

From Lifespan to Healthspan

By Cara Rosenbloom, RD

Our lifespan is defined as the number of years we're alive. In the U.S., the average is about 77 years. But living for longer is not the only goal you should focus on. It's also vital to think about your healthspan as *the period of life spent in good health. That means we don't just live long; we live well.*

Of course, the term *health* is subjective, and many people live with chronic diseases but still feel well most days or ably manage their conditions. As science and medicine make it possible for people to live longer, interest has grown in **how to age well.** That means preserving your physical and mental health now to maximize your quality of life as you age.

Life expectancy has increased, but healthspan has not followed. It's largely impeded by chronic diseases that affect older adults. The World Health Organization has developed an indicator called the Healthy Life Expectancy (HALE). It measures the average incidence and age when diagnosed with the most common serious diseases (diabetes, heart disease, etc.) and places it at 63 years old, which means we may live up to 20% of our lives unhealthy, since lifespan often outruns healthspan.



What can you do to improve your healthspan?

Many lifestyle changes, such as eating better, more activity, less stress and more sleep, could delay the onset of chronic diseases and help expand lifespan. Social and intellectual activities are also important determinants of your healthspan.

Start by figuring out where you can make small improvements. For example, do you get at least 150 minutes of moderate-intensity physical activity each week, such as brisk walking? Do you eat vegetables daily? Do you choose water more often than sugary soda? Small changes can add up and help improve your healthspan.

“Imagination is the highest kite one can fly.” — Lauren Bacall

BEST bits

■ **Exercising more than current recommendations could lengthen your life, according to a recent Harvard study.** It showed that people who followed the minimum guidelines for physical activity — 150 to 300 minutes per week of moderate-intensity activity, or 75 to 150 minutes per week of vigorous-intensity activity — reduced their risk of early death by as much as 21%. Going a step further, people who exercised two to four times the minimum were able to lower their risk by as much as 31%.

■ **Now, by calling or texting 988, you will connect with mental health professionals at the 988 Suicide and Crisis Lifeline,** formerly known as the National Suicide Prevention Lifeline. The new, shorter phone number makes it easier for those in crisis to get help fast 24/7. Too many people experience suicidal crisis or mental health-related distress without the support and care they need. You can also chat at 988lifeline.org. **Note:** The previous **1-800-273-TALK (8255)** number will continue to work indefinitely. Both numbers are free and confidential. When you call, you will be transferred to your local Lifeline network center.

■ **Vitamin D helps your body absorb calcium, a primary nutrient needed for bone health.** Together with calcium, vitamin D can help protect you from developing osteoporosis, a disease that thins and weakens bones, making them more likely to break. Your body also needs vitamin D for physically moving, and your nerves need it to carry messages between your brain and your body. Vitamin D can also help protect your immune system from bacteria and viruses. Adults ages 19 to 70 should get at least 15 micrograms (600 IU) of vitamin D daily. How about taking D supplements? Supplements are sometimes necessary, since many Americans have less than recommended vitamin D blood levels. Also, few foods naturally contain vitamin D. Talk to your health care provider about your vitamin D needs.

Speaking of Pain

Take your medicine with care

Whether for injury, muscle strain or headache, over-the-counter (OTC) and prescription pain relievers are widely used for treating our physical ailments. OTC options are available in stores. Prescription pain medicines, only available through your qualified health care provider, generally offer stronger relief for severe pain, such as from trauma or surgery. Opioids and some antidepressants and anti-seizure medicines also provide pain relief.

The best pain reliever for you depends on the cause of your pain and its severity. Acute pain often occurs suddenly and lasts fewer than three months. Chronic pain lasts for more than three months.

COMMON OTC PAIN MEDICATIONS

Acetaminophen: These dull the pain receptors in your brain so you feel less pain. It is the first line of treatment most health care providers recommend.

Nonsteroidal anti-inflammatory drugs (NSAIDs): They lower the production of prostaglandins, which are hormone-like chemicals that irritate nerve endings, causing inflammation and pain. NSAIDs include ibuprofen and naproxen sodium. **Note:** NSAIDs aren't safe for some people, so always talk to your health care provider before using them.

