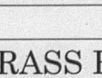
OPINION

BLUEGRASS BEACON



Bluegrass Beacon
By Jim Waters

Chamber should 'butt' out of smoking-ban issue

I like the sign I saw in front of a church once: "How will you spend eternity: smoking or nonsmoking?" stated the bold black letters.

"Nonsmoking" for me, please.

While I wish everyone would follow my lead, the reality is some people choose eternity's "smoking" section.

I also wish everyone in Kentucky would choose to go smokeless before that trip to eternity occurs. Some 30 percent of Kentuckians smoke, a practice that carries with it a $700-million price tag.

Some think this undesirable habit justifies government-mandated smoking bans that criminalize legal behavior and disregard important property and individual rights.

Not me. And not Kentuckians who believe that a free marketplace is better than government coercion, and given the chance, will result in fewer smokers, better health and reduced costs.

I would have thought that a group representing the interests of businesses would make it a high priority to reduce companies' regulatory burdens by advocating for less, not more, government.

But get a load of this stocking stuffer. As part of its "wish list" for the 2008 legislative session, the Northern Kentucky Chamber of Commerce endorses a statewide smoking ban "in most public places," even privately owned ones.

The chamber claims that its mission is to "develop strong businesses and a vibrant economy . . . resulting in a better quality of life for all." Yet it endorses passing a state law that threatens a business-owner's constitutionally guaranteed property rights under the guise of "quality of life."

Watch out when government-types use "quality-of-life" speak. It's usually code for more government encroachment into boardrooms, classrooms and bedrooms. Why don't we hear more talk about "reclaiming lost liberties" or "shrinking the size of government" or "making schools more accountable?"

This chamber opposed school choice for the parents of Kentucky's 109,000 special-needs students as part of its 2007 wish list. That's no great surprise. The chamber's vice president in charge of legislative lobbying is Stan Lampe, who previously worked for the state education cabinet. It's not such a shocker, then, that Lampe, who undoubtedly exerts a lot of influence on the chamber's strategy, thinks Frankfort is capable of solving all of our problems.

Perhaps it's time for chamber members to encourage their advocacy group to increase its faith in the free marketplace, entrepreneurs and people.

These constituents should wonder aloud whether, considering the serious economic challenges facing Kentucky and the increasingly global competitive marketplace, trying to get Frankfort to impose smoking bans on Morgantown is the best use of chamber resources and influence.

Don't the chamber's leaders have enough to do to "develop strong businesses and a vibrant economy" without getting into a highly divisive battle? If not, perhaps they could read the Constitution – particularly the part about how important private-property rights were to the founders.

Most proponents of government-coerced smoking bans come with minds as narrow as a Virginia Slim. They refuse to allow for the fact that the marketplace does a better job than Frankfort of reducing smoking and related health-care costs and improving citizens' health.

For example, as teenagers get exposed to the health-shattering effects of smoking through education, they either kick the habit or refuse to light up in the first place.

Kentucky's Cabinet for Health and Family Services reported a 3-percent decline during 2006 in the number of teens who admit to current tobacco use. Admitted current tobacco use among teens declined by a whopping 13 percentage points between 2000 and 2006, cabinet data shows.

Of course, bureaucrats credit government action – primarily last year's tax on cigarettes – for the decline. But there was a 10-percent decline in tobacco use among teens before the tax hike.

Smoking rates dropped because kids got smart. Young people deserve some credit. Give them good information and many will do good things.

Besides, if God himself can't even make people choose "nonsmoking" for eternity, what makes big-government sympathizers at the Northern Kentucky chamber think another law in Frankfort can end smoking in Corbin or Covington?

Jim Waters is the director of policy and communications for the Bluegrass Institute, Kentucky's free-market think tank. You can reach him at jwaters@bipps.org. You can read previously published columns at www.bipps.org.

STEVE

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tening to a few carols of my own.

Without a doubt, Christmas is my favorite time of the year. There is something magical about the season that keeps my inner child alive. When I was little, I think I measured time in terms of Christmas. When school let out for the summer, I knew it was half-past Christmas – only six more months to go. When school started back up in the fall, it was like two-till. "Just Halloween and Thanksgiving, and then Santa would be on his way."

Our home was filled with wonderful holiday traditions. Every year on Christmas Eve, the whole family would bundle up, Dad would crank up the Coleman lantern, and we'd go Christmas caroling all around the neighborhood. Afterwards, we'd come home and drink hot chocolate stirred with a candy cane from the tree as Dad read the Christmas story from the Book of Luke. After that, we'd scurry off to bed and try to get to sleep so Santa could come.

