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Introduction—What’s in This Guide

You can take care of your health. This guide shows you how. Here is what is in each section.

- 1. Your Doctors and Nurses—What To Ask Them and What To Tell Them.** The tips in this section will help you ask your doctor or nurse the right questions and get the right answers. You will see examples of questions throughout the booklet.
Note: Although we refer only to doctors and nurses here, the information in this booklet applies to all the health care professionals you consult.
- 2. Staying Healthy—How To Take Charge of Your Health.** Do you want to lose weight or exercise more? Are you planning a family? Are you worried that you may be depressed? Learn what to do in your daily life to stay healthy.
- 3. Checkups, Tests, and Shots—Which Ones You Need and When To Get Them.** Are you worried about your cholesterol levels? Do you want to avoid the flu this winter? There are many checkups, tests, and shots that can help protect your health. This section will guide you to the ones that are right for you.
- 4. More Resources for Good Health—Where To Get More Information.** Are you looking

What Does It Mean To Be at Risk?

This guide talks a lot about your risk for getting a disease or a condition and whether you are at risk for that health problem. Your risk for any disease or condition depends on whether you have one or more risk factors. Examples of risk factors include:

Family history. A particular disease or health problem may run in your family. For example, diabetes runs in families. *Diabetes and its risk factors are discussed beginning on page 39.*

Personal health habits. Sometimes we choose habits that increase our risk for disease. For example, smoking is a harmful personal habit. *Help for quitting smoking begins on page 29.*

Age. Your age may increase your risk for some diseases. For example, your risk for glaucoma increases after age 45. *Information on glaucoma is on page 36.*

Sex. Some conditions are more common in men than in women. Other conditions are more

common in women. For example, women are more likely than men to suffer from osteoporosis. *Osteoporosis and how to reduce your risk for it are discussed starting on page 42.*

Race/ethnicity. Some diseases affect people of one race or ethnic group more than others. For instance, high blood pressure is more common among blacks than among whites. *How to control your blood pressure is described beginning on page 37.*

Some risk factors you can't change. You can't change your age or your race, for example.

Other risk factors—especially your personal health habits—you can change. For example, you can quit smoking or start to exercise regularly.

To stay healthy, it makes sense to do what you can to lower your risk for disease. This booklet can help you lower that risk.

for more information about a particular disease or health problem? This section lists some places to contact.

5. Prevention Charts—How To Keep Track of Your Health Care. Do you sometimes forget when you had your last checkup or what your last test results were? You can keep track of your

health care by using the prevention charts beginning on page 59. You may want to bring this guide with you when you go to the doctor's office or clinic. That way, you can show the staff what tests you have had, what medicines you take, and other important information about your health.

1

Your Doctors And Nurses

What To Ask Them and What To Tell Them

To take care of your health, you need to feel comfortable talking with your doctors and nurses. Here are some tips to help make you feel more comfortable.

Ask

Ask questions. If you don't understand what your doctors or nurses say, ask them to explain. Always ask about any medicines or tests they say you need. If you don't ask, they may think you have all the information you want.

Let your doctors and nurses know if you need more time to ask questions about your health. If the doctor doesn't have time that day, you may be able to talk to another doctor or nurse, schedule another appointment, or find out when you can call later to speak to someone.

Some doctors and health plans have call-in lines. If you call, you can speak to an advice nurse.

All through this guide are Ask Your Doctor or Nurse questions. They are examples of the kinds of questions you may want to ask.

Tell

Your health history. Tell your doctors and nurses about your health history. For example, tell them about any major diseases or operations you have had. Be sure to mention family history of diseases and conditions. For example, if high blood pressure runs in your family, let your doctor know.

Your health now. Only you know how you feel and whether you feel differently than you did before. Tell your doctors and nurses. Also tell them what medicines you take. Don't hesitate to report personal information. Feel free to talk about your beliefs and concerns. You don't need to wait to be asked.

The Prevention Charts at the end of this guide can be helpful when your doctors need to know about your health history, medicines you are taking, and what medical tests you may need or have already had.

Be sure to tell your doctors and nurses if you have any allergies or reactions to medicines.

Follow up

Once you leave the doctor's office, follow up.

- If you have questions, call the doctor's office.
- If you have problems with your medicine, call your doctor or your pharmacist.
- If you need to see a specialist or get a test, make the appointment or ask your doctor's office to make the appointment.
- If you do not hear from your doctor or nurse about test results, call and ask. If you don't understand the results, ask what they mean.



Staying Healthy

How To Take Charge of Your Health

Every day, you have a chance to make good choices about your health. This section tells you how to make good choices.



Choosing a Healthy Lifestyle

“I knew I wanted to lose weight, so I came up with a plan. I set my goals for a month at a time. The first month, I decided to trade my usual high-fat desserts for low-fat yogurt or a piece of fruit. I also set a goal of walking 30 minutes a day, 4 days a week. As the months went by, I improved my habits even further. I’ve lost 7 pounds, and I’m determined to keep going.”

Maria S.

You may ask yourself, “How do I begin to improve my health habits?” A good way to start is to set small goals instead of large ones that you won’t be able to meet. For example, instead of setting a goal of losing 15 pounds in the next year, set some smaller goals for eating better and being more active. You may decide to trade your morning donut for a bowl of cereal or start taking the stairs instead of the elevator at work.

Reducing Your Risk for Heart Disease

Many of the sections in this booklet have information to help you reduce your risk for heart disease.

Overall, you can reduce your risk if you:

- Maintain a healthy weight.
- Eat right.
- Stay physically active.
- Quit smoking (see pages 29-30).
- Control your blood pressure and cholesterol levels (see pages 37-39).
- If you have diabetes, control your disease (see pages 39-41).

Should You Take Aspirin for a Healthy Heart?

For people who are at high risk for heart disease, taking aspirin every day or every other day can help reduce that risk.

For most people, taking aspirin is safe. But for some, aspirin increases the chance of bleeding in the stomach or intestines. And there is a small chance that aspirin will increase your risk for some kinds of stroke.

Talk to your doctor or nurse to find out if taking aspirin is right for you.

Watching Your Weight

Being overweight increases your risk for heart disease, diabetes, and high blood pressure. Your doctor can tell you what you should weigh for your height.

To stay at a healthy weight, you need to balance the number of calories you eat with the number you burn off by your activities. You can get to your healthy weight and stay there by doing two things: eating right and being physically active. The next two sections, “Eating Right” and “Keeping Active,” provide some helpful hints.

Keep track of your weight. Use the Checkups and Tests Record on page 62.



Ask your doctor or nurse:

What is a healthy weight for me?

What are some ways I can control my weight?

Eating Right

Eating the right foods and the right amounts can help you live a longer, healthier life. Many illnesses and conditions—such as heart disease, obesity, high blood pressure, and type 2 diabetes—can be prevented or controlled by eating right. A healthy

diet also provides the vitamins and minerals you need.

It is never too late to start eating right. Here are some helpful tips.

Eat a variety of foods, including:

- **Vegetables**, especially dark-green leafy and deep-yellow vegetables, such as spinach or carrots.
- **Fruits**, such as melons, berries, and citrus fruits, or **juices**, such as orange or grapefruit.
- **Meat, poultry, eggs, fish, and dried beans** (for example, navy, kidney, or black), especially products low in fat, such as lean meat and poultry prepared without skin.
- **Dairy products**, such as milk, yogurt, and cheese, especially low-fat or fat-free dairy products.
- **Grains**, especially whole grains, and legumes, such as lima beans or green peas.

Limit calories and saturated fat.

Foods high in saturated fats are high in calories, so they can cause weight gain. They also increase your cholesterol levels. Try to limit:

- High-fat dairy products such as ice cream, butter, cheese, cream, and whole milk.
- Meats high in fat.
- Palm and coconut oils and lard.

Unsaturated fats do not raise cholesterol levels. Foods with unsaturated fat include vegetable oils, fish, avocados, and many nuts.

Watch portion sizes.

Don't choose "super" or other oversized portions. Be aware of how much you eat.

Keeping Active

Physical activity can help prevent heart disease, obesity, high blood pressure, type 2 diabetes, osteoporosis (thinning bones), and mental health problems such as depression. Physical activity helps you feel better overall.

What to Do

All kinds of physical activity will help you stay healthy, whether it is moderate or vigorous. It's a good idea to aim for at least moderate activity—such as brisk walking, raking leaves, house cleaning, or playing with children—for 20 to 30 minutes most days of the week. Generally, the more active you are, the healthier you will become.

How to Get Started and Keep at It

If you have not been active, start slowly.

Choose something that fits into your daily life.

Choose an activity you like, or try a new one. Activities such as dancing, swimming, or biking can be fun.

Ask a friend to exercise with you, or join a group.

Make time in your day for physical activity.

If the weather is bad, try an exercise show on TV, watch an exercise tape, walk in the mall, or work around the house.



Ask your doctor or nurse:

How do I get started with an exercise program?

Preventing Skin Cancer

Skin cancer is often preventable.

You can lower your risk for skin cancer by:

- Limiting the amount of time you spend in the sun, especially between the hours of 10:00 a.m. and 3:00 p.m.
- Wearing sunglasses and clothing that protects against the sun—such as broad-brimmed hats, long-sleeved shirts, and long pants—when you are in the sun.
- Using sunscreen when you are in the sun. (But, don't stay out in the sun longer just because you are wearing sunscreen.)

Preventing Injury

Following basic safety rules can prevent many serious injuries. Here are two checklists to follow to help keep you and your family safe.

To help protect yourself at home:

- Use smoke detectors. Remember to check the batteries every month. Change the batteries every year. You may want to use a reminder. For example, change the batteries around your birthday or some holiday.
- Lock up guns and ammunition, and store them separately.
- Keep hallways and stairwells well lit.
- Remove or repair things that someone could trip on, such as loose rugs, electrical cords, and toys.

To help protect yourself away from home:

- Wear seat belts.
- Never drive after drinking alcohol.
- Always wear a safety helmet while riding a motorcycle or bicycle.
- Be alert for hazards in your workplace. Follow workplace safety rules.

Taking Medicines Correctly

Always be sure you know everything about a medicine before you take it. This information will help you get the full benefits from your medicine. It will also help you avoid taking too much or too little of a medicine. Taking medicine in the wrong way can make you worse instead of better.



Ask your doctor, nurse, or pharmacist:

What is the name of the medicine? Is this the brand name or the generic name?

What is the medicine supposed to do?

How often and when do I take it—and for how long?

Are there any foods, drinks, other medicines, dietary supplements, or activities I should avoid while taking this medicine?

What are the possible side effects?

What should I do if they occur?

When should I see an improvement?

What written information is available about the medicine?

To keep track of the medicines you are taking, fill in the Medicine Minder on p. 68. You may want to bring the chart with you when you go to your doctor, nurse, or pharmacist.

Your Medicine: Play It Safe (AHRQ Publication No. 03-0019) gives practical tips on how to take medicines safely. To get a copy, call the Agency for Healthcare Research and Quality (AHRQ) Publications Clearinghouse at 1-800-358-9295 or e-mail at ahrqpubs@ahrq.gov.



Making Smart Choices About Sexual and Reproductive Health

“My friends at college have been talking about how common chlamydia is among women our age. I asked my gynecologist about it. She said that often sexually active women have chlamydia but have no symptoms, so they don’t get treated. She said it can cause serious problems. I got tested and was relieved to find out I don’t have it.”

Lucy S.

This section offers information about sexually transmitted diseases and birth control. There are also tips for women about getting enough folic acid during pregnancy and what to expect from menopause.

Sexually Transmitted Diseases

Sexually transmitted diseases, such as chlamydia, HIV infection, herpes, syphilis, gonorrhea, and hepatitis B, are passed easily from one person to another during sex.

Sexually transmitted diseases may cause serious health problems. For example, HIV causes AIDS. Hepatitis B can cause liver damage, including liver cancer. Many STDs can harm a pregnancy and the health of the baby. Some, such as chlamydia, can lead to infertility.

If you have sex, you may be at risk for a sexually transmitted disease. Your risk is increased if:

- You or your partner has or had other sexual partners.
- You do not *always* use condoms consistently and correctly.
- Your partner has a sexually transmitted disease.
- You use injection drugs.
- You exchange sex for money or drugs.
- You live in an area where a particular sexually transmitted disease is common.
- You are a man and have sex with other men.

A Note on Chlamydia

Chlamydia (kle mí dee ah) is the most widespread bacterial sexually transmitted disease in the United States. Like other STDs, chlamydia is more common in some communities than in others.

Once chlamydia is diagnosed, it is easy to treat and cure. But often, people who have chlamydia have no symptoms, so they don't know they have it. Left untreated, this disease can increase your risk for HIV infection, make you infertile, or harm your pregnancy.

For women who do have symptoms, these may include painful inflammation of the cervix or an unusual vaginal discharge. For men, chlamydia may cause painful urination.

If you are a woman, you are at increased risk for chlamydia if you have other risk factors for STDs or you are 25 or younger.

If you are at increased risk, you should be tested regularly even if you have no symptoms.

If you are a man, you may want to be tested, too. Since you can have chlamydia without knowing it, you may pass it to your sex partner without knowing.

If you are diagnosed with chlamydia, you should encourage your partner to see his or her doctor for testing, too.

If you are at increased risk for sexually transmitted diseases, talk to your doctor about whether you should be tested. This is especially important because some diseases, such as chlamydia, may have no symptoms. Serious health problems may develop before you realize you have a disease.

You can greatly lower your risk for sexually transmitted diseases by using a male latex condom **every time you have sex**. If you are allergic to latex, use a polyurethane (soft plastic) or synthetic condom.

Planning Your Family

If you have sex and are not ready to have a child, you and your partner may want to use some form of birth control. Many birth control methods are available for men and women. Each has advantages and disadvantages.

The condom is the only birth control method that protects against most STDs, including HIV/AIDS. Use a latex condom. If you are allergic to latex, use a polyurethane (soft plastic) or synthetic condom.

Whichever birth control method you choose, remember that, for it to work, you must use it all the time and use it correctly.



Ask your doctor or nurse:

Which method of birth control is best for me?

Especially for Women

Folic Acid During Childbearing Years

If you are a woman who can become pregnant, you should take at least 400 micrograms (or 0.4 mg) of folic acid every day. Folic acid, also known as folate, is a B-vitamin that can be found in some enriched foods and in vitamin pills.

If you have enough folic acid in your body when you become pregnant, this vitamin can lower the risk for birth defects of your baby's brain or spine. You need to be taking the vitamin before you become pregnant because, by the time you know you are pregnant, birth defects may already have formed in your child.

To get the folic acid you need:

- Take a vitamin with 400 micrograms (or 0.4 mg) of folic acid (folate) every day. Both folic acid pills and multivitamins can be bought at grocery stores, pharmacies, or discount stores.
- OR, every day, eat a bowl of cereal that has 100% of the daily requirement of folic acid per serving. (The nutrition information on the cereal box will tell you how much folic acid is in each serving.)

- AND eat folate-rich fruits and vegetables and foods fortified with folic acid. Fruits, orange juice, green leafy vegetables, and dried beans, peas, lentils, and peanuts all have folate. Enriched pasta, rice, bread, and flour have added folic acid.

Menopause and Beyond

The time when your menstrual cycle stops for good is called menopause. Most women reach menopause in their late 40s or early 50s.

During the years leading up to menopause, levels of two female hormones, estrogen and progesterone, begin to change. These changes signal that your body is getting ready to stop menstruating. This time leading up to menopause is called perimenopause.

Most women begin perimenopause between ages 35 and 50. Perimenopause usually lasts around 5 to 7 years. You can still get pregnant during this time, so you may want to use some method of birth control.

For many women, the shifting levels of hormones during perimenopause cause physical and emotional changes. Some of these changes may be uncomfortable, but there are many ways to relieve the discomfort.

The changes could include any of the following:

- Skipped periods.
- Irregular bleeding.
- Hot flashes.
- Mood swings.
- Sleep problems.
- Painful intercourse from vaginal dryness.

If you have not had a period for at least a year, you are likely to be in menopause. At this point, your hormone levels drop, so you are no longer producing eggs. Once this happens, there is no chance of becoming pregnant.

What happens after menopause?

- Women are at higher risk for some diseases, such as osteoporosis (bone thinning) and heart disease. Their bodies no longer make the estrogen that helps protect them against these diseases. (For more information on preventing these diseases, see “Osteoporosis” beginning on page 42 and “Reducing Your Risk for Heart Disease” on page 11.)
- Some women also continue to have symptoms such as hot flashes and vaginal dryness.

Hormone Therapy. Hormone therapy increases the levels of the hormones estrogen, progesterone, or both in your body. If you are approaching menopause or have gone through menopause, you may be considering hormone therapy to relieve symptoms of menopause or to reduce your risk for diseases such as osteoporosis.

Hormone therapy may reduce your risk for fracture, bone thinning, and colorectal cancer. On the other hand, there is evidence that some hormone therapies may increase your risk for breast cancer, heart disease, blood clots, stroke, and gall bladder disease. For women with mild or no symptoms of menopause, the potential harms of hormone therapy may outweigh the benefits.

If you are considering hormone therapy, it is important to be well informed about these benefits and harms and how they apply to you specifically. Your doctor can help you decide.



Ask your doctor or nurse:

How can I relieve the symptoms of perimenopause and menopause?

Is taking hormones right for me?

If so, how long can I take hormones safely?



Overcoming Depression

“I started making excuses to avoid social occasions. I guess I knew something was wrong, but I felt too low to do anything about it. Luckily, my wife pushed me to talk to my doctor about depression. The doctor recommended counseling and trying some medicines. Now it’s hard to believe how depressed I was. I feel relieved every day.”

Rodney F.

Everybody feels “down” or “blue” sometimes. But, if these feelings are very strong or last for most of the day nearly every day for two weeks or longer, they may be due to a medical illness called depression.

The good news is that depression can be treated. You do not have to face this problem without help.

Here are some warning signs of depression.

Changes in the way you feel:

- You feel sad, hopeless, or guilty most of the time.

- You feel tired or lack energy.
- You have thoughts of suicide or death.

Changes in sleeping and eating habits:

- You sleep either too much or too little.
- Your appetite has changed. You have gained or lost weight.

Changes in daily living:

- You have lost interest and pleasure in daily activities.
- You have problems making decisions or thinking clearly.

If you have had most of these symptoms for at least two weeks, you may be suffering from depression. Talk to your doctor about whether you are depressed and what you should do about it.

The sooner you get treatment for depression, the sooner you will begin to feel better. The longer you wait, the harder depression is to treat.

Depression usually is treated with counseling, medicine, or both. Medicines for depression are not addicting or habit forming. They work for people with severe depression and may be useful for people with mild to moderate depression.

Treatment works gradually over several weeks. If you do not start to feel better after this time, tell your doctor. It may take some time to find what works best for you.



Getting Help for Smoking and Alcohol or Drug Abuse

“I tried at least half a dozen times before I quit smoking for good. This time, I think I’ve licked it. But I know I have to be careful. Even after 6 months, I stay away from places where people are smoking.”

Jeff H.

Smoking

More than 430,000 Americans die each year from smoking. Smoking causes illnesses such as cancer, heart and lung disease, stroke, and problems with pregnancy.

When you quit, you lower your chances of getting sick from smoking.

Quitting is hard. Most people try several times before they quit for good.

When you are getting ready to quit:

- Make a plan and set a quit date.
- Tell your doctor that you want to quit smoking, and get medicine to help you quit.
- Tell your family, friends, and people you work with that you are going to quit. Ask for their support.

When you quit:

- Get support and encouragement. You may want to join a quit-smoking program.
- If you slip and smoke, don't give up. Set a new date to get back on track.
- After you quit, don't smoke—not even a puff. Try to keep yourself away from all cigarettes.

The following tools from the U. S. Public Health Service can help you quit smoking:

- *You Can Quit Smoking Consumer Guide*. This 12-page booklet tells you how to get help to quit smoking.
- *Good Information for Smokers*. This 12-page easy-to-read booklet tells you why and how to quit smoking.
- *You Can Quit Smoking 5-day Countdown*. This mini-flip booklet gives helpful tips for what to do on each of the five days before you quit.
- *You Can Quit Smoking Pocket Card*. This carry-it-with-you card sums up the 4 steps to quitting and includes a toll-free help number.

To get free copies, call the AHRQ Publications Clearinghouse at 1-800-358-9295 or e-mail ahrqpubs@ahrq.gov.

Alcohol or Drug Abuse

Abusing alcohol or drugs can cause serious medical and personal problems. Alcohol and drug abuse can lead to accidents, depression, and problems with friends, family, and work.

Do You Have a Drinking Problem?

Ask yourself the questions below. A “yes” answer to any of them may be a sign that you have a drinking problem. Alcohol abuse and alcoholism are treatable with counseling, medicines, or both. Talk to your doctor or nurse.

- Have you ever felt that you should cut down on your drinking?
- Have people annoyed you by criticizing your drinking?
- Have you ever felt bad or guilty about drinking?
- Have you ever had a drink first thing in the morning to steady your nerves or to get rid of a hangover?

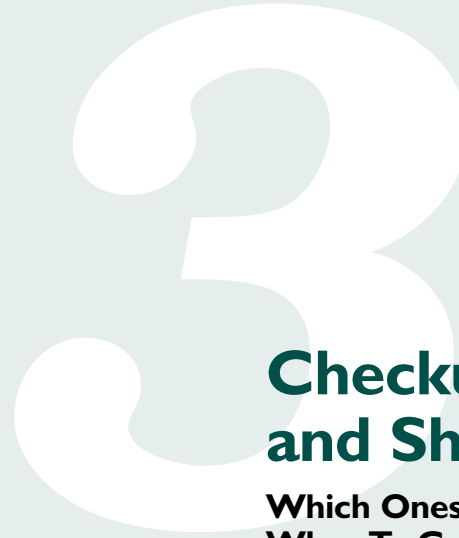
Drug use can cause heart and breathing problems.

Alcohol abuse can cause liver disease, heart problems, and several kinds of cancer.

Here are some suggestions about drugs and alcohol:

- Don't use illegal (street) drugs of any kind, ever.

- If you drink alcohol, limit the amount—no more than one drink a day for women and two drinks a day for men. One drink equals a 12-ounce bottle of beer or wine cooler, a 5-ounce glass of wine, or 1.5 ounces of 80-proof distilled spirits, such as gin, whiskey, or rum.
- Do not drink alcohol before driving or operating heavy machinery.



Checkups, Tests, and Shots

Which Ones You Need and When To Get Them

Checkups and tests, such as vision tests or cholesterol tests, help find diseases or conditions early, when they are easier to treat. Shots (immunizations) protect you from different diseases.

This section gives you information on why and when you may need different checkups, tests, and shots.



Dental, Hearing, and Vision Care

“I keep better track of when my pets need their checkups than when I need checkups myself. I can’t seem to remember the next time I need to visit the dentist or get my eyes checked. So I’ve started to ask my dentist and doctor when I need my next appointment. I write it down in my Pocket Guide to Good Health for Adults.”

Narong P.

Getting the checkups you need for your teeth and gums, vision, and hearing is an important part of your health care. This section tells you how to take care of your teeth and gums and can help you decide whether you need your hearing and vision checked. Keep track of these checkups with your Checkups and Tests Record on page 62.

Teeth and Gums

Here are some simple tips to follow for dental health:

- Visit your dentist once or twice a year for checkups.
- Brush after meals with a toothbrush that has soft or medium bristles.
- Use toothpaste with fluoride.
- Use dental floss every day.
- Eat fewer sweets, especially between meals.
- Do not smoke or chew tobacco products.

Hearing

Hearing loss is one of the most common health problems. Your risk for hearing loss increases after age 50.

How can you tell if you have a hearing problem? Here are some signs:

- You may have to strain to hear a normal conversation.
- You may find yourself turning up the volume of the TV and radio so loud that others complain.

If you are worried about your hearing, talk to your doctor or nurse. They may suggest a hearing test. Hearing aids can help you hear well.

Vision

People 45 and older have more vision problems than younger people, and the problems are more likely to result in accidental injuries. By age 65, you should have regular eye exams.

What Is Glaucoma, and Should You Be Tested for It?

Glaucoma can lead to vision problems and even cause blindness. Glaucoma is more common in people older than 45 than it is earlier in life.

Early treatment—with medicine, surgery, or both—can prevent or delay the serious vision problems caused by glaucoma.

You are more likely to get glaucoma, and you should see an eye doctor for a glaucoma test, if:

- You are severely near-sighted.
- You have diabetes.
- You have a family history of glaucoma.
- You are older than 65 or older than 40 and black.

If you have vision problems, eyeglasses or contact lenses can improve your vision. Doctors also have other ways to improve your vision and prevent you from losing your sight. Be sure to tell your doctor if you are having trouble with your vision.



Ask your doctor or nurse:

How often do I need to have my eyes checked?



Tests To Find Diseases or Conditions Early

“Last year, my doctor told me I had high cholesterol. The doctor said to eat the right foods, lose weight, and exercise. I was worried about having a heart attack, but I didn’t know where to begin. So I went back to my doctor and talked with her about a plan for taking better care of myself.”

Jaime S.

Many diseases and conditions can be prevented or controlled if they are caught early. This section will help you decide what tests you need and how often you need them. You can keep track of the tests with your Checkups and Tests Record on page 62.

High Blood Pressure

High blood pressure can lead to heart disease, stroke, and kidney disease. It is most common in black persons and persons older than 45.

Being active and eating a healthy diet are two ways you can keep your blood pressure under control. (See “Eating Right” beginning on page 12 and “Keeping Active” beginning on page 14.)

Some people need to take medicine to keep their blood pressure at healthy levels. If you take medicine, be sure to talk to your doctor about how to take it. Do not skip any doses of medicine.



Ask your doctor or nurse:

What should my blood pressure be?

How often should I have my blood pressure checked?

If I have high blood pressure, what can I do to lower it?

High Cholesterol

Too much cholesterol can clog your blood vessels and is a major cause of heart disease.

To help lower your cholesterol and keep it at a healthy level, eat the right foods, maintain a healthy weight, and be physically active. (For more information, see the sections “Eating Right” starting on page 12 and “Keeping Active” starting on page 14.) Your doctor or nurse may suggest you take medicine to lower your cholesterol.

You should start having your cholesterol checked if:

- You are a man 35 or older.
- You are a woman 45 or older.
- You are a man between the ages of 20 and 35 or a woman between the ages of 20 and 45, and you have other risk factors for heart disease. Other risk factors are tobacco use, diabetes, high blood pressure, or a family history of heart disease.

Most experts recommend checking your cholesterol every 5 years. Your doctor or nurse may suggest you have it checked more often, especially if your cholesterol is too high.



Ask your doctor or nurse:

How often should I have my cholesterol checked?

What is a healthy cholesterol level for me?

If I have high cholesterol, what can I do to lower it?

Diabetes

Diabetes, or high blood sugar, is a major cause of blindness, kidney disease, high blood pressure, stroke, heart disease, and amputation of the lower legs and feet. Almost all adults who have diabetes have type 2 diabetes. This type usually appears in

middle age. The number of people in the United States who have type 2 diabetes is growing.

Exercise, a healthy diet, and watching your weight can lower your chances of getting type 2 diabetes. If you already have diabetes, those health habits and quitting smoking can help you prevent or control many of the problems of diabetes.

Your risk for type 2 diabetes increases as you get older. In the United States, almost 1 in 5 people between the ages of 65 and 74 has diabetes.

Your risk for type 2 diabetes also is higher than average if:

- You are American Indian, Alaska Native, Hispanic, or black.
- You have a family member with diabetes.
- You are overweight.
- You had diabetes during pregnancy.

You may want to be tested for diabetes if you have high blood pressure or high cholesterol. If you have diabetes, you may need to maintain lower blood pressure and cholesterol levels than you would if you did not have diabetes.



Ask your doctor or nurse:

If you are at risk for diabetes, have high blood pressure, or have high cholesterol:

Should I be tested for diabetes?

If you learn that you have diabetes:

When and how often do I need:

- Eye and dental exams?
- Blood pressure and cholesterol checks?
- Blood sugar checks?
- Flu shots?

Should I take medicines for my diabetes? If so, how much should I take and when?

What is the right weight for me?

What kinds and amounts of food are right for me?

How should I take care of my feet?

If you smoke:

What can I do that will help me stop smoking? (For more information about quitting smoking, see “Smoking” beginning on page 29.)

Osteoporosis

Osteoporosis, or thinning bones, makes your bones break easily. This condition is more common in women than in men. After women have gone through menopause, their bodies make less estrogen (a hormone that helps protect their bones). Their bones become more prone to breaking.

Half of all women past menopause will break a bone during their lives. A bone density test can help determine whether your bones are prone to breaking. If they are prone to breaking, your doctor may suggest that you take a medicine to reduce your risk for fractures.

Women who are 65 or older should be tested regularly. You should begin to be tested for osteoporosis at age 60 if you are at increased risk for fractures, for example, if you weigh less than 155 pounds.

You can reduce your risk for osteoporosis by:

- Doing weight-bearing exercises, such as walking, climbing stairs, jogging, yoga, and lifting weights.
- Getting 1,000 to 1,300 milligrams of calcium every day by eating the right foods (see “Which Foods Are High in Calcium?” at right.) A cup of milk or plain yogurt has 300 milligrams of calcium. You can also take calcium pills with vitamin D if you are not getting enough calcium in the food you eat.

- Not smoking.
- Taking medicines that can help prevent osteoporosis.

Which Foods Are High in Calcium?

Foods in the milk group, such as milk and dishes made with milk, cheeses, and yogurt. (Choose lower fat, lower cholesterol foods, such as skim milk.)

Canned fish with soft bones, such as sardines, anchovies, and salmon.

Dark-green leafy vegetables, such as kale, mustard greens, turnip greens, and spinach.

Tofu, if it is processed with calcium sulfate. Read the label to find out.

Tortillas, if they are made from lime-processed corn. Read the label to find out.



Ask your doctor or nurse:

How can I get enough calcium?

Should I have a bone density test? If so, how often should I have this test?

What medicines can help prevent osteoporosis? Should I take them?

Tuberculosis

Tuberculosis (TB) is an infection that affects the lungs and eventually other parts of the body. This infection can be passed from one person to the next. It is treated more easily if caught early.

You are at greater risk for TB and may need a TB test if:

- You have been in close contact with someone who has TB.
- You have recently moved from Asia, Africa, Central or South America, or the Pacific Islands.
- You have kidney failure, diabetes, HIV, or alcoholism.
- You have injected or now inject street drugs.



Tests and Exams To Find Cancers

“I knew many of my friends were getting mammograms. But I didn’t think it was very important because no one in my family ever had breast cancer. Then a good friend of mine was diagnosed with breast cancer, and she had no family history of it. So I decided to ask my doctor about the testing. She told me that all women 40 and older need a mammogram every year or two.”

Anita T.

You can increase your chances of finding a cancer before it has spread by getting certain screening tests and exams regularly. Many cancers can be treated more easily when they are found early.

The tests you get and how often you get them will depend on your age, health history, and risks, such as family history and lifestyle.

This section gives you some guidelines about what tests you may need to find certain cancers. You can keep track of cancer tests you have had by using the Cancer Tests Tracker on page 64.

Colorectal Cancer

Colorectal cancer is second only to lung cancer as a cause of death from cancer. But if colorectal cancer is caught early, it can be treated.

Older men and women are more likely to get colorectal cancer than those who are younger. Starting at age 50, you should be tested for colorectal cancer. Tell your doctor if you have had polyps or if you have family members who have had colorectal cancer, breast cancer, or cancer of the ovaries or uterus. If so, you may need to be tested more often and at an earlier age.

There are a number of effective tests, used separately or in combination, for colorectal cancer. Each has advantages and disadvantages.



Ask your doctor or nurse:

Should I be tested for colorectal cancer?

Which test or tests for colorectal cancer would be best for me?

How often should I get tested?

Breast Cancer

Breast cancer is the most common cancer among women in the United States.

Should You Take Medicines To Reduce Your Risk for Breast Cancer?

If you are at high risk for breast cancer, talk with your doctor about whether you should take medicine to reduce your risk. While medicines can reduce some women's risk for breast cancer, they also may cause blood clots and cancer of the uterus.

From age 40 on, your risk for breast cancer increases. If you have a sister or mother who has had breast cancer, your risk is even higher. A mammogram every 1-2 years beginning at age 40 can help find this disease early when it is easier to treat.

Mammograms have a few risks. They may not find all breast cancers. Also, they may show that you have cancer when you really do not. These false-positive results could lead to unnecessary biopsies.



Ask your doctor or nurse:

Should I have a mammogram?
If so, how often?

Cervical Cancer

All women who are or have been sexually active are at risk for cancer of the cervix unless their uterus has been completely removed. Most deaths from cancer of the cervix can be prevented if the cancer is found and treated early. A Pap test is used to find cervical cancer.

Women need to have a Pap test at least every 3 years, and women at increased risk for cervical cancer may need the test more often.

You are at increased risk for cervical cancer if:

- You have had a sexually transmitted disease.
- You have had more than one sex partner.
- You have had previous abnormal Pap tests.

Your doctor may suggest stopping Pap tests if:

- You are older than 65, have had regular, normal Pap tests, and are not at increased risk for other reasons.
- You have had a hysterectomy.



Ask your doctor or nurse:

How often do I need a Pap test?

Prostate Cancer

Prostate cancer is most common in men older than 50.

You also may be at increased risk for prostate cancer if:

- You are black.
- Your father or brother has had prostate cancer.

Tests such as a PSA (prostate-specific antigen) blood test or a digital rectal exam can help detect prostate cancer, but these tests also have risks. They sometimes have false positive results, which may lead to avoidable anxiety and unnecessary biopsies and treatment. It is not yet clear whether these tests save lives.



Ask your doctor or nurse:

Should I be tested for prostate cancer?

Oral Cancer

Oral cancer includes cancers of the lip, tongue, pharynx, and mouth. Most oral cancers occur in people older than 40 who use tobacco or alcohol. People who are in the sun a lot are at risk for cancer of the lip.

You can help prevent oral cancer by not smoking or abusing alcohol. If you are outdoors a lot, use a sun block on your lips.

If you chew or smoke tobacco or abuse alcohol, you may want your dentist to examine your mouth for signs of oral cancer during your regular dental checkup. (See “Alcohol or Drug Abuse,” starting on p. 31, for amounts of alcohol considered safe.) You also may need to see your dentist more often.



Ask your doctor, dentist, or nurse:

How often should I get dental checkups?



Shots To Prevent Diseases

“I cut my foot walking on the beach. I asked my doctor if I needed a tetanus-diphtheria shot. She said most people need one every 10 years. I hadn’t had it since I was a kid, so I got one that day.”

Ozzie S.

You can prevent some serious diseases by getting shots (immunizations). This section tells you which shots you need and when. Keep track of the shots you receive. Use the Shots Chart on page 66.

Measles-mumps-rubella Shot

If you have never had a measles-mumps-rubella shot or never had measles, mumps, and rubella, you should receive at least one dose of this vaccine if:

- You are a woman and able to become pregnant.
- You were born after 1956.

This shot is especially important for women. If a pregnant woman gets rubella, she could have a miscarriage, or her baby could have birth defects.

Tetanus-diphtheria Shot

Most people need this shot every 10 years.

Flu Shots

Most people 50 or older need a flu shot every year.

You may need flu shots before age 50 if:

- You have lung, heart, or kidney disease, diabetes, or cancer.
- You are a health care worker.
- You are infected with HIV or have AIDS.

Pneumonia Shot

Everyone needs a pneumonia shot once around age 65. If you have lung, heart, or kidney disease; HIV; diabetes; or cancer, you may need this shot sooner.

Hepatitis B Shots

You should receive hepatitis B shots if:

- You have had sex with more than one partner or with someone infected with hepatitis B.
- You are a man and have had sex with a man.
- You have had any other sexually transmitted disease within the last 6 months.
- You have injected street drugs.
- You have a job that involves contact with human blood or blood products.
- You travel to areas where hepatitis B is common.



More Resources for Good Health

Where to Get More Information

To learn more about staying healthy and preventing disease, you can contact the organizations listed in this section. You can get free information by writing, using the toll-free telephone numbers, and checking the Web sites.

General Health Information

Agency for Healthcare Research and Quality
U.S. Department of Health and Human Services
1-800-358-9295
<http://www.ahrq.gov>

Centers for Disease Control and Prevention
U.S. Department of Health and Human Services
<http://www.cdc.gov/health>

healthfinder®
(Provides electronic information on a wide variety of health topics. This site can direct you to medical journals and other publications, clearinghouses, databases, hot lines, medical research, support groups, organizations, and libraries.)
<http://www.healthfinder.gov>

National Women's Health Information Center
U.S. Department of Health and Human Services
1-800-994-9662
<http://www.4women.gov>

Alcohol and Drug Abuse

National Clearinghouse for Alcohol and Drug Information
Substance Abuse and Mental Health Services Administration
U.S. Department of Health and Human Services
1-800-729-6686
<http://www.health.org>

National Institute on Alcohol Abuse and Alcoholism
National Institutes of Health
U.S. Department of Health and Human Services
301-443-3860
<http://www.niaaa.nih.gov>

National Institute on Drug Abuse
National Institutes of Health
U.S. Department of Health and Human Services
301-443-1124
<http://www.drugabuse.gov>

Cancer

Cancer Information Service
National Cancer Institute
National Institutes of Health
U.S. Department of Health and Human Services
1-800-422-6237
1-800-332-8615 (TTY)
<http://www.cancer.gov>

Depression

National Institute of Mental Health
National Institutes of Health
U.S. Department of Health and Human Services
301-443-4513
<http://www.nimh.nih.gov/publicat/depressionmenu.cfm>

Diabetes

Lower Extremity Amputation Prevention Program (LEAP)
Bureau of Primary Health Care
Health Resources and Services Administration
U.S. Department of Health and Human Services
1-888-275-4772

<http://www.bphc.hrsa.gov/leap>

National Institute of Diabetes and Digestive and Kidney Diseases
National Institutes of Health
U.S. Department of Health and Human Services
301-496-3583
<http://www.niddk.nih.gov>

Hearing

National Institute on Deafness and Other Communication Disorders
National Institutes of Health
U.S. Department of Health and Human Services
1-800-241-1044
1-800-241-1055 (TTY)
<http://www.nidcd.nih.gov>

Heart, Lung, and Blood Diseases

Information Center
National Heart, Lung, and
Blood Institute
National Institutes of
Health
U.S. Department of Health
and Human Services
301-592-8573
240-629-3255 (TTY)
<http://www.nhlbi.nih.gov>

Maternal and Child Health

HRSA Information Center
Health Resources and
Services Administration
U.S. Department of Health
and Human Services
1-888-275-4772
<http://www.ask.hrsa.gov>

Mental Health

National Institute of
Mental Health
National Institutes of
Health
U.S. Department of Health
and Human Services
301-443-4513
301-443-8431 (TTY)
<http://www.nimh.nih.gov>

Nutrition

Center for Food Safety
and Applied Nutrition
Food and Drug
Administration
U.S. Department of Health
and Human Services
1-888-463-6332
<http://www.fda.gov>

Osteoporosis

Osteoporosis and Related
Bone Diseases
National Resource Center
National Institutes of
Health
U.S. Department of Health
and Human Services
1-800-624-2663
202-466-4315 (TTY)
<http://www.osteoporosis.org>

Safety and Injury Prevention

Consumer Product Safety
Commission
1-800-638-2772
<http://www.cpsc.gov>

Sexually Transmitted Diseases and AIDS

Centers for Disease
Control and Prevention
U.S. Department of Health
and Human Services
CDC National HIV, AIDS,
& STD Hotline:
1-800-342-2437

CDC HIV, AIDS, & STD
Hotline for the Deaf:
(TTY) 1-800-243-7889

CDC National Prevention
Information Network:
1-800-458-5231
1-800-243-7012 (TTY)
<http://www.cdcnpin.org>

National Institutes of
Health
U.S. Department of Health
and Human Services
www.AIDSinfo.NIH.gov
1-800-448-0440
888-480-3739 (TTY)

Smoking

Cancer Information Service
National Cancer Institute
National Institutes of Health
U.S. Department of Health and Human Services
1-800-422-6237
1-800-332-8615 (TTY)
<http://www.cancer.gov>

Stroke

National Institute of Neurological Disorders and Stroke
National Institutes of Health
U.S. Department of Health and Human Services
1-800-352-9424
<http://www.ninds.nih.gov>

Urinary Problems

National Institute of Diabetes and Digestive and Kidney Diseases
National Institutes of Health
U.S. Department of Health and Human Services
301-496-3583
<http://www.niddk.nih.gov>

Vision

National Eye Institute
National Institutes of Health
U.S. Department of Health and Human Services
301-496-5248
<http://www.nei.nih.gov>



Prevention Charts

How To Keep Track of Your Health Care

The charts in this section can make it easier to keep track of your health care. Ask your doctor or nurse how often you need each type of care and when. Then write down the information in the charts here. Also, write down the date and results of the care you get or ask your doctor to write down this information. Bring this guide with you each time you see a doctor or nurse. That way, you can update your Prevention Charts right away.

Basic Information

Name: _____

Address: _____

Telephone: _____

Emergency Contact: _____

Allergies: _____

Past Illnesses or Operations: _____

Doctors' Phone Number(s): _____

Medical Insurance Company and Number(s): _____

Checkups and Tests Record

Use this record to write down the date you receive the tests and the results. Try to remember to bring the booklet with you each time you see a doctor.

This record will also help you keep track of when you need your next test or checkup.

Checkup/Test	Date/Results					
Blood Pressure						
Blood Sugar						
Bone Density						
Cholesterol						
Dental Visits						
Hearing						
Tuberculosis						
Vision						
Weight						

Cancer Tests Tracker

Type of Test/Exam	Date/Results					
Colorectal Cancer Test						
Mammogram						
Pap Test						
Prostate Cancer Test/Exam						
Oral Cancer Exam						

Shots Chart

Immunization (Shot)	How Often	Date(s) Received							
Tetanus-Diphtheria	Every 10 years								
Measles-Mumps-Rubella (for adult women born after 1956 and able to become pregnant)	At least once (See p. 51)								
Flu	Every year after age 50 or sooner if at risk (See p. 52)								
Pneumonia	Once at age 65								
Hepatitis B	If at risk (See p. 52)								

This guide was developed by the Agency for Healthcare Research and Quality (AHRQ), part of the U.S. Department of Health and Human Services.

AHRQ is the lead Federal agency charged with supporting research designed to improve the quality of health care, reduce its cost, and broaden access to essential services.

The U.S. Preventive Services Task Force (USPSTF), an independent panel of experts in primary care and prevention convened by AHRQ, systematically reviews the evidence of effectiveness of clinical preventive services—screening tests, immunizations, counseling, and chemoprevention (for example, aspirin to prevent cardiovascular disease)—and makes recommendations for their use in primary health care. This guide is based on USPSTF recommendations.

Put Prevention Into Practice (PPIP), a national program sponsored by AHRQ, develops resources for clinicians, patients, and office systems to increase the delivery of USPSTF-recommended preventive services in the primary care setting.

To order copies of this guide, call the AHRQ Publications Clearinghouse at 1-800-358-9295 or e-mail at ahrqpubs@ahrq.gov.

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The U.S. Preventive Services Task Force (USPSTF) continuously updates its recommendations on clinical preventive services and makes them available on the Agency for Healthcare Research and Quality (AHRQ) Web site. Put Prevention Into Practice (PPIP) tools are revised regularly to correspond with USPSTF updates and are also available on the AHRQ Web site.

For the most current recommendations and updates, visit the preventive services section of the AHRQ Web site at www.preventiveservices.ahrq.gov. Or, for immediate notification of new and updated recommendations from the current USPSTF and new resources from the PPIP program, join the AHRQ Prevention LISTSERV®. To join the LISTSERV® visit the AHRQ Web site at www.ahrq.gov/clinic/prev/prevlistserv.htm.