

You can help prevent hepatitis outbreak

There's a hepatitis epidemic in Oregon. Are you doing your part to stop it?

The media are constantly alerting us to new hepatitis scares associated with restaurants where food service workers have been diagnosed with hepatitis. Armed with this information about specific foods that the worker may have contaminated on specific dates, it's up to us to decide if we need a gamma globulin shot to ward off the disease.

If more than two weeks have passed since exposure, the only option is to "wait and see" if symptoms appear.

Symptoms appear from two to six weeks after exposure. The onset of illness is usually abrupt fever, chills, loss of appetite, nausea, fatigue and abdominal discomfort.

Hepatitis A is the least severe type of viral hepatitis. The illness may be mild (lasting a week or so) or it may be more severe (lasting several months). There is no cure. The disease must run its course.

We need to realize that hepatitis is not just a restaurant problem. The virus can be an unwanted guest at any feeding occasion, including family meals and potluck dinners.

Any person with hepatitis symptoms should not be preparing food for their families or for the public. Even without symptoms, we can be spreading hepatitis. It's infectious before symptoms appear. Therefore, it's important for all food handlers to keep food safety in mind all of the time. Good personal hygiene is the key to prevention.

Food can be contaminated with hepatitis virus when infected persons don't wash their hands after using the toilet or changing a child's diapers. Unless a food is cooked after contamination, the virus will

be spread. That's why salads and cold sandwiches are often the vehicles for passing hepatitis from person to person at home and away from home.

Whether you're feeding your family, restaurant patrons, social groups or others, you can stop the hepatitis epidemic with soap and water. It's a simple solution for an out-of-control problem.



Information Provided By:

OSU Warm Springs Extension
1134 Palute Street
PO Box 430
Warm Springs, OR 97761
(503) 553-3238/3239

Plan now for "end of life"

When was the last time you talked with your family members or significant loved ones about health care decisions at the end of life?

These conversations can be difficult for families. When they occur, they may contain unclear statements such as "Don't ever let me live like a vegetable" or "I don't want to be hooked up to all kinds of machines. No heroics."

Unfortunately, these statements are not very helpful when decisions must be made for someone in a terminal condition who is decisionally incompetent (perhaps because of a coma or severe pain.)

For example, if you say that you don't want to be hooked up to machines if you should be in a terminal condition, does that mean you don't want a respirator? Does it also mean you don't want to be fed artificially by tube or to receive intravenous antibiotics?

Medical technology is complicated. Therefore, in order to make your wishes clear, it becomes important for you to know as much as possible about different treatments which are often used in a terminal condition.

Oregonians concerned with planning for future health care in the event of incompetency have two routes available to them: A Power of Attorney for Health Care and a Directive to Physicians (more commonly known as a Living Will). The reality is that most people do not write detailed documents about all the possible ways they might die and the various treatments physicians might have available to prolong their lives.

Given a recent U.S. Supreme Court decision, however, we may begin to see increased health care consumer awareness and participation regarding terminal care.

On June 25, 1990, the U.S. Supreme Court issued its decision on the first "right to die" case to come before it. The Court's opinion on the case of Nancy Cruzan

has important meaning for hopelessly ill patients, their families, and health care providers.

Nancy Cruzan is a young woman in Missouri who lives in a persistent vegetative state as a result of a 1983 car accident. She is not brain dead; the lower part of her brain which enables her heart to beat and her lungs to breathe continues to function. She does not need a ventilator to survive. Because she can do nothing for herself, she must be artificially fed and hydrated.

Nancy's parents believe she would not want to have tube feeding under her circumstances. They based their belief on what they know about their daughter and in part on her own earlier statement that she would not want to live if she could not be "at least halfway normal."

The New England Journal of Medicine (September 6, 1990) briefly summarized the U.S. Supreme Court's decision as follows. First, the court affirmed the right of competent patients to refuse life-sustaining treatment. Second, the Court indicated that artificial feeding and hydration should be treated the same as any other medical treatment.

