

Public Health Brief

June 2010

Men's Health Month

By Maura Proser, MPH

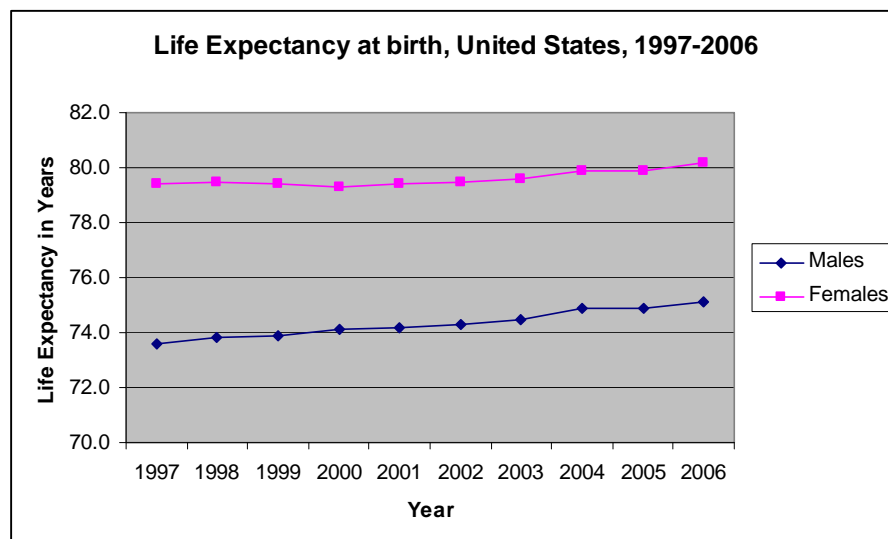
June is Men's Health Month! This serves as a time to encourage men to take control of their health and address any risk factors for chronic diseases or injuries. For more information on Men's Health Month, visit www.menshealthmonth.org.

The purpose of Men's Health Month is to raise awareness of preventable health problems and encourage early detection and treatment of disease among men and boys.

Why raise awareness of men's health issues?

- Nationwide, men have a lower life expectancy than women and higher death rates for many of the leading causes of death. While life expectancy has increased slightly over the last 10 years, the disparity between men and women is nearly unchanged.
- Men ages 18-64 are almost twice as likely as women to report having no usual source of healthcare. Men of all ages are 23% less likely than women to visit any physician's office, and men ages 18-44 are 27% less likely to visit a primary care physician.
- Males under age 65 are more likely than women to have no health insurance.
- The leading causes of death in males are highly preventable, including unintentional injuries, heart disease, stroke, and many cancers.

There is a prime opportunity for health care providers to reach out to male patients to empower them to take control over their health, get recommended screenings and immunizations, and practice healthy and safe behaviors.



Source: United States Department of Health and Human Services, [Health, United States, 2009](#)



Tri-County Health Department • Serving Adams, Arapahoe and Douglas Counties
7000 E. Belleview Avenue #301 • Greenwood Village, CO 80111 303-220-9200
Richard L. Vogt, M.D., Executive Director

Men's Health Concerns:

While many of these health topics are not unique to men, they are some important issues that often affect men more than women. These are also not the only health concerns for men; however, many are highly preventable or treatable. These are leading killers of men in the United States and Colorado, which is why it is important to talk to your male patients about taking control over risk factors and risky behaviors.

- **Heart Disease:** Heart disease is a leading cause of death, and Colorado men have a 62% higher death rate from heart disease than women. Men die of myocardial infarction at almost twice the rate that women do. Colorado men are also more likely than women to have high blood pressure and high cholesterol¹.
- **Cancer:** Cancer is the leading cause of death in Colorado, and the three most common cancer deaths in men are due to lung cancer, prostate cancer, and colorectal cancer. Testicular cancer is the most commonly diagnosed cancer in young men aged 15-39, and prostate cancer is the most commonly diagnosed in men age 45 and over. Skin, colorectal, and lung cancers also have high incidence rates in middle-aged and older men¹.
- **Unintentional Injuries:** Unintentional injuries are the #1 cause of death in all people ages 1-44, and men have higher rates of unintentional injuries than women². Fewer males than females in Colorado report always wearing a seatbelt when in a car, and men have a much higher death rate for motor vehicle injuries than females¹.
- **Tobacco Use:** Males in Colorado are significantly more likely to smoke than females. Almost one-in-five adult males in Colorado reported regular cigarette use in 2007-2008. Chronic lower respiratory disease and lung cancer are two of the leading causes of death, and lung cancer has the highest death rate of all cancers in men¹.
- **HIV:** In 2007, 73% of newly diagnosed HIV cases in the United States were in males age 13 and over, and the death rate for HIV disease was almost three times higher in men than women². In 2009, 86% of all new HIV diagnoses in Colorado were in males. HIV disease is the seventh leading cause of death in males ages 18-49¹.
- **Suicide:** Suicide is a leading killer of men in Colorado, and men have a suicide death rate more than 3.5 times that of women¹. Nationwide, more women than men are classified as having depression, however more men die as a result of suicide². The highest number of suicide deaths in Colorado is in men ages 35-54¹.

As a health care provider, what can you do to reduce the risk of illness and injury in your male patients?

- Raise Awareness: Educate patients on disease risk factors and the importance of screening
- Modify Risk Factors: Work with patients to help them change lifestyle-related risk factors – such as tobacco use, poor diet, and physical inactivity – and to reduce risk-taking behaviors
- Screening: Be sure to conduct age and risk-appropriate screening in a timely manner
- Reminder system: Develop a reminder system to ensure that your patients get screened regularly

Current Preventive Screening and Immunization Recommendations for Men:

- **Heart Disease:** The United States Preventive Services Task Force (USPSTF) currently recommends blood pressure screening for all adults over age 18, and cholesterol screening in all men over age 35 and those age 20-34 who are at increased risk for heart disease³.
- **Cancer:** The USPSTF currently recommends screening all adults ages 50-75 for colorectal cancer. The Task Force currently does not recommend routine screening for testicular or prostate cancer in asymptomatic men³. The American Cancer Society recommends that men over age 50 discuss with their doctors if prostate cancer screening is right for them⁴.
- **Tobacco Use:** The USPSTF strongly recommends screening all adults for tobacco use and providing tobacco cessation opportunities³. It is important to assess a patient's readiness to quit and counsel patients on cessation and provide any appropriate cessation methods. The Colorado Quit Line (1-800-QUIT-NOW) can offer patients free counseling, education, and nicotine replacement.
- **HIV:** The USPSTF strongly recommends screening for HIV in adolescents and adults at increased risk for HIV. A person is considered at increased risk if he reports one or more individual risk factors or receives care in a high-risk clinical setting³. The Centers for Disease Control and Prevention (CDC) recommends that all patients age 13-64 seen in health-care settings are screened for HIV⁵.
- **Depression and Suicide Risk:** Currently, the USPSTF recommends that clinicians screen for depression in adults only when staff-assisted depression care supports are in place to allow for proper diagnosis, treatment, and follow-up³.
- **Diabetes:** The USPSTF currently recommends screening for type 2 diabetes in asymptomatic adults with sustained blood pressure (either treated or untreated) greater than 135/80 mm Hg³. The American Diabetes Association further suggests screening adults aged 45 and older every three years⁶, particularly in those with a BMI ≥ 25 kg/m².
- **Falls:** The American Geriatrics Society recommends that all older adults should be asked at least annually about fall history and gait or balance difficulties. Additional screening and intervention guidelines are specific to the patient and his fall history and risk⁷.
- **Influenza:** Adults and children should receive an influenza vaccine annually.

FREE RAPID HIV TESTING

Tri-County Health Department provides *free* rapid HIV testing for all people ages 12 and over. No appointment is necessary; all testing is done on a walk-in basis. Results are available in about 10 minutes; some results require confirmatory testing. Clients can also receive a free Hepatitis A or B and HPV vaccine at the same time as their HIV test.

Testing is available Tuesday afternoons in Northglenn and Friday afternoons in Aurora. Tri-County residents can also receive a free HIV test, by appointment only, at Denver Health.

For more information on free HIV testing and for clinic hours, visit <http://www.tchd.org/hivaids.htm> or call 303-363-3018 (TCHD) or 303-602-3548 (Denver Health).

COLORADO QUIT LINE 1-800-QUIT-NOW

All smokers should be referred to the Colorado Quit Line. The Quit Line can provide resources for patients at all stages of readiness, whether they are just contemplating quitting or are ready to quit today. Callers to the Quit Line receive a free personalized program, including coaching and support, and free nicotine replacement therapy. There are also online quit tools and information to help smokers determine if they are ready to quit and decide when they will be ready.

For more information on the Quit Line, visit www.coquitline.org or call 1-800-QUIT-NOW.

References and Resources:

1. Colorado Department of Public Health and Environment, Colorado Health Information Dataset: <http://www.cdphe.state.co.us/cohid/>
2. United States Department of Health and Human Services, Health, United States, 2009: <http://www.cdc.gov/nchs/hus.htm>
3. United States Preventive Services Task Force Recommendations for Preventive Clinical Services: www.ahrq.gov/clinic/uspstfix.htm
4. American Cancer Society: www.cancer.org
5. Centers for Disease Control and Prevention. Revised Recommendations for Screening for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings: <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm>
6. American Diabetes Association. Screening for Type 2 Diabetes. Position Statement: http://care.diabetesjournals.org/cgi/content/full/26/suppl_1/s21
7. American Geriatrics Society. Prevention of Falls in Older Adults. AGS/BGS Clinical Guidelines: <http://www.medcats.com/FALLS/frame.htm>



For more information or questions, please contact:

Colorado Department of Public Health and Environment:
 (303) 692-2700 / (303) 370-9395 (after hours)
 Fax: (303) 782-0338

Tri-County Health Department:
 (303) 220-9200 / (303) 461-2342 (after hours)
 Fax: (303) 220-9208

