



The Delaware Office of

WOMEN'S HEALTH

Newsletter

Fall 2015 Health Awareness

October 2015

National Breast Cancer Awareness Month

www.cancer.org/cancer/breastcancer/

National Domestic Violence Awareness Month

www.nrcdv.org/dvam/

National Bullying Prevention Month

www.pacer.org/bullying/nbpm/

October 16

National Mammography Day

www.cancer.org/cancer/breastcancer/

November 2015

American Diabetes Month

www.diabetes.org

National Family Caregivers Month

caregiveraction.org

Lung Cancer Awareness Month

www.lung.org/lung-disease/lung-cancer/

Pancreatic Cancer Awareness Month

www.cancer.org/cancer/pancreaticcancer/

The Office of Women's Health (OWH) Newsletter

Karen McGloughlin, Editor

To subscribe, call 302-744-4703 or e-mail OWH@state.de.us.

Have a suggestion? If you have an idea, resource, news item, or event you would like to share with the Office of Women's Health, contact OWH@state.de.us.

Spread the word.

Forward this email to a friend. Effective community partnerships depend upon the sharing of resources.



As the Comprehensive Cancer Control Program Director,

Heather Brown manages the Cancer Program, the Delaware Cancer Treatment Program, and the Delaware Cancer Registry. She also provides oversight to the Delaware Cancer Consortium.

Heather started her career in Public Health in 2008, and has been with the Chronic Disease Bureau since March of 2013. Heather's interest and dedication to the cancer field stems from personal experience. Luckily, her grandfather's skin cancer was caught early, during a

routine visit to his doctor that included the evaluation of a suspicious area on his arm. He almost didn't ask about it, but doing so saved his life. When something doesn't appear normal on your skin, talking to your doctor is a wise thing to do.

"Many people don't think of skin cancer as deadly," Brown said. "So, unlike other kinds of cancer, the mortality rates are climbing – due in part to a lack of sun protection, and also because people are not going to the doctor when they see something suspicious on their skin. The earlier skin cancer is detected, the better the outcome." Delaware's skin cancer incidence rate is significantly higher than the national average. The state ranked fourth-highest in the U.S. for incidence of melanoma, the most deadly and often under-estimated form of skin cancer, during the years 2006-2010.

Heather encourages everyone to know their risk factors for cancer, and to take precautionary measures where they can - like wearing sunscreen of SPF 15 or above when they plan to be outdoors. Remember to keep an eye out for large or irregularly shaped moles, do regular self-examinations, and visit a dermatologist annually. For more information, visit ProtectYourSkinDE.com.

The Office of Women's Health was created to increase the health knowledge of all Delaware women and engage them in leading healthier lives.



DELAWARE HEALTH AND SOCIAL SERVICES
Division of Public Health

Complications of hypothyroidism can range from heart disease to depression.

Hypothyroidism, a condition in which the thyroid gland doesn't produce enough thyroid hormone, isn't a problem isolated to your thyroid. Because the gland plays such a vital role in many aspects of your health, hypothyroidism, or an underactive thyroid, can lead to other conditions. Fortunately, some complications of hypothyroidism can be prevented simply by restoring normal thyroid hormone levels with a daily pill. But other complications require extra vigilance. Reduce your health risks by knowing about the health concerns related to hypothyroidism, and the signs and symptoms of each. Early diagnosis and treatment can make a difference and can even save your life.



The risk of heart disease and death is increased in those who even have a mild form of the condition, according to a study published in 2010 in the journal *Clinical Thyroidology for Patients*. The risk of heart disease is also elevated because hypothyroidism is associated with high blood pressure and higher levels of low-density lipoprotein (LDL) cholesterol, or “bad” cholesterol. However, the study found that when hypothyroidism is managed with thyroid hormone therapy, the risk of heart disease returns to the same as that of people without hypothyroidism.

Hypothyroidism's effect on different aspects of your health can also lead to increased risk of glaucoma, infertility, pregnancy complications and birth defects, ataxia, myxedema coma, or depression. For more information consult your physician and visit <http://www.thyroid.org/patient-thyroid-information/ct-for-patients/vol-3-issue-5/vol-3-issue-5-p-5-6/> or http://www.everydayhealth.com/hs/healthy-living-with-hypothyroidism/related-health-concerns/?xid=nl_EverydayHealthMenopause_20150716

RECIPE



Zucchini Chips

Not only is it healthy, it's delicious!

Cut a zucchini into thin slices and toss in one tablespoon of olive oil; sea salt and pepper to taste. Sprinkle with paprika and bake at 450°F for 25 to 30 minutes.

