

WINTER 2016

Veterans' Health

THE WELLNESS MAGAZINE
FOR VISN 10 VETERANS

**Sign Up
TODAY!**

We're Going Digital

See page 3

How digestion works

Digestion issues: heartburn, GERD, diarrhea and constipation

Get screened for colon cancer and hepatitis C

To our readers

Winter! This is the time of year when we think about weather forecasts, staying warm and self-improvement.

This issue provides news about the



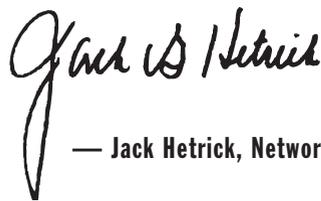
VA's **MyVA** plan to improve customer service, see page 3 for more information. This issue also brings news about the *Veterans' Health* magazine going digital! Starting with

the next issue, we will only offer the magazine on the VISN 10 website or via email. Printed copies will be mailed only on request. See pages 3 and 4 for information about how to:

- Access future issues electronically.
- Request that the magazine continue to be mailed to your home.

This issue of *Veterans' Health* focuses on the gastrointestinal (GI) tract. On the pages that follow, you will find information about how we digest food. We describe the treatment of common symptoms such as constipation and heartburn. And we explain the importance of being tested for conditions such as colon cancer and hepatitis C.

As always, your VA health care team puts Veterans at the center of all that we do. We are here as partners for your good health!



— Jack Hetrick, Network Director

It's not too late to get a flu shot!

If you didn't get a flu shot yet, you may think you don't need one this year. But flu season is October through May in the U.S., and April to September in the Southern Hemisphere. In the tropics, flu can be spread year-round. Because so many Americans travel outside the U.S., you can get the flu any time during the year. The flu is not just an achy feverish nuisance. Every year, a hundred thousand Americans are hospitalized with complications from the flu. Young children, senior citizens and people who have chronic health conditions are at extra risk. The flu vaccine is an important step in protecting you and your loved ones from flu viruses. The VA is offering flu shots—have you gotten yours?

Multiple sclerosis support group for patients and families

The VA has a special website devoted to information about multiple sclerosis (MS) among Veterans: www.va.gov/MS/index.asp.

Family members and caregivers of Veterans with MS are invited to attend a national VA conference call. The call is held the fourth Monday of every month, from 2 to 3 p.m. Eastern time. Dial (800) 767-1750, enter access code 43157, and press #.

What was your New Year's resolution?

If you are sick and tired of being sick and tired, you may have made a resolution to change something in your life in 2016. VA provides you with the Stanford chronic disease self-management workshops to help you take charge and feel better! Call your local VA for the schedule. Or, contact your area agency on aging to learn about workshops in your community.

Veterans' Health is published quarterly as a patient education service by VA Healthcare System VISN 10, one of the integrated networks of the Department of Veterans Affairs. The publication is intended to provide information to help you stay well, manage your health care and learn about the many health services available through VA. This publication is not intended as a substitute for professional medical advice, which should be obtained from your doctor. All articles may be reproduced for educational purposes.

The Mission of VA Healthcare System VISN 10 is:

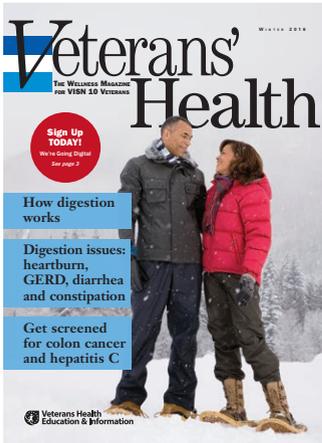
- To provide Veterans a continuum of care that is accessible, value-added and cost-effective, and of the highest quality, within an environment of outstanding education and research.
- To promote a culture that supports and develops a caring, compassionate, competent and quality-oriented workforce.

Veterans' Health Editorial Board

Beth Cameron
Kathleen Ford
Kristen Fortner
Dayton VAMC

Debbie Page
Terri Ruggerie
VA Healthcare System VISN 10

Joyce Seltzer
Cincinnati VAMC



If it is going to be effective, health care needs to be customized to meet your needs. As you probably know, VA not only delivers health care but also provides these services:

- Pensions.
- Disability compensation.
- Memorial and burial benefits.
- Vocational rehabilitation and employment.
- Insurance.
- Education.
- Home loan guaranty.
- Medical research.

MyVA is a plan to integrate all of these services so you can more easily get what you need. It is also a plan to make sure you get the same world-class services at every VA and that your records are available when and where you need them.

To accomplish this, the VA is reorganizing its regional structure. The Veterans Integrated Service Networks (VISNs) are being realigned to fit within the state boundaries of 5 VA Districts. Our VA health network (VISN 10) will include Indiana, Michigan and Ohio. We will also have some clinics in northern Kentucky. Other VA regions are changing too. The VA's regional changes should streamline operations and improve services. On page 4, you can see the organizational map for the new VISN 10.

The new VISN 10 will provide health care to more than 500,000 Veterans each year across 11 medical centers and 58 clinics. This change will have no impact on how Veterans access health care. For more information about MyVA, please go to www.va.gov/MYVA. **VH**

Veterans' Health is going digital!

VISN 10 is growing. We will now serve Veterans living in Indiana, Michigan, and Ohio. With that, and to be good stewards of the public funding we receive, we are going digital with *Veterans' Health* magazine.

We encourage you to sign up to receive *Veterans' Health* magazine online. This will allow us to save on mailing expenses. We will provide magazines in each VISN 10 facility. The content won't change. We will offer topics that promote health and well-being.

1. Subscribe to receive your *Veterans' Health* magazine online. Go to www.visn10.va.gov. Enter your email address under CONNECT WITH VA HEALTHCARE SYSTEM SERVING INDIANA, MICHIGAN AND OHIO. You will receive both the magazine and other announcements from VISN 10.

**Subscribe to Receive
Email Updates**

2. We will mail magazines to households of Veterans who receive VA health care and who request this service.

a. Complete and return the request form on page 4.

b. Or, email a request for the magazine to V10magazine@va.gov. Please include the full name and mailing address of the Veteran.

3. You can read past issues of *Veterans' Health* magazine. Go to the VISN 10 website home page at www.visn10.va.gov. Locate *Veterans' Health* magazine under RESOURCES.

Need addresses and phone numbers to VISN 10 VA sites?

Indiana

www.indianapolis.va.gov/
www.northernindiana.va.gov/

Michigan

www.annarbor.va.gov/
www.battlecreek.va.gov/
www.detroit.va.gov/
www.saginaw.va.gov/

Ohio

www.chillicothe.va.gov/
www.cincinnati.va.gov/
www.cleveland.va.gov/
www.columbus.va.gov/
www.dayton.va.gov/

Map Legend

- ○ △ VA Medical Centers
- ○ △ Affiliated CBOCs



Do you want to continue to receive *Veterans' Health* magazine by mail?*



In the future, copies of the magazine will only be mailed to households of Veterans who receive VA health care and who request a printed copy. If you want to receive *Veterans' Health* by mail:

- Complete this form with the Veteran's full name and current mailing address.
- Cut out the form and insert in a stamped envelope.
- Mail to the VISN 10 address below:

(Please print)

FRIST NAME _____ MIDDLE INITIAL _____ LAST NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

Mail to: Magazine

VISN 10-VA Healthcare System
 11500 Northlake Drive Suite 200
 Cincinnati, OH 45249

*You MUST complete and return this request form to continue to receive issues of *Veterans' Health* magazine by mail.

Your gastrointestinal (GI) system

Your gastrointestinal (or GI) system is the part of your body that digests (breaks up) food. The GI system is also called the “digestive” system or “gut.”

Digestion is important for changing the foods you eat and drink into pieces that your body can use. These pieces include nutrients that are important for energy, growth and cell repair. The main nutrients are carbohydrates, protein, fats and vitamins. Food particles that the body doesn't need are excreted as stool.

The GI system includes:

- All the hollow passageways that your food goes through (mouth, esophagus, stomach and intestines).
- The organs that make fluids to digest food (liver, pancreas and gallbladder).

