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WISCONSIN STATE LEGISLATURE ... PUBLIC HEARING COMMITTEE RECORDS

2007-08

(session year)

Senate

(Assembly, Senate or Joint)

Committee on Public Health, Senior Issues, Long Term Care and Privacy

(SC-PHSILTCP)

(FORM UPDATED: 07/02/2010)

COMMITTEE NOTICES ...

- Committee Reports ... **CR**
- Executive Sessions ... **ES**
- Public Hearings ... **PH**
- Record of Comm. Proceedings ... **RCP**

INFORMATION COLLECTED BY COMMITTEE FOR AND AGAINST PROPOSAL ...

- Appointments ... **Appt**
 - ☞ **Name:**
- Clearinghouse Rules ... **CRule**
- Hearing Records ... bills and resolutions
 - (**ab** = Assembly Bill)
 - (**ar** = Assm. Resolution) (**ajr** = Assm. Joint Resolution)
 - (**sb** = Senate Bill)
 - (**sr** = Sen. Resolution) (**sjr** = Sen. Joint Resolution)
- Miscellaneous ... **Misc**
 - ☞ **Details:**

2007 SB 150

○ Information Submitted (#2)



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Migraine Headaches

A migraine is a very bad headache that:

- may last 4-72 hours
- comes back over and over again
- may upset your stomach or cause vomiting
- the pain is only on one side of your head
- may make you sensitive to bright lights or noise
- may feel worse when you're moving around

If you have migraines, you need to be treated by your health care provider, just like you would treat heart disease, diabetes or depression.

Migraine Trigger Factors May Include:

- Bright Light
- Odors
- Chocolate
- Smoking
- Stress
- Aged Cheese
- Monosodium Glutamate (MSG)
- Disturbed Sleep
- Menstrual Cycle / Menopause / Pregnancy
- Alcohol



SB 150?

Types of Medication:

1) **Acute:** These medications are taken only after the onset of a migraine. Medications include analgesics, like aspirin, ibuprofen, or Excedrin Migraine®, and prescription

medications like Imitrex®, Maxalt®, Relpax®, or Zomig®.

2) **Preventative:** These medications are taken regularly to reduce the chance that a migraine will occur, and reduce the severity of the migraines that do occur.

These may include: propranolol, timolol, verapamil, amitriptyline, or Depakote.

Preventive medication may be appropriate if:

Migraines occur more than two times per month

Migraines disrupt your normal activity

Your acute medication is not effective for your migraines.

Using Your Preventive Medication Correctly

1) Take your medication **every day** to maintain a steady guard against your migraine. Don't stop taking the medication without consulting your health care provider.

2) You might have to take the medication for 2-3 months before you and your doctor can decide whether it works for you.

3) Keep a journal that details the time and duration of your migraines, as well as other important details you may want to discuss with your doctor. Always bring the journal to your doctor's appointments. This will help identify factors which may be triggering your headaches.

4) Discuss any side effects with your health care provider.

5) Do what you can to control other factors that may trigger your migraines.

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Asthma

Control Your Asthma. Don't Let It Control You.

Asthma is a **CHRONIC** lung disease that cannot be cured, only controlled.

The main symptoms of asthma are:

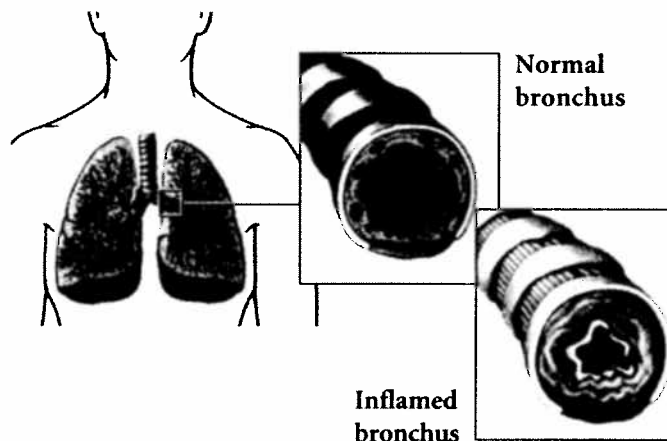
- Shortness of breath
- Tightness in the chest
- Wheezing
- Cough lasting more than one week.

You do not need to have all the symptoms to have asthma. Some people have a cough only.

How does asthma affect the airways?

- Airway becomes swollen and inflamed
- Thick mucus is produced
- Muscles around airways tighten and make airways narrower
- The airway is super sensitive and reacts to many things like smoke, pollen, exercise, cold air

How Does Your Airway Look?



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Take the “Rules of Two” test on the back page to determine if your asthma is in control.

Is your asthma out of control?
The “RULES OF TWO”™* can help you decide.

Yes No

 Do you take your “quick-relief inhaler”** more than TWO times per week?

 Do you awaken at night with asthma more than TWO times per month?

 Do you refill your “quick-relief-inhaler” more than TWO times per year?

If you answer “YES” to any of these questions, you should contact your health care provider regarding your level of asthma control.

*RULES OF TWO™ is a registered trademark of Baylor Health Systems.

** Examples of quick relief inhalers include albuterol or Proventil.

What You Can Do to Control Your Asthma

- Avoid things that trigger your asthma symptoms, like pet hair, pollen, perfume, smoke, etc.
- Take your medications as prescribed.

-- It often takes more than one medicine to treat asthma --

- A LONG-TERM CONTROLLER MEDICATION to treat swelling and inflammation in the airway . (examples: Pulmicort, Advair, Flovent)
- A “quick-relief-inhaler” to relax the airways during an acute flare-up (Example: albuterol)

Your long-term controller medication is the cornerstone of your asthma treatment.

You need to take your long-term controller medication every day, even when you feel well.

