

V A N D E R B I L T U N I V E R S I T Y M E D I C A L C E N T E R

# HOUSE ORGAN

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August 2008

## **Hive Talkin'**

**Jim Jirjis turns a hobby into a sweet fund-raiser for the Monroe Carell Jr. Children's Hospital at Vanderbilt**





## Seven Words and a Chevy Impala

BY WAYNE WOOD

I couldn't believe that my cousin Steve had gotten away with it. We had been with his mother, my aunt, at a Kmart—this would have been, I think, 1972—and while she wasn't looking he had gone to the record and tape department and bought an 8-track of George Carlin's album "Class Clown."

We knew George Carlin's work, of course. If you watched TV in the early 1970s you would really have had to read *TV Guide* pretty carefully to avoid him. He was on the Johnny Carson show every few weeks, he was a guest on every variety show going—and at that time there were as many variety shows on the air as there are reality shows now.

So there Carlin would be, doing a monologue here, doing a sketch featuring Al Sleet the Hippy Dippy weatherman there. He was everywhere, and he was hilarious.

Here's how dedicated a fan of his I was then. One Christmas I got a cassette recorder, and there was an occasion when he was a guest on Flip Wilson or Dean Martin or some other show. I taped his performance of "The Hair Piece," a long poem about hair (It begins, "I'm aware some stare at my hair/To really be fair, some really despair of my hair"). I thought it was so great, so perfect in every syllable, that I memorized the whole thing. I would recite it—often—whether asked to or not. I still can recite it. I'm still not asked to.

Steve and I knew Carlin's TV work, but we also knew that his records were something else—just as funny, but, as an added bonus, especially to junior high aged boys, they were *dirty*.

The only 8-track player at Steve's house was the one in the car, a blue Chevy Impala that was parked in the carport. Steve got the keys and, while the adults were

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COVER PHOTOGRAPH BY NEIL BRAKE



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### Hive Talkin'

Jim Jirjis is a busy guy. You might even say he's busy as a bee. Let's just say he has one honey of a hobby, one that provides plenty of buzz. Hey, wait—we got a million of 'em!

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### Wolf Dettbarn's Way Back

Emeritus faculty member Wolf Dettbarn had a full life, full of travel and adventure, and then one day a stroke made a journey through his house more than he could manage. But with the help of a community of healers, he is on his way back.



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### House Organ Writing Contest Nonfiction Honorable Mention: Medical Miracles

Ginger Manley brings the story of one of the things that unites her with her grandson: both have had surgery that has changed their lives.



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### Health and Wellness Update

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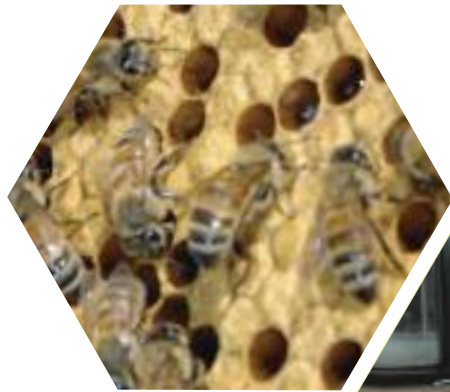
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**Busy  
as a...**

**well,  
you know**

*Jim Jirjis turns his  
fascination with  
beekeeping into a  
sweet fund-raiser*

**BY WILLIAM PETERS**



**Jim Jirjis, M.D., MBA, is in full array.**

He is wearing a thick, white cotton-polyester full body suit. He has a netted veil over his face and neck, tightly tucked in, and gloves to protect his hands. The suit makes for a marvelous sight, but these threads aren't for fashion—Jirjis is a beekeeper.

To Jirjis, the honeybee is one of nature's miracles. They toil, covering 16 square miles per hive, pollinating many of our favorite crops—including apples, almonds, pears, blueberries, blackberries and raspberries—and astonishingly, they find the time to make honey.

*continued on next page*



**PHOTOS BY NEIL BRAKE**



Jirjis has lassoed 700,000 of these industrious insects, putting them to work for the Monroe Carell Jr. Children's Hospital at Vanderbilt. As beekeeper to 14 hives, he expects to produce more than 3,000 jars of honey each year—and now, Jirjis is selling the honey and donating the proceeds to the Children's Hospital.

### Hobby for a hectic schedule

"One day I was at a meeting at Vanderbilt, where someone was supposed to talk about some medical condition, and they didn't show up. So I sat there, me and a bunch of people, and another doc-

tor, John Cristman, who is a former Vanderbilt pulmonologist. There was a group gathered around him and he was talking about his beekeeping," recalls Jirjis. "The speaker never showed up, but almost everyone in the room was enthralled with the various fascinating aspects of beekeeping."

Jirjis is 40, and it can be said that he is interested in just about everything. An internal medicine specialist with expertise in infectious disease, Jirjis found the biology of beekeeping fascinating.

"I love it because not only is it fun, there is an interesting science to it."

That science, which includes keeping the hives healthy and free of infection, came naturally to the doctor.

"It's really biologically intriguing," says Jirjis. "In one of my first beekeeper meetings, a bunch of beekeepers were having a conversation about antibiotics. One beekeeper said, 'I don't think that *every fall* you should be using antibiotics to treat your bees, just in case they're infected. You are going to cause antibiotic resistance.' And another beekeeper responded, 'I don't care, my bees aren't going to suffer.' What does that sound like? It sounds like the modern day medical-doctor-over-treating-with-antibiotics-creates-resistance story, but it was a bunch of beekeepers talking about it."

