

# COMMUNITY HEALTH FAIR *Supplement*

MAY 4, 2013



## Understanding Key Provisions of the Affordable Healthcare Act

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**O**n March 23, 2010, President Barack Obama signed the Affordable Care Act, which puts in place comprehensive health insurance reforms that will roll out over four years and beyond. The new health care law offers clear choices for consumers and provides new ways to hold insurance companies accountable. Find answers to basic questions about the law beginning on page S4.

► COVER STORY, S4

# Protecting Social Security and Medicare for the Middle Class

By Rep. Della Bellati-Au

**D**iscussions about Medicare and Social Security reforms have once again been pushed to the forefront as Congress slogs through tough negotiations to deliver a federal budget that is both fiscally responsible and fair to the millions of working Americans who have paid into these social

insurance programs.

Unfortunately, in recent developments jumpstarted by President Obama's proposed April 2013 budget, disturbing proposals that would erode at both of these programs are now being entertained by the President and Republicans in both houses of Congress.

Among these proposals include reduction of Social Security benefits through the use of the "chained

CPI", a version of the Consumer Price Index ("CPI"), to recalculate cost-of-living adjustments.

Currently, Social Security benefits are calculated to a different version of the CPI that allows benefit levels to keep up with inflation to reflect the fact that a dollar a decade ago is not worth what it is today. The proposed use of chained CPI, however, would slow the growth of Social Security benefits considerably, not keeping pace with current price increases on necessities such as food, medicine, and energy costs.

According to AARP, "the chained CPI proposal would cut \$127 billion from Social Security benefits over the next ten years, hurting many older Americans who are already living on tight budgets stretched by prescriptions, utilities and health care costs." What does this mean for individuals? For the average 65-year old retiree, use of the chained CPI would mean a loss of more than \$650 annually after their 75th birthday and more than \$1,000 annually after

their 85th birthday.

Other proposals to Medicare include requiring wealthier seniors to pay larger shares of their Medicare Part B and D premiums, a form of means testing and a step towards having the higher costs of physician services and supplies shifted to Medicare beneficiaries.

Rather than focusing simply on cuts to beneficiaries who have paid into and contributed to both Medicare and Social Security programs with every paycheck earned, more fruitful proposals like the "Medicare Drug Savings Act of 2013" mandates drug rebates for low-income, dual eligible seniors who qualify for both Medicare Part D and Medicaid.

At its essence, the Medicare Drug Saving Act strengthens the federal government's negotiating posture and reins in costs by saving \$141.2 billion to the Medicare program. These cost-savings hit hardest those eleven largest pharmaceutical companies who have taken in over \$711 billion in profits

over the last decade.

So where do our Congressional leaders stand? All of Hawaii's delegation has gone on record opposing proposals that erode Social Security and Medicare. In particular, Congresswoman Colleen Hanabusa in August 2011 supported H.Con.Res.72 that stood up for Social Security, Medicare, and Medicaid recipients by advocating that benefits not be reduced as part of any deficit reduction package. In April 2013, Senator Brian Schatz was one of 18 Senators who co-sponsored the "Medicare Drug Savings Act of 2013."

As heated budget negotiations continue throughout the year, advocacy groups such as AARP Hawaii can be contacted at <http://www.aarp.org/states/hi> for more information and suggestions on how citizens can get involved and register their voices with elected officials on these and any budget proposals. ®

REP. DELLA BELATTI-AU is the Chair for the House Health Committee, Hawaii.



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## HEALTHLINE NEWS

### DOH, HEP Free Hawaii Promote Hepatitis Awareness

**T**he State Department of Health (DOH) and Hep Free Hawaii—a grassroots campaign which works to increase public awareness of chronic Hepatitis B and C and liver disease in Hawaii—will launch a three-month long campaign to better educate the public about the dangers of the disease.

The 90-day campaign begins May 20, 2013 and ends on World Hepatitis Day on July 28, 2013. Organizers will utilize bus ads and radio spots on KNDI.

Hepatitis is the inflammation of the liver and can be caused by different things. One

of the most common causes of chronic hepatitis is viral infection. According to the World Hepatitis Alliance, about 500 million people are currently infected with chronic Hepatitis B or C and 1 in 3 people have been exposed to one or both viruses.

"Often called the silent epidemic, most people with Hepatitis B or C don't have symptoms for many years," says DOH director Loretta Fuddy. "People with Hepatitis B and C shouldn't wait until they feel sick to be tested because there are many things, including treatment, they can do to take care of themselves before they become ill. The earlier people know they have

hepatitis, the better the outcome."

Locally, between 1 to 3 percent of people in Hawaii have Hepatitis B and approximately 23,000 are living with Hepatitis C, according to statistics from the DOH Immunization Branch estimates.

Hepatitis B and C are the most common known causes of liver cancer in Hawaii, and Hawaii has the highest rate of liver cancer in the U.S.

Hepatitis B and C are spread through contact with blood and body fluids. The U.S. Centers for Disease Control and Prevention (CDC) recommends that anyone who has been exposed to blood through needle use, blood transfusion, non-sterile equipment, or tat-

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### Congratulations to the organizers of the Community Health Fair!



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# A Medical Breakthrough

By Cynthia De Castro

**O**n March 4, 2013, CNN reported the incredible news that a baby was cured of HIV, as announced at the 2013 Conference on Retroviruses and Opportunistic Infections in Atlanta. The baby girl from Mississippi is the first child to be “functionally cured” of HIV. Filipinos the world over will be proud to know that a Filipino-American, Dr. Katherine Luzuriaga, is part of the team responsible for the amazing medical breakthrough.

“This is the very first case in which we’ve conclusively been able to document that the baby was infected and then after a period of treatment has been able to go off treatment without viral rebound,” Dr. Katherine Luzuriaga told CNN.

## Great achievement

A pediatric allergist, immunologist and professor from the University of Massachusetts, Luzuriaga revealed that the unidentified girl was born HIV-positive to a mother who received no pre-natal care and was not diagnosed as HIV-positive herself until just before delivery.

The baby was immediately given treatment after birth. Two years later, the toddler was found to have no virus in her blood, even after her mother stopped giving her treatment for 8 to 10 months.

