

Health and Medicine

Symptoms of common heart conditions



Cardiovascular diseases (CVDs) are the leading cause of death around the world, indicates the Centers for Disease Control and Prevention. Globally, CVDs were responsible for around 19 million deaths in 2022. In the United States, heart disease affects around 128 million adults. Learning to recognize symptoms of potential heart conditions can ensure people know when to take action that may prevent further problems down the road.

Heart conditions can present in many ways, and symptoms of various conditions can overlap. This general guide, based on data from the Mayo Clinic and the Cleveland Clinic, serves as a warning and not a diagnosis. Those with any sudden, severe or "not right" symptoms are urged

to seek immediate medical attention.

• Coronary artery disease: CAD can result in chest pain (angina), often with exertion. Shortness of breath, fatigue, and pain that may radiate to the arm, jaw, neck, or back are possible.

• Myocardial infarction (heart attack): A heart attack can produce different symptoms in men and women, so it's best to treat any out-of-the-ordinary signs with caution. Intense chest pressure or squeezing; pain spreading to arms, jaw, back, or stomach; shortness of breath; nausea; cold sweats, lightheadedness; fatigue; or back pain merit medical attention.

• Heart failure: Those experiencing heart failure may have persistent shortness of breath; swelling in

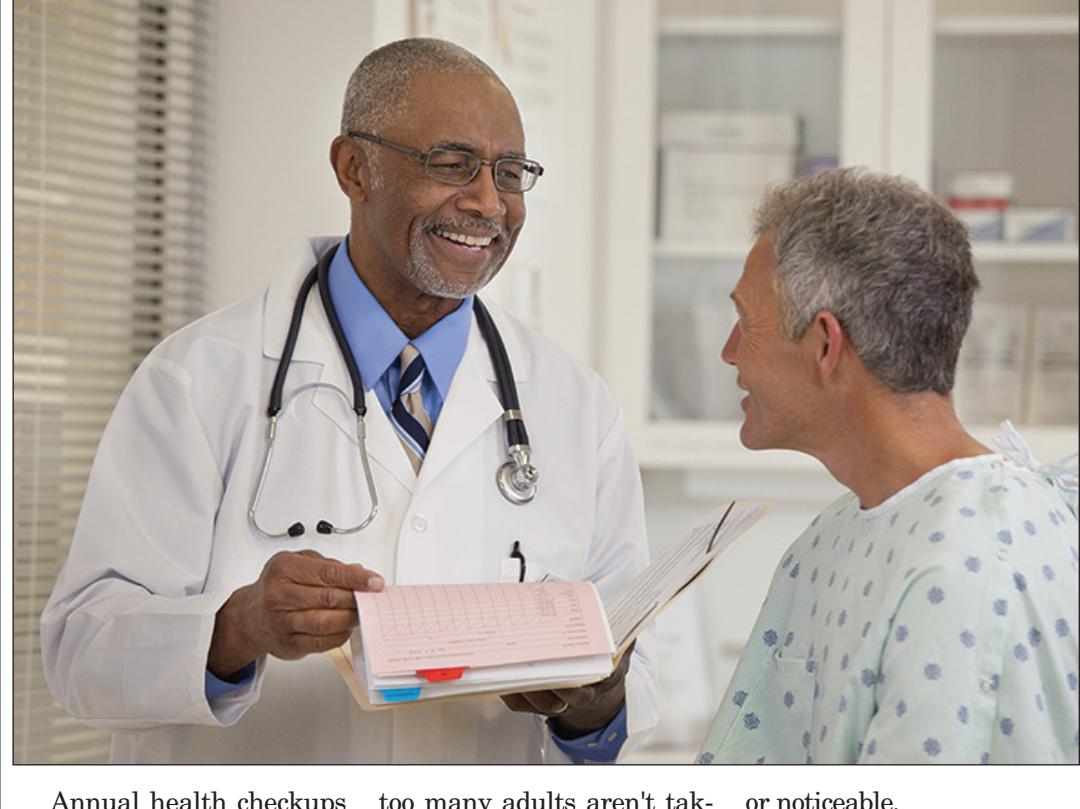
legs, feet or abdomen; rapid weight gain from fluid retention; fatigue; and difficulty lying flat due to breathing trouble.

