

The NALC Health Benefit



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HBR Report



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May / June 2014

**Remember
Our Veterans**

Memorial Day

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Director's Report



Take Care of Yourself

There are many ways we can take better care of ourselves like eating healthier, exercising more, wearing sunscreen, reducing stress and quitting smoking. It can be overwhelming, so take one small step at a time. Before you know it all of the little steps will add up to a healthier you. The table below includes reminders and goals to keep us healthy.

Smoking	Goal: Quit for good
Smoking is the leading preventable cause of death and disability in the United States. Cigarette smoking results in a much higher risk of dying of coronary heart disease. Smoking robs the heart of oxygen-rich blood and increases the effects of other risk factors, including blood pressure, blood cholesterol levels and physical inactivity.	
Blood Pressure	Goal: Less than 120/80 mm Hg OR Less than 130/80 mm Hg if you have diabetes or chronic kidney disease
Optimal blood pressure is less than 120/80 mm Hg (systolic pressure is 120 AND diastolic pressure is less than 80). Prehypertension is systolic pressure from 120-139 systolic OR diastolic pressure from 80-89. High blood pressure is systolic pressure of 140 or higher OR diastolic pressure of 90 or higher.	
When blood pressure is higher, your heart has to work harder. Changes in health habits such as losing weight, eating less sodium (salt) and enjoying regular physical activity can help lower blood pressure. If you have high blood pressure, staying on your medicines is critical to prevent heart attacks, strokes, kidney disease and heart failure. Monitor your blood pressure as your doctor advises. Keep track of your readings.	
Blood Cholesterol	Goal: Total cholesterol less than 180 mg/dL
High blood cholesterol occurs if your body makes too much cholesterol or if you eat foods that have too much saturated fat and trans fat. For patients with coronary heart disease that are at high risk, treatment focuses on reducing cholesterol. To lower your cholesterol, you may need to change your eating habits and lose weight. Speak with your doctor to see if you should be taking a cholesterol medicine along with making these lifestyle changes.	
Physical Activity	Goal: At least 10 minutes of moderate-intensity physical activity (brisk walking, jogging, cycling, etc.) at least 3 to 4 days per week
Regular physical activity has many benefits such as helping you quit smoking, lose weight, reduce stress, lower blood pressure and increase HDL cholesterol. Doing aerobic exercise — using large muscles of the legs and arms — helps your heart work more efficiently. Physical activities to improve your strength, flexibility and balance help you stay agile as you age.	
Doing activity that requires moderate effort is safe for most people. But if you have a chronic health condition such as heart disease, arthritis, diabetes, or other symptoms be sure to talk with your doctor about the types and amounts of physical activity that are right for you.	
Weight	Goal: Ideal body mass index (BMI) is 18.5–24.9 kg/m ²
Waist circumference not more than 40 inches for men and not more than 35 inches for women (Recommendations are lower for people of Asian descent: 37–39 inches for men and 31–35 inches for women.). A 10-pound weight loss may help lower your blood pressure and improve both cholesterol and blood sugar.	
Blood sugar (glucose)	Goal: Normal fasting blood glucose of less than 100 mg/dL
Diabetes	Goal: If you are diabetic, a HbA1c (glycosylated hemoglobin) at or below 6.5 to 7 percent
Managing diabetes is important to your long-term health, especially if you have heart disease. Diabetes is best controlled by diet, weight loss, physical activity, medicines and regular monitoring of your blood sugar. Many studies have shown that medicines such as statins, aspirin, ACE-inhibitors and beta-blockers, which lower the risk of future heart problems, have even greater benefit in people with diabetes. That's why it's important for you to start and continue taking these medicines. They will help to lower your cholesterol and blood pressure, which will decrease your risk of heart attack, stroke and kidney disease.	

Quit for Life



On May 31, tobacco users around the world will come together to celebrate **World No Tobacco Day** by going just one day without tobacco. But why stop at one day? This year, make every day a no tobacco day with the Quit For Life® Program – offered at **no cost** through the NALC Health Benefit Plan. When you enroll, a trained Quit Coach® will help you create a customized plan to help you say “no” to tobacco for the rest of your life. The program also includes free nicotine replacement therapy.

1.866.QUIT.4.LIFE | www.quitnow.net/nalc
(1.866.784.8454)



The Quit For Life® Program is brought to you by the American Cancer Society® and Alere Wellbeing. The two organizations have 35 years of combined experience in tobacco cessation coaching and have helped more than 2 million tobacco users. Together they will help millions more make a plan to quit, realizing the American Cancer Society's mission to save lives and create a world with more birthdays.

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What's in Season?

Wondering what's in season at your farmers' market? What seasonal fruits and vegetables should you be picking up at the grocery store? Here is a list to help you create delicious and nutritious meals for you and your family.



<i>Winter</i>		
Apples	Grapefruit	Pears
Brussel Sprouts	Kale	Potatoes
Bananas	Lemons	Pumpkins
Beets	Onions and Leeks	Rutabagas
Cabbage	Oranges	Sweet Potatoes (Yams)
Carrots	Parsnips	Turnips
Celery	Pineapple	Winter Squash
<i>Spring</i>		
Apples	Collard Greens	Pineapple
Apricots	Garlic	Radishes
Asparagus	Greens (cooking)	Rhubarb
Bananas	Lettuce	Spinach
Broccoli	Mushrooms	Strawberries
Cabbage	Onions and Leeks	Swiss Chard
Carrots	Peas	Turnips
Celery		
<i>Summer</i>		
Apples	Collard Greens	Nectarines
Apricots	Corn	Okra
Bananas	Cucumbers	Peaches
Beets	Eggplant	Plums
Bell Peppers	Garlic	Raspberries
Blackberries	Green Beans	Strawberries
Blueberries	Honeydew Melon	Summer Squash
Carrots	Kiwi	Tomatillos
Cantaloupe	Lima Beans	Tomatoes
Celery	Mango	Watermelon
Cherries		

Fall

Apples	Garlic	Pears
Bananas	Ginger	Pineapple
Beets	Grapes	Potatoes
Bell Peppers	Greens (cooking)	Pumpkins
Broccoli	Green Beans/Beans	Radishes
Brussel Sprouts	Kale	Raspberries
Cabbage	Lettuce	Rutabagas
Carrots	Mangos	Spinach
Cauliflower	Mushrooms	Sweet Potatoes (Yams)
Celery	Onions and Leeks	Swiss Chard
Collard Greens	Parsnips	Turnips
Cranberries	Peas	Winter Squash

Summer Vegetable Ratatouille

Ingredients

- | | |
|--|-------------------------------------|
| 2 onion, sliced into thin rings | 1 chopped red bell pepper |
| 3 cloves garlic, minced | 4 roma (plum) tomatoes, chopped |
| 1 medium eggplant, cubed | 1/2 cup olive oil |
| 2 zucchini, cubed | 1 bay leaf |
| 2 medium yellow squash, cubed | 2 tablespoons chopped fresh parsley |
| 2 green bell peppers, seeded and cubed | 4 sprigs fresh thyme |
| 1 yellow bell pepper, diced | salt and pepper to taste |

Directions

- Heat 1 1/2 tablespoon of the oil in a large pot over medium-low heat. Add the onions and garlic and cook until soft.
- In a large skillet, heat 1 1/2 tablespoon of olive oil and saute the zucchini in batches until slightly browned on all sides. Remove the zucchini and place in the pot with the onions and garlic.
- Saute all the remaining vegetables one batch at a time, adding 1 1/2 tablespoon olive oil to the skillet each time you add a new set of vegetables. Once each batch has been sauteed add them to the large pot as was done in step 2.
- Season with salt and pepper. Add the bay leaf and thyme and cover the pot. Cook over medium heat for 15 to 20 minutes.
- Add the chopped tomatoes and parsley to the large pot, cook another 10-15 minutes. Stir occasionally.
- Remove the bay leaf and adjust seasoning.

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The Best Defense is Sunscreen

Skin Cancer

Skin cancer is the most common type of cancer, and melanoma is the most serious of skin cancers. Like most cancers, the exact cause is not known. But, exposure to ultraviolet radiation is a strong risk factor.

We are most exposed to ultraviolet radiation through the sun. UV radiation, also comes from artificial sources, like sun lamps or tanning booths. Avoiding the artificial sources is easy, but decreasing exposure to the sun's radiation takes a bit more work. Many medical organizations, including the American Cancer Society, recommend wearing protective clothing, a hat, and sunscreen when you will be in strong sunlight. While we know sunscreen is effective at blocking UV radiation and decreasing the risk of sunburns, there have been no studies that show if sunscreen can actually decrease risk of melanoma.

Researchers from Australia examined the association between sunscreen use and risk of melanoma. The study, published in the Journal of Clinical Oncology, found that sunscreen use was, in fact, associated with a decrease in the risk of melanoma.

