

Prince Hall Masonic Journal

Most Worshipful Prince Hall Grand Lodge Free & Accepted Masons, State of Illinois

Special Health Care Reader

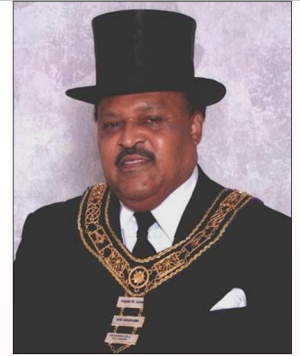
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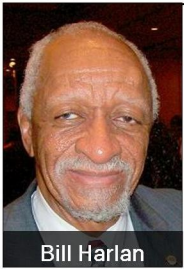
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The Prince Hall Masonic Family annually promotes health awareness across the State of Illinois including Blood Drives with the American Red Cross, participation at health fairs across the state and through self-organized affairs. As our family maintains a constituency of thousands, it is in our best interest to continue along this path if we, as an organization, wish to continue to smell those Summer flowers for years to come. - *Daryl Andrews, Editor*



Letters Out of Order

We learned our alphabets at an early age. We even used a tune to assist us in the learning process. Finally we had them. We could say the alphabet from any given letter without hesitation. We took pride in helping our children learn theirs. We could even be called "alphaserts," an--expert with the alphabet.

Then came the late 70s and early 80s when the corporate world introduced us to letters from the alphabet out of sequence - RIF. What is it? Is it an acronym? Do we say each letter? Who does it affect? We soon found out that those were letters to fear because they meant Reduction In Force...an old fashioned layoff...we don't need you anymore. A new cute way of saying you don't have a paycheck anymore.

Twenty-six weeks and thirteen additional weeks of unemployment are not enough to carry COBRA and allow you to do all the necessary things for your family. So, in effect, you and your family are without insurance for the first time since you left the comfort of your mother and father's umbrella. A feeling of despair...of frustration...of emptiness...of helplessness...of desperation...of anger...of loneliness...and some feelings without description seem to permeate every cell of your body. The once bright future begins to look bleak. Those once high spirits are looking up at the curb.

Did God fail me? Nooo, 'cause I still have my health and strength....aaaaahhh, so that's what this is about H E A L T H (Insurance). What will I do if a family member gets sick or has an accident and what is even more scary is what if I get sick or have an accident? That's the genesis of those awful feelings. Well, that's the end of my yearly checkups for me and my family. I shall have to pray harder for continued good health.

I have to fight those little aches and pains that I used to get checked out by a health professional, now I have to rely on home remedies and grandmother's wit. How do I put that on the school record for my kids? Maybe I can let my brother, who has a great job at General Motors, claim them. This is a real dilemma. This is a real source of stress. I now have to act like I'm healthy and not complain.

Somehow I seem to have more aches and pains than before, but I don't have a doctor anymore, so for this tightness in my chest I'll just drink some warm baking soda water and hope it goes away. That constant sharp pain in my left arm I'll treat with Ben-Gay. Oh yea, another thing for that tightness in my chest I'll also drink some room-temperature ginger ale hoping for a big burp to get some relief. Gee whiz, I'd better cut down on my water intake so I can stop urinating so much. Lately, it has not only been frequent but a little painful and increasingly slow. I wish I still had a doctor so I could get these things checked out. I haven't had a checkup in a little over three years.

I hope there's a sale soon at Walgreens so I can pick up some Advil or Tylenol and maybe get some relief from these pounding headaches every time I bend over. I hope all of this passes real soon and I can get back to feeling normal again. Wow, I think things are getting a bit bad for me because it takes me so long to urinate. Seems like it comes out in slow motion. Comes out so slowly that I have to pretend that I need to have a movement as my excuse to use a stall and sit.

Things went dim then black. I woke up in a strange place which I later found to be County Hospital. County Hospital!!!! I felt shame coming over me. I want to get up and go away. How could I when I had tubes tied to me and I felt too weak to walk anyway. My blood pressure was elevated and my blood sugar was 520—Diabetes? They told me my prostate was enlarged and my PSA was almost off the chart—Prostate Cancer? I thought all of this could have been prevented if those out of place alphabets hadn't become a part of my life over seven years ago.

