



SOUTH CENTRAL PENNSYLVANIA HEALTH CARE QUALITY UNIT

IT'S YOUR HEALTH SUMMER 2012

the Advocacy Alliance

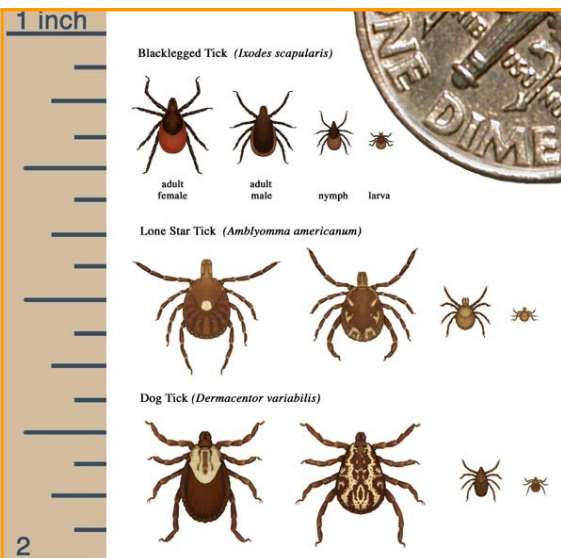
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Lyme Disease

This past winter in Pennsylvania was the fifth-warmest on record, according to the National Weather Service and the trend has continued into March with an early spring. Not only do humans and animals begin heading outside, but so do insects, such as ticks, which are cold-blooded and vary their metabolism based on the temperature. Blacklegged ticks are the first to emerge, the ones that can transmit Lyme disease bacterium, *Borrelia burgdorferi*. Ticks can attach to any part of the human body, but most often on areas such as the groin, armpits and scalp. According to the Center for Disease Control and Prevention, in most cases, the tick must be attached for thirty-six to forty-eight hours or more before the Lyme disease bacterium can be transmitted.

Most humans are infected through the bites of immature ticks called Nymphs. Nymphs are tiny (about the size of a poppy seed) and difficult to see. Adult ticks can also transmit Lyme disease, but are much larger and more likely to be removed before they've had time to spread the bacteria. In the Northeastern United States, the white-footed mouse seems to be a major source for ticks to pick up the bacterium that causes Lyme disease. Domestic pets such as dogs or cats can bring ticks into the home from the outdoors. In highly infested areas, any animal or



bird that dwell in grassy or wooded areas may carry a tick: deer, birds, raccoons, foxes, shrews, squirrels and horses. Ticks wait for a host (like a deer, bird or human) to walk by. Then they grab on to the animal or human and begin drinking their blood.

Tick bites don't usually hurt so you may not even feel it. Ticks can stay attached for several days. When the tick is full, it will fall off. If you find one on you, carefully pull straight up and out with tweezers. Then wash the bite with soap and water or disinfectant. It is best to keep the tick in a small container as your health care provider may want to see it. Never try to burn one off with a match, as it could spread its disease further into your skin.



See a doctor if you develop flu-like symptoms such as a fever, rash (usually a “bull’s eye” shape), severe fatigue, facial paralysis or joint pain within three to thirty days of being bitten by a tick. If you do not get treatment, you may experience severe arthritis, neurological disorders and heart abnormalities. Early treatment is important, but the disease can be difficult to detect. The most reliable blood test, called ELISA, can show the physician if your body’s immune system is producing antibodies against infection. This test is more accurate after the first four weeks of infection. The good news about Lyme disease is that it can be treated at anytime with antibiotics. The earlier the treatment begins the more effective it is in preventing progression of further complications.

If you are planning a hike in the woods, a camping trip, or even play in your back yard (especially if you live in a common area for ticks), here are some tips for preventing this disease:

- Wear long sleeved, light-colored clothing in tall grasses or wooded areas.
- Tuck your pants in your socks, shoes or boots.
- Wear a hat or pull back long hair.
- Consider Deet for skin and permethrin for clothing.
- Continue doing tick checks 2 to 3 days after outdoor activities.
- If you find a tick, remove it properly and save it.
- Ask your veterinarian about protection for your furry friends.
- Bathe or shower as soon as possible after coming indoors to more easily find ticks.



