Mark Twain once said ‘He who laughs, lasts.’ Today we are finding there is considerable truth to his statement. Research shows that hearty laughter can lower your blood pressure, increase your heart rate, reduce stress, ease muscle tension, improve your breathing, boost mental function, and burn calories! Can you imagine nurturing your body and mind with all of these health benefits at the same time?

At Vanderbilt University, a bionutrition researcher by the name of Maciej Buchowski, found that 10-15 minutes per day of hearty laughter can burn an extra 40 calories. With 66% of U.S. adults overweight, and 50 million considered obese (National Institutes of Health, Center of Disease Control, 2007) this may be a good time to include hearty laughter into our daily routine.

There are many medical benefits of laughter. Laughter has been known to reduce cortisol (the stress hormone in our body), ease muscle tension and reduce the body’s T-Cell count. It also aids ventilation and helps clear mucus plugs, induces and increases the heart rate, enhances blood oxygen levels and boosts circulation. In many places laughter is used as part of cancer care and other disease recovery programs.

In Robert R. Provine’s book, Laughter, A Scientific Investigation, it is stated that laughter can be instrumental in brain health programs. The psychological benefits of laughter include: increased catecholamine (known to boost mental function), increased pain tolerance levels, and reduced levels of stress which produces an emotional high.

Imagine being prescribed laughter for weight loss. It is not as silly as it sounds. Dr William Fry Jr. coined the terms “internal aerobics” and “stationary jogging” to describe the physical effects of a good belly laugh. His research found that laughter, like physical exercise... continued on page 8
The estimated new incidence of all types of cancer for 2008 for both men and women in the United States is approximately 1.4 million. The estimated amount of deaths for 2008 for both sexes is approximately 600,000 people. Although in the past years there have been numerous improvements in prevention and treatment of cancer, there are still countless cases in existence. Several studies indicate that diet and exercise can aid in prevention of cancer. Additionally, if you are a cancer survivor or are undergoing treatment, proper nutrition and staying physically fit may alleviate symptoms.

To prevent cancer, The American Cancer Society recommends:

• **Maintaining Good Physical Shape and Weight**
  - Overweight and obesity is associated with an increased risk of cancers of the breast, colon, endometrial, esophagus, and kidney.
  - Do not eat in excess, control your body weight and monitor your Body Mass Index (BMI). A healthy BMI is 18.5-24.9 kg/m². An increase in BMI can increase the risk for cancer, as well as, high blood pressure, diabetes, heart disease, and stroke.
  - Control portion sizes according to the USDA MyPyramid website [www.mypyramid.gov](http://www.mypyramid.gov)

• **Implementing an Active Lifestyle**
  - Exercise moderately-vigorously for a minimum of 30 minutes each day, five days per week will reduce cancer risk.
  - Moderate exercises: walking, biking, cleaning the house, gardening
  - Vigorous exercises: running, weight training, aerobic dance, swimming
  - **Your 30 minutes can be achieved throughout the day by walking to work, taking the stairs whenever possible, parking your car far from the entrance, or visiting co-workers at their desks rather than emailing.**

• **Consuming a Healthy Diet**
  - 5 or more servings of fruits and vegetables each day
  - Whole grains- providing fiber, which may reduce the risk of colon cancer
  - Limiting processed and red meat which are high in saturated fats
  - Limiting alcoholic beverages to 1/day for women and 2/day for men
  - Soy- a good source of protein which includes phytochemicals that may protect against cancer.
  - **Soy products should not be consumed in excess as high amounts may compete with estrogen and stimulate cancer cell production, increasing the risk of breast cancer.**

In addition to general recommendations, it is advisable to consume 2 cups of fruit and 2 ½ cups of vegetables each day that are rich in antioxidants for cancer prevention. Antioxidants protect against tissue cell damage from free radicals which may lead to cancer. Setting daily goals of improved diet and exercise every day will help to ensure the two important parts of a healthy lifestyle are part of your daily schedule. Planning ahead ensures your health routine is part of each day’s activities. Teaming up with friends or family will provide a support system. Setting daily goals for improved diet and exercise everyday such as “increasing your 15 minute walk to a 20 minute walk until you can walk for 30 minutes” or “adding one fruit or vegetable to your diet each day” will help you meet your goals and make them appear more attainable. Taking “small steps” each day will help you meet your goals and motivate you to reach higher levels of good health, maintain a healthy lifestyle and prevent your risk for cancer.

For further information:
American Cancer Society
http://www.cancer.org/docroot/home/index.asp
National Cancer Institute http://www.cancer.gov/
Norovirus: What is it and why should we care?

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Even if you are generally knowledgeable about food safety, you might not be familiar with norovirus. Norovirus, formerly known as Norwalk Virus is named for the town of Norwalk, Ohio, where the virus was first discovered when it sickened elementary school children in November of 1968.