I wish I could get transferred to Rush or Northwestern or Loyola, why County....

Epilogue: Stroger County Hospital trains some of the best doctors in the country. It has a Burns Unit that is rated one of the top five in the United States. The last two Presidents including the current President has Stroger Hospital as their hospital of choice when in Chicago. Their Trauma Unit has a reputation for saving lives by saying if you can get to their unit alive you have a 96% chance of surviving.



Okey Enyia

Diabetes & Prostate Cancer

About 16 million people in the United States have diabetes mellitus, a serious, life-long disorder that is, as yet, incurable. About one-third of these people do not know they have diabetes and are not under medical care. Each year, approximately 600,000 people are diagnosed with diabetes. In Illinois, approximately 500,000 persons 18 years of age and older have diagnosed diabetes. Individuals with

diabetes are at increased risk for heart disease, blindness, kidney failure and lower extremity amputations not related to injuries. Diabetes and its complications occur among Americans of all ages and racial and ethnic groups. The burden of the disease, however, is heavier among the elderly and certain racial and ethnic populations, including African Americans, Hispanics/Latinos, American Indians, Asian Americans and Pacific Islanders.

What is diabetes? The term diabetes refers either to a deficiency of insulin or to the body's decreased ability to use insulin. Insulin, a hormone secreted by the pancreas, allows glucose (sugar) to enter body cells and be converted to energy. It also is needed to synthesize protein and to store fats. In uncontrolled diabetes, glucose and lipids (fats) remain in the bloodstream and, in time, damage the body's vital organs and contribute to heart disease. There are two main types of diabetes—non-insulin dependent (type-2) and insulin dependent (type-1). **Non-insulin dependent diabetes**, which usually appears after the age of 40, is the most common type, affecting 90-95% of those who have the disease. **Insulin-dependent diabetes** affects the remaining proportion of those with the disease. Although this type of diabetes can occur at any age, it most often appears in childhood or during the teen years.

What are the signs of diabetes and who is most at risk for developing diabetes? The signs of diabetes are frequent thirst, constant urination, unusual hunger, rapid loss of weight, and obvious weakness and fatigue. The following have a greater risk of developing non-insulin dependent diabetes:

- ◆ *Those with a family history of diabetes;*
- ◆ *Individuals who are obese (20% or more over ideal body wt.);*
- ◆ *Members of certain racial or ethnic groups. Those who are more likely to develop diabetes are Mexican and Puerto Rican American (twice as likely), African American (1.6 times) and Cuban American (1.5 times);*
- ◆ *Those who are 45 years of age and older;*
- ◆ *Those previously identified with impaired glucose tolerance;*
- ◆ *Individuals with hypertension or who have excessive levels of fat in their blood (hyperlipidemia);*
- ◆ *Women who have a history of gestational diabetes during pregnancy or who have delivered babies weighing more than 9 lbs.*

Can diabetes or the complications of diabetes be prevented? Non-insulin dependent diabetes often can be prevented through a healthy diet and physical activity. A number of studies have confirmed that regular exercise can prevent this type of diabetes. A clinical study conducted by the National Institute of Diabetes and Digestive and Kidney Disease showed that keeping blood sugar levels as close to normal as possible slows the onset and progression of eye, kidney and nerve diseases caused by diabetes. The study concluded that lowering blood sugar levels reduces the risk of eye disease by 76%, of kidney disease by 50%, of nerve disease by 60% and of cardiovascular disease by 35%.

What is a good blood sugar level? Everyone has sugar in his or her blood. A good blood sugar range for most people with diabetes is from about 70 to 150. This is before a meal, such as breakfast, or four to five hours after a meal. Blood sugar should be less than 200 about two hours after your last meal. Remember, everyone is different. A good blood sugar range for one person may not be the best for another.



Ask your physician what the best blood sugar range is for you.

