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Wellness Through Answers News
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Linking Connecticut Patients, Families, and Residents to Reliable Health Information

Vaccine News

• Tracking vaccinations around the world
• Who are America's unvaccinated?
• Employers have the legal right to mandate COVID shots
• Moderna and Pfizer expand vaccine trials for children 5 - 11
• When will the youngest children be able to get the vaccine?
• What does science say about COVID vaccines for children?
• Kaiser Family Foundation issue brief on vaccination by race and ethnicity
• A national survey explores vaccine hesitancy and access by age, gender, race, ethnicity, education, income, and political affiliation
• Vaccinations prevented 279,000 additional deaths and 1.25 million additional hospitalizations due to COVID
COVID-19 Updates

• Where hospitalizations are rising in the US
• Some experts recommend upgrading to N95 masks
• New charts show COVID case acceleration in the US
• CDC now recommends vaccinated Americans wear masks indoors in certain circumstances citing the highly transmissible delta variant
• People with COVID often infect their pets
• Three new studies shed light on poorly understood long COVID
• Super antibodies could curb COVID-19 and help avert future pandemics
• Scientists struggle to develop diagnostic criteria for long COVID in children
• Genetic risk factors for COVID could point to treatments
• Fitbits offer insight into COVID’s long-term effects
• COVID launches multipronged attack on the brain
• The search for patient zero
• Advice for planning an overseas trip
• Europe's "Green Pass" eases summer travel
• Damage to children's education and health could last a lifetime
• FEMA rules changes for Covid-19 funeral aid program opens up funding

Treatments for Alcohol Use Disorder (AUD) Underused

AUD is a medical condition that affects the brain. Alcohol-induced changes to the brain impair a person’s ability to stop or control their alcohol use despite social, work-related, or health consequences. These brain changes also make a person vulnerable to relapse. Over 14 million American adults and 414,000 adolescents suffer from AUD. Regardless of severity, there are evidence-based treatments that can help people with AUD achieve and maintain recovery. Unfortunately, despite the availability of effective treatments, few people get them.

The American Psychiatric Association guidelines recommend initial treatment with psychotherapy and medications. Psychotherapy (talk therapy) helps build coping strategies and skills to stop or reduce drinking. Acamprosate, disulfiram, and naltrexone are medications that can help reduce alcohol cravings and avoid relapse. None of these medications are addictive.

A recent study found only seven percent of adults with AUD received any treatment; less than two percent used medications. How can we increase the use of effective treatments, especially medications? People need to recognize their symptoms and see a physician who can prescribe medication. The
“Rethinking Drinking” website encourages people concerned about their alcohol use to explore they might have AUD. The National Institute of Alcohol Abuse and Alcoholism “Treatment Navigator” helps those with AUD find treatment programs, therapists, and doctors in addiction specialties.

Transgender Youth Ill Served by Our Healthcare System

The term transgender describes people with a wide range of gender identities, which are different from the sex assigned at birth. There are 25 million transgender and nonbinary people worldwide; most are children, adolescents, and young adults. These youth have an increased risk for anxiety, depression, eating disorders, sleep disturbances, substance abuse, suicide, and HIV infection. They also have specialized treatment needs that include hormone therapy and gender-affirming surgery.

Despite significant medical and behavioral health problems, transgender patients have limited access to quality healthcare. Discrimination, homelessness, inadequate education, and a lack of legal protections make it difficult to obtain appropriate treatment. Strict gatekeeping policies, restrictive insurance coverage, and insensitive health providers lead some to opt-out of traditional healthcare and engage in risky self-care practices.

Culturally competent healthcare organizations and providers are hard to find. Outcare Health was created to help solve this problem. The organization connects patients to healthcare providers and resources in all 50 states. Patient resources include primary care, mental health services, youth groups, shelters, support groups, STI testing, and more. Outcare also supports providers through cultural competency training, discussion groups, mentorship, and medical education reform.

Do Fitness Trackers Improve Health?