The kids were so excited we thought we would never get to sleep. But no matter how late we stayed awake, by 4 o'clock in the morning, we were wide awake. Mom and Dad would tell us it was too early and send us back to bed, but less than 15 minutes later, we'd be back.

"How about now?" we begged, "We waited..."

Eventually, Mom and Dad figured out they weren't going to get any more quality sleep that night and relented. Dad had us wait in the hall while he turned on the Christmas tree lights, put on some Christmas music, and got the camera ready.

Then he gave us the OK and all six of us came stampeding into the room.

The Christmas I remember best was the year Mom warned us not to expect much, because, money was extra tight that year. But that Christmas morning as we came dashing into the room, there were still piles of presents under the tree.

As we tore off the wrapping paper, there were startled cries of, "Wait! We already have this game..." or "Hey! This one looks old..." Mom had gone into our closets, pulled out all the old games and puzzles we hadn't played with for a while, wrapped them, and put them under the tree. We were a little disappointed at first, going from not expecting presents to seeing so many, to realizing they were just our same, old games.

But as we spent that day together as a family playing those games, the disappointment was soon forgotten, replaced by feelings of comfort and joy, peace on earth, and goodwill toward men. Not only was that my most memorable Christmas, it has become my favorite. That year taught me that Christmas is not about the presents we receive. It is a celebration of the love in our hearts and in our homes – a reflection of God's love, which comes to us in the form of a baby in a manger.

Wishing you a Merry Christmas!

Signing out from Honolulu

Steve Scalf

*** Steve Scalf is a member of the U.S. Military. Reach him at slscalf@msn.com.*

LETTERS To The Editor

Editor,

I've just finished reading the latest whining session by the County Judge-Executive about the "devastating" cost of the special election to fill our local State Representative seat. I've read both the Bourbon Citizen and the Bath News-Outlook and I've not noticed that they're complaining about the price tag. Does it cost money? Of course it does, but are we so financially destitute we cannot afford democracy?

This dodge, and some of the longer serving members of this fiscal court, must accept responsibility for the financial debacle they've created. They've allowed this county to decline by their inaction and refusal to adopt policies that will make this a thriving self-sufficient community. We must, however, give them credit for their vigilance on major tree limb issues. It has become a near weekly occurrence to pick up the local newspaper and read of the fiscal court's latest "woe is us" and "we're so poor" diatribe.

The special election was called an unfunded mandate. Huh? Do you think so? When the fiscal court raised our property taxes what was that? When they increase our local payroll tax (they're laying the groundwork for that) what will that be? Let's think this through. They will make me pay more money for less services and my employers will not increase my wages to offset the additional costs. Sounds like and unfunded mandate directed at me and all other local taxpayers. Welcome to the club, boys!

The fiscal court complains about their tight budget yet they've never discussed cutting their own salaries and benefits. How about you guys taking a little less and giving

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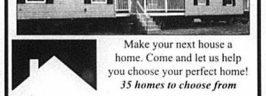

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SENIOR LIVING

Why an advance care plan should be part of your new year's resolutions

(ARA) - Does your sister make sure to bake your favorite cake on your birthday? Or maybe you and your son always watch your favorite movie on Thanksgiving. Families are close and know lots of special things about one another. As we grow older, there are some very important things that every family should know and discuss, even if they are difficult.

Later in life, we face a variety of health issues and might not be able to care for ourselves like we used to. Making an advance care plan can ease worries for you and your family about what might happen to you if you are unable to make decisions about your own care or about death and dying.

An advance care plan is a written document that helps you to ensure that your care is customized to reflect your personal preferences and health needs, as well as meet your social, cultural and religious requirements. Getting answers to your questions and letting people know what you want at the end of your life can help you feel more in control and give you peace of mind as you go about living your life.

"An advance care plan is a good idea for all adults, regardless of their medical history. Discussing these issues can be difficult, but ultimately the goal is to ease the burden if the situation does arise," says Clyde Yancy, M.D., Chair Education Committee at the Heart Failure Society of America (HFSA), a nonprofit organization dedicated to enhancing the quality and duration of life for patients with heart failure and preventing the condition for those at risk.

Many chronic diseases, including but not limited to heart failure, can eventually exhaust all reasonable medical approaches. Planning ahead is important. An advance care plan often includes an advance care directive, a do-not-resuscitate order, a living will, a health care power of attorney and a financial plan.

Advance Care Directive

This document will provide clear directions regarding your medical treatment and can include a living will, a durable health care power of attorney and a statement about organ donation.

