We can barely make a move without our memory. Whether we are making a conscious effort to remember (working to recall the name of someone we met only once before) or doing something we may not associate with memory at all (walking to the sink and beginning to wash the dishes without having to rehearse all the steps), memory is integral to who we are and how we function.

Researchers currently break down the memory process into three components: acquisition, storage, and retrieval. Acquisition is the phase in which information is acquired or learned in the first place. It requires the ability to pay attention and to focus on what is being perceived. Storage is the phase in which the learned material is “placed” in a particular “location” in the brain. Retrieval is the phase that involves recalling the

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stored material at a later date. Another distinction is between working memory (also called short-term memory) and long-term memory. Working memory consists of the information we have immediately before us, like a telephone number. After sufficient rehearsals, material may be transferred to long-term storage.

Memory is a multidimensional process that involves numerous parts of the brain and has links to the olfactory (smell), visual, auditory (hearing), tactile (touch), gustatory (taste) and language systems. Different people may excel at different kinds of memory tasks: memory for music, visual memory, memory for stories, memory for numbers or names. As with other aptitudes, individuals differ in memory skills, but we can also increase memory skills through practice. Recall can also be influenced by a wide range of psychological states, including trauma.

There is no secret to having a good memory and there are no known “memory cures” (although there are rehabilitation strategies for individuals who have experienced traumatic brain injuries). We now know that serious memory loss does not have to accompany aging. While it is true that memory changes as we age, and older people have an increased risk of certain illnesses that can cause dementia (literally, “undoing of the mind”), healthy individuals can improve their memory fitness throughout their lifespan by acquiring several basic memory habits.

First, improve your acquisition of information by increasing attention to what is happening around you. Attention is one of the most sensitive aspects of cognitive functioning, and so called “memory lapses” can be the result of being easily distracted from acquiring the information in the first place. Information must get into the brain before it can be stored for later retrieval.

Strategies for increasing attention include:

- Increase awareness of what is going on around you. “I need to be aware of what is happening now and notice where I am putting my glasses, so I’ll be able to find them later.”
- Focus your attention. Make a conscious effort to attend to what you are doing.
- Try to give meaning and organization to what you are focusing on. Examples of imposing meaning and organization on a group of tasks or items would be to develop visual images or create a story line related to what you want to remember.
- Simple repetition. Advertisers know this. That’s why you’ll hear or see the same ad over and over. Whether you want them to or not, repeated ads will stick in your mind. But you can use the technique of repetition to your own advantage.

In addition, there are a number of lifestyle choices that can help improve your memory fitness. These include:

- Getting enough sleep. Fatigue is one of the most common conditions which interferes with attention and increases distractibility. A rested mind is an alert mind.
- Getting enough aerobic exercise. In addition to increasing overall levels of health and fitness, regular exercise helps to increase blood flow to the brain and increases efficiency of oxygen and nutrient delivery.
- Staying mentally active. The more exercise you give your mind the better it is able to attend to and process information. Activities such as solving puzzles, attending classes, learning new skills and/or information will enhance overall memory fitness.
- Eating a well balanced diet and drinking plenty of fluids. In addition to being an important factor in general health, good nutrition can also boost mental efficiency.
- Being aware of emotional factors such as stress, depression and anxiety. In addition to reducing overall health, depression and anxiety can directly interfere with memory.

For more information about memory, check out the web sites listed on page 6.
By this time all of us are enjoying the springtime and looking forward to some summer relaxation. People sometimes think that because parts of Yale quiet down over the summer, YHP also becomes less busy. Although it is true that many students – particularly undergraduates – leave New Haven in May, YHP’s clinical services run at full tilt throughout the summer, and we also spend these months in active planning for the coming year. One major project now underway is focused on assuring the privacy of your clinical record in this era of burgeoning exchange of electronic medical information.

Many members of the Yale community have been keeping an eye on developments in national health care legislation since the new administration took office in January. For example, the health care privacy rules contained in the Health Information Portability and Accountability Act (HIPAA) are being challenged by large HMOs and many specific statutes and implementation strategies are being reevaluated. However, at YHP we feel that HIPAA contains enlightened measures to improve privacy of medical information. Regardless of how the government adopts some of these reforms, we are pursuing programs to protect patient privacy while enhancing essential communication.

Building on our effective existing safeguards, we are designing electronic systems to ensure that, whenever communication takes place between clinicians or health care organizations (for example, YHP and Yale-New Haven Hospital), only those with a need for information can gain access to it. At the same time, we are building safeguards into planned computer systems to ensure that transfer of private information can take place only with the patient’s consent. Regardless of whether the HIPAA rules are altered, we will have safeguards for private medical information in place before they are mandated.

Our proactive approach to medical privacy is only one of many programs for the coming year. This summer we are also examining proposed ‘Patient Bill of Rights’ legislation to ensure that we are ahead of the curve. So as I wish you a restful and restorative summer, I also want you to know that at YHP, we do not take time out from the vital job of planning and implementing programs to improve care and service to our members.

The Right Care at the Right Time

Rhea Hirshman
Editor

Imagine that someone in your family has just suffered a stroke or a heart attack, or been injured in an accident. After the initial emergency response, where do you turn to find out how best to proceed with extended medical care? What about rehabilitation services? If you are helping to care for the person at home, how will you know what to do? If home health care is needed, how will you find the right source? If you are getting what appears to be conflicting advice, how will you sort it out?

If you are a YHP member, help is available through the newly organized Department of Care Coordination. While YHP has long offered coordination of medical services — diagnosis and treatment — this department “pulls all of the pieces together,” according to Judith Madeux, APRN, MSN, MPH, Associate Director for Clinical Services.

Doris Foell, APRN, MSN, who is managing this new department, gives some examples of “pulling all the pieces together.” For instance, Foell says, “We might be looking at an accident, where someone’s day-to-day activities have suddenly been turned upside down. Or we might be talking about a medical condition that is complicated, involving many different people and services. We can initiate a group conference about care planning. While the primary care clinician makes the final call about medical matters, we are there to help with the legwork. We can get the home health aide. We can make home visits to show family members how to do tasks such as wound care. We have been able to help terminal patients stay at home by training family members and offering a range of support services.”

Madeux adds: “Another example of what we can do involves common surgeries.” She explains that many surgeries, particularly orthopedic, have what is called a “care pathway.” This is a sequence of events laid out indicating “how we expect someone to progress, and making sure they have what they need when they

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Our members often express interest in the “behind the scenes’ procedures and practices involved in medical care. Below is a brief overview of an essential and common task in any modern medical facility – sterilizing medical equipment.

Q. What does it mean to say that an instrument is “sterile”?
A. A sterile instrument is one on which all forms of microbial life are destroyed.

Q. Are different kinds of instruments sterilized differently?
A. Yes. We have two sterilization units – one uses steam and the other uses chemicals. The material from which an instrument is made and the type of instrument determines how it is sterilized.

Q. What mechanisms let you know that sterility has been achieved?
A. There are specific, universal standards for temperature, duration of the cleaning cycle and pressure to be maintained in sterilization units during each sterilization run. Each batch of instruments is held at or above 250 degrees Fahrenheit for 20 minutes under 10-15 pounds of pressure. The chemical sterilizer uses a sterilizing agent. In addition, both units have a computer which constantly monitors these parameters and provides an alert if the cycle is interrupted in any way so that it can be repeated.

We also do both chemical and biological backup monitoring. Biological monitoring is done for both the steam and the chemical units. It involves placing a strip or a vial containing an organism into the unit during each cycle. When the sterilizer run is finished, we incubate that strip or vial to make sure that all germs have been killed. Chemical monitoring for the chemical unit means using test strips to assure that a specific degree of contact is maintained between the instruments and the cleaning chemical(s).

Q. Does YUHS use any disposable medical instruments?
A. All hypodermic needles are disposable (“single use”) and we use some disposable scalpels and suture sets. Most of our reusable instruments are made of a special German stainless steel.

Q. Where is the sterilization procedure done?
A. We have a state of the art central sterile supply department located on the 5th floor. All items needing to be sterilized are transported in special holding containers from the clinical departments to this area, which has a controlled air flow to eliminate chemical fumes and keep germs out. The department is staffed by two specialized technicians who follow specific standardized procedures and monitor every sterilization run. There are usually ten or twelve runs a day.
Treatment of allergic conditions may involve oral or topical medications. For some individuals, allergen immunotherapy ("allergy shots") is recommended. This process consists of a series of injections of gradually increasing doses of the allergen(s), with the goal of reducing the immunologic reactivity to the allergenic stimulus. The process takes approximately two to three years.

