Sleep seems mysterious. We can’t do without it, but we don’t know exactly why we need it. While to Shakespeare sleep “knits up the raveled sleeve of care,” it has also been erroneously equated with laziness; those who function on little sleep are often thought to be “hard workers.” Studies show that many Americans are sleep-deprived. Even though sleep is essential for good health and well-being, sleep is often a low priority in our lives.

Sleep is a complex biological function that is necessary for our general health. Researchers have been able to characterize the two different types of sleep which cycle throughout the night: rapid eye movement (REM) sleep, and nonrapid eye movement (NREM) sleep. The amount of time spent in each type of sleep varies with age.

What constitutes “good sleep”? While people do differ in their sleep needs, both an adequate amount of sleep time and the right kind of sleep are important. You should be able to awaken spontaneously in the morning, and feel alert and be able to concentrate during the day. Interruptions in sleep can affect

continued on page 3

Tuberculosis Poses New Threat

Robert DeBernardo, MD
Allergy/Immunization Department

Carola Marte, MD
Internal Medicine Department

The Victorians knew it as “consumption” – the wasting disease. Authors from Louisa May Alcott to Thomas Mann created fictional characters who died slow but fictionally “romantic” deaths from tuberculosis in their prime of life. But, despite fictional portrayals, there was nothing romantic about the coughing, the weakness and the wasting engendered by tuberculosis. It was a scourge in the lives of the real people who crowded into the urban tenements of the 19th century where the disease, fed by close contact, was rampant. There were treatments, but there was no cure.

continued on page 2
From Diapers to Dating, YHP’s Pediatrics Department Treats The Whole Child

Rhea Hirshman

Contributing Writer

Comprehensive pediatric care includes attention to nutrition, sleep patterns, school and recreational activities, and the family’s child care needs. With many of their 4500 patients too young to say exactly where it hurts, with prevention a basic goal, and with the family essential to the child’s physical, emotional and spiritual health, the clinicians in YHP’s Pediatrics Department regard the whole family as part of their practice. Notes Jane Milberg, PNP (pediatric nurse practitioner) and nurse manager of the department, “We know many of our patients from when they are in diapers to when they fill out their college or job applications!”

The five pediatricians, two nurse practitioners, five nurses and two receptionists, most of whom have been at YHP for many years, work closely as a team to build long-term relationships. “Our patients are from all socioeconomic groups,” notes Carol Morrison, MD, chief of the department. “And we see patients from all over the world.” She continues, “We want to know about cultural variations in how our families raise their children, so that we can incorporate what they think is important into what we think is a priority. People far from home often come to us with questions they might ask a favorite relative. We become part of their extended family.”

To get its young patients off to a good start, the department works closely with the Ob/Gyn Department, paying special attention to upcoming first-time births and noting problems in

continued on page 5

New hours for pediatric acute care visits

In response to requests from our patients, the Pediatrics Department will offer telephone consultations beginning at 7:30 A.M., Monday–Friday. Nursing staff will be able to provide assessments over the phone and can book same-day acute care visits when needed. Also, acute care visits will be available from 8:00 A.M. for the convenience of those who need to bring in a sick child.

Tuberculosis continued from front page

Predominantly an infection of the lungs caused by a very slow-growing bacteria (Mycobacterium tuberculosis), tuberculosis (TB) began to decline with the advent of effective antibiotics several decades ago. However, recently TB has been on the rise and some multi-drug resistant organisms have appeared.

The increase in TB in the U.S. has been attributed to several causes: reactivation of dormant infections among those who are HIV positive; the increase in homelessness because of the closing of in-patient mental-health facilities; and increased immigration from and travel to high prevalence areas such as Africa, the Indian subcontinent and southeast Asia. People from these areas and those who spend time there should have a PPD test (the skin test for tuberculosis) after arriving in the U.S. Many states, including Connecticut, are making a concerted effort to control tuberculosis, including mandating a PPD for all college students.

In the U.S. the rate of TB infection is particularly high in settings such as prisons, hospitals, homeless shelters and AIDS treatment centers. Those who spend time in these surroundings should have PPD tests regularly, usually once a year. If PPD status changes from negative to positive, prophylactic (preventive) antibiotic treatment is recommended. Once a person has had a positive PPD, the test should not be repeated.

Primary TB infection may not produce noticeable symptoms and is often undiagnosed and self-limiting. The body may wall off the infection so that the TB organisms, while remaining alive, are contained and non-infectious. Later in life, or if the immune system becomes suppressed, tuberculosis can reactivate. Active tuberculosis may be associated with subtle symptoms such as fatigue; chronic cough, sometimes with blood-tinged sputum; and low grade fever, classically associated with night sweats. It is estimated that, of those with primary TB infections, 5% - 10% will develop active TB. Reactivation can be prevented by prophylactic treatment of the primary infection with specific antibiotics for tuberculosis. However, since most primary infections are not apparent to the person infected, anyone who may have been exposed to TB should have a PPD.
Keeping people healthy is central to the mission of Yale Health Plan. Reaching out to the Yale community to provide information, health screening and disease prevention programs is a major part of our work. These activities, some of which are described below, extend far beyond the traditional setting of clinic visits at the University Health Services Center.

A visit to a primary clinician is a reasonable place for many of us to start with preventive care. “Well visits,” including check-ups and physical exams, are geared to the needs of individual members. At these visits, you and your clinician can discuss your personal concerns, life style and family history. Ideally you will come away better informed and up-to-date on screenings and preventive testing tailored to your needs.

Many members of the Yale community are aware of the programs and clinics at YHP geared towards keeping you healthy. During October, which is Breast Cancer Awareness Month, the YHP Obstetrics and Gynecology Department presented free programs to all members of the Yale community on mammography and breast self examination. Hundreds of members have participated in our screening clinics for detection of skin cancer. We host educational sessions on topics ranging from dealing with prostate disease to living with diabetes. Ongoing preventive medicine and health education programs include blood pressure screenings, health risk assessments, adult CPR (cardio-pulmonary resuscitation) classes, cholesterol screening and smoking cessation workshops.

To many of us, vaccinations against infectious diseases — such as the flu vaccine that thousands of our members obtain at YHP each fall — are central to preventive medicine. Many more receive the vaccine from the YHP staff members who go out to sites on campus to provide not only flu shots, but health information, blood pressure screenings and other services. This fall YHP held over 25 “Information Fairs.” We visited members of the Yale community at their places of work to provide education, screening and preventive care. The YHP “Stress Down Day” is another example of our health promotion programs throughout the Yale campus. This program is offered to Yale students, faculty and staff on Friday, December 11, 1998 in the President’s Room at Woolsey Hall from 12:00 noon to 4:00 PM.

At YHP, we do much more than treat patients when they are sick. We help our members lead healthy lives. We want them to learn about preventing illness and to use all our resources devoted to early detection. To achieve this goal, we offer many preventive services at 17 Hillhouse Avenue and around the Yale campus. Our whole staff welcomes your ideas and suggestions.

Sleep

continued from front page

The quality of sleep even during the non-interrupted periods. Traditionally, it has been thought that 8 hours of sleep should be adequate for most people, although some sleep experts now recommend 9–10 hours of sleep a night.

What are the effects of inadequate sleep?

You will have difficulty awakening in the morning, may experience drowsiness in the afternoon, and feel irritable. You may also have difficulty concentrating. Prolonged extreme sleep deprivation can cause illusions and hallucinations. There is evidence that many motor vehicle accidents occur as a result of even mild sleep deprivation and that you may be more susceptible to illness if sleep-deprived.

What can I do to ensure adequate sleep?

You may want to keep a sleep diary to record when you go to bed, when you fall asleep, and if you are awakened during the night. You may then want to discuss any difficulties with your clinician. Anxiety can affect the ability to fall asleep and depression or anxiety can cause early morning awakening. There are also a number of diagnosable sleep disorders for which your clinician can evaluate you. Be sure that your bed is comfortable with adequate space for sleeping, and that the room is not too warm. Regular exercise during the day, and bedtime routines such as a warm bath can help promote sleep. Avoid caffeine after lunchtime and avoid alcohol late in the day; drinking caffeinated beverages can affect the quality of sleep, even if you have no difficulty falling asleep. Avoid stimulating activities for several hours before bed, and avoid engrossing books or TV shows before bed. You may want to try increasing the amount of sleep you get, especially if you currently sleep less than 8 hours a night. Do this by adding an hour of sleep each week until you can awaken spontaneously in the morning at a consistent time.
Q. What types of procedures are done on-site in the Radiology Department?

A. The department does most ultrasounds, x-rays and fluoroscopic exams. It does not offer CT scans, MRIs, nuclear medicine procedures, mammograms or bone density tests.

Q. What if I need a procedure that is not available here?

A. Health plan members receive outpatient referrals for any necessary diagnostic imaging procedures that are not done in-house. There is no additional fee.

Q. How do I get an appointment?

A. You must have a referral, either from your primary care clinician or a specialist, for any examination done in the Radiology Department. For procedures which do not require any advance preparation (such as chest x-rays), you may walk in during our regular hours and be seen on a first-come, first-served basis. For procedures which require preparation (such as examinations of the gastrointestinal tract), you should make an appointment in advance by calling the Radiology Department at 203-432-0340. In some cases, such as obstetrical ultrasounds, the department making the referral will book the appointment for you and send the required paperwork to the Radiology Department. In any other situation, you must bring your referral slip with you when you come for your test. This slip contains essential medical information.

Q. What are the hours?

A. During the academic year, the department is open Monday–Friday from 8:30 AM–8:00 PM and on Saturday from 9:00 AM–1:00 PM. During school breaks, the hours are Monday–Friday from 8:30 AM–5:00 PM and Saturday from 9:00 AM–1:00 PM. For emergency diagnostic procedures off-hours (such as an x-ray after an accident), services are available at Yale-New Haven Hospital.

Q. Do I need to make preparations for my diagnostic procedure?

A. Some procedures do require advance preparations such as adjusting your intake of foods or liquids. Your referring physician will discuss with you what, if anything, you need to do to prepare.

Q. How do I get my results?

A. Results are available through your primary care clinician or the clinician who referred you for the exam.

Q. I need copies of my films for an appointment with a clinician outside 17 Hillhouse Avenue. What do I do?

A. You can contact the Radiology Department to request copies of your films, which you can then take with you to your appointment. Copies can also be mailed to outside providers.

Q. What are the busiest times?

A. The busiest days are usually Mondays and Fridays, and mornings tend to be busier than afternoons. However, emergency care always takes priority.
YHP’s 1998 Provider of the Year — Jewel Mullen, MD, MPH, of the Internal Medicine Department — understands that her patients bring their total life experiences with them when they come in for medical care: their work lives, their significant relationships, their economic status, their experiences borne out of racial and ethnic background and gender. Her interest in “the health of individuals in the context of the larger community” led her to add a public health degree to her medical credentials, which include an MD from New York’s Mt. Sinai Medical Center, and a six-year appointment on the medical faculty at the University of Virginia.

A member of the YHP Internal Medicine Department since 1996, Mullen is committed to outpatient medicine — the “ambulatory medicine” practiced in private doctors’ offices, hospital clinics, student health services, HMOs and, of course, at YHP. She says, “Most medical education has been focused on the hospital, with the sickest patients, who nowadays have to be sicker and sicker even to get into the hospital. But most patients are treated in an outpatient environment.”

In that outpatient setting, good clinician–patient communication is vital. Mullen loves working with her patients, from whom, she notes, she is always learning. “More and more,” she says, “people look towards their clinicians to give them direction, rather than just dictating what they should do. This interpersonal connection is always very important.”

The Pediatrics team (left to right): G. Juliano, PNP; J. Blanton, MD; J. Burger, MD; K. Marcarelli, receptionist; S. Gould, LPN; J. Milberg, PNP; C. Morrison, MD; E. DeMayo, LPN; M. Foley, receptionist; K. Ford, RN; S. Simon, MD; B. Morse, LPN; M. Siev, MD; S. Chometa, LPN

YHP Staff Members Recognized

NON-PHYSICIAN
CLINICIAN OF THE YEAR
Doris Foell, APRN, MSN, CS
YHP Surgical Care Coordinator
Surgical Specialties Department

EMPLOYEES OF THE YEAR
Brenda Breault, RN
nurse, Dermatology Department

Millie Young
receptionist, Surgical Specialties Department

Jewel Mullen, MD, Wins 1998 Provider of the Year Award

YHP’s 1998 Provider of the Year — Jewel Mullen, MD, MPH, of the Internal Medicine Department — understands that her patients bring their total life experiences with them when they come in for medical care: their work lives, their significant relationships, their economic status, their experiences borne out of racial and ethnic background and gender. Her interest in “the health of individuals in the context of the larger community” led her to add a public health degree to her medical credentials, which include an MD from New York’s Mt. Sinai Medical Center, and a six-year appointment on the medical faculty at the University of Virginia.

A member of the YHP Internal Medicine Department since 1996, Mullen is committed to outpatient medicine — the “ambulatory medicine” practiced in private doctors’ offices, hospital clinics, student health services, HMOs and, of course, at YHP. She says, “Most medical education has been focused on the hospital, with the sickest patients, who nowadays have to be sicker and sicker even to get into the hospital. But most patients are treated in an outpatient environment.”

In that outpatient setting, good clinician–patient communication is vital. Mullen loves working with her patients, from whom, she notes, she is always learning. “More and more,” she says, “people look towards their clinicians to give them direction, rather than just dictating what they should do. This interpersonal connection is always very important.”

YHP Staff Members Recognized

NON-PHYSICIAN
CLINICIAN OF THE YEAR
Doris Foell, APRN, MSN, CS
YHP Surgical Care Coordinator
Surgical Specialties Department

EMPLOYEES OF THE YEAR
Brenda Breault, RN
nurse, Dermatology Department

Millie Young
receptionist, Surgical Specialties Department

Jewel Mullen, MD, Wins 1998 Provider of the Year Award

YHP’s 1998 Provider of the Year — Jewel Mullen, MD, MPH, of the Internal Medicine Department — understands that her patients bring their total life experiences with them when they come in for medical care: their work lives, their significant relationships, their economic status, their experiences borne out of racial and ethnic background and gender. Her interest in “the health of individuals in the context of the larger community” led her to add a public health degree to her medical credentials, which include an MD from New York’s Mt. Sinai Medical Center, and a six-year appointment on the medical faculty at the University of Virginia.

A member of the YHP Internal Medicine Department since 1996, Mullen is committed to outpatient medicine — the “ambulatory medicine” practiced in private doctors’ offices, hospital clinics, student health services, HMOs and, of course, at YHP. She says, “Most medical education has been focused on the hospital, with the sickest patients, who nowadays have to be sicker and sicker even to get into the hospital. But most patients are treated in an outpatient environment.”

In that outpatient setting, good clinician–patient communication is vital. Mullen loves working with her patients, from whom, she notes, she is always learning. “More and more,” she says, “people look towards their clinicians to give them direction, rather than just dictating what they should do. This interpersonal connection is always very important.”

YHP Staff Members Recognized

NON-PHYSICIAN
CLINICIAN OF THE YEAR
Doris Foell, APRN, MSN, CS
YHP Surgical Care Coordinator
Surgical Specialties Department

EMPLOYEES OF THE YEAR
Brenda Breault, RN
nurse, Dermatology Department

Millie Young
receptionist, Surgical Specialties Department
INFORMATION DESK IS UP AND RUNNING
You may have already noticed a welcoming presence in the YHP front lobby. An information desk is now located directly inside the front doors of the University Health Services Center. Whether you are looking for directions to your provider’s office or answers to questions about YHP benefits, you can visit our information desk from 8:30 AM to 5:00 PM, Monday through Friday.

EVENING APPOINTMENTS IN THE OB/GYN DEPARTMENT
The YHP Obstetrics and Gynecology Department is now offering Tuesday evening clinic hours from 5:00 to 8:00 PM. Please call 203-432-0222 to schedule an appointment.

EXPANDED CLINIC HOURS IN THE ALLERGY/IMMUNIZATION DEPARTMENT
The Allergy/Immunization Department will now offer immunizations on Monday, Wednesday and Friday from 8:30-4:30. Allergy shots will be available on Monday and Wednesday from 8:30-4:30 and on Friday from 8:30-1:00.

USING YOUR PHARMACY CARD
If you have your hospitalization and specialty care insurance through a plan other than YHP, you may receive a pharmacy card. You can use this card at your plan’s participating pharmacies. The YUHS pharmacy cannot accept pharmacy cards from other health insurance plans, as we do not participate in their networks. If you choose to fill your prescriptions at out-of-network pharmacies, you must pay for the medication and then submit your receipts to your alternate insurance carrier directly.

REQUESTS FOR MEDICATION PRINTOUTS
Medication printouts are no longer available at the pharmacy window, but we will be glad to mail them to you if you complete (1) a prescription information request and (2) an authorization for the release of medical information. You can obtain these forms at the counter opposite the elevators in the first floor lobby or by calling the pharmacy at 203-432-0222 to schedule an appointment.

TWO BOOKS TO HELP YOU SLEEP
Power Sleep: The Revolutionary Program That Prepares Your Mind for Peak Performance
by Dr. James B. Maas with Megan L. Wherry, et al.
Sleep Thieves: An Eye-Opening Exploration Into the Science and Mysteries of Sleep
by Stanley Coren
The Free Press, 1996

Do you use two alarms in the morning and still hit the snooze button? Do you long for mid-afternoon naps? Do you find yourself irritable for no apparent reason? If the answer to any of these questions is yes and if other health problems have been ruled out, you probably need more sleep. James B. Maas’s Power Sleep presents the importance of adequate sleep and shows the reader how to develop optimal sleep routines to ensure a restful night. Maas believes that most people function best with 9–10 hours of sleep each night and that the usually recommended 8 hours is not enough for most people. Many Americans do not even get those 8 hours regularly. Stanley Coren’s Sleep Thieves, a good companion book to Maas’s, presents more details on the physiology of sleep and the consequences of sleep deprivation. He provides numerous examples of the detrimental effects of lack of sleep, including increased traffic fatalities, decreased job performance, and family stress. Both books provide a convincing wake-up call for the importance of adequate sleep.
**Fluffy Snow Makes Heavy Work**

All those snowflakes add up. Each year, snow removal results in health problems such as heart attacks, muscle strain, broken bones and frostbite. Snow shoveling requires a lot of energy and muscle. It can be good exercise if you are in good health. However, shoveling large amounts of snow can significantly boost your heart rate and blood pressure. That may help explain the rise in heart attacks seen annually during the winter.

**Alcohol: Dispelling Myths**

With the approach of the winter holidays, many people will attend events where alcohol is served. Myths about alcohol consumption abound. Below are a few common myths and facts about alcohol.

**Myth: Alcohol is a stimulant.**

**Fact:** Alcohol is actually a depressant, which acts on the central nervous system like an anesthetic to lower or depress brain activity. Often, this depressing of brain activity results in a lowering of inhibitions, which gives the false impression that the alcohol is acting as a stimulant.

**Myth: Drinking coffee sobers you.**

**Fact:** Coffee may wake you up, but it cannot rid your system of alcohol and its effects. Only time allows the body to remove alcohol from your system.

**Myth: I’m okay because I stay away from the hard stuff.**

**Fact:** Alcohol is alcohol. Beer has the same effect as straight scotch. One 12-ounce beer has as much alcohol as a 4-ounce glass of wine or 1 ounce of 80-proof distilled spirits.

