March/April 2014

DHSS Worksite Wellness Committee

W@W

Winning @ Wellness

This Issue:

Be Healthy @ Work
Employee Buzz
Eat Smart @ Work
An Ounce of Prevention
Worksite Wellness News

Be Healthy @ Work: What Do You Know About Colorectal Cancer?

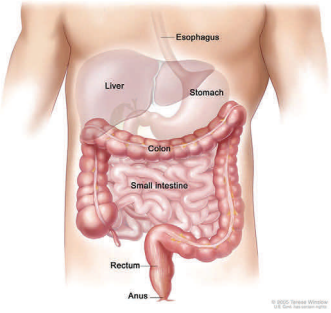
Getting a colonoscopy is probably not on your top ten list of favorite things to do. But it is one of the best things you can do for yourself to help prevent colorectal cancer. March is Colorectal Cancer Awareness Month-so celebrate by learning more about it and schedule that examination!

Missouri Data

According to 2010 Behavioral Risk Factor Surveillance System (BRFSS) data, 1,577 men and 1,476 women were diagnosed with colon, rectum or rectosigmoid cancer. In 2011, 1,096 Missourians died from colon/rectum/anus cancer. The good news is that since 1996, the rates of colon, rectum and rectosigmoid cancer are declining-thanks to more Missourians getting preventative screenings (2010 BRFSS).

Knowing the Basics

To understand colorectal cancer, it is helpful to understand the body parts affected and how they work. The colon is a six-foot long muscular tube that connects your small intestine to your rectum. The colon and rectum, also known as the large intestine, is responsible for processing waste. The colon removes water from the stool and stores the solid stool. The rectum is a six to eight inch chamber connecting the colon to the anus. It receives the stool from the colon and holds it until it is eliminated.



The "colorectal tube" is a fertile breeding ground for cells that can become abnormal and start growing out of control. These abnormal cells create polyps (small tumors). Most polyps are not cancerous and can be removed. They do not usually grow back, invade the tissues around them or spread to other parts of the body. If the cells are cancerous, they can be removed but they will sometimes grow back. Cancerous cells can invade and damage nearby tissues and organs.

Risk Factors and Prevention Tips

Although we do not know the exact cause of most colorectal cancers, there are certain known risk factors. Some risk factors can be controlled, while others cannot. Those that cannot be changed include:

- Age-your risk increases as you age
- Having colorectal cancer or certain types of polyps before
- Having a history of ulcerative colitis or Crohn's disease
- Family history of colorectal cancer
- Race or ethnic background; such as being African American or Ashkenazi
- Type 2 diabetes
- Certain family syndromes (such as familial adenomatous polyposis (FAP) or hereditary non-polyposis colon cancer (HNPCC, or Lynch Syndrome)

There are also risk factors that are linked to things you can control. They include:

- Certain diets (high in red or processed meats)

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- Cooking meats at very high temperatures (frying, broiling or grilling) can create chemicals that may increase your cancer risk
- Physical inactivity
- Smoking
- Heavy alcohol use
- Being very overweight or obese

You can reduce your risk of getting colon cancer by eating foods that contain dietary fiber, garlic and calcium.

Symptoms of Colorectal Cancer

The signs can vary for each individual, but common symptoms may include:

- Diarrhea or constipation
- Feeling that your bowel does not empty completely
- Blood (either bright red or very dark) in your stool
- Stools that are more narrow than usual
- Frequent gas pains or cramps, or feeling full or bloated
- Weight loss with no known reason
- Nausea or vomiting
- Feeling very tired all the time

Screenings

At least **6 out of every 10 deaths from colorectal cancer could be prevented** if everyone were screened routinely. Screening tests can help your doctor find polyps or cancer before you notice any symptoms. If the disease is found early the treatment is more likely to be effective.

It is recommended that people aged 50 and older be screened. Also people who are at a higher-than -average risk of colorectal cancer should talk to their doctor about whether or not to be screened before age 50, which tests to have, the benefits and risks involved, and how often to have the tests.

There are several different screening tests that detect polyps, cancer or other abnormal areas. They are:

- Fecal occult blood test (FOBT)
- Sigmoidoscopy
- Colonoscopy
- Double-contrast barium enema
- Digital rectal exam

For more information on these tests, go to http://www.cancer.gov/cancertopics/wyntk/colon-and-rectal/page5.

Today there are more ways than ever to treat colorectal cancer. As with almost all cancers, the earlier it is found, the more likely that treatment will be successful. If colon cancer is detected in its early stages, it is up to 90 percent curable. Taking preventative measures can help you control and manage your risk factors and help lower your risk.

