

Get It Done Health Guide



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PLAINSMAN

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Understanding type 1 diabetes

Diabetes affects millions of individuals across the globe. For some, navigating the differences between the various types of diabetes can be confusing. Unlike type 2 diabetes, which is largely linked to lifestyle factors and insulin resistance, type 1 diabetes is a chronic autoimmune disorder. By learning more about type 1 diabetes, individuals can better understand what they must do to stay healthy.

According to the American Diabetes Association, when a person has type 1 diabetes, his or her immune system mistakenly treats the beta cells in the pancreas, which are responsible for creating insulin, as foreign invaders and destroys them. When enough of these beta cells are obliterated, the pancreas cannot make insulin or makes so little that additional supplemented insulin is needed to survive. Type 1 diabetes is typically diagnosed in childhood. However, the condition can manifest at any age.

Insulin is an essential hormone that is normally produced in the



pancreas. The Cleveland Clinic says its role is helping the body turn food into energy and managing blood sugar levels. If the pancreas does not make enough insulin, or if the body can't use it properly, blood sugar levels can rise. Such a condition is known as hyperglycemia.

Insulin can be characterized as the key that opens the doors of the cells in the body so that glucose can leave the bloodstream and move into the cells to use it for energy. Without that key, the glucose builds up in the bloodstream and can be life-threatening.

Why type 1 diabetes occurs is not fully understood, but doctors believe it involves a combination of genetic and environmental factors. Researchers have identified some genes that may increase susceptibility to the condition, namely genes related to the immune system. Other researchers believe that viral infections can provoke an immune system response that plays a role in the onset of type 1 diabetes.

The ADA also says that individuals with a family history of type 1 diabetes may be at higher risk. A doctor may suggest screening that includes a blood test to measure islet antibodies, markers that appear when insulin-producing beta cells in



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Effective ways to manage emotions

Every person experiences different emotions at various points in their lives. Emotions can be fleeting or exhibit some staying power. Emotional reactions are part of being human, but sometimes people may have trouble managing their emotions, particularly those that are considered unsavory.

It's possible to regulate emotions without suppressing them, and such an approach can positively affect mood, relationships and even decision-making. The following are some simple strategies to manage emotions.

- Recognize that emotions develop for a reason. Before being too hard on oneself, PsychCentral says it is important to understand that emotions happen for a reason. There's no such thing as a "bad" emotion, and it is important to find ways to accept your emotions when they come whether you like them or not.

- Understand upbringing affects emotions. People begin to learn how to manage their emotions during childhood, says Medical News Today. As babies are not able to self-regulate emotions, they learn from parents and other caregivers. Those who grew up in unsupportive environments during childhood may have difficulties managing their emotions and more

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the pancreas have been damaged. A positive result does not mean one has type 1 diabetes, but the chances for developing diabetes are higher.

Common symptoms of type 1 diabetes include:

- excessive thirst
- frequent urination
- unintentional weight loss
- fatigue
- blurred vision
- itchiness around the genital area, or regular bouts of yeast infection
- irritability and other mood changes
- children who never wet the bed at night may start doing so

A comprehensive approach to health is needed to manage type 1 diabetes. The cornerstone is insulin therapy, as patients must regularly administer insulin through injections or an insulin pump. Individuals must carefully monitor blood glucose levels through finger-stick tests or continuous glucose monitors. Insulin doses must be coordinated to these readings and also based on factors like stress, physical activity and diet.

Those with type 1 diabetes often have to change eating patterns, particularly reducing carbohydrate consumption, as carbs have the most direct impact on blood glucose levels. Working with a registered dietician could help.

Long-term implications of poor type 1 diabetes management can include cardiovascular disease, neuropathy, retinopathy, and kidney problems, reports the Mayo Clinic. Adherence to treatment plans is essential.

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EMOTIONS:

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issues with self-regulation than those who were reared in supportive homes.

- Practice self-care. Self-care activities like exercising, getting adequate sleep, eating well, and engaging in hobbies can support emotional well-being and help tone down more intense emotions, says Verywell Mind.

