

Cervical Cancer: Know the Basics

Cancer of the cervix (also called "cervical cancer") begins in the lining of the cervix. The cervix is the lower part of the uterus.

This cancer does not form suddenly. First, some cells begin to change from normal to pre-cancer and then to cancer. This can take a number of years, although sometimes it happens more quickly.

These changes are referred to by several terms, including dysplasia. For some women, these changes may go away without any treatment. More often, they need to be treated to keep them from changing into true cancers.

The American Cancer Society predicts that there were about 9,710 new cases of invasive cervical cancer in the U.S. in 2006. About 3,700 women will die from this disease each year. When found and treated early, cervical cancer often can be cured.

Cervical cancer was once one of the most common causes of cancer death for American women. But since 1955, the number of deaths from cervical cancer has declined. The main reason for this change is the use of the Pap test to find cervical cancer early.

Early cervical pre-cancers or cancers often have no signs or symptoms. That's why it's important for women to have regular Pap tests. Symptoms usually appear when the cancer is further along.

You should report any of the following to your doctor right away:

- unusual discharge from the vagina (not your normal period)
- blood spots or light bleeding other than your normal period
- bleeding or pain after sex, douching or after a pelvic exam

Of course, these symptoms do not mean that you have cancer. They can also be caused by something else. But you must check with your doctor to find out.

If there is any reason to suspect that you have a pre-cancer (or cancer) of the cervix, your doctor will want to find out more. First, you will have a complete physical exam. The doctor will ask about your own health, risk factors and your family.

Since the most common form of cervical cancer starts with pre-cancerous changes, there are two ways to stop this disease from developing. The first way is to prevent the pre-cancers, and the second is to find and treat pre-cancers before they become cancerous.

Vaccines have been developed that can immunize people against Human Papillomavirus (HPV) to prevent the pre-cancers. This vaccine can only be used to prevent HPV infection -- before an abnormal Pap test develops -- and not to treat an existing infection.

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It is important to realize that the vaccine doesn't protect against all cancer-causing types of HPV, so Pap tests are still necessary.

The second way to prevent cervix cancer is to have testing (including a Pap test) to detect HPV and pre-cancers. Treatment of pre-cancers can stop cervical cancer before it is fully developed. Most invasive cervical cancers are found in women who have not had regular Pap tests.

Some women believe that they do not need exams by a health care professional once they have stopped having children. This is not correct. They should continue to follow American Cancer Society guidelines.

For now, the most important way to improve early detection of cervical cancer is to make certain that all women are tested according to American Cancer Society guidelines. Unfortunately, many of the women most at risk for cervical cancer are not being tested often enough or at all.

For more information on how to get tested for cervical cancer, contact the American Cancer Society at (800) ACS-2345 or call your local health department.

Resources on HPV and Cervical Cancer

American Cancer Society

Telephone: (800) ACS-2345

American Social Health Association

National HPV & Cervical Cancer Resource Center

Telephone: (800) 230-6039

Internet address: www.ashastd.org

The Centers for Disease Control and Prevention (CDC)

Telephone: (800) 227-8922

Internet address: <http://www.cdc.gov/std/HPV/STDFact-HPV.htm>

National Cancer Institute

Telephone: (800) 4-CANCER (800-422-6237)

Internet address: <http://www.cancer.gov/cancerinfo/types/cervical/>

National HPV and Cervical Cancer Public Education Campaign

Telephone: (866) 280-6605

Internet address: www.cervicalcancercampaign.org

Women's Cancer Network

Telephone: (312) 578-1439

Internet address: www.wcn.org

Cancer Screening Program Targets Medicaid Population

Nancy C. LeFevers, Nurse Consultant, Department for Medicaid

The Department for Medicaid Services is piloting a breast and cervical cancer program to raise awareness about the diseases and emphasize the Medicaid population screening recommendations. The project, started in February 2006, targets areas with particularly high mortality rates of both diseases including Breathitt, Elliott, Floyd, Johnson, Lawrence, Magoffin, Martin, Powell and Wolfe counties.

Statistics from 2005 show that only 17 percent of Medicaid women in these counties received a mammogram, compared with 74 percent state average. Similarly, only 14 percent of Medicaid women received a Pap test (the state average is 84 percent) during the same time period.

