

## **SCREENING IS IMPORTANT FOR HEALTH**

There was recently a story of a patient whose story we can all benefit from hearing. He is 67, and two years ago he was the picture of health. Prior to this, he hadn't suffered from any health issues. While he was working (up to age 55), work-related health screens confirmed that his healthy eating and active lifestyle were working for him. He retired happily, and continued his healthy ways, with the exception of those work-sponsored yearly screens. Ten years into his retirement, however, he was diagnosed with progressive infectious disease and it wreaked havoc on his body. The infection itself was rather easily treated, but he was left with a struggling liver and elevated cholesterol, and was now underweight and had little energy. He wonders if this issue could have been detected sooner, thus preventing his downward spiral. He feels that healthcare providers have written him off. "You're 67— your health is going to be different now," one provider said.

What we should all gain from this story: have appropriate screening tests done, even if you feel perfectly healthy. Although most test results will be normal, recommended screens are known to catch illness before you suspect anything is wrong. Furthermore, screen not just for the small chance that something will show up, but also so your doctors can see your healthy baseline and can appropriately respond if something looks amiss.

For men and women over 50, a physical at least every two years (and yearly after 60) should include a blood pressure screen and cholesterol panel. A Complete Blood Count (CBC) will show any anemia or infection, and a comprehensive Metabolic Panel (CMP) will ensure liver and kidney health, and also show your fasting glucose levels.

At 50, you should pursue your first colonoscopy, unless you have a family history; in which case your doctor will likely send you earlier and more frequently for screenings. This should be repeated every 5-10 years for low-risk people, with an occult blood screening every five years [often done during a PAP for women or during digital rectal exam (DRE) for men].

At 50, men's physicals should also include a prostate screen including a DRE, and a PSA (Prostate Specific Antigen). This is typically done yearly after 60, however, this frequency is being questioned, so ask your doctor for recommendations based on your risks.

For women, regular PAP tests and mammograms are in order. PAPs are recommended every three years as long as you have had three normal results in a row. Once you are 65 (and without risk factors including personal or family history of associated cancers) you likely don't need PAP tests anymore. However, you might still need gynecological exams, especially if you are on any type of hormone therapy, so speak to your doctor.

Clinical breast exams should occur yearly, and although tests such as thermography are becoming more popular in the detection of breast cancer, mammography (every 1-2 years based on risks) is still considered the gold standard.

Finally, women should have a bone density (DEXA) scan after menopause or at the latest by age 60 as a baseline and then typically every five years. Fractures later in life remain a high cause of morbidity and mortality; and the sooner you know your risks the better you can prevent further decline.

## **OUT-OF-POCKET HEALTH SCREENS**

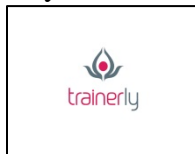
Should you have a full body screen? Although standardized screens are important, full body CT screens are not advantageous for most of us. No studies have shown that this form of detection extends life, and although the scans are touted as full-body many of our systems just aren't visible without contrast fluid.

These tests also result in many "false positives" with an inability to distinguish types of growth (i.e., is it a simple cyst or a cancer), which can often result in further, possibly risky diagnostic work. Furthermore, the unnecessary radiation might increase your risk of cancer by as much as 0.08%. Other screening companies use ultrasound technology to look at the health of the abdominal aorta (which can have aneurysms) and the carotid arteries (looking for blockages which can result in stroke).

Ultrasound is generally thought to be safe, and having this screening once every several years might be advantageous tests for inflammatory markers known as CRP and homocysteine. Anyone using hormone therapy should also have appropriate hormone levels checked at least annually. Presenting to doctors when you are feeling well can feel like you are asking for trouble, but establishing your health is vital information for your practitioners, and gathering information doesn't have to mean succumbing to over-treatment. Early detection of our most common diseases can be life changing — even life sparing.

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