Norovirus is considered by many experts to be the single most common cause of gastroenteritis (“stomach flu” or vomiting and diarrhea) and one of the top ten causes of foodborne illness in the United States every year. Symptoms include nausea, vomiting, diarrhea and abdominal pain, and usually develop 24-48 hours after exposure and may last for 24-60 hours. Most people recover from Norovirus infection without treatment.

Experts estimate that about 23 million cases of norovirus infection occur every year, and the Centers for Disease Control and Prevention (CDC) report that they’re responsible for nearly 60% of all reported foodborne illnesses. The most common complication from Norovirus infection is dehydration, which can become severe among those with weakened or under-developed immune systems, such as the elderly or the very young, and medical attention may be required.

The primary source of norovirus infection is the fecal-oral route. Virus particles are excreted in feces of a sick person and are then in the environment to contaminate food, water and inanimate objects. People have also become sick with norovirus from eating raw or insufficiently-cooked shellfish, (generally clams and oysters), and from raw fruits and vegetables. Outbreaks have also been linked to eating ready-to-eat foods such as sandwiches and salads.

Virus particles are able to enter a person’s mouth when they eat or drink the contaminated food or water, or put their hands in their mouths after they’ve touched something that contains the virus. Droplets from the vomit of a sick person have also been shown to spread the virus, and breathing in these airborne particles can spread the disease.

Noroviruses may cause large-scale gastroenteritis outbreaks in situations where people are in close contact and/or such as restaurants, or hospitals. A number of well publicized outbreaks have been reported on cruise ships, where norovirus outbreaks can occur and may be difficult to control. Among all known outbreaks of norovirus-related gastroenteritis, it has been reported that 39% of them could be traced back to restaurants, 30% occurred in nursing homes, and 10% happened while those affected were on holiday.

Noroviruses have some characteristics that enable them to spread rapidly and potentially lead to the development of an epidemic: Symptoms arise quickly; sick individuals can shed millions of infectious particles; it may take only a few virus particles to make someone sick; the virus is environmentally stable and can survive freezing or heating up to 140°F; and there are many types of noroviruses, so being infected with one type does not provide you with immunity from other types, making vaccine development difficult or impossible.

What can I do to avoid norovirus infection?

The single best thing you can do is to practice good hygiene! Wash your hands with soap, especially after using the toilet and before eating or preparing food. Carefully wash fruits and vegetables and don’t eat raw shellfish. Avoid direct contact with infected people (including their feces and vomit) as best you can. If you can’t, keep your hands washed and thoroughly clean any surfaces the sick person may have contacted as soon as you can.

For more information: http://www3.niaid.nih.gov/topics/norovirus/default.htm
Eating the Mediterranean Way
Sharon P. Blase, M.A., CFCS, Family and Community Health Sciences Educator, Cumberland County

Breakfast, lunch and dinner tables are graced by cruets of extra virgin olive oil and balsamic vinegar in the Mediterranean countries of Italy, Greece, Spain and Croatia. These condiments are used in place of butter and salad dressings included on our tables. The Mediterranean diet places a strong emphasis on fresh fruits, vegetables, whole grains, and small portions of nuts. The regular use of olive oil and balsamic vinegar appears to be part of the dining culture and regular meal patterns. Salads appear on tables without salad dressing, thus diners are left to create their own dressing from the olive oil and balsamic vinegar.

The focus of the Mediterranean diet isn’t to limit total fat consumption, but to make wise choices about the types of fat. There is much emphasis placed on consuming olive oil in this way of eating. Extra virgin olive oil contains monounsaturated fat, which is oil made by cold pressing the highest quality fruit of the olives. A traveler in Mediterranean countries soon discovers that olives can range from black to yellow to red and even white depending on the olive variety. The Mediterranean style of eating is abundant in other monounsaturates such as nuts and avocados. Olive oil readily replaces other fats such as margarine and butter. Extra virgin and virgin olive oils are the least processed form of oils, meaning they contain the highest levels of the protective plant compounds that provide antioxidant effects.

Plant sources are the biggest components of the Mediterranean diet, usually from whole grains, breads, pasta, polenta, bulgur and couscous, rice, potatoes, fruits, vegetables, legumes, seeds and nuts. Grains in the Mediterranean region are typically whole grain, usually contain very few unhealthy transfats, and bread is usually eaten without butter or margarines. Dairy products include small amounts of cheese, yogurt and eggs and they are eaten only a few times a week. There is usually a moderate consumption of fish, occasional poultry and minimal red meat. Wine, usually red, is consumed daily, but usually no more than one to two glasses per day. Sweets are limited to a few times per week with honey the most popular sweetener.

