

SearchLight

CCPOA Benefit Trust Fund | Lighting The Darkness. Keeping You Covered.

Winter/Spring 2020

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CCPOA Benefit Trust Fund

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We present this issue of SearchLight for your education and enjoyment. We produce this publication three or four times a year, as the whim strikes us. If you have any benefit questions, please call the Trust. Don't count on your buddy, because he got his information from some guy in a van parked outside the wall.

Getting Mental

California's correctional officers are regularly exposed to traumatic events that make them more likely to grapple with depression, PTSD and suicidal thoughts, according to researchers at UC Berkeley's Goldman School of Public Policy.

So begins the report based on the 2017 California Correctional Officer Survey (CCOS) on Health and Wellness. The survey was the first time a large-scale effort gathering information on the thoughts, attitudes and experiences of more than 8,000 criminal justice personnel, including correctional officers and parole officers.

When it comes to actually collecting and studying the lives and well-being of correctional officers, academic research and policy discussions have, until recently, been practically nil.

Even the DOJ stated "Health and wellness among those who work in correctional agencies is an issue that has always existed, but is just starting to get the increasing attention that it deserves."

The CCOS highlighted conditions that all C/Os encounter: mental and physical wellness; exposure to violence; attitudes towards rehabilitation and punishment; job training and management; work-life balance; and training and support.

It also documented the difficulties of encouraging law enforcement personnel to seek the assistance they need.

HIGHLIGHTS OF THE STUDY:

- More than 50% of C/Os report that violent incidents are a regular occurrence at the prison where they work. 85% reported seeing someone seriously injured or killed. Almost 30% reported being seriously injured at work.
- 50% of officers say they rarely feel safe at work.

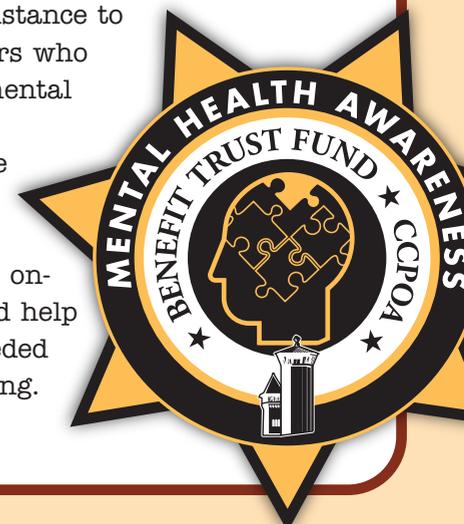
- Depression is a way of life for many law enforcement personnel. 28% report often or sometimes feeling down, depressed or hopeless, and 38% have little interest or pleasure in doing things.
- 40% of officers report that they have experienced an event so frightening, horrible or upsetting at work that they have had nightmares about it.
- 10% of correctional officers have thoughts of suicide. The rate is even higher for retired C/Os. More than 7 in 10 haven't told anyone.
- A minority of officers say they have used the state-sponsored programs meant to improve their well-being. For example, only 18% reported ever having used the Employee Assistance Program (EAP).

Not surprisingly, many officers said they were worried about privacy and repercussions if they were to reach out to EAP for help. *news.berkeley.edu*

WHAT CAN YOU DO?

The Benefit Trust Fund, along with the CCPOA are taking an active role in promoting mental health for all our members. Starting in March we are relaunching a series of free events we're calling "Mental Health Awareness." The events will focus on help and assistance to our fellow officers who may be facing mental hardships.

We have more details in this issue of SearchLight, as well as online. Join us, and help get this long-needed conversation going.



A True Beer Belly

The police didn't believe him. They arrested the man on suspicion of drunken driving. Doctors didn't believe him. His blood alcohol level was 0.2, more than twice the legal limit for operating a car. He refused a breathalyzer test.

But the facts remained in contention. The 46-year-old man swore that he hadn't had any alcohol that night.

Then researchers discovered the unusual truth: a rarely diagnosed condition known as "auto-brewery syndrome."

The condition, also known as gut fermentation syndrome, can occur in otherwise healthy people, but is more common in patients with diabetes, obesity or Crohn's disease. Fermenting fungi or bacteria in the gut produce ethanol, and cause the patients to show signs of drunkenness.

