

HEALTHY LIVING

Wellness Newsletter from **AAOA**

March 2014

Healthy Eyes Start with a Comprehensive Eye Exam

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Vision Quick Facts

Facts about your vision you
might not know.

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Mini Veggie Frittatas

These easy and healthy mini frittatas
are sure to please your brunch guests.

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Mini Veggie Frittatas

These look pretty with green and red vegetables. You can have them for a snack - or for breakfast with some whole-grain toast.

Ingredients

- Cooking spray
- 12 slices zucchini, 1/8-inch thick
- 1/4 cup finely-chopped red bell pepper
- 1 large green onion, white and part green, finely chopped
- 5 large eggs
- 1/4 teaspoon salt, if desired
- 1/4 teaspoon freshly-ground black pepper
- 1/4 teaspoon oregano leaves
- 1/2 cup shredded, reduced-fat sharp cheddar cheese
- 1/2 cup finely-sliced fresh mushrooms

Preparation

Preheat oven to 400 degrees F. Spray 12 muffin cups with cooking spray.

Add a zucchini slice to the bottom of each prepared muffin cup. Distribute bell pepper and green onion evenly between the 12 muffin cups.

In mixing bowl, beat eggs, salt (if using), pepper and oregano on medium-low speed until completely blended, about 2 minutes. Spoon about 1 1/2 tablespoons of the egg mixture into each of the muffin cups.

Sprinkle the cheese evenly over the top of the egg mixture. Divide mushrooms evenly across tops.

Bake until frittatas are set, about 10 to 12 minutes. Use a small rubber scraper to remove the frittatas from the pan and serve warm.

Nutrition Facts

Yields 6 Servings (2 frittatas per serving)

Amount Per Serving

Calories 83g	Fiber 1g
Fat 4g	Protein 8g
Sodium 119mg	Carbs 2g

Understanding COPD

COPD is the No. 3 cause of death in this country - and it's on the rise, according to the National Institutes of Health.

Q. What is COPD?

A. COPD stands for *chronic obstructive pulmonary disease*. It refers to a group of diseases that make it hard to breathe - and can get worse over time. The two most common forms are emphysema and chronic bronchitis.

Normally, the airways and air sacs in your lungs are stretchy — like a balloon. When you breathe in, the air sacs fill up. When you breathe out, they deflate.

With COPD, the airways and air sacs lose their elastic quality, get damaged, or become thick and inflamed. That makes it harder to breathe in and out.

Q. What are the symptoms?

A. Often the main sign is an ongoing cough, typically with a lot of mucus. Another common symptom is shortness of breath. In fact, people with COPD may start avoiding everyday activities because they make them feel breathless.

Other symptoms to look for include:

- *Feeling like you can't breathe deeply enough*
- *Wheezing*
- *Feeling tired*

Q. What causes COPD?

A. Leading the list: smoking. Breathing in secondhand smoke is also a danger.

COPD can be caused by long-term exposure to things that irritate your lungs, such as:

- *Chemical fumes*
- *Dust*
- *Air pollution*

Avoiding these irritants can help reduce your risk of COPD.

Q. Can it be treated?

A. Currently, there is no cure for COPD, but treatment can slow the disease's progress and help you lead a longer and more active life.

If you smoke, the most important step is to quit. If you have trouble quitting, talk with your doctor. He or she can help you come up with a plan to stop. See "Stop smoking: Questions for your doctor."

As part of your treatment, your doctor may recommend you take other steps, such as these:

- *Avoid lung irritants - including secondhand smoke.*
- *Take medicines to reduce the swelling of the airways.*
- *Start a regular exercise program. Your doctor may also suggest you enroll in pulmonary rehabilitation. This type of therapy is designed to help you improve your breathing and stamina, so you can stay as active as possible.*
- *Work with a registered dietitian on a plan for better nutrition. COPD can make daily activities tiring - that includes planning, preparing and even eating meals.*

Join a support group to learn how others cope with COPD.

