

## Juana Negrón



### Case Study Elements

#### Immunizations

- All childhood vaccinations UTD w/HPV
- Influenza vaccination 1 dose annually (IIV or RIV)
- TDAP every 10 years- depending on when she last visited the doctor
- 2 doses of Zoster recombinant (RZV)

#### Screening

- **Lung cancer screening**
  - Pt is 52 y/o and has a 40-pack year history, quit 6 months ago but went back to smoking. Currently smokes half a pack a day.
- **Cervical cancer screening**
  - PAP smear with HPV tests every 5 years
- **Breast cancer- mammogram**
  - Should be every 1 year due to increased risk from family history of breast cancer, BRCA gene screening can also be performed
- **Colon cancer screening**
- **Osteoporosis screening** due to being postmenopausal and having arthritis
- Obesity
- Alcohol misuse
- Depression
- Hypertension
- Tobacco use and cessation
- HIV
- Glucose check

#### Health Promotion/Disease Prevention Concerns

#### Injury Prevention

- Traffic safety
- No pressure on joints due to having arthritis

- Anything that can cause a fall should be cleared off the floors

### **Diet:**

BMI- 30.9 (obese)

Pt has borderline hypertension, family risk of colon and breast cancer.

Pt states she is having a difficult time maintaining her weight after she loses weight. None of the diets she has been doing have been successful.

I would also suggest the Mediterranean diet for Patient Juana. This diet focuses on plant-based foods such as whole grains and vegetables, legumes with olive oil being the main source of fat. Juana stated that she might not have much will power and seems to be discouraged due to her previous weight loss diets not working long term. In this case I would suggest that she starts out with small steps. Food should be eaten in smaller portions as well which can be done with maybe using a smaller plate. Juana says she loves to cook and eat so I would suggest cooking smaller portions so that she can limit her calories intake. She can drink a glass of water first before eating or even eat a salad first. This will help her feel full faster.

To make sure her blood pressure does not get worse and to reduce risk of CHD, I would recommend Juana to eat minimal red meats and moderate dairy. More fruits, unprocessed grains, non-starchy vegetables and more cold-water fish. Cold water fish such as salmon and mackerel are recommended. For her weight gain concern, I would recommend Juana to avoid trans-fats and saturated fats. Juana loves Puerto Rican foods and those might be fried foods such as fried plantains. Juana can continue to eat Puerto Rican food but should make sure foods are fried in vegetable or olive oil, so it is less trans-fat. These oils are also high in monounsaturated and polyunsaturated fat.

Since Juana has a history of cancers in her family, it is recommended that she has a plant sourced food, be physically active and limit intake of high fat foods.

Here is a sample diet:

Breakfast- Whole wheat bread with a healthy spread like hummus or a fruit pancake with a boiled egg.

Lunch- Salad with grilled chicken sandwich. Can add in some Puerto Rican dishes that are not overly fried.

Dinner- Grilled salmon fish piece with brown rice

### **Exercise:**

Juana is not getting adequate exercise. She has a history of arthritis and asthma. Other than activities at her job, she also walks her 2 dogs. Arthritis and asthma can make it very difficult to do any strenuous exercise. She cannot put pressure on her joints such as when walking up the stairs. I would first compliment Juana for doing as much as she can. Walking her dogs 3 times a day is a great start.

Keeping her goal of maintaining weight loss and preventing hypertension in mind, I would suggest some changes to her exercise routine. Exercise helps maintain weight loss in the long run, helps with hypertension and osteoporosis prevention. First Juana should start out with adding on to her daily routine, such as 3 blocks a day instead of 2 blocks. Then the week after that, Juana can try walking 4 blocks a day. 30 mins of brisk walking a day should be the goal. Juana can also try other light intensity activities such as light stretches or cleaning around the house.