As a professor of Medicine with a busy internal medicine practice, Director of the Adult Primary Care Center, Chief Medical Information Officer for Outpatient Clinics, and Assistant Chief Medical Officer for Electronic Medical Records, Jirjis is as busy as the bees he keeps. Beekeeping proved to be the perfect hobby for his strained schedule.

"It's an incredibly good hobby for a busy person because it does not take much effort. And it's not that expensive of a hobby to get started with."

Beekeeping is very different from taking care of other domesticated animals—they need far less attention. In the spring, Jirjis visits the hives weekly; in July, he harvests the honey; in the fall, he treats the hives for infections; and in the winter, he does nothing, because if the hermetically sealed hives are opened, the bees will die from the cold.

"It's not a domesticated animal... you just create the environment and it does its own thing."

### Bee biology, crop ecology

Over the years, the word "bee" has acquired a stinging connotation. But, for the honeybee in particular, this is an unwarranted prejudice.

"The honeybee is very docile. Most people confuse yellow jackets, wasps, and hornets with bees. They say, 'I got stung by a bee'—but it's not a honeybee. honeybees very rarely sting you," says Jirjis.

Beekeepers like Jirjis have fostered this trait by selectively breeding the bees for a tamer nature. Over the years, honeybee docility has grown to the point where a visitor can come within a few feet of an open hive and observe—without a bee suit on.







(above) Jirjis has been a beekeeper for the last four years and has more than 720,000 bees at a farm owned by Orrin Ingram. (opposite page) Jim Jirjis prepares to inspect a hive.

“Before you came out here you never thought you would be standing that close to a hive, did you?” Jirjis asks as he works.

Though the honeybee is docile, Jirjis advises visitors to take caution—there are still tens of thousands of bees around, and their hives are being broken into.

“Stay real slow in your movements. What happens is that you get the willies, and then you start reacting. That’s the reflex, and then they say, ‘oh, predator.’”

Modern frame hives look like wooden file cabinets with no front doors. They are divided into sections, which can only

be reached by removing the sections above. Each section is a rectangular box with frames arranged vertically side-by-side the entire width of the interior.

Honeybees enter and exit their hives by a single opening, flying in a line parallel to the ground at tremendous speeds (hence the term “beeline”). The bees appear a maelstrom as they enter the hive, but once inside, their organization is as remarkable and complex as any, say, hospital or medical center.

After Jirjis pulls the cover of a hive off (which is quite difficult because honeybees glue the pieces together with a sub-

stance called propolis, obtained from trees), he deftly diagnoses the health of the hive, frame-by-frame.

As he works, he rhythmically releases smoke into the hive using a tin can with a bellows and spout. The can is full of burning pine needles. The smoke tricks the bees into thinking that the hive is in danger of being burnt, so they stop any thought they might have of attacking and gorge themselves with honey in preparation for relocating the hive.

While he inspects his hives, Jirjis talks nonstop, of the process and science of beekeeping and of past honey yields.

**“It’s not a domesticated animal...**

**you just create the environment and it does its own thing.”**





Jirjis is shown in his office with honey he has collected from his bee hives. The honey will be sold to benefit the Monroe Carell Jr. Children's Hospital at Vanderbilt.

"I had a horrible year last year... I mean an absolutely horrible year. Almost all of the hives were ruined probably because of the late frost," Jirjis says.

Honey yields, however, are the least of Jirjis's worries when a major bee die-off occurs.

"The honeybee is really important to our ecology. Many different flowering species depend on the honeybee for pollination. For instance, the apple, it was not indigenous to this country—and neither are many flowering crops that we harvest. Now that they are here, honeybees have become essential in pollinating them," said Jirjis. "By supporting this, people are making sure that they still exist."

But beyond the fact that beekeeping is the perfect hobby for

a busy person, that it is scientifically fascinating, and that it is essential to the environment, is the idea that Jirjis will be selling the honey for the Children's Hospital.

"There are so many payoffs for so little effort," says Jirjis.

The satisfaction that Jirjis gets from beekeeping has spread infectiously to those around him.

"Three or four people now have joined me in beekeeping.

Two of my patients have taken up beekeeping," says Jirjis.

"I'm hoping in the future there may be more."

#### Buzz marketing

Jirjis has launched a Web site—[www.jirjis-honey.com](http://www.jirjis-honey.com)—where Jim Jirjis Pure Tennessee Honey is sold. In addition, there will be vendors located at Vanderbilt Medical Center. All of the proceeds from the sale will be donated to the Monroe Carell Jr. Children's Hospital at Vanderbilt. Vanderbilt staff and friends aiding Jirjis are Shanmuga Sundaram, Rich Germano, Steve Dennis, and others. Another key supporter is Orrin Ingram, who donated land to house many of Jirjis' hives.



