H1N1 Flu Advisory

www.bcbstx.com/ut

The ongoing outbreak of novel influenza A (H1N1) continues to expand in the United States and internationally. More cases, more hospitalizations and more deaths from this outbreak are expected over the coming days and weeks.

H1N1 (referred to as “swine flu” early on) is a new influenza virus causing illness in people. This new virus was first detected in people in the United States in April. Other countries are reporting people sick with this new virus. This virus is spreading from person-to-person, probably in much the same way that regular seasonal influenza viruses spread. Globally, the swine flu outbreak has been designated a "pandemic potential" by public health organizations such as the World Health Organization (WHO).

How Can I Tell if I Have H1N1 Flu?

Influenza of any kind has the potential to be deadly, and is monitored closely by public health organizations worldwide. This novel influenza A (H1N1) flu outbreak is of particular concern because this strain appears to be highly contagious and is spreading rapidly. Also, anytime a new strain of the flu develops, it can spread fast because people don't have a natural immunity, current vaccinations aren't effective and new vaccines can take months to develop.

H1N1 flu has symptoms that are similar to seasonal influenza (type A). These symptoms generally include cough, sore throat, fever, chills, headache, fatigue, sometimes nausea and diarrhea. If you have ever had the flu before, you'll recognize the symptoms right away. However, having flu symptoms does not automatically mean you have swine flu. The only way to know for sure is to complete a lab test.

If you have flu symptoms or are suffering from any kind of persistent respiratory infection, we urge you to quickly seek medical attention. Not only are you at risk of becoming seriously ill, you increase the chance of spreading the virus to others if you continue your daily routines of work, school, family and social activities.

UTHSCT will start offering Seasonal Influenza Vaccines starting Monday, September 21, 2009. There are a few changes this year.

- We will be conducting a flu shot clinic that will be located on the 1st floor entrance of the Riter Center. Hours of operation will be M-F 8am to 5pm until November 20th (we will then re-evaluate for the need to offer this option further).
- The flu shot clinic will be open to the public and to our patients on a walk-in basis.
- All clinic patients (besides Medicaid) will be given their flu shot AFTER their appointment at the flu shot clinic, and insurance will be filed. We will file insurance ONLY on UTHSCT’s established patients.
- All others will be considered self pay. Self pay cost is $25.
- UT Tyler employees and dependents, UT Tyler students, and UTHSCT families (your spouse and children) can receive the flu vaccine for $16.00.

Employees can receive the seasonal flu shot at Occupational Health Clinic, E391 from 8-12 or 1-4:30pm. All employees must be immunized for flu or sign a declination.
Think Pink: October is Breast Cancer Awareness Month


Join in the fight against breast cancer and learn breast cancer risk factors, myths and facts, screenings and treatment options, and support strategies for family and friends. Together, we can make a difference.

According to the American Cancer Society, one in seven women will develop breast cancer in her lifetime. One in seven. And no woman—regardless of age, race, economic status, lifestyle, or family history—is completely “safe.” Breast cancer discriminates against no one. The key to fighting—and winning—the breast cancer battle is prevention and early diagnosis.

What Breast Cancer is: Myths & Facts
While there have been tremendous advances in breast cancer detection and treatment, the headlines can be confusing. We dispel the myths and facts below:

Myth: Finding a lump in your breast means you have breast cancer.
Fact: If you discover a lump in your breast or any changes in breast tissue, it is very important that you see a doctor right away. However, 8 out of 10 breast lumps are benign, or not cancerous. Sometimes women stay away from medical care because they fear what they might find. Take charge of your health by performing routine breast self-exams, establishing ongoing communication with your doctor, and scheduling regular mammograms.

Myth: I'm too young to worry about breast cancer.
Fact: Your breast cancer risk does increase as you get older, but women of all ages can develop breast cancer. If you have a family history of the disease, you should schedule your first mammogram starting at age 35. The American Cancer Society recommends that all women age 40 and older receive a screening mammogram every year.

Myth: No one in my family has (or had) breast cancer so I don't need to be concerned.
Fact: About 90 percent of women who develop breast cancer have no family history of the disease (although if you do have a family history, your risk significantly increases).

Myth: Most women diagnosed with breast cancer had more than one risk factor.
Fact: All women are at risk for developing breast cancer whether they have known risk factors or not. In fact, the majority of breast cancer patients had no known risk factors, other than being female.

Myth: Breast cancer is preventable.
Fact: Although a drug classified as an antiestrogen called Tamoxifen may decrease breast cancer risk in certain women, the cause of breast cancer remains unknown and is not completely preventable. The real key to surviving breast cancer is early detection and treatment.

