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ABSTRACT

This booklet introduces the concept of health promotion and disease prevention, outlines the health risks that are found in daily life, and shows how the risk of disease and disability can be reduced with minor changes in life style. Information is given on the number and causes of yearly deaths and the measures that have been taken by the government and by individuals to reduce the risks to good health. Heredity, environment, and life style are discussed in relation to good health. General suggestions for all age groups are to eat sensibly, to exercise regularly, to avoid addiction, to be safety conscious, and to learn to handle stress. Specific health risks and suggested healthful practices are discussed for infants, children, adolescents and young adults, adults, and older adults. Concluding this document is an appendix listing 62 government agencies and private, nonprofit groups which are sources of information about various health promotion and disease prevention activities. (EM)

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# LIVING WELL

An Introduction  
To Health Promotion  
And Disease Prevention



From The Surgeon General's Report On  
Health Promotion And Disease Prevention

U.S. DEPARTMENT OF HEALTH, EDUCATION AND WELFARE

# LIVING WELL

## An Introduction To Health Promotion And Disease Prevention

From The Surgeon General's Report On  
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U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

Public Health Service  
Office of Disease Prevention and Health Promotion  
Office of Health Information, Health Promotion and  
Physical Fitness and Sports Medicine

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## INTRODUCTION

The information in this booklet has been drawn from *HEALTHY PEOPLE, the Surgeon General's Report on Health Promotion and Disease Prevention*.

The report states the growing belief among health experts that further improvements in the health of the American people will be achieved—not just through increased medical care and greater health expenditures—but through a national commitment to efforts designed to prevent disease and to promote health.

The belief is based on what we have learned about prevention in recent years. For example:

- Degenerative diseases (such as heart disease, cancer, and stroke) cause 75 percent of all the deaths in this country. Many of these deaths could be prevented.
- Accidents are the most frequent cause of death among persons between the ages of one and 40 years. Most accidents can be prevented.
- Environmental hazards contribute to many of our serious health problems. Many environmental hazards can be controlled.
- Unhealthy habits (e.g., smoking, overeating) play a role in the development of chronic diseases among middle-age Americans. Habits can be changed.

The full report describes our growing knowledge of ways to prevent disease and improve health and discusses the extent

of the efforts that will have to be made—by government agencies, health professionals, business and industry, and by individuals—to turn these concepts into reality.

This booklet is concerned primarily with you—the individual. Its purpose is to introduce the concepts of health promotion and disease prevention, outline the health risks that you face in your daily life, and show you how with minor changes in the way you live, you can reduce your risk of disease or disability.

There are three good reasons you should read this booklet and use the information it contains. Disease prevention and health promotion can:

- save your life and prolong your productive years;
- improve the quality of your life; and,
- save you money. In an era of runaway health costs, preventing disease is economical.

## ~~CHAPTER~~ ONE

# Reducing the Risks to Good Health

### First, the bad news.

During the next 12 months, hundreds of thousands of Americans will die before their time.

The exact figure is not known. But consider the facts. Every year

- 350,000 people die from diseases that are directly linked with cigarette smoking—heart disease, lung cancer, and emphysema, among others;
- 100,000 Americans die in accidents—half of them on the highways; and,
- 200,000 deaths (including many of the accidents) are related in some way to the abuse or misuse of alcohol.

Hundreds of thousands more are crippled or disabled and the quality of their lives is diminished unnecessarily.

### Now, the good news.

We can change this picture. As a nation and as individuals we have it in our power to improve the health and the quality of life of all Americans.

Millions of Americans have already begun to take steps to improve or maintain their health and reduce the risk of illness. The early results of this effort are encouraging.

We need to make the most of this beginning and turn it into a national commitment to prevent disease and promote health.

And that's what this book is all about.

We know that prevention is better than cure. We've known it for hundreds of years. The ancient Chinese knew it; so did the ancient Greeks.

As a matter of fact, prevention is largely responsible for the remarkable improvement in the health of the American people in this century. Thanks to immunization, improved sanitation, purified water supplies, and better housing and nutrition, we have seen a dramatic reduction in such diseases as typhoid fever, smallpox, and tuberculosis, as well as in the infectious diseases that took such a heavy toll among children in the first half of the 20th century: polio, diphtheria, rubella, measles, whooping cough, and mumps.

The success of these efforts can be measured by the fact that the life expectancy of a newborn infant increased by 26 years between 1900 and 1977: from 47 years to 73 years.

At first glance, health gains for adults are not nearly so dramatic as those for children. The life expectancy of a 45-year-old man, for example, has increased by only five years since 1900, despite the availability of high technology medicine and potent drugs. One reason for the difference is that the chronic, degenerative diseases of middle age are not susceptible to the same kinds of preventive measures that have been used to control the acute diseases of childhood.

From what we have learned in recent years, however, it is clear that the potential exists for considerable gains to be made in adult health.

The search for effective treatments and cures for the chronic, degenerative diseases has shown that the causes of many of these health problems are deeply rooted in the environment and the way of life of modern America. It is clear that health status depends on a complex variety of factors—including individual lifestyles, working conditions, and the physical environment—and that many of these factors are not under the direct influence of medical science.

