



Healthy Woman

News from the Office of Women's Health

Fall 2011

ILLINOIS DEPARTMENT OF PUBLIC HEALTH • PAT QUINN, GOVERNOR • DAMON T. ARNOLD, M.D., M.P.H., DIRECTOR

WOMEN'S HEALTH CONFERENCE TO BE HELD NEXT MONTH

Registration is still open for the 13th annual Women's Health Conference, to be held Nov. 2 and 3, 2011, at the Springfield Hilton Hotel in Springfield.

Co-sponsored by the Illinois Department of Public Health's Office of Women's Health and the Illinois Public Health Association, it is one of the most prestigious conferences about women's health held in Illinois.

This program is designed for those interested in women's issues including health professionals who want to educate themselves about diseases and the effects on women's health. Session topics include cardiovascular disease, obesity, cancer, bowel diseases and birth control affects. Continuing education credits are available.

New this year is the Conference Walking Challenge. Interested participants will be given a pedometer and asked to track their steps while in attendance at the conference. There will be a one-day challenge and a two-day challenge. Prizes such as fitness equipment, gift cards, jewelry and beauty products, will be awarded at the end of each day.

If conference attendees need more of a challenge, they will have the option again this year to participate in an evening Zumba® session or an early morning yoga session.

Featured speakers include Kris Carr and Eliz Greene. Carr is an author, filmmaker, motivational speaker and founder of crazysexylife.com. She is the subject of the uplifting documentary "Crazy Sexy Cancer." The film, which she wrote and directed for TLC and the Discovery Channel, chronicles her adventure of living and thriving with stage four cancer. Carr will take the audience on her inspirational journey about living a full and healthy life with cancer survival. Her witty anecdotes, diet advice, and tips for overcoming adversity motivate her audiences to think outside the box in order to become empowered participants in health and healing.

Greene, a health educator and director of Embrace Your Heart Wellness Initiative in Milwaukee, Wisc., was seven-

(continued on Page 8)

WISEWOMAN PROGRAM NOW IN POLISH

More than 1 million people of Polish ancestry live in Chicago, giving the city the largest Polish population outside of Warsaw, Poland. While that fact may be surprising to many of us, it comes as no surprise to the staff at Mercy Hospital and Medical Center in Chicago.

Nearly two years ago Mercy's staff began seeing an influx of Polish immigrants and Polish Americans being screened through the Illinois Breast and Cervical Cancer Program. These women were not only interested in being screened for breast and cervical cancer, but also wanted to learn if they were at risk for cardiovascular disease and ways to modify their lifestyles. The problem: Illinois WISEWOMAN Program materials were only available in English and Spanish.

Through a joint effort with the U.S. Centers for Disease Control and Prevention, Illinois Department of Public Health's Office of Women's Health and Mercy Hospital and Medical Center, the Illinois WISEWOMAN Program was able to translate its curriculum into Polish. Mercy began offering WISEWOMAN screenings and lifestyle interventions in August 2011 with great success.

To date, approximately 10 percent of the women screened at Mercy Hospital and Medical Center have been able to take advantage of the newly translated curriculum and lifestyle interventions. Women screened through the program are thrilled with the services that they receive and the level of care and attention provided to them by the staff. Many are referring friends and family members within their community.

The translation of the Illinois WISEWOMAN Program materials was truly a collaborative effort and would not have been possible without the hard work and dedication of all those involved!



HYPERTENSION: AN OVERVIEW

Nearly 68 million people have high blood pressure in the United States. High blood pressure, also called hypertension, increases the risk for heart disease and stroke, the first and third leading causes of death. It also is a major risk factor for congestive heart failure and kidney disease.

Blood pressure is the force of blood pushing against the walls of arteries. A normal blood pressure reading is considered to be 120/80; however, blood pressure does not stay the same all the time. It lowers as you sleep and rises when you wake up. It also rises when you are excited, nervous or active. If your numbers stay above normal most of the time, you are at risk for health problems.

Blood pressure that is slightly higher than normal is called prehypertension; 28 percent of American adults have prehypertension. People with prehypertension are more likely to develop high blood pressure than are people with more normal blood pressure levels. As blood pressure numbers rise, so do the health risks. (For more information about the numbers, please see the box on Page 7).

