

## All About Donating Blood

### January is National Blood Donor Month



**B**lood donations are an important part of being prepared to provide effective treatment to those that have been severely injured. Having replacement blood readily available helps to ensure the recovery of those impacted by natural disasters, traffic collisions, workplace injuries, and other life-threatening occurrences. Here are frequently asked questions about blood donation so you can determine if donating blood is for you.

#### Is donating blood safe?

Donating blood is a safe process. Needles and bags used to collect blood are used only once and then discarded, helping to reduce the possible spread of infection to the donor.

#### Can I give if I have been turned down before?

The common reasons for which donors are turned away from donating blood are temporary, not permanent. For example, one common reason for a deferral is low iron levels in the blood. Iron levels fluctuate daily and are affected by what you eat, so they do not permanently disqualify a prospective donor. Check the eligibility requirements to see if

you're eligible to donate. A "mini-physical" is given to all potential donors to ensure they are healthy enough to donate.

#### How often can I give blood?

Regulations in the United States allow people to donate whole blood once every 56 days. The waiting period between donations can be different for other blood components. For example, donating only platelets in a process called apheresis requires only a 3-day waiting period before a person can give again. Donating two units of red blood cells through a similar process doubles the waiting period to 112 days.

#### How do I know if I am eligible to donate blood?

You must be in good health, be at least 17 years old, and weigh at least 110 pounds. You will also need to pass physical and health history reviews prior to donating. There is no upper age limit on your ability to donate. Conditions that require a temporary deferral are pregnancy, travel to certain parts of the world, inoculations, some health conditions, and certain medications. Call 1-800-GIVE-LIFE or check the eligibility requirements to get answers to specific eligibility questions you may have. Eligibility requirements may also vary for some states and blood centers. Final eligibility is determined by medical professionals at the time of donation.

#### Are the health history questions and my test results confidential?

Yes. The health history will be conducted by a trained professional in an individual booth arranged to preserve confidentiality. Your answers will be kept confidential, except where required by law. If your blood tests positive to any of the administered standard tests, you will receive confidential notification. The Red Cross maintains strict confidentiality of all blood donor records.

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**What can I do if I am not eligible to donate?**

While you may be unable to donate blood, there are other ways you can help. You can help organize a blood drive, recruit other suitable donors, or volunteer at fixed sites or mobile blood drives to help create positive donor experiences. Monetary donations are another way to help ensure that safe blood can be provided to those who are in need. Learn more about how you can help by contacting your local office of the American Red Cross.

**How can I ensure a pleasant donation experience?**

You'll want a good night's sleep the night before and a good breakfast or lunch before your donation. Drink fluids like juice, milk, or soda ahead of time. Take your normal medications as prescribed. Ensure you have adequate iron levels by making iron-rich foods part of your daily diet. These include red meat, poultry, fish, green leafy vegetables, iron-fortified cereals, nuts, raisins, and prunes. During your donation, relax. After your donation, have some juice and cookies in the "canteen." Then, you can go about your daily activities, but avoid heavy lifting or strenuous exercise for the remainder of the day. See the tips for a good donation experience.

**Should I give blood now or wait until I am called?**

Under normal circumstances, eligible donors are encouraged to donate as often as possible. Please call 1-800-GIVE-LIFE or schedule an appointment online. During emergency circumstances, please listen to media reports in your area and donate as requested.

**How long does it take to donate blood?**

The whole process takes about an hour. It starts with registration, a health history, and a mini-physical. The actual donation usually takes less than 10-12 minutes. Afterward, you will be asked to spend a few minutes in the "canteen" where you can have a light refreshment before returning to your normal activities.

**How much blood is taken — won't it make me weak?**

A blood donation equals approximately one pint of blood. The average adult body has 10-12 pints. The vast majority of people will not feel any different because of the donation. A very small percentage may experience temporary dizziness, but some rest and fluids will help you feel better quickly. Your body will replace the lost fluid within 24 hours.

**What will happen to my blood after I donate?**

Each blood donation is assigned a unique computer

barcode number, which will identify it throughout its path from the donor to a hospital patient. Immediately after the blood donation, the blood is placed into transport containers designed to keep it at a safe temperature until it reaches a Red Cross component laboratory. Samples of the blood donation are simultaneously sent to one of nine Red Cross National Testing Laboratories to be tested for transmissible diseases. In the component lab, the blood is separated into its components: red blood cells, platelets, and plasma. The products are then placed in quarantined, temperature-controlled refrigeration units until the test results are received (usually 12-16 hours later), and afterward the blood can be released for distribution or destroyed. From local distribution centers, the blood is transported to hospitals based on patient need. Hospital personnel then transfuse the blood or blood products to a patient in need.

**Can I direct my blood donation to an individual?**

Patients scheduled for surgery may be eligible to donate blood for themselves in the weeks before non-emergency surgery in a process known as autologous donation. If an autologous donation is not used, it is discarded. Family members and friends can also make directed donations. Directed donations are fully tested, so if they are not used by the intended patient, they can be released for use by other patients.

