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## MIDLIFE CRISIS OR CLICHE:

THE MEDICAL REALITY

### Snores That Raise the Roof?

Tips for Healthier Slumber

## Man Up: The Lowdown on Low T

June 2018  
[CHIhealth.com](http://CHIhealth.com)





## When You Can't Stop... Going to the Bathroom

An enlarged prostate – and the health issues that come with it – are a fact of life for aging males.

“As we get older, almost all men’s prostates begin to enlarge,” said Carlos Prendes, MD, CHI Health primary care provider. “The symptoms are basically obstructive, so when you urinate, you don’t feel like you’re completely empty. Or when you go, you know that as soon as you relax, you’re going to have to go again.”

“You’re also going to have to wake up at night to go to the bathroom – sometimes two, three or four times. Other things that can happen are that you’re going to have to give a little extra push to get the stream started or you have a weak stream.”

Overactivity is another symptom.

“Because the prostate is enlarged, you’re not completely emptying your bladder so those stretch receptors are still being stimulated. You go to the bathroom, and then suddenly you need to go again,” Prendes said. “Over time, the muscles can start to spasm on their own, causing bladder instability and a sudden need to go – almost bordering on incontinence – where you can’t hold it anymore.”

Treatment options include medications and surgery. Factors to consider include age, overall health, prostate size and how greatly the symptoms impact your daily life.



## Man Up The Lowdown on Low T

If you’re a typical guy who enjoys watching games on TV or listening to sports-talk radio, you’ve almost certainly heard the term “Low T.”

Feeling tired and irritable? Packing on a few extra pounds? Things not as active in the bedroom as you’d like? Those taglines are designed to grab the attention of every male with concerns that masculinity might be slipping.

“The way that I describe it is that guys with Low T just kind of feel like they’ve lost their mojo,” said Carlos Prendes, MD, CHI Health primary care provider.

“Most of those guys pretty much can relate the minute you put it in those terms.”

Officially, low testosterone or Low T is diagnosed when testosterone levels fall below 300 nanograms per deciliter.

Starting at age 30, a male’s testosterone level naturally begins to decrease. Prendes said the normal range for men age 18 to 80 is 250 to 830 ng/dL, but the numbers can vary.

Despite the advertising claims, Prendes said replacing testosterone “doesn’t work magic for everyone.” Treatment can take a while to yield results, and sometimes there are additional reasons men aren’t feeling their best.

“I think a lot of guys – even if they have low testosterone – that may not be the full story as to why they don’t feel the way they want to feel,” Prendes said. “Of the people who come in wondering if they might have Low T, I’d estimate that only a third of them start testosterone treatment and say they feel great again.”

Low T can sometimes be treated naturally with a combination of weight loss, exercise, reducing stress and improved diet. Treatment options include topical gels, testosterone shots or testosterone pellet injections. The chosen method often depends on cost and insurance plans.

Prendes said treatment must be approached carefully. Overly aggressive testosterone treatment can cause an increased risk of cardiovascular events, worsening sleep apnea and swelling.

What most men don’t realize is that Low T doesn’t have to be treated.

“Having low testosterone is not a fatal condition and it will not shorten your life in any way,” Prendes said. “So if you’re content with your life as it is, let it be.”

For more, visit [CHIhealth.com/BetterYouLowT](http://CHIhealth.com/BetterYouLowT)

# Midlife Crisis or Cliche: The Medical Reality

Midlife crisis: Something real or merely an excuse for the perplexing behavior of some men who – to use a golf analogy – make the turn and start playing the “back nine” of their lives?

“To some degree, the whole idea of a ‘midlife crisis’ is definitely a real thing,” said Matthew Halfar, MD, CHI Health primary care provider. “Whether you can say that it always occurs in the middle of a man’s life is questionable. Although you’d probably be hard-pressed to find the actual term in medical literature, anxiety and depression are probably the cause for what people attribute to a midlife crisis.”

