



Healthy Woman

News from the Office of Women's Health

ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Fall 2012

PAT QUINN, GOVERNOR

OFFICE OF WOMEN'S HEALTH HAS NEW LEADER

The Illinois Department of Public Health, Office of Women's Health (OWH), has a new deputy director. Brenda Jones, D.H.Sc., M.S.N., WHNP-BC, started Oct. 1.

"I am pleased about the opportunity to serve the women of Illinois," Jones said. "I have dedicated my entire career to advocating for women and children. As we see diminishing dollars, there is a strong need to increase our collaborating ability. I am looking forward to the work at hand."

Jones, a registered professional nurse in both Illinois and Indiana, has focused 24 years of her health care career in the areas of women and children's health. Beginning her career as a labor and delivery nurse in 1991, she went on to become a women's health nurse practitioner in 1999 and obtained her doctorate in health science from Nova Southeastern University in 2008, focusing her research on perinatal safety.

Jones also has worked within the Department of Defense as a nurse consultant for Army Child, Youth and Family Services. She has held positions as director of women's health care and consultant at health care facilities across the country.

Earlier this year, Jones received the March of Dimes Nursing Excellence Award. This distinguished award recognized Jones's professional accomplishments, personal commitment to the care of mothers and babies, and her "can do" spirit to go the extra mile.

In addition, she was the recipient of the National Healthy Teen Network "Outstanding Prevention Award" for starting an innovative pregnancy teen clinic in the Chicago Roseland area. In 2010, she was selected as a women's health care provider and educational consultant for the Navy/Project Hope "Continuing Promise" Mission in South America's George Town, Guyana and Paramaribo Surinam. She was selected again in 2011 to provide services to women and providers in Costa Rica and El Salvador.

Jones is married and has three grown children. In their spare time, she and her husband love to travel.

WOMEN'S HEALTH INITIATIVE MINI-GRANTS AWARDED

The Illinois Department of Public Health, Office of Women's Health, has awarded \$228,000 in grants for women's health programs that focus on cardiovascular disease, diabetes, osteoporosis, and other conditions facing women and girls.

The nine-month Women's Health Initiative grants, which are funded through state general revenue funds, will provide money for four model education programs:

- Building Better Bones, a program for women that offers group education sessions as well as bone density screenings for osteoporosis.
- Heart Smart for Teens, a nine-week nutrition and exercise curriculum geared toward school-aged girls.
- Life Smart for Women, a 10-week comprehensive education curriculum covering a variety of women's health topics including cardiovascular disease, stroke, diabetes, nutrition, fitness, stress, substance abuse, violence against women, sexual health, aging and family health and is appropriate to a widely diverse audience of women.
- Women Out Walking, a 12-week walking challenge for women in which participants use a step counter to track their daily steps.

The 28 non-profit organizations, local health departments, and hospitals, which received the grants include:

- Boone County Health Department, Women Out Walking, \$4,000
- Calhoun County Health Department, Women Out Walking, \$3,500
- Champaign Urbana Public Health District, Heart Smart for Teens, \$13,500
- Chinese American Service League, Building Better Bones, \$10,000
- Clay County Health Department, Women Out Walking, \$4,000
- Cumberland County Health Department, Women Out Walking, \$4,000

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LUNG CANCER: AN OVERVIEW

Lung cancer is the leading cause of cancer deaths in women — claiming the lives of almost 70,000 American women each year — more than breast cancer, uterine cancer and ovarian cancer combined.

Lung cancer does not discriminate. It is also the primary cause of cancer-related death in men in the United States. In 2012, more than 226,000 American women and men will be diagnosed with lung cancer and more than 160,000 are expected to die.

RISK FACTORS

There are several risk factors that may increase a person's risk for getting lung cancer. They include:

- **Tobacco smoke:** Tobacco smoke causes most cases of lung cancer, and it is by far the most important risk factor for lung cancer. Harmful substances in smoke damage lung cells. That is why smoking cigarettes, pipes, or cigars can cause lung cancer and why secondhand smoke can cause lung cancer in nonsmokers. The more a person is exposed to smoke, the greater the risk of lung cancer.