The pilot program stresses the value of early detection, which usually means that less costly interventions can be taken to improve quality of life and decrease mortality and morbidity. The initiative also promotes clinical breast examinations, monthly breast self-examinations and HPV education.

Several initiatives have been put in place to spread the message and get women involved in their healthcare. Initiatives include:

- Educational materials (specifically bookmarks and over-the-shower hangers) are distributed to Medicaid members when they visit the Department for Community Based Services offices in the nine-county areas.
- Mailed birthday cards (initiated March 2006) to Medicaid women during their birth month that suggests using the month to complete breast and cervical cancer screening each year. Through collaboration with Kentucky First Lady Glenna Fletcher, the Medicaid birthday card was updated to coordinate with Mrs. Fletcher's women's health initiatives as well as the Get Healthy Kentucky program.
- Supplied educational bookmarks for inserts into each book sold or loaned at local book stores and libraries in the selected counties.
- Letter sent to all Medicaid health care providers requesting collaboration and action when women visit their offices; asked them to perform clinical breast examination, Pap test, to order a screening mammogram or arrange screening by another provider/agency.
- Provide incentive to these women as a motivator to complete breast and cervical cancer screenings. Grant funds of \$5,000 were awarded by the Foundation for Healthy Kentucky. Starting in July, a postcard was included with the monthly birthday cards offering \$10 free to members when a mammogram or Pap test is completed. After the provider or technician completes the postcard information, the member mails the card to the Division of Medical Management and Quality Assurance. A \$10 check is issued. If both mammogram and Pap test are completed, \$20 is sent. The fiscal agent for the grant monies is the Department for Human Support Services, Division of Women's Mental and Physical Health.
- In January 2007 postcards will be sent to all Medicaid women ages 21 - 64 in the pilot counties encouraging them to complete breast and cervical cancer screening and receive money from the grant allocation.
- In September 2006, mammography service was made available to three of the pilot counties, Martin, Magoffin and Wolfe, which do not have free-standing or mobile units. Funding was made available through the Division of Women's Mental and Physical Health covering expenses for King's Daughters Medical Center Mobile Mammography Unit in Ashland, to spend one day in

each of the three counties. The Department of Public Health was a partner in assisting at the local level. During the three days, 68 women, most rarely or never screened, received mammograms; 65 of the women had Pap tests for cervical cancer screening. Of the 68 women screened for breast cancer, none were diagnosed with cancer. The results of the Pap tests are pending.

¹ Commonwealth of Kentucky, Cabinet for Health and Family Services, Department for Medicaid Services, Decision Support System (2005).

² Centers for Disease Control and Prevention, Prevalence Data, Kentucky (2004).

Summit Addresses Preparedness for Those with Special Needs

By Barbara Fox

Approximately 100 individuals attended a working summit Tuesday, Jan. 9, at the Kentucky Transportation Cabinet in Frankfort to address support for individuals with disabilities, the elderly and other vulnerable populations during emergencies and disasters.

Brian Parsons, Senior Policy Advisor for the Office for Civil Rights and Civil Liberties, U.S. Department of Homeland Security, provided the summit's keynote address. Additional presentations on emergency preparedness and response were given by Dr. William Hacker, Department for Public Health Commissioner, and General Maxwell Clay Bailey, Director of Kentucky Division of Emergency Management. Individual discussion forums were held in the afternoon, specifically focusing on preparedness, response and recovery issues related to individuals with special needs.

"We were very pleased with the turnout and interest in this summit because being aware of the needs of vulnerable populations is an important aspect of disaster planning and response," said Hacker. "Today's initial meeting took a critical look at Kentucky's emergency planning processes, and we will certainly use the knowledge gained from the summit to help us identify how emergency plans may be strengthened with regard to individuals with special needs."

The summit was open to individuals with disabilities, service providers and agencies, emergency management personnel, first responders, and business and government personnel. The event was organized by the Kentucky Council on Developmental Disabilities, Kentucky Office of Homeland Security, Kentucky Department for Public Health, Kentucky Department for Community Based Services, Kentucky Division of Emergency Management and the Kentucky Department for Aging and Independent Living.

According to 2000 Census data, nearly one in three Kentuckians are designated with a disability status.