This realization marked the dawn of the new age of prevention. In 1964, the first Surgeon General's Report on Smoking and Health began to describe the relationship of smoking to cancer and heart disease. It also conveyed the message that there were actions that individuals and public agencies could take to reduce the risk of death and disability associated with these diseases.

Since then, research has shown that the way we live has a profound effect on our health and that personal habits—such as smoking, abuse of alcohol, rest and exercise, nutrition, obeying speed laws, wearing seat belts—have a lot to do with whether we are healthy or sick. Even small changes in lifestyle can bring about a substantial reduction in risk for many individuals. One California study estimated that 45-year-old men who followed six or seven simple health rules increased their life expectancy by 11 years over those who practiced less than four of them.

There are encouraging signs that millions of Americans have already seen the writing on the wall. This is reflected in a dramatic increase in all forms of exercise (for example, jogging, running, tennis, and soccer), a growing interest in nutrition (combined with a reduction in the intake of saturated fats and cholesterol), and in changing smoking habits among certain segments of the population.

Parallel with these changes have been such trends as a 22 percent decline in heart disease deaths since 1968, and a consistent decline in lung cancer deaths among men who quit smoking more than 10 years ago.

Encouraged by these trends the Department of Health, Education, and Welfare developed some initial prevention strategies and prepared the Surgeon General's Report on Health Promotion and Disease Prevention, on which this booklet is based.

The strategies are based on the concept of health promotion: a combination of educational and other efforts designed to improve or protect people's health, ranging from community action to make needed environmental changes to providing

people with information on how they can avoid or minimize the health risks they face in their daily lives.

The strategies are linked to a number of health goals which the Department has set for the Nation for 1990:

- To continue to improve infant health and to reduce infant mortality by at least 35 percent.
- To improve child health, foster optimal childhood development, and reduce deaths among children ages one to 14 years by at least 20 percent.
- To improve the health and health habits of adolescents and young adults and to reduce deaths among young people ages 15 to 24 years by at least 20 percent.
- To improve the health and to reduce deaths among people ages 25 to 64 years by at least 25 percent.
- To improve the health and quality of life for older adults and to reduce the average annual number of days of restricted activity due to acute and chronic conditions by 20 percent, to fewer than 30 days per year for people aged 65 and older.

Achieving these goals will not be easy. There will be controversy over some of the regulatory and social actions that might be required. However, the government does have an obligation to inform people of health risks they may be facing and of the benefits they can achieve through voluntary change in health-related behaviors.

## CHAPTER TWO

# The Role of Lifestyle

We are not all born equal; at least, not as far as our health is concerned.

Individual health patterns vary widely, shaped by the actions and interactions of a series of events that begins before birth and continues until death. Your parents' health and socioeconomic background, the town you live in, your diet, the work you do, even your hobbies are among the factors that play a role in determining your health.

The extent of your control over these factors is as varied as the factors themselves. For some (an inherited disease, air or water pollution, for example) there may be little that you, as an individual, can do.

However, the factors that you can control (such as smoking, diet and exercise) give you an opportunity to maintain or improve your health and well-being and to reduce your risk of future illness and disability.

Briefly, the risk factors fall into three categories: heredity, environment, and lifestyle.

**Heredity.** You may have inherited your parents' good health or their susceptibility to one or more health problems, such as hemophilia, sickle cell anemia, some cancers, heart disease, or certain mental disorders. Inheriting a disease is not inevitable, however, particularly in the case of the more common chronic conditions, which often are the result of a combination of factors. Environment and behavior may be just as important as heredity in the development of most illnesses. Obviously, changing the environment or behavior may help to reduce the risk of such illnesses.

**Environment.** Your physical, social, and economic environments all affect your health in one way or another. Physical risks to your health include contamination of air, water, and food, hazards at the workplace and on the highway, excessive noise, radiation exposure, and unsafe consumer products. In the social and economic environment, factors that can adversely affect your health include low income, poor housing, unemployment, inadequate education, and incomplete medical services. The family environment is important, too. A stable, loving home contributes to healthy growth and development and anything that causes drastic change (separation, death of a loved one, moving to another city) can affect physical as well as mental health.

**Lifestyle.** This is where you, as an individual, can have the greatest influence on your health. Many of our most serious health problems are directly related to personal habits or behaviors: smoking, alcohol or drug misuse, sedentary patterns of work and recreation, poor eating habits, excessive exposure to stress and other environmental risks, and failure to buckle up our seat belts. Statistics show that if people at risk could be persuaded to improve their eating habits, quit smoking, get some exercise, and control their blood pressure, we could substantially reduce seven of the 10 leading causes of death in the United States.

Risk factors also vary with age. Among children, adolescents, and young adults, accidents and violence take the highest toll. Later in life, the chronic diseases take over as the leading causes of death. It should be remembered, however, that the seeds of many adult health problems are sowed in childhood. Eating patterns, exercise habits, and childhood exposure to cancer-causing substances can have a profound effect on adult health.

Before we can make any substantial and lasting reduction in these risk factors, we need to make some basic changes in the way we think about health.

Our medical care system is built around the need to care for the sick. The disadvantage of this is that most of us think in

terms of "illness" rather than "health." If you are like most people, you probably think seriously about your health only when you are sick.