- Parents should check their children for ticks under the arms, around the ears, inside the navel, behind the knees around the waist and especially in the scalp.
- Be sure to wash all clothing in hot water if possible and dry on high heat for an hour to kill remaining ticks.
- Lyme disease is the most common vector-borne disease in the United States that can affect the skin, joints, nervous system and heart.

There is high prevalence of infected ticks in the Pennsylvania and northeastern regions and the numbers are growing. With an early spring, it is possible they could be out as early as April. Be vigilant, remove ticks promptly, use insect repellent and help prevent the spread and transmission of a debilitating and costly disease.

REFERENCES

www.cdc.gov/Lyme

www.stonybrookmedicalcenter.org/patientcare/lyme

www.cdc.gov/lyme/signs_symptoms/index.html

http://www.fosters.com/apps/pbcs.dll/article?AID=/20120320/GJNEWS_01/703209930/-1/FOSNEWS

<http://commonhealth.wbur.org/2012/03/lyme-disease-spring>



Links to Check Out

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www.stonybrookmedicalcenter.org/patientcare/lyme

www.cdc.gov/lyme/signs_symptoms/index.html

http://www.fosters.com/apps/pbcs.dll/article?AID=/20120320/GJNEWS_01/703209930/-1/FOSNEWS

<http://commonhealth.wbur.org/2012/03/lyme-disease-spring>

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www.emedicinehealth.com/sunburn/article_em.htm

www.webmd.com/healthy-beauty/tc/sunburn-home-treatment?print=true

www.skincancer.org/prevention/sunburn/five-ways-to-treat-a-sunburn

www.skincancer.org/prevention/sunburn/facts-about-sunburn-and-skin-cancer

<http://psychcentral.com/addquiz.htm> Online screening quiz

<http://www.nimh.nih.gov/health/publications/attention-deficit-hyperactivity-disorder/complete-index.shtml> The NIH booklet on ADHD includes coping strategies

<http://www.cdc.gov/ncbddd/adhd/index.html>

Resources : <http://help4adhd.org/> and <http://www.chadd.org> for info and access to over 200 local chapters for families

Russell A. Barkley, PHD and author, 81 minute presentation on Youtube: <http://www.youtube.com/watch?v=q3d1SwUXMc0>

www.mayoclinic.co,

Source: <http://www.drozshowtoday.com>)

http://www.heart.org/HEARTORG/GettingHealthy/NutritionCenter/DiningOut/Dining-Out_UCM_304183_SubHomePage.jsp

<http://www.hungry-girl.com/biteout>

<http://www.weightwatchers.com/food/rst/index.aspx>



ATTENTION DEFICIT HYPERACTIVITY DISORDER

ADHD, a neurobehavioral disorder, is a problem with inattentiveness, over-activity, impulsivity, or a combination. It affects about 3-5% of school-aged children (although other estimates range from 1% to 20%) and is more often diagnosed in boys than girls.

Heredity makes the largest contribution to the expression of the disorder in the population. In instances where heredity does not seem to be a factor, difficulties during pregnancy, prenatal exposure to alcohol and tobacco, premature delivery, significantly low birth weight, excessively high body lead levels, and postnatal injury to the prefrontal regions of the brain have all been found to contribute to the risk for ADHD to varying degrees.

ADHD: Myth vs. Fact

MYTHS	FACTS
ADHD is a lack of willpower.	ADHD is a chemical problem in the management systems of the brain.
Anyone with adequate intelligence can overcome ADHD symptoms, which everyone commonly experiences.	ADHD affects people of all levels of intelligence. Those who have chronic impairment by these symptoms warrant the diagnosis, and treatment.
ADHD does not overlap other diagnoses.	A person with ADHD is 6 times more likely to have another psychiatric or learning disability.
A person does not have ADHD if they were not diagnosed as a child.	Many persons struggle all their lives with unrecognized ADHD impairments. There is poor response to treatment for other possible disorders.

