



POLMED[®]

OUR INVESTMENT OUR HEALTH OUR FUTURE

YOUR CARE

NEWSLETTER

JUNE 2017



He who has health, has hope; and he who has hope, has everything.
- Arabian proverb

Dear Member

It is hard to believe that we are halfway through 2017 already! Perhaps it is the perfect time for you to do a little reflection, to see where you are on your health journey – particularly if you suffer from a chronic condition.

Gaining knowledge on how to best manage your condition and follow a healthier lifestyle isn't difficult to do. But the real challenge lies in **you** taking the action needed to manage and improve your health. Remember, your body cannot take care of itself, and does need some extra effort on your part to be at its best.

This month, our main focus is on heart and respiratory related issues. We illustrate the **dangers of high cholesterol**; discover how to **take action in an asthma emergency**; and shed some light on **the adverse effects of smoking**. Lastly, we look at the sensitive issue of having a **substance abuse problem** and the avenues you can explore to get help, should you need it.

Enjoy the read!

POLMED YOUR CARE Support Team



The dangers of high cholesterol

Cholesterol is necessary for good health, but too much of it can be detrimental. Keep your cholesterol in check to reduce your risk for heart disease or stroke.

[Read more ...](#)



What you don't know about smoking

We all know that smoking increases your risk for lung cancer and heart disease. But there are even more sinister dangers you need to be aware of.

[Read more ...](#)



Help for a severe asthma attack

Asthma may become severe within minutes to a few hours. Would you know what to do in an asthma emergency?

[Read more ...](#)



Substance abuse – help is at hand

Are you or someone you know struggling with substance abuse? Overcoming substance abuse is not an overnight task, but help is at hand.

[Read more ...](#)

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Cholesterol is necessary for good health, but too much of it can be detrimental.

It is estimated that 16 million South Africans suffer from high cholesterol. We take a closer look at this silent killer.

What is cholesterol?

Cholesterol is a soft, waxy, fatty substance found in the bloodstream and in all tissues and cells of the body. It is created naturally by the liver, and is essential to the proper functioning of hormones, the structure of all cell membranes, and as an insulation layer around the nerves.

Cholesterol is also needed to produce Vitamin D and the bile acids that help digestion. The body produces most of the cholesterol it needs, but it is also consumed in some foods – mostly in animal products like butter, cheese and red meat. A diet heavy in these foods can cause blood cholesterol levels to rise, which can increase the risk for cardiovascular disease.

The main thing to understand is that not all cholesterol is bad. We all have “good” and “bad” cholesterol. Low-density lipoprotein (LDL) cholesterol is sometimes called “bad” cholesterol because high levels can cause atherosclerosis, which is a dangerous accumulation of cholesterol and other deposits on the walls of your arteries. You should therefore have low levels of LDL cholesterol.

High-density lipoprotein (HDL) cholesterol is sometimes called “good” cholesterol because it helps remove the LDL cholesterol from the arteries. It is the healthier cholesterol to have and so the levels should be high.

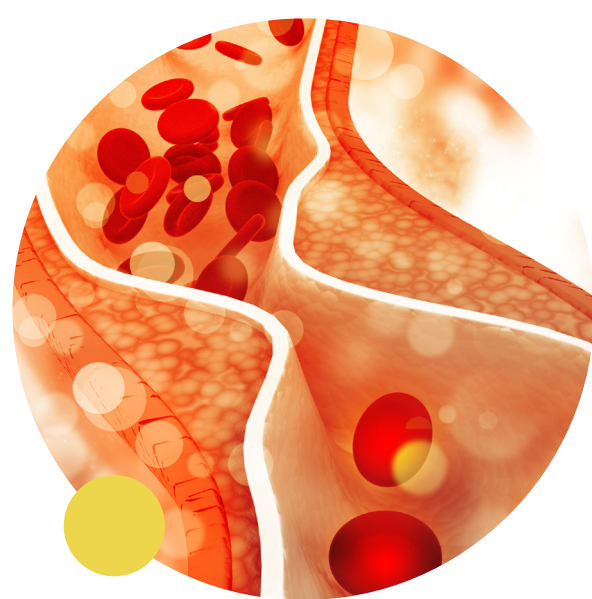
What contributes to high cholesterol?

