

Steel Valley Dolphins

February 2017



The official newsletter of the
USS Requin Base of the USSVI
Pittsburgh, Pennsylvania

USSVI Creed:

"To perpetuate the memory of our shipmates who gave their lives in the pursuit of duties while serving their country. That their dedication, deeds, and supreme sacrifice be a constant source of motivation toward greater accomplishments. Pledge loyalty and patriotism to the United States of America and its Constitution."



412-751-7967

Meetings held on the second Saturday of the month normally in Leetsdale at the VFW Post and quarterly meetings held around our membership area.

- **Make a difference, get to a meeting!**

----- Pride Runs Deep -----

Next Meeting: March 11th at Phil's Nite Club & Pizzeria - 711 River Road, Dawson, Pa, 15428 - time 12:30 hours.

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----- Pride Runs Deep -----



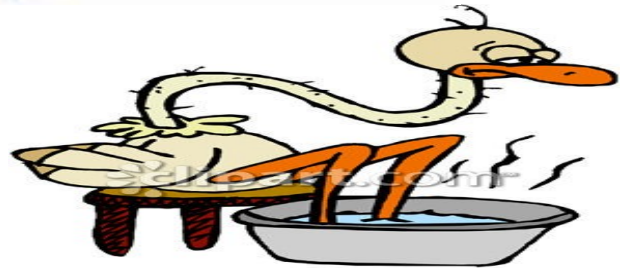
Binnacle List

John Yaksich

Aaron Ellis

Sandra Messner

Bernie Sigler



COMMANDERS CORNER:

USSVI - SCHLORSHIP PROGRAM

March 15, 2017 is the cut off date for your kids/grandkids to request their 2017/2018 college scholarship applications. The cut off date to submit their application is April 15, 2017. To get the complete information - go to the USSVI Charitable Foundation National Website and follow these directions:

1. Log in on the USSVI National Website.
2. On the left hand side - Click on Charitable Fund
3. Click on Applications
4. Click on Scholarship applications
- or
5. Click on Scholarship Instructions

If anyone has any questions, please contact the Scholarship Chairman - Robert Frick
H-703-754-4959 or C-703-772-3304

USSVI AWARDS NOMINATION PROCESS:

The 2017 Awards Nomination Process started on February 1st. Please take the time to consider a shipmate for an Award for all the good things this shipmate or Base may have done during 2016. Also nominate your Base news letter for an Award.

To get to the Awards Manual use the link below:

www.ussvi.org/Documents/Awards_Manuals_2017_USSVI_AWARDS_MANUAL.PDF

The 2017 Awards on Schedule and Process Timeline:

1. February 1, 2017: All USSVI Members in good standing may submit their Award nominations to the National Awards Committee Chairman - John Stanford.
2. April 30, 2017: All Award nomination (with the exception of the Newsletter Award) must be received by the National Awards Committee Chairman.
3. May 15, 2017: Deadline for submission of Newsletters for "Newsletter of the Year Award."

Click on the National USSVI website-click on awards-click on manuals.

Let us reward a shipmate for a job well done by nominating him or her for an Award this year. Review the manual and follow the directions. All award nominations go to the Award Chairman John Stanford - JStan131@comcast.net. For any questions on the award process please call John Stanford at (904) 743-3197. For regular mail - send to:

John G. Stanford

National Awards Committee Chairman

3026 Cesery Blvd

Jacksonville, FL 32277-3527

MEMBERS

Ed Covey	2/24/31
Lawton Gains	2/19/44
James Harris	2/26/39
Russ Osborn	2/05/50
James St Clair	2/05/42
John Sutherin	2/03/42
Don Taskey	2/23/44

BIRTHDAYS

FIRST MATES

Kim Bittner	2/19
Carolyn Davenport	2/04
Agnas Franz	2/02
Linda Gaylor	2/09
Lynn Gourley	2/10
Lynn Indo	2/12
Marilyn Klein	2/12
Jackie Krautstrunk	2/26
Rosemary Riley	2/26
Isabelle Watson	2/22
Adele Wise	2/28

ANNIVERSARIES

Kato & Carolyn Davenport 2/28
Alfred & Marilyn Regrets 2/24
Don & Delores Taskey 2/12

Paul & Yvone McKenzie 2/15
Andrew & Barbara Sorbie 2/02

IF THERE ARE ANY CORRECTIONS OR ADDITIONS, PLEASE LET ME KNOW....