Combination: Some pain relievers contain both acetaminophen and aspirin (an NSAID).

Topical: This pain reliever is applied to your skin (available as a cream, gel, spray or patch), and is designed to block pain receptors in your brain.

Remember: Pain is often considered a normal part of healing. Your provider can help.



BY PRESCRIPTION ONLY

Muscle relaxers: These medications reduce pain by relaxing tight muscles and relieving muscle spasms.

Opioid pain relievers: These laboratory-prepared narcotic pain medicines require your provider's authorization for purchase. Opioids change how your brain perceives pain messages. Because they can be addictive, care providers rarely prescribe opioids for chronic pain. But you may use them for a short time after a surgery or traumatic injury. Codeine, fentanyl, hydrocodone and morphine are common opioids. **Other options:** Many non-addictive and effective pain medicines are available without a prescription as noted above.

Your best source for choosing pain relief starts with your primary care provider, who can work with you to find the right medicine and procedure to help you enjoy better, pain-free days.

How does your provider know what to prescribe for your pain? It starts with you as a patient. We all experience pain differently, and it's vital that you track your symptoms to learn what's needed. For example:

- *Keep a pain diary.* Think of it as a symptom log that tracks the frequency of when or where you have pain. Consider available apps to assist you.
- *Learn precise words to describe your pain.* Examples: dull, sharp, burning, intense and disabling. Cite when and where you feel it most or least.
- *Define how your pain limits your life.* For example, does it reduce your ability to concentrate, exercise or work?
- *Rate your pain on a scale of 0 to 10,* with 0 being no pain at all and 10 being your worst pain level.

Mind-Calming Exercises Defined

Even a few minutes of practice can lessen stress.



Perform tai chi or yoga. These old, popular routines combine rhythmic breathing with a series of postures and flowing movements. With practice, you may reach a mental focus that helps distract you from stressful thoughts and surroundings.

Try counting: a quick, easy way to ease anxiety. Find a quiet, comfortable place to sit, close your eyes and slowly count to 10. Repeat and count to 20 or an even higher number. Keep counting until you feel your anxiety subsiding. Stay calm and patient.

Combine repetitive prayer with exercise. For this technique, you silently repeat a short prayer while focusing on breathing, an appealing option if religion or spirituality is meaningful to you. Combining a physical exercise with prayer can be a powerful way to lower stress and feel more tranquil.

Anti-anxiety exercises may not work for everyone, particularly if you have been diagnosed with anxiety. Consider exploring more suitable options with your health care provider. Example: Mindfulness meditation involves sitting comfortably, focusing on your breathing, and keeping your mind on breathing, leaving concerns behind.

More stress relievers: Listen to music, read a funny book, help someone, hang out with a patient, friendly dog or cat, or simply take five minutes to recharge and reset.

Food as Medicine

By Cara Rosenbloom, RD



About 10% of Americans are extra-sensitive to the stimulant caffeine, the main ingredient in coffee.

But it's in many soft drinks and energy drinks, too. Due to genetic differences, you can be hypersensitive, a little sensitive or hardly sensitive at all to caffeine. Symptoms of caffeine sensitivity can include increased heart rate, frequent urination, anxiety and difficulty sleeping. If you need to reduce or eliminate caffeine, consciously drink less (or no) coffee, opt for decaf instead or switch to low- or no-caffeine teas.

Nutrition is often promoted as a way to prevent or treat different chronic diseases, and you may have heard the expression “food as medicine.”

In the right context, this term refers to prioritizing a balanced diet in an individual's health plan, with the goal of preventing disease, reducing symptoms or treating certain conditions. It's important to understand food as medicine in context. It is used as part of one's overall health plan but not to the exclusion of other therapeutic treatments.

Research supports using food to help prevent or treat conditions, such as heart disease, type 2 diabetes and some cancers. But diet and lifestyle interventions can only account for 40% to 80% of reducing the risk of, or the harm caused by, these conditions. That means beyond food, there are still other evidence-based interventions to consider.

