

# HEALTH & WELLNEWS

WELLNESS NEWSLETTER

**At a Glance.....**

- ☛ Prevent Carpal Tunnel Syndrome
- ☛ Child Safety
- ☛ Osteoporosis, Signs/Symptoms and Preventions

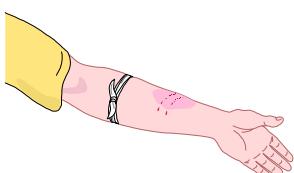
**FIVE EASY WAYS TO PREVENT CARPAL TUNNEL SYNDROME**

Anyone who spends long hours at a keyboard is at risk for carpal tunnel syndrome, tendonitis and other work Related upper extremity disorders (also known as WRUED's).

To lower your risk, lighten up! Follow these simple rules when typing and you may help prevent carpal tunnel syndrome:

1. Practice typing with a light touch. Post reminders where you can see them as you work. Before long, you will automatically be typing with a lighter touch.
2. Identify your 'triggers'. Some people tend to type harder when tired, hurried or under stress.
3. Check your posture. Your wrists should be relaxed but not bent upward or downward (piano players have an advantage here!). Be sure your monitor is at eye level. Correct any ergonomic problems that put you in an awkward posture.
4. Cut back on caffeine. Caffeine can increase irritability and tension and result in increased force when typing.
5. Listen to your body. Pain, aching, stiffness, burning, tingling, or numbness in your hands, wrists, arms or shoulders can be symptoms of carpal tunnel or something much more serious.

Following these simple steps can help you be more aware of your activity and allow you to modify your posture in order to help prevent carpal tunnel syndrome.



Tip Source: <http://www.Businesses-tips.com>

**SAFETY FOR YOUR CHILDREN**

Now that we are all 'back to school', it is important to remember that little ones will be walking to school for the first time. It is important to street proof your children.

- ☺ Set up a buddy system so that children are not walking alone. Have an older child you trust from the neighborhood walk your younger children to and from school.
- ☺ Make it a family rule to have children always tell you where they are going, with whom they are going with, at what time they expect to be home, etc. If a child is walking/biking to a friend's house, have them call you upon their arrival.
- ☺ Although it is often requested and can be helpful for teachers/supervisors on outings, you should never label your children! A name tag on your child gives strangers the perfect opportunity to address your child by name. You should also avoid putting their name on coats/t-shirts.
- ☺ It is important to use 'secret passwords'. Explain to your children that the 'password' is strictly a family secret and is not to be shared with anyone. This password is the key to your child knowing that he/she is safe with someone. The child should be taught to be assertive and insist on obtaining the password before going with others. If the correct password is given, the child can be sure that his/her parent/guardian has sent this alternate person and that it must be safe. Once a password has been used, it must be changed. (several guesses at a password should NOT be allowed)
- ☺ Encourage children not to stop if approached by a slow moving car. The person(s) inside the car asking for directions may pretend not to hear and ask the child to step closer to the vehicle. This is an obvious safety risk. Tell children that adults should be speaking to other adults, especially about directions.
- ☺ Explain to children that sometimes 'lures' are used to befriend them. Often puppies or the threat of a lost puppy can be used.
- ☺ Encourage children to seek the help from an adult they trust if they are placed in uncomfortable situations.
- ☺ Teach children how to use a pay phone and to memorize their phone number and address. If children are lost, they should be taught to go to someone in uniform, a teller at the bank, the cashier at the store, etc. for assistance. Always keep a few quarters in the pocket of their knapsack.

It is possible to street proof your children in a fun way. Play memory games or 'what if' to help young children remember what to do.

Tip source: Child Find street proofing guidelines.

## **OSTEOPOROSIS - 'THE BRITTLE BONE DISEASE'**

### **Signs, Symptoms and Preventative Measures**

Osteoporosis is the most common metabolic bone disease, and leads to approximately 1.3 million fractures per year. This disease results from a change in the normal and ongoing metabolic process of bone reabsorption and formation. When more bone substance is reabsorbed than rebuilt, the density or amount of bone decreases. Imbalances between bone formation and bone resorption underlie nearly every disease that influences the adult skeleton. Overall, the bone is weakened by lack of bone mass.

