



GVFP NEWS & VIEWS

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BRONCHITIS VS PNEUMONIA

It's the change of seasons, and everyone in the family is getting over a cold, but the noisy chest cough seems to be dragging on and on. You can hear it from anywhere in the house. Could it be bronchitis? Could it be Pneumonia?

Bronchitis

Doctors use the term, "bronchitis" to describe a superficial inflammation of the lower respiratory system, i.e. the lung airways (bronchi). In nonsmokers, bronchitis is usually caused by a virus that has first infected the nasal passages and upper airways, and then progressed into the chest.

Bronchitis is considered acute and is more easily managed when it occurs in people without a long history of smoking. Long-term smokers with chronic bronchitis or emphysema who develop a flare in symptoms are considered and treated differently than nonsmokers. The very elderly and those with chronic illnesses such as diabetes or heart disease are also approached with extra caution.

Treatment

Acute bronchitis in nonsmokers and healthy people is best managed symptomatically. In any inflammatory process with fever, the body consumes a great deal of water; making fluid replacement essential. Tylenol or Ibuprofen are effective in controlling fever. You can best achieve cough suppression with dextromethorphan, and reduce sputum production and the relief of chest congestion with guaifenesin.

The same infectious (viral or bacterial) organisms usually cause bronchitis or pneumonia, and the severity of the illness often relates to the overall health of the patient.

Bacterial Pneumonia

Bacterial pneumonia differs from bronchitis in that it is an invasive infection of the lower respiratory system. The infection has broken through the wall of the bronchi and entered into the tissues of the lung. The infected lung

tissue has blood vessels that may transport the infectious bacteria to other parts of the body, causing bodily symptoms (see below) and potentially, a more serious disease process.

For nonsmokers:

In both pneumonia and bronchitis, lung inflammatory symptoms such as cough, shortness of breath, and sputum (lung mucus) production are present. Moreover, fever, sweating, and chills may be common with either bacterial or viral infections. Because there is much overlap, it is impossible to distinguish a severe case of viral bronchitis from pneumonia without a physical exam or a chest X-ray.

For the purposes of this publication, however, there are some indicators that pneumonia is present and that you should seek medical attention:

- Chest pain or back pain with respiration or cough (a sign of tissue invasion)
- large amounts of greenish or brownish sputum
- a heart rate greater than 100 beats per minute
- severe and persistent symptoms that may include: fever, chills, fatigue, perspiration, cough and shortness of breath

If you have these symptoms, always seek medical attention. Finally, the elderly and those with more severe, chronic health problems should always consult a physician, for many of these guidelines, for several reasons, may not apply.

For smokers:

Years of smoking alters the lungs normal ability to clear bacterial and viral infections. Furthermore, chronic scarring and an impaired lung immune system make it much easier for bacteria to thrive in a smoker's lungs. Thus, we recommend that all smokers with a history of chronic bronchitis seek medical attention if they develop an acute flare in their respiratory symptoms. See below for more information on chronic bronchitis and emphysema.

If both bronchitis and pneumonia are caused

by bacteria, then they are treated with antibiotics. However, if a virus is the cause for both the diseases, then there is no drug to alleviate the problems and the infection usually runs its own course. The bronchitis caused by viral infections usually lasts for a week or two, while an individual with pneumonia can take several months to recover completely.

If you are otherwise healthy and your symptoms of bronchitis do not improve with conservative measures, a short course of antibiotics may help. You may also be given an inhaler.

SAD (SEASONAL AFFECTIVE DISORDER)

Like many people, you may develop cabin fever during the winter months. Or you may find yourself eating more or sleeping more when the temperature drops and darkness falls earlier. While those are common and normal reactions to the changing seasons, people with seasonal affective disorder (SAD) experience a much more serious reaction when summer shifts to fall and on to winter.

With seasonal affective disorder, fall's short days and long nights may trigger feelings of depression, lethargy, fatigue and other problems. Don't brush this off as simply a case of the "winter blues" that you have to tough out on your own.

Seasonal affective disorder is a type of depression, and it can severely impair your daily life.

Seasonal affective disorder is a cyclic, seasonal condition. This means that signs and symptoms usually come back and go away at the same times every year. Usually, seasonal affective disorder symptoms appear during late fall or early winter and go away during the warmer, sunnier days of spring and summer. But some people have the opposite pattern, developing seasonal affective disorder with the onset of spring or summer. In either case, problems may start out mild and become more severe as the season progresses.

There's no known way to prevent the development of seasonal affective disorder. However, if you take steps early on to manage symptoms, you may be able to prevent them from getting worse over time. Some people find it helpful to start treatment before symptoms would normally start in the fall or winter, and then continue treatment past the time symptoms would normally go away. If you can get control of your symptoms before they begin, you may be able to head off serious changes in mood, appetite and behavior that can disrupt your daily life.

Most people experience some days when they feel down. But if you feel down for days at a time and you can't seem to get motivated to do activities you normally enjoy, see your family doctor.