The trouble comes when food is promoted as a sole cure or treatment for conditions, and people forego medication, surgery, doctor visits, medical tests, chemotherapy or radiation in favor of a food-only approach. The results can have negative consequences for overall health.

Your best approach is to follow a well-balanced diet that contains plenty of vegetables, fruit, whole grains and protein-rich foods. And it's equally important to take medications or supplements as prescribed, get necessary screening tests and follow your treatment plan. Think of healthy eating as part of other avenues of health care.



TIP of the MONTH

Make a Change

Kick off the New Year with some healthful nutrition swaps. Pick one change to start with; then add another once you become adjusted to the first. Here are some changes you can try:

- Swap sweet beverages for water.
- Replace refined grains with whole grains.
- Have beans instead of meat once a week.
- Add an extra serving of vegetables to your day.
- Try a fruit you've never had before.

Vegetable Bean Chili

- 1 tbsp extra-virgin olive oil
- 1 onion, diced
- 2 garlic cloves, minced
- 1 tsp chili powder, or more to taste
- 3 bell peppers, any color, seeded and diced
- 1 jalapeño pepper, seeded and diced
- 1 can (19 oz.) mixed beans or kidney beans
- ¼ cup tomato paste + 1 cup water
- 1 cup frozen corn kernels
- ½ tsp salt
- ½ cup freshly chopped cilantro or parsley
- 1 lime, quartered

Add olive oil to a stockpot placed over medium heat.

Add onion, garlic and chili powder, and cook 3 minutes.

Add bell peppers, jalapeño, beans, tomato paste, water, corn and salt. **Cook** about 10-15 minutes to soften peppers. **Serve** topped with cilantro and a squeeze of fresh lime.



Makes 4 servings. Per serving: 246 calories | 11g protein | 5g total fat | 1g saturated fat | 3g mono fat | 1g poly fat | 42g carbohydrate | 8g sugar | 12g fiber | 466mg sodium

Stay in Touch

Keep those questions and suggestions coming!

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EXPERT advice — Elizabeth Smoots, MD

Q: What is sleep debt?



A: Sleep debt refers to the amount of sleep that is deficient over a period of time. For example, getting only six hours of sleep when you need eight hours will result in a sleep debt of two hours for that day. The same pattern continued for seven days builds a sleep debt of 14 hours for the week. Continued sleep debt can lead to adverse health effects.

With continued sleep deficiency, your mental, emotional and physical functions usually begin to weaken. Energy flags and immunity decreases. Weight often increases and raises the risks for heart disease and diabetes.

To reverse these harmful trends, schedule extra time to sleep longer. Going to bed early is especially helpful. Be patient: It can take several nights of deep sleep to recover.

Prepare for Winter Flooding

Flooding is usually associated with spring, but it can be a risk in winter depending on where you live. With weather events, such as bomb cyclones in recent years, heavy snowstorms with rapid snow melt and torrential downpours, winter flooding can occur almost anywhere.



While you can't prevent flooding, here are nine ways you can protect your home and property:

1. Know the flood risks in your area. Learn more at msc.fema.gov/portal/home.
2. Maintain appropriate drainage around your home. Clear window wells and gutters. Make sure downspouts extend two to three feet from your home and grade slopes away from the foundation.
3. Install a sewer backup valve if you are on a city sewer system.
4. Install a sump pump with a backup battery in case the power goes out.
5. Inspect your basement walls for moisture. Caulk and seal interior walls to prevent water from coming through. Consider an exterior sealant, too.
6. Remove excess snow from your roof and around the perimeter of your home. **Best bet:** Clear snow at least one to two feet away from the foundation, window wells and downspouts.
7. Store your important documents in protective waterproof containers.
8. Find out if you need flood insurance. Floods aren't covered by regular home insurance. **Note:** Most flood insurance policies have a 30-day wait following initial purchase.
9. Finally, learn and follow evacuation orders to ensure the safety of you and your family. If you can do so safely, shut off water, the furnace and electricity before leaving.

Note: Due to production lead time, this issue may not reflect the current COVID-19 situation in some or all regions of the U.S. For the most up-to-date pandemic information visit coronavirus.gov.