Third, the Court agreed that Missouri could require the continued treatment of a patient in a persistent vegetative state unless there was "clear and convincing evidence" that she or he had explicitly authorized the termination of treatment before losing the capacity to make decisions.

Fourth, the Court did not require that other states adopt Missouri's rigorous standing of proof.

While having advance directives are not necessary in Oregon in order to discontinue life-sustaining treatment of incompetent patients, individuals who may wish to set limits concerning treatment if ever they should be in a terminal condition would be on much more solid ground by putting their wishes in writing before the occurrence of a

health crisis.

Healthy individuals over 18 years old, as well as those in poor health, are urged to discuss the use of life-sustaining treatments with physicians and family members in order to articulate their preferences and values. Such discussions are essential preparation to the writing and signing of advance directives.

For further information and materials on end-of-life health care decision making, contact Oregon Health Decisions, toll-free in Oregon: 1-800-442-4805.

Coldframe gardening alternative to greenhouse

You don't need to be a greenhouse owner to enjoy cold-weather gardening. Try a coldframe, the poor gardener's greenhouse.

The coldframe enables home gardeners to sow summer flowers and vegetables weeks before outdoor

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spring planting dates. In addition you can start annual flowers for fall and winter and perennials for next year's growing season in a coldframe.

The coldframe protects plants from harsh winter weather, allowing them to grow to transplant size quickly.

A typical coldframe is a wood frame box about three feet by six feet in size with the back side higher than the front. The top is sloped to capture sunlight and allow rain to run off.

The top may be either hinged or removable and can be made of window sash, storm windows or polyethylene film in a frame. Polyethylene may cause some problems in western Oregon because it tends to sag and collect water.

A sunny, well-drained location protected from the wind is ideal for a coldframe, which should be placed facing south. Good construction will help conserve soil heat at night. Make the joints of the coldframe as tight as possible. Bank soil up around the sides to keep the planting area warmer. Paint the wood surfaces of the coldframe with a primer and one or two coats of white paint to reflect the light.

A wood preservative, such as two percent copper naphthate, is

the availability of small, lightweight portable electric space heaters may make it easier for consumers to use them to heat rooms such as the bathroom. If electric heaters are used near water in the home, the appliance poses an electrocution hazard for all family members.

CPSC said that most electric heaters do not have protection against electrocution should the appliance come in contact with water. For this reason, electric heaters should not be used in bathrooms.

CPSC reminds consumers that ground fault circuit interrupters (GFCIs) can be installed in any wall outlet to protect consumers against electrocution hazards and are particularly desirable for out-

door outlets and in bathrooms, kitchens, basements and garages. A GFCI constantly monitors electricity flowing through a circuit. If an electric appliance accidentally topples into a sink or tub, the GFCI will shut down the power in milliseconds to protect the consumer against electrocution. Consumers should also consider using portable GFCI shock protectors that can be plugged into outlets when they are using electrical products in and around the home.

Consumers may obtain a free copy of the Government's fact sheet on ground-fault circuit interrupters by sending a postcard to GFCI, Washington, DC 20207

safe near plants and can be used before painting to protect against wood rot. Creosote and pentachlorophenol will poison plants and shouldn't be used.

The frame is heated by the sun. During the night the heat is gradually lost through the cover. During the day, the temperature must be controlled so it doesn't get too high

(100° F. is the maximum). Raise the cover of the frame occasionally to reduce the temperature inside and provide good air circulation.

Poor air circulation can cause damping off, mold and botrytis. Using a sterile seed medium such as vermiculite, sand or other disease-free planting material helps prevent these problems.

Help elderly with vision

Eyesight is not as sharp as it once was for many older adults. To protect from accidental poisonings, it's a good idea to identify all medications with large lettered labels, bright colors, or individually marked stoppers.

And, it's a good idea to hang a magnifying glass by the medicine cabinet to help identify labels. Keep lighting bright where medication is stored and try to store prescription drugs in a separate compartment from non-prescription items.

Be safe this winter

Wood and coal burning stoves have been associated with many home heating accidents. Wood stoves, fireplaces and their chimney assemblies were involved in an estimated 67,500 residential fires in 1987, resulting in 120 deaths. Dangers associated with this type of supplemental heating system include fires resulting from improper installation and maintenance and creosote buildup.