The midlife cliché: a male in his 40s or 50s makes sudden or rash life changes. He might buy a new sports car or pursue romantic relationships with younger partners. Those stereotypes aren’t necessarily what comes to Halfar’s mind when he thinks of men in midlife crisis.

“Sudden large purchases and those types of things can be the sign of another type of psychological disorder, possibly, but we wouldn’t ask, ‘Do you have a girlfriend or did you just get divorced and start dating a woman who is 30 years younger?’” Halfar said.

“It’s a phenomenon that we see on a day-to-day basis, socially, but from a

family practice perspective, it’s going to lead me to look for other things on the psychological spectrum.”

Normally, that would include screening for things like depression, anxiety, bipolar disorder and other psychiatric illnesses. While methods of treatments can vary from provider to provider, Halfar said it ideally includes a combination of medication and psychiatric therapy.

“A lot of people will say yes to medications and no to therapy or vice versa,” Halfar said. “But really, if it’s decided that treatment is necessary, doing both of those has been shown to have a synergistic effect on mental health.”



## Receding from Hair Loss

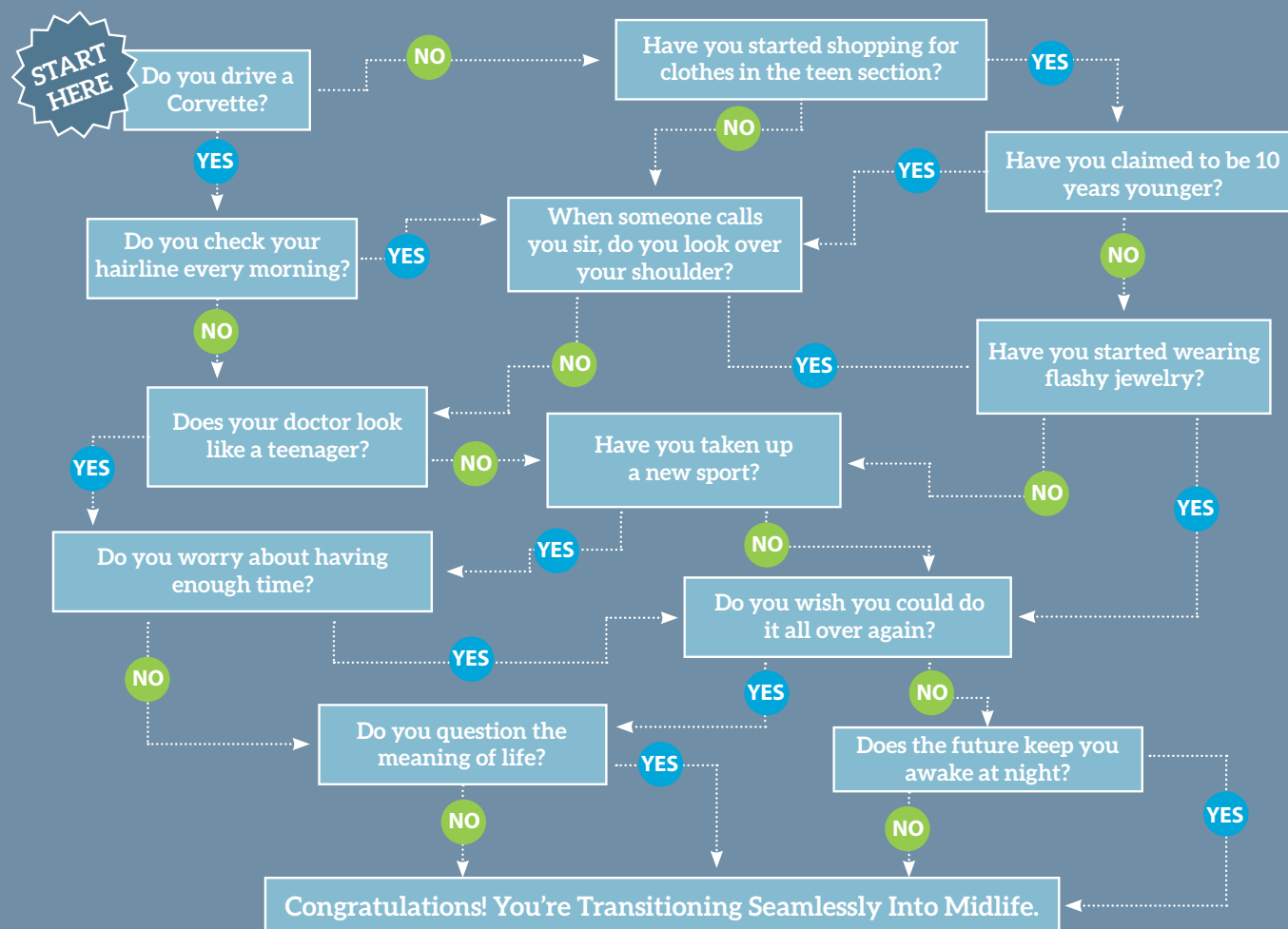
For men, the often touchy subject of hair loss is simply a matter of testosterone and genetics.

