

# *YOUR HEALTH*

Newsletter September 2020

 Health Partners



**KNOW YOUR NUMBERS: LET'S GET HEALTHY!**  
**SUICIDE PREVENTION: A COMPLEX SUBJECT**

For more information contact your Health Partners CMO  
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## Do you know your numbers?

Do you know what your BMI or blood pressure should be? What is healthy and what is not? Let's take a look...

**Blood pressure (BP):** your heart is a muscular pump. It pumps blood around your body using a system of blood vessels. BP is created by the force of your heart pumping blood out and the resistance of the vessel walls through which the blood passes.

BP is measured in millimetres of mercury (mmHg) and is usually written down like this: 120/70 mmHg. There are two numbers, because BP varies as the heart beats. The high number is the peak pressure created as the heart beats. The lower number is the residual pressure within the vessels as the heart rests between each beat. High BP is a reading greater than 140/90 mmHg. High BP is also known as hypertension.

**Ideally, we should all have a BP below 120/80.**

This is the ideal BP for people wishing to have good health. At this level, we have a much lower risk of heart disease or stroke.

Most adults in the UK have BP readings between 120/80 to 140/90. If your BP is within this range, you should be taking steps to bring it down or to stop it rising any further. If you have diabetes, your doctor will want to make sure that your BP is very well controlled. This means they will probably want it to be below 130/80 mmHg.

**Heart rate (or pulse):** a normal resting heart rate for adults is between **60 to 100 beats a minute**. Generally, a lower heart rate at rest implies more efficient heart function and better cardiovascular fitness, e.g. a well-trained athlete might have a normal resting heart rate closer to 40 beats a minute.

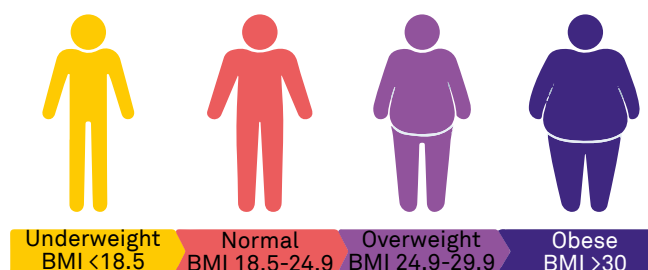
You may have heard of the term "sinus rhythm". This is the name given to the normal rhythm of the heart, where the electrical impulses that pace the heartbeat are in a regular and rhythmical manner.

**Body mass index (BMI):** is a value derived from the weight and height of an individual. It is an attempt to quantify the amount of tissue mass (muscle, fat and bone) in that individual and then categorise that person as underweight, normal weight, overweight, or obese based on that value. Check out [www.nhs.uk/Tools/Pages/Healthyweightcalculator.aspx](http://www.nhs.uk/Tools/Pages/Healthyweightcalculator.aspx)

**Commonly accepted BMI ranges are:**

- Underweight = less than 18.5 kg/m<sup>2</sup>
- Normal weight = 18.5 to 25 kg/m<sup>2</sup>
- Overweight = 25 to 30 kg/m<sup>2</sup>
- Obese = more than 30 kg/m<sup>2</sup>.

People of Asian descent have different associations between BMI, percentage body fat and health risks than those of European descent.



**Blood glucose/blood sugar:** The average normal blood glucose level in humans without diabetes fluctuates but it should be between **4.0 and 7.8 mmol/L**.

**Hyperglycaemia** is the medical term for a high blood sugar level. (Greater than 11.1 mmol/L (200mg/dL)). It is a common problem for people with diabetes. It happens when the body has too little insulin or when it can't use insulin properly. Hypoglycaemia is when a person's blood sugar drops too low. (Less than 4 mmol/L (70mg/dL)).

Blood sugar levels are usually at their lowest in the morning, before the first meal of the day (termed the fasting level), and rise after meals for an hour or two by a few mmol/L. Blood sugar levels outside of the normal range may be an indicator of a medical condition.

If you are diabetic, your medical team will test your blood regularly for a substance called **HbA1c**. HbA1c differs from blood glucose levels. It is a blood protein made from a combination of haemoglobin and glucose (or sugar). The measurement allows clinicians to get an overall picture of what your average blood sugar levels have been over a period of weeks/months. **HbA1c can indicate people with pre-diabetes or diabetes as follows:**

Normal	Below 42 mmol/mol	(<6.0%)
Prediabetes	42 to 47 mmol/mol	(6.0%-6.4%)
Diabetes	>=48 mmol/mol	(>=6.5%)

**Cholesterol:** this is a waxy, fat-like substance found in all cells of the body. Your body needs some cholesterol to make hormones, vitamin D and substances that help you to digest foods. Your body makes all the cholesterol it needs; however, it is also found in some of the foods you eat.

**High blood cholesterol** is a condition in which you have too much cholesterol in your blood. By itself, the condition usually has no signs or symptoms. Thus, many people don't know that their cholesterol levels are too high. People who have a high blood cholesterol have a greater chance of getting coronary heart disease.

**A cholesterol test** is a blood sample which will provide a full "lipid profile". In other words, it will measure the levels of all the different blood fats: total cholesterol, LDL- cholesterol, HDL-cholesterol, and triglyceride concentration.