The condition has rarely been studied. Some of the studies that do exist have cast doubt on the validity of auto-brewery as a real syndrome. However, Researchers at Richmond University Medical Center in New York, believe the syndrome is not only real, but under diagnosed.



IT'S HAPPENED BEFORE

Back in 2014 the condition made news when the driver of a truck that spilled 11,000 salmon onto a highway claimed to have auto-brewery syndrome. In 2015, a New York woman was charged with DUI after registering a blood alcohol level four times the legal limit. After being shown evidence that she had auto-brewery syndrome a judge dismissed the charges.

The man in the Richmond University study, whose identity was not released, had started taking antibiotics in 2011 for a traumatic injury. That's when the symptoms started: depression, memory issues and aggressive behavior that was uncommon for him.

After his arrest on a drunken-driving charge, the man's aunt remembered hearing about a similar situation addressed by a doctor in Ohio. She bought her nephew a breathalyzer to test his blood alcohol levels and persuaded him to go to Ohio for treatment.

"Everybody thought that he was a liar, he was a closet drinker," said Fahad Malik, a doctor and the lead researcher on the study.

Doctors in Ohio gave the man a carbohydrate-heavy meal and watched his blood alcohol level shoot up to 0.57. However, when his intoxication caused him to fall and suffer a brain bleed, the doctors again refused to believe that he hadn't been drinking.

Eventually a treatment was found which included an antifungal medication, combined with regular blood alcohol level

checks, enabling the man to have a normal diet without exhibiting symptoms.

People with auto-brewery syndrome may smell like alcohol or feel too tired to work or spend time with family. Some patients are unemployed because of the condition, and others skip meals to be sober for longer periods.

A CASE OF HESS

Nick Hess, 39, had nearly 100 doctors try to diagnose him—without success.

Hess said his wife didn't believe that he hadn't been drinking when he started showing his symptoms. At one point, she started recording him to ensure he wasn't sneaking alcohol. What she saw, Hess said, was just him playing video games all day.

"She would watch me wake up and sit on that couch from the moment I woke up to the moment I went to sleep and progressively get more and more drunk," he said.

Hess said his auto-brewery syndrome makes him oscillate each day between intoxication and a hangover. He dropped out of college because of his symptoms and is appealing a DUI conviction.

Every day, Hess suffers from vomiting, headaches and other symptoms.

HOW DOES THIS HAPPEN?

Auto-brewery syndrome seems to be caused by antibiotic use altering a person's fungal growth, but researchers don't know why so few people who take antibiotics contract the condition. The current best-guess is that other drugs, environmental toxins or preservatives in foods also could cause auto-brewery syndrome by disrupting the body's normal balance of bacteria.

Some symptoms of auto-brewery syndrome can mimic other conditions or medical events, such as hypoglycemia or a stroke. People who suspect they have auto-brewery syndrome should get a breathalyzer so they can test their blood alcohol levels when symptoms manifest.

Blood alcohol levels in people with auto-brewery syndrome can reach five times the legal limit. Antifungal medications, probiotics and low-carb diets can treat the condition.

One of the doctors involved with the study, Barbara Cordell, had personal knowledge of the condition, as her husband had suffered from it for six years before they realized what it was.

Dr. Cordell is a researcher of auto-brewery syndrome and the author of "My Gut Makes Alcohol." Cordell said roughly 500 people from around the world have contacted her about the condition since 2015. She now runs a support group for about 200 people with auto-brewery syndrome. washingtonpost.com

STORIES FROM THE BLUE SHIELD HEALTH LIBRARY

HOW TO GET YOUR KIDS TO EAT THEIR FRUITS AND VEGGIES

MAKING TIME FOR FAMILY DINNER, AND BEING CREATIVE WHEN YOU CAN'T

Getting fruits and vegetables on your kids' plates can be challenging. Harder still? Getting the good stuff in your kids' mouths.

Try these simple strategies and call on your own creative genius to get your littles and middles on board the zucchini boat. It's time to ingrain your family's healthy eating habits.

PREP WHEN YOU CAN

Got a crazy week ahead? Try to carve out some time over the weekend to cook and freeze healthy meals that you can easily reheat on a minute's notice. Gather your family around a table and make a list of what they like to eat. Plan on featuring the most nutritious suggestions. As for the less healthy options (mac and cheese, I'm looking at you), focus on balancing tried-and-true goodies with vegetables or healthy sides. Perform a snack makeover.