• Arrhythmia (irregular heartbeat): Irregular heartbeat can lead to palpitations or fluttering of the heart; dizziness or fainting; shortness of breath; chest discomfort; and fatigue.

• Atrial fibrillation (AFib): AFib is an irregular and often rapid heart rhythm that starts in the heart's upper chambers. It can cause fast heartbeat; fatigue; shortness of breath; dizziness; and chest discomfort.

Heart conditions can lead to a variety of symptoms, many of which will overlap. For a thorough diagnosis, it is best to first see a primary care physician, who may then refer patients to a cardiologist.

Annual health checkups can be vital to cancer prevention



Annual health checkups are so vital that many insurance providers offer once-yearly wellness visits free of charge to policy holders. It's important for people to get annual physicals even if they feel fit and healthy, as these yearly visits can help uncover issues that may not be producing symptoms. Annual wellness visits also afford adults an opportunity to discuss their lifestyle with their physicians, which can identify areas where changes might be necessary with a goal toward improving long-term health.

Yearly health checkups also provide an opportunity to learn about key screenings, especially those that may detect for cancer. But industry surveys indicate far

too many adults aren't taking this vital step. A 2024 survey from the Prevent Cancer Foundation found that 39 percent of surveyed adults had not had a routine medical appointment in the previous 12 months. That's a troubling finding and one that could be more costly than adults realize, as the PCF reports that as many as 50 percent of cancer cases and half of all cancer deaths are preventable. Screening for cancer, a process that often begins with discussions during annual wellness checkups, is a life-saving and typically non-intrusive way to detect the disease at its earliest, most treatable stage, a point in most cancer instances when symptoms are not necessarily present

or noticeable.

Annual checkups also offer patients an opportunity to discuss lifestyle changes that can decrease their cancer risk. Some adults may not recognize that their existing lifestyle is increasing their cancer risk. For example, the American Cancer Society notes that a sedentary lifestyle, a diet lacking in sufficient nutrition and excessive alcohol consumption all can increase a person's cancer risk. Annual wellness visits provide an excellent opportunity for adults to discuss their lifestyle with their physicians, who may recommend some potentially life-saving tweaks that can greatly reduce a person's risk for cancer.

A childhood dental timeline



Dental visits typically are bi-annual events to maintain oral health. The Centers for Disease Control and Prevention recommend a dental visit for everyone at least once a year, but some people may need to go to the dentist more frequently.

Dentists do more than offer a polishing and pat on the back each visit. Brushing and flossing can remove a lot of bacterial film and plaque on teeth, but not all of it.

Dental visits help remove it more thoroughly. Dental visits also give dentists a chance to spot signs of dental and oral health problems, offers Penn Dental Medicine. Dentists look for signs indicative of oral cancer and other cancers.

Dentists also offer guidance about generalized oral care.

The importance of visiting the dentist cannot be overstated. And dental checkups are something that both children and adults should participate in regularly. Parents may wonder when they should begin

to focus on oral hygiene for their children. This timeline can help guide the process.

Before teeth erupt

Children are not born with teeth, but keeping their mouths clean is still important. From birth to the arrival of the first tooth, experts recommend gently wiping your baby's gums, tongue and inner cheeks with a damp washcloth or gauze after feeding to remove bacteria and prevent plaque formation. This helps a baby grow accustomed to the sensation of oral care.

The first tooth arrives

The Better Health Channel says the first tooth usually appears around six months of age. When this occurs, you should brush the tooth with a soft children's toothbrush and water twice a day. Speak with a pediatrician before using fluoride toothpaste at this time, as there are conflicting recommendations. As more teeth erupt, use a pea-sized

amount of fluoride toothpaste and help toddlers and preschoolers learn to brush their own teeth. The American Dental Association says parents should supervise the brushing process until children are around age seven or eight, when they'll have the dexterity and skill to handle the task alone.

