

Lubbock County Family Network



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Thanksgiving Trivia

A little trivia about how we came to celebrate this holiday.

National Feast

The Continental Congress proclaimed the first national Thanksgiving in 1777. A somber event, it specifically recommended “that servile labor and such recreations (although at other times innocent) may be unbecoming the purpose of this appointment [and should] be omitted on so solemn an occasion.”

Presidents Washington, Adams and Monroe proclaimed national Thanksgivings, but the custom fell out of use by 1815, after which the celebration of the holiday was limited to individual state observances. By the 1850s, almost every state and territory celebrated Thanksgiving.

Sarah Josepha Hale (1788-1879). Many people felt that this family holiday should be a national celebration, especially Sarah Josepha Hale, the influential editor of the popular women’s magazine *Godey’s Lady’s Book*. In 1827, she began a campaign to reinstate the holiday after the model of the first Presidents. She publicly petitioned several Presidents to make it an annual event. Sarah Josepha Hale’s efforts finally succeeded in 1863, when she was able to convince President Lincoln that a national Thanksgiving might serve to unite a war-torn country. The President declared two national Thanksgivings that year, one for August 6 celebrating the victory at Gettysburg and a second for the last Thursday in November.



Neither Lincoln nor his successors, however, made the holiday a fixed annual event. A President still had to proclaim Thanksgiving each year, and the last Thursday in November became the customary date. In a controversial move, Franklin Delano Roosevelt lengthened the Christmas shopping season by declaring Thanksgiving for the next-to-the-last Thursday in November. Two years later, in 1941, Congress responded by permanently establishing the holiday as the fourth Thursday in the month.

<http://www.plimoth.org/learn/MRL/read/thanksgiving-history>

Source: Extension Home Economics Newsletter by Connie Moyers, Roosevelt Co., NM Extension Home Economist, Vol 16, Issue 4 (Nov 2013)

Don’t Crash the Party on Thanksgiving & Christmas! Buckling Up Could Save Your Giblets!

As families travel long and short distances to gather together on Thanksgiving and Christmas and begin the holiday season, the roads become more heavily traveled and the chances for car crashes go up. In fact, the Thanksgiving holiday is one of the most dangerous holidays of the year when it comes to vehicle crashes and fatalities. During the Thanksgiving holiday weekend in 2013 there were 301 people killed in traffic crashes across the nation—and tragically, 58 percent of those killed were not buckled up. Buckling up is the single most effective step you can take to increase your chances of a safe road trip! Taking those few seconds to make sure all of your passengers, young and old, are buckled up, as well as keeping your focus on driving and preparing ahead for the trip, can make all the difference.

Texas A&M AgriLife Extension Service reminds motorists to give driving your full attention, buckle up, check road and weather conditions, and protect yourself and others on the road. Follow these steps to make sure you arrive alive:

- Prepare. Make sure your car and tires are in good condition and that roads and visibility are clear. If using a GPS device, enter your destination before you start to drive. If you prefer a map or written directions, review them in advance.
- Make sure all passengers are buckled up correctly. Passengers in the back seat need to buckle up — it's the law! Make sure children are in appropriate car seats for their age, height, weight and developmental stage.
- Turn it off and stow it. Turn your phone off or switch it to silent mode before you get in the car. Then stow it away so that it's out of reach.
- Pull over. If you need to make a call, first pull over to a safe area.
- Secure your pets. Unsecured pets are not only dangerous to themselves and other passengers, they can also be a big distraction in the car.
- Mind the kids. Pull over to a safe place to address situations involving children in the car.
- Focus on driving. Multi-tasking behind the wheel is dangerous. Refrain from eating, drinking, reading, grooming, smoking, and any other activity that takes your mind and eyes off the road.

As a reminder to buckle up, the Click It or Ticket campaign will be in force during the holiday weekend with extra officers on patrol to increase awareness and enforcement of the seat belt and car seat laws. The key message of the effort is that surviving your drive this year — and making it to next Thanksgiving and Christmas — can be as simple as buckling up!

Shingles

Almost 1 out of every 3 people in the United States will develop shingles, also known as zoster or herpes zoster. There are an estimated 1 million cases each year in this country. Anyone who has recovered from chickenpox may develop shingles; even children can get shingles. However the risk of disease increases as a person gets older. About half of all cases occur among men and women 60 years old or older.

People who have medical conditions that keep their immune systems from working properly, such as certain cancers including leukemia and lymphoma, and human immunodeficiency virus (HIV), and people who receive immunosuppressive drugs, such as steroids and drugs given after organ transplantation are also at greater risk of getting shingles.

People who develop shingles typically have only one episode in their lifetime. In rare cases, however, a person can have a second or even a third episode.

Shingles is caused by the varicella zoster virus the same virus that causes chickenpox. After a person recovers from chickenpox the virus stays in the body in a dormant state. For reasons that are not fully known, the virus can reactivate years later causing shingles. Herpes zoster is not caused by the same virus that causes genital herpes, a sexually transmitted disease.

Shingles usually starts as a painful rash on one side of the face or body. The rash forms blisters that typically scab over in 7 to 10 days and clears up within 2 to 4 weeks. Before the rash develops, there is often pain, itching or tingling in the area where the rash will develop. This may happen anywhere from 1 to 5 days before the rash appears.

Most commonly, the rash occurs in a single stripe around either the left or the right side of the body. On other cases, the rash occurs on one side of the face. In rare cases (usually among people with weakened immune systems), the rash may be more widespread and look similar to a chickenpox rash. Shingles can affect the eye and cause loss of vision. Other symptoms of shingles can include: Fever, headache, chills and upset stomach.

Shingles cannot be passed from one person to another. However, the virus that causes shingles, the varicella zoster virus, can be spread from a person with active shingles to a person who has never had chickenpox. In such cases the person exposed to the virus might develop chickenpox, but they would not develop shingles. The virus is spread through direct contact with fluid from the rash blisters not through sneezing, coughing or causal contact. A person with shingles can spread the virus when the rash is in the blister-phase. A person is not infectious before blisters appear. Once the rash has developed crusts the person is not longer contagious. Shingles is less contagious than chickenpox and the risk of a person with shingles spreading the virus is low if the rash is covered.

If you have shingles:

- Keep the rash covered.
- Do not touch or scratch the rash.
- Wash your hands often to prevent the spread of the virus.
- Until your rash has developed crusts avoid contact with
 - Pregnant women who have never had chickenpox or the varicella vaccine
 - Premature or low birth weight infants
 - Immunocompromised persons (such as persons receiving immunosuppressive medications or undergoing chemotherapy, organ transplant recipients and people with HIV infection.)

The only way to reduce the risk of developing shingles and the long-term pain that can follow shingles is to get vaccinated. A vaccine for shingles is licensed for persons aged 60 years and older.

Several antiviral medicines—acyclovir, valacyclovir and famciclovir—are available to treat shingles. These medicines will help shorten the length and severity of the illness. But to be effective they must start as soon as possible after the rash appears. Thus, people who have or think they might have shingles should call their healthcare provider as soon as possible to discuss treatment options.

Analgesics (pain medication) may help relieve the pain caused by shingles. Wet compresses, calamine lotion and colloidal oatmeal baths may help relieve some of the itching.

The shingles vaccine (Zostavax) was recommended by the Advisory Committee on Immunization Practices in 2006 to reduce the risk of shingles and its associated pain in people age 60 years and older. Your risk for developing shingles increases as you age. The Shingles Prevention Study involved individuals age 60 years and older and found the shingles vaccine significantly reduced disease in this age group. The vaccine is currently recommended for persons 60 years of age and older. Even people who have had shingles can receive the vaccine to help prevent future occurrences of the disease. There is no specific time that you must wait after having shingles before receiving the shingles vaccine. The decision on when to get vaccinated should be made with your health care provider. Generally, a person should make sure that the shingles rash has disappeared before getting vaccinated.

Shingles vaccine is available in pharmacies and doctor's offices. Talk with your healthcare professional if you have questions about shingles vaccine. At this time, DCD does not have a recommendation for routine use of shingles vaccine in persons 50 through 59 years old. However, the vaccine is approved by FCA for people in this age group.

Some people should not get shingles vaccine.

- A person who has ever had a life-threatening or severe allergic reaction to gelatin, the antibiotic neomycin, or any other component of shingles. Tell your doctor if you have any severe allergies.
- A person who has a weakened immune system because of:
 - HIV/AIDS or other disease that affects the immune system,
 - Treatment with drugs that affect the immune system, such as steroids,
 - Cancer treatment such as radiation or chemotherapy,
 - Cancer affecting the bone marrow or lymphatic system, such as leukemia or lymphoma.
- Women who are or might be pregnant

All Medical Part D plans cover the shingles vaccine. The amount of cost-sharing (money you have to pay) for vaccination varies.

Medicare Part B plans cover the shingles vaccine. Medicaid may or may not cover the vaccine; contact your insurer to find out.

Most private health insurance plans cover the vaccine for people 60 years of age or older, while some plans cover the vaccine for people 50 to 59 years of age.

Some pharmaceutical companies provide vaccines to eligible adults who cannot afford them. For information of the patient assistance program that includes Zostavax (shingles vaccine), see <http://www.merk.com/merckhelps/vaccines/home.html>

To find medical practices or pharmacies near you that offer the vaccine, visit www.zostavax.com.

Source: Extension Home Economics Newsletter by Connie Moyers, Roosevelt Co. NM Extension Vol. 16, Issue 4 (Nov 2013)

Healthier Holiday Eating

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If holiday eating leaves you worried about foods high in fat and calories or overeating in general, here are some tips to help enjoy the holidays without increasing your waistline. Making recipes healthier may be easier than you think. Make

simple ingredient substitutions or adjustments to create healthier recipes without sacrificing flavor and enjoyment. Many of the traditional foods served during the holidays start out healthy. It's what is added to them and how they are prepared that add extra calories and fat.