Relying on packaged, processed snack foods? Trade them in for healthier, grabbable snacks. Think hummus and veggies wrapped in a tortilla, fruit skewers, or apple and celery slices dipped in mini cups of peanut butter. Find an online snack guru like Anjali Shah who runs *The Picky Eater* blog, or search #healthysnacks for tons of Instagram inspiration.

DON'T DITCH DESSERT

We all know sugar should be kept to a minimum, but a sweet after-dinner treat doesn't have to be bad for you to taste oh, so good. Give your kids (and yourself!) something worth finishing their veggies for. Try freezing chocolate-dipped banana halves into pops, or serving small bowls of chocolate chip-stuffed raspberries after they've cleared their plates. Strawberry yogurt bark makes a great stand-in for ice cream. Line a sheet pan with Greek yogurt, sprinkle with strawberries, freeze, then break into pieces.

MAKE FUN FOOD ARRANGEMENTS

Few kids look forward to broccoli and potatoes. But served as small green trees sprouting from a mountain of mashed potatoes lined with pretzel-stick fences? That's fun! Zucchini fritters made into hearts using a cookie cutter? Love!

PRIORITIZE FAMILY MEALS

We're all busy, so sitting down to dinner isn't always possible. According to the Academy of Nutrition and Dietetics, kids who sit down for a family meal eat more fruit, vegetables, vitamins, and minerals. Try scheduling dinner at the same time each night, so the family can plan around it. Or, involve little ones by oc-

asionally declaring "Kids Night," where they get to choose an appetizer, main course, and dessert from a list of healthy options. Getting your family to the table is worth the effort.

Change your mindset by changing your menu

LOAD UP ON FRUITS AND VEGETABLES

You knew these were good for your waistline, but they also have other benefits.

They're mood boosters. That's thanks to complex carbohydrates that release energy into our bodies gradually.

They contain antioxidants. Vitamin C and carotenoids protect against chronic inflammatory disease, hardening and narrowing of the arteries, some cancers, and certain forms of depression.

FACTOR IN FERMENTED FOODS

Rich in good bacteria, these foods keep your gut healthy. Aim for probiotics. These include kimchi, sauerkraut, kombucha, yogurt, miso, and most cheeses and traditional salamis.

They improve overall mental health. Studies show our mood and emotions also benefit, since about 95 percent of our serotonin receptors are found in the gut lining.

STAY HYDRATED

Drink water throughout the day, not just when you feel thirsty. Keep a bottle in the car, at your desk, and on your nightstand.

Avoid dehydration. When your body needs water, it can negatively affect the brain's dopamine and serotonin balances. These are natural chemicals that, when thrown off, can increase or affect depression and anxiety.

GET ENOUGH MAGNESIUM

This mineral can help as a natural anxiety treatment.

Adults should get between 310 and 420 grams, depending on age and gender. Pregnant women often need more since pregnancy can affect how the body absorbs certain vitamins and minerals.

Not sure you're getting enough? Load up on leafy greens, avocado, whole grains, and when you're in the mood for sweets, dark chocolate. Supplements might help. Consult your doctor before taking a magnesium supplement.

By choosing foods and eating in ways that both satisfy us and contribute to our emotional well-being, we can help protect against disease, and improve our mood and overall mental health.



WORLD-WIDE-WEIRD

Found online. That makes it true.

How the Auto Club Invented Jay-Walking to Save the Car

In any American city if you walk outside to a major intersection and look into the streets, you know what you'll see. You'll see cars, and trucks, and buses. You might see a few bicycles trying to sneak their way through the traffic. What you won't see are many people. Not on the street, anyway.

But it wasn't always this way. Go back 100 years and it was almost exactly the opposite.

At the turn of the century, there was nothing moving faster than about 10 miles an hour in the street. Horses and wagons were the norm. Parents saying "Go outside and play in the street" made sense. After all, yards and playgrounds were not common in the big city.

Even after the first cars appeared around 1900, they had to conform to the customs of the day, which meant that traffic moved at wagon speeds.

But things changed. The Industrial Revolution had people leaving farms for factories and moving to the cities. The Model T Ford was rolling off the line at a rate of one per minute. Near-and-Dear to the heart of Henry Ford was the idea that the people who make the Model T can afford to buy a Model T. So by the 1920s, cities are getting crowded with people and cars.

