

W UNITED TRIBES TECHNICAL COLLEGE WEEKLY NEWSLETTE R

VOL. 5 NO. 3

September 11, 1996

Weekly Menu

Sept. 11 to Sept. 13

DINNER

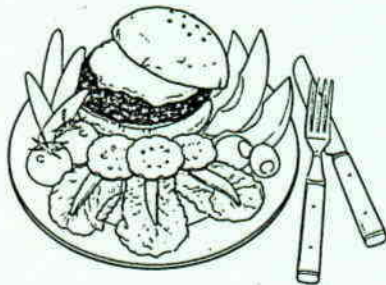
- Wed.- Oven Baked Chicken, Rice, Vegetable, Salad Bar, Assorted Fresh Fruit, 2% Milk
Thu.- Hamburger on a Bun, French Fries, Salad Bar/Fresh Fruit, 2% Milk
Fri.- Old Fashioned Tomato Soup, Grilled Cheese, Potato Chips, Salad Bar, Assorted Fresh Fruit, Assorted Vegetable Tray, 2% Milk

Sept. 16

- Mon.- Poor Boy Sandwich with Turkey and Ham, Potato Chips, Potato Salad, Assorted Fresh Fruit, 2% Milk

SUPPER

- Wed.- Salisbury Steak, Hashbrowns, Salad Bar, Dessert, 2% Milk
Thu.- Shish-ka-bob Casserole, White Rice, Salad Bar, Dessert, 2% Milk
Fri.- Fish Platter, Oven Baked Potato Wedges, Salad Bar, Dessert, 2% Milk
Mon.- Braised Beef over Noodles, Vegetable, Salad, Fresh Fruit, 2% Milk



S.D. State University America Indian History & Culture Conference

The Fifth Annual South Dakota State University American Indian History and Culture Conference is scheduled for March 13, 1997. Once again we will have a section of the conference which will provide an opportunity for students to present their papers.

Students who might be interested, I would appreciate it if you would draw the conference to their attention. The topics for the papers only need to be generally related to American Indian history and cultures. For example, a paper on Indian casinos might also discuss their impact on Native American culture. We would expect only that the paper related to native history and culture. We are attempting to broaden the conference to include other tribal groups in addition to the Sioux. Therefore, papers dealing with history and culture of other native groups are particularly encouraged.

If you might be interested, submit a one-page abstract to me by February 1, 1997. Please contact me if you have any questions at Delmer Lonowski, 306 Scobey Hall, Brookings, SD 57007 (605) 688-4911.

S.A.G.E.

(Science: A Great Edventure)

The five year S.A.G.E. (Science: A Great Edventure) Project funded by the Howard Hughes Medical Institute through the INMED (Indians into Medicine) Program at the University of North Dakota School of Medicine, is presently being developed to strengthen the science curriculum in North Dakota schools with high American Indian enrollment. It involved collaboration among the medical school, five tribally controlled colleges, and nine elementary schools on or near Indian reservations serving 650-700 students in grades four through six. The project has two control components; teacher enhancement and culturally relevant science curriculum development. Both of these components are designed to involve collaboration of resources locally and across the state. Financial support from the project provided for the purchase of inquiry-oriented science materials chosen by the teachers at each school. During statewide (this year at UND July 29-August 1) and local workshops, educators

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Continued from front page.

formed an informal state wide network for supporting each other's efforts at using community resources and tribal elders to enhance the cultural applicability of the science curriculum.

Carol Anderson will be the UTTC S.A.G.E. site coordinator for the second year. Ann Finley continues as the 5-6 grade teacher and as the S.A.G.E. lead teacher for Theodore Jamerson Elementary School. Jean Richardson will join the group as the 4th grade teacher and S.A.G.E. representative. We would like to thank Terry Moericke for his enthusiasm and contributions to S.A.G.E. as the lead teacher during the 95-96 academic year and wish him the best as he moves to the 7-8th grade position at TJES. We look forward to the new academic year as it promises to bring new scientific discoveries, inquires, and observation to our students as they are a part of Science: A Great Edventure.

Attention Students

There will be a mandatory student body meeting on Friday, September 13, 1996 at 1:00 pm at the Gym. This meeting is being held concerning the nominations and speeches of candidates that will be running for Student Senate office. There will be a sign in sheet. To keep track of all the students who attended this meeting. It is really important that we have all of the students present.

Note:

A special thank you to staff and students who volunteered for the Powwow First Aid Station. Your assistance was greatly appreciated Thanks!

*Student Health
Center Staff*

United Tribes

Initially it was set up as a place of detention but a love a supreme love turned a bunch of brick structures with their red clay and confined cement from a place of fascination to a evolving place of education.

So as September creeps closer with a proud Powwow drawing near bringing plenty of beads, blankets, songs and shawls patiently a crisp air waits for a sound of drums beating in rhythm the jingle and jangle of boasting bells that bring Joy, Love and Laughter to a Culture of pride a Culture of heart.

Because many Native Americans will come from afar over water over air to sit in a circle and watch the spinning and turning of the colors of rainbow in a Fancy Dancer and the grace and beauty of a lovely Indian Female Shawl Dancer.

But as the Powwow comes closer as it does every year this time in September I would like all American Indians to listen hard and look at United Tribes Celebrated circle for in it you will find the tranquility and the beauty that all Indians of all ages have come to know as United Tribes.

*Randall Brave Bull
Standing Rock S'
(UTTC Graduate)*

WANTED

NATIVE AMERICAN RECIPES



A Native American Cookbook Fundraiser for Morongo Indian Reservation Fire Department is being sponsored by Tom and Debbie Mathews. A cookbook full of Traditional and Non-Traditional recipes from across the the U.S. and Canada. Recipes will include Participants Name, Tribe & State. For complete information return this completed card to: MIFD Cookbook Fundraiser, c/o Debbie Mathews, 11675 Millard Canyon Road, Banning, CA 92220-2929 or call 1-800-484-6337 (7322). You may also FAX your recipes to: 1-909-849-9229. Cookbook will include Native American Advertising from different Nations. Wholesale Inquiries welcome.

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

**Information for the
Next Newsletter
no later than September 13
to Arrow Graphics
Attn: Wanda Swagger**



CONSTITUTION OF THE UTTC STUDENT BODY

Amendments for ARTICLE V. Election to the Student Senate.
(Rev. 8/2/96)

"Section 1. Ten (10) members of the UTTC Student Senate will be selected through their respective vocational areas by the second Friday in September.

Section 2. The UTTC student body shall elect at-large a President, Vice President, Secretary, and Treasurer at the beginning of the Fall semester.

Section 3. Eligibility for any executive office shall require a candidate to be attending UTTC as a full-time student during the current academic year. A full-time student is hereby defined as an individual enrolled in at least twelve (12) semester credit hours.

Section 4. The officers of the UTTC Student Senate shall be elected under the following provisions:


a. A committee to oversee UTTC Student Senate elections will be established by the UTTC Student Senate, or by the UTTC President in the absence of Senate action to establish such a committee. A majority of the committee members and any volunteer workers should be UTTC students who are not actively running for office.

b. The tasks of the election committee will include but not be limited to:

- 1) Seeking proper authorization and obtaining a current roster of all enrolled students from the UTTC Registrar's office.
- 2) Procuring (e.g., printing through Arrow Graphics) and making available numbered ballots to eligible student voters.
- 3) Witnessing students affixing their signatures on the official election roster.
- 4) Ensuring completed ballots are returned and secured in the official ballot box.

c. Notice for soliciting nominations for the UTTC Student Senate will be posted campus-wide by the election committee on or near four weeks before the day of elections.

d. Candidates for the UTTC Student Senate will be nominated at a public campus meeting no later than two (2) weeks before the day of elections.



e. A UTTC Student Senate candidate must be present at the campus nomination meeting for his/her nomination to become valid. In the event of extenuating circumstances (e.g., family death, medical, etc.), a candidate may be nominated in absentia if the candidate notifies his/her academic advisor or the UTTC Student Senate advisor of the circumstances as soon as possible.

f. A UTTC student body meeting to present and introduce the candidates will be held no later than two (2) days before the election.

g. The election balloting will be conducted at a centrally-located campus site beginning at 10:00 a.m. and concluding at 4:00 p.m.

h. A neutral observer will be selected by the election committee to oversee election proceedings. The UTTC Student Senate advisor will select two (2) faculty members to serve as ballot counting officials.

i. No candidates will be allowed to actively campaign in person at the election site. Infractions of this rule will result in a hearing requested by the election committee.

j. At the conclusion of election balloting, the observer will be responsible for gathering and submitting the student roster, the election box, and all excess ballots to the designated counting officials. At least two (2) student members of the election committee will be present during the counting of ballots.

k. Election results will be posted at the UTTC Skills Center, Education Building, Cafeteria, Mail room, and the Financial Aid office within one school day after election results have been certified by the counting officials.

l. Any tie in balloting will result in a re-election of that officer position within one (1) week after election results have been certified.

m. Candidates for office may petition within two (2) school days for an election recount. Any petitioner must be present with the election committee and official counters during the recount process, or the petitioner's recount privileges will be forfeited.

n. New officers will be installed and assume duties within one week after elections have been certified.



TO THE PARENTS:

What is good dental health? How is it attained? How can you help your child achieve this goal?

Good dental health means teeth that are in good condition. But it means more. The mouth, the gums, tip-top shape. so when we talk about dental health, we are talking about the teeth and their supporting tissues.

Dental care should be started early. Habits formed in the early years are likely to be continued into adulthood. The rules are fairly simple--visit your dentist as often as he or she suggests, clean teeth supply of fluoride.

Why is visiting the dentist so important for young children? How do you teach your child to brush his teeth? What is a wise food selection? Why is fluoride important?

The information on dental health contained in this article is considered by the American Dental Association to be in accord with current scientific knowledge.

YOUR CHILD'S TEETH

We have two sets of teeth during our lifetime. The making up the first set are called "baby or primary teeth. The second set of teeth are permanent. There are 32 in a complete set.

With what we know today about dental care, your child can usually keep the his permanent teeth for a lifetime. But good dental health practices are necessary from infancy throughout life. They are vitally important during the preschool years.

Important functions of the primary teeth

The deciduous teeth serve four important functions. First, they are necessary for chewing foods thoroughly. Secondly, they affect your child's appearance. Third, a full set of sound, properly spaced, deciduous teeth holds space for the permanent teeth, forming underneath them. This can influence the general health of your child for the rest of his life. Fourth, the primary teeth help your child to speak clearly.

PRACTICES THAT PROMOTE GOOD DENTAL HEALTH

There are four steps you can take to help assure your child of the best dental health possible.

1. Teach him to clean his teeth properly by brushing and flossing at least once a day, and help him establish the habit of cleaning his teeth after meals and snacks.
2. Take him to the dentist for regular checkups and care as needed.
3. Provide him with an adequate and well-balanced diet with particular attention to the restriction of sweets.
4. See that he has the advantage of fluoride.



CARE OF TEETH

Thorough cleansing of the teeth, including brushing and flossing, at least once each day promotes good dental health. It aids in removing plaque, a sticky, colorless film of bacteria. Dental floss is recommended for removing plaque from between the teeth and beneath the gum line.

Your child should have two child-sized tooth brushes so that one will always be dry. Point the tooth brush bristles toward to the gum line and use a gentle back and forth scrubbing motion on the outside, inside, and biting surfaces of the teeth.

A dentrifice such as toothpaste or tooth powder helps in cleaning the teeth.

Visits to the dentist

No single practice is more important to your child's dental health than regular visits to the dentist. Your child should first visit his when all his deciduous teeth are in.

A child learns that the dentist is his friend. He will find any new cavities and treat them before they hurt the child. The dentist can watch for signs of trouble and correct defects before it become serious.

ADEQUATE AND WELL BALANCED MEALS

Before birth, a baby gets the nutrients he needs from his mother. This means an adequate diet for an expectant mother is very important to the health of the unborn child. This diet should be followed, of course, by well-balanced meals for the child after birth.

The nutrients necessary to form good quality teeth are calcium, phosphorus, and vitamins A, D, and C. Food nutrients for healthy gums, bone structures, and other tissues in the mouth are identical with those for good general health. Nutritionists recommend planning an adequate diet by choosing food each day from basic groups. These are:

Milk group: 4 glasses per day
Meat group: 2-4 servings a day
Fruit - Vegetable group 4 or more per day
Grain group: 4 or more per day.

A REMINDER:

Good dental health for your child requires that you follow these practices:

1. serve him well-balanced and adequate meals with restriction of sweet snacks between meals.
2. teach him to clean his teeth properly after meals and snacks
3. be sure he visits the dentist regularly and follows his or her advice
4. see that he gets the benefits of fluoride.

These simple acts:

1. safeguard your child's physical and mental health
2. promote your child's chances of keeping his natural teeth all his life
3. enhance your child's physical appearance
4. reduce costs of dental care later in life.



HIGH BLOOD PRESSURE: A COMMON BUT CONTROLLABLE DISORDER

You may be surprised if your doctor says you have high blood pressure (HBP) because it does not cause symptoms and can occur in an otherwise healthy person.

What is HBP? As blood flows from the heart out to the blood vessels, it creates pressure against the blood vessel walls. Your BP reading is a measure of this pressure, and it tells you if the pressure is normal, high, or low. Another name for HBP is hypertension.

BP readings are given in two numbers, such as 120/80. Although the average BP reading for adults is 120/80, a slightly higher or lower reading is not necessarily abnormal or unsafe. Lower BP readings (110/70) are usually considered safe for most people. For older people, many experts feel that readings up to 140/90 is acceptable. Once the BP goes above this level however some form of treatment may be needed.

The BP test is painless and takes only a few minutes. When your BP is taken you may stand sit, or both. The doctor should take several readings on different days before deciding if your BP is too high. All of these steps are necessary because BP changes so quickly and is affected by many factors, including the normal feelings of anxiety during a visit to the doctor.

As many as 58 million Americans now have HBP. About 40% of whites and more than 50% of blacks age 65 and older suffer from some form of HBP. Because this disease is so common, everyone should have a BP test once a year.

Most experts agree that there are some things that increase a person's risk of developing HBP. For example, it appears that HBP runs in families. Also, HBP is more common in blacks than in whites and it tends to be more severe in blacks. Other possible risk factors include obesity, excessive alcohol consumption, and diets high in salt. Many doctors now feel that a combination of many factors may be responsible for HBP.

Hypertension occurs not only in tense people or during periods of tension. BP will go up in all people during periods of stress or increased physical activity. Still you can have HBP even though you are usually a calm, relaxed person.

The good news about HBP is that it can be controlled by drugs and often by changes in daily habits. The type and severity of a patient's HBP as well as his or her other medical problems, will determine which treatment is best for that person. If your doctor has prescribed an antihypertensive drug, you may have to take the medicine for the rest of your life, although the amount you take may be reduced.

It may be possible to reduce your HBP by weight loss, less salt consumption, less alcohol intake, and get more exercise. HBP can lead to many serious conditions including stroke, heart disease, and kidney failure. You can reduce your risk of developing these problems by getting proper treatment. Have your BP checked by a doctor or nurse.



BLOOD GLUCOSE (Blood sugar)

A sugar. In medicine, the word is used to indicate the sugar dextrose. It is formed during digestion. Glucose is the most important carbohydrate in body metabolism. The concentration of sugar in the blood is approximately 0.1% (100 mg./d). The amount being maintained at a fairly constant level (80-100 mg/d.) through the action of insulin produced by the islets of Langerhans of the pancreas. Failure of pancreas to produce adequate insulin results in hyperglycemia in which the blood sugar (glucose) level may rise to 200 mg/d. or even higher. When above the renal threshold about 160-180 mg./d) glucose appears in the urine, a symptom of diabetes. When the blood sugar is below normal fat stores are metabolized. Incomplete metabolism of fats leads to the formation of ketone bodies . also a symptom of diabetes.

The Student Health Center will be conducting a Cholesterol, Blood Glucose, and Blood Pressure screening on Sept. 23, 1996, 9:00 AM. at the Skill Center free of charge.

We will be utilizing the ONE TOUCH BASIC Blood Glucose Monitoring System that is intended for in vitro diagnostic use. It is intended for testing purposes only. It is used for monitoring whole blood glucose for people who have been diagnosed with diabetes mellitus. We are using the machine for screening purposes only. If you are referred to a doctor due to a high level of glucose, the clinic will determine the cause of the high level of glucose in your blood.

DIABETES IS A GROWING CONCERN FOR NATIVE AMERICAN COMMUNITIES

We strongly encourage as many people to come in to be screened. In November we will be providing you with more information regarding Diabetes as November is National Diabetes Month.

DENTAL SCREENING

On Sept. 17-18, 1996 there will be a dental/vision screening for the elementary school.

On Sept. 18, 1996 there will be a dental/vision for the Preschool.

Any evidence of dental caries (cavities) will be referred to your dental office of your choice. We must have your Medical Assistance number as soon as possible.



BABY BOTTLE MOUTH

Sometimes babies or young children who drink from a baby bottle develop a condition called "baby bottle mouth".

Baby bottle mouth is a dental condition that can destroy the teeth of an infant or young child. Most likely to be damaged are the upper front teeth, the ones that can make such difference in your child's smile. But this condition can also affect other teeth.

Baby bottle mouth occurs when liquids such as milk, formulas, juices, or sweet drinks pool around a child's teeth for long periods of time. This can lead to decay.

That's why giving your child a bottle containing these liquids many times a day, as a pacifier is not a good idea. You also should not allow your child to fall asleep with a bottle during naps or at night since this can seriously harm your child's teeth.

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You can prevent this from happening to your child's teeth by protecting them in the following ways:

***After each bottle feeding, wipe the child's teeth and gums with a damp washcloth or gauze pad to remove plaque.

***Never allow your child to fall asleep with a bottle containing milk, formula, fruit juices or sweetened liquids.

***If your child needs a comforter between regular feedings at night, or during naps, fill a nursing bottle with cool water or give the child a clean pacifier. (Never give your child a pacifier dipped in any sweet liquid.)

***Avoid filling your child's nursing bottle with liquids such as sugar water, sweetened gelatin, and soft drinks.

***Have your baby's teeth examined by a dentist about age one.

***If your water supply is not fluoridated, have your physician or dentist prescribe a fluoride supplement.



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What is cholesterol?

Cholesterol is a fatty, wax-like substance that circulates in the blood. It's used by the body to build cells and make hormones. In moderate amounts, cholesterol is vital for good health.

Where do we get it?
Our bodies make all of the cholesterol we need.

We also get cholesterol in foods such as eggs, fatty meats, butter, and whole milk.

You may have read or heard that there is "good" as well as "bad" cholesterol.

Remember—most people with high *total* cholesterol have too

much "bad" cholesterol in their blood. Cholesterol travels in the blood in "packages" of fat and protein called "lipoproteins."

These are made in the body. Two kinds are:

HDL—high density lipoprotein. Often called "good" cholesterol, because it appears to clear excess cholesterol from the arteries.

LDL—low density lipoprotein. Often called "bad" cholesterol, because too much can lead to buildup of cholesterol in artery walls.

Most of us have 3 to 4 times as much bad LDL as good HDL.



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Measuring your cholesterol

Your blood cholesterol level is determined by a simple blood test that your doctor can do.

A measurement of your *total* cholesterol is usually sufficient to indicate your level of heart disease risk.

The average blood cholesterol level of middle-aged adults in the U.S. is 215. But average may not be healthy.

As *total* cholesterol rises above 180, the incidence of death and disability from heart disease rises rapidly.

Too much blood cholesterol leads to clogged arteries. Blood flow to the heart or brain

can be cut off, which in turn can cause heart attack, stroke, and other serious health problems.

If your *total* cholesterol is over 200, your doctor may want to check the balance of your HDL and LDL cholesterol.

Your goal should be to have no more than 3 times as much LDL as HDL and less than 200 *total* cholesterol.



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Are you at risk?

The National Institutes of Health has issued the following cholesterol recommendations and definitions:

Under 200: Desirable.

Recheck regularly.

200 to 239: Borderline.

Talk to your doctor about your cholesterol level and whether you have any other heart disease risk factors.

240 and over: High.

Talk to your doctor about your need for further evaluation and treatment.

If your level is high, ask your doctor to help you make changes to lower your cholesterol risk.

A ten-year U.S. government study in 3,800 men showed that for patients with high-risk cholesterol levels, each 1% reduction in blood cholesterol yields about a 2% reduction in heart disease rates.



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How to reduce your risk

Studies have shown that high blood cholesterol can be lowered with a low-fat, low-cholesterol diet and medication. The first step is diet change. If needed, your doctor

may prescribe a cholesterol-lowering medicine with your new diet. Lowering high blood cholesterol does reduce the risk of having a heart attack.

Ask your doctor

Many doctors recommend a low-fat, low-cholesterol diet for most people.

This can be especially important if you:

- have existing heart disease.
- have high blood cholesterol.
- have a family history of heart disease.

Make eating changes slowly

Go slow in changing to a diet lower in fat and cholesterol.

Get comfortable with one change at a time.

Seek to make a **permanent** change that will improve your eating habits. Work out your own best way to do it.



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Eat LESS!

To help lower your blood cholesterol, cut down on the following foods, which are high in saturated fats, cholesterol, or both. (Saturated fats contribute directly to the production of cholesterol in the body.)

- **Fatty meats**—any meat marbled with fat, regular hamburger, bacon, hot dogs, sausage, lunch meats.
- **Organ meats**—liver, kidney, heart.
- **Fatty poultry**—duck, goose.
- **Egg yolks**—no more than 3 a week. Watch out for foods with “hidden” egg yolk, like some breads and other baked goods.
- **High-fat treats**—chocolate, commercial baked goods and snacks, foods containing coconut or palm oil, or hydrogenated fat.
- **High-fat dairy products**—butter, whole milk, cream, sour cream, ice cream, cream cheese, most hard cheeses.



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Eat MORE!

To help lower your blood cholesterol, eat more of, or substitute, the following foods, which are low in saturated fats and cholesterol.

- **Lean meats**—lean cuts of beef, veal, lamb, or pork; also vegetable-protein meat substitutes.
- **Fish**—any kind, including whitefish, haddock, swordfish, tuna, halibut, trout, salmon.
- **Low fat poultry**—chicken, turkey, Rock Cornish hens.
- **Low-fat dairy/egg products**—non-fat milk, uncreamed cottage cheese, skim-milk cheese (ricotta), mozzarella, Gouda), low-fat yogurt, ice milk, cholesterol-free egg products.
- **Fruits, vegetables, whole grains**—step up intake of potatoes, pasta, rice, beans.
- **Vegetable oils**—most vegetable oils are good. Also, olive oil (even though it's monounsaturated). Use soft margarines and vegetable cooking sprays.



10

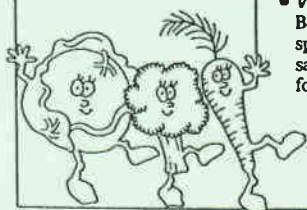
Aim for variety!

Every day, try to eat foods from the groups listed below.

The daily intake shown here ranges between 1,500 and 2,000 calories a day.

Recommended foods.

- **Lean meat, fish, poultry, or meat substitutes.** At least 4 to 6 ounces a day.
- **Milk and dairy products.** At least two 8-ounce servings a day. Try skim milk, low-fat yogurt, low-fat cottage cheese.
- **Vegetables.** At least 2 to 3 servings a day. Include tomatoes, broccoli, carrots, squash, and greens.
- **Fruits.** At least 2 to 3 servings a day. Include citrus fruits, melon, strawberries.
- **Bread and cereal.** At least 3 to 4 servings a day. Include whole-grain breads and cereals, pasta, rice.
- **Vegetable oil.** Between 2 to 4 tablespoons a day. Use in salads or cooked foods.



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“Four-star” foods

What are “four-star” foods?

They are foods that, in one way or another, have been found to help lower blood cholesterol.