Cholesterol travels through your blood stream in small packages called lipoproteins. There are two kinds: **Low-density Lipoproteins (LDL) and High-density Lipoproteins (HDL):**

- LDL is sometimes called the "bad" cholesterol. A high-level leads to a build up of cholesterol in your arteries
- HDL is sometimes called the "good" cholesterol. This is because it carries cholesterol from other parts of your body back to the liver where it is removed.

**Triglycerides** are a form of dietary fat found in meats, dairy produce, and cooking oils. After eating a meal, the blood is rich in triglycerides.

It usually takes a few hours for triglyceride levels to return to normal. The higher the level of LDL cholesterol in your blood, the **GREATER** your chance is of getting heart disease. The higher the level of HDL cholesterol in your blood, the **LOWER** your chance is of getting heart disease.

Having a test is the only way you will know if you have high cholesterol. The following are considered healthy for most people:

- Total cholesterol of 5mmol/L or less
- Non-HDL-cholesterol of 4mmol/L or less
- LDL-cholesterol of 3mmol/L or less
- Fasting triglyceride of 2mmol/L or less
- Non-fasting triglyceride of less than 4mmol/L.



**Temperature:** most people think a **normal body temperature** is an oral temperature (by mouth) of 37°C (98.6°F). This is an average of normal body temperatures. Your normal temperature may actually be 0.6°C (1°F) or more above or below this. Also, your normal temperature changes by as much as 0.6°C (1°F) during the day, depending on how active you are and the time of day and is affected by hormones.

**A fever (pyrexia),** in most adults, is an oral temperature above 38°C (100.4°F). A child has a fever when his or her armpit (axillary) temperature is 37.6°C (99.7°F) or higher.

**Low body temperature (hypothermia)** occurs when the core body temperature drops below 35.0 °C (95.0 °F). A very low body temperature can be serious or even deadly. Low body temperature usually happens from being out in cold weather. But it may also be caused by alcohol or drug use, going into shock or certain disorders such as diabetes or low thyroid.

## Suicide prevention: a complex subject

September 10th is Suicide Prevention Day and all of September is devoted to suicide awareness and prevention.

Globally, c.800,000 people a year die by suicide. Since 2013, Great Britain has seen a gradual decline in the number of people dying by suicide, but from 2017, numbers have **started to grow** and are expected to continue to increase. Evidence suggests that **men are three times more at risk of dying by suicide than women**; both men and women between 45 and 49 are most at risk. The rate of **younger people** (under the age of 25) dying by suicide has been increasing in recent years. In addition, the COVID-19 pandemic has seen an increase in suicidal ideation in the UK.

### Why suicide?



There is **no one reason** why individuals may experience thoughts about suicide. People think about suicide for a variety of different reasons - and no thought or reason is more valid than the next. **Suicide can happen to anyone** and, behind each suicide, is an often-complex story including social, psychological and cultural factors such as:

- Difficult life events in the past or current life changing events such as trauma, a relationship breakdown or the death of a loved one
- Substance misuse
- Social isolation
- Financial/workplace/home difficulties
- Underlying mental or physical health conditions such as chronic pain, depression, schizophrenia, or those resulting in disability.

People experiencing thoughts of suicide may also have thoughts that they have let themselves or others down, that nobody cares about them, that they are a burden or a failure, that there is no point in living, or that they will never find a solution to their problems.

### What can I do to help?

Asking somebody how they are feeling can sometimes be enough to break a thought pattern focussed on suicide; this is something we can all do.

We should **pay attention to the wellbeing of others**, whether they be family, friends, colleagues, acquaintances or strangers.

If you are worried that someone may be experiencing thoughts of suicide, talk to them: ask them about how they are feeling. You can help someone who is feeling suicidal simply by **listening to them without judgement**; listening is more important than talking in this context.

You can use the **WAIT** method to help:

- **Watch** out for signs of distress and uncharacteristic behaviour .
- **Ask** how the individual is feeling.
- **It** will pass: assure the individual that, with help, their current feelings will pass and with time, they will start to feel better again.
- **Talk** to others: encourage the individual to seek help from a GP but do not force them to do so; this may lead to them feeling uncomfortable and less likely to share their feelings. Speak to somebody about how you are feeling if needed.

### Getting help



**If you are concerned about your own, or someone else's, thoughts of suicide**, you should contact the emergency services if you believe there may be an immediate risk to life. If no immediate risk to life is present, speaking with a GP is likely to be beneficial; they will be able to discuss the services and treatments available. Other sources of support include:

- **Samaritans:** 24/7 support for anyone in distress - 116 123 or [jo@samaritans.org](mailto:jo@samaritans.org)
- **CALM** (Campaign Against Living Miserably) support 5pm to midnight, 365 days a year. Tel: 0800 58 58 58. Calm also offers support for those affected by suicide. See [www.thecalmzone.net/help/get-help/support-after-suicide/](http://www.thecalmzone.net/help/get-help/support-after-suicide/)
- **Papyrus:** support for the under 35s between of 9am-10pm M-F and 2pm-10pm weekends/bank holidays. Tel: 0800 068 41 41 or email [pat@papyrus-uk.org](mailto:pat@papyrus-uk.org)
- **Childline:** support for those under 19. Tel: 0800 11 11 (doesn't show up on phone bill).
- **Support after suicide partnership:** advice /support for those impacted by suicide. See: [www.supportaftersuicide.org.uk/](http://www.supportaftersuicide.org.uk/)
- **YoungMinds Parents Helpline:** support for parents concerned about the emotional wellbeing of a child/young person up to 25. M-F 9.30am-4pm. Tel: 0808 802 5544.