RECOGNIZING OUR LONG-SERVING EMPLOYEES: After two years of pandemic restrictions on being able to properly recognize years of service, the company was able to celebrate in person recently. TOP: Bill O’Brien, EMS Instructor, Sr. and students: Bill has instructed Health Aides and many others in Basic CPR, First Aid and EMT-1 for 30 years. Bill says, “It’s great to hear that students have used the skills they have learned to save a life.” BELOW: Robert “Doctor Bob” Allen has been the anchor of the YKHC Dental Dept. for 45 years. Shown here with most of the Dental Department, Dr. Allen came to the YK Delta in 1975 when the hospital in Bethel was operated by the Indian Health Service. He sponsored the “Doctor Bob’s” softball team in the 1990s and, along with Dr. Fritz Craft, initiated the Smile Alaska Style dental disease prevention campaign in 1990.
RESOURCES
YKHC main switchboard .......................... 543-6000
Toll Free ........................................ 1-800-478-3321

APPOINTMENTS
Outpatient Clinics ................................. 543-6442
Dental ............................................... 543-6229
Optometry ......................................... 543-6336
Audiology .......................................... 543-6466

SUBREGIONAL CLINICS
Aniak .................................................. 675-4556
Emmonak .......................................... 949-3500
St. Mary’s ........................................ 438-3500
Toksook Bay ...................................... 427-3500
Hooper Bay ........................................ 758-3500

SERVICES
Inpatient (North Wing) ......................... 543-6330
Pharmacy Refill Line ............................. 543-6988
Toll Free ........................................... 877-543-6988
Physical Therapy ................................. 543-6342
Women’s Health ................................ 543-6296
Irnivik Birthing Center .......................... 543-6346
Behavioral Health Services ................... 543-6100
BH CRISIS RESPONSE LINE ............... 543-6499
Substance Abuse Treatment ................... 543-6730
Sobering Center ................................. 543-6830
Developmental Disabilities .................... 543-2762
Emergency Room ............................... 543-6395
Office of Environmental Health & Engineering, Injury Contro & EMS .... 543-6420

ADMINISTRATION & SUPPORT
Administration .................................... 543-6020
Human Resources ............................... 543-6060
Public Relations ................................. 543-6013
Travel Management ............................ 543-6360

The Messenger is a monthly publication produced by the Yukon-Kuskokwim Health Corporation’s Public Relations Department as a report to Tribal Members.

For questions, comments, submission of articles, or subscription information, write to Messenger Editor, Yukon-Kuskokwim Health Corporation, P.O. Box 528, Bethel, Alaska 99559; or call 907-543-6039. E-mail: publicrelations@ykhc.org

Deadline is the 15th of the month, or the preceding Friday if the 15th is on a weekend, for publication on the first of the following month.

The Messenger is also available for download on our website at www.ykhc.org/messenger.

Please ask permission to reprint articles or pictures.

This institution is an equal opportunity provider.

ATTENTION: If you speak Yup’ik, free translations services are available to you. Call 907-543-6603.
Waqaa! We announced in the January 2022 Messenger that we are building a new 109-room customer lodging facility. It will be on the hospital campus and within walking distance of the new hospital. It will be a high quality and safe facility for all customers. Site preparation has already begun. It will be completed over the next two years. We are all looking forward to a nice, new facility that is large enough to handle all customer volumes, regardless of the season. The customer lodging facility will be large enough to accommodate all of our current and future customer needs. It is also being built with future expansion in mind.

After the Board of Directors asked me to take this role as President & CEO, I traveled to all 50 YKHC villages and met with tribal councils, YKHC employees and customers. Many asked that YKHC build a new customer lodging facility because our current 24 room facility, built in 1999, was too small and could not accommodate the daily need, especially when the weather turned poor and village flights were cancelled. The common complaint was, “I want to use the Bethel hospital for my health care but I have no place to stay because the current hostel is always full.” We listened.

