Not As “Common” As The Cold, Flu Can Lay You Low

Rhea Hirshman, editor

Influenza (“the flu”) is a viral infection of the nose, throat and lungs. In our part of the world, most influenza activity occurs from December through March, but cases of flu can be seen as early as October and as late as May in some years.

The flu is highly contagious, spread easily from person to person. In any given year, between five percent and twenty percent of the population will contract the flu. While most people recover from a bout with the flu within a week to ten days by resting and practicing good self-care, some cases require hospitalization, especially among the elderly and those with compromised immune systems. During the 1990s, an average of 200,000 people a year were hospitalized for influenza-related complications. About 36,000 died annually from these complications, with over 90 percent of those deaths occurring in persons 65 and older. (Statistics from the National Foundation for Infectious Diseases).

Typical influenza illness is characterized by the sudden onset of fever, chills, cough, headache, runny nose, sore throat, and muscle and joint pain (some people describe feeling “like being run over by a truck”). While some of these symptoms (particularly the runny nose, fatigue and achiness) can also indicate the onset of a cold, colds are centered primarily in the nose. The flu, however, can make you sick all over and carries the potential for complications such as bacterial or viral pneumonia and the worsening of existing health problems such as heart disease, lung disease and diabetes.

Exercise videos to the rescue! It’s a whole new world out there, beyond Jane Fonda and Jack LaLane. With the explosion in the videotape and DVD industries and interest in all types of exercise from aerobics to Pilates to Tae Bo, exercise tapes have become less expensive and more available. You can find them in videostores, discount and sporting good stores, supermarkets and your local library.

Exercise videos have many advantages. You can do the routines in the privacy of your own home at any time of the day or night, wearing whatever you want. Your workout time is maximized, as no travel time is involved.

continued on page 2  
continued on page 5
About the flu vaccine
Influenza vaccine can prevent 50–60 percent of hospitalizations and 80 percent of deaths from complications among elderly residents in nursing homes.

Because influenza viruses can change from year to year and because protection lasts only about a year, annual vaccination is necessary.

Individuals in the following groups should be particularly diligent about being vaccinated:
- Those 50 or older.
- Children between 6–23 months old.
- Residents of nursing homes and other care facilities.
- Adults and children 6 months or older with chronic pulmonary or cardiovascular disorders, including asthma; who are immunosuppressed because of inherited or infectious diseases; who are on long-term treatment with steroids or similar medications; who are undergoing treatment for cancer; who have chronic diseases such as diabetes, kidney disease or blood diseases.
- Pregnant women.
- Those between 6 months and 18 years old who receive long-term aspirin therapy.
- Health care providers, household contacts and caregivers for any of the above groups and for infants under 6 months.

Flu
continued from page 1

Another difference between colds and flu is that significant protection against the flu is available through flu vaccines; there is no vaccine against the common cold. In any given year, a small number of strains of influenza virus cause most of the flu worldwide. Epidemiological data is gathered annually to formulate a vaccine for the strains anticipated to be most prevalent in the coming flu season. Although unanticipated strains can arise against which the vaccine is not protective, immunization against the flu can prevent the majority of cases and can also lessen the severity of those cases that do occur.

The flu is highly contagious, spread easily from person to person.

One commonality between colds and the flu is that they are both viral infections. Viral infections do not respond to antibiotics. So, no matter how miserable you feel, do not attempt to treat either a cold or a case of the flu with antibiotics. Only if a bacterial infection is present will your clinician consider antibiotic treatment.

In addition to obtaining a flu vaccination (see above), you can reduce your risk of contracting the flu (and colds) by taking some common-sense precautions. These include:
- Wash your hands frequently and thoroughly (lots of soap and at least 15 seconds of rubbing your hands under running water) and avoid touching your face. This greatly reduces the risk of transmitting the virus from your hands to your eyes, nose or mouth. You do not need to use antibacterial soaps; regular soap and water remove the virus. In your home, use paper towels rather than having everyone use the same cloth towel.
- If you are using an alcohol-based hand rub (such as Purell), remember that these products are not appropriate when hands are visibly dirty. Also, in order to use these products effectively, you need to rub your hands together vigorously until they are dry. If your hands are dry before 15 seconds have elapsed, you did not use enough of the rub and should repeat the application.
- If you share equipment such as telephones and computer keyboards, wipe them off with rubbing alcohol between users.
- Improve general health with adequate rest, healthy food, regular moderate exercise, plenty of non-alcoholic liquids.
- Avoid crowded areas with poor ventilation.
- Quit smoking and avoid second-hand cigarette smoke, which irritates the mucus membranes.

Anti-viral drugs for the flu?

Although antibiotics work against bacteria and not against viruses, rendering them inappropriate for treating influenza, antiviral drugs are (e.g. amantadine, Tamiflu, Relenza) available to treat the flu in some patients. These drugs are available by prescription only, must be started within 2 days of the first flu symptoms, and must be taken for 3–5 consecutive days (depending on the medication). While they will not “cure” a case of the flu, they can shorten its duration and may make you less contagious.

Since most healthy people recover from a bout of the flu with no complications, these antiviral drugs are generally given to those at higher risk or to those in institutional settings (such as nursing homes) or in other crowded conditions (such as on cruise ships) which can increase the likelihood of contagion. High risk groups include those listed above, but none of the antivirals are approved for use in children under 1 year of age. If you have flu symptoms, your clinician will discuss with you whether an antiviral drug is appropriate.

See back page for a note about bird flu.
It is a pleasure to welcome the new members who have recently joined Yale Health Plan—and to thank our continuing members for their confidence.

The start of our 35th year is an appropriate time to reflect on our rich history as well as our bright future. YHP was the ‘brain child’ of creative and visionary members of the Yale faculty and administration who, in the 1960s, planned YHP as the first staff-model health care organization in this region. Designed along the lines of the Kaiser-Permanente health care organizations in California, YHP was conceived as a health center and insurance plan for Yale’s faculty, staff, retirees, students and dependents. By combining these groups, Yale was able to offer care to students as well as benefits for faculty and staff that have proven to be both far more generous and much more affordable than those available through alternative plans.

At its opening in July of 1971, YHP had 15,000 members, and 18,000 by early the following year. Now, with our patient population in the range of 35,000, we have outgrown our original home at 17 Hillhouse Avenue. The growth in numbers, changes in technology and expansion of services over the years translate into a need for more space, updated facilities, greater privacy and a more hospitable environment. Planning for our new YHP facility is proceeding on schedule and we look forward to offering our members and staff significant enhancements when our new health center opens in 2009. The vision of a clinician-led, nonprofit health plan remains strong—with emphasis on prevention, wellness and primary care, backed up by an outstanding network of specialists and specialized facilities for advanced medical diagnosis and treatment.

As we design our new building, we are planning for improved clinical access with many more examination rooms and clinical spaces. In the interim before our move in 2009, we are working on initiatives to get the most out of our Hillhouse Avenue facility. We are doing more endoscopic procedures on-site and we are improving our radiology capacity. We are working on better ways to serve our members in our Pharmacy, our lab and, above all, in our clinics. We never forget that our core business is our members’ visits with their clinicians. Some of the most important work we are doing involves recruiting clinical staff and improving our telephone and appointment scheduling systems.

We welcome your input. Check out our website (www.yale.edu/uhhs), where you can click on “services” to find lists of departments and of clinical staff members and departmental chiefs and managers—any of whom are glad to assist you. Your member handbook is also on our web site, with details about coverage, as well as information that may come in handy if you are out of the area. You can also use our web site to keep track of our many programs and events. If you have not already signed up, be sure to enroll in Yale Health Online (www.yalehealthonline.yale.edu), our confidential email system for contacting your clinicians, obtaining results and scheduling appointments.

Our managers, clinical department chiefs and Member Services staff (203-432-0246 or member.services@yale.edu), as well as my colleagues in the Director’s office (203-432-0076) are eager to help—so contact us if we can assist you in any way. I wish you a healthy and happy 2006!
The common cold is a viral illness of the upper respiratory tract. While generally more annoying than dangerous, colds may increase susceptibility to sinus infections, bronchitis, or other secondary infections.

The best defense is to prevent colds by eating right, drinking enough non-alcoholic and non-caffeinated fluids, getting enough rest, thorough hand-washing and taking other common-sense measures. But, if despite your best efforts, you succumb to a cold, some of grandma’s home remedies may bring significant relief.

Forget the soul. Chicken soup for the nose.
Chicken soup helps keep you hydrated by replacing fluids lost from a runny nose or from sweating when you have a fever. The steam from a bowl of soup helps to clear a stuffy nose and sinuses, as do (optional) hot and spicy ingredients such as cayenne or chili peppers. Homemade is best, but good quality prepared soup works well, too. Add chopped garlic and/or onion and a pinch of cayenne pepper (helps open sinuses) to taste. Serve hot.

Water, water anywhere
Most people don’t drink enough when they’re sick, and even mild dehydration can make you feel worse. Drink plenty of water to replace the fluids you’ve lost. Aim for ten 8-ounce glasses a day, flavored with a little fruit juice, if you like. Herbal tea (but not black tea) counts as water too.

If your throat is achy, try gargling with warm salt water.
Use a thoroughly cleaned humidifier to add moisture to your bedroom. And soak in a tub of cool (not cold) water to counteract a fever.

All steamed up
Bacteria flourish when mucus gets stuck in the nose, sinuses, or chest. Inhaling steam helps get mucus moving. Steam up the bathroom with a warm shower or bath and breathe deeply. Wrap yourself warmly before leaving the bathroom and follow up with a cup of hot tea or soup (see below for more on soup and tea), breathing in steam from the beverage.

Lemon, honey?
If you’re a tea drinker, add honey and lemon to your tea. Even without the tea, honey and lemon can help a dry, scratchy throat. The thickness of honey helps coat and soothe an irritated throat and lemon squeezed onto your teaspoon of honey stimulates the salivary glands, pulling fluid into the mouth and making swallowing easier.

A dash of cinnamon
Cinnamon has been used medicinally for thousands of years as a fever reducer and anti-inflammatory. Try some cinnamon tea with honey. Add 1 tablespoon powdered cinnamon or some cinnamon sticks to 8 ounces of boiling water. Cloves can also be added. Steep, covered, for 20 minutes, then uncover and allow to cool to room temperature. Add honey and lemon to taste.

And a pinch of ginger
Many grandmas have used ginger ale to settle upset stomachs. But ginger can also help with cold and flu symptoms. If possible, use fresh grated ginger root to make ginger tea. Steep about one tablespoon grated ginger in a cup of boiling water, covered, for 10 minutes, then strain the tea into another cup and, if desired, add honey to taste. If fresh ginger is not available, you can use powdered ginger.

Consult your clinician if symptoms are severe or don’t improve after 5 to 7 days, or if you have an underlying medical condition, especially heart disease or a chronic respiratory illness such as asthma.

Cold Got You Down? Listen To Grandma
Exercise Videos
continued from page 1

And you are not dependent on the weather or your workout buddy. In fact, your “workout buddies” are right there on your screen, waiting for you to bring them to life, just like the proverbial genies in bottles.

Some tips about choosing exercise videos:

- Consider where you will exercise in your house. You don’t need a lot of room, but you will need a VCR or DVD player and a space at least 3 by 5 feet in front of the television.
- Think about what you like to do. Would you like to learn something new, like belly dancing or Pilates, or do you prefer a walking video?
- Do you have a channel that shows exercise programs? If so, you may be able to view a few different instructors to see their styles, which can help you to make a choice.
- Another factor is the background—would you prefer to see someone leading an exercise routine with a lush tropical setting behind them, or in a room with a neutral background?
- Don’t forget to check to see if special equipment is required. Many people enjoy buying exercise equipment like dumbbells, steps or stretch bands to use in their workouts, but if you don’t want to do this, make sure to get a tape that doesn’t use them.
- If you are a beginner, check to see if the video is either oriented toward beginners or shows how the moves are modified if you are a beginner.
- And of course, you will need to determine your exercise goals: aerobics, strength and stretching. Many exercise videos combine all of these elements.

You can view and listen to a video to make sure you like the music as well as the instructor’s style and setting.

Whatever you choose, enjoy yourself while you get fit. And remember, spring’s not far away, and you’ll soon be back outside with your walking buddy—maybe with your videos as a permanent addition to your exercise routine.

And for the couch potato, junior version

There is no doubt that most kids love video games—but regular physical activity is essential for healthy growth and development.

How about a video game that will get kids moving? Dance Dance Revolution (commonly known as DDR) is available in arcades and also for Playstation. Using a dance mat, players move their feet based on onscreen cues which scroll down the screen. The movements are done to colorful graphics and fast-paced songs. The number of points scored is based on how many times a player hits the correct spot on the dance pad—and the activity level can be intense! This is a video game that both kids and their parents can love!
Ophthalmology Department offers refraction clinics

The Ophthalmology Department now offers monthly refraction clinics for patients who need only a check of their glasses. This is not a substitute for a complete eye exam, but allows an opportunity to update your prescription.

Please note that these clinics do not include screenings for glaucoma or any other eye diseases. You are not eligible to use these clinics if any of the following pertain to you:
- You have not had an eye exam in the past two (2) years.
- You know you have an eye problem other than needing glasses.
- You have known glaucoma.
- You have known diabetes.
- You have macular degeneration.
- You are having symptoms other than a change in vision.

Clinics are held in the morning on the second Tuesday and third Thursday of each month (so, for instance, the January clinics will be held on Tuesday, January 10 and Thursday, January 19). Appointments are available on a first-come, first-served basis. Contact the Ophthalmology Department at 203-432-0084 for an appointment or more information.

Integrated Women’s Health Program

Since YHP health maintenance guidelines recommend yearly visits for women over 50, many of these members find themselves having to make “annual” visit appointments twice a year—once in Internal Medicine and once in Ob/Gyn. Our new Women’s Health Program, which was implemented this past fall, coordinates preventive care between the departments of Internal Medicine and Gynecology.

The two departments have developed guidelines for annual comprehensive health assessments for women between 50–70. Screenings for these members can therefore be provided in one annual visit, alternating each year between the primary care clinician in Internal Medicine and the primary care clinician in Ob/Gyn. During this visit, the clinician will address health concerns, screening needs and vaccinations for the year. Of course, women with ongoing health concerns in either area should continue to have regularly scheduled follow-up appointments with the appropriate clinicians.

The program was implemented for this group because national guidelines indicate that women in this age range should have annual preventive health exams. This is a pilot program and may be adapted later for other age groups.

Please schedule a comprehensive health assessment when your next annual appointment is due. If your last annual exam was in Gynecology, then schedule your appointment with your Internal Medicine clinician (203-432-0038). Conversely, if your last physical exam was in Internal Medicine, schedule your appointment with your Gynecology clinician (203-432-0222). Either department can assist if you are unsure where you had your last exam. You may also request appointments through Yale Health Online at www.yalehealthonline.yale.edu (visit this site as well to register for an account).
**New provider for diagnostic radiology services**

Yale University Health Services has entered into an exclusive contractual arrangement with Yale Diagnostic Radiology (YDR) for provision of all radiology services for YHP members. All radiologic studies performed at YHP or for YHP members at approved off-site locations will be interpreted by the clinicians at YDR. The contract also provides for an on-site radiologist who will oversee radiology services at YHP and interpret all studies performed here. Studies that cannot be performed at YHP will be done at Yale New Haven Hospital or one of the satellite facilities of Yale Diagnostic Radiology.

Please note that any radiologic/diagnostic imaging studies performed outside this contract without prior authorization will not be considered a covered benefit, with the exception of emergency procedures. A practice coordinator will be located at YHP to assist in the referral and scheduling of procedures for members.

**Immunization clinics for Medical School employees**

The Employee Health Department is offering immunization clinics on site at the medical center for those who require immunizations for employment at the University. Available immunizations will include: Hepatitis B; MMR (measles, mumps, rubella); tetanus-diphtheria. PPD (tuberculosis) testing will also be available.

- **Dates:** Held on a walk-in basis on the second Tuesday and Thursday of each month (for instance, January sessions will be on Tuesday, January 10 and Thursday, January 12).
- **Time:** 1:30–4:30 p.m.
- **Location:** Yale Physicians’ Building (800 Howard Avenue) in room 481.

For more information, call 203-432-7978.

**Wear sneakers, stay standing**

Sneakers may be a fashion statement for the younger set, but for those 65 and over, athletic footwear can be a lifesaver. In a study conducted in Washington state and published late last year in the Journal of the American Geriatric Society, nearly 1,400 adults in that age group were monitored for falls over a two-year period. Those who wore mostly sneakers experienced fewer falls (and thus fewer broken bones and other health problems) than those who tended to wear lace-up oxfords, heels, or other kinds of footwear. Going barefoot or walking around in stocking feet was most likely to lead to a fall. The moral, especially for those over 65: Keep your sneakers on.

**Questions or comments about the newsletter?** Let us know what you think.

Please email us at member.services@yale.edu and put “newsletter” in the subject line.
Wellness Programs at YUHS

Blood pressure monitoring

The Office of Health Promotion and Education conducts monthly blood pressure screenings at various campus locations (consult the YHP website for dates and places) for YHP members who are not currently being treated for a blood pressure problem. Members who have been diagnosed and are under treatment for hypertension are monitored in Internal Medicine (203-432-0038) by appointment (Monday through Friday, 8:30 am to 4:00 pm).

Cancer support group

Life Options is a support group for adult YHP members 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, and members can enroll in consecutive series of meetings. The group is partially funded 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, Naomi Panza, MSW, at 203-432-0290.

YHP staff

Student Medicine and Health Promotion/Education Departments Welcome New Manager

Patricia Shannon Stumpf, MS, BSN, joined YUHS in October as the Manager of the Departments of Student Medicine and Health Promotion & Education. Stumpf received her B.S. in nursing from the State University of New York at Albany and her M.S. in community health nursing from the University of Colorado Medical Center in Denver. She was most recently a consultant to the Connecticut Association of Directors of Health, where she provided consultation and technical assistance to local health departments regarding development and evaluation of local public health emergency response plans. She also served for ten years as the Director of Public Health Nursing and Communicable Disease Control for the Dutchess County (NY) Department of Health. Earlier in her career Stumpf was a staff nurse at St. Francis Hospital in Poughkeepsie and was an assistant professor in the nursing program at Marist College. Her community service experience includes having worked with several Dutchess County agencies on issues related to strategic planning, emergency preparedness and preventive care.

A note about avian influenza (“bird flu”)

Avian influenza is caused by viruses occurring in birds, who usually do not get sick from them. There are numerous strains of the flu virus, with all the H and N genotypes originating in migratory waterfowl. The one of current concern is the H5N1 strain, first recognized in 1997 when it infected 18 people in Hong Kong and caused six deaths. Avian viruses in wild bird populations are transmitted to domestic birds or sometimes to pigs. New strains can evolve when animals are near each other (the process known as “recombining”).

While humans have developed a degree of immunity to various influenza strains because of exposure over time, the H5 strain is new to humans, rendering us highly susceptible if it were to become widespread in the population. A human pandemic occurs only when a virus introduced into the human population through another species becomes transmissible from person to person.

Research is underway into the development of vaccines against this virus strain, as well as into other methods of prevention.

yale health care

Yale Health Plan
Member Services
17 Hillhouse Avenue
P.O. Box 208237
New Haven, CT 06520-8237

Please remember that free parking for YHP members is available both in the lot right next to 17 Hillhouse Avenue and in parking lot 37, just across Trumbull Street.