

State of Michigan Retirees For Your Benefit

provides a variety of timely information related to your health care benefits and needs



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Don't get cold feet

Winter can be beautiful. There's so much to do — snow skiing or sledding, a rough game of ice hockey or placid ice skating, or just going outside to shovel the snow. During cold and damp weather, it's important to protect your feet by keeping them warm and dry.

Keep your boots on

Without warm, dry clothes, any wintertime outdoor activity is a potential health risk. Proper footwear — insulated, waterproof boots or shoes — is as important as coats, hats or gloves during the winter.

Boots should be snug but not tight. If your boots are too loose, your toes can get irritated in the toe box. If your boots are too tight, pressure can lead to blisters and abrasions. Tight footwear also may slow circulation and cause cold feet. Also, minimize activities that reduce circulation, such as sitting or standing in a cold environment for a long time. Socks are also important. Change them daily. Wear thicker, non-constricting socks made of acrylic fibers or a blend to “wick” away moisture caused by perspiration in boots.

What to do if the cold gets to you

Feet soaked in snow should get back indoors quickly. In sub-freezing temperatures, soaked feet are in immediate danger of frostbite, trench foot or hypothermia.

Frostbite happens when skin tissue actually freezes and cell damage results. The freezing point of skin is about 30°F. Wind chill can be a significant factor in



Cold feet [continued from pg 1](#)

speeding up the process. Frostbite is characterized by white, waxy skin that feels numb and hard. Fingers, toes, cheeks, the nose and ears are primarily affected. The symptoms of frostbite include uncomfortable sensations of coldness; there may be a tingling, stinging or aching feeling followed by numbness. Initially, the frostbitten area appears white and is cold to the touch. This is followed by heat, redness and swelling.

Tissue damage can be mild and reversible or severe, resulting in scarring and tissue death. Amputation or loss of function can be an unfortunate result. Frostbite may require immediate emergency attention. However, if it's not severe, apply warm water at 102°F to 110°F to the affected area. Don't use a heating pad. Be careful to avoid rubbing frostbitten areas because this can lead to greater tissue injury. If there's a chance for re-freezing, don't re-warm the affected areas.

Trench foot is caused by long, continuous exposure to a wet and cold environment, or actual immersion in water. Symptoms include a tingling or itching sensation, pain and swelling. Blisters may form and be followed by death of skin tissue and ulceration.

First aid treatment for trench foot is similar to the treatment for frostbite, and includes moving the victim to a warm area, treating the affected part with warm water (102°F to 110°F) or warm packs, arranging bed rest in a warm environment and obtaining medical assistance as soon as possible.

Hypothermia occurs when a person's body temperature falls and the body can't produce heat as fast as it's lost. It's a life-threatening condition when the body's core temperature falls below 95°F. Symptoms include shivering, slurred speech, fumbling hands and memory lapses. The skin is ice cold and may appear blue in color. Muscles may become stiff and rigid. The pulse and breathing slow down and pupils become dilated.



If you suspect that someone has hypothermia, the first step is to get the person out of the cold and into a warmer atmosphere. Handle them gently, because rough handling may cause a cardiac arrest. If their clothes are wet, change them into dry clothes. Wrap them in some type of insulation such as a blanket, towels, sheets, pillows or even newspapers. Since most of a person's body heat is lost through the head, make sure you cover the head as well. Then lay them flat and call for emergency medical assistance. Never try to warm them with warm water or a heating pad or attempt to warm them with body to body contact. Shivering is the body's built-in defense against a falling body temperature and can provide more heat than most other methods.

To avoid hypothermia, always dress warmly in uncertain weather. If you're traveling by car, carry an emergency box in your trunk with blankets, hats, mittens and an extra change of clothing.

Be prepared and enjoy the weather.

Don't let shingles catch you off guard

Shingles is a painful and dreaded illness. Anyone who's had it knows about the stinging and burning pain from the blistering rash. After a person recovers from chickenpox, the virus stays in the body. Usually the virus doesn't cause any problems; however, the virus can reappear years later, causing shingles.

