Health Promotion & Wellness

January 2018



Photo by the U.S. Navy







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Health Observance

Now Is the Perfect Time to Get ShipShape!

The ShipShape Program is the official Navy weight management program, open to active duty and reserve military service members, their beneficiaries, and government civilians. The program is recommended for service members who are out of body composition standards or are at risk for failing the body composition portion of the Physical Readiness Test. The program is offered over an eight week period, and covers a variety of topics that can help provide education about dietary and lifestyle changes to encourage weight loss or help maintain a healthy weight. The program provides emphasis on three core pillars: nutrition, physical activity, and behavior. ShipShape begins with an introductory online session, followed by six face-to-face group sessions, and ends with a final online session, and participants have up to 6 months to complete all 8 sessions. At the conclusion of the program, participants are armed with scientifically sound diet and lifestyle knowledge to help them meet their goals.



All Military Treatment Facilities (MTFs) are required to offer the ShipShape program and most MTFs have several sessions throughout the year. The initial online session (Steps to Success) is the starting point for participants to become registered in the program, however, the remaining 7 sessions can be completed in any order, to allow for continuous enrollment of new participants throughout the year so you can get started on the journey to better health. Other local commands may also offer ShipShape courses that are open to others, however, the best starting point for finding the ShipShape program closest to you or your family will be to contact the closest MTF. Additionally, if you would like to get a ShipShape program started at your command, become a ShipShape Facilitator and help others reach their goals!

Click here to learn more about the ShipShape program and how to become a Facilitator.

Health Promotion News and Resources

Helping Your Patients With High Blood Pressure? Technology Works Great!

The Community Preventive Services Task Force (CPSTF) has found that interactive digital interventions actually do help improve blood pressure control for people with high blood pressure. Web-based programs, phone apps, calling patients, and secure messaging can all help with decreasing blood pressure. About 1 of 3 US adults have high blood pressure and only about half of them have it under control. Lowering blood pressure by changes in lifestyle or medication can reduce the risk of heart disease and heart attacks. The use of digital interventions can also reduce the number of in-person clinic visits needed to encourage patient self-management and achieve blood pressure control.

It didn't matter whether the digital interventions are used as a central component of self-managed blood pressure monitoring or if it provided additional support for patients, the decrease in blood pressure was still observed.

For more information and references, check out https://www.thecommunityguide.org/sites/default/files/assets/OnePager-CVD-Digital-Interventions.pdf

For great resources to help educate, motivate, and monitor patient's cardiovascular health, check out https://millionhearts.hhs.gov.



New Blood Pressure Guidelines: Know Your Numbers

These updated guidelines were influenced by the National Institute of Health's Systolic Blood Pressure Intervention Trial (SPRINT). This trial ended early due to the overwhelming evidence in support of more intensive blood pressure interventions. This involved over 9,000 people who were followed in over 90 clinics across the United States over 4-8 years. The new guidelines are the following:

New Categories

Normal: 120 or less/80 or less Elevated: 120-129/80 or less Stage I Hypertension: 130-139/80-89

Stage II Hypertension: 140 or higher/90 or higher
Hypertensive Crisis: Higher than 180/higher than 120

The most significant impact is anticipated in adults age 20-44, which clearly consists of our active duty population. The

KNOW YOUR BLOOD PRESSURE

-AND WHAT TO DO ABOUT IT

By AMERICAN HEART ASSOCIATION NEWS

Systolic
Diastolic

120 mmHg

80 mmHg

120 - 129 mmHg

80 mmHg

130 - 139 mmHg

80 - 89 mmHg

 $\geq \! 140$ mmHg

> 90 mmHg

The newest guidelines for hypertension:

NORMAL BLOOD PRESSURE

*Recommendations: Healthy lifestyle choices and yearly checks.

ELEVATED BLOOD PRESSURE

*Recommendations: Healthy lifestyle changes, reassessed in 3-6 months.

HIGH BLOOD PRESSURE / STAGE 1

*Recommendations: 10-year heart disease and stroke risk assessment. If less than 10% risk, lifestyle changes, reassessed in 3-6 months. If higher, lifestyle changes and medication with monthly follow-ups until BP controlled.

