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The Wellness News Letter

Whether you are an individual or a family, staying healthy is very important. The fact is being healthy or improving your health requires change and discipline. It is a difficult process for most people but not impossible. Change is usually hard but making small changes can go a long way in improving your health and reduce your health insurance cost.

Improving Health with Physical Activity

Here are some simple steps to take on your way to improving your health. Engage in some form of physical activity as a family with children or as an individual.

Join a health club or find a friend that you can partner with who will hold you to your plan and daily physical activity.

Physical activity can reduce stress, improve blood flow, and help to improve your heart. Consult with your medical doctor before any physical activity.

According to Get Active Children needs at least 60 minutes of play daily with moderate to physical activity each day.

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5 Ways to Lower Your Blood Pressure Without Medication

Hypertension strikes one in three American adults. Learn the top lifestyle strategies that



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can make a real impact on lowering your blood pressure.

About one in every three American adults has hypertension, or high blood pressure. Medication is often prescribed, but that's not the only solution. There are many lifestyle strategies that have also been shown to have an impact. For some, weight loss combined with exercise and a healthy eating plan may even reduce or eliminate the need for medication altogether.

Your doctor can help you decide whether to take a combined approach (medication plus lifestyle) or whether to try following these healthy lifestyle strategies first:

- 1. Increase exercise.** Aerobic exercise can lower blood pressure and can also help with weight loss. It doesn't take a time-consuming workout in a gym to reap the benefits, either.
 - As few as 30 minutes of moderate exercise on most days of the week has been shown to be effective.
 - Aerobic activities such as walking, biking, swimming and water aerobics often produce the best results.
 - Before you start an exercise program, ask your doctor what type and amount of exercise is right for you.
- 2. Cut your salt intake.** One teaspoon (2,400 mg) is the maximum recommended daily amount. Reducing this to two thirds of a teaspoon (1,500 mg) can make a big difference.
 - Check labels of food and over-the-counter medication for their sodium content.
 - Use herbs and spices instead of salt to flavor foods.
 - Avoid processed foods such as canned and frozen ready-to-eat foods, cheeses and luncheon meats.
- 3. Eat a healthy diet.** Follow the DASH (Dietary Approaches to Stop Hypertension) guidelines. This has been shown to lower systolic and diastolic blood pressure, even without other interventions.
 - The DASH diet is rich in fruits, vegetables, whole grains and low-fat dairy products. It restricts intake of saturated fats, red meat and sugar.
 - The increased fiber, potassium, calcium and magnesium from these foods are all thought to play a role in reducing blood pressure.
- 4. Lose weight.** For every two pounds of weight loss, you can lower your systolic pressure by one point and your diastolic pressure by 1.4 points.
 - Gradual weight loss of one to two pounds per week is most effective.
 - Keep a food journal to track exactly what and how much you eat.
 - Choose foods low in saturated fat, cholesterol, trans fats and refined sugar.
 - Watch your portion sizes.
 - Do not skip meals. Eating three meals a day plus snacks is essential in weight management.
 - Aim for 25 to 30 grams of fiber daily, which will fill you up and curb your hunger.
- 5. Limit alcohol.** Drinking a lot of alcohol can raise blood pressure.
 - This means no more than one drink a day for women, two drinks for men.
 - One drink is the equivalent of 12 ounces of beer, five ounces of wine or two ounces of hard liquor.
 - You can also help yourself to relax and cope better with stress from your busy life with these techniques:
 - Simplify. Try to cut out activities that eat up your time but deliver little value. Learn to say "no." Clean out your house, car and garage of things that you no longer need. Let go of relationships that complicate your life more than they add.
 - Take a deep breath. Making a conscious effort to deepen and slow down your breathing can help you relax.

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- Exercise. Physical activity is a natural stress-buster.
- Get plenty of sleep. Being sleep-deprived can make your problems seem bigger than they really are.

The key is to discover what works for you. Choose your strategies, take action and start enjoying the benefits. You can lower your blood pressure and help prevent other chronic diseases at the same time.

Can Exercise Keep You Mentally Sharp?

Exercise helps both body and mind.

Exercise maintains your body by keeping it fit and strong. Physical activity also helps ward off serious conditions like heart disease, diabetes and cancer. But exercise doesn't just work wonders for your body. These effects apply to your brain, too. Physical activity sustains brain function and wards off declines in mental ability, too.

Experts say that exercise can help prevent mental decline as we age. Regular exercise may enhance memory and mood, and may improve our ability to juggle multiple mental tasks.

