

Young People Still Risk Skin Cancer For Tans

BY MEREDITH COHN
The Baltimore Sun

Two new government studies show young people are still putting themselves at risk for skin cancer by getting sunburned and going to indoor tanning beds.

One study by the U.S. Centers for Disease Control and Prevention found that half of those aged 18 to 29 had at least one sunburn in the past year, though they were increasingly using sunscreen, seeking shade and wearing protective clothing.

The other study by the National Cancer Institute found 32 percent of those 18 to 21 were going to indoor tanning salons and 30 percent of those 22 to 25 were.

Both studies used data from a cancer supplement to the National Health Interview Survey, an ongoing national health survey.

"More public health efforts, including providing shade and sunscreen in recreational settings, are needed to raise awareness of the importance of sun protection and sunburn prevention to reduce the burden of skin cancer," said Dr. Marcus Pleiscia, director of CDC's Division of Cancer Prevention and Control, in a statement. "We must accelerate

our efforts to educate young adults about the dangers of indoor tanning to prevent melanoma as this generation ages."

Skin cancer is the most common form of cancer across the country. And risks of getting melanoma, the most deadly kind of skin cancer, increase by 75 when those 35 and younger are exposed to ultraviolet radiation from indoor tanning equipment. A sunburn also means too much exposure to the ultraviolet radiation.

Researchers said effort and public policy tends to target adolescents rather than young adults when it comes to skin cancer, and that needs to change, they said. All people need to use sunscreen with a protective factor of at least 15, seek shade, especially in midday hours and wear protective clothing, wide-brimmed hats and wrap-around sunglasses that block UVA and UVB rays. They also need to avoid indoor tanning.

For more information about skin cancer prevention, go to <http://www.cdc.gov/cancer/skin/>. For more information about cancer, go to www.cancer.gov or call NCI's Cancer Information Service at 1-800-4-CANCER (1-800-422-6237).

Study Says Pneumonia Is Biggest Killer Of Young Kids

BY MEREDITH COHN
The Baltimore Sun

Around the globe, the leading cause of death for children younger than 5 is pneumonia, according to a new study from the Johns Hopkins Bloomberg School of Public Health.

About 18 percent of the deaths are from the infection. That's 1.4 million kids out of 7.6 million who died around the world in 2010.

"The numbers are staggering," said Dr. Robert Black, senior author of the study, published in the May issue of the *Lancet*.

Black, chair in the Department of International Health, said other leading causes of death were pre-term birth complications and diarrhea. However, many deaths were not medically certified so he said health officials need to strengthen reporting and accountability.

Overall, the researchers found that 64 percent of the deaths were due to infectious diseases.

The findings also suggested that the number of deaths between 200 and 2010 were on the decline — by about 2 million — though not enough to reach world goals of reducing child mortality by two-thirds by 2015.

Some causes of death that declined included tetanus, AIDS and malaria. Though, the biggest drops were seen in pneumonia, measles and diarrhea.

'Better Than Before' Fitness Video To Be Re-Released

There is an increased interest in eradicating breast cancer and assisting women in regaining their self-confidence and self-esteem.

"Better Than Before" is re-releasing its first-of-a-kind rehabilitative fitness program in DVD format that demonstrates how post-surgery exercises should be properly performed.

A portion of the proceeds from each DVD will go to a cancer organization to continue efforts in finding a cure.

In memory of Jill Forrest, the "Better Than Before Fitness" program was created and developed by Dr. Peter Neumann, a reconstructive plastic surgeon and Lauren Antonino Griffin, an ACE and A.F.F.A. certified trainer. This program was designed for women following breast cancer surgery.

Neumann is a board certified Plastic and Reconstructive surgeon with extensive experience and training in Oncologic (cancer) surgery. He has dedicated his career of more than 30 years to helping patients suffering from breast diseases and improving treatment modalities.

Neumann has been featured in numerous television shows and medical panels as well as lectured on subjects ranging from breast cancer procedures to new and innovative approaches to finding a cure.

Neumann currently operates a private practice in Roslyn Heights, N.Y., and is on staff at North Shore University Hospital.

For the last 15 years, Griffin has been the Fitness Director of Two Worlds Dance and Fitness located in Greenvale Long Island, N.Y. Before merging her aerobics program with Two Worlds Dance and Fitness, she owned Studio A Fitness, Long Island, for 10 years.

Griffin has a master of arts degree in sports management from Adelphi University and is certified by A.C.E., A.F.F.A., Johnny G. Spinning and IDEA.

One of her main objectives is to enable people to maintain a healthy fit lifestyle. She is also the proud mother of two children.

Go to the "Better Than Before" web site www.breastcancerexercises.net for additional information, to see a free clip of the video or order a copy.