NEXT BASE MEETING

The next base meeting is scheduled on Saturday, March 11, 2017. The address is as follows - PHIL'S Nite Club & Pizzeria - 711 River Road, Dawson, Pa, 15428 - time 12:30 hours. We have been traveling to Phil's for over 10 years. He is a shipmate of the Requin Base and puts out a great menu for all of us to enjoy.

NAME TAGS

With the increase of new members and their first mates, name tags for the first mates were distributed at our December meeting at the German Club. If your first mate has not received one, please let me know. They can be worn at all base meeting and events to make it easier to acknowledge everyone by name instead of "HEY YOU". (Just Kidding). Our shipmates have their names on their vests which is a big help. So ladies, please display your name tag as part of your wardrobe.

PICTURES:

Beginning every year, we asked the member to submit their photo's, so they can be posted on our web-site. We have 222 members, both regular and associate. As of today, there are 121 members that have their pictures posted. They can be either a navy picture or a current one or even both. If you don't have access to a computer, you can send to me.

Requin Base Meeting Minutes

February 11, 2017
Baden, PA

Base Commander Huey Dietrich called the meeting to order.

Attendees: James & Jennifer Beachler, Tino & Sally Bolcato, Eric Bookmiller, Lee & Patsy Bookwalter, George Brown, Thomas & Deneen Calabrese, Ron & Nita Campbell, Joe Campisi, Huey & Edie Dietrich, Rick & Judy Elster, Peter & Stephanie Foster, Jerry & Linda Gaylor, Dick Geyer, Bill & Donna Greenlee, Ric & Joan Guntang, Lou Hamil, Bill & Brian Lindsey, James & Sandra Messer, Bob & Jude Meyers, Fred Nelson, Frank Nicotra, Chip & Sharon Porter, Harry Sills, Jeff & Eileen Simon, George Stass, Carl Stigers, Jack & Genny Sutherin, Bob Weismantle, Mike & Tina Wyckoff.

Base Commander Huey Dietrich: Quotes of the day: "We shall never forget the submariners who held the lines while we replaced our losses and repaired our wounds"

Requin History: February 1, 1969, Requin was towed to Florida where she served as a Naval Reserve training ship. February 21, 1990 Senator John Hines introduced Senate Bill S2151 which allowed Requin to be transferred as an exhibit at the Carnegie Science Center in Pittsburgh PA.

Base Commander Huey Dietrich: Let us at this time, with a moment of silent prayer, remember our Shipmates who made the supreme sacrifice that we may gather here in Peace. We dedicate this meeting to our Shipmates on Eternal Patrol, to perpetuate their memories in our lives and to honor our Shipmates on active duty in the service of the first line of defense of our Nation.

Boats Lost:

USS BARBEL (SS 316)	February 4, 1945
USS SHARK (SS 174)	February 11, 1942
USS AMBERJACK (SS 219)	February 16, 1943
USS GRAYBACK (SS 208)	February 27, 1944
USS TROUT (SS 202)	February 28, 1944

We also honor our departed shipmate of the Requin Base lost in February, Richard Claypoole, Chuck Dreer, John Mills, Devern Pyatt and Robert Vaughn. Finally let us remember all the brave submariners who died performing their duties aboard submarines, some individually and some in groups, but where the submarine itself was not lost.

Chaplain Carl Stigers gave the Invocation.

Chief Of The Boat Chip Porter led the Base in the Pledge of Allegiance.

Members introduced themselves and the boats they qualified on.

Base Secretary Jeff Simon reported that Minutes of the last meeting were published in the SVD and the base website. Executive Board meeting minutes will be published on the base website. With no objections, the minutes were approved as published.

