



SMALL CHANGES FOR BETTER HEALTH

March is National Nutrition Month and National Colorectal Cancer Awareness Month! This issue of our newsletter has tips on those topics, plus stress relief for better sleep and the latest on telemedicine.

Marpai (Mar-pay), your employer health plan services provider, delivers SMART Health Insights every month to help you feel great and live well through better health. With tips for better physical and mental wellness, highlights of exciting new health technology products, and news from Marpai, it's designed to help improve your health journey.

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AMERICAN CANCER SOCIETY GUIDELINE FOR COLORECTAL CANCER SCREENING

Published by The American Cancer Society

<https://www.cancer.org/cancer/colon-rectal-cancer/detection-diagnosis-staging/acs-recommendations.html>

FOR PEOPLE AT AVERAGE RISK

The COVID-19 pandemic has resulted in many elective procedures being put on hold, and this has led to a substantial decline in cancer screening. Health care facilities are providing cancer screening during the pandemic with many safety precautions in place. Learn how you can talk to your doctor and what steps you can take to plan, schedule, and get your regular cancer screenings in **Cancer Screening During the COVID-19 Pandemic**.

The ACS recommends that people at average risk* of colorectal cancer **start regular screening at age 45**. This can be done either with a sensitive test that looks for signs of cancer in a person's stool (a stool-based test), or with an exam that looks at the colon and rectum (a visual exam). These options are listed below.

People who are in good health and with a life expectancy of more than 10 years should continue regular colorectal cancer screening through the **age of 75**.

For people **ages 76 through 85**, the decision to be screened should be based on a person's preferences, life expectancy, overall health, and prior screening history.

People **over 85** should no longer get colorectal cancer screening.

*For screening, people are considered to be at average risk if they **do not** have:

- A personal history of colorectal cancer or certain types of polyps
- A family history of colorectal cancer
- A personal history of inflammatory bowel disease (ulcerative colitis or Crohn's disease)
- A confirmed or suspected hereditary colorectal cancer syndrome, such as familial adenomatous polyposis (FAP) or Lynch syndrome (hereditary non-polyposis colon cancer or HNPCC)
- A personal history of getting radiation to the abdomen (belly) or pelvic area to treat a prior cancer

TEST OPTIONS FOR COLORECTAL CANCER SCREENING

Several test options are available for colorectal cancer screening:

Stool-based tests

- Highly sensitive fecal immunochemical test (FIT) every year
- Highly sensitive guaiac-based fecal occult blood test (gFOBT) every year
- Multi-targeted stool DNA test (mt-sDNA) every 3 years

Visual (structural) exams of the colon and rectum

- Colonoscopy every 10 years
- CT colonography (virtual colonoscopy) every 5 years
- Flexible sigmoidoscopy (FSIG) every 5 years

There are some differences between these tests to consider (see Colorectal Cancer Screening Tests), but **the most important thing is to get screened, no matter which test you choose**. Talk to your health care provider about which tests might be good options for you, and to your insurance provider about your coverage.

If a person chooses to be screened with a test other than colonoscopy, any abnormal test result should be followed up with a timely colonoscopy.



FOR PEOPLE AT INCREASED OR HIGH RISK

People at increased or high risk of colorectal cancer might need to start colorectal cancer screening before age 45, be screened more often, and/or get specific tests. This includes people with:

- A strong family history of colorectal cancer or certain types of polyps (see Colorectal Cancer Risk Factors)
- A personal history of colorectal cancer or certain types of polyps
- A personal history of inflammatory bowel disease (ulcerative colitis or Crohn's disease)
- A known family history of a hereditary colorectal cancer syndrome such as familial adenomatous polyposis (FAP) or Lynch syndrome (also known as hereditary non-polyposis colon cancer or HNPCC)
- A personal history of radiation to the abdomen (belly) or pelvic area to treat a prior cancer

The American Cancer Society does not have screening guidelines specifically for people at increased or high risk of colorectal cancer. However, some other professional medical organizations, such as the US Multi-Society Task Force on Colorectal Cancer (USMSTF), do put out such guidelines. These guidelines are complex and are best looked at along with your health care provider. In general, these guidelines put people into several groups (although the details depend on each person's specific risk factors).

PEOPLE AT INCREASED RISK FOR COLORECTAL CANCER

People with one or more family members who have had colon or rectal cancer

Screening recommendations for these people depend on who in the family had cancer and how old they were when it was diagnosed. Some people with a family history will be able to follow the recommendations for average risk adults, but others might need to get a colonoscopy (and not any other type of test) more often, and possibly starting before age 45.