The virus usually affects one or two of the large nerves that spread outward from the spine, causing pain and a rash in a band around one side of the chest, abdomen or face. Before the rash develops, there's often pain, itching or tingling in the area where the rash will develop. Other symptoms of shingles can include fever, headache, chills and upset stomach. The rash will blister and scab off after seven to 10 days. The rash usually clears within two to four weeks. There may be changes in the color of the skin when the scabs fall off. In severe cases, these color changes last forever. In most people, the pain lasts from one to three months.

Shingles can have a lasting effect

Shingles can also affect the eyes, causing swollen eyelids, redness and pain. Shingles of the eye can cause scars that affect vision. Later in life, it can also lead to glaucoma, an eye disease that can cause blindness.

Anyone who has recovered from chickenpox may develop shingles, including children. However, shingles most commonly occurs in people 50 older. The risk of getting shingles increases as a person gets older. People who have medical conditions that keep the immune system from working properly, like cancer, leukemia, lymphoma and human immunodeficiency virus (HIV), or people who receive immunosuppressive drugs, such as steroids and drugs given after organ transplantation, are also at greater risk to get shingles. Most commonly, a person has only one episode of shingles in his or her lifetime. Although rare, a second or even third case of shingles can occur.

Shingles continued on pg 7

Sweaty winter feet?

Even if you're running in the snow, your feet are still susceptible to the cold, especially if you're wearing nylon running shoes. Feet will sweat while running and cold will permeate the material, inviting a serious condition. Sweaty feet and winter are a bad combination. According to the U.S. Centers for Disease Control and Prevention, wet feet lose heat 25 times faster than dry feet.

To compensate, the body shuts down "less essential" circulation. Less blood circulating to the feet means less oxygen and nutrients, and skin tissue begins to die, a condition which can lead to trench foot. Cover your feet with antiperspirant. The active ingredient, aluminum hydroxide, keeps your feet from sweating.

Source: footcaredirect.com*

*Blue Cross Blue Shield of Michigan does not control this website or endorse its general content.



Clean hands save lives

Keeping your hands clean is one of the most important steps you can take to avoid getting sick and spreading germs to others. Many diseases and conditions are spread by not washing your hands with soap and clean, running water. However, if soap and clean water aren't accessible, use soap and available water or an alcohol-based product containing at least 60 percent alcohol to clean hands.

Tips and instructions

When washing your hands with soap and water:

- Wet your hands with clean running water. Use warm water if it's available. Apply soap. Antibacterial soaps are OK to use, but regular soap works fine.
- Rub your hands together to make a lather and scrub all surfaces.
- Continue rubbing your hands for 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice.
- Rinse your hands under running water.
- Dry your hands using a paper towel or air dryer. If possible, use your paper towel to turn off the faucet and to open the door if you're in a public restroom.

When should you wash your hands?

- Before and after preparing food
- After any contact with juices from uncooked meats and poultry; these animal products may be contaminated with a variety of illness-causing bacteria
- Before and after eating food
- After using the toilet
- After changing diapers or cleaning up a child who has used the toilet

- Before and after tending to someone who is sick
- After blowing your nose, coughing or sneezing
- After handling an animal or animal waste
- After handling garbage
- Before and after treating a cut or wound
- After contact with items that are likely to have been touched by many people such as money, counters, door handles, etc.

When using an alcohol-based hand sanitizer:

- Apply the product to the palm of one hand, using the amount of product indicated on the label.
- Rub your hands together.
- Rub the product over your entire hand and all of your fingers until they're dry.

Source: Centers for Disease Control and Prevention

Clean hands continued on pg 5



What do you know about the flu?

Test your flu vaccine savvy with these true or false questions, then check your answers on page 7.



True or false?

- 1: People can die from the flu.
- 2: Even if I get the flu vaccine, I can still get a mild case of the flu.
- 3: The side effects of the flu vaccine are worse than the flu.
- 4: Not everyone can take the flu vaccine.
- 5: Only older people need flu vaccine.
- 6: You must get the flu vaccine before December.

Clean hands *continued from pg 4*

Here're some myths and facts about washing your hands.

MYTH: You should wash your hands with hot water.

FACT: Use warm, but not hot, water to wash your hands. Water that's too hot or too cold can crack the skin, providing a portal of entry for bacteria.

MYTH: Proper hand-washing consists of washing your hands for at least 30 seconds with soap under running water.

FACT: Not quite. Proper hand washing begins by wetting your hands under warm running water and then thoroughly applying soap or detergent over all areas of both hands.

If you use bar soap, rinse it before you use it to remove viruses or bacteria that may have been left from previous users. Scrub all surfaces of your hands and fingers. Remember to clean under your fingernails, too. Dry your hands on a paper towel, then use the paper towel to turn off the faucet.

MYTH: Cloth towels work fine to dry hands.

FACT: Bacteria numbers increase in damp towels leading to recontamination of hands. A paper towel is your best choice for drying hands.

High blood pressure: prevent the silent killer

High blood pressure currently affects more than 72 million Americans. That's 1 in every 3 adults. It's often called "the silent killer" because it usually has no symptoms. Occasionally, headaches may occur, but many people may not find out they have high blood pressure until they have trouble with their heart, kidneys, or eyes. When high blood pressure isn't diagnosed and treated, it can cause:

- Your heart to work too hard and become larger or weaker, which can lead to heart failure.
- Small bulges (aneurysms) to worsen in your blood vessels in your heart, brain, legs, and intestines and spleen.
- Blood vessels in your kidneys to narrow, which can cause kidney failure.
- Blood vessels in your eyes to burst or bleed, which can cause vision changes and can result in blindness.
- Arteries throughout your body to "harden" faster, especially those in your heart, brain, kidneys, and legs. This can cause a heart attack, stroke, or kidney failure.

When you go to your doctor, someone under the doctor's supervision will measure your blood pressure. Your blood pressure is always given as two numbers, the systolic and diastolic pressures. Both are important. Usually they're written one above or before the other – for example, 120/80 mmHg. The top, or first, number is the systolic and the bottom, or second number, is the diastolic. If your blood pressure is 120/80, you say that it's "120 over 80." A blood pressure reading of 120/80 mmHg or less is considered normal. Usually, the lower, the better, although very low blood pressure can sometimes be a cause for concern and should be checked out by your doctor.

If either your systolic or diastolic blood pressure is higher than normal (120/80) but not high enough to be considered high blood pressure (140/90), you have pre-hypertension. If you have pre-hypertension, your chances of developing high blood pressure are greater than average unless you take action to prevent it. In fact, having pre-hypertension doubles a woman's chances of having heart disease or a stroke. That's a 100 percent increase. For men, the increase is 45 percent. Talk to your doctor about lifestyle changes you can make to prevent or lower your blood pressure.

Risk factors

Anyone can develop high blood pressure. But your chances of getting high blood pressure are higher if you:

- Are overweight
- Are a man over the age of 45 or a woman over the age of 55
- Have a family history of high blood pressure
- Have pre-hypertension, a reading of 120-139/80-89 mmHg.

High blood pressure continued on pg 11



Flu quiz: answers

1: True

Flu is a highly infectious disease of the lungs, and it can lead to pneumonia. Each year about 200,000 people in the U.S. are hospitalized and about 36,000 people die because of the flu.¹

2: True

Flu vaccine protects most people from the flu. People who receive the flu vaccine can get the flu, but you'll be far less sick than someone who has the flu and hasn't received the flu vaccine. The flu vaccine doesn't protect you from other viruses that sometimes feel like the flu.

5: False

Adults and children with conditions like asthma, diabetes, heart disease and kidney disease need to get a flu vaccine. People who are active and healthy can also benefit from the protection that the flu vaccine offers.

3: False

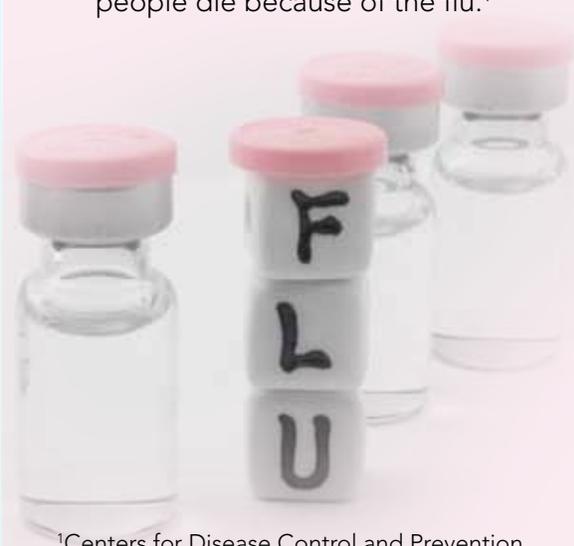
The worst side effect you're likely to get with an injectable vaccine is a sore arm.

6: False

Flu vaccine can be given before or during the flu season. While the best time to get a flu vaccine is October or November, getting vaccinated in December or later can still protect you against the flu.

4: True

You might not be able to get this protection if you're allergic to eggs, are very sick with a high fever or have had a severe reaction to the flu vaccine in the past.



¹Centers for Disease Control and Prevention

Shingles continued from pg 3

Shingles cannot be passed from one person to another. However, the virus that causes shingles, varicella zoster virus (VZV), can be spread from a person with active shingles to a person who has never had chickenpox through direct contact with the rash. The person exposed would develop chickenpox, not shingles. The virus isn't spread through sneezing, coughing or casual contact. A person with shingles can spread the disease when the rash is in the blister-phase. Once the rash has developed crusts, the person is no longer contagious. A person isn't infectious before blisters appear or with post-herpetic neuralgia (pain after the rash is gone).

There is help

Prevention is always best, so get your vaccination. The U.S. Food and Drug Administration (FDA) has licensed Zostavax[®], a vaccine to reduce the risk of shingles. This vaccination is covered under your State Health Plan PPO. The vaccine is given as a single injection under the skin, preferably in the upper arm. In studies, the vaccine also slightly reduced the duration of pain following the onset of shingles in people who developed the disease, despite being vaccinated with Zostavax.

If you do suspect shingles, call your doctor to discuss medications that can limit the pain and rash. If possible, call as soon as you notice the rash. Medications work best when they're started immediately.

Thermometers are the best way to detect a fever



Colds, flu and fevers seem to go hand-in-hand during the winter months. A fever is the temporary increase in the body's temperature in response to disease or illness. An adult is considered to have a fever when his or her temperature is above 99°F to 99.5°F, depending on the time of day. Normal body temperature may change during the day. It's usually highest in the evening.

A fever is an important part of the body's defense against infection. Most bacteria and viruses that cause infections thrive best at 98.6°F. Although a fever signals that a battle might be going on in the body, the fever is fighting for you, not against.

If you're worried about being sick, please call your doctor. Don't be surprised if your doctor asks you if you have a fever, and if so, how high is your temperature. Be prepared and choose a thermometer that's best for you.

Choosing a thermometer

Today, there are many thermometer options. Here are some choices:

Digital thermometers

- Used in the mouth or armpit
- Used for people of any age
- Are quick and easy to read
- Most accurate.
- Keep batteries handy.

Ear thermometers (infrared thermometers)

- Used for infants and adults
- Quick
- Must be properly placed in the ear for an accurate temperature

- Excessive ear wax can interfere with accuracy
- Expensive

Fever strips, pacifier thermometers and forehead thermometers

- Very quick
- Not as accurate as other types of thermometers
- Can be expensive

Glass thermometers containing mercury

- Don't use one because the mercury in it is toxic and can be released if the thermometer breaks
- Don't throw it in the trash; call your local government for disposal instructions

How to take a temperature

Oral temperature

Recommended for anyone.

- Make sure your mouth is empty. Use a disposable cover. Place the thermometer under your tongue, to one side of the center, and close your lips tightly around it.
- Follow thermometer instructions for how long to leave it in your mouth.
- Remove and read thermometer.
- Throw disposable cover in the trash; clean thermometer.
- Wash your hands.

Ear temperature

Requires a special thermometer that should only be used for checking ear temperatures.

- Place the probe in your ear canal and turn thermometer on.
- Use a disposable cover. Don't put the thermometer in water.

- Gently pull the earlobe up and back.
- Center the probe tip in the ear and push gently toward the eardrum.
- Press the button. Follow the thermometer's instructions for how long to leave it in your ear.
- Remove and read the thermometer.
- Throw the disposable cover in the trash. Wipe the probe with a dry cloth and put it away.
- Wash your hands.

Armpit (auxiliary) temperature

- Make sure your armpit is dry.
- Place the tip of the thermometer in the center of your armpit and make sure your skin surfaces are touching the thermometer.
- Press your arm against your body.
- Follow the thermometer's instructions for how long to leave it in your armpit.
- Remove and read the thermometer.
- Throw away the disposable cover, if used, or clean and dry the thermometer right away.

