

# JUDGES' COMMENTS

This piece exemplifies what good service journalism can do: help readers improve their lives through action. Strong expert sourcing and clear directions to resources make this piece genuinely useful to its audience. The creative illustrations lighten the mood and add relatability.

# THIS IS AWKWARD...

You might feel uncomfortable about your health. We get it. Our advice for feeling more at ease begins by having a conversation, with a friend or a neighbour, and definitely with your healthcare provider.

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Maybe you never think twice about going to the doctor and being examined from head to toe, covered by only a paper gown. Or maybe the very thought of it keeps you from even going to the doctor.

If you fall into the latter group, read on for advice on dealing with all kinds of conditions that people may think of as too minor or too embarrassing to deal with.

## Acne

A few pimples, whiteheads and blemishes are common in teenagers. But when they morph into something that covers your face, neck, chest and back, that's severe acne. It can last into adulthood. If non-prescription creams don't work after using them for three months, see your doctor.

"Get treatment early. Seek attention from your family physician early and aggressively," says dermatologist Dr. Kirk Barber, clinical professor in the University of Calgary's Departments of Medicine (Dermatology) and Community Health Sciences. "Early and aggressive treatment prevents scarring, and scarring is forever."



## Eczema & psoriasis

Eczema is an inflammatory skin condition that produces redness, is intensely itchy and can severely affect sleep. Psoriasis also creates scaly red plaques on the skin. There is hope, with many new treatments for this condition.

That redness and itching can make people self-conscious.

Here again, your doctor can help.

“We have lots of very good treatments for eczema, and there is active research that’s turning up all kinds of wonderful new treatments,” Barber says, adding people with eczema “have tremendous hope for their future.”

He offers the same advice for anyone with psoriasis. “In particular, let your doctor know if it involves the genital area.”

## Going to the doctor

Many people put off going to the doctor when something is wrong.

Sharon Nelson, director of clinical services at Edmonton West Primary Care Network, encourages everyone to find a good family doctor whom they see on a routine basis, to stay on top of things. “It will help prevent illness, keep you healthier as you age, and help you live longer,” she says.

Doctors who belong to a primary care network are part of teams of healthcare providers who can help you better understand and deal with a wide range of health concerns.

## Cost of care

Medication can be costly. If you can’t afford medication, “there are programs out there that can help,” says continuing care counsellor Susan Sommerville, who is based in the Alberta Health Services Central Zone. “Don’t let money be a barrier.”

For more information, see Help with Healthcare Costs Begins with a Conversation on page 52.



## Snoring

Snoring, which is common in adults, is often described as a non-medically concerning annoyance.

But mounting evidence shows snoring can cause damage at the cellular and subcellular levels, says ear, nose and throat surgeon Dr. Jason Chau, clinical assistant professor in the University of Calgary's Department of Surgery.

And snoring can be especially annoying for someone who sleeps with (or near) a heavy snorer.

In Chau's experience, "complete elimination of snoring is often not achievable. However, there are many treatments that are successful in reducing intensity and volume, which can translate into better sleep quality."

Also, lifestyle changes can help, such as losing weight if you're overweight, quitting smoking and sleeping on your side rather than on your back. Nasal strips and nasal disks can also help.

In children, snoring is not normal and should be investigated, he notes. "Mention it to your family physician for further testing."

For more advice, visit [MyHealth.Alberta.ca](http://MyHealth.Alberta.ca)

## Wearing a hearing aid

"Often people are reluctant to obtain a hearing aid for the first time. They think it means they're getting old," says Kathleen Jones, a registered audiologist at Professional Audiology Clinic in Edmonton. She says people typically wait about seven years before dealing with their hearing loss.

"Getting a hearing test doesn't necessarily mean that you need a hearing aid. Start with an assessment to see where you're at," she suggests.

"It's also important to have a baseline assessment in case your hearing changes in the future. Research shows that the sooner you do that, the better. If you leave hearing loss untreated for many years, there is a higher risk of dementia. It's all about the stimulation of those auditory pathways."

Alberta Health Services offers hearing assessments at a number of clinics in Alberta. For the clinic nearest you, call Health Link at 811.