The aging brain

Severe memory loss or other serious mental impairments are most often caused by disease. But age-related mental declines may be the result of decreased brain activity and stimulation. Both mental and physical exercise can help keep your brain sharp.

Your brain with exercise

So how does physical activity boost brain power? It helps you:

- **Think more clearly.** Getting your heart rate up pumps blood to the brain. This helps your brain perform better. Low-impact exercises like walking may be best for "clearing your head" because muscles don't work hard enough to use up extra oxygen and glucose.
- **Improve your memory.** Experts say that exercise brings on the growth of nerve cells in the hippocampus, the region of your brain involved in memory. Studies show that seniors who walk regularly have better memories than inactive older adults. And the more you exercise, the better your memory gets.
- **Better your ability to do complex tasks.** One study found that aerobic exercise helped people with mild cognitive problems to organize information, pay attention and multi-task better. This may be because exercise helps the body move glucose to the brain, which improves its function.
- **Possibly ward off Alzheimer's disease.** There is growing research that suggests regular exercise is linked with a lower risk of Alzheimer's. Brain activity has been shown to increase with physical fitness. One study found that adults who exercised three times a week had a much lower chance of getting Alzheimer's than those who didn't.
- **Ease depression and anxiety.** Exercise increases the level of serotonin (a chemical that affects mood) in the brain. Low levels of serotonin are linked with clinical depression. Some studies show that exercise can work just as well as medication in treating mild depression in some people.
- **Reduce stress.** Physical activity helps lower the release of cortisol in your body. Cortisol is a hormone linked with stress.
- **Help keep your blood pressure in check.** High blood pressure can harm blood vessels in your brain and reduce your brain's oxygen supply. This damages nerve cells that are used for decision-making and memory.

Time to get moving

Check with your doctor first before starting an exercise program. Then use these tips to get moving:



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- **Pick an activity you enjoy.** Try walking, swimming or playing tennis. You'll be more likely to stick with exercising if you enjoy doing it.
- **Start slowly.** Work your way up to at least 30 minutes of exercise most days of the week.
- **Get a workout buddy.** Exercise can help build friendships. It may be easier to stick to a fitness schedule if you have someone counting on you to show up.

Even if you've lived an inactive lifestyle up until now, regular activity will help keep your body - and brain - in shape.

Food for the Heart

Heart-healthy eating involves more than slashing fat and cholesterol. Learn what foods and food can help keep you healthy.

You want to eat well to protect your heart. You start by limiting certain foods you know can cause trouble, such as butter, red meat, cheese and fried foods. But did you know that one of the keys to heart-healthy eating is to concentrate on what to *add* to your meal plan?

Reducing saturated and trans fats, cholesterol and sodium in your diet is a good start, but there is a lot more to heart-healthy eating. The following guidelines will help you tackle the rest of your meal plan.

Eat a variety of fruits, vegetables, beans (legumes) and whole-grain products. These foods are naturally free of cholesterol and saturated fat. Also, they are loaded with vitamins, minerals and antioxidants. And they are the only category of foods that will provide heart-healthy fiber.

- Aim for a *minimum* of five servings of fruits and vegetables a day. Variety is the key, and the more colorful, the better. Use red peppers, yellow squash, orange carrots and purple cabbage.
- Aim for six servings of grains a day. Focus on whole grains for extra fiber and nutrients. Try brown rice, barley, whole-grain breads, cereals, crackers and pastas.
- Include plenty of beans, such as kidney, pinto, navy and soy beans. They are loaded with fiber and are also good sources of protein and other nutrients.
- Experts suggest 25 grams to 35 grams of fiber a day. Look to include plenty of soluble fiber, found in fruits, oats and beans. This type of fiber has been shown to be especially helpful for lowering cholesterol.

Include healthy fats in your meal plan. Typically, the first thing to go on a low-cholesterol diet is the fat. Cutting out all fat is not required, though, and can even work against you. Some types of fat can be harmful, but others have proven to be beneficial.

- **Saturated fats** should be limited. They can raise the level of cholesterol in your blood. These fats are found in red meat, bacon, hot dogs, poultry skin, butter, high-fat dairy and products made with butter or cream.
- **Polyunsaturated fats** such as corn, safflower and sunflower oils can be eaten in moderation, but should be limited in favor of monounsaturated fats and omega-3 fats.
- **Monounsaturated fats** are thought to be heart-healthy. These include olive and canola oils, avocado and most nuts and seeds.
- **Omega-3 fats** are good for the heart and usually lacking in the American diet. Good sources are fatty fish (salmon, mackerel, sardines), flax oil and flax seeds, walnuts and some green leafy vegetables. The American Heart Association

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says to eat two servings of fatty fish per week.