Do-Not-Resuscitate Order

This part of the plan tells doctors, nurses and other rescue personnel what they should or should not do when a person stops breathing or when their heart stops beating or is beating so irregularly it threatens life. The order can include instructions on whether to use different types of methods to revive a person.

Living Will

A living will is usually used during a terminal illness when a person is unable to communicate. It is a legal document that lets a person who is unable to participate in decisions about their medical care express their wishes about life-sustaining treatment.

Health Care Power of Attorney

This allows you to designate another person to make legally binding decisions for you. A health care power of attorney lets someone make all health care decisions for you including the decision to refuse life-sustaining treatment if you are unable to make the decision for yourself.

Financial Plan

Health care can be very expensive, especially when treating chronic illnesses. A financial plan is created to help families deal with issues such as paying for medicines, doctor visits and hospital stays.

"Telling people what you want helps them care for you in a way that best meets your wishes," says Yancy. "Even if you do not create a written advance care plan, it is important to let your health care providers, family and other caretakers know about your wishes regarding the future."

To learn more about advance care planning visit the Heart Failure Society of America at www.abouthf.org.

Courtesy of ARAcontent

Give the New Year a Heart Healthy Start

(ARA) - Every year around this time, people start to give serious thought to the resolutions they will make to improve their lives in the New Year. Among the more popular ones are: to save more money, to eat healthier and to exercise more.

For the over 5 million Americans diagnosed with heart failure, a progressive condition in which the heart's muscle becomes weakened after it is injured from something like a heart attack or high blood pressure, the latter two couldn't be more important. If you are already 70 or older, you have a 1/9 percent of greater chance of developing heart failure and a lifetime risk for eventually having heart failure that can be as high as 1 in 5 individuals so this information is important for everyone to know.

One of the most important moves you can make in the coming year is to develop a treatment plan that is right for you, according to Clyde Yancy, MD, chair of the education committee for the Heart Failure Society of America, a non-profit organization of health care professionals and researchers who are dedicated to enhancing quality and duration of life for patients with heart failure and preventing the condition in those at risk. "In the past, people with heart failure were advised to rest and give up many of their usual activities, but recent research has shown that activity can help them feel better, may decrease symptoms and may improve the heart's function," Dr. Yancy says.

Whether you've been diagnosed with heart failure, or are just trying to prevent yourself from falling victim to this major cardiovascular disorder that is on the rise, here are some tips on how to take charge of your condition:

*** Become More Active**

Start by picking a simple aerobic activity that you like, such as gardening, walking, fishing, swimming or biking, and do it regularly. The goal for most people with heart disease or at-risk for heart disease is to accumulate at least 30 minutes of mild to moderate activity per day on most days of the week. Note that you do not have to be active for 30 minutes in a row to benefit. For example, you can be active for three 10-minute blocks.

Whatever activity you choose, do it slowly and gradually. Spend a few minutes warming up and cooling down before and after each activity session to avoid injuring yourself and stressing your heart. Warming up by walking or stretching helps your body and your heart adjust to the increased demands of activity, and stretches tendons and muscles to avoid cramping. Cooling down allows your heart rate, blood pressure and other body functions to return to their usual resting levels and brings down your adrenaline level gradually.

Although regular activity is good for you, you should not exercise or increase your activities when you feel exhausted, have a fever or infection, have chest pain or are experiencing more shortness of breath symptoms at rest than usual. Be certain that you select activities that are not too strenuous or risky. Remember, moderation is the key. Above all, do not start a new exercise program or engage in a new activity without reviewing this with your physician.

*** Change Your Diet**

In addition to staying active, it's also important for patients with heart failure to change their diets. The most critical change they'll be advised to make it to cut back on sodium (salt) intake and here's why. Heart failure causes the body to hold on to extra sodium, which in turn causes extra fluid to build up in your body. The extra fluid makes your heart work harder.

Cutting back on sodium is admittedly a challenge because salt is everywhere -- in canned soups, canned vegetables, fast food, restaurant meals and processed foods like frozen dinners, boxed noodle and rice dishes. So, even if you do not add salt while cooking or use a salt shaker at the table, you may be eating too much.

What can you do to cut back on the sodium (salt)? Here are four tips from the Heart Failure Society of America:

1. Instead of salt, flavor your food with black, cayenne and lemon pepper; fresh herbs like garlic, onion powder, dill, parsley and rosemary; lemon juice; and flavored extracts like vanilla, almond, etc.

2. Adapt preferred foods to low-sodium versions. Instead of buying lunch meats, which typically contain high amounts of sodium, you can cook fresh chicken, turkey, roast beef or pork without adding salt and then cut up for sandwiches the next day.

