

Your Health



Health Partners Newsletter November 2021



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Men's Health Movember

Movember is the annual celebration of men's* health, particularly in relation to testicular, prostate cancer and mental health. This year also encourages men to take the MOVE challenge, a 30-day physical fitness challenge. Keep an eye out on the website for full details <https://uk.movember.com/>

Let's take a quick look at the main issues:

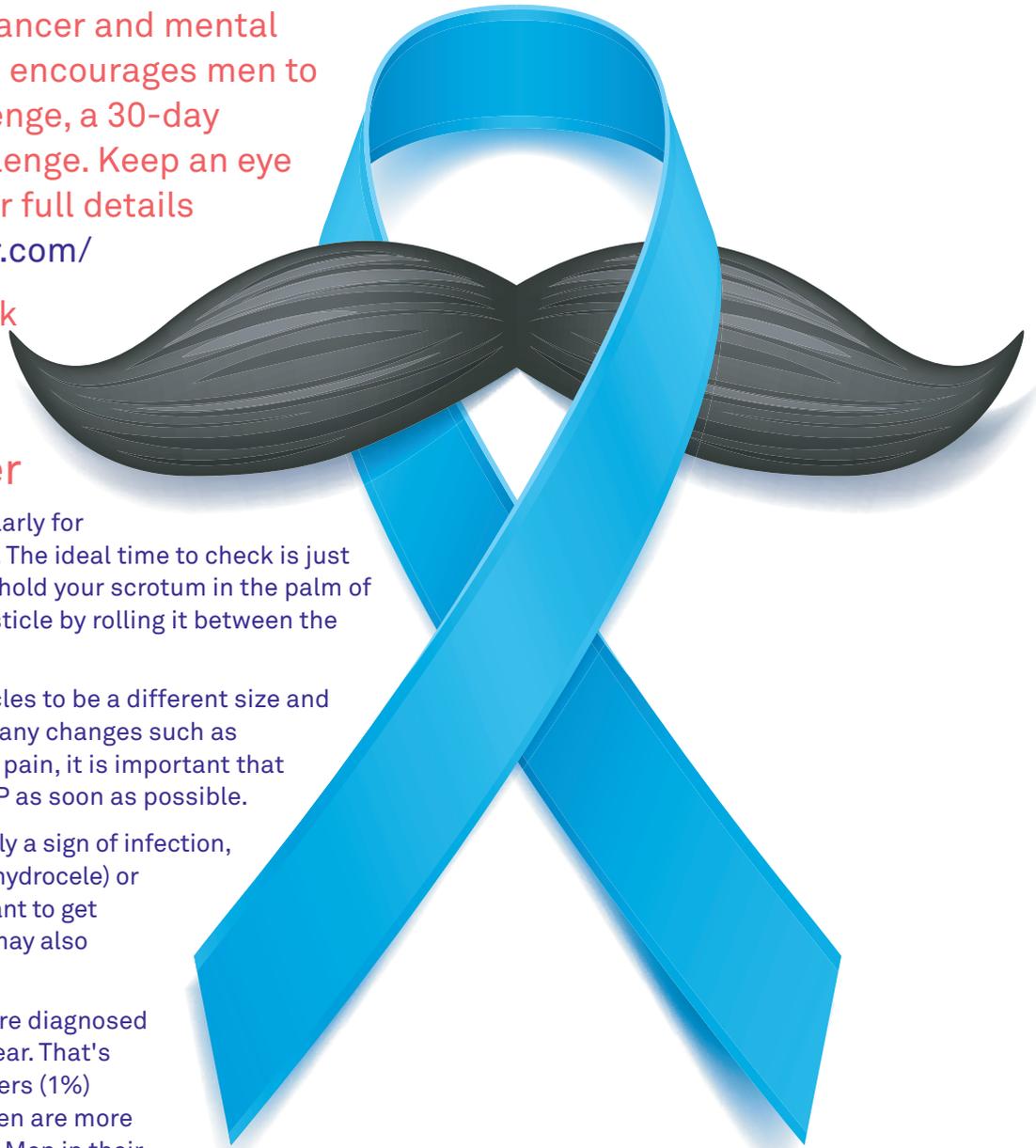
Testicular Cancer

It's important you check regularly for any changes to your testicles. The ideal time to check is just after a warm bath or shower: hold your scrotum in the palm of your hand and check each testicle by rolling it between the thumb and fingers.

It's perfectly normal for testicles to be a different size and length; however, if you notice any changes such as swelling, lumps, hardening or pain, it is important that you seek the advice of your GP as soon as possible.

These symptoms are commonly a sign of infection, inflammation, fluid build-up (hydrocele) or damage; however, it is important to get checked as these symptoms may also indicate testicular cancer.

In the UK around 2,300 men are diagnosed with testicular cancer each year. That's about 1 out of every 100 cancers (1%) diagnosed in men. Younger men are more likely to get testicular cancer. Men in their early 30s are the most likely to get it. It then becomes less common as men get older. Many testicular cancers can be cured if treated early so it is important to check regularly and don't delay seeking GP advice.



Prostate Cancer

Prostate cancer is the most common cancer in UK males (26%), primarily affecting men aged 45 and over. For men between the ages of 15 and 44, testicular cancer is the most common cancer diagnosis.

The prostate is a walnut-sized gland, whose function is to produce fluid, which mixes with sperm during ejaculation to create semen. Prostate function is governed by the male hormone testosterone.

The prostate sits just beneath the bladder and the urethra (the tube from the bladder to the penis) runs through the centre of the prostate gland. Hence, the most common symptoms experienced relating to prostate health are related to urination, e.g.

- Not being able to urinate or difficulty doing so, such as straining or delay
- Poor urinary flow
- Increased frequency or urgency to urinate, particularly during the night
- Leaking following urination
- A feeling like the bladder has not been emptied fully and/or
- Pain on urination.

These symptoms can be worrying, but in most cases are not due to cancer. They are most commonly due to an enlarged prostate (commonly caused by benign prostatic hyperplasia (BPH) - a non-cancerous growth of cells) and can be easily managed with lifestyle changes, medications if required or occasionally surgery, if this is deemed necessary.

Other causes can also include prostatitis (infection of the prostate gland) or prostate cancer, so it is important to seek advice from your GP as soon as possible if you develop any symptoms.

About 48,000 men are diagnosed with prostate cancer a year and it is becoming more common. Prostate cancer is most common in older men. On average each year 35 out of 100 (35%) of new cases are in men aged 75 and over. It is more common in black Caribbean and black African men than in white men. It is less common in Asian men. A man's risk of developing prostate cancer depends on many factors, and it is more likely if you have a close male relative who has had prostate cancer.

Mental Health

Research shows that men are less inclined to speak openly about their emotional wellbeing and it is thought that this may be due to societal and gender stereotypes and expectations.

It's becoming more commonly heard in recent times, but it really is 'OK not to be OK'. Men should feel safe to speak out and seek support and be confident that they won't be judged or perceived differently for doing so.

Approximately one in eight men in the UK are thought to have a common mental health condition such as depression, anxiety or obsessive compulsive disorder (OCD) (Mental Health Foundation) with over one third of men reporting having experienced mental health problems at some point in their lives.

The COVID-19 pandemic and recent lockdowns have been particularly challenging and may have brought to the surface emotional and psychological symptoms for some.

Men are three times more likely to become alcohol addicted than women** and reduced mental health can be a trigger for unhealthy behaviours; men are more likely to use potentially harmful coping mechanisms, which could potentially lead to addiction.

Men are at a higher risk of suicide than women with approximately 75% of those who die by suicide in the UK being male. Men aged between 40 and 49 appear to be at greatest risk, although the incidence of younger people attempting suicide and reporting feeling suicidal has increased recently across both genders. Suicide is biggest killer of men under the age of 45 in the UK.

Mental health is just as important as physical health. Talking is not always easy and data suggests that fewer men than women access mental health support. However, with the increased risk of suicide and other harmful behaviours such as addiction, it's important to speak out and seek support if needed.

If you recognise that you are experiencing symptoms related to your mental health, speak to your GP as they may be able to help. It can also be beneficial to explain how you're feeling to family and close friends so that they can offer support.

Additionally, lifestyle factors such as maintaining a healthy diet, engaging in physical activity, spending time outdoors, practicing good sleep hygiene, ensuring a good work/life balance and practicing techniques such as mindfulness and relaxation can be of great benefit.



As well as looking out for ourselves, it's also important that we look out for each other. If you suspect a friend or colleague may be struggling, offer a listening ear, encourage them to talk and let them know that help is available and that they are not alone.

Starting a conversation with somebody about their mental health can be really helpful; it may be the first time somebody has asked. It may offer a huge sense of relief to acknowledge that this is how they are feeling and starting a conversation about mental health shows that you care.

If you feel that an individual is in immediate danger, e.g. if they tell you they have a plan or intention to act on thoughts of suicide, don't leave them alone. Try to remove any means of suicide from the immediate environment and seek further support – perhaps contact their GP on their behalf, call 999 if there is very urgent concern, or accompany them to A&E and stay with them until they are seen. Hearing that a friend, family member or colleague is feeling suicidal can be difficult so make sure you also seek support for yourself if needed.

Key Benefits of Physical Fitness

- Keeping active can help you lose weight or keep a healthy weight, which reduces the risk of 13 different types of cancer
- And if you're exercising a lot, it can help prevent breast and bowel cancer
- Can help improve mood and reduce stress
- Reduces the risk of heart disease
- Reduces the risk of osteoarthritis
- Reduces the risk of dementia and depression
- Reduce the risk of falls in older adults
- Being active matters - it keeps your body and mind healthy, prevents disease and has many other benefits.

How to be more active

- Make small swaps that build activity into your normal routine. Pick times in your week to add more activity such as walking or cycling to work or the shops. It's more likely to become a habit if you're doing it in the same place at the same time.
- Set a goal and track your progress. Keeping track of how you're getting on can help make healthy changes stick.

- Use a fitness trackers or step counter. Upping your step count is a great place to start. Step counters or apps on your phone are a quick way to see if you're reaching your goals and stay motivated. Some devices can even remind you to get up and move more if you've been still for a while.
- Buddy up with friends or family. Discover new ways to spend time with friends and family, and you can keep each other motivated and on track.
- Remind yourself why you wanted to be more active. Write it down or set a weekly reminder on your phone about why being active is important to you.

Physical activity guidelines for adults aged 19 to 64

Adults should do some type of physical activity every day. Any type of activity is good for you. The more you do the better. **Adults should:**

- Aim to be physically active every day. Any activity is better than none, and more is better still
- Do strengthening activities that work all the major muscles (legs, hips, back, abdomen, chest, shoulders and arms) on at least 2 days a week
- Do at least 150 minutes of moderate intensity activity a week or 75 minutes of vigorous intensity activity a week
- Reduce time spent sitting or lying down and break up long periods of not moving with some activity.

You can also achieve your weekly activity target with:

- Several short sessions of very vigorous intensity activity
- A mix of moderate, vigorous and very vigorous intensity activity
- Make sure the type and intensity of your activity is appropriate for your level of fitness.

You can do your weekly target of physical activity on a single day or over two or more days. Whatever suits you.

Moderate activity will raise your heart rate and make you breathe faster and feel warmer. One way to tell if you're working at a moderate intensity level is if you can still talk, but not sing. Examples of moderate intensity activities:

- Brisk walking
- Riding a bike
- Pushing a lawn mower
- Hiking.



Vigorous intensity activity makes you breathe hard and fast. If you're working at this level, you will not be able to say more than a few words without pausing for breath. In general, 75 minutes of vigorous intensity activity can give similar health benefits to 150 minutes of moderate intensity activity. Most moderate activities can become vigorous if you increase your effort. Examples of vigorous activities:

- Jogging or running
- Swimming fast
- Riding a bike fast or on hills
- Walking up the stairs
- Sports, like football, rugby, netball and hockey
- Aerobics.

Always consult your GP before starting a new exercise regime if you are very unfit/overweight or have underlying health issues.

Useful links for exercise:

UK-wide:

<https://www.nhs.uk/conditions/nhs-fitness-studio/>
<https://www.nhs.uk/service-search/other-services/Fitness-activities-and-classes/LocationSearch/671>

<https://www.nhs.uk/live-well/exercise/how-to-improve-strength-flexibility/>

<https://www.nhs.uk/live-well/exercise/strength-and-flex-exercise-plan/>

<https://www.nhs.uk/live-well/exercise/get-running-with-couch-to-5k/>

Wales:

<https://www.wales.nhs.uk/healthtopics/lifestyles/physicalactivity>

Scotland:

<http://www.healthscotland.scot/health-topics/physical-activity/physical-activity-overview>

Sources:

Cancer Research, NHS, Movember

<https://www.bupa.co.uk/health-information/mens-health/mens-health>

<https://www.nutrition.org.uk/healthyliving/lifestages/men.html> <https://www.mentalhealth.org.uk/a-to-z/m/men-and-mental-health>

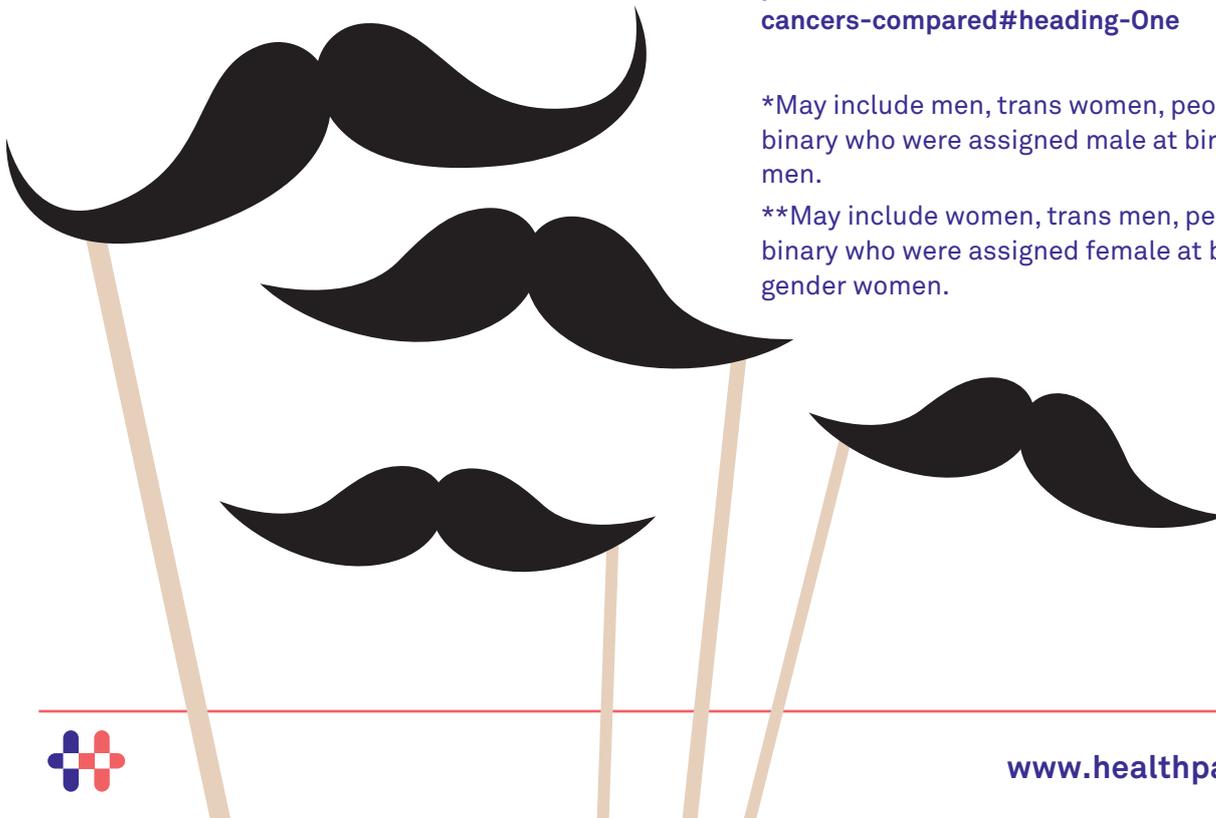
Cancer Research UK

Cancer incidence for common cancers. Available at:

<https://www.cancerresearchuk.org/health-professional/cancer-statistics/incidence/common-cancers-compared#heading-One>

*May include men, trans women, people who are non-binary who were assigned male at birth, and cis gender men.

**May include women, trans men, people who are non-binary who were assigned female at birth, and cis gender women.





What is Diabetes?

Diabetes is a serious condition characterised by high blood sugar. Its full name is diabetes mellitus. There are different types of diabetes mellitus and they have one thing in common: the body's inability to deliver insulin correctly (diminished insulin action).

Insulin is a hormone produced in the body by the pancreas. It promotes the absorption of glucose (sugar) from the blood into the liver, fat and skeletal muscle cells. When the action of insulin is diminished, the sugar remains in the blood, and this can be dangerous to health. Diminished insulin action can result from:

- Decreased insulin secretion
- Reduction in the effectiveness of secreted insulin (insulin resistance)
- A combination of the above.



What is diabetes?

Types of diabetes mellitus

Diabetes can be divided into primary and secondary. Most patients have primary diabetes – you may have heard of the common primary diabetic syndromes:

Type 1 and Type 2 diabetes.

