

A Su Salud

To your health

Now Hear This



Whether you're coming back to campus this quarter with your brand new iPod or you've downloaded new music on your old one, it's important to be aware that listening too loudly or too often may contribute to hear-

ing loss or damage.

Portable listening devices—CD players, radios, iPods, MP3 players, and even cell phones have been around for years, but with each new advance in technology, their role in hearing disorders such as tinnitus (ringing in the ears) and even hearing loss appears to be increasing.

According to researchers, one big change is listening trends: people are listening to their portable devices for longer periods of time over the course of a day. The popularity of cell phones, along with the creation of various hands-free listening devices, mean that people are chatting on the phone more often than in the early days of the cell phone. And when Walkmans first came out, most people used them for an hour or so when they were out walking or jogging. Today's listening devices are so portable and store so much music that you can listen all day and not hear the same song twice! The ear buds, too, may contribute to hearing problems. Unlike the old earphones that sat on the outside of one's ears, the ear buds actually fit *inside* the ear canal, closer to the eardrum. Another problem is that ear buds are not ear *plugs*; they don't shut out background noise. The tendency is to turn up the volume to drown out other noise. Another huge difference between the old Walkmans and the more modern MP3 players and iPods is that today's devices are digital which creates no distortion at any volume level, compared to analog technology

of the older listening devices that distorted the sound if the volume was up too high.

What can you do to help protect your hearing?

Give your ears a break. Experts suggest that you give your ears a 5-minute break for every hour you listen to your portable listening device. This time-out helps to give your ears a chance to recover.

Listen less. Researchers at Boston Children's Hospital found that listening to an iPod at 60% of its potential volume for one hour a day appeared to be safe.

Turn down the volume. Listening at a reasonable volume for long periods of time seems to have less of an impact on hearing damage than listening at a very high volume for a shorter time.

Protect your ears from other loud encounters. Exposure to other loud noises like attending concerts, playing music, being around loud machinery, etc. can also contribute to hearing loss over time. Protect



your hearing by standing away from loud speakers, for instance, and using hearing protection when using machinery, driving a motorcycle, or playing certain musical instruments.

Resist the urge to phone a friend. Make an effort to talk less on your cell phone. Turn off your phone several hours a day. Ask yourself if you *really* need to make that call while you are in a public place, or can it wait until you have more privacy.

Do you H.E.A.R. me now? Professional musicians have formed Hearing Education and Awareness for Rockers (H.E.A.R.), www.hearnet.com, to promote hearing protection. Another website, Dangerous Decibels (www.dangerousdecibels.org) also helps educate people about how to prevent noise-induced hearing loss.

Healthier Smoking?



The term 'harm reduction' refers to any policy or program designed to reduce the harmful effects of a risky behavior without trying to stop the use of that behavior. Harm reduction originated in the field of alcohol and drugs, but has found its way in almost all public health campaigns. Needle exchange programs, drug testing kits, and designated driver campaigns are examples of drug and alcohol-related harm reduction programs. Wearing seat belts, wearing bicycle helmets, using condoms, taking care of your ears while using portable listening devices (see the article on the previous page) are examples of other harm reduction strategies. The creation of designated smoking areas is another example of harm a reduction policy designed to limit the exposure to second hand smoke.

If you are a smoker who is unable or unwilling to quit smoking, cutting down on the number of cigarettes you smoke a day appears to be a harm reduction technique that may decrease the risk of getting lung cancer.

A study in the September 28, 2005 issue of the Journal of the American Medical Association (JAMA) suggests that cutting down on cigarettes has shown to be an effective harm reduction measure for smokers. The researchers studied the smoking habits of over 19,000 people in Copenhagen, Denmark, who had been enrolled in a long-term health study. All the participants had a physical exam and answered a questionnaire at the beginning of the study, and again five to ten years later. Their ages ranged from 20 to 93. The researchers divided the participants into six groups according to their smoking habits: continued heavy smokers (15 or more cigarettes per day); reducers (reduced from 15 or more cigarettes per day by a minimum of 50 percent without quitting); continued light smokers (one to 14 cigarettes per day), quitters (stopped between first and second examination); stable ex-smokers; and never smokers.

During follow-up, a total of 864 participants were diagnosed with lung cancer. The researchers found that the 'reducers' (those who reduced from about 20 cigarettes a day to fewer than 10 a day), had a 27% reduction in lung cancer risk compared with heavy smokers. 'Continued light smokers' and 'quitters' reduced their risk by 56% and 50%, respectively,

compared with the continued heavy smokers. And the lung cancer risk of 'stable ex-smokers' was 83% lower than continued heavy smokers.

So, if you are a smoker who isn't interested in quitting smoking, you might want to at least consider cutting down (and of course, only smoke in the designated parking lots if you smoke on campus). If you are thinking about quitting smoking, you can contact Mary-Jo Lomax at Student Health Services (lomaxmaryjo@deanza.edu, 408-864-8903) whose quit-smoking program includes free nicotine replacement patches or gum. Or check out the following off-campus resources:

American Lung Association
408-998-5864

[www.lungsrus.org/
tobacco_class.htm](http://www.lungsrus.org/tobacco_class.htm)

Camino Medical Group 408-
523-3222

Santa Clara County Public
Tobacco Prevention Program

408-494-7836 [www.sccphd.org/
tobacco](http://www.sccphd.org/tobacco)

Stanford Stop Smoking Program 1-866-218-7848 [http://
stopsmokingstanford.edu](http://stopsmokingstanford.edu)

California Smokers Helpline
www.californiasmokershelpline.org

Nicotine Anonymous www.nicotine-anonymous.org

QuitNet www.quitnet.com

Stop Smoking Center www.stopsmokingcenter.net



January's Quote

"Advice is like snow — the softer it falls, the longer it dwells upon, and the deeper it sinks into the mind."

Samuel Taylor Coleridge

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