



Better Safe!



WELCOA'S ONLINE BULLETIN FOR YOUR FAMILY'S SAFETY

Radon Risk

Its Perils Can be Prevented

If you're buying a new home, the house may need to be tested for radon, depending on local laws. Although the tests aren't required everywhere, you should insist on it. You might not be able to see or smell radon, but it can still harm you—slowly, and in ways that you can't detect.

What Is Radon?

Radon is a colorless, odorless, radioactive gas. It comes from the natural decay of the radioactive chemical elements uranium or thorium. These elements are found in nearly all soils.

Radon gas typically moves up through the ground and comes into homes through cracks in floors, walls and foundations. Sometimes it enters the home through well water. Certain building materials can give off radon, too. However, building materials rarely cause radon problems by themselves. Whatever the source, your home can trap radon inside, where it can build up.

Surveys show that radon levels vary widely across the country. But high levels can occur in any area, and any home may have a radon problem. This means new and old homes, well-sealed and drafty homes, and homes with or without basements. Nearly one out of every 15 homes in the United States is estimated to have elevated radon levels. Elevated levels have been found in homes in every state.

Why is Radon Dangerous?

Radon gas breaks down quickly, giving off tiny radioactive particles that can get trapped in your lungs when you breathe. As they break down further, these particles release small bursts of energy. This can damage lung tissue and raise your risk of developing lung cancer.



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Its Perils Can be Prevented (continued from previous page)

Radon exposure is thought to be the second leading cause of lung cancer after active smoking—and the leading cause among people who have never smoked. Scientists estimate that 15,000 to 22,000 lung cancer deaths nationwide each year are related to radon.

Scientists believe that there are no safe levels of radon in the home. The effects of being exposed accumulate over time so that it may take many years for disease to appear. NIH-funded scientists have been working to better understand the relationship between radon exposure and cancer risk.

How You Can Protect You And Your Family

The good news is that many radon-related lung cancer deaths can be prevented. But testing is the only way to know if you and your family are at risk. The Environmental Protection Agency (EPA) and the U.S. Surgeon General recommend testing all homes below the third floor for radon. Testing is inexpensive and easy. It should only take a few minutes. You can purchase radon test kits by calling the EPA-supported National Radon Hotline at 1-800-SOS-RADON (1-800-767-7236).

If you're not comfortable doing the testing yourself, you can have a professional do it. Many states require radon professionals to be licensed, certified or registered. To find your state's resources, go to www.epa.gov/radon/wherelive.html.

If it turns out you do have high radon levels in your home, you can take steps to lower those levels—a process called radon mitigation. Some radon reduction systems can reduce radon levels in your home by up to 99%. Even very high levels can be reduced to acceptable levels. Find out more about fixing radon problems at www.epa.gov/radon/pubs/consguid.html. Or call the National Radon Fix-It Line at 1-800-644-6999.

Make sure you've had your home tested. It's easy, it's inexpensive and it could save lives.

FIGHTING RADON

- **Start by testing your home. You can do it yourself or hire a professional.**
- **If you find a radon problem in your home, take steps to fix it.**
- **If you smoke, stop. Smoking is an especially serious health risk when combined with radon.**
- **Get help for your radon questions at this national hotline: 1-800-55RADON (557-2366).**





Beat The Winter Blues

SHEDDING LIGHT ON SEASONAL SADNESS

As the days get shorter, many people find themselves feeling sad. You might feel blue around the winter holidays, or get into a slump after the fun and festivities have ended. Some people have more serious mood changes year after year, lasting throughout the fall and winter when there's less natural sunlight. What is it about the darkening days that can leave us down in the dumps? And what can we do about it?