**Myth: I’m bigger, so I can handle my liquor better.**

**Fact:** Size is only one factor in how much you can drink. Metabolism, amount of rest and food intake all play a part. Alcohol tends to be broken down more quickly in women and may affect them to a greater degree. No matter how big you are, impairment in motor reflexes and judgment can begin with the first drink.

**Myth: Alcohol makes you sleep better.**

**Fact:** Alcohol may make you drowsy and you may fall asleep more quickly. But your sleep is likely to be disturbed and you will not be as rested the next day.

**Myth: I’ll be okay. All I have to do is splash my face with cold water.**

**Fact:** Splash all you like. Take a cold shower if you want. It may make you cleaner, but it won’t make you sober or make you a safe driver. Don’t put yourself or others at risk.

**Chasing Calcium: New Recommendations Call for Increased Intake**

Last year the National Academy of Sciences (NAS) increased the recommendation for calcium for most age groups, even though most Americans don’t meet even the old requirements. The primary goal for the new levels is to help prevent bone loss, but calcium has been shown to have other benefits as well, such as decreasing blood pressure and possibly playing a role in preventing colon cancer.

While the average adult currently consumes 500–700 milligrams of calcium daily, the new guidelines call for 1000 milligrams a day for most adults (up from the earlier 800). For those over 50, the recommendation is now 1200 milligrams and for adolescents it is 1300 milligrams.

You can get your daily intake of 1000 milligrams of calcium by drinking one glass of calcium-fortified orange juice and eating one slice of cheese and 8 ounces of yogurt. For those who can’t or prefer not to ingest dairy products, calcium-fortifed soy milk is a good option. If you are concerned about getting enough calcium through your regular diet, check with your clinician about calcium supplements.
Early Pregnancy Class
Held in room 405 on the 2nd Wednesday of each month from 10:30–11:30 AM for YHP members. To register, call the Ob/Gyn Department at 203-432-0222 or stop by the appointment desk. We encourage you to bring a supportive person.

Post-partum Reunion Classes
Held on the 3rd Friday of each month in room 405 from 10:00–11:30. Please bring your new babies to this great support network for all new moms! Conducted by Wendy Madore, RNC. Call the Obstetrics/Gynecology Department (203-432-0222) to register.

Adult CPR Classes
Adult CPR classes are held monthly. For information, call 203-432-1892.

Weight Watchers at Work
Mondays, 12:15–1:00 PM in room 405. You can join any time. For information, call 203-432-1892.

Blood Pressure Screenings
Tuesdays from 10:00–11:00 AM in room 406. Open to the Yale community free of charge, by referral or on a walk-in basis. For info, call 203-432-6853.

Health Risk Assessments
Health risk assessment questionnaires are offered to the entire Yale community free of charge on the first Wednesday and Thursday of the month from 2:00–3:00 pm in room 406. For more information, call 203-432-6853.

Smoking Cessation Workshop
Thursdays, noon–1:00 PM in room 406. Free to Yale Health Plan members. Pre-registration is requested. To register, call 203-432-1826.

Yale Health Plan Cancer Support Group
Life Options is a support group for adult YHP members who have been diagnosed with cancer, regardless of type of cancer or stage of disease. The group meets weekly with a facilitator. There are three 15-week programs each year. Group members can enroll in consecutive series of meetings. Funded partially by the Edith S. Hallo Fund and by a small weekly fee charged to each participant. To enroll or for more information, contact the facilitator, Mona Felts, MSW, at 203-432-0290.

Winter Recess Hours at YHP
All YHP administrative and clinical departments will be closed on December 25 and January 1.

All YHP administrative and clinical departments will be open from 8:30-12:30 on December 24 and December 31.

All primary care clinics and some specialty services will be open during regular business hours on December 28, 29, and 30. Please call each specialty clinic for its holiday schedule.

The pharmacy will be open from 8:30 to 3:30 on December 24, 26 and 31, and on January 2. It will be open from 7:30 to 6:30 on December 28, 29 and 30.

Medical services for urgent problems are available all during the holiday recess period through the Urgent Care Department (203-432-0121).