The finding may help pave the way to eliminating HIV infection in children. Luzuriaga headed a team of laboratory investigators on the discovery. Johns Hopkins Children’s Center virologist Deborah Persaud, MD, was lead author on the report, and pediatric HIV specialist Hannah Gay, MD, associate professor of pediatrics at the University of Mississippi Medical Center, provided treatment for the baby.

For the astounding work of effectively curing a child with HIV/AIDS, Luzuriaga (along with Drs. Gay and Persaud) was named one of TIME Magazine’s 2013 list of the



Dr. Katherine Ruiz De Luzuriaga, TIME’s 100 Most Influential People of 2013 for Finding a Cure for HIV/AIDS in Children

100 Most Influential People in the world.

The full list and related tributes appeared on the April 29 issue of TIME, which became available on newsstands and tablets since April 19, and at time.com/time100.

Meanwhile, Philippine President Benigno ‘Noynoy’ Aquino III also made it to this prestigious list. They were among the distinguished personalities who were honored during the awards ceremony at the Time Warner Center on April 23.

“We consider this a great achievement,” Luzuriaga, speaking for her team, told The FilAm, an online magazine. “We’re very honored and actually very humbled to be among the ranks of these individuals that have been chosen.”

## Most influential

Now on its 10th year, TIME’s annual list recognizes the activism, innovation and achievement of the world’s

most influential individuals. As TIME managing editor Richard Stengel has said of the list in the past, “The TIME 100 is not a list of the most powerful people in the world, it’s not a list of the smartest people in the world, it’s a list of the most influential people in the world. They’re scientists, they’re thinkers, they’re philosophers, they’re leaders, they’re icons, they’re artists, they’re visionaries. People who are using their ideas, their visions, their actions to transform the world and have an effect on a multitude of people.”

## Education and career

The director of the University of Massachusetts Center for Clinical and Translational Science, Luzuriaga has been at the forefront of pediatric HIV/AIDS research for over 20 years.

In the medical world, she has been recognized for her work on early therapy of HIV-1 infected infants, and her collaborative research on the transmission of HIV from pregnant women to their newborns during birth, a leading cause of the rapid spread of HIV in developing countries.

Dr. Luzuriaga received her Bachelor of Science and Masters of Science degrees from the Massachusetts Institute of Technology (MIT) and her medical degree from the Tufts University School of Medicine.

A board-certified physician in General Pediatrics and Pediatric Infectious Diseases, Luzuriaga com-

pleted her internship and residency in pediatrics at the Boston Floating Hospital for Infants and Children of Tufts-New England Medical Center and her post-graduate training with a research fellowship in Infectious Disease at the University of Massachusetts Medical Center.

Dr. Luzuriaga joined the University of Massachusetts Medical Center (UMMS) faculty in 1990, and is currently Professor of Pediatrics and Molecular Medicine and Chief of the Division of Pediatric Immunology, Infectious Diseases, and Rheumatology.

She has held several leadership positions within the National Institutes of Health-sponsored Pediatric AIDS Clinical Trials Group and is a member of the Ghent Group on HIV in Women and Children.

She has served as a consultant to the World Health Organization on the Guidelines

for the Diagnosis of HIV Infection in Children, as a member of the Institute of Medicine’s Committee on the Perinatal Transmission of HIV, and as a member of the NIH Office of AIDS Research Etiology and Pathogenesis Planning Committee.

She is also serving on the Pediatric AIDS Foundation’s Children’s Research Fund Advisory Committee and is a member of the Pediatric Infectious Disease Society and the American Association of Immunologists.

“Research in my laboratory is focused on the viral and immunopathogenesis of persistent viral infections in humans, including human immunodeficiency virus (HIV), Epstein Barr virus (EBV), and cytomegalovirus (CMV). Ongoing studies are focused on: 1) examining the relationship between viral replication/viral gene expression and the development of the antiviral CD4+ and CD8+

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# Understanding Key Provisions in Health Care Law

By The Filipino Advisory Council, AARP

(Editor's Note: The Filipino Advisory Council is composed of Geminiano "Toy" Arre, Chair; Dr. Belinda A. Aquino, Dr. Serafin Colmenares, Jr., former State Rep. Felipe "Jun" Abinsay, Rose Cruz Churma, Jenny A. Quezon, and Jean Jeremiah. Arre is also a member of AARP's Executive Commission.)

**O**n March 2010, Congress enacted the Affordable Care Act, or Obamacare, as it is sometimes known. The health care law provides a number of benefits for all Americans, including those who are 50 and older.

About eight percent of Hawaii's non-elderly population is without health insurance and are among the direct beneficiaries of the law. Small businesses and people who are self-employed also stand to benefit. If you buy health insurance on your own, have insurance through your employer, can't get or afford insurance or have Medicare, the health care law may affect you.

By understanding what's in the law, you can make better health care choices for you and your family. Here are answers to a several basic questions:

## *How does the law change the way health insurance companies do business?*

The law makes discriminatory insurance practices a thing of the past. It will now be easier for you to get and keep your health insurance, and insurance companies must insure you even if you are or have been sick. Also, protections are in place to limit increases to insurance premiums. Insurance companies must now justify rates increase of 10 percent or more.

Health insurance companies can no longer drop your health coverage if you become

sick. Your health insurance is guaranteed, as long as you continue to pay your premiums. Also, children under age 19 cannot be denied health insurance because of a pre-existing condition. Beginning in 2014, adults cannot be denied insurance due to a pre-existing condition.

Insurance companies can no longer place lifetime or annual dollar limits on your health coverage—giving you peace of mind that your benefits won't run out when you need them most. The ban on lifetime limits began in 2010, while the ban on annual limits



In this March 23, 2010, photo, President Barack Obama signs the Affordable Care Act in the East Room of the White House in Washington. (AP Photo/J. Scott Applewhite, File)

begins in 2014.

## *How does the law make health insurance more affordable and easier to obtain?*

Beginning in January 2014, the health care law allows people without insurance, small businesses, and those who are self-employed to buy private health insurance through an on-line marketplace or exchange. The marketplace will be operated by the Hawaii Health Connector, a non-profit organization established by the State Legislature (Act 205) in 2010 to offer a menu of health care plans to the public. The Connector is establishing an easy-to-use website where Hawaii residents will be able to shop for and purchase coverage and compare plan benefits and costs.