Culprit Dopamine?

It appears that certain receptors in the brain which normally respond to the neurotransmitter called dopamine are not working properly. Most likely, dopamine is not being produced at normal levels in the brain. Recent work in adults points to a defect in an enzyme called dopa decarboxylase which helps make dopamine. This defect in dopamine production occurs in the anterior frontal cortex, an area associated with cognitive processes such as focusing and attention.



Source: http://en.wikipedia.org/wiki/File:Proposed_Symptoms_of_ADHD.PNG

Patterns of behavior that may indicate ADHD and need for referral:

Inattention	Hyperactivity	Impulsivity
<ul style="list-style-type: none"> • Being easily distracted • Failing to pay attention to details and making careless mistakes • Forgetting things, such as pencils, that are needed to complete a task • Rarely following directions completely or properly 	<ul style="list-style-type: none"> • Not being able to sit still • Talking non-stop • Leaving seat when sitting is expected/instructed 	<ul style="list-style-type: none"> • Being unable to suppress impulses such as making inappropriate comments • Shouting out answers before a question is finished • Hitting other people • Behavior which puts one in danger, such as dashing into the street

ADHD often makes school, job, and relationships difficult. According to 2009 data from the National Highway Traffic Safety Administration, ADHD teen drivers are **seven times as likely to have been in 2 or more accidents**. ADHD may also occur with the conditions listed in the illustration to the right, thus complicating diagnosis and treatment. [Source: <http://www.cdc.gov/ncbddd/adhd/conditions.html>]



Treatment and Medications

Treatment includes addressing behavior and using stimulant medications. Medications may alter sleep, appetite, mood and personality so individuals should be monitored for side effects.

Commonly Prescribed Medications for ADHD

Name	Length of Action
Ritalin (methylphenidate)	3-8 hours
Dexedrine (destroamphetamine)	3-8 hours
Adderall (amphetamine -mixed salts)	5-6 hours
Cylert (Pemoline)	5-10 hours
Concerta (methyphenidate)	12 hours
Strattera (atomoxetine)	Once a day non-stimulant affecting norepinephrine & dopamine
Catapres (clonidine) and Tenex (guanfacine)	Blood pressure medications sometimes used in treatment

More resources and Information may be found online one the following websites:

Online screening quiz: <http://psychcentral.com/addquiz.htm>

NIH booklet on ADHD, including coping strategies:

<http://www.nimh.nih.gov/health/publications/attention-deficit-hyperactivity-disorder/complete-index.shtml>

<http://www.cdc.gov/ncbddd/adhd/index.html>

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Sunburns



Summer is a time for swimming, cookouts, outdoor sports, gardening, and just plain enjoying the sunshine. However, overexposure to the sun can put a damper on these activities very quickly and force one to stay indoors. Sunburns can have different outcomes depending on severity, along with different treatments and ways of preventing them from occurring.

Sunburn is exactly what it sounds like, a burn on your skin from the sun's ultraviolet radiation. This causes inflammation of the skin on the areas that were exposed. This can happen within 30 minutes of direct sunlight. Don't let that sun fool you, because you can get sunburn on hazy or cloudy days. Up to 90% of the ultraviolet rays can make its way through the clouds. Snow, ice, sand, water, and other reflective surfaces can reflect ultraviolet rays and burn your skin just as badly as direct sunlight.

Any surface area of the body can get burnt such as: lips, toes, palms, feet, earlobes, etc. Even one's eyes can be affected from the ultraviolet rays creating a painful, gritty feeling. This can cause damage to the lens and lead to progressive cloudiness (cataracts). Minor skin redness and painful skin that feels hot to the touch is the result of mild, uncomplicated sunburn. Eventually your body will begin to heal itself by "peeling" the top layer of the affected skin. Multiple sunburns and over exposure to the sun speed up the aging process causing photoaging. Results of photoaging include: weakened skin's strength and elasticity, thinner skin, deep wrinkles, dry or rough skin, fine, red veins on your face, freckles, and large brown lesions (liver spots).



