



EASTERN PENNSYLVANIA HEALTH CARE QUALITY UNIT

IT'S YOUR HEALTH FALL 2009



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www.theadvocacyalliance.org



NOVEMBER IS NATIONAL ALZHEIMER'S DISEASE AWARENESS MONTH

Memory loss that disrupts daily life is not a typical part of aging. It may be a symptom of Alzheimer's, a fatal brain disease that causes a slow decline in memory, thinking and reasoning skills. Every individual may experience one or more of these signs in different degrees. If you notice any of them, please see a doctor.

Every 70 seconds, someone will develop Alzheimer's.

As many as 5.3 million people in the United States are living with Alzheimer's.

10 warning signs of Alzheimer's:

Memory changes that disrupt daily life.

One of the most common signs of Alzheimer's, especially in the early stages, is forgetting recently learned information. Other common signs include: forgetting important dates or events; asking for the same information over and over; and relying on memory aides (e.g., reminder notes or electronic devices) or family members for things they used to handle on their own.

What's typical? Sometimes forgetting names or appointments, but remembering them later.

Challenges in planning or solving problems.

Some people may experience changes in their ability to develop and follow a plan or work with numbers. They may have trouble following a familiar recipe or keeping track of monthly bills. They may have difficulty concentrating and take much longer to do things than they did before.

What's typical? Making occasional errors when balancing a checkbook.

Difficulty completing familiar tasks at home, at work or at leisure.

People with Alzheimer's often find it hard to complete daily tasks. Sometimes, people may have trouble driving to a familiar location, managing a budget at work or remembering the rules of a favorite game.

What's typical? Occasionally needing help to use the settings on a microwave or to record a television show.

Confusion with time or place.

People with Alzheimer's can lose track of dates, seasons and the passage of time. They may have trouble understanding something if it is not happening immediately. Sometimes they may forget where they are or how they got there.

What's typical? Getting confused about the day of the week but figuring it out later.





Trouble understanding visual images and spatial relationships.

For some people, having vision problems is a sign of Alzheimer's. They may have difficulty reading, judging distance and determining color or contrast. In terms of perception, they may pass a mirror and think someone else is in the room. They may not realize they are the person in the mirror.

What's typical? Vision changes related to cataracts.

New problems with words in speaking or writing.

People with Alzheimer's may have trouble following or joining a conversation. They may stop in the middle of a conversation and have no idea how to continue or they may repeat themselves. They may struggle with vocabulary, have problems finding the right word or call things by the wrong name (e.g., calling a "watch" a "hand-clock").

What's typical? Sometimes having trouble finding the right word.

Misplacing things and losing the ability to retrace steps.

A person with Alzheimer's disease may put things in unusual places. They may lose things and be unable to go back over their steps to find them again. Sometimes, they may accuse others of stealing. This may occur more frequently over time.

What's typical? Misplacing things from time to time, such as a pair of glasses or the remote control.

Decreased or poor judgment.

People with Alzheimer's may experience changes in judgment or decision-making. For example, they may use poor judgment when dealing with money, giving large amounts to telemarketers. They may pay less attention to grooming or keeping themselves clean.

What's typical? Making a bad decision once in a while.

Withdrawal from work or social activities.

A person with Alzheimer's may start to remove themselves from hobbies, social activities, work projects or sports. They may have trouble keeping up with a favorite sports team or remembering how to complete a favorite hobby. They may also avoid being social because of the changes they have experienced.

What's typical? Sometimes feeling weary of work, family and social obligations.



Changes in mood and personality.

The mood and personalities of people with Alzheimer's can change. They can become confused, suspicious, depressed, fearful or anxious. They may be easily upset at home, at work, with friends or in places where they are out of their comfort zone.

What's typical? Developing very specific ways of doing things and becoming irritable when a routine is disrupted.



Check out these websites mentioned in this edition of "It's Your Health".

Centers for Disease Control and Prevention

<http://www.cdc.gov/h1n1flu/>

Alzheimer's Association

<http://www.alz.org/index.asp>

2009 H1N1 FLU (SWINE FLU) AND YOU

What is 2009 H1N1 (swine flu)?

2009 H1N1 (referred to as “swine flu” early on) is a new influenza virus causing illness in people. This new virus was first detected in people in the United States in April 2009. Other countries, including Mexico and Canada, have reported people sick with this virus. This virus is spreading from person-to-person, in much the same way that regular seasonal influenza viruses spread.



Why is 2009 H1N1 virus sometimes called “swine flu”?

This virus was originally referred to as “swine flu” because laboratory testing showed that many of the genes in this new virus were very similar to influenza viruses that normally occur in pigs in North America. But further study has shown that this new virus is very different from what normally circulates in North American pigs. It has two genes from flu viruses that normally circulate in pigs in Europe and Asia and avian genes and human genes. Scientists call this a “quadruple reassortant” virus.