High cholesterol occurs when the amount of cholesterol in your blood is abnormally high.

The condition is often symptomless and can go undetected for years. Regular screenings and follow-up testing is necessary, especially for those at risk.

Some people naturally have high blood cholesterol levels due to a hereditary condition called familial hypercholesterolaemia. South Africa has a particularly high incidence of this genetic disorder, affecting one in 75 of the population. Most at risk for familial hypercholesterolaemia are people of Afrikaans, Jewish or Indian descent.

Other risk factors for high cholesterol include a poor diet that's high in saturated and trans fats. Being overweight or obese, smoking, and excessive drinking are also problem factors.



How high cholesterol damages your health

- It can gradually build up in the inner walls of the arteries, forming plaques. Plaques are hard deposits that can narrow and harden the arteries. This process is called atherosclerosis. As the arteries become thicker and stiffer, blood flow is restricted, including blood supply to the heart.
- Plaque can also rupture and form a blood clot, which can reduce blood flow to the heart. If the flow of blood to your heart is limited or blocked off, it can increase your risk for a heart attack or stroke.
- Plaque can also build up and reduce blood flow in your arms and legs. A lack of blood to your limbs can cause numbness, pain and gangrene (tissue death). A build-up of plaque can also cut off blood flow to your kidneys and stomach, causing abdominal pain, nausea, vomiting and bloody stools.
- It can lead to bile imbalance, which can cause gallstones.

Give cholesterol the kick

There are a few simple lifestyle changes you can make which have been shown to be very effective in maintaining a healthy cholesterol:

1. Choose healthy fats like nuts, seeds and avocado.
2. Have fish twice a week.
3. Eat more vegetables and fruits daily.
4. Choose foods high in fibre, such as oats and legumes.
5. Take the fat out of cooking by baking, grilling and steaming.
6. Avoid foods high in added sugar. Satisfy a sweet craving with dried apples instead.
7. Do at least 30 minutes of moderate exercise, five days a week, and maintain a healthy weight.
8. Stop smoking and avoid second-hand smoke.
9. Stay within the recommended alcohol limit of one unit per day for women and two units per day for men. One unit is equal to a small glass (120ml) of wine, 340ml beer/cider or one tot of spirits.

Sometimes, maintaining a healthier lifestyle may not be enough, and you could be required to start cholesterol-lowering medication. It is important that you take your medication as prescribed by your doctor. Never stop your medication or change dosages unless you discuss this with your doctor.

References:

http://www.mnilifestyle.co.za/wp-content/uploads/2014/07/Dyslipidaemia_in_South_Africa_May_2013.pdf

<http://www.heartfoundation.co.za/cholesterol>

<http://www.heartfoundation.co.za/what-exactly-cholesterol-and-how-do-i-lower-my-cholesterol-levels>

<http://www.health24.com/Medical/Cholesterol/Overview/What-is-cholesterol-20140731>

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Help for a severe asthma attack

Would you know what to do in an asthma emergency?

South Africa has one of the highest rates of asthma deaths worldwide. Asthma may become severe within minutes to a few hours. It's important to recognise the following symptoms and signs of a severe asthma attack in yourself or a loved one:

- Severe shortness of breath: The wheezing becomes worse – usually loudly or noisy breathing.
- Cannot talk easily: Unable to speak in sentences, or being unable to complete sentences in one breath. This is a clear indication of a severe asthma attack.
- An anxious look, flared nostrils.
- A fast pulse rate.
- Peak flow measurement less than half of the patient's usual reading.
- Neck muscles becoming tight during breathing.
- Spaces between ribs visible when breathing in air (this is more prominent in a child) and the skin becoming tight around the ribs.
- Paleness or blue discolouration around mouth and fingernails.
- Sweating.
- Becoming exhausted by the attack.
- Trying to clear throat.