Resources:

http://fightcolorectalcancer.org
http://www.cancer.org
http://www.cancer.gov
http://www.webmd.com/colorectal-cancer

From our readers……

Free online calorie counter and diet plan. Lose weight by tracking your caloric intake quickly and easily! http://www.myfitnesspal.com/

Pacer mobile fitness application—pedometer activity tracking, weight management and blood pressure tracking. http://pacerapp.weebly.com/

Both apps are free and can be downloaded through the App Store on your mobile device.

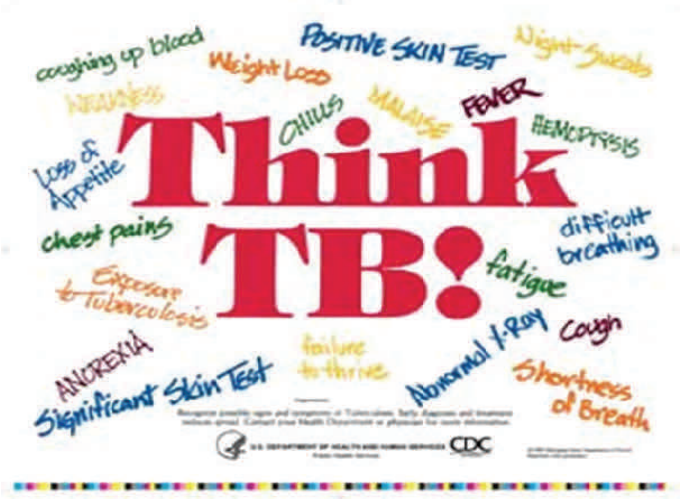
An Ounce of Prevention: World TB Day

Each year, we recognize World TB Day on March 24. This annual event commemorates the date in 1882 when Dr. Robert Koch announced his discovery of *Mycobacterium tuberculosis*, the bacillus that causes tuberculosis (TB).

A Global Health Problem
Tuberculosis remains a major global health problem. In 2012 an estimated 8.6 million people developed TB and 1.3 million died from the disease worldwide. The number of TB deaths is unacceptably large given that most are preventable. A total of 9,945 TB cases were reported in the United States in 2012. In 2010, the most recent year for which these data are available, 569 deaths from TB were reported in the U.S. Eighty-nine (89) cases of TB and 16 deaths* were reported in Missouri in 2012. In 2013, 105 TB cases and 10 deaths* were reported in Missouri.

TB Basics
Anyone can get TB. It's a serious disease caused by a type of bacteria that can spread from person to person through the air. TB most commonly occurs in the lungs (pulmonary) but can occur in any other part of the body (extrapulmonary), such as the kidneys, bones or brain. It can only be spread by the release of the bacteria into the air by coughing, laughing, sneezing, singing or sometimes by speaking. TB is **NOT** spread by shaking someone's hand, sharing food or drink, touching bed linens or toilet seats, sharing toothbrushes or kissing. Symptoms of TB disease include: a bad cough that lasts three weeks or longer, chest pain, coughing up blood or sputum, unexplained weight loss, night sweats, weakness or fatigue, loss of appetite, chills and fever.

Some of the risk factors for TB include: close-contact situations, alcohol and intravenous drug use, certain diseases (some cancers, diabetes and HIV) and certain occupations (healthcare workers).



Not everyone infected with the TB bacteria becomes sick. As a result, two TB-related conditions exist: latent TB infection and TB disease. TB bacteria can live in the body without making you sick (latent TB infection). People with latent TB infection are not infectious and cannot spread the TB bacteria to others. TB bacteria becomes active if the immune system can't stop the bacteria from multiplying. When TB bacteria are active (multiplying in your body), this is called TB disease. TB disease can be treated by taking several drugs, usually for 6 to 9 months. If left untreated, TB can be fatal.

To support World TB Day, the Bureau of Communicable Disease Control, TB Control Program asks employees to **wear purple** on March 24.

For more information on tuberculosis, please see the DHSS, Bureau of Communicable Disease Control and Prevention TB website at http://health.mo.gov/living/healthcondiseases/communicable/tuberculosis/index.php or the CDC's website at: http://www.cdc.gov/tb/topic/default.htm.

* Although we cannot say for sure that these persons died from TB, they had been diagnosed with TB at the time of their death.

"All truly great thoughts are conceived while walking."

Friedrich Nietzsche

The Employee Buzz…

"With the weather getting nicer, what is your favorite summertime activity?"

