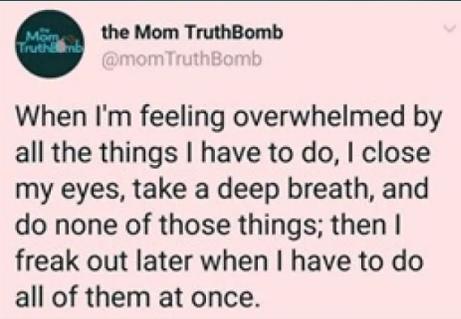


Living in a Woman's World: Understanding the Priority of Your Health

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the Mom TruthBomb
@momTruthBomb

When I'm feeling overwhelmed by all the things I have to do, I close my eyes, take a deep breath, and do none of those things; then I freak out later when I have to do all of them at once.

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Learning Objectives

- ▶ 1. Articulate best practice guidelines for disease prevention and health promotion across the lifespan for women.
- ▶ 2. Identify screening guidelines for cervical, breast, colon, and skin cancers based upon age
- ▶ 3. Discuss adult immunizations
- ▶ 4. Review diet and exercise guidelines for cardiovascular health

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The Purpose of Primary Care

- ▶ The Logical Basis of Healthcare
- ▶ Value in Healthcare
 - ▶ Providing High quality healthcare
 - ▶ Maintaining Patient Satisfaction
 - ▶ Efficient Use of Resources



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Broad range of problems seen in Primary Care

- ▶ Respiratory: leading respiratory concerns include asthma, bronchitis, sinusitis and other acute infections
- ▶ Circulatory: hypertension or high blood pressure is the leading diagnosis
- ▶ Endocrine: diabetes, metabolic diseases and immunity disorders
- ▶ Musculoskeletal: joint disorders, osteoarthritis and rheumatism
- ▶ Nervous system and sense organs: ear infections, migraines and pink eye
- ▶ Genitourinary: urinary tract (or bladder) infections, menstruation disorders and menopausal issues
- ▶ Mental disorders: attention deficit disorder, depression and anxiety
- ▶ Injury/poison: contusion or bruises, sprains, strains and open wounds
- ▶ Skin and subcutaneous tissue: eczema, cellulitis (bacterial infection of the skin and tissues beneath the skin) and abscesses (collection of pus build-up within the tissue)
- ▶ Infections and parasitic diseases: viral and chlamydial infections and strep sore throat



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All Ages: Lifestyle Modifications which can reduce risk of illness and injury

- ▶ Alcohol use screening and counseling
- ▶ Tobacco use counseling
- ▶ Substance abuse counseling
- ▶ Depression and Anxiety Screening-GAD and PHQ-9
- ▶ Lipid (cholesterol) screening-Starting at age 20 and every 5 years unless high risk for cardiovascular disease
- ▶ Diabetes screening- USPTSF recommends screening for prediabetes and type 2 DM in adults ages 35 to 70 who are overweight or obese.
- ▶ Blood pressure screening
- ▶ Diet and Exercise counseling- Yearly, AHA recommends at least 150 minutes per week of moderate intensity aerobic activity or 75 minutes per week of vigorous aerobic activity.



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My plan:

1. Get up
2. Have coffee
3. ~~Kick ass~~
Have more coffee
4. Keep having coffee
5. Twitch through the day like a magical caffeinated unicorn of excellence



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Breast Cancer Screening Across the Ages

- ▶ These recommendations apply to all women starting at age 40 and can stop at age 74. Many women do mammograms beyond 74 if they would seek treatment for Breast Cancer.
- ▶ asymptomatic women aged ≥40 y
- ▶ who do not have preexisting breast cancer or a previously diagnosed high-risk breast lesion and
- ▶ who are not at high risk for breast cancer because of a known underlying genetic mutation (such as a BRCA1 or BRCA2 gene mutation or other familial breast cancer syndrome) or a history of chest radiation at a young age.
- ▶ **Increasing age is the most important risk factor for most women.**

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American College of Obstetricians and Gynecologists (2017) ^[8]	1 to 2 [*]	Individualize*	Yes	Yes, to at least age 75
American College of Physicians (2019) ^[6]	2	Individualize*	Yes	Yes, to age 74
American Academy of Family Physicians (2019) ^[7]	2	Individualize*	Yes	Yes, to age 74
American Cancer Society (2015) ^[8]	1 year age 45 to 54 1 to 2 years age ≥55	Individualize* through age 44 Yes, start age 45	Yes	Yes ^Δ
American College of Radiology (2017) ^[9]	1	Yes	Yes	Yes [◊]

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Reasons for Breast Cancer Screening Prior to 40

- ▶ Family History of Breast or Ovarian Cancer
 - ▶ Esp. 1st degree relative and onset <50 years old
 - ▶ Will start screening 5 years before age of first degree relative
- ▶ History of atypical hyperplasia or other nonmalignant high risk breast lesions
- ▶ Previous breast biopsy
- ▶ Extremely dense breast tissue, may require yearly Breast MRI's prior to age 40.