Living Well: When You Shouldn't Exercise

By Kris Hayslett, Worksite Wellness Coordinator

The temperature has dropped and we have entered cold and flu season. For those of you who exercise or have just made a new commitment to exercise, here are a few guidelines to follow when planning your workout schedule.

Avoid exercise:

- If you have a fever.
- If you have headaches and muscle aches. Wait until symptoms subside if due to illness.
- If you have “below-the-neck” symptoms, such as chest congestion, hacking cough, diarrhea, stomach cramps or nausea.
- If you have chronic or serious illness. Consult your physician before resuming or starting exercise.

Some avid fitness buffs may be under the assumption that they can “burn off” a fever or cold and flu symptoms through sweat from exercise. However, exercising with a fever can lead to dangerous illness. Fevers increase your body temperature and paired with exercise, which also raises the body temperature, you could have a heat stroke, which is when the body’s internal temperature is dangerously high. A fever indicates that your body is fighting off an infection, so avoid the notion that it can be “burned off” through sweat and allow your body to rest and recover.

Body aches associated with illness are another sign that you should take a break from your exercise routine. These aches and pains may alter your normal movements and cause additional injuries. Again, wait until these symptoms go away before returning to your program.

The “below-the-neck” guideline is another good tip to follow. If you suffer from nausea or diarrhea, exercise may put you at a higher risk for dehydration. A cough or chest congestion can diminish your lung capacity and make breathing more difficult. This would have a great effect on cardiovascular exercises like jogging or cycling. Pay attention to your symptoms. If they fall below your neckline, wait until the symptoms go away before you exercise again.

Below is a list of symptoms that differentiate the cold and flu. In most cases, people can engage in light to moderate exercise when suffering from a cold. However, those who suffer from more severe symptoms, like those associated with the flu, should rest instead of exercise so the body can fight off infection. If you fall victim to illness this winter, know the differences in symptoms. If any become severe, visit your doctor and get further confirmation and treatment.

Symptoms	Cold	Flu
Fever	Rare in adults and children	High fever of 102-104 degrees and can last 3-4 days
Headache	Rare	Sudden onset and can be severe
Muscle Aches	Mild	Common and often severe
Tired and Weak	Mild	Can last 2 or more weeks
Extreme Exhaustion	Never	Sudden onset and can be severe

Runny Nose	Often	Sometimes
Sneezing	Often	Sometimes
Sore Throat	Often	Sometimes
Cough	Mild hacking cough	Common and can become severe

Overall, regular exercise can help develop a stronger immune system. But be careful about pushing yourself too hard. The harder and longer you push yourself during an exercise session, the lower your immunity is for that day, which makes you more susceptible to picking up a cold or flu virus.

The best rule to follow is to listen to what your body tells you and use common sense on whether or not to exercise. Also, after illness or a break from exercise be sure to come back with light to moderate exercise and then progress slowly back to your goals or previous routine.

Wellness Intranet Site has New Features

In order to promote healthier lifestyles, visit the following sites on the newly updated wellness intranet site at chfsnet.ky.gov/wellness

Ask the Trainer: Ask any health and fitness question and get informative answers.

Be a Wellness Ambassador. If you have made a resolution or set goals for self improvement and behavior change let us help you and track your progress.

Wellness News. Please report any person or event that is promoting wellness.

Health Circles: Do you trail run, bike, swim, weight lift, walk, run, play tennis, golf, practice yoga or Pilates? Let us know what activities you participate in and we will try and get you in touch with others who have similar interests.

The Transportation Cabinet has a basketball team and is looking for teams to play. If you are interested please contact us.

Other information: Fitness class schedule. Healthy Recipes from the CDC. Stress Management Power point from Dec. 20 lunch and learn. Information from each of our subcommittees: Healthy Lifestyles, Nutrition, Physical Activity and Smoking Cessation.

Deferred Comp Seminar Set

It is never too soon to begin planning your financial future. An optional benefit available to all state employees, Kentucky Deferred Compensation is the tax-sheltered way to supplement your retirement. At Kentucky Deferred Compensation, we want to help new employees like take advantage of this important tool. Join us for a brief enrollment presentation on Kentucky Deferred Compensation, and take the action necessary to:

- Learn about the different risks and rewards associated with investing.
- Discover the best way to invest money to help meet financial goals.
- Enroll in our 401(k), Roth 401(k) or 457 plans immediately.