**"It's an incredibly good hobby for a busy person because it does not take much effort.**

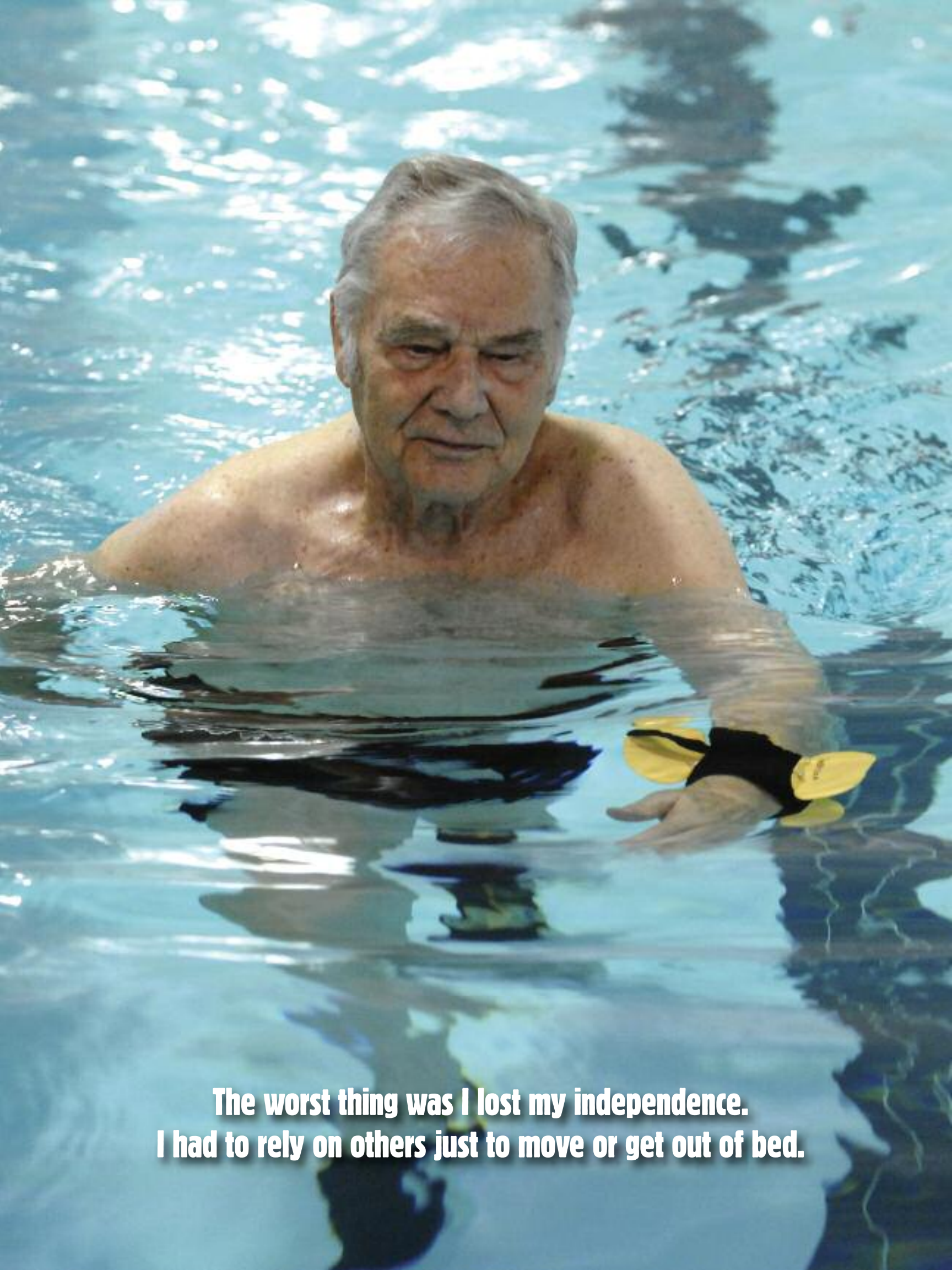
**And it's not that expensive of a hobby to get started with."**











**The worst thing was I lost my independence.  
I had to rely on others just to move or get out of bed.**



# Wolf Dettbarn's way back

*Tai chi and water training fuel comeback from stroke for emeritus faculty member*

BY LESLIE HAST

**W**olf Dettbarn used to travel the world—Italy, Germany, London, New York City—but after a severe stroke, he was lucky to travel 20 feet.

Extensive rehabilitation brought Dettbarn back to life, and now tai chi and aquatic training are letting him go the extra mile by restoring his balance and confidence.

Dettbarn, a professor of Pharmacology at Vanderbilt for 28 years, experienced a massive cerebral hemorrhage Aug. 25, 2006, that left him in a coma for three and a half weeks and paralyzed on the left side. Friends and family thought they were making their last visits.

"He was in a coma, and we thought, 'That's it,'" said Fridolin Sulser, M.D., professor of Psychiatry, emeritus, and 50-year friend of Dettbarn. "But he recovered fantastically. It is almost a miracle how he recovered."

But Dettbarn attributes his successful recovery elsewhere. "I think it's the art of the neurosurgeons," he said.

Dettbarn had three brain surgeries in six months and has made a steady recovery ever since. He spent six weeks at Stallworth Rehabilitation Hospital, and then graduated to Richland Health Center, where he stayed until May 2007. Dettbarn was then finally able to live at home, but he still could not walk and underwent intense speech and occupational therapy at Pi Beta Phi Rehabilitation Institute.

"The worst thing was I lost my independence. I had to rely on others just to move or get out of bed. The nurses were good but they treated me like a child, asking if I had to use the bathroom, but I'm 80 years old," Dettbarn said.

Now he has regained use of his two languages—English and German—and only occasionally has to use a cane.

"When he was in the nursing home, we were thrilled if he could just get up, so this is all very wonderful," said Penny Dettbarn, his wife.

## Tai chi and water

The final steps in Dettbarn's incredible recovery are taking place at Vanderbilt's

Dayani Center. He exercises on various machines and takes tai chi and aquatic classes with personal trainers.