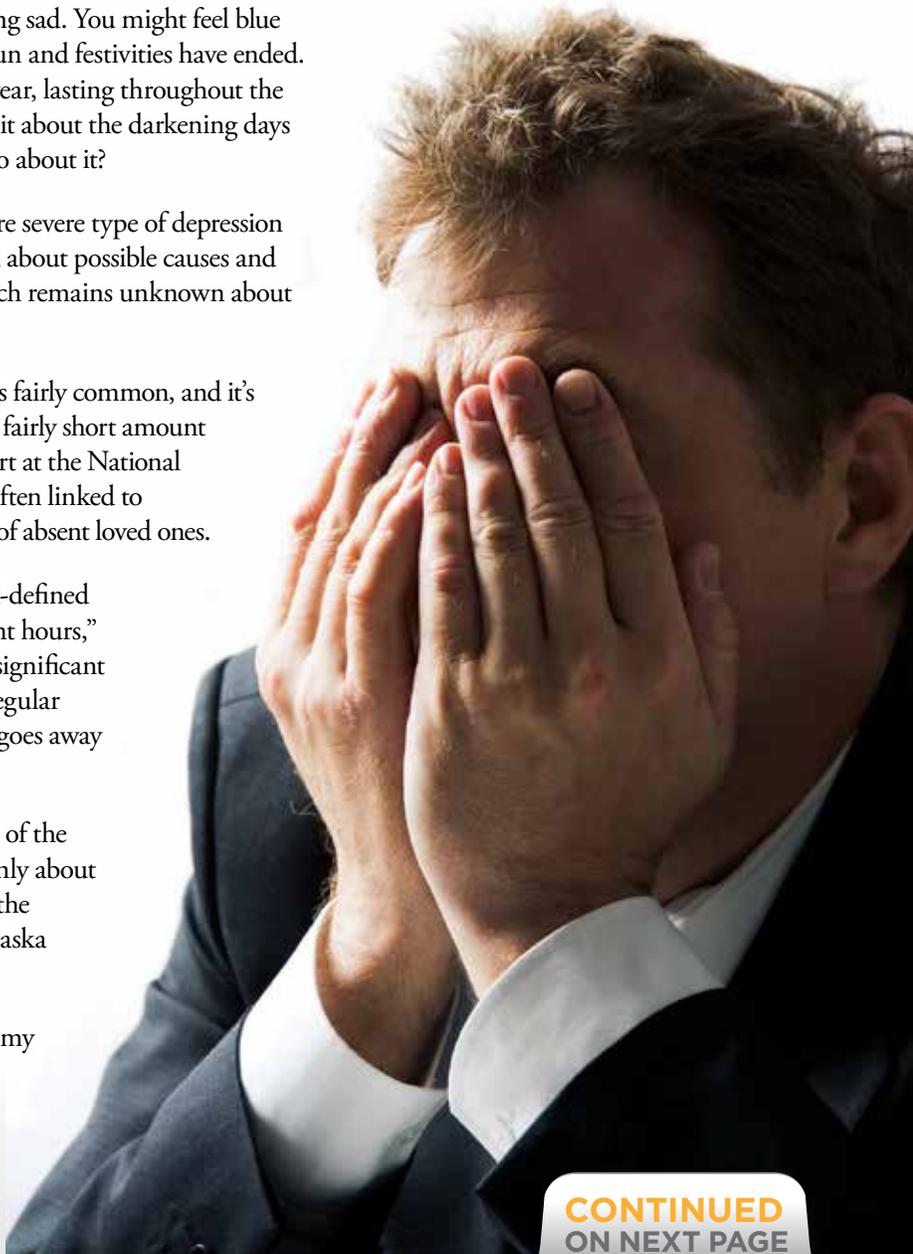
Scientists have been studying the "winter blues" and a more severe type of depression called seasonal affective disorder, or SAD. They've learned about possible causes and found treatments that seem to help most people. Still, much remains unknown about these winter-related shifts in mood.

"Winter blues is a general term, not a medical diagnosis. It's fairly common, and it's more mild than serious. It usually clears up on its own in a fairly short amount of time," says Dr. Matthew Rudorfer, a mental health expert at the National Institute of Health (NIH). The so-called winter blues are often linked to something specific, such as stressful holidays or reminders of absent loved ones.

"Seasonal affective disorder, though, is different. It's a well-defined clinical diagnosis that's related to the shortening of daylight hours," says Rudorfer. "It interferes with daily functioning over a significant period of time." A key feature of SAD is that it follows a regular pattern. It appears each year as the seasons change, and it goes away several months later, usually during spring and summer.