The seminar is for new hires within the last 12 months. It will be from 12:10 to 12:50 p.m. Jan. 31, at 105 Sea Hero Road. Lunch will be provided. Pre-registration is required due to limited seating. To register, call Carol Cummins or Kerry Azbill at (502) 573-7925 or (800) 542-2667. Call for an enrollment kit if you are unable to attend.

Ten-Ure Table in Building Monthly

Ten-Ure will have a table set up in the CHR Building on the second Wednesday of each month for anyone that is interested in signing up for Ten-Ure membership.

KEAP Adds Classes

The Kentucky Employee Assistance Program (KEAP) has added new curriculum to their list of classes. These classes are available for all state employees.

The classes offered are:

2008 & Beyond – A workshop about adjusting to retirement.

AD/HD 101 – Overview of Attention-Deficit Hyperactivity Disorder.

Anxiety Management – Topics include the biological and cognitive causes of anxiety.

Depression Training – How depressive symptoms impact relationships, family & work performance.

Facing the Challenges of Eldercare – How to balance work and eldercare issues.

KEAP as a Management Tool – Managers learn how to help employees with performance and behavior deficiencies early.

Mental Health – Learn how to have good Mental Health and how to avoid pitfalls from achieving this.

Stress Management – Looking at the causes, effects and cures for stress.

Training People How to Treat You – Develop skills to confront difficult work relations in a non-destructive way.

Below is a schedule of classes. You can also see the schedule [online for updates](http://personnel.ky.gov/oeod/empdev/register/456schedule.htm) (<http://personnel.ky.gov/oeod/empdev/register/456schedule.htm>). To register, contact your [department training liaison](#) (<http://chfsnet.ky.gov/afa/ohrm/dpod/trainlia.htm>).

Workshop Name	Location	Jan	Feb
2008 & Beyond - KEAP (8:30-10:30 a.m.)	ASB542	-	16
AD/HD 101- KEAP (8:30-11:30 a.m.)	ASB542	-	5
Anxiety Management - KEAP (8:30-10:30 a.m.)	ASB542	19	-
Depression Management - KEAP (8:30-10:30 a.m.)	ASB542	-	2
Training People How to Treat You - KEAP (8:30-10:30 a.m.)	ASB542	-	23

CHFS Focus Health Tip of the Week

Dry skin is a fact of life, especially in winter time. If your dry skin is itchy and frequently bothersome, you may consider seeing a dermatologist. In the meantime, there's a lot you can do to keep your skin hydrated and protect it from winter's harshness. Follow these tips to keep your skin in tip-top condition:

Moisturize – Moisturizer providers seal over your skin to keep your body's moisture in. Heavy moisturizers work best and can be bought at drugstores. You can also use baby oil. Apply lotion after bathing and patting skin dry while skin is still damp.

Bathe in warm water instead of hot. Hot water can strip the skin of its natural oils. Limit your bath time to 15 minutes or less.

Use a humidifier. Hot, dry indoor air can wreak havoc on the skin, not to mention your nasal passages. A portable humidifier can add moisture back into the air to lessen the effects of indoor air.

Employee Enrichment

By Anya Armes Weber

Employee Enrichment is a weekly feature for CHFS staff. These tips for making work better focus on team building, customer service and personal development.

If you are regularly meeting new clients, community partners and colleagues, you may have trouble remembering all those names. These tips from Craig Harrison, a professional speaker and founder of the communications firm Expressions of Excellence, can help you recall names and details of your new contacts in both professional and social settings.

Repeat. Upon introduction, say someone's name as soon as possible.

Make a connection. Associate names with what you learn about the person – their job, interests or purpose for meeting with you.

Take notes. If you keep meeting minutes, add details about attendees to your own files. Jotting notes on the business cards you've collected may also come in handy.

Ask for help. If a name is unusual or in a foreign tongue, you'll be more likely to remember it if you hear its correct pronunciation or learn the story behind it.

Don't get upset. If you forget someone's name or position when you see them again, don't worry, just be honest with them and say so. Go ahead and re-introduce yourself if you sense someone might not remember your name. They might be grateful you did.