### **Harm Reduction:**

**Juana has well controlled asthma.** I would remind Juana to make sure she uses her inhaler when needed and keep both the ICS and inhaler close by. She works as a sanitarian (pest control) and sometimes some rodents can cause an allergic reaction. To make sure her asthma is not exacerbated, I would suggest making sure she is not breathing in any chemicals at work or going near anything that can cause allergies.

Enough ventilation in the house is also important to make sure her asthma dose not worsen.

**Limit stress-** Juana states she is having a difficult time sleeping and has been feeling anxious. I would recommend Juana to see a provider to help control her anxiety because stress can make her hypertension worse. She can practice meditating or changing her night routine so she can get enough sleep. I can also suggest some resources such as maybe a therapist who can help her handle the stress she is experiencing.

**Daily exercise** to prevent arthritis from getting worse.

### **Brief Intervention:**

Obesity and smoking cessation intervention both applicable. I would use the 5 As for both.

**Obesity-** BMI- 30.9 (obese)

#### **5 A's of obesity management:**

**Ask-** "Can we discuss your weight and what effects it may be having on your weight?"

**Assess-** "Please tell me about your past weight gain and loss? What diets have you tried in the past?" Juana has tried several diet plans in the past but had no success so I would talk to her about worked and what did not. "Juana, you mentioned being stressed and not being able to sleep at night, is that affecting you're eating habits?"

**Advice-** "What do you know about the effects of overweight on obesity?"

Discuss how obesity can make risk of having hypertension and her arthritis worse.

Discuss importance of physical activity for long term maintenance of weight loss. Exercise plan discussed above.

**Agree-** "Is this a good time for you to pursue weight loss? What is your weight goal?"

Talk about realistic expectations of weight loss.

Start out small and reach achievable weight loss. Achievable weight loss is maximum 9-15% over 52-72 weeks. We can start with losing maybe 1 pound a week.

**Arrange/assist-** “Would you like me to refer you to anyone who can help you prep meals or with your exercise regimen?” Arrange follow-up.

### **Smoking Cessation-**

Juana tried to quit smoking in the past but started smoking again because she states she was gaining weight. I would first ask her questions about that experience and what worked for her and what did not. If she was able to quit for 6 months, it was possible for her to try again. It will encourage her to try again if I bring her back to the first time she tried to quit and point out the positive aspects of that. I would complement her for trying to quit and talk about other changes as well. Since she has a 40-year pack history, we cannot quit cold turkey, or she will start smoking again.

#### **5 A's of brief intervention:**

**Ask-** Are you currently smoking? Explore readiness to change and follow-up on what makes them follow that number.

- We know Juana smokes and is willing to try quitting.

**Advice-** I would ask permission to give advice and information. Advice on health risk of smoking and benefits of quitting, short and long term.

- Juana is not a resistant patient, she is willing to quit smoking. I will answer any questions she has about the side effects of quitting smoking. Gaining weight was a side effect so I can inform her that that should not encourage her to start smoking again.

**Assess-** health status

- What motivated you to quit in the past? What worked and what did not? Can I recommend and plan of action to help you take small steps in smoking less?
- Juana currently smokes half a pack a day. Recommend that she cuts down smoking half a pack every to every other day.  
“Juana, since you have asthma, how much do you know the long-term effects of smoking on asthma?”

**Agree-** Do you think this is a manageable goal? If not, we can try smoking only ¼ of a pack a day.

**Arrange-** Talk about barriers such as her weight gain after she tried to quit smoking the first time.

- We also know that she is anxious about her children so I can suggest that stress might be a barrier if smoking is her way of coping with that. I can inform her on ways to minimum stress or provide her with resources to help her in other ways.  
“Juana, is the anxiety about your son making you smoke more?”
- We can try pharmacological agents OTC or prescription- Nicotine patch. Would ask which one she prefers. Arrange follow-up to check progress.

**Substance abuse- not applicable**

**Order to Address Issues:**

1. Smoking cessation
2. Screening
3. Weight management
4. Diet

5. exercise
6. Harm reduction
7. Injury prevention

**References:**

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