



# Great Lakes VA HEALTHVIEWS

The Newsletter about Health for Veterans in VISN 12



Volume 4, Issue 4

Winter 2006



## Seasonal Affective Disorder

As seasons change, there is a shift in our “biological internal clocks” or circadian rhythms. This is due partly to changes in sunlight patterns. It can cause our biological clocks to be out of “step” with our daily schedules. Some people begin to notice a change in their mood at this time. This mood change may be a sign of Seasonal Affective Disorder (SAD). SAD is a mood disorder sometimes called “winter depression.”

### How Common is SAD?

As many as half a million people in the United States may have it. Another 10% to 20% may experience mild SAD. SAD is more common in women than in men. Although some children and teenagers get SAD, it usually doesn't happen to someone

younger than 20. For adults, the risk of SAD increases as they get older. SAD is also more common in the north.

### What are the Symptoms?

Although symptoms are clues to the diagnosis, not everyone with SAD has the same symptoms. Common symptoms of “winter depression” include:

- A change in appetite, especially a craving for sweet or starchy foods (breads, pasta, cookies, etc.).
- Weight gain.
- A heavy feeling in the arms or legs.
- A drop in energy level.
- Fatigue.
- A tendency to oversleep.
- Difficulty concentrating.

*(continued on page 2)*

- Irritability.
- Increased sensitivity to social rejection.
- Avoiding social situations.

SAD may also include some of the symptoms that are found in other forms of depression. For example:

- Feelings of guilt.
- A loss of interest or pleasure in activities you used to enjoy.
- Ongoing feeling of hopelessness.
- Physical problems, such as headaches.

Symptoms of SAD keep coming back year after year. They tend to come and go at about the same time every year. The changes in mood are not always related to obvious things that would make a certain season stressful (like being unemployed during the winter).

## What Causes SAD?

Melatonin, a sleep-related hormone produced by a gland in the brain, has been linked to SAD. This hormone, which may cause symptoms of depression, is produced at increased levels in the dark. Melatonin is higher when days are shorter and darker.

## What is the Treatment?

Phototherapy or bright light therapy has been shown to reduce melatonin. There is no research yet that proves it has an antidepressant effect. But many people have been helped using light therapy.

For mild symptoms, try rearranging your home and workplace so they have more sunlight. It is also helpful to spend time outdoors during

the day. One study found that an hour's walk in winter sunlight was as effective as two and a half hours under bright artificial light.

Light therapy involves a specially made light box or a light visor that you wear on your head like a cap. You sit in front of the light box or wear the light visor about 30 minutes each day in fall and winter. If it helps, you will continue using it until enough sunlight is available, usually until springtime. If you stop too soon your symptoms may return.

When used properly, light therapy seems to have very few side effects. You may experience eye strain, headache, fatigue, or irritability. If light therapy is used too late in the day you may find it difficult to go to sleep. Light therapy may not be appropriate for someone with manic depressive disorder, skin that is sensitive to light, or medical conditions that make the eyes vulnerable to light damage.

If phototherapy doesn't work, an antidepressant drug may help reduce or eliminate SAD symptoms.

If you think you have SAD, talk to your provider or mental health professional. We can help!

Submitted by:  
Gail Beauchamp LMSW, CAC II  
David Van Holla, MD, Mental Health Service  
Iron Mountain VAMC

Sources:

- 1) National Mental Health Association (2006) Seasonal Affective Disorder Fact Sheet [On-line], Available: [www.nmha.org/infectr/factsheets](http://www.nmha.org/infectr/factsheets)
- 2) Greist, John & Jefferson, James (1992). Depression and Its Treatment. Washington: American Psychiatric Press, Inc.

# How to be a Part of Patient Safety Efforts

All VA hospitals have a “Patient Safety” program. There are many things your health care team does every day to help prevent medical errors.

- They ask you to state your name and ask for additional identification (social security number) to prevent confusing you with another patient.
- They wash their hands to prevent the spread of infection.
- They ask what medicines you take and how and why you take them. They ask about medicine from other VAs or non-VA doctors, herbal supplements, and medicines bought at the drug store.
- They ask what allergies you have.
- They ask when you had your last vaccinations (such as flu shots).
- When you have surgery, they ask if you understand your surgery and mark the body part that is being operated on.
- They ask if you have a history of falling and find ways to prevent falls when you are in the hospital.

## How do I take part in my care?

Understand your condition, medicines, and test instructions. Know how to use the equipment we give to you.

Keep track of your weight, diet, blood pressure, or blood sugar. Keep a list of your medicines in your wallet (and know what each medicine is for).

Ask questions. That is the best way to understand your care. Write down your questions and bring them with you to your clinic visit. If you are asked to sign a consent form, be sure you understand what will be done and why. Ask about your test results.