Choose fat-free and low-fat dairy products, fish, poultry and lean meats. All animal foods contain cholesterol. However, lean and low-fat choices will contain very little saturated fat. Vegetables, grains and beans should make up the bulk of your meal plan, rounded out by low-fat, lean animal foods.

- Choose skim or 1% milk and yogurt over whole or 2%.
- White meat chicken, turkey and fish are all good choices. Keep portions to no more than 3 to 6 ounces per day.
- Lean meat can also be part of a heart-healthy diet. Limit portions to 3 to 4 ounces, twice a week.
- Soy foods, such as tofu, tempeh and edamame can be a great substitute for meats high in saturated fat or other unhealthy foods.

Remember that a healthy diet can include the foods you love. And watching what you eat may keep you around longer for the people you love.

Managing Diabetes: The Oral-Vision Connection

Many are aware of serious diabetes-related complications such as heart disease, nerve damage, and limb amputation. However, people may not be aware of how diabetes can affect oral and visual health.

November is National Diabetes Month, and primary care physicians, dentists and eye-care specialists are urging people to schedule regular checkups. For people with diabetes, these visits can help regulate the disease's impact on dental, visual and overall health. For people who are not aware that they might have diabetes, certain signs and symptoms can help diagnose the disease.

According to the [Centers for Disease Control and Prevention](#) (CDC), one-quarter of the 26 million Americans with diabetes, and 90 percent of the 79 million adults with prediabetes, are unaware of their condition.

"There are many people who do not know that they have diabetes, or are at risk for developing diabetes, and this puts a premium on diagnosis. The eyes and mouth can be a window into your health," says Michael D. Weitzner, DMD, MS, vice president of National Clinical Operations for [UnitedHealthcare](#)'s dental business.

Periodontal disease, an infection that affects the gum tissue and bone that hold one's teeth in place and can lead to bad breath, abscesses and tooth loss, may be a first indicator that a person may not have control of his or her blood sugar level.

"Diabetes has the potential of weakening one's ability to fight bacteria in the mouth and throughout the body. Unmanaged blood sugar can lead to difficulty fighting infection appropriately, paving the way for serious gum disease," said John Luther, DMD, MS,

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chief dental officer at UnitedHealthcare. "Because periodontal disease is often painless, people may not know they have it until the damage has already been done."

Diabetes also makes people more prone to other dental problems, including oral infections, thrush and dry mouth. Dr. Luther recommends diabetes patients: schedule dental checkups every six months and alert their dentists that they have diabetes; make sure to take normal medications prior to dental visits unless your dentist or doctor instructs otherwise; and maintain an oral health care regimen of regular and rigorous flossing and brushing using toothpaste with an antiplaque or antibacterial ingredient and preferably with an electric toothbrush.

The relationship between diabetes and visual health is also significant.

"Eye examinations play a significant role in diagnosing, monitoring and managing diabetes," said Linda Chous, O.D., chief eye care officer at UnitedHealthcare. "According to the CDC, recent studies show that keeping one's blood glucose levels close to normal can help prevent or delay the onset of diabetes-related eye disease."

Diabetic retinopathy, which occurs when the disease damages the tiny blood vessels that nourish the retina, is the leading cause of blindness in the United States among people between 20 and 74 years' old. People with either type 1 or type 2 diabetes are at risk of developing diabetic retinopathy; the [National Eye Institute](#) estimates that between 40 and 45 percent of Americans diagnosed with diabetes have some form of retinopathy. Vision complications related to diabetes extend beyond retinopathy to include increased risk of developing glaucoma and cataracts.

"All patients with diabetes should receive a comprehensive dilated eye exam at least once a year," Dr. Chous said. "Equally important, the dilated eye exam can help detect diabetes in those unaware that they have the condition. Oftentimes a patient will come in for a routine exam and the eye doctor will find evidence that the patient is at risk for diabetes or might in fact already be diabetic and will refer that patient to his/her primary care physician for further testing."

Since there are often no outward signs or pain associated with the early stages of diabetes, changes in vision such as blurriness, seeing spots or persistent redness can be symptomatic of the disease.