We are all very excited to bring this vital project to you, and especially for those in our 50 member villages who need a place to stay that is safe, high quality and on our Bethel campus. Congratulations again to our Board of Directors and all 30,000 of our customers!

Deanna Latham, Vice President of Support Services, has an important update for you on our current construction progress.

Sincerely,

YKHC started the planning and design of the new Qavartarvik Customer Lodging facility in the Spring of 2020. We are very excited that site preparation is now underway so that construction can begin in June. The dirt work and building pad efforts will begin this month and construction materials will be arriving on the first barge this summer. Once the materials are on site, installation of the utilities and piling will occur. The foundation and structural steel will be built over the course of the summer.

By Fall of 2022, construction will begin on the shell of the facility to enclose the building and then in the Winter of 2022 construction will begin on the roof. When the building is fully enclosed, construction of the interior will take place during 2023. We anticipate all of the furniture and equipment to arrive on the last barge of 2023 so that final installation can occur. By January of 2024, construction is scheduled to be completed. We will then be completing final testing and inspections so that we can receive our Certificate of Occupancy. Barrting any unforeseen supply chain delays, we will be ready for opening the new Customer Lodging facility in the Spring of 2024.

Sincerely,

Deanna Latham,
COVID-19 UPDATE

BOOSTERS, BABIES, AND COMMUNITY SPREAD

If you’ve looked at the COVID-19 dashboard (www.ykhc.org/covid) or the weekly COVID-19 Situation Report (https://www.ykhc.org/covid-19/resources/) lately, you may have noticed that the YK Delta region has been at a medium COVID-19 community spread level for several weeks.

At medium, CDC and YKHC guidance states that individuals and communities may choose additional measures to protect themselves and those at high risk of illness. These measures include wearing a well-fitting mask outside your household, and screening testing to detect infection before gathering with persons at high risk for severe disease. To help individuals and communities decide when they may want to implement additional mitigation strategies, YKHC shares data about new cases in villages and sub-regions on our COVID-19 dashboard and in our weekly Situational Report.

The most powerful way to protect yourself and your loved ones from COVID-19 is to get vaccinated and boostered when you are eligible.

The COVID-19 vaccine is recommended for everyone ages 5 and older, including pregnant women!

A recent study indicates that moms who receive a COVID-19 vaccine during pregnancy pass on protection to their babies. Babies born to vaccinated moms are less likely to be hospitalized or experience severe effects from COVID-19, such as respiratory failure.

COVID-19 vaccines protect mom too. Women who catch COVID-19 while they are pregnant are more likely to experience complications during pregnancy. The CDC recommends the vaccine for all women who are pregnant, breastfeeding, trying to get pregnant now, or who might become pregnant in the future.

A booster is strongly encouraged for everyone ages 12 and older who are five months past their second dose of Pfizer or Moderna or two months past their Johnson & Johnson vaccine. The majority of individuals who have been hospitalized or died due to COVID-19 were unvaccinated.

Second boosters are available for people over 50 or with certain health conditions. In late March, based on evidence that a second COVID-19 booster improves protection against severe COVID-19, the CDC and FDA authorized a second booster of Pfizer or Moderna for individuals ages 50 and older who are at least four months past their first booster. A second booster was also approved for immunocompromised people over age 12 who received their booster at least four months ago.

“Studies show that a second booster for vulnerable groups can be lifesaving. This second booster is especially important for individuals who are more vulnerable to COVID-19, including all Alaska Natives over 50 and those who have immunocompromising health conditions,” said YKHC Chief of Staff Ellen Hodges. Throughout the pandemic, Alaska Natives have been disproportionally affected by COVID-19 deaths and hospitalizations.

To sign up for a vaccine or booster, visit http://www.ykhc.org/vaccine or call 800-478-6599. In Bethel, call 907-543-6949 to schedule an appointment.