A more intense sunburn is polymorphous light eruption (PMLE), which is another name for sun poisoning. Symptoms of PMLE are: mild to severe skin rash, itchy bumps, hives, blisters, dizziness, nausea and vomiting, chills, dehydration, electrolyte imbalances, and possible infections. A person can experience shock (decrease in blood perfusion to vital organs) and even death, if extreme sun exposure persists and the burns go untreated.

Cancer, including melanoma, is another possible result of sunburns due to the damage of the skin cell's DNA. Skin cancer may appear as a small tiny growth or sore that will heal then reopen, over and over. It will also bleed easily.

See your doctor if you exhibit any of the following:

- Signs of infection
- New skin growth
- Change in the appearance or texture of your skin/mole
- Sore that doesn't heal
- Blister(s) that cover a large portion of the body
- High fever
- Confusion
- Extreme pain
- Nausea/vomiting
- Chills
- Red streaks leading away from the blister

If the treatments listed above are not effective within a few days seek treatment with your healthcare provider.

Chances of developing melanoma are doubled if a person had one or more blistering sunburns during childhood or adolescence. Melanoma may start from a natural mole that changes shape or a new mole that develops in size and darkens in color. This is called lentigo maligna and occurs only in the overexposed areas of the skin. If one seeks medical attention promptly, then the melanoma or skin cancer may be removed without further spread or damage.

There are some other treatments available for sunburns that include over-the-counter remedies:

- Oral anti-inflammatory medications (Ibuprofen, Advil, Motrin, etc.)
- Apply cool compresses or aloe vera lotion or gel to the affected skin
- Take a cool bath/shower
- Apply a topical Hydrocortisone cream
- Moisturize skin with lotion
- Drink plenty of fluids to keep hydrated
- If you have blisters, cover them with clean gauze. If the blisters break, apply antibacterial cream to prevent an infection.



By following a few simple prevention tips, you can enjoy these summer months outdoors sunburn free. A few ways of preventing sunburn are:

- Avoid skin damage from the sun by protecting your skin when you are outdoors. Sunscreen works best if applied a half hour before sun exposure and you will need to reapply after swimming or perspiring.
- Frequently using sunscreen with SPF of 15 or greater
- Covering up vulnerable areas (face, shoulders, etc.)
- Avoid sun exposure between 10:00 AM and 2:00 PM
- Wearing sunglasses that block 99-100% ultraviolet light.

References:

www.nlm.nih.gov/medlineplus/ency/article/003227.htm

www.mayoclinic/health/sunburn/DS00964/METHOD

www.emedicinehealth.com/sunburn/article_em.htm

www.webmd.com/healthy-beauty/tc/sunburn-home-treatment?print=true

www.skincancer.org/prevention/sunburn/five-ways-to-treat-a-sunburn

www.skincancer.org/prevention/sunburn/facts-about-sunburn-and-skin-cancer





Healthy Tips for Dining Out

Eating out doesn't need to sabotage your healthy eating lifestyle. With some planning, and a few "insteads", you can still stay on track. Bentz Tozer Jr., head fitness coach at Max Fitness in Harrisburg, offers the following tips for eating healthy while dining out.

Source: Tozer, B., personal communication, 03-27-12

Good choices while dining out:

- Choose meals that contain a balance of lean proteins (like fish, chicken or beans), fruits, vegetables and whole grains (like whole-wheat bread and brown rice).
- Eat small portions. Take half of the entrée home or split the meal with a friend. Order an appetizer as the main course.
- Skip parts of the meal you like less. Have an "I can eat that food any old time" approach.
- Go to places where you can order healthful low-fat meals.
- Ask to substitute high-fat items like French fries for a small baked potato or side salad.
- Request items to be prepared without butter or oil.
- Eat a little less at noon to save for a special dinner later, but don't skip meals. Skipping meals can lead to too much eating later on.
- Eat something small 30 minutes before your meal to help be in better control of your choices. Eat a piece of fruit (apples are great) or have a glass of water with lemon.
- Avoid buffets and all-you can-eat specials.
- Breaded, batter-dipped and tempura all mean fried food, which is most likely high in fat. Look for lower-fat, grilled, broiled and flame-cooked options. Better choices include entrées that are steamed, poached, roasted or baked in their own juices.
- Avoid croissants, biscuits, pot-pies, quiches and pastries.
- For sauces, stick to wine or thinned, stock-based sauces. Avoid thick butter sauces, béarnaise, Mornay or sauces that sound creamy. If you are unsure, ask the server.
- Choose salads made with rich dark greens like spinach and romaine rather than pale iceberg lettuce.
- Order steamed vegetables or broth-based soups to help satisfy your ap-