## What safety issues should I report?

Tell your nurse or doctor if something does not seem right. If you get your medicines, but they do not look the same or the instructions do not seem right, contact the pharmacy or your provider. If you are having a test, but the staff person has not asked you to state your name and social security number, let them know. If you have equipment to use at home and it is not working, call your clinic.

## Where should I report safety issues?

If you think there has been a mistake with your healthcare, report it to any of the staff involved in your care. You may also contact the Patient Advocate, who is available to help you and your family with concerns or questions.

The VA is committed to making your time with us as safe as possible. Let's work together to keep safety a priority!

Submitted by:  
Mary Kelly, RN, Patient Safety Manager  
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# HOME CARE CORNER

## Protect Yourself Against Pneumonia

Every year, more than 60,000 Americans die of pneumonia. Pneumonia is an inflammation of the lungs. It is caused by an infection. Pneumonia most often affects the very young children and the elderly. It is also more common in people with chronic illnesses.

There are more than 50 kinds of pneumonia. It can develop suddenly, with chest pain, fever, chills, cough, and shortness of breath. Pneumonia often follows a cold or the flu, but it can also occur with other illnesses.

You are more likely to get pneumonia if you:

- Are 65 or older.
- Have other medical conditions such as lung disease, diabetes, heart failure, HIV, cancer.
- Have an illness that weakens your immune system.
- Are a smoker or use tobacco products.
- Are exposed to certain chemicals or pollutants.
- Have a history of alcohol abuse.

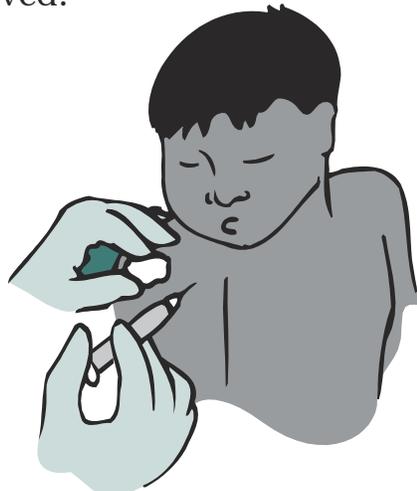
Pneumonia can develop suddenly or along with another illness. Symptoms include:

- Shaking and chills,
- Fever,
- A cough that produces mucus,
- Shortness of breath,
- Night sweats,
- Chest pain that gets worse when you take a deep breath or cough.

Antibiotics can treat some of the most common forms of pneumonia. A growing problem, though, is pneumonia that is hard to treat. This is due to resistant strains of bacteria. For that reason, and because the disease can be very serious, it's best to try to prevent infection in the first place.

Follow these simple rules to reduce your chances of getting pneumonia:

1. Wash your hands and cover your mouth when you cough or sneeze.
2. Get a flu vaccine if:
  - You are over age 50.
  - You live in a long-term care facility.
  - You have a chronic heart disease, lung disease, diabetes, kidney problems or are immuno-suppressed.
3. Get a pneumonia vaccine if:
  - You are over age 65.
  - You have any chronic disease.
  - You have had your spleen removed.



The correct treatment for pneumonia depends on the type of germ causing your infection. Your doctor will prescribe specific medicine. You may also need oxygen to help you breath better.

Your doctor may also recommend over-the-counter medicines for pain, fever, and coughing. Coughing helps clear mucus from your lungs, so you don't want stop coughing. If you must use a cough suppressant, use the lowest dose that helps you get some rest. You should also drink plenty of liquids.



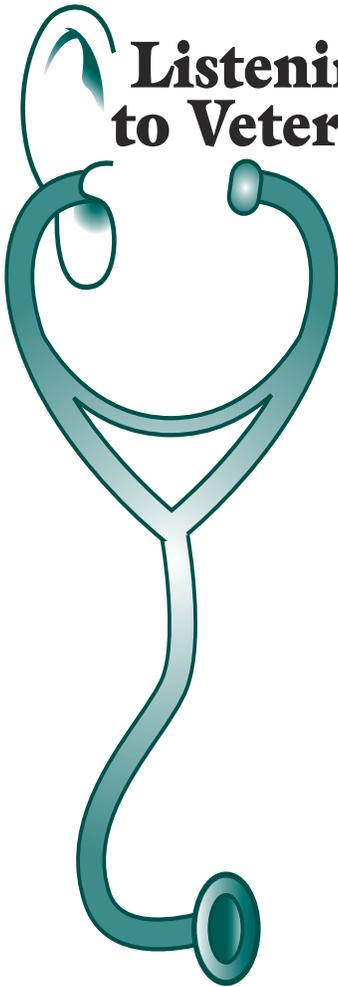
Remember: hand washing is still the number one defense against winter illnesses!