RISK FACTORS

Anyone can get high blood pressure but some people have a greater risk. Risk factors include:

- Age – The chance of having high blood pressure increases as you get older.
- Gender – Before age 55, men have a greater chance of having high blood pressure. Women are more likely to have high blood pressure after menopause.
- Family history – High blood pressure tends to run in some families.
- Race – African Americans are at an increased risk. In fact, more than 40 percent of non-Hispanic blacks have high blood pressure. In the United States, blacks are twice as likely as whites to have high blood pressure, although the gap begins to narrow around age 44. After age 65, black women have the highest incidence of high blood pressure. Higher rates of obesity and diabetes might place African Americans at greater risk for high blood pressure and heart disease. Researchers also have found that there may be a gene that makes blacks much more salt sensitive. This trait increases the risk of developing high blood pressure.

If there was a vaccine that would prevent HIV infection, would you ensure that your daughter got it? Most parents probably would. While there is no such vaccine, there is one that could help prevent human papillomavirus (HPV), which kills approximately 4,000 women each year; however, the vaccine is not widely utilized.

According to data from the U.S. Centers for Disease Control and Prevention (CDC), increases in vaccination rates for HPV are trailing increases in rates for two other vaccines recommended for teens and preteens. You can read more about that on Page 4.

How can we improve the rates? I believe, as does the CDC, that education is the key. Protection of teens from vaccine preventable diseases such as HPV relies upon people such as you to educate parents and their adolescent children about vaccines.

First and foremost, we need to clear up any myths and misinformation about vaccine safety, which can confuse parents who are trying to make sound decisions about their children's health care. The HPV vaccine has been found to be safe and effective with no serious safety concerns.

Other steps include raising awareness among parents that adolescents – not just babies – need vaccinations; educating parents and adolescents about the vaccines and the diseases they prevent; providing communication tools to help improve awareness and knowledge of vaccines; and communicating the importance of completing all three doses of the HPV vaccine series.

The CDC has created a website full of resources and materials for your activities in promoting HPV and other adolescent vaccines. You can find everything you need at: <http://www.cdc.gov/vaccines/who/teens/for-public-health.html#print-materials>.

Check it out and then start your own education campaign. It's worth a shot!



Shannon R. Lightner
Deputy Director, Office of Women's Health

Healthy Woman

While the above risk factors cannot be controlled, there are other risk factors that can be, including:

- Overweight/obesity – Those who are overweight or obese are more likely to develop prehypertension or high blood pressure.
- Unhealthy lifestyle – Many unhealthy lifestyle habits can raise your risk, including:
 - Eating too much sodium (salt)
 - Drinking too much alcohol
 - Not getting enough potassium in your diet
 - Not doing enough physical activity
 - Smoking

SODIUM/SALT

A diet high in sodium (salt) increases the risk for higher blood pressure. Most people eat more than double the amount of salt that they should. About 77 percent of the sodium Americans consume comes from processed and restaurant foods.

Current dietary guidelines for Americans recommend that adults in general should consume no more than 2,300 mg of sodium per day. At the same time, consume potassium-rich foods, such as fruits and vegetables. However, if you in the following population groups, you should consume no more than 1,500 mg of sodium per day, and meet the potassium recommendation (4,700 mg/day) with food.

- 51 years of age or older
- African American
- Those with high blood pressure
- Those with diabetes
- Those with chronic kidney disease

HYPERTENSION AND WOMEN

Many people mistakenly believe that high blood pressure is more common among men. The truth is nearly half of all adults with high blood pressure are women. Beginning at age 65, after the onset of menopause, women are actually more likely to have this disease than men. While high blood pressure is not directly related to gender, certain female issues can increase your risk.

The conditions that might increase blood pressure in women include:

- Pregnancy – Although many pregnant women with high blood pressure

have healthy babies without serious problems, high blood pressure can be dangerous for both the mother and the fetus. Women with pre-existing, or chronic, high blood pressure are more likely to have certain complications during pregnancy than those with normal blood pressure. However, some women develop high blood pressure while they are pregnant (often called gestational hypertension). The effects of high blood pressure range from mild to severe. High blood pressure can harm the mother's kidneys and other organs, and it can cause low birth weight and early delivery. In the most serious cases, the mother develops preeclampsia – or "toxemia of pregnancy" – which can threaten the lives of both the mother and the fetus.