"These are two very safe places for seniors with disabilities. The activities are supportive and very gentle and allow the intervention to be personalized," said Jay Groves, Ph.D., administrative director at the Dayani Center.

Rusty Rust, Dettbarn's tai chi instructor, says he has improved tremendously.

"He had leveled out with physical therapy, but now he is like a different person. When I first started working with him, he was totally dependent on his cane. Now he can go two times around the track without it," Rust said.

Tai chi uses meditation and slow controlled movements to reduce stress, lower blood pressure and exercise the body. Rust says it is especially beneficial to those recovering from a stroke because it increases proprioception, or awareness of one's position in space.

"Wolf's left side was affected by the stroke, but he's not just helping that side, he is regaining control of his whole body," Rust said.

Although Dettbarn doesn't ascribe to the philosophical side of tai chi, he has seen great physical benefits.

"It relaxes my muscles and helps with my balance," he said.

Dettbarn has "always been a water guy," as Penny put it, so it was natural that he would also return to the water for rehabilitation.

"I used to swim 30 lengths every day. I learned to swim at 5 and would never get out of the water," Dettbarn said.

Barb Batson, Dettbarn's aquatic trainer, said the benefits of training in the water surprise many.

"It is zero-impact, the buoyancy of the water raises the limb higher and the resistance of pressing back down increases strength. You see greater advances with less discomfort," she said.

Water is also a good environment for balance and coordination, which is especially important for Dettbarn. Batson says he was able to walk without

assistance in the water from day one.

"I don't have to be afraid of falling," Dettbarn added.

Barbara Forbes, geriatric nurse practitioner at Dayani Center, says the warm water helps loosen arthritic joints, and it improves circulation problems because the pressure of the water acts like a "support hose from the neck down." The Dayani Center also fosters a comfortable environment: exercisers can wear whatever they want in the water and do not have to get their face or hair wet.

In addition to the physical benefits, Batson also focuses on psychological benefits.

"The water is invigorating. It makes you feel great. We have fun while we're working," she said.

One-on-one personal training can have additional benefits because the trainee and trainer can collaborate on goals and achieve them together.

"As a trainer, you have to figure out what motivates them," Batson explained. "Wolf and I have been a pretty good fit."

Dettbarn agreed, saying, "She's a great teacher. She doesn't get impatient."

## A new lease on life

Observing a session, it is evident that Dettbarn and Batson have excellent rapport. She uses encouraging phrases like "Keep your eye on the prize!" and "Looking good!" and they share jokes while Dettbarn walks on the underwater treadmill.

The H2OGym underwater treadmill is one of Dettbarn's favorite pieces of equipment, and his progress has been remarkable.

"He used to do only five minutes and his stride was not smooth," Batson said. "Now he does 20 minutes with a smooth stride."

"And it is more difficult than a regular treadmill because you move it yourself," Dettbarn added with pride.

His other favorite activity is pull-ups on the Aquatrend gym, and he joked that he is striving for six-pack abs.

Near the end of an hourlong session,



Batson asked him to do 15 pull-ups. Once he reached 10, she asked, "Can you give me five more?" He gave a confident "Sure!" and proceeded to do 20 extra.

"It is really heartwarming to see his new lease on life," Batson said. "So many people aren't living, they're just existing, but that isn't the case with Wolf. He is slowly and surely moving toward success."

Dettbarn also walks laps in the pool and does leg lifts and calf raises. Because his left side was temporarily

paralyzed by the stroke, the muscles on that side need extra attention. He wears a bracelet of orange fins on his left wrist and ankle to provide extra resistance in the water and give his left side a more intense workout.

Sulser, who is usually at the pool swimming laps while Dettbarn has his training session, has kept a close eye on Dettbarn's progress.

"In the last couple of weeks he has started walking better, and now he can do pull-ups without assistance. Before,

Barb had to help him find the bars," Sulser said.

Dettbarn is now able to travel again, making trips to New Hampshire to see his daughter or to New Orleans to visit with friends. He still has trouble tying his shoelaces or a necktie, but hopes are high that Dettbarn will continue this rapid pace toward complete recovery.

"I hope he recovers fully," Sulser said, "then we will have a reason to celebrate and open a bottle of good wine."



Barb Batson, an aquatic trainer with the Dayani Center, works with patient Wolf Dettbarn, M.D., as he recovers from a 2006 stroke.

NEIL BRAKE



## Coming smoking ban brings attention to resources for smoking cessation



Vanderbilt Medical Center is banning smoking on campus by staff, patients, visitors and contract employees, effective Sept. 1.

The ban follows a series of increased restrictions on campus smoking, beginning in 1989 with a ban on indoor smoking. Designated outside smoking areas were established on campus in the 1990s, and enforcement of the designated areas has been stepped up in recent years.

The coming ban has brought to the forefront many ongoing, and some new, resources available for staff and faculty who want to stop using tobacco.

The following list of resources was provided by Vanderbilt Health and Wellness. Vanderbilt offers a variety of resources to support smokers who want to quit. Visit the Health and Wellness Web site at [www.healthandwellness.vanderbilt.edu](http://www.healthandwellness.vanderbilt.edu) to find the appropriate option. A 24-hour a day quit line will be announced soon.

### Medical resources

**See your Primary Care Provider for help.** Your PCP can provide counseling, advice on nicotine replacement and may prescribe medicine to help you quit. Find a provider by calling 936-MYMD (6963.)