Healthy Eyes Start with a Comprehensive Eye Exam

Eye problems are the second most common health concern in the United States. Adults between 18 and 60 years of age should get an eye exam every one to two years. Illnesses such as diabetes or hypertension as well as a family history of eye illnesses like glaucoma can raise your chances of having vision problems.

Through a dilated eye exam, eye doctors can look inside your eye. This may show early signs of chronic illnesses. These signs can be seen in the eyes before other parts of the body are affected. This lets treatment start early, even before you know there is a problem. Eye doctors can help you find a primary care doctor to care for illnesses found during your exam. They are part of your team for ongoing care to watch for changes in your conditions.

Chronic conditions that may be found during an eye exam include:

Arcus	Herpes Zoster	Pseudotumor Cerebri
Cataract	High Cholesterol	Rheumatoid Arthritis
Crohns' Disease	Hypertension	Sarcoidosis
Cytomegalovirus	Hypertensive Retinopathy	Sickle Cell Anemia
Diabetes	Juvenile Rheumatoid Arthritis	Sjogrens' Disease
Diabetic Retinopathy	Lupus Lyme Disease	Tumors
Glaucoma	Macular Degeneration	
Graves' Disease	Multiple Sclerosis	

Your symptoms could indicate something more.

If you have headaches, eye strain, or blurry vision, a new eyeglass prescription could help. These issues could also be signs of more serious problems. Many medications can cause eye side effects. The only way to know for sure is to have a yearly eye exam.

Schedule a comprehensive eye exam for you and your family.

www.aaaohealthcare.org



Vision Quick Facts

The eye is made up of muscles, nerves and blood vessels.

There is a direct connection between the eye and the brain.

Many diseases that affect muscle, nerve and circulatory systems will show up in the eye.

Annual Eye Exams Help Detect & Monitor

Vision disorders
Eye muscle coordination
Eye diseases*
Warning signs or early identification of health conditions*

*Vision screenings have limitations and do not detect these items.





Sheridah Bennett
(AAOA Wellness Champion)

Wellness Tip

Clean It Like You Mean It

Give routine chores some added oomph. Instead of going to the drive-thru car wash, do it by hand. Or, turn on some tunes — and scrub the tub to a steady beat.

We want your feedback about the Wellness Newsletter. Please e-mail us at wellness@aoaamerica.org with any wellness tips or healthy recipe ideas.

Colorectal Cancer

The more you know about colorectal cancer, the easier it is to protect yourself from it.

Now, here are three more facts everyone should know about this disease. They could change the way you think about colorectal cancer — and may even save your life.

Fact 1. It can affect anyone.

Colorectal cancer — cancer of the colon or rectum — is one of the leading causes of cancer deaths in both men and women. It usually occurs after age 50, but it can develop earlier in life. Your risk is higher if:

- You've had polyps or colorectal cancer before
- You have a close relative who has had colorectal cancer
- You have ulcerative colitis, Crohn's disease, or a genetic condition that predisposes you to polyps or colorectal cancer
- You've had cancer of the breast, ovary or endometrium (the lining of the uterus)
- You're African-American

Fact 2. It can be stopped before it starts.

Most cancers in the colon and rectum begin as polyps. These are small growths that can turn into cancer.

A colonoscopy is a screening that allows doctors to see the entire colon. During the test, your doctor may be able to remove any polyps he or she finds. So, in this case, a medical test can actually prevent cancer from developing.

Fact 3. Screening tests save lives.

Preventing colorectal cancer is best — but catching it early matters, too. When the condition is found in its earliest stages, the chance of being cured is good, according to the Centers for Disease Control and Prevention (CDC).

Symptoms may not appear until the disease is more advanced and more deadly. That's why screening is so important.

Don't delay: Bring it up with your doctor.

For most people, regular screening should begin at age 50, but if you are at high risk, you may need to be tested earlier and more often.

AAOA HEALTHCARE

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