What is the best way to maintain a good blood sugar level? There are some things you can do every day to maintain a good blood sugar level and to stay healthy:

- ***Eat healthy food.** People with diabetes do not need special foods. Foods on your diabetes meal plan are good for everyone in the family. Try to eat foods that are low in fat, salt and sugar and high in fiber, such as beans, fruits and vegetables, and grains. If you use insulin, be sure to take it before you eat, eat at about the same time, and do not skip meals.*
- ***Exercise regularly.** Exercise is good for your diabetes. Walking, swimming, dancing, riding, playing baseball and bowling are all examples of good ways to exercise. Try to exercise regularly, at least three times a week for about 30 to 40 minutes each time. If you have not exercised in a while, begin slowly and gradually increase intensity and duration. Before beginning any exercise program, be sure to check with your physician.*
- ***Take your diabetes medicine.** Insulin and diabetes pills are the two kinds of medicines used to lower blood sugar. If you take insulin, your physician will tell you what kind to use, how much and when to give yourself a shot. Your physician or diabetes educator will show you how and where to give yourself a shot. Always use your own needles and never share them with anyone else. If you take diabetes pills, ask your physician when to take the pills. Remember, these pills do not lower blood sugar all by themselves. You will still have to follow your diet and exercise to lower your blood sugar. If you do not use insulin or take diabetes pills, follow your physician's advice about eating and getting enough exercise.*
- ***Test your blood sugar.** Ask your physician how often and when you should test your blood sugar. To test your blood, you need a small needle called a lancet, special blood testing strips and a glucose monitor (a special electronic device used to test for blood sugar). Your physician or a nurse can show you how to test your blood and give you information on glucose monitors. Two other tests can help you keep track of your blood sugar. You may need a urine test when you are ill or if your blood sugar is above 240 before eating. This test will tell you if you have ketones in your urine. Ketones are present when there is not enough insulin in your blood; they can make you very sick. Call your physician immediately if you find ketones in your urine. The hemoglobin A1c test shows what your average blood sugar was for the past three months. Ask your physician for this test every six months.*



The Prince Hall Masonic family participated in the American Cancer Society Walk & Roll—Photos by LaMonte Wilson, #14.

Prostate cancer is the most common type of cancer diagnosed in American men (excluding skin cancer). Approximately one I of every 6 American men will develop prostate cancer in his lifetime. In 2003, 8,245 Illinois men were diagnosed with new cases of prostate cancer. About 63% of these cases were in men 65 years of age and older. In Illinois, 1,234 men died as a result of prostate cancer in 2003. About 93% of these deaths were in men 65 years of age and older. In 2006 in Illinois, an estimated 8,470 new cases of invasive prostate cancer will be diagnosed and approximately 1,310 men will die from the disease. African-American men have a 51% higher rate of prostate cancer than white males and have the highest incidence rates in the world. It is the third leading cause of cancer death in men, exceeded only by lung and colorectal cancer.

What is Prostate Cancer? Most cancers are named after the part of the body where the disease first develops. Prostate cancer starts in the prostate gland, a walnut-sized sex gland. **ONLY MEN GET PROSTATE CANCER.** In its early stages, the disease stays localized (in the gland) and does not endanger life. Without treatment, however, the cancer can spread to other tissues and eventually cause death. Most of the time, prostate cancer grows very slowly. But sometimes it can grow quickly and spread to other parts of the body. This is more common in younger men.

What Causes Prostate Cancer? The causes of prostate cancer are not yet known. There may be a certain genetic link that causes some men to develop the disease. Having certain genes, the basic units of heredity, in a family can result in a higher risk of getting prostate cancer. It is known that certain risk factors heredity, in a family can result in a higher risk of getting prostate cancer. It is known that certain risk factors are linked to prostate cancer. (A risk factor is something that increases a person's chance of getting a disease.) Some risk factors, such as smoking, can be controlled. Others, like a person's age or race, cannot be changed. While all men are at risk for prostate cancer, the following factors can increase the chances of developing the disease.

- ◆ **Age:** The chance of developing prostate cancer increases greatly after age 50. About 70% of all prostate cancers are diagnosed in men older than 65 years of age.
- ◆ **Race:** Prostate cancer is more common among African-American men than white American men.
- ◆ **Diet:** Several studies suggest that men who eat a lot of fat in their diet have a greater chance of developing prostate cancer.
- ◆ **Family:** Men with close family members who have had prostate cancer are at higher risk.