SAD is more common in northern than in southern parts of the United States, where winter days last longer. "In Florida only about 1% of the population is likely to suffer from SAD. But in the northernmost parts of the U.S, about 10% of people in Alaska may be affected," says Rudorfer.

As with other forms of depression, SAD can lead to a gloomy outlook and make people feel hopeless, worthless and irritable. They may lose interest in activities they used to enjoy, such as hobbies and spending time with friends.



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Beat The Winter Blues

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What Triggers SAD?

Shorter days seem to be a main trigger for SAD. Reduced sunlight in fall and winter can disrupt your body's internal clock, or circadian rhythm. This 24-hour "master clock" responds to cues in your surroundings, especially light and darkness. During the day, your brain sends signals to other parts of the body to help keep you awake and ready for action. At night, a tiny gland in the brain produces a chemical called melatonin, which helps you sleep. Shortened daylight hours in winter can alter this natural rhythm and lead to SAD in certain people.

How Can SAD Be Treated?

NIH researchers first recognized the link between light and seasonal depression back in the early 1980s. These scientists pioneered the use of light therapy, which has since become a standard treatment for SAD. "Light therapy is meant to replace the missing daylight hours with an artificial substitute," says Rudorfer.

LIFT YOUR MOOD

These "self-care" tips might help with seasonal depression. See a mental health professional if sadness doesn't go away or interferes with your daily life:

- Go to a movie, take a walk, go ice-skating or do other activities you normally enjoy.
- Get out in the sunlight or brightly lit spaces, especially early in the day.
- Try to spend time with other people and confide in a trusted friend or relative.
- Eat nutritious foods, and avoid overloading on carbohydrates like cookies and candies.
- Be patient. You won't suddenly "snap out of" depression. Your mood will improve gradually.
- If you have thoughts of suicide, get help right away. Call the toll-free National Suicide Prevention Lifeline at 1-800-273-TALK (8255).



In light therapy, patients generally sit in front of a light box every morning for 30 minutes or more, depending on the doctor's recommendation. The box shines light much brighter than ordinary indoor lighting. Studies have shown that light therapy relieves SAD symptoms for as much as 70% of patients after a few weeks of treatment. Some improvement can be detected even sooner.

Growing evidence suggests that cognitive behavioral therapy (CBT)—a type of talk therapy—can also help patients who have SAD. The "behavioral" part of CBT tries to teach people new behaviors to engage in when they're feeling depressed, to help them feel better.

If you're feeling blue this winter, and if the feelings last for several weeks, talk to a health care provider. "It's true that SAD goes away on its own, but that could take FIVE months or more. Five months of every year is a long time to be impaired and suffering," says Rudorfer. "SAD is generally quite treatable, and the treatment options keep increasing and improving."

Soothing A SORE THROAT

WHAT TO DO WHEN YOUR THROAT HURTS

We've all had sore throats around this time of year. Your throat feels scratchy and may hurt when you swallow. What can you do to soothe a sore throat? And when is it a sign of a more serious infection?

Most sore throats are caused by viral infections such as the common cold or the flu. These throat problems are generally minor and go away on their own.

To soothe your irritated throat, keep it moist. Ever notice that a sore throat seems worse in the morning? It's because your throat gets so dry overnight. Having lozenges or hard candies—or anything that stimulates saliva production—will keep your throat moist. It's also important to drink plenty of fluids.

For young children who might choke on hard candies or lozenges, try cold liquids and popsicles. Throat pain might also be soothed by throat sprays and over-the-counter pain relievers such as acetaminophen, ibuprofen or aspirin, but don't give aspirin to young children.

When Should You See A Doctor?

Contact a doctor if your sore throat is severe, doesn't feel better after a few days, or is accompanied by a high fever or swollen glands. These symptoms could be signs of a bacterial infection, such as strep throat. Taking antibiotics won't help at all if your sore throat is caused by viruses, but they're essential for fighting bacterial infections like strep.