People who have had certain types of polyps removed during a colonoscopy

Most of these people will need to get a colonoscopy again after 3 years, but some people might need to get one earlier (or later) than 3 years, depending on the type, size, and number of polyps.

People who have had colon or rectal cancer

Most of these people will need to start having colonoscopies regularly about one year after surgery to remove the cancer. Other procedures like MRI or proctoscopy with ultrasound might also be recommended for some people with rectal cancer, depending on the type of surgery they had.

People who have had radiation to the abdomen (belly) or pelvic area to treat a prior cancer

Most of these people will need to start having colorectal screening (colonoscopy or stool based testing) at an earlier age (depending on how old they were when they got the radiation). Screening often begins 5 years after the radiation was given or at age 30, whichever comes last. These people might also need to be screened more often than normal (such as at least every 3 to 5 years).

PEOPLE AT HIGH RISK FOR COLORECTAL CANCER

People with inflammatory bowel disease (Crohn's disease or ulcerative colitis)

These people generally need to get colonoscopies (not any other type of test) starting at least 8 years after they are diagnosed with inflammatory bowel disease. Follow-up colonoscopies should be done every 1 to 3 years, depending on the person's risk factors for colorectal cancer and the findings on the previous colonoscopy.

People known or suspected to have certain genetic syndromes

These people generally need to have colonoscopy (not any of the other tests). Screening is often recommended to begin at a young age, possibly as early as the teenage years for some syndromes – and needs to be done much more frequently. Specifics depend on which genetic syndrome you have, and other factors.

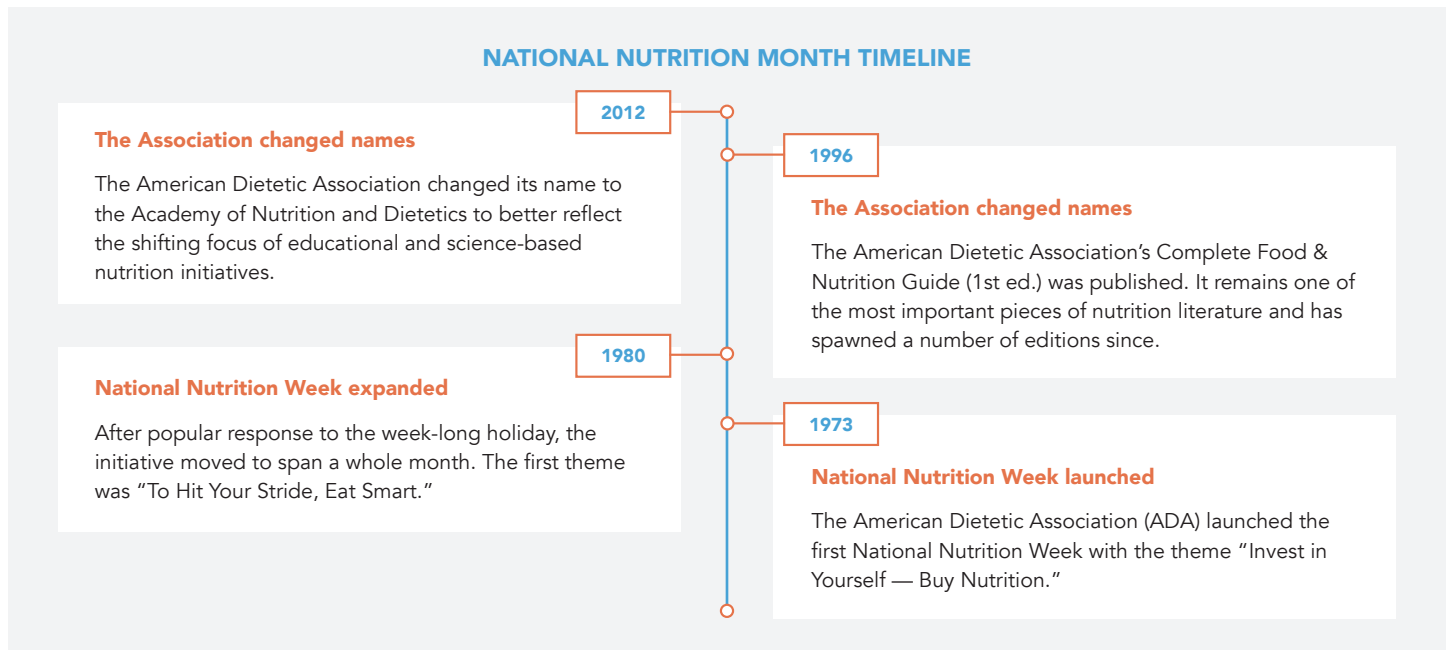
If you're at increased or high risk of colorectal cancer (or think you might be), talk to your health care provider to learn more. Your provider can suggest the best screening option for you, as well as determine what type of screening schedule you should follow, based on your individual risk.