**Can I direct my blood donation to the military?**

The American Red Cross has created a strong operations network that helps us direct your blood donation to the areas of the country — or the world — where they are most needed. While you can't direct your donation to be specifically routed to military personnel, you can be sure that it will be sent to the areas of most critical need.

**For more information:**

<http://www.redcross.org/donate/give/>



## About Cervical Cancer

### January is Cervical Cancer Awareness Month

An estimated 10,500 women are diagnosed with cervical cancer each year. In most cases, it's a slowly progressing disease with few, if any, clear-cut symptoms.

#### Causes

There are several factors that increase your risk for cervical cancer. These increase your risk basically by increasing your risk of exposure to human papillomavirus (HPV). HPV is now believed to be the cause of almost all cervical carcinoma, and HPV types 16 and 18 are thought to be the most important types causing cervical cancer. For more information on HPV, please refer to the article below.

Research suggests that often two of the following co-factors are present when cervical cancer develops:

- You have had sex with many partners.
- You became sexually active before you were 18.
- You smoke.
- Your immune system is weakened, such as in women who have human immunodeficiency virus (HIV) or are on medications to suppress their immune system after a transplant.

#### Method for Detecting Cervical Cancer

A Papanicolaou (Pap) smear is a simple procedure for

women that involves swabbing a small sample of cells from the cervix during a pelvic exam. These cells are transferred to a slide and then examined and evaluated by a certified laboratory. In addition to testing for cancerous or precancerous conditions, the Pap smear is also useful for detecting some types of infections.

Cervical cancer screening should begin approximately three years after a woman begins having vaginal intercourse, but no later than 21 years of age. Screening should be done every year with conventional Pap tests or every two years using liquid-based Pap tests. At or after age 30, women who have had three normal test results in a row may get screened every two to three years. Women 70 years of age and older who have had three or more normal Pap tests and no abnormal Pap tests in the last 10 years and women who have had a total hysterectomy may choose to stop cervical cancer screening.

More frequent Pap smears are recommended for women who have had an abnormal Pap smear in the past 5 years or who are HIV positive. Women with HIV infection may need more frequent Pap smears as their disease progresses.

To ensure the most accurate test results with your Pap smear, avoid using a vaginal douche or any type of lubricant for 24 hours before having a Pap smear. If you have used either, tell your doctor before the procedure.

Regular Pap smear screening makes it possible to find early evidence of cancer, when the disease is easier to cure. When diagnosed early, cervical cancer can be cured in almost all cases.

#### For more information:

<http://concern-eap.personaladvantage.com/logon?target=cancer>

## More About HPV

### What is genital HPV infection?

Genital human papillomavirus (HPV) is the most common sexually transmitted infection (STI). There are more than 40 HPV types that can infect the genital areas of men and women, including the skin of the penis, vulva (area outside the vagina), and anus, and the linings of the vagina, cervix, and rectum. You cannot see HPV. Most people who become infected with HPV do not even know they have it.

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**What are the symptoms and potential consequences of HPV?**

Most people with HPV do not develop symptoms or health problems. But sometimes, certain types of HPV can cause genital warts in men and women. Other HPV types can cause cervical cancer and other less common cancers, such as cancers of the vulva, vagina, anus, and penis. The types of HPV that can cause genital warts are not the same as the types that can cause cancer.

HPV types are often referred to as “low-risk” (wart-causing) or “high-risk” (cancer-causing), based on whether they put a person at risk for cancer. In 90% of cases, the body’s immune system clears the HPV infection naturally within two years. This is true of both high-risk and low-risk types.



Genital warts usually appear as small bumps or groups of bumps, usually in the genital area. They can be raised or flat, single or multiple, small or large, and sometimes cauliflower shaped. They can appear on the vulva, in or around the vagina or anus, on the cervix, and on the penis, scrotum, groin, or thigh. Warts may appear within weeks or months after sexual contact with an infected person. Or, they may not appear at all. If left untreated, genital warts may go away, remain unchanged, or increase in size or number. They will not turn into cancer.

Cervical cancer does not have symptoms until it is quite advanced. For this reason, it is important for women to get screened regularly for cervical cancer.

Other less common HPV-related cancers, such as cancers of the vulva, vagina, anus, and penis, also

may not have signs or symptoms until they are advanced.

**How can people prevent HPV?**

A vaccine can now protect females from the four types of HPV that cause most cervical cancers and genital warts. The vaccine is recommended for 11 and 12 year-old girls. It is also recommended for girls and women age 13 through 26 who have not yet been vaccinated or completed the vaccine series.

For those who choose to be sexually active, condoms may lower the risk of HPV, if used all the time and the right way. Condoms may also lower the risk of developing HPV-related diseases, such as genital warts and cervical cancer. But HPV can infect areas that are not covered by a condom—so condoms may not *fully* protect against HPV. So the only sure way to prevent HPV is to avoid all sexual activity.