New COVID-19 cases have stayed relatively stable for the past month, with an average of 80 new COVID-19 cases reported each week between March 25 and April 22, down from more than 800 new cases the week ending Feb. 3.
IMPORTANT INFORMATION ABOUT TUBERCULOSIS IN THE YK DELTA

YKHC is aware of outbreaks of tuberculosis (TB) in the YK Delta. The current case counts are increased from prior years and can lead to strain on the health care system.

To protect the privacy of our patients and the communities we serve, YKHC will not comment on specific villages. However, we want to share information that can help you better understand this disease and reduce its spread.

What is TB?
Tuberculosis (TB) is a preventable and curable infectious disease caused by bacteria. Most people infected with the bacteria that cause tuberculosis don’t have symptoms. When symptoms do occur, they usually include cough (sometimes blood-tinged), weight loss, night sweats, and fever.

How is TB spread?
TB bacteria are spread through the air when a person with TB coughs, speaks, or sings. People with TB are most likely to spread it to those they spend time with every day, such as family members, friends, coworkers, or schoolmates.

What should a person do if they have symptoms or think they have been exposed to someone with TB?
Testing is essential to stopping the spread of TB. If you have symptoms or think you have been exposed to someone with TB, contact your local clinic about getting a TB test. Be sure to tell the health aide or provider when you spent time with the infected person.

What should I expect if there is an outbreak in my community?
YKHC, along with the State of Alaska Public Health Department, provides care for individuals with TB. If an individual discloses their TB diagnosis, supporting a household by food delivery, gas vouchers and other strategies could reduce the strain of isolation. In accordance with HIPPA, YKHC will not report any patient information or diagnoses.

Contact tracing is done for all active TB patients, which helps to identify and arrange to test other people who may have been exposed. If there is an increase in cases in an area, TB tests may be offered to everyone in the village. YKHC and the State of Alaska Public Health Department continually monitor communities in the Delta for new cases.

Community members can help combat TB by encouraging people to call their clinic for a test if they believe they have TB or have been exposed to TB.

HOOPER BAY SEWAGE LAGOON SPILL UPDATE

On February 25, a section on the north side of the sewage lagoon in Hooper Bay collapsed, letting its contents drain completely out and onto the surrounding tundra towards Airport Creek.

After an initial review and discussion of the situation with the tribe, city, state and federal agencies, and non-profits, an exposure warning was immediately released and a local crew of Hooper Bay workers were sent out to temporarily restore the wall with fabric and super sacks of sand.

Following several subsequent meetings with the involved parties and rising concerns of the impact of the sewage discharge on subsistence activities, the Office of Environmental Health and Engineering (OEHE) was tasked with developing and implementing a sampling plan to gain insight into the scope of the impact.

On April 7, after the lagoon dyke was repaired, OEHE staff flew to Hooper Bay, collecting a total of 21 ice samples with corresponding GPS coordinates from various points inside and outside the previously identified areas of expected impact.

The samples were brought back to the OEHE Water Lab and analyzed for the presence of E. coli, a bacteria commonly used as an indicator of fecal contamination in drinking water. Out of the 21 samples, only one—the sample taken immediately outside the lagoon at the discharge point—was found to contain E. coli.

OEHE staff will continue to monitor the affected areas and plan to complete further sampling this spring and summer once the temperatures rise and there is flowing water.
MAY IS MENTAL HEALTH AWARENESS MONTH

Vaping nicotine can increase anxiety symptoms and stress levels. However, many tobacco users falsely believe tobacco products can relieve stress or anxiety.

Using nicotine stimulates the “feel good” chemical known as dopamine. Dopamine allows you to feel pleasure and relaxation and is often used as a distraction from stressful social situations, which leads to the continued use of nicotine.

However, those feel good hormones don’t last long, and within a few hours many experience withdrawal symptoms such as:

• craving for nicotine
• feeling irritated or upset
• feeling jumpy
• restless
• having a hard time concentrating
• changes in sleep and eating habits
• feeling anxious or depressed

Eventually what started off as gratifying experience can lead to dependence because it will take more and more nicotine to create that same feel-good feeling. This cycle can falsely make it feel like the nicotine is relieving stress, anxiety and depression, when in reality it only addresses the withdrawal symptoms and the cycle continues.