Treasurer Lee Bookwalter gave an accounting of base assets, expenditures, and deposits. With no objections, the report was approved.

Other Reports:

Binnacle List: Aaron Elis, Bernie Sigler, Sandra Messer, John Yaksich

Tom Stewart went on eternal patrol in January.
Membership stands at 222 making Requin the sixth largest USSVI base
Arrangements are being made for a Kap(ss)4Kid(ss) group on the USS Requin
Chaplain Carl Stigers reported on Eagle Scouts presentations.

Memorials And Ceremonies:

USS Requin SS-481 will be inducted in the submarine hall of fame on May 25, 2017 in Norfolk, VA.

New Holland Club members will be inducted at the April meeting.

Memorial service on USS Requin, May 28th

Carnegie parade, May 28th

Sewickley parade, May 29th

Coraopolis parade, May 29th

Leetsdale parade, July 4th

Cannonsburg parade, July 4th

Pittsburgh parade, November 11th

Social Events:

Navy Week, June 19-25 in Pittsburgh, PA

Navy Ball, October 20th in Harmorville, PA

Christmas Luncheon, December 9th at the German Club in Pittsburgh, PA. Entertainment provided by the North Star Kids

Old Business:

Possible move from Leetsdale VFW was discussed. Motion to enter into discussions with American Legion in Baden, PA was approved by the members present.

New Business:

Motion for Requin Base to take over PA submariner's license plate program was discussed.

Requin Base budget for 2017 was reviewed and approved by the members present.

For The Good Of The Order:

Letters to the base were read.

Chaplain Carl Stigers gave the Benediction and blessing of today's meal.

Adjournment: The meeting was adjourned.

Next meeting: Dawson PA VFW at 1230 hours on March 11, 2016.

REQUIN BASE
MEETINGS & ACTIVITIES SCHEDULED - 2017
TENATIVE

BASE MEETINGS

BASE ACTIVITIES

January 14 - VFW - Leetsdale, Pa

February 11 -American Legion - Baden

March 11 - Dawson, Pa

April 08 - VFW - Leetsdale, Pa-----Holland Club Inductees (2017)

May 13 - VFW Leetsdale, Pa-----May 25 - Requin Hall of Fame
(Norfolk, Va)

*May 28 - Memorial - **REQUIN**

*May 28 - Carnegie Parade

	*May 29 - Sewickley Parade
	*May 29 - Coraopolis Parade
June 10 - A.L. Columbiana, Ohio	June 19/25 - Navy Week
July 08 - VFW - Leetsdale, Pa	July 04 - Leetsdale Parade
	* - Canonsburg Parade
August 12 - Rodney's Road House Irwin	
Sept. 09 - VFW - Leetsdale, Pa	
October 14 - VFW Leetsdale	Oct ? - Navy Ball
November 11 - VFW Leetsdale ?	November 11 - Veterans Parade
	Veterans Day
December 09 - German Club	X-mas Luncheon

The above meeting dates at the Leetsdale VFW are tentative and there will be other traveling meetings - possible in New Castle, Canonsburg and/or the Rt 28 corridor.
 *Affirmative on schedule

Health Tests ► Which do You Really Need?

There are health tests we need, and those we don't. Pelvic ultrasound? Sounds ultrasuspicious. Occult blood test? Only if it comes with an exorcism. Urinalysis? Great, now I'll be kicked off the tour . . . It's tough to know which of these are truly essential, especially when they're packaged with dozens of other tests and called an "executive health exam." And yet thousands of men sign up for these screenings—at an out-of-pocket cost of up to \$10,000 apiece—based on the sales pitch that a test may uncover a hidden health condition. Of course, 10 grand might be worth it if all that random screening actually did any good: But a seminal study by the Rand Corporation found that patients who had the most screenings over 5 years were no healthier than those given less medical attention. This isn't to say executive health exams are scams. They can be quite valuable—if you know which of the procedures are worthwhile. So we asked our experts to create an a la carte menu to bring to your General Practitioner. Think of these as the best tests for a recession.

