



Questions to ask your healthcare provider in your 50s and 60s

BY ANGIE PISKORSKI, ΔE

My great-grandmother skied until she was 90 years old! This is not a punch line. This is a fact. Every year, she traveled to Aspen for a family ski trip. A man once informed her she could ski for free if she were over 70. Her response was, "I know. I have been skiing for free the last 20 years."

I used to say my Gee-Gee (as we called her) was the "Godmother" of our family. She was an icon. Growing up she told me to take care of my feet because they were going to carry me through life.

It is a funny little saying, but when you think about the truth behind this, it becomes very profound. Gee-Gee's feet carried her for 92 years. Longevity is a wonderful blessing to the women in my family line. This is not by chance, but good genetics and being proactive with our health.

Over the past several months, you have read about women's health in their 20s, 30s and 40s. Each article has expressed the importance of routine exams and screenings and prioritizing our personal health.

This, again, is emphasized for women in their 50s and 60s. Just as stated in previous articles, it is critical for women in their 50s and 60s to participate in yearly physical exams, regular self-breast exams, mammograms and PAP smears. See your healthcare professional about how often you should participate in these exams. This may vary from woman to woman based on your risk factors. In addition, women of all ages must identify the benefits of a good diet, exercise and healthy weight.

Despite the carryover of these issues, women in their 50s and 60s must also take the following into consideration: continued breast care, osteoporosis, glaucoma, heart disease and colorectal cancer.

CONTINUED BREAST CARE

Women of all ages must continue to practice self-breast exams and receive yearly breast exams from a healthcare professional. Most women begin yearly mammograms in their 40s. This is also the recommendation for women in their 50s and 60s and by now most women of this age are experts in the mammogram procedure.

Contact your healthcare provider to schedule an appointment if you are in your 50s and have never received a mammogram. You may also find additional information on mammograms at www.breastcancer.org.

OSTEOPOROSIS

Osteoporosis is a condition when bones lose calcium and the insides become porous. At this point, in our lives, our bodies lose bone mass faster than it can be replaced. This weakening in the bone increases the risk of fractures and breaks. Osteoporosis is referred to as the “silent disease” because there are no external symptoms of a decrease in bone mass. It is only detected by a break, a fracture, a back pain or through specialized testing. Most breaks or fractures are caused by normal daily activities and routines. Although it can affect any part of our skeletal structure, osteoporosis is most frequently associated in the spine and hip. Talk to your healthcare provider regarding your concerns, risk factors and testing.

GLAUCOMA

Glaucoma is a general reference to various eye diseases, which may cause blindness. According to glaucoma.org, “experts estimate half of the people affected by glaucoma may not know they have it.” If left untreated, glaucoma can result in blindness and vision loss. This is due to damage of the optic nerve, which transfers the images we see to our brains. There is no cure for glaucoma, but vision loss can be prevented with surgery or medication. The World Health Organization states, “Glaucoma is the second leading cause of blindness in the world.” Early detection is imperative to prevent blindness. Preventive measures

Helpful Web sites

Heart Disease

www.hearttruth.com
www.goredforwomen.org

Osteoporosis

www.revolutionhealth.com

Glaucoma

www.glaucoma.org

Arthritis

www.rheumatoidarthritisinfo.com
www.arthritis.org

Women’s Health Information

www.womenshealth.gov
www.womensguide.org

Action Steps for Staying Healthy

www.cdc.gov/women/owh/preventworks/action.htm

General Screenings and Immunizations Guidelines for Women

www.womenshealth.gov/screeningcharts/general/general.pdf

include yearly or bi-annually thorough eye exams.

CORONARY ARTERY DISEASE

Heart disease is the number one killer of women in the United States. However, an American Heart Association survey indicated 50 percent of women still consider cancer their biggest health risk. Heart attacks are caused by a buildup of plaque in our arteries. The plaque buildup prevents oxygen-rich blood from passing through our arteries to our heart, which causes a heart attack. After menopause, women become two to three times more likely to suffer from heart disease. High cholesterol, high blood pressure and obesity increase a women’s risk.

Women are encouraged to alter certain lifestyles to decrease their risk of heart disease. These changes include not smoking, regular exercise, healthy diet, mental health treatment if required and drinking in moderation. High blood pressure, diabetes, high cholesterol and a family history may increase your risk of heart disease.

Women are encouraged to take medications to control their blood pressure, cholesterol and diabetes. Women with risk of coronary artery disease are recommended to take a low-dose aspirin. Please speak with your health care professional regarding other proactive measures.

COLORECTAL CANCER

Colorectal cancer is the second leading cause of death by cancer. Women’s risk of developing colorectal cancer significantly increases with age. Contributing risk factors include unhealthy diet (i.e. low-fiber and minimal fruit and vegetable consumption), lack of exercise, smoking and alcohol use.

Doctors utilize three main tests to diagnose colon abnormalities: flexible sigmoidoscopy, colonoscopy and fecal occult blood count. Treatment for

colorectal cancer is most effective when found in the early stages. This is the greatest benefit to participating in these screenings. Women over 50 most commonly have a colonoscopy every five to 10 years.

GENERAL HEALTH

Women in their 50s and 60s must continue to recognize the importance of a healthy lifestyle. Research shows unhealthy lifestyles attribute to 40 percent of American deaths. Health-care providers constantly promote regular exercise, good nutrition, minimal alcohol use and no smoking. Adapting these changes to your life allows your body to function to its highest potential.

As we age, our bodies begin to give way to general wear and tear. Osteoporosis arthritis is common for most elder women. Arthritis is the acute or chronic inflammation of joints affects nearly 46 million Americans. Arthritis is most commonly associated with fingers, hips, knees and shoulders. Over 2 million Americans have been diagnosed with rheumatoid arthritis (RA). Rheumatoid arthritis is a systemic disease, which also causes inflammation in our joints lining. There is no identified cause of RA and there is no cure. Rheumatoid arthritis can be controlled and monitored with exercise, medication and individually specific personal plans.

As you age, please respect your body’s limitations. Practice healthy lifestyles by exercising and eating a well-balanced diet. Speak with your health-care professional about risk factors for any of the health concerns discussed. Ask questions about preventative measures and your health. Always schedule and attend a yearly physical exam. From here, your health-care professional can refer you for screenings as needed. May you “live life each day to its ultimate good” and enjoy your families, friends and cherish every memory!