The best time to think about your health is **before** you get sick. Good health is not just a matter of luck or fate: you can do something about it—although you may have to make some changes in the way you live.

The changes don't need to be drastic. You don't have to give up all pleasure or live a cloistered life of rigid self-denial. You don't have to jog five miles a day or become a vegetarian, either. In fact, for most people, a few commonsense changes are enough to make a big difference in the way they look and feel.

Here are some general suggestions that everyone can benefit from. More specific recommendations, grouped by age, may be found in Chapter 3.

### **Suggestions to Benefit Your Health**

- **Eat sensibly.** Avoid overeating and reduce the amount of fat, saturated fat, cholesterol, sugar and salt in your diet. When you snack, try fresh fruits and vegetables.
- **Exercise regularly.** Almost everyone can benefit from some form of exercise—and there's some form of exercise almost everyone can do. As little as 30 minutes of vigorous exercise three times a week will help to improve circulation and tone up sagging muscles. Proper rest is important, too.
- **Avoid addictions.** Think twice about lighting that cigarette or taking that extra drink—particularly if you plan to drive. Take medications only when you have to—and if you are not sure, check with your doctor.

- **Be safety conscious.** Think "safety first" at home, at school, at work, at play, and on the highway. Buckle seat belts, keep poisons and weapons (especially handguns) out of reach of children, wear life jackets while boating, keep emergency numbers by the telephone.
- **Learn to handle stress.** Stress is an important part of living, and properly handled, it need not be a problem. However, unhealthy responses, such as driving erratically, chronic anger or fear, and drinking too much are destructive and can cause a variety of physical and mental health problems. Learn to cope with stress: don't let worry and tension rob you of your capacity to enjoy life.

Because individuals face different risk factors, your first step towards a healthy lifestyle might be to find out what specific risks you face. Once the risks have been identified, you can take the steps necessary to avoid or minimize them.

## CHAPTER THREE

# Healthful Practices

**Health promotion is for life.**

It should begin before birth and it can make a difference well into old age.

Remember, good health is not just a matter of chance. A lot depends on your lifestyle: your eating and drinking habits; the amount of rest and exercise you get; the way you respond to stress; and, of course, whether you smoke.

Changing those habits that might create problems for you could have a beneficial effect on your health.

It's not that simple, of course. Old habits really do die hard—even when the need for change is recognized and accepted. That's one reason for the expanding list of groups and organizations that provide advice and support for people who want to quit smoking, start exercising, change their eating habits, or otherwise move toward a healthier lifestyle.

If you feel you need this kind of help to make a change start with the sources listed at the back of this booklet, then check your yellow pages, or ask your local health department or your physician. You will probably find just what you need.

This chapter is designed to help you make a start towards a healthier lifestyle. It outlines the major risk factors for five age groups (infants, children, adolescents and young adults, adults, and older adults). It also provides, in capsule form, some of the healthy practices that you, as an individual, can use to reduce your risk for disease or disability and improve your chances for a healthier—and perhaps even longer—life. Additional information can be found in *HEALTHY PEOPLE, the Surgeon*

*General's Report on Health Promotion and Disease Prevention*, or obtained from one or more appropriate sources listed in the final section of this booklet.

## **INFANTS**

### **Risks**

The infant death rate in the U.S. is now about one-eighth of what it was at the beginning of the century.

Despite this progress, the first year of life is still the most hazardous period until age 65. And although the gap is closing, the risks are still much higher for black infants than for white.

The most serious threats to infant survival are:

- **Low birth weight.** Infants weighing less than 5.5 pounds are especially vulnerable to mental retardation, birth defects, developmental problems, blindness, autism, cerebral palsy, epilepsy, and even death. Maternal factors that can contribute to low birth weight include lack of prenatal care, poor nutrition, smoking, alcohol and drug use, teenage pregnancy, social and economic background, and marital status.
- **Birth defects.** Congenital defects, mental retardation, and genetic diseases are responsible for one-sixth of all infant deaths. Given the current state of our knowledge, these conditions cannot all be prevented. But many of them can—by reducing environmental hazards and by identifying parents at risk.
- **Other risks.** Sudden infant death syndrome is a leading cause of death in babies over one month old. Other major risks are birth injuries and accidents.

### **Healthful practices**

The following practices could help reduce the incidence of low birth weight infants and birth defects significantly:

- **Plan your family.** Research indicates that wanted babies tend to do better, physically and mentally, than others. Find out what it means to be a parent before you become one. If you have a history of family disorders (e.g., Down syndrome, Tay-Sachs disease, sickle cell anemia, or serious mental disorders) you should seek special counseling.
- **Take care of your baby before it is born.** Proper prenatal care is essential to a healthy pregnancy. See a physician early in the pregnancy and make sure your diet includes the extra iron, protein, calcium, and calories your baby needs. You can also reduce the risk of adverse effects on the baby if you avoid tobacco and alcohol and check with your doctor before taking any medication. Unnecessary exposure to radiation also should be avoided.
- **Take care of your baby after it is born.** Good nutrition is the single most important factor in your child's development. Breast feeding is the most complete form of infant nutrition, but where this is not possible, your doctor can recommend the right formula for your baby. Make sure your baby has regular, comprehensive pediatric care and is immunized against childhood disease at the appropriate time. Remember, too, that loving relationships between parents and child can lay a foundation for sound mental health and development.

