

Volume V, Issue II



SPA 5 and 6 Write Grant to Expand Teen Parent Program

The SPA 5 and 6 Area Health Office has submitted a grant application to the California Chapter of the March of Dimes to expand their existing outreach to teen mothers.

South Health Center, one of two Public Health clinics in SPA 6, has hosted community baby showers for years for teen moms attending Riley High School. The activity, held every June, is financed primarily by staff fundraisers such as silent auctions, raffles, and food sales.

Although the baby showers have been successful in getting the teen mothers exposed to health education information, it became apparent that a long term intervention would be more appropriate in order to ensure that the information is being put to use and that adverse birth outcomes were being prevented. "We have been doing these events for years and they've always been successful", said Jameelah Harris-Mims, Community Liaison for SPA 5 and 6 and one of the co-authors of the grant. "We really wanted to have a stronger impact to make sure they are really learning, which is what this program is all about".

A concerted effort was made to include SPA 5 in the proposed program, entitled **Marvelous MOMMS** (Motivating our Moms for Maternal Success). The proposal outlines plans to work with a residential home for pregnant women in the Venice area.

The proposed three month program consists of three major components: prenatal care, infant health and safety, and interconception care (the period between one child and the next). The culminating activity will be the community baby shower.

Each component has several workshops that focus on the general theme. The mothers will be tested to make sure they have acquired knowledge and/or mastered a skill.

Fall 2007

Notification of award will occur in January 2008.



Prostate Cancer: Prevention Starts With You!

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Inside this issue:

September is Prostate Cancer Awareness Month and this month the focus is on prevention and early detection. Prostate Cancer is the most commonly diagnosed cancer among men and the second leading cause of cancer related deaths for men. Prostate cancer will affect nearly 200,000 men this year nationwide. While the mortality rate is dropping, prostate cancer is still the secondleading cause of cancer death in African American men. African- American men have an even higher risk of developing prostate cancer: one in four men. They are also 2.5 times more likely to die from the disease than Caucasian men The prostate is the gland below a man's bladder that produces fluid for semen. Levels of a substance called prostate specific antigen (PSA) is often high

in men with prostate cancer. However, PSA can also be high with other prostate conditions. Since the PSA test became common, most prostate cancers are found before they cause symptoms. Symptoms of prostate cancer may include

- Problems with passing urine, such as pain, difficulty starting or stopping the stream, or dribbling
- Low back pain
- Pain with ejaculation

Prostate cancer treatment often depends on the stage of the cancer. How fast the cancer grows and how different it is from surrounding tissue helps determine the stage. Treatment may include surgery, radiation therapy, chemotherapy or control of hormones that affect the cancer.



To maintain prostate health, the American Cancer Society recommends that

- Beginning at age 50, men should have both the PSA blood test and a digital rectal exam;
- men in high-risk groups should begin screening starting at age 45. (High-risk groups include African-American men, and men whose brothers, fathers, or sons had prostate cancer diagnosed under age 60.)

(See Prostate, page 3)

CHRONICLE

September is Ovarian Cancer Awareness Month

It is estimated that this year more than 16,000 women will die in the United States from ovarian cancer. Many women don't seek help until the disease has begun to spread, but if detected at its earliest stage, the five year survival rate is more than 90%.

Right now, there is no known method to prevent ovarian cancer, but some things appear to reduce a woman's risk of developing the disease. They include:

• Oral contraception: Birth control pills reduce the risk of ovarian cancer especially among women who use them for several years.

• Breast feeding and pregnancy: Having one or more children, particularly if the first is born before age 25, and breast feeding may decrease a woman's risk.

• **Tubal ligation:** This is a surgical procedure in which the fallopian tubes are tied to prevent pregnancy.

• Hysterectomy: A woman should not have a hysterectomy exclusively to avoid the risk of ovarian cancer, but if one is being performed for medical reasons and there is a family history of ovarian or breast cancer, or the woman is over age forty, she should discuss ovary removal with her physician.

• **Prophylactic oophorectomy:** Oophorectomy is the surgical removal of one or both ovaries. This is only recommended for certain high-risk patients.