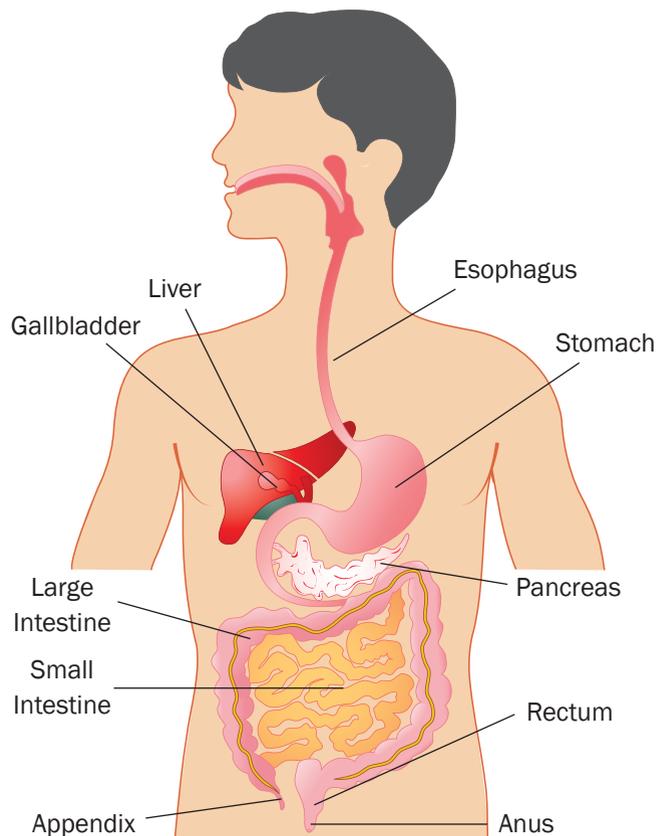
The GI system is affected by:

- The bacteria in your gut, which help break up the food and liquids you eat.
- Nerves, which determine how fast the food moves and what fluids are added to it.
- The blood system, which carries nutrients from the gut to your body's cells.
- Hormones that control your appetite.

How digestion works

Digestion works by moving food through the GI system and adding fluids to help break apart the pieces.

- In the mouth, you break up food into pieces by chewing it. Your saliva moistens the food and contains enzymes that help break it down.
- The esophagus (throat) is a muscular tube that carries food and liquids to the stomach. A one-way valve at the bottom of your esophagus keeps food and stomach acid from coming back up into your throat.
- In the stomach, digestive juices (“stomach acids”) are added to break down proteins. Strong muscles move the food from your stomach into the small intestine.



• The muscles of the small intestine mix your food with digestive juices from the liver, gallbladder and pancreas. As the food is pushed along the small intestine, nutrients, including fats, proteins and carbohydrates, are absorbed into the blood stream. Bacteria in the small intestine produce some of the digestive juices needed to digest carbohydrates. The small intestine also absorbs some of the water your body needs.

• Food that has not been digested passes into the large intestine. The large intestine absorbs any remaining water and nutrients. It is here that the liquid food is turned into a more solid form. The rectum stores the solid stool until it pushes the stool out of the anus during a bowel movement.

The speed of digestion is controlled by your nerves and hormones. Hormones that control appetite are released into your blood when your stomach is full.

Viruses, irritating foods, exercise and stress can speed up the process. Pain medicines, nervous conditions and some foods can slow down your digestion. **VH**

Take action for your health

Colorectal cancer screening

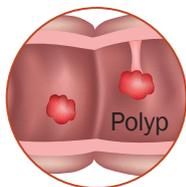


If you're age 50 or older, getting a colorectal cancer screening test could save your life. Colorectal cancer usually starts when polyps (tumors) form in the lining of your large intestine. Polyps are common in both men and women. Over time, some polyps can turn into cancer. Screening tests can find polyps early so they can be removed before they become cancer.

In addition to age, other risk factors for colorectal cancer include:

- Smoking.
- Eating a high-fat diet.
- Having a family history of colorectal cancer or precancerous polyps.
- Having a personal history of colorectal polyps or chronic inflammatory bowel disease (like ulcerative colitis or Crohn's disease).

People with polyps or colorectal cancer don't always have symptoms, especially at first. Or you could have symptoms like blood in your stool, stomachaches and weight loss. If you have any of these symptoms, talk with your health care team. These same symptoms may signal something other than cancer.



Types of screenings

Screenings of the large intestine can help detect polyps, inflammation, ulcers, as well as colon cancer and other types of cancer, before they develop or spread.

Everyone should have a colon cancer screening test starting at age 50. Some health care providers say that African-Americans should begin screening at age 45. And some health care providers think that you can stop being screened



at age 75. Talk with your health care team about what is right for you.

People with an average risk for colon cancer should have **ONE** of these tests, beginning at age 50:

- A test for blood in the stool (using a stool sample) once a year.
- A flexible sigmoidoscopy (looking at your lower colon) every five years.
- A colonoscopy (looking at your entire colon) every 10 years.

Screening for people at higher risk for colon cancer is more likely to be done using colonoscopy. Some new tests are being studied. Ask your health care team what is recommended for you.

Among cancers that affect both men and women, colorectal cancer is the second leading cancer killer in the United States. If everyone age 50 and older had regular screening tests, at least 60 percent of deaths from this cancer could be avoided. Here's what you can do:

1. Learn your family history.
2. If you are over age 50, ask your health care team about colorectal cancer screening.
3. If a colon cancer screening test is recommended, do it. It might not be the easiest or most pleasant test, but it could save your life. **VH**

Heartburn and GERD

Heartburn (acid indigestion)

Heartburn is the symptom you feel when stomach acid backs up into your esophagus.

Symptoms include:

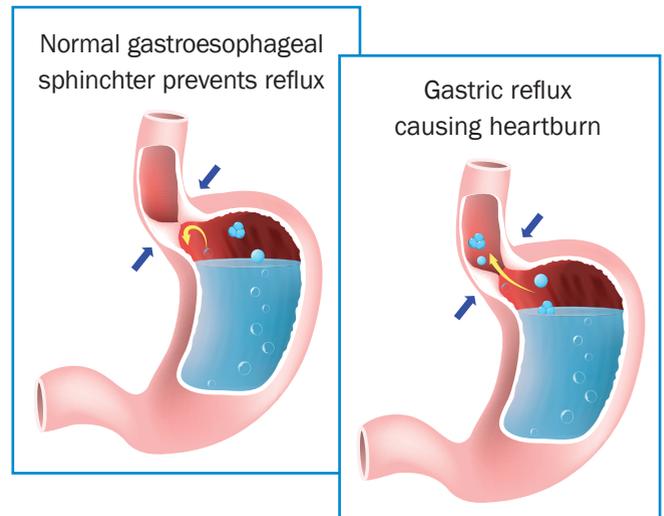
- A burning type of pain in the lower part of the mid-chest, behind your breastbone.
- Food or fluids may come up into the back of your throat causing a sour taste.

Many people experience heartburn from time to time. You can usually manage symptoms by taking over-the-counter (OTC) medications and making the lifestyle changes listed below:

- Eat smaller meals and avoid late-night snacks.
- Wait two to three hours after eating before you lie down.
- Avoid certain foods, such as, citrus fruits and juices, chocolate, fatty or fried foods, peppermint, alcohol, carbonated drinks and caffeine.
- Do not smoke or chew tobacco.
- Sleep with the head of your bed elevated 6 to 8 inches.
- Speak with your doctor about taking OTC products to relieve symptoms, such as Tums, Maalox or Zantac.
- Do not wear tight clothing around your abdomen.
- Maintain a healthy weight. Losing just a few pounds can help.
- Do not take aspirin, ibuprofen or naproxen.

If your symptoms last more than two weeks even with home treatment, contact your health care team. Call sooner if you:

- Have severe symptoms or symptoms that do not improve with the use of OTC medications.
- Have a burning pain in your chest. Chest pain may also be a symptom of a heart attack. Seek immediate help if you have severe chest pain or pressure, especially when combined with other symptoms, such as pain in the arm or jaw and difficulty breathing.
- Have problems swallowing.
- Have persistent nausea or vomiting.



- Think a prescribed medication is causing symptoms.
- Are losing weight and you don't know why.

Gastroesophageal reflux disease (GERD)

GERD, or acid reflux, occurs when the valve between your esophagus and stomach does not close tightly. Stomach acid then backs up into the esophagus more often, causing severe and persistent symptoms. Symptoms may be worse after eating, bending over or lying down. GERD is diagnosed when heartburn symptoms become frequent and more severe. However, you can have GERD and not experience heartburn symptoms. Symptoms may include:

- Frequent heartburn, burping or belching.
- Sour-tasting fluid backing up into your mouth.
- Difficulty or pain when swallowing.
- Hoarseness; a dry, chronic cough; frequent coughing to clear your throat.
- Nausea or vomiting.

If you have GERD, you may need to take a prescribed medication daily to control symptoms. In addition, make the lifestyle changes listed for Heartburn (acid indigestion).

It is important to treat and control GERD because it can lead to more serious conditions, including cancer. **VH**

Diarrhea and Constipation

Diarrhea and constipation are conditions that affect everyone from time to time. It is important to understand what causes these illnesses, how you can handle symptoms at home and when you should contact your health care team.

Diarrhea is loose, watery bowel movements (stools). It happens because food moves through the large intestine so fast that the body doesn't have time to reabsorb fluids. Most of the time it's not serious.

Causes:

Often, diarrhea is caused by a virus that infects the gastrointestinal (GI) tract. A lot of people refer to this as having an "intestinal flu." Other common causes of diarrhea include:

- Alcohol abuse.
- Allergies to certain foods.
- Drinking untreated water.
- Eating foods that upset the GI system.
- Food additives, such as sorbitol (e.g., in sugar-free candy and gum) and olestra (a fat substitute).
- Infection caused by bacteria (food poisoning).
- Irritable bowel syndrome.
- Medications.
- Stress and anxiety.

Home management:

- Stop eating food for several hours.
- Stay hydrated. Drink small, frequent sips of water or another clear liquid or sports drink.
- Consider taking an over-the-counter medication, such as Imodium or Kaopectate; do not take more than directed on the label.
- For 48 hours, avoid spicy foods, alcohol, caffeine and foods high in fat.

When to call your doctor:

- Blood in your stool or black, tarry stools.
- A fever higher than 101F that lasts for more than 24 hours.
- Diarrhea lasting longer than three days.
- Nausea and vomiting that prevents you from drinking fluids.
- Severe pain in your abdomen or rectum.

Constipation means your bowel movements are less often than what is normal for you. Some people have bowel movements a few times a day, and others a few times a week. Going longer than three days is too long. After three days, the stool becomes harder and is more difficult to pass. **VH**

Causes:

- Changes in your diet.
- Not enough liquids or fiber in your diet.
- Not being active enough.
- Colon cancer.
- Eating a lot of dairy products.
- Irritable bowel syndrome.
- Neurological conditions, such as multiple sclerosis or Parkinson's disease.
- Overuse of laxatives.
- Some medications (pain medicine, antidepressants).

Home management:

- Drink more fluids and water—at least 8 glasses a day (unless you have been told to limit your fluid intake).
- Eat more fiber, such as bran cereal.
- Try a fiber supplement.
- Add fruits and veggies to your diet.
- Avoid foods that are high in fat or sugar.
- Get some more exercise; strive for at least 30 minutes a day.

When to call your doctor:

- Blood in your stool.
- Constipation is a new problem for you.
- You are losing weight even though you are not trying to.
- Severe pain with bowel movements.
- Constipation lasting more than two weeks.
- Pencil-thin stools.



Diseases of the digestive tract

Gallstones

The gallbladder is a pear-shaped organ located under your liver. It stores bile—a fluid produced by your liver—that helps digest fat. The bile goes from the gallbladder through the bile duct and into the small intestine.

Gallstones form when substances in the bile harden. In the United States, gallstones are fairly common. The most common ones are made of cholesterol. They can range in size from as small as a grain of sand to as large as a golf ball. Some people develop just one gallstone, while others have many.

Gallstones may cause no signs or symptoms.

If a gallstone lodges in a duct and causes a blockage, symptoms may include:

- Sudden, severe pain in the upper right or upper middle portion of your abdomen.
- Pain that spreads to your upper back, shoulder blade or right shoulder.
- Pain that lasts from several minutes to a few hours.
- Sweating, nausea and vomiting. **VH**



Symptoms

Gallstone symptoms often occur at night, most often at about the same time every night. Pain may or may not be related to meals.

Your risk for having gallstones increases if you:

- Are female.
- Are age 60 or older.
- Are American Indian or Mexican-American.
- Are overweight or obese.
- Are pregnant.
- Eat a high-fat diet.
- Eat a high-cholesterol diet.
- Eat a low-fiber diet.
- Have a family history of gallstones.
- Have diabetes.
- Lose weight quickly.
- Take certain cholesterol-lowering medications.
- Take hormone replacement drugs that contain estrogen.

You can reduce your risk of gallstones if you:

- Lose weight slowly. Aim to lose 1 or 2 pounds a week. Reduce the number of calories you eat and increase your physical activity.
- Maintain a healthy weight.
- Try not to skip meals.



Treatment

Most of the time, gallstones that don't cause signs or symptoms don't require treatment. When symptoms are present, treatment options include:

- **Surgery to remove the gallbladder.** Fortunately, you don't need your gallbladder to live. Bile is made in the liver and stored in the gallbladder. After surgery, bile will go directly from your liver to your intestines to help digest the food you eat.
- **Medications to dissolve gallstones.** Treatment can take months or years, and sometimes the medications don't work. Medication is only used for people who can't undergo surgery.

Hepatitis C: Who should get tested?

You don't do drugs. You've never gotten a tattoo or body piercing. So, why do you need to be concerned about hepatitis C?

Hepatitis C is a serious illness. Hepatitis means inflammation of the liver. When your liver is inflamed, it doesn't work as well. Hepatitis C is caused by a virus that is spread through contact with infected blood. Sharing a needle during drug use is the most common way of getting it. Other ways of spreading the virus include blood transfusions, tattoo procedures, and reused medical devices, razors and hair-cutting shears. One in 50 Americans have hepatitis C. Veterans have a higher risk of the infection compared to non-Veterans, probably because of higher exposure to blood during their service. It is the most common blood infection in the United States.

Who is at risk?

Did you know that you are at high risk for hepatitis C if you were born between 1945 and 1965? People born in this time period are five times more likely to have the disease. In fact, 75 percent of the people who have hepatitis C were born during this time period. The Centers for Disease Control and Prevention recommends that all people born between 1945 and 1965 have a simple blood test to check for this virus.

When first infected with the virus, people have "acute" hepatitis C. Some people get seriously ill and others just feel tired for a while. About 20 percent of people with acute hepatitis C can fight the virus on their own, without treatment, in the first six months. Most people, however, are not able to clear the virus on their own and develop a lifelong infection known as "chronic" hepatitis C. Over 10 to 40 years, chronic hepatitis C may lead to liver disease, cirrhosis (scarring of the liver) and liver cancer.

People who have chronic hepatitis C might not have any symptoms at all. If you don't know that you have the infection, you could give it to someone without meaning to. Some possible symptoms are:

- Feeling tired.
- Not feeling like eating.
- Upset stomach.
- Joint pain.
- Fever.
- Throwing up.
- Dark colored urine.
- Stool that is gray in color.
- Yellow skin and eyes.

Talk to your provider and get tested if you:

- Want to be tested.
- Were born between 1945 and 1965.
- Are a Vietnam-era Veteran.
- Received a blood transfusion or organ transplant before 1992.
- Are a health care worker who has been exposed to blood.
- Have been on kidney dialysis for a long time.
- Had a sex partner who had hepatitis C.
- Have ever used a needle to inject drugs, even if it was just one time many years ago.
- Got a tattoo or acupuncture with needles that were not disinfected properly or in a facility that was not licensed.
- Received an organ transplant from a donor with hepatitis C.
- Were born to a mother who had hepatitis C at the time of your birth.
- Shared personal items like razors or toothbrushes with someone.

What if I have hepatitis C?

A positive hepatitis C screening test only means that you were exposed to the virus in the



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past. You will need additional testing to determine whether you still have the disease. Being diagnosed with hepatitis C can be frightening, but there are new and effective treatments that can cure the virus in many people. Treatment depends on different factors, so be sure to work with your health care treatment team.

Prevent hepatitis C

If your blood tests are negative for hepatitis C that is good news! Practice habits that will reduce your risk of future infection.

- Do not share personal items, such as razors, nail clippers, toothbrushes or glucose monitors. These may have come in contact with an infected person's

blood. Even if you cannot see the blood, it may still be there.

- Only get tattoos or body piercings from a licensed facility.
- Never share or reuse needles, syringes or any other equipment that was used to prepare or inject drugs, steroids, hormones or other substances. **VH**

Want more information? Check out these sources:

- www.hepatitis.va.gov/
- www.cdc.gov/hepatitis/hcv/index.htm
- www.veteranshealthlibrary.org/

What did they say?

Read VA notes from your clinic visits online

Our clinic visits go by so fast. It's hard to remember what was said and what we're supposed to do. We can forget up to 80 percent of what we hear. That's why it helps to take notes.

VA now has another way you can jog your memory. Your VA health care team writes progress notes about each clinic appointment and hospital stay. You can read those notes online through MyHealthVet. They are available three days after your visit.

Veterans who read their clinical notes:

- Are more likely to know and remember their care plan.
- Understand their conditions better.
- Do a better job of taking medications as prescribed.
- Are better prepared for the next clinic visit.
- Feel more in control of their health care.

VA notes are available online through VA Blue Button (see box). **VH**



Blue Button requires an upgraded MyHealthVet account, which you can get through:

- In-person authentication at a local VA medical center or clinic.
- Online authentication with an eBenefits DS Logon Premium account. Find instructions under Upgrading to a Premium Account, on the MyHealthVet Home page at www.myhealth.va.gov.

Register for a My HealthVet account at www.myhealth.va.gov. Get help with registration by calling the Help Desk. The My HealthVet Help Desk toll-free telephone number is **1-877-327-0022**. Call Monday through Friday, 8 a.m.–8 p.m. (EST).



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