
CENTRAL PA HEALTH CARE QUALITY UNIT NEWSLETTER FOR HEALTHY OUTCOMES

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ANXIETY QUESTIONS

From MerckSource.com

Review the following 'Questions To Ask' about anxiety disorders so you're prepared to discuss this important health issue with a health care professional.

1. Could the anxiety be caused by an underlying medical condition or medications being taken?
2. Can anxiety be treated? What treatments are available?
3. How can relaxation techniques or biofeedback help to ease anxiety?
4. Will counseling or therapy help anxiety? What kind of counseling or therapy do you recommend?
5. Are there any substances that should be avoided, or lifestyle habits that should be changed, to help overcome the anxiety?
6. I need to involve my family member and people that support me in the treatment. Will you help educate them about my problem and how to help me manage it?
7. (If medication is prescribed): How do you expect this medication to help? When and how should it be taken?
8. What are the possible side effects of the medication that is being prescribed?
9. How long will it take the medication to work?
10. Should other medications, alcohol or certain foods be avoided while taking this medication?
11. If this medication doesn't work, is it safe to stop taking it without warning?
12. How long should this medication be taken? Can dependence occur?



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The information offered in this newsletter is to increase your awareness of health related conditions and situations and not intended to be a substitute for professional medical advice. If you believe you or someone you support has a condition, please seek the advice of a physician.

Helicobacter pylori (H.pylori)

From Krames, Staywell Company, 2001

If you have an ulcer—a sore or crater in the lining of your digestive tract—you know it can be an uncomfortable and even painful condition. But do you know what caused it? Traditionally, ulcers were thought to be caused by too much spicy food, stress, or an anxious personality. We now know that most ulcers are probably due to infection with bacteria known as

Helicobacter pylori.

Common Ulcer Symptoms

Ulcers may or may not cause symptoms, and the symptoms often come and go. If you have an ulcer, you may notice some of these common symptoms:

- Burning, cramping, or hungerlike pain in the stomach area, often one to three hours after a meal or in the middle of the night
- Pain that gets better or worse with eating
- Nausea or vomiting
- Black, tarry, or bloody stools (which means the ulcer is bleeding)

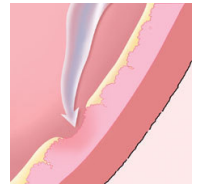


Where Ulcers Form

An ulcer (a sore or crater) can form in two main areas of the digestive tract—in the duodenum, the space where the stomach meets the small intestine, and in the stomach itself. These areas contain strong acids and enzymes that help digest the food you eat. To keep these substances from also digesting your body's own tissue, the stomach and duodenum are coated with a protective mucus layer.

How *H. pylori* Cause Ulcers

H. pylori bacteria are common and can be passed from one person to another. When *H. pylori* enter the body, they like to hide in the protective mucus layer coating your stomach and duodenum. The bacteria weaken this mucus layer and irritate the tissue underneath. Acid may flow through the weakened mucus layer and burn the underlying inflamed tissue. These factors may lead to formation of an ulcer in the lining of the stomach or duodenum. *H. pylori* invade and disturb the protective mucus layer. Acid may pass through the weakened mucus layer, causing an ulcer.



Treatment

After you've been evaluated, your doctor can begin treatment. If tests show that *H. pylori* bacteria are in your digestive tract, medications can be prescribed to kill them so your ulcer can heal.

With proper treatment, most ulcers heal without problems. But if you notice any of the following, call your doctor right away:

- Vomiting frequently or vomiting blood
- Dark, tarry, or bloody stools
- Sudden, intense pain
- Continued weight loss
- Continued pain after taking your medication

An evaluation by your doctor can show if you have an ulcer and determine whether it was caused by *H. pylori*. Your doctor may ask you questions, examine you, and possibly do some tests. Certain treatment options may be tried first before extensive testing is done. Your doctor will probably ask you if you have any family history of ulcers, since ulcers tend to run in families. You may also be asked whether you smoke or take pain relievers, since these can make an ulcer more likely.

Certain tests can confirm the presence of an ulcer. A special x-ray called a **barium upper gastrointestinal series** may help locate an ulcer. During this test, you drink a chalky liquid containing barium. This liquid helps the ulcer show up on the x-ray. An **endoscopic exam**, done through a long tube passed through your mouth into your stomach, can give the doctor a closer look at your ulcer. Blood and breath tests are also available to show whether you have *H. pylori* in your digestive tract. To make treatment successful: Take all your medication exactly as your doctor or pharmacist instructs. The medication may make you feel worse for a short time, but it's the best way to ensure that all of the *H. pylori* bacteria are killed so the ulcer won't return. Also, avoiding cigarettes and aspirin-containing pain relievers can help an ulcer heal and help keep it from returning.

Heart Disease Symptoms Differ Between Sexes

From Merck Source, Health Ink and Vitality Communications

Heart disease is the number one cause of death for American women, according to the American Medical Association (AMA). African American and Hispanic American women are more likely to die from heart disease than are Caucasian American women. And women with type 2 diabetes are more likely to develop severe heart disease than are men with type 2 diabetes.

