

HOT SPRINGS VILLAGE AREA

Medical Directory 2022

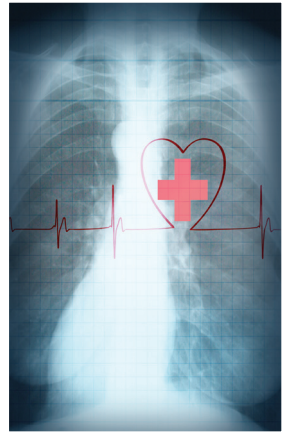
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Age-based health screening guidelines

Early detection is crucial to overcoming serious illnesses. Preventive care is something parents prioritize when raising children, but it's a crucial component of healthy living as an adult as well.

Health professionals recommend various age-specific screenings and tests, and these can serve as a guideline for individuals as they navigate adulthood. The following age-specific health screening recommendations, courtesy of Beaumont Health and Columbia Doctors Primary Care, can serve as a preventive care guideline,

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though doctors may advise patients to get more frequent screenings depending on their medical histories.

18 to 39 years old

- **Cholesterol:** A cholesterol check should occur around age 20, then every five years until age 35. Afterward it can occur annually.
- **Skin screening:** An annual full body screening will identify any suspicious moles or skin lesions.
- **Cervical cancer:** Women in this age range should receive a Pap smear every three years and an annual pelvic exam.
- **Breast exam:** Self-examination of the breasts and examination by a clinical provider should take place every year.
- **Testicular exam:** Men should conduct self exams for testicular abnormalities. Doctors may examine the testicles during annual physicals as well.
- **Tdap vaccine:** All adults should get the Tdap vaccine if they did not receive it as an adolescent to protect against pertussis, and then a Td (tetanus, diphtheria) booster shot every 10 years.

• **HPV vaccine:** The human papilloma virus vaccine is recommended if you did not receive it as an adolescent.

40 to 64

- **Zoster (Shingles) vaccine:** Two doses of this vaccine will be administered between two and six months apart starting at age 50 and up.
- **Colorectal screening:** A colonoscopy to detect

any colorectal illnesses is recommended beginning at age 50.

- Prostate screening: Prostate screenings begin at age 50 unless you are a high-risk individual, in which case screenings begin at age 40.

- Osteoporosis: Doctors may recommend a bone density test and osteoporosis screening at age 50 and up if certain risk factors are present.

- Lung cancer screening: If you are a past or current smoker, it's wise to have an annual lung cancer screening. The American Lung Association says adults age 55 and up can have this screening covered by health insurance.

- Mammogram: Women should begin receiving annual mammograms at age 40.

65 years and older

- Cervical cancer: Most women can stop getting Pap smears at this age if they have no history of cervical cancer. Women who have had a hysterectomy may no longer need pelvic exams after age 65.

- Pneumococcal and pneumonia vaccines: These are recommended every five years for certain conditions and risk factors.

- Cognitive health: Doctors may assess your cognitive health to see if there are any risk factors for dementias.

In addition to these screenings, doctors may conduct annual depression screenings to assess mental health. Routine blood glucose monitoring may be necessary based on risk factors for diabetes.

Individuals are urged to speak to their doctors to map out a health screening schedule specific to their needs.

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How to reduce risk of breast cancer recurrence

A breast cancer diagnosis can change patients' lives in ways they never imagined. That's especially so in the rare instances when women under 40 are diagnosed with the disease.

According to the American Cancer Society, it's uncommon for women under 40 to receive a breast cancer diagnosis. In fact, data from the ACS indicates that only about 4 percent of all women diagnosed with breast cancer in the United States are under age 40. But 4 percent is nothing to brush aside, especially when the ACS estimates that more than 300,000 women in the United States are diagnosed with breast cancer each year. That means roughly 12,000 women under 40 in the U.S. will be diagnosed with breast cancer this year, and many of those women will understandably express concerns about cancer recurrence in the years to come.

The medical experts at Johns Hopkins Medicine note that learning to cope with fears of breast cancer recurrence is an important part of the recovery process. Those same experts note that various lifestyle changes can help women regain their health, strength and optimism and quell any fears they have about cancer recurrence.

- Take care of yourself, both emotionally and physically. Johns Hopkins Medicine urges breast cancer survivors to put their own needs first sometimes. That can be difficult for younger breast cancer survivors with children at home, but prioritizing their own emotional well-being can help women overcome their fears of recurrence. Support groups can

connect women with fellow breast cancer survivors, and women should not hesitate to discuss any fears or concerns with their doctors. It's also vital that women prioritize their physical well-being. Routine exercise and a healthy diet can help women reduce stress and maintain a healthy weight, which can reduce risk for recurrence.

- Stay on top of screenings and vaccinations. Another way to reduce the risk of cancer recurrence is to stay up-to-date on screenings, flu shots and vaccinations. Annual physicals and screenings for cardiovascular conditions like high cholesterol and diabetes can help women stay on a healthy path forward.

- Monitor vitamin D levels. Johns Hopkins Medicine notes that the Nurses Health Study found a link between low levels of vitamin D and breast cancer incidence. It remains unknown if vitamin D supplements can lower risk of breast cancer recurrence, but maintaining sufficient levels of vitamin D can promote overall health.

Women can speak with their physicians about vitamin D and which supplements to consider. In addition, spending 20 minutes per day in the sunshine while wearing sunscreen with a minimum SPF of 30 can help women reach recommended levels of vitamin D.

Cancer recurrence is a significant concern for survivors. However, various strategies can help women reduce their risk for recurrence and help them regain their optimism for the future.

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What seniors should know about herbal medicines

A lifelong commitment to healthy living can improve life expectancy and quality of life while reducing a person's risk for various conditions and diseases, including cancer and heart disease.

Healthy lifestyle choices like eating a nutritious diet and exercising regularly can greatly reduce a person's risk for various ailments, but such choices don't eliminate that risk entirely. As a result, even health-conscious men and women may need to rely on medication to stay healthy. That's especially true for seniors since age is a risk factor for various conditions.

A 2014 analysis that appeared in the Archives of Gerontology and Geriatrics examined nearly 1,300 published articles that focused on the use of herbal supplements by elderly patients. Though only 16 of those articles met the researchers' criteria, the analysis concluded that herbal supplement usage is common among elderly patients, as was a lack of dialogue about such supplements between medical professionals and seniors.

What are herbal medicines?

The National Health Service of the United Kingdom, a widely respected and publicly funded health care system, describes herbal medicines as those with active ingredients made from plant parts like leaves, roots or flowers. Because herbal medicines are made from plant parts, many people assume they're safe to take without consulting a physician. However, the NHS urges people to treat herbal medicines with the same care and respect as they would more

conventional medicines. Herbal medicines can affect the body in various ways. A frank discussion with a physician can shed light on the potential side effects of herbal medicines and whether or not they're safe.

Why should seniors be concerned about herbal medicines?

The NHS notes that seniors taking other medications may experience problems if they begin taking herbal medicines as well. The National Center for Complementary and Integrative Health, which is part of the U.S. Department of Health and Human Services, notes that more well-designed studies are necessary to fully evaluate interactions between herbal medicines and prescription drugs. However, the NCCIH notes that some evidence points to some harmful effects of mixing the two. For example, the NCCIH reports that prolonged exposure to concentrated garlic extracts may reduce the efficacy of some drugs. The potential for these types of interactions should be enough to compel seniors to think twice before taking herbal medicines without first consulting their physicians. In addition, the NHS has developed a list of various types of people for whom herbal medicines may not be suitable, and that list includes the elderly.

Seniors considering herbal medicines should discuss the pros and cons of such products with their physicians prior to taking anything.



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