Visiting the dentist

Stanford Children's Health advises parents to bring their child to the dentist for a first dental visit by 12 months of age, or within six months of the first tooth erupting. During this visit, the dentist will advise about baby bottle tooth decay, infant feeding practices, teething, pacifier use, and finger-sucking habits. Children typically are advised to see a dentist every six months, just like adults.

It is essential that parents emphasize strong oral health care skills so kids grow accustomed to visiting the dentist at an early age. This can set children up for a lifetime of oral health.

Adolescence can simultaneously be an exciting and challenging time for children. The World Health Organization defines adolescence as a transitional period children experience between the ages of 10 and 19. The physical changes and challenges of adolescence are widely recognized, but mental health also can be challenged during this pivotal period in a young person's life.

It's easy to mistake signs of mental health issues among adolescents as normal struggles that tend to affect all children at this point in their lives. However, the WHO reports that one in seven adolescents across the globe experiences a mental disorder, which is why it's so important that parents do not quickly dismiss signs of struggle as a normal part of adolescent life. Recognition of signs suggesting adolescents are struggling with mental health issues can increase the chances kids get the help they need.

Behavioral disorders

The WHO reports that behavioral disorders, which include attention deficit hyperactivity disorder

(ADHD) and conduct disorder, are more common among younger adolescents than kids nearing the end of this period in their lives.

Kids who have difficulty paying attention, are excessively active and act without regard to consequences might be dealing with a behavioral disorder. Conduct disorder may compel children to exhibit destructive or challenging behaviors that compromise a child's ability to fulfill their academic potential. Conduct disorder also can increase a child's risk of engaging in criminal behavior.

Eating disorders

The WHO notes girls are more commonly affected by eating disorders than boys. These conditions, which include anorexia nervosa and bulimia nervosa, tend to emerge during adolescence and are marked by abnormal eating patterns. Adolescents may exhibit an abnormal preoccupation with food and be particularly concerned about their body weight and the shape of their bodies. The WHO reports eating disorders often co-exist alongside other mental health disorders,

including anxiety, depression, substance abuse, and even suicide.

Psychosis

Conditions marked by symptoms of psychosis, which can include hallucinations or delusions, tend to emerge in late adolescence or early adulthood. Participation in activities typical of daily life, such as school, are impaired by conditions indicative of psychosis.

Risk-taking behaviors

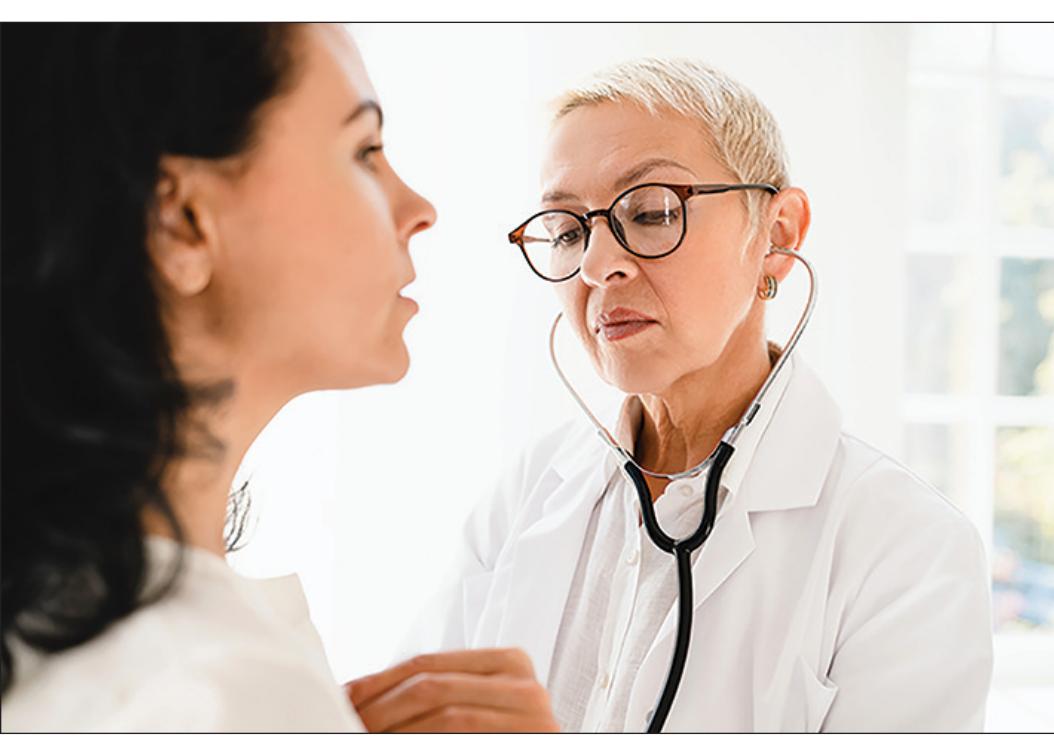
Some adolescents struggling with mental health turn to risk-taking behaviors in an effort to cope with their emotional challenges. The WHO reports that young people are especially vulnerable to substance abuse when confronting mental health challenges during adolescence. Some adolescents also look to risky sexual behavior as a means to coping with mental health issues during adolescence.