**How can people prevent HPV-related diseases?**

There are important steps females can take to prevent cervical cancer. The HPV vaccine can protect against most cervical cancers (see above). Cervical cancer can also be prevented with routine cervical cancer screening and follow-up of abnormal results. The Pap test can identify abnormal or pre-cancerous changes in the cervix so that they can be removed before cancer develops. An HPV DNA test, which can find high-risk HPV on a woman’s cervix, may also be used with a Pap test in certain cases. The HPV test can help healthcare professionals decide if more tests or treatment are needed. Even women who got the vaccine when they were younger need regular cervical cancer screening because the vaccine does not protect against all cervical cancers.

There is currently no vaccine licensed to prevent HPV-related diseases in males. Studies are now being done to find out if the vaccine is also safe in men, and if it can protect them against HPV and related conditions. The FDA will consider licensing the vaccine for boys and men if there is proof that it is safe and effective for them. There is also no approved screening test to find early signs of penile or anal cancer. Some experts recommend yearly anal Pap tests for gay and bisexual men and for HIV-positive persons because anal cancer is more common in these populations. Scientists are still studying how best to screen for penile and anal cancers in those who may be at highest risk for those diseases.

Generally, cesarean delivery is not recommended for women with genital warts to prevent recurrent

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respiratory papillomatosis, or RRP, in their babies. RRP is caused by HPV infection of the child's throat, yet it is unclear whether cesarean delivery actually prevents RRP in infants and children.

### Is there a test for HPV?

The HPV test on the market is only used as part of cervical cancer screening. There is no general test for men or women to check one's overall "HPV status." HPV usually goes away on its own, without causing health problems. So an HPV infection that is found today will most likely not be there a year or two from now. For this reason, there is no need to be tested just to find out if you have HPV now. However, you should get tested for signs of disease that HPV can cause, such as cervical cancer.

- **Genital warts** are diagnosed by visual inspection. Some health care providers may use acetic acid, a vinegar solution, to help identify flat warts. But this is not a sensitive test so it may wrongly identify normal skin as a wart.
- **Cervical cell changes** can be identified by routine Pap tests. The HPV test can identify high-risk HPV types on a woman's cervix, which can cause cervical cell changes and cancer.

### Is there a treatment for HPV or related diseases?

There is no treatment for the virus itself, but a healthy immune system can usually fight off HPV naturally. There are treatments for the diseases that HPV can cause:

- **Visible genital warts** can be removed by patient-applied medications or treated by a health care provider. Some individuals choose to forego treatment to see if the warts will disappear on their own. No one treatment is better than another.
- **Cervical cancer** is most treatable when it is diagnosed and treated early. But women who get routine Pap testing and follow up as needed can identify problems before cancer develops. Prevention is always better than treatment.
- **Other HPV-related cancers** are also more treatable when diagnosed and treated early.

**For more information visit:**

<http://www.cdc.gov>



## Balancing Your Post-Holiday Budget

### What Should I Do If I'm Over My Head in Debt?

The holidays are over, but you might still be paying for them. The holiday spirit causes many of us to be generous beyond our means. If you now find yourself in over your head, there are many options available to put you on the path to a balanced budget.

Before even worrying about the legal consequences of not being able to pay back all of your debts, the first thing you have to do is shut down your spending. Cut up your credit cards and pay for everything in cash. Draw up a household budget and stick to it. Start eating at home. Learn to control your spending.

You have to come up with a game plan on how you're going to deal with your debt. You can begin by gathering up all your financial records and organizing them. Next, you want to prepare a financial summary by putting it all down on paper. Start out by listing all of your present sources of income and any anticipated changes in the future, good and bad. Then, list information about all of your debts, including the creditor, the type of debt, the amount owed, interest rates, repayment terms, collateral, and who is responsible for repaying the debt. Don't forget about taxes you may owe.

Having this information at your fingertips will hopefully bring things into focus for you in terms of how to deal with your debt. Perhaps more importantly, though, it

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gives you a concise financial picture that you can use to get advice from others on how to deal with your problems.

There are many paths you can take and the decisions won't be easy. So don't try to resolve all of your problems by yourself without first seeking advice from people you can trust. For practical advice and moral support, you'll probably first want to talk to your parents, siblings, or even close friends. Keep in mind, though, that they may find it difficult to give you objective advice.

Before you get too far down the road, you'll want advice from professionals who deal with these types of problems on a day-to-day basis. These people would include:

- Lawyers
- Accountants
- Debt Counselors
- Financial Planners
- Intervention Counselors
- Financial Mediators
- Insurance Agents
- Bankers or Mortgage Loan Brokers

If they are given concise and accurate financial information, financial advisors may be able to quickly diagnose the situation and lay out your options. You may even be able to get some preliminary help for free. But you should have the expectation of having to pay these advisors at some point if you're truly going to benefit from their services. In the grand scheme of things, financial advisors have ways of working out payment arrangements for people like yourself, and whatever you pay them may be money well spent.

**For more information:**

[http://concern-eap.personaladvantage.com/logon?target=debt\\_and\\_bankruptcy](http://concern-eap.personaladvantage.com/logon?target=debt_and_bankruptcy)