Using paprika adds flavor this healthy snack, which can help to boost your metabolism, reduce your appetite, and lower your blood pressure.

Traumatic Stress in Women Veterans

A growing number of women are serving in the U.S. military. In 2008, 11 percent from the Afghanistan and Iraq military operations were women. These numbers are expected to keep rising. In fact, women are the fastest growing group of veterans. Some of the stress factors affecting women while deployed include:

Military Sexual Trauma (MST). A number of women (and men) who have served in the military experience MST. MST includes any sexual activity where you are involved against your will, such as insulting sexual comments, unwanted sexual advances, or even sexual assault. After experiencing MST, many women feel depressed or have other difficulties.

Feeling Alone. In tough military missions, feeling that you are part of a group is important. In some theaters, though, personnel are deployed to new groups where they do not know the other service members. It can take time to build friendships and trusting relationships. Not feeling supported can be very hard.

Worrying About Family. It can be very hard for people with young children or elderly parents to be deployed for long periods of time. Service members are often given little notice. They may have to be away from home for a year or longer. Some women feel like they are “putting their lives on hold.” They worry that they can’t be watching over their loved ones. If there are troubles at home, both women and men in the field might start to feel overloaded. After returning home, some women find it is hard to return to the “mommy role.” They may find that they have more conflicts with their children.

Because of these stressors, many women who return from deployment have trouble moving back into civilian life. While in time most will adjust, a small number will go on to have more serious problems like Post Traumatic Stress Disorder (PTSD). In response to the recent increase in women veterans, the Department of Veterans Affairs (VA) developed several health care and research programs just for women. This includes the Women Veterans Health Program and the Center for Women Veterans. Every VA in this country now has a Women Veterans Program Manager. Among women veterans of the conflicts in Iraq and Afghanistan, almost 20 percent of women Vietnam veterans have been diagnosed with PTSD. About 27 percent suffered from PTSD sometime during their postwar lives.

What helps? Research shows that high levels of social support after the war is important. Women who reported that they had close friends and family were less likely to have symptoms of PTSD. Having someone to talk to and someone who really cared helped women adjust better to post-war life. It was also important for the returning women veterans to feel that they could rely on others to assist them with tasks in times of need. Veterans who had this form of support suffered less from PTSD.

For more information: <http://www.ptsd.va.gov/public/PTSD-overview/women/traumatic-stress-female-vets.asp>.



Delaware Joining Forces is a statewide public and private organizational network to provide services to the state's military and veteran communities. The Delaware Commission of Veterans Affairs hosts the online directory with an application process to list recognized organizations. These organizations connect service members, veterans, and their families with public services, community groups, service providers, health care centers, veteran service organizations, and other agencies. Over 80 organizations have registered with Delaware Joining Forces as service providers. Delaware is home to over 78,000 veterans, over 7,000 of whom are women. The women veterans population in the United States was estimated at 2,271,222 as of September 2013.

Visit <http://veteransaffairs.delaware.gov/> for more information on services for veterans.




The Office for Civil Rights (OCR) enforces the Age Discrimination Act of 1975 (Age Act), which prohibits discrimination on the basis of age in programs and activities receiving federal financial assistance from the U.S. Department of Health and Human Services (HHS). Under the Age Act, recipients may not exclude, deny, or limit services to, or otherwise discriminate against, persons on the basis of age.

OCR also enforces Section 1557 of the Patient Protection and Affordable Care Act (42 U.S.C. 18116), which provides that an individual shall not be excluded from participation in, be denied the benefits of, or be subjected to discrimination on the grounds prohibited under Title VI of the Civil Rights Act of 1964, 42 U.S.C. 2000d et seq. (race, color, national origin), Title IX of the Education Amendments of 1972, 20 U.S.C. 1681 et seq. (sex), the Age Discrimination Act of 1975, 42 U.S.C. 6101 et seq. (age), or Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. 794 (disability), under any health program or activity, any part of which is receiving federal financial assistance, or under any program or activity that is administered by an Executive Agency or any entity established under Title I of the Affordable Care Act or its amendments. OCR has enforcement authority with respect to health programs and activities that receive federal financial assistance from the HHS, or are administered by HHS or any entity established under Title I of the Affordable Care Act or its amendments.

OCR ensures that people have equal access to and an opportunity to receive services from all HHS funded programs and services. Persons who believe they (or someone else) have been discriminated against -- because of race, color, national origin, age, or disability -- in health care or human services may file a complaint with OCR. View more at <http://www.hhs.gov/ocr/office/about/>.

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