Myth: Having yearly mammograms will expose me to radiation, and I'll get cancer as a result.
Fact: According to the American College of Radiology, the benefits of an annual mammogram, or X-ray of the breast, far outweigh any risks that may occur (the amount of radiation used is minute during this screening and diagnostic procedure). A mammogram is one of the best tools available for the early detection of breast cancer. Mammograms can detect lumps well before they can be felt or otherwise noticed, and the earlier that lumps are caught, the better your chances for survival.

Myth: I'm not going to breastfeed because breastfeeding will increase my risk of getting breast cancer.
Fact: Just the opposite is true. Breastfeeding may actually decrease the risk of perimenopausal breast cancer.

Myth: Knowing you have changes in the BRCA1 or BRCA2 gene can help you prevent breast cancer.
Fact: While alterations in these genes in men and women can predispose an individual to an increased risk of breast cancer, only 5 to 10 percent of patients actually have this mutation. This is not an absolute correlation. Like your age or having a family history of breast cancer, it’s a factor you just can’t control. But you can let your physician know, perform regular breast self-exams, and focus on the fact your chances of not having this disease are greater than 90 percent.
General Principles for Lowering Breast Cancer Risk

According to Dr. Lynne Eldridge, author of Avoiding Cancer One Day At A Time and an October 2008 and 2009 panelist at the Breast Cancer Awareness Association Conference in Minneapolis, there are steps we can take to lower our breast cancer risk. She recommends that we:

**Take a walk outside.** Those who get 1000 IU’s of vitamin D daily have a lower risk of developing post-menopausal breast cancer. If you can’t get out in the sun 15 minutes a day, discuss a supplement with your health-care provider.

**Eat five to nine servings of fruits and vegetables daily.** Chinese women, who switch from their “vegetable-soy” Asian diet to a “meat-sweet” Western diet, increase their risk of breast cancer by 60 percent.

**Become environmentally aware.** Only 2 percent of chemicals used in commerce have been tested for carcinogenicity. Use gloves, wear masks, read labels, and read Material Data Safety Sheets on chemicals you are exposed to at work. At home, select environmentally friendly alternatives.

**Add a few houseplants to your home.** The Environmental Protection Agency has ranked indoor air fourth in environmental causes of cancer. Many sources of carcinogens can be eliminated, but for those that we can’t eliminate, houseplants can help clean the air. The top 11 plants for absorbing indoor air carcinogens, as determined by researchers at NASA, are: Ferns (esp. the Boston fern), palms (esp. parlor, dwarf date, bamboo and lady palm), rubber plant, spider plant, English ivy, Janet Craig (Dracaena), Chrysanthemum, Philodendron, Peace lily, Gerbera daisy, and Weeping fig (ficus). Also, open your windows when possible.

**Watch your waistline.** Obesity is responsible for 20 percent of cancer deaths in women.

**Exercise at least 30 minutes per day.** It doesn’t have to be expensive. A fun study demonstrated a greater reduction in breast cancer with “domestic exercise,” eg. dusting and vacuuming, than with other forms of exercise. But, since women who work at home are more likely to develop cancer, choose environmentally-friendly cleaning products.

**Minimize alcohol.** For women, more than “one-a-day” bumps up risk.

**Get enough sleep – in the dark.** Melatonin, manufactured by the brain in total darkness, may lower the risk of breast cancer. Blind women have a very low incidence of breast cancer, whereas women who work night shifts have an elevated risk. If you work the night shift, buy dense shades for your bedroom. Night shift work has now been classified as a human carcinogen.

**Enjoy your sex life (in a monogamous relationship).** Women with a more active sex life appear to have a lower risk of breast cancer.

**De-stress – or at least, “feel” less stressed.** A Swedish study found women that were more stressed had double the risk of breast cancer. There was no difference based on “objective stress.” The difference was in “subjective stress,” how stressed they “felt.”

**Nurture your spiritual life** – While few studies have looked at this directly, both prayer and yoga have been shown to increase natural killer cells, the darling cells in our immune system that feast on cancer cells.
How to Select a Toothbrush (October is National Dental Hygiene Month)

www.deltadentalins.com/universityoftexas

Since the average American spends nearly 1,000 hours brushing teeth over a lifetime, it’s important to find a toothbrush that feels comfortable and works well. This can be a daunting task, considering the variety of toothbrushes on the market. Angled heads, raised bristles, oscillating tufts: which toothbrush will work best for you?

In reality, almost any toothbrush you feel comfortable using works well. What is most important is to brush your teeth correctly — and brush them long enough. Most people brush for less than a minute, but to effectively reach all areas of your mouth and scrub off cavity-causing bacteria, you should brush for at least two to three minutes, at least twice daily.

How do you find the toothbrush that’s most comfortable for you?

Here are some guidelines from the American Dental Association:

- Any toothbrush you choose should have soft bristles. Hard bristles may cause gum tissue to pull back from teeth, which can expose the tooth root and lead to increased sensitivity to heat, cold or certain foods and drinks.
- Select a toothbrush head size that can easily fit into the mouth and can brush one to two teeth at a time (the general size is 1” long and ½” wide).
- Powered toothbrushes don’t clean teeth any better than regular toothbrushes. However, if a powered toothbrush motivates you to clean your teeth more often and for the required length of time, it is worth the investment.
- Powered toothbrushes are better choices than manual toothbrushes for anyone who needs assistance brushing teeth, including seniors, people with arthritis (or any condition that may limit mobility), anyone wearing braces or people with misaligned or uneven teeth surfaces that make a thorough cleaning more challenging.
- Replace your toothbrush (or toothbrush head for a powered toothbrush) as soon as the bristles begin to look worn or frayed (usually every three months). A worn toothbrush does not do a good job of cleaning your teeth. Remember always to replace your toothbrush after an illness.
- If you’re still undecided about which toothbrush to use, consult your dentist for advice.

If you are shopping for a child, select a toothbrush with the following characteristics:

- Soft bristles (for gentle cleaning)
- Very small heads (designed for baby teeth)
- Large handles (easier for children to grip)

Sources:
*How Do I Choose and Use a Toothbrush?* Academy of General Dentistry.
Some information courtesy of the American Dental Association.

Last updated: April 2008.

Fun facts about the toothbrush

The most popular toothbrush color is blue.

The toothbrush was selected as the number one invention Americans could not live without, beating the automobile and personal computer, according to the Lemelson-MIT Invention Index in 2003.

The Chinese invented the first toothbrushes, made by embedding hog hairs into ivory, bone or bamboo handles.

The oral health information on this web site is intended for educational purposes only. You should always consult a licensed dentist or other qualified health care professional for any questions concerning your oral health.
Herbed Chicken Parmesan

We recommend rice-shaped orzo pasta with this saucy entrée, but you can serve spaghetti or angel hair pasta instead.

1/3 cup (1 1/2 ounces) grated fresh Parmesan cheese, divided
1/4 cup dry breadcrumbs
1 tablespoon minced fresh parsley
1/2 teaspoon dried basil
1/4 teaspoon salt, divided
1 large egg white, lightly beaten
1 pound chicken breast tenders
1 tablespoon butter
1 1/2 cups bottled fat-free tomato-basil pasta sauce (such as Muir Glen Organic)
2 teaspoons balsamic vinegar
1/4 teaspoon black pepper
1/3 cup (1 1/2 ounces) shredded provolone cheese

Preheat broiler.

Combine 2 tablespoons of Parmesan, breadcrumbs, parsley, basil, and 1/8 teaspoon salt in a shallow dish. Place egg white in a shallow dish. Dip each chicken tender in egg white; dredge in the breadcrumb mixture. Melt butter in a large nonstick skillet over medium-high heat. Add chicken; cook 3 minutes on each side or until done. Set aside.

Combine 1/8 teaspoon salt, pasta sauce, vinegar, and pepper in a microwave-safe bowl. Cover with plastic wrap; vent. Microwave sauce mixture at HIGH 2 minutes or until thoroughly heated. Pour the sauce over chicken in pan. Sprinkle evenly with the remaining Parmesan and provolone cheese. Wrap handle of pan with foil, and broil 2 minutes or until the cheese melts.

Yield: 4 servings

CALORIES 308 (30% from fat); FAT 10.4g (sat 5.7g, mono 3g, poly 0.6g); IRON 2.3mg; CHOLESTEROL 88mg; CALCIUM 249mg; CARBOHYDRATE 16.2g; SODIUM 808mg; PROTEIN 35.9g; FIBER 1.8g

Cooking Light, NOVEMBER 2003
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UT Health Science Center at Tyler Benefit Provider Numbers:

**UT Select/Blue Cross Blue Shield**  
1-866-882-2034 or www.bcbstx.com/ut

**Medco Health Prescription Plan**  
1-800-818-0155 or www.medco.com

**UT Flex**  
1-866-887-3539 or www.utflex.com

**Ft. Dearborn (Long Term & Short Term Disability)**  
1-866-628-2606 or www.fdl-life.com/ut

**Teachers Retirement System of Texas**  
1-800-223-8778 or www.trs.state.tx.us

**Delta Dental Premier**  
1-800-893-3582 or www.deltadentalins.com/universityoftexas

**Superior Vision**  
1-800-507-3800 or www.superiorvision.com

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