Various mental health issues can arise during adolescence. Parents are urged to be vigilant and observe children's behavior during this pivotal period in young

Signs adolescents might be struggling with mental health



Risk factors for heart disease



The World Health Organization reports that ischaemic heart disease, also known as coronary artery disease, is the leading cause of death across the globe. Ischaemic heart disease accounts for 13 percent of the world's deaths, affecting people from all walks of life and every corner of the globe. The WHO also notes that deaths attributed to ischaemic heart disease rose by 2.7 million between 2000 and 2021, the largest uptick in deaths of any disease in the world during that time.

Data from the WHO underscores the threat posed by ischaemic heart disease. But humanity is not helpless against the disease. In fact, many risk factors are within a personal's control, suggesting that a concerted effort to educate the public about the risk factors, and how to avoid them, could have a profound and life-saving impact. The National Heart, Lung, and Blood Institute reports that almost half of all adults in the United States have at least one of three key risk

factors for ischaemic heart disease, and the Heart and Stroke Foundation of Canada indicates nine in 10 Canadians have at least one risk factor for heart conditions, stroke or vascular cognitive impairment.

One of the more significant hurdles to beating heart disease is raising awareness of its risk factors among the billions of people across the globe who have at least one of those factors, even if they don't know it. According to the NHLBI, the following are some notable risk factors for heart disease.

· Age: Heart disease risk increases with age, but anyone can develop it. For men, risk increases significantly around age 45, while women's risk increases more rapidly around age 55.

· Environmental/work conditions: Indoor or outdoor air pollution increases risk for heart disease. The NHLBI notes that air pollution may cause or worsen conditions like high blood pressure or inflammation, which are known risk factors for heart disease. Long and/or irregular working

hours (55 hours or more per week); exposure to toxins, radiation, secondhand smoke, or other hazards; work-related stress; and sedentary positions throughout a workday are some work conditions associated with an elevated risk for heart disease.

· Family history/genetics: A father or brother diagnosed with heart disease prior to age 55, or a mother or sister diagnosed before age 65, is a risk factor for heart disease. The NHLBI also notes research has found that some genes are linked to a higher risk of heart disease.

· Lifestyle habits: Unhealthy lifestyle habits that increase heart disease risk include a sedentary lifestyle, excessive alcohol consumption, insufficient sleep over a prolonged period of time, smoking, and poor diet.

These are some heart disease risks that people should be aware of as they seek to improve their overall health. More information about ischaemic heart disease can be found at nhlbi.nih.gov.