- Oral Contraceptives – Some women taking oral contraceptives experience a small but detectable increase in blood pressure. It is more likely to occur if the woman is overweight, has high blood pressure during pregnancy and has a family history of high blood pressure or have mild kidney disease. Women age 35 and older who smoke cigarettes are at even greater risk for heart disease and stroke and are encouraged to quit smoking. If they are unable to quit smoking, they should talk to their doctor about using other forms of contraception. Before taking oral contraceptives:

- Talk to your doctor about the risks.
- Make sure your doctor measures and records your blood pressure before prescribing the pill.
- Make sure your doctor measures and records your blood pressure before prescribing the pill. Have it checked every six months or so.

- Hormone Replacement Therapy – A recent study indicated that blood pressure does not increase significantly with hormone replacement therapy in most women with and without high blood pressure. However, a few women may experience a rise in blood pressure attributable to estrogen therapy. Therefore, it is recommended that all women treated with hormone replacement therapy have their blood pressure monitored more frequently after such therapy is started.

- Menopause – A woman's odds of having high blood pressure go up after menopause.

SIGNS AND SYMPTOMS

High blood pressure itself usually has no signs or symptoms. Rarely, headaches may occur. You can have high blood pressure for years without knowing it. During this time, the condition can damage your heart, blood vessels, kidneys, and other parts of your body.

Knowing your blood pressure numbers is important, even when you're feeling fine. If your blood pressure is normal, you can work with your health care team to keep it that way. If your blood pressure is too high, you can take steps to lower it. Lowering your blood pressure will help reduce your risk for related health problems.

PREVENTION AND CONTROL

Three out of four women with high blood pressure know they have it, yet fewer than one in three are controlling it.

It is important to take steps to keep your blood pressure under control. The treatment goal is blood pressure below 140/90 and lower for people with other conditions, such as diabetes and kidney disease. Adopting healthy lifestyle habits is an effective first step in both preventing and controlling high blood pressure. If lifestyle changes alone are not effective in keeping your pressure controlled, it may be necessary to add blood pressure medications.

Ways to prevent/control high blood pressure include:

- Have your blood pressure checked regularly.
- Exercise every day – at least 30 minutes most days of the week.
- Eat a health diet, one that is rich in fruits, vegetables, whole grains and low-fat dairy products.
- Reduce salt and sodium in your diet.
- Maintain a healthy weight.
- Be physically active.
- Limit alcohol intake (no more than one drink per day for women).
- Quit smoking.
- Manage stress.
- If you have high blood pressure and are prescribed medication(s), take as directed.

(continued on Page 7)

HPV VACCINATION RATES LOWER THAN OTHER TEEN IMMUNIZATIONS

Increases in vaccination rates for human papillomavirus (HPV) are trailing increases in rates for two other vaccines recommended for teens and preteens, according to data recently released by the U.S. Centers for Disease Control and Prevention (CDC).

Coverage rates for the other two vaccines – Tdap, which protects against tetanus, diphtheria and pertussis, and MenACWY, which protects against meningococcal meningitis – are continuing to increase, but vaccination rates for HPV vaccine remain low, the study found.

HPVs are a group of 150 related viruses, of which more than 40 can be sexually transmitted. These types of HPV infections are very common and it is possible to have HPV without knowing it as most occur without any symptoms and go away without any treatment within a few years. However, some HPV infections can persist for many years. Persistent infections with high-risk HPV types can cause cell abnormalities. If untreated, areas of abnormal cells, called lesions, can sometimes develop into cancer.

Persistent HPV infections are now recognized as the cause of essentially all cervical cancers, as well as most cases of anal cancer. According to the CDC, each year in the United States, about 6 million people become infected with HPV each year, and about 12,000 women are diagnosed with cervical cancer, and 4,000 die.

In addition, oral HPV infection causes some cancers of the oropharynx (the middle part of the throat, including the soft palate, the base of the tongue, and the tonsils). It has been estimated that HPV infection accounts for approximately 5 percent of all cancers worldwide, reinforcing the need for vaccination.

The vaccination study in CDC's *Morbidity and Mortality Weekly Report* used data from the 2010 National Immunization Survey-Teen. The CDC NIS-Teen survey found:

- Coverage for the three routine teen vaccines was 49 percent for one dose of HPV vaccine; 63 percent for MenACWY; and 69 percent for Tdap vaccine.
- For girls who received the recommended three doses of HPV vaccine, coverage increased 5.3 points to 32 percent over the previous year.
- Hispanics had higher coverage for one dose of MenACWY and HPV, but third-dose HPV coverage lagged for blacks and Hispanics compared with whites. Girls living in poverty also were less likely to complete the HPV series.
- Coverage increases for HPV were less than half of the increases seen for Tdap (13.3 points) and meningitis (9.1 points) vaccines.

The U.S. Food and Drug Administration (FDA) has found the vaccine to be safe and effective and studies have shown no serious safety concerns. In fact, 35 million doses of HPV vaccine have been safely given to girls across the country. Common, mild adverse events reported during these studies include pain where the shot was given, fever, dizziness, and nausea. As with all vaccines, CDC and FDA continue to monitor the safety of these vaccines very carefully.

CDC recommends HPV vaccine for 11- or 12-year-old girls to protect against the types of HPV that cause cervical cancer and also recommends that girls and women ages 13 through 26 should get all three doses of the HPV vaccine if they have not received all doses yet. HPV vaccines are given in three doses (as shots) over six months. To ensure the highest level of protection, girls must complete all three shots.

HPV vaccination is approved for boys to prevent genital warts and anal cancer, additional problems caused by the virus. But protection against oral HPV has not been studied in either gender.

Families who need help paying for vaccines should ask their health care provider about the Vaccines for Children (VFC) program, which provides vaccines at no cost to uninsured children younger than 19 years. For help in finding a local health care provider who participates in the program, both providers and parents can call the Illinois VFC program at 800-526-4372.

Source: U.S. Centers for Disease and Prevention Control

LOCAL LEAD AGENCIES HOST BREAST CANCER AWARENESS ACTIVITIES DURING OCTOBER

During the month of October, people and organizations strive to increase awareness and raise funds to support research for breast cancer treatment and prevention, and to find a cure for breast cancer.

Statistics show how this disease affects so many women:

- In 2011, a projected 9,280 women in Illinois will be diagnosed with breast cancer.
- One in eight women will develop breast cancer over the course of her lifetime.

The good news is that women can lower their risk of developing this disease and hopefully prevent a cancer diagnosis through early detection by having routine clinical breast exams and yearly mammograms for women older than 40 years of age. When caught early, the five-year survival rate for breast cancer is 98 percent. When found in later stages, the survival rate drops down to 23 percent (Susan G. Komen).

In an effort to help make sure women get necessary services, the Illinois Breast and Cervical Cancer Program (IBCCP) offers free mammograms, breast exams, pelvic exams and Pap tests to eligible women.

Many of IBCCP's lead agencies have several exciting events planned during the month of October. Several agencies, including Visiting Nurse Association of Fox Valley, Mercy Hospital and Tazewell and Madison county health departments have scheduled "Mammography Days." At these events, clients can learn about breast health while receiving lunch, mammograms, prizes, and other various services depending on the location. These sites have their nursing staff available onsite so that women can be enrolled in IBCCP services, if they are eligible. At Calhoun County Health Department and Sarah Bush Lincoln Health Center, they are even bringing the services to the women in a mobile mammogram unit. The benefits are much the same as a Mammography Day, but attempt to limit the access barriers that may exist in rural areas.

No matter the event, the goal during October is to raise awareness through education and to stress the importance of early detection through mammography. We hope the 27th National Breast Cancer Awareness Month succeeds in reaching as many women as possible. This month moves us one step forward in saving women's lives and working toward ending breast cancer.



(Left) Pictured is a table display from last year's Mammography Day sponsored by the Tazewell County Health Department.

(Right) In honor of National Breast Cancer Awareness Month, the Illinois Department of Public Health's Office of Women's Health created this window display to dispel common myths about breast cancer. The display is at the Stratton Office Building in Springfield, where it was visible to state employees, legislators and the public.



An Illinois Hospital and College Work Together to Create a Teen Pregnancy Prevention Program

Richland Memorial Hospital and the Transition Center/Single Parent Program from Olney Central College have recently created a Teen Pregnancy Prevention Program (TPPP) that serves area freshman high school students. This program was created due to the recent increase in teen pregnancies in Richland County, as noted by both the local school systems and probation department.

According to the 2008 numbers from the National Campaign to Prevent Teen and Unplanned Pregnancy, the national teen pregnancy rate is 2.8 percent. The rate for the state of Illinois is 3.8 percent. Out of roughly 360 girls enrolled in the local high schools in Richland County, 24 were either pregnant or had a baby during the 2010-11 school year, meaning that the teen pregnancy rate for this group (grades 9-12) was roughly 6.7 percent. In addition to these numbers, there were roughly 20 high school aged girls that were *already parenting* a child, and thus were not included in the above statistics. This means that the percentage of teen girls that were involved in a pregnancy or were parenting was about 12 percent. Clearly there was a need for some type of intervention to prevent such a high occurrence of teen pregnancy in Richland County.

Two area organizations, Richland Memorial Hospital and the Transition Center/Single Parent Program from Olney Central College, met and discussed options for a comprehensive program that would include all aspects of teen pregnancy prevention including the following topics:

- Definition of sex (oral, anal, vaginal)
- Sexually transmitted diseases
- Teen pregnancy issues – financial, medical, emotional, educational
- Birth control – state laws, types, success and failure rates, proper use
- Abstinence and how to say “NO!”
- Gender-specific/exclusive discussions about sex/pregnancy/abstinence

These topics were chosen based on information from nationally proven pregnancy prevention programs that are endorsed by the Office of Adolescent Health - Teen Pregnancy Prevention Initiative. Included in the planning were local high school administrators as well as health educators, medical professionals, teen mothers and students. The result of the discussions was a comprehensive, eight-hour program that was presented to freshman high school students (with parental permission) during their freshman health class. The schedule was as follows:

- Day 1: What is Sex?
- Day 2: Sexually Transmitted Diseases (presented by an OB-GYN)
- Day 3: Pregnancy and Childbirth as a Teen (presented by an OB-GYN registered nurse and a teen mom)
- Day 4: Raising a Child as a Teen (presented by a teen pregnancy specialist and a teen mom)
- Day 5: Birth Control (presented by an OB-GYN)
- Day 6: Abstinence – Girls only
- Day 7: Abstinence – Boys only
- Day 8: Final Session – wrap-up, questions, surveys

At the beginning of each class, each student was given a blank note card on which to write questions. At the end of each class, ALL students folded their card and put it in the question box as they exited the class. In this way, each student was given the opportunity to ask questions anonymously. Questions were answered in the course of each presentation, thus being sure not to draw attention to the question. “Reality issues” about the difficulties of teen parenting were woven throughout the classes, as well as open and honest discussions about the pros and cons of the use of birth control vs. the choice of abstinence. Finally, a gender-specific discussion on practical ways to incorporate abstinence into the teen lifestyle was a great way for the students to brainstorm and discuss their feelings on the matter.

Initial survey results showed that the two sessions the students indicated were “most helpful” or that they “liked the best” were the birth control session and the abstinence session. All of the students that were in the class indicated that the program “was helpful” to them. The program continues to be fine-tuned and adjusted to meet the needs of more students, with the possibility that it may be offered at the middle school level during the 2011-12 school year.

If you have an article that you would like to submit for inclusion in the Healthy Woman Newsletter, please send to Tammy Leonard at tammy.l.leonard@illinois.gov.

MILLION HEARTS INITIATIVE HOPES TO SAVE LIVES

To reduce the burden of cardiovascular disease risk factors, including hypertension, the U.S. Department of Health and Human Services, in collaboration with nonprofit and private organizations, has launched Million Hearts, with the goal of preventing 1 million heart attacks and strokes over the next five years.

Million Hearts will bring together a wide range of heart disease and stroke prevention programs, policies and activities to raise awareness among health care providers, private-sector organizations, policymakers and consumers about what can be done to prevent heart disease and stroke in the United States.