According to the American Cancer Society (ACS), eating right, being active, and maintaining a healthy weight are important ways to reduce your risk of cancer as well as other diseases. For the ACS diet and fitness tips, please visit <u>www.cancer.org</u>

Risk Factors

While the presence of one or more risk factors may increase a woman's chance of getting ovarian cancer, it does not necessarily mean she will get the disease. A woman with one or more risk factors should be extra vigilant in watching for early symptoms, which include:

- Genetic predisposition
- Personal or family history of breast, ovarian or colon cancer
- Increasing age

Facts

- All women are at risk
- Symptoms exist—they can be vague, but increase over time
- Early detection increases survival rate

A Pap test **DOES NOT** detect ovarian cancer

How is Ovarian Cancer Diagnosed?

Unfortunately, most women with ovarian cancer are diagnosed with advancedstage disease. This is because the symptoms of ovarian cancer (particularly in the early stages) often are not acute or intense, and present vaguely. The sooner ovarian cancer is found and treated, the better a woman's chance for recovery. It is important to know that early stage symptoms are not silent – so women should be extra alert and watch out for early symptoms.

Potential symptoms of ovarian cancer include:

- Pelvic or abdominal pain or discomfort
- Vague but persistent gastrointestinal

upsets such as gas, nausea and indigestion

- Frequency and/or urgency of urination in the absence of an infection
- Unexplained changes in bowel habits
- Unexplained weight gain or weight loss
- · Pelvic and/or abdominal swelling, bloat-
- ing and/or feeling of fullness
- Ongoing unusual fatigue

Screening Tests

Although there is no consistently-reliable screening test to detect ovarian cancer, the following tests are available:

• Pelvic Exam: Women age 18 and above should have an annual vaginal exam. Women age 35 and above should receive an annual rectovaginal exam (physician inserts fingers in the rectum and vagina simultaneously to feel for abnormal swelling and to detect tenderness).

• **Transvaginal Sonography:** This ultrasound, performed with a small instrument placed in the vagina, is appropriate for women at high risk for ovarian cancer

• **CA-125 Test:** This blood test determines if the level of CA-125, a protein produced by ovarian cancer cells, has increased in the blood of a woman at high risk for ovarian cancer.

For more information visit ovariancancerawareness.org or call the American Cancer Society at

Breast Cancer Awareness Month – October

Breast cancer is the most common cancer in women in the United States. According to the American Cancer Society, it's estimated that about 178,480 women in the United States will have invasive breast cancer in 2007. About 40,460 women will die from the disease this year.

Breast cancer is a malignant tumor that grows in one or both of the breasts. Breast cancer usually develops in the ducts or lobules, which are the milk producing areas of the breast. It often causes a lump in the breast(s). Other common signs of breast cancer include abnormal thickening of the breast and/or change in shape or color of the breast. Additional changes to the breast that can indicate breast cancer include:

- Changes in breast size
- Dimpling or puckering of the skin
- Swelling, redness, or warmth that doesn't go away

• Pain in one spot that doesn't change with your monthly cycle

- Pulling in of the nipple
- Nipple discharge that starts suddenly and appears only in one breast
- An itchy, sore, or scaling area on one nipple

Although finding a lump or other changes in your breast does not necessarily mean you have breast cancer, you should consult with your health professional as soon as possible. The best way to prevent breast cancer is with early detection. Women over 40 should get yearly mammograms. All sexually active women and teenagers 16 and over should examine their breasts regularly to detect lumps or abnormalities that could signal breast cancer. An exam should be done once a month, several days after the last day of a woman's period. Here are the five basic steps to a breast selfexam, courtesy of www.Breastcancer.org:

- Standing with your shoulders straight and your arms on your hips, face a mirror. Look for any differences in size, shape, color, swelling or bulging of the skin, changes in the nipple, or any signs of redness or rash
- Raise your arms, and examine your breasts for any of those differences
- Gently squeeze each nipple to check for any discharge
- Lie down and feel each breast with the hand of the opposite arm. Feel all the tissue, applying pressure to check deep tissue for any lumps or abnormalities.
- Examine the breasts while you are standing or sitting, gently examining the entire breast. You may want to try this method in the shower, while the skin is slippery.

For more information on breast cancer, visit <u>www.breastcancer.org</u>

For a free Breast Self-Examination shower hanger, visit www.komen.org

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CHRONICLE

CA Smoker's Helpline—I5 Years of Service



On August 23, 2007 the State Department of Public Health held a press conference to commemorate 15 years of the California Smokers' Helpline working hard to help smokers quit.

The event also promoted a new service offered that allows a person to go online and request to be called back regarding getting help quitting. Visitors to the website can indicate whether they would like to be called back right away or later on and receive a phone call from a trained operator.

Representatives from the Helpline also outlined research about the effectiveness of the hotline in getting smokers to quit.

In addition, mobile billboards (shown at left with SPA 5/6

health educator Nicole Vick and SPA 8 Health Educator Ava Cato-Werhane) featuring the California Smoker's Helpline will roam around Los Angeles County encouraging people to quit smoking.

To access the California Smoker's Helpline visit: www.californiasmokershelpline.org or call 1-800-NO BUTTS.

Selected Reportable Diseases South Service Planning Area (Provisional)

Disease	1/1/07-6/30/07	1/1/2006-6/30/2006
AIDS		
Amebiasis	3	3
Campylobacteriosis	41	23
Chlamydial Infections	4420	4909
Encephalitis	0	0
Gonorrhea	1323	1617
Hepatitis Type A	2	33
Hepatitis Type B	1	3
Hepatitis Type C	0	1
Measles	0	0
Meningitis, Viral	13	10
Meningococcal Infections	4	10
Non-gonococcal Urethritis	158	275
Pertussis	3	14
Salmonellosis	42	46
Shigellosis	16	31
Syphilis, primary & secon- dary	23	45
Syphilis, early latent (<1 yr.)	41	48
Tuberculosis	37	37

Prostate Cancer Prevention

(Prostate, from page 1)

Although one in six men will get prostate cancer, if caught early, nearly 100% survive. Early prostate cancer has no symptoms, that's why screening is so important.

Keep prostate cancer out of your future! For learning and support about prostate cancer, the American Cancer Society also recommends:

- Talk to your family. Find out if family members have had prostate cancer
- Listen to your body. If you have any symptoms, see a doctor
- Talk to other men who have prostate cancer. They can share their experiences and knowledge.

Call the ACS for more information at 1-800-ACS-2345 or visit the ACS website at www.cancer.org

How Much Do YOU Know About Ovarian Cancer?	SPA 6 EXECUTIVE TEAM	
How Huch Do 100 Know About Ovalian Cancel.	Area Health Officer:	Martina Travis, MPH, BSN
	Area Medical Director:	Maxine Liggins, MD, MPH
1. There is a specific diagnostic test to determine whether or	Director of Operations:	Willie Mae Howard, MPA
not women have ovarian cancer. O True O False	Nurse Manager: Nurse Supervisors:	Dee Warren, MSN, MPH, BSN Yesenia Eras, PHNS
	Nurse Supervisors:	Deanna Jackson-Keeble, PHNS
2. If a woman is diagnosed in the earliest stage of ovarian		Patricia Batiste, PHNS
cancer, her projected five-year survival rate is over 90%?		Ann Nelson, PHNS
O´True Ó False	Community Liaison:	Emily Moore, PHN
	·····	Jameelah Harris-Mims, MSN, MPH, PHN
3. Women who have had breast cancer have a higher risk of	Epidemiology Analyst:	Vacant
ovarian cancer. 🔿 True 🔗 False	Health Educator:	Nicole D. Vick, MPH, CHES
4. Ovarian cancer ranks as the [x] cause of cancer-related	Health Program Coordinator:	Teresa Level
death in women.	MANAGING EDITOR	
○ 3rd ○ 5th ○ 9th ○ 14th	Nicole D. Vick	
5. Half of all cases of ovarian cancer are found in women over		
the age of 63.	The SPA 6 CHRONICLE is published quarterly by the	
O True O False	South Service Planning Area. You are welcome to make copies of this newsletter.	
The following may help reduce a woman's risk of ovarian cancer.	CONTRIBUTORS	
 Taking birth control pills Having a hysterectomy Having one or more children and breast feeding for a year or longer All of the above 	Jameelah Harris-Mims, MSN, MPH, PHN, Community Liaison, Public Health, Service Planning Area 5 and 6	
7. If there is a family history of reproductive cancers (testicular, breast, uterine, etc.) a woman is at a higher risk for ovarian cancer. O True O False		

1. False, 2. True, 3. True, 4. 5th, 5. True, 6. All of the above, 7. True



Chronicle 6

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PUBLIC HEALTH MISSION : TO SAFEGUARD AND IMPROVE THE HEALTH OF ALL LOS ANGELES COUNTY RESIDENTS