All health insurance plans must offer a standard set of benefits including medical, mental health, prescription drug and rehabilitative services. Standard benefits will make it easier to compare benefits and costs. You'll be able to pick among several levels of coverage to fit your needs when these plans become available in 2014.

The Affordable Care Act fills in gaps in coverage for the poorest Americans by giving states the option to expand Medicaid to individuals under 65 years of age with income below 133 percent of the federal poverty level, or approximately \$14,000 for an individual and \$29,000 for a family of four, beginning in

January 2014.

The law also allows you to include your children on your family insurance plan until they reach age 26. Your children can join or remain on your plan even if they are married, not living with you, attending school or no longer financially dependent on you. Check with your employer or health plan to see if they are eligible.

## *How does the law affect Medicare?*

The law protects guaranteed Medicare benefits and lowers out-of-pocket costs for prescription drugs. For example, it helps make Part D Medicare prescription drug coverage more affordable by gradually closing the gap in drug coverage known as the "doughnut hole." Medicare beneficiaries who reach the "doughnut hole" in 2013 will receive a 52.5 percent discount on brand-name prescription drugs and a 21 percent discount on generic drugs while in the coverage gap. The savings will increase each year until the gap is closed in 2020.

The law requires most health insurance plans, including Medicare, to provide free preventive care benefits, such as colonoscopies and mammograms, that can help catch health problems before they become more serious. If you have Medicare, you are eligible for a one-time, "Welcome to Medicare" visit during the first 12 months that you're enrolled in Part B. At

(continued on page S5)

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COVER STORY

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UNDERSTANDING... (from page S4)

this visit, your doctor will review your health history; check your height, weight and blood pressure; give you advice to help you prevent disease, improve your health; and make appropriate referrals when necessary.

Although most Medicare Advantage plans offer Medicare-covered preventive care services with no deductibles or co-payments, the new health care law does not require Medicare Advantage plans to offer preventive care

services free of charge. If you have a Medicare Advantage plan, you should check with the plan to confirm what the deductibles and co-payments are for preventive care services, if any.

*How can I find out more?*

These improvements are just a few parts of the health law that have already gone or will soon be going into effect. There will be more benefits and protections phased in over the years that will help you and your family.

To learn more about the

benefits and protections you get through the health law and how the law works for you and your family, visit AARP's online Health Law Guide at [www.aarp.org/health-lawguide](http://www.aarp.org/health-lawguide). For additional information on Medicare, visit [www.aarp.org/medicare](http://www.aarp.org/medicare). ®

HEALTHCARE NEWS

A MEDICAL... (from page S3)

T cell repertoires from acute through chronic infection; 2) characterization of the ontogeny of cell-mediated immune responses to viral infections in infants and children; and 3) the development of prophylactic and therapeutic vaccine strategies for HIV," explained Dr. Luzuriaga.

**Awards and Accolades**

The complete HIV-AIDS Online Resource, thebody.com, reports that Luzuriaga has received numerous awards, including the Research Scholar Award from the Pediatric AIDS Foundation and Elizabeth Glaser Scientist Award from the Elizabeth Glaser Pediatric

AIDS Foundation. She has also been recognized for her research on the transmission of the human immunodeficiency virus (HIV) from pregnant women to their newborns and for her work on early therapy of HIV-1 infected infants.

Her research has been supported over the years by RO1 and P01 funding from the National Institutes of Health.

She is the recipient of an NIH Mid-Career Award (K24), which provides support for her to mentor junior scientists in patient-oriented research. She has been invited to give lectures all across America and has authored and co-authored many articles, editorials, and book chapters.



Dr. Katherine Ruiz De Luzuriaga is also a graduate from leadership program for women at Drexel University College of Medicine in Philadelphia | [www.umassmed.edu](http://www.umassmed.edu)

Among her numerous appointments at the University of Massachusetts Medical School: Chief of the Division of Immunology, Infectious

Diseases and Rheumatology in the Department of Pediatrics, and Chair of the Child Neurology Division Chief Search Committee.

**Honored, Humbled and Committed**

"We are honored and humbled that our work has been considered influential," said Luzuriaga, as reported in the UMASS website.

"Our hope is that this will help to communicate the power and potential of scientific investigation for optimizing health outcomes for children. This work has benefited from the strong scientific community here at UMass Medical School, as well as the work of numerous colleagues around

the world. Together, we are committed to eradicating pediatric HIV infection and improving child health globally."

One of the passions of Luzuriaga is to invest in the next generation of scientists and doctors.

She is highly committed to training the next generation of scientists and serves on several review panels that provide awards to junior scientists, including the Elizabeth Glaser Scientist Selection Committee of the Elizabeth Pediatric AIDS Foundation, the March of Dimes, the Charles H. Hood Foundation Research Grant Advisory Committee, and the Fellowship Committee of the Pediatric Infectious Disease Society. ([www.asianjournal.com](http://www.asianjournal.com)) ®

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# State Suspends TB Clearance Requirement

by HFC Staff

**T**he State Department of Health (DOH) says the government is temporarily suspending tuberculosis (TB) clearance requirements that are mandated in Hawaii Administrative Rules, Title 11, Chapter 164 for school personnel, students, food handlers and workers in health care, domiciliary care, daycare and residential care facilities.

As of April 11, 2013, the state will not restrict attendance at work or school due to the absence of a TB clearance.

The suspension is in response to a nationwide shortage of testing solution required for tuberculin skin testing.

“With limited supplies of testing solution due to nationwide production delays that began late last year, we anticipate people may have some difficulty getting tested for TB,” says Dr. Richard Brostrom, TB Control Branch Chief. “TB clearance requirements will be suspended until further notice and our state TB clinics will be limiting testing to specific high-risk groups to prioritize and extend current supplies.”

Due to the shortage of Tu-

bersol® and Aplisol® purified protein derivative (PPD), DOH officials are limiting TB testing at state clinics to specific high-risk groups until further notice. These groups include:

- Persons with signs and symptoms of active TB disease
- Those exposed to an infectious case of TB
- High-risk immigrants referred from the Honolulu Quarantine Station
- Persons with immunodeficiencies
- Persons who require TB screening due to medical treatment

All other individuals seeking a TB clearance are advised to contact their private health care provider or health center. DOH services related to the evaluation and treatment of persons suspected or confirmed to have active TB disease are not affected by the PPD shortage and these services will continue without change.

