

Healthy Foundations

Spring 2007

TO YOUR HEALTH

10 Ways to Snack Guilt-Free

Whether it happens at the same time every afternoon or in the middle of the night, most Americans snack about as often as they eat regular meals. According to the International Deli-Dairy-Bakery Association, 90 percent of us indulge in a snack on any given day, while only 75 percent eat breakfast and 88 percent eat lunch.

But contrary to traditional thinking, snacking isn't bad for you, and it actually serves a biological need. It fuels your body and maintains energy, blood and appetite levels.

Choosing the right snack, however, is important. Don't reach for that candy bar; instead, choose one of the following for smart snacking.

Pomegranate juice

Why: High in natural nutrients and also very high in antioxidants — both good for replenishing.

Eggs

Why: High in protein and you can have them for any meal.

Hummus

Why: It's "in," and it's a good source of lean protein, fiber and essential oils.

Nuts

Why: Good source of protein and monounsaturated fats, and can be stored in your desk drawer. The healthiest nuts are walnuts and almonds because they pack the most omega-3s and monounsaturated fat. Mix the two types of nuts with cashews and peanuts to give them a better taste. Important: If you have or suspect you have an allergy to peanuts or other nuts, avoid them and contact your allergist or healthcare provider for more information.

Oatmeal

Why: Warm, comforting, and packed with fiber and nutrients.

Low-fat mozzarella cheese sticks

Why: Lean source of protein and carbohydrates, with the added bonus of being fun to eat.

Peanut/Almond butter

Why: Choose all-natural peanut butter for tasty protein for both kids and mom.

Low-fat yogurt

Why: A stylish, sweet and tasty way to snack and watch calories.

Meal replacement bars

Why: Protein, fiber and nutrients to go. Don't eat a whole bar if the intention is to have it as a snack because it may contain more calories than needed.

Edamame (soybean)

Why: A plant-based way to get protein and essential nutrients. Edamame or soybean is not only tasty, but the only vegetable containing all nine essential amino acids. And it contains isoflavones essential for proper bodily function.

Cola Raises Women's Risk of Osteoporosis

If you are a woman who is concerned about thinning bones, think about limiting the amount of cola you drink. According to a recent report in the *American Journal of Clinical Nutrition*, drinking three or more regular or diet cola soft drinks daily is associated with lower bone mineral density in the hip.

About 55 percent of Americans, mostly women, are at risk for developing osteoporosis, according to the National Osteoporosis Foundation. Lower bone density can lead to osteoporosis, which, in turn, can cause bone fractures. And, complications from hip fractures are a common cause of disability — and even death — in women as they age.

The association was not seen in men, and it was not seen in women who regularly drank non-cola soft drinks. The potentially harmful effect was less, however, for decaffeinated cola.

What's in Your Brew?

Ever wonder how many calories are in that morning cup of java? A plain cup of brewed coffee has zero fat and only a couple of calories. But coffee has gone beyond basic black. You can choose from plain, flavored, whipped, topped, iced and even frozen varieties.

So it's how you "dress up" your coffee that can make a difference in its fat, sugar and calorie count. Here's a helpful calorie guideline for your favorite blend, whether you make it yourself or sip at your favorite coffee bar:

Coffee extras	Serving size	Fat (grams)	Carbs (grams)	Calories
Cream	1 tablespoon	6	0	50
Half-and-half	1 tablespoon	2	0	20
Plain nondairy creamer (liquid)	1 tablespoon	1.5	2	20
Plain, light nondairy creamer (liquid)	1 tablespoon	0.5	2	10
Flavored nondairy creamer (liquid)	1 tablespoon	2	2	40

Flavored, reduced-fat nondairy creamer (liquid)	1 tablespoon	0	5	20
Plain nondairy creamer (powder)	1 tablespoon	2	3	30
Plain, light nondairy creamer (powder)	1 tablespoon	1	4	25
Flavored nondairy creamer (powder)	1 tablespoon	2.5	7	50
Flavored, reduced-fat nondairy creamer (powder)	1 tablespoon	0	8	38
Whole milk	1 tablespoon	0.5	1	10
Fat-free milk	1 tablespoon	0	1	5
Sugar	1 teaspoon	0	4	15
Flavored syrup	2 tablespoons	0	20	80

Note: Values shown are an average of several brands.

