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yale health care

NEWS FROM THE YALE HEALTH PLAN

VOL. I NO. 2

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No Magic Pills: Managing Obesity

(PART 1 OF 2)

DEENA MARIANO, APRN

Nurse Practitioner, Internal Medicine

Obesity is an increasingly common and serious health problem in the United States. It is estimated that one out of every three American adults is obese. While the prevalence of obesity is blamed on our increasingly sedentary lifestyles combined with the availability of palatable, high-fat foods, not everyone who is sedentary or eats fatty foods becomes obese. There is increasing evidence that a tendency toward obesity is inherited.

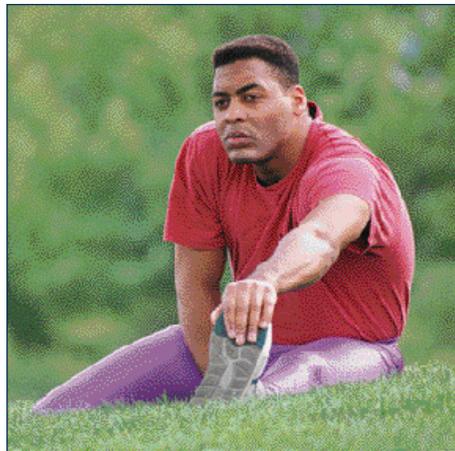
continued on page 2

Time to Get Moving

MICHAEL GOULET, RPT

Manager, Physical Therapy Department

The days are growing longer, the warm weather is approaching and you're keeping your New Year's resolution to get moving. Before you can begin an exercise program, you need to determine your goal. Are you exercising to lose weight? To get in shape for tennis?



To improve your overall fitness? Once you've established the why of exercise, it's time to determine the how.

What is the best type of exercise? There are two types of exercise—aerobic and anaerobic; each accomplishes a different goal. Aerobic exercise builds cardiovascular endurance. It uses large groups of muscles, gradually warming them up, keeping them active for at least 20 minutes and gradually cooling them down.

Anaerobic exercise, on the other hand, is explosive activity over a short period of time, with little warm up. Weight-lifting and sprinting are examples of anaerobic exercise. So, if your goal is to improve your tennis game, you need to participate in both types of exercise, but if you want to help reduce blood pressure, focus on aerobic exercise.

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C A L E N D A R

Mondays
Weight Watchers at Work

Tuesdays/Wednesdays
CPR Classes for Adults

Fridays
Early Pregnancy Class

FOR MORE, TURN TO CALENDAR LISTINGS ON PAGE 8

Important telephone numbers

Urgent Visit	432-0123
<i>Open 24 hrs/day, seven days per week</i>	
Information	432-0246
Pharmacy	432-0033
<i>Hours of operation</i>	
Monday- Friday	7:30 am-6:30 pm
Saturday	8:30 am-3:30 pm
Patient Representative	432-0109
Medicare/Retiree Coordinator	432-8134
Outpatient Referrals/Claims	432-0250
Inpatient Care Facility	432-0001

in touch

Physical Therapists Offer Healing and Homework

RHEA HIRSHMAN

Contributing Writer



YHP'S MICHAEL GOULET, LINDA BOYNTON AND MAGGIE DAVIDOWICZ

You're chasing Frisbees on the first warm day and suddenly your ankle goes one way while you go the other. Or, obsessed with a project, you've been slumped over the computer for weeks. You've hardly eaten, let alone taken time for stretching and exercise; now your neck and back are screaming. Or, you've had joint replacement surgery and are facing rehabilitation.

Any of these or a host of other diverse scenarios (including strokes, non-varsity athletic injuries and functional limitations due to illness) could put you in the capable hands of YHP's physical therapy department. Open five days a week from 8AM-6PM, the department logs well over 9,000 visits a year by patients ranging from teen-age undergraduates to employees in their 60s.

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OBSESITY

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According to the American Association of Clinical Endocrinologists, obesity is a "complex multifactorial condition characterized by excess body fat." It is defined in one of the following ways:

- In men, a body mass index (BMI) greater than 28, with more than 25% body fat.
- In women, a BMI greater than 28, with more than 33% body fat.
- In either gender: a BMI greater than 27, with one or more health risks that could be significantly reduced by weight loss, such as high blood pressure, high cholesterol, adult-onset diabetes, degenerative arthritis, sleep apnea or lung disease.