“Unfortunately, people tend to lose hair where they want it and gain it where they don’t want it,” said Matthew Halfar, MD, CHI Health primary care provider. “Depending upon how that hair loss might be affecting someone’s mental health, there are ways to counter that, but in the realm of ‘Is this normal?’ The answer is absolutely.”

Halfar tends to focus not on the hair loss, but how it might be impacting the individual’s self-confidence. If patients determine they’d like to seek treatment, Halfar urges caution about products they see on TV or the Internet.

“A lot of these so-called treatments really aren’t evidence-based and they’re there to make people money. There are evidence-based treatments for hair loss, but that would be something to talk to your primary care provider or dermatologist about.”

### Are You Having A Midlife Crisis?



# Stop Avoiding This Person: Your Doctor

One man claimed he didn't have the time. Another lamented that he didn't have health insurance. A third just "didn't think about it."

CHI Health Primary Care Provider J. Russell Bowen, MD, has heard all the excuses. And a Cleveland Clinic survey backs up what doctors like Bowen see every day: many men just don't like going to the doctor. According to the survey, 60 percent won't see a doctor even if they think they have a serious health problem.

"Many people are in denial about their health, both men and women," Bowen said. "But women historically were advised to come in for annual Pap smears and other health checks." Men didn't have those incentives "so, routine health care just wasn't something that was stressed to them."

Because they live in denial, he said, "They choose to believe and hope they are fine and don't come in for fear there may be something 'wrong.'"

Bowen noted that many diseases have hard-to-detect symptoms that a patient

won't pick up on but a doctor can. These include high blood pressure, high cholesterol and diabetes, as well as prostate, colon and lung cancers.

Finding a health problem early can make a big difference in one's quality of life for years to come.

"Diabetes is one disease that can result in an extremely long list of complications if allowed to go untreated for long periods of time," Bowen said. "It can affect nearly every part of the body in one way or

another, and not only cause pain and debilitating disease, it can also cause death by increasing risk of heart attack, stroke, diabetic coma, etc."

High blood pressure is something else you want to catch early, he said. "It's referred to as the 'silent killer.' People typically don't have symptoms until it gets dangerously high."

**"Many people are in denial about their health, both men and women."**



So that regular checkup is very important: "If someone is relatively young and healthy, it is not as critical to come in every year, but everyone should be seen at some point.

They can then discuss with their primary care provider (PCP) how frequently they need to be seen going forward."

Here's what you can expect at that physical:

- A check of vital signs to identify high blood pressure and obesity.
- Questions about family history for insight into risk of inheritable diseases.

- Questions about social history to help determine risk of health issues related to smoking, alcohol and drug use, as well as sexually transmitted infections.
- A physical exam to find things like heart murmurs, lung problems, skin disorders and many other conditions.

