FROM THE NEWSROOM



First-hand account of getting the vaccine

NTERPRISE — I must admit, when my boss suggested I write an account of what it's like to get the Moderna COVID-19 vaccine, I almost sluffed it off, thinking there wouldn't be much to say. After all, I may be no spring chicken, but I'm generally pretty healthy and didn't expect I'd experience much of a reaction. At 67, I rarely get sick, have no immune system issues and thought I might get off scot free.

How wrong I was.

To begin with, this in no way is to attempt to impart medical knowledge or advice; I'm a journalist, not a medical professional. It's just the experience of one person who got the vaccine.

The first shot wasn't worth more than a paragraph. I walked into the Cloverleaf Hall on March 16, they had me fill out a minimal amount of paperwork and gave me the shot. Then I waited along with about 20 others for the required 15 minutes to make sure I didn't pass out or have other adverse reactions. That was it. No soreness in the arm; I didn't even bleed at the injection site.

But Tuesday, April 13, was a little

That was the day our daughter, Amber, who is a registered nurse in Twin Falls, texted us about her hospital ordering a halt to administering the Johnson & Johnson vaccine. My wife, Margaret, had taken it the same day I got my first Moderna shot. Amber knew this and wanted to make sure her mom was OK. Margaret hasn't noticed any ill side effects of the vaccine — she even said she felt energized after receiving it.

Not so for me. Again, receiving the second Moderna shot and the wait time were inconsequential. I went in at 7 a.m. because Tuesday is our big production day for the week's paper and I didn't want to be away for that. In fact, I'd even worked late Monday to get a story done I otherwise might have done Tuesday morning. I didn't want anything to get in the way of that.

But I was fine most of Tuesday. Oh. I was a little tired, but that could've been as easily from having worked late the previous night as any of the warned fatigue from the second Moderna shot.

We got the paper put to bed by about 2 p.m. and after making plans for the next week, I took the rest of the afternoon off, as much because of working a long Monday as to make sure I wasn't feeling the vaccine-related fatigue. I did feel a little tired, but I'm still not sure what the cause was.

Then came Tuesday night. I usually sleep like a log. I'll go to sleep in one position and rarely move all night just ask Margaret.

But that night, I woke in the middle of the night shivering, shaking and a bit feverish. I got up and put on a T-shirt and was able to get back to sleep.

I had planned to go to the usual Wednesday-morning Bible study I attend at 6:30 a.m. But when I got up, I was stumbling around and Margaret sent me back to bed.

"You won't go to hell for missing one Bible study," she said.

I usually make my own breakfast — I'm just picky about how everything has to be cooked, but that day, Margaret did it for me, which I greatly appreciated. Oh, the bacon was a bit crisp, but it was generally great.

Then, she wouldn't even let me go to work on time and insisted I get an extra couple of hours of sleep since I was still stumbling around.

I did manage to get up and to work by 9:30 a.m. It's not that my job is physically stressful, so I managed, though all day Wednesday I still was a bit tired and unsteady. We had another event at church that evening, at which I managed

By Thursday, I could still feel a little of the fatigue, but not much. There was no pain in the shoulder where I got the shot. There were no headaches, muscle pain or nausea. They say it's another couple or three weeks before it's fully effective, but that should do the trick.

But I still have questions: • Will I need an annual booster?

- What about this so-called "herd
- immunity" we've heard about? When can I stop wearing a face

mask? But I guess I've survived — both

COVID and the vaccine meant to cure it.

Bill Bradshaw is a reporter for the Wallowa County Chieftain.



Viewing COVID from our perch





iving in Wallowa County is a privilege, not only because of the natural beauty, small size and friendly people, but because it is removed enough from the American mainstream to be a perch from which to see the world. In recent years I've come to see age, too, as a perch from which to see the past and understand the

Our corner of NE Oregon has been and continues to be a haven from the COVID pandemic that is still sweeping the nation. As COVID-19 marches across America and the world, strikes nearby Umatilla County forcefully and lays a heavy hand on Union County and neighboring Idaho, we squeak along with few cases and very few fatalities.

Some might think that God is blessing us, but it's more likely that our rural, dispersed population and outdoor living has more to do with it. All winter long, I walked the dog a mile each morning, and there were always others walking dogs or doing it on their own. Backcountry skiers skied, and Fergi allowed children of all ages to breathe mountain air. Still, many I know stayed close to home; some have still not left the county in a year.

We got together, conservatives and liberals, Catholics and the unchurched, to support the local food bank and restaurants offering takeout, and developed our own relief programs before the government programs hit, and continue to push funds into

needy pockets today. Our Rotary Club lent special support — including delivery of the Chieftain — to Meals on Wheels and promoted a potato drive that took up the slack left when Portland restaurants could not use Pat Thiel's organic potatoes.

My image of the rest of the world from this high perch is one of density, scramble and selfishness. People don't want to live five to a room and 10 to an apartment next to other rooms and apartments just as crowded, but that's where many found themselves when COVID hit. Nursing homes hit early were coastal — not in remote places like ours — and caretakers, underpaid and often living in those crowded apartments, often women of color, spread the disease among their families. Indian reservations with poor plumbing, large, extended families, and a probable genetic weakness against the virus, were hit hard in the early days. And the medical community, from ambulance to ER room, struggled, and many picked up the contagion.

College students — young, restless, and like the young always feeling invincible became major spreaders of the disease. I think we should have vaccinated the young first, or at least concentrated on those living in fraternity houses and crowded farm-

worker housing.

Our own medical establishment calmly picked up the occasional case — my grandson brought it home from Portland, but was quickly diagnosed and quarantined, and it spread no further — followed and extinguished it. And although we have people here who deny that COVID exists, or that it is anything more than the flu, and flaunt cautions to mask and distance, the majority of us have minded our — and our community's — manners. The doctors say that the normal seasonal flu and even the common cold have had trouble spreading in the

county this winter.

It is now vaccination time, and the deniers and anti-vaxxers are forming a front, locally and across the country, that threatens the prospect of developing herd immunity. It's apparently young, white men who are most resistant, which makes sense. Young men are always looking for a dare.

Older men and women — and here we come to the age perch — remember polio and mumps and measles, and know the efficacy of vaccinations. When I joined the 70-plus remembering crowd for my vaccination, there were men and women, Republicans and Democrats. I remembered being hauled to a neighbor's house so that I would get chickenpox young, when it was not so serious. A friend recently told me that his father was 9 when he got the mumps, the youngest of several brothers. The older ones were all sterile.

Many of us remember standing in lines at school to be vaccinated for unnamed diseases, and then for polio. We remember magazine photos of children in iron lungs; some of us remember children taken from our classrooms. And right now, in Wallowa County, I know three who survived polio in the 1950s and are suffering from "post-po-

lio syndrome" today. On a bike-ride on the Imnaha Highway on Sunday, I was struck by a long string of yellow sacks of highway trash; I wondered if it is people who see individual freedom in pitching trash from car windows who demand the freedom to not wear a mask. I thanked the good volunteers of Wallowa County who help keep our small, rural place beautiful, the many who look out for

Rich Wandschneider is the director of the Josephy Library of Western History and

Benefits of peanut butter and celery

IT'S ABOUT HEALTH AND

Ann Bloom



Thether you grew up eating Skippy, Jif, or you are a loyal fan of Peter Pan or some other brand, peanut butter probably figures prominently somewhere in your childhood. Peanut butter and jelly sandwiches are as much a part of growing up for many people as skinned knees and the ABCs.

Peanut butter is, of course, made from peanuts. Peanuts are not a nut, but a legume. Legumes are part of a group of food which also contains dried peas and lentils. Peanuts grow underground and are part of the protein food group.

To make peanut butter, peanuts are usually first roasted and then ground into a paste with a little salt added. In many commercial varieties, sometimes oils and sugar or shortening are added. Peanut butter is simple to make at home, too, so it is a great at-home project to do with children. Natural peanut butter will separate (the oil will float to the top). This can be fixed by simply stirring the oil back into the peanut butter until it is a smooth paste again.

As a spread, peanut butter can be used

in various forms in recipes both sweet and savory. Peanut butter cookies can be found, in some version or another, in just about any general cookbook. Peanut butter is used to make dipping sauces, marinades and soups. It is also found in international

cuisines. Peanut butter has a lot going for it in terms of nutrition. Although relatively high in calories (about 190 per 2 tablespoon serving) it is high in protein, vitamin E, B vitamins, fiber, phosphorus, manganese and magnesium. It is also contains copper which helps maintain bone health. According to WebMd.com, it also contains a fat called oleic acid which can help to maintain HDL (the "good" cholesterol), blood pressure and blood sugar. Maintaining healthy levels of these may aid in helping to prevent

However, because it is high in fat (some of which is saturated fat) and calories, a little goes a long way, and consuming too much peanut butter can result in weight gain unless a person's physical activity level compensates for the additional calories. Therefore, as with most foods, peanut butter should be consumed in moderation.

Due to the fat content (and protein) of peanut butter it tends to give a sense of fullness after it is eaten and is slow to be digested, therefore it prevents a feeling of hunger for a longer period of time and can

help prevent overeating and weight gain. Peanut butter is not for everyone, however. Some people are highly allergic to it

and can go into anaphylactic shock from eating even very small amounts. This reaction causes swelling of the tongue and throat and can cause hives. This is a medical, life-threatening emergency and requires

immediate medical attention. Peanut butter as a snack has a lot of options: peanut butter and apple slices, peanut butter and crackers, peanut butter and celery with raisins (also known as "ants on a log"), peanut butter and celery with dried cranberries (also known as "lady bugs on a

log"), etc. And speaking of celery ... April is National Celery Month. When some people think of celery they may think of its claim to fame as a diet food. But there is much more to celery than just its tiny amount of calories (10 calories per stalk). It has antioxidants which protect cells, blood vessels and organs from oxidative damage. It contains vitamins K, A and C, nutrients such as folate and potassium, fiber and at 95% water, it provides a source of hydration. It is also low in sodium.

However you take your peanut butter and celery, both can be part of a healthy and nutritious diet. For more information and recipes using both peanut butter and celery, go to www.foodhero.org.

Ann Bloom lives in Enterprise and has worked for the OSU Extension Service for 15 years as a nutrition educator. She studied journalism and education at Washington State University.