To Calculate the BMI:

Example: for a person who is 5 feet, 5 inches tall, weighing 150 pounds:

1. Multiply weight (in pounds) by 703 ($150 \times 703 = 105,450$)
2. Multiply height (in inches) by height (in inches) ($65 \times 65 = 4225$)
3. Divide the answer in #1 by the answer in #2 to get your BMI ($105,450$ divided by $4225 = 24.9$)
4. BMI = 25 (rounded off)

Obesity can complicate or contribute to multiple medical problems, including non-insulin-dependent diabetes mellitus, high blood pressure, high cholesterol and blood lipids, coronary artery disease, and degenerative joint disease. Like many chronic illnesses, obesity cannot be rapidly resolved.

However, behavior therapy, including dietary modification and regular exercise, can be very useful in managing obesity. Although weight loss from behavior therapy is more gradual than from diet pills, behavior therapy maintains the loss more successfully. Regular exercise is key to successful weight loss. The idea is to burn off more calories than are taken

continued on page 7



from the desk of

PAUL GENECCIN, MD

DIRECTOR, YALE UNIVERSITY HEALTH SERVICES

Thank you for the positive feedback on our first issue of *Yale Health Care*. I hope that you will find this issue just as informative. In this article, I would like to relate some information about the state of the health plan.

As you know, Yale Health Plan is one of several health care options offered to Yale University employees and faculty. Students must also make health care choices. Although every full-time student at Yale has access to YHP primary care services, they must decide whether to enroll as full members by purchasing our optional plan covering hospitalization, specialty care and other services. Students may waive the YHP optional coverage if they choose an alternate plan.

The good news is that, among Yale employees and faculty who choose health care offered by the University, 75% are currently

enrolled in Yale Health Plan. Among graduate and professional students, nearly 80% elect to become full YHP members. And even among undergraduates, of whom the vast majority are young enough to continue on parental insurance policies, almost 40% elect full YHP coverage. Finally, over the year, YHP has gained a significant number of members both through selection of YHP during open enrollments and choice by new employees. I could let the numbers speak for themselves, but please indulge me as I sum up the data: our enrollment is at an all-time high and Yale Health Plan is thriving.

While these statistics are impressive, we must also look at long-term trends. Headlines remind us daily of health plans growing so fast that they cannot keep track of their membership or fulfill financial obligations. We read about radical changes in these health plans, including downsiz-

ing, spiraling premiums and, in some cases, reductions in benefits. Therefore, it is important to note YHP's remarkable stability. Our gains have been consistent and incremental. We have not experienced significant fluctuations during the 27 years in which Yale Health Plan has been Yale's best and most cost-effective health option.

To you, our members, the plan's vitality means long-term stability—you are part of a plan that can put its energies where they belong. High enrollment in YHP does not lead to complacency but, instead, to rising standards. We are committed to focusing on improvements in clinical services, the benefits structure, our physical facility and support systems. I look forward to telling you about those advances in future issues of *Yale Health Care*. Meanwhile, I invite your continued feedback and thank you for your support of Yale Health Plan.

EXERCISE *continued from page 1*

Regardless of the type of exercise you choose, there are several factors you'll need to keep in mind if you want to be successful in maintaining an exercise program. Establish a realistic workout regime rather than setting unrealistic goals. Even exercising four days a week for 20–30



minutes can provide many benefits. Choose activities that you enjoy; if you detest swimming, don't make it a part of your routine. Research shows that you are more likely to stay with an exercise program if you look forward to doing it rather than seeing it as a chore. Exercise with a companion. A brisk walk with a friend at the end of the week is a great way to get an aerobic workout and to catch up on the week's happenings. Vary your activities. Walking, swimming, roller blading, bicycling, riding a station-

ary bike, and using a stairmaster, ski machine or treadmill all provide a good aerobic workout. Remember that all exercise programs should start and end with a good stretching program for your arms, legs and trunk. To achieve the most benefit, a stretch should be held for at least 30 seconds.