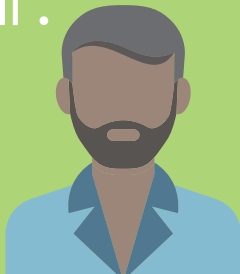
Bowen urged family members and friends to be persistent in convincing the reluctant male to go to the doctor. Don't buy the "I don't have time" excuse.

"Any excuse is just that – an excuse. Many offices offer early appointments and evening appointments. And most employers will allow a few hours off for a medical appointment."


For more, visit [CHIhealth.com/BetterYouPrimaryCareDoc](http://CHIhealth.com/BetterYouPrimaryCareDoc)

## Pace Yourself: Be Cautious About Your Cocktails



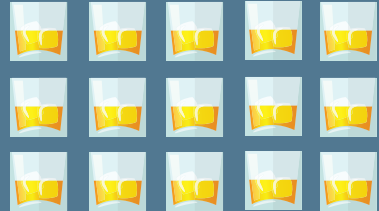



Take a minute to rethink your drink. Alcohol affects every organ in the body. Excessive drinking accounts for one of 10 deaths among working-age adults and shortens the lives of those who die by an average of 30 years according to the Centers of Disease Control and Prevention. It can also lead to the development of chronic diseases like cancer and heart disease.



For Men



For Women

Moderation	Binge	Heavy
 2 drinks per day	 5 or more drinks on an occasion	 15 or more drinks per week
 1 drink per day	 4 or more drinks on an occasion	 8 or more drinks per week



# Tests You Can't Afford to Skip

There are screening tests every man needs. We make it easy for you with this list of essentials:

## Colorectal Cancer

Very important. "A colonoscopy can remove polyps (growths inside the colon) that are not cancerous but that can turn into cancer over time," said J. Russell Bowen, MD, CHI Health primary care provider. "If you have colon cancer, it's better to catch it early. Early diagnosis has a much better survival rate compared to cancer that has spread." A new test called Cologuard is proving to be effective; it involves submitting a stool sample (obtained at home) and eliminating the need for a "cleanout." The test is covered by Medicare and many private insurances.

## High Blood Pressure

Very important. "Blood pressure is very easy to check and can be very dangerous if allowed to go on unchecked for long periods of time," Bowen said.

## Cholesterol

Very important. Cholesterol guidelines have changed recently, according to Bowen, and now treatment is based on overall risk of heart attack and not just the lab values. To determine your individual risk, he recommended using the ASCVD Risk Estimator which is available at many sites online (it may also show up as Risk Calculator).

## Type 2 Diabetes

Very important, Bowen said, especially for people with a family history of type 2 diabetes or those who are overweight, sedentary, or have symptoms of increased urination, unexplained weight loss, excessive thirst or increased appetite.



## Prostate Cancer

Bowen said prostate cancer remains a controversial issue in medicine: some groups of experts say you should get a rectal exam and PSA done while other groups say you shouldn't do either one. This should be individually addressed with your primary care provider.

## Glaucoma

The U.S. Preventive Services Task Force, an independent panel of national experts, found there is not enough evidence to recommend for or against screening. If you have not seen an eye doctor in several years, it would be a good idea to have a routine screening and discuss what the doctor recommends.

Websites Bowen recommends to patients who want a trustworthy Internet source for health information include:

- CHI Health: [CHIhealth.com](http://CHIhealth.com)
- CHI Health patient information: [CHIhealth.staywellsolutionsonline.com](http://CHIhealth.staywellsolutionsonline.com)
- American Diabetes Association: [diabetes.org](http://diabetes.org)
- National Heart, Lung, and Blood Institute: [nhlbi.nih.gov](http://nhlbi.nih.gov)
- Centers for Disease Control: [cdc.gov](http://cdc.gov)
- United States Preventive Services Task Force: [uspreventiveservicestaskforce.org/Tools/ConsumerInfo/Index/information-for-consumers](http://uspreventiveservicestaskforce.org/Tools/ConsumerInfo/Index/information-for-consumers)

For more, visit [CHIhealth.com/BetterYouColonoscopyFAQ](http://CHIhealth.com/BetterYouColonoscopyFAQ)

# Tough Break:

## Men Get Osteoporosis, Too

### Risk Factors

Osteoporosis isn't just for women. While less common, an estimated 1.5 million American men age 65 or older suffer from bone loss related to osteoporosis. Certain conditions raise your risk. Talk to your primary care provider if you have:

- Rheumatoid arthritis
- Chronic hepatitis C
- Vitamin D deficiency

### Medication

Some medications can also influence the likelihood of developing osteoporosis.

Check with your primary care provider if you are on:

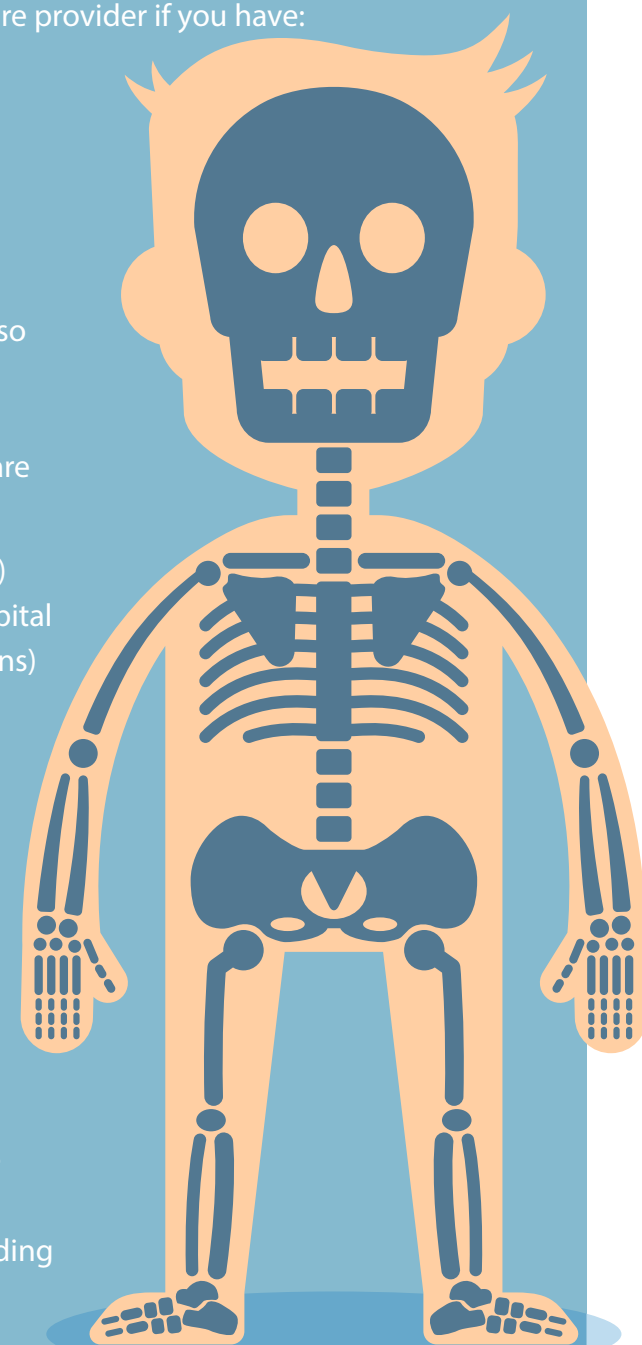
- Heparin (blood thinner)
- Dilantin and phenobarbital (anti-seizure medications)

### What to Do

Talk to your primary care provider about your risk and screening recommendations.

Steps you can take now for better bone health:

- Quit smoking
- Cut back alcohol intake
- Exercise regularly
- Eat a healthy diet including calcium and vitamin D





# Snores That Raise the Roof? Tips for Healthier Slumber

If you think snoring is just noise, think again. It can be a nightmare for your heart.

Snoring caused by untreated obstructive sleep apnea can lead to congestive heart failure. This serious, chronic condition starts silently and can shorten your life.

The bad news for snorers?

“Once there are changes in the heart, it is hard to reverse that back,” said Kavish Rohatgi, MD, CHI Health primary care provider.

Nearly half of adults snore at least occasionally and 25 percent are habitual snorers. Some have the obstructive sleep apnea which stops breathing for 10 seconds at a time, multiple times a night. As a result, less oxygen gets into the bloodstream, causing the heart to work harder.

A definitive diagnosis requires an overnight sleep study which records brain activity, heart rate, blood pressure, oxygen levels and more during your sleep.

Treatments for obstructive sleep apnea include an oral appliance or a CPAP (*continuous positive airway pressure*) machine. This is worn nightly to keep the airway open. CPAP is the most common treatment and is nearly 100 percent effective. For many, it's a dream come true.

“Most of the time patients say they have never felt so restful as they have after a night with CPAP,” Rohatgi said.

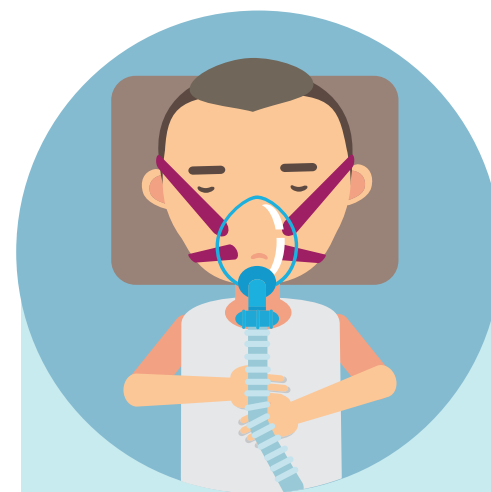
## Snoring is caused by:

- Poor tongue and throat muscle tone (worse with alcohol or sleeping medications)
- Excessively bulky throat tissue (particularly when overweight)

- Long soft palate and/or uvula
- Obstructed nasal airways (due to colds/allergies)
- Deviated septum or nasal deformity

## Signs you need a sleep study:

- Daytime sleepiness or fatigue (falling asleep watching television/while driving) despite getting a full night's sleep
- Witnessed episodes of breath pauses during sleep
- High blood pressure
- Heart disease
- History of stroke



## Not Your Dad's CPAP

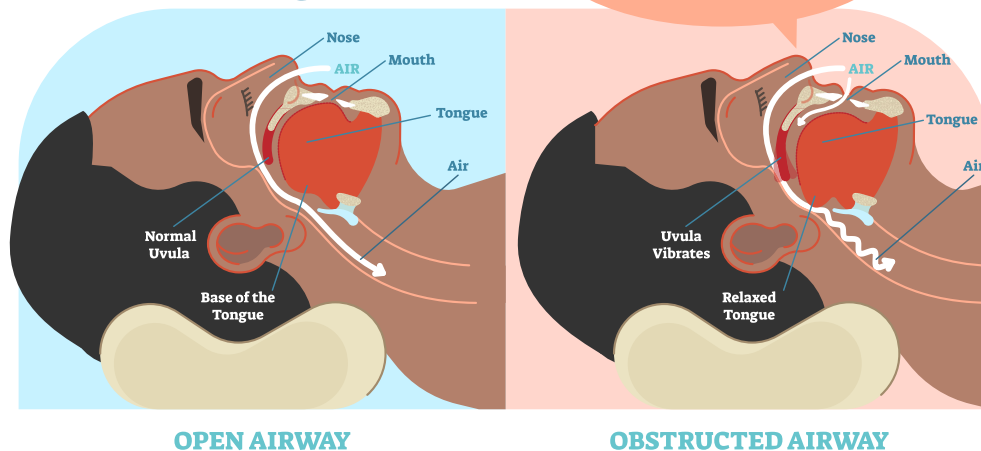
Continuous positive airway pressure (CPAP) machines eliminate snoring by keeping airways open with a steady air pressure delivered via a mask or nose piece. The good news for users? CPAPs are now smaller, lighter and quieter. In fact, newer models are almost silent. Tips for becoming a CPAP pro:

- Practice wearing the mask/nose piece while awake.
- Make sure the fit is comfortable.
- Use nasal saline spray or the machine's humidifier option for nose dryness.

## Tips for Light Snorers

- Exercise to lose weight and build muscle tone.
- Avoid tranquilizers, sleeping pills and antihistamines before bedtime.
- Avoid alcohol four hours before bed.
- Avoid heavy meals three hours before bed.
- Sleep on your side.
- Elevate head of bed four inches.

## Snoring Anatomy





# What Men Want: 50s That Feel Like 40s



Some say life starts at 50. Call it bad timing, but studies show physical decline begins around the half century mark, as well.

According to Danielle Wooldrik, DO, CHI Health sports and family medicine physician, 50 can be your new 40. "As we age, our bodies naturally start losing muscle mass and strength. Flexibility along with lung capacity is also diminished," Wooldrik said. "But the good news is exercise is proven to slow, even stop, that decline."

It's never too late to get fit. There's evidence to support that, even at age 85, exercise has numerous health benefits. But before beginning any new fitness regimen, especially if you are not used to regular exercise, it is important to consult a health care professional.

"Your doctor can discuss the impact of health conditions, time and type of exercise," Wooldrik said. "Once you develop a plan, start out slow and then build momentum. One way to stay on track is to set goals and mark your progress in a journal. If you pick enjoyable activities or a buddy to exercise with, you'll have more fun and be more likely to stick with it."

"You've heard about an apple a day, but it should be 'moving more and sitting less' keeps the doctor away," Wooldrik said. "Regular exercise is sometimes the best medicine."

In fact, each hour of exercise adds two hours to your life. The perks go on and on – from physical benefits like weight control, healthier muscles, bones and heart to better mood, energy, sleep and confidence.

Start now to head off the natural process of muscle tone disappearing as you age. A well-rounded workout routine includes aerobic exercise, strength

**"Regular exercise is sometimes the best medicine."**

training and flexibility and balance routines.

Aerobic exercise includes walking, jogging, swimming, biking, machines, tennis, golf

without cart, dancing and aerobics classes. Do 30 minutes a day, five days a week.

Strength training includes free weights, machines, resistance bands or body weight training. Do twice a week, targeting eight to 10 major muscle groups each workout.

Flexibility involves yoga or static or dynamic stretching. Do 10 minutes, two days a week and always stretch after exercise when your body is warmed up.

Balance includes Tai Chi and yoga. Incorporate these exercises into your daily life.

# LiFE LOADING...



## Midlife Advice: Get Busy

When it comes to minimizing the effects of aging, CHI Health Primary Care Provider Matthew Halfar, MD, said much of it comes down to the old saying, "Use it or lose it."

"We recommend physically and mentally challenging activities to help curtail the effects of aging," Halfar said. "There have been studies that things like just doing a daily crossword puzzle have been shown to reduce the risk of conditions like Alzheimer's disease. With physical activity as well, things that keep people from becoming sedentary have proven positive effects on both their physical and mental health."

Although natural wear and tear may cause joint and muscle pain for men as they exercise in their golden years, one of the worst things a guy can do is become sedentary.

**Myth:** Wearing a hat will make you bald.

**Fact:** Hats don't cause baldness, and neither does using a hair dryer. Blame heredity, but don't pin it on mom. Baldness comes from both sides of the family tree.

**Myth:** Prostate is the deadliest cancer for men.

**Fact:** Lung cancer is the leading cause of men's cancer deaths, killing three times as many men as prostate cancer. Most men with prostate cancer do not die from it.

**Myth:** Men are better drivers than women.

**Fact:** Men, particularly young males, have a higher risk of dying in a car accident than women. As a result, men typically experience higher insurance rates.

## Myth-busting Men's Health



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