The outlook after an MS diagnosis



Multiple sclerosis (MS) is a chronic disease of the central nervous system. MS disrupts the flow of information between the brain and the body, which can cause various symptoms that adversely affect daily life. According to the National Multiple Sclerosis Society, nearly one million people are living with MS in the United States. Globally, that number is estimated to exceed 2.8 million.

If MS is a concern for you or your family, the following information can shed greater light on the illness.

What occurs with MS?

The NMSS says when a person has MS, the immune system mistakenly attacks myelin, which is the protective sheath that covers nerve fibers. This damage starts out as communication problems in the central nervous system, but can progress to permanent damage or deterioration of the nerves themselves. Current statistics show that MS is at least three times more common in women than men, suggesting that hormones or a genetic factor may come into play.

Additionally, the disease is prevalent in regions farther from the equator, leading researchers to believe

there is a link between vitamin D deficiency and developing the condition. In 2015, scientists demonstrated a clear link between low vitamin D and MS. They found that people who naturally had lower levels of vitamin D were more likely to develop MS. Researchers in Oxford also have discovered that vitamin D could affect the way a gene linked to MS behaves.

However, there currently is no evidence that high vitamin D levels reduce the risk of developing MS, although the Mayo Clinic reports studies have shown that taking 400 IU or more of vitamin D a day lowers the risk of MS in women.

Types of MS

MS can manifest in different forms. The most common is Relapsing-Remitting MS (RRMS). This is characterized by defined attacks of new or increasing neurologic symptoms followed by periods of partial or complete recovery. Many RRMS cases may eventually transition to Secondary Progressive MS (SPMS), which Cedars-Sinai notes is marked by a gradual, steady worsening of neurological and physical disability. A smaller percentage of people are diagnosed with Primary Progressive MS

(PPMS), where symptoms worsen steadily from the start without early relapses or remissions, says the Cleveland Clinic.

Symptoms of MS

Symptoms of MS can vary widely depending on where the nerve damage occurs, but typically include:

- Fatigue
- Difficulty walking or loss of balance
- Blurred vision or pain in eye movement (optic neuritis)

· Cognitive changes

Look ahead

Doctors generally use MRI, blood tests, optical imaging of the nerves in the eye, and potentially a lumbar puncture to diagnose MS. Currently there is no cure for MS. Treatment tends to focus on disease-modifying therapies that can slow the progression of worsening symptoms. Physical therapy and medications to regulate additional symptoms also may be prescribed.

One can expect a normal life expectancy with MS, as only in very rare cases is MS fatal, advises the Cleveland Clinic. A care team will help a person through the MS journey to prevent complications and improve quality of life.

What health care professionals say about kids and devices



The ubiquity of devices in twenty-first century life is hard to miss. Whether it's smartphones, tablets or laptops, devices are seemingly everywhere in modern life. That's even true with young children, who have a tendency to bring tablets along during car trips or nights out at a restaurant.

Parents walk a tightrope regarding screen time and children. Though media use is often, and understandably, discussed in terms of its potentially harmful impact on young minds, the issue is not exactly as one-sided as it may seem. For example, kids are naturally curious, and parents may not always have the answers to youngsters' questions. In such instances, devices can fill the gaps by encouraging kids to explore topics that interest them and find answers. Device usage also can teach kids digital literacy, which can help to prepare them for life in an increasingly digital world and also provide a way for children to employ lessons about internet safety emphasized by parents and educators.

The danger of devices in regard to young minds largely concerns overuse. Parents uncertain about how to help kids reap the rewards of media use without overdoing it can consider these recommendations

courtesy of the American Academy of Pediatrics.

· Greatly limit device usage and access with children under age two. The AAP notes that children two and younger learn best when they interact with other people, including parents, siblings, caregivers, and others. The AAP also notes that children two and younger do not easily understand what they see on a screen and how it relates to their world, which makes screens a less useful educational tool for such youngsters than parents may realize. If parents of children between the ages of 18 and 24 months want to introduce screens to their kids, the AAP advises watching only high-quality programming and watching along with them. Reteaching lessons when programs end also can help kids make the most of their limited screen time.