Nurse Practitioners Tackling More 'Doctor' Tasks

BY SCOTT TRAVIS
Sun Sentinel

Many of your health care needs may soon be handled by a "doctor" who has actually been trained as a nurse.

Advanced registered nurse practitioners are increasingly performing duties once reserved for physicians, including diagnosing illnesses and prescribing medicine. It's a trend that's likely to continue as states grapple with escalating health care costs and a shortage of primary care physicians.

And they'll be better trained, because of higher standards for nursing school accreditation that could go into effect as soon as 2015. Around the country, schools have been adding "doctor of nursing practice" programs, which they expect will soon become the standard degree for practitioners. They won't be physicians, but you can call them doctor.

Nurse practitioners, who are registered nurses with a specialized master's degree, used to be found mostly in rural areas where physicians were scarce or in public health settings where most patients were poor. But in recent years, private physicians have increasingly been hiring them to help manage their patient load.

Patient care isn't suffering, according to several national studies, which have credited nurse practitioners for spending more time with patients and properly treating most routine medical conditions.

"Nurses often tend to have a holistic approach. They try to get to know all aspects of the patient, not just the medical condition," said Susan Folden, a retired nursing professor of nursing at Florida Atlantic University.

There are nearly 18,000 nurse practition-

ers in the state, twice as many as a decade ago. They can handle more than 90 percent of a patient's primary health care needs at a lower cost, so it makes sense they're becoming more prevalent, said Sheldon Fields, an assistant dean at Florida International University's School of Nursing.

"If you have a common cold, you don't need to see a physician for that," Fields said. "If you need a routine check for high blood pressure or diabetes or if a child needs a physical for camp, a nurse practitioner is well trained."

They often perform a similar role as physician assistants, although the training and approach are different. Physician assistants receive specific medical training to diagnose conditions and serve the needs of a physician, while nurse practitioners are trained foremost as nurses and tend to focus more on preventative and maintenance care, experts say.

Nursing educators say patient care will further improve as nurse practitioners receive doctoral level training. They say practitioners will learn more about clinical research, health policy initiatives and technology, giving them new tools to solve problems.

The American Association of Colleges of Nursing, which sets the standards for nursing schools, wants all nurse practitioner students to graduate with a doctor of nursing practice degree by 2015, although that could be delayed to 2020, experts say.

Nursing schools around the state of Florida have started adding doctoral programs in recent years, the latest being Florida International University, which opened its program in January.

Some fear these new advanced degrees

may lead to patient confusion.

"When someone calls themselves doctor, there is an assumption on the part of many that they are talking to a medical doctor," said Rebecca O'Hara, vice president of governmental affairs for the Florida Medical Association, which represents physicians.

But nurse practitioners argue that many health care professionals who are not physicians already use the title "doctor", including psychologists, podiatrists and dentists. There are also disagreements about whether the scope of nurse practitioners should be expanded.

Florida is one of only two states, the other being Alabama, where nurse practitioners are not allowed to prescribe controlled substances such as pain killers. It's also one of a dozen that requires nurse practitioners to be supervised by a physician, making it difficult for the nurses to open their own practice.

A state Legislature report from December 2010 said the state could save up to \$339 million a year to Florida's health care system if nurse practitioners and physicians assistants could prescribe these substances.

But physicians groups fear it could increase prescription abuse in a state already known as the pill mill capital of the United States.

Regardless of whether nurse practitioners get more autonomy, experts say it's unlikely that they will replace physicians.

"We very much work in collaboration with physicians and other health professionals to find ways to provide for the optimal health and wellness of patients," Fields said. "There is plenty of space and need for primary health care for all of us."

Wrists Overworked? Take Regular Breaks — And Ice The Pain

BY JUDY HEVRDEJS
Chicago Tribune

Maybe your wrists and fingers swell when you leave work. Or maybe they ache or go numb in the middle of the night.

Sounds as if you've been messing with your carpal tunnel — that tiny tunnel in your wrist where the median nerve, flexor muscles and flexor tendons travel en route to your hands and fingers to make them open and close.

If you're a keyboard jockey, dental hygienist, factory worker or someone else who has been keeping your hands busy with repetitive motions or holding them for long periods in positions other than flat, you may have carpal tunnel syndrome.

"That tunnel is very, very tiny. ... So when there's swelling around the tendons, it fills up the space and causes pressure," says Debbie Amini, an occupational therapist and member of the American Occupational Therapy Association in Bethesda, Md. "And that puts pressure on the median nerve so the nerve can no longer get nutrition from its blood supply."

"People who use their hands and their fingers a lot — like typists — can overuse those muscles to the point they become inflamed," she says.

