Visiting Hours Tips For Having A Safe Picnic

By Avera Sacred Heart Hospital Dietitians

Did you know that each year roughly one out of six Americans (or 48 million people) get sick, 128,000 Americans are hospitalized and 3,000 die from foodborne diseases? As picnic season is underway, don't let the uninvited guest of a foodborne illness ruin your outing! Enjoying a picnic during a beautiful summer day is a great way to socialize with friends and family, but don't forget to remember these tips to make your day fun and safe.

1) Wash your hands! Half of all food-borne illness can be eliminated by proper hand-washing. It's never too early to start teaching children how to wash their hands correctly. Hands should be washed in warm water with soap before cooking foods and after handling raw meat, seafood and poultry. Hands should be washed for 20 seconds, or the same time it takes you to sing the "Happy Birthday" song twice. Don't forget to wash your cooking surfaces and replace your dishcloths and sponges on a regular basis.

2) Keep raw meats and ready-to-eat foods separate. Be sure to place your raw meat on the bottom shelf in your refrigerator and below any ready-to-eat foods such as fruits and vegetables. Also, remember to use a

clean serving dish and utensil for any cooked meats that you are serving to your family and friends. When dining outside, be sure to bring two coolers with you. Put raw meats in one cooler and ready-to-eat foods in the other.

3) Cook to proper food temperatures. The only way to make sure you are cooking foods to their proper temperatures is by using a meat thermometer. They are a very inexpensive way of making sure you save a trip to the emergency room! Cook ground meats to 160 degrees; poultry to 165 degrees; steak/roasts to 145 degrees; pork to 145 degrees with fresh, raw ham to 160 degrees; and egg casseroles to 160 degrees. Also, don't forget to reheat any leftovers to 165 degrees before being served.

4) Stay out of the "dan-ger zone"! Food should not be left out longer than two hours at one time. Your food should be kept below 40 degrees or above 140 degrees to prevent it from being in the "danger zone." This is especially critical at picnics and pot-luck dinners when the time passes by fast and food is nibbled on throughout the day. Be sure to have coolers and ice on hand or a refrigerator nearby to store food.

By remembering these four tips, your picnic outing will be a safe and memorable one!

Farm Families Reflect Changes

BY DR. MIKE ROSMANN

The social structure of the American family is changing and farm families are in step with these changes. The Pew Research Center released two reports recently (May 29 and June 11, 2013) that document significant behavioral and demographic shifts in families over the past 50 years.

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In 1960, 3.5 percent of married mothers in the U.S. were the primary wage earners in their families. That percentage rose to 15 percent in 2011. Single mothers who were the sole providers for their families rose from 7.3 percent to 25.3 percent during that same timeframe.

Mothers are now the sole or primary provider in more than 40 percent of U.Š. families. Farm families are changing as well, with more than a million female farmers who are the primary (14%) or secondary (16%) farm operators, according to an April 29, 2013 USDA report.

Women are entering agriculture at a faster rate than men; 19 percent more women entered farming in 2002 to 2007, compared to 7 percent more farmers overall, says the 2007 Census of Agriculture. But their farms are smaller and only 5 percent of female-operated farms have annual gross sales of \$100,000 or more. Most rely on off-farm jobs that supplement their agricultural enterprises.

The most recent Census of Agriculture, which farmers completed earlier this year for the 2012 crop year, will likely indicate even more involvement of women in agriculture. Females have increasingly gravitated toward agricultural training in high school and college and comprise 44 percent of the current National FFA Organization membership.

Total family income is higher when women are the primary wage earners in two-parent families, than when men are the primary providers, according to the recent Pew reports. Wives are becoming better educated but still lag behind their husbands overall, for only 23 per-



Dr. Mike ROSMANN

cent of families has a mother who is more educated than her husband.

Women are replacing men in some of the better-paying agriculture-related careers that require advanced education, such as veterinary medicine. where the 2010 nationwide class of graduates was 77 percent female.

Women are increasing rapidly in agronomy, marketing and in the USDA.