It is also possible to prevent or minimize allergic reactions by reducing or eliminating exposure once the allergen has been correctly identified. While it may be relatively easy to avoid wearing a certain fabric or eating a certain food (although some food allergens are used as ingredients in numerous products, making avoidance problematic), minimizing exposure to airborne allergens, both indoor and outdoor may require a range of lifestyle changes (see sidebar).

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**The Right Care**

need it. What kind of therapy will they need afterwards? Will someone in their household need training? Will they need home care or rehab? Will they need durable medical equipment? Will their living quarters need to be modified in any way? Will any medication be needed and how will it be administered? The primary care clinician is always the person to turn to for answers to medical questions. We are here to help the patient move smoothly through the system, getting the right care at the right time."

Both Foell and Madeux note the complexity of modern health care. This complexity is both medical and systemic. That is, there are more treatment options than ever available for many conditions, and the delivery system itself has grown more complicated. Because of this inherent complexity, it is particularly important, Madeux notes, that YHP's care coordination services be "very proactive." That philosophy means that a YHP patient who has gone home after being hospitalized is likely to get a phone call saying "How is everything going?" As Foell notes, "If you are struggling at home we want to know about it and change what isn't working. That's part of your care."

Being proactive also means identifying members with chronic conditions such as diabetes which, as Madeux says, "require a lot of diligence on the patient's part to manage the problem," and making sure they have what they need to keep them healthy — whether that is checking to see if they need additional help with dietary changes or calling with a reminder to get a diabetic eye exam.

"We really do go looking for trouble," Foell says, only partly joking. Madeux adds, that what this system is about can be summed up as: "We go looking so that trouble can be avoided."
Some interesting websites featuring memory:

www.exploratorium.edu/memory/
Based on a recent exhibit at the Exploratorium in San Francisco, this site contains links to memory-related games, ideas and scientific information for children and adults.

www.demon.co.uk/mindtool/memory.html
Features memory techniques and mnemonic devices.

www.premiumhealth.com/memory/
Dedicated to helping people improve their memories

www.infinitemind.org/
The site of the weekly public radio show “The Infinite Mind,” which explores a wide range of topics related to the human mind

www.epub.org.br/cm/n01/memo/memory.htm

The Jester is coming to town

In David Saltzman’s best-selling children’s book, The Jester Has Lost His Jingle, the Jester awakes one morning to find laughter missing from the kingdom. He and his helper Pharley set out to find it and in the process discover lessons of hope, humor and strength. Saltzman wrote and illustrated the book while he was a senior at Yale. Since Saltzman died of Hodgkin’s disease in 1990 at the age of 23, the book has become part of a program to enhance the emotional well-being of children with serious illnesses and other special needs. The books, videos and other materials on the Jester & Pharley Smile Cart entertain and support children too ill to leave their rooms.

Yale New Haven Children’s Hospital is the first hospital to receive this cart, which is named in honor of Molly Meyer, ANP, APRN, a nurse practitioner at YUHS. Meyer has cared for generations of Yale students, including David Salzman, and was presented two years ago with the American Cancer Society’s Excellence in Caring Award. For more on the Jester, log on to www.thejester.org

Forms for kids

Many camps require a physical exam within the previous 12 months for a child to enroll. If you know your child will be attending camp, please schedule these exams three to four months in advance so we may update the information. Many sports programs have similar requirements. While the Pediatrics Department tries to have the forms completed within one week, the bulk of our forms come in during the summer and it may take up to two or three weeks to complete them at that time. Please include with each form: the child’s name and address; your daytime phone number; how you want the forms returned to you; and when you need them.

Continuing education

Several members of the YUHS staff are offering health-related programs through the Human Resources Learning Center. Recent topics have included managing stress and the empty nest. For more information see the Human Resources - Learning Center web site; see the listing under “personal development courses.” (www.yale.edu/learningcenter)
**Love your body**

Body image is the mental picture a person has of their body, as well as their thoughts, feelings, judgments, sensations and behavior. A healthy body image occurs when a person’s feelings about his/her body are positive, confident, and caring. A negative body image is directly related to poor self esteem.