"My favorite activity as the weather warms up is hiking in state parks and conservation areas. I try to visit several new parks each year!" **Angela Oesterly, Section for Child Care Regulation**

"I love to work in the flower garden and get it ready for spring, summer and fall!" **Linda L. Powell, Bureau of Immunization Assessment and Assurance**

"*Well, I can't wait for the weather to get nicer so that I can start to jog more… but my favorite springtime activity is playing yard games with my kids. We love bocce, croquet, bag-toss, pitch & catch, and soccer."* **Tim Jackson, Region 2 Regional Manager, Bureau of Home and Community Services**

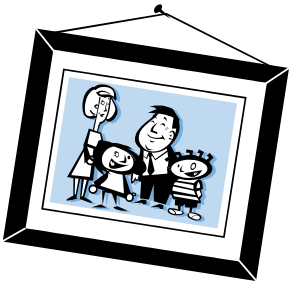
"My favorite thing to do when springtime arrives is to take my two little boys and golden poodle to the park for a picnic and lots of swing and slide time." **Jackie Oden, Health Education Unit, DRL**

"I like to turkey hunt, getting out in the woods when all the birds are singing and courting. Planting my garden and watching it grow, hoping to get some fresh vegetables later on." **Jeff Buechler, Family Care Safety Registry**

"Exercising outside where the sun is shining, trees are budding and turning green, and beautiful flowers are coming up is the best!" **Toni Steward, Section for Long Term Care Regulation**

We want to hear from you for the next Employee Buzz! "***How do you protect yourself from the sun?***" For example, **"I never go outside without my sunglasses on."** Email your response to worksitewellness@health.mo.gov. Please tell us if you do not want your name included with your quote.

My Family Health Portrait Tool



This web-based tool helps users organize family history information and then print it out for presentation to their health care provider. Users can save their family history information to their own computer and even share family history information with other family members. Access the My Family Health Portrait web tool at https://familyhistory.hhs.gov. The tool is available at no cost. No user information is saved on any computer of the U.S. federal government.

When finished organizing your family history information, the Family Health Portrait tool will create and print out a graphical representation of your family's generations and the health disorders that may have moved from one generation to the next. That is a powerful resource for predicting diseases for which you may be at risk. Your health care provider can help you make use of this information. If you prefer to use a paper version of the tool to gather and record your family information, printable PDFs are available in several languages.

Source: http://www.hhs.gov/familyhistory/portrait/index.html

Eat Smart @ Work: Turkey with Avocado Sandwich

The turkey in this sandwich is accompanied by sliced avocado and tomatoes, with an assist from some BBQ sauce.

Ingredients:
2 Tbsp original barbecue sauce
2 Tbsp classic ranch dressing
8 slices whole grain bread
4 lettuce leaves
½ lb sliced cooked turkey (about 8 slices)
4 tomato slices
1 small avocado, peeled, pitted and sliced
¼ cup sliced red onion

Preparation:
MIX barbecue sauce and dressing in small bowl; spread mixture evenly on 1 side of each bread slice.

COVER 4 bread slices with 1 lettuce leaf, 2 turkey slices, 1 tomato slice, ¼ of the avocado and ¼ of the onion slices. Top with remaining bread slices.

Yield: 4 servings

Source: Kraft Recipes
http://www.kraftrecipes.com/recipes/turkey-avocado-sandwich-69157.aspx

Nutritional Information
Amount per Serving

Calories: 340
Fat: 13g
Saturated fat: 2.5g
Protein: 22g
Carbohydrate: 34g
Fiber: 4g
Cholesterol: 45mg
Sodium: 460mg

Move More @ Work: Driving Posture To and From Work

Regardless of travel time to and from work, one's seated posture while driving can either contribute to or alleviate back discomfort. Similar to workers that sit in an office chair for hours, those with extensive commutes (an hour or more each way) can adversely impact their back.

It is important to sit with your knees level with your hips. One way you can accomplish this is by using a rolled-up towel or a commercial back support placed between your lower back and the seat back. This provides more comfort and support of the natural inward curve of the low back.

Drivers are advised to sit at a comfortable distance from the steering wheel. Reaching increases the pressure on the lumbar spine and can stress the neck, shoulder and wrist, aggravating back pain. However, sitting too close can increase risk of injury from the car's airbag. According to the National Highway Traffic Safety Administration, drivers (and front-seat passengers) should buckle their seat belts and keep about 10 inches between the center of the air bag cover and their breastbone to reduce the risk of air bag injury yet still be protected in the event of a collision.

Good posture combined with body mechanics (the way activities are performed throughout the day) can substantially improve the way your back and neck feels at the end of the workday.

Source: http://www.spine-health.com/wellness/ergonomics/office-chair-posture-and-driving-ergonomics

DHSS Wellness Superstars

The Section for Disease Prevention and Section for Healthy Families and Youth, Division of Community and Public Health, participated in *Summer Challenge 2013,* a weight loss challenge. Twenty-two participants completed the challenge and lost a total of 97.2 pounds over a three month period. Nearly everyone lost weight while a few maintained their weight. The group held another challenge during the fall and over the holidays. They tracked individual weigh-ins for those who wanted some accountability.