Submitted by:  
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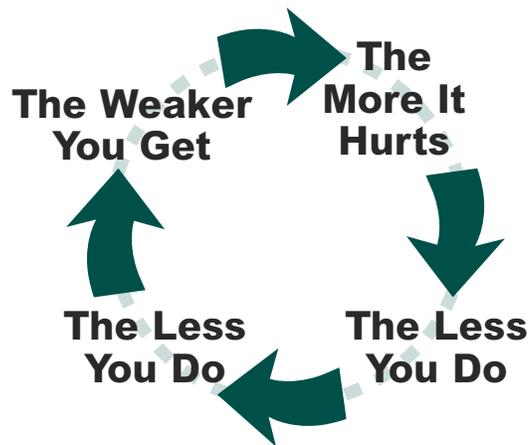


## What is Sarcopenia?

Sarcopenia (pronounced SARKO-PEEN-YA) is the loss of muscle mass and function that comes with aging. Losing muscle mass and strength increases your chance of falling.

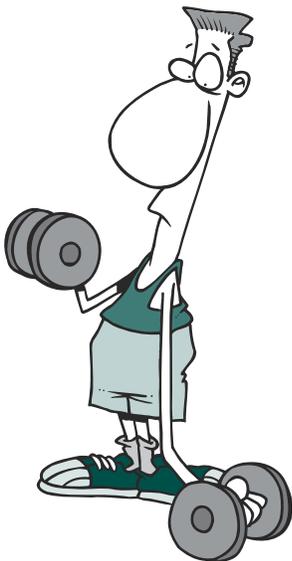
After age 30, there is a 3-5% loss of muscle mass every ten years in people who are not physically active. It is similar to being on bed rest for a long time. When you lose muscle mass you lose strength. Everyday activities such as housework, taking walks or climbing stairs, become a chore.

This can lead to a vicious cycle:



Answered by:

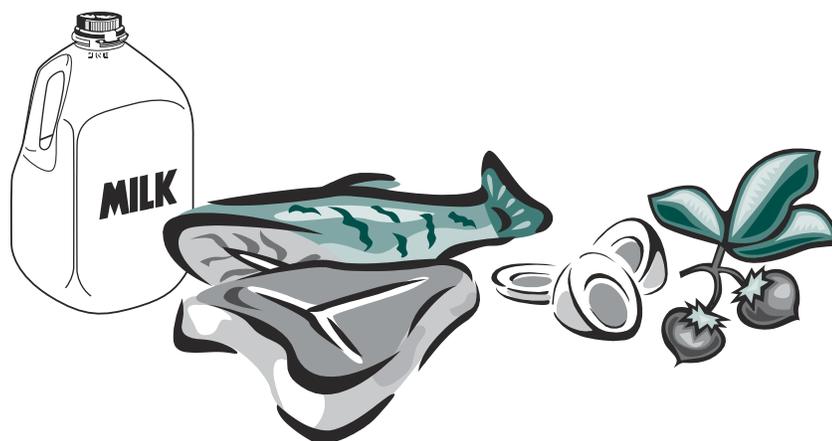
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Weight lifting or strength building improves your muscle mass. This is also called resistance training. Your muscles respond quickly to changes in physical activity. Exercise can reverse some of the changes that come with aging. How much your muscle strength improves depends on how hard you exercise. Ask your provider what type of exercise is right for you.

Healthy eating is also important. As we get older we may not eat enough calories or enough foods that contain protein. When you don't eat the right amount of protein, your muscles do not get the nutrients they need for energy. Protein can be found in meat, poultry, fish, milk, cheese, yogurt, soy products, eggs, lentils, beans, and nuts. Talk to your provider or dietitian about how much protein is right for you.

*Remember --- it's never **too late** to start!*



## Please Don't be a No Show

Each year, many appointments are wasted because someone did not show up or call to reschedule.

If these appointments were cancelled in advance, other veterans could have been seen by a healthcare provider.

Please help your fellow veterans by **ALWAYS** calling in advance to cancel or reschedule if you cannot keep your appointment.



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**Important note:** We are not able to **mail** this newsletter to you. It can be found in waiting rooms of your VA Medical Center and outpatient clinics.

You can also subscribe to the electronic version of this newsletter by going to [www.visn12.med.va.gov/subscribe.htm](http://www.visn12.med.va.gov/subscribe.htm)

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*Your best source for information about your health will always be your health care team. We hope this newsletter will encourage you to ask questions about your health concerns.*

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or Idea for Future Articles**

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If you have any concerns about patient care or safety in your facility, first contact the person in charge. If your concern cannot be resolved, the VA encourages you to contact JCAHO. You may request a “public information interview.” Requests can be made to:

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