· Limit screen time to no more than one hour per day for kids between the ages of two and five. Children between ages two and five can utilize devices to build their vocabulary, and quality programming like "Sesame Street" can instill valuable social, language and reading skills. The AAP recommends co-viewing with youngsters in this age bracket as well, and be sure kids are watching interactive, nonviolent, educational, and pro-social

media.

· Don't allow devices to become older children's go-to activity. Many schools now supply devices to children from kindergarten on.

While that's a testament to the educational utility of devices, it also can complicate parents' efforts to minimize screen time, particularly if kids take tablets or laptops home from school each day. The AAP urges parents to make sure children five and older are not missing out on sleep, family time and exercise due to their device usage.

The AAP also recommends that parents monitor kids' media usage to ensure they're safe and watching appropriate content.

· Discuss media usage with teens and tweens. Teens and tweens typically consume media without oversight. But the AAP emphasizes the importance of engaging teens and tweens in a dialogue regarding media use, digital citizenship and online content, whether it's read or viewed. It's also important that parents keep track of who teens and tweens are communicating with while on their devices.

It's not easy for parents to navigate their children's device usage. But the right approach can ensure kids are safe and reaping the rewards of engaging with their world through their devices.

Lifestyle choices that could affect colorectal cancer outcomes

The World Health Organization reports that colorectal cancer is the third most common cancer worldwide, accounting for roughly 10 percent of all cancer cases each year. Colorectal cancer also is the second leading cause of cancer-related deaths across the globe. But colorectal cancer may not be as formidable a foe as those statistics suggest.

The American Institute for Cancer Research notes that lifestyle factors are among the main risk factors for colorectal cancer. Such factors are within individuals' control, and when individuals embrace healthy lifestyle choices, they might be able to improve outcomes in relation to a colorectal cancer diagnosis.

Physical activity

Routine physical activity has been linked to a wide range of healthy outcomes, including a reduced risk for chronic diseases and improved mental health. The AICR notes that people who are more physically active have better health outcomes after a colorectal cancer diagnosis than people who live a sedentary lifestyle. While there's no guarantee such outcomes

will improve by incorporating physical activity into a daily routine, the benefits of regular exercise are so profound that it can benefit anyone living a sedentary lifestyle to get up and move more frequently.

Diet

The AICR notes that people who eat more whole grains have better health outcomes after a colorectal cancer diagnosis. AICR research also indicates eating three servings of whole grains each day lowers a person's risk of colorectal cancer by 17 percent. The Mayo Clinic notes that whole grains include quinoa, brown rice, oatmeal, whole wheat flour, and popcorn. The AICR cautions that people who have been treated for colorectal cancer have reported difficulty consuming whole grains after treatment, including surgery. In such instances, a gradual reintroduction of whole grains under the supervision of a health professional can help people get back on track and reduce the need to consume refined grains.

Sugary drinks

Sugary drinks have been

associated with a number of negative health outcomes, including overweight and obesity, each of which are risk factors for type 2 diabetes. The AICR also indicates people who consume less sugary drinks have better health outcomes after being diagnosed with colorectal cancer. The AICR recommends people consider reducing their consumption of sugary drinks.

Colorectal cancer is a common and often deadly form of the disease. But the right lifestyle choices may make a colorectal cancer diagnosis easier to overcome.

Africa. That means MS is likely affecting more people than the existing data suggests. One area the MSIF notes is a cause for concern regards the number of children age 18 and under living with MS, which the organization indicates is higher than was previously believed.

Did you know?

The number of people across the globe with multiple sclerosis (MS) is on the rise. According to the MS International Federation, the number of people with MS increased from 2.3 million in 2013 to 2.9 million in 2023. MSIF data indicates that roughly 32 percent of global MS cases affect people in the United States, while around 3 percent of cases occur in Canada. The MSIF cites improvement in data collection as contributing to the higher estimates of people living with MS, but notes that there are still notable gaps in incidence rates, particularly in low income countries and