"Sudden shifts in blood sugar can cause changes in the eye lens that can lead to fluctuations in a person's eyeglass or contact lens prescription," Dr. Chous said. Other vision-related complications of diabetes that can serve as early indicators of the disease include double vision, dry eyes and lid infection.

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“People with diabetes have special health considerations,” Weitzner said. “This National Diabetes Month, don’t forget to make dental and visual care a priority.”

Keep your mouth healthy during pregnancy

When you’re pregnant, you’re eating for two — but you’re also brushing for two. When you take care of your teeth and gums, it makes a big difference for your baby, both before and after birth.

Your mouth needs extra care when you’re pregnant.

Being pregnant can be hard on your teeth and gums. If you have morning sickness, it can be difficult to brush and floss, and if you’re vomiting, the acid can harm your enamel. Eating more often can increase your risk of tooth decay, especially if you choose sugary snacks. And hormone changes can lead to an increased risk of gingivitis, a gum disease caused by plaque.

During pregnancy, it’s important to work hard to keep your mouth healthy. Gum disease can increase your risk for complications including diabetes¹ and preeclampsia, a condition where toxins build up in the blood and cause high blood pressure and other symptoms.²

Even after you give birth, the health of your mouth affects the health of your baby. If you have gum disease or tooth decay, germs from your mouth can be passed to your baby by kissing or sharing a spoon.³ Those germs can later cause decay in your baby’s teeth.

In brief:

- Hormone changes during pregnancy can increase your risk for gum disease
- If you have gum disease, you can pass decay-causing bacteria on to your baby
- Brush twice a day using a fluoride toothpaste, and floss at least once daily
- Dental work is safe any time during pregnancy

Dental care tips during pregnancy:

- Brush your teeth at least twice daily using a fluoride toothpaste
- Floss at least once a day
- Rinse daily with a fluoride mouthwash
- Choose healthy foods like fruits and vegetables, and avoid sugary or starchy snacks and soda



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- Visit your dentist at least once during your pregnancy. He or she can clean your teeth and help you control any tooth decay or gum disease. A dental visit is safe any time during your pregnancy

By taking good care of your mouth while you're pregnant, you're giving your baby a great start on a lifetime of excellent oral health.

Breast Cancer: Coping With Fears of Being at Risk

If a friend or family member has breast cancer, are you afraid you're next? Learning more and making lifestyle changes may reduce the fear.

For many women, breast cancer is one of their worst fears. There's no doubt that it is a scary disease. But most women overestimate their risk of getting breast cancer. Experts say that women alive now have about a 13 percent risk of getting breast cancer at some time in their lives.

Here are some things that may help put the risk in context:

- This is a woman's lifetime risk, meaning it's spread throughout your life. Most cases of breast cancer occur in women older than 60.
- Another way to state this is that about 1 out of 8 women will get breast cancer sometime during her life. That means that 7 out of 8 women won't ever get breast cancer.
- About 41,000 women die each year of breast cancer. More than 330,000 women die each year of heart disease.

These numbers only give a general idea of breast cancer risk. The key to coping with a fear of breast cancer is knowing what puts you at risk and then taking steps to lower your risk.

Understand your risks

Just being a woman puts you at risk for breast cancer. (Men can get it, too, but it's rare.) Some things that put you at risk are not in your control. These include:

- **Age.** The risk of breast cancer increases as you get older.
- **A family history of breast cancer**, especially in a mother, sister, or daughter.
- **A personal history of breast cancer.** Having it in one breast means you're more likely to get it in the other breast.
- **Starting your period before age 12** or going through menopause after age 55.
- **Having dense breasts.** Your doctor can tell you if your breasts are dense.

You may be able to control some things that increase your risk for breast cancer. Things that increase your risk include:

- Not having children or having your first child after age 30.
- Taking hormones after menopause.
- Being overweight after menopause.
- Not being physically active.
- Drinking alcohol. The more you drink, the higher your risk.

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Take steps to lower your risk

There's no way to guarantee that you won't get breast cancer. But certain health practices have been shown to lower the risk of cancer. You don't have to be perfect. Even making a few of these changes could help reduce your breast cancer risk.

- **Don't smoke.** This is the number one thing you can do to improve your health and lower your cancer risk.
- **Stay at a healthy weight for your height.** Try to avoid weight gain, especially around your waist.
- **Get 30 minutes of moderately intense physical activity every day.** Walking, swimming, and riding a bike are good choices. But housework, yard work, and gardening count, too. Just try to move more. But always check with your doctor before you increase your activity level.
- **Make healthy food choices.** Eat plenty of high-fiber, plant-based foods, such as whole grains, beans, fruits, and vegetables. Limit red meat, saturated fat, and salt.
- **Limit alcohol to no more than 1 drink a day** if you drink.
- **Get regular breast cancer screenings** as recommended. Your doctor can tell you how often you need one. Get a mammogram regularly starting at age 40 (or sooner if you're at high risk).