Nicotine found in tobacco products can make young people more susceptible to addiction and can harm developing brains. You can read more about the highlighted connections in the Truth Initiative report “Colliding crisis youth Mental Health and Nicotine Use”.

If you or someone you know wants to learn more about options for stopping tobacco use:

**YKHC Tobacco Cessation Program.** A local team of certified tobacco treatment specialist are available to answer questions and assist with a personalized quit plan through counseling services as FDA-approved medications to treat nicotine dependence. Call 1-907-543-6312 for information on how to enroll.

**Alaska’s Tobacco Quit Line** is also available to Alaskans regardless of income or insurance coverage. Visit Alaskaquitline.com or Call 1-800-QUIT-Now (1-800-784-8669). It’s free. It’s confidential. And it works!

---

**YKHC PA AWARDED “DISTINGUISHED PROVIDER”**

Anne Komulainen, a physician assistant at YKHC, was recognized by the Healthy Alaska Natives Foundation for her work as a primary care provider in the YK Delta.

She was presented with the Distinguished Provider Award and “recognized for her compassionate care, important contributions as an advocate, and tireless work as a front-line care provider.” Congratulations Anne and thank you for your efforts to help achieve excellent health for the people in our region for the past 15 years!
May is High Blood Pressure Awareness month. About half of American adults have high blood pressure and most of them don’t know it. High blood pressure increases your risk of heart attack and stroke.

Blood pressure is the force of blood pushing against blood vessel walls. It’s measured in millimeters of mercury (mm Hg).

High blood pressure (HBP) means the pressure in your arteries is higher than it should be. Another name for high blood pressure is hypertension.

Blood pressure is written as two numbers, such as 112/78 mm Hg. The top, or larger, number (called systolic pressure) is the pressure when the heart beats. The bottom, or smaller, number (called diastolic pressure) is the pressure when the heart rests between beats.

**Normal blood pressure** is below 120/80 mm Hg. If you’re an adult and your systolic pressure is 120 to 129, and your diastolic pressure is less than 80, you have elevated blood pressure. **High blood pressure** is a systolic pressure of 130 or higher, or a diastolic pressure of 80 or higher, that stays high over time.

High blood pressure usually has no signs or symptoms. That’s why it is so dangerous. But it can be managed.

Nearly half of the American population over age 20 has HBP, and many don’t even know it. Not treating high blood pressure is dangerous. High blood pressure increases the risk of heart attack and stroke.

Make sure you get your blood pressure checked regularly and treat it the way your health care professional advises.

**Am I at higher risk of developing HBP?**
There are risk factors that increase your chances of developing HBP. Some you can control, and some you can’t.

**Those that can be controlled are:**

- Cigarette smoking and exposure to secondhand smoke

**RECIPE OF THE MONTH:**
Brown Rice Pudding

**Ingredients:**

- 1 ¼ cups water
- ½ cup uncooked brown rice
- ¼ teaspoon salt
- 3 cups fat free milk
- 3 tablespoons brown sugar
- 1 teaspoon vanilla extract
- Berries or other fruit (optional)

**Preparation:**

1. In a large saucepan, combine water, rice, and salt.
2. Bring to a boil.
3. Reduce heat, cover, and simmer for 30-45 minutes or until tender.
4. Stir in milk and brown sugar.
5. Cook, uncovered, for 40-50 minutes, stirring occasionally.
6. Remove from heat and stir in vanilla.
7. Chill if desired.
8. Serve with fruit on top.

Adapted from - https://www.tasteofhome.com/recipes/brown-rice-pudding/
SPRING IS MADE FOR WALKING

by Erin Knowles, DPT

Spring is in the air in Bethel and the YK Delta! With the increasing temperatures and the shrinking mountains of snow comes the opportunity for us to spend the longer daylight hours outside.