Due to the number of accidents that have occurred, the CPSC has issued a labeling rule on wood stoves to provide a permanent reference to proper installation, operation and maintenance procedures and to raise consumer awareness of these dangers.

When installing a wood burning stove, make certain that it is placed on the proper surface and at the distance from the wall specified by the manufacturer.

Most fires associated with wood heating appliances have occurred in the chimney. Such fires can result from poorly constructed or

damaged masonry chimneys, poor installation of factory built chimneys, or the ignition of creosote, a tar-like residue which builds up in chimneys over time.

To reduce the risk of fire, existing masonry chimneys should be inspected and repaired if necessary, and factory-built chimneys should be installed strictly according to the manufacturer's instructions. The CPSC recommends that consumers have their chimneys checked by a qualified chimney sweep before, as well as during, the heating season to prevent dangerous creosote build-up and resultant chimney fire.

At the same time, both the fireplace and chimney should be checked for structural integrity. And as a final precaution, never burn trash, coal, charcoal, or plastics in your woodburning appliance. These items can overheat your stove or fireplace causing a fire. They can also cause a buildup of pollutants when burned in a fireplace. Always make sure the area is properly ventilated.

Pregnant women: Be cautious of food poisoning

Food poisoning can be deadly during pregnancy. Although young and middle-aged women may be able to eat unsafe food without severe consequences, food poisoning during pregnancy can result in death of the fetus. Like other high risk groups, including the elderly and persons with cancer, pregnant women should take special precautions to make sure that their food is safe to eat.

Careful handling of raw animal products is important for prevention of food poisoning. Salmonella, Listeria and other harmful bacteria live in the intestinal tracts of animals. These bacteria can be present on the raw meat, poultry, seafood and eggs that we buy.

To prevent spread of these bacteria, it's important to wash hands, utensils and work surfaces (such as cutting boards) after handling raw animal products.

Thorough heating of raw animal products destroys bacteria that may be present. Pregnant women should avoid raw or rare meat, undercooked poultry and seafood and runny eggs. Cold-smoked fish (such as lox) should also be avoided because bacteria that are especially harmful during pregnancy may not have been destroyed during processing.

When purchasing milk products, pregnant women should look for pasteurized milk, cream and cheese. The heat of pasteurization destroys Listeria bacteria which have caused deaths of fetuses in food poisoning outbreaks.

In general, heating foods before eating is a good safeguard during pregnancy. This includes vegetables such as carrots and potatoes as well as precooked foods such as deli meats and shell fish.

If using a microwave oven, make

sure that heating is adequate to kill harmful bacteria. Microwave cookery leaves cold spots that could be havens for bacteria. Use oven cooking bags to ensure even heating of meat and poultry. Check manufacturer's directions for power level and both cooking and standing times. Rotate foods during cooking and check for doneness before eating.

Foods must be handled with care after cooking as well. Temperature control is a safeguard to prevent food poisoning. Perishable foods should not be held at room temperature longer than two to three hours. Refrigerate leftovers promptly. This includes foods such as cream pie, sliced turkey, baked potatoes and pasta salad.

There's no substitute for proper temperature control. The toxin formed by Staphylococcus bacteria isn't destroyed during normal

cooking procedures. That means you can't always rely on reheating to make mishandled foods safe to eat.

Remember temperature control when bringing home any take-out food or "doggy bags", too.

By cleaning, cooking and cooling food safely, pregnant women can lower their risk of getting food poisoning from home-prepared foods.

Values change by generations

Values are commonly-held beliefs or standards that help rule an individual's or a family's decision-making. Simply put, values are what we believe is right and good. This seems to be a simple definition of values, but it is actually a very complex process. The complexity

of value development lies in the fact that they can, and do, change throughout the life cycle. Each new life experience brings opportunity for value development.

Not only do an individual's values change, but community values have changed dramatically in the past

few decades as well. In other words, the values that parents are teaching their children today are much different from the values they were taught as children. Just 40 years ago, the values that parents emphasized were obedience, conformity and respect for the home and church. Nowadays, parents are more likely to instill autonomy (independence), responsibility, initiative and tolerance. It is predicted that in the next 20 to 30 years, community values will undergo even more changes as today's teenagers become parents.

In a recent survey of American high school seniors, the two top concerns of the future were money and staying healthy (more specifically, paying for education and not contracting AIDS). Today's teenagers also expressed many concerns about the welfare of the country, citing drugs, the possibility of nuclear war and the destruction of the environment as posing serious threats in the future. No doubt these concerns will have a significant effect on the values that are held by the community and passed on to the next generation.

Removal of lead-based paint very difficult

No completely safe method exists for "do-it-yourself" removal of lead-based paint, according to the U.S. Consumer Product Safety Commission (CPSC).

Each of the paint removal methods—sandpaper, scrapers, chemicals and torches or heat guns, can produce lead fumes or dust. Fumes or dust can become airborne and be inhaled.

Moreover, dust can settle on floors, walls and tables, and cause problems. It can be ingested by children from hand-to-mouth contact. It can re-enter the air through cleaning (such as sweeping or vacuuming) or by movements of people throughout the house.

Lead-based paint should be removed only by professionals trained in hazardous material removal who follow detailed procedures to control and contain lead dust.

Lead-based paint may be found on any interior or exterior surface in an older home, particularly on woodwork, doors and windows. Heavily leaded paint was used in

about two-thirds of homes built before 1940, one-half of homes built from 1940 to 1960, and some homes built after 1960. In 1978, the CPSC lowered the legal lead content in most paint to 0.06 percent (a trace amount).

Lead-based paint is a major source of lead poisoning for children, and can affect adults. Lead poisoning can cause brain damage resulting in impaired mental functions. Lead poisoning in children can result in retarded mental and physical development and reduced attention span.

In adults, lead poisoning can cause irritability, poor muscle coordination, nerve damage to the sense organs and nerves controlling the body, and it may cause problems with reproduction (such as decreased sperm counts). Lead poisoning may also increase the blood pressure in adults.

Retarded fetal development can occur at even low blood lead levels. Thus, unborn children, infants, young children and adults with

high blood pressure are most vulnerable to the effects of lead.

Consumers themselves cannot tell if paint contains lead. Have old paint checked for lead content. Some local or state health or housing departments can suggest private labs or public agencies to test your paint for lead and how to obtain a sample for testing. If testing is unavailable or costly, assume that older painted surfaces contain lead.

Lead-based paint should be removed only by trained professionals in hazardous material removal who must follow detailed procedures to minimize, control and contain lead dust generated by the removal process. Question contractors about how familiar they are with the lead paint removal process. Here's what a reliable contractor should do:

- *Seal the room from the rest of the house. Remove all furniture, carpets and drapes.
- *Make sure workers wear respi-

rators designed to avoid inhaling lead.

- *Allow no eating or drinking in the work area. Remove all food and eating utensils then cover and seal all cabinets and food contact surfaces.

- *Keep children and other occupants (especially infants, pregnant women and adults with high blood pressure) out of the house until the job is done.

- *Dispose of clothing worn in the room after working. (Also work clothing should not be worn in other areas of the house.)

- *Clean up debris using special vacuum cleaners with HEPA (high efficiency particle absorption) filters. Use a wet mop on hard floor surfaces after vacuuming.

The U.S. Department of Housing and Urban Development (HUD) is evaluating methods for removal of lead-based paint. Congress asked HUD to develop a plan by September, 1990 for inspecting and

removing lead-based paint from private homes, reports Mary Ann Sward, Oregon State University Extension housing specialist.



Dust-free dusting possible

Keep furniture clean with treated cloths which gather dust instead of scattering it. Find a clean, lintless cloth. Place it in a small screw-top jar which has been coated with a few drops of furniture-polishing oil

or wax. Cover tightly and leave overnight. The cloth will absorb just enough oil or wax to dust and polish at the same time. (On waxed furniture surfaces, use cloths treated with wax. Oil will soften wax.)