Some of the Million Hearts' activities may include educational campaigns to increase awareness about heart disease prevention and empower patients to take control of their heart health; use of health information technology and quality improvement initiatives to standardize and improve the delivery of care for high blood pressure and high cholesterol; and community efforts to promote smoke-free air policies and reduce sodium in the food supply.

While the initiative will last for five years, the impact of the program is expected to reach far into the future.

For more information about Million Hearts, visit <http://millionhearts.hhs.gov/>.

Hypertension, continued from Page 3

STATISTICS

- High blood pressure was a primary or contributing cause of death for 336,353 Americans in 2007.
- There were more than 46 million visits to doctor's offices for hypertension in 2007.
- More than one in five people with high blood pressure do not know that they have it.

SOURCES:

U.S. Centers for Disease Control and Prevention
800-CDC-INFO (800-232-4636)
www.cdc.gov

National Heart, Lung and Blood Institute
301-592-8573
www.nhlbi.nih.gov

American Heart Association
800-242-8721
www.americanheart.org

PUBLIC HEALTH NOW ON FACEBOOK AND TWITTER

The Illinois Department of Public Health is pleased to announce its official presence on two popular social media sites: Facebook and Twitter. Social media is a powerful and effective medium to reach target audiences with strategic and immediate messages about how the Department is serving their needs in Illinois.

The Department's Facebook and Twitter pages will serve as platforms for strategic communications with the totality of people with whom we serve and interact: international, national and local health organizations; health care professionals and service providers; government officials and organizations; media professionals and, perhaps most importantly, the general public in Illinois and beyond. Both the Facebook and Twitter pages will host news updates, health education stories, links to articles, pictures and other exclusive content. They also will highlight strategic partnerships and initiatives with our counterparts locally and nationally. We encourage all Facebook and Twitter users to post comments, upload photos, send us "@ replies," retweet us, and invite others to join.

The Department's Facebook and Twitter pages are accessible for viewing to anyone, but if you wish to receive updates, post or interact with other users, the best way to do that is with Facebook and Twitter accounts. Both are free to join. The Department's Facebook page address is: www.facebook.com/IDPH.Illinois. You can find us on Twitter at www.twitter.com/IDPH.

Join us, and spread the word!



Hypertension, continued from Page 3

BY THE NUMBERS

Blood pressure is the force of blood pushing against the walls of arteries. Blood pressure is written as two numbers. The first (systolic) number represents the pressure when the heart beats. The second (diastolic) number represents the pressure when the heart rests between beats. The following is a classification system for blood pressure.

Normal blood pressure	Less than 120/80
Prehypertension	120-139/80-89
Hypertension	140/90 or higher

Donations Given to Agencies That Help Women and Girls in Need

To help those in need, the Illinois Department of Public Health's Office of Women's Health (OWH) coordinated a Department-wide effort that yielded much needed supplies to support a worthwhile cause – the health and wellness of women and girls.

The Help Women and Girls Project was an initiative of National Women's Health Week, May 8 through May 14. National Women's Health Week is a weeklong health observance coordinated by the U.S. Department of Health and Human Services' Office on Women's Health. It brings together communities, businesses, government, health organizations, and other groups in an effort to promote women's health.

Donations included baby items such as diapers, wipes and bottles; household products such as laundry detergent and bleach; toiletries and nonperishable food. The donations were divided among three Springfield organizations: Elizabeth Ann Seton Program, which offers services for pregnant and parenting women; the Mini O'Beirne Crisis Nursery, which helps prevent child abuse; and Sojourn Shelter and Services Inc., which provides domestic violence prevention and services.



Pictured are several OWH staff members (from left to right: Tahney Fletcher, Sandy Goodner, Allen Griffey, Brenda Rodriguez, Phallisha Curtis, and Mimi Rockhill) and the donations.

Conference, continued from Page 1

months pregnant with twins when she suffered a massive heart attack. Greene survived a 10-minute cardiac arrest, the cesarean delivery of her daughters and open-heart surgery – all on the same day. She also gained perspective and passion for life, which led her to develop strategies to fit activity and healthy habits into her life. She lost the more than 80 pounds she gained while pregnant and has since become a recreational triathlete.

