the morning – it revs your metabolism for hours.

Build muscle – muscle burns calories better than fat.

Drink water — water processes calories, and, even mildly Dehydrated, a metabolism will slow down.

Eat more often — a small meal or snack every 3 to 4 hours keeps your metabolism cranking, so you burn more calories over the course of a day.

Eat spicy foods! They contain chemical compounds that can kick the metabolism into gear. A tablespoon of chopped red or green chili pepper can boost your metabolic rate.



Eat a balanced diet and replace some carbs with lean, protein-rich foods and boost the metabolism at mealtime. The body burns many more calories digesting protein than it does fat or carbohydrates.

Avoid crash diets which involve eating fewer than 1,000 calories a day and are disastrous for anyone hoping to quicken their metabolism. You will drop pounds, but a high percentage of the loss comes from muscle. The lower your muscle mass, the slower your metabolism. The final result is a body that burns fewer calories (and gains weight faster) than the one you had before the diet.

Adding spice to the diet can encourage a small increase to your metabolism, but to create a mean calorie-burning machine you need to stay active. The more you move during the day, the more calories you burn! Learn more at:

<http://www.webmd.com/diet/features/make-most-your-metabolism>

Huh?



In 1834, Oberlin College was the first school in the United States to admit women along with men, and the later part of the century saw the opening of women's colleges like Smith, Wellesley, and Bryn Mawr. But some experts, like Harvard Medical School professor Edward Clarke, believed that higher education could have dangerous consequences for female students.

In his book *Sex in Education*, Clarke warned that a girl who “work[ed] her brain over mathematics, botany, chemistry, German, and the like” diverted blood from her reproductive organs to her head, risking infertility and more. The professor was fighting a losing battle. By 1891, more than 10,000 American women were enrolled in colleges and universities.

Extend the season of giving and consider donating blood this month. 

Women and ACNE

Acne is a skin disorder that causes outbreaks of pimples, whiteheads, and blackheads. In women, acne is linked to hormonal changes, such as the menstrual cycle. Acne does not discriminate, affecting women of any age or race. For anyone, acne can be an upsetting illness, causing depression, poor body image, or low self-esteem.

Other than hormonal changes, there are triggers that are linked to acne such as certain medications, cosmetics, and even genetics. For as many valid reasons for acne, there are as many myths:

Myth 1: Women get acne because they don't wash enough. Wrongo! Washing away surface oils doesn't work because acne forms under the skin.

Myth 2: Stress causes acne. Not validated. But, acne may be a side effect of some medicines used to treat stress or depression.

Myth 3: Certain foods cause acne. Nope. Experts have not found a link between the diet and acne.

Myth 4: Sunburn or sun exposure helps acne. False! Sunburn just reddens the skin and camouflages the acne. To add insult to injury, sunburn permanently damages your skin, causing wrinkles and dark spots; a whole new set of skin issues.

OK, myths busted. Now, what do you do for acne? There are many treatments for mild acne, such as over-the-counter lotions or creams. These medicines can dry your skin so use with caution. Wash your skin gently with a mild soap, and use cosmetics and hair products which are non-comedogenic or non-acnegenic. Always eat healthy, get plenty of sleep and exercise daily.

<http://www.womenshealth.gov/publications/our-publications/fact-sheet/acne.cfm>

WHEN THE FAMILY IS ALL GATHERED

around this year for the holidays, take some time to find out a few things about your overall family health history. There is no better time than when everyone is together to record some key family medical points. Points such as, did anyone have heart disease or cancer? Was anyone considered "forgetful" or "clumsy?" Little memories may add up to the actuality that someone in your family history may have had Alzheimer's Disease or Multiple Sclerosis, and it was just not discussed freely.

Health issues in your family past may provide important clues and insights into your own health or that of your children someday. Know dates and causes of relatives deaths as well as their most beloved recipes and war stories....illnesses tend to run in the family.

Check out "My Family Health Portrait", a tool from the CDC that helps you record, update and print your family health history! <http://www.familyhistory.hhs.gov/fhh-web/home.action>.

And now,
AN
AMAZING
FACT:

Every two seconds, someone in the United States needs blood.

For more blood facts, go to <http://www.redcrossblood.org/learn-about-blood/blood-facts-and->

We hope you've enjoyed our holiday newsletter. Happy Holidays!