## Feet

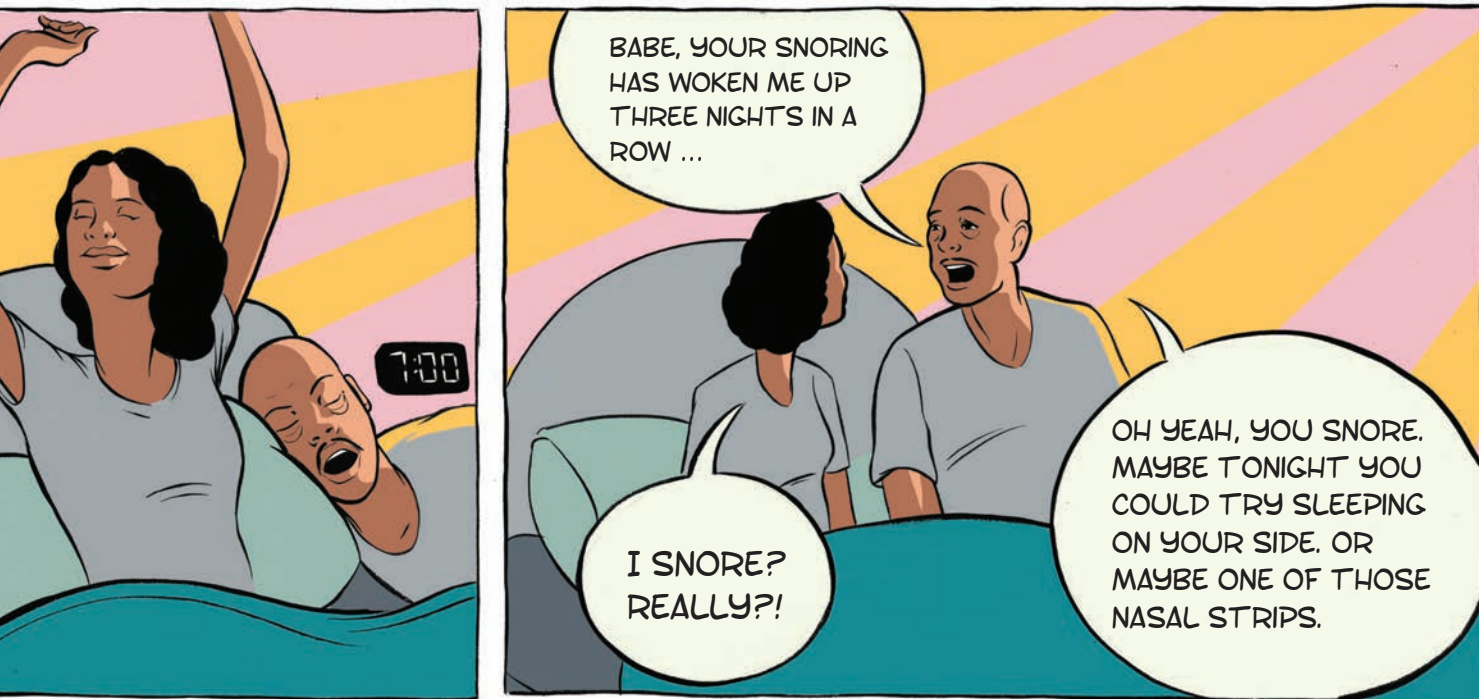
Many people feel more uncomfortable showing their feet than they do other typically covered body parts. Yet regular foot care "can go a long way to keeping you comfortable in the activities you do," says podiatrist Dr. Neil Humble at NorthWest Foot Clinic in Calgary.

People with diabetes must be very careful about caring for their feet due to potential medical issues. And everyone can benefit from foot checkups and regular foot care.

It will help keep you moving, says Humble.

"It's doubly important," he adds, "if there is a genetic predisposition to problems like bunions, flat feet or other foot conditions."

If you still feel squeamish about showing your toes, consider this: healthcare providers have seen all kinds of feet just like yours.



## Colonoscopy

When it comes to colorectal cancer, Calgaryian Jutta Shaw knows all about the importance of early detection.

Her husband died of colon cancer six years ago, at the age of 53.

So two years ago, when Shaw's fecal immunochemical test (FIT) showed blood in her stool, she went for a colonoscopy right away.

The day or two before the test involves "clearing" the large intestine so the rectum and colon can be viewed by a camera from the inside. Preparations for the test cause frequent bowel movements of loose stools or diarrhea. Few would describe the experience as pleasant.

But such screening tests "are very worth it," says Shaw, who got a clean bill of health after the colonoscopy.

For a schedule for colonoscopies and other screening tests, see the Spring 2016 issue of *Apple*, online at [applemag.ca](http://applemag.ca).

## Erectile dysfunction

Once a taboo topic, the subject of erectile dysfunction is now more openly discussed because of medications such as Viagra and Cialis.

But it can still be embarrassing, "because people expect that 'a man should be able to perform,'" says Dr. Owen Schwartz, a family practitioner in Calgary who focuses on psychotherapy, emotional health and stress reduction.

Erectile dysfunction is common, especially as men age.

"It has a lot to do with circulation to the penis. If there isn't enough blood flow because of hardening of the arteries, then there's going to be less capacity," Schwartz says. He notes that stress can affect the arteries, while exercise opens up the arteries. "Maintaining good health through exercise, relaxation and a healthy diet all help maintain good sexual function."

Schwartz recommends seeking help by talking to a doctor, friend or mentor. "You can talk to your pharmacist, who may offer drugs, such as Viagra. This is fine, but it's best to discover the root cause," he says.

## Sex talk with partner

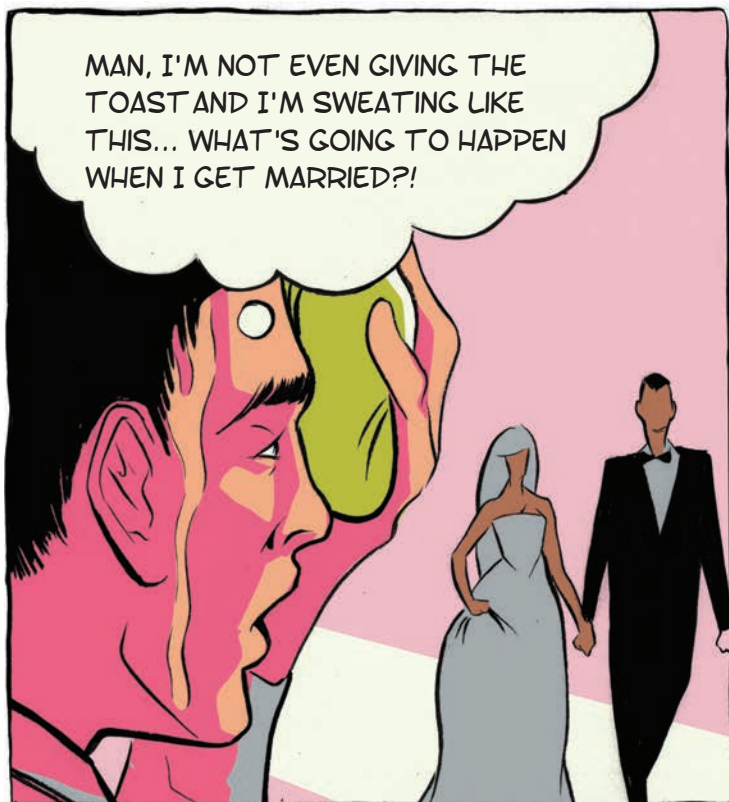
Many people are uncomfortable talking about sex, sexuality and reproductive health with their partners.

Studies show that the more people communicate with each other, the better the relationship, Parker says.

Alberta Health Services offers a wide array of workshops, resources and advice on sexual and reproductive health across the province, including:

- Sexual decision-making
- Birth control and preventing pregnancy
- Preventing sexually transmitted infections (STIs)
- Relationship and dating
- Puberty changes
- Sexual and reproductive health program services
- Sexual and gender diversity (lesbian, gay, bisexual, transgender, queer and others—LGBTQ+).

For details, visit [ahs.ca](http://ahs.ca) or call Health Link at 811.



## Sweating

Sweating is natural. We need to do it to control our body temperature. Excessive sweating, or hyperhidrosis, is a medical condition that affects many Canadians.

Many peri-menopausal and post-menopausal women have hot flashes of heavy sweating. Diabetes, heart failure, anxiety and an overactive thyroid can also cause sweating.

Some people perspire so much they shy away from wearing certain clothes because they sweat right through them. They might avoid shaking hands or any other kind of touching.

My Health Alberta ([myhealth.alberta.ca](http://myhealth.alberta.ca)) offers a number of solutions, including these three:

- You may be able to reduce the amount you sweat by lowering stress in your life.

- Bathe one or two times a day with soap and water. Avoid scrubbing your skin too much, because that can irritate it. Dry your skin well after bathing.
- Use a deodorant with antiperspirant And try putting it on at night before bed.

“There are solutions,” says plastic surgeon Dr. Elizabeth Hall-Findlay of Banff Plastic Surgery, noting that excessive sweating can also be treated with other non-surgical methods.

For example, miraDry, a new, minimally invasive treatment for people ages 18 and up, can provide a long-lasting option by destroying the sweat and odour glands in the armpits. “With miraDry, it’s one or two treatments and they’re done,” Hall-Findlay says.

## Painful intercourse

Dyspareunia is persistent pain before, during and after intercourse. Vaginismus is involuntary spasms of the muscles in the vaginal wall that make intercourse painful.

Many women find intercourse painful at some point in their lives, for reasons such as not having enough lubrication and having an underdeveloped vagina.

Your doctor can help you find ways to eliminate or reduce the pain.