Other factors that can cause those hand muscles and tendons to swell, says Amini, whose expertise is hand rehabilitation and occupation-based hand therapy: working with very tiny instruments or vibrating machines, holding a pinch or keeping your hands in extreme positions, bent forward or backward.

"If your hand is lying flat and you bend your wrist with the fingers pointing to the floor or if you point your fingers toward the ceiling, it's basically the extremes of either of those positions that increases the pressure," adds Amini, the director of the occupational therapy assistant program at Cape Fear Community College in Wilmington, N.C. "If somebody constantly has their hands in one extreme or the other, it's enough to cut off the blood supply to the nerves so the person can develop carpal tunnel syndrome."

This wasn't a big deal when people were pecking away at typewriters?

"People typing on the typewriter had to stop and move their hands in many different ways. They had to stop and return the carriage or put in a new piece of paper," says Amini. "The problem now is that you can sit on a computer and never, ever leave."

ACTION PLAN

To prevent or minimize carpal tunnel issues related to work, occupational therapist Debbie Amini suggests:

Take a break: Try at least five minutes each hour "if you are working at a repetitive task with no natural stopping point or is not comprised of multiple types of movements." No need to decrease productivity; open mail, organize files.

Be proactive: "Do not wait until you begin to have symptoms."

Check it: Don't hold your hands in exaggerated positions for long periods of time. It exacerbates carpal tunnel fatigue.

Position: "Straight across with hands and wrists in alignment as much as possible."

Ice it: Hands hot and swollen after work? Put ice packs on for

20 minutes. "If you haven't been to a doctor to know exactly what is causing the problem, then ice is probably safest." Also, ice it right: "Make sure there's some type of towel material between the ice pack and your skin. Never apply ice directly to your skin."

Try an over-the-counter splint: "It holds the wrist straight and keeps the blood flowing well to that nerve." Some wear them while doing the activities; others wear them while sleeping at night.

Avoid heat: "If (it's) an inflammation problem, don't add heat because that simply increases the inflammation."

Stretch and shake: Stretch your neck, shoulders and all the way down to your hands. "Shake them out. ... It's not going to be a cure, but it gets your circulation going, gets those tendons out of that constant repetitive mode they're in."

See a doctor if pain or numbness in your hands and wrists "wakes you up at night or you're starting to see changes in your ability to function or you start to feel like you're dropping things."

Must 43 Percent Of Americans Be Obese By 2030?

BY LESLIE BARKER GARCIA
The Dallas Morning News

By 2030, the Centers for Disease Control and Prevention predicted last week, 43 percent of Americans will be obese. More than one-tenth will be at least 100 pounds overweight.

So are we going to order the cheese supreme and take this sitting down? Not if Armando Chavez has anything to say about it. He's fitness director for Larry North Fitness in Dallas's Preston Royal Village.

"I'm passionate about this," Chavez says of his determination to get people fit. He sends health and fitness tips to thousands via his Twitter and Facebook accounts, plus offers some ideas to help America defy the CDC prediction:

Lead by example. Today's kids will be the adults of 2030, so

their moms and dads need to be eating healthily now. "If you try to feed your kid healthy food and you're eating fast food, then you just set the worst example possible," Chavez says. "If you set the correct example, your child won't crave such food."

Think of healthy food as the norm. Avoid calling it "bad food" or "good food." It's food, it's fresh, it's delicious, and it's what will make you healthy. As a parent, "don't tell your kids, 'This is bad,' because they'll want to try it," he says.

Skip diets that cut out categories of food. "All those crazy Slim-Fast, Atkins, South Beach diets don't work," Chavez says. "They don't work because they take out something your body needs. Low carb. High protein. No fat. They're good for the short-term but not the long-term. Remember that working out

needn't take hours. "Most people think you have to exercise for hours and hours to get fit," he says. "You can work out 30 minutes, and that would be sufficient, depending on your goal."

Be efficient in your routine. Instead of doing calf raises, which work only your calf muscles, or curls, which work only your biceps, aim for compound movements like a seated row, squats or lunges. "Using more muscles requires more energy, and with that, you lose body fat faster," he says.

Get the community involved. Fitness festivals are fine, but Chavez recommends more ongoing efforts. "We have to find ways to develop retention on a more

massive scale," he says. Start small; meet a friend regularly for a walk or workout.

Emphasize the good taste of nutritious food more than that of processed food. "Show Americans healthy food choices and how to prepare them," he writes. "Show the benefits of how it will affect their own personal well-being."

Get athletes behind a healthy-eating campaign. Let kids know that fresh and nutritious food is part of being a good athlete, he says.

"Kids will think it's cool to eat certain healthy foods," Chavez says.

"That has never been done."

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