



LIVE WELL WORK WELL

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PATH TO END HIV Could Come Within Next Decade for United States

New research has shown that the United States could, in the next ten years, begin to move towards ending the HIV epidemic. The researchers say their findings reveal that, with adequate commitment, a path exists to eliminate domestic HIV infection through the achievement of critical milestones. They say that if these goals were met, 2025 could be the turning point for the epidemic, when HIV prevalence, or the total number of people living with HIV in the United States, would start to decline.

“While these targets are ambitious, they could be achieved with an intensified and sustained national commitment over the next decade,” says study co-author David Holtgrave, PhD, chair of the Department of Health, Behavior and Society at the Bloomberg School.

The National HIV/AIDS Strategy (NHAS) targets for 2020 include a “90/90/90” goal, which proposes that by 2020 90% of people living with HIV will know their HIV status, 90% of people diagnosed with HIV will receive sustained, quality HIV care, and 90% of people on antiretroviral therapy (ART) will achieve viral suppression, or an undetectable level of virus in the blood. For their projection of the potential course of the epidemic from 2020 to 2025, the researchers proposed a “95/95/95” goal and assessed achievement of the NHAS targets at 95% levels by 2025.

Their analysis revealed that if the NHAS targets—“90/90/90” for 2020 and “95/95/95” for 2025—were achieved, the number of new HIV infections in the United States would drop from 39,000 in 2013 to approximately 20,000 in 2020, or a 46% decrease, and to about 12,000 in 2025, a nearly 70% reduction. Additionally, the total number of deaths among people living with HIV would decline from 16,500 in 2013 to approximately 12,522 in 2025, a 24% decrease, and the mortality rate would drop from 1,494 deaths per 100,000 people living with HIV in 2013 to around 1,025 in 2025, a 31% decrease.

ART—the lifesaving drugs that reduce HIV transmission by lowering the level of virus in the blood—mean that HIV can now be a manageable chronic disease. In the United States, the average life expectancy for people living with HIV continues to increase toward that of the general population. Yet, of the more than one million people living with HIV, many lack access to ART.

Additionally, certain populations—particularly gay men, young people, transgender people, black and Hispanic Americans, and those who live in southern states—continue to be disproportionately affected, and the overall progress has not been felt equally across all communities.

3 CHARITABLE GIVING IDEAS

for this Holiday Season

For some, the holiday season is synonymous with charitable giving and showing kindness to friends, family, and strangers. With that season once again upon us, here are three best practices for charitable giving:



1. Consider what charity you want to help. Choosing a charity can be a daunting task, but it doesn't have to be. Think about what is important to you. Once you've identified the type of charity you want to help, you can use [GuideStar](#), a website that provides as much information as possible about IRS-registered charities, to find nonprofits that support the causes that are important to you. You can enter in your location as well to find charities that are close to where you live or work.

2. Conduct a little research before you donate. Unfortunately, not all charitable organizations are as reputable as they may claim. In addition to researching the charity on GuideStar, you can also look up your chosen charity on a website called [Charity Navigator](#) to see how the charity spends its money and uses donations.

3. Consider how you want to give. There are many ways for you to donate, like volunteering your time, donating money, or contributing canned or non-perishable food. Regardless of how you give or how many charities you donate to, you should keep in mind that there are processing costs associated with every donation that you make.

MINDFUL PEOPLE

More Likely to Make Healthier Choices

We hear so many well-meaning and well-researched messages about how to be healthier. And for many, they prompt real change. But for some people, these messages prompt only a defensive and resentful reaction.

Why do some people hear these messages so differently, and how can researchers help them be more effective? In looking at this problem, a new study by researchers at the Annenberg School for Communication at the University of Pennsylvania found that people who are more mindful are more receptive to health messaging and more likely to be motivated to change.

The study assembled a group of people who achieve only low levels of weekly exercise and exposed them to a variety of health messages. To gauge how mindful each person was in day-to-day life, the researchers asked each participant to complete the Mindful Attention Awareness Scale (MAAS). The study showed that less mindful people were also less likely to make a positive change in behavior as a response to health messaging.

People who are more mindful reacted less negatively to health messages and were less likely to feel ashamed by them. These people, in turn, were also more likely to change their behavior to be healthier.

Lead author Yoona Kang, a postdoctoral fellow at the Annenberg School, said "Individuals may benefit from cultivating mindful attention when processing potentially threatening yet beneficial health information."

University of Pennsylvania. "Mindfulness motivates people to make healthier choices." ScienceDaily. www.sciencedaily.com/releases/2017/01/170130111020.htm (accessed November 16, 2017).



MANY PRESCRIPTION DRUG USERS Not Aware of Driving-Related Risks

According to a new study, many people who take prescription medication are not aware of the affects those medications can have on their ability to drive safely. Nearly 20% of people in the study reported recent use of a prescription medication with the potential for impairment, but not all said they were aware that the medication could affect their driving, despite the potential for receiving warnings from their doctor, their pharmacist, or the medication label itself.

The percentages of those who said they had received a warning from one of the sources for the study varied by type of medication: 86% for sedatives, 85% for narcotics, 58% for stimulants, and 63% for antidepressants.

"We were very surprised that our study was the first we could find on this topic," says lead researcher Robin Pollini, Ph.D., M.P.H., of the Injury Control Research Center at West Virginia University. "It's a pretty understudied area, and prescription drugs are a growing concern."

Pollini says she hopes this research will lead to increased warnings provided by doctors and pharmacists, as well as improved labeling for medications that are likely to impair driving. She says it's not yet clear what the optimum messaging would be, but she is encouraged by the fact that patients who are prescribed these medications have several points at which they could receive this important information.

"There's an opportunity here that's not being leveraged: to provide people with accurate information about what risks are associated with those drugs. People can then make informed decisions about whether they're able to drive," says Pollini.

Journal of Studies on Alcohol and Drugs. "Many prescription drug users not aware of driving-related risks." ScienceDaily. www.sciencedaily.com/releases/2017/11/1711101092041.htm (accessed November 16, 2017).



DECEMBER RECIPE Old Fashioned Bread Pudding

- 5 slices of bread
- 2 Tbsp. butter
- ¼ tsp. cinnamon
- ⅓ cup brown sugar
- ½ cup raisins
- 3 large eggs
- 2 cups nonfat milk
- ¼ tsp. salt
- 1 tsp. pure vanilla extract



Heat oven to 350 F. Spray the bottom and sides of a 9-by-9-inch pan with nonstick spray. Spread butter on one side of bread slices. Sprinkle slices with cinnamon. Cut bread into 1-inch cubes. Dump bread, sugar, and raisins into prepared pan. Blend eggs, milk, salt, and vanilla together in a bowl. Pour over bread mixture in pan. Bake uncovered for one hour. Pudding will be done when a table knife inserted in the pudding comes out clean.

Yield: 6 Servings. Each serving provides 230 Calories, 7 g of Fat, 36 g of Carbohydrates, 2 g of Saturated Fat, 300 mg of Sodium, 1 g of Dietary Fiber, 8 g of Protein. Percentage daily values are based on a 2,000 calorie diet. Source: USDA

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