Finally, especially if you've been sedentary for a while, check with your health care provider to develop a program that you're likely to stick with and that will help you achieve the results you want. Enjoy!



WE ASKED LORETTA MILLER, THE MANAGER OF THE YALE Health Plan Medical Records Department, to answer some frequently asked questions about your medical records.

questions, answers

By answering your questions, this column will help you get the most out of your YHP membership.

*Send your questions to:
Member Services Q & A,
Yale Health Plan,
17 Hillhouse Ave.,
New Haven, CT
06520-8237.*

*We'll get them answered
by someone in the know.*

Q. How long do you normally keep a patient's medical records?

A. Medical records are kept for 7 years. If you stayed in our in-patient care facility (ICF) or if you were born or were pregnant while on the Yale Health Plan, your records will be kept for 10 years. If you were injured on the job while employed at Yale University, your records will be kept for 20 years.

Q. How do I get copies of my medical record?

A. By filling out a release form or by writing a letter requesting copies of your records. Be sure to include your date of birth, subscriber's social security number, and a non-computer generated signature. The release may be faxed, dropped off or mailed to: Yale Health Plan, 17 Hillhouse Avenue, New Haven, CT 06520-8237. Fax: 203/432-1102.

Q. How long is a medical records release form valid?

A. For six months from the date of your signature.

Q. How long will it take to receive a copy of my record? Is there a charge?

A. It takes about two weeks. If the records are sent to another doctor

or school, there is no charge. Otherwise, the charge is 65 cents per page.

Q. Are medical records personnel allowed to give out medical records information over the telephone?

A. No. Only written information is provided and only upon written authorization by the patient.

Q. Are my immunizations in the medical record?

A. Immunizations are kept in the records.

Q. Are x-rays kept in my records?

A. No. The actual files are not kept in the medical records. These are kept in the radiology department. However, x-ray interpretation reports are kept in the medical records.

Q. Who has access to medical records?

A. To protect your confidentiality, your medical records are made available only to you and to those involved in your immediate care. Anyone else requesting your records (e.g., insurance companies, prospective employers) will not have access unless you give written permission.



Loretta Miller
Manager, Medical
Records Department,
Yale Health Plan

Spend a few minutes with Loretta Miller, YHP's new manager of medical records, and you won't ever take that room on the lower level for granted. Loretta is emphatic about the importance of her department: "If the providers don't have the information they need to take care of their patients, they can't. And that responsibility rests solely on us."

Although she had long been interested in medi-

cine, Loretta knew that she didn't want to provide direct services. "One of the reasons I chose this field," she laughs, "is that I didn't have to do physics or chemistry to get into it." She continues, "This was a way for me to be involved in medicine without treating patients—but still having a real impact on the way they are treated." Loretta sees her department's mandate as "providing accurate, timely information for patient care while absolutely protecting confidentiality."

Loretta, who came to YHP in January, graduated from Temple University in

Philadelphia with a degree in health records administration and is a registered records administrator (RRA). Before coming to Yale, she spent seven years as director of medical records at Windham Community Memorial Hospital in northeastern Connecticut.

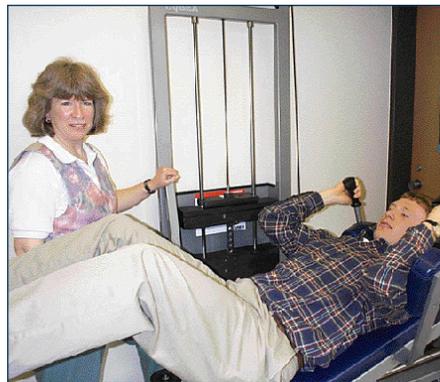
"The system here generally works well," Loretta notes, "although there are some processes we're working on to make it more efficient. There seems to be support for whatever you try to do to make things better. I'm looking forward to working with everyone here."

PHYSICAL THERAPISTS

continued from page 2

The staff includes athletic trainers, rehabilitation aides and part-time providers, as well as the three full-time therapists pictured: department head Michael Goulet, PT, MPH, who has been at YHP since October, 1996; Maggie Davidowicz, PT (at YHP since 1973) and Lynda Boynton, PT (at YHP since 1974). A physical therapist receives a Bachelor of Science degree, does an internship, and must pass state licensing exams.