If you're at high risk for breast cancer, talk to your doctor about your choices. You may be able to take medicines or have surgery to lower your breast cancer risk. Your doctor can help you decide if genetic testing is right for you.

Cholesterol Screening: Why it Is Important to Have a Cholesterol Test

Cholesterol builds up silently, slowly choking off blood supply to your heart and brain. Get your cholesterol checked.

You see TV commercials, ads in magazines, and pamphlets lining your doctor's office walls - all touting the dangers of high cholesterol. But you feel healthy, and have never worried about your cholesterol or heart problems. So, why do you need to have a cholesterol test?

What is cholesterol and how does it affect me?

Cholesterol is a fat-like substance that your body needs to function. Your body makes some cholesterol because it is needed to form cell membranes, some hormones and bile acids (which digest fat), for example. But people consume extra cholesterol through foods, especially animal foods like meats and dairy products. Trans fats also raise cholesterol. Trans fats are found in processed foods.

When there is too much cholesterol in your blood, it can build up on the inside walls of your arteries. Over time, the cholesterol buildup, called plaque, can narrow the space for blood to flow through. This can happen in the arteries everywhere in the body. It is most dangerous, though, in the arteries that feed the heart, brain and other vital organs.

When plaque buildup narrows the coronary arteries, which supply oxygen-rich blood to the heart, it can cause chest pain, shortness of breath and other symptoms of coronary heart disease. If a clot forms on the plaque, it can block the blood flow to the heart muscle, causing a heart attack. If a clot blocks the flow of blood to the brain, it can cause a stroke.

The higher your cholesterol levels, the greater your risk of heart disease and stroke. Given that heart disease is a top killer of men and women in the U.S., this is not a risk that you should ignore. But, eating a heart-healthy diet, being physically active and losing weight are things everyone can do to help lower their cholesterol levels and their risks.

What's being measured when your cholesterol is checked? Why is some cholesterol referred to as "good," while other as "bad"?

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Types of cholesterol

Your doctor may order tests to check your blood levels of cholesterol. Because cholesterol can't dissolve in the blood (it's not water-soluble), it doesn't circulate by itself. Instead, cholesterol travels through the bloodstream linked to "carriers" called lipoproteins.

There are three different types of lipoproteins. The two that are most important to remember in terms of your possible risk of heart disease are high-density (HDL) and low-density lipoproteins (LDL).

- **LDL.** Cholesterol that is carried on low-density lipoproteins is called LDL cholesterol (the "bad" cholesterol). Higher levels of LDL cholesterol are linked to an *increased* risk for heart disease.
- **HDL.** Cholesterol molecules that are linked to high-density lipoproteins are called HDL cholesterol (the "good" cholesterol). If you have higher levels of HDL cholesterol, you're at *lower* risk for heart disease.

"Good" and "bad" cholesterol

Why is one type of cholesterol be labeled "good," putting people at lower risk for heart disease, and another labeled "bad?" Because experts believe that LDL is the main carrier of cholesterol *to* body tissues, and HDL carries cholesterol away from body tissues.

When you have a lot of LDL cholesterol, there is more of a danger that too much may be deposited in artery walls. This may then damage the walls. The arteries may develop a cholesterol and fatty buildup called a plaque on the inside. This is called atherosclerosis, or "hardening of the arteries."

When you have higher levels of HDL in your blood, it means that more high-density lipoproteins carry cholesterol away from arterial walls and to the liver. The liver then eliminates the cholesterol from the body by excreting it in the bile. Clearly, the more this happens, the less likely that cholesterol will accumulate in arterial walls and worsen the progression of atherosclerosis.

Why test?

Cholesterol buildup as plaque can prevent adequate amounts of blood from flowing to the heart muscle. It is the most common cause of coronary heart disease, and happens so slowly that you are not even aware of it. This plaque can rupture, forming a blood clot that leads to a heart attack or stroke. The higher your LDL cholesterol, the greater your chance of heart attack or stroke. This is why cholesterol screening is so important. Cholesterol can build up for many years before any symptoms develop. So, you can feel healthy and not realize you have high cholesterol.