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Recommend annual MRI screening (based on high risk of breast cancer and high sensitivity of MRI*)
BRCA mutation
First-degree relative of BRCA carrier, but untested
Lifetime risk >20 to 25% or greater, as defined by BRCAPro or other models that are largely dependent on family history
Recommend annual MRI screening (based on high risk of breast cancer)
Radiation to chest between age 10 and 30 years
Li-Fraumeni syndrome and first-degree relatives
Cowden and Bannayan-Riley-Ruvalcaba syndromes and first-degree relatives
Insufficient evidence to recommend for or against MRI screening ^Δ
Lifetime risk 15 to 20%, as defined by BRCAPro or other models that are largely dependent on family history
Lobular carcinoma in situ or atypical lobular hyperplasia
Atypical ductal hyperplasia
Heterogeneously or extremely dense breast on mammography
Women with a personal history of breast cancer, including ductal carcinoma in situ
Recommend against MRI screening (based on expert consensus opinion)
Women at <15% lifetime risk

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Colon Cancer Screening Across the Ages

- ▶ Adults 45 years or older with none:
 - ▶ No signs or symptoms of colorectal cancer
 - ▶ No prior diagnosis of colorectal cancer
 - ▶ No history of inflammatory bowel disease
 - ▶ No history of adenomatous polyps
 - ▶ No personal diagnosis of family history of colorectal cancer, adenomatous polyps, or colorectal cancer
 - ▶ (based on current evidence, screening will start at age 45)
- ▶ IF PATIENT HAS ANY OF THE ABOVE HISTORY, SCREENING WILL START BEFORE AGE 45

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Screening for colorectal cancer

- ▶ Screen all adults aged 45 to 75 years for colorectal cancer.
- ▶ Several recommended screening tests are available.
- ▶ Clinicians and patients may consider a variety of factors in deciding which test may be best for each person.

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Recommended colorectal screening strategies

- ▶ • High-sensitivity guaiac fecal occult blood test (Hs-gFOBT) or fecal immunochemical test (FIT) every year
- ▶ • Stool DNA-FIT every 1 to 3 years (AKA Cologuard)
- ▶ • Computed tomography colonography every 5 years
- ▶ • Flexible sigmoidoscopy every 5 years
- ▶ • Flexible sigmoidoscopy every 10 years + annual FIT
- ▶ • Colonoscopy screening every 10 years
- ▶ ALL STRATEGIES CAN BE DISCUSSED WITH PRIMARY CARE PROVIDER

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WHAT'S MY SKINCARE ROUTINE, YOU ASK?

Accidental Super Mom

IT MOSTLY INVOLVES BABY WIPES, NOT SHOWERING, LEAVING MAKEUP ON FOR DAYS, AND OCCASIONALLY I DON'T KNOW I HAVE FOOD ON MY FACE.

Accidental Super Mom

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Skin Cancer Screening Across the Ages

- ▶ 1 in 5 Americans will develop some form of skin cancer in their lifetime
- ▶ Prevention is key with Broad Spectrum sunscreen SPF 30+
- ▶ Reapplication is key!
 - ▶ Every 2 hours you should reapply sunscreen. More often when submerged in water or excessively sweating
- ▶ Sun Protective Clothing
 - ▶ Dark or bright colors keep UV rays from reaching skin
 - ▶ The more skin it covers, the better your protection
 - ▶ Wear a hat (wide brim and tightly woven for best protection)
 - ▶ Don't forget sunglasses to protect those eyes

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Types of Skin Cancer

- ▶ Basal Cell
- ▶ Melanoma
- ▶ Squamous cell
- ▶ Skin Cancer Screening yearly regardless of age
 - ▶ BCC + SCC compromise ~90% of all skin cancers

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Higher Risk for skin cancer

- ▶ Fair Skin
- ▶ Light Hair
- ▶ Eye Color
- ▶ Freckles
- ▶ Sunburn easily or history of major sunburn

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ABCDE's of Skin Cancer

ASSYMETRIC
One half unlike the other half.