Cardiac CT Angiography

These colorful 3-D images allow radiologists to calculate one of your most important heart numbers: your coronary artery calcium score, a measure of how much plaque is piling up in your arteries. A 2007 study of over 10,000 people published in the journal *Atherosclerosis* reported that calcium scores alone can predict heart attacks, while a 2003 study found that a high calcium score is associated with a tenfold increase in heart-disease risk. This is compared with a less-than-twofold increase in risk from traditional risk factors such as diabetes and smoking. The test has one significant downside: The radiation exposure from your average cardiac CT is equal to 600 chest x-rays, according to a study in the *Journal of the American Medical Association*. This produces a 1-in-5,000 risk of cancer, another study reveals.

Who needs it: Men with some of the risk factors for heart disease whose physicians may be on the fence about starting treatment. "In these medium-risk cases, cardiac CT scans and calcium scoring can provide the extra level of information that we feel we need," says Gerald Fletcher, M.D., a professor of cardiology at the Mayo Clinic. The lower the calcium score, the lower the risk. If you reach 112, your physician might recommend aspirin or statins.

Cost: \$350 to \$900. Most insurance companies will reimburse you if you've previously had an abnormal stress test or chest pain.

Bone Density Scan

Think osteoporosis affects only old ladies? Fact is, men begin losing bone mass at age 30. That's why it's important to assess the state of your skeleton now with a dual energy x-ray absorptiometry (DEXA) scan, which uses low-radiation x-rays to gauge bone mineral density (it can also measure body fat percentage). "DEXA scans allow us to identify people at high risk for fracture so they can start treatment to strengthen their bones before a fracture occurs," says Murray J. Favus, M.D., director of the bone program at the University of Chicago medical center. Your doctor might suggest adding strengthening workouts to your exercise program and supplementing your daily diet with up to 1,000 milligrams of calcium and up to 400 IU of vitamin D.

Who needs it: Anyone with any osteoporosis risk factors: inactivity, smoking, a family history of the disease.
Cost: \$250 to \$300. To increase the odds of your insurance covering the scan, make sure your doctor notes any risk factors.

VO2 Max Test

With the VO 2 max test, you hop on a treadmill or stationary bike and give your maximum effort while wearing a mask that captures your every breath. By analyzing the amount of oxygen you consume, the test determines how efficiently your body extracts and uses oxygen from the air. This makes it the gold standard of fitness markers, as well as a strong indicator of your overall health. "Blood pressure, cholesterol—those are what we call 'remote markers.' The best predictor of your longevity is going to be your fitness," says Walter Bortz, M. D., a longevity researcher at Stanford University.

Who needs it: Anyone who wants their blood to pump. If your score is under 18 ml/kg/min, talk to your doctor about increasing the intensity of your workouts.
Cost: \$110 to \$160. The test is available at physical therapy, rehab, or cardiopulmonary centers. Insurance providers won't cover it.

Virtual Colonoscopy

By definition, something "virtual" usually can't compare to the real thing. But with a virtual colonoscopy, you avoid the two downsides of a traditional colonoscopy—sedation and the risk of a perforated colon—while still benefiting from the one big upside: test results you can stake your life on. "Virtual colonoscopies have the same sensitivity for detecting large polyps, which are the precursor lesions of colon cancer," says Judy Yee, M. D., a professor of radiology at the University of California at San Francisco. Though the CT scanning technology of a virtual colonoscopy can miss some smaller polyps, a University of Wisconsin study found that these are usually benign anyway. And don't sweat the radiation; you'll receive about 5 to 8 millisieverts, an amount that isn't considered dangerous, says Dr. Yee.

Who needs it: People ages 50 and older, especially those on blood thinners, because an "oops" with a regular scope could cause dangerous internal bleeding. The exception: If your family has a history of colon cancer, you should be screened at least 10 years before the age your relative was when he or she was first diagnosed, Dr. Yee says. People who are overweight or inactive, drink or smoke heavily, or have an inflammatory bowel disease should also consider early screening.
Cost: \$500 to \$1,000. Many health-care plans now recognize the effectiveness of virtual colonoscopies and increasingly cover them.

Nutritional Evaluation

While it's not a test per se, putting your diet under the microscope could result in a leaner body and a longer life. "The benefits of meeting with a dietitian are accountability, moral support, and troubleshooting if your progress stalls," says Alan Aragon, M. S., the Men's Health Weight-Loss Coach. In a 2008 Kaiser Permanente study, diabetic patients who received nutritional counseling were nearly twice as likely to lose weight as those who had no guidance. To find a registered dietitian who can see beyond the food pyramid, Aragon recommends going to the American Dietetic Association's Web site (eatright.org) and clicking on "Find a Nutrition Professional." Then call the R.D. and ask how he or she stays up on the latest research, which should include reading journals such as the American Journal of Clinical Nutrition or the Journal of Applied Physiology.

Who needs it: Anyone who should lose weight or simply wants to know how they can eat to beat disease.
Cost: \$40 to \$75 a session. Your insurance company may reimburse you if you have a condition that can be improved with diet changes. Ask your doctor for a referral.

[Source: Men's Health | Justin Park | April 21, 2015 ++]

Heart Attack Update 03 ► Can you Have a Silent One

Not all heart attacks cause chest pain and drenching sweats: Some heart attacks may strike “silently,” causing little or no symptoms, new research from the National Institutes of Health (NIH) suggests. The researchers recruited over 1,800 people 45 and older who were free of heart disease, and then scanned their hearts 10 years later. They discovered 8 percent of the participants showed evidence of scarring—damaged tissue—on their hearts. Of that scarring, the majority went unrecognized and uncared for, and nearly half of those looked typical of a heart attack. That means they may have experienced a heart attack and not even known it. These silent heart attacks could occur without any obvious signs or symptoms that something may be seriously wrong with your health.

“In some cases, patients have symptoms that they feel are not bad enough to go to a doctor,” says study author David Bluemke, M.D., Ph.D., the director of radiology and imaging sciences at the NIH Clinical Center. Those signs and symptoms of a silent heart attack may include mild chest pain, nausea, vomiting, unexplained fatigue, heartburn, shortness of breath, or discomfort in the neck or jaw, he says. That’s right: A silent heart attack may feel a lot like a bout of the stomach bug or the flu or indigestion. Unlike those illnesses and ailments, however, even a mild heart attack is a serious medical condition: It can leave scar tissue on your heart. And here’s why that’s a huge deal for your health: Scarring on your heart may mess with the electrical current in your heart, causing abnormal heart rhythms, or arrhythmia, says Dr. Bluemke. When that happens, your heart may beat too quickly, leaving it unable to pump blood efficiently. This can lead to sudden cardiac arrest—or when your heart suddenly stops working. So your best bet? Closely monitor your symptoms when you don’t feel 100 percent healthy.

For younger, healthier men, the chances of these signs and symptoms being a heart attack is very rare, says Dr. Bluemke. But if you're over 50, 40+ with a strong family history of heart disease, or have other risk factors like obesity, high blood pressure, diabetes, high cholesterol, or smoking, you should head to your doctor as soon as possible if your symptoms persist longer than 20 minutes or seem to worsen with activity. Don’t wait to see if the symptoms clear up. Even if you’re not having symptoms, it’s a good idea for your overall health to see a doctor for an annual physical, too. That’s because a silent heart attack isn’t the only thing that can scar the organ: Other causes of heart disease, like chronic high blood pressure, diabetes, obesity, and smoking can also damage the heart.

In fact, 70 percent of people with unrecognized heart disease who died of sudden cardiac death actually showed previous scarring on their hearts, a previous study found. That’s why early detection of heart disease is important, so your doctor can control those factors before a heart attack hits. You should also ask your doctor for a CT calcium score or CT angiogram test, says Dr. Bluemke. These can detect plaque buildup at a very early stage. [Source: Men's Health | Christa Sgobba | November 10, 2015 ++]

Colds Update 04 ► Best Ways to Prevent One

Getting a cold sucks, but it’s not inevitable. And while 33 million diagnoses each year—according to a CDC report—might suggest otherwise, there four simple Strategies to Avoid Getting Sick This Winter. But you have to be diligent. And by diligent, it means you can’t just read this and sort of follow the advice. You have to stick to it. Because the moment you let up is when colds take hold. (You’ll probably have to get a little lucky, too.)

1. Stop Touching Your Face

This tip may seem obvious, but it’ll be tough to follow through. That’s because people touch their faces an average of 3.6 times every hour, a 2012 study in Clinical Infectious Diseases found. And that’s a problem, because bringing your hands to your face can spike your cold risk. Workers who report sometimes touching their nose or eyes with their fingers were 41 percent more likely to come down with an upper respiratory infection than those who keep their hands off, according to researchers in Japan. While you can catch the common cold through germ droplets in the air, the most efficient form of transmission for that particular infection is actually hand contact with secretions that contain the virus, the researchers say.

So if your hands touch a surface with the virus on it, and then you touch your face, you can easily introduce the bug into your body. If you can’t help touching your face, just make sure your digits are clean. That means scrubbing your hands for at least 20 seconds (sing “Happy Birthday” in your head), making sure to hit the backs of your hands, between your fingers, and under the nails, the CDC says.

2. Get Plenty of Sleep

Skimping on shuteye can leave you susceptible—it’s just one of the Crazy Things That Can Happen When You’re Short On Sleep. People who sleep fewer than six hours a night are four times as likely to catch a cold as those who log seven hours or more, a study

published in the journal *Sleep* found. This may be because sleep loss messes with certain types of immune cells called B and T cells, which are critical in protecting us from viruses, says study coauthor Aric Prather, Ph.D., an assistant professor of psychiatry at University of California San Francisco. “Additionally, sleep loss is related to an increase in inflammation, which is believed to play a role in cold symptom severity,” he adds.

3. Hit The Gym

You should keep up your workout routine when the temperature drops. The reason: People who exercise five or more days a week take up to 46 percent fewer sick days than those who exercise one day or less a week, according to a study from Appalachian State University. When you exercise, your blood flow and body temperature increase, and your muscles contract. These factors signal your body to recruit important disease-fighting cells that are stored in your lymphoid tissues. These cells are then recirculated throughout your system, says lead researcher David Nieman, Dr.P.H. This allows your body to detect—and kill off—potential disease-causing intruders.

To jack up your immune system, Nieman says near-daily cardio of 30 to 60 minutes a session should do the trick. He notes that resistance training can work, too, but says it should be total-body training—say, like in THE 21-DAY METASHRED, an at-home body-shredding program from Men’s Health—since it appears to be more effective in immune-cell recruitment than routines that target one or two body parts. You can review it at http://www.21daymetashred.com/21daymetashred/index?keycode=256350&utm_source=Menshealth.com&utm_medium=Textlink.

4. Hug It Out

Preventing a cold may truly be in your own hands. Stressed-out people who were more likely to have hugged within the past day are better able to fight off the virus than those who are more hands-off, a study in the journal *Psychological Science* found. “Hugging is a physical expression of social support, and when people feel they are supported, they also feel they are better able to handle stress,” says study coauthor Denise Janicki-Deverts, Ph.D., a research psychologist at Carnegie Mellon University. And that’s important, because stress itself has been connected to increased cold risk, possibly because it may spark the release of certain hormones that can wreak havoc on your immunity, says Janicki-Deverts.

[Source: Men's Health | Alexa Tucker November 22, 2016 January 27, 2017 ++]

Exercise Mental Health Benefits ► Anxiety, Brain, & Sleep Impact

As a naval medical officer with nearly two decades of operational mental health experience, Navy Capt. Robert Koffman, M.D. is often asked: “What can I start doing today to help my mental situation get better?” In this time of what is referred to as “patient-centered care,” the answer to that question is unique for every individual: What works for you may not work for someone else. While medicines most certainly have their place, Koffman has one word of advice that, according to both his own experience and wide-ranging research in the field, has shown to provide positive benefit to almost everyone: Exercise.