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CHOLESTEROL - MEN

RISK FACTORS

- ♥ I am a male at least 45 years old.
- ♥ The following members of my family have had heart disease:
father or brother under 55,
mother or sister under 65.
- ♥ I am a **smoker**.
- ♥ I have high blood pressure (140/90 or higher), or currently taking blood pressure medication.
- ♥ My good cholesterol "HDL" is lower than 40.
- ♥ My good cholesterol "HDL" is 60 or higher (subtract one risk factor).

RISK CATEGORY

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GOAL FOR "BAD" LDL - CHOLESTEROL

- ♥ • I have less than two risk factors and no coronary heart disease (CHD). ⇒ Below 160
- ♥ • I have two or more risk factors and no coronary heart disease and
• 10-year risk is \leq 20% (over). ⇒ Below 130
- ♥ • I have coronary heart disease (prior heart attack, angioplasty, or bypass surgery), or
• Diabetes, or a
• 10-year risk is $>$ 20% (over). ⇒ At or Below 100 (Current research suggests below 70 for very high risk* patients.)

MY CURRENT LDL _____ MY LDL GOAL _____

* Very High Risk = CHD plus multiple other, or poorly controlled, risk factors.

Estimate of 10-Year Risk for Heart Disease

| Age | Points | Age | Points |
|-------|--------|-------|--------|
| 20-34 | -9 | 55-59 | 8 |
| 35-39 | -4 | 60-64 | 10 |
| 40-44 | 0 | 65-69 | 11 |
| 45-49 | 3 | 70-74 | 12 |
| 50-54 | 6 | 75-79 | 13 |

| Total Cholesterol | Points | | | | |
|------------------------------|-----------|-----------|-----------|-----------|-----------|
| | Age 20-39 | Age 40-49 | Age 50-59 | Age 60-69 | Age 70-79 |
| Less than 160 | 0 | 0 | 0 | 0 | 0 |
| 160-199 | 4 | 3 | 2 | 1 | 0 |
| 200-239 | 7 | 5 | 3 | 1 | 0 |
| 240-279 | 9 | 6 | 4 | 2 | 1 |
| Greater than or equal to 280 | 11 | 8 | 5 | 3 | 1 |

| | Points | | | | |
|-----------|-----------|-----------|-----------|-----------|-----------|
| | Age 20-39 | Age 40-49 | Age 50-59 | Age 60-69 | Age 70-79 |
| Nonsmoker | 0 | 0 | 0 | 0 | 0 |
| Smoker | 8 | 5 | 3 | 1 | 1 |

| HDL(mg/dL) | Points |
|-----------------------------|--------|
| Greater than or equal to 60 | -1 |
| 50-59 | 0 |
| 40-49 | 1 |
| Greater than 40 | 2 |

| Systolic BP (mmHg) | If untreated | If treated |
|------------------------------|--------------|------------|
| Less than 120 | 0 | 0 |
| 120-129 | 0 | 1 |
| 130-139 | 1 | 2 |
| 140-159 | 1 | 2 |
| Greater than or equal to 160 | 2 | 3 |

| Point Total | 10-Year Risk % | Point Total | 10-Year Risk % |
|-------------|----------------|-----------------------------|-----------------------------|
| Less than 0 | Less than 1 | 10 | 6 |
| 0 | 1 | 11 | 8 |
| 1 | 1 | 12 | 10 |
| 2 | 1 | 13 | 12 |
| 3 | 1 | 14 | 16 |
| 4 | 1 | 15 | 20 |
| 5 | 2 | 16 | 25 |
| 6 | 2 | Greater than or equal to 17 | Greater than or equal to 30 |
| 7 | 3 | | |
| 8 | 4 | | |
| 9 | 5 | | |

10-Year Risk _____ %

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CHOLESTEROL - WOMEN RISK FACTORS

- ♥ I am female at least 55 years old or have premature menopause and have not had hormone replacement therapy.
- ♥ The following members of my family have had heart disease: father or brother under 55, mother or sister under 65.
- ♥ I am a **smoker**.
- ♥ I have high blood pressure (140/90 or higher), or currently taking blood pressure medication.
- ♥ My good cholesterol "HDL" is lower than 40.
- ♥ My good cholesterol "HDL" is 60 or higher (subtract one risk factor).

GOAL FOR "BAD" LDL - CHOLESTEROL

- ♥ • I have less than two risk factors and no coronary heart disease (CHD). ⇒⇒
- ♥ • I have two or more risk factors and no coronary heart disease and
• 10-year risk is $\geq 20\%$ (over). ⇒⇒
- ♥ • I have coronary heart disease (prior heart attack, angioplasty, or bypass surgery), or
• Diabetes, or
• 10-year risk is $>20\%$ (over). ⇒⇒ At or Below 100 (Current research suggests below 70 for very high risk* patients.)

MY CURRENT LDL _____ MY LDL GOAL _____

* Very High Risk = CHD plus multiple other, or poorly controlled, risk factors.

Women

Estimate of 10-Year Risk for Heart Disease

| Age | Points | Age | Points |
|-------|--------|-------|--------|
| 20-34 | -7 | 55-59 | 8 |
| 35-39 | -3 | 60-64 | 10 |
| 40-44 | 0 | 65-69 | 12 |
| 45-49 | 3 | 70-74 | 14 |
| 50-54 | 6 | 75-79 | 16 |

| Total Cholesterol | Points | | | | |
|------------------------------|-----------|-----------|-----------|-----------|-----------|
| | Age 20-39 | Age 40-49 | Age 50-59 | Age 60-69 | Age 70-79 |
| Less than 160 | 0 | 0 | 0 | 0 | 0 |
| 160-199 | 4 | 3 | 2 | 1 | 1 |
| 200-239 | 8 | 6 | 4 | 2 | 1 |
| 240-279 | 11 | 8 | 5 | 3 | 2 |
| Greater than or equal to 280 | 13 | 10 | 7 | 4 | 2 |