## Premature ejaculation

Premature ejaculation is extremely common.

"You really have to work with your partner in solving this," Schwartz says. "The important thing is to slow things down. The person needs to take relaxation training . . . to learn to relax."

Going to a sexual therapist for advice can be helpful, Schwartz says, in improving sexual relations and the overall functioning of your marriage or relationship.

## Talking sex with your kids

Parents might not feel comfortable or knowledgeable enough to have 'the talk' with their kids, or they might think their kids don't want to hear about it from them. Yet the vast majority of youth say they want their parents to be the ones who give them this information, says Brian Parker, counsellor and educator at Compass Centre for Sexual Wellness in Edmonton.

For detailed advice about how to talk to your kids about sexual and reproductive health, visit [teachingsexualhealth.ca](http://teachingsexualhealth.ca).

## Naming body parts

Just as eyes, feet and noses are body parts, so too are the genitals.

But describing that part of the body can be uncomfortable for many people, who use slang or euphemisms instead of the proper words.

When parents are playing the 'naming body parts' game, they'll often skip the region between the belly button and the knees. But "that middle area is very important—it has lots of bodily functions," Parker says of parts such as penis, vagina, testicles and clitoris. "Teaching the proper terms teaches them that it's a normal and natural body part, and it's nothing to feel ashamed of."





## Mental health

People experiencing mental health issues are often worried about what others will think of them.

Often they can be too embarrassed to seek help, says Dr. Vidya Raj, an Alberta Health Services consulting psychiatrist and an assistant professor in the University of Calgary's Faculty of Medicine.

Mental health issues, such as anxiety and depression, are common, and they are treatable, Raj says.

For help, call:

- Health Link at 811
- Mental Health Helpline at 1-877-303-2642
- 24/7 Crisis/Distress Lines:  
Edmonton: 780-482-4357;  
780-342-7777  
Calgary: 403-266-HELP (4357)

For other crisis centres in the provinces, see the listing at [suicideprevention.ca](http://suicideprevention.ca).

## Asking for help

Sometimes it can be tough to ask for or accept help, even when you really need it.

"The grit of life is tough to take. It's hard to do grit alone," says Dr. Ronna Jevne, PhD. She's professor emeritus in the University of Alberta's Department of Educational Psychology and leads the Exploring Grit, Grace, and Gratitude retreat at Prairie Wind Writing Centre. "Reaching out is an important skill that allows you to maximize your health, whether that's mental or physical. Good things happen when you reach out."

She adds: "Reaching out can help people see meaning in the challenge they're facing. Having hope and meaning makes it more possible to move forward."

For more information, see Jevne's website at [ronnajevne.ca](http://ronnajevne.ca).

## Addictions

People with a substance use disorder might feel embarrassed about having an addiction. "Society sees it as some kind of disgrace," Raj says.

Addiction is not some kind of moral weakness, she emphasizes. "People don't just choose to become addicts—there are multiple factors at play. Often, it's a coping mechanism."

For help, call:

- Health Link at 811
- Addictions Helpline at 1-866-332-2322



## Suicide

Mental health issues—including mood disorders and addictions—are common treatable risk factors for suicide, says Raj. He recommends that people who are experiencing suicidal thoughts call their local distress centre line.

In healing, it's not only the individual who gets better and can contribute to society again—they become a better spouse and parent too. As Raj notes: "This is meaningful to their families as well."

- For help you can turn to:
- AHS Mental Health Help Line at 1-877-303-2642
  - Health Link at 811
  - 24-hour crisis lines:
    - Serving all Alberta and northeastern Saskatchewan: 1-800-263-3045
    - Edmonton and northern Alberta: 1-800-232-7288
    - Serving Fort McMurray and northeastern Alberta: 780-743-4357 / 1-800-565-3801
    - Calgary: 403-266-4357
    - Southern Alberta: 1-866-531-2600.

## Abuse

Abuse and neglect—whether physical, emotional or sexual—are never acceptable.

Fear can drive people to remain quiet. Telling someone about it can be the first step in breaking the cycle of abuse and neglect.

You can turn to a trusted source such as a help line, friend, counsellor or doctor, or children's doctor (if a child is being abused). Get help, whether it's counselling for the family, for the couple or for the individual. "Refuse the status quo," Schwartz says.

"Every person has the right to be treated with dignity, and if you choose a path in which you insist on those rights, in the long run, it will always be better for you than short-term security that is breaking down, with more and more heartache and pain."

## Opening up

It's common for people to hide health issues they find embarrassing.

"But it doesn't mean they are not important," says Schwartz. "If they were to reveal them to their doctor, therapist or someone else who could help, it could really make their lives a lot easier." | a