It is important to remember that while these factors may increase the risk of developing the disease, they do not cause prostate cancer. Many men with these risk factors never develop prostate cancer; other men with this disease have no known risk factors.

How is prostate cancer diagnosed? Screening procedures can detect prostate cancer in its earliest stages. Most cases of early prostate cancer cause no symptoms and are detected only by a screening examination. The best way to find prostate cancer is to have a prostate-specific antigen (PSA) blood test and a digital rectal exam (DRE) performed. Some prostate cancers may be detected during evaluation of symptoms such as a slow, interrupted or weakened urinary stream or the need to urinate more often. Symptoms of advanced prostate cancer include impotence, blood in the urine, swollen lymph nodes in the groin area and pain in the pelvis, spine, hips or ribs. These symptoms can be present with other diseases, however. If your physician suspects prostate cancer after doing a DRE or if your PSA level was high, the next step would be to do a sonogram (ultrasound) and perhaps a biopsy. A biopsy is the only way to know for sure if you have prostate cancer. If prostate cancer is diagnosed, your physician may suggest more tests to find out the extent of the cancer and to plan treatment. All men 50 years of age and older should ask their physicians about having the PSA test and a DRE every year. African Americans and men with close family members who have had prostate cancer should talk to their physicians and discuss the risks and benefits of early detection when they are 40 years.

Can Prostate Cancer Be Prevented? So little is known about exactly what causes prostate cancer, it is not possible to make recommendations about preventing the disease. Many factors influencing a man's prostate cancer risk (e.g., age, race, and family history of the disease) are beyond his control. One important risk factor that can be changed is diet. A low-fat diet is associated with a reduced risk of prostate cancer. The American Cancer Society recommends limiting intake of high-fat foods from animal sources and choosing most foods from plant sources. Eat five or more servings of fruits and vegetables each day. Bread, cereals, grain products, rice, pasta and beans also are recommended. An overall healthful approach to eating also helps to lower the risk for other types of cancer. The best protection against prostate cancer is to have regular medical checkups that include a thorough prostate exam. Regular checkups are important for all men.

Awareness Efforts of the Order Today

Eureka Grand Chapter Order of the Eastern Star continues to play an active role in promoting healthy living and supporting regular medical examinations among the Prince Hall Masonic Family through its Annual Health Fair at the Grand East.

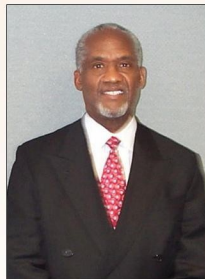


Our proud Worthy Grand Matron, Sis. Shalonda F.W. Patterson enjoys the affair (left) as Sisters Kelli Collins and Melissa Jones promote healthy eating (right).



A wealth of information was available at the affair (left) as well as physical examinations. Sis. Donna Alexander receives a free Chiropractic exam (right).

Coordinated by Brother Ray Willis of Plumblin Lodge #116, the Prince Hall Masonic Family participated in the Free Health and Fitness Experience for African American Men held at Malcolm X College in Chicago on Saturday, June 14th. The Fair is sponsored annually by the Thapelo Institute, Inc. and 2008 was the second year in a row of Grand Lodge participation. The Grand Lodge sponsored a table at the affair to provide information on our organization and obtain information to bring back to the craft. The fair offered free testing for HIV/AIDS, High Blood Pressure, Diabetes, Prostate Cancer, Cholesterol, Kidney Disease and other screenings as well as seminars, food samplings and exercise demonstrations designed to promote healthy living for African American men. As such this affair proves to be a very beneficial tool in helping our organization which consists primarily of African American Men to live better lives.



Visit www.Thapelo.org for more information.