Exercising with others is a great motivator. Semper Fi Fund (<https://semperfifund.org>) offers a recreational, team-based, sport program called Team Semper Fi for injured servicemen and women who use sport as a rehabilitative tool on their road to recovery. The motivation, inspiration and camaraderie that Team Semper Fi offers is truly extraordinary. Whether that physical activity takes place as part of a team or as an individual in a gym, out on the hiking trail (with the added therapeutic benefit of nature) or in your own backyard, exercise simply means increased physical activity. The benefits you’re likely to see from increasing your activity by as little as thirty minutes a day three days a week make the effort very worthwhile. These include:

Reduce stress and anxiety - Exercise increases the presence of all sorts of good chemicals in the brain: norepinephrine, for example, which helps the brain respond to stress. And you’ve probably heard of endorphins: These chemicals trigger positive feelings (ever heard the term “runner’s high”?) even as they reduce perceptions of pain. It sounds like a big win-win, doesn’t it? Well, it is — and many studies have shown that even moderate walking (three orSimple graphic with the top 3 benefits listed four days a week for 30 minutes at a time) can deliver very positive benefits.

Increased brain health - When you exercise, you increase the production of brain-derived neurotrophic factor (BDNF) — a protein in the brain that’s important for long-term memory. Low levels of BDNF in the brain have been linked to Alzheimer’s, obesity and depression. Moreover, BDNF is also important for helping brain cells and neurons grow and form important connections with other neurons, Neuroplasticity is a term you’ll be hearing much more about as scientists tackle a

significant concern for veterans — traumatic brain injury.

Improved sleep patterns - The Centers for Disease Control recently reported that insufficient sleep has become an important public health issue. In fact, more than a third of Americans fail to get sufficient sleep on a regular basis. Why is this important? An insufficient quantity of sleep, chronically, is linked to seven of the 15 leading causes of death in the U.S. today!

You feel much better after a good night's sleep than you do after a restless night's sleep, right? That's hardly a surprise: Sleep is the body's way of recharging itself — not just physically, but also mentally. When you exercise, you're increasing your body's temperature; the drop in temperature after exercising is a signal to the body to get some sleep. A recent study by the National Sleep Foundation found that "people sleep significantly better and feel more alert during the day if they get at least 150 minutes of exercise a week." The health benefits of exercise are particularly notable for Veterans who suffer from post-traumatic stress. Research has shown that focusing one's mind on the physical activity at hand, whether it's walking, hiking, swimming, seated cardio or whatever it may be, can help reduce the immobilization stress response familiar to anyone suffering from PTSD.

Of course, there are many more benefits to exercise that there insufficient space to comment on here, for example: Improved self-confidence. A sharper memory. Better control over addictive impulses. A force multiplier for therapeutic efforts. Increased energy and stamina. An improved overall mood. So, get out there and get moving — you have nothing to lose but those negative thoughts — and maybe a few less sleepless nights, too! To learn more visit Team Semper Fi at <https://semperfund.org/how-we-help/team-semp-fi>. [Source: Vantage Point | Robert Koffman | February 8, 2017 ++]

Submarine Captain dies in a horrible traffic accident on his way to the base... Next thing he knows he is standing in front of the gates to heaven... but... the gates are closed. Suddenly GOD's voice booms out... "Yes, Captain, what can I do for you?" -- The Captain explains... "I just died... and I need to know if I am going to get into heaven?" -- God responds... "Heck, I don't know... Let me check with the COB..."

Healthy Eating Update 01 ► American Heart Month | Smoothies

February is American Heart Month. A great way to take care of your heart is to live a healthy lifestyle which includes what you eat and drink. If you want a way to add more fruit, veggies, and fiber to your day try an option beyond what's on your plate. Sip and slurp your nutrients through a yummy and heart-healthy smoothie. Registered dietitian Anne L. Koth at the Rockford, Illinois VA Clinic encourages Veterans to eat and drink things that are heart healthy. A great way to get in a lot of produce is through a smoothie.