Manufacturers have experienced delays in production since November 2012. It is estimated that adequate supplies of PPD solution will be available several months from now. The suspension of state TB clearance requirements may

last for up to 120 days or until the PPD shortage has ended. The public will be notified when the suspension is lifted and a grace period or catch-up date is announced for individuals whose TB clearance was postponed.

Hospitals and medical providers in Hawaii have received detailed recommendations from DOH on steps to take during the PPD shortage. For more information on tuberculosis or TB testing, please call the Hawaii TB Control Program at 832-5731 or go online to: [www.hawaii.gov/health/tb](http://www.hawaii.gov/health/tb).®

## Abercrombie Signs Emergency Compassionate Care Bill for Sex Assault Victims

**G**ov. Neil Abercrombie enacted legislation to ensure that female sexual assault victims are provided accurate, unbiased information and access to emergency contraception when receiving emergency medical care at Hawaii's hospitals.

House Bill 411 relating to “Hospital Emergency Compassionate Care for Sexual Assault Victims” was enacted as Act 27 and establishes provisions that require hospitals in Hawaii to provide information about, offer and dispense emergency contraception to a female sexual assault victim arriving for emergency services. Such services must be provided even if a

female refuses to undergo a forensic examination or refuses to report the alleged sexual assault to law enforcement. Penalties are established for non-compliance.

“It is our duty to ensure that any individual who has been traumatized by a sexual assault receives compassionate care and this legislation underscores a woman's right to choose contraception when faced with the possibility of an unwanted pregnancy resulting from a sexual assault,” says Gov. Abercrombie. “This will protect the health and safety of Hawaii's sexual assault victims and guarantee that they receive the medically-accepted standard of care.”

HB 411 was introduced by



Gov. Neil Abercrombie

the House Women's Caucus, which includes Reps. Della Au Belatti, Rida Cabanilla, Mele Carroll, Faye Hanohano, Linda Ichiyama, Jo Jordan, Nicole E. Lowen, Sylvia Luke, Dee Morikawa, Cynthia Thielen and Jessica Wooley.

A companion measure was also introduced in the Senate by Sens. Rosalyn Baker, Josh

Green, Michelle Kidani, Donna Mercado Kim, Suzanne Chun Oakland, Maile Shimabukuro, Jill Tokuda and Laura Thielen.

The state Attorney General's office reported 350 cases of forcible rape in Hawaii in 2011. According to the U.S. Department of Justice, more than half of all rapes are not reported to the police. The average rate of pregnancy resulting from rape is between 5 and 8 percent with an estimated 32,000 rape-related pregnancies occurring every year in the U.S. Emergency contraception is considered a safe and effective means of preventing pregnancy after a sexual assault and is recognized as the standard of care for sexual assault patients.

Other legislation signed into law by Abercrombie includes House Bill 868, relating

to “Eliminating the Asset Limit Eligibility Requirement for the Temporary Assistance for Needy Families Program.” Enacted as Act 18, the measure removes asset limit requirements that were required for recipients of Temporary Assistance for Needy Families. Previously, the law allowed a total of \$5,000 in assets and the value of one motor vehicle in determining eligibility for financial assistance.

This measure encourages families to save money and build assets to enable self-sufficiency. The legislation is aligned with the Governor's New Day objective of developing asset-building programs that fight poverty, help families move toward self-sufficiency and support the growth of the middle class. ®

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by Jorge Camara, M.D.

## The Effects of VOG (Volcanic Fog) on the Eyes

**D**id you know that Mount Kilauea is the world's most active volcano, and has been erupting continuously for 30 years? Did you know that the estimated sulfuric gas emission from Mount Kilauea can be as high as 3,000 to 5,000 tons a day and the gas that is released into the atmosphere is known as VOG. Did you know that exposure to VOG can cause not just respiratory (breathing) but also eye symptoms?

The word "VOG" is a combination of the words volcanic and fog. Vog is composed of a mixture of chemicals including sulfur compounds and finely sized particles from the earth's crust

including: silicon, aluminum, iron, calcium, sodium, potassium and magnesium. In addition to this, vog has gases such as sulfuric acid, and sulfuric dioxide that hold these particles within them. In the December 2011 issue of the Hawaii Medical Journal, Dr. Kenneth D. Lagunzad, research fellow at the University of Hawaii School of Medicine and Dr. Jorge G. Camara first published the effects of vog on the eyes. The article was picked up on CNN, and was of interest also to other parts of the world where volcanic eruptions are common, such as Indonesia, the Philippines, Iceland and Washington state.

In our scientific paper, 30 consecutive patients seen on Oahu, who had a chief complaint of eye irritation due to vog were studied. Their objective signs and symptoms were described and tabulated. These signs and symptoms were re-



Bumps (papilla) on the inner surface of the eyelid and swelling and blockage of the tear duct.

lated to the amount of sulfuric dioxide gases with particulate matter in the atmosphere of Oahu, as well as vog visibility during the period of study. Data for the sulfur gas levels and particulate matter in the air was obtained from the Clean Air Branch of the Hawaii Department of Health.

What we found was very interesting. All of the patients complaining of eye irritation due to the vog had observable

redness of both eyes, and clear mucous discharge. They also had papillae, which are little bumps on the surface of the eye representing a collection of white blood cells. 80% of the patients had swelling of the tear duct and resultant excessive tearing. Swelling of the eyelids was found in 74% of the patients.

What were the most common symptoms complained of? The most common symp-

toms were eye itchiness and a foreign body sensation in both eyes. 96% of patients had excessive tearing, and 90% of the patients studied had a burning sensation of the eyes. But, by far, the most common symptoms were itchiness and observable redness of the eyes.

What factors contributed to the distribution of vog on the eyes in the study? In our study, these factors were the concentration of vog in the air, and the duration of exposure to the vog. In my practice, I have seen many patients who come in for consultation after a trip to the Big Island proximal to the volcano, who complain of eye redness and tearing. How does it affect those of us who live on Oahu? Well, these emissions are blown from Mount Kilauea to Oahu by the southwest Kona winds which blow in a north-east direction. Normally the

(continued on page S10)



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# Depression Risk Fourfold Higher in Obese Seniors

**YOUR DOSE OF MEDICINE**  
By Charles Chante, M.D.

**D**epression and obesity appear to go hand in hand among community-dwelling older adults.

The prevalence of depression among men and women in their 60s, 70s, and 80s rises in tandem with body mass index (BMI) at about 17% for people with a BMI of 30 or greater (obese), compared with about 11% for those with a normal BMI (18.5-24.9), Dartmouth Medical School in Hanover, N.H., reported at the meeting.