Patients come in with a referral following a physician's diagnosis. After an evaluation, the therapist develops a treatment plan which can include home exercises, office treatments or both. A variety of methods and machines—collectively called "modalities"—are used



to, as Michael puts it, "restore a person to an optimum level of functioning."

While some modalities—the weights, the ultrasound machine, the hot and cold packs, the whirlpool tub, the Swiss balls—are highly visible, Michael observes that physical therapy is "more of an art than a science. Treatments have to be individualized. And you have to motivate people." Maggie and Lynda concur. As Maggie

says, "A big part of what we do is one-on-one education."

Most people will leave their sessions with "homework"—exercises or lifestyle changes that are essential to the healing process. Maggie asserts, "You cannot fully recover just by having someone put hot packs on you." Michael adds, "Most of these changes are for life. The patient has to follow through or they're probably going to see us again." And they all admit it can be frustrating when people don't follow treatment plans that could keep them healthy."

But, Michael notes, "Having worked in several other facilities, I must say that this is the most well-educated and motivated population I've seen." Maggie muses, "Probably why I've stayed for 25 years is that most of our patients work hard and get better. And we have the most interesting conversations."

information

BOOK REVIEW

The LEARN Program for Weight Control

Kelly D. Brownell, PhD,
American Health
Publishing Company, 1997

Reviewed by LINDA BELL,
MS, RD Nutritionist

Weight loss fads come and go,
but the foundation for permanent



weight control remains the same: successfully adopting a lifestyle that promotes good nutrition, exercises and healthy attitudes and behaviors toward food. These tenets are explained in an entertaining, easy-to-read format by Brownell, an acclaimed expert in the field of weight control, in his seventh edition of the LEARN Program for Weight Control. LEARN stands for Lifestyle, Exercise, Attitudes, Relationships, Nutrition. Each of the sixteen chapters of this book deals with these issues in a realistic and easily understood way. Illustrations and cartoons help clarify Brownell's points. Much emphasis is placed on encouraging each individual to assess food behaviors and, when necessary, develop practical strategies for change. Useful charts for these processes are provided throughout the book. The book also includes nutrition information on a variety of topics, and lists support groups, cookbooks, and other resources to help people achieve and maintain weight goals. This book is available for YHP members to review in the Betty Stowe bookshelf on the 4th floor of the University Health Services Center (17 Hillhouse Avenue). It can be ordered from bookstores or purchased directly from the publisher at 800/736-7323.



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Outside resources available to YHP members

Keeping Fit Throughout Life

Payne Whitney Gymnasium

Tower Parkway
Phone: 203/432-1444

Payne Whitney claims the distinction of being the largest gym in the western world. The rambling structure contains pools, squash courts, rowing tanks, indoor jogging tracks, specialized gymnasiums, a golf practice cage, steam rooms and saunas, and all sorts of exercise and weight equipment. Yearly course offerings range from ballroom dancing to therapeutic massage.

Locker and towel services are available for a fee, and require a registration sticker on your ID, which may be obtained at the membership office.

American Alliance for Health, Physical Education, Recreation & Dance

<http://www.aahperd.org>

For more than 100 years, the American Alliance for Health, Physical Education, Recreation & Dance (AAHPERD) has promoted programs to improve Americans' total health and fitness. Through its national and district associations, AAPHERD, along with the Research Consortium, promotes and supports creative and health-enhancing life-styles; ensures quality programs in health, physical education, recreation, dance, and sport; and provides members with professional development opportunities.

Fifty-Plus Fitness Association

<http://www.50plus.org>

The association promotes improved physical fitness for older adults and provides education showing that misuse and disuse of the body and mind are more the cause of disability than chronological age alone.

healthy ideas

Leaves of Three? Let Them Be!

BARBARA COLLINS, RN

Program Coordinator, Health Education and Preventive Medicine

Poison ivy—a common summertime hazard—is an allergic “contact” dermatitis or irritation of the skin caused by contact with the thick, oily resin of the plant *Rhus radicans*. The rash is not spread by direct contact with the blisters, or by bathing or showering. New lesions will not appear unless there is contact with the resin.