BORDER
Irregular, scalloped or poorly defined border.

COLOR
Varied from one area to another; shades of tan and brown, black; sometimes white, red or blue.

DIAMETER
While melanomas are usually greater than 6mm (the size of a pencil eraser) when diagnosed, they can be smaller. See ruler below for a guide.

EVOLVING
A mole or skin lesion that looks different from the rest or is changing in size, shape or color.

HOW TO SPOT SKIN CANCER™
FOR MORE INFORMATION VISIT OUR WEBSITE: www.spatskin.org

1-5 (with ruler)

ANYONE
CAN GET SKIN CANCER. REGARDLESS OF SKIN COLOR.

THE SIGNS OF MELANOMA

SKIN CANCER SELF-EXAMINATION

To learn more about skin cancer and find a FREE skin cancer screening, visit SpotSkinCancer.org

WHEN CAUGHT EARLY SKIN CANCER IS HIGHLY TREATABLE

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Check your Skin!

- ▶ Checking your skin means taking note of all the spots on your body, from moles to freckles to age spots.
- ▶ Remember, some moles are black, red, or even blue.
- ▶ If you see any kind of change on one of your spots, you should have a dermatologist check it out.
- ▶ Individuals with a history of melanoma should have a full-body exam at least annually and perform monthly self-exams for new and changing moles.

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Cervical Cancer Screening Across the Ages

- ▶ The USPSTF recommends initiating screening at the age of 21 with cervical cytology every three years through the age of 29
 - ▶ Pap with reflex HPV cotesting
- ▶ We recommend continuing cervical cancer screening in all asymptomatic, immunocompetent patients with a cervix between the ages of 30 and 65.
 - ▶ Co-testing (Pap and HPV testing) every five years
- ▶ Bimanual exam should be done only if complaints of pain, discharge or other symptoms. USPSTF recommends discontinuing screening bimanual exams on patients with no gyn symptoms of any kind.

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STI screening Across the Ages

- ▶ Gonorrhea, Chlamydia testing for all women under 25 years of age who are sexually active. Women over 25 in the high risk group below:
- ▶ High Risk Groups
 - ▶ New partner
 - ▶ More than one partner
 - ▶ A partner who has concurrent partners
 - ▶ A partner who is exchanging sex for money/drugs
 - ▶ Inconsistent use of barrier devices if not in a monogomous relationship
 - ▶ Highest prevalence
 - ▶ Incarcerated, Military recruits, and patients receiving care at public STI clinics

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STI Screening Across the Ages

- ▶ Other STI testing such as HIV, Trichomonas, Herpes, Syphilis should be done if women fall in High Risk Group

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Immunizations Across the Ages

- ▶ Childhood Immunizations should be up to date through age 18. Before college: Meningitis, Tdap, and check on HPV vaccine status
- ▶ 18-49: Yearly Flu shots, Td every 10 years (should give adult Tdap once as well), HPV approved for boys and girls ages 9-26, also approved for ages 27-45 years of age, covid vaccine, and any make up vaccinations
- ▶ 50-64: Zoster vaccine (2 shots), Td or Tdap every 10 years, yearly flu shot, Covid vaccine, and Pneumovax once before age 65 if high risk (hypertension, diabetes, COPD)
- ▶ 65+: Zoster vaccine, Pneumovax one after age 65, Prevnar (if high risk group as discussed above or lung disease), Covid vaccine, Td or Tdap every 10 years, and flu shot

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Diet and Exercise Guidelines Across the Ages

- ▶ Adults (18-65): At least 150 minutes a week of moderate intensity activity such as brisk walking. At least two days a week of activities that strengthen muscles.
- ▶ Adults 65+: At least 150 minutes a week of moderate intensity activity such as brisk walking. At least 2 days a week of activities that strengthen muscles. Activities to improve balance such as standing on one foot.
- ▶ People who are physically active for 150 minutes a week have a 33% lower risk of all-cause mortality than those who are physically inactive.

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Diet and Exercise Guidelines Across the Ages

- ▶ There are many different diets and eating programs that people can choose from.
 - Fasting
 - Keto
 - Atkins
 - Plant Based Diets
 - Weight Watchers
 - Fad Diets (Cabbage Soup Diet)

CONSISTENCY IS THE MOST IMPORTANT THING

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Questions???

Thank you for listening!!!!

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Me when I'm finally finished doing everything by myself instead of simply asking for help: