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Top 10 PL Patient Handouts of 2014 From Therapeutic Research Center

PL Patient Handouts

Tips for Getting to a Healthy Weight

How to Eat a Heart-Healthy Diet

Tips for Sticking With Your Meds

How to Kick the Smoking Habit

What I Need to Know About Benzodiazepines

Strategies for a Good Night's Sleep

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Tips for Correct Use of Inhalers

Back Pain Self-Care

Tips for Getting to a Healthy Weight

About two-thirds of adults are overweight or obese. So it's easy to see why so many people want to lose at least a couple of pounds, and sometimes more. Losing weight is not easy. We have such fast-paced lives. Time for exercise and preparing healthy meals can be hard to come by. But if you put your mind to it and stick to your goals, you can have success.

Keep in mind that for losing weight, slow and steady is best. Small changes can have big results. Crash diets, gimmicks, and weight loss supplements are not the way to go and can sometimes be dangerous. In fact, people who lose just one to two pounds each week have the best chance of keeping it off. Consider that one pound is equal to 3500 calories. To lose one to two pounds in one week, you'll need to reduce your calories by about 500 to 1000 per day. You can do this by eating fewer calories, burning more calories through physical activity, or a combination of both.

Here are some practical tips you can use to help with your weight loss plan:

- Set goals. Be realistic.
- Write down the reasons you want to lose weight. Post this list somewhere you can see it often to help you stay motivated.
- Write down everything you eat for a few days so you have a realistic idea of what and when you are eating.
- Try to avoid bad habits that can cause weight gain, such as eating too fast, eating when you're not hungry, skipping meals, and always having dessert.
- Don't feel like you always need to "clean your plate."
- Eat more fruits, vegetables, whole grains, and lean meats.
- Eat less food with high fat and sugar content.
- Read nutrition information on food labels. Pay attention to serving sizes.
- Bake or grill foods instead of frying or breading them.
- If you indulge in a high-calorie food, make sure to limit yourself to only a small portion.
- Set specific goals for exercising, such as the amount of time you will spend and how many times you will exercise each week.
- Choose an activity you enjoy. Walking is a good place to start.
- Pair up with an exercise buddy, friend, or family member, to help you stay motivated.
- Consider working with a dietitian or trainer or joining a gym or health club if you need more structure.
- Don't get discouraged by setbacks. Keep moving forward toward your goal.

As you lose weight, your dress size or pants size is likely to drop as well. But you will also feel better and have more energy. Plus, keeping a healthy weight can lower your blood pressure, cholesterol, and blood sugar. Keeping these numbers in check lowers your risk of serious health problems like diabetes, heart attacks, and strokes.

There are medicines that can help people lose weight, but they aren't for everybody. Even with the medicines, you'll need to stick with a healthy lifestyle to see good results. If you have questions about these medicines, talk to your health care provider.

[June 2013]

How to Eat a Heart-Healthy Diet

Eating a heart-healthy diet can lower your risk of problems like heart attacks, strokes, and diabetes. Use the following tips as a guide for a heart-healthy diet. Remember not to get discouraged if you indulge in a favorite once in a while.

DO eat:

- Fruits and veggies
- Whole grains such as brown rice and oatmeal
- Low-fat dairy such as cheese, milk, or yogurt
- Poultry such as chicken and turkey
- Fish
- Beans and peas
- Vegetable oils like canola or olive
- Nuts

LIMIT your intake of:

- Sweets like candy, ice cream, or baked goods
- Sugar-sweetened beverages such as soda, sweet tea, or coffee drinks
- Red meats such as beef and pork
- Saturated fats such as that found in processed meats, animal fat, palm oil, coconut oil, etc.

Some heart-healthy diets include DASH, Mediterranean, American Heart Association (AHA), and USDA Choose My Plate. Pick one you can stay with long-term.

Reducing the sodium (salt) you eat can help keep your heart healthy by lowering your blood pressure. In fact, if you have high blood pressure, reducing your salt by about one-half teaspoon per day can drop your blood pressure by about two points.

Aim for no more than about 2400 mg of sodium, or one teaspoon of table salt, per day. A teaspoon of sea salt has a little less sodium, and a teaspoon of kosher salt has about half as much. Surprisingly, most salt in your diet doesn't come from the shaker. Use these tips to cut back on sodium:

- Buy fresh, plain frozen, or canned “no salt added” food. Avoid canned or processed food.
- Use herbs, spices, and salt-free seasoning in cooking and at the table.
- Cook rice, pasta, and hot cereal without salt. Cut back on instant or flavored mixes.
- Cut back on frozen dinners, pizza, canned soups or broths, and salad dressings.
- Rinse canned foods to remove some salt.
- Choose ready-to-eat breakfast cereals low in sodium.
- Taste food before reaching for the salt shaker.
- Keep in mind the amount of food that has about 1000 mg of sodium: a large fast food burger or hot dog, one large slice or two regular slices of pizza, or one can of soup.

There are “**apps**” for your smartphone that track what you eat. Here are some examples:

- Calorie Counter & Diet Tracker (MyFitnessPal.com) for iPhone
- MyDashDiet (<http://www.freshobject.com/mydashdiet/>) for iPhone
- Sodium Tracker (<https://itunes.apple.com/us/app/sodium-tracker/id468522474>) for iPhone
- EZ Sodium Tracker (<http://ipad-diet-apps.com/page2.html>) for iPhone and Android

More strategies to keep your heart healthy include:

- Exercising for around 30 minutes most days
- Staying at a healthy weight
- Stopping smoking

Making these changes can be tough. Try tackling one at a time for the best success.

[December 2013]

Tips for Sticking With Your Meds

It's very important for you to take your medicines the right way. This means taking the right dose of each medicine the right number of times every day. It also means following any special directions, such as taking a medicine with food, on an empty stomach, or at bedtime.

Taking your medicines the right way can help you stay as healthy as possible. For example, taking your full course of medicine for an infection will help you get completely cured. Taking your blood pressure medicine the right way will help prevent heart attacks and strokes in the long run. Taking your diabetes medicine the right way will help prevent problems with your eyes, kidneys, and nerves as years pass.

There are a lot of reasons why it might be hard for you to take your medicines the right way. Be open and honest with your pharmacist or prescriber about any problems you have taking your medicines. They want to help you. They can work with you so you get the most benefit from your medicines. Below are some "road blocks" that might come up, and some useful tips to help you get past them.

The schedule for taking my medicines is complicated.

- Ask if there are medicines you can take just once or twice a day to replace any that you take three or four times a day.
- Ask if there are any pills you can take that combine two or more of your medicines.
- Ask if any of the medicines you take can be stopped.

I forget to take my medicines.

- Ask for help matching your medicine schedule with your daily routines, such as eating meals and going to bed.
- Use a pill organizer.
- Try using technology, such as a reminder alarm or "app" on your smartphone.
- Ask if your pharmacy or the company who makes your medicine has any special programs to help you remember.

I have trouble paying for my medicines.

- Ask if there are options that cost less, such as generics.
- Ask if there are any programs or discount cards that will help you pay for your medicines.

I don't like the side effects from my medicines.

- Ask how long the side effects will last. Some side effects go away after you've been taking a medicine for a few weeks or so.
- Ask what you can do to prevent the side effects or make them easier to deal with.
- Ask if there is a similar medicine that won't have the side effect you don't like.
- If you have an allergic reaction or a very bad side effect, **seek medical attention right away.**

DO NOT stop taking any of your meds on your own. Always speak with your prescriber and/or pharmacist about ANY problems you're having. Then together you can make sure your meds are the best ones for you.

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How to Kick the Smoking Habit

Why should I quit smoking?

Quitting smoking is the most important thing you can do for your health. Smoking can cause cancer, lung disease, heart disease, and many other health problems. Secondhand smoke can be dangerous too. It can cause lung cancer and heart disease in adults. It can make asthma worse or cause ear infections in kids.

You'll see benefits as soon as you quit smoking. Your heart rate and blood pressure will go down. You'll breathe easier. It will be easier to exercise. Your sense of smell and taste will be better. You'll lower your risk of cancer, lung disease, and heart disease. You'll even live longer!

Why is it so hard to quit smoking?

Nicotine is a strong drug. Your body becomes addicted to nicotine when you smoke. You may have withdrawal symptoms or cravings when you stop smoking. You may become anxious or irritable. You might have trouble sleeping or want to eat more. These symptoms are usually worst the first week after quitting. The good news is nicotine withdrawal symptoms only last a few weeks for most people.

The routines and habits that go along with smoking can make it tough to quit too. Some people often smoke a cigarette when they drive, after a meal, or when they're on the phone. Smoking can become a part of these routines. After you quit smoking these habits can be a trigger to make you want to smoke again. It's important to separate smoking from these routines when you quit.

How can I make it easier to quit?

You don't have to quit "cold turkey." You can double or triple the chance that you'll stop smoking if you use a medicine and counseling together. There are many medicines available. These medicines work in different ways to help manage nicotine withdrawal. Many can be bought off the shelves at your local pharmacy. Some require a prescription. Talk to your pharmacist or prescriber about what medicines may be right for you.

It is very important to have counseling when you quit. Medicines can help you cope with nicotine withdrawal. Counseling can help you develop skills to break smoking habits. There are lots of counseling options available. Many of these are free. Some options are local support groups, telephone quitlines, online services, and texting programs.

Start thinking now about how you plan to quit. Think about why you want to quit. Look at triggers that make you want to smoke. Plan for challenges you might face when trying to quit. Talk to your pharmacist about how to get help.

Where can I learn more?

Toll-free Quitlines and Websites:

In the U.S.: 1-800-QUIT-NOW(1-800-784-8669); <http://smokefree.gov>

In Canada: 1-877-513-5333; <http://www.smokershelpline.ca>

These websites include online support, live chat, and text messaging programs.

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What I Need to Know About Benzodiazepines

What is a benzodiazepine?

Benzodiazepines (ben-zoh-die-az-uh-peens) or “benzos” are a type of sedative. They are often used for sleep, or to treat anxiety or muscle spasms. They have other, less common uses too. You are taking _____ for _____.

Are benzodiazepines safe?

Like all medications, benzos have risks. These risks include:

- Feeling sleepy, dizzy, clumsy, or confused. This can cause falls or accidents.
- A next-day effect (hangover feeling) if you take a benzo at bedtime. This can affect driving or other tasks in the morning.
- Tolerance. This means that over time, your benzo might not work as well as it once did.
- Abuse. Benzos should not be shared with other people. To keep your benzo from being stolen, keep it in a safe place. Tell only a few people you trust that you are taking it.
- Dependence. This means that some patients don't feel well when they stop using benzos. This most often happens after using them at high doses or for a long time.
- Mood or behavior problems.

To use benzos safely, you should:

- Avoid alcohol. Also avoid narcotic pain meds like oxycodone or hydrocodone unless your prescriber approves. These mixtures can cause you to become too sedated, or even slow your breathing to a dangerous level.
- Take your benzo exactly as prescribed. Tell your prescriber if you feel like your benzo is not working. Do not increase the dose on your own.
- Call your prescriber if you have unusual changes in behavior or mood.

What are some benzodiazepine alternatives?

There may be options for treating your condition that are better for you than a benzo. These options may or may not be a medication. For example, there are things you can do to help sleep, anxiety, and low back pain that do not involve pills. Ask your prescriber about these.

What if I want to stop my benzodiazepine?

You must talk to your prescriber if you want to stop your benzo. If you are dependent on your benzo and stop it all of a sudden, you might have withdrawal symptoms. Examples include:

- More common: anxiety, irritability, trouble sleeping, shaking, muscle aches or cramps, stomach cramps or upset stomach
- Not common: seizures, seeing or hearing things that aren't there

The condition your benzo is being used to treat might get worse. Your prescriber will want to make sure your condition is controlled before stopping the benzo. Depending on the dose, how often you take it, and for how long you have been taking it, you may need to slowly decrease (taper) the dose. This might take weeks or months. Your prescriber will give you specific advice for the taper. If you feel worse during this process, don't be discouraged. Contact your prescriber and follow their advice.

[This handout may not cover all possible information. It does not replace the need for professional medical care. Always follow the instructions from your health care provider.][July 2014]

Strategies for a Good Night's Sleep

What Is Insomnia?

Insomnia is a common problem. People with insomnia have trouble falling asleep or staying asleep. A lack of sleep can cause people with insomnia to be sleepy during the day. Sometimes insomnia only lasts for a short time. Or, it can last for a long time. Insomnia can affect your work, school, social life, and health. Some conditions that can cause insomnia or make it worse are depression, anxiety, allergies, and pain. Insomnia can also happen because of poor sleep habits.

How Is Insomnia Treated?

Adults with insomnia may use over-the-counter or prescription medicine to help with sleep. But over-the-counter sleep medicine (diphenhydramine [*Benadryl*]) can make insomnia worse in kids. It's best to **look for the cause of insomnia before starting treatment with medicine**. Keeping a sleep diary for one to two weeks is a smart way to start. Tracking sleep times, caffeine and alcohol intake, etc. can provide clues. Changing these behaviors might be all that's needed to help you sleep better. By maintaining **good sleep habits (sleep hygiene)**, you may be able to avoid taking medicine. In kids, sticking with a regular sleep schedule and a calming bedtime routine can help.

GOOD SLEEP HABITS

- Stick to a regular sleep schedule---even on weekends.
- Get regular exercise---avoid exercise in the late evening.
- Go to bed only when you are sleepy.
- Put your worries away when you go to bed.
- Do something relaxing and enjoyable before bedtime.
- Make your bedroom quiet and comfortable.
- Avoid large meals just before bedtime.
- Use your bedroom only for sleep and sexual activity.
- If you do not fall asleep within 15 to 20 minutes, get up and go to another room. Return to bed only when you feel drowsy.
- Remove your clock from sight.
- Do not nap during the day. If you must nap, do so only for 30 minutes in the early afternoon.
- Avoid alcohol, nicotine, and caffeine.
- Avoid frequent use of sedatives.
- Spend time outdoors at the same time each day.
- Have your pharmacist check your medicines, in case any of them keep you from sleeping.
- Avoid bright lights from the TV, computers, video games, etc. before bed.

Adapted from Jermain DM. Sleep disorders. *PSAP*. 1995:139-154.

What If Good Sleep Habits Don't Help?

If you or your child is still not getting a full night's sleep, even with good sleep habits, you should talk to your pharmacist or other health care provider. He or she will need to figure out the cause of your insomnia. A medicine may be needed. Even if medicine is used for insomnia, you should still keep up good sleep habits.

[March 2012]

The Truth About Testosterone

There are lots of commercials on television talking about “low T” or low testosterone. While low testosterone can happen in younger men, it is more common in older men. This is because your body naturally makes less testosterone as you get older. Around one in five men over 65 may have low testosterone.

What are some of the symptoms of low testosterone levels?

Low testosterone can cause you to feel tired and weak. You may also develop sexual problems and your body shape may change. Some men have trouble concentrating and are irritable. However, other conditions can lead to these symptoms so it may be hard to tell what is causing the problem. Also, it's important to know that as you get older it's natural to not have as much interest in sex.

How will testosterone help me?

If you have low levels, testosterone therapy may help you feel better and gain muscle. It may also increase your interest in sex. In a few men, it may help them get and maintain an erection, but this isn't common.

What treatments are available?

Testosterone comes as pills, injections, gels, patches, and pellets (U.S. only) that can be placed under your skin. There isn't one right type for everyone. Talk to your prescriber about which one may be best for you. Some products are easier to use than others.

What side effects can testosterone cause?

Testosterone can increase your red blood cell counts so you will need to have your blood checked regularly. It can also cause breast tenderness, increase the size of your prostate and worsen problems urinating, and cause swelling in your legs. There is some concern that testosterone can increase the risk of heart attacks, but this hasn't been proven. To be safe, if you have heart disease, your prescriber may not want you to take testosterone.

If I think I have low testosterone what should I do?

If you think you have low testosterone, make an appointment with your prescriber. They can draw blood to see if your problems are due to low testosterone. It's best to get your blood drawn in the morning. This will need to be done a couple times to make sure the results are correct. If you end up taking testosterone, you will need to have blood drawn to make sure you're getting the right dose and aren't having any problems. Testosterone therapy doesn't help all men. After you've been taking it for a while, sit down with your prescriber and decide whether it's working for you.

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What You Should Know About Colon Cancer

Why should I be concerned about colon cancer?

Colon cancer is the second leading cause of cancer death. More than half of deaths from colon cancer could be **prevented with screening**. However, one out of every three adults is not up-to-date with screening.

How does colon cancer develop?

Colon cancer starts as a growth or “polyp” on the lining of the colon. If the polyp is removed, the cancer may be prevented.

What are the symptoms of polyps or colon cancer?

Changes in bowel habits, blood in the stool, stomach pain, or weight loss may be signs of colon cancer. But many people don't have any symptoms. This is why it's so important to get screened.

Who is at risk of getting colon cancer?

The risk goes up as you get older. Most people should get screened starting at age 50.

People at higher risk may need to get screened earlier. You may be at higher risk if:

- you are African American
- you have inflammatory bowel disease
- you or a family member has had polyps
- you have certain inherited genes or colon cancer

Certain lifestyle habits can also increase the risk of colon cancer. Here are some things you can do to help reduce your risk:

- limit how much red meat (beef) and processed meat (hot dogs, deli meat) you eat
- keep a healthy weight
- eat plenty of fruits and vegetables
- stop smoking
- stay active
- avoid heavy alcohol use

How can I get screened for colon cancer?

A doctor can look at your colon with a camera (colonoscopy). Or you can use a test that looks for blood in your stool. Each of these tests has pros and cons. Talk with your health care provider to find out which is best for you.

If you have a colonoscopy, you'll need to take medicine called a “bowel prep” to clean out your colon beforehand. This will help your doctor see the lining of your colon very clearly during the test. You must follow the directions for taking it so any polyps or cancer don't get missed.

You will also need to drink plenty of fluids to keep hydrated and avoid any red or purple liquids that could be mistaken for blood in your colon. Taking a “bowel prep” is not always pleasant, but it is important to do it correctly. Ask your pharmacist or prescriber for tricks to make the bowel prep easier to tolerate.

Where can I learn more about colon cancer?

Centers for Disease Control and Prevention
800-CDC-INFO (800-232-4636)
www.cdc.gov/cancer/colorectal/

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Tips for Correct Use of Inhalers

Inhaler devices deliver medicine directly into the lungs. This is different from most pills or shots, which send medicine into the whole body. It is important for you to use your inhaler correctly so the medicine works best.

Are all inhalers the same?

There are different types of inhaler devices. One main type is called a “metered-dose inhaler.” These have a spray like an aerosol can and usually require you to press down on a canister or button at the same time you are breathing in. Usually you need to breathe in slowly and deeply. Most require shaking before use and “priming” (one or more test sprays).

Another main inhaler device is called a “dry-powder inhaler.” These usually require you to breathe in quickly and deeply to pull the powdered medicine from the inhaler into your lungs. They should not be shaken.

There are different instructions for different inhalers, so it is very important for you to know how to use the specific inhaler that’s prescribed for you.

How can I learn to use my inhaler?

Your prescriber or pharmacist can show you the exact steps for using your inhaler. He or she can tell you whether or not to shake the inhaler before use, if it needs to be primed or cleaned, how to store it, and how to keep track of how many doses of medicine are left. You’ll also find instructions in the packaging that have all of this information.

Consider bringing your inhaler to the pharmacy or to appointments with your prescriber. You can show how you use it. Then your pharmacist or prescriber can give you tips if you are having any problems.

What do I need to know if I use more than one inhaler?

If you use more than one inhaler regularly, it is important to use them in a certain order. This will help them work better.

- One inhaler **relaxes and opens the airways** in your lungs (**bronchodilator**).
- Another inhaler **decreases swelling in the airways** of your lungs (**steroid**).
- **Always use the bronchodilator first.**
- After using the **steroid** inhaler, **rinse your mouth with water and spit it out.**

How do I keep from running out of my inhaler?

Make sure you always have enough medicine in your inhaler. Most inhalers have dose counters that count down each time you use a dose. If your inhaler does not have a dose counter, you’ll need to keep track of how many doses you have used. Some inhalers expire a few weeks or months after they are removed from the manufacturer’s packaging, such as a foil pouch. Your pharmacist will tell you the last date you should use these inhalers.

Don’t wait until your last dose is used or until the last day your inhaler is good to order a new one. Give yourself enough time so you are never without these important medicines.

How should I store my inhaler?

Always keep your inhaler at room temperature. If you are going out and may need your inhaler, keep it with you (on your person). Do not leave your inhaler where it might get too hot or too cold, such as in the car.

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Back Pain Self-Care

Do I need an x-ray, CT, or MRI of my back?

Most patients do not need images (x-rays, etc) taken of their back. These images are not often helpful for patients with acute low back pain. They can lead to unneeded or even harmful procedures. They are also costly. X-rays and CT scans expose you to radiation. Your prescriber will ask you questions and do an exam to decide if you need images.

What can I do to help the pain?

- Remain active. Keep doing your normal activities to the extent possible.
- If you sit at work, stand up and move around for a few minutes every half hour.
- Apply a heating pad or heated blanket, or cold pack to your back for only 15 to 20 minutes at a time. Use what works for you. You can alternate heat and cold. Do not apply heat or cold directly to your skin. Be extra careful if you have decreased feeling on your skin and can't tell if something is too hot or too cold.

Do I need pain medicine?

Pain meds can help reduce pain so you can keep active and do your normal activities. Narcotic pain meds have *not* been shown to work better than acetaminophen (*Tylenol*), ibuprofen (*Motrin*), or naproxen (*Aleve*) for low back pain. Narcotic pain meds can make you sleepy or groggy. This can keep you from staying active and slow your recovery. You may not need any pain medicine at all. If you do, your prescriber or pharmacist can fill in the dose and instructions here:

Do I need a muscle relaxer?

Muscle relaxers have *not* been shown to work better than acetaminophen (*Tylenol*), ibuprofen (*Motrin*), or naproxen (*Aleve*) for low back pain. Muscle relaxers can make you sleepy or groggy. This can prevent you from remaining active and slow your recovery. But a short course may be prescribed if a pain med is not enough. Your prescriber or pharmacist can fill in the dose and instructions for your muscle relaxer here:

Do I need physical therapy?

Your prescriber might recommend chiropractic, massage, yoga, physical therapy, or other therapy, especially if your back pain doesn't get better within a few weeks.

How long will my back pain last?

Most patients are pain-free in two to four weeks.

When should I call my prescriber?

Seek medical care if your symptoms get worse, new symptoms appear, or you are not improving.

What can I do to prevent back pain in the future?

- Ask your prescriber what kind of exercise would be best for you.
- Maintain a healthy weight.
- Maintain good posture when sitting or standing.
- Lift with your legs, not your back.

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