3. If you like soup, instead of buying the canned version which is high in sodium and preservatives, you can cut up fresh vegetables, put them in a slow cooker and use herbs and spices for seasoning.

4. Pick foods naturally low in sodium, like fresh fruits and vegetables, fresh meat, poultry and fish.

It can be difficult to change your eating habits. It may take weeks before you enjoy the taste of low-sodium foods, but your taste buds will adjust. Eventually you may not even miss the salt. Your heart will thank you for the lifestyle change.

To learn more about heart failure and how to manage your condition, log on to the Heart Failure Society of America's Web site: www.abouthf.org.

Courtesy of ARAcontent

Tips and truths about living with knee pain

(ARA) - Knee pain sufferers, especially those with osteoarthritis of the knee (OAK), experienced dramatic life changes including the ability to work, exercise and stay in their homes, according to a recent survey conducted by the makers of Synvisc. More than 20 million Americans are estimated to have osteoarthritis, and more than 10 million suffer from OAK, making it the most common form of arthritis in the United States.

Work

The survey indicates that a large number of knee pain patients are still in their prime working years and that their condition is seriously impacting work life. More than 35 percent of respondents indicated that their knee pain interferes with their ability to work. Fourteen percent missed a year or more of work due to their OAK - more than one out of five indicated they stopped working completely as a result of their OAK. Only one in 10 claim to have missed no time from work as a result of their condition.

JoAnne Pepper, 61, of Worcester, Mass. is one of millions who suffer from osteoarthritis of the knee and had to stop working due to the pain. Pepper worked as a cashier, which required standing for hours at a time. "I overdosed on aspirin just trying to get through the work day, and that's when I knew I had to quit my job," she says. "I just couldn't do it anymore."

Pepper was recently treated with Synvisc, a viscosupplementation product, and has since been able to resume some of her daily activities. "I just wish I knew about Synvisc 15 years ago, because then I would have been able to work much longer," she says.

Diet and Exercise

Nearly half of survey respondents attributed weight gain to their OA, with a third gaining 20 pounds or more. This is at least partially explained by the fact that 40 percent of respondents indicated that their knee pain prevents them from exercising on a regular basis. Weight gain and sedentary lifestyles can lead to hypertension, cardiovascular disease, diabetes and other conditions.

However, nearly 70 percent of those polled haven't changed their diet, even though weight is a significant contributor to OAK pain. Being only 10 pounds overweight increases the force on the knee by 30 to 60 pounds with each step, according to research from the Johns Hopkins Arthritis Center.

Forty percent of those polled claimed it was too painful from them to exercise on a regular basis. Additionally, many respondents have stopped participating in leisure activities that provide much needed physical activity, including going for walks, running and gardening.

"Exercise and diet are important parts of any treatment plan for osteoarthritis of the knee, but the Synvisc survey found that most people aren't taking the advice of their doctors, and as a result suffer from worsening osteoarthritis," says Dr. Jeffrey Kraines, senior medical director for Genzyme.

There is a common misperception that OA is a disease that affects only elderly Americans, but the survey refutes that. Thirty-two percent of respondents indicated that they were diagnosed when they were younger than age 40. An additional third of survey respondents were between age 41 and 49 when they were diagnosed, meaning more than 64 percent of sufferers were diagnosed before reaching age 50.

Home

Nearly 20 percent indicated they were forced to change their living situation because of their OA of the knee. The most common result is that patients have rearranged their living area to one floor of their home. Others have had to move into a new home to accommodate their disease.

Dr. Nicholas DiNubile, an orthopedic surgeon and author of "FrameWork - Your 7 Step Program for Healthy Muscles, Bones and Joints," offers these preventative tips for maintaining healthy knees:

* Motion helps reduce the risk for osteoarthritis. It both lubricates and nourishes knees.
* Drink plenty of water. Drying out reduces flexibility and increases wear and tear.
* For osteoarthritic knees DiNubile uses viscosupplementation, such as Synvisc (www.synvisc.com), to restore natural cushioning properties. Ask your doctor if you are a candidate.
* Break a light sweat, then stretch to help maintain mobility and reduce joint stiffness.
* Ice knees for 15 minutes after activity or exercise if you tend to develop soreness.

"The most important thing patients can do to determine the treatment that's right for them is talk to their doctors. Whether cases are mild, moderate or severe, OA of the knee can progress and pain may get worse over time. With the right treatment, sufferers can get the pain relief needed to lead a more active life," says Dr. DiNubile.

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