There are many ways to make a smoothie: most recipes use a milk or yogurt base, or a milk-substitute such as almond milk or soy yogurt. The next step is to add fruit and/or vegetables. If your smoothie is your breakfast meal or if you are trying to get more protein into your day, you can add peanut butter or other nuts, oats, seeds like chia or flax or even protein powder — the possibilities are endless. But beware – not all smoothies are truly a healthy choice. Some bottled and fast-food smoothies contain lots of hidden sugars and calories. No blender? No problem. Use soft fruit such as ripe banana, ripe mango or berries. You could steam vegetables and include those, too. Mash the fruit as much as you can in a bowl with a fork. Then add liquid gradually continuing to whisk it with the fork until it's all blended up.

It's important not to confuse smoothies with juice drinks or "juicing". The juice of fruits and vegetables contains nutrients, but it lacks a very important item: fiber. Smoothies generally have the whole fruit or vegetable pureed into the product. This texture and fiber helps you stay full. For more information on this potential benefit, see the study in the medical journal Appetite at <https://www.ncbi.nlm.nih.gov/pubmed/27235823>. Many recipes for home-made smoothies exist, and your VA dietitian can share ideas as well. Check out <https://youtu.be/jtjZOe0dvwA>. Also take a look at http://www.nutrition.va.gov/docs/UpdatedPatientEd/Yummy_Benefits_Cookbook2.pdf for the Yummy Benefits Cookbook's (page 67) smoothie recipe and consider making an appointment with your PACT team dietitian, to customize your smoothies to meet your individual health goals. [Source: Vantage Point | Anne L. Koth | February 8, 2017 ++]

Lung Cancer Update 01 ► Who should Really Get Screened

Back in 2013, the U.S. Preventive Task Forces recommended annual lung cancer screening in adults ages 55 to 80 who had a 30 pack-year smoking history and currently smoke, or have quit within the past 15 years. This was determined after a 2011 study called

the National Lung Screening Trial (NLST) found that screening could prevent lung cancer deaths in high-risk people. Now, a new study just published in JAMA Internal Medicine finds that implementing such a lung cancer-screening program may be challenging and complex—and even unreliable in offering insights about whether someone actually has cancer or not. Undertaken by the Veterans Administration (VA), the study found that the rate of false positives was more than double that which was found in the NLST. Of the 2,106 patients screened, about 60 percent had nodules, but only about 2 percent required further evaluation—and just 1.5 percent actually had lung cancer.

“Lung cancer screening is particularly fraught with difficulty and always has been,” says Leena Gandhi, M.D., Ph.D., of NYU Langone’s Perlmutter Cancer Center. One reason? The test itself, which relies on CT scans, is less reliable at specifically picking up cancer than other tests are, she says. “When you use a CT scan, you pick up all kinds of things that aren’t cancer, especially on a smoker or former smoker,” she says. Those include benign nodules and inflammation. When doctors see them, it sparks false positives that could lead to more invasive procedures like biopsies—not to mention a whole lot of anxiety.

What’s more, CT scans also emit radiation, which in itself has been shown to be a cancer risk with cumulative exposure, Dr. Gandhi notes. Finally, another sticking point is that lung cancer screening requires a sophisticated screening program that’s backed by a lung cancer team—something not found in many areas, says Dr. Gandhi. The VA study was only done in certain parts of the country where those programs were in place, she adds.

So, should you get screened? It turns out that’s a more difficult question than it seems. The best strategy is to talk with your doctor about risk factors. If you’re a smoker and experiencing symptoms like chronic cough, and/or you have a history of lung cancer in your immediate family, it’s likely that screenings will be used as a diagnostic tool. But for younger guys who either don’t smoke or quit more than 15 years ago, and have no symptoms and no family history, a screening is usually not used as a preventive test. [Source: Mens Health | Elizabeth Millard | February 6, 2017 ++]