What goes into the brew you buy at your local coffee bar also matters. For example, here's how adding milk affects the calories, fat and carbohydrate content of a 16-ounce cup of latte at Starbucks, a popular coffee franchise.

Starbucks caffe latte espresso (16 ounces)	Fat	Carbs	Calories
Whole milk	14 grams	21 grams	260
Fat-free milk	0 grams	24 grams	160

Source: *MayoClinic.com*; www.starbucks.com

PHARMACY CORNER

Doctors to Patients: Take All Your Medicine — Or Else

Many patients stop taking their medicine far sooner than they should. And that decision could be a deadly one when the drugs treat heart disease or diabetes.

Heart Attack Patients

One month after being released from the hospital, one out of eight heart attack patients quit taking the lifesaving drugs prescribed to them, according to a study in the *Archives of Internal Medicine* of 1,521 patients. And, those patients who stopped taking three drugs — aspirin, beta blockers and statins — were three times more likely to die during the next year than patients who stayed on the pills.

While the study didn't explain why people stopped taking their medication, it did note that those who quit were more likely to be older, single and less educated.

Diabetes Patients

Another study took a look at medical records of 11,532 diabetes patients and found that those who didn't take their drugs — hypoglycemics, blood pressure drugs and statins —

had higher rates of hospitalization and death. Two additional studies on patients who stopped taking their medication found that cost prevents many Medicare beneficiaries from taking their pills, and that healthcare providers often fail to explain the basics about new drugs.

The moral of the story: Talk to your healthcare provider before discontinuing any medications – it may mean the difference between life and death.

What to Ask Your Healthcare Provider When Getting a Prescription

Understanding the importance a prescription drug plays in your treatment will help you get the most out of your prescription. It's important to take an active role in your healthcare by working with your healthcare provider, nurse and pharmacist to learn as much as possible about any drugs prescribed by your healthcare provider.

The U.S. Agency for Healthcare Research and Quality recommends asking these questions when you are prescribed a new drug:

- What is the name of the drug?
- What is it supposed to do?
- Is it okay to substitute a less-expensive generic drug for the brand-name version? Will it achieve the same effect?
- What is the drug's dosage?
- Are there activities, foods, drinks, other drugs, including over-the-counter drugs or supplements, I should avoid while taking this drug?
- What are the possible side effects? What should I do if they occur?
- How many refills of this prescription can I receive?
- What should I do if I miss a dose?
- What should I do if I accidentally take more than the recommended dose?
- Is there written information I can take home? (Most pharmacies have information sheets you can use as an at-home reference.)

And the AARP offers the following tip: Ask your healthcare provider to write on your prescription form the reason for your drug, and the brand and generic names of your drug. This helps the pharmacist ensure you receive the correct drug.

SAFETY FIRST

Keeping Baby Safe While Driving

When you secure your baby in a car seat you expect the seat to keep your little one as safe as possible. But for those who may have seen the *Consumer Reports* infant seat safety report and its subsequent recall, you may be confused about what to do.

The Consumers Union, publisher of *Consumers Reports*, urges parents to remember that use of any child seat is safer than no child seat at all. To that end, Consumers Union

offers the following car seat rules of thumb to help keep your baby safe while traveling:

- **The safest place for a car seat is in your vehicle's center-rear seat.** Keep a car seat in a rear-facing position until your infant is at least one year old *and* 20 pounds (and longer, if the seat's manual says it can hold children at a higher weight and height). The seat should recline at an optimum 45-degree angle.
- **Check the fit of any car seat** in your own car to ensure it's easy to use before you buy it. And, if you're buying a new car, take your child seats with you to ensure they fit properly.
- **Don't forget to use the top tether when installing your car seat.** The top tether greatly improves crash protection, according to the *Consumer Reports* tests.
- **When possible, buy new.** Second-hand seats may have been recalled or involved in a crash. Don't accept hand-me-downs with unknown histories or car seats that are more than six years old. Check for recalled models at www.nhtsa.gov.
- **Carefully read the owner's manuals** for both your car seat and your car to determine how to properly install the seat.
- **Harness straps** in a rear-facing car seat should be at or slightly below your child's shoulders. For front-facing toddlers, harness straps should be at or slightly above the toddler's shoulders. If a harness is properly snug, you should not be able to insert more than one of your fingers behind it.
- **Send in your car seat's registration card** so the manufacturer can let you know about any recalls.
- **Have your car seat checked** by a certified child passenger safety technician once it's installed. You can find free car seat inspection stations at www.nhtsa.gov, by calling 866.732.8243, or by contacting your local hospital, police or fire department.
- **When the seat is installed**, try shifting it from side to side and back to front. It shouldn't move more than an inch. If it slips on the car upholstery, especially leather seats, put a plastic mesh shelf liner under the seat for more grip.
- **Replace a car seat** that has been involved in even a minor crash.
- **Protect older children.** Children should be in a booster seat until they can sit in a vehicle's rear seat with their back comfortably against the backrest, their knees bent comfortably over the edge, with the vehicle shoulder belt crossing mid-chest and the lap belt snug across the top of their thighs.

The Air in There

The air in your home and other buildings can be more polluted than outdoor air, according to the U.S. Environmental Protection Agency. Luckily, unlike many forms of pollution, indoor air pollution is relatively easy to correct, which is a good thing since research indicates people spend approximately 90 percent of their time indoors.

Some common sources of indoor air pollution include:

- New carpet
- Paint

- Mold and mildew buildup, particularly in ventilation systems
- Tobacco smoke
- Restroom air fresheners
- Chemicals emitted by copying machines
- Formaldehyde and other chemicals that seep out of pressed-wood products like particleboard, plywood paneling and fiberboard.

To keep your air as fresh as possible, consider these tips:

- **Circulate the air.** Wherever possible, select offices with windows that open – and crack them open every now and then. If you install new carpeting or cabinets, open windows and turn on fans until the new smells dissipate. Make sure copy machines and other equipment are located in rooms with proper ventilation.
- **Consider the alternatives.** Many chemical-sensitive consumers opt for carpet made from wool or cotton rather than synthetic fibers. You can also choose cabinets made from solid wood finished with water-based varnishes rather than those constructed from particleboard or fiberboard.
- **Keep it clean.** Rather than use synthetic air fresheners to mask unpleasant odors, find the source of the odor, and clean it up. Then, open the windows for fresh air, or use flowers or potpourri to add a more natural scent to your room. If necessary, install air filters, purifiers and other air cleaning devices.
- **Ask smokers to smoke outside.** It is not unreasonable to ask visitors in your home to take a smoking break outside. Many offices have smoking policies that minimize nonsmoker exposure to environmental tobacco smoke. If yours doesn't, broach the topic with your office manager.
- **Speak up.** If you or others at your office are experiencing health or comfort problems you suspect may be caused by indoor air pollution, discuss the issue with your supervisor. Talk with your own healthcare provider, and report your problems to the company physician, nurse or health officer so they can make appropriate recommendations.
- **Buy a plant.** According to a two-year study by NASA, many indoor plants absorb air pollutants through their leaves and roots and convert them into breathable air. Within 24 hours, some plants can remove up to 87 percent of toxic indoor air.

THE ALTERNATIVE

The Benefits of Massage Therapy

Massage therapy is one of the oldest healing arts. Chinese records dating back 3,000 years document its use. The ancient Hindus, Persians and Egyptians applied forms of massage for many ailments, and Hippocrates wrote papers recommending the use of rubbing and friction for joint and circulatory problems.

Today, massage is growing in popularity and the benefits are far-reaching. Massage therapy has been shown to be effective in reducing stress, and in managing and relieving pain. Americans most often choose to get a massage for medical reasons, relaxation and

stress relief. According to the American Massage Therapy Association's (AMTA) 2005 Consumer Survey, 34 percent of adult Americans received a massage within the past five years, and between August 2004 and July 2005, 47 million adult Americans received a massage — two million more than in the previous year.

So What Is Massage Therapy?

Massage, bodywork and somatic therapies are defined as the application of various techniques to the muscular structure and soft tissues of the human body. Massage therapy addresses a variety of health conditions, the most prevalent being stress-related tension, which, experts believe, accounts for 80 to 90 percent of disease.

Massage has been proven beneficial in treating:

- Cancer-related fatigue
- Sleep disorders
- High blood pressure
- Diabetes
- Low back pain
- Immunity suppression
- Spinal cord injury
- Autism
- Post-operative surgery
- Age-related disorders
- Infertility
- Eating disorders
- Smoking cessation
- Depression
- And more!

Massage and bodywork can help:

- Release chronic muscular tension and pain
- Improve circulation
- Increase joint flexibility
- Reduce mental and physical fatigue and stress
- Promote faster healing of injured muscular tissue
- Improve posture
- Reduce blood pressure
- Promote better sleep
- Improve concentration
- Reduce anxiety
- Create an overall sense of well-being

Treating the Spirit

Massage also provides another therapeutic component largely absent today: tactile

Massage and Healthcare

- **21 percent** of adult Americans discussed massage therapy with their healthcare provider, up from 14 percent in 2002, according to AMTA's 2005 Consumer Survey.
- **32 percent** of adult Americans who received a massage in the past five years did so for medical purposes, including muscle soreness and spasm, injury recovery and rehabilitation, and pain relief.
- **60 percent** of those discussing massage therapy said a physician recommended massage therapy to them, followed at 50 percent by a physical therapist and 38 percent by a chiropractor.
- **82 percent** of hospitals offering CAM (complementary and alternative medicine) therapies include massage therapy in their healthcare offerings. Of those hospitals, 70 percent use massage therapy for pain management and pain relief.

stimulation, or, more simply, touch. In 1986, the Touch Research Institute at the University of Miami published groundbreaking research on the effects of massage on premature babies. The preterm babies who received massage therapy showed 47 percent greater weight gain and six-day shorter hospital stays than the infants who were not receiving massage.

There are more than 200 variations of massage, bodywork and somatic therapies and many practitioners use multiple techniques. The application of these techniques may include, but is not limited to, stroking, kneading, tapping, compression, vibration, rocking, friction and pressure to the muscular structure or soft tissues of the human body. The use of oils, lotions and powders may also be included to reduce friction on the skin.

While generally deemed safe, your massage therapist should ask you about your specific health conditions to determine if massage, bodywork or somatic therapies are a good idea for you. In some cases, the therapist may need your healthcare provider's permission before providing services.

Source: MassageTherapy.com

High Heels Backache

High heels, a fashion statement for many women, can injure the feet, ankles, calves, knees and back. The higher the heel, the greater your risk of falling, spraining a muscle, and other types of injury, according to Yale-New Haven Hospital.

The American Academy of Orthopedic Surgeons (AAOS) says those aren't the only risks of high heels. They can also pinch your feet or toes, perhaps causing permanent injury. The AAOS recommends wearing shoes with no or low heels. You should also be sure that shoes aren't too tight or too loose.

Source: HealthDay News

FOR YOUR BENEFIT - MEMBERS

What's the best hospital for you?

Compare Them With *Hospital Comparison*

Selecting the best hospital for your specific needs can sometimes feel daunting. But, Starmark makes it easy with our new Healthy Foundations Hospital Comparison decision support tool.

Simply log on to Starmark's website at any time to access the Hospital Comparison tool. According to the criteria you set, the tool provides you with comparisons by procedure or type of care based on the hospital's experience with the type of treatment.

Hospital Comparison provides you with relevant, accurate, easy-to-understand information to help you make smart decisions about your healthcare:

- **Find and compare** information about more than 100 common conditions and the frequency and quality of procedures performed at more than 5,000 hospitals.
- **Tailor your comparison** based on the specific health and demographic data you enter to view customized healthcare recommendations, including quality reports on hospital performances.

To learn more about all Healthy Foundations has to offer, view the online demo in the Visitor section of Starmark's website at www.starmarkinc.com. Or, log in today to start using these helpful decision-making tools.

Seven Ways to Get the Most Out of Your Insurance Benefits

Understanding your health plan and how it works can be intimidating and confusing. Often we think to ourselves: There has to be a better way to work through the healthcare and insurance systems. Well, there is. Follow the seven steps below to get the most out of your experience:

1. Ask basic questions about your healthcare coverage *before* you need to use it.

Review the plan booklet you received from your employer.

Result: You'll have a better understanding of the benefits to which you're entitled.

2. Understand the type of plan you have. Is it an indemnity plan? A PPO plan? Is it paired with an HSA or an HRA?

Result: The type of plan you have will determine how your insurance benefits work. If you understand your plan benefits, you'll be able to better control your out-of-pocket costs.

For example, an indemnity plan offers one level of coverage for *any* provider you visit (e.g., 80 percent). A PPO plan, on the other hand, uses a *network* of providers who have agreed to provide you services at a discounted rate. If you visit a physician outside this network, you have to pay a higher percentage for those services (e.g., services from a PPO network provider may have a \$500 deductible with 90 percent coverage, while services from a non-PPO network provider may have a \$1,000 deductible with only 70 percent coverage).

3. If you have a PPO plan, verify your healthcare provider is in your network *before* your first visit. Many networks, such as PHCS, have a website that lists those providers within the network. Additionally, you can call your PPO network using the phone number on the back of your medical ID card.

Result: Selecting a healthcare provider within your network will enable you to get the most out of your plan, while paying the least.

4. If your healthcare provider refers you to another provider, verify he or she is also part of your PPO network.

Result: This will ensure you receive the appropriate discounted rates and are able to take full advantage of the benefits to which you are entitled.

- 5. Contact Starmark Customer Service at 800.522.1246, option 7, to get a broad overview of your plan.** A customer service representative will be more than happy to answer any questions you may have about expenses you may incur, your deductibles, general benefits and services that may need to be precertified.
Result: The more comfortable you are with your plan, the easier it will be to navigate the healthcare and insurance systems.
- 6. Contact Starmark Customer Service at 800.522.1246, option 7, if you have questions about an explanation of benefits (EOB) you receive.**
Result: Better understanding of your EOB will help you make the proper healthcare choices moving forward.
- 7. Access any covered family member's medical claim and eligibility information through Starmark's website at www.starmarkinc.com.** Select Member -- Medical Claims/Eligibility from the home page.
Result: This tool will enable you to keep track of your family's medical claims and expenses throughout the year.

Health Groups Release New Immunization Schedules

Children and adolescents can now be protected against more diseases than ever before, according to the 2007 Childhood and Adolescent Immunization Schedules released jointly by the Centers for Disease Control and Prevention (CDC), the American Academy of Pediatrics (AAP), and the American Academy of Family Physicians (AAFP).

The 2007 schedules include new immunization recommendations for rotavirus, human papillomavirus (HPV), varicella (chickenpox) and childhood influenza. For the first time, the recommended childhood and adolescent immunization schedule is divided into two schedules: one for children from birth to 6 years of age and a second for those 7 to 18 years of age.

Changes

2, 4 and 6 months

Receive the oral rotavirus vaccine. Rotavirus is a virus that causes severe diarrhea in babies and young children.

4 years to 6 years

Receive a second dose of varicella (chickenpox) vaccine to further protect against the disease. The first dose is recommended at 12 to 15 months of age. Older children, adolescents and adults should also receive a catch-up second dose if they previously had received only one dose.

6 months to 5 years

Receive the influenza vaccination (includes household contacts and caregivers for these children). The previous recommendation was for children 6 months through 23 months. Now children from 6 months through 59 months are recommended for annual influenza vaccination.

Girls 11 to 12 years

Receive a three-dose series of human papillomavirus (HPV) vaccine, with the second dose two months after the first dose and the third dose at least four months after the second dose. The recommendation also allows for vaccination of girls beginning at nine years old as well as vaccination of girls and women 13 to 26 years old. HPV is the leading cause of cervical cancer in women.

The Centers for Disease Control recommends vaccinations at the following intervals:

2007 Recommended Childhood and Adolescent Immunization Schedule:

Child's Age	Vaccine and Dose	Protects Against
At birth	Hepatitis B Dose 1 of 3	Hepatitis B virus (chronic inflammation of the liver, lifelong complications)
1 to 2 months	Hepatitis B Dose 2 of 3	
2 months (part of well-baby visit)	DTaP Dose 1 of 5	Diphtheria, tetanus and whooping cough
	HiB Dose 1 of 4	Infections of the blood, brain joints or lungs (pneumonia)
	Polio (IPV) Dose 1 of 4	Polio
	Pneumococcal conjugate (PCV) Dose 1 of 4	Infections of the blood, brain joints or inner ears
4 months (part of well-baby visit)	Rotavirus Dose 1 of 3	Rotavirus diarrhea (and vomiting)
	DTaP Dose 2 of 5	Diphtheria, tetanus and whooping cough
	HiB Dose 2 of 4	Infections of the blood, brain joints or lungs (pneumonia)
	Polio (IPV) Dose 2 of 4	Polio
	Pneumococcal conjugate (PCV) Dose 2 of 4	Infections of the blood, brain joints or inner ears

	Rotavirus Dose 2 of 3	Rotavirus diarrhea (and vomiting)
6 months (part of well-baby visit)	DTaP Dose 3 of 5	Diphtheria, tetanus and whooping cough
	HiB Dose 3 of 4	Infections of the blood, brain joints or lungs (pneumonia)
	Pneumococcal conjugate (PCV) Dose 3 of 4	Infections of the blood, brain joints or inner ears
	Rotavirus Dose 3 of 3	Rotavirus diarrhea (and vomiting)
6 to 18 months	Hepatitis B Dose 3 of 3	Hepatitis B (chronic inflammation of the liver, lifelong complications)
	Polio (IPV) Dose 3 of 4	Polio
6 month or older	Influenza Yearly	Flu and complications
12 to 15 months	HiB Dose 4 of 4	Infections of the blood, brain joints or lungs (pneumonia)
	Pneumococcal conjugate (PCV) Dose 4 of 4	Infections of the blood, brain joints or inner ears
	MMR Dose 1 of 2	Measles, mumps and rubella (German Measles)
	Varicella Dose 1 of 2	Chickenpox
12 to 23 months	Hepatitis A Dose 1 of 2	Hepatitis A virus (inflammation of the liver)
15 to 18 months	DTaP Dose 4 of 5	Diphtheria, tetanus and whooping cough

18 months or older	Hepatitis A Dose 2 of 2 (follows six months after Dose 1)	Hepatitis A virus (inflammation of the liver)
4 to 6 years	DTaP Dose 5 of 5	Diphtheria, tetanus and whooping cough
	Polio (IPV) Dose 4 of 4	Polio
	MMR Dose 2 of 2	Measles, mumps and rubella (German Measles)
	Varicella Dose 2 of 2	Chickenpox
11 to 12 years	DTaP	Diphtheria, tetanus and whooping cough
	MCV4 Dose 1	Meningococcal conjugate vaccine
	HPV Dose 1 of 3	Human papillomavirus (females only)
	HPV Dose 2 of 3 (follows two months after Dose 1)	Human papillomavirus (females only)
13 to 18 years	HPV Dose 3 of 3 (follows four months after Dose 2)	Human papillomavirus (females only)
	MCV4 Dose 1	Meningococcal conjugate vaccine

Additional vaccines: Consult your child's physician about catch-up vaccinations, and vaccines for travelers and those in high-risk groups.

April Is National Donate Life Month

Each day in America, about 77 people receive organ transplants. However, another 19 people die each day waiting for transplants due to a shortage of donated organs.

Right now, more than 92,000 people are waiting for the gift of life. Every 12 minutes another name is added to the national transplant waiting list. One donor can save or enhance the lives of more than 25 people. You can make a difference by becoming an organ donor.

National Donate Life Month is dedicated to help raise awareness of the important need for organ and tissue donors in communities throughout the country. During this month, citizens are encouraged to sign an organ and tissue donor card and to be screened for bone marrow donation.

While donated organs and tissue are shared at the national level, the laws that govern donation vary from state to state. To learn how you can become an organ or tissue donor in your state, visit <http://www.donatelife.net> or www.organdonor.gov.