Tips for taking temperature

- Keep separate, marked thermometers for oral and armpit readings.
- Read all directions before using the thermometer, and always follow the manufacturer's instructions exactly.
- Choose thermometers that are easy for you to use.
- Use a new disposable cover for each use; don't reuse disposable covers. If you don't have a cover, clean the thermometer after each use as advised by the manufacturer.
- Don't take an oral temperature if the person has a stuffy nose. Use the armpit.
- Don't smoke or eat or drink anything hot or cold for 10 minutes before taking an oral temperature.
- When you call the doctor, report the actual reading on the thermometer, and say where the temperature was taken. Be sure to read decimal places correctly — 104°F isn't the same as 100.4°F.



When in doubt, throw it out

You look in the fridge and see a slice of leftover pizza. Perfect for a snack. But you can't remember how long it's been there. Caution, food poisoning may be right around the corner. Keep the list below handy. And remember...when in doubt, throw it out.



Product	Refrigerator (40° F)	Freezer (0° F)
Eggs, fresh, in shell	3 to 5 weeks	Do not freeze
Mayonnaise (refrigerate after opening)	2 months	Do not freeze
Frozen dinners and entrees; keep frozen until ready to heat	Don't store in refrigerator	3 to 4 months
Store-prepared (or homemade) egg, chicken, ham, tuna and macaroni salads	3 to 5 days	Doesn't freeze well
Hot dogs, opened package	1 week	1 to 2 months
Hot dogs, unopened package	2 weeks	1 to 2 months
Luncheon meat, opened package	3 to 5 days	1 to 2 months
Luncheon meat, unopened package	2 weeks	1 to 2 months
Bacon	7 days	1 month
Sausage, raw — chicken, turkey, pork, beef	1 to 2 days	1 to 2 months
Hamburger and ground meat	1 to 2 days	3 to 4 months
Soups and stews, vegetable or meat added	3 to 4 days	2 to 3 months
Cooked meat and meat casserole leftovers	3 to 4 days	2 to 3 months
Chicken or turkey, pieces	1 to 2 days	9 months
Fried chicken	3 to 4 days	4 months

Product	Refrigerator (40° F)	Freezer (0° F)
Cooked poultry casseroles	3 to 4 days	4 to 6 months
Poultry pieces, plain	3 to 4 days	4 months
Pieces covered with broth, gravy	1 to 2 days	6 months
Chicken nuggets, patties	1 to 2 days	1 to 3 months
Pizza, cooked	3 to 4 days	1 to 2 months

High blood pressure continued from pg 6

Other things that increase your chances of developing high blood pressure are:

- Eating too much sodium (salt) (See *For Your Benefit* article in vol 3 2010 for more information.)
- Drinking too much alcohol (See *For Your Benefit* article in vol 3 2010 for more information.)
- Being physically inactive
- Smoking
- Not getting enough potassium in your diet
- Taking certain medicines, such as some antacids and hormone therapy (women)
- Having long-lasting stress

In the United States, high blood pressure occurs more often in African Americans. Compared to other groups, African Americans:

- Tend to get high blood pressure earlier in life
- Usually have more severe high blood pressure
- Have a higher death rate from complications related to high blood pressure, such as stroke, heart disease, and kidney failure

Source: National Institute of Health, Senior Health, October 2008.

Prevention

You can take steps to prevent high blood pressure by adopting a healthy lifestyle. For example, you can:

- Maintain a healthy weight, and lose weight if you are overweight.
- Be physically active. Get at least 2 ½ hours of moderate physical activity each week.
- Follow a healthy eating plan like the Dash diet (Dietary Approaches To Stop Hypertension), which emphasizes fruits, vegetables, fat-free or low-fat milk and milk products, whole grains, fish, poultry, beans, seeds, and nuts.
- Choose and prepare foods with less sodium (salt).
- If you drink alcoholic beverages, do so in moderation; women should have no more than one drink a day, and men should have no more than two drinks a day.
- If you smoke, quit smoking.
- Learn to cope with and manage stress.

Blood pressure tends to rise with age. Know your blood pressure levels. And if you have high blood pressure, take steps to lower it. Following a healthy lifestyle may help delay or prevent a rise in blood pressure. Have regular medical care and follow your doctor's treatment plan.

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