Roasted Root Vegetables with Walnut Pesto

Ingredients

Vegetables:

- 3 cups (1" thick) slices carrot (about 1 lb.)
- 3 cups (1" thick) slices parsnip (about 1 lb.)
- 3 cups (1") cubed peeled turnip
- 3 cups trimmed halved Brussels sprouts (about 1 lb.)
- 2 shallots, peeled and quartered
- 1 large onion, cut into 8 wedges
- Cooking spray
- 1/2 teaspoon salt
- 1/4 teaspoon freshly ground black pepper

Pesto:

- 2 cups basil leaves
- 1/4 cup (1 ounce) grated fresh Parmigiano-Reggiano
- 1/4 cup coarsely chopped walnuts, toasted
- 4 teaspoons extravirgin olive oil
- 2 tablespoons water
- 1 tablespoon fresh lemon juice
- 1/2 teaspoon salt
- 1 garlic clove, peeled



Preparation

Preheat oven to 425°.

To prepare vegetables, place first 6 ingredients in a single layer on a jelly-roll pan coated with cooking spray. Lightly coat vegetable mixture with cooking spray.

Sprinkle evenly with 1/2 teaspoon salt and 1/4 teaspoon black pepper; toss. Bake at 425° for 1 hour or until browned. Transfer vegetable mixture to a large bowl.

To prepare pesto, combine basil leaves and remaining ingredients in a food processor; process until smooth, scraping sides. Spoon basil mixture over vegetable mixture, and toss to coat. **Yield:** 10 servings (serv sz 1 cup)

DECEMBER 2012

Sun	Mon	Tue	Wed	Thu	Fri	Sat
TIP OF THE MONTH CHOOSE THE DAY TO QUIT SMOKING MAKE AN EARLY NEW YEARS RESOLUTION						1 Closed
2	3	4	5	6	7	8
9 happy hanukkah	10	11	12	13	14	15
16	17	18	19	20	21 	22 Closed
23	24	25 	26	27	28	29 Closed
30	31 Closed					

GVFP LET'S GO!

GVFP offers some suggestions:

- Set your quit date a few weeks in advance. Slowly cut down and create a plan for quitting. Avoid places where you once liked to smoke.
- The day you quit, keep yourself busy. Toss out all your cigarettes.
- Understand that nicotine replacements (such as gum or a patch) can help you quit, but you probably will still have to fight the urge to smoke.
- Quit forever, and don't allow yourself an occasional cigarette.
- Tell yourself that you cannot give in and smoke.
- Seek help, such as a smoking cessation program, if you need it. The Quitline is a great resource.

Call 1-800-QUIT-NOW (784-8669)

Prevent Carbon Monoxide (CO) Poisoning

You Can Prevent Carbon Monoxide Exposure

- **Do** have your heating system, water heater and any other gas, oil, or coal burning appliances serviced by a qualified technician every year.
- **Do** install a battery-operated or battery back-up CO detector in your home and check or replace the battery when you change the time on your clocks each spring and fall. If the detector sounds, leave your home immediately and call 911.
- **Do** seek prompt medical attention if you suspect CO poisoning and are feeling dizzy, light-headed, or nauseous.
- **Don't** use a generator, charcoal grill, camp stove, or other gasoline or charcoal-burning device inside your home, basement, or garage or near a window.
- **Don't** run a car or truck inside a garage attached to your house, even if you leave the door open.
- **Don't** burn anything in a stove or fireplace that isn't vented.
- **Don't** heat your house with a gas oven.

CO poisoning is entirely preventable. You can protect yourself and your family by acting wisely in case of a power outage and learning the symptoms of CO poisoning.

The most common symptoms of CO poisoning are headache, dizziness, weakness, nausea, vomiting, chest pain, and confusion. People who are sleeping or who have been drinking alcohol can die from CO poisoning before ever having symptoms.

Annually, over 450 people die in the US from unintentional, non-fire related CO poisoning. Learn how to prevent CO poisoning.

December is...National Drunk and Drugged Driving Prevention Month, National Aplastic Anemia Awareness, National Hand Washing Awareness, Safe Toys & Gifts Month, World AIDS Day (December 1), International Infection Prevention, Write a Friend month, Bingo Month and Eat Oatmeal for Health Month.

DID you KNOW?

According to the National Institutes of Health, the average child will get **8 to 10** colds in a typical year.



DRESSING TIPS FOR SAFE OUTDOOR WINTER PLAYTIME:

- Dress kids in layers
- Choose mittens, not gloves to keep fingers warmer
- Use a stocking cap or fleece-lined hat to keep the head warmer and protect the ears from frostbite
- Choose boots with enough room for extra-thick socks
- Insist on UV-protective sunglasses to block snow glare
- Always have kids wear sunscreen, even when it's cloudy



The CDC and Prevention say hand-washing is the single most effective way to prevent the transmission of disease.

Clean Hands, Prevent Illness, Save Lives