- Type 1 is characterised by insulin deficiency. Injected insulin is necessary to replace the deficiency. It is therefore known as insulin-dependent diabetes mellitus (IDDM). This type of diabetes is not reversible and is lifelong once diagnosed.
- Type 2 is characterised by insulin resistance. Often it can be treated with diet, or diet and oral medication, without the requirement for insulin. It is therefore known as non-insulin-dependent diabetes mellitus (NIDDM).
- Sometimes however, it can be difficult to achieve adequate control of Type 2 diabetes with oral medication alone and insulin treatment can be needed. This is known as insulin-treated Type 2 diabetes.

A minority of patients have secondary diabetes due to another disease that interferes with the action of insulin. You may also have heard of prediabetes. This is a term used to describe people who are at high risk of Type 2 diabetes. It means that your blood sugars are higher than usual, but not high enough for you to be diagnosed with Type 2 diabetes. It also means that you are at high risk of developing Type 2 diabetes.

Prevalence estimates

- Nearly five million people in the UK are living with diabetes
- This is estimated to rise to 5.5 million by 2030
- 13.6 million people are now at increased risk of Type 2 diabetes in the UK
- 850,000 people are currently living with Type 2 diabetes but are yet to be diagnosed.

The number of people with diabetes is increasing at an alarming rate and we are fast approaching epidemic proportions globally - a major public health problem.

Prevalence across diabetes types

- Type 2 diabetes has grown at a particularly high rate and is now one of the world's most common long-term health conditions. Most cases are linked to increased obesity
- In the UK, Type 2 diabetes accounts for about 90% of all diabetes and Type 1 for c.10%
- Whilst Type 1 is less common than Type 2, most children with diabetes will have Type 1.

What is the risk of developing diabetes?

Type 1 diabetes cannot be prevented and there is no way to predict who will get it. It can appear at any time in someone's life after the destruction of the pancreas cells, which produce insulin. It is often not clear why these cells are damaged, although it is thought to have been triggered by infection. The risk of developing Type 2 diabetes can be reduced by changing lifestyles.