| | Points | | | | |
|-----------|-----------|-----------|-----------|-----------|-----------|
| | Age 20-39 | Age 40-49 | Age 50-59 | Age 60-69 | Age 70-79 |
| Nonsmoker | 0 | 0 | 0 | 0 | 0 |
| Smoker | 9 | 7 | 4 | 2 | 1 |

| HDL(mg/dL) | Points |
|-----------------------------|--------|
| Greater than or equal to 60 | -1 |
| 50-59 | 0 |
| 40-49 | 1 |
| Greater than 40 | 2 |

| Systolic BP (mmHg) | If untreated | If treated |
|------------------------------|--------------|------------|
| Less than 120 | 0 | 0 |
| 120-129 | 1 | 3 |
| 130-139 | 2 | 4 |
| 140-159 | 3 | 5 |
| Greater than or equal to 160 | 4 | 6 |

| Point Total | 10-Year Risk% | Point Total | 10-Year Risk% |
|-------------|---------------|-----------------------------|-----------------------------|
| Less than 9 | Less than 1 | 19 | 8 |
| 9 | 1 | 20 | 11 |
| 10 | 1 | 21 | 14 |
| 11 | 1 | 22 | 17 |
| 12 | 1 | 23 | 22 |
| 13 | 2 | 24 | 27 |
| 14 | 2 | Greater than or equal to 25 | Greater than or equal to 30 |
| 15 | 3 | | |
| 16 | 4 | | |
| 17 | 5 | | |
| 18 | 6 | | |

10-Year Risk _____ %

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Metabolic Syndrome

Metabolic Syndrome, also called Pre-Diabetes or Syndrome X, is a condition which is defined as having any 3 of the following 5 risk factors.

Clinical Identification of the Metabolic Syndrome

| Risk Factor | Defining Level |
|---------------------|---------------------|
| ♥ Abdominal Obesity | Waist Circumference |
| Men | > 40 inches |
| Women | > 35 inches |
| ♥ Triglycerides | ≥ 150mg/dL |
| ♥ HDL Cholesterol | |
| Men | < 40mg/dL |
| Women | < 50mg/dL |
| ♥ Blood Pressure | ≥ 130 / ≥ 85 mmHg |
| ♥ Fasting Glucose | ≥ 100mg/dL |

Metabolic Syndrome

equals: any 3
or more
factors present

Metabolic Syndrome identifies people who are at high risk for developing heart disease and/or diabetes.

Are You At Risk?

(continued)

Treatment of Metabolic Syndrome



Increase physical activity -
with physician approval

Decrease weight through a healthy,
physician approved weight-loss plan



See your doctor about controlling:

- High triglycerides
- Low HDL (good cholesterol)
- High blood pressure

Stopping smoking can also help control
blood pressure and cholesterol



Your doctor may also prescribe low-dose aspirin
use if appropriate for your medical condition

More Information on the Web...

www.nhlbi.nih.gov

www.americanheart.org

www.my.webmd.com/hw/weight_control

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Prostate Health

The prostate is a gland of the male reproductive system that is the approximate size and shape of a walnut. It is located in the lower abdomen, near the bladder and rectum. Two tests are commonly performed to assess prostate health:

- 1) Digital rectal exam performed by your health care provider at a full physical exam to determine if the prostate size and shape are within normal limits;
- 2) "PSA" – a blood test to check the amount of prostate enzyme present. Generally, a result of under 4 ng/ml is considered normal and over 4 ng/ml requires further investigation.

The three most common prostate problems are:

- ♡ Infection
- ♡ Prostate Cancer
- ♡ Enlarged Prostate (or BPH: Benign Prostatic Hyperplasia)
 - Usually occurs after age 40
 - Most common health issue of men over age 60

Symptoms of prostate changes:

- ♡ More frequent urination during the day
- ♡ Feeling urgency for urination
- ♡ Less urine flow
- ♡ Feeling of burning with urination
- ♡ Needing to urinate frequently during the night

Risk Factors associated with Prostate Cancer

What You Can Do to Lower Your Risk of Prostate Cancer

- ♡ Eat a healthy diet: low fat, high in fruits and vegetables
- ♡ Get regular health exams
- ♡ Stop smoking
- ♡ Exercise regularly
- ♡ Attain/Maintain a healthy weight
- ♡ Limit alcohol

Non-Controllable Risk Factors

- ♡ AGE - Risk of cancer increases over age 50
- ♡ RACE - African-American men are at highest risk
- ♡ HEREDITY (family history) - Risk is 2-3 times higher for men whose father and/or brothers have had the disease

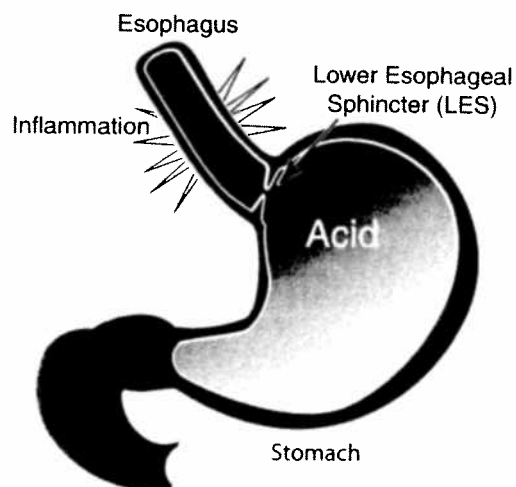
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Heartburn / Reflux

Heartburn or gastro-esophageal reflux (GERD) is caused by stomach acid moving into the esophagus. This can happen if the lower Esophageal Sphincter (LES) is not working correctly. The LES sometimes does not work properly if:

- you are overweight
- you are pregnant
- you have a hiatal hernia
- you eat too much
- you lie down too soon after eating
- you wear tight clothes that push on your stomach
- you smoke
- you take certain medications (check with your health care provider)



What can be done to treat Heartburn/GERD?

- **Avoid foods that weaken the LES:**

- alcohol
- chocolate
- peppermint
- coffee
- onions
- spicy foods
- garlic
- high fat foods
- sugar
- citrus fruits
- tomato-based foods

- **STOP SMOKING!**

- **Commonly used medications for heartburn and GERD that decrease amount of acid produced by the stomach:**

- Usually taken twice a day...

- Zantac
 - Tagamet
 - Pepcid
 - Axid
- } available over the counter

- Usually taken once a day...

- Prilosec (Available over the counter)
 - Aciphex
 - Protonix
- } Prescription Required

Expectations of Treatment

- **If the esophagus is given a chance to heal, it is better able to tolerate some acid.**
- **If treating GERD, it may take 8-12 weeks for the esophagus to heal. Once healed, the medications used for treatment of heartburn may be sufficient to control your symptoms.**

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What is a Stroke?

Strokes are caused by blockages or tears in the arteries of the brain. This can cause damage to the part of the brain in that area. The damage may be temporary or permanent; partial or complete.

How Do I Know If I'm Having a Stroke?

- Weakness or numbness of face, arm or leg on one side of the body.
- Sudden dimness or loss of vision, particularly in one eye.
- Trouble talking and/or understanding what others are saying.
- Sudden severe headache with no known cause.
- Unexplained dizziness, falling or unstable walking, especially if other symptoms are noted too.

Testing for Stroke...

- Ask the individual to smile.
- Ask the individual to raise both arms.
- Ask the individual a simple sentence.

If the person has trouble with any of these tasks, call 911 immediately. The sooner you get help, the more doctors can do to prevent permanent damage.

(continued)

What You Can Do...

- If you have high blood pressure, follow your doctor's advice to control it.
- If you have diabetes, keep your blood sugar level under control.
- If you smoke, STOP!
- Eat a healthy diet that is low salt, low fat, and low cholesterol and drink alcohol in moderation.

Risk Factors...

- Atherosclerosis
- Diabetes
- High Blood Pressure
- Smoking
- History of heart or artery disease
or Transient Ischemic Attacks (TIA's)

*Refer to other ETC sheets for more information
on these conditions.*

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Diabetes

When you have diabetes, your body can't properly use the energy from the food you eat. When food is digested, the sugar in the food enters the bloodstream, and from there, enters the cells of your body to make energy. Insulin allows the sugar to pass from the blood to the cells. In people who have diabetes, this system doesn't work well. Sugar builds up in the bloodstream instead of going into the cells of the body. Therefore, enough energy is not produced to properly fuel the body.

Diabetes Goals

Blood Pressure - less than 130/80

A1c - less than 7.0%

Cholesterol - LDL less than 100 mg/dl*

HDL greater than 45 mg/dl

Triglycerides less than 150 mg/dl

Smoking STOP!

Current

| |
|--|
| |
| |
| |
| |
| |
| |

* Current research suggests optimal level is less than 70.

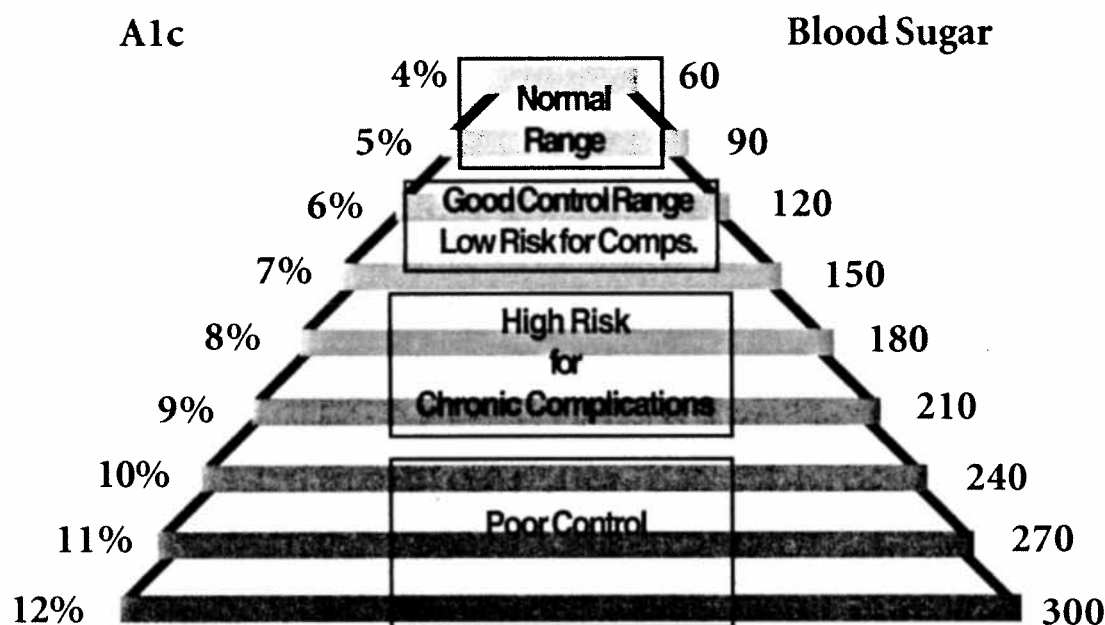
Additional Diabetes Management Activities

- Inspect your feet **daily**, with shoes and socks off.
- See your doctor **every 3-6 months**.
- See your dentist **every 6 months**.
- See an ophthalmologist/optometrist for a dilated eye exam, **every year**.
- Get your urine tested for microalbumin (protein) to check kidney function **every year**.
- Get a flu shot **every year**.
- Get a pneumonia shot **once**, and any boosters recommended by your doctor.

(continued)

Why is Reducing My Blood Sugar Levels Important?

Reducing your blood sugar levels to normal or near-normal can help reduce your risk of complications. The Hemoglobin A1c Test (A1c) measures the average amount of sugar in your blood over the last 3 months. Use the following chart to compare your daily blood sugar readings to the HbA1c test.



For every 1% decrease in A1c you get a
35% decrease in complications (see below)
18% decrease chance of a heart attack
7% decrease in death rate

Complications may include:

- heart disease and stroke
- kidney disease
- eye problems that can lead to blindness.
- sores on the skin that can lead to infections, and possibly foot or leg amputation.
- sexual problems
- nerve damage

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High Blood Pressure (Hypertension)

When your heart beats, it pumps blood through the blood vessels. The force of the blood against the blood vessel wall is called **blood pressure**. The higher number (systolic blood pressure) occurs after the heart beats. The lower number (diastolic blood pressure) is the pressure on the blood vessel in between heartbeats.

If the blood vessel becomes narrowed or clogged, the heart has to pump harder to deliver blood to the tissues. This causes your blood pressure to go up. High blood pressure (hypertension) is a silent killer. You usually do not notice anything until vital organs are damaged.

Uncontrolled High Blood Pressure Can Lead to:

- HEART PROBLEMS ● KIDNEY FAILURE ● STROKE

Know your blood pressure treatment goal!

| | | |
|---------------------------|--|----------------------------|
| General Population | | Diabetic Population |
| less than | | less than |
| 140/90 | | 130/80 |

| Category | Systolic (mmHg) | | Diastolic (mmHg) |
|-----------------------|-----------------|-----|------------------|
| Normal | less than 120 | AND | less than 80 |
| Prehypertension | 129-139 | OR | 80-89 |
| Hypertension, Stage 1 | 140 -159 | OR | 90-99 |
| Hypertension, Stage 2 | 160 or higher | OR | 100 or higher |

(continued)

What You Can Do to Lower Your Blood Pressure

- ♥ **STOP SMOKING**
- ♥ **EAT A HEALTHY DIET**
- ♥ **LOSE WEIGHT**
- ♥ **REDUCE STRESS**
- ♥ **LOWER SALT INTAKE**
- ♥ **LIMIT ALCOHOL**
- ♥ **EXERCISE**
- ♥ **TAKE YOUR MEDICINE**
- ♥ **AVOID OR CONTROL DIABETES**

Non-controllable Risk Factors

- ♥ **HEREDITY (Family History)** High blood pressure can run in your family.
- ♥ **GENDER** - Males tend to have a higher risk for hypertension.
- ♥ **RACE** - African-American populations are at greater risk.
- ♥ **AGE** - Risk of hypertension increases with age.

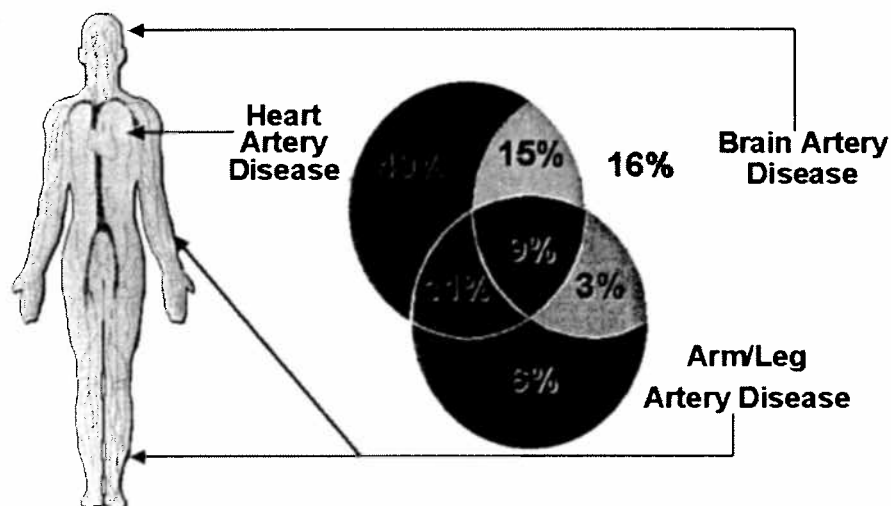
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Atherosclerotic Disease

Atherosclerosis, also called “hardening of the arteries”, occurs when fatty substances build up in the blood vessel wall. This buildup makes the blood vessel stiffer than normal and can cause partial or complete blockage of the flow of blood and oxygen to the body. Atherosclerosis affects mainly the medium-sized blood vessels, such as those in the heart, neck, brain and kidneys. It is also often found in the aorta, which is the largest blood vessel in the body, and the branches of the aorta to the arms and legs. Atherosclerosis tends to build up near branching points in the blood vessels.



Patients with disease in one area may have the same condition in other areas.

What You Can Do

- Stop Smoking and take your medication(s).
- Eat a healthy diet with low salt, low fat, low cholesterol, high fiber and take your medication(s).
- Lose weight and take your medication(s).
- Reduce stress and take your medication(s).
- Exercise and take your medication(s).
- Take your medication(s)!

Because the cause of atherosclerosis is unknown, it cannot be prevented. However, the lifestyle changes described above can slow its progress.

Medications

- Medications usually prescribed for atherosclerosis include: Aggrenox, Aspirin, Plavix, Pletal (cilostazol), Ticlid (ticlopidine).
- Depending on which medication(s) your health care provider recommends, by taking your medications as directed, you can reduce your risk for a heart attack, stroke, kidney disease or arm/leg amputation. Do not be one of the 2 million people (more people than all cancers combined) to suffer one of these events this year.

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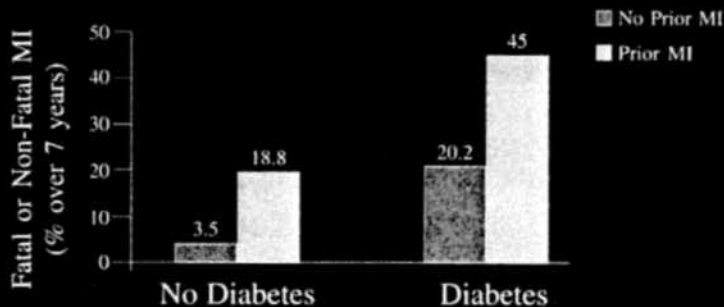
Controlling Diabetes and Heart Disease

Heart and blood vessel problems are common in people with diabetes. In fact, someone who has diabetes is just as likely to have a heart attack as someone who already has heart disease. 2 out of 3 people with diabetes die from heart disease or stroke.

Diabetes = Heart Disease

Incidence of Fatal or Non-Fatal MI Type 2 Diabetes vs. Nondiabetic Subjects

Diabetes = Heart Disease Equivalent



P < 0.001 between patients with diabetes vs. non-diabetic patients.

Haffner SM. N Engl J Med 1998; 339:229-34

Managing Your Diabetes: Know Your ABC's

A is for **A1c**: This is a blood test that tells your average blood sugar for the last 2-3 months. Your goal is keeping this number **under 7.0%** and should be checked 2-4 times per year.

B is for **Blood Pressure**: Your blood pressure helps tell how hard your heart is working. Your goal is keeping this **under 130/80** and should be checked at every doctor visit and at home as directed by your doctor.

C is for **Cholesterol**: Your cholesterol numbers tell you about the amount and type of fat in your blood. HDL, "good cholesterol", helps protect your heart, while LDL, "bad cholesterol" can clog your blood vessels which can lead to heart disease. Triglycerides are another kind of fat that, if elevated, raises your risk of heart attack or stroke. Your cholesterol should be checked at least once a year.

Your **goals** are:

- **LDL under 100 mg/dl,**
- **HDL over 45 mg/dl,**
- **Triglycerides under 150 mg/dl.**

Losing weight can help you improve your blood sugar, blood pressure and cholesterol levels. Losing even 10-15 pounds can help a lot!

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Osteoporosis

What you need to know to keep free from its effects and enjoying life. Osteoporosis is when there is a reduced amount of bone that causes bones to break more easily, particularly the hips, backbone or arms. This can be caused by:

- Failure to develop sufficient bone mass in young adult life
- Poor calcium absorption
- Bone loss related to aging

People most commonly affected are:

- | | |
|--|---|
| <input type="checkbox"/> Female | <input type="checkbox"/> Personal or family history of fracture |
| <input type="checkbox"/> Advanced age | <input type="checkbox"/> Chronic cortisone use |
| <input type="checkbox"/> White or Asian race | <input type="checkbox"/> Dementia |
| <input type="checkbox"/> Menopause before age 45 | |

Normal



Osteoporosis



What You Can Do

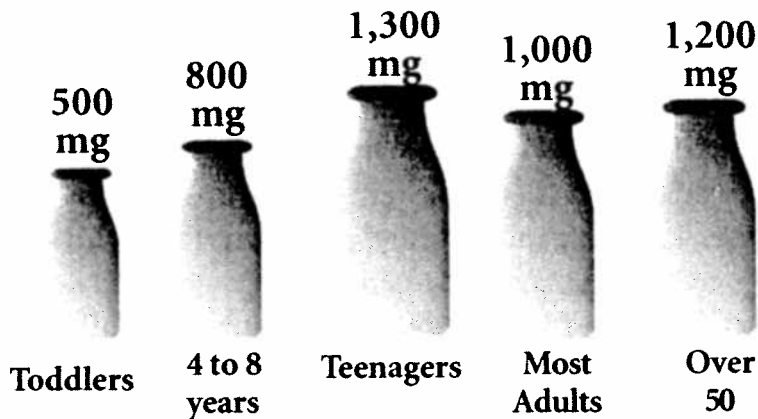
- ✓ Adequate calcium and Vitamin D intake.
- ✓ Regular weight-bearing exercise; walking or jogging.
- ✓ Maintain a balanced diet.
- ✓ Smoking cessation.
- ✓ Moderation in alcohol intake.
- ✓ Only take steroids if your doctor prescribes them.
- ✓ Take medications as prescribed by your doctor.
- ✓ Separate prescription medication and calcium by at least one hour.

(continued)

Calcium Intake...How Much Do You Need?

Calcium is an important nutrient, but the amount you need changes depending upon your age. It's also important to get 400 IUs of Vitamin D.

Daily Intake of Calcium in Milligrams



FOOD Sources of Calcium

Dairy Products

| | | |
|-------------------------|----------|--------|
| Plain Fat-Free Yogurt | 1 cup | 400 mg |
| Swiss Cheese | 1-1/2 oz | 408 mg |
| Chocolate Milk Shake | 10 oz | 374 mg |
| American Cheese | 2 oz | 348 mg |
| Milk | 8 oz | 300 mg |
| Chocolate Milk | 8 oz | 280 mg |
| Cheddar Cheese | 1-1/2 oz | 300 mg |
| Ricotta Cheese | 1/2 cup | 300 mg |
| Ice Cream/Frozen Yogurt | 1 cup | 200 mg |

Fruits and Vegetables

| | | |
|--------------------------------|----------------|--------|
| Collard Greens | 1 cup cooked | 300 mg |
| Soybeans | 1/2 cup cooked | 130 mg |
| Broccoli, Cooked/Raw | 1 cup | 118 mg |
| Orange | 1 | 52 mg |
| Calcium-Fortified Orange Juice | 1 cup | 300 mg |

Fish

| | | |
|----------------------|----------|--------|
| Sardines | 3 oz | 370 mg |
| Oysters, Raw | 1 cup | 220 mg |
| Canned Pink Sardines | 3-1/3 oz | 200 mg |

Miscellaneous

| | | |
|-------------------------|---------|--------|
| Cheese Pizza | 1 slice | 220 mg |
| Macaroni and Cheese | 1/2 cup | 180 mg |
| Pancakes Made with Milk | 2 | 72 mg |
| Taco Salad | 1 | 280 mg |
| Small Salad | 1 | 280 mg |
| Caffe Latte | 12 oz | 412 mg |

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MENOPAUSE PERIMENOPAUSE

- Refers to the transition time that begins immediately prior to natural menopause when menstrual cycles become irregular. It can last up to six years or more and it ends the first year of menopause.
- As you grow older, your body makes less estrogen and other female hormones. You may notice changes in your periods or in the way you feel.

As ovarian functions begins to decline, you may experience the following:

- Menstrual (less flow less often)
- Vaginal dryness
- Urinary Urgency (pressing need to urinate frequently)
- Hot Flashes/Night Sweats
- Headaches
- Difficulty sleeping
- Mood changes
- Depression

What to do about the changes you feel

Hot Flashes

- Dress in layers
- Wear clothes that you can take off and put on easily
- Turn down the heat when you sleep
- Drink more water

(continued)

MENOPAUSE

Natural Menopause:

- Periods stop for 12 consecutive months
- Any time after age 40; usual age is 50 to 51

Surgical Menopause:

- Surgical removal of the ovaries or after a procedure or intervention such as surgery, chemotherapy or radiation.

Managing Your Health:

- Get regular health exams
- Don't smoke
- Get regular exercise
- Maintain healthy weight
- Reduce stress
- Monitor and control blood pressure
- Monitor and control cholesterol and triglycerides
- Check your breasts monthly for changes and lumps

POSTMENOPAUSE

Postmenopause is defined as the rest of a woman's life and begins one year after the last menstrual period. Women can expect to live approximately 30 years beyond this point.

Postmenopausal Health Concerns - the Silent Changes

- Bone loss/osteoporosis
- Heart and blood vessel disease
- Cancer (i.e., colon, breast)
- Mental Decline

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Quitting Smoking

70% of smokers want to quit.

Want to Quit?

- Many people try 7 or 8 times before they quit for good.
- With each quit attempt, you move closer to quitting successfully.

Good Reasons For Quitting:

- You will live longer and live healthier.
- The people you live with, especially your children, will be healthier.
- You will have more energy and breathe easier.
- You will almost immediately lower your risk of heart attack and stroke. You will reduce your risk for cancer no matter when you quit.
- At \$4.00 per pack, if you smoke 1 pack per day, you will save \$1,460 each year and \$14,600 in 10 years.

Tips To Help You Quit:

- Get rid of ALL cigarettes and ashtrays in your home, car, or workplace.
- Ask your family, friends, and coworkers for support.
- Stay in nonsmoking areas. Avoid areas where you habitually smoke.
- Breathe in deeply when you feel the urge to smoke.
- Keep yourself busy.

You Can Quit Smoking

Five Keys For Quitting

1. Get Ready.

- Set a quit date and stick to it - not even a single puff!
- Think about past quit attempts. What worked and what did not?

2. Get Support And Encouragement.

- Tell your family, friends, and coworkers you are quitting.
- Talk to your health care provider.
- Get group, individual, or telephone counseling.

3. Learn New Skills And Behaviors

- When you first try to quit, change your routine.
- Reduce stress.
- Distract yourself from urges to smoke.
- Plan something enjoyable to do every day.
- Drink a lot of water and other fluids.

4. Get Medication And Use It Correctly.

- Talk with your health care provider about which medication will work best for you:
- Bupropion SR - available by prescription.*
- Nicotine inhaler - available by prescription.*
- Nicotine nasal spray - available by prescription.*
- Nicotine gum - available over-the-counter.
- Nicotine patch - available over-the-counter and by prescription.*

* Covered for Medicaid and Badgercare recipients.

5. Be Prepared For Relapse Or Difficult Situations.

- Avoid alcohol.
- Be careful around other smokers.
- Improve your mood in ways other than smoking.
- Eat a healthy diet and stay active.

Resources for Consultation:

- WISCONSIN TOBACCO QUITLINE 1-877-270-STOP (toll free)
- ThedaCare On Call "QUIT NOW" 920-830-6877
- Contact your physician or healthcare provider

Your Quit Plan

1. Your Quit Date

2. Who Can Help You:

3. Skills And Behaviors You Can Use:

4. Your Medication Plan:

5. How Will You Prepare?

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ADHD

Attention Deficit Hyperactivity Disorder: Children with ADHD often have problems with attention span, hyperactivity, and impulsive behavior. About half of ADHD children and teenagers have behavior problems, like breaking rules, talking back, and hitting other children. It is one of the most common chronic conditions of childhood. It affects 4% to 12% of school-aged children.

Once your child has been diagnosed....

- Now that your child has been diagnosed with ADHD, your child's doctor will offer a long-term behavior plan to help your child lead a happy and healthy life. As a parent, you have a very important role in your child's action plan and will need to work closely with all of your child's teachers.

- There is no proof that ADHD is caused by the following:
 - Eating too much
 - Food additives
 - Allergies
 - Immunizations

- Once your child's action plan is in place and is being properly followed, the chance of successful control is good.

Resources:

The following are additional resources for further information about ADHD. Check with your child's doctor for local resources.

Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD) www.chadd.org

The Attention Deficit Information Network, Inc. www.addinfonetwork.com

ADHD (Attention Deficit Hyperactivity Disorder)

When your child starts their first medication....

- ❑ It is important for your child to have regular medical checkups to monitor how well the medication is working and check for possible side effects. Frequent followup with the doctor is particularly important during the first year of treatment.
- ❑ It may take some time to find the best medication, dosage and schedule for your child. Some children respond to one type of medication but not another. Working closely with your child's teacher will help!
- ❑ The amount of medication (dosage) that your child needs also may need to be adjusted. The dosage is not based solely on his/her weight. Your pediatrician will vary the dosage over a period of time to get the best results and to control possible side effects.

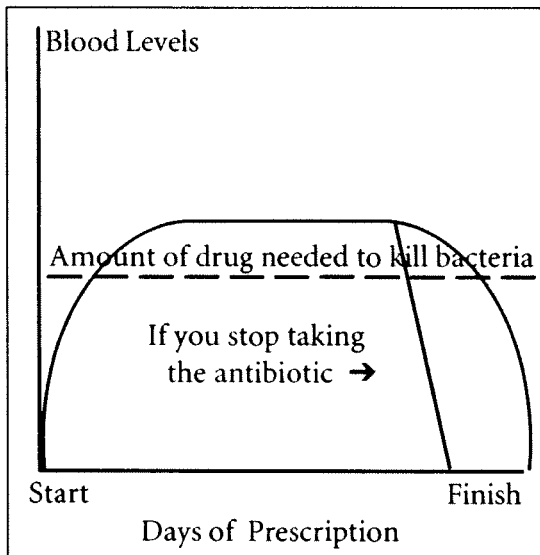


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Appropriate Antibiotics Use



When treating an infection caused by bacteria, your body needs to keep a certain amount of antibiotic in your system. It must be there long enough to kill all of the bacteria.

By following the instructions of your doctor or pharmacist you will help keep this level up. If you stop taking the antibiotic before you are finished, or skip doses, the infection may return and these bacteria may be harder to get rid of.

Helping to Reduce Antibiotic Resistance

1. Finish all of your antibiotic. You will start to feel better once some of the bacteria have been killed. The toughest bacteria will be left, and it's important to keep taking the antibiotic until it's gone.
2. Some antibiotics need to be taken with food, and some without food. Your health care provider or pharmacist will tell you how to take your antibiotic. If you do not follow the instructions, your antibiotic may not work well.
3. **Antibiotics do not work for colds or infections caused by viruses.** For viral infections, your health care provider or pharmacist can suggest a number of over-the-counter products which may help some of your symptoms decrease or go away.

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Depression

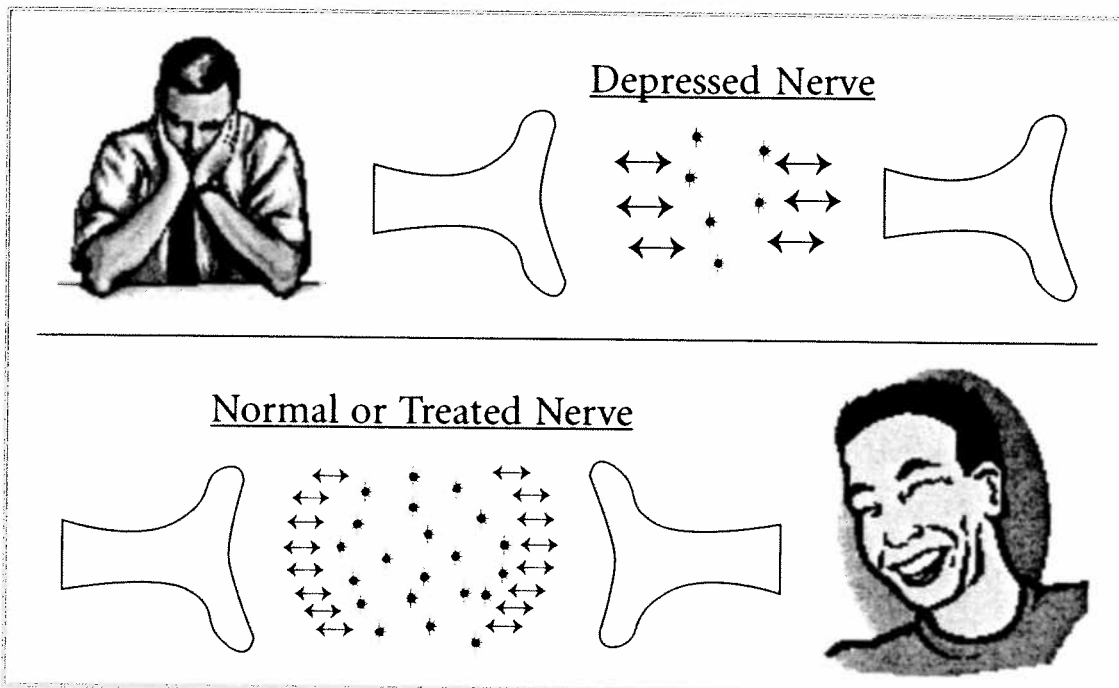
Depression is a big change in your moods. You may feel sad and blue, even hopeless. You may not be interested in things you like to do. You may also have trouble eating, sleeping, concentrating, and getting things done. If these feelings last for 2 weeks or more, you may have a depression that needs treatment. If you are not treated, the depression can last much longer or become more serious.

- A Simple Test -

In the last 2 weeks have you:

- 1) Had little or no pleasure in doing activities you usually enjoy?
- 2) Frequently felt down, depressed or hopeless?

If you answered yes to either question, talk to your doctor about your symptoms.



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Treating Depression

Now that you have your medication:

- ♡ Side effects are usually mild, but get better after 7-10 days.
- ♡ Many patients who take their medicine for at least 9 months will recover from depression.
- ♡ Keep taking your medicine. Even if you feel better, talk to your doctor before you stop taking your medicine.
- ♡ Continue with your counseling.

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