Early research in the 1950’s and 1960’s conducted by Ancel Keys discovered that males consuming the Mediterranean diet in Italy, Greece, France and Spain had a lower incidence of coronary artery disease than men in northern Europe or the United States. This diet popularized in the 1970’s was eventually developed as the basis for the “Mediterranean Diet Pyramid”. Research over time has concluded that the diet is probably enhanced by physical activity, reduced stress, and healthy attitudes toward eating and mealtimes practiced by those living in the Mediterranean region.

Your first introduction to a Mediterranean eating plan might be to place the olive oil and balsamic vinegar cruets on your dinner table and also ask for them when you dine out.

References:


Flaxseed: An Ancient Plant – A Modern Nutritional Wonder

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The flax plant was cultivated more than 5000 years ago in Asia, Europe and Africa. In 650 B.C. Hippocrates wrote about the medicinal use of flax for easing stomach pains. Flaxseed is the seed of the flax plant and has re-emerged as a nutrient-rich functional food.

Preliminary research studies have made consumers aware of the benefits of flax in reducing the risk of chronic diseases. Several healthful benefits include the reduction of LDL cholesterol levels, lowering of blood pressure and decreasing the risk of heart disease, diabetes and breast cancer.

The nutritional profile of flaxseed is complex. Flaxseed is rich in the B vitamins, and the minerals magnesium and manganese. Flaxseeds are a very rich source of an essential fatty acid known as alpha linolenic acid (ALA), an Omega-3 fatty acid found in cold-water fish such as salmon. Recent research shows that omega-3 fatty acids play a role in the reduction of inflammation in our bodies. Lignans are found in flaxseed. Preliminary research shows that lignans act as both phytoestrogens and antioxidants. Flax is an excellent source of soluble and insoluble fiber. Both soluble and insoluble fiber promotes a smooth digestive system and aids in the prevention of constipation. Flax lignans have the ability to slow the onset of Type 1 and Type 2 diabetes and provide protection against some forms of hormone sensitive breast and prostate cancers.

Flaxseed comes in three forms: whole-seed, flaxseed meal and flaxseed oil. The high fat content makes flax products prone to rancidity. Take time to smell the product before buying. Proper storage is essential. Whole seeds should be put in an airtight container and stored in the refrigerator. Ground flaxseed should be frozen in a sealed container. The oil should be stored in an opaque container in the refrigerator.

Serving suggestions – Since whole flaxseeds pass right through the body, it is best to grind them before eating. Sprinkle the ground flaxseeds into cereals or yogurt. Ground flaxseed can be used in baked foods, while flaxseed oil can be substituted for other oils in salad dressings. Flaxseed meal can be used to replace one-fourth of the flour in pancake, waffle or cookie mixes. You can also use flaxseed in place of eggs in muffins, pancakes and cookies. To substitute flaxseed for one large egg in a recipe, use 1 tablespoon ground flaxseed plus 3 tablespoons water. Keep in mind that it will somewhat alter the texture of the finished product, making it slightly “gummy.” Try a pesto – use fresh basil, garlic, ground flaxseed, flaxseed oil and grated parmesan cheese. Mix with hot pasta.

Some people are allergic to flaxseed, so if you have a tendency toward food allergies, please use caution if trying flaxseeds for the first time.

References:
Early each year, many people think about changes they’d like to make to improve their lives. Media outlets help foster their resolve with lists of recommended actions and stories about successful behavior changers. For example, People magazine runs a feature annually, called “Half Their Size,” which describes how people lost half their body weight.

Are you planning to make behavior changes in 2009? To improve your health and personal finances, follow 3 to 5 of the 25 Small Steps to Health and Wealth™ (SSHW) behavior change strategies (see http://njaes.rutgers.edu/sshw). Select several that are interrelated. For example, you might decide to defy someone as a result of a teachable moment by kicking a healthy behavior up a notch (e.g., walking 8,000 steps per day instead of 5,000).

A year ago, I decided to “live the SSHW book” that I co-authored. Despite a three hour a day commute to work and a sedentary job, I lost 30 pounds (150 lbs down to 120 lbs), or 20% of myself, over the course of 10 months. My behavior change began with a teachable moment (SSHW Strategy #18), specifically a high cholesterol reading. I then negotiated with my doctor to try to avoid taking cholesterol drugs and set out to defy him (SSHW Strategy #5). My body mass index (BMI) indicated that I was overweight and I vowed to get it below the recommended benchmark of 25 (SSHW Strategy #13). To step down to change (SSHW Strategy #20), I switched from 2% milk to skim, substituted apple sauce for cooking oil, and started eating carrots, instead of cookies, for a mid-morning snack.