Did you know that it is recommended that adults get at least 150 minutes of moderate-intensity aerobic physical activity or 75 minutes of vigorous-intensity physical activity, or an equivalent combination each week?

It is also recommended that children and adolescents be active for at least 60 minutes each day. These guidelines can help to contribute to overall health and decrease the risk of chronic diseases such as heart disease, cancer, depression or diabetes. Walking is a great way to meet these recommendations, and it doesn’t require a gym membership or fancy equipment.

Sometimes as people are beginning a new exercise or walking program, they worry about flaring up old injuries, or getting new ones. There are a number of things that you can do to decrease the likelihood of injury, make a walking program more enjoyable from the start, and stay motivated.

How to start

The best way to get started with a walking program is to set reasonable goals.

Sit Less: Avoid taking less than 5000 steps per day or sitting for long periods

Walk More: Aim for at least 7500 steps per day

Exercise: Aim to get 3000 of these steps in a 30 minute time frame. This rate of 100 steps per minute allows you to easily meet the recommended daily activity levels to help reduce risk of chronic diseases.

How to reach your goals

No one is going to count the number of steps they take in a day, but most smartphones have free applications that can track your steps for you. Some of those applications are already installed on the phone! Buying a pedometer is also an option, and they are readily available online for around $13. Tracking steps helps you stay on track to meet your goals.

Start small and progress slowly. This is important for injury prevention, as well as staying on track with your goals. On week one, start with a 5 minute walk at lunch, or to start your day. If you can fit in two 5 minute walks a day, great! Then, on week two add 5 to 10 minutes to your daily walks. Then on week 3, add 5 to 10 more minutes. Your walk schedule can look something like this:

<table>
<thead>
<tr>
<th>Week</th>
<th>Sun</th>
<th>Mon</th>
<th>Tues</th>
<th>Wed</th>
<th>Thurs</th>
<th>Fri</th>
<th>Sat</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 1</td>
<td>5 min</td>
<td>5 min</td>
<td>5 min</td>
<td>5 min</td>
<td>5 min</td>
<td>5 min</td>
<td>5 min</td>
</tr>
<tr>
<td>Week 2</td>
<td>10 min</td>
<td>10 min</td>
<td>10 min</td>
<td>10 min</td>
<td>10 min</td>
<td>10 min</td>
<td>10 min</td>
</tr>
<tr>
<td>Week 3</td>
<td>20 min</td>
<td>20 min</td>
<td>20 min</td>
<td>20 min</td>
<td>20 min</td>
<td>20 min</td>
<td>20 min</td>
</tr>
<tr>
<td>Week 4</td>
<td>30 min</td>
<td>30 min</td>
<td>30 min</td>
<td>30 min</td>
<td>30 min</td>
<td>30 min</td>
<td>30 min</td>
</tr>
</tbody>
</table>

Remember this is just an example. Each person is different, and your pace to increase your walking time might vary. If you are concerned about an old injury or want a more tailored program, talk to your doctor or physical therapist.

Enjoy it! If you don’t want to walk alone, bring a friend or family member. Listen to music. Vary your routine or your route. If you prefer to walk indoors, a treadmill is a great option as well. Treadmills also allow you to vary your speed and incline which can be an added benefit.

Remember, no one is perfect. It is okay to miss a day, but don’t give up! Remind yourself how much better you feel when you have been active, and get back on track.

Keep in mind, the walking program should be in addition to what you already do in your average day. This can be added to the daily schedule of a person who isn’t very active at all as well as someone who is always on the go. The added activity will help make your everyday activity easier, less tiring, and more manageable.

Happy Spring, and happy walking!
START STRONG, STAY UP TO DATE:  
Protect your little ones with childhood vaccines  
by Justin Willis, MD, YKHC Pediatrician

Her grandson was six weeks old and she brought him into the clinic for a Well Child check and his first set of immunizations. As I gave him his vaccinations, I noticed the grandmother was tearing up.