How It Started

The challenge group stemmed from a conversation about needing to lose weight. Rhonda Pittman, AOSA for the Section for Healthy Families and Youth, shared information about a contest utilizing weekly weigh-ins for accountability with the winners determined by the largest percentage of weight lost, the fairest way to everyone in a group of vastly different starting weights. Everyone liked the idea and asked if Rhonda would coordinate it. The group decided to call the first contest the Summer Challenge. With the holidays behind them and New Year resolutions in place, there are plans to start another challenge in the near future. Here's what a few of the participants had to say about their experience:

Beth Stieferman, Program Manager

"I have been a member of a weight loss group for what seems to have been most of my life. Continuing maintenance after getting to where I wanted to be has always been the part I failed at. In the past I have promised myself that if I can reach my goal I would continue to participate in a group in order to maintain what I have achieved. Since life is hectic, that has not happened. Having the weight loss challenge here at work has been exactly what I needed. I don't need to go to another group at another location after work. I can participate in a group that has been supportive to me in my continued efforts to be healthier, right here at work! I greatly appreciate the opportunity to be able to continue to participate in this group."

Melissa R. LaNeave, SOSA

"What I like about the weight loss challenge here at work is you have others to help keep you accountable in your journey and you physically see the changes taking place in your body. The best part, however, is that you are doing something healthy for yourself. If you set your mind to it, which can be challenging, you will definitely succeed. I am living proof of that; but if you have an attitude of failure or just don't care, nothing good will prevail! Overall, I am excited to start the next weight loss challenge and will continue putting it into action – to make healthy choices, as well as eat small amounts of food – as I have already seen good results within the past two weeks!! Good luck to everyone involved! "

Takako Tagami, Nutrition Specialist

"Rhonda's invitation rescued me! I was not able to participate in the summer program as I was so afraid to find out my body weight. However, in late October, when I got the email from Rhonda, I decided to join the fall program. Plus, I felt as though I needed to participate in it seriously because I was diagnosed with pre-diabetes. It was really shocking for me. (In fact, I am a Registered Dietitian and have no family history of diabetes!) I know I had gained about 10-15 pounds and had been eating badly the past 2-3 years. I have lost 12-15 pounds since I joined the program. YEAH!"

Some of the group members include:

Back Row (left to right): Rhonda Pittman, Takako Tagami, Amber Kruetz, Alyce Turner, Melissa Laneave and Chiquita Small. Front Row (left to right): Tanya Toebben, Maryann Johnson and Christina Elwood.

Worksite Wellness News

***Strive For Wellness* Ambassador Update**

The *Strive for Wellness* program continues to offer state agency wellness teams support for various activities. They have been piloting smoking cessation classes and weight loss classes in the Truman Building. Once they have all of the kinks worked out, they hope to bring these resources to other locations. They also continue to post weekly wellness messages that provide quick and simple tips for starting or maintaining healthier habits. All of the statewide campaign materials are posted on the *Strive for Wellness* page at http://www.mchcp.org/stateMembers/striveForWellness/index.asp.

In 2014, the *Strive* Ambassadors will be meeting monthly to focus more intently on upcoming initiatives and to provide more constant feedback to the Missouri Consolidated Health Care Plan Wellness Team about the direction of the program.

As always, the wellness committee welcomes your ideas and encourages your participation in all DHSS and *Strive* initiatives. Please feel free to provide feedback to your committee members or ambassadors.

Sincerely,
Pat Simmons & Michelle Jacobsen
DHSS Wellness Ambassadors

Upcoming Wellness Events

Employee Survey Results
Want to find out the results from the 2013 Worksite Wellness Committee Employee Survey? Click **here** to see the summary of results!

Mamm Van
Mark your calendar for **Thursday, March 20** and **Friday, March 21, 2014** for the Ellis Fischel Mamm Van. Schedule your appointment by contacting the Bureau of Community Health and Wellness at 522-2820 or emailing your Worksite Wellness Committee at **WorksiteWellness@health.mo.gov**. by **March 11.**

Walking Wednesdays
The **1st and 3rd Wednesdays** of every month are **Walking Wednesdays**. But don't forget that if there is a ***5th*** Wednesday in a month, that too is a Walking Wednesday! Approved t-shirts are: DHSS Worksite Wellness, Missouri 100 Miles and Tackle the Flu t-shirts.
REMINDER: By wearing jeans on a Walking Wednesday, you are committing yourself to walking a total of 30 minutes at break and/or during your lunch.

Blood Pressure Kits
Keep tabs on your blood pressure by utilizing the blood pressure kits in several locations across the state. For locations, click **here**.

Save the Date!
Wednesday, May 21, 2014 is National Employee Health & Fitness Day! Plan to put your walking shoes on!