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Vincent R. Sombrotto, President • Thomas H. Young, Jr., Director
20547 Waverly Court, Ashburn, Virginia 20149 • (703) 729-4677

American Heart Month

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DIRECTOR'S REPORT



Thomas H. Young, Jr.
Director

We now turn toward 2003!

Even as we continue to assimilate the Open Season activity, we now have to turn an eye toward 2003. In a few short weeks we expect to receive the Office of Personnel Management's Call Letter.

As you know, the Call Letter is OPM's official notice to the federal health plans to prepare a submission for the next benefit year. Often contained in this OPM missive are requirements to add or expand benefits. Such directives generally result in an increase in the cost of benefit coverage.

So, in general, the Health Benefit Plan must review last year's actual claim experience and match it against what we had projected it to be when we responded to the 2001 Call Letter (which looked toward

the 2002 benefit year). Then, we must also consider how we think 2002 will turn out so that we can make a viable submission for 2003.

UNDERSTAND?

Actually, there are also a number of other factors that come into play, but the above should give some feeling for what a balancing act the Plan goes through to provide a viable benefit and premium package.

This yearly cycle makes for a never a dull moment situation, given the ever-changing and challenging world of health care.

In next month's *Postal Record* I offer some encouragement to remember how important COLCPE is to our members. Remember, the Office of Personnel Management is a

government agency and, as such, is influenced greatly by the administration in office at any given time.

The more people we elect that care about working men and women's needs, the better chance we have of protecting our benefits.

The last part of this article is bittersweet. Sue Sisson is retiring at the end of this month.

I know that many of you have had many opportunities to work with Sue over the phone, at National Conventions and at our Health Benefit Plan Seminars. From those contacts, I know each of you have first-hand knowledge of how well she did her job and what a genuinely nice person she was to work with.

Sue could be labeled as one of those people who are “the glue that keeps things together.” She has always been on top of the details and, even when there were rough spots, she kept things running smoothly.

Sue will be greatly missed by all of us in Ashburn, and so that makes all of us a little sad (actually a lot) at her leaving.

However, there is a very bright aspect of this situation—that being her chance to move to the shore with her husband, spend more time with the family (especially the grandchildren) and generally enjoy the fruits of a well earned retirement.

Bye Sue. Have a long, happy and healthy retirement!



The Pharmacy Corner



You just left your doctor’s office with a diagnosis of “Congestive Heart Failure” – now your mind starts racing – what has happened – does this mean that your heart has stopped working? No – it simply means that your heart is not working as well and it should.

When congestive heart failure (CHF) occurs, less oxygen-rich blood is pumped to your body. Because the body needs oxygen for energy, this can make it difficult for you to do your normal daily activities. Your heart may not be able to pump as much blood with each beat and more blood will be left in the heart. Over time, this can cause a back-up of blood in the lungs and other parts of the body and when this happens,

fluid can build up in the lungs (this is where the “congestion” comes into play) and you may also experience swelling in the hands, legs or ankles.

CFC affects nearly five million people in the US. Many people do not realize they have it because symptoms can be mistaken for signs of getting older. What symptoms can you experience with congestive heart failure? People with

congestive heart failure experience common symptoms that are caused by the lack of oxygen to the body and the build-up of fluids in the body and lungs. These symptoms may include:

- Difficulty breathing or feeling short of breath, especially when lying down or when exerting yourself.
- Fatigue and weakness.
- Swelling in the legs and ankles.

- Sudden and quick weight gain (approximately 3-5 pounds in a week).
- Loss of appetite, abdominal discomfort or tenderness.
- Frequent dry, hacking cough.
- Waking up breathless at night.
- Decreased urination during the day and increased urination during the night.
- Dizziness or fainting.

The symptoms of congestive heart failure can almost always be helped by treatment and made more manageable by modifying your lifestyle. Taking your medications **exactly as your doctor prescribes**, watching your salt intake and other strategies will help maintain your quality of life and help your heart work at its best.

There are many types of medications on the market that are used to treat patients with congestive heart failure.

The first group of medications are ACE (angiotensin converting enzyme) inhibitors. These

are blood pressure lowering medications and are recommended for all patients with heart failure. By lowering the blood pressure it makes it easier for the heart to pump blood. Some examples of medications that fall into this category are Accupril, Captopril, Monopril, Vasotec and Zestril.

The next group are diuretics (usually referred to as water pills). These help your body to get rid of excess water, thus helping to decrease your heart's work load. Sometimes diuretics play havoc with your potassium level. If your doctor prescribes diuretics, please discuss with him where your body's potassium level should be and whether or not you might have to increase your potassium level with either supplements or by increasing your potassium intake through foods that are rich in potassium.

The next medication that may be prescribed is Digoxin which helps the heart pump with more strength so that more blood can be pumped with each heartbeat.

The final type medication prescribed are beta-blockers.

As of now, the only beta-blocker currently approved for the treatment of congestive heart failure is Coreg. This medication is a blood pressure lowering medication that has been shown to help improve the symptoms of heart disease and decrease hospitalizations for some heart failure patients.

There are a few other ways you can help manage congestive heart failure:

- **QUIT SMOKING!**
- Ask your doctor about wearing supportive stockings to help decrease swelling in your ankles and feet.
- Avoid temperature extremes since they can make your heart work harder if you are not used to the temperature changes.
- Avoid or limit alcohol. You might want to discuss this with your doctor.
- Lose excess weight. Discuss your ideal weight range with your doctor.
- Get a flu shot and a pneumonia vaccine each year and avoid people who have a cold or the flu.

HEALTH IN THE NEWS

Food of the Month

Low Fat Meats are a Gold Mine of Vitamins, Minerals and Protein

The demand for beef has been climbing over the past two years in the United States. So are we headed for a health disaster? Not at all. In moderation, lean beef, pork, venison and other meats provide health benefits. They prevent vitamin and mineral deficiencies, boost immunity and build stronger blood.

Red meat's main drawback is that it's high in saturated fat and calories. If you choose to eat red meat, eat lean cuts and trim the fat before cooking.

A University of Minnesota study in the *Journal of the American College of Nutrition* suggests that people with high cholesterol can improve their numbers by switching to lean cuts of beef, pork, fish or chicken.

Meat is an excellent source of protein, which builds enzymes, hemoglobin, muscles and more. It also has the virtue of containing all nine of the amino acids that humans need.

It is also a good source of iron.



Iron deficiency is the most common nutritional deficiency in the U.S. It's an excellent source of zinc, which is needed for a healthy immune system, as well as many B vitamins and potassium. Cuts that are considered "lean" include round steak, pork tenderloin, lamb fore Shank, veal, deer and elk meat.

Hey – Watch Your Back!

In a detective story, the good guys and even the bad guys caution each other to "watch your back!"

It's good advice if you think someone is chasing you. Watching your back or watch-

ing out for it, however, is a good practice for anyone. It's especially true when lifting is involved.

Lifting injuries are a common cause of back pain. You can protect yourself by practicing good lifting habits, both at home and in the workplace.

Why Fitness Helps:

Your physical condition is important. For example, stiff joints and muscles can reduce your ability to keep your back in a safe position as you lift. If your leg muscles are not very strong, you may find it hard to crouch down. Poor fitness will

cause your muscles to tire, placing more stress on your spine.

Twisting or Jerking while lifting or carrying can injure the small facet joints which guide movement of the back.

The discs that separate the vertebrae (bones) and the ligaments that hold them together are also at risk. Discs are composed of a jellylike core, surrounded by a strong fibrous ring. With repeated unsafe lifting, the fibrous ring or its supporting ligaments may tear or rupture.

Lifting While Bent Forward will increase the stress on your spine. Contributing to this stress are factors like the weight of the load, how far it is held from your body, how often and how fast you lift and how long you hold the load.

Back injuries are most likely when the spine is bent forward and twisted at the same time, according to the Australian and Physiotherapy Association.

Make Your Work Easier:

- Always check the weight of the load and get help if necessary.
- Whenever possible, lift and carry heavy items with a

crane, hoist or forklift. Instead of carrying parcels, use a hand trolley.

- Repackage heavy articles to reduce the size and weight of individual loads.
- Wear comfortable clothing and flat, nonslip shoes.
- Store loads at waist height so you don't have to bend or lift overhead.

Correct Hand Washing Prevents Infections

Doctors at the Mayo Clinic say getting germs on your hands and transferring them to your face is a common way to acquire ailments. The common cold and more serious diseases can be avoided by hand washing, including intestinal infection (dysentery), inflammation of the liver (hepatitis), and stomach flu.

Their instructions for washing well: apply soap or detergent. Vigorously rub your hands together for at least 10 seconds to loosen germs. Rinse well.

Though all soaps help eliminate viruses, dishwashing soaps are particularly effective. Researchers have found it to be up to 100 times more effective than hospital-strength antibacterial soaps in killing at least

one common cold virus.

Water temperature is less important, but water that is warm enough to cut grease is best. That is about 110 degrees F. Water hotter than that could damage the skin.

It's more important to wash your hands before you eat, after using the bathroom, after handling garbage or money, after blowing your nose and after handling uncooked meat.

Laryngitis: Its Causes and Cures

Acute laryngitis comes on quickly. It is caused by a respiratory infection like a cold, by talking or singing for long periods of time, by allergies and by the use of corticosteroid inhalers to treat asthma, to name the most common causes.

Usually it clears up in a few days to two weeks. Self-care steps include drinking plenty of liquids, sucking on lozenges or candies and resting your voice. A paper published by the Mayo Clinic notes that whispering puts more strain on your vocal cords than speaking.

For hoarseness that lasts longer than two weeks, your doctor may want to check for polyps or nodules on the vocal cord or ulcers. Hoarseness is the only early sign of vocal cord cancer.

February is American Heart Month

H Heart attacks strike 1.1 million Americans and kill about 450,000 each year, according to the American Heart Association. Heart disease is the nation's leading single cause of death.

The Association's "One of a Kind" personalized health management Web site can help you change the behaviors that put you at risk for heart disease. Take steps to better health and log on to www.onelife.americanheart.org to register on their secure Web site.

You can learn about recently discovered factors in heart disease, such as:

- **Inflammation.** Chronic inflammation is a warning sign of heart disease. One sign is a low level of white blood cells or lymphocytes. Medical researchers say 65 percent of heart attack patients have low lymphocyte levels.
- **Asthma.** Chronic inflammation of the lungs increases

the risk of fatal heart disease in nonsmokers. Those receiving treatment for asthma were 82 percent more likely to develop heart problems. This indicates that doctors should work with asthma patients to reduce hypertension, obesity and high cholesterol.

- **Stress.** Exercise, including strenuous work, protects the heart by reducing weight, lowering blood pressure and raising levels of "good" cholesterol. But stress can nullify the benefits of physical activity. In one study, workers in the most physically demanding jobs averaged nearly double the artery thickening of those in the least strenuous jobs.
- **Smoking.** People who smoked within six hours of their heart attack had clots that averaged almost double the size of the clots in those whose last puff was six to 24 hours before symptoms began.

- **Shape.** A potbelly is bad for a man's heart. Research shows that excess weight in the abdomen is a greater risk factor than weight alone.
- **Lack of omega-3 fatty acids.** In older Americans, one serving of fatty fish a week can cut the risk of a fatal heart attack by 35 percent. Fatty fish, such as tuna, salmon and mackerel are rich in omega-3 fatty acids. Lean fish, including cod, catfish and snapper are not.
- **Lack of vitamin E.** New findings show that people with the highest levels of vitamin E had roughly half the risk of coronary artery disease of those who had the lowest levels. Good sources include nuts, soybeans, green vegetable leaves and nutritional supplements.

February is Women's Heart Health Month

Although heart disease is the leading cause of death among women, only about a third of all women know it, according to the American Heart Association. Heart disease claims twice as many women as cancer. Doctors at the Mayo Clinic recommend that women take responsibility for heart health. Rather than wait for a doctor to discuss heart disease, they should ask:

- What is my blood pressure and is it within the normal range? Less than 130/85 is considered normal. Lower than 120/80 is optimal.
- What are my triglyceride and cholesterol numbers? Triglycerides should be 100 to 150 and HDL cholesterol should be 45 or above. LDL cholesterol should be 130 or below (less than 100 is optimal).
- What is a healthy weight for me? Body mass index (BMI) should be less than 25.
- Am I getting enough exercise?

Statins for Many Patients

Researchers at Oxford University in England say all patients at risk of cardiovascular disease have their heart attack risk reduced by at least one-third by taking statins for five years.

Most patients in the study were middle-aged men considered at risk of heart attacks. The cholesterol-lowering drugs benefitted a wide range of patients including women, the elderly, diabetics and patients at risk of heart disease for reasons other than high cholesterol.

The study also showed that a daily antioxidant pill with vitamin E, vitamin D and beta-carotene failed to reduce deaths or major cardiovascular events.

Hidden Hazards to Your Heart

We know the famous hazards: smoking, a high-fat diet, high blood pressure and a sedentary lifestyle. But the American Heart Association indicates other factors can also put your heart in jeopardy.

Anger. People with the most anger have a higher heart attack

risk, regardless of any other risk factors.

Extreme temperatures. Hot temperatures (over 70 degrees with 70 percent humidity) and cold temperatures can put excessive strain on your heart.

Lack of social support. A study published in the *Annals of Behavioral Medicine* in 1999 shows that participants aged 50 and over who were socially active had blood pressure levels about the same as those in their 20s and 30s. Others saw blood pressure rise with age.

Poor oral hygiene. Bacteria released during dental procedures can go to the heart and cause an acute infection.

Caregivers: Take a Break

Dealing with a family health problem or psychological issue can be very taxing, especially for caregivers. The National Family Caregivers Association says they should take a break, even if only for a few hours. To find organizations that provide in-home care or day care for people of all ages, visit the Web site www.nfcacares.org or call 1-800-896-3650.

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