

HEALTH

Continued Need for Community Health Centers

With recently enacted legislation and much attention on Marketplace health insurance and Medicaid, the National Association of Community Health Centers would like to remind everyone that Health Centers are a bipartisan, community-based health care solution that works.

Regardless of insurance coverage, all people need a place to go for health care. For more than 50 years, Community Health Centers such as Community Health Center of Northeast Oklahoma, Inc., in Welch, Afton and Grove, have worked to solve the national challenge of access to care with innovative solutions at the local level.



LEE HILLIARD

It is important to remember that there is something on which both Republican and Democratic policymakers have agreed: The Health Center Program produces results. As local businesses, directed by the people in the communities they serve, health centers deliver quality, affordable

and cost-effective health care to millions of people all over the country where needed most. They deliver the results in a way that reduces the overall cost of care in those communities.

Presidential administrations and Members of Congress on both sides of the political aisle have made investments in health center expansion for the past 16 years because they know health centers deliver value for patients and for the federal taxpayer.

Health centers not only prevent chronic disease and illness, they also reach beyond the walls of the exam room to address underlying factors that may cause it – such as poor nutrition, unsafe

environmental conditions, etc.

Health centers save, on average, \$2,371 (or 24 percent) in total spending per Medicaid patient when compared to other providers, according to a recent multistate study published in the American Journal of Public Health.

Health centers generate \$24 billion in savings to the health care system every year by efficiently managing and treating chronic disease, keeping people out of emergency rooms where care is costlier, and avoiding unnecessary hospitalizations – even among the most economically challenged populations.

Some 62 million Americans lack access to primary

care because of a variety of factors, including long travel distances to health care facilities, affordability of care and a shortage of available doctors and other providers. Health centers have been and remain the frontline responders in addressing these challenges of access to care, as well as emerging public health challenges, such as the nationwide opioid epidemic, the Zika virus, etc.

Today, 25 million mostly working-class people all across America rely on their local health centers for primary and preventive health services.

Locally, Community Health Center of Northeast Oklahoma, Inc., dba Afton, Grove and Welch Community Health

Centers continue to serve the area with the finest in personalized health care. For details or to schedule an appointment contact (918) 257-8029, (918) 801-7504 or (918) 788-3918 or check us out on the web at www.chcneo.com, like us on Facebook or follow us on Twitter. A sliding payment scale is available for patients based on family size and income.

Lee Hilliard, D.Min., Th.D., CAC, is the Outreach and Enrollment Specialist at the Community Health Center of Northeast Oklahoma. For local enrollment assistance with Marketplace, Insure Oklahoma or SoonerCare, please contact Lee at 918-219-4486 or lhilliard@chcneo.org.

Reducing risk for diabetes

What do you know about diabetes? Unless it affects you or a family member directly, the answer might be, “not much”. Currently, 11.5% of Oklahomans have the disease. Unfortunately, one in four of them, is unaware of it.

Diabetes is a condition where the body doesn't make enough insulin, or is unable to use its own, or is unable to use its own, as well as it should. Insulin is a hormone that helps your body process sugar from foods, and gives your body energy. When insulin is not produced or used effectively, it causes sugars to build up in the blood. Over time, this can lead to serious health problems like heart disease, blindness, or kidney failure.

Type 1 Diabetes

- Accounts for about 5% of all diagnosed cases.
- People with type 1 diabetes must have insulin delivered by injection or a pump to survive.
- There is no way to prevent type 1 diabetes.

Type 2 Diabetes

- Accounts for 90-95% of all diagnosed cases.
- People with type 2 diabetes typically manage the disease through oral medication, diet, exercise, or insulin injections.
- A number of studies have shown that regular physical activity and weight loss can significantly help prevent developing Type 2 diabetes.
- Types 1 and 2 are frequently not diagnosed until complications appear. Learning the signs of diabetes and early detection can decrease your risk for developing complications like cataracts, and nerve damage. Symptoms of diabetes include:
 - Frequent urination
 - Excessive thirst
 - Unexplained weight loss
 - Extreme hunger
 - Sudden vision changes



SEAN BRIDGES

- Tingling or numbness in the hands or feet
- Extreme fatigue
- Cuts and bruises that are, slow to heal

There are many risk factors associated with diabetes, and some cannot be changed like family history and age. For instance, you are at increased risk for developing prediabetes (blood sugar levels higher than normal, but not high enough for a diagnosis of diabetes) and Type 2 diabetes if you:

- Are 45 years of age or older.
- Are overweight.
- Have a parent with diabetes.
- Have a sister or brother with diabetes.
- Have a family background that is African-American, Hispanic/Latino, American-Indian, Asian-American, or Pacific-Islander.
- Had diabetes while pregnant (gestational diabetes), or gave birth to a baby weighing 9 pounds or more.
- Are physically active less than three times a week

The good news is that you can change risk factors associated with lifestyle, like getting 30 minutes of physical activity each day. Research shows that regular physical activity and modest weight loss can help prevent or delay Type 2 diabetes by up to 58% in people with prediabetes. Other steps to help reduce risk include:

- Making healthy food choices such as fruits and vegetables, fish, whole grains, low-fat or skim milk, and cheese.
- Choosing to drink water.
- Eating smaller portions,

and making ½ your plate vegetables and/or fruits; ¼ whole grain, such as brown rice; and ¼ a protein food, such as lean meat, poultry or fish, or dried beans.