- **Beans.** Navy beans, lima beans, kidney beans, soybeans, lentils, split, yellow, chick peas — try them all.
- **Apples, oat bran, and vegetables** such as broccoli, cabbage, cauliflower, and brussels sprouts, each rich in fiber.
- **Skim milk.** If you can digest it, the ideal intake is two 8-ounce glasses a day.
- **Fish.** Aim for fish as main dish at least 3 times a week. Any fish, including fatty kinds, are fine — the fish oil may be protective. Shellfish is also ok — it contains cholesterol, but its oils neutralize the cholesterol's effect.
- **Vegetable oil.** Safflower, sunflower, corn, soybean, olive.





Low-fat food buying tips!

Meats— Avoid meats with “marbled” streaks of fat. Buy lean cuts. Instead of regular hamburger, buy ground round or try some sirloin tip.

Poultry— Do not buy self-basting or pre-stuffed chickens.

Vegetables— Watch out for frozen or canned vegetables with butter added.

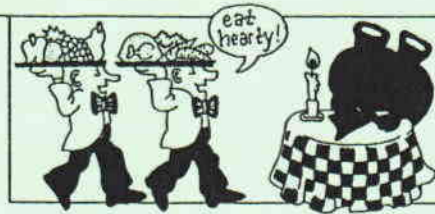
Low-fat cooking tips!

Trim that fat. Cut away all visible fat on meat before cooking.

Hold the frying. Switch to broiling and baking. If frying is a must, use vegetable oil, cooking sprays, or soft

margarine only. **Skim that fat.** Cool stews, soups, and casseroles in the refrigerator after cooking. Remove the fat that rises to the top.

Substitute ingredients. When possible, use soft margarine instead of butter; skim milk instead of whole; low-fat yogurt instead of sour cream; cholesterol-free egg products.



Yes, you CAN eat out the low-fat way!

Focus on broiled or roasted lean cuts of meat, fish, chicken, and turkey.

Ask for your food without added butter, sauce, or gravy.

Order clear soup instead of creamed; steamed vegetables; baked potatoes instead of mashed or fried.

Add oil and vinegar to your salad instead of dressing.

Treat yourself to desserts of fruit, angel food cake, gelatin.

Fast food savvy.

Aim for salad with diet dressing; roast beef sandwich; small burger; white chicken; diet soda; coffee. For breakfast, try pancakes with jelly.

Pass up:

- Large orders of fries (go for small).
- Butter on the baked potato.
- Cheese on the burger or fish sandwich.
- Chicken nuggets (fatty breading).
- Milk shakes.
- Fruit pies.
- Breakfast egg sandwiches.

Your questions answered

What about alcohol? Is it allowed?

Alcohol in moderation is okay.

Maximum daily intake should not exceed 2 glasses of wine (4 ounces each); 2 cans of beer (12 ounces each); or 2 shots of hard liquor.

I love rich desserts. Do I have to give them up entirely?

No. Try saving (banking) those fat calories for special occasions.

Another approach is to take a taste only. This means a one-spoon or one-fork taste only. You can also allow yourself a sliver of a high-fat treat once in a while without guilt.

I know many hard cheeses are high in saturated fat. Yet I feel deprived without them. What's the answer?

Many people find it impossible to give up favorite hard cheeses or to substitute low-fat cheeses in their place.

For these people, one answer is to plan for the fat in the Swiss or American cheese they eat for lunch and to substitute fish for meat at dinner to make up for it.

Such trade-offs are the key to success in changing to a lower fat diet.



Take good care of yourself!

• **Know** what your blood cholesterol level is. Ask your doctor to check it if you haven't done so.

• **Keep** your weight within the range your doctor recommends for you.

• **Enjoy** a varied diet with plenty of fruits, vegetables, and whole-grain breads and cereal products.

• **Follow** the healthy eating tips in this booklet.

• **Exercise** every day. Brisk walking and stair climbing count as exercise. Work them into your daily routine.

• **Reward** yourself for making healthy changes in your diet and sticking with them. Treat yourself to a new item of clothing, a magazine or book, a movie, some sports equipment, whatever you will most enjoy.

• **Never** give up your efforts at diet change because of one or two slips. Forgive yourself and get back on track.