Women's heart disease symptoms can also be more subtle than men's symptoms, and they can lead physicians to explore other possible causes rather than a disorder of the heart.

A study funded by the National Institute of Nursing Research found that women often have warning signs of a heart attack for a considerable period of time before having one. The symptoms -- nausea, fatigue and dizziness -- are often dismissed by health care providers as stress. That's because these symptoms are quite different from symptoms experienced by men with heart disease.

Below is an overview of the most significant symptoms for women, compared with the symptoms for men.

Women's symptoms

- Trouble sleeping.
- Shortness of breath.
- Anxiety.
- Unusual fatigue. Fatigue associated with heart disease is usually overwhelming and not typical for the person.
- Dizziness. Unexplained lightheadedness, even blackouts.
- Edema. Swelling, particularly of the ankles and/or lower legs.
- Fluttering (or rapid) heartbeats.
- Indigestion, gastric upset or nausea.

Men's symptoms

- Sudden pressure, tightness, fullness, squeezing or pain in the center of the chest that lasts more than a few minutes or goes away and then comes back.
- Pain that radiates from the center of the chest to the shoulders, neck or arms.
- Chest discomfort with lightheadedness, fainting, sweating, nausea or shortness of breath.
- Sudden onset of rapid heartbeats.

Women are less likely to experience painful symptoms of heart disease, such as angina. If women do have heart disease pain, it may be in the stomach area instead of on the left side of the chest, as it often is in men, the AMA says. Stomach pain or discomfort in women may be diagnosed as heartburn or indigestion rather than heart disease.

Because the symptoms of heart disease in women either are absent or are so different from those of men -- and thus ignored -- the first heart attack for women can be fatal, the AMA says.

In general, risk factors for heart disease do not differ between men and women. Risk factors are:

- Smoking
- High blood pressure
- Being overweight
- Little or no regular exercise
- Diabetes
- High cholesterol
- Family history of heart disease

Talk to your doctor if you have questions or concerns about heart disease. Your doctor is your best source of information on this illness.

BARBECUE AND FOOD SAFETY

From FSIS.gov

Cooking outdoors was once only a summer activity shared with family and friends. Now more than half of Americans say they are cooking outdoors year round. So whether the snow is blowing or the sun is shining brightly, it's important to follow food safety guidelines to prevent harmful bacteria from multiplying and causing foodborne illness. Use these simple guidelines for grilling food safely.

When shopping, buy cold food like meat and poultry last, right before checkout. Separate raw meat and poultry from other food in your shopping cart. To guard against cross-contamination — which can happen when raw meat or poultry juices drip on other food — put packages of raw meat and poultry into plastic bags. Refrigerate within 1 hour when the temperature outside is above 90 °F. At home, place meat and poultry in the refrigerator immediately. Freeze poultry and ground meat that won't be used in 1 or 2 days; freeze other meat within 4 to 5 days.

Keep Cold Food Cold

Keep meat and poultry refrigerated until ready to use. Only take out the meat and poultry that will immediately be placed on the grill.

Keep Everything Clean

Be sure there are plenty of clean utensils and platters. To prevent foodborne illness, don't use the same platter and utensils for raw and cooked meat and poultry. Harmful bacteria present in raw meat and poultry and their juices can contaminate safely cooked food.

Cook Thoroughly

Cook food to a safe minimum internal temperature to destroy harmful bacteria. Meat and poultry cooked on a grill often browns very fast on the outside. Use a food thermometer to be sure the food has reached a safe minimum internal temperature. Beef, veal, and lamb steaks, roasts and chops can be cooked to 145 °F. Hamburgers made of ground beef should reach 160 °F. All cuts of pork should reach 160 °F. All poultry should reach a minimum of 165 °F. NEVER partially grill meat or poultry and finish cooking later.

Reheating

When reheating fully cooked meats like hot dogs, grill to 165 °F or until steaming hot.

Keep Hot Food Hot

After cooking meat and poultry on the grill, keep it hot until served — at 140 °F or warmer. Keep cooked meats hot by setting them to the side of the grill rack, not directly over the coals where they could overcook. At home, the cooked meat can be kept hot in an oven set at approximately 200 °F, in a chafing dish or slow cooker, or on a warming tray.

Serving the Food

When taking food off the grill, use a clean platter. Don't put cooked food on the same platter that held raw meat or poultry. Any harmful bacteria present in the raw meat juices could contaminate safely cooked food. In hot weather (above 90 °F), food should never sit out for more than 1 hour.

Leftovers

Refrigerate any leftovers promptly in shallow containers. Discard any food left out more than 2 hours (1 hour if temperatures are above 90 °F).

Does Grilling Pose a Cancer Risk?

Some studies suggest there may be a cancer risk related to eating food cooked by high-heat cooking techniques as grilling, frying, and broiling. Based on present research findings, eating moderate amounts of grilled meats like fish, meat, and poultry cooked — without charring — to a safe temperature does not pose a problem.

To prevent charring, remove visible fat that can cause a flare-up. Precook meat in the microwave immediately before placing it on the grill to release some of the juices that can drop on coals. Cook food in the center of the grill and move coals to the side to prevent fat and juices from dripping on them. Cut charred portion