Currently, Oklahoma has the fourth highest rate of death due to diabetes in the U.S., and annual health care expenditures are more than twice as high as people without the disease (\$13,741 versus \$5,853). The costs of diabetes are significant. With more Americans diagnosed each year, at earlier ages, more are living longer with the disease. This causes an increased strain on America's healthcare system, and individuals as well as state, and national finances.

Diabetes is a chronic health condition, and the Oklahoma State Department of Health is partnering with other agencies to assist those living with a chronic disease. One of the resulting programs is called Living Longer, Living Stronger. Living Longer Living Stronger is designed to improve the health, and lower medical costs, of those with chronic health conditions like diabetes. The program focuses on addressing common problems such as pain management, nutrition, exercise, medication use, and communicating with doctors and other health professionals. Living Longer, Living Stronger will be coming to Ottawa County in Spring/Summer 2016.

November is National Diabetes Month. Start today to reduce your risk for diabetes, or if you have diabetes, to reduce your risk for health complications — get checked, make healthier food choices, and move at least 30 minutes every day.

For help with lifestyle changes to prevent Type 2 diabetes, visit <http://www.cdc.gov/diabetes/prevention/about.htm>

To learn more about Living Longer Living Stronger, visit www.ok.gov/health, and type “Living Longer, Living Stronger” into the search field, or call Carole Kimbrough to be placed on a contact list for the program.

Sean Bridges is Health Educator for the Delaware and Ottawa County Health Departments.

Messages From Mercy: What to Do During Cold, Flu Season

One hundred years ago, young school girls wore heavy stockings and boys donned long, flannel underwear during the winter months. Put them on too late or take them off too early, parents warned, and you would catch your “death of cold.”

Colds, of course, rarely lead to death, while warm clothing offers no protection from colds and the flu. These viral illnesses occur during the winter months primarily because that is a time when people spend more time indoors with windows and doors closed.

If you have ever visited a day care center, where runny noses are as common as running toddlers, you know why families with young children are likely to suffer frequent bouts of sneezing, coughing and nasal congestion.

The viruses that cause colds and flu are passed from person to person primarily through droplets in the air (from a cough or a sneeze). These organisms also can survive for several minutes or longer on non-porous surfaces such as door handles.

Aside from vaccination against the flu, try a few strategies for protecting yourself from upper respiratory infections:

- Wash your hands frequently and thoroughly.
- Don't touch your eyes or nose right after touching a possibly contaminated surface.
- Cough and sneeze into your sleeve rather than your hand.

If a cold strikes at an inconvenient time for you (and they always do), the infection you have most likely is viral, not bacterial. As a result, it will not respond to antibiotics.

Improper use of antibiotics in such situations increases the risk of antibiotic resistance. It's also best not to be the martyr



JEQUITA SNYDER, D.O.

who shows up at the office anyway, contaminating others with the same bug.

Over-the-counter cold medications nearly always treat symptoms rather than the disease. They won't shorten the course of the illness, and some have unwanted side effects. Talk with your doctor before making heavy use of these medications.

An antihistamine is your best option for sniffing, sneezing, watery eyes, runny nose and similar symptoms. First-generation antihistamines such as Dimetapp, Benadryl and NyQuil have sedative effects. They are alright if you are having trouble sleeping but not so good if you're going to be driving or operating equipment. Non-sedating antihistamines include Zyrtec and Claritin.

For a stuffy nose, you can get relief with a decongestant. These drugs work by constricting blood vessels in nasal passages, but this constriction also occurs elsewhere in the body, so a likely side effect is increased blood pressure. If you have been diagnosed with hypertension, you should not take a decongestant without talking to your doctor first.

Fever reducers include acetaminophen, aspirin and ibuprofen. Current thinking is that a little fever can be a good thing, activating your immune system and, perhaps, speeding recovery. In a young child (under 12 months), though, even

a moderate fever of 100 to 102 degrees should be lowered.

Acetaminophen, aspirin, ibuprofen and naproxen also are useful as pain relievers, but never give aspirin to a child under age 18 who is showing flu-like symptoms. It could result in Reyes syndrome, a rare but sometimes fatal disease.

Most over-the-counter cold remedies contain a variety of ingredients. Read the label carefully so that you are not getting something you don't need or shouldn't have.

Many cases of the flu will pass with self-care. Prescription antiviral medications are available that, if taken within the first 48 hours, can shorten the duration of illness. These drugs also may lessen symptoms, prevent the virus from growing and reduce complications.

For high-risk individuals, antiviral flu medications can be used for prevention, with a 70 to 90 percent success rate. They do not replace getting an annual flu shot, however.

Self-help measures are best. Your mother may have recommended chicken soup, but any hot soup or tea will help. Breathe in the aromas and feel the warm liquid soothe your aching throat.

Drink plenty of fluids – hot and cold – to keep from becoming dehydrated. Gargling salt water can reduce the tickling in your throat. Blow your nose frequently rather than sniffing mucus back into your head.

Finally, the best thing you can do for physical and mental health is to get plenty of rest. That busy schedule can wait.

For more information on winter illnesses, contact Dr. Jequita Snyder of Mercy Clinic Family Medicine, 10 S. Treaty Road, Miami, at 918-238-3075.

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DADDY'S HOME 2 (PG-13)
4:30, 5:20, 6:45, 7:45

THOR: RAGNAROK (PG-13)
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