HIGH BLOOD PRESSURE / STAGE 2

*Recommendations: Lifestyle changes and 2 different classes of medicine, with monthly follow-ups until BP is controlled.

*Individual recommendations need to come from your doctor. Source: American Heart Association's journal Hypertension Published Nov. 13, 2017 biggest emphasis should be on lifestyle changes. These include: weight loss, DASH Diet, lower sodium goals, higher potassium intake goals, increase physical activity, stress reduction, and limited alcohol use

Visit <u>Systolic Blood Pressure Intervention</u> Trial for additional information.

Stay tuned for updated resources to support your efforts during February's Heart Health Month!



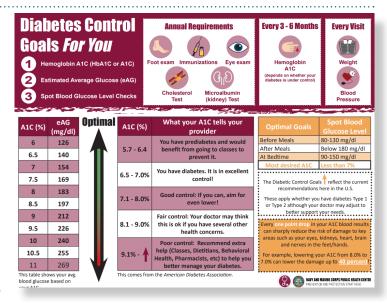




New Diabetes Resource Available: Diabetes Control Goals for You Help your patient understand what their A1C means

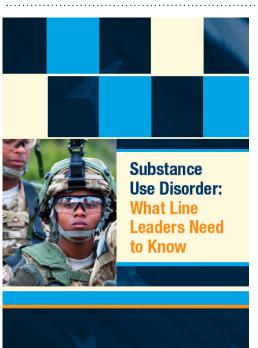
Have you ever had a patient with diabetes give you a blank stare when you tell them their "A1C" number? Sure, they may understand their goal for A1C is 7 or below, but do they understand what that number means? The Navy and Marine Corps Public Health Center designed the "Diabetes Control Goals for You" poster to guide discussions about blood sugar goals that occur between the patient and their provider, nurse, or health educator. The poster includes recommendations developed by the U.S. Department of Veterans Affairs/ Department of Defense, American Diabetes Association, Joslin Diabetes Center, and guidelines from the American College of Endocrinology.

The poster provides helpful information to individuals with diabetes about their blood sugar goals before and after meals, and what they can expect during their medical appointment.



You can download and print the "Diabetes Control Goals for You" poster here: https://www.milsuite.mil/book/docs/DOC-425753

Substance Use Disorder Alcohol Resources



Looking for up-to-date resources on alcohol use and misuse? Check out the new military specific resources below.

Substance Use Disorder: What Line Leaders Need to Know

http://www.pdhealth.mil/sites/default/files/images/docs/SUD-Tool-for-Line-Leaders 090616 4x6.pdf

Substance Use Disorder Affects Families

http://www.pdhealth.mil/sites/default/files/images/docs/SUD FamilyTool 090616.pdf

Alcohol Misuse: Facts About Risky Drinking

http://www.pdhealth.mil/sites/default/files/images/docs/AlcoholMisuse 082416 FINAL.PDF

Standard Drink Calculator

http://www.pdhealth.mil/sites/default/files/images/docs/PopHealth

DrinkCalculator 082616 FINAL.PDF





Getting Ready to Start Your New Year's Exercise Program? Remember to Gradually Accelerate Your Program

What are some of the most common causes for work out- physical training, or sports-related injuries? Since injuries are our leading health and readiness threat to the armed forces, we continue to place great emphasis on studying what is causing these physical training workout injuries. Listed on the graph are several of the most common physical training injury risk factors we see in the US Armed Forces identified in published literature. These injury risks can be divided into the internal/intrinsic risk factors and external/extrinsic risk factors (see chart).



Once the service member enters the Armed Services, as evidenced by published research, there are several injury risks identified but some of the primary ones we consistently identify in published literature are overtraining, low aerobic fitness

levels and inadequate physical activity participation prior to consistent exercise. The body becomes fatigued and overloaded, and the stress incurred by the body manifests itself as an injury.

If a service member has not worked out in a long time, the body needs a minimum of 3 months and optimally 6 months of gradual performance training to advance from foundational fitness (improving body movement skills and effectively aligning the brain – nerve – muscle communication system (neuromuscular system)) to then building strength and endurance and then power.

When the body is out of physical condition, it fatigues more quickly. Fatigue alters movement patterns putting stress on parts of the body that are unaccustomed to it. Once fatigue sets in, training technique and form is compromised. Fatigue reduces the body's ability to absorb load. If the body cannot absorb the stress incurred by the physical training workout, then the service member is at great risk for obtaining an overtraining type of injury.

REFERENCES:

- (1) Knapik JJ, J Spec Oper Med 2015 Spring; 15(1): 123-7.
- (2) Molloy, Mil Med, Vo. 181, June 2016.



GREAT LAKES, III. (2017) A U.S. Navy Recruit participates in a 12-minute sustained run at Freedom Hall fitness center onboard Recruit Training Command (RTC). Recruits participate in physical training six days a week while stationed at RTC. About 30,000-40,000 recruits graduate annually from the Navy's only boot camp. (U.S. Navy photo by Chief Petty Officer Seth Schaeffer/Released)

Jan 2018



Training and Events

Our education and training programs equip Navy and Marine Corps command personnel with the tools, education and programmatic materials required to deliver best-practice programs and interventions at the local command level.

The <u>2018 NMCPHC Health Promotion and Wellness Training</u>
<u>Posted Courses</u> are now open for registration.

For questions or more information on Health Promotion trainings, email <u>usn.hampton-roads.navmcpubhlthcenpors.list.nmcphc-hpw-training@mail.mil</u>.

For questions on <u>ShipShape</u>, <u>Tobacco Cessation</u>, and <u>Sexual Health</u>, please visit those respective pages. Additional training opportunities outside of HPW can be found in the <u>Catalog of Supplemental Training</u>.

Upcoming Training FY18



- HP Advanced Training, Feb 12-13, NEPMU-2, Norfolk, VA
- Tobacco Cessation Facilitator Training, Feb 14, NEPMU-2, Norfolk, VA
- ShipShape Program Facilitator Training, Feb 15, NEPMU-2, Norfolk, VA
- HP Advanced Training, Aug 14 & 15, NEPMU-2, Norfolk, VA.
- Tobacco Cessation Facilitator Training, Aug 16, NEPMU-2, Norfolk, VA
- ShipShape Program Facilitator Training, Aug 17, NEPMU-2, Norfolk, VA

Contraceptive IUD and Implant Training

This training is sponsored by the BUMED Office of Women's Health and Family Planning Working Group in collaboration with the non-profit Association of Reproductive Health Professionals and Merck & Co., Inc. Eligible participants will receive handson training in the placement of three intrauterine devices (IUDs) and training in the placement of the subdermal hormonal implant (Nexplanon).

Thursday, 1 Feb 2018: 0800-1600 Naval Health Clinic Quantico; 3259 Catlin Avenue Quantico, VA 22134 Classrooms 1-4 Friday, 2 Feb 2018: 0800-1500 Naval Health Clinic Annapolis, 695 Kinkaid Road Annapolis, MD 21402 SEAT Classroom 1 and 2.

Click "Registration Form/Quota Request" AND if signing up for the afternoon NEXPLANON session, ALSO complete and return the NEXPLANON Training form for this location: http://www.med.navy.mil/sites/nmcphc/health-promotion/reproductive-sexual-health/Pages/navylarctraining2014.aspx

For more Information:

- -- LCDR Steven A. Starr, Naval Health Clinic Quantico, 703-784-2906; steven.a.starr2.mil@mail.mil
- -- CDR Carla Pappalardo, Clinic Manager, Naval Health Clinic Annapolis; (410) 293-1216; carla.a.pappalardo.mil@mail.mil

Suicide Audio Webinar Is Up

The September NMCPHC webinar with N171 Captain Smith, MSC, "From Awareness to Action: Lessons Learned from Navy's Annual Cross Disciplinary Case Reviews," is now posted. Both the audio and the slides are available and can be viewed at the following link: https://www.med.navy.mil/sites/nmcphc/health-promotion/Pages/webinars.aspx