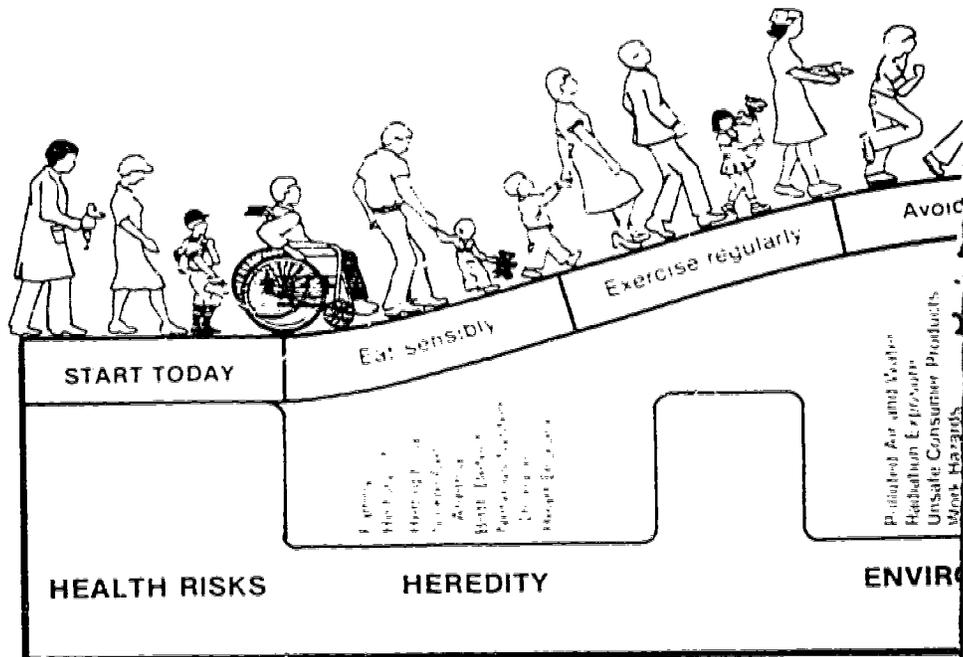
## CHILDREN

### Risks

American children are healthier than ever before. The annual death rate among children 1-14 years has dropped from 870 per 100,000 in 1900 to 43 per 100,000 in 1977.

#### **But we can still do better.**

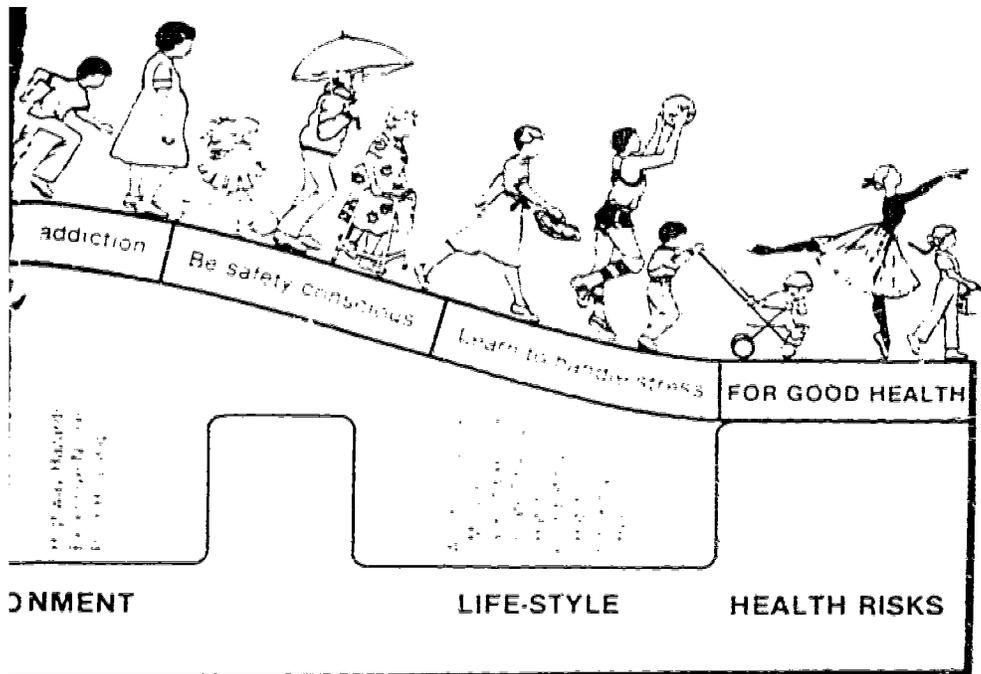
Accidents—more than half of them on the highway—account for 45 percent of all deaths in this age group.



There are other threats to child health, however. For example, immunization has sharply reduced—and could eliminate—the risk of major infectious diseases in this age group. However, too many children are not protected from these diseases and the physical and mental handicaps they can cause. Continued efforts are needed to achieve and maintain high levels of immunization protection among children.