As might be expected, the roles of fathers in families are changing as women enter the U.S. workforce. In 1965 fathers spent 2.5 hours per week with their children, but in 2011 fathers spent 7.3 hours weekly with their children, according to the Pew Research Center.

Fathers also spend more time these days helping with housework (9.8 hours per week in 2011) whereas in 1965 fathers spent about half that amount of time helping with housework. Fathers now are the stay-at-home parent in nearly 190,000 households, according to the 2010 U.S. Census.

A recent study by University of Missouri researcher, Adam Galovan, involving 160 married parents with children, indicated that couples were happiest when the fathers helped with house-hold chores and child care than when the fathers participated little in these activities. Research shows that children of couples who shared parental duties were better adjusted than children of couples who did not share parental duties.

Fathers don't get to spend as much time with their newborn or newly adopted children as the mothers. In the U.S., paternity leave averages less than a week, while maternity leave at the same companies averages six to twelve weeks.

Most European countries offer longer maternal and paternal leave for newborn care and child adoption. In many European countries new mothers are guaranteed job security for six months to three years, while the fathers have several weeks' paternity leave.

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Many U.S. farm and ranch couples had to share roles out of necessity during the Farm Crisis of the 1980s, while the general U.S. trend toward sharing roles occurred gradually over a longer time. Several studies that examined farm and ranch families during the Farm Crisis (e.g., Carson, Araquistain, Ide, Quoss et. al, 1994; Rettig, Danes & Bauer, 1991; Lobao & Meyer, 1995) determined the families who coped best were those who shared their strengths in running the agricultural operation and the household.

Stressed farm people who were assisted emotionally and financially by their partners during this difficult time had less need for professional behavioral health services. Adversity has always been a stimulus for farm families to adapt.

The current agricultural population are the survivors of previous episodes of stress that sorted out those who were less successful. Survivors relied on their genetic predispositions to adjust to change and knowledge acquired from their predecessors in agriculture to somehow carry on.

We know agricultural producers have strong inclinations to do what it takes to help humans endure, for farm and ranch people are endowed with powerful drives to care for the families, communities and humans in general. A successful aging farmer once told me he and his wife "hang in there together" whenever a difficult financial era occurs.

This couple is wealthy and healthy today.

Dr. Rosmann is a Harlan, Iowa farmer and psychologist. He can be contacted at: www.agbehavioralhealth.com.

Sponsored By Lewis And Clark Behavioral Health

Yankton Rural AHEC Receives Large Grant

Yankton Rural Area Health Education Center (YRAHEC) is the recipient of a one-year Community Action Grant from the American Heart Association for 2013-14. The Community Action Grant initiative is designed to help achieve the American Heart Association's mission: to build healthier lives, free from cardiovascular diseases and stroke.

Projects were asked to focus on one or more of "Life's Simple 7,"the seven key factors to good health

Affiliate. YRAHEC received \$3.000 in funding to support the 4-H Emergency Life Saving Project, which will train 4-H leaders and youth to properly respond to a sudden cardiac arrest emergency by knowing how to administer CPR and use an automated external defibrillator (AED) increasing a victim's likelihood of survival.

According to Bart Hallberg, Community Program Manager of YRAHEC, "We are delighted to receive this funding from the American Heart Association, which

Delayed Alzheimer's Diagnoses Troubling

BY ANITA CREAMER © 2013 The Sacramento Bee

SACRAMENTO, Calif. -Claire Schooley tried for several years to get doctors to diagnose what was going on with her husband, David, now

57. He would ask her the same questions again and again, never remembering the answers. He would grow confused. Two years ago, on a trip to San Jose with their kids, now ages 6 and 12, he drove 60 miles in the wrong direction from their hotel, insisting the whole time he knew where he was going.