Just like drivers today, nobody wanted to drive 10 miles an hour. Pedestrians and children still lingered in the streets, walking casually, like it's 1906. By 1923, close to 18,000 people a year were being killed by motor vehicles. Three-quarters of those are pedestrians, and half of the pedestrians killed are children.

Cities held parades and built monuments in memory of children who had been struck and killed by cars. As far as the public was concerned, it's like they died in a war. "The automobile looms up as a far more destructive mechanism than the machine gun... the man in the street seems less safe than the man in the

trench," said The New York Times. Mothers of children killed in the streets were given a special white star to honor their loss.



So many people, so few drivers.

THE BATTLE LINES ARE DRAWN

Cities started to think seriously about restricting the use of the death-dealing car. In November, 1923, Cincinnati residents got a referendum placed on the ballot requiring cars to be mechanically limited to 25 miles an hour. Once the speed governor was installed, it would have a police seal on it. If you tampered with it, you were breaking the law.

This did not sit well with 'Motordom,' the group of people who made their livelihood from car owners. If cities banned the car, people would buy far fewer of them. And less cars meant less money. Less car sales, less car repairs and less members for the burgeoning motor-clubs, like the Auto Club. So, a strategy was born—*You can't blame the car if you blame the driver.*

Motordom changed the discussion from "How do we control cars and drivers?" into "How do we make streets places where cars belong, and where pedestrians don't belong?"

THE EFFORTS OF LEFFERTS

E.B. Lefferts is the enemy of jaywalkers everywhere. He was head of the Automobile Club of Southern California and quite a public relations genius. Lefferts realized that you can't just change behavior by writing laws and punishing people. You have to reach them through psychology. So he invented a new word, 'jaywalking.'

Lefferts did this by turning a slang insult to a legal term. J-A-Y, was a slang-word for a country bumpkin. Therefore, a jaywalker is somebody who walks around the city like a Jay from the sticks. In his stumbling and gawking at the big-city sights, a Jay was a real nuisance to everyone and everything around him.

Launching his PR campaign in Los Angeles. Lefferts explained what jaywalking was. He said that accidents could be the result of reckless pedestrians. This was a tough sell, as most people had never considered that there was such a thing as reckless pedestrian. Within a year he was able to get an anti-jaywalking ordinance passed. Cleverly though, he told the police **not** to arrest jaywalkers.

Arresting the jaywalker would only make them indignant. Instead, Lefferts wanted the pedestrian ridiculed as a form of psychological control, because by then 'jaywalker' had become a real term of abuse.

Equally important was that others see the jaywalker being ridiculed. The technique worked. Newspaper reports show that just after a few weeks, pedestrians in L.A. got the message, and the streets were cleared for cars.

By 1929 "America's love affair" with the car was a real thing. The first cloverleaf interchange was built in the United States, and the country's future with the automobile became permanent.

Coincidentally, that's around the time that you find people stopped objecting to the term 'jaywalker'—including the jaywalkers themselves. *99percentinvisible.org*

BUSTLE

Off-beat news stories
about crime and such...

Baby Shark-Shark

The three were just strolling through the San Antonio Aquarium – pushing their baby in a stroller and enjoying the day.

It wasn't until about an hour after they left that the aquarium staff noticed a baby shark was missing. Turns out that baby in the stroller was no human!

The three crooks had made their way to an open air tank, staked out the area for about an hour, then when the time was right, wrapped the baby shark in a towel, put it in a stroller and proceeded to simply leave the premises without being noticed.

In the process of stealing the shark, the group dumped a disinfectant solution used for tools into the filtration system. The solution caused "harm to other wildlife" but fast acting staff managed to stop major damage.

Surveillance cameras caught the thieves in the parking lot getting into their truck, and investigators quickly tracked them down.

In an odd, but fortunate turn of events, the mastermind of the theft was actually a marine enthusiast. His home was "almost a mock-up" of the aquarium.

"He very much knew what he was doing and kept that animal alive and was able to continue to see that animal thrive, which is pretty shocking to all of us," said Leon Valley Police Chief Joe Salvaggio. He added they believe the baby shark was stolen to replace one that had recently died. foxnews.com; clumseycrooks.com



Photo: Amazon

Get the Message?

Police in Boynton Beach, Florida, arrested a young woman after an officer spotted her swerving in late-night traffic, while doing 60 in a 45 zone. The woman failed a field test and was taken to the Breathalyzer unit, where she recorded a blood-alcohol level of 0.105.

So what's the best thing you can do if you are the breathalyzer technician? How about hitting the suspect up for her number, and texting her later to go out for drinks? Well, that's exactly what James Biggs did.

This so freaked out the woman, (who declined the offer, now that she was sober) that she went immediately and told her attorney. Smart move on her part.

Biggs' inappropriate actions jeopardized the breath-test findings, and thus the entire case, forcing prosecutors to reduce their original plea offer: from 12 months probation to no probation and just \$457 in fines. palmbeachpost.com

Get the Message

While every story has two sides, this may be a good reminder to work-it-out if you get in a dispute. Especially with a house painter.



Terry Taylor of Derbyshire, England, had just about enough of the client which kept changing their mind and refusing to pay. "He kept saying, 'I'll pay you tomorrow,' but tomorrow never came."



PD Bromance

Anthony Akers of Richland, Washington, was on the local police's "Wanted" list for violating terms of his parole. The Richland Police department posted a photo of Akers asking for tips on his whereabouts.

"Calm down, I'm going to turn myself in," was what they got in reply. Seems Akers just loved to chat about himself.

When there was no sign of Akers the next day, officers tried to send him a direct message: "Hey Anthony! We haven't seen you yet. Our business hours are 8:00 am - 5:00 pm Monday through Friday. Of course if you need a ride you can call... and we will pick you up."

Akers was kind enough to respond: "Tying up a couple loose ends since I will probably be there for a month. Should be there in the next 48 hours." But, not surprisingly, he didn't show.

So now the police started messing with his emotions, sounding like a friend who's been stood-up. "Is it us?" officials wondered. "We waited, but you didn't show... The weekend came and went. We are beginning to think you are not coming."

It was enough to cajole Akers into sending a longer, heartfelt note: "Dear RPD, it's not you, it's me. I obviously have commitment issues. I apologize for standing you up, but let me make it up to you. I will be there no later than lunchtime tomorrow, I know you have no reason to believe me after what I did to you, but I promise that if I don't make it on my own by lunchtime tomorrow I will call for a ride to assist me with my commitment issues. Thank you in advance to your response if you are patiently giving me another chance with us, I know I don't deserve it. P.S. You're beautiful"

Did Akers follow through with turning himself in? You bet.

As he was walking into the police department he took a selfie and posted "Here for our date sweetheart."

oddiycentral.com

npr.com; clumseycrooks.com

MHA & YOU

The Benefit Trust Fund, along with the CCPOA are taking an active role in promoting mental health for all our members. We call it “Mental Health Awareness.” The events will focus on help and assistance to our fellow officers who may be facing mental hardships.

WHAT ARE THESE EVENTS ALL ABOUT?

Beginning in March, the Trust is launching this year’s series of free, regional events to provide tools geared towards Correctional Officers in an effort to offset the many impacts of working in the stressful prison environment.

The Trust has pulled together a top-notch group of dynamic speakers. Topics presented during the trainings presented by experts in a variety of fields, while teaching real-time techniques to be used on the job, and at home:

- Identifying Sources of Stress
- Tools & Tips for On the Job Wellness
- Peer-to-Peer Support
- Addressing Stigma
- Wellness Resources & Best Practices

You will hear from custody staff, health care and legal professionals, prison chaplains, and citizens committed to mental health and wellness in the world of corrections.

Our goal is simple: we want to create an open, safe, judgement free forum to provide each attendee with tangible tools and strategies to aide in their personal health and overall wellness



with carefully developed content from experts with practical and clinical experience in this field.

WHEN, WHERE AND HOW

Here is the tentative event schedule:

- **Ontario** – April 21st: Morning Session
- **Tehachapi** – April 22nd: Morning Session
- **Bakersfield** – May 19th: Morning Session
- **Fresno** – May 20th
Two ½ Day Sessions: Morning or Afternoon
- **Fresno** – May 21st: Morning Session
- **Crescent City** – June 9th: Morning Session
- **Susanville** – June 11th
Two ½ Day Sessions: Morning or Afternoon
- **San Quentin** – July 14th: Morning Session
- **Salinas Valley** – July 15th: Morning Session
- **San Luis Obispo** – July 16th: Morning Session
- **Sacramento** – August 11th: Morning Session
- **Stockton** – August 12th: Morning Session
- **Fairfield** – August 13th: Morning Session

While dates and times are subject to change, we will keep you up to date two ways - **1** About a month before each event we will mail out postcards to members within about a half-hour radius of the event location. **2** We will have the most current listing on our website, with a link on the home page.