**Vanderbilt's Occupational Health** clinicians provide counseling and medica-

tion to help faculty and staff quit smoking at no cost. Whether you see OHC or your PCP, you can obtain up to two months of medications by enrolling in Occupational Health's *Quit Rx* program. The program covers Chantix, nicotine patches and Zyban. Call 936-0955 to schedule an appointment or visit: [www.occhealth.vanderbilt.edu](http://www.occhealth.vanderbilt.edu).

The **Kim Dayani Center** offers an eight week program including counseling and medication, on-site or in your department (if there are four or more individuals who want to attend). The \$300 program is covered by the Vanderbilt health care plan; for benefits-eligible faculty/staff not on the health plan, the cost of the program is reimbursed by Health Plus. To register call Barbara Forbes, M.S., A.P.N., G.N.P., at 322-4751 or e-mail [barbara.forbes@vanderbilt.edu](mailto:barbara.forbes@vanderbilt.edu).

### Support resources

**Nicotine Anonymous support group at Vanderbilt.** Call Work/Life Connections-EAP at 936-1327 for more information. It's hard to quit...get the support of others who understand.

**One-on-One Coaching.** Get support and encouragement as you work toward your wellness goal. Make an appointment with a Health Plus Wellness Coach at the front desk or by calling 343-8943.

**Stress management.** Learn relaxation techniques and stress resilience from a counselor at Work/Life Connections-EAP. Make an appointment by calling 936-1327.

### Self-Help resources

**Obtain a copy of "The No Nag, No Guilt, Do it Your Own Way, Guide to Quitting Smoking"** by award-winning medical writer Tom Ferguson, M.D. Call Health Plus to receive a copy at 343-8943 or e-mail [health.plus@vanderbilt.edu](mailto:health.plus@vanderbilt.edu).

**Online support** is available at [www.trytostop.org](http://www.trytostop.org) where you can use the free online Quit Wizard to track your progress and get helpful tips along the way.

### Resources for managers:

**Manager tool-kit:** Work/Life Connections-EAP provides tool-kits designed to help managers give support to staff and colleagues making the transition to a smoke-free life.

**Facts sheet for managers.** Get a useful facts sheet to help you understand what you can do to support others who want to quit.

For a tool-kit or facts sheet, call Work/Life Connections EAP at 936-1327 or visit [healthandwellness.vanderbilt.edu](http://healthandwellness.vanderbilt.edu) to download a copy.

## PeopleFinder update under way

■ The compilation process is beginning for the next edition of the Vanderbilt University Directory.

The information for the directory is pulled from the online PeopleFinder application. It's important that the information be accurate, so all employees are being asked to check their individual listing.

The following information from PeopleFinder will be listed in the directory.

- Name
- E-mail Address
- Department Name
- Department Phone Number
- Location

Please review this information in Peo-

pleFinder to ensure that it is accurate. If you need to update your information you can log in using your VUnetID and ePassword. Once in the application, select the Personal Update link. The following fields can be updated:

- Phone Number
- Voice Mail Number
- Fax Number
- Titles
- Location
- Delivery Address

You should contact the person who is responsible for your department's listings if any other changes are needed or if you experience problems. To find your department's responsible person:

- Go to the PeopleFinder Web site <https://phonedirectory.vanderbilt.edu/cdb/index.jsp>.
- Under "Department Search" (on the left hand side of the page) enter the Department Name.
- Click the "Find" button.
- There will be a "View" button on the left side of the name.
- Click the "View" button and the directory-responsible person's name will be listed on the page with the department information.

If there is not a directory-responsible person listed for your department, please contact [peoplefinder@vanderbilt.edu](mailto:peoplefinder@vanderbilt.edu).



# Medical Miracles

BY GINGER MANLEY

Psychiatry and School of Nursing

*Editor's note: This year saw so many strong entries into the Nonfiction category of the House Organ writing contest that we are publishing several Honorable Mentions from that category outside of the traditional July Summer Reading Issue. This story by Ginger Manley is one of those Honorable Mentions.*

"Grandma, can I hit your knee with my hand?" asked Alexander, as he perched beside me on the green canvas-covered swing seat on our back deck. Most every afternoon about five o'clock, he and Grandpa and I sat down with a mug of tea, or for Grandpa, a glass of wine, and a small treat to discuss the goings on of the day. This was the third summer Alexander had traveled from his home in California to visit his grandparents, this time coming for two weeks.

Last year, he had had a serious meltdown the night he arrived. After bravely crawling into bed and hugging the tattered remnant of his blue baby blanket, which he still used to comfort himself to sleep, he had found even this "lovey" could not replace his longing for his mommy and daddy and younger brother and sister.

"Please take me back to the airport, Grandma. My heart hurts," he pleaded, his big green eyes brimming. "I know there are no more flights to California tonight, but I will just wait there until tomorrow morning and then Mommy will meet me at the Los Angeles airport. I just miss everybody too much to stay in Tennessee."

"You'll be so much more comfortable here in the bed at Grandma's house instead of sitting up in a chair at the airport all night, Alexander. Let's call Mommy and see what she says."

Mommy assured him he could come home tomorrow if he still wanted to do so, but he needed to sleep in bed that night. Surrounded with photos of the loved ones back home, while listening to

a lullaby tape in the CD player—one he had used in babyhood—he had finally managed to fall asleep. The next morning the world looked a little brighter and he stayed the full ten days with no more crashes.

Arriving this year, he quickly assured Grandpa and me he would not have a meltdown this time. His only stipulation was that he be allowed to sleep in the back guest bedroom, which had no strange photos of his ancestors hanging on the walls, as did the other guest room. This was an easy choice for us grandparents, because we remembered his having been spooked by the family artifacts when he was assigned to that room the first year he visited. In fact, he had spent most of the first night in there systematically removing the photos and other memorabilia from their places of display and replacing them to the hallway.

At about 2 a.m. I had been awakened by a strange thumping and upon exiting my bedroom, I encountered lying in the hall "the headless woman" which he had placed there. I chuckled when I contrasted my experience of having lovingly assembled and displayed the dressmaker's form clothed in my grandmother's wedding dress with his experience of being frightened by the terrors inherent in a decapitated human-like creature lurking at the foot of his bed. As a child, I had spent many a night at my own grandparents' home awake until the early hours of daylight when the strange shadowy nocturnal invaders in their house could be banished in the sunshine.







In retrospect I wish I had had in my childhood Alexander's confidence to get out of bed and deal with the "enemy" instead of lying there paralyzed.

So as we sat on the swing in the late afternoon shadows, enjoying our tea and Graham crackers and welcoming

the slight cooling in the air after another hot, humid Tennessee summer day, I was puzzled by Alexander's question.

"Why do you want to hit my knee with your hand?" I asked.

"Well, Grandma, you keep telling people you have metal knees and I was

wondering if they feel different than regular knees."

The subject of my knee replacements had come up several times during this visit, like when we passed through security at the airport and I had to get scanned and patted down. We had also talked about my knees while discussing the kinds of surgery which he and other people we know have had.

"I was born with a broken heart and I had to have it fixed when I was two years old," Alexander had explained to someone at the swimming pool when asked about the looping scar under his left shoulder blade which is almost faded from view five years after his surgery. All of us in his family had been so relieved when the defect in his heart had been repaired in what was almost routine surgery in the beginning of the 21st century. I am old enough to remember when the very first of these surgeries was being done and they were anything but routine back then.

"Sure, you can hit my knee with your hand, as long as you do it gently enough so that neither of us gets hurt," I answered him.

Winding up ever so slightly, as he had watched a baseball pitcher do on the mound at the ball game we attended a few days earlier, his seven-year-old hand firmly struck the newest of my metal knees, just above the kneecap. It was a soft blow and no one got hurt by it.

"Yep, it feels like metal all right," he declared, grinning. He leaned forward and dipped his Honey Maid into the cup of tea which he had been sipping. I freshened my cup and decided to dip my Honey Maid in it, too.

I wish I had thought to ask him if I could put my hand over his mended heart. I would have liked to have discovered if the beating of a heart which is no longer broken feels different from the way any other heart feels.

**"I was born with a broken heart  
and I had to have it fixed when I was two years old,"  
Alexander had explained to someone  
at the swimming pool when  
asked about the looping scar  
under his left shoulder blade.**



# Start! your late summer, then Go for the Gold

## **Start! celebrates Challenge Two, kicks off Challenge Three**

Health Plus will host a celebration of the end of the second of three challenges on Wednesday, Aug. 6, from noon to 1 p.m. in the courtyard behind Light Hall. Planned events include an ice cream giveaway, door prizes, a demonstration of the Zumba group fitness class offered at Health Plus and learning who achieved the most activity during Challenge Two.

Challenge Three, which begins Aug. 1, continues through Oct. 31. All those with more than 150,000 steps during the period will receive a T-shirt, and those with a total of 450,000 steps at the end of all three challenges will also be entered in a drawing for bigger prizes.

Vanderbilt is partnering with the American Heart Association to offer the Start! initiative. Health Plus and Vanderbilt Heart are providing this physical activity program for faculty and staff and encouraging everyone to participate in reaching the goal of 1,000 participants and an updated goal of 1 billion combined steps by Oct. 31.

You can register by going to the Health Plus Web site ([healthplus.vanderbilt.edu](http://healthplus.vanderbilt.edu)) and clicking on the green Start! button.

Each registered participant also receives a step pedometer, a paper tracking log for your activities, and resources to help you succeed.

Even those who prefer a physical activity other than walking can participate. Since Start! is about being more physically active, the site allows staff and faculty to track other activities. Any activity can be converted to steps through the online tracker.

## **Occupational Health Clinic hits the road**

The Occupational Health Clinic now visits Vanderbilt Hospital and Monroe Carell Jr. Children's Hospital at Vanderbilt each month to help make getting shots and skin tests even more convenient for hospital staff. Staff and faculty may drop by during any of these sessions to get all the immunizations and testing needed. To help managers track compliance, the performance evaluation system will automatically know whether OHC has your information up to date or not, so act now to beat the rush.

OHC staff are at Children's Hospital,

room 7011, from 1:15 to 4:30 p.m. on the first Thursday of each month.

Services provided are immunizations, TB skin tests, screening/review of records and lab collections for required screening.

## **Go for the Gold 2008 under way**

The 2008 edition of Go for the Gold is in full swing. As last year, full-time active, benefits eligible staff and faculty can complete the Gold Level of the Go For The Gold Incentives Program and receive \$20/month in wellness credit in 2008. More than 13,000 faculty and staff participated in the program last year, and are being rewarded by Vanderbilt for engaging in healthy lifestyle practices.

Here are the steps:

### *Step 1*

Do your yearly Health Risk Assessment to learn what your health risks are and what you can do to become as healthy as possible.