Strep is the most common bacterial throat infection. Although it can occur in adults, strep throat is more common in children between ages five and 15. Strep can be harder to detect in younger children, because it can cause a runny nose and other symptoms that make it seem like a cold. If your child has severe throat pain, a fever above 100.4 degrees, or swollen glands, you should get medical attention right away. Children with strep also may experience nausea, vomiting and stomach pain.



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Soothing A SORE THROAT

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To see whether you have strep throat, the doctor will take a throat swab. If test results confirm strep, your doctor will prescribe antibiotics. After 24 hours of taking them, you should no longer be contagious. You'll likely begin feeling better within a couple of days, but to fully recover it's important to finish all of the medicine.

Strep is highly contagious. Treat it quickly to prevent it from spreading to others. Not only can the infection be transmitted, but there are potential complications from untreated strep throat. These include ear infections, rheumatic fever and kidney problems.

Another fairly common throat infection is tonsillitis, which occurs when you have sore, swollen tonsils. It's caused by many of the same viruses and bacteria that cause sore throats. If you have frequent bouts of tonsillitis or strep throat, you may need surgery (called a tonsillectomy) to have your tonsils removed.

The best way to protect yourself from the germs that cause these infections is to wash your hands often. Try to steer clear of people who have colds or other contagious infections. And avoid smoking and inhaling second-hand smoke, which can irritate your throat.

SORE THROAT RELIEF

- Try hot tea with lemon or some hot soup.
- Keep your throat moist with lozenges or hard candies.
- Gargle with warm salt water or use ice chips.
- Cold liquids or popsicles can numb the pain. Throat sprays and over-the-counter pain relievers can help, too.
- Use a humidifier or vaporizer, especially when sleeping, to keep air from getting too dry.
- If the sore throat persists for several days, contact a health care professional.





To Your HEALTH



WELCOA'S ONLINE GENERAL WELLNESS BULLETIN

GOOD VISION

MILLIONS DON'T SEE AS WELL AS THEY COULD

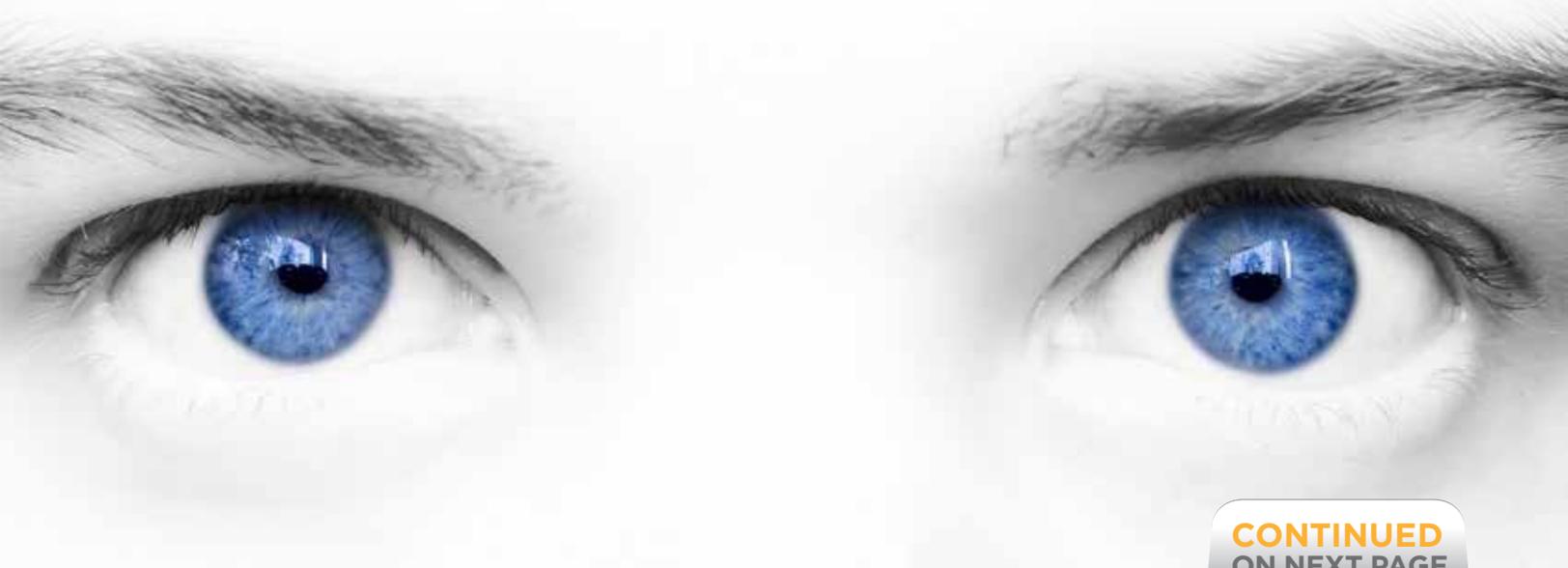
A comprehensive report has found that although 94 percent of Americans 12 years old and older have good vision, the remaining 6 percent—14 million people—are visually impaired. Of these, more than 11 million could improve their vision with eyeglasses or contact lenses.