Maybe his memory loss was the result of depression over two job losses, most recently in 2009, doctors told the Sacramento couple. Maybe it was stress. He was growing silent and distant, increasingly lost in his own world. "I'd see him sitting in front of the TV at home," said Claire Schooley, 45, a network engineer. "He'd say he was taking a break, but he'd forgotten what he was doing or what room he was in. "He never was like this before. We were having a tough time. I knew in my heart there was something wrong. Two days before Thanksgiving 2012 – and almost two years after he sought help from his primary care physician - David Schooley finally was diagnosed with Alzheimer's disease. For people with the degenerative brain disease, delays in diagnosis can exact a steep cost. Without timely diagnosis, people with Alzheimer's lose valuable months when medications can most effectively slow their memory loss. The delay in diagnosis robs families of the chance to enjoy their time together and make financial and legal plans for the future. Alzheimer's is now the nation's sixth-leading cause of death, with 5.4 million people affected. Even so, physicians can be slow to identify the disease in the elderly, despite the fact that old age is the greatest risk factor. And doctors can be even more reluctant to diagnose people below the age of 65 who suffer from the rare, early-onset form of the illness. "Honestly, it's a routine thing that families in general try to get the person seen by a knowledgeable physician for more than a year, even a couple of years," said neurologist Dr. Charles DeCarli, director of the UC Davis Alzheimer's Dis-

"I'd see him sitting in front of the TV at home. He'd say he was taking a break, but he'd forgotten what he was doing or what room he was in."

CLAIRE SCHOOLEY

ease Center. The U.S. Centers for Disease Control and Prevention estimates that only 4 percent of Americans with the disease are younger than 65. But with the aging of the baby boom generation — and the coming Alzheimer's epidemic, projected at 14 million cases by 2050 — the hard numbers behind that younger-onset percentage continue to rise.

Typically, experts say, families end up frustrated in seekfour times more frequently than patients without dementia, said DeCarli.

Beyond the health consequences and frustration, families of people with early onset Alzheimer's also deal with the fact that delayed diagnosis forestalls the process of apply-ing for Social Security disability payments.

And, said the Alzheimer's Association's Edgerly: "The travesty of not getting diagnosed is that people are alone. They're alone, and they have no idea what's going on. It's very sad.'

After long delays finally gave way to a referral to a neurologist, Claire Schooley hoped for a diagnosis for her husband. By that time, she suspected he might have Alzheimer's.

outlined on www.mylifecheck.org, and/or align with one of the association's strategic focus areas: advocacy; CPR & first aid: quality and systems improvement; and health equity.

YRAHEC is one of 29 grant recipients, out of a total of 172 applicants, across an 11-state region served by the American Heart Association's Midwest

will enable us to educate people about how to live a healthy life and improve the heart health of our community.

For more information about the project, contact Hallberg at YRAHEC, 605-655-1400 or visit www.yrahec.org. To learn more about the American Heart Association and their Community Action Grant program, visit www.heart.org/.

Sanford School Students To Visit Program Sites

VERMILLION - Dean of the University of South Dakota Sanford School of Medicine Mary Nettleman, M.D., M.S., M.A.C.P. and Susan Anderson, M.D., Director of the school's Frontier And Rural Medicine (FARM) program will visit FARM's inaugural clinical training sites to present commemorative plaques recognizing the communities' participation in the program.

Ŏn July 11, they will visit Winner Regional Hospital at 2 p.m. in Winner. On July 12, they will visit Platte Health Center Avera at 10 a.m. in Platte before visiting Avera St. Benedict's Health Center Education Center in Parkston at 12:30 p.m.

Planned attendees for the ceremonies include each site hospital's CEO, FARM program physician coordinators and community ambassadors and FARM program students.

"We are eager for the opportunity to build strong, productive relationships with our outstanding FARM program communities," said Anderson. "These visits represent important steps toward that end-and toward a healthier South Dakota.'

Designed to combat the rural health care shortage, the FARM program is a unique opportunity for select groups of third-year medical students to obtain clinical training in carefully selected rural South Dakota communities-Milbank, Mobridge, Winner, Platte and Parkston. Beginning in July 2014, participants will spend nine intensive months working with local physicians and becoming immersed in the communities.

More FARM site visits will take place in early September 2013, including Mobridge and Milbank.

ing help, because primary care physicians aren't looking for dementia in people still in the prime of life.

Many providers find it hard to believe that someone so young could have dementia or Alzheimer's," said Elizabeth Edgerly, the Alzheimer's Association of Northern California's chief program officer. "It's really difficult. People

in their 50s are misdiagnosed with bipolar disorder or depression or even midlife crisis. Or they're told, 'Of course, you have memory problems. Who doesn't?"

When Bev O'Neil noticed that her friend and employer, Karen Cozakas, was asking the same questions over and over, she thought the memory loss might be related to menopause.

"We didn't know," O'Neil said.

Cozakas, now 60, a former technology executive who lives outside Placerville, was a competent, upbeat and organized woman. Then the bank began calling to report bounced checks: Karen, it turned out, could no longer balance her checkbook.

"It seemed everything was going fine, and all of a sudden, everything seemed to shift," said Cozakas. "It came on me so fast. Well, to me, it seemed fast. It seemed funny. I forgot little things here and there, but the little things got bigger and bigger. "And all of a sudden, we

were in a bigger place. Doctors diagnosed her, at

age 56, with mild cognitive impairment – memory loss that in an estimated one-quarter of patients leads to Alzheimer's but prescribed none of the drugs that can delay the progression of forgetfulness. A few months later, she

worse

was diagnosed with

Alzheimer's. Now she's on two

medications and participates

in a clinical trial through the

UC Davis Alzheimer's Disease

Center. And O'Neil, her long-

time friend, is her caregiver.

than not," said her husband,

Michael Cozakas, 61. "You

need to know and react ac-

worse than the disease. If you

change. They don't. They get

cordingly. I think denial is

deny, you expect things to

"We're better off knowing

"If you don't have a fixed baseline of understanding, you're constantly upset and frustrated.'

For many patients, diagnosis is delayed because a comprehensive assessment of dementia requires a detailed clinical history and neurological exam, said DeCarli. The process takes an hour, and most primary care physicians who can see up to 40 patients a day in their practices, don't have the time

"It's a challenge for primary care physicians," he said. "I tend to see them adapting a number of strategies. When someone has memory complaints, they get a brain scan and get the patient on memory-enhancing drugs.

The other strategy is to minimize the complaint until the situation gets more severe.

Complicating the picture is the fact that dementia has other causes beyond Alzheimer's: Pain medications, vitamin B12 deficiency, thyroid conditions, chemotherapy and some infections also can cause memory loss. So can diabetes and vascular problems.

The average person with dementia comes into contact with the health care system

But she wanted to know. For him, for their children, for their future, she wanted to be able to plan.

The neurologist went over the test results and said. 'You can come back in a year," said Schooley. "I was really scared it was Alzheimer's, but after the referral, I thought they'd help us.

"I started crying. I was really upset. I said, 'I'm telling you, there's something wrong with him.'

She insisted on a follow-up test, a positron emission tomography (PET) scan, which showed decreased brain cell activity.

Her husband of 13 years the former telecom technician who once could fix anything, the man who made the dean's list when he retrained in HVAC school a half-dozen years ago - definitely had Alzheimer's. The news came as both a shock and a relief.

"David doesn't talk much anymore," said Schooley. "He's forgotten about things he can't do. I'm worried about my kids. My son asks, 'Is he going to forget who I am?' Chances are, he will.

"But we're trying to make memories for our kids, so later that's the part they'll remember.



Mr. & Mrs. Paul Harens

Mr. & Mrs. Paul & Kathy Harens will be celebrating their 40th welding anniversary on July 20, 2013. Kathy Weniger & Paul Harens were married July 20, 1973, in

Huron, SD.

They have two children: Michael (Katie) Harens, St. Cloud, MN and Nathan Harens, St. Petersburg, FL. They have two grandchildren: Emma and Connor.

Friends and family are invited to attend an open house celebration from 2 - 4 p.m. at the Knights of Columbus - North Highway 81, Yankton.

Their family requests a card shower. Greetings may be sent to 204 E. 6th St., Yankton, SD 57078.

The couple requests no gifts

St. John's Ice Cream Social July 17

St. John's Lutheran Church of Yankton is having an ice cream social on Wednesday, July 17, running from 4-7 p.m. The church will be serving pies, cakes, ice cream, root-

beer floats and taverns.

Proceeds go to St. John's Christian Education with supplemental funds up to \$500 by Thrivent Financial for Lutherans.