- Skip the oil, mayonnaise and special sauces. Ask for extra lettuce, tomatoes, onions, and/or mustard on sandwiches. Use reduced calorie dressings. Try substituting a slice of avocado for mayonnaise; same creamy texture and great taste.
- If ordering pizza, ask for extra vegetable toppings, and forget the meats and extra cheese.
- We often forget to count alcohol calories as part of our eating. Alcohol is very high in calories and can prevent us from making healthful food choices.



Best Fast Food Burger

Dr. Oz's fast food burger rules are the following:

- 500 calories or less
- No trans fat
- Hold the Mayo

A few good examples are:

- Hardees turkey burger: 380 calories and 31g of protein
- BK veggie burger: 320 calories and 22g of protein
- Five Guys little burger: 480 calories, 23g of protein
- BW3's spicy black bean burger: 340 calories, 18g of protein

(Source: <http://www.drozshowtoday.com>)

Check out the following websites for more Healthy Tips For Eating Out:

American Heart Association - Dining Out

http://www.heart.org/HEARTORG/GettingHealthy/NutritionCenter/DiningOut/Dining-Out_UCM_304183_SubHomePage.jsp

Hungry Girl - Girl's Bite Out

<http://www.hungry-girl.com/biteout>

Weight Watchers - Eating Out

<http://www.weightwatchers.com/food/rst/index.aspx>

Irritable Bowel Syndrome

Irritable Bowel Syndrome (IBS) is a common disorder that affects the large intestine and may cause cramping, bloating, abdominal pain, diarrhea and constipation. While usually a chronic condition, symptoms may fluctuate in severity. IBS does not cause permanent damage to the colon, does not cause inflammation or changes in bowel tissue, and does not increase the risk of colon cancer.

The symptoms of IBS can vary greatly from person to person. In addition to those listed above, it may also cause flatulence (gas) or mucus in the stool. Individuals may experience only mild symptoms, but symptoms can sometimes be disabling, affecting the quality of life. At times severe symptoms may not respond well to medical treatment. Sometimes symptoms can resemble those of other, more serious diseases, so all symptoms should be discussed with a physician.

The cause of IBS is unknown. It appears that peristalsis, a series of organized muscle contractions, in the intestine may be stronger or last longer with this condition — causing bloating, gas, and diarrhea. Nausea, fatigue, vomiting and a full sensation after a small meal may also occur. At times the passage of food through the intestine may be slowed and stools become hard and dry. Individuals with IBS may have abnormal serotonin levels. Serotonin is a brain chemical that helps to regulate brain function and also plays a part in normal functioning of the digestive system. In addition, those with IBS may not have a sufficient amount of good bacteria in their intestines.

Diagnosis is normally done by a process of elimination. A complete medical history and physical exam are completed and the Rome criteria for IBS is used to diagnose. This requires 3 months of continuous or recurring symptoms of abdominal pain or irritation that may be relieved with a bowel movement. Two or more of the following must be present:

- Change in frequency — more than 3 bowel movements per day or fewer than 3 a week
- Noticeable difference in stool form — hard, loose and watery or poorly formed
- Mucous in stools
- Bloating or a feeling of abdominal distention and a sensation of incomplete evacuation
- Straining or urgency

Additional testing may be done for onset after age 50, weight loss, rectal bleeding, fever, nausea or recurrent vomiting, abdominal pain, especially if not completely relieved by a bowel movement, or diarrhea that is persistent or awakens the person from sleep. Testing may include stool studies, sigmoidoscopy, colonoscopy, CT scan of abdomen and pelvis, a hydrogen breath test for lactose intolerance or avoiding milk products for several weeks to rule out this condition, and blood tests may be done to rule out celiac disease.