The second part of my DEA (diet, exercise, and attitude) program was increased physical activity. To “kick it up a notch” (SSHW Strategy #21), I ramped up daily steps from an average of about 6,000 a day to twice that amount. As suggested in SSHW, I “found” pockets of time to exercise including 20 minutes at the office before starting work, during my lunch hour, walking around an outdoor shopping mall on the drive back from work, and in the evening at home.

A downside of the weight loss was that clothes that initially got loose later looked downright baggy. Some new clothes and alterations were ultimately needed. Fortunately, due to the recession, stores had lots of sales. In addition, the high cholesterol reading that started everything did not drop enough. So ultimately, while I became healthier, I couldn’t defy my doctor.

Similar financial parallels can be found for SSHW health change strategies. For example, calls from bill collectors are a teachable moment to address outstanding debt. Consumer debt no greater than 20% of take-home pay is a recommended benchmark. Increasing 401(k) plan savings is an example of “kicking it up a notch” and reducing discretionary spending is a way of “stepping down.” Regardless of what changes you make, remember that you can’t reach a goal unless you set one. Any small change you make to improve your health and finances is a step in the right direction.
The Sunshine Vitamin
Carol Byrd-Bredbenner, PhD, RD, FADA, Extension Specialist in Nutrition

Today, how many of us even think about whether we are getting enough vitamin D? After all, scientists discovered vitamin D nearly 100 years ago. And, with the fortification of milk in the 1930s, the number of rickets cases dropped dramatically. (Rickets causes misshapened bones, such as bowed legs, in children.) Rapidly emerging research indicates, however, that we should be thinking about vitamin D and taking steps to ensure we have an ample supply.

There are many reasons why a sufficient supply of vitamin D is needed throughout life. For example, vitamin D and calcium are crucial to bone health. Calcium is used more efficiently when vitamin D supplies are plentiful; this makes it easier to meet calcium needs. New research has shown that vitamin D helps improve muscle strength, which helps prevent falls in older adults. Vitamin D also helps reduce the risk for many chronic illnesses, including diabetes, heart disease, certain types of cancer, and autoimmune diseases, like multiple sclerosis. In addition, low blood levels of vitamin D increase the risk for heart attacks.

Part of the challenge in getting enough of vitamin D is that very few foods provide it. The richest food sources are fatty fish (e.g., sardines, mackerel, and salmon), cod liver oil, fortified milk, and some fortified breakfast cereals (be sure to check the label!). Eggs, butter, and some brands of margarine contain vitamin D, but you will need to eat several large servings to meet your needs.

Most of our vitamin D is manufactured in the body after exposure to sunlight. The amount we produce is influenced by many factors. People who have dark skin cannot make vitamin D as efficiently as those who have fair skin. Older folks do not make as much vitamin D as younger ones—by age 70, the amount of vitamin D produced in our bodies plummets 70%. Where you live makes a difference, too. People living in northern areas get too little sun exposure in the winter to generate the amount of this vitamin needed for good health. To get enough sunlight for vitamin D production and minimize skin cancer risk, researchers recommend exposing your arms and legs (no clothes or sunscreen) to sunlight twice a week for about 5 to 30 minutes between 10 AM and 3 PM. Sunlamps that make UVB rays (check the label!) may be helpful during the cold winter months.

Vitamin D supplements may be an even safer bet for ensuring a sufficient supply of this nutrient. In fact, many nutrition scientists believe that most people over age 60 are deficient in vitamin D and probably need a supplement. If you think you need a vitamin D supplement, be sure to speak with your health care provider. A blood test that measures 25-hydroxyvitamin D levels can indicate if your vitamin D level is in the desirable range. Often, a supplement that provides 800 to 1000 IU can move your vitamin D levels into the healthy range.

To protect your bones and your overall health, it’s time to start thinking about your vitamin D level and take steps to be sure it’s in the healthy range. To learn more, visit: http://ods.od.nih.gov/factsheets/vitamind.asp
speeds up heart rate, expands circulation and enhances oxygen intake. In fact, he calculated that 100 to 200 belly-laughs a day is the equivalent of a high-impact workout that can help you burn off as many as 500 calories.

There are ways to promote an element of mirthful laughter in our day by encouraging healthy games and contests. Employee appreciation events and fun celebrations at the workplace can go a long way to building positive relationships and promoting good health at the same time. Families can encourage laughter by spending time reminiscing funny events and special celebrations. Watching old and new movies together can also help make you laugh. Instituting a family game night can spur fun and laughter among family members.

A simple routine to follow that can promote a healthy lifestyle and help you prevent disease includes:

• Eat a healthy diet everyday
• Exercise, even if it is walking a few extra steps each day
• Get enough sleep at night to feel rested
• Drink water instead of high sugar drinks and soda
• Spend time with people who are important to you
• Laugh, laugh, and laugh - because hearty laughter has a positive relationship to a healthy lifestyle.

References: