MEDICAL

SUICIDE Prevention

POLIO Vaccinations

STD Prevention

CHILD SAFETY Seats and Boosters

THE MONITOR

NOVEMBER 2019
Greetings! Welcome to the November 2019 edition of The Monitor’s Rio Grande Valley Medical Book – our easy-to-understand guide that helps you become a better-informed partner in your own health care.

In this issue, we explore the issue of suicide, the nation’s second-leading cause of death for young people aged 15 to 34. You’ll find information on its warning signs, and what to do if someone you know has expressed suicidal thoughts. We also have insight from one of the nation’s leading researchers on the subject – Dr. Ramiro Salas, Ph.D., associate professor and psychiatry researcher at Baylor College of Medicine.

Also in this issue, you’ll learn what to do (and not do) after a 9-1-1 call while you’re waiting for an ambulance to arrive. We have tips for maintaining your heart health, and we’ll profile what Capable Kids Foundation is doing for special needs patients in the Valley.

The 2019 Rio Grande Valley Medical Book also includes an up-to-date health care directory, including the addresses and phone numbers for every hospital and indigent health clinic in Starr and Hidalgo Counties.

Good communication is at the heart of patient safety and well-being. This includes communication between patients, families, and members of their health care team. With that in mind, we’ve tried to present each subject in a concise, easily-understandable manner, without excessive medical terminology. Our goal is to stimulate health conversations in general terms, but the information presented in this publication is not intended as medical advice. If you would like more specific information about your personal medical issues, we encourage you to consult a qualified and trusted health care provider.

A digital version of this resource guide is available online by visiting our website at www.themonitor.com. We hope that you enjoy our publication and don’t forget to look for our next issue coming soon!

### Table of Contents

<table>
<thead>
<tr>
<th>Page</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>What Should You Do When Waiting For Ambulance To Arrive?</td>
</tr>
<tr>
<td>8</td>
<td>The Benefits of the Flu Vaccine</td>
</tr>
<tr>
<td>9</td>
<td>Child Safety Seat: Information For Families</td>
</tr>
<tr>
<td>10</td>
<td>Capable Kids Foundation Opens New Worlds For Special People</td>
</tr>
<tr>
<td>12</td>
<td>Suicide: A Growing Problem that is Preventable</td>
</tr>
<tr>
<td>14</td>
<td>Officials Encourage Continued Vigilance Against Rabies</td>
</tr>
<tr>
<td>15</td>
<td>The Effects of Stress on Your Body</td>
</tr>
<tr>
<td>16</td>
<td>Local HIV Clinic Touts Prevention in response to Nationwide Rise in STD Cases</td>
</tr>
<tr>
<td>17</td>
<td>HIV/AIDS in the Rio Grande Valley</td>
</tr>
<tr>
<td>18</td>
<td>Hidalgo-STarr Counties Hospital Directory</td>
</tr>
<tr>
<td>19</td>
<td>Indigent Clinics Directory</td>
</tr>
<tr>
<td>20</td>
<td>Vaccinations and Donations Still Needed to Keep Polio Away</td>
</tr>
<tr>
<td>21</td>
<td>TEXAS ORGAN DONATION</td>
</tr>
<tr>
<td>22</td>
<td>Five Things You Can Do to Keep Your Heart Healthy</td>
</tr>
<tr>
<td>24</td>
<td>Top Researcher Discusses Suicide Rates and Prevention</td>
</tr>
<tr>
<td>26</td>
<td>Should I Take Part in a Clinical Trial? Ask Your Doctor</td>
</tr>
<tr>
<td>28</td>
<td>Understanding The Keto Diet</td>
</tr>
<tr>
<td>29</td>
<td>Why Are Food Allergies on the Rise?</td>
</tr>
<tr>
<td>30</td>
<td>Common Cataract Causes and Treatment</td>
</tr>
<tr>
<td>31</td>
<td>How to Stay Flexible as You Age</td>
</tr>
<tr>
<td>32</td>
<td>Simple Ways to Incorporate More Fruits and Veggies into Your Diet</td>
</tr>
<tr>
<td>33</td>
<td>The Growing Threat of Diabetes</td>
</tr>
<tr>
<td>34</td>
<td>How Handwashing Helps Fight Infection</td>
</tr>
</tbody>
</table>

The editorial content of The Rio Grande Valley Medical Book is for informational purposes only. It is not intended to be a substitute for professional medical advice, diagnosis, or treatment. If you feel you have a specific medical condition that requires treatment, you should seek the advice of your physician or other qualified healthcare provider with any questions you may have. If you have a medical emergency, call your doctor or 911 immediately. The Rio Grande Valley Medical Book does not recommend or endorse any specific tests, physicians, products, procedures, opinions, or other information that may be mentioned in this publication. Any advertisement by a physician or healthcare facility contained in this publication does not constitute an endorsement by The Rio Grande Valley Medical Book.
ABOUT US
Serving the Rio Grande Valley since 1940, our practice has been dedicated to and leading in delivering effective and holistic care to our community. Our clinic has passed through the hands of Dr. Ham, Dr. Harold Stephens, Dr. John Meede, Dr. Carlos Saca, and now Dr. Monzer Yazji. We hold patient satisfaction and effective care to the highest standards, and excel at bringing modern and life-changing services to the lives of our patients.

MISSION
Our mission is to deliver exceptional and comprehensive treatment indiscriminately through patient-focused care and multidisciplinary services.

OUR SPECIALTIES

- INTERNAL MEDICINE
- FAMILY PRACTICE
- OBESITY MEDICINE
- ENDOCRINOLOGY
- NEPHROLOGY
- SLEEP MEDICINE
- PEDIATRIC NEUROLOGY
- ALLERGY MEDICINE

OUR SERVICES

- MINOR LACERATIONS
- WORKER’S COMPENSATION
- EEG
- PHYSICAL MEDICINE & REHAB
- LABORATORY
- RADIOMETRY
- CRONIC CARE MANAGEMENT
- HOME VISITS

502 S. Closner, Edinburg, TX 78539
(956) 292-0100
Monday - Friday 7am - 11pm
Sat 8am - 6pm / Sun 4 - 8pm

5416 S. Jackson Rd,
Edinburg, TX 78539
(956) 213-0400
Monday - Friday 8am - 5pm

1200 E. Savannah Ave, Suite #19
McAllen, TX 78503
(956) 928-1908
Monday - Friday 8am - 5pm

To schedule an appointment, call 956.292.0100

A Life Changing Experience

Serving the Rio Grande Valley since 1940, our practice has been dedicated to and leading in delivering effective and holistic care to our community. Our clinic has passed through the hands of Dr. Ham, Dr. Harold Stephens, Dr. John Meede, Dr. Carlos Saca, and now Dr. Monzer Yazji. We hold patient satisfaction and effective care to the highest standards, and excel at bringing modern and life-changing services to the lives of our patients.

ABOUT US

MISSION

OUR SPECIALTIES

OUR SERVICES

To schedule an appointment, call 956.292.0100

Serving the Rio Grande Valley since 1940, our practice has been dedicated to and leading in delivering effective and holistic care to our community. Our clinic has passed through the hands of Dr. Ham, Dr. Harold Stephens, Dr. John Meede, Dr. Carlos Saca, and now Dr. Monzer Yazji. We hold patient satisfaction and effective care to the highest standards, and excel at bringing modern and life-changing services to the lives of our patients.
Alpha Men’s Primary Care believes in a holistic approach to Family Medicine for Men. We are often the first providers to help men with common healthcare issues. Our providers focus considerably on preventive healthcare for men.

Alpha Men’s Primary Care treat an entire spectrum of conditions. Whereas, some specialists focus on a single organ, condition, or age group throughout their career, Alpha Men’s Primary Care providers are well prepared and whose general medical knowledge spans across the board. And in today’s health care climate, focus on Men’s Health is needed more than ever.

The most common conditions our provider’s encounter include:

- Diabetes
- High blood pressure
- Hypertension
- High cholesterol
- Abdominal pain
- Cold, Flu, General visits
- Wellness Exams/ Physicals
- Prostate Checks
- Weight Management
- Ingrown toe nails
- Skin biopsies
- Thyroid
- Urination (frequency)

Common issues our providers and men focus on for preventive care:

- Low Testosterone Therapy
- Erectile Dysfunction
- Premature Ejaculation
- Shockwave Therapy
- IV Vitamin Infusions
- Medical Weight Loss
- Cryoskin
- Hair Regeneration

SCHEDULE AN APPOINTMENT TODAY! (956)-441-2188 amprimarycare.com
DO YOU EXPERIENCE FREQUENT:

- John Austin, MD
- Frank R. Glatz, MD
- Joseph H. Hemer, MD
- Alastair Lynn-Macrae, MD
- Keith A. Picou, MD
- Gregory S. Rowin, MD
- James J. Sorce, MD
- Charles P. Theivagl, MD
- J. Turner Wright, MD

Runny Nose  Nasal Congestion  Post-Nasal Drip, Clearing of the Throat

You may suffer from Chronic Rhinitis.

Ask us if ClariFix® is right for you!

Get your runny, stuffy nose to COOL it.

Enjoy Life Without Tissues  Available In-Office  Minimal Downtime

McAllen: 956-687-7896
2101 S. Cynthia Plex A.

Weslaco 956-973-9228
910 E 8th St Suite 2.

Harlingen 956-428-4221
510 Victoria Ln, Suite 5.

Rio Grande City 956-488-8787
5326 E Hwy 83, Bldg A Suite 1

Brownsville 956-350-8787
4710 N. Expwy 77/59, Suite 304.

The ClariFix Device is intended to be used as a cryosurgical tool for the destruction of unwanted tissue during surgical procedures, including in adults with chronic rhinitis.

©2018 Aminex, Inc. All rights reserved. ClariFix is a registered trademark of Aminex, Inc. MRR-0233 Rev
You never know when you might face a medical emergency. It might be for a loved one who is having a heart attack, or you might be the first person to happen upon the scene of an accident. Everyone knows the first thing you should do in these types of situations is call 9-1-1, but what should you do (or not do) while you wait for the ambulance to arrive? RGV Medical Book asked the experts at Med-Care EMS for some advice that could keep someone alive until professional help arrives.

Stay Calm
Most of the time, ambulances can get to a life-threatening emergency within eight minutes. So, take a deep breath, and clear your head. Don’t rush in, keep yourself and the patient calm.

“People are generally pretty excited and worried about what’s going on,” acknowledged Mack Gilbert, Director of Operations at Med-Care EMS. “They’re concerned, and sometimes hysterical. That’s understandable, but the call takers are trained to use what we call ‘repetitive persistence.’ They will say the same thing over and over again. They may ask the caller to calm down several times until they eventually break through.”

Follow Instructions
Don’t hang up on the person who takes the call. Emergency dispatchers use an emergency medical dispatch protocol system to determine the nature and priority of the call in order to dispatch the appropriate response. Every dispatcher goes through several weeks of training to better manage resources and increase the accuracy and efficiency of the dispatching process.

“Basically we’re preparing the caller and/or the patient with pre-arrival instructions,” said Reynaldo Ramos, Communications Supervisor at Med-Care EMS. “Are they having chest pain? Are they having difficulty breathing? Are they alert? Depending on the answers we’re able to identify more about what’s happening and which protocol to follow. And it all starts from the beginning of the call.”

Common Do’s and Don’ts
Not every situation will call for the same response, but here are some of the more common things to keep in mind.

Do:
- Keep the person safe. If she is conscious, place her on her side. The head should be slightly raised and supported.
- Loosen clothing that could get in the way of breathing.
- If the patient is unconscious, check their pulse and breathing and start CPR. If you’re unsure how to do that, the 911 operator will walk you through it.
- Note the time. This is most important for patients who have had a stroke.

“In the end it determines the way you treat the stroke patient,” said Ramos. “If it was 24 hours ago as opposed to within the last hour they’ll be much more aggressive in treating those things. It will determine if they need to do surgery or medications.”

Don’t:
- Give anything to eat or drink. This could cause the patient to choke.
- Give her any medication, including aspirin.
- Drive her to the hospital yourself.
- Never move a patient unless they’re in danger or you’re instructed to do so.
- “It’s not going to be faster,” said Gilbert. “There are certain things that trained medical professionals can do and by driving them to a medical facility, you’re delaying that initial care. Your best bet is to dial 9-1-1, because you have professionals here that can talk you through the steps. They’re going to tell you what you need to do. Over 90% of the time, we’re going to be there in less than eight minutes.”

The paramedic team may or may not have your exact address, so there are some things you can do that will help. Make sure your home’s address is clearly visible with numbers at least 4 inches tall. Turning on a porch light (even during the day) can help your house stand out. If possible, unlock the front door or leave it open so paramedics can get in quickly.

If you’re unsure whether the situation warrants a medical emergency, play it safe and call 9-1-1 anyway.

“If you’re ever undecided or unsure about whether to call an ambulance, you should just call the ambulance,” said Gilbert. “You’re not going to get in trouble for thinking you need an ambulance and not needing one after all. It could cause a lot of harm by not calling one, so when in doubt, pick up the phone.”

Hopefully, you will never face an emergency situation that requires an ambulance, but, as always, it is best to be prepared for any situation!
Luis Delgado, Jr., MD. and Staff

“Helping You Live A Healthy Life”

WHY CHOOSE US?
Offering the Highest Quality of Primary Healthcare Since 1990 to the Families of McAllen, Elsa, Edinburg and Surrounding Communities.

SPECIALIZING:
• Annual Physical Exams
• Sports Physicals
• Acute and Chronic Disease Management • X-Rays
• Drug Screenings
• Worker’s Compensation
• Immunizations

Most Insurances Accepted

Dr. Luis Delgado Jr., voted FAVORITE FAMILY DOCTOR!

NORTHSIDE FAMILY MEDICAL CENTER
5128 N. 10th St. • McAllen, Texas
(956) 631-3831

ELSA FAMILY MEDICAL CLINIC
119 Retama, Suite D • Elsa, Texas
(956) 262-9940
The Benefits of the Flu Vaccine

A healthy lifestyle includes many different components. Diet and exercise are arguably the two most significant elements of a healthy lifestyle, but being healthy and avoiding illness involves more than just eating right and getting off the couch. Preventive care can be critical to long-term health. A healthy diet and routine exercise can help lower risk for various ailments, including heart disease and diabetes. But what about preventing more routine conditions, including the flu? The Centers for Disease Control and Prevention notes that the flu vaccine prevents millions of illnesses and flu-related doctor visits every year. Despite the effectiveness of the flu vaccine, some people still don’t get one each year. But a look at some of the many benefits of being vaccinated against the flu might compel such men and women to change their minds and get their flu shots this year.

• The flu shot keeps you from getting the flu. While it’s common sense to note that the flu keeps people from getting the flu, just how effective the flu vaccination can be might open the eyes of even the most ardent flu shot proponents. According to the CDC, in seasons when the flu vaccine viruses matched circulating strains, the vaccine has been shown to reduce the risk of having to go to the doctor by as much as 60 percent.

• The flu shot can save you money and vacation time. The CDC estimated that 48.8 million people got sick with the flu during the 2017-18 flu season. In addition, the CDC estimates that the flu caused workers to miss approximately 17 million workdays and led to more than 950,000 hospitalizations. The cost of a hospital stay is often considerable, and workers who value their vacation and personal time will almost certainly lament having to use some of that time at home nursing the flu. By getting the flu shot, anyone can greatly reduce their risk of spending their time and hard-earned money recovering from the flu.

• The flu shot can help prevent serious medical events. A 2013 meta-analysis of various studies that was published in the Journal of the American Medical Association found that the influenza vaccine was associated with a lower risk of major adverse cardiovascular events among people with heart disease. In addition, the CDC notes that previous studies have found that the flu vaccination has been associated with reduced hospitalizations among people with diabetes and chronic lung disease.

• The flu shot can protect children. Humans’ immune systems mature as they grow, and the flu vaccine can be an invaluable ally to children as their immune systems are still evolving. A 2014 study published in The Journal of Infectious Diseases found that children who were fully vaccinated were between 74 and 82 percent less likely to be admitted to pediatric intensive care units than unvaccinated children. The flu is a formidable foe. But an annual flu shot can bolster everyone’s chances of beating or even avoiding the flu.
According to the US Centers for Disease Control, motor vehicle crashes continue to be the leading cause of death in children one to 14 years of age. But even though most parents know child safety seats are important, a National Highway Safety Administration study found that more than 80 percent of these seats are not used properly.

“Here in the Valley there’s a lot of kids not using car seats correctly,” said Mission Police Department Corporal Robert Rodriguez. “They’re being taken out too early. The seats are not in the correct position or being turned around too early, and we’re seeing a lot of deaths, injured, or paralyzed children.”

As part of Child Passenger Safety Week, the Mission Police Department, Mission Regional Medical Center (MRMC), and similar agencies across the Valley held free child safety seat inspection events.

“Mission Regional Medical Center believes it’s important to have a healthy community,” said MRMC Business Development and Marketing Director, Paola Lopez. “That’s why we partner with the right agencies for events like this to make sure everyone is safe, everyone is healthy, and that’s what we want too.”

“We’re checking to see that they are mounted in the proper direction,” added Manuela Madrid, MRMC Trauma Registrar. “We have a list of the five most-common mistakes that we see and we try to show the parents and address it. We have been doing this every year since 2015.”

Every state requires children to be secured in a car seat or booster seat until they reach certain height or weight requirements. Here are the guidelines issued by the Texas Department of Transportation:

**Birth-2 Years**
All infants and toddlers should ride in a rear-facing car seat until they are at least 2 years of age or until they reach the highest weight or height allowed by their car seat’s manufacturer. (Check labels on seat for this information.)

Secure the chest clip even with your baby’s armpits.

Fasten harness straps snugly against your baby’s body. You should not be able to pinch the slack at the baby’s shoulder.

Use the harness slot at or below the baby’s shoulder for rear-facing.

**Over 2 Years**
Use a forward-facing seat for as long as the safety seat manufacturer recommends it. (Check labels for maximum height and weight information.)

Fasten harness straps snugly against your child’s body. You should not be able to pinch the slack at the baby’s shoulder.

Secure the chest clip even with your child’s armpits.

Use either seat belt or lower anchors to secure the car seat, not both. Always latch the tether strap to the corresponding anchor if your vehicle has one.

**4-8 Years**
Use a booster seat to the maximum height or weight limit. (Check labels for information.)

Fasten the lap belt across your child’s thighs and hips, not stomach.

The shoulder belt should rest on the chest, not the neck. Check belt routing on booster for proper placement.

**Over 8 Years Old**
Always use a lap and shoulder belt for maximum protection.

Anyone under the age of 13 should be restrained in the back seat.

Remember it is illegal to be unbuckled in either the front or back seat, and it’s punishable by fines and fees up to $200. Children younger than 8 years old must be in a child safety seat or booster seat unless they are taller than 4 feet 9 inches. Fines issued to drivers for unrestrained children in their vehicle can be as high as $250 plus court costs.

“The idea is not to give out citations, but to get people to use child safety seats correctly,” said Harlingen Police Department Sgt. Salvador Carmona, who is a Certified Child Passenger Safety Technician and Instructor. “We want to make sure that the seat is the correct seat for the child, that it has not expired, that the child fits that seat and is secured properly, and that the car seat is installed in the vehicle properly. Car seats are a one-time-use-only item, which means they should be replaced if the vehicle is ever in an accident.”

For additional information about child safety seats, you can call the Safe Riders Initiative at (800) 252-8255.
SPECIAL NEEDS

Capable Kids Foundation Opens New Worlds For Special People

BY BENJAMIN TREVIÑO

Children and adults with special needs want to laugh and play just like everybody else, but they often have trouble doing the things most of us take for granted. A physical disability might make certain activities inaccessible for them. An Asperger’s child might having difficulty making and sustaining friendships. Children on the autism spectrum are often frightened by loud noises and flashing lights.

For the past five years, the Capable Kids Foundation (CKF) has been dedicated to improving the quality of life for special people of all ages and their families by enabling them to participate in various events and activities throughout the community. CKF also aims at increasing public awareness about disabilities, while advocating for improved accommodations in the Rio Grande Valley.

“We’re health professionals who work as therapists with children with disabilities,” said Melanie Watson, Board President and a founding member of Capable Kids Foundation. “We noticed that the families didn’t have a lot to do outside of school and family. We wanted to provide events where they could meet other families, the kids could make friends, they could have extracurriculars like through our sports, and through our camps. Basically, we give them an improved quality of life.”

“We are non-disability-specific,” added CKF Interim Executive Director, Evelyn Cano. “Anyone who has a cognitive or physical disability is able to join us. This can be anyone who has downs syndrome, autism, an intellectual disability, a physical impairment, legally blind, hard of hearing, or whatever. It doesn’t matter.”

CKF helps special people ease their way into social, sporting, and other situations by hosting events that most people take for granted. Its most-recent example was a 1980s-themed prom held at the Port Isabel Cultural and Events Center on October 12. The music was slightly muted, and the dance floor lights were colorful, but not flashing and confusing.

(Left to Right) Andrea, Angel, and Berta Garza of Mission pose for their prom picture at the Capable Kids Foundation Totally 80s Prom, one of several events held year round for special needs children and their families.
More than 100 special needs children, adults, and their families enjoyed an evening that otherwise might be frightening or intimidating. For Alma Teran of Harlingen and her 14 year old son, Omar, it was their second prom, and one of many CKF events that they’ve attended.

“Capable Kids Foundation has done so much for my child,” said Alma. “They’ve brought him out from his little home where he wouldn’t come out at all. We couldn’t even go to HEB, because he’s autistic, but he has grown so much. Now, Omar is CKF’s very first male cheerleader. They’re called The Sparks.”

“I’ve liked cheerleading since I was little,” added Omar. “And now that I’m in it, it makes me feel happier that I’m a cheerleader with Capable Kids Foundation. This prom is amazing. I love how they decorated.”

Mary Lou Gonzalez and her son, Javier, drove to Port Isabel from Edinburg to attend the prom. She, too, has seen amazing results ever since Javier started taking part in CKF events.

“He’s improving his social skills,” said Gonzalez. “He’s becoming more outgoing, he’s learning to interact with people in public, and he’s just getting more comfortable with everything. The other kids here don’t judge each other. They can have fun and just be themselves. I always recommend it to my friends.”

CKF events are always a community effort. The 1980s prom, for example, was sponsored by the City of Port Isabel, Sierra Title, Lone Star National Bank, Peggy’s Cakes and More, Timeless by Tiffany Photography, Port Isabel Public Library, and Jonathan and Michelle Bodden. Various sponsorship levels are available for merchants who want to support CKF and build relationships with special needs families of the Rio Grande Valley.

“Most of our board is comprised of physical therapists, speech therapists, people who have the passion and the expertise,” said Cano. “But without the financial support, our visions would not be able to be executed. I personally am a parent of a child with a disability, and at one point I left the Valley, because there were not opportunities like this for my son. These events greatly improve the quality of life for all these children and their families.”

There are no fees or membership requirements for families who want their children to participate in Capable Kids Foundation events. The can attend one event or many if they choose to do so. Anyone who would like to participate, volunteer, donate, or become a sponsor can begin by visiting the Capable Kids Foundation website at www.ckrgv.org, or by calling (956) 277-1776.
Suicide is a serious public health problem. According to the US Centers for Disease Control, suicide is the 11th leading cause of death in Texas and the second leading cause of death (after accidents) for Texans aged 15 to 34. Of the estimated 45,000 people who die annually by suicide in the United States, approximately 10% occur in Texas. And the rate of suicide has increased every year since 2006.

“The suicide rate is going up among the younger people,” said Cammy Hazim, Area Director, South Texas Chapter, American Foundation for Suicide Prevention (AFSP). “Every two hours a Texan dies by suicide. Last year it was every three hours. It could be potentially related to a lot of things. It could be stress at school, all the testing the kids are under, social pressures, all of that takes a toll.

Suicide, however, is preventable. Knowing the risk factors and warning signs can help prevent the loss of life.

Warning signs of suicide can include:
- Often talking or writing about death, dying or suicide
- Making comments about being hopeless, helpless or worthless
- Increased alcohol and/or drug misuse
- Withdrawal from friends, family and community
- Reckless behavior or more risky activities, seemingly without thinking
- Dramatic mood changes
- Talking about feeling trapped or being a burden to others
- Through our research, we now know that suicide is preventable,” said Hazim. “We know that no one dies by suicide for one reason. A lot of time it’s due to many intersecting things. It’s like a Jenga puzzle and all of those little wooden blocks are risk factors and that can be things like a mental health issue such as depression, or PTSD. It could possibly be genetic.”

CDC reports that about half (54 percent) of people who died by suicide did not have a known mental health condition. However, many of them may have been dealing with mental health challenges that had not been diagnosed or known to the people around them.

If someone signals they are considering suicide, listen. Take their concerns seriously. Don’t be afraid to ask questions about their plans. Let them know you care, and they are not alone. Encourage them to seek help immediately from a knowledgeable professional. Don’t leave them alone.

CDC offers five tips on what to do if you’re concerned about a friend or loved one:
- Ask him or her if they’re thinking about suicide
- Reduce access to lethal means for those at risk
- Be there with them. Listen to what they need
- Help them connect with support groups and health professionals
- Stay connected. Follow up to see how they’re doing

“Through our research, we now know that suicide is preventable,” said Hazim. “We know that no one dies by suicide for one reason. A lot of time it’s due to many intersecting things. It’s like a Jenga puzzle and all of those little wooden blocks are risk factors and that can be things like a mental health issue such as depression, or PTSD. It could possibly be genetic.”

AFSP is having survivor day events in Edinburg and Brownsville on November 23. It also holds its annual Rio Grande Walk on November 2 every year. This year’s walk will be at Edinburg Municipal Park, starting at 8:00 am. If you urgently need help for yourself or someone else, contact the Suicide Prevention Lifeline call 1-800-273-8255 or chat online at www.suicidepreventionlifeline.org.
Suicide Prevention: A Growing Problem That is Preventable

By Benjamin Treviño

www.ThurmondEyeAssociates.com • 956-777-7200

Vision, Life!

Restore Your

Renew Your

LIFE!

Specialists in Laser-Assisted Cataract Surgery

From the latest breakthroughs in cataract care - like LenSx® Laser Cataract Surgery - to recent advances in retinal care and glaucoma management - the eye care professionals of Thurmond Eye Associates are dedicated to helping you enjoy a lifetime of the best possible vision. With a reputation for eye excellence that spans more than 50 years in the Rio Grande Valley, look to Thurmond Eye Associates to protect, preserve and restore your precious gift of sight.
Rabies

Officials Encourage Continued Vigilance Against Rabies

BY BENJAMIN TREVIÑO

Human rabies cases in the United States are rare, according to the US Centers for Disease Control and Prevention (CDC), with only 1 to 3 cases reported annually. But officials stress that’s no reason to be complacent about the disease. In fact, they say vigilance and public awareness are the main reasons rabies has been held in check for the past 100 years.

“We haven’t seen rabies in a long time,” said Dr. Justin Cerelli, a veterinarian at Four Paws Animal Center. “But that’s because we do events like these that we don’t see it.”

The events Dr. Cerelli alluded to include the City of Edinburg’s semiannual rabies vaccination and registration clinics. The city holds one every September, with the other taking place in March.

“It started several years ago,” said Sgt. Ray Sepulveda of the Edinburg Police Department. “The reason we started this back in the mid to late 90s is because there was a rabies outbreak and several people died from it. The cost for the rabies vaccine is $6. It’s $5 to register your animal if it is already spayed or neutered. If not, then it’s $10.”

Rabies is a preventable viral disease most often transmitted through the bite of a rabid animal. The vast majority of rabies cases reported to the CDC each year occur in wild animals such as raccoons, skunks, bats and foxes. Domestic animals such as cats and dogs account for fewer than 10 percent of reported cases.

“The biggest culprit in this area is coyotes,” said Dr. Cerelli. “In other areas it’s skunks. Also, bats get rabies quite a bit. If you see a bat during the day it probably has rabies. I’m not sure, but I think we haven’t seen a domesticated animal with rabies since 1994.”

The CDC offers these suggestions to help prevent rabies:

- Keep vaccinations up-to-date for all dogs, cats and ferrets.
- Keep your pets under direct supervision so they do not come in contact with wild animals.
- If your pet is bitten by a wild animal, seek veterinary assistance immediately.
- Call your local animal control agency to remove any stray animals from your neighborhood.
- Spay or neuter your pets to help reduce the number of unwanted animals.
- Enjoy wild animals (raccoons, skunks, foxes) from afar.
- Do not handle, feed or attract wild animals with open garbage cans or litter.
- Never adopt wild animals or bring them into your home.
- Do not try to nurse sick animals to health.
- Call animal control or an animal rescue agency for assistance.

“If you find a bat dead in your yard or around your house, especially during the day, call animal control,” said Sgt. Sepulveda. “We’ll go out and pick it up and send it to a lab to see if it has rabies or not. People should not try to handle the bat themselves, even with gloves on. Let our animal control officers handle it.”

A citation can be issued if you do not have your animal vaccinated and registered. The fine varies from city to city. Information about penalties and vaccination clinics can be obtained by contacting your local animal control office or county health department. The best thing you can do, however, is err on the side of caution and attend a low-cost vaccination clinic, as Ray Rios of Edinburg did for his dog, Lucky.

“My son told me about this clinic,” said Rios. “So I decided to bring my dog. Lucky has been with us for one year. I appreciate that the city does this. There hasn’t been any rabies around where I live, but it’s better to be safe than sorry.”
The Effects of Stress on Your Body

Though everyone experiences and responds to stress differently, these are some of the more common effects of stress, courtesy of the Mayo Clinic.

Stress affects people of all ages from all walks of life. Though work is a primary source of stress for many people, a recent survey from the American Psychological Association found that stress is more than just work-related.

In its 2017 ‘Stress in America’ survey, the APA found that the future of the nation, money and violence and crime were significant sources of stress for more than half of survey participants. That’s a dangerous notion, as the Mayo Clinic notes that the effects of the stress on the human body are considerable. Though everyone experiences and responds to stress differently, these are some of the more common effects of stress, courtesy of the Mayo Clinic.

**Mental side effects**
Stress can have an adverse effect on mood and has even been linked to depression, which the World Health Organization reports is the leading cause of disability across the globe. People suffering from stress also may experience anxiety, restlessness and feelings of being overwhelmed. In addition, stress can compromise a person’s ability to focus, adversely affecting a person’s ability to complete their work-related tasks. That’s not insignificant, as 61 percent of respondents in the 2017 ‘Stress in America’ survey reported that work was a significant source of their stress.

**Physical side effects**
Stress affects more than the mind, manifesting itself physically in various ways. The Mayo Clinic reports that common physical side effects of stress include headache, muscle tension or pain, including chest pain, fatigue, and a change in sex drive. Upset stomach also may be a byproduct of stress. People dealing with stress may even have trouble sleeping.

**Behavioral side effects**
Behavior also can be affected by stress, which may cause some people to abuse drugs or alcohol. Some may even turn to tobacco, either becoming a smoker or smoking more if they’re already smokers. Smoking has been linked to a host of negative physical side effects, including an increased risk of developing cancer. Angry outbursts, social withdrawal and overeating or undereating are some additional potential side effects of stress on the body.

Coping strategies can be highly effective at alleviating stress and its negative side effects. Learn more about such strategies at www.stress.org.
Cases of three common sexually transmitted diseases (STDs) in the U.S. reached a record level in 2018, according to a report released last month from the Centers for Disease Control and Prevention. Officials with the Valley AIDS Council’s Westbrook Clinics say the spike is not reflected in the Valley, but are urging caution and prevention nonetheless.

“There’s not a spike to report (in the Valley),” said Oscar Lopez, VAC Director of Education. “We do know that across the state of Texas, there have been what are called “syphilis clusters,” in which there are large pools of people infected with syphilis. They are large enough to where it’s worrisome and we’ve recently seen a small uptick in syphilis cases here in the Valley as well.”

The CDC report shows that syphilis, gonorrhea, and chlamydia combined for more than 2.4 million cases in 2018. That’s an all-time high since data on all three conditions was first collected in 1984. Nearly two-thirds of these cases were among people 15 to 24 years old, the report shows. Lopez suspects the upward tick in STDs is due, in part, to the growing popularity of dating apps such as Tinder and Grindr.

“Most of the people that we work with have met their partners through one of the dating apps,” said Lopez. The younger they are, the more likely that has been the case. These apps are supposed to be for people 18 and older, but if you go online you’ll see folks who don’t look 18. I would say they’re about 16 or 17.”

Another factor, according to Lopez, is society’s general reluctance to even discuss sex-related issues. Parents, he says, are not “having the talk” with their children, while the state’s public policy stance is still focused on abstinence-only sex education in school.

“I recently asked a group of parents at a local school district if they received sex education at home,” recalled Lopez. “And out of the 30 to 40 people who were there, only three people raised their hand. I then asked how many of them became pregnant as teenagers, and many more hands went up. What we see is a cycle that continues over and over again.”

Anyone who is concerned about having contracted an STD, specifically gonorrhea, chlamydia, or syphilis, is urged to make an appointment at one of three Westbrook Clinics located in Brownsville, Harlingen, or McAllen. These Valley AIDS Council clinics can test for HIV and all other STDs.

“If you’re concerned, come in,” said Lopez. “The testing is free. It takes about 10 days to get the results for gonorrhea and chlamydia. For syphilis, we can do it same day now. Also the HIV test is a one-minute finger prick test and you get the results right there on the spot.”

Westbrook Clinics also offer pre-exposure prophylaxis (PrEP) for people at very high risk for HIV. PrEP can stop HIV from taking hold and spreading throughout the body. PEP (post-exposure prophylaxis) is also available. PEP is taken after being potentially exposed to HIV to prevent becoming infected. PEP should be used only in emergency situations and must be started within 72 hours after a recent possible exposure to HIV.

“We’re the primary provider of PEP and PrEP,” Lopez explained. “We do the best we can. We see about 300 patients right now that are using PreP on a regular basis and they’re all doing very well on it. But we’d love to be able to see 1,000 or 2,000, because honestly, those are the numbers we need to start seeing if we’re going to curb the rates of HIV that are impacting our community.”

Lopez says the best thing the Valley can do in the fight against STDs is to open up the public conversation about sex and STD transmission. Until that happens, he says, STDs will continue to be a problem.

“Many people are still embarrassed to talk to their doctor about what they’re doing sexually,” said Lopez. “My issue is: Should you be doing it if you can’t even speak about it? And if you’re doing it, then be brave and get the help you need, because if you don’t take care of your own body, who’s going to do it? You have to be your own best advocate.”
STD PREVENTION

Local HIV Clinic Touts Prevention in Response to Nationwide Rise in STD Cases

BY BENJAMIN TREVIÑO

AIDS (acquired immunodeficiency syndrome) is a syndrome caused by a virus called HIV (human immunodeficiency virus). The disease alters the immune system, making people much more vulnerable to infections and diseases. This susceptibility worsens if the syndrome progresses.

For more information or to get tested, visit the Valley AIDS Council website www.valleyaids.gov or call our toll-free numbers: 1-888-311aids or 1-800-333-SIDA


In 2017 more than 135 new HIV-positive were discovered in the Rio Grande valley.

The Rio Grande Valley averaged four new HIV-positive diagnoses every day in 2017.

Valley AIDS Council is the only HIV/AIDS organization serving a South Texas population of 1.5 million people.

1,400 of the 2,300 persons living with HIV in the Rio Grande Valley are accessing comprehensive and specialized medical care at the Valley AIDS Council’s Westbrook Clinics.

85% of RGV HIV/AIDS patients are male. 15% of those patients are female.

More than 92% of Valley HIV/AIDS patients are Hispanic/Latino.

More than 90,700 persons living with HIV reside in Texas.

Of those who are HIV-positive in Texas, 2,350 live in the Rio Grande Valley.

For more information or to get tested, visit the Valley AIDS Council website www.valleyaids.gov or call our toll-free numbers: 1-888-311aids or 1-800-333-SIDA

Source: Valley AIDS Council/Westbrook Clinics
HIDALGO-STARR COUNTY HOSPITAL DIRECTORY

Behavioral Hospital at Renaissance
5510 Raphael Drive
Edinburg, Texas 78539
(956) 362-4357

Cornerstone Regional Hospital
2302 Cornerstone Blvd.
Edinburg, TX 78539
956-618-4444

Doctors Hospital at Renaissance
5501 S. McColl Road
Edinburg, Texas 78539
(956) 362-8677

Doctors Hospital at Renaissance Cancer Center
2717 Michael Angelo Drive
Edinburg, Texas 78539
(956) 217-7050
Patient Physician Hotline
(956) 362-2873

Edinburg Children's Hospital
1102 W. Trenton Road
Edinburg, Texas 78539
956-388-6800

Edinburg Regional Medical Center
1102 W. Trenton Road
Edinburg, Texas 78539
956-388-6000

Solara Hospital of McAllen
301 W. Expressway 83, 8th Floor
McAllen, TX 78503
(956) 632-4880

South Texas Behavioral Health Center
2102 W. Trenton Rd.
Edinburg, TX 78539
(888) 977-1400 (956) 388-1300

Starr County Memorial Hospital
2573 Hospital Drive
Rio Grande City, Texas 78582
Phone: (956) 487-5561

Vannie Cook Children's Cancer and Hematology Clinic
101 W. Expressway 83
McAllen, TX 78503
(956) 661-9840

Weslaco Rehabilitation Hospital
906 South James Street
Weslaco, TX 78596
(956) 969-2222

The Women's Hospital at Renaissance
5502 S. McColl Road
Edinburg, Texas 78539
(956) 362-2229

Knapp Medical Center
1401 E. 8th St.
Weslaco, Texas 78596
(956) 968-8567

McAllen Heart Hospital
1900 South "D" Street
McAllen, TX 78503
956-994-2000

McAllen Medical Center
301 W. Expressway 83
McAllen, TX 78503
956-632-4000

Mission Regional Medical Center
900 S. Bryan Rd.
Mission, Texas 78572
(956) 323-9000

Rehabilitation Hospital at Renaissance
5404 Doctors Drive
Edinburg, Texas 78539
(956) 362-3550

Rio Grande Regional Hospital
101 East Ridge Road
McAllen, TX 78503-1299
(956) 632-6000
Families with low to moderate incomes have several options to access quality, affordable, non-emergency health care. Rio Grande Valley Medical Book has compiled a list of clinics, agencies and organizations in Starr and Hidalgo counties which cater to this often marginalized segment of the population. For appointment information and hours of operation, please contact the facility of interest to you.

**Access Esperanza Clinics**  
(Five Locations)  
Access Esperanza Clinic provides low to no cost women's health care and family planning and preventive health care services. Patients may receive physical exams, clinical breast exams, pap tests, STD testing/treatment, rapid HIV testing, and general wellness screenings. Their web address is: www.accessclinics.org. Locations are as follows:  
- **McAllen Clinic**  
  916 E. Hackberry Ave. • McAllen, TX 78501  
  (956) 688-3700  
- **Edinburg Clinic**  
  302 S. Veterans Blvd. • Edinburg, TX 78539  
  (956) 383-5084  
- **Weslaco Clinic**  
  901 James St. • Weslaco, TX 78596  
  (956) 968-5039  
- **Mission Clinic**  
  1201 N. Conway • Mission, TX 78572  
  (956) 585-4575  
- **San Juan Clinic**  
  509 E. Earling Rd. • San Juan, TX 78589  
  (956) 283-1711

**CACST Roma Family Clinic**  
683 N Canales Cir, Roma, TX - 78584  
(956) 849-2312

**El Milagro Clinic**  
901 E. Vermont  
McAllen, TX 78503  
(956) 664-9416  
El Milagro Clinic provides the community with comprehensive medical services, including family practice, physical exams, preventive health screening, medical case management, pregnancy screening, immunizations, pap smear screenings, mammograms, colonoscopy, diabetes screening, hypertension screening, STD testing, family planning, contraception, mental health consultation, and more.

**Holy Family Services, Inc.**  
(Birth Center)  
5819 N FM 88  
Weslaco, TX 78599  
(956) 969-2538  
Holy Family Services, Inc. is the longest licensed, free-standing birth center in Texas. Founded in 1983 by four Catholic nuns, Holy Family Services provides affordable family-centered maternity care to families in the Valley. Services include free pregnancy testing, assistance with Medicaid and CHIP applications, Well Women and GYN care, prenatal care, labor, birth, and postpartum care, water birth, postpartum home visits for mother and baby, breastfeeding support and lactation consultations and free classes in prenatal, labor and breastfeeding education. More information is available at: www.holyfamilybirthingcenter.org.

**Hope Family Health Center**  
2332 W. Jordan Ave.  
McAllen, TX 78503  
(956) 994-3319  
Hope Family Health Center provides primary and preventative medical services to uninsured residents of the Rio Grande Valley. In-house services include basic medical care, diabetes treatment and education, physical and non-emergency medical care. Additional in-house medical services may include, but are not limited to, nutrition classes, chiropractic services, physical or occupational therapy services or more. To learn more, visit: www.hopefamilyhealthcenter.org

**MHP Salud**  
3102 E. Business 83, Ste. G  
Weslaco, TX 78596  
P.O Box 1405  
Rio Grande City, TX 78582  
MHP Salud implements Community Health Worker programs to empower underserved Latino communities and promotes the CHW model nationally as a culturally-appropriate strategy to improve health. The organization runs several programs based on specific health topics in Starr and Hidalgo Counties including the Colonia Outreach Program, the Navigator Program, the Mi Salud Health Text Messaging Program, the Salud Para Todos mental health program, the Salud y Vida Program, and the Starr County Rural Health Network Development Planning Program. For more details, visit: www.mhpsalud.org.

**Nuestra Clinica Del Valle (NCDV)**  
(11 Locations)  
To address the needs of indigent patients, NCDV offers a complete set of integrated, accessible primary health care services at 11 locations – nine in Hidalgo County and two in Starr County. Health services include family medicine, internal medicine, pediatric care, obstetrical and gynecological care, and podiatry. Pharmacy, laboratory services, limited radiological services, social services/case management, nutrition/health education, and integrated eligibility assistance are also provided. Two NCDV clinics offer dental services. Limited behavioral health services including care management and group counseling were added in 2006. Locations are as follows:  
- **San Juan Clinic (Main Office)**  
  801 West 1st Street • San Juan, TX 78589  
  956-787-0787  
- **San Juan Women’s Health Center**  
  806 West 3rd Street • San Juan, TX 78589  
  956-787-0787  
- **PSJ A HBSC**  
  2900 N Raul Longoria Rd • San Juan, TX 78589  
  956-781-6077  
- **Roma Clinic**  
  683 North Canales Circle • Roma, TX 78584  
  956-849-2100  
- **Rio Grande City Clinic**  
  600 N Garza St Ste. A • Rio Grande City, TX 78582  
  956-487-0846  
- **Mission Clinic**  
  611 North Bryan Road • Mission, TX 78572  
  956-580-3303  
- **Memorial SBHC in Alton**  
  201 South Los Ebanos Blvd. • Alton, TX 78574  
  956-519-1800  
- **San Carlos Clinic in Edinburg**  
  300 North 86th Street • Edinburg, TX 78539  
  956-287-8850  
- **Donna Clinic**  
  301 South 17th Street • Donna, TX 78537  
  956-464-5809  
- **Edcouch Clinic**  
  1200 East Santa Rosa • Edcouch, TX 78538  
  956-262-1363  
- **Mercedes Clinic**  
  1500 First Street • Mercedes, TX 78570  
  956-565-3191
The eradication of polio in the United States is a public health success story. Widespread vaccinations eliminated the crippling disease in the US in 1979. But few people realize that 40 years later, the global fight against polio continues.

“Polio has been eradicated from all but two countries: Afghanistan and Pakistan,” said Michael Dickerson, who co-chairs Rotary Club’s anti-polio fundraising initiatives in South Texas. “We’re just one plane ride away from having it spread throughout the world again,” added Dickerson. “There’s been only one other disease that’s been completely eradicated; that’s small pox. We want this to be the second disease that’s been completely eradicated.”

The Polio virus usually enters the environment in the feces of someone who is infected. In areas with poor sanitation, the virus easily spreads from feces into the water supply, or, by touch, into food. In addition, because polio is so contagious, direct contact with a person infected with the virus can cause polio.

Rotary’s involvement in the fight against polio started in the Philippines in the early 1980s. From there, the fight expanded worldwide, and it continues to do so today.

“Rotary showed what we were able to do over the years,” said Edinburg Rotary President, Tim Smith. “Finally the World Health Organization and everybody else got involved through the global polio eradication initiative in 1988. We’ve gotten it down to two countries now so if we can get it out of Afghanistan and Pakistan we’ve done it. We’re so close, but we’re not there yet.”

District 5930 Rotary clubs (like their colleagues around the world) hold a number of fundraisers throughout the year to help fight polio. They include an annual motorcycle rally in March, Edinburg Cajun Fest in February and Pints for Polio at University Draft House during the month of October.

“Pints for Polio is held every Saturday during the month of October,” said Smith. “If you go between 3:00 and 7:00 pm, $15 gets you a Pints for Polio collectible glass and a 12 oz. beer to go with it. The cost is underwritten by sponsors so every dollar goes to the fight against polio.”

“The beauty of Rotary’s fundraising is that the money we raise is double matched by the Bill and Melinda Gates Foundation,” said Dickerson. “The foundation has an agreement with Rotary, so if you donate $1,000, it actually becomes $3,000 towards fighting polio. It’s a great way to get a great return on your charitable investment.”

The money raised by Rotary goes toward global research and vaccination outreach efforts. Even though there is no polio currently in the US, children here are still required to be vaccinated. The US Centers for Disease Control and Prevention recommend that children get four doses of polio vaccine. They should get one dose at each of the following ages:

- 2 months old
- 4 months old
- 6 through 18 months old, and
- 4 through 6 years old

Most adults do not need the polio vaccine because they were already vaccinated as children, but three groups of adults are at higher risk and should consider polio vaccination in the following situations:

- people traveling to a country where the risk of getting polio is greater
- laboratory workers who handle specimens that might contain polioviruses, and
- healthcare workers treating patients who could have polio or have close contact with a person who could be infected with poliovirus.

Rotary has announced that this year alone, it is giving $100 million in grants to support the global effort to end polio. If you want to get involved in the fight against polio or with a Rotary Club and its many other service opportunities, you can visit www.rotary.org, or contact any of the 52 Rotary clubs located across South Texas.

“Get involved in Rotary,” said Dickerson. “It does great service beyond just eradicating polio. We do a lot of things throughout the community.”

“It’s a terrific organization that does terrific things and that’s why I’m a part of it,” added Smith.
Organ donation is when a person allows an organ of theirs to be removed, legally, either by consent while the donor is alive or after death with the assent of the next of kin.

In 2017, 897 Texans died while waiting for an organ transplant.

There are an estimated 2,673 awaiting a transplant in the Central-South Texas region that includes the Rio Grande valley.

Estimated number of Texans on the national transplant waiting list: 11,000+

Texas population: 27 million

Average number of days waiting for a kidney transplant: 1,219

There are an estimated 2,673 awaiting a transplant in the Central-South Texas region that includes the Rio Grande valley.

Number of lives an organ donor can save: 8

Sign Up to be an Organ Donor

www.organdonor.gov

Signing up on your state registry means that someday you could save lives as a donor—by leaving behind the gift of life. When you register, most states let you choose what organs and tissues you want to donate, and you can update your status at any time.

Texas registered organ donors: 12+ million

62% of patients on the transplant waiting list are male

38% are female.

Of the 10,093 patients on the list 8,271 are waiting for a kidney.
We all know that exercise and eating right are good for heart health, but what else can we do to keep our hearts beating strongly? Here, Dr. Yasir Yaqub, an interventional cardiologist at Mission Regional Medical Center’s Heart and Vascular Center, outlines five things we all should do daily to help our hearts work more efficiently.

Avoid Trans-Fats and Carbohydrates
We need fats in our diet, including saturated, unsaturated, and polyunsaturated fats. One fat we don’t need is trans-fat, which is known to increase the risk of developing heart disease or having a stroke over a lifetime. Trans-fat clogs your arteries by raising your bad cholesterol levels (LDL) and lowering your good cholesterol levels (HDL).

“It’s not like you should not eat fat, just don’t eat too much,” advises Dr. Yaqub. “Try eating more grilled foods. Grilled is always better. Use an air fryer. The majority of oils are not good for you. The exception is olive oil, which is a very heart-healthy oil. Corn oil, vegetable oil, peanut oil, and other oils have too much fatty acids. You have to look at the problem of carbohydrates, also. Carbohydrates are also converted into glucose, and into fatty acids. In our daily life, we have some chunk of fat in us, but the majority of us have more carbohydrates.”

Practice Good Dental Hygiene
It might seem odd, but people who have periodontal (gum) disease often have elevated risk factors for heart disease. Researchers have found that bacteria in the mouth involved in the development of gum disease can move into the bloodstream.

“Over time, this can cause inflammation in the blood vessels,” says Dr. Yaqub. “This increases your risk of heart disease and stroke. If you take good dental hygiene care, your problems of having an infection in the heart are lower. If you are practicing good dental hygiene like brushing and flossing, your chances of getting a heart infection are lower.”

Get Lots of Deep Sleep
One study looking at 3,000 adults over the age of 45 found that those who slept fewer than six hours per night were about twice as likely to have a stroke or heart attack as people who slept six to eight hours per night. Researchers believe sleeping too little causes disruptions in underlying health conditions and biological processes, including blood pressure and inflammation.

“There are two kinds of sleep,” notes Dr. Yaqub. “There’s REM sleep and non-REM sleep. To keep it simple, there’s deep sleep and non-deep sleep. You have to have good, deep sleep. You might have eight hours of sleep, but if you wake up four or five times during the night, you’ll still be tired. Lack of sleep causes fatigue and weakness in the body and you build up more bad chemicals. See a physician to make sure there’s not an organic cause. If you’re waking up too often there’s something going wrong, either psychologically or physically.”

Stay Active
Research has suggested that staying seated for long periods of time is bad for your health. When looking at the combined results of several observational studies, researchers found that in those who sat the most, there was a 147 percent increase in cardiovascular episodes and a 90 percent increase in death caused by these events. Sitting for long periods of time also increases your risk of deep vein thrombosis (a blood clot).

“I recommend at least 30 minutes of activity a day, five days a week, minimum,” says Dr. Yaqub. “You can be sedentary most of the day as long as you get some exercise.”
Being sedentary is not going to kill you. It’s the lack of exercise that’s going to get you. The problem is if you’re sedentary most of the time, you’re not going to want to exercise, so stay active in some way. They go hand in hand.”

**Avoid Secondhand Smoke**
According to the American Heart Association, exposure to tobacco smoke contributes to about 34,000 premature heart disease deaths and 7,300 lung cancer deaths each year. Nonsmokers who have high blood pressure or high blood cholesterol have an even greater risk of developing heart disease when they’re exposed to secondhand smoke. Chemicals emitted from cigarette smoke promote the development of plaque buildup in the arteries.

“Smoking and breathing second-hand smoke is not just bad for the heart,” notes Dr. Yaqub. “There’s also lung cancer, stroke, and a lot of other cancers besides the heart and lungs. A lot bad stuff can happen, so don’t smoke, and avoid second-hand smoke.”

**Symptoms**
Dr. Yaqub says the symptoms of heart disease can include:

- Chest pain, chest tightness, chest pressure and discomfort
- Shortness of breath
- Pain, numbness, weakness or coldness in your legs or arms
- Pain in the neck, jaw, throat, upper abdomen or back

“Chest pain is what most people complain of,” says Dr. Yaqub. “But shortness of breath after exertion is another example. If you’re used to walking a couple of blocks, but all of a sudden you’re short of breath after doing only one block, there’s something going on. Watch for any heart fluctuations, rapid fluttering, or you feel like your heart is coming out of your chest or beating very fast, dizziness, these are all signs to look for.”
According to a new report from the Centers for Disease Control and Prevention’s National Center for Health Statistics, the suicide rate among 10 through 24-year-olds has increased 56 percent over the last decade. In 2017, suicide was the second leading cause of death for children aged 10 to 14, teenagers 15 to 19, and young adults ages 20-24. Meantime, the Veterans Administration has found that the suicide rate among veterans is about 30 per 100,000 population per year, compared with the civilian rate of 14 per 100,000.

Dr. Ramiro Salas, Ph.D., associate professor and psychiatry researcher at Baylor College of Medicine, has been using functional brain imaging to study the neuronal circuits that are involved in the processing of reward and disappointment, and how these circuits are changed in addiction, depression, and other conditions. His lab is also developing gene expression data-mining techniques to obtain anatomical hypotheses of mental disease from genetic screenings.

RGV Medical Book caught up with Dr. Salas during a recent conference at the University of Texas-Rio Grande Valley’s Edinburg campus, where he told students that advances in the field of psychiatry are lagging behind other medical fields. Here are some excerpts from that interview:

**Dr. Salas, you have said that the field of psychiatry has been slow to advance. What did you mean by that?**

“If you have stomach pain and you go to the doctor, they’re going to ask you some questions, and run some tests. The tests they’re running now are better than the ones they were running 10, 20, even 50 years ago. The medicines they have now are better than they used to be. In psychiatry, that’s not happening yet. We have the same basic drugs we had 50 years ago. The last big breakthrough we had were the SSRIs, like Prozac. (SSRI: a type of antidepressant drug that inhibits the reabsorption of serotonin by neurons, thus increasing the availability of serotonin as a neurotransmitter) That was 50 years ago. Very few breakthroughs have happened since then. Death rates for many diseases are going down, such as cancer for example. In psychiatry and sociology it’s flat. It’s not getting better.”

There’s a trend toward off-label use of ketamine to treat chronic depression and pain. What is your opinion of this application?

“There are ketamine clinics all over the place now. I think it works. I have seen colleagues in psychiatry who I admire using it and it works. The clinics are a little scary (to me) because not everybody might be doing a great job because it’s an off-label use. You should be careful if you’re thinking about using ketamine. You should try to find a place that you trust. As with any off-label use of anything I would be careful, but it seems to work. It seems to work very well acutely (in the short term). We don’t know if you can stay on ketamine forever like you can stay on antidepressants forever. We don’t know, but acutely it works great and it might save your life today. So when I said nothing has happened in the last 50 years in psychiatry, it may be that ketamine will be the next big thing after SSRIs 50 years ago. However, it should be done in consultation with your primary physician.”

Is the impulse switch that triggers suicide the same for those who are chronically depressed as it is for those who only attempt suicide following a sudden, traumatic event in their lives?

“We don’t know. I think they’re going to be overlapping. Depression is a chronic condition. It’s not something where you can say today I’m depressed, tomorrow I am not. An event can end up in depression over time, but it could be the event was a trigger for someone who was at high risk for depression already. It’s very hard to know. It’s very individual.”

Sometimes depression is easy to spot, but at the same time, it’s difficult to commit someone for treatment if they do not want it. Does this “Catch-22” present problems of its own?

“I’m glad we live in a society where nobody can commit anyone else. Sometimes we see a person and we think, ‘I wish I could commit this person, by force, and put them in the right place.’ But, I’m glad we can’t do that, because that’s been an awful thing throughout history. There was even a thing called ‘El barco de los...
Locos.’ They would take crazy people, put them in a boat, and send them out to the ocean to die. I think we’re much better as a society now, because of the fact that we cannot easily commit someone who might need help. Sure, sometimes you think, ‘Well, I know this person needs help, and they’re not accepting it, and they will end up dead.’ But I cannot just by force call the police to put them somewhere to save their life. I think I’d rather have that, than a society that allows someone to call the police just because someone is acting a little weird.

What does it say about a society that has sympathy for the cancer patient, but is dismissive or even demeaning toward people with mental health issues?

“Society has come a long way, but sadly, we have a long way to go. The stigma associated with mental health is a self-perpetrating problem. You have an illness, but you can’t talk about it because you feel horrible, and feel there’s no way out. You commit suicide because you can never talk about it, because society is not ready to deal with you. With depression, for example, how many times have you heard a person with depression being told to ‘just get up in the morning and face it?’ You would never tell somebody with a broken leg to go play soccer anyway. It’s exactly the same thing. If you’re depressed, it’s not that you don’t want to get up in the morning, it’s because you do need help. Just like the soccer player needs help with the broken leg before he can play again. It’s the same thing. We need to remember that.”

If you or someone you know is struggling with depression and suicidal ideations, there are many places to turn to for help. You can begin by calling National Suicide Prevention Lifeline: 1-800-273-8255.

Markdown representation:

**SUICIDE RATES & PREVENTION**

Locos.’ They would take crazy people, put them in a boat, and send them out to the ocean to die. I think we’re much better as a society now, because of the fact that we cannot easily commit someone who might need help. Sure, sometimes you think, ‘Well, I know this person needs help, and they’re not accepting it, and they will end up dead.’ But I cannot just by force call the police to put them somewhere to save their life. I think I’d rather have that, than a society that allows someone to call the police just because someone is acting a little weird.

What does it say about a society that has sympathy for the cancer patient, but is dismissive or even demeaning toward people with mental health issues?

“Society has come a long way, but sadly, we have a long way to go. The stigma associated with mental health is a self-perpetrating problem. You have an illness, but you can’t talk about it because you feel horrible, and feel there’s no way out. You commit suicide because you can never talk about it, because society is not ready to deal with you. With depression, for example, how many times have you heard a person with depression being told to ‘just get up in the morning and face it?’ You would never tell somebody with a broken leg to go play soccer anyway. It’s exactly the same thing. If you’re depressed, it’s not that you don’t want to get up in the morning, it’s because you do need help. Just like the soccer player needs help with the broken leg before he can play again. It’s the same thing. We need to remember that.”

If you or someone you know is struggling with depression and suicidal ideations, there are many places to turn to for help. You can begin by calling National Suicide Prevention Lifeline: 1-800-273-8255.
CLINICAL TRIALS

Should I Take Part in a Clinical Trial? Ask Your Doctor

BY BENJAMIN TREVIÑO

If your doctor has suggested you participate in a clinical trial, you might be worried that researchers in lab coats will poke and prod you, and treat you as little more than a scientific experiment. But the truth is clinical trials aren’t frightening at all, and the right clinical trial could give you access to a cure long before it becomes available to the general public.

“It’s not about experimenting on you,” said Dr. Sohail Rao, President and CEO of the DHR Health Institute for Research and Development. “It’s nothing short of receiving advanced clinical care. When everything else has failed, you can go on a clinical trial aimed at finding a solution for your disease.”

Established in March 2019, DHR’s Health Institute for Research and Development is designed to expand clinical research to a historically-underserved population. According to the Center for Information and Study on Clinical Research Participation, only about two percent of U.S. patients get involved with research studies each year. Hispanic participation is even lower at one percent. The disparity is important, because people of different races and ethnicities do not always respond in the same way to the same drug.

“Crestor is a perfect example,” noted Dr. Rao. “Many of us are taking Crestor, including myself, for managing the lipid profile. But, for six out of 10 African Americans, Crestor does not work. Hispanics need to get involved in clinical research, so that we can actually find a
solution that is tailored for this particular race, not just extrapolating what works in Caucasians, or what works in another race.”

The DHR Health Institute for Research and Development is the largest facility of its kind in the Valley, currently running 50 clinical trials in areas such as liver disease, oncology (cancer), rheumatology, cardiology, diabetes, obesity, trauma, and stroke. It has 27 industry partners such as Bayer, Pfizer, Amgen, and CATO Research, and 11 academic partners, including Harvard, Yale, MD Anderson Cancer Center, UTRGV, and DHR Health.

Clinical trials are designed to look at new ways to prevent, detect, or treat disease. Treatments might be new drugs or new combinations of drugs, new surgical procedures or devices, or new ways to use existing treatments. The goal of clinical trials is to determine if a new test or treatment works and is safe. Clinical trials can also look at other aspects of care, such as improving the quality of life for people with chronic illnesses.

Patients are subject to certain criteria in order to participate in a clinical study and each trial has its own requirements. Things like age, previous medications, blood pressure, and other factors are taken into consideration. The research clinic is like any other clinic, and most importantly, patients remain under the care and supervision of their primary physician.

“Doctors need not fear losing patients to the physicians administering the clinical trial,” emphasized Research Institute Vice President, Dr. Lisa Treviño, PhD. “That’s their biggest fear, but you keep your doctor. It’s just like visiting any other doctor’s clinic. It’s not some cold, sterile laboratory. There’s a reason that historically underrepresented populations don’t participate in clinical trials. There’s fear, maybe a lack of trust, language barriers, etc. Patients want a family’s blessing and participation, so we have to inform and educate everyone to make that decision.”

Most clinical trials are covered by private insurance as well as Medicare and Medicaid. Many patients are uninsured, but the trials are not restricted to the indigent population. Additionally, clinical trial patients receive a stipend for their participation.

“In other words, the stipend is offered as a ‘thank you,’ and to offset any expense the patient might incur,” said Dr. Treviño. “It can be used for gas, or for meals. Depending on the complexity of the study, they might get like $50 per visit extra that they would get as a gift card.”

Enrolling in a clinical trial begins with having a conversation with your physician or by sending an email to the DHR Health Institute for Research and Development. More information is available at the institute’s website: www.dhrresearch.org, or by calling (956) 362-2390. The institute is also found on Facebook, Linked In, and Twitter.

“You’ll be getting free treatment,” said Dr. Rao. “You’ll be doing good for yourself and your community. You’ll be looked after much better than with standard care. But more importantly, you may get access to a drug that can help you after others have failed, and you don’t have to leave the Valley. You can stay within your social network and continue to work with us.”
The ketogenic diet, or keto diet, is a low-carbohydrate, high-fat diet that offers rapid weight loss. Many studies have also shown the keto diet can also have health benefits for people with diabetes, cancer, epilepsy and Alzheimer’s disease. But there are also some negative side effects, so let’s look at some of the basics.

There are several types of ketogenic diet, including the standard, cyclical, and targeted keto diets. The information in this article mostly applies to the standard keto diet, but many of the same principles also apply to the other versions.

The ketogenic diet involves drastically reducing carbohydrate intake and replacing it with fat. This reduction in carbs puts your body into a metabolic state called ketosis.

“This diet teaches your body to produce ketones,” said Chrissy Guidry-Elizondo, a clinical dietician at Knapp Medical Center. “When this happens, your body is basically burning fat for fuel. So instead of burning the carbs that would normally be in a diet, you’re burning the fat that’s already in your body, excess fat stores.”

Foods that are reduced or eliminated on a ketogenic diet include:
- Grains
- Sugars
- Legumes
- Rice
- Potatoes
- Candy
- Juice
- Most fruits

The foods that you can eat are:
- Meat
- Fatty fish
- Eggs
- Butter and cream
- Cheese
- Nuts and seeds
- Healthy oils
- Low-carb veggies (tomatoes, onions, peppers, etc.)

“In the beginning, some people get a lot of fatigue, some brain flux just because they’re body isn’t used to burning fat for fuel,” said Guidry-Elizondo. “But once the body adjusts after a week or two then they start to normalize. It’s known as the keto flu. You feel fatigue, achy bones, and things like that. In the beginning, but then once you get over it you actually feel like you have a lot more energy.”

People on the keto diet often report bad breath once they reach full ketosis. This is caused by the elevated ketone levels. The specific culprit is acetone, a ketone that exits the body in your urine and breath.

“I did get that ketone smell,” said Myra Leticia Garcia, an Alamo nurse who periodically uses the keto diet to lose weight. “It’s kind of gross, but other than that and the cravings of the first three weeks, it’s a pretty good diet. I’ve never kept it up for more than five or six months. I go down to my ideal weight, stay there for a couple of months, then return to my regular diet. So to me it’s not really a long-term diet.”

The keto diet was originally designed for kids with epilepsy whose seizures were not well-controlled with medications. Studies have shown promise for the treatment of cancer, diabetes, and other illnesses, but results are not yet conclusive. The keto diet is not meant to replace conventional treatments for these diseases. As with any diet, the keto diet should be coordinated with the help of a physician and clinical dietician.

“The doctors are not always knowledgeable on the specific aspects of each diet,” cautioned Guidry-Elizondo. “The doctor can refer the person to the dietician and then the doctor will monitor the lab and blood work just to make sure that the lipid panel and the cholesterol panel and all of that isn’t going out of whack. You can’t go on it willy-nilly on your own and guess how to do it.”

The keto trend began a couple of years ago and doesn’t appear to be going away any time soon. When followed consistently for the short term with appropriate monitoring, it can lead to weight loss. Further research is required to highlight potential treatments for disease and any possible health problems associated with the keto lifestyle. Always refer to your doctor before beginning a new diet or lifestyle plan.
Why Are Food Allergies on the Rise?

Hosting a party or a special event where food will be served has become a bit more complicated over the last several years, as hosts must now contend with food allergies when planning party menus.

According to Food Allergy Research and Education, a group that works on behalf of the millions of people who have food allergies, a food allergy is a medical condition in which exposure to a food triggers a harmful immune system response. Allergies can range from mild reactions to death. Life-threatening reactions can be initiated even by small traces of the trigger foods. In August 2018, a six-year-old girl in western Australia died as a result of a dairy allergy. In 2016, Natasha Ednan-Laperouse collapsed on a flight from London to Nice after eating a baguette in which sesame seeds were not listed on the food label.

Data from the U.S. Centers for Disease Control and Prevention indicates that the prevalence of food allergies in children increased by 50 percent between 1997 and 2011, and it continues to rise. The CDC estimates that one in 13 children in the United States now has a food allergy. Food allergies also affect roughly 7 percent of children in the United Kingdom and 9 percent of children in Australia.

While no one can answer why food allergy rates are increasing, researchers have been working hard to figure that out. A number of agencies, including the U.S. Food and Drug Administration, are looking into the “hygiene hypothesis.” This is a link to western society’s obsession with preventing and fighting germs. Researchers surmise that a lack of exposure to infectious agents early in childhood could create a situation in which a child’s immune system mistakes a food protein as an invading germ, launching an attack. According to Dr. Leigh Vinocour of the American College of Emergency Physicians, being too clean may be leading to a rise in allergic reactions.

Another theory is that the overuse of antibiotics and acid-reducing medications could change the microbiome of the stomach and digestive system, potentially resulting in health-related problems like allergies.

Some other health experts say that failure to introduce common food allergens to children early in life could set them up for a lifetime of food allergies later. Dr. Adam Fox, a consultant pediatric allergist at Guy’s and St. Thomas’ hospitals in Great Britain, suggests that if parents introduce something into a young child’s diet, then the child is less likely to become allergic to it. For example, Dr. Fox cites a 2008 study of the prevalence of peanut allergies in Jewish children in the UK, where the advice had been to avoid peanuts, was 10 times higher than that of children in Israel, where babies are often given peanut snacks and peanut allergy rates are low.

Many other doctors believe food allergies are still a mystery. Dr. R. Sharon Chinthrajah of the Sean N. Parker Center for Allergy and Asthma Research at Stanford University believes the cause of allergies will ultimately come down to a combination of many factors. Environmental exposure and even what mothers ate during pregnancy could have implications. Until more is learned, people must remain careful of the foods they eat and serve.
Cataracts

Cataracts are the most common cause of vision loss among people age 40 and older. According to All About Vision, cataracts also are the principal cause of blindness in the world.

There are more cases of cataracts worldwide than there are glaucoma, macular degeneration and diabetic retinopathy, states Prevent Blindness America. Fortunately, cataracts are easily recognized and treated.

What are cataracts?

A cataract is a clouding of the lens in the eye that affects vision. The lens is the clear part of the eye that helps focus light and images on the retina. The lens must be clear to receive a sharp image. If the lens is cloudy, vision will be blurred.

Cataracts tend to form slowly. Initially, they only affect a small part of the lens, and they are not very bothersome as a result. However, over time, cataracts can grow and impair vision. Seeing halos around lights, fading of colors, sensitivity to light, glare, and the need for brighter light for reading and handling tasks are common symptoms.

What causes cataracts?

Various things, including aging or injury to the eye tissue, can cause cataracts. Prior eye surgery, diabetes, long-term use of steroid medications, and inherited genetic disorders also can cause cataracts, says the Mayo Clinic. Smoking and alcohol use as well as consistent exposure to UV sunlight also may contribute to the formation of cataracts. With aging, the lenses in the eyes become less flexible, less transparent and thicker. Tissues within the lens can break down and clump together, clouding small areas within the lens of the eye, thereby forming a cataract.

Cataracts may be a subcapsular cataract, which occurs at the back of the lens. A nuclear cataract forms in the center of the lens. A cortical cataract starts in the periphery of the lens and works its way inward to the center.

Treating cataracts

Cataracts need only be treated if they are affecting vision severely or preventing examination or treatment of another eye problem. An eye care professional will discuss with patients if surgery is needed.

The National Eye Institute says surgery is safe and effective. In roughly 90 percent of cases, people who have undergone cataract surgery have better vision afterward. The surgery involves removing the clouded lens and replacing it with a clear, artificial one. The procedure is usually done on an outpatient basis and patients typically stay awake during the surgery.

Routine eye examinations are a key part of an overall health plan. They can shed light on the formation of cataracts and help people develop effective treatment plans.
How to Stay Flexible as You Age

Men and women may begin to feel less flexible as they get older. According to the University of Maryland Medical Center, that loss of flexibility is because muscles lose both strength and elasticity as the body ages.

A lack of flexibility can make men and women more vulnerable to certain types of injuries, including muscle strains and tears. While people might not be able to maintain the flexibility they enjoyed in their twenties, there are ways for them to combat age-related loss of flexibility.

• Stretch frequently. Stretching is a great way to combat age-related loss of flexibility. Stretch major muscle groups, such as hamstrings and shoulder muscles, several times per week. When practicing static stretching, the goal is to gradually elongate the muscle being stretched before holding the elongated position, and ultimately allowing the muscle to return to resting position. As flexibility improves, elongated stretches can be held for 30 seconds. Avoid stretching muscles that are sore or injured, and discontinue a stretch if you feel pain or discomfort.

• Include yoga in your exercise regimen. Practitioners of yoga typically love how this unique discipline that exercises the body while relaxing the mind improves their flexibility. Many yoga poses are designed to improve the strength and flexibility of muscles, and some physicians may even recommend yoga to aging patients. Yoga DVDs or streaming sessions can be great, but beginners may want to visit yoga studios or sign up for classes at their gyms so instructors can personally ensure they are doing each pose correctly. As their flexibility improves, men and women can try more difficult poses and classes if they so desire.

• Get in the pool. Swimming is another activity that can help aging men and women improve their flexibility. Strength-training exercises are an important component of a well-balanced exercise regimen, but such workouts tend to focus on one or two muscle groups at a time. That means other muscle groups may be inactive and tighten up as a result. Swimming works the entire body, which helps all muscle groups stay loose and flexible. One or two swimming sessions per week can contribute to great gains in overall flexibility, especially for men and women who remember to stretch when they get out of the pool.

Flexibility may decrease as men and women age, but there are various ways to combat the natural loss of flexibility.
Simple Ways to Incorporate More Fruits and Veggies into Your Diet

Eating Fruits and Veggies

Parents imploring their children to eat their fruits and vegetables is a nightly occurrence at many dinner tables. Reluctant youngsters may have a seemingly innate resistance to vegetables, but parents should stay the course, as the importance of making fruit and vegetables a routine part of one’s daily diet is hard to overstate. Children might be seen as the most resistant to fruits and vegetables, but reports indicate they’re not alone. A 2017 report from the Centers for Disease Control and Prevention found that just 12 percent of adults in the United States are meeting the standards for fruit consumption as established by the Dietary Guidelines for Americans, which are determined by the Office of Disease Prevention and Health Promotion. Even fewer people (9 percent) are meeting the standard for vegetables. The picture is somewhat better in Canada, where the Canadian Community Health Survey, 2017, found that 28.6 percent of Canadians age 12 and older report consuming fruits and vegetables more than five times per day. However, that figure steadily declined since 2015. That’s unfortunate, as fruits and vegetables have been linked to a host of health benefits.

Why eat fruit and vegetables?
The U.S. Department of Agriculture notes that fruits do not contain cholesterol and are naturally low in fat, sodium and calories. In addition, fruits contain a host of essential nutrients, including potassium, dietary fiber, vitamin C, and folate, that are historically underconsumed. Similarly, studies have shown that vegetables, which also are great sources of vitamins and minerals, can help people reduce their risk for a variety of conditions, including heart disease, stroke and certain types of cancer.

How can I include more fruits and vegetables in my diet? Routine is a big part of many people’s lives, and some may find it hard to change their dietary routines. But people who aren’t eating enough fruits and vegetables likely don’t need to completely overhaul their diets in order to include more fruits and vegetables. In fact, the American Heart Association notes that the following are some easy ways for people to sneak more fruits and vegetables into their diets.

• Breakfast: When sitting down for a bowl of cereal, add some bananas, raisins or berries to your bowl. When making eggs or breakfast potatoes, add chopped up onions, celery, green or red bell peppers, or spinach.

• Lunch: Forgo sandwiches in favor of fruit or vegetable salads at lunchtime. If you must have a sandwich, top it off with vegetables like cucumbers, sprouts, tomatoes, lettuce, and/or avocado.

• Dinner: Replace less healthy side dishes with fruit or vegetable salads, and don’t forget to include steamed vegetables, even frozen ones, on your dinner plate every night. Add chopped vegetables, such as onions, garlic and celery, when creating soups, stews or sauces.

A few simple strategies can help people eat more fruits and vegetables and reap the many rewards that such foods provide.
Diabetes diagnoses are on the rise, and the numbers are jaw dropping. According to the World Health Organization, the number of people with diabetes totaled 108 million in 1980. By 2017, the International Diabetes Foundation was reporting that figure had risen to 425 million adults, with estimates that it may be as high as 629 million by 2045.

Diabetes is not just a global health issue, but a financial concern as well. The IDF reported that diabetes caused at least $727 billion in health expenditure in 2017.

Despite its prevalence and the financial toll it takes on families across the globe, many people, including parents, admit they are in the dark about warning signs of diabetes. In fact, in 2018 researchers with the IDF released a report indicating that four in five parents have trouble recognizing the warning signs of diabetes. That can be detrimental to their own health as well as the health of their children.

The National Institute of Diabetes and Digestive and Kidney Diseases notes that symptoms of type 2 diabetes, which is the most common form of the disease, often develop slowly and can be so mild that people do not notice them. However, people who notice any of the following symptoms should discuss them with their physicians immediately:

- increased thirst and urination,
- increased hunger,
- fatigue,
- blurred vision,
- numbness or tingling in the feet or hands,
- sores that do not heal, and
- unexplained weight loss.

Parents who notice their children exhibiting any of the above-mentioned symptoms should ask their youngsters if they are feeling unusual in any other ways, as kids may not think to report symptoms to their moms and dads. In addition, parents should call their children’s pediatricians if they notice any symptoms that may be indicative of diabetes.

Much is still unknown about diabetes, including, in certain instances, its causes. For example, the NIDDK says that scientists think that type 1 diabetes is caused by genes and environmental factors, including viruses, that may trigger the disease. Research as to the potential causes of type 1 diabetes is ongoing.

Lifestyle factors and genes play a role in the formation of type 2 diabetes. For example, being overweight, obese and physically inactive are factors that increase a person’s likelihood of being diagnosed with type 2 diabetes. Therefore, a healthy diet and routine exercise can be great ways for people to reduce their risk for type 2 diabetes. Insulin resistance, genes and family history are some additional factors that scientists have linked to type 2 diabetes.

Diabetes diagnoses are on the rise across the globe. More information about diabetes is available at www.niddk.nih.gov.

A nutritious diet can help people maintain healthy weights, potentially lowering their risk for diabetes as a result.
HANDWASHING

How Handwashing Helps Fight Infection

There are many ways to avoid infection, but few might be as simultaneously simple and effective as handwashing.

According to the Centers for Disease Control and Prevention, keeping hands clean is one of the most important steps a person can take to avoid getting sick and spreading germs to others. While skeptics might question just how big an impact handwashing can have, the science behind washing hands paints a pretty strong picture of just how beneficial this particular component of personal hygiene can be.

How germs get you sick

The CDC notes that feces from people and animals are considerable sources of germs, including salmonella and E. coli. These germs can get onto people’s hands after they use the toilet or change a diaper. People who handle raw meats also be exposed to such germs, as these foods can contain invisible amounts of animal feces on them. The amount of germs contained in small amounts of feces may come as a shock. Research published in the journal Applied and Environmental Microbiology found that a single gram of human feces weighing about as much as a paper clip can contain one trillion germs.

What does handwashing do?

With so many germs floating around, it may seem as though something as simple as handwashing couldn’t be nearly as effective as it’s said to be. But the CDC notes that handwashing removes germs from hands, thereby removing an easy way for germs to enter the body and be passed on to others. For instance, many people habitually touch their eyes, nose and mouth without thinking twice, and doing so provides an easy way for germs to enter the body via the hands. By washing their hands, people can cut off this easy entryway for germs.

Handwashing also presents germs from entering the body while eating. Germs from unwashed hands can get into people’s food and drinks, and can even multiply in some foods and beverages, potentially contributing to illness.

Washing hands also prevents the spread of germs by preventing them from being transferred from hands to handrails, table tops or toys, where they can then spread to other people’s hands.

Handwashing is a simple yet effective way to stop the spread of germs. And it just might be the simplest way to avoid illnesses.
GET YOUR FACTS HERE...

Don’t rely on word of mouth for your information. Turn to The Monitor for accurate, complete, up-to-date coverage of local, state, national and international news, sports, entertainment and more... anywhere, anyhow and anytime.

REAL REPORTING IN-PRINT & ONLINE

The Rio Grande Valley’s Leading Source for All Your Local News & Sports!
DHR Health
Advancing the Health of the Rio Grande Valley.

DHR Health is deeply committed to advancing the health of our community. We are 700 physicians, 1,200 nurses, researchers, and educators using innovative medicine and the most advanced technology to offer world-class health care, here at home.