The events are FREE, but we do request you sign-up online so we have an idea of how many people will attend.

ATTENDANCE DATA IS NEVER SHARED WITH ANY STATE AGENCY. We look at these events as part of our Medical Program, and as such your information is confidential.

We See You

Did you know that every month, the Trust has a team of Benefit Specialists traveling around the state, going from institution to institution? Did you also know that we post where they’ll be each month?

Many of you have met Joe Gonsalves and his team. At any given time up to seven of his Benefit Specialists are in the field, answering questions and assisting members in educating, signing up, or resolving benefit issues.

These field reps are also the way members can sign up for Combined Insurance—which is a plan that pays members directly.

- You can learn more about Combined Insurance on our website, under “Programs.”
- Click on “Events Calendar” to see when and where the field reps will be each month.
- Click on “Our Providers” for a way to reach out to the Combined crew directly.

Combined Insurance is an official partner of the CCPOA Benefit Trust Fund. Their Benefit Specialists visit Institutions across the state on our behalf.

Retired Medical

I'm retiring; where do I go to make sure I get signed up for medical? A question we get all the time. When you retire, CalPERS becomes your health benefit officer. Give them a call at **888-225-7377** as soon as you begin your retirement planning to find out what steps you need to take. Your personnel specialist will also assist you in filing your retirement paperwork.

This does not necessarily mean you need to give up your CCPOA Medical Plan. While much of California is covered, there are some more rural areas where our plan is not available. If you are a CCPOA retiree living in a covered zip code area you can enroll in the CCPOA Medical Plan or our Medicare Supplement.

Also, be sure to check out the Trust's retirement planning section, linked on our homepage, and then call the **Trust's Eligibility Department** at **800-468-6486** to get your Trust retirement benefits ready. Many of the Trust's plans and programs can carry-over into retirement, but remember, you must be a member of CCPOA Retirement Chapter to qualify for any CCPOA benefits.

Junk Food, Crack Food

You're in withdrawal. You have mood swings. Anxiety. Headaches and insomnia. Did you quit smoking cigarettes? Or pot? Or maybe, just maybe, you've cut back on those greasy fries, burgers, and other highly processed food.

A study published in the research journal *Appetite* reported that people who reduced their consumption of highly processed foods experienced some of the same physical and psychological withdrawal symptoms as those quitting smoking. Seems cigarettes, marijuana and highly processed foods all have similar reactions on our bodies.

Because withdrawal occurs when reducing junk-food consumption, researchers theorize that highly processed foods might actually be physically addictive.

More research is needed to further explore the information gleaned from this study. In the meantime, perhaps just rais-

ing awareness that junk food really can be addictive will be helpful for those who wonder why it is so difficult to resist that last piece of pizza or chocolate cake.

IT'S JUST A CRAVE

For most people, it might not be an addiction, but all of us have experienced THE CRAVE. Maybe for you it's chips or fries, or you just need a slice of pizza NOW. Every person experiences food cravings differently. Cravings are often for foods high in sugar, salt, and fat. *(BTW: Sugar, Salt, Fat and Grease are NOT the four food groups.)*

So, can you fight the crave? Scientifically, cravings can result from many different factors, everything from hormones to stress. (The stereotype that a sad woman will eat a box of chocolates is not just a myth, according to the National Institute of Health study *Sweet Craving and Ghrelin and Leptin Levels in Women During Stress*.)