Recognizing the plant

- Has three leaflets with smooth or notched edges (depending on the species).
- Is green in the summer, red in the fall.
- Grows as a woody, rope-line vine, a trailing shrub on the ground, or even erect without support.

Signs and symptoms

An itchy skin eruption usually appears within 2 days after exposure and often lasts longer than 10 days. Occasionally a reaction will occur within a few hours if one is extremely sensitive to the resin.

Treatment

- After contact, wash affected area as soon as possible with mild soap and water to remove the resin.
- Keep the rash clean, dry and well-aired.
- Wear soft, non-irritating clothing.
- To minimize risk of infection, avoid scratching the blisters.
- Over-the-counter topical steroid creams used sparingly may help relieve itching. A drying lotion (Calamine) or a soaking solution (e.g., Domboro astringent or Aveeno Bath) may provide comfort.



- If rash is severe or involves the eyes, face or genitalia, contact your health care provider.

Prevention

- First, learn to identify the plant and avoid contact with it. The itchy rash is caused by the thick resin, which is released from broken or damaged leaves, stems or vines, even in winter. Contact with clothing, pets, tools, and sports equipment contaminated with the resin will also produce a reaction. Careful washing of these articles will prevent re-exposure.
- Remove any plants growing around your home and yard, either physically or chemically. **Do not burn plants.** Smoke from burning plants may cause dermatitis or lung reactions in sensitive individuals.
- Wear protective clothing (long sleeves, long pants, and socks) when walking in fields or wooded areas. Wash clothing as soon as possible.

Most of all, remember: the rash caused by poison ivy does finally go away.

Pamphlets prepared by and available from the YHP Center for Health Education & Preventive Medicine

OBESITY

continued from page 2

in. Recommended programs involve twenty minutes of aerobic workout (such as jogging, swimming, brisk walking, bicycling) three to five times weekly. Regular exercise burns calories faster, even when you are sitting still, because it increases metabolism (the rate your body burns calories) and builds muscles. Muscles burn calories faster than body fat.

Given the cultural obsession with slimness and the societal and psychological stigma of obesity, it is not surprising that 50% of American women and 25% of American men attempt to lose weight. It is estimated that \$30 billion is spent annually on weight loss treatments. Many individuals are in search of a “magic pill.” Recently there has been a dramatic push among researchers and pharmaceutical companies to develop the perfect diet pill. None exist. In addition, most people who want to lose weight are not candidates for diet pills. These pills should not be considered unless the health risks from obesity outweigh the risks of potential side effects or adverse reactions from these medications. The second installment of this article will provide information on current diet pill options.

calendar

O N G O I N G W E L L N E S S P R O G R A M S

Early Pregnancy Class

Classes are held at YHP in room 405 on the 3rd Friday of each month, 10:00–11:30 a.m. for Yale Health Plan members. To register, call the ob/gyn Department at 432-0222 or stop by the ob/gyn appointment desk. We encourage you to bring a supportive person to the class.

Smoking Cessation Workshop

Thursdays, noon–1:00 p.m. in room 406. This workshop is offered free of charge to Yale

Health Plan members. Pre-registration requested. To register, call 432-1826.

CPR (Cardio-Pulmonary Resuscitation) Classes for Adults

Adult heart-saver classes are held in room 405. The fee is \$35 and includes CPR card and course materials.

Classes will be held Tuesday and Wednesday, June 16–17. Preregistration and attendance at both sessions is required. To register, call 432-1892.

Weight Watchers at Work

Mondays, 12:15–1:00 p.m. in room 405 at YHP. You can join any time. For information, call 432-1892.

Health Risk Assessments

Screenings include a cholesterol level for YHP members. Blood pressure screenings and an assessment questionnaire are offered to the entire Yale community. For information, call 432-1826.

ADDITIONAL PARKING FOR YHP PATIENTS

We are delighted to announce that we have acquired Lot #37 on Trumbull Street to be used for YHP outpatient parking.

Access to our services is our first priority and the new parking area with its additional 20 spaces will make our members' visits to our facility much more convenient.

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