Tooth decay and periodontal disease remain serious problems in this age group. By age 11, the average American child has three permanent teeth damaged by decay. Periodontal (or gum) disease is particularly serious for children because, if not treated, it can lead to tooth loss in later life.

The beginnings of other adult health problems have been found among children. In fact, one study indicates that as many as 40 percent of children have one or more of the risk factors



associated with heart disease: overweight, high blood pressure, high blood cholesterol, lack of exercise, or diabetes.

Other problems that have attracted increased attention in recent years are child abuse and neglect, learning difficulties, problems in school, behavioral disturbances, and speech and vision problems.

### Healthful practices

- **Stimulate your child.** A stimulating, healthy environment is essential to proper physical and mental development. In today's society, where almost half of all mothers work, preschool child development programs such as Head Start, are especially important. Special risks (such as poor nutrition, insufficient stimulus, hearing loss, child abuse, or

neglect) must be identified and dealt with early, or they may lead to serious physical and psychological problems in later life.

- **Watch out for your child's health.** Make sure that your children receive the recommended immunizations at the appropriate times. Encourage good eating habits and make sure they get plenty of exercise. Good dental care, with regular visits to the dentist, is especially important. If your local water supply is not fluoridated, have your children use fluoride rinses to protect them against tooth decay.
- **Watch out for your child's safety.** Make sure your child is in an approved child carrier, seat harness, or safety belt while riding in an automobile; store poisons and household chemicals out of reach; keep knives and guns away from children; supervise young children at play, particularly near water or streets; and teach children about special dangers (electrical outlets, matches, stoves, and traffic, for example).

## ADOLESCENTS AND YOUNG ADULTS

### Risks

Americans between the ages of 15 and 24 years make up the only age group for which the death rate has increased over the past 20 years (117 deaths per 100,000 in 1977 compared with 106 per 100,000 in 1960).

This is not because of any deterioration in the health of the American teenager. On the contrary, their general health is good.

The reason is violence.

Violence—accidents, murder, or suicide—is implicated in three out of every four deaths in this age group. The risk of violent death is three times higher for males than for females.

Suicide, the third leading cause of death for this age group is increasing.

Adolescence is a time of often turbulent physical and mental change. During the past 20 years, these changes have been taking place in a predominantly urban, increasingly technological society in which old values and traditions have been challenged. This is reflected not only in the violence but also in other threats to adolescent health: alcohol and drug misuse, unwanted pregnancy, sexually transmissible diseases.

In addition to present dangers, the lifestyles and behavior patterns adopted during this period can determine future susceptibility to a variety of chronic diseases.

### **Healthful practices**

The toll of death and disability among young Americans **can be reduced**, if we can develop effective methods of persuading teenagers to do the following:

- **Develop safe driving habits.** Many deaths and injuries could be avoided if teenagers could be persuaded to develop—and use—defensive driving techniques; obey speed limits and other traffic laws; not drive under the influence of alcohol or drugs (and not ride with someone who is); and, use seat belts.
- **Avoid use of firearms.** Handguns should not be available to teenagers and parents who own firearms should teach their children the appropriate safety measures.
- **Adopt good health habits.** In addition to the benefits to be gained from good hygiene and proper dental care, young Americans could greatly increase their prospects for a healthy future by eating sensibly, getting regular and vigorous exercise, not smoking, using alcohol only moderately (if at all), and avoiding the illicit use of drugs.

- **Develop a responsible attitude toward sex.** Increased sexual activity among American teenagers is a fact, and its serious health consequences—unwanted pregnancy, sexually transmitted diseases—must be dealt with. Sexually active teenagers should be informed of the dangers of early pregnancy and about birth control measures. They should be informed about the dangers of sexually transmissible disease, how to prevent it, how to recognize the diseases, and where to go for diagnosis and treatment.
- **Talk about their problems.** Young people frequently experience periods of frustration, uncertainty, and confusion, and should be encouraged to talk over problems with people with whom they can be open (sensitive friends, family members, clergy, counselors, or an appropriate hotline). Teenagers might find their problems easier to cope with if parents, teachers, and counselors were more successful in helping them understand and accept their responsibilities—to themselves as well as to others.

## ADULTS

### Risks

For most Americans, the 25-64 age group is the period in which disease takes over from accidents and other violence as the leading cause of death and disability. For this group, the major causes of premature death are heart disease, cancer, and stroke.

The death rates are still high, but there are encouraging signs that they can be reduced substantially. In recent years we have learned a lot about the development of chronic diseases—and about how they might be prevented.

The reduction in the heart disease death rate that has paralleled a reduction in cigarette smoking and dietary improvements among those who are most at risk is an indication that we are on the right track. Health experts believe

that widespread adoption of healthier lifestyles would soon be followed by further reductions in the heart disease death rate.

The causes of cancer are many and varied and the disease often develops slowly, sometimes over many years. It will be some time, therefore, before the success of any prevention effort can be evaluated. It is believed, however, that an immediate effort to reduce or eliminate such risk factors as smoking, exposure to air and water pollution, exposure to toxic substances at the worksite, and radiation, will be reflected in reduced rates of cancer in years to come.

Other health problems affecting Americans in this age group are:

- **Alcohol misuse.** An estimated 10 million Americans are problem drinkers.
- **Mental health.** Up to 25 percent of the American population is estimated to be suffering from mild to moderate depression, anxiety, or other emotional disorder.
- **Periodontal disease.** This is the principal cause of tooth loss after age 35—even though it is preventable. A recent survey found that 30 percent of Americans between 55 and 64 have lost all their natural teeth—many unnecessarily.

### **Healthful practices**

We have an opportunity to make substantial improvements in adult health by mobilizing collective resources to protect Americans from environmental and other dangers to their health and by supporting the efforts of individuals to eliminate or reduce the chances they take with their health.

Here are some of the things you can do:

- **Adopt a healthy lifestyle.** Good eating habits—including a reduction in your consumption of fats, saturated fat, cholesterol, salt, and sugar—

together with a regular exercise program and the proper amount of rest will help you look better and feel better. Not smoking and moderate (if any) consumption of alcohol will help reduce your risk of disease. Proper dental care will help you keep your natural teeth into old age.

- **Use preventive health services.** Preventive health services can detect some health problems at an early stage and prevent serious consequences. For women, Pap smears and breast self-examination are important and should be performed at recommended intervals. All adults should have their blood pressure checked at least every five years and every two to three years after age 40. If high blood pressure is detected follow your physician's advice and take prescribed medication.
- **Care about safety.** Be safety conscious at home, at work, at play, and on the highway. Install smoke detectors in your home, store toxic chemicals out of children's reach, observe safety rules at work, wear life jackets while boating, use seat belts at all times, and observe the speed limit. Think safety first: it could save your life—or the life of one you love.
- **Care about the environment.** Do your part to help reduce the levels of toxic substances in our air and water. Private and public actions at all levels are important to control of environmental hazards.
- **Learn how to cope with stress.** Learning to recognize the things that really bother you and developing methods of handling the feelings of anger, worry, or fear that they cause, can help to prevent serious physical and mental problems. Stress is an inevitable part of living and if you can learn to cope with it, it can be a creative force. *Learn to relax, or work off your tensions with some form of exercise.* There are many ways to prevent anxiety and tension from robbing you of your capacity to enjoy life.

## OLDER ADULTS

### Risks

The greatest fear of older Americans is being helpless, useless, sick, or unable to care for themselves.

The proportion of older Americans in the population is growing (from four percent in 1900 to 11 percent today). By 1990, about 17 percent of the U.S. population will be over 65 years old.

Contrary to popular belief, most of America's 24 million elderly live in their own homes—either alone or with relatives. Only one million are in long-term care institutions.

Nevertheless, 45 percent of the elderly are limited in their activity—some because of mental disability, but most because of physical handicaps caused by heart conditions, arthritis and rheumatism, hearing loss, and visual impairments. With adequate social and health services, many of these people could maintain relatively independent lives.

Another problem (and one that can result in loss of independence) is that people are often too quick to attribute mental decline or behavioral changes to senility. The fact is that in the vast majority of cases, the mental decline has a physical cause—and is reversible. The causes include drug interactions, depression, some tumors, nutritional deficiencies, loneliness, failing sight or hearing, and chronic infections.

Fear of dependency makes the elderly particularly susceptible to the emotional stress that can result from drastic changes in their circumstances (loss of spouse, change in financial status, for example). Such stress can lead to serious physical illness and even premature death.

As a group, the elderly are more likely than young people to suffer from multiple, chronic, and often disabling conditions—many of which may reflect past environments and lifestyles. Even when these conditions can no longer be prevented, early diagnosis and treatment often can prolong life, reduce serious complications, and minimize pain, disability, and emotional anguish.

## Healthful practices

There are many things that can be done to increase independence, self-sufficiency, and improve the quality of life for the elderly. Many of these measures (improved health and social services, for example) will require action by Federal, state, and local government agencies, the health care industry, and others.

At the same time there are many things older people can do themselves to reduce their risk of disease or disability and increase their enjoyment of life.

For example:

- **Stay active.** A part-time job or some kind of volunteer work and an active social life are important to your health. Do not isolate yourself from other people. Regular physical activity (walking, dancing, calisthenics, for example) will help you maintain flexibility and balance, which is important to prevent falls.
- **Watch your health.** Some problems associated with aging can be corrected if they are discovered early. So get regular check-ups (once every two years to age 75, once a year thereafter). Also, check with your doctor to make sure that you are not taking too many different drugs. Ask about immunization against influenza and pneumonia.
- **Watch your diet.** You may have special dietary need and regular, nutritious meals are important. Include vegetables, sources of iron, calcium, and fiber, and use relatively more fish, poultry, and legumes as sources of protein in your diet.
- **Make your needs known.** Ask your elected officials to provide services to help older Americans maintain their independence. These might include programs for safe and affordable housing; dietary assistance through group meals and home meals; communication and transportation services; recreational and educational opportunities; in-house services such as homemaker, visiting nurse and home health aide care; reading aids; and access to advice and services from appropriate health professionals.

## APPENDIX

Additional information about various health promotion and disease prevention activities is available from a number of sources. The government agencies and private, non-profit groups listed in this appendix comprise only a portion of the total number of information sources. Many other qualified sources of such information exist, including State and local health agencies, which generally provide a wide variety of consumer-oriented health information. The Surgeon General does not necessarily endorse the statements or viewpoints of the organizations listed.

## PREVENTIVE HEALTH SERVICES

### Family Planning

- *The National Clearinghouse for Family Planning Information*, Bureau of Community Services, Health Services Administration, Department of HEW, Post Office Box 2225, Rockville, Maryland 20852, (301) 881-9400
- *Planned Parenthood Federation of America*, 810 Seventh Avenue, New York, New York 10019, (212) 777-2002 (or local affiliates)
- *The National Family Planning Forum*, Suite 350, 425 Thirteenth Street, N.W., Washington, D.C. 20004, (202) 783-1560
- *The American College of Obstetricians and Gynecologists*, Resource Center, 1 East Wacker Drive, Suite 2700, Chicago, Illinois 60601, (312) 222-1600

### Pregnancy and Infant Care

- *The Office of Maternal and Child Health*, Program Services Branch, Bureau of Community Health Services, Health Services Administration, Department of HEW, 5600 Fishers Lane, Rockville, Maryland 20857, (301) 443-4273
- *The National Foundation—March of Dimes*, Public Health Education Department, 1275 Mamaroneck Avenue, White Plains, New York 10605, (914) 428-7100
- *The American College of Obstetricians and Gynecologists*, Resource Center, 1 East Wacker Drive, Suite 2700, Chicago, Illinois 60601, (312) 222-1600
- *The American Academy of Pediatrics*, Post Office Box 1034, Evanston, Illinois 60204, (312) 869-4255

### Immunizations

- *The Center for Disease Control*, Technical Information Services, Bureau of State Services/CDC, Department of HEW, 1600 Clifton Road, N.E., Atlanta, Georgia 30333
- *The National Institute of Child Health and Human Development*, Public Inquiries Office, National Institutes of Health, Department of HEW, Bethesda, Maryland 20014, (301) 496-3454

### **Sexually Transmissible Diseases**

- *The Center for Disease Control*, Technical Information Services, Bureau of State Services/CDC, Department of HEW, 1600 Clifton Road, N.E., Atlanta, Georgia 30333, (404) 452-4021
- *The American Social Health Association*, 260 Sheridan Avenue, Palo Alto, California 94306, (415) 321-5134
- *National Operation Venus*, 1213 Clover Street, Philadelphia, Pennsylvania 19107, (800) 523-1885

### **Hypertension and Heart Disease**

- *The National High Blood Pressure Information Center*, 120/80 National Institutes of Health, Bethesda, Maryland 20014, (301) 652-7700
- *The National Heart, Lung, and Blood Institute*, Public Inquiries Office, NHLBI, National Institutes of Health, Department of HEW, Bethesda, Maryland 20014, (301) 496-4236
- *The American Heart Association*, 7320 Greenville Avenue, Dallas, Texas 75231, (214) 750-5300 (or local chapters)
- *The Consumer Information Center*, Consumer Information Center, Pueblo, Colorado 81009, (303) 544-5277, ext. 305

### **Environmental Protection**

- *Center for Disease Control*, Chronic Diseases Division, Bureau of Epidemiology/CDC, Department of HEW, 1600 Clifton Road, N.E., (404) 329-3165
- *The Environmental Protection Agency*, Office of Public Affairs, U.S. E.P.A., 401 M Street, S.W., Washington, D.C. 20460, (202) 755-0700
- *The National Institute of Environmental Health Sciences*, National Institutes of Health, Department of HEW, Post Office Box 12233, Research Triangle Park, North Carolina 27709, (919) 541-3345
- *The American Lung Association*, 1740 Broadway, New York, New York 10019, (212) 245-8000 (or local chapters)

### **Occupational Safety and Health**

- *The Occupational Safety and Health Administration*, Office of Public and Consumer Affairs, OSHA, U.S. Department of Labor, Washington, D.C. 20210, (202) 523-8151
- *The Clearinghouse for Occupational Safety and Health Information*, National Institute for Occupational Safety and Health/CDC/DHEW, 4676 Columbia Parkway, Cincinnati, Ohio 45226, (513) 684-8326
- *The National Safety Council*, 444 North Michigan Avenue, Chicago, Illinois 60611, (312) 527-4800
- *The American Industrial Hygiene Association*, 475 Wolf Ledges Parkway, Akron, Ohio 44311, (216) 762-7294

## **HEALTH PROTECTION**

### **Accident Control**

- *U.S. Consumer Product Safety Commission*, The Division of Consumer Education and Awareness, 5401 Westbard Avenue, Washington, D.C. 20207, (202) 492-6576 (or local Poison Control Centers)
- *The National Highway Traffic Safety Administration*, General Services Division, Department of Transportation, 400 Seventh Street, S.W., (Room 4423), Washington, D.C. 20590, (202) 426-0874
- *The National Safety Council*, 444 North Michigan Avenue, Chicago, Illinois 60611, (312) 527-4800
- *The American Red Cross*, 17th & D Streets, N.W., Washington, D.C. 20006, (202) 737-8300 (or local chapter)