Healthier Holiday Eating Tips:

Lower the fat. Use half the butter, shortening or oil in baked goods and replace the other half with unsweetened applesauce, prune puree, or mashed banana. If the recipe calls for regular sour cream or mayonnaise, replace them with reduced-fat versions. For dip recipes, try using plain, low-fat or non-fat yogurt in place of mayonnaise. Skim excess fat from the top of soups, gravies and stews. Use skim or low-fat milk instead of whole milk. Choose lean meats, and drain excess fat after cooking.



Reduce sugar. In baked goods, such as quick breads, cookies, pie fillings, custard, puddings and fruit crisps, reduce the sugar by one-fourth to one-third. When you use less sugar in recipes, add spices such as cinnamon, cloves, allspice and nutmeg or flavorings such as vanilla extract or almond flavoring to enhance the sweetness of the food. Don't reduce sugar in yeast breads because it provides food for the yeast and promotes rising.

Be sodium savvy. Drain liquid from canned vegetables and rinse with water. Choose fresh or low-sodium versions of products such as low-sodium soups, broths, soy sauce, canned vegetables and tomato products. In many recipes, salt may be reduced or deleted altogether. When the recipe calls for seasoning salt, such as garlic salt, celery salt, or onion salt, try using herb-only seasoning, such as garlic powder, celery seed, or onion flakes. Or use finely chopped herbs, garlic, celery, or onions. Don't cut salt out of yeast breads because it helps control the rising action of yeast.

Increase fiber. Try using whole-wheat flour and bread, bulgur, whole-wheat pasta, brown rice, oatmeal, whole cornmeal or barley in recipes and dishes. Substitute whole-wheat flour for half of the all-purpose



flour in a recipe. Vegetables are another great way to increase the fiber of dishes, add a variety of vitamins and minerals, and make meals stretch further. Add vegetables to chili, meatloaf, hamburgers and spaghetti sauce. Add extra vegetables to quiche fillings, casseroles and salads. Beans such as kidney, pinto or navy beans are great for soups or stews. Fruits can be added to muffins, pancakes, desserts, and salads.

Use healthier cooking techniques. Try using nonstick pans or spraying pans with nonstick cooking spray to reduce the amount of fat and calories added to baked



goods. Choose healthier cooking methods that use less fat, such as baking, broiling, grilling, poaching, steaming or microwaving.

Start a tradition this holiday season by getting creative and making your holiday recipes healthier through simple substitutions and adjustments. For more food, nutrition and health information go to www.food.unl.edu or scan the QR code with your smart phone or other electronic device to go directly to the website.



Additional Resources & Links:

Helpful Winter Holiday Food Preparation, Food Safety & Healthy Eating Links. Need an ingredient substitution, an answer to a baking or other food preparation question? Healthy food ideas for the holidays? Help can be just a click away. <http://food.unl.edu/web/fnh/helpful-holiday-links>

Healthy Holidays. Food is a major part of the festivities during the holiday season. The temptations of sweets and high fat foods are sometimes too much for someone who is trying to eat healthy to resist. <http://go.unl.edu/aegc>

Tiny Tastes Can Total BIG Calories over the Winter Holidays. Extra calories can sneak in over the holidays. They don't always come in large portions, but can tiptoe in through tiny tastes. <http://food.unl.edu/web/fnh/tiny-tastes-pp>

Turkey Anytime: Recipes for Turning Leftovers into Planned-Overs. Turkey makes a great first meal plus delicious leftovers that are easy to combine into a variety of scrumptious future meals. <http://food.unl.edu/web/fnh/turkey>

UNL Extension Calendar – National Food Days, Weeks, and Months for November. <http://food.unl.edu/web/fnh/november>

All the Healthy Bites! Healthy Bites is a newsletter that focuses on a different food, nutrition and/or health theme for each month.

http://food.unl.edu/web/fnh/healthybites_archives

Sources:

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Updated: October 2013

Source: University of Nebraska Extension, *Know how. Know now.* October 2013

**Happy
Holidays**

Recipe Corner



Easy Pumpkin Spice Cake

- 1 pkg spice cake mix
- 1 12-16 oz canned pumpkin
- 1-2 large eggs (optional)
- 12 oz Chocolate Chips (caramel, white or other chips or nuts)
- 1 can vanilla frosting

Mix all ingredients together. Eggs or egg substitute can be added for smoother consistency. Stir in chocolate, caramel or white chips or nuts. Pour into a greased and floured bundt pan. Bake in a pre-heated 350° F Oven for 30-40 minutes or until a toothpick comes out clean. Let stand 10 minutes. Remove from pan and cool completely on a wire rack. Place on plate and frost with canned vanilla or cream cheese frosting. For food safety, refrigerate cake.

Food Safety

If you have questions about how to handle turkey or other meats on Thanksgiving or Christmas day, call the toll-free U.S. Department of Agriculture Meat & Poultry Hotline between 8am to 2pm, Eastern Time at 1-888-674-6854.

Sincerely,

A handwritten signature in cursive script that reads "E. Kay Davis".

E. Kay Davis, M.S., L.D.
County Extension Agent -Family and Consumer Science
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