About the Study

The randomized trial included 1,621 adults in Australia, aged 25-75 years. The participants were divided into one of four different treatment groups over 4.5 years:

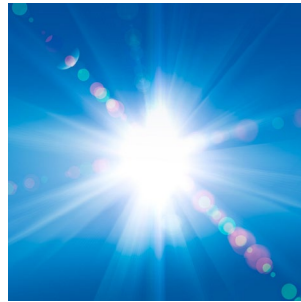
- Daily SPF 16 sunscreen application to head, neck, arms, and hands plus beta-carotene 30 mg daily
- Sunscreen choice and application done at participants discretion plus beta-carotene
- Daily sunscreen application plus placebo
- Sunscreen choice and application done at participants discretion plus placebo

The participants were then sent follow-up surveys 10 years after the trial was completed. During this extension period, no sunscreen was provided for any participants. However, some of the patients continued to use daily sunscreen. By the end of the full trial (14.5 years), researchers found:

- Primary melanoma developed in 1.3% of participants originally assigned to daily sunscreen compared to 2.7% of participants originally assigned to discretionary sunscreen.
- This means that for every 72 participants told to use sunscreen daily, 1 participant avoided getting melanoma.

How Does This Affect You?

Randomized trials are generally considered a very reliable form for studies. This study was a 10-year follow-up of a randomized trial. Since it was not part of the original trial, there may be some reliability problems with the outcomes of this trial. However, since it is clear that sunscreen can block UV radiation and decrease painful sunburns, it is likely that daily sunscreen use may also decrease the development of melanoma. There is also very little risk with sunscreen use for most people.



Resources

American Academy of Dermatology <http://www.aad.org/>
American Cancer Society <http://www.cancer.org/>

References

Green AC, Williams GM, Logan V, Strutton GM. Reduced melanoma after regular sunscreen use: randomized trial follow-up. J Clin Oncol. 2011;29(3):257-263.

What Can You Do?

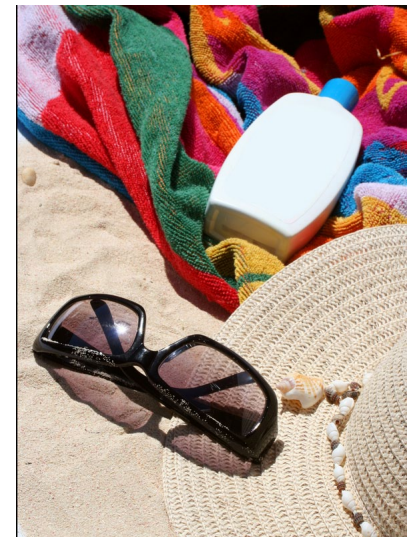
Talk to your doctor about your risk factors for melanoma.

Take steps to be healthy in the sun.

Avoid sunburns by wearing protective clothing or sunscreen with SPF 15 or higher if you plan to be in the sun for extended periods of time, especially between 10 am and 4 pm.

Do not increase your UV radiation exposure through artificial sources, like tanning beds.

Finally, learn about the signs of melanoma and contact your doctor if you find any suspicious moles.



What To Look For?

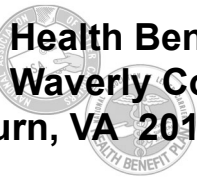
There are three main types of skin cancer: basal cell carcinoma, squamous cell carcinoma, and melanoma. Because each has many different appearances, it is important to know the early warning signs. Look especially for change of any kind. Do not ignore a suspicious spot simply because it does not hurt. Skin cancers may be painless, but dangerous all the same. If you notice one or more of the warning signs, see a doctor right away, preferably one who specializes in diseases of the skin.

- A skin growth that increases in size and appears pearly, translucent, tan, brown, black, or multicolored
- A mole, birthmark, beauty mark, or any brown spot that:
 - changes color
 - increases in size or thickness
 - changes in texture
 - is irregular in outline
 - is bigger than 6mm or 1/4", the size of a pencil eraser
 - appears after age 21
- A spot or sore that continues to itch, hurt, crust, scab, erode, or bleed
- An open sore that does not heal within three weeks

If You Spot It...

Don't overlook it. Don't delay. See a physician, preferably one who specializes in diseases of the skin, if you note any change in an existing mole, freckle, or spot or if you find a new one with any of the warning signs of skin cancer.

NALC Health Benefit Plan
20547 Waverly Court
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The NALC Health Benefit Plan HBR Report

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NALC Food Drive

**The NALC Health Benefit Plan collected
\$4,120 for local area food banks.**



NALC Health Benefit Plan
Recorded Benefit Information
Prescription Drug Program
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