The relative risk for depression among obese seniors



receiving care from three different types of community-based settings was about fourfold higher than for seniors with normal weight.

“When depression and obesity co-occur, they may act synergistically to further reduce functioning and exacerbate outcomes from comorbid medical conditions. In older adults, the association between

obesity and depression and the moderators of the relationship remain unclear.”

The investigators explored this relationship by analyzing three separate studies of older adults who were receiving prepared meals in their homes or in senior centers, and in publicly financed assisted living homes in the New York City borough of the Bronx.

Clinically significant depression was defined differently in each setting. In the home-meals setting, depression was defined as a score greater than 9 on the depression scale of the Patient Health Questionnaire. In the congregate-meal (senior center) setting, investigators used the Structural Clinical Interview for DSM-IV Disorders major depression scale. The assisted-living facilities, used the Basis-28 depressive symptoms scale, a modification of the 32-item Behavior and Symptom Identification Scale, which is a patient-reported measure of psychiatric symptoms.

They found that for women and whites of either sex, being overweight (BMI 25-29.9) was associated with a 20%-40% lower prevalence of depression,

but being obese was associated with a relative risk of depression of 1.5 in the community center setting, and 2.4 in the assisted-living setting. Among all seniors 60-74 years old in the same settings, the relative risk of depression was 4.0 among those who were obese.

In analyses controlling for potential confounding factors, the association between obesity and depression was modified by sex, age, and race, but not by level of education attained.

The investigators acknowledged that the study could not address causality because of its cross-sectional design. In addition, the use of three separate definitions of significant depression limited the investigators' ability to compare the three different populations.

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## ASK A DOCTOR



Picture showing redness of the eye due to dilation of the superficial blood vessels.

### THE EFFECTS... (from page S8)

trade winds, which blow in a southwest direction, counteract the Kona winds, but during the months of December to May, the Kona winds may be relatively stronger. This may lead to more pronounced symptoms during these months though symptoms can occur during any given month in the calendar year.

How does the vog cause these symptoms? In our article, we felt that the signs and symptoms were caused by both toxic and allergic reactions. The sulfur dioxide gasses break down to sulfuric acid and sulfur compounds forming finely sized particles. These particles, in turn, irritate the nerves and mucosa of the eye surface causing tearing and irritation. Eye redness and prominence of the blood vessels result from increased blood flow to the eye. The swelling of the eye then causes the tear ducts to also become swollen and thus cause excessing watering of the eyes with clear mucous discharge. Un-

treated, the condition can lead to a chronically red eye and constant tearing of the eye due to blocked drainage of the tear ducts.

Treatment is usually supportive including ice compresses during the acute stages. For moderate to severe cases, eyedrops are prescribed, usually a mild anti-inflammatory medication. If a secondary infection results, antibiotics may be prescribed. For maintenance treatment, an anti-histaminic eye drop is prescribed. It is important for one to see an eye doctor if one suspects vog induced eye symptoms as soon as possible. ©

**DR. CAMARA** is a past president of the Philippine Medical Association of Hawaii, the Hawaii Ophthalmological Society, and the Aloha Medical Mission. He has received many awards in his outstanding career in ophthalmology, including Physician of the Year from the Hawaii Medical Association, the Humanitarian Award from the American Academy of Ophthalmology, the Noblesse Oblige Award from Maryknoll School and most recently, the Rizal Award from the Knights of Rizal International. He published the first scientific paper on the effects of VOG on the human eye.

HEALTHLINE NEWS

COMMUNITY HEALTH FAIR 2013

# Importance of Regular Tests for STDs

By HFC Staff

**H**ealth experts are warning of a new sexually-transmitted superbug that they say could be more deadly than AIDS.

The new STD Superbug, gonorrhea strain HO41, was reportedly discovered in Japan two years ago and should be a major concern for youth and parents.

“In a couple of years, it will have become resistant to every treatment option we have available now,” says Dr. Manjula Lusti-Narasimhan, a World Health Organization scientist.

The Centers for Disease Control (CDC) reports that of the 800,000 gonorrhea infections each year, most involve young people between the ages of 15 and 24. Also keep in mind the following facts:

- Youth ages 15-24 make up just over one-quarter of the sexually active population,

but account for half of the 10 million STDs a year.

- In the U.S., 46 percent of high school students have had sexual intercourse and are at risk for HIV and STDs.
- The National HIV/AIDS Strategy recommends educating youth about HIV before they begin engaging in sexual activities.
- About 1 in 3 sexually active high school students did not use a condom during last sexual intercourse.
- 1 in 4 sexually active teenagers has an STD (CDC).

With this new strain, health experts say it's more important than ever to practice safe sex and to get regularly tested.

For today's tech savvy generation and increasingly popular e-dating scene, websites like



Qpid.me, U Should Know and inSPOT are promising public health tools that could do their part to reduce the spread

of STDs.

Qpid.me's website helps anyone age 13 and older to request their STD results from their doctor or clinic and share them with a potential partner

*DOH... (from page S2)*

tooing should be tested for both Hepatitis B and C.

Anyone born in a country with high rates of Hepatitis B, especially countries in Asia and the Pacific, should be screened for Hepatitis B. Anyone born from 1945 to 1965 (baby boomers) should also get a one-time test for Hepatitis C, regardless of any known risk.

The overall theme for World Hepatitis Day 2013 is “See No Evil, Speak No Evil,

via text message or an emailed link. It's a free and simple way to access and share verified STD results in a completely private, secure and unique way.

“Our technology helps prevent STDs before they happen by empowering people to make better sexual health decisions by being able to obtain and share records on command,” says Ramin Bastani, founder and CEO of Qpid.me.

According to the com-

pany's website, having your records is not enough.

“The key component missing in HIV and STD prevention today is “shareability.” To make informed sexual health decisions, you must not only be informed about your own health, but also about your partner's health as well. We enable you to privately share your STD status however you choose. We believe that sharing is a good thing and that it can lead to better sexual health decisions, more (safe) sex and fewer STDs,” Bastani says. ☺

Hear No Evil” as represented by the three wise monkeys—an old proverb that highlights how people sometimes deal with problems by refusing to acknowledge them. The monkeys were chosen for the campaign to highlight that around the world and in Hawaii, Hepatitis is unfortunately still being largely ignored. Officials with the World Hepatitis Alliance urge the public to “uncover their senses and confront the realities of Hepatitis.”

The first World Hepatitis Day was held in 2008 in response to concerns that chronic viral hepatitis did not have the level of awareness or political priority seen with other communicable diseases. Since then, thousands of events have taken place around the world, generating massive public and media interest.

For more information about Hepatitis resources and events in Hawaii, go to [www.hepfreehawaii.org](http://www.hepfreehawaii.org). ☺

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ACCREDITED HEALTH PLAN



# Health Experts Investigate Added Caffeine in Foods

By Mary Clare Jalonick

**M**ASHINGTON — With a growing number of foods boasting added caffeine for an energy boost, the federal Food and Drug Administration says it's time to investigate their safety.

The FDA's new look at added caffeine and its effects on children and adolescents is in response to a caffeinated gum introduced this week by Wrigley. Called Alert Energy Gum, it promises "The right energy, right now." The agency is already investigating the safety of energy drinks and energy shots, prompted by consumer reports of illness and death.

Michael Taylor, FDA's deputy commissioner of foods, said Monday that the only time FDA explicitly approved the added use of caffeine in a food or drink was in the 1950s for colas. The current proliferation of caffeine added to foods is "beyond anything FDA envisioned," Taylor said.

"It is disturbing," Taylor said in an interview with The Associated Press. "We're concerned about whether they have been adequately evaluated."

Taylor said the agency will look at the potential impact these "new and easy sources" of caffeine will have on children's health and will take action if necessary. He said that he and other FDA officials have held meetings with some of the large food companies that have ventured into caffeinated products, including Mars Inc., of which Wrigley is a subsidiary.

Wrigley and other companies adding caffeine to their products have labeled them as for adult use only. A spokeswoman for Wrigley, Denise M. Young, said the gum is for "adults who are looking for foods with caffeine for energy" and each piece contains about 40 mg, or the equivalent amount found in half a cup of coffee. She said the company will work with FDA.

"Millions of Americans consume caffeine responsibly and in moderation as part of their daily routines," Young said.

Food manufacturers have added caffeine to candy, nuts and other snack foods in recent years. Jelly Belly "Extreme Sport Beans," for example, have 50 mg of caffeine in each 100-calorie pack, while Arma Energy Snx markets trail mix, chips and other products that have caffeine.

Critics say it's not enough



Truffles | Photo by Cherry Patter.

for the companies to say they are marketing the products to adults when the caffeine is added to items like candy that are attractive to children. Major medical associations have warned that too much caffeine can be dangerous for children, who have less ability to process the stimulant than adults. The American Academy of Pediatrics says caffeine has been linked to harmful effects on young people's developing neurologic and cardiovascular systems.

"Could caffeinated macaroni and cheese or breakfast cereal be next?" said Michael Jacobson, director of the Center for Science in the Public Interest, which wrote the FDA a letter concerned about the

number of foods with added caffeine last year. "One serving of any of these foods isn't likely to harm anyone. The concern is that it will be increasingly easy to consume caffeine throughout the day, sometimes unwittingly, as companies add caffeine to candies, nuts, snacks and other foods."

Taylor said the agency would look at the added caffeine in its totality — while one product might not cause adverse effects, the increasing number of caffeinated products on the market, including drinks, could mean more adverse health effects for children.

Last November, the FDA said it had received 92 reports over four years that cited illnesses, hospitalizations and deaths after consumption of an energy shot marketed as 5-Hour Energy. The FDA said it had also received reports that cited the highly caffeinated Monster Energy Drink in sev-

eral deaths.

Agency officials said then that the reports to the FDA from consumers, doctors and others don't necessarily prove that the drinks caused the deaths or injuries but said they were investigating each one. In February, FDA Commissioner Margaret Hamburg again stressed that reports to the agency of adverse events related to energy drinks did not necessarily suggest a causal effect.

FDA officials said they would take action if they could link the deaths to consumption of the energy drinks, including forcing the companies to take the products off the market.

In 2010, the agency forced manufacturers of alcoholic caffeinated beverages to cease production of those drinks. The agency said the combination of caffeine and alcohol could lead to a "wide-awake drunk" and has led to alcohol poisoning, car accidents and assaults.

(www.philstar.com) ©

## HEALTHCARE NEWS

# State Launches National Take Back Initiative

By HFC Staff

**T**he Department of the Attorney General, in partnership with the Drug Enforcement Administration (DEA) and State Narcotics Enforcement Division, coordinated the 6th Annual National Take Back Initiative on Oahu, Kauai, Maui and Hawaii.

Those with expired or unused prescription medications were encouraged to bring their medications to various collection sites statewide on April 27, 2013. The service was free, confidential and an ideal opportunity for those with accumulated unwanted, unused prescription drugs to safely dispose of those medications.

According to a recent survey by Hawaii Youth Risk Be-



haviors, 14.3 percent of high school students took prescription drugs without a doctor's prescription. People over age 65 are also at risk for prescription drug abuse. Americans age 65 and older comprise 13 percent of the population but consume about one-third of all prescription drugs. This group also takes more potentially addictive medication than any other age group.

The Take-Back Initiatives are an important and needed effort to prevent unused and expired medications from being abused. It provides a vehicle for people to freely dis-

pose of their medications in a safe and anonymous way.

Officials urge the public to keep the following in mind:

- Unused or expired medicine should be disposed of properly when it is no longer needed for the illness for which it was prescribed.
- Having unused and expired medicine in your home increases the risk of accidental poisoning.
- Unused or expired medicine should not be thrown in the trash or flushed down the toilet as improper disposal could enter the human water supply or harm aquatic life.

For more information on properly disposing prescription drugs, please call 586-1284. ©

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# Rx: Hot or Cold Compress?

## MIND YOUR BODY by Willie T. Ong, M.D.

**O**'m sure you've heard of the hot or cold compress to soothe common aches and pains. But the tricky part is knowing when to use hot or cold? And what medical conditions could be helped by these valuable treatments?

### Hot Compress Preparations

You can make your own hot compress by buying a rubber water bag (around P100 only) and filling it with warm water. Don't use boiling water because this can melt through the rubber bag. Let the kettle cool first for 10 minutes. A second option is to soak a towel in hot water, then rinse it a bit.

Another option is to buy a ready-made "plastic" preparation (available in drug stores) that you can soak in either hot (or cold) water for some time.

Afterwards, the bag will stay hot (or cold) for an hour or so.

A cheaper but more dangerous option is to fill a bottle with hot water and then wrap this up with a towel. The problem with this method is that the bottle can become very hot and burn the skin if you're not careful.

### When to use a hot compress

- **Boil.** A boil (pigsá in Filipino) is a reddish painful skin infection that contains pus inside. Placing a warm compress over the boil can hasten the softening and bursting of the boil. You can soak a cotton ball in hot water and place it over the boil for 15 minutes, thrice a day. Next, soak the boil in Povidone iodine for around five to 10 minutes to kill the bacteria inside.
- **Sty.** A sty is a pimple-like eruption located in the eyelids. This frequently occurs in women and is caused by too much eyelash curling



or makeup. Soak a cotton bud or cotton ball in warm water, and then place this over the sty for 10 minutes, twice a day.

- **Arthritis and long-standing joint aches and pains.** Apply warm compress over the painful area to relieve the pain and loosen the stiffened joint. This usually works well in cases of osteoarthritis, a type of arthritis caused by aging, and overuse of the joint. Since osteoarthritis pain usually worsens during the cold months, you can wear a pyjama, long sleeves, gloves or socks to cover up the affected part.
- **Muscle pain.** When our muscles stiffen up due to overexertion, a warm compress can help loosen up stiff muscles. A hot shower also soothes and relaxes the muscles. Try it for back pain and body pains, too.
- **Two days after a sprain.** A sprain, such as an ankle sprain, is treated with a cold compress in the first two days. After the swelling subsides, you can now use a warm compress to stimulate



blood flow in the area by the third day. In this manner, the warm compress facilitates the removal of blood and debris in the injured area.

- **Stomach pain.** For those with stomach pain due to colic, gas or diarrhea, you can lessen the pain by placing a warm compress on the stomach area. The warm compress relaxes irritable and hyperactive bowels. Drinking warm water and chamomile tea also relaxes the stomach muscles.
- **Hemorrhoids.** The usual home remedy for hemorrhoids is a hot-sitz bath. The person sits on a container filled with warm water, and this helps reduce the swollen blood vessels of the hemorrhoids. You can buy a hot-sitz bath container in any drug store. (This container is conveniently hooked inside the toilet bowl for you to sit over it.)

### Cold Compress Preparations

To prepare a cold compress, simply get some ice and place it in a plastic bag or a water bag. You can also soak a towel in ice-cold water.

Moreover, there are ready-made plastic preparations that you can cool inside the refrigerator. If you want a cheaper option, get some smooth stones and cool them in the refrigerator.

### When to use a cold compress

- **Generally used for acute conditions.** If a part of your body feels hot, such as the knees after a long walk, then a cold com-

press can help ease the inflammation. A headache or a fever can also be treated by a cool towel on the forehead.

- **Any insect bite.** The first aid for an insect bite is to immediately put ice on the area. This will help reduce the swelling and lessen the itchiness.
- **Right after getting a sprain, swelling or bruising.** If you've had an injury that caused some bruising or bleeding, you should ice the area immediately. Anything cold will stop the bleeding and hasten blood clotting. Continue placing a cold compress on the area for the first two days. By the third day, you can slowly shift to a warm compress, this time to increase blood flow in the area.
- **Any bleeding wound, including gum and nose bleeding.** Use a cold compress to help stop the bleeding. You may also apply gentle pressure on the area (for 10 to 15 minutes) until the bleeding stops. If you have nose bleeding, press over the bridge of the nose and apply cold compress on the area.
- **For eye bags.** As a beauty regimen, put ice (or a cold cucumber) underneath the eyes to reduce morning eye bags. You can wash your face with cold water, too.

### A Few Precautions

For people with diabetes, stroke, and numbness, you should be careful in using hot and cold treatments. If you have a problem with detecting pain (say due to nerve injury), then you can accidentally burn yourself without knowing it. The elderly should likewise be careful in using this treatment.

Finally, learn to make use of this simple and effective home remedy.

For more serious cases, consult your doctor. (www.philstar.com) ®

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# Work, Recycling and Retirement: What About?

by Felino Tubera

**A**bout work, recycling and retirement, (not necessarily in this order) is what I'm writing about, which may either please/or displease my better/or bitter half - my wife, whose views and observations about what, anything, at times, are diametrically opposite those of mine. Above ground or underground, either or both of us find it difficult to rise or sink to our own level to reach a compromise. But who is right or who is wrong, never mind. We both agree that our being oddly different but curiously the same, is a common denominator that makes our fractional biases, the elemental and factorial parts of our equation for understanding.

She considers work as a lifelong vocation, that life is a recycle-able resource, and that

retirement is a reason, if not the motivation for staying healthy while working.. Sounds great, no? She says that between and among these three, there is a healthy relationship that makes life interesting. What? A love triangle? Among three strange bedfellows? I wonder: Can I be made her apostle or disciple to spread her views? To advocate, if not to advertise the paradigm of her work ethic? You know what? Before I answer my own question, let me explain.

Some years ago, my wife took early retirement at age 62. She went back to work before she became 63. She retired a second time at 65. Again, before turning 66, she was back in the active workforce. Now at 81, she's still working and not thinking of retiring yet. What in any term can I define her work ethic? Re, re-, re-retirement, or reverse something? Work, re-work, re-work, work?

Re-treading life like one



does to a worn-out tire? Not unlike refinancing or reverse mortgage? Absurd, ha, ha, HA! When asked if or when she would retire for good, her mantra-reply is: "I'd rather expire than retire." Holy choir of angels, please sing your hymns of praises to God for blessing my wife with a purpose!

I ask myself: am I a willing part of this life-scenario? I also retired first at age 62; went back to work at 65, and re, retired at 79. And at 82, I am re-telling our different-same-life story. My other un-answered

question is when will God stick a label with an expiration date on our lives? I feel like carrying a car bumper-like-sticker saying: "Hire me, I'm recycle-able."