The American Cancer Society (ACS) Walk & Roll is a 5-mile walk, 10-mile skate and 15-mile bike ride to raise funds and awareness for the fight against cancer. As several in the Masonic Family have been affected by the disease, two Worshipful Masters were prompted to organize a collective effort to support the ACS. Commentary from Worshipful Brothers Lawrence Walker of Cornerstone #91 and Lewis Maxwell of Richard E. Moore # 109 was captured by Sister Aisha Ato, #90:

What made you want to organize this for all of the Illinois Prince Hall Masonic Family?

- ♦ *Walker* – “We should do more charity together. Since we (socialize) together we should be able to volunteer together. Our focus being Faith, Hope, and Charity we know collectively we can do more.”
- ♦ *Maxwell* – “We felt it would be a good idea to wear something show that the Prince Hall Masonic Family is working together on this.”

Was it difficult to arrange, the walk and the apparel?

- ♦ *Walker* – “Once approval was granted to use the PHFamily name from the Grand Master it was easy to arrange, difficult to get participation.”
- ♦ *Maxwell* – “No difficulties with the shirts/hats... We brainstormed to come up with the style and colors.”

What can be done to get more participation?

- ♦ *Walker* – “More meetings could have been held and we hope more Worshipful Masters will get their Lodges involved.”

Could you share with me the plan for next year?

- ♦ *Maxwell* – “Plan earlier, better shirts for PHFamily to stand out more in the crowd and a tent to fellowship before and after the walk. Also would like to try and accommodate all survivors/victims names on a shirt such as we did this year...”
- ♦ *Walker* – “To see growth, trying to raise as a PHFamily between \$10,000 to \$15,000.... Mainly Lodges and Chapters joined the walk along with King David Court #50 HOJ. We’d like to make sure other houses know they are welcomed as well.”

Was any feedback given to you directly and what kind?

- ♦ *Walker* – “Great turnout and cannot wait until next year because we know it will only get better.”
- ♦ *Maxwell* – “Everyone seemed to like the shirts but suggestions were given. Needed more announcements about shirts/hats being available; better quality shirts for the ladies since the sizes ran small. Fellowshiping at Arabic Temple was a nice idea.”

How much money was raised overall?

- ♦ *Walker* – “Over \$7,700 was raised”
- ♦ *Maxwell* – “In total there were 120 shirts/hats sold with proceeds going to the ACS.”

Please share with us any additional comments.

- ♦ *Walker* – “Thanks to all who participated. We had over 100 people there which was more the expected. I was very pleased to see everyone; it really showed we care.”
- ♦ *Maxwell* – “Thank everyone for supporting, volunteering, walking and riding it was much appreciated and I look forward to future endeavors with the Prince Hall Masonic Family.”

The ACS Team walked, ran and rode for the following individuals:

- | | | |
|---------------------|---------------------|-------------------|
| • Brian Abrams, Sr. | • Mary E. Johnson | • Doris Pendleton |
| • Gloria Acker | • Phillip Johnson | • Teresa Playton |
| • Harriet Aikerson | • Paulette Jones | • Curtis Powell |
| • Clyde Andrews | • Christina Lee | • Legree Preston |
| • George Andrews | • Amanda Luter | • Tony Rhodes |
| • Ethel Armstrong | • Denise Luter | • Wille Mae Seals |
| • Rochell Bailey | • Waxie Maddox | • Laura Smith |
| • Doris Barnes | • Walter Maddox | • Sherry Smith |
| • Margaret Ellis | • Kumye McClure | • Yolanda Smith |
| • Jackie Franklin | • Sylvester McClure | • Rosetta Stevens |
| • Linda Freeman | • Inez Miller | • Dorothy Turner |
| • Myles Freeman | • Vickie Nelson | • Linda Veals |
| • Donnie Hall | • Anthony Norman | • Horace Watkins |
| • Charles Hardy | • Carolyn Omar | • Daryl White |
| • Roseann Henley | • Charles Parks | • Linda Williams |
| • Jeffrey Howard | • Katie Parks | • John Wilson |
| • Joyce Howard | • Louise Parks | • Shirley Wilson |
| • David Johnson | • Howard Parr | • Roosevelt Yates |



Daryl Andrews, Lewis Maxwell, Chris Preston, Lawrence Walker, James Whitehead and LaMonte Wilson