NATIONAL NUTRITION MONTH - MARCH 2022

Published by National Today

<https://nationaltoday.com/national-nutrition-month/>

“Let thy food be thy medicine,” said Hippocrates (a long, long time ago), but the sentiment still rings true. National Nutrition Month, celebrated in March, stresses the importance of a balanced diet and exercise. The Academy of Nutrition and Dietetics promotes the transformative powers of healthy food choices. The Academy encourages using a registered dietitian in order to develop and stick with a healthy eating plan.



HOW TO OBSERVE NATIONAL NUTRITION MONTH

- 1. Move your body** Nutrition doesn't end at what we eat. The Academy of Nutrition and Dietetics encourages making exercise an integral part of our lives. Try a new activity like Zumba, swimming, or spinning to keep workouts fresh and exciting.
- 2. Find inspiration** Feeling stale in the kitchen? Pinterest provides an infinite loop of recipes and inspiration to kick-start any nutrition journey. Picking up a new cookbook or following a cool food blogger works too!
- 3. Meet with a dietitian** They'll provide you with a detailed meal plan that makes sense for your lifestyle and goals. Many, if not most, health insurance plans cover the cost of dietitian services and city health departments sometimes offer complimentary services or charge sliding-scale fees. Anyway, a healthier, happier outlook on life is priceless!

FIVE (REALISTIC) WAYS TO EAT HEALTHIER THIS MONTH

- 1. Go, go, H2O!** We all know drinking water helps in nearly every aspect of wellness, but drinking the recommended amount of water per day can be tough. Electrolyte additives offer the same, if not better benefits that drinking six or more glasses of water a day would.
- 2. Choose food over supplements** Though there are some who sincerely lack certain vitamins and minerals that can't be achieved through diet alone, most of the good things our bodies need come from food — not store-bought supplements. Research shows that certain supplements haven't been tested to meet many purity and safety standards, making them unreliable sources of nutrition.
- 3. Opt for color** When in doubt, throw some color on your plate — natural color, that is. Bright greens from crunchy vegetables or vibrant reds from tangy fruit will not only make your meal Instagram-worthy, they'll give you a healthy boost.

4. **Pack your lunch** Avoiding typical restaurant or fast-food grease may seem obvious, but according to Harvard Health Publishing, even more important than that is the ability to control portion sizes when you pack your own lunch. Try something fun like a DIY Bento box!

5. **Shop the perimeter** Shopping a supermarket's outside aisles ensures that you're getting healthy alternatives to processed foods like produce, meat, and dairy. When you move inward, most, if not all, of the products contain unnecessary additives and sugar.



WHY NATIONAL NUTRITION MONTH IS IMPORTANT

- **It's an excuse to reset** We hope you're still crushing your wellness-related New Year's resolutions! For the rest of us, this month gives us an opportunity to reflect inward and make tangible changes to our diets or workout regimens. It could be as simple as adding another veggie or fruit to every meal.
- **We'll look (and feel) better** When we eat real, nourishing foods, we're getting a wealth of vitamins and minerals that support not only healthy internal function, but give skin, hair, and nails an extra glow. Look good, feel good.
- **It fosters a community** From yoga classes to sustainable farming workshops, the opportunities to celebrate this month are endless in cities all across the country.

SLEEPLESS NIGHTS? TRY STRESS RELIEF TECHNIQUES

Published by Johns Hopkins Medicing

<https://www.hopkinsmedicine.org/health/wellness-and-prevention/sleepless-nights-try-stress-relief-techniques>

In a recent national survey, 44 percent of adults said stress had caused sleepless nights at least once in the previous month. All that tossing, turning and staring at the ceiling can leave you feeling tired and more stressed the next day. If you're caught in this vicious cycle of anxiety and insomnia, there's good news: Simple stress relief techniques can help you sleep better and feel calmer.

UNDERSTANDING ANXIETY AND INSOMNIA

What's behind the more stress, less sleep connection? "If you're frequently triggering your stress response, your body never gets back to its baseline," says Johns Hopkins sleep expert Luis F. Buenaver, Ph.D., C.B.S.M.

"Stress and sleepless nights are closely linked," Buenaver says. "If you're in pain, tend to worry, or are coping with a difficult situation in your life, you may have more stress hormones than usual circulating in your body. A poor night's sleep adds even more. And those hormones may never be fully broken down. It's like running an engine in fifth gear all the time."