### **Community Water Supply Fluoridation**

- *The American Dental Association*, Bureau of Dental Health Education, American Dental Association, 211 East Chicago Avenue, Chicago, Illinois 60611, (312) 440-2500
- *The Center for Disease Control*, Dental Disease Prevention Activity, Center for Disease Control/DHEW, 1600 Clifton Road, N.E., Atlanta, Georgia 30333, (404) 262-6631
- *The National Institute of Dental Research*, Public Inquiries Office, National Institute of Dental Research, National Institutes of Health/DHEW, Bethesda, Maryland 20014, (301) 496-4261

### **Infectious Agent Control**

- *The Center for Disease Control*, Public Inquiries, Management Analysis and Service Office, Building 4, Room B2, Atlanta, Georgia 30333, (403) 329-3534
- *The National Institute of Allergy and Infectious Diseases*, Information Office, NIAID, National Institutes of Health/DHEW, 9000 Rockville Pike, Building 31, Room 7A32, Bethesda, Maryland 20014, (301) 496-5717

## **HEALTH PROMOTION**

### **Smoking Cessation**

- *The Technical Information Center for Smoking and Health*, Office on Smoking and Health/DHEW, Room 116 Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857, (301) 443-1690
- *The Office of Cancer Communications*, National Cancer Institute, Room 10A18, Building 31, National Institutes of Health/HEW, Bethesda, Maryland 20014
- *The American Cancer Society*, Public Information Department, 777 Third Avenue, New York, New York 10017, (212) 371-2900, ext. 254 (or local chapter)
- *The American Lung Association*, 1740 Broadway, New York, New York 10019, (212) 245-8000 (or local chapter)
- *The American Heart Association*, 7320 Greenville Avenue, Dallas, Texas 75231, (214) 750-5300 (or local chapter)

### **Alcohol and Drug Abuse Reduction**

- *The National Clearinghouse on Alcohol Information*, National Institute of Alcohol Abuse and Alcoholism, Alcohol, Drug Abuse and Mental Health, Administration/DHEW, Post Office Box 2345, Rockville, Maryland 20857, (301) 948-4450
- *The National Clearinghouse for Drug Abuse Information*, National Institute on Drug Abuse, Alcohol, Drug Abuse and Mental Health, Administration/DHEW, Room 10A56, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857, (301) 443-6500

- *The National Council on Alcoholism*, 733 Third Avenue, New York, New York 10017, (212) 386-4433
- *Alcoholics Anonymous*, Public Information Department, 468 Park Avenue South, New York, New York 10016, (212) 686-1100 (or local chapter)

#### Improved Nutrition

- *Food and Drug Administration*, Office of Consumer Communications, Department of Health, Education, and Welfare, 5600 Fishers Lane, Room 15B-32, Rockville, Maryland 20857, (301) 443-3170
- *Human Nutrition Center*, U.S. Department of Agriculture, Administration Building, Room 426A, Washington, D.C. 20250, (303) 544-5277, ext. 305
- *The Consumer Information Center*, Consumer Information Center, Pueblo, Colorado 81009, (303) 544-5277, ext. 305
- *The Nutrition Foundation*, Suite 300, 888 Seventeenth Street, N.W., Washington, D.C. 20006, (202) 872-0778
- *The National Nutrition Education Clearinghouse*, Suite 1110, 2140 Shattuck Avenue, Berkeley, California 94704, (415) 548-1363

#### Exercise and Fitness

- *The President's Council on Physical Fitness and Sports*, Department of HEW, 400 Sixth Street, S.W., Washington, D.C. 20201, (202) 755-8800
- *The American Alliance for Health, Physical Education, and Recreation*, Promotion Office, 1201 Sixteenth Street, N.W., Washington, D.C. 20036, (202) 833-5550
- *The American College of Sports Medicine*, 1440 Monroe Street, Madison, Wisconsin 53706, (608) 262-3632

#### Stress Control

- *The National Clearinghouse of Mental Health Information*, National Institute on Mental Health, Alcohol, Drug Abuse and Mental Health, Administration/DHEW, Room 11A33, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857, (301) 443-4515

- *The Mental Health Association*, 1800 North Kent Street, Arlington, Virginia 22209 (or local chapters)
- *The Public Affairs Committee*, 381 Park Avenue South, New York, New York 10016, (212) 683-4331
- *The Blue Cross Association*, Public Relations Office, 840 North Lake Shore Drive, Chicago, Illinois 60611, (312) 440-6000

## GENERAL INFORMATION SOURCES

### Public Health Service

- *Bureau of Health Education*, Center for Disease Control, Building 14, 1600 Clifton Road, N.E., Atlanta, Georgia 30333, (404) 329-3111
- *The National Health Information Clearinghouse*, Office of Health Information, and Health Promotion, 1550 Wilson Boulevard, Rosslyn, Virginia 22209, (703) 522-2590

### National Organizations

- *National Association of Community Health Centers, Inc.*, Suite 420, 1620 Eye Street, N.W., Washington, D.C. 20006, (202) 833-9280
- *National Center for Health Education*, 44 Montgomery Street, San Francisco, California 94104, (415) 981-5160

### State and Local Levels

- *Contact your family physician*
- *Contact your local health department*
- *Contact your county's cooperative extension service*