I understand parents and guardians often get emotional seeing their child cry after immunizations so I reassured her that the mild pain he was feeling would soon resolve. She turned to me and said, “I am just so happy he is finally protected.” Her tears were those of joy.

She told me about times before childhood immunizations when there was widespread disease among children and that she was grateful that her grandson had started his journey toward protection.

Moments like this are some of my most cherished from my time in the YK Delta. Elders know the importance of caring for the little ones in order to keep the community strong and healthy.

My name is Justin Willis and I am one of the pediatricians at the Yukon-Kuskokwim Health Corporation. Preventing disease in children is my passion and childhood immunizations are an important way to protect our little ones against serious disease. I am writing to urge everyone to make sure their children’s immunizations are up to date.

Over the last two years, the childhood immunization rates in the YK Delta have fallen dramatically, particularly for children under the age of two. Because of low immunization rates, we have started to see vaccine-preventable diseases in our communities. I am concerned that we are going to start seeing worsening disease unless the childhood immunization rates improve.

The childhood vaccine schedule is safe and carefully designed by medical experts with young immune systems in mind. Childhood vaccines start at birth with the first vaccine against hepatitis B, a bloodborne infection that can cause serious harm to the liver. At 6-to-8 weeks of age, the child receives vaccines that protect against some brain infections, pneumonias, blood infections, ear infections, tetanus, whooping cough, polio, hepatitis B and a diarrheal infection called rotavirus.

These immunizations are repeated at 4 months and 6 months to help the child’s immune system build greater protection.

Immunizations against chicken pox, measles, mumps, rubella, and hepatitis A are given to children at one year old. Additional immunization boosters for tetanus, whooping cough, and hepatitis A are scheduled at 15 and 18 months. Between 4 to 6 years and 11 to 18 years, kids are due for their final childhood vaccinations.

Vaccines at YKHC are free and available to every child. Immunization records are tracked at YKHC to ensure that your child gets the appropriate immunizations at each visit.

If your child is behind the recommended vaccines schedule, providers at YKHC will help you get them caught up and protected. YKHC healthcare providers desperately want to partner with you to make sure your kids start strong and stay up-to-date with childhood vaccines.

We must all act to make sure that our children are protected. Call your local clinic today to schedule an appointment for vaccinations and a Well Child visit. In Bethel, call 907-543-6442. As we improve our childhood immunization rates and protect our children, we can all share in the sense of relief that the grandmother felt when her grandson was immunized, that we are protecting our children and our community.
NOVEMBER 2021
HEALTH AIDE OF THE MONTH:
Annie Andrew, CHA II from Kasigluk

Annie Andrew is always willing to help her community and communities in the Yukon-Kuskokwim Delta. As a Community Health Aide-I, Annie was approved to hold the on-call phone and help her co-workers cover on-call shifts.

During her scheduled on-call shifts she would accept special assignments such as covering “unmanned” villages as well. Annie, together with Kasigluk’s clinic staff, also achieved short-term goals that included vaccinating their community against COVID-19 and becoming vaccine ambassadors for the community.

SCHOLARSHIP RECIPIENTS MAKE A DIFFERENCE!

YK-AHEC features Renae Keene—one of our very own Community Health Aides in Kasigluk who is looking forward to pursuing a nursing career with the help of YKHC scholarships.

My name is Renae Keene, most everyone calls me by my nickname “Pretty.” I grew up in Kasigluk and graduated from Akiuk Memorial School. I’ve been a Community Health Aide since 2015. I love helping my community in all ways that I possibly can.

What are your strengths and weaknesses?
One of my strengths is to keep moving forward without giving up, no matter what obstacles I may encounter in life, good or bad. Life is full of mistakes, but there is always a way to overcome them. Never ever say you “can’t do it” because you can.

What do you do for fun and recreation and what makes you happy and excited about life?
Things I like to do for fun are playing basketball, subsistence gathering during the summer time, like picking berries, fishing, cutting fish, etc.

How has YKHC supported you in your journey towards your educational goal?
YKHC provided all the trainings that we need to complete as a community health aide. Thanks to all the BTIs and SIs for putting all their effort/support in teaching us during our classes and facilitating our success. If we didn’t have the support of the BTIs and SIs, the community health aides wouldn’t be able to achieve their goals and support their communities.

Do the staff development initiative and support that YKHC offers in scholarships and training assistance motivate you to pursue further education after you graduate in May of this year?
Yes! After completing all session trainings as a community health aide, I’d love to start taking courses towards my nursing degree.

How would your instructors/friends/co-workers/classmates describe you?
They would describe me as a fast worker and a fast learner.

What three words would you choose to best describe yourself?
The three words that would best describe me are bold, strong, independent

What would you say to someone who is thinking of going to school to further their education and expand their career opportunities?
Do what you think is best for you. Do not sit around and wait for something to come your way because sitting and waiting will not get you anywhere in life. You need to get up on your feet to get where you want to be because no one else is going to do it for you. Only you can decide to make a difference in your life by the choices you make. My parents would always remind me of these words before I graduated from high school and this advice has always stayed in my mind and helped me to keep moving forward.
MAY BREAKUP SAFETY MESSAGE
Five Basic Safety Tips for Boaters:

1. Make sure everyone wears a life jacket. This can help them stay afloat in rough waters, protect them against hypothermia, and in some cases, keep their head above water.

2. Check the weather forecast and be prepared for it to change. A calm day can quickly turn ugly on the water. Keep an eye out for changing weather conditions and stay on top of the forecast while boating.

3. Use a carbon monoxide detector. All internal combustion engines emit carbon monoxide, a poisonous gas that can make you sick in seconds and kill in minutes. Remember, you cannot see, smell, or taste CO.

4. File a float plan. The U.S. Coast Guard recommends that you always tell a friend or family member where you plan to go and when you’ll be back.

5. Get a free Vessel Safety Check. Boats are complex machines and need regular maintenance to stay running smoothly and safely.

BLOOD PRESSURE, from p. 7

- Diabetes
- Being obese or overweight
- High cholesterol
- Unhealthy diet (high in sodium, low in potassium, and drinking too much alcohol)
- Physical inactivity

Factors that can’t be modified or are difficult to control are:

- Family history of high blood pressure
- Race/ethnicity
- Increasing age
- Gender (males)
- Chronic kidney disease
- Obstructive sleep apnea

Socioeconomic status and psychosocial stress are also risk factors for HBP. These can affect access to basic living needs, medication, health care professionals, and the ability to adopt lifestyle changes.

How can I tell I have it?
The only way to know if you have high blood pressure is to get it checked regularly.

For proper diagnosis of HBP, your health care professional will use an average based on two or more readings obtained on two or more visits.

What can I do about HBP?

- Don’t smoke and avoid secondhand smoke.
- Reach and maintain a healthy weight.
- Eat a healthy diet that is low in saturated and trans fats and rich in fruits, vegetables, whole grains and low-fat dairy products. Aim to consume less than 1,500 mg/day of sodium (salt). Even reducing your daily intake by 1,000 mg can help.
- Eat foods rich in potassium. Aim for 3,500 – 5,000 mg of dietary potassium per day.
- Limit alcohol to no more than one drink per day if you’re a woman or two drinks a day if you’re a man.
- Be more physically active. Aim for 150 minutes of moderate-intensity physical activity or at least 75 minutes of vigorous physical activity per week, or a combination of both, spread throughout the week. Add muscle-strengthening activity at least two days per week for more health benefits.
- Take medicine the way your health care professional tells you.
- Know what your blood pressure should be and work to keep it at that level.
## WHO’S COMING TO A CLINIC NEAR YOU?

The following providers will be bringing healthcare services closer to your home in the coming months. To schedule an appointment time, contact your village health clinic. Dates are subject to change dependent on weather or other scheduling issues.

### May

**Dental**
- **Anvik**: Kathrine Levi, DHAT + 1 .............................. 5/2-6
- **Nightsmte**: Allison Ayapan, DHAT ............................. 5/2-6
- **Hooper Bay**: Dr. Cory Johnson ................................. 5/2-9
- **Chevak**: Janette Ulak, DHAT + 1 ............................ 5/9-13
- **Crooked Creek**: Tamja Woods, DHAT .................... 5/9-13
- **Pilot Station**: Renee Cheemuk, DHAT .................... 5/9-13
- **Kipnuk**: Shawn Martin, DHAT + 2 DA .................... 5/9-13
- **Mekoryuk**: Allison Ayapan, DHAT ......................... 5/9-14
- **Holy Cross**: Katherine Levi, DHAT + 1 .................... 5/16-20
- **Aniak**: David Humphrey DDS and + Dental Assistant 5/16-20
- **Chevak**: Wilma Uisok, DHAT + 1 .......................... 5/16-19
- **Hooper Bay**: Janette Ulak, DHAT ......................... 5/23-27
- **Pilot Station**: Bernadette Charles, DHAT ................. 5/23-27
- **Emmonak**: Camille Humphrey DDS and DA .......... 5/23-27
- **Russian Mission**: David Humphrey DDS + 2 assistants 5/23-27
- **Tununak**: Allison Ayapan, DHAT + 1 ..................... 5/23-27
- **Stony River**: Kathrine Levi, DHAT + 1 ..................... 5/30-6/3
- **Pilot Station**: Renee Cheemuk, DHAT + 1 ............... 5/31-6/3

**Family Medicine**
- **Kalskag**: Racheal Youngblood, FNP+Shelbye Simeon, CHP 5/2-6
- **Kwigillingok**: Jeffrey Thompson PA-C-BTI .................. 5/2-6
- **Kongiganak**: Jeffrey Thompson PA-C-BTI ............... 5/9-13
- **Aniak**: Jeffrey Thompson PA-C-BTI and Addie Wiseman SI 5/16-20
- **Chevak**: Angela Waller, FNP ................................. 5/16-20

**Optometry**
- **Aniak**: Pam Conrad +3 ............................................. 5/2-6
- **Alakanuk**: Pam Conrad, Optometry ....................... 5/9-13
- **Atmautluak**: Pam Conrad ..................................... 5/16-20
- **Kotlik**: Kalistook + 3, Optometry ......................... 5/23-27
- **Newtok**: Pam Conrad + 3, Optometry .................... 5/31-6/3

### June

**Dental**
- **Chefornek**: Allison Ayapan, DHAT ............................. 6/6-10
- **Chevak**: Janette Ulak, DHAT + 1 ............................ 6/6-10
- **Grayling**: Tamja Woods, DHAT .............................. 6/13-17
- **Marshall**: Renee Cheemuk, DHAT ......................... 6/13-17
- **Kalskag**: Kathrine Levi, DHAT + 1 .......................... 6/20-24

**Physical Therapy**
- **Kalskag**: Racheal Youngblood, FNP+Julia Fisher, NA .... 6/27-7/1

**Family Medicine**
- **Stony River**: April Mattson, CHP ............................. 6/9-13

**Optometry**
- **Aniak**: Kathrine Levi, DHAT + 1 ............................. 7/4-6
- **Chevak**: Janette Ulak, DHAT ................................. 7/11-15
- **Chevak**: Janette Ulak, DHAT ................................. 7/11-15
- **Pilot Station**: Renee Cheemuk, DHAT .................... 7/18-22
- **Pilot Station**: Bernadette Charles, DHAT ............... 7/25-29

**Family Medicine**
- **Chevak**: Anetha Peterson, FNP ............................ 7/25-29

**Optometry**
- **Aniak**: Kathrine Levi, DHAT + 1 ............................ 7/5-6
- **Quinahagak**: Eliza Caguioa PT ............................. 7/13-15
- **Aniak**: Kathrine Levi, DHAT + 1 ............................ 7/20-24