### *Step 2*

Do your yearly Wellness Action Log to focus on healthy actions that will help you maintain or improve your health.

### *Step 3*

View the 2008 Game Plan For Your Health, which is titled "Five Keys to Financial Health."

Steps one and two are also available for spouses and domestic partners of staff and faculty, which adds a wellness credit of \$5 for each step.

All the steps can be completed at [http://www.vanderbilt.edu/HRS/wellness/hp\\_gftg.htm](http://www.vanderbilt.edu/HRS/wellness/hp_gftg.htm).

There is also help available for any department who gathers up at least 10 attendees. Health Plus will have a representative come to your area for one-on-one assistance in completing the Go for the Gold steps. E-mail Kim Tromatore at [kimberly.a.tromatore@vanderbilt.edu](mailto:kimberly.a.tromatore@vanderbilt.edu), or phone 343-3849.

The deadline for completion is Nov. 30.

## **Life Phase Series**

The Life Phase series showcases speakers who have ideas to help staff and faculty balance work and home responsibilities. This month's Life Phase series is titled "Countdown to VUMC Smoke Free," presented by Alice Warren, R.N., nurse practitioner at the Occupational Health

Clinic. The program will be held Thursday, Aug. 21, from noon to 1 p.m. in Light Hall, room to be announced (check the Health Plus Web site).

## **Babies and You**

Health Plus offers this work site prenatal health promotion program to all Vanderbilt employees, spouses and dependents. The program encourages early and consistent prenatal care and provides monthly educational opportunities on issues relating to perinatal health.

All classes are from noon to 1 p.m. This month's class is "Choosing a Pediatrician," presented by Rachel Mace, M.D. The class will be Aug. 21 noon to 1 p.m. in a location to be announced on the Health Plus Web site.

Enrollment is voluntary and free but must be completed during the first trimester of pregnancy. Call 343-8943 to enroll and learn how mothers-to-be can earn a \$100 savings bond (taxable) for their new baby. Fathers-to-be and grandparents-to-be are welcome.

For more information, contact Lisa Conner, R.N., at 343-9623.

## **Smooth Moves offers Champion Classes**

The Occupational Health Clinic's Smooth Moves Program is designed to help nurses, care partners, and other health professionals who work at the bedside every day avoid injury from the physical strain of lifting and moving patients.

The class includes:

- Learning assessment tools for patients' mobility needs
- The use of state-of-the-art equipment
- Support for each other to "Do the Right Thing"

All patient caregivers are invited to the Smooth Moves Champion Classes on:

- Aug. 22 in the Medical Center North Learning Center from 7:30 a.m. to 4 p.m.
- Sept. 30 in the Medical Center North Learning Center from 7:30 a.m. to 4 p.m.

Snacks, drinks and prizes are provided. To register or for more information: contact [linda.k.larson@vanderbilt.edu](mailto:linda.k.larson@vanderbilt.edu), or call 936-3735.



### Health and Wellness offers Podcasts

Health and Wellness now offers weekly podcasts. Listen to brief interviews, tips and tidbits on a variety of health and wellness topics ranging from deep-breathing exercises to surviving divorce to preparing for overseas travel. Visit [www.vanderbilt.edu/HRS/wellness/hwpodcast.htm](http://www.vanderbilt.edu/HRS/wellness/hwpodcast.htm) to listen from your computer or your MP3 Player.

### Self Care classes offered

Most of the time when you get sick or injured, you'll recover without special medical care. But how do you know when medical care is necessary?

In the "Self Care Techniques" class, offered through the Occupational Health Clinic, you will learn:

- What your symptoms mean
- Helpful self-care tips for your symptoms
- When you need to seek medical help
- Valuable prevention tips to stay healthy
- How to make the most of your health care appointments.

Class attendees will receive a copy of *Mayo Clinic EmbodyHealth Guide to Self-*

*Care*. The next Self Care Techniques class will take place Tuesday, Aug. 5, from 4:30 to 5:30 p.m. in meeting room 1 of the Student Life Center.

Pre-registration is not required. For more information, contact the Occupational Health Clinic at [occhealth.vanderbilt.edu](mailto:occhealth.vanderbilt.edu) or 936-0955.

### Health Plus to hold Clinic Bowl Kick-off MP3 Raffle

The 58th annual Clinic Bowl Classic kick-off event, featuring Franklin High School vs. Hillsboro High School, will be held at Vanderbilt's Dudley Stadium on Saturday, Aug. 23, at 7:30 p.m. Come by the Health Plus fitness center atop Kensington Garage before the game (5:30 – 7 p.m.)—have your Vanderbilt picture ID with you—and register for three MP3 players to be raffled off to faculty and staff. Health Plus will also be open during the game.

While at Health Plus, attendees may view the stadium festivities before the game from the balcony. Winners of the MP3 players must be in the stadium when the winners are announced.

The Clinic Bowl is sponsored by Vanderbilt Orthopaedics. All event proceeds

go to Vanderbilt Rehabilitation Services and area high schools to support patient and student needs.

### The Health Plus Summer SuperClass

The Aerobic Challenge—the ongoing promotion of Health Plus aerobics classes—will end on Aug. 21 with a Superclass from 5 to 7 p.m. The Superclass will expose participants to a variety of equipment used in group fitness classes, and all levels are welcome. Even those who have never taken a group fitness class are invited to sample one or all of the six 20-minute classes. All classes regularly held at Health Plus after 4 p.m. will be cancelled for the Superclass.