Osteoporosis, or 'Brittle Bone Disease' occurs most often in the aged, particularly post menopausal women. However, it does effect women of all ages, and predominately those who are petite, thin fair-skinned Caucasian or Asian. Men and women can both be affected by metabolic changes as the age, leading to age-related osteoporosis. Younger women are now recognized as having decreased bone density, and should be included in preventive treatment programs.

Risk Factors of osteoporosis include:

- ⊗ decrease in estrogen production
- ⊗ alcohol and cigarette use
- ⊗ poor nutrition (diet poor in calcium and protein)
- ⊗ inactivity and immobilization (disuse)
- ⊗ over activity
- ⊗ long term use of glucocorticoids in treatment of another disease (asthma, rheumatoid arthritis)
- ⊗ evidence of genetic link increases risk of osteoporosis

Osteoporosis may be regional, such as in the hands, or it may be more generalized throughout the body.

Most commonly, Osteoporosis is not discovered until a fracture occurs, or it is an incidental finding while evaluating for another problem. Signs and symptoms may include;

- ⊗ pain
- ⊗ change in body height if the spine is involved
- ⊗ weakness and stiffness
- ⊗ fracture (if fracture obvious deformity, pain, decreased motion and swelling)



Testing is performed to confirm the presence or absence of osteoporosis.

These include X-rays to assess for any fractures, and special radiographic studies to measure bone density. These examinations do not take long to complete.

The key to management of osteoporosis today is prevention, especially for those that have many of the risk factors previously identified.

Preventative measures include:

- ⊗ an evaluation for use of estrogen supplement
- ⊗ nutritional guidance with possible supplements (supplemental calcium and vitamin D)
- ⊗ getting plenty of weight-bearing exercise (walking, jogging, tennis, etc.)
- ⊗ maintaining a proper balance between activity and over activity
- ⊗ avoid overuse of medications known to affect bone metabolism

It is widely accepted that nutrition plays an integral role in the prevention of osteoporosis. Exercise, however, also has the potential to play an important role in the management of osteoporosis both through the maintenance of, and the increase of bone density.

Participation in regular exercise and activity will also result in improvements in aerobic levels, increased muscle strength, percentage body fat, flexibility/agility and balance. All of which may result in a decreased number of falls, thereby decreasing the number of fractures.

It has been shown in a study of forty post-menopausal women (Nelson), over a period of one year, where half completed an exercise program of regular physical activity three times per week, those who participated in the exercise program had an increase in the bone density of their bones. Those who did not participate in the exercise program (control subjects) demonstrated a decrease in bone mineral density.

There is no single cure and/or treatment for osteoporosis, although new drug therapies are now available that may slow the process and increase bone density. Increased bone density reduces the occurrence of pain and the risk of fracture.

Prevention is critical in those individuals who are high a risk (see risk factors). While nutrition and exercise plan an important role in the delay of and the prevention of osteoporosis, education and awareness are essential. With some forethought and planning, osteoporosis can be prevented (or at least delayed)!!!

Sources: Nelson, M.E. et al., 'Effects of high-intensity strength training on multiple risk factors for osteoporotic fractures', Journal of AMA, 1994

MDA for Windows, version 3.0. 1998 Reed Group, Ltd.

#### **Additional Sources For Resources:**

- [www.cbshealthwatch.netscape.com](http://www.cbshealthwatch.netscape.com)
- [www.blockparent.ca](http://www.blockparent.ca)
- [www.kidzprintz.com](http://www.kidzprintz.com)
- [www.carpal-tunnel-syndrome.net](http://www.carpal-tunnel-syndrome.net)

## **MDM Insurance Services Inc.**

For additional copies please contact MDM administration at 1-800-838-1531.

The material provided in this newsletter is for your information only and is not intended to replace the advice prescribed by your physician.