

HEALTH & WELLNESS

Healthbeat

Lawmakers in Zimbabwe circumcised for anti-HIV push

HARARE, Zimbabwe (AP) — In Zimbabwe's parliament, lawmakers belonging to a panel on health issues set up an HIV/AIDS testing and male circumcision center and said 20 legislators underwent the surgery on Friday.

Medical officials running the program said 107 legislators and their spouses have been given virus tests so far. Lawmaker Blessing Chebundo of the Zimbabwe prime minister's party said the campaign, the first of its kind involving the country's leaders, is a show of "political will" to fight AIDS.

Officials said more than 40 lawmakers have volunteered to undergo circumcision, a procedure that research shows reduces the risk of HIV transmission.

Infection in Zimbabwe runs at about 13 percent of the population but rises above 20 percent in the teens to early 30s age group.

Chebundo was the first to be circumcised Friday. He said the procedure was "safe and pain-free."

"I was a bit scared at first but I didn't feel a thing. I can confidently urge all Zimbabwean men to go through with this," he said.

He was told to expect minor pain after the anesthetic had worn off, to abstain from sex for six weeks and to come back three times for follow-up treatment.

The Zimbabwe circumcision program began in 2009 and has so far carried out 70,000 circumcisions, health ministry officials at the parliament house in downtown Harare said.



Chebundo

Kernersville Medical to help stage Guilford Heart Walk

Kernersville Medical Center Hospital has partnered with the American Heart Association's Go Red For Women program, joining NewBridge Bank as the Guilford County sponsors for Go Red For Women in 2012 and 2013.

Heart disease is the No. 1 killer of women in the United States, taking the lives of one in every three women. However, 80% of heart disease in women can be prevented. Go Red For Women is a year-round campaign that improves awareness of heart disease in women, educates women on heart disease prevention and raises vital funds to aid in the fight against heart disease in women.

"In Kernersville and throughout Guilford County, it is critical to our mission to help women make their heart healthy a top priority. By arming women with the risk factors and warning signs related to heart disease in women, we can have a tremendous impact on our communities," says Joanne Allen, president of Kernersville Medical Center Hospital. "When women eat healthier, become active and pay more attention to their own heart health, whole families and entire communities also make those changes. We are proud to join the American Heart Association and NewBridge Bank in leading the charge to help save Guilford County women from this largely preventable killer."

For more information, or to sponsor, donate or volunteer for the Go Red For Women movement in Guilford County, visit www.heart.org/guilfordncgorednluncheon.

AMA urges anti-obesity instruction for kids

CHICAGO (AP) — The American Medical Association last week put its weight behind requiring yearly instruction aimed at preventing obesity for public schoolchildren and teens.

The nation's largest physicians group agreed to support legislation that would require classes in causes, consequences and prevention of obesity for first through 12th graders. Doctors will be encouraged to volunteer their time to help with that under the new policy, adopted on the final day of the AMA's annual policy-making meeting.

Another new policy adopted Wednesday says the AMA supports the idea of using revenue from taxes on sugar-sweetened sodas as one way to help pay for obesity-fighting programs. But the group stopped short of fully endorsing such taxes.

Some doctors think soda taxes would disproportionately hurt the poor and disadvantaged. Others said taxes shouldn't be used to force people to make healthful decisions they should be making on their own.

Doctors at the meeting shared sobering statistics and personal stories in urging the AMA to sharpen its focus on obesity prevention.

The measure was drafted by the AMA's Pennsylvania delegation. It cited data showing more than 300 million people worldwide are obese and said requiring nutrition education to prevent obesity has never been proposed.



CPR Learning how to Save a Life

Cardiopulmonary Resuscitation, more commonly known as CPR, can be a lifeline for someone who has gone into sudden cardiac arrest (when a person's heart stops unexpectedly). Since the late 1800s, chest compressions have been used in human resuscitation, and in the early 1900s, rescue breathing was added as an additional lifesaving measure. Officially, CPR was developed in 1960 by the American Heart Association (AHA), who developed a program to teach doctors about this procedure. This program was the precursor of CPR training for the general public. Read on to learn how you can help save a life with CPR.

According to the American Heart Association...

- Sudden Cardiac arrest can happen to anyone, anytime
- Less than 8% of people who suffer sudden cardiac arrest outside a hospital survive
- Less than 1/3 of sudden cardiac arrest victims outside a hospital receive CPR
- Effective, immediate CPR can double or triple a victim's chance of survival.

New CPR Guidelines

Recently, the guidelines on performing CPR were updated by the American Heart Association. In previous years, individuals were taught to listen and feel for normal breathing before beginning CPR. Then, they were instructed to give rescue breaths before starting chest compressions. The new guidelines state that chest compressions should begin right away, to continue pumping oxygen-rich blood through the person's bloodstream. The reason for these changes is that in an adult who has been breathing normally for several minutes, even after cardiac arrest, there is enough oxygen in the bloodstream to maintain the heart and brain, as long as compressions circulate that oxygen.

Other new recommendations include:

- During CPR, rescuers should give chest compressions at a rate of at least 100 times a minute. The BeeGee's song "Staying Alive" is the perfect rhythm for compressions.
- Rescuers should push deep on the chest, compressing at least two inches in adults and children and 1.5 inches in infants.
- Between each compression, rescuers should avoid leaning on the chest to allow it to return to its starting position.

All the changes apply only to adult victims who collapse of cardiac arrest. Artificial respiration, also known as rescue breathing, is still recommended for children, and for victims (regardless of age) of near-drowning and drug overdose.

You can Save a Life

Remember, immediate CPR can significantly increase a person's chance of survival from sudden cardiac arrest. In addition to CPR, it is essential to call 911 in any case of cardiac arrest as emergency medical treatment from trained professionals is also key to survival. The best way to prepare yourself is to find a CPR class in your area - Check out the American Heart Association web site or talk to your local American Red Cross or hospital.

This article should not be treated as a teaching tool for CPR; its purpose is only to raise awareness regarding the new CPR guidelines

For more information, Check out www.americanheart.org. Do you need further information or have questions or comments about this article? Please call toll-free 1-877-530-1824. Or, for more information about the Maya Angelou Center for Health Equity, please visit our web site: WakeHealth.edu/MACHE.

The People's Clinic:
A North Carolina Minority
Health Education Collaborative

The Maya Angelou Center for Health Equity
www.wakehealth.edu/mache

Wake Forest
School of Medicine

Hampton leading way with advance treatment

CHRONICLE STAFF REPORT

Hampton University is using its Proton Therapy Institute (HUPTI) to help black men battle prostate cancer, which affects them more than any other group.

HUPTI, which the school opened in August 2010, is the largest of its kind in the world and only the eighth facility in the country to offer proton therapy. The therapy is able to target tumors with millimeter accuracy, sparing surrounding healthy tissue and resulting in reduced side effects for the patient.

The Institute is being credited with saving lives everyday.

"In July of 2009, I received a diagnosis of prostate cancer," said Alfred Scott of Hampton, Va. "My doctor scheduled me for radiation treatments. However, since so many of my friends and family members experienced disturbing side effects from radiation, I wanted to seek an alternative treatment."

Scott said he was watching the local news and learned about proton therapy and that Hampton was opening a proton facility.

"I went to the Internet to do extensive research about proton therapy and everyone spoke so positive about their experience and about the treatment, that I decided that proton therapy was the best choice for me," said Scott. "I am very happy with my decision."

Scott wanted to be one of the first patients treated when HUPTI opened.

"I told my doctor I was going to wait until this facility opened up. I contacted HUPTI for a consultation and became one of the first ones to be treated."

"My appointments were only 30 minutes each day, and the actual treatment time lasted only a minute long," he said. "I finished my



HU Photo

Alfred Scott shows off the mold that was used during his treatment. Since proton therapy is very precise, patients need to lie in the same position each time, with the help of their mold. HUPTI staffers signed it for him after his treatments.

eight weeks of treatment in November of 2010. I have not experienced any after effects over a year and a half after treatment. I didn't even have to alter my daily routine due to any complications during treatment."

The average treatment time is two minutes or less, five days a week, from one to nine weeks.

Scott, 77, spent 27 years in the U.S. Army Intelligence and retired as a Chief Warrant

See Hampton on A7

LANDMARK LAW



PRNewsFoto/Massachusetts Down Syndrome Congress

Massachusetts Gov. Deval Patrick signs into law his state's Prenatal Down Syndrome Law. The first law of its kind, it requires the state Department of Public Health to make available to medical providers the latest, culturally-appropriate information about what it means to have a child with Down Syndrome and contact information for services to ensure parents have access to necessary supports.

Asheboro ripe for retirees

CHRONICLE STAFF REPORT

Asheboro has been designated as a N.C. Certified Retirement Community by the N.C. Department of Commerce.

The N.C. General Assembly created the designation in 2008 to designate communities that offer an unprecedented quality of living that is desirable to retirees.

"The leadership in Asheboro understands and appreciates the contribution that retirees can make to the overall enrichment of a community," said N.C. Commerce Secretary Keith Crisco. "This distinction will be a positive economic development tool for the city and all of its residents."

To gain certification, a local government must submit an application that includes a comprehensive community survey and assessment that spans numerous dimensions reflective of the city's readiness for retiree attraction. Areas considered include demographics, housing/technology and leisure/cultural opportunities.

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"Having retirees move into Asheboro means that we're creating new jobs, adding wisdom and experience to our community and growing our population without the need to expand services like schools," said Asheboro Mayor David Smith. "We have four beautiful seasons, a vibrant arts community, great cultural and recreational resources - we think we have exactly what many retirees are looking for, and we're eager to welcome them to our community."

Asheboro, which submitted its application in January 2012, was noted for its abundance of cultural activities as well as local amenities that are attractive to retirees. Communities with this official designation receive marketing and promotion assistance from the N.C. Division of Tourism, Film and Sports Development Division.

North Carolina previously named the City of Lumberton as a Certified Retirement Community in April 2010.

Exercise key to reducing breast cancer risk

SPECIAL TO THE CHRONICLE

A new analysis done by University of North Carolina at Chapel Hill researchers has found that physical activity - either mild or intense and before or after menopause - may reduce breast cancer risk, but substantial weight gain may negate these benefits.

Published early online in Cancer, a peer-reviewed journal of the American Cancer Society, the findings indicate that women can reduce their breast cancer risk by exercising and maintaining their weight.

While studies have shown that physical activity reduces breast cancer risk, many questions remain. For example, how often, how long and how intense does physical activity have to be to provide benefits? Also, do women with all body types experience a reduced risk when they exercise, and does exercise reduce the risk of all types of breast cancer?

To investigate, Lauren McCullough, a doctoral candidate at the UNC Gillings School of Global Public Health, and her colleagues looked for a link between recreational physical activity,

See Exercise on A7