One in five Americans has a "Fitbit" or another wearable fitness tracker. Fitness trackers continually collect data on heart rates, body temperature, physical activity, and more. Unlike old-fashioned pedometers, fitness trackers use sophisticated algorithms to track and estimate a wide variety of fitness measures, including the number of steps you take, your heart rate, and calories you burn during exercise.
Fitness trackers encourage wearers to take **10,000 steps a day** (roughly five miles.) Are the number of steps you take meaningful for your health? Why use 10,000 steps as a target? There is no scientific basis for this recommendation. The 10,000-step goal originated in the mid-1960s in Japan with a clockmaker who wanted to capitalize off the post-Olympics fitness craze. He made a pedometer, whose name, when written in Japanese characters, resembled a walking man and translated as "10,000 steps meter."

Research supports **7,000 - 8,000 steps** as optimal for a healthier, longer life. Most Americans average fewer than 5,000 steps. A recent study found fitness tracker devices and apps had a small to moderate positive effect on physical activity and motivated people to take an average of 1,850 additional steps per day. Trackers that relied on personalized features like text messaging were most effective.

Perhaps a Fitbit might motivate you to walk your way to better health. Before you buy one, check out the *Consumer Reports* guide to fitness trackers.

**Connecticut Legalized Marijuana- Could Magic Mushrooms Be Next?**

Last month Connecticut legalized recreational marijuana. This month, Governor Lamont signed a bill that approved research involving psilocybin, the psychedelic compound found in magic mushrooms. Connecticut is one of several states exploring the therapeutic potential of psilocybin. Why is there interest in mind-altering drugs?

There is growing evidence to support the benefits of psilocybin to treat mental health conditions and substance use disorders. The Food and Drug Administration (FDA) granted breakthrough therapy status to psilocybin and another psychedelic, MDMA (Ecstasy/Molly). The FDA policy change means states may add psychedelics to their mental health treatment toolbox.

The social and economic impact of mental illness is enormous. Drug overdoses for 2020 dwarfed all previous annual reports. More treatment options, especially for opioid addiction, are desperately needed. Psilocybin used with psychotherapy can help patients with treatment-resistant depression, anxiety, addiction, and other disorders. Psychedelics work by binding to serotonin receptors on the surface of brain cells. Serotonin is a neurotransmitter that helps regulate mood. Psychedelics also appear to rewire the connections between brain cells and may explain why patients experience a long-lasting reduction of symptoms.
The hallucinations that accompany psychedelics could be dangerous for some patients (e.g. those with schizophrenia or PTSD), and psychedelics must be given in a controlled medical setting. Scientists hope to develop similar, non-hallucinogenic drugs to replace or supplement psychedelics.

**Physician Language Can Affect Patient Care**

This past April, a provision of the 21st Century Cures Act required healthcare providers to give all their patients electronic access to most kinds of medical notes. The law intends to empower patients to become more active in their healthcare. This new requirement has focused attention on the content and clarity of medical notes. Traditionally, medical notes have been a tool for providers to track their work and communicate with each other.

Physicians often use jargon and abbreviations that can be confusing and even insulting to patients. Physicians may also use stigmatizing language and harmful labels that create bias and lead to health inequities. Medical notes with stigmatizing language are associated with more negative attitudes towards patients and less aggressive management of their pain. Physicians who use clear, supportive language in medical records remind patients about important self-care, enhance patient trust in their physicians, and improve the quality of care patients receive.

**More News and Resources You Can Use**

• Dementia-friendly apartment design
• Funding resumes for gun violence research
• A new Connecticut hotline for reporting elder abuse and neglect
• Free summer meals for Connecticut kids
• "Covered Connecticut" initiative to offer free health insurance for 40,000 state residents
• How to dispose of dead batteries, bubble wrap, and other household clutter
• What to do when you get a cancer diagnosis
• Best health and science books and podcasts to enjoy this summer
• Destress with a sound bath
• Elder Index measures the income older adults would need to live independently by geographic location.
• Best cities for cyclists
• Planting trees for climate change
• A new online library connects community groups to resources to help older adults and their caregivers during emergencies.
• How to read and make sense of the news
• Find, support, or create a community fridge
• App screens for Autism Spectrum Disorder

Have a Personal Health Question?

Wellness Through Answers staff can help you find answers. Our medical librarians research personal health questions for Connecticut residents. Our service is free and confidential. Call or email us with your question: (860) 679-4055 / hnet@uchc.edu

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