2009 H1N1 Flu in Humans

Are there human infections with 2009 H1N1 virus in the U.S.?

Yes. Cases of human infection with 2009 H1N1 influenza virus were first confirmed in the U.S. in Southern California and near Guadalupe County, Texas. The outbreak intensified rapidly from that time and more and more states have been reporting cases of illness from this virus. An updated case count of confirmed 2009 H1N1 flu infections in the United States is kept at <http://www.cdc.gov/h1n1flu/update.htm>. The Centers for Disease Control and Prevention (CDC) and local and state health agencies are working together to investigate this situation.

Is 2009 H1N1 virus contagious?

The CDC has determined that 2009 H1N1 virus is contagious and is spreading from human to human. However, at this time, it is not known how easily the virus spreads between people.



What are the signs and symptoms of this virus in people?

The symptoms of 2009 H1N1 flu virus in people are similar to the symptoms of seasonal flu and include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills and fatigue. A significant number of people who have been infected with this virus also have reported diarrhea and vomiting. Also, like seasonal flu, severe illnesses and death have occurred as a result of illness associated with this virus.

How severe is illness associated with 2009 H1N1 flu virus?

It’s not known at this time how severe 2009 H1N1 flu virus will be in the general population. In seasonal flu, there are certain people that are at higher risk of serious flu-related complications. This includes people 65 years and older, children younger than five years old, pregnant women, and people of any age with certain chronic medical conditions. Early indications are that pregnancy and other previously recognized medical conditions that increase the risk of influenza-related complications, like asthma and diabetes, also appear to be associated with increased risk of complications from 2009 H1N1 virus infection as well.

One thing that appears to be different from seasonal influenza is that adults older than 64 years do not yet appear to be at increased risk of 2009 H1N1-related complications thus far in the outbreak. The CDC is conducting laboratory studies to see if certain people might have natural immunity to this virus, depending on their age. Early reports indicate that no children and few adults younger than 60 years old have existing antibody to 2009 H1N1 flu virus; however, about one-third of adults older than 60 may have antibodies against this virus. It is unknown how much, if any, protection may be afforded against 2009 H1N1 flu by any existing antibody.

How does 2009 H1N1 flu compare to seasonal flu in terms of its severity and infection rates?

The CDC is still learning about the severity of 2009 H1N1 flu virus. At this time, there is not enough information to predict how severe a 2009 H1N1 flu outbreak will be in terms of illness and death or how it will compare with seasonal influenza.

With seasonal flu, we know that outbreaks vary in terms of timing, duration and severity. Seasonal influenza can cause mild to severe illness, and at times can lead to death. Each year, in the United States, on average 36,000 people die from flu-related complications and more than 200,000 people are hospitalized from flu-related causes. Of those hospitalized, 20,000 are children younger than 5 years old. Over 90% of deaths and about 60 percent of hospitalization occur in people older than 65.

So far, with 2009 H1N1 flu, the largest number of 2009 H1N1 flu confirmed and probable cases have occurred in people between the ages of 5 and 24-years-old. Pregnancy and other previously recognized high risk medical conditions from seasonal influenza appear to be associated with increased risk of complications from this 2009 H1N1.

How does 2009 H1N1 virus spread?

Spread of 2009 H1N1 virus is thought to be happening in the same way that seasonal flu spreads. Flu viruses are spread mainly from person to person through coughing or sneezing by people with influenza. Sometimes people may become infected by touching something with flu viruses on it and then touching their mouth or nose.

How long can an infected person spread this virus to others?

At the current time, the CDC believes that this virus has the same properties in terms of spread as seasonal flu viruses. With seasonal flu, studies have shown that people may be contagious from one day before they develop symptoms to up to 7 days after they get sick. Children, especially younger children, might potentially be contagious for longer periods. The CDC is studying the virus and its capabilities to try to learn more and will provide more information as it becomes available.

Exposures Not Thought to Spread 2009 H1N1 Flu

Can I get infected with 2009 H1N1 virus from eating or preparing pork?

No. 2009 H1N1 viruses are not spread by food. You cannot get infected with novel H1N1 virus from eating pork or pork products. Eating properly handled and cooked pork products is safe.

Is there a risk from drinking water?

Tap water that has been treated by conventional disinfection processes does not likely pose a risk for transmission of influenza viruses. Current drinking water treatment regulations provide a high degree of protection from viruses. No research has been completed on the susceptibility of 2009 H1N1 flu virus to conventional drinking water treatment processes. However, recent studies have demonstrated that free chlorine levels typically used in drinking water treatment are adequate to inactivate highly pathogenic H5N1 avian influenza. It is likely that other influenza viruses such as 2009 H1N1 would also be similarly inactivated by chlorination. To date, there have been no documented human cases of influenza caused by exposure to influenza-contaminated drinking water.

Can 2009 H1N1 flu virus be spread through water in swimming pools, spas, water parks, interactive fountains and other treated recreational water venues?

Influenza viruses infect the human upper respiratory tract. There has never been a documented case of influenza virus infection associated with water exposure. Recreational water that has been treated at the CDC recommended disinfectant levels does not likely pose a risk for transmission of influenza viruses. No research has been completed on the susceptibility of 2009 H1N1 influenza virus to chlorine and other disinfectants used in swimming pools, spas, water parks, interactive fountains and other treated recreational venues. However, recent studies have demonstrated that free chlorine levels recommended by the CDC (1–3 parts per million [ppm or mg/L] for pools and 2–5 ppm for spas) are adequate to disinfect avian influenza A (H5N1) virus. It is likely that other influenza viruses such as 2009 H1N1 virus would also be similarly disinfected by chlorine.

Can 2009 H1N1 influenza virus be spread at recreational water venues outside of the water?

Yes, recreational water venues are no different than any other group setting. The spread of this 2009 H1N1 flu is thought to be happening in the same way that seasonal flu spreads. Flu viruses are spread mainly from person to person through coughing or sneezing of people with influenza. Sometimes people may become infected by touching something with flu viruses on it and then touching their mouth or nose.

Prevention & Treatment

What can I do to protect myself from getting sick?

There is no vaccine available right now to protect against 2009 H1N1 virus. There are everyday actions that can help prevent the spread of germs that cause respiratory illnesses like influenza.

Take these everyday steps to protect your health:

- Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.
- Wash your hands often with soap and water, especially after you cough or sneeze. Alcohol-based hand cleaners are also effective.
- Avoid touching your eyes, nose or mouth. Germs spread this way.
- Try to avoid close contact with sick people.
- Stay home if you are sick. This is to keep from infecting others and spreading the virus further.

Other important actions that you can take are:

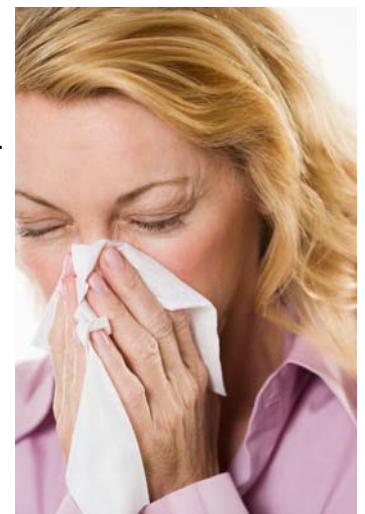
- Follow public health advice regarding school closures, avoiding crowds and other social distancing measures.
- Be prepared in case you get sick and need to stay home for a week or so; a supply of over-the-counter medicines, alcohol-based hand rubs, tissues and other related items might be useful and help avoid the need to make trips out in public while you are sick and contagious.

What is the best way to keep from spreading the virus through coughing or sneezing?

If you are sick, limit your contact with other people as much as possible. Cover your mouth and nose with a tissue when coughing or sneezing. Put your used tissue in the waste basket. Then, clean your hands, and do so every time you cough or sneeze.

If I have a family member at home who is sick with 2009 H1N1 flu, should I go to work?

Employees who are well but who have an ill family member at home with 2009 H1N1 flu can go to work as usual. These employees should monitor their health every day, and take everyday precautions including washing their hands often with soap and water, especially after they cough or sneeze. Alcohol-based hand cleaners are also effective. If they become ill, they should notify their supervisor and stay home. Employees who have an underlying medical condition or who are pregnant should call their health care provider for advice, because they might need to receive influenza antiviral drugs to prevent illness.



What is the best technique for washing my hands to avoid getting the flu?

Washing your hands often will help protect you from germs. Wash with soap and water or clean with alcohol-based hand cleaner. CDC recommends that when you wash your hands – with soap and warm water – that you wash for 15 to 20 seconds. When soap and water are not available, alcohol-based disposable hand wipes or gel sanitizers may be used. You can find them in most supermarkets and drugstores. If using gel, rub your hands until the gel is dry. The gel doesn't need water to work; the alcohol in it kills the germs on your hands.



What should I do if I get sick?

If you live in areas where people have been identified with 2009 H1N1 flu and become ill with influenza-like symptoms, including fever, body aches, runny or stuffy nose, sore throat, nausea, vomiting or diarrhea, you should stay home and avoid contact with other people. Staying at home means that you should not leave your home except to seek medical care. This means avoiding normal activities, including work, school, travel, shopping, social events, and public gatherings.

If you have severe illness or you are at high risk for flu complications, contact your health care provider or seek medical care. Your health care provider will determine whether flu testing or treatment is needed.

If you become ill and experience any of the following warning signs, seek emergency medical care. In children, emergency warning signs that need urgent medical attention include:

- Fast breathing or trouble breathing
- Bluish or gray skin color
- Not drinking enough fluids
- Severe or persistent vomiting
- Not waking up or not interacting
- Being so irritable that the child does not want to be held
- Flu-like symptoms improve but then return with fever and worse cough

In adults, emergency warning signs that need urgent medical attention include:

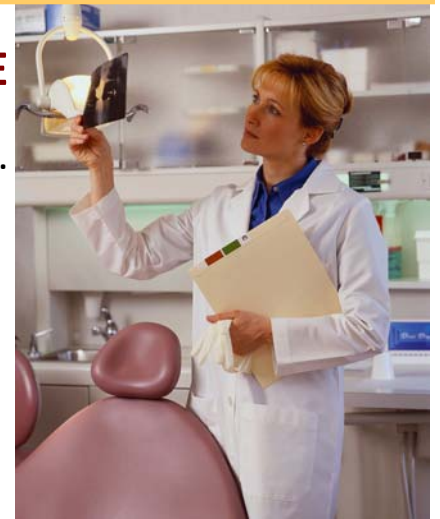
- Difficulty breathing or shortness of breath
- Pain or pressure in the chest or abdomen
- Sudden dizziness
- Confusion
- Severe or persistent vomiting
- Flu-like symptoms improve but then return with fever and worse cough

Are there medicines to treat 2009 H1N1 infection?

Yes. CDC recommends the use of oseltamivir or zanamivir for the treatment and/or prevention of infection with 2009 H1N1 flu virus. Antiviral drugs are prescription medicines (pills, liquid or an inhaled powder) that fight against the flu by keeping flu viruses from reproducing in your body. If you get sick, antiviral drugs can make your illness milder and make you feel better faster. They may also prevent serious flu complications. During the current outbreak, the priority use for influenza antiviral drugs is to treat severe influenza illness.

MEDICAL DENTAL LINKAGE

By David J. Williams, Ph.D.



SPECIAL TOUCH DENTISTRY

As our healthcare research has matured, more recognition has been placed on the linkages between the mouth and health conditions in the rest of the body.

When a dentist performs an exam, he or she is not only looking to observe the condition of the teeth, but also the condition of the mouth. That is a reason why it is so important for your dentist to take and keep good x-rays. They will observe both hard and soft tissue anomalies in order to make a professional determination of required care. During an oral examination, dentists may find signs that point to everything from anemia to diabetes to heart or liver disease, diet deficiencies and eating disorders, gastrointestinal problems, arthritis, HIV, osteoporosis, some autoimmune diseases, and even some pregnancy risks.

As part of the public recognition of the importance of intra-oral disease management, the American Dental Association and the American Medical Association held its first-ever joint news conference in February 2006 concerning "Oral and Systemic Health: Exploring the Connection." Among the points discussed was the need for greater communication and professional collaboration between dentists and physicians to reduce patients' risks for heart disease and stroke, worsening diabetic control, lung infections, and even premature births. These were all noted as risks that can manifest themselves in the patients' mouths.

Some of the signs of an unhealthy mouth include symptoms like dry mouth, gum swelling or infection, slow healing of sores in the mouth, or rapidly advancing tooth decay and gum disease. It is estimated that 90% of all systemic diseases produce some sort of oral signs and symptoms. Currently, saliva testing is routinely used to measure illegal drugs, environmental toxins, hormones, and antibodies indicating hepatitis or HIV infection. Some dental schools are starting to teach new dentists that one day, saliva testing might replace blood testing as a means of diagnosing and monitoring diseases such as diabetes, Parkinson's disease, cirrhosis of the liver, and many infectious diseases.

According to Dr. Lee Radke, an Assistant Professor of Surgery at the Medical College of Wisconsin, "If the mouth is pale-colored, rather than the normal healthy pink color, it could indicate anemia. Unusual bleeding could indicate liver disease, medication overdoses, or coagulation disorders. A red, smooth tongue can indicate GI problems or diet deficiencies, especially a lack of vitamin B12 or folate. Erosion of tooth enamel can point to reflux or eating disorders. Erosions and patchy lesions could indicate cancers or immune diseases."



The goal and continued direction of our professional dental community is to help patients avoid and eliminate infection, tooth decay, weakened teeth, bad breath or mouth sores – in addition to helping them to understand the connection between physical health and oral health maintenance. With the advent of additional technology that will certainly arise to assist us in our mission to care for patients, we have no need to wait for increasing education to our patients. Now is the perfect time to help improve oral and systemic health conditions.



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IDEAS FOR OUR NEWSLETTER?

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