- **Radon:** Radon is a radioactive gas that you cannot see, smell or taste. It forms in soil and rocks. People who work in mines may be exposed to radon. In some parts of the country,

radon is found in houses. Radon damages lung cells, and people exposed to radon are at an increased risk of lung cancer. The risk of lung cancer from radon is even higher for smokers.

- **Asbestos and other substances:** People who have certain jobs (such as those who work in the construction and chemical industries) have an increased risk of lung cancer. Exposure to asbestos, arsenic, chromium, nickel, soot, tar, and other substances can cause lung cancer. The risk is highest for those with years of exposure. The risk of lung cancer from these substances is even higher for smokers.

- **Air pollution:** Air pollution may slightly increase the risk of lung cancer. The risk from air pollution is higher for smokers.

- **Family history of lung cancer:** People with a father, mother, brother or sister who had lung cancer may be at a slightly increased risk of the disease, even if they do not smoke.

- **Personal history of lung cancer:** People who have had lung cancer are at increased risk of developing a second lung tumor.

- **Age older than 65:** Most people are older than 65 years when diagnosed with lung cancer.

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While breast cancer is the most commonly diagnosed cancer in women, it is not the cancer that causes the most deaths. In fact, lung cancer is the leading cause of cancer deaths in men and women.

Getting regular mammograms yearly after age 40 is the best prevention for breast cancer, but lung cancer may be a little harder to detect in its early stages.

A person with lung cancer may or may not experience symptoms. As the cancer grows, symptoms may include shortness of breath, coughing that does not go away, wheezing, coughing up blood, chest pain, and/or repeated respiratory infections such as bronchitis or pneumonia. These symptoms may occur with other illnesses, so talk with your medical provider if you have symptoms that concern you.

Smoking causes nearly 90 percent of lung cancer cases so do not smoke and avoid secondhand smoke. The most important step a person can take to prevent lung cancer is to not start smoking, or to quit if you currently smoke. For information and resources to help you quit, visit <http://www.quityes.org/>.

In addition to smoking, there are several other risk factors for lung cancer such as radon gas in the home; asbestos or other substances around home or work; medical exposure to radiation to the chest; chronic lung disease such as emphysema or chronic bronchitis; and increased age.

November is Lung Cancer Awareness Month. Please visit www.lungcanceralliance.org for more information on how to get involved this November and throughout the year.



Brenda Jones
Deputy Director, Office of Women's Health

People who think they may be at risk for developing lung cancer should talk to their doctor. The doctor may be able to suggest ways to reduce their risk and can plan an appropriate schedule for checkups.

SMOKING AND LUNG CANCER

Cigarette smoking is responsible for nearly 90 percent of lung cancer deaths. Secondhand smoke is responsible for an estimated 3,000 lung cancer deaths among U.S. nonsmokers each year. Today, 18 percent of women in the United States still smoke.

The best way to prevent lung cancer is to quit (or never start) smoking. The sooner a person quits smoking, the better. Even if you have been smoking for many years, it's never too late to benefit from quitting. For people who already have cancer, quitting may reduce the chance of getting another cancer. Quitting also can help cancer treatments work better.

SIGNS AND SYMPTOMS

Different people have different symptoms for lung cancer. Some people have symptoms related to the lungs. Some people whose lung cancer has spread to other parts of the body (metastasized) have symptoms specific to that part of the body. Some people just have general symptoms of not feeling well. Most people with lung cancer do not have symptoms until the cancer is advanced. Lung cancer symptoms may include:

- a cough that gets worse or does not go away
- breathing trouble, such as shortness of breath
- constant chest pain
- coughing up blood
- a hoarse voice
- frequent lung infections, such as pneumonia
- feeling very tired all the time
- weight loss with no known cause

Other changes that can sometimes occur with lung cancer may include repeated bouts of pneumonia and swollen or enlarged lymph nodes (glands) inside the chest in the area between the lungs. Other health problems can cause some of these symptoms. Anyone with such

symptoms should see a doctor to be diagnosed and treated as early as possible.