- Turn on some music or change scenery. Focusing attention outward is a way to tap into something tangible to help manage emotions, as emotions themselves are intangible. Often simply directing focus off of the emotions themselves and onto something else can help reduce the intensity of one's feelings.

- Employ deep breathing. Breathing techniques can help restore balance to emotions. A 2018 systemic review published in *Frontiers in Human Neuroscience* found deep breathing activities activate the parasympathetic nervous system, which helps the body relax and restore balance. The "box breathing" method can help. Inhale slowly for four seconds. Hold your breath for four seconds, trying to avoid inhaling or exhaling. Then, slowly exhale through the mouth for four seconds. Hold your breath again for four seconds.

- Keep a mood journal. Writing things down can help people identify patterns of behavior or triggers that heighten emotions. Once triggers and patterns of emotions are established, people can take steps to elicit change, such as stepping away from hostile conversations.

Emotions are part of human behavior, and it is possible to better manage them for emotional and physical well-being.

What to expect at your next eye exam

Regular eye examinations are important components of a personal health regimen. Visiting an eye doctor can alert a person to potential vision impairments, and certain symptoms that show up in the eyes could be indicative of notable health problems. The American Academy of Ophthalmology says everything from brain tumors to aneurysms to high cholesterol can be detected in the eyes.

For those who do not have any apparent vision problems, most doctors recommend following a chart based on age. The insurance experts at Aetna suggest the following age-based intervals:

- Ages 20 to 39: Every five years
- Ages 40 to 54: Every two to four years
- Ages 55 to 64: Every one to three years
- Ages 65 and up: Every one to two years

Individuals who wear glasses or contact lenses, have a family history of eye disease, or have a chronic condition that puts them at risk for eye disease, like diabetes, should get vi-

sion exams more frequently.

Despite the significance of eye exams, many people do not visit an eye doctor until something is amiss with their vision or eyes. Perhaps individuals would be inclined to visit the eye doctor more frequently if they knew what to expect during an exam. Here's what people can expect the next time they step into a private eye doctor's office or a vision center, courtesy of The Cleveland Clinic and Warby Parker.

- Visual acuity: The eye doctor will ask you to read an eye chart while looking through a device called a phoropter. This device has several lenses that can be adjusted to help you see better and find the right corrective lens prescription.

- Visual field: The doctor will check peripheral vision by holding up a finger or an object and moving it gradually to the side of your face. Additional movements may include up and down. Some offices use a computer program to conduct this test.

EYE EXAM / Page 5

Shockwave Therapy

Shockwave therapy represents a revolutionary approach to medical treatment, offering a non-invasive and effective alternative for a wide range of conditions. This innovative technique utilizes powerful acoustic waves to address a range of medical conditions, from musculoskeletal disorders to chronic pain management.

Here are some of the key applications of shockwave therapy:

1. **Orthopedics:** Shockwave therapy is widely used to treat conditions such as tendinitis, plantar fasciitis, and calcific shoulder tendinopathy.
2. **Sports Medicine:** Athletes often turn to shockwave therapy to expedite the healing process of sports-related injuries.
3. **Chronic Pain Management:** Individuals suffering from chronic pain conditions like fibromyalgia and myofascial pain syndrome find relief through shockwave therapy.



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EYE EXAM: From Page 4

- **Automatic refraction:** Visual acuity can be measured with this test, during which an autorefractor shines light into the eye and measures the eye's response. It's commonly used with children or adults who may struggle to communicate what they're seeing.

- **Pupil function:** The eye doctor will briefly shine a handheld light into each eye and then move the light away to watch how the pupils constrict and dilate.

- **Slit lamp exam:** This test involves a slit lamp, which is a type of microscope that enables the eye doctor to see the eyes in close detail.

- **Tonometry measurement:** Glaucoma occurs when intraocular pressure is high. Some eye doctors will conduct tests to determine the pressure. One way is with a non-contact tonometry test, which is a puff of air squirted at each eye. With applanation tonometry, the doctor first administers a mild numbing agent to the eye, and then uses a pressure-sensitive instrument to gently tap on the surface of the eye to get a pressure reading. A rebound tonometry test requires a handheld device that makes brief contact to the eye and doesn't require local anesthesia.

- **Pupil dilation:** The eye doctor will administer eye drops that dilate the pupils, which enables a better view of the retina, optic nerve, cornea, and surrounding blood vessels during an ophthalmoscopy.

Debunking myths surrounding breast cancer

Events like National Breast Cancer Awareness Month and the Susan G. Komen® MORE THAN PINK Walk® have been integral to raising awareness about the most commonly diagnosed cancer in women across the globe. Though such campaigns and events have helped many women better understand breast cancer and their own risk for the disease, certain myths surrounding breast cancer persist. Such myths are not harmless and can, in fact, lead to unsafe outcomes that jeopardize women's health.

Questions about breast cancer should always be directed to a physician. Though physicians may not have all the answers, they remain useful allies in the fight against a disease that the World Cancer Research Fund International reports will be discovered in roughly three million women this year. As women seek more knowledge of breast cancer, it can be just as important to recognize some common myths surrounding the disease.

Myth: MRIs are more effective than mammograms.

The National Breast Cancer Coalition notes that no evidence exists to support the assertion that a magnetic resonance imaging exam is a more effective screening test for breast cancer than a mammogram. The NBCC acknowledges that an MRI can be an effective diagnostic tool when doctors suspect something is wrong. However, the NBCC advises against using MRI to screen for breast cancer since it is more likely to yield a false-positive result than a mammogram. Indeed, the National Breast Cancer Foundation identifies mammography as the gold standard for the early detection of breast cancer.

Myth: Breast size and breast cancer risk are connected.

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Why it pays to take care of your dental hygiene

The importance of maintaining dental hygiene is emphasized from the time most people are small children. Indeed, parents start early by cleaning kids' teeth the moment the first one pushes its way through a baby's gums, and that hopefully kick-starts a lifelong devotion to dental care.

Appearance may be the main reason why many people prioritize dental hygiene, and few things set as strong an impression as a set of pearly whites. But health is another notable reason to make dental hygiene a priority. It goes without saying that dental health is adversely affected by poor dental hygiene habits, but the rest of the body also can suffer when individuals don't take time to care for their teeth.

- **Cardiovascular disease:** The American Academy for Oral & Systemic Health reports that poor dental hygiene and inflammation of the arteries are directly linked. That's because bacteria from the mouth enters the blood-

stream and causes the arteries to harden, thus increasing a person's risk for stroke or heart attack.

- **High-risk pregnancy:** Women should know that taking care of their teeth could be a notable way to protect their unborn children. A 2021 study published in the journal BMC Pregnancy and Childbirth found that periodontal disease is strongly associated with premature birth. Authors of the study note that premature birth is associated with a host of negative outcomes, including perinatal mortality, immature lung development, reduced feeding ability, and inferior weight gain.

- **Respiratory issues:** The mouth is vulnerable to bacteria growth, which is one reason why daily measures like brushing and flossing are so important. The AAOSH notes that once bacteria reaches the lungs, an individual's risk for infections, bronchitis, pneumonia, and other respiratory issues increases.

BREAST CANCER:

This myth typically suggests breast cancer is more common in women with large breasts. The NBCF notes there is no connection between breast size and breast cancer risk. Breast density, not size, may be associated with a greater risk for breast cancer. The Mayo Clinic notes dense breast tissue refers to the ways breast tissue appears on a mammogram. Women with dense breasts, which the National Cancer Institute notes affects roughly half of all women over age 40, are at higher risk for breast cancer because the dense tissue makes screening for the disease more difficult. But breast size and breast density are not one and the same.

Myth: Most breast cancer patients have a family history of the disease.

The NBCC notes that roughly 15 to 20 percent of women diagnosed with breast cancer report a family history of the disease. Assuming only those with a family history are vulnerable to breast cancer gives women with no such

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background a false sense of security, which may discourage them from taking measures to lower their risk.

Myth: All breast lumps are cancerous.

The NBCF indicates only a small percentage of breast lumps end up being cancerous. Lumps should never be ignored, and should be reported to a physician immediately. But it's important to avoid jumping to conclusions after finding a breast lump. A clinical breast exam can determine what's behind the lump, and women who discover a lump should remain calm until such an exam is conducted.

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