There does appear to be some real steps that anyone can take which may help your will power, and your chemistry, crave junk food a bit less:

- **Eat enough protein.** A study in the journal *Obesity* found that overweight men were able to reduce their cravings by up to 60 percent by getting 25 percent of their daily calorie intake from protein. The same study found that a high protein diet helped reduce the desire for nighttime snacks by 50 percent.
- **Drink plenty of water.** Hunger and thirst can produce very similar sensations in the mind, causing it to become confused. One of the easiest ways to reduce food cravings is to make sure the body is hydrated throughout the day. Drinking plenty of water helps clean out toxins from the body, which may also benefit a person's overall well-being.
- **Chew gum.** Studies show that most cravings will pass in 3-5 minutes, which is just about as long as the flavor in a piece of gum lasts. Plus, it keeps your mouth busy. *ncbi.nlm.nih.gov; medicalnewstoday.com; psychcentral.com*

Explosive Religion

Every February, the town of San Juan de la Vega celebrates the Festival of Exploding Hammers. And yes, as the name implies, it is a rather unusual festival.



While no one today knows the real origin of the festival, the tradition is so popular in San Juan de la Vega that locals will risk life and limb to keep it going.

According to local legend, Juantito de la Vega was a wealthy miner and rancher. When bandits stole his gold he looked for help, and was aided by Saint John the Baptist. From here, the particulars get a little fuzzy; the modern day celebration at San Juan de la Vega is a "reenactment" of the skirmish between San Juantito and the local dons. Which side possessed the original hammer bombs is forever lost in the smoky haze of history.

On Mardi Gras (Fat Tuesday) the young men head out to the edge of town, bringing with them pouches of home-made explosives and long-handled sledgehammers. The explosives are usually a mixture of potassium chlorate and sodium. (Potassium chlorate is a widely used chemical, and can be found in disinfectants, smoke grenades, match heads, and the purple color in fireworks.) Packed tightly and often wrapped in packing tape, they are attached to the head of a sledgehammer.

On the day of the festival, those brave enough, bang their sledgehammers against steel beams, causing explosions strong enough to cause serious injuries.

Police and other local authorities have tried to ban the explosions in the past, but the people of San Juan de la Vega love their tradition too much. "We do this out of devotion," said one local. "You have faith in a Saint and you must demonstrate that."

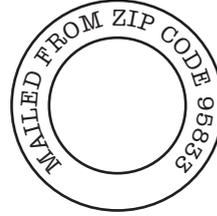
The problem with the exploding hammers is that the size of the explosives has increased substantially over the years. In the beginning small, thumb-sized packs only caused a bang and a bit of smoke, but today it's all about who has the bigger bomb attached to their sledgehammer.

Hammer wielders regularly get burns on their hands and other parts of their bodies, a few years back a young man got his hand blown up by an explosion, and catching some sort of shrapnel is not uncommon. Considering that about five tons of explosives are detonated every year, also serious injuries are relatively rare. Maybe the Saints approve.

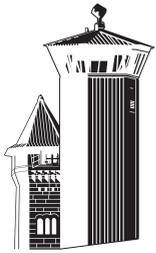
oddiycentral.com; atlasobscura.com

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again." *medicaldaily.com; investence.com*

they actually get not just adequate but optimal function. Lee underwent the procedure five days after his accident and the operation took 10 hours. "As soon as it was put to me that attaching my toe gave me a chance to carry on my job, I instantly said let's do it," Lee recalled. "Now, a year on, I'm back in the shop and doing what I love again."

"There are lots of different ways to reconstruct thumbs, but using the big toe gives the best functional and cosmetic benefits, as it is the thing most like a thumb on the body," Jill Arrowsmith, one of the hand surgeons who performed Lee's operation, said in a statement. The procedure is a bit rare, and only offered to those who lost most of their thumb, especially if the damage is down to the knuckle. According to the Journal of Hand and Microsurgery, "toe fingers" actually serve as near perfect substitutes for hand fingers because they share the same structure and range of motion. They also have the same sensitive skin and nails for pinching. And when patients lose a thumb and get it replaced with a toe,

BIG TOES UP

David Lee is a master cobbler. Less than two months earlier he had opened his shop in Mansfield, Nottinghamshire, England, and was trimming the heel of a shoe. Suddenly, his thumb became caught in the trimming machine, and he watched as his severed thumb drop onto the floor. "Straight away, I knew how bad it was, and I just worried that I wouldn't be able to fix shoes again. I cried my eyes out when I thought about it, as I thought I was going to lose my shop," Lee said. When he arrived at Royal Derby Hospital, he learned that all hope was not lost. But he has to make a tough decision—he can have his thumb replaced, provided he's willing to give up one of his big toes.

TEDDIBITS