DIAGNOSIS

If a person has a symptom or symptoms that suggests lung cancer, her doctor may order blood tests and one or more of the following tests:

- **Physical exam:** A doctor checks for general signs of health, listens to breathing, and checks for fluid in the lungs. A doctor may feel for swollen lymph nodes and a swollen liver.

- **Chest x-ray:** X-ray pictures of chest may show tumors or abnormal fluid.

- **CT scan:** Doctors often use CT scans to take pictures of tissue inside the chest. An x-ray machine linked to a computer takes several pictures. For a spiral CT scan, the CT scanner rotates around the patient as she lies on a table. The table passes through the center of the scanner. The pictures may show a tumor, abnormal fluid, or swollen lymph nodes.

The only sure way to know if lung cancer is present is for a pathologist to check samples of cells or tissue. If cancer is found, the pathologist reports the type.

The types of lung cancer are treated differently. The most common types are named for how the lung cancer cells look under a microscope:

- **Small cell lung cancer:** About 13 percent of lung cancers are small cell lung cancers. This type tends to spread quickly.

- **Non-small cell lung cancer:** Most lung cancers (about 87 percent) are non-small cell lung cancers. This type spreads more slowly than small cell lung cancer.

STAGING

To plan the best treatment, the doctor needs to know the type of lung cancer and the extent (stage) of the disease. Staging is a careful attempt to find out whether the cancer has spread, and if so, to what parts of the body. Lung cancer spreads most often to the lymph nodes, brain, bones, liver, and adrenal glands.

When cancer spreads from its original place to another part of the body, the new tumor has the same kind of cancer cells and the same name as the original cancer. For example, if lung cancer spreads to the

liver, the cancer cells in the liver are actually lung cancer cells. The disease is metastatic lung cancer, not liver cancer. For that reason, it's treated as lung cancer, not liver cancer. Doctors call the new tumor "distant" or metastatic disease.

Staging may involve blood tests and other tests including a CT scan, bone scan, MRI or PET scan.

Doctors describe small cell lung cancer using two stages:

- **Limited stage:** Cancer is found only in one lung and its nearby tissues.

- **Extensive stage:** Cancer is found in tissues of the chest outside of the lung in which it began. Or cancer is found in distant organs.

The treatment options are different for limited and extensive stage small cell lung cancer.

Doctors describe non-small cell lung cancer based on the size of the lung tumor and whether cancer has spread to the lymph nodes or other tissues. Stages range from occult (lung cancer cells are found in sputum or in a sample of water collected during bronchoscopy, but a tumor cannot be seen in the lung) to Stage IV (malignant growths may be found in more than one lobe of the same lung or in the other lung. Or cancer cells may be found in other parts of the body, such as the brain, adrenal gland, liver, or bone).

TREATMENT

Persons with lung cancer may have a team of specialists, which may include a thoracic (chest) surgeon, a thoracic surgical oncologist, a medical oncologist, and a radiation oncologist. The health care team also may include a pulmonologist (a lung specialist), a respiratory therapist, an oncology nurse and a registered dietician. Lung cancer is hard to control with current treatments. For that reason, many doctors encourage patients with this disease to consider taking part in a clinical trial. Clinical trials are an important option for people with all stages of lung cancer.

The choice of treatment depends mainly on the type of lung cancer and its stage.

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Lung Cancer Overview, continued from Page 3

People with lung cancer may have surgery, chemotherapy, radiation therapy, targeted therapy, or a combination of treatments.

People with limited stage small cell lung cancer usually have radiation therapy and chemotherapy. For a very small lung tumor, a person may have surgery and chemotherapy. Most people with extensive stage small cell lung cancer are treated with chemotherapy only.