Everywhere we look – magazine ads, billboards, movies, television – a “one size fits all” image of youth and thinness is presented as the perfect body. This image is representative of less than 1% of the population. It is important to remember that the primary purpose of these media images is to sell products, not to reflect reality, improve our health or boost self-esteem. Instead of relying on media hype, consider these guidelines to help you work toward a more positive body image:

- Be realistic about your size based on your family tree. Although eating habits and exercise do play a role in weight, there is a also a significant genetic component to our weight as well as to our height.
- Exercise regularly in a way that you can enjoy. Set fitness goals (more blocks walked, more laps swum, more stairs climbed) and let yourself feel good for attaining them. Measure success this way rather than by the scale.
- Expect normal weekly and monthly changes in weight and shape (especially true for women).
- Ask for support and encouragement from family and friends.
- Work towards self acceptance. Decide how you want to spend your energy – pursuing the media image of the “perfect body” or enjoying your life and a variety of activities.

**Shut out the noise**

Jackhammers, power lawn mowers, the neighbor’s three dogs who never develop laryngitis even though they bark ceaselessly — unwelcome noise is all around us. While moderate levels of pleasant sound, such as music we like, can soothe us and even energize us, exposure to persistent loud noise can cause temporary or permanent hearing loss. Exposure to loud noises can produce anxiety, anger and sleep disruption. Noises of over 85 decibels can harm hearing over time.

A snowblower produces a noise level of about 105 decibels, while a power saw produces about 110 and a personal cassette player turned up high can produce 112 decibels. And extremely loud noises (over 140 decibels) can result in hearing damage with just one exposure.

Common examples: balloons popping (157 decibels); new car stereos turned up all the way (140 decibels); firecrackers at three feet (62 decibels).

Because hearing loss from noise exposure is often gradual, it is important to note the warning signs. These include: ringing or buzzing in the ears immediately after noise exposure; difficulty in understanding speech; having the sense that voices around you seem muffled; difficulty with distinguishing one word from another; missing words or missing punch lines of stories.

To protect your hearing, minimize noise exposure. In addition to turning down the volume of television, radio and music, you can also: run your lawn mower or leaf blower at half-throttle; wear ear protection when operating noisy equipment or when in the vicinity of someone else who is; don’t run several loud appliances at the same time. Good information about hearing loss and hearing protection can be found at www.hearingconservation.org.

**Jim Laspino, RPh**, joined the staff of the YUHS Pharmacy this past March 2001. A graduate of the UConn School of Pharmacy, with experience in a variety of settings, he has a particular interest in patient education and outpatient home care. Most recently, he was a staff pharmacist at a high volume retail pharmacy in Cheshire as well as an on-site pharmacist at the Masonic Geriatric Health Care Center in Wallingford.


**YHP 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. Members can enroll in a 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.

**Early Pregnancy Classes**
Held on the 2nd Wednesday of each month from 10:30–11:30 in room 405 for yhp members. To register, call the ObGyn Department at 203-432-0222 or stop by the appointment desk. We encourage you to bring a supportive person.

**HIV+ Peer Support Group**
Meets one evening a month at YUHS. For more information, contact Debra Boltas, Ph.D. at 203-432-0290.

**Blood Pressure Checks**
Tuesdays and Thursdays from 9:00–11:00 in room 406. Open to the Yale community free of charge, by referral or on a walk-in basis. For info, call 203-432-0093.

**Post-partum Reunions**
Held on the 3rd Friday of each month from 10:00–11:30 in room 405. Bring your new babies to this great support network for all new moms! Conducted by Wendy Madore, RNC. Call the ObGyn Dept. (203-432-0222) to register.

Wondering whether you should get the pneumovax, which protects against pneumonia? While you should check with your clinician, the general guidelines are that the vaccine should be taken by those in the following categories:

- anyone over 62
- adults with chronic heart, lung, liver or kidney disease
- adults with diabetes
- adults with compromised immune systems due to long term steroid or chemotherapy treatments.

You may obtain the vaccine at the walk-in clinics held in YHP’s Immunization Department on the 4th floor. Hours are 8:30-4:30 every weekday except Tuesday.