The study, which was designed and supported by the National Eye Institute, was part of the National Health and Nutrition Examination Survey, an ongoing survey by the National Center for Health Statistics of the Centers for Disease Control and Prevention. More than 15,000 people participated in the survey. They were interviewed in their homes and invited to undergo a comprehensive health examination in a mobile

examination center (MEC). More than 14,000 reported to a MEC, and more than 13,000 completed vision tests.

The study found that teenagers, people with diabetes, Hispanics and people who are economically disadvantaged have higher rates of visual impairment and can most benefit from corrective lenses. These findings will help policy planners and health care workers focus their efforts where they can do the most good.

Regular eye exams should be part of everyone's routine health care. Even if your vision seems fine, it's a good idea to see an eye care professional regularly for routine vision screenings and eye examinations.



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Keep Your Eyes Healthy! Simply Tips to Maintain Your Vision

Have a comprehensive dilated eye exam. You might think your vision is fine or that your eyes are healthy, but visiting your eye care professional for a comprehensive dilated eye exam is the only way to really be sure. A dilated eye exam is the only way to detect eye diseases in their early stages.

During a comprehensive dilated eye exam, your eye care professional places drops in your eyes to dilate, or widen, the pupil to allow more light to enter the eye the same way an open door lets more light into a dark room. This enables your eye care professional to get a good look at the back of the eyes and examine them for any signs of damage or disease.

Know your family's eye health history. Talk to your family members about their eye health history. It's important to know if anyone has been diagnosed with a disease or condition since many are hereditary.

Eat right to protect your sight. You've heard carrots are good for your eyes. But eating a diet rich in fruits and vegetables, particularly dark leafy greens such as spinach, kale, or collard greens is important for keeping your eyes healthy too.

Maintain a healthy weight. Being overweight or obese increases your risk of developing diabetes and other systemic conditions, which can lead to vision loss, such as diabetic eye disease or glaucoma.

Quit smoking or never start. Smoking is as bad for your eyes as it is for the rest of your body. Research has linked smoking to an increased risk of developing age-related macular degeneration, cataract, and optic nerve damage, all of which can lead to blindness.

Be cool and wear your shades. When purchasing sunglasses, look for ones that block out 99 to 100 percent of both UV-A and UV-B radiation.

Give your eyes a rest. If you spend a lot of time at the computer or focusing on any one thing, you sometimes forget to blink and your eyes can get fatigued. Try the 20-20-20 rule: Every 20 minutes, look away about 20 feet in front of you for 20 seconds. This can help reduce eyestrain.



CHECK YOUR VISION

There are many signs that can signal vision loss. Even with your regular glasses, do you have difficulty:

- ✓ Recognizing faces of friends and relatives?
- ✓ Doing things that require you to see well up close, like reading, cooking, sewing or fixing things around the house?
- ✓ Picking out and matching the color of your clothes?
- ✓ Doing things at work or home because lights seem dimmer than they used to?
- ✓ Reading street and bus signs or the names of stores?

Vision changes like these could be early warning signs of eye disease. If you answered "yes" to any of these questions, see an eye-care professional as soon as possible. The earlier your problem is diagnosed, the better your chance of keeping your remaining vision.