In the meantime, we want to live a healthy "contagious" life together: transmitting the "microbes" of a shared smile. Spreading the "germs" of a hearty laughter. Multi-sharing the "virus" of humanity in the dynamics of living together. In a healthy environment of giving and caring. Into "epidemic" or "pandemic" proportions. O! if only good health could be "transmitted" globally this way!

And in my own limited time, or is it unlimited? ... give myself time to answer my 2 previous questions. I have yet to ponder some imponderables. To re-tread my aging "tires" if not to re-cycle my depreciating assets according to my wife's formula, to retrieve their usefulness and remaining value, if not to salvage

their diminishing returns.

Remember, my wife and I are a two-party democracy of competition and free enterprise. But as partners, we are walking a tightrope of reality and truth, doing a balancing act of daring and caution, trying to reach a platform of equilibrium, understanding and comfort at the end of our ropes. Come what may? No, not with that kind of attitude. We want to find out in a deliberate and calculated manner, what good may come out along the way. Blunders, we do make. But ... who don't?

We don't feel sad making errors. We learn from our mistakes. True, sadness visits us sometimes. But it's not bad to feel sad. Although unwanted, the visits bring us the venue, however temporary, for us to think inward and in self-reflection, seek a vent or passageway to a shelter for a healthy renewal of body and spirit. Time and space we need to refresh!®

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# Celebrating National Nurses Week

by Nancy Atmospera-Walch

**N**ational Nurses Week 2013 begins on May 6, National Nurses Day and ends on May 12, the birthday of Florence Nightingale, the founder of modern nursing. The theme of the event is “Delivering Quality and Innovation in Patient Care.”

During the week, communities across the nation and Hawaii will celebrate and recognize the significant contributions of the nursing profession.

### History of Nurses Week

National Nurses Week was first observed in 1954. In 1974, the International Council of Nurses established May 12 as International Nurse Day. In 1982, President Ronald Reagan signed a proclamation declaring May 6 as National Recognition Day for Nurses.

In 1998, May 8 was designated as National Student Nurses Day. In 2003, National School Nurse Day is celebrated on the

Wednesday of National Nurses Week. Activities during National Nurses Week typically include recognition dinners, state and city proclamations, continuing education seminars and other community activities.

For nurses at the Queen’s Medical Center, they typically receive red roses and coupons for a free lunch or dinner. In addition, nurse managers give special awards to nurses such as pins, extra days off, certificates or flowers. Doctors also regularly send fruits baskets or boxes of chocolates to every nursing floor.

Nursing is the largest of the health care professions and continues to grow. The American Nurses Association projects that between 2008 and 2018, there will be more job growth in nursing than in any other occupation.

Nursing is also one of the most trusted professions. Nurses received top billing in the 2012 annual Gallup survey that ranks professions for their honesty and ethical standards. Except for

2001, when firefighters were ranked first after the 9/11 terrorist attacks, nurses have been voted as the most ethical and honest profession in America for 13 of the past 14 years.

Nurses consistently capture patient and public trust by performing in accordance with a Code of Ethics for Nurses that supports the best interests of patients, families and communities.

### Filipino Nurses in Hawaii

In Hawaii, there are two major Filipino Nurses organizations—the Filipino Nurses Organization of Hawaii (FNOH) and the Philippine Nurses Association of Hawaii (PNAH).

The FNOH is the oldest organization of Filipino Nurses in Hawaii and possibly the nation. It started in 1931 as the Filipino Nurses Club of Hawaii but was reorganized and renamed to FNOH in 1972 by Ines Cayaban. Educated and trained in the Philippines, Ms. Cayaban holds the distinction as the first Filipino registered nurse in Hawaii.

The PNAH was founded

over 10 years ago. Both organizations support the Nursing Advocate Mentor Inc. (NAMI), an organization that provides free RN review classes for all nurses aspiring to take the N-CLEX exam. However, NAMI caters to nurses who come from the Philippines.

### From Staff Nurse to Nurse Entrepreneur

During the past decade, Filipino nurses in Hawaii have contributed greatly to Hawaii’s economy and helped to solve the problem of housing for the elderly adult, blind and disabled.

For example, 80 percent of licensed case management agencies in Hawaii are owned and operated by Filipino registered nurses. These agencies make it possible for the elderly who need nursing facility level of care to be able to live in a community residential long term care facility.

Hawaii is one of the states with the fastest growing elderly populations. Filipino nurses have capitalized on this by opening adult foster homes or care homes.

There are about 1,500 adult foster homes and over 500 adult residential care homes in Hawaii. Filipino Nurses are running care homes, home health, nurse staffing or medical supply companies. As you can see, Filipino nurses have gone from staff nurses to nurse entrepreneurs.

Nurses often exceed their own consistently high standards of commitment and caring and deserve special recognition. So in celebrating 2013 Nurses Week, let’s make a special effort to thank our Filipino nurses. ☺

*NANCY ATMOSPERA-WALCH is the immediate past president of the FNOH, founding president of the Filipino Nurses Foundation, current president of the Hawaii Waiver Provider Association and the current president of the Association of Licensed Case Management Agencies and Associates. Nancy is also the president and chief executive officer of Advantage Health Care Provider, an organization that provides care for the intellectually and developmentally disabled. On April 27, 2013, she was named the 2013 Filipino Entrepreneur of the Year by the Filipino Chamber of Commerce during its annual awards event.*



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**21st Filipino Fiesta**

**SATURDAY, MAY 11, 2013 • 9:00 AM TO 4:00 PM**  
**KAPIOLANI PARK • WAIKIKI, HONOLULU**

**FREE!**

**HEALTH SCREENINGS & CONSULTATIONS**

- First Aid
- Ask-A-Doctor
- Blood Pressure
- Cholesterol
- Curbside Consultation
- Dental
- Diabetes
- Healthy Diet
- Mammogram
- Optometry
- Osteoporosis Screening
- Physical Therapy
- Radiology
- Spirometry

**PARTICIPANTS**

- Bayanihan Clinic Without Walls
- Hawaii Filipino Healthcare
- Philippine Medical Association of Hawaii
- PMAH Foundation
- PMAH Ohana Medical Missions, Inc.
- United Healthcare
- Waipahu Therapy Center

In Cooperation with:











