

**MARBLE VALLEY HEALTHWORKS**

*Personalized Medical Practice*

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# TETANUS VACCINE

There is confusion surrounding which tetanus vaccine to receive as more than one type is available

and some also contain a vaccine for pertussis. In addition, recommendations change every few years. Here is some clarification about these two vaccines.

Tetanus is caused by bacteria called *Clostridium tetani*. *Clostridium tetani* spores are located in soil and dust, which can enter the body through a puncture wound and result in severe contractions and convulsions of muscles, particularly the jaw. Tetanus can be fatal.

Pertussis, otherwise known as whooping cough, is caused by bacteria called *Bordetella pertussis*. This is a very contagious respiratory illness with symptoms of a hacking and spasmodic cough. Though adults can be sickened by whooping cough, it is usually not dangerous except to children. Each of these illnesses can be prevented by effective vaccines. The tetanus vaccine is available by itself (Td) as well as in combination with the pertussis vaccine (Tdap).

Tdap is routinely given to children ages 11-12. After this, Td should be given every 10 years; however, one of these boosters should be with the Tdap. The CDC recommends that all adults receive one Tdap. Additionally, the CDC recommends a Tdap booster for pregnant women. We have been asked if a booster is needed for other adult contacts of infants and the current recommendation is NO, as long as they've had their one adult Tdap.

Tetanus boosters are recommended to:

1. Anyone with a wound contaminated by dirt or soil and having received a tetanus vaccine more than 5 years ago. The booster may be given up to 72 hours following the injury.
2. Anyone whose last tetanus booster was more than 10 years ago (with or without a wound).

The state of Vermont currently pays for both Td and Tdap provided to patients under age 65. Medicare covers both vaccines when given to someone being treated for a contaminated wound, but does not pay for either vaccine given as a routine booster.

At MVHW, we make a point to review your vaccine status during your Comprehensive Wellness Exams and keep you current on all recommended vaccinations. We provide Tdap and Td supplied by the state to patients 64 and younger. If you are 65 or older, and require a tetanus booster not covered by your insurance, we'll provide your vaccine at cost.

*We've updated our website!*

*Please check it out:*

[www.YourHealthYourDoctor.com](http://www.YourHealthYourDoctor.com)

*(a link to the Patient Portal is on the website)*

*Have you joined our Patient Portal?*

*The Patient Portal is our secure e-mail communication tool.*

***Please contact our office today  
to enroll! (802) 770-1805***

## CRANBERRY SUPPLEMENTS

Cranberries have long been felt to help prevent urinary bladder infections in some people with a history of frequent infections. Traditionally it was thought that cranberry products prevented infections by making a person's urine too acidic to allow bacterial growth. Recent research suggests that a group of antioxidant chemicals present in cranberries and other plants might be responsible for cranberries' protective effects. The chemicals, called proanthocyanidins (OPCs), appear to work by preventing bacteria from clinging to the interior bladder wall, and letting them be washed out with the urine.

The researchers compared the concentration of OPCs in a variety of commercially available cranberry supplements (ranging from none to 175 mg/g), and found that it correlated with their ability to prevent bladder infections. The more OPC a supplement has, the more likely it is to work. The researchers suggest that consumers use products with at least 36 mg/g of proanthocyanidin content. During a recent trip to several pharmacies I was disappointed to find that the supplements listed their cranberry content, but not specifically their OPC concentration.

Take Home Messages:

If you suffer from frequent bladder infections, you might find cranberry supplements containing at least 36 mg / g of OPC effective in preventing them. Look for supplements with 500 mg or more of cranberry concentrate.

We have much to learn about the many beneficial chemicals present in fruits and vegetables. It's safe to assume that there are still more that are not even discovered, much less understood. A well-rounded diet with lots of fruits and vegetables is the only way to ensure you are fully benefitting from nature's bounty.

Nutritional supplements are a big business. Consumers should be aware that the combination of profitability and lack of regulation creates a Wild West character to the industry. Supplements (being "natural" and thus assumed to be safe) do not need to be proven either safe or effective before being sold, and most products have little research to back up whatever claims are made by the manufacturer.

Though the incidence of lung cancer in the US has been declining, it remains the leading cause of cancer death in the US. The United States Preventive Services Task Force has presented recommendations for screening at-risk individuals for lung cancer, and RRMC will soon be ready to schedule x-ray tests known as low dose computerized tomography (LDCT) for that purpose. Researchers have been looking for effective ways to screen for lung cancer for decades. Screening a population for illness is different from most medical tests in that screening is deployed for a population at risk rather than to individuals with illness or symptoms. Because most individuals assigned to screens will be found to be healthy, screening tests are held to different standards than other diagnostic tests, especially with regards to ease, safety and cost. For lung cancer, low dose computed tomography has been found to fit the bill. LDCT is:

- Able to find lung cancer early, when it can be potentially cured. (Chest X rays failed in this regard.)
- Able to distinguish cancer from other abnormalities. (Another common failure of chest x rays.)
- Safe enough to administer multiple times. (Radiation is a concern over time.)
- Affordable to individuals and society.

Another important decision regarding screening is who to test. Medical tests are never 100% accurate - often not even close. The less accurate a test is to begin with, the more important it is to carefully select only patients that are more likely to have the condition being looked for. That's a real dilemma for a screening test, which by definition is used for people at risk for but without symptoms of the disease. Besides degree of risk, other patient-related factors are whether individuals might be too frail to tolerate or to benefit from treatment. The current recommendations are for the following people to be screened for lung cancer:

- \* Age 55 - 77 years
- \* Smoked at least 30 Pack Years (1 Pack Year = smoking one pack daily for one year, or a half pack daily for 2 years, etc.)
- \* Currently smoking or stopped smoking less than 15 years ago.

We will review your lung cancer risk at your next Comprehensive Wellness Exam, and if appropriate we'll discuss ordering this test for you. If you'd prefer not to wait, we'd be happy to see you sooner to discuss whether screening is appropriate for you.

## LUNG CANCER SCREENING



In effort to improve your communication with our office, we ask that you contact us using the following number only: **(802) 770-1805**

*For all your needs: Scheduling \* Prescription Refills \* Medical questions \* Billing questions*