STRESS RELIEF TECHNIQUES TO THE RESCUE

"Activities that switch on the body's natural relaxation response feel great," Buenaver says. "And they have been proven by research to improve sleep. They help by reducing the release of the stress hormones cortisol and adrenaline and by slowing your heart rate and breathing. Your body and mind calm down."

Yoga, tai chi and meditation are helpful stress relief techniques. So are these two simple exercises that Buenaver recommends to patients who are struggling with sleepless nights.

Gentle breathing:

- In a quiet place, sit or lie down in a comfortable position. It may help to close your eyes.
- Breathe slowly in and out for about five minutes. As you inhale, breathe down into your belly. Focus on your breath.
- If you'd like, repeat to yourself, "Breathing in I am calm, breathing out I am coping."

Progressive muscle relaxation:

- In a quiet place, sit or lie down in a comfortable position.
- Take a few gentle breaths, in and out.
- Begin tensing groups of muscles one at a time as you breathe. Hold the tension as you inhale, then release it as you exhale. Take a few breaths as you notice (and enjoy) how relaxed each muscle group feels.
- Start with the muscles in your head, neck and face. Move down to your shoulders, hands and arms, back, stomach, buttocks, thighs, calves and feet.
- Repeat for any areas that are still tense.

"As you go through this exercise, feel the presence and absence of tension so you can spot lingering tension and do something about it," Buenaver says.



ACTIVATE YOUR BODY'S RELAXATION RESPONSE

"We recommend planned relaxation activities to reduce stress. Watching a ballgame or movie on TV just isn't the same as taking the time to fully relax," says Johns Hopkins sleep expert Luis F. Buenaver, Ph.D., C.B.S.M. Try this plan:

1. Practice gentle breathing and progressive muscle relaxation every day (20 to 25 minutes) for two weeks. On a scale of 0 ("totally relaxed") to 10 ("completely tense"), rate your level of emotional and physical stress before and after.
1. After two weeks, choose the exercise that works best for your anxiety and insomnia and keep it up every day. "With practice, your body and mind will learn to relax more quickly and deeply for fewer sleepless nights," Buenaver says.

BENEFITS OF TELEMEDICINE

Published by Johns Hopkins Medicine

Featured Experts: Brian William Hasselfeld, M.D.

<https://www.hopkinsmedicine.org/health/treatment-tests-and-therapies/Benefits-of-Telemedicine>

Telemedicine, which enables video or phone appointments between a patient and their health care practitioner, benefits both health and convenience. More health care providers are offering to “see” patients by computer and smartphone.

“Health organizations are providing virtual appointments and are expanding their telehealth options, particularly in light of the COVID-19 pandemic,” says Brian Hasselfeld, M.D. Hasselfeld is assistant medical director for digital health innovations at Johns Hopkins Medicine.

Improved technology has made telemedicine easier, even for those who don’t consider themselves computer savvy. Patients can use telemedicine through the MyChart online platform or mobile app, and request a virtual visit with many Johns Hopkins doctors, practitioners and therapists.



TELEMEDICINE, ALSO KNOWN AS TELEHEALTH, OFFERS MANY ADVANTAGES, INCLUDING:

Comfort and Convenience

With telemedicine, you don’t have to drive to the doctor’s office or clinic, park, walk or sit in a waiting room when you’re sick. You can see your doctor from the comfort of your own bed or sofa. Virtual visits can be easier to fit into your busy schedule. With telemedicine, depending on your schedule, you may not even have to take leave time from work or arrange for child care.

Control of Infectious Illness

To help prevent the spread of COVID-19, flu and other infectious diseases, doctors can use telehealth appointments to prescreen patients for possible infectious disease. It also saves sick people from having to come in to the office. Less exposure to other people’s germs helps everyone, especially those who are chronically ill, pregnant, elderly or immunocompromised.

Better Assessment

Telemedicine can give some specialty practitioners an advantage because they can see you in your home environment. For example, allergists may be able to identify clues in your surroundings that cause allergies. Neurologists and physical and occupational therapists can observe you and assess your ability to navigate and take care of yourself in your home. Telemedicine is also a good way to get mental health assessment and counseling.

Family Connections

When consulting with your doctor, it’s always good to have a family member who can help you provide information, ask questions and take note of your doctor’s answers. If that person lives out of town, or even across the country, telemedicine can loop your family member in on the virtual visit if you authorize it.

Primary Care and Chronic Condition Management

Regular visits with primary care practitioners such as those specializing in family medicine, internal medicine and pediatrics, are essential to your family’s health. Telemedicine makes it easy to connect with a doctor or nurse practitioner. Some systems are set up so that new patients can get an appointment with the next available practitioner, which can save time.