Risk factors for Type 2 diabetes:

- Age: your risk increases with age. You are more at risk if you are over 40 and white, or over 25 and African-Caribbean, Black-African, or South Asian
- Family history: you are two to six times more likely to get Type 2 diabetes if you have a parent, brother, sister or child with diabetes
- Ethnicity: Type 2 diabetes is two to four times more likely in people of South Asian, African-Caribbean, or black-African descent
- High blood pressure
- Weight: the more you weigh the greater your risk, especially if you are large around the middle. Check out <https://www.diabetes.org.uk/preventing-type-2-diabetes/waist-measurement-for-more-information>
- Other factors including smoking, a history of diabetes during pregnancy, polycystic ovary syndrome, mental health conditions, e.g. schizophrenia, bipolar disorder or depression, sedentary lifestyle, increased alcohol intake and poor sleep.

What are the signs and symptoms of diabetes?

Having signs or symptoms of diabetes does not mean you definitely have it but you should always contact your GP, just to make sure. Common symptoms are:

- Going to the toilet a lot, especially at night
- Being really thirsty
- Feeling more tired than usual
- Losing weight without trying
- Genital itching or thrush
- Cuts and wounds take longer to heal
- Blurred vision.



What is diabetes?

However, not everyone gets symptoms. In fact, 60% of people have no symptoms when diagnosed with Type 2 diabetes. The symptoms for Type 1 or Type 2 diabetes are similar. However, it is hard to ignore the symptoms of Type 1 diabetes as they come on rapidly. The patient will feel very unwell and, if left untreated, will develop a condition called diabetic ketoacidosis. This is when the blood sugar levels are dangerously high, which can result in a potentially fatal coma. Type 2 diabetes can be easier to miss as it develops more slowly, especially in the early stages.

Complications of diabetes:

With good diabetes control and a healthy and active lifestyle, it is possible for people to go for a number of decades complication-free. Keeping your blood sugar, blood pressure and blood fats (cholesterol) under control will hugely help to reduce your risk of developing complications.

However, if you have had less well controlled diabetes, have led a less healthy lifestyle or had undiagnosed diabetes for a number of years, the complications of diabetes are more likely to develop earlier. Uncontrolled diabetes can lead to short and long-term health complications.

The short-term/acute complications include:

- Hypoglycaemia: when the blood sugars are too low
- Hyperglycaemia: when the blood sugars are too high
- Hyperosmolar hypoglycaemic state (HHS): a life-threatening emergency that only happens in people with Type 2 diabetes, brought on by severe dehydration and very high blood sugars
- Diabetic ketoacidosis (DKA): a life-threatening emergency caused by a lack of insulin and high blood sugars.

The long-term/chronic complications include:

- Eye problems
- Foot problems
- Heart disease and stroke
- Kidney problems
- Nerve damage
- Mouth problems
- Sexual problems
- Other related conditions like cancer.

For more information on the complications of diabetes, and their treatment see:

<https://www.diabetes.co.uk/diabetes-complications/diabetes-complications.html>

Reducing the risks of/reversing Type 2 diabetes:

- Eat well
- Move more
- Lose weight.

Whilst there is no cure for diabetes, the strongest evidence for reducing your risk of or reversing your Type 2 diabetes and putting it into remission, points towards weight loss in people who are overweight or obese. Weight loss can be achieved through lifestyle and dietary changes or for some people, through weight loss surgery, called bariatric surgery. You may also be advised to eat a diet low in carbohydrates and should receive advice from a nutritionist to help you with this.

To prevent the complications of diabetes, it is important you keep your blood sugars, blood pressure and cholesterol levels as close as you can to the numbers your doctor recommends. Do not smoke, be physically active and eat a nutritious diet to help you reach or maintain a healthy weight.

For more information please visit

<https://www.diabetes.org.uk/>
<https://www.diabetes.co.uk/>

Sources

<https://www.england.nhs.uk/2020/05/nhs-expands-offer-of-help-to-people-with-diabetes-during-coronavirus-outbreak/>

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<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3068646/>; <https://www.diabetes.org.uk/guide-to-diabetes/complications>