People with non-small cell lung cancer may have surgery, chemotherapy, radiation therapy, or a combination of treatments. The treatment choices are different for each stage. Some people with advanced cancer receive targeted therapy. Targeted therapy uses drugs to block the growth and spread of cancer cells. The drugs enter the bloodstream and can affect cancer cells all over the body.

Regular checkups are needed after treatment for lung cancer. Even when there are no longer any signs of cancer, the disease sometimes returns because undetected cancer cells remained somewhere in the body after treatment.

Checkups help ensure that any changes in health are noted and treated if needed.

SOURCES

National Cancer Institute at the National Institutes of Health

<http://www.cancer.gov/cancertopics/types/lung>
800-4-CANCER

U.S. Department of Health and Human Services,
Office on Women's Health

www.womenshealth.gov
202-690-7650



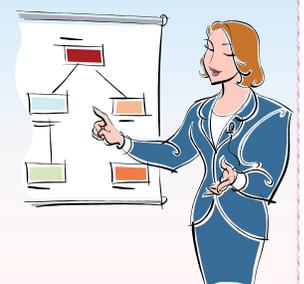
QUITTING TOBACCO - HOW IT WORKS

- **Getting Started** - Participating groups and individuals receive instructional materials about our service.
- **Convenient access** - Callers are greeted by a live medical professional through our toll-free services, 7 a.m.-11 p.m. Monday-Friday. Voice messages can be left at any time after hours and will be returned the next business day. Information can be accessed via the Internet at any time.
- **Assessing needs** - Professional counselors ask the callers about readiness to quit, history of tobacco use and previous quit attempts.
- **Customizing a Program** - A cessation program is customized to each caller's needs.
- **Reinforcement** - A quit-kit including self help materials, information about nicotine replacement therapies, and requested health information is mailed to the caller.
- **Follow-up** - Our counselors maintain weekly communication with participants for a minimum of six weeks. Thereafter, follow-up calls are made at three months, six months and 12 months.
- **Tracking Success** - Each call/counseling session is well documented. Data is available as needed to monitor success of the overall program.
- **Feedback** - An evaluation of the program is completed by each caller and participating group.
- **Whole Health** - Our counselors are qualified to discuss all issues relating to lung health. Physician referrals and information about medicines and treatments are also available.

Need a speaker to talk about women's health issues? The Office of Women's Health is creating a speakers' bureau. OWH staff may be available to speak at your organization or engagement at no charge to you, on a number of different women's health topics, including:

- ◆ Women and Heart Disease
- ◆ Osteoporosis
- ◆ Understanding Menopause
- ◆ Girls' Health
- ◆ Breast Cancer

To request a speaker, contact the Women's Health-Line at 888-522-1282.



WOMEN NEEDED TO COMPLETE SURVEY FOR SCIENCE

Why do some diseases affect women more than men? Why do women respond to some drugs and treatment therapies differently than men? What environmental factors and behaviors most influence women's health?

The Institute for Women's Health Research at Northwestern University (the institute) hopes to help answer those questions. The institute has created the Illinois Women's Health Registry in order to gain a better understanding of women's health issues in Illinois. The registry is a database containing answers to a confidential health survey. The questions asked are about symptoms, conditions, diseases, family history of disease, environmental exposures, stress and demographic information.

Most of what is known about medicine is based on studies done primarily in men. In every medical discipline, there exist unanswered questions pertaining to women's health and well-being. As more women participate in research studies, finding answers to these difficult questions will become a reality.

The registry's database will assist investigators in understanding the relationship between environmental exposures, stress, health symptoms, health trends and disease by gathering data on large numbers of women. The registry is intended to foster research in the area of women's health by serving as an informational resource as well as a recruiting tool. The registry also will make a concerted effort to include women from diverse social classes and racial/ethnic backgrounds in order to promote diversity in research studies and clinical trials.