Some people may recognize triggers that can worsen their symptoms. These include certain foods, such as chocolate, milk, alcohol, carbonated beverages, and some fruits and vegetables such as broccoli, cauliflower, and cabbage. Stress may aggravate symptoms but does not cause them. IBS is more common in women and researchers believe that hormonal changes may have an effect on IBS. Many women find symptoms are worse during or around menstrual periods.

Risk factors for this condition include age, as around half of those with the disorder develop symptoms before the age of 35. Being female is a risk factor as well as having a first-degree relative (parent or siblings) with the disorder. It is unclear whether the influence of family history is related to genes, shared environmental factors, or a combination of both. Mild symptoms can generally be managed by life style changes, dietary changes, and learning to manage stress. For more moderate or severe symptoms, the physician may order fiber supplements, anti-diarrheal medications, and/or recommend eliminating gas forming foods, such as salads, raw fruits and vegetables, and carbonated beverages. Since raw fruits and vegetables are what our diets should largely consist of, it would be good to eliminate these by trial and error to assure a healthy diet.



Medications

- **Anti-cholinergic medications** may be prescribed to relieve bowel spasms. These may relieve diarrhea, but can worsen constipation.
- **Anti-depressant medications** may be prescribed for pain or depression. These may be an SSRI (selective serotonin reuptake inhibitor) or a tricyclic antidepressant.
- **Antibiotics** may be helpful if symptoms are due to an overgrowth of bacteria in the intestines.
- **Amitiza (lubiprostone)** is a chloride channel activator that is approved for adult women and men who have IBS with constipation. It increases fluid secretion in the small intestine to help with the passage of stool, and side effects include nausea, diarrhea and abdominal pain. Further research is needed to determine the effectiveness and safety of this drug. It is generally only prescribed for those with severe constipation for whom other treatments have failed.
- **Alosetron (Lotronex)** is a nerve receptor antagonist that relaxes the colon and slows peristalsis in the lower bowel. It blocks the action of serotonin on the intestine.
- **Alosetrom** is now approved with restrictions for use in women, and should only be prescribed by a gastroenterologist with expertise in IBS because of potential side effects. The doctor must be enrolled in a special program in order to prescribe this medication. It is to be used for severe cases of diarrhea-predominant IBS when the individual has not responded to other treatments, and is not for use in men.

If these drugs don't help, counseling may be beneficial if stress tends to worsen symptoms.

Lifestyle Changes

- Gradually increase fiber, drink additional water, and avoid problem foods. In addition to gas-forming foods, fatty foods may be a problem for some people.
- Avoid chewing gum or drinking through a straw — may lead to swallowing air and causing more gas.
- Eating smaller meals may help for those with diarrhea.
- Individuals who are lactose intolerant may substitute yogurt for milk, or combine small amounts of milk with other foods. An enzyme product may be needed to break down lactose. If dairy foods need to be eliminated completely, it is important to obtain protein and calcium from other sources. A dietitian can assist to be sure adequate nutrition is being provided.
- It is important to drink plenty of fluids, especially water, each day.
- Alcohol and caffeinated beverages stimulate the intestines and may worsen diarrhea.
- Carbonated beverages can produce gas.
- Daily exercise helps to relieve depression and stress. A physician should be consulted before beginning an exercise program.
- Alternative therapies may be helpful. These include acupuncture, peppermint, which should be enteric-coated tablets and may aggravate heartburn (check with doctor prior to using any herbs), hypnosis, probiotics in yogurt or dietary supplements (to aid good bacteria normally found in the intestines), and yoga, massage or meditation.
- A physician should be consulted to obtain diagnosis and correct treatment for each individual.

Source: www.mayoclinic.com

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