If you're unsure about the situation, it's always safer to seek advice early, rather than later.

Take decisive action

- Sit down and try to take slow and steady breaths. It may be difficult to stay calm when you're short of breath, but this remains one of the best things you can do. Panicking will make things worse.
- Take two puffs of your reliever asthma pump right away.
- If you don't start to feel better, take up to 10 puffs of your reliever inhaler (using two puffs every two minutes).
- If you have a spacer, remember to use it with your inhaler pump. Spacer devices are invaluable during an emergency as they will enable medication to be delivered more effectively into the lungs.
- If you don't have a spacer, improvise an emergency spacer by forming a hole in a polystyrene cup for the inhaler pump to fit in. Place the rim of the cup over your mouth and spray four to 10 puffs into the cup every 20 minutes for an hour. Inhale deeply through your mouth from the polystyrene cup. This improvised approach could save a life.
- If you still don't feel better, go to the nearest hospital. Remember to take your pump with you and use it during the trip.

Sit down
and try to
take **slow,**
steady
breaths

Special warning:

It is important to remain vigilant once the asthma attack has eased. Asthmatics are more vulnerable to a repeat episode during the days and weeks following an attack. In some cases, a second wave, which is more dangerous, may occur. This happens because the airways continue to swell, despite an improvement in symptoms.



Get smart, prevent an attack

1. Know the early warning signs and symptoms. Share this knowledge with friends, family and work colleagues, together with an action plan on what is to be done in an emergency. This is particularly important if you're a high-risk asthmatic with partly or poorly controlled asthma.
2. Store the telephone numbers of your doctor and the local hospitals on your phone. Make sure that your family and work colleagues have these numbers handy.
3. Invest in a peak flow metre to monitor your asthma. This inexpensive hand-held device doesn't just simplify the management of asthma – it may indeed save a life.
4. Watch out for possible triggers like house dustmites, pollen, dander and pet fur. Tobacco smoke is a powerful trigger – so don't smoke, and do your best to avoid second-hand smoke from those smoking around you.

Who should be monitored carefully for an asthma emergency?

- Asthmatics who have a history of sudden, severe asthma attacks.
- Those who have been hospitalised for asthma over the last 12 months.
- Patients who use more than two canisters of inhalers each month.

Article reviewed by Dr Heidi van Deventer

References:

National Asthma Education Programme

Global Strategy for Asthma Management and Prevention (2016 update)

Lalloo U, Ainslie G, Wong M, Abdool-Gaffar S, Iruken E, Mash R, Feldman C, O'Brien J and Jack C.

Guidelines for the management of chronic asthma in adolescents and adults. Working Group of the South African Thoracic Society. SA Fam Pract 2007;49(5).

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What you don't know about smoking

The dangers of smoking are well documented. But there are even more sinister dangers you need to be aware of.

Each new study makes it clear that smoking harms just about every tissue in the body. It may even hurt your yet-to-be-conceived children.

Here are just a few more reasons to quit:

Smoking dads may pass on damaged genes

As a smoker, you could be damaging your children's genetics. In an experiment, Canadian researchers showed that smoking can cause mutations in the DNA of sperm cells, causing irreversible changes that could be potentially inherited by children. Other research suggests that the damage is related to the duration of exposure. So, the longer you smoke, the more mutations accumulate.

Smokers' sleep does not refresh

Struggling to sleep? It may be that cigarette. A *Johns Hopkins University School of Medicine* study showed that smokers are four times as likely as non-smokers to feel unrested after a night's sleep. Smokers spend less time in deep sleep – the restorative part of the sleep cycle – and more time in light sleep than non-smokers. Researchers speculate that the stimulating effects of nicotine could cause smokers to experience nicotine withdrawal each night, which may contribute to disturbances in sleep.

Smokers
spend **more**
time in light
sleep than non-
smokers

Nicotine is linked to infant death

The risk of a baby succumbing to Sudden Infant Death Syndrome is higher when the mother smoked during pregnancy – and nicotine may be to blame, says a Canadian study. Normally, a drop in oxygen in the bloodstream arouses a baby from sleep, which leads to better breathing. During the newborn period, this is triggered by specialised cells that detect oxygen deprivation and respond by releasing the appropriate hormones to help the body adapt. Using rats, the researchers showed that nicotine exposure can affect the ability of these specialised cells to release the appropriate hormones.



Puffing may bring on diabetes

Smokers are on average 44% more likely to develop Type 2 diabetes, according to a massive Swiss study that pooled the results of 25 other studies and tracked the health of a total of 1.2 million people. For heavy smokers, the risk of developing Type 2 diabetes is even higher. The researchers estimate that smoking 20 or more cigarettes a day results in a 61% higher risk than that of non-smokers. The good news is that quitting does indeed make a difference. Apparently, former smokers only have a 23% higher risk than non-smokers – which is well below the 44% increased risk for the average smoker.

Smokers are more vulnerable to TB

Not scary enough? How about the fact that smoking has been associated with an increased risk of developing tuberculosis? And not only does it increase the risk of infection, it also ups the odds of actually getting sick, says a team of US researchers. They estimate that smokers are at a 73% higher risk of infection than non-smokers. Once infected, the chances of actually getting active TB disease are 50% higher than what it is for non-smoking people who are infected.

Help at hand

The reasons above are worth quitting, right? Information to 'stub out' right now may be found on several websites including the following:

- National Council Against Smoking
- I Quit Smoking (IQS) Southern Africa
- Smokenders
- Public Health Association of South Africa
- Cancer Association of South Africa (CANSA)

Reference:

<http://www.health24.com/lifestyle/stop-smoking/how-smoking-affects-your-health/smoking-what-you-dont-know-20120721?mobile=true>

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SUBSTANCE ABUSE

Substance abuse – help is at hand

Substance abuse is the use of drugs and alcohol in a manner that is harmful to the user or others. This could either be in a casual setting, social drinking, drug experimentation or more serious addictive behaviour like binge drinking and constant drug abuse. Drugs contain chemicals that can actually change the way the body works and cause reactions like extreme anger and violence.

**South Africa is one of the top 10 substance-abusing countries in the world.
And the problem is worsening.**

Substance abuse can cause interpersonal relationship problems with family and friends, work-related issues, financial difficulties and physical harm to your brain, heart, kidney and liver. It can even cause suicidal tendencies.

How does substance abuse begin?

People turn to drugs and alcohol for many reasons. The most common are:

- To forget or escape reality.
- To deal with depression, anxiety, or other mental illnesses.
- As a way of relieving stress.
- As a relaxation tool.
- As a confidence booster.
- Because friends, family and other acquaintances do so as well.
- For enjoyment.
- As a result of boredom.
- As a bad habit.



Help at hand

An addiction can make life very difficult and you may experience ongoing symptoms such as depression and anxiety. The first step to conquering the problem is admitting you have one. Once you recognise the signs and symptoms – get help immediately. There are millions of people who go through substance abuse, so you are not alone or unusual.

As each person is different, so too are the treatment methods. For the most part, substance abuse treatment deals with detoxification (where the body starts to rid itself of the substance), counselling and therapy, medication, and treatment for other issues such as depression and anxiety.

Overcoming substance abuse is not an overnight task. You need to commit for the long term and this is where family support is also essential.

Where to get help

- If you, or a loved one, are in need of help, speak to your family doctor who can advise you on the best treatment option.
- You can also contact the free **24hr Substance Abuse helpline** at the **Department of Social Development** on 0800 12 13 14 or SMS 32312.
- POLMED members can contact our Mental Health Care Managers on 0860 765 633 for more information about drug and alcohol abuse, and where to find help.

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