In an effort to increase representation of all counties (many have little or no representation) in the registry, the institute has launched the "Paint the State" campaign.



To learn more about the registry or to enroll online, visit <https://whr.northwestern.edu>.

Women's Health Initiative Mini-grants, continued from Page 1

- Fayette County Health Department, Life Smart for Women, \$10,000
- Henry County Health Department, Building Better Bones, \$8,000
- Illinois Migrant Council, Life Smart for Women, \$8,000
- Jackson County Health Department, Women Out Walking, \$4,000
- Jasper County Health Department, Women Out Walking, \$3,500
- Lee County Health Department, Life Smart for Women, \$7,000
- Logan County Health Department, Heart Smart for Teens, \$13,000
- Marion County Health Department, Heart Smart for Teens, \$12,500
- Marshall County Health Department, Women Out Walking, \$4,000
- McDonough County Health Department, Women Out Walking, \$4,000
- McHenry County Health Department, Life Smart for Women, \$10,000
- McLean County Health Department, Heart Smart for Teens, \$8,000
- Michael Reese Research and Education Foundation, Building Better Bones, \$10,000
- Perry County Health Department, Life Smart for Women, \$6,500
- Provena Saint Joseph Medical Center (Joliet), Building Better Bones, \$9,000
- Saints Mary and Elizabeth Medical Center, Life Smart for Women, \$10,000
- Sangamon County Department of Public Health, Heart Smart for Teens, \$13,000
- Sarah Bush Lincoln Health Center, Heart Smart for Teens, \$14,000
- Swedish Covenant Hospital, Heart Smart for Teens, \$3,500
- Vietnamese Association of Illinois, Building Better Bones, \$9,500
- Warren County Health Department, Heart Smart for Teens, \$8,500
- Whiteside County Health Department, Heart Smart for Teens, \$13,000

WOMEN'S HEALTH CONFERENCE TO BE HELD IN DECEMBER

Registration is now open for the 2012 Illinois Women's Health Conference, which will be held Dec. 5-6, 2012, at the Hilton Springfield Hotel in Springfield.

Co-sponsored by the Illinois Department of Public Health's Office of Women's Health and the Illinois Public Health Association, it is one of the most prestigious conferences about women's health held in Illinois.

This program is designed for those interested in women's issues and health professionals who are interested in educating themselves about diseases and the effects on women's health, including public health personnel and staff, college and university students, and public and private sector health professionals. Many professionals will be able to earn continuing education credits for attending the conference.

One of the highlights of the conference will be a session with Robert Sweetgall, who has walked across America seven times; walked 11,208 miles through all 50 states in one year; authored and co-authored 17 books on walking, wellness and active living; and helped more than 5,000 schools, corporations, hospitals and communities to implement wellness programs of all types. Sweetgall will present five walking and physical activity programs for reducing weight, stress, diabetes, cancer and heart disease risk, and women's aging.

Attendees will want to make sure to wear comfortable walking shoes. Following his presentation, Sweetgall will hold a hands-on clinic on Nordic walking. Attendees will learn state-of-the-art Nordic walking techniques to improve core strength, and tone and flatten the abdomen while burning 40 percent more calories than just walking. This type of walking reduces impact stress on the hips, knees, ankles and feet.

Other exciting sessions will be Dr. Karen Kim's discussion on balancing work and life issues and Julia Pewitt Kinder's presentation on how to lose belly fat. Kenneth Munson, J.D., regional director, U.S. Department of Health and Human Services – Region V, will discuss the Affordable Care Act and how it is putting women back in control of their health care.

Two pre-conference workshops will be held; one will focus on using data to strengthen grant applications and the other on prescription drug abuse and what health professionals can do to help. Workshop topics will include cancer, depression; diabetes; cardiovascular disease; post-menstrual bone loss; headaches; chiropractic and acupuncture treatments; sexual dysfunction; and complementary and alternative medicines.