A special treat this year will be a reception at the Abraham Lincoln Presidential Museum, where participants will have a chance to tour the museum after networking and socializing with colleagues. In addition, the Museum Store will be open for purchasing books and gifts.

Early registration, which is through Oct. 21, costs \$115. Late registration and/or on-site registration is \$125. Registration to attend the first day only is \$75 and the second day only is \$50. Student registration for both days is \$75.

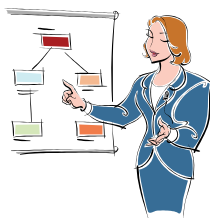


QUITTING TOBACCO - HOW IT WORKS

- **Getting Started** - Participating groups and individuals receive instructional materials about our service.
- **Convenient access** - Callers are greeted by a live medical professional through our toll-free services, 7 a.m.-11 p.m. every day. Voice messages can be left at any time after hours and will be returned the next business day. Information can be accessed via the Internet at any time.
- **Assessing needs** - Professional counselors ask the callers about readiness to quit, history of tobacco use and previous quit attempts.
- **Customizing a Program** - A cessation program is customized to each caller's needs.
- **Reinforcement** - A quit-kit including self help materials, information about nicotine replacement therapies, and requested health information is mailed to the caller.
- **Follow-up** - Our counselors maintain weekly communication with participants for a minimum of six weeks. Thereafter, follow-up calls are made at three months, six months and 12 months.
- **Tracking Success** - Each call/counseling session is well documented. Data is available as needed to monitor success of the overall program.
- **Feedback** - An evaluation of the program is completed by each caller and participating group.
- **Whole Health** - Our counselors are qualified to discuss all issues relating to lung health. Physician referrals and information about medicines and treatments are also available.

SPEAKERS BUREAU

Need a speaker to talk about women's health issues? Staff from the Office of Women's Health may be available to speak at your organization or engagement at no charge to you, on a number of different women's health topics, including:



- ◆ Women and Heart Disease
- ◆ Osteoporosis
- ◆ Understanding Menopause
- ◆ Girls' Health
- ◆ Breast Cancer

To request a speaker, contact the Women's Health-Line at 888-522-1282.



The Illinois Department of Public Health's Office of Women's Health created this fun and informative window display to educate the public about skin cancer. The display was at the Stratton Office Building in Springfield, where it was visible to state employees, legislators and the public.

EVENTS CALENDAR:

October — National Breast Cancer Awareness Month
Domestic Violence Awareness Month
October 21 — National Mammography Day
November 2 and 3 - Women's Health Conference

**Women's Health Conference
Nov. 2-3, 2011**

**Hilton Springfield Hotel
700 East Adams Street
Springfield**

Healthy Woman newsletter is published semiannually by the Illinois Department of Public Health. Story ideas, suggestions and comments are welcome and should be forwarded to Tammy Leonard, Illinois Department of Public Health, Office of Women's Health, 535 W. Jefferson St., First Floor, Springfield, IL 62761; or call 217-524-6088.

Generally, articles in this newsletter may be reproduced in part or in whole by an individual or organization without permission, although credit should be given to the Illinois Department of Public Health. Articles reprinted in this newsletter may require permission from the original publisher.

The information provided in this newsletter is a public service. It is not intended to be a substitute for medical care or consultation with your health care provider and does not represent an endorsement by the Illinois Department of Public Health. To be included on the mailing list or to unsubscribe, send an e-mail to Tammy Leonard at tammy.l.leonard@illinois.gov.

Women's Health-Line 888-522-1282

If you have health-related questions or concerns, the health-line staff will help you find the answers. You may call the toll-free number weekdays from 8 a.m. to 4:30p.m. After hours, calls are recorded on voice mail and responded to during the next workday. Always completely confidential and free of charge, the Women's Health-Line is one resource for all women in Illinois. The Women's Health-Line can help you find:

- the answer to a question about a women's health issue
- the nearest clinic offering mammography through the Illinois Breast and Cervical Cancer Program
- information about sexually transmitted diseases in women
- where to take your adolescent child for therapy for an eating disorder
- a supply of brochures or fact sheets about healthy lifestyles