THE STATE OF MEN'S HEALTH:
Mental, Physical and Emotional Wellness and Self-Care

3-PART WEBINAR SERIES

Part 1 Matters of the Heart and Brain
Wednesday, June 17, 2020 at 2:00 pm

Presenters:
James Lah, MD, PhD – Brain Health
Aaron Anderson, MD – Heart Health
James Bennett, MD – Prostate Health
Derek M. Griffith, PhD – Psychological Health
Joe Nocera, PhD – Physical Health

Part 2 Matters of Racial Disparities
Wednesday, June 24 at 2:00 pm

Presenters:
Monica Parker, MD — Brain Health
Ihab Hajjar, MD — Physiological and Psychological Stress on the Brain
Laurence Sperling, MD, FACC, FACP, FAHA, FASPC - Stroke and Cardiovascular Disease

Part 3 Men's Health Matters Moving Forward
Wednesday, July 1, 2020 at 2:00 pm

The Path Forward: Improving disparities in healthcare access, policies and research for the health and well-being of diverse populations beyond COVID
Allan Levey, MD, PhD • Clinton Dye, PhD • David Satcher, MD, PhD
Patrick Griffith, MD • Ambassador Andrew Young • Sheryl Heron, MD, MPH
Patrice Harris, MD

Please RSVP by visiting www.alzheimers.emory.edu or call Chelsea Walker at 404-712-4702 or chelsea.walker@emory.edu.

RSVP Required. We are using Zoom to host the webinars. When you register you can choose one or all three events to attend.

www.alzheimers.emory.edu | Cornelya Dorbin, MPA • Project Director • 404-712-1416
Stroke:
What a Vascular Neurologist would like you to know

June 17, 2020
BLM

Aaron Anderson, M.D.
Assistant Professor of Neurology
Chair Neurology Diversity, Equity, Inclusion Committee
Emory University School of Medicine
Director Neurovascular Ultrasound Lab
Marcus Stroke & Neuroscience Center
Grady Memorial Hospital
What is a stroke?

- Sudden onset of focal neurologic deficits
- 5th cause of death in the U.S.
- Leading cause of severe adult disability
- Every 45 seconds someone has a stroke
- Every 3 minutes someone dies from a stroke
Types of stroke

**Ischemic**
Lack of blood flow to the brain caused by blockage of a blood vessel

**Hemorrhagic**
Damage to the brain caused by blood rupturing out of a blood vessel
Stroke symptoms

- American Stroke Association/American Heart Association
  - “Act FAST”
    - Face
    - Arm
    - Speech
    - Time
  - Call 911!!!! Do not take an Aspirin (clot or bleeding)
- Treatment
  - TPA in 3 hours
  - Thrombectomy (clot removal) as soon as possible
Stroke Risk Factors

**Modifiable factors**
- Medical
  - High blood pressure
  - Diabetes
  - High cholesterol
  - Heart disease (A.Fib)
- Lifestyle
  - Tobacco Use
  - Heavy alcohol use
  - Physical inactivity
- Diet
  - Obesity

**Non-modifiable factors**
- Age
- Race
- Genetics
- Family history
- Previous stroke or TIA
- Geographic region
  - Southeast U.S.
  - "Stroke Belt"

### Relative Risk

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75-84</th>
<th>85+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Hispanic Blacks</td>
<td>4.0</td>
<td>3.9</td>
<td>3.0</td>
<td>1.9</td>
<td>1.2</td>
<td>0.9</td>
</tr>
<tr>
<td>American Indians/Alaska Natives</td>
<td>1.9</td>
<td>1.3</td>
<td>1.5</td>
<td>1.3</td>
<td>1.3</td>
<td>1.0</td>
</tr>
<tr>
<td>Asian/Pacific Islanders</td>
<td>1.3</td>
<td>1.4</td>
<td>1.1</td>
<td>0.7</td>
<td>1.3</td>
<td>0.9</td>
</tr>
<tr>
<td>Hispanics</td>
<td>1.3</td>
<td>1.3</td>
<td>1.2</td>
<td>0.9</td>
<td>0.6</td>
<td>0.5</td>
</tr>
</tbody>
</table>

Ages: 20-34, 35-44, 45-54, 55-64, 65-74, 75+

Percent of Population:
- Men: 30%
- Women: 25%

Race/Ethnicity:
- Non-Hispanic Blacks
- American Indians/Alaska Natives
- Asian/Pacific Islanders
- Hispanics

**Obesity**
How can you help?

- Share what you learn today with others
  - You can save a life
  - Your friend may save your life by calling 911

- Donate time and energy to increasing stroke awareness
  - We can and must make a difference

- Contact Local Stroke Center for information and ways to volunteer
What’s New Down There?

James K. Bennett, M.D., F.A.C.S.
Midtown Urology and Midtown Urology Surgical Center
Prevalence, Incidence, and Mortality

Approximately 1 of 9 men will be diagnosed with prostate cancer at some point in their lifetime.

Prostate cancer represents 9.5% of all new cancer cases in the United States.

Prostate cancer is the second leading cause of cancer-related death among men.

Prostate cancer will recur in up to 40% of patients after initial treatment.

29,430
Estimated deaths to occur in 2018

5 year Relative Survival
Localizer: 100%
Regional: 100%
Metastasis: 30%

Diagnosis

• PSA
• DRE
• TRUS and Prostate Biopsy
• PCA3
• 4K Score
• MRI
Patients with the same PSA and Gleason scores may have a very different estimate of risk for treatment failure when their Prolaris Scores are added to their evaluation.
Treatment

• Localized Disease
  – Watchful Waiting
  – Radical Prostatectomy
  – Radiation Therapy
  – Cryosurgery
  – Hormonal Therapy
### Agents with Potential Prevention Activity for Carcinoma of the Prostate

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hormonal agents</td>
<td>5α-reductase inhibitors, antiandrogens, (isoflavenoids?)</td>
</tr>
<tr>
<td>Low-fat diet</td>
<td></td>
</tr>
<tr>
<td>Vitamin D and analogues</td>
<td></td>
</tr>
<tr>
<td>Selenium</td>
<td></td>
</tr>
<tr>
<td>Retinoids</td>
<td></td>
</tr>
<tr>
<td>Methylation inhibitors</td>
<td></td>
</tr>
<tr>
<td>Soy (isoflavenoids)</td>
<td></td>
</tr>
<tr>
<td>Vitamin E</td>
<td></td>
</tr>
<tr>
<td>Green tea</td>
<td></td>
</tr>
<tr>
<td>HMG-CoA inhibitors</td>
<td></td>
</tr>
</tbody>
</table>
Dietary Factors

Nature’s Four Warriors Against Prostate Cancer:

- Isoflavones → soy products, tofu
- Sulforaphanes → broccoli, cabbage, cauliflower, kale
- Lycopenes → tomatoes, tomato sauce/paste/juice
- Polyphenols → green tea
THANK YOU!

Dammit Herb...See what happens when you don't relax? My graduation ring is in there!
Men’s Health: A Psychosocial Lens

Derek M. Griffith, PhD
Vanderbilt University

Men’s Health Webinar
Goizueta Alzheimer’s Research Center
Atlanta, GA
June 17, 2020
This year thousands of men will die from stubbornness.

Learn the preventive medical tests you need. ahrq.gov
How do health professionals think about men’s health?

- Underlying, biological and physiological processes (think tests you get when you go to the doctor) 

(Robertson, 2006; Watson, 2000)

How do men think about their bodies and health?

- How you feel; global sense of “well-being”
- Can you function fulfill your roles at work, at home, in bed, at church, in the community, etc.? 

(Robertson, 2006; Watson, 2000)
The Experience of Symptoms of Depression in Men vs Women Analysis of the National Comorbidity Survey Replication

Lisa A. Martin, PhD, Harold W. Neighbors, PhD, Derek M. Griffith, PhD

**IMPORTANCE** When men are depressed they may experience symptoms that are different than what is included in the current diagnostic criteria.

**OBJECTIVE** To explore whether sex disparities in depression rates disappear when alternative symptoms are considered in the place of, or in addition to, more conventional depression symptoms.

**DESIGN, SETTING, PARTICIPANTS, AND MAIN OUTCOMES AND MEASURES** Using data from the National Comorbidity Survey Replication, a nationally represented mental health survey, we evaluated sex differences in symptom endorsement in 2 new scales that included alternative depression symptoms. We analyzed sex differences in symptom endorsement using 2-sided, design-based, .05-level t tests and multivariate logistic regression to identify predictors of depression.

**RESULTS** Men reported higher rates of anger attacks/aggression, substance abuse, and risk taking compared with women. Analyses using the scale that included alternative, male-type symptoms of depression found that a higher proportion of men (26.3%) than women (21.9%) ($P = .007$) met criteria for depression. Analyses using the scale that included alternative and traditional depression symptoms found that men and women met criteria for depression in equal proportions: 30.6% of men and 33.3% of women ($P = .57$).

**CONCLUSIONS AND RELEVANCE** When alternative and traditional symptoms are combined, sex disparities in the prevalence of depression are eliminated. Further study is needed to clarify which symptoms truly describe men’s experiences of depression.

Published online August 28, 2013.
Study shows men just as likely to be depressed as women

When researchers expand the symptoms list to include aggression, substance abuse and risk-taking behavior, depression is no longer just a 'woman's disease.'

"It doesn't always look like this. Depression in men can manifest itself with symptoms like anger, substance abuse and other risky behavior, and when properly counted, men may actually be more likely than women to suffer depressive disorder. (LATlegacy / October 4, 2007)"

By Melissa Healy
August 28, 2013 | 6:41 p.m.

Los Angeles Times | SCIENCE & HEALTH
ENVIRONMENT
(neighborhood effects, noise, urban areas)

NEGATIVE HEALTH BEHAVIORS
(smoking, drinking, using alcohol and drugs, overeating)

STRESSORS
(job, family, financial, relationships)

CHRONIC ACTIVATION OF HPA AXIS
(downregulation of immune system, outcomes associated with negative health behaviors)

Physical Disorders
(diabetes, cancer, organ damage)

Psychological Health Disorders
(depression, anxiety, PTSD)

Jackson & Knight, 2006
That's all Folks!
Matter of the Heart and Brain
Exercise and Health

Joe Nocera, Ph.D.

**Research Scientist**
Director- Physical Exercise Core
Center for Visual and Neurocognitive Rehabilitation (CVNR)
Dept. of Veterans Affairs RR&D

**Assistant Professor**
Departments of Neurology and Rehabilitation Medicine
Emory University
Physical Activity- The Numbers

- Reduces risk of heart disease by 40%
- Lowers risk of stroke by 27%
- Reduces the incidence of diabetes by nearly 50%
- Reduces the incidence of high blood pressure by almost 50%
- Can reduce the risk of Alzheimer’s disease by one-third
- Can reduce depression as effectively as pharmacological therapy

Amount of exercise needed to benefit health and stamina is much lower than the amount needed for “fitness”. THE KEY IS TO GET UP AND MOVE

Source: AHA Recommendations for Physical Activity
How bad is Inactivity??? Really bad

<table>
<thead>
<tr>
<th>Risk from...</th>
<th>High number = greater risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smoking</td>
<td>1.56</td>
</tr>
<tr>
<td>Physical inactivity</td>
<td>1.40</td>
</tr>
<tr>
<td>BMI ≥ 30.0</td>
<td>1.35</td>
</tr>
<tr>
<td>High BP</td>
<td>1.35</td>
</tr>
<tr>
<td>High Cholesterol</td>
<td>1.34</td>
</tr>
<tr>
<td>Diabetes</td>
<td>1.25</td>
</tr>
</tbody>
</table>

250,000 premature deaths in the U.S. annually directly attributed to physical inactivity!
Also note that exercise is a treatment for many listed risk factors.

Valiyeva E et al. Arch Int Med 2006; 166:985
“Consistent finding that aerobic/functional capacity and muscle strength can be improved by exercise among patients with different diseases without having a deleterious effects on disease progression.”

“Accumulating evidence that in patients with chronic disease exercise therapy is effective in improving the prognostic risk factor profile and, in certain disease, delaying mortality.”

“Severe complications during exercise therapy programs were rare.”
What Exercise is BEST for ME???
HOW MUCH???
(American Heart Association and American College of Sports Medicine says...

- 150 mins (2h 30mins) each week of moderate intensity aerobic physical activity
  \textit{(Brisk walking, water aerobics...)}
  OR
- 75 mins (1h 15mins) each week of vigorous intensity aerobic physical activity
  \textit{(jogging, swimming...)}

\textbf{AND}

- Do moderate to high intensity muscle strengthening on the major muscle groups 2 or more days per week.

\textbf{AND}

- “Exercise the maintain or improve balance”
  \textbf{2x per week}

\textbf{At least 10 mins at a time}
Evidence-based Exercises

• Aerobic Exercise
  Spin Cycling*
  Walking/jogging*
• Strength training
  Ageless Grace
• Balance
  Go4Life (NIA)
  Tai Chi
• Flexibility
  Yoga

Each example provided has multiple benefits that improve older adults physical function profile (heart and brain health, muscle strength, flexibility and balance).

https://agelessgrace.com

https://www.nia.nih.gov/health/exercise-physical-activity
Goizueta Alzheimer’s Disease Research Center

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