There will be a special dinner meeting of the Illinois Breast and Cervical Cancer Program following the first day's sessions. Participants of the Illinois WISEWOMAN program will meet following the conclusion of the conference.

Early registration, which is through Nov. 14, costs \$115. Late registration and/or on-site registration is \$125. Registration to attend the first day only is \$75 and the second day only is \$50. Student registration for both days is \$75.

A special hotel room rate of \$70 is available for conference attendees, exhibitors and sponsors. The conference room block cut-off date is Nov. 13. Mention that you are with the Illinois Women's Conference when making your reservation.

The Hilton Springfield Hotel, located at 700 E. Adams St., can be reached at:

Phone: 217-789-1520 or 800-HILTONS

E-mail: <http://www.springfieldil.hilton.com>

2012 personalized Hilton web page: http://www.hilton.com/en/hi/groups/personalized/SPFSHHF-WOM-20101206/index.jhtml?WT.mc_id=POG

NEW CHANGES IN HEALTH CARE LAW IMPROVE SERVICES FOR WOMEN

Women now have access to even more life-saving preventive care services without having to pay out of pocket for them. Eight new prevention-related health care services are now available to women without cost sharing under the Affordable Health Care Act.

Previously some insurance companies did not cover these preventive services for women at all under their health plans, while some women had to pay deductibles or copays for the care.

Other preventive care services – such as mammograms and screenings for cervical cancer – were already covered with no cost sharing under the Affordable Care Act. The eight new prevention-related services are:

- Well-woman visits
- Gestational diabetes screening that helps protect pregnant women from one of the most serious pregnancy-related diseases
- Domestic and interpersonal violence screening and counseling
- Contraceptive methods, and contraceptive education and counseling
- Breastfeeding support, supplies, and counseling
- Human papillomavirus (HPV) DNA testing, for women 30 or older
- Sexually transmitted infections counseling for sexually-active women
- HIV screening and counseling for sexually-active women

These services are based on recommendations from the Institute of Medicine, which relied on independent physicians, nurses, scientists, and other experts as well as evidence-based research to develop its recommendations.

These preventive services will be offered without cost sharing in all new health plans. Group health plans and issuers that have maintained grandfathered status are not required to cover these services. In addition, certain nonprofit religious organizations, such as churches and schools, are not required to cover these services.

For women who are pregnant or nursing, the new preventive services include gestational diabetes screening as well as breast-feeding support, counseling and supplies. Health services already provided under the health care law include folic acid supplements for women who may become pregnant, Hepatitis B screening for pregnant women, and anemia screening for pregnant women.

Source: healthcare.gov

EVENTS CALENDAR:

October — Breast Cancer Awareness Month
Domestic Violence Awareness Month
November — Lung Cancer Awareness Month
November 7-8 — Farm to School educator training,
Mattoon, 4 p.m. to 8 p.m.
November 15 — Great American Smokeout
November 28-29 — Farm to School educator training,
Mattoon, 4 p.m. to 8 p.m.
December 1 — World AIDS Day
December 5-6 — Women's Health Conference

Healthy Woman newsletter is published semiannually by the Illinois Department of Public Health. Story ideas, suggestions and comments are welcome and should be forwarded to Tammy Leonard, Illinois Department of Public Health, Office of Women's Health, 535 W. Jefferson St., First Floor, Springfield, IL 62761; or call 217-524-6088.

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Women's Health-Line

888-522-1282

If you have health-related questions or concerns, the health-line staff will help you find the answers. You may call the toll-free number weekdays from 8 a.m. to 4:30p.m. After hours, calls are recorded on voice mail and responded to during the next workday. Always completely confidential and free of charge, the Women's Health-Line is one resource for all women in Illinois. The Women's Health-Line can help you find:

- the answer to a question about a women's health issue
- the nearest clinic offering mammography through the Illinois Breast and Cervical Cancer Program
- information about sexually transmitted diseases in women
- where to take your adolescent child for therapy for an eating disorder
- a supply of brochures or fact sheets about healthy lifestyles