Following is the lineup of classes:

- 5 – 5:20 p.m. BOSU with Bonnie
- 5:20 – 5:40 p.m. Gliding disc with Kandice
- 5:40 – 6 p.m. Resistance tubing with Kandice
- 6 – 6:20 p.m. Zumba with Pam
- 6:20 – 6:40 p.m. Pilates with Bonnie
- 6:40 – 7 p.m. Yoga with Pam

For details, call Group Fitness Coordinator Lori Cowan at 343-6576, or contact her at [lori.l.cowan@vanderbilt.edu](mailto:lori.l.cowan@vanderbilt.edu).



inside talking, he turned the player on and popped in the tape.

We giggled, we guffawed, we howled. "Class Clown" was one of the funniest things I had ever heard. And then, of course, came the king of them all, the one humor piece that every obituary of Carlin had to mention: "Seven Words You Can Never Say on Television."

It had all the shock of the words themselves, of course, but Carlin was doing more; much later I realized he was using words like a jazz musician uses notes. "Seven Words" was funny and profane—and also profound.

Steve and I weren't thinking profound. We just knew it was forbidden and funny. Man, was it funny.

We got caught.

My aunt came out and tapped on the driver's side window and wanted

to know what we were listening to in there that was so funny.

My memory goes a little hazy at this point, but I think that Steve may have played a little of the tape for her. In any case, we were ordered out of the car and that was the end of our George Carlin listening that day.

I later heard that my aunt had been so offended by the language on the tape that she took it back to the store for a refund, and while the clerk was giving her the money back, she told them she thought that the police might be interested to know they were selling such things.

I have no idea whether she followed up on this threat. I could only imagine the bored cop fielding the call: "Yes, ma'am—you say that Kmart is selling a tape with dirty language on it? We'll send a car right over."

The truth is that there were places where the police *were* interested. Carlin was arrested several times for performing "Seven Words" at live shows, and a radio station was sued for airing it—a case that went all the way to the Supreme Court. Those seven dirty words were serious stuff.

When George Carlin died a few weeks ago, people remembered what a social critic he was, and how he was a genius at thinking about the way we live and speak, and spinning humor out of that shared humanity.

But what I remembered first was that pair of 14-year-old boys laughing ourselves silly in that Chevy Impala with the "Seven Words" coming over the speakers.

It's 36 years later, and that bit is still profane, funny and true. And you still can't say those words on television.

## HR offers benefits preview

*Open enrollment begins in October*

**BY PAUL GOVERN**

Each year benefits-eligible employees anticipate information about next year's benefits, which typically includes the news that monthly costs are going up. But, this year, there is some good news — only one of the health plan options is going to cost more in 2009; the cost for the other two options is staying the same as in 2008.

Also, people who elect the Aetna Choice option for 2009 will enjoy a higher amount deposited into their Health Reimbursement Arrangement. In fact, the changes to the Aetna Choice option will be so significant in 2009 that the Benefits Office is changing that option's name to "Aetna HealthFund."

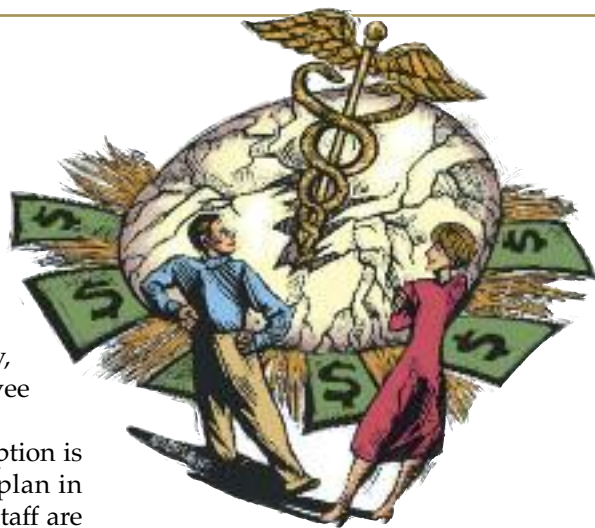
"In May we proposed a plan to the Health Care Cost Containment Committee to lower the deductible in the Aetna HealthFund option and increase the Health Reimbursement Arrangement, so the gap that participants must cover before the plan pays coinsurance will be much smaller," said Jane Bruce, HR director, Benefits Administration.

Employees' monthly costs for the BlueCross Advantage P option will rise between 5 percent and 11 percent, depending on the tier (employee-only, employee and children, employee and spouse/partner, or family).

"The cost of the BlueCross option is increasing because that is the plan in which most of our faculty and staff are enrolled and where utilization is higher. It is simple math — we must raise the rates to coincide with more use.

"On a yearly basis faculty and staff should explore their health care needs and determine which is the best health plan option from those that are available," Bruce said.

Changes to the health plan and other benefits are effective Jan. 1 2009. Employees elect 2009 benefits during Open Enrollment, Oct. 1–15. The Benefits Fair, where employees can get answers to their benefits questions from benefits administrators and vendors, is scheduled for Sept. 25 at the



Student Life Center. Open Enrollment will be online again this year and informational packets will be mailed in September.

Other benefits elected during Open Enrollment are dental; vision; short-term disability; accidental death and dismemberment; and personal spending accounts (PSAs). There are no changes planned for the coverage of these benefits at this time.

Benefits information, including Open Enrollment benefits information as it is updated, can be found on the Human Resources Web site.