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EAT THIS, LOSE WEIGHT The New Science of Dieting

Page 110



**Job
Search
Gaffes**
“You Said
What?!”

Page 69

**How to
Succeed
at Life**

FROM **Harvard
Business Review**

Page 176

**Kitchen
Time-Savers**

FROM **Mark
Bittman** Page 43



**WINTER
HEALTH WOES**
Fast Fixes

FROM **WebMD**

Page 47



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Wed. 3:21 p.m.
Italian leather

Fri.
Sun.



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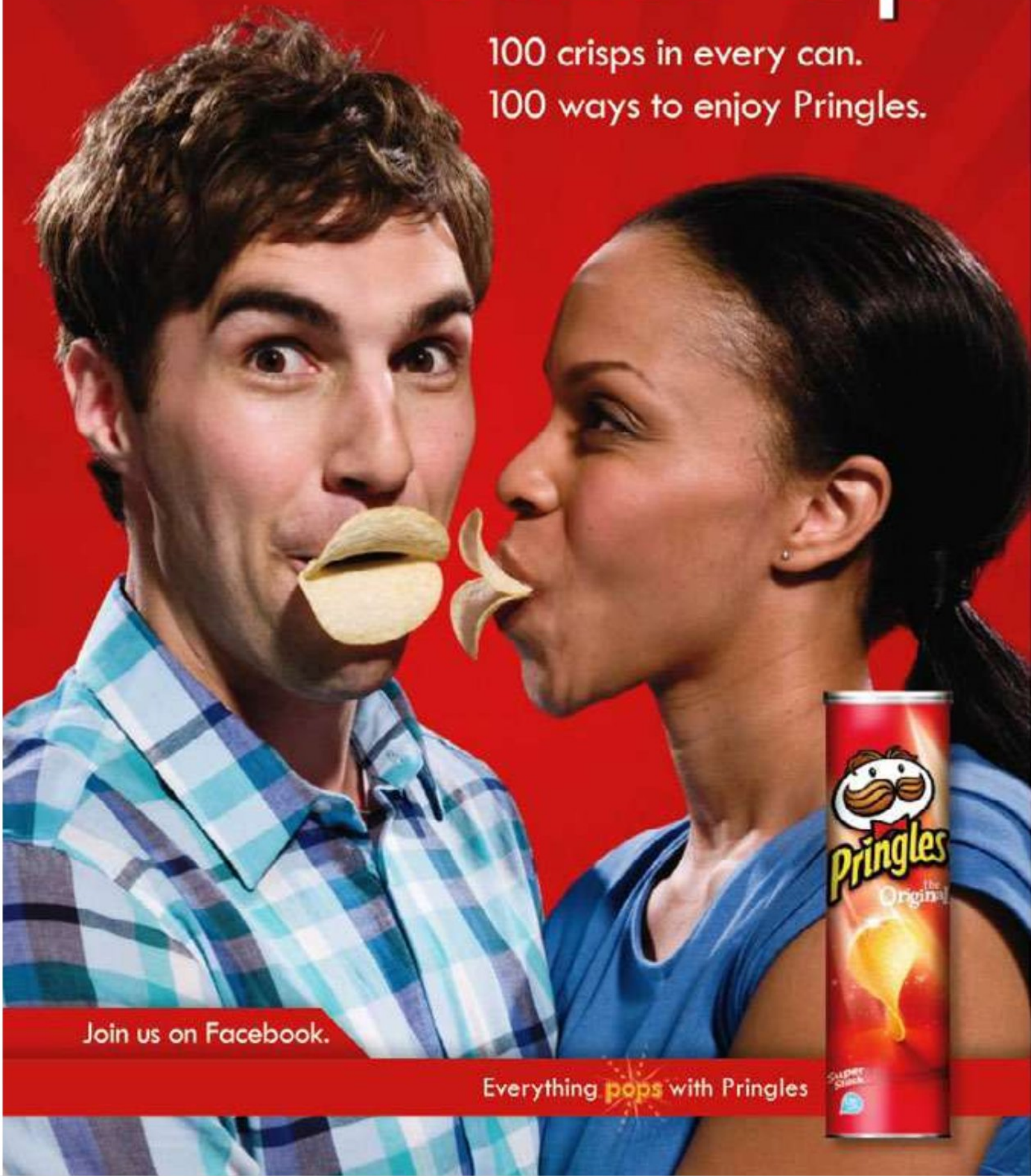
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F E A T U R E S

110 Is This Any Way to Lose Weight? INTERVIEW BY LISA DAVIS
Why conventional diets don't work—and how fat can help you drop pounds.

120 Miracle Boy KENNETH MILLER WITH REPORTING BY ALLISON SHELLEY
Pulled from the rubble of Haiti's earthquake, eight-year-old Kiki Joachin and his family struggle to rebuild their home, their lives—and their hopes.

129 The 2010 Blame & Shame Awards SACHA Z. SCOBLIC
Cold-blooded bureaucrats and lazy civil servants: Here are our winners for the most outrageous acts of the past year.

146 The Roundup: When Can You Retire? CHRIS RAYMOND
News from all over suggests your golden years may be delayed.

152 Look Twice See the world differently.

156 Worried Sick MARK LEYNER & BILLY GOLDBERG, MD
Our resident doctor has the cure for your hypochondria.

164 The Freedoms That Make Us Great
In the first of our four-part series, the woman at the center of the Ground Zero mosque controversy talks about religious freedom—hers and ours. AS TOLD TO KATHERINE LANPHER

172 Quick Study: Crime Scene Science
LISA GOFF
It's the sexiest stuff on TV, but do fingerprints and bullet matching actually convict criminals in the real world?

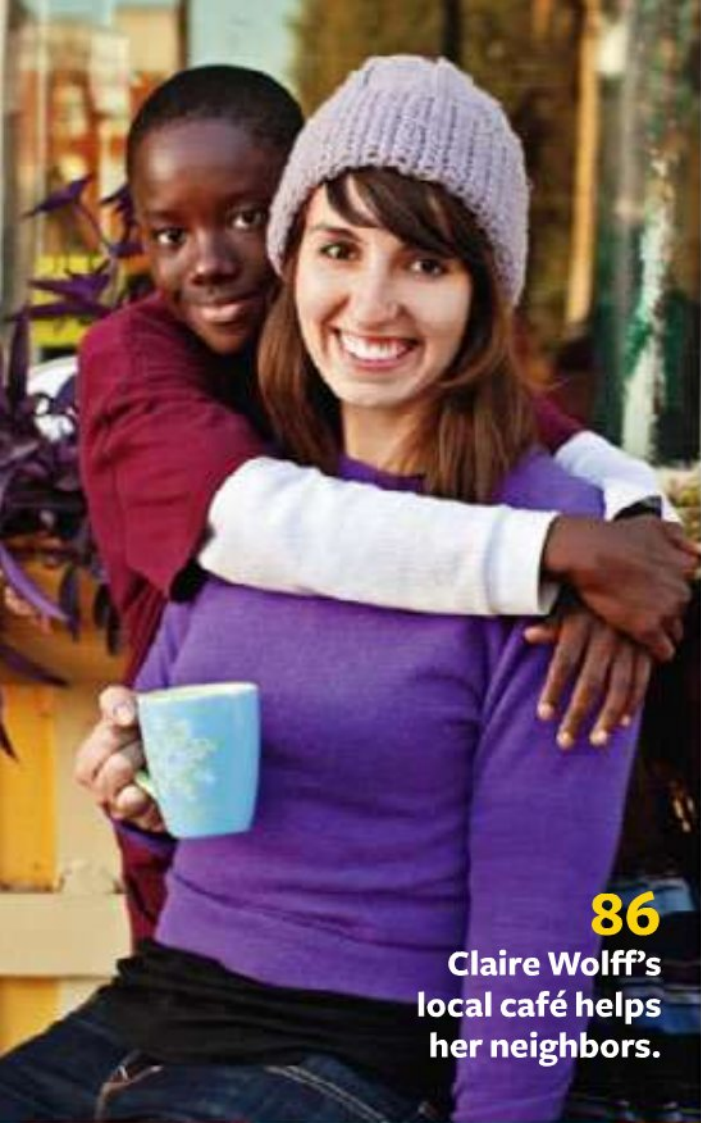
176 The Bottom Line on Happiness
CLAYTON M. CHRISTENSEN
How to use business skills to succeed at life—recommended by the *Harvard Business Review's* editor.

**Katie Spatz
rowed across
the Atlantic—
alone.**

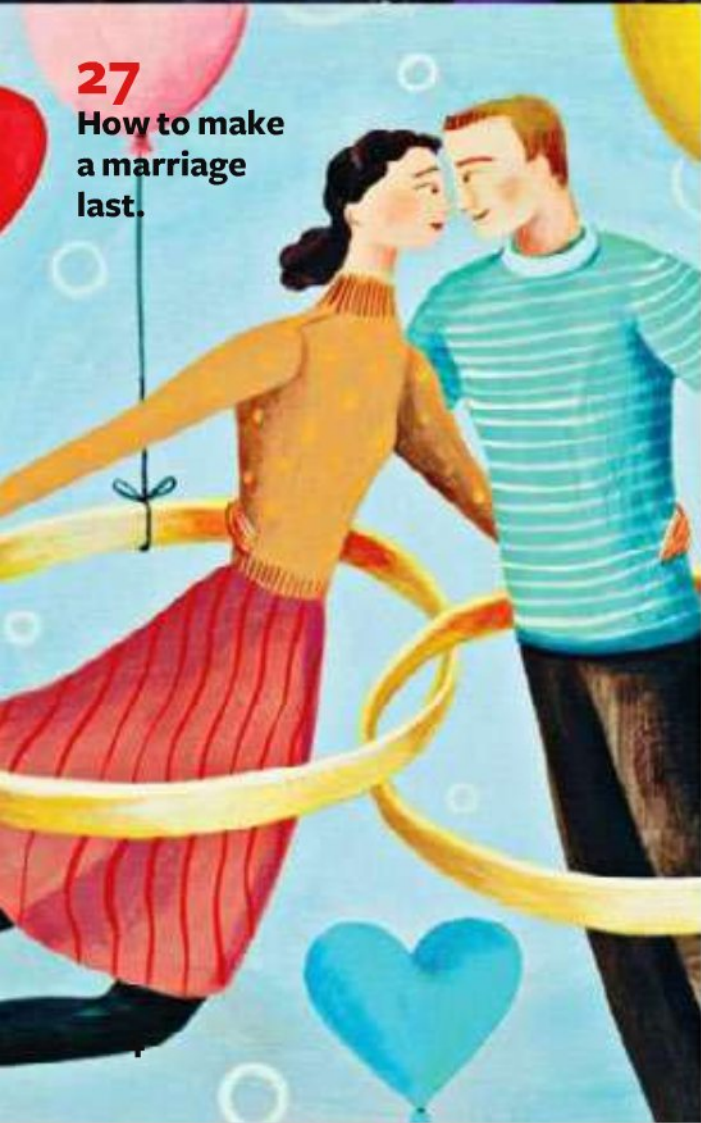
**136 The Best
Day of My Life**

AS TOLD TO LISA GOFF

Six people share their highs, their lows, and their turning points.



86
Claire Wolff's
local café helps
her neighbors.



27
How to make
a marriage
last.

Reader's Digest

T H E D I G E S T

- 19 Travel** The experts' off-season deals
- 27 Family** Keep your marriage happy, plus a secret handclasp for couples
- 41 Food** The world's most popular Valentine's Day dishes; how to cure garlic breath
- 47 Health** Fast fixes for winter woes; the dirty truth about hand-washing
- 64 Home** A bedbug battle plan; 13 things your letter carrier won't tell you
- 69 Work** How to nail a job interview; survive an elevator drop
- 81 Misc** Three reasons to be happier; catching up with CNN's Candy Crowley

D E P A R T M E N T S

- 6 Letter from the Editor**
- 11 React** Your letters
- 86 The Power of One** Hometown heroes from across the country
- 94 Laugh!** Our favorite jokes
- 100 Around the World with One Question**
Who do you tell your secrets to?
- 102 Ask Laskas** Commonsense advice
JEANNE MARIE LASKAS
- 104 @Work** Office laughs
- 135 Poetry** "Acts of Love" PAM REHM
- 183 Word Power** Test yourself
- 188 Life** Your funny true stories
- 192 Last Laugh**

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Letter from the Editor

Back in 1922, DeWitt and Lila Wallace dreamed up a brilliantly simple solution to information overload: Why not help people keep up with the news by curating and condensing the best stories in print?

What on earth would the Wallaces think today? There are now 8,500 magazines and newspapers vying for our attention, plus 2,300 TV channels, 200 million websites, and what feels like a billion funny cat videos. Add Facebook pages and Twitter feeds (Demi Moore's, Glenn Beck's, your long-lost cousin's), and it's no wonder I keep hearing people say, "Just give me the Reader's Digest Version ... please!"

Which is exactly what we aim to do. This issue represents a modern take on the idea that made *Reader's Digest* the most-read magazine on the planet. (We still are, in case you're wondering.) We've quadrupled the size of our popular Digest section and organized it by theme, so you can quickly find the information that matters to you. You'll get health tips, work-



place trends, parenting advice, savings strategies, and more, all selected from the most trustworthy sources. And because we can't possibly fit into these pages everything worth paying attention to, we're relaunching readersdigest.com as the Reader's Digest Version. Updated several times a day, it's designed to bring you the most useful information from the Web in one easy-to-navigate site.

We will continue to publish original stories most magazines overlook—stories about regular folks triumphing over tough odds and the let's-feel-good-about-America pieces that always seem to be in short supply. And we'll never get rid of humor! But now you'll find us in more places than ever, including on the iPad, where you can view extra features, videos, slide shows, and a Word Power game that cheers all your right answers.

Reader's Digest Version: We want to be wherever you are—and make your life simpler, and better, than ever. Please let me know what you think.

Write to me at peggy@readersdigest.com.

Peggy Northrop
Global Editor-in-Chief
Reader's Digest



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BEING a cat, Myles knows what he wants and isn't afraid to ask for it. And being a cat, he's hypnotically hard to resist.

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Pilots Sound Off

As a pilot for a major airline, I found most of “50 Secrets Your Pilot Won’t Tell You” to be accurate. The exception was the comment about regional airlines not being held to the same safety and training standards as the majors. This is grossly inaccurate. Both operate under the FAA Part 121 flight rules. Working for an international major carrier, I make five or six landings a month on long-haul flights. Regional pilots make at least that many landings in two days. Those who fly the majors may have a bit more flight time and life experience, but regional pilots are finely tuned and very sharp. *L. T., Seattle, Washington*

I retired from the Air Force with 20 years of flying experience and then spent the next 16 years flying with a regional airline. The training I received at the regional was the best and most comprehensive I ever had. *Robert L. Zobel, Jr., Navarre, Florida*

Correction: In “50 Secrets Your Pilot Won’t Tell You,” Patrick Smith was incorrectly quoted as saying, “Cabin air is recirculated because it helps reduce humidity.” Cabin air is recirculated, but not to reduce humidity.



Pilots are not simply glorified bus drivers; they’re highly skilled professionals in a very regulated industry. Nobody else in the transportation business is subject to biennial evaluations of their skills and abilities as well as their medical condition.

Rolland G. Fitch II, Summerville, South Carolina

Every month *Reader’s Digest* dutifully tells me things that my florist, pilot, doctor, nurse, flight attendant, mechanic, and waiter either won’t tell me or are afraid to tell me. And every month I feel worse about it. What I’ve learned from these articles is that service industry personnel detest me, wish I’d go away, and make fun of me behind my back. My doctor might accidentally kill me, my pilot is asleep at the controls, the flight attendants are staring at me in ways I wish they wouldn’t, and my waiter spits in my food. I

HOW DO YOU SHOW LOVE TO YOUR SPOUSE? ... THE READER'S DIGEST VERSION

We asked our Facebook followers how they say “I love you” with more than just words.

>> Chocolate chip cookies and a pat on the tush. It's lasted 40 years so far! *M. B.*, Rocky Mount, North Carolina

>> Accept everything about him, even if some things drive me crazy.

J. H., Lincoln, Nebraska

>> Be a good listener and appreciate her cooking. *N. K.*, United Arab Emirates

>> Praise him as a good husband and father (plus “special” trips to the bedroom, bathroom, or closet when he least expects it).

D. C., Clayton, North Carolina

>> I let him have the last serving of ice cream.

C. H., Howey-in-the-Hills, Florida

>> Grab her gently, and let the kissing do the talking. *S. P.*, Nilai, Malaysia

>> Love notes, massages, and letting him think he's in charge!

T. P., Jacksonville, Texas

>> I make sure the coffee is made every morning before he gets up.

C. S., Galatia, Illinois

>> Look straight into his eyes!

C. A., Orlu, Nigeria

>> Send her flowers when she least expects it. *L. V.*, Chennai, India

>> I make him food from scratch, with lots of love thrown in.

C. L., Orange, California

now know these folks generally think I'm a complaining, demanding, unsophisticated boor. Thanks for adding to my inferiority complex.

P. B., Salt Lake City, Utah

Fake Heroes

I am a veteran of the Vietnam era, but I would never allow anyone to think I served in Vietnam—because I did not. How can someone who lied about military service (Outrageous! “Tin Soldiers”) look in the mirror day after day without feeling guilty? And if lying is considered freedom of speech under the First Amendment, what absurdity will the Constitution protect next?

Christine Hummel, St. Ann, Missouri

Is nothing sacred? Men and women offer their lives to defend our freedoms, and now politicians and others are stealing their sacrifice and wrapping themselves in it. My father served 33 years, and he is buried in Arlington National Cemetery. He earned every inch of that site, and I would hate to think that some politician who fudged his service record might be buried next to him.

P. S. Pierce, Evansville, Indiana

General Excellence?

I enjoyed General Shelton's article (“Walking Proud”), but I wonder why this full-out effort of care is not given to all our servicemen and servicewomen. The general's accident was not even service-related (although his injury was compli-

cated by it). Too many of our military receive just the basics and have to fight for that. I'm sure they'd like a stay in the president's private hospital room too!

Barbara Gier, Prospect Heights, Illinois

It's Not Just Her

Why have Americans become a population of worrywarts? (Is It Just Me? "The Petrified Woman!") Let the kids get dirty. Nature will balance everything out.

Sheila R. Hendry, Waynesboro, Mississippi

Please, please, please make Lenore Skenazy a regular. Her spin on ridiculous fears made me realize that I no longer need to be afraid of developing back spasms by laughing myself to tears.

Sally Riley, Irvine, California

My fear that danger lurks around every corner melted away as I read "The Petrified Woman!" That is, until I turned to the Health section to learn

I'd better raise my HDL before cancer strikes, change my diet to prevent diabetes, sleep longer, get more vitamin D, and take the headphones off my kids before they go deaf. I kept looking for some relief—until I read "Act Fast! 7 Ailments That Can't Wait." I'd better get to the doctor now!

Brian Strull, Lake Oswego, Oregon

"Just Say No, Darlin'!"

Jeanne Marie Laskas is usually right on with her answers, but the one to Miffed about business e-mails that begin with "Hey, Darlin'!" falls short. This is sexual harassment and should not be tolerated. Miffed should ask the sender, by e-mail, to please stop the practice and address him or her by name. The next time the offense happens, Miffed should forward both e-mails to the human resources department and request that the offender be reprimanded. This is very poor business behavior.

Carol Youngs, Evansville, Indiana

Reader's Digest Goes Digital

I love getting *Reader's Digest* on my Kindle! I "inherited" mine from my wife, who had to have the latest version. I grew up with *Reader's Digest*.

My parents kept all the old issues, and I can remember going through stacks of them, always enjoying everything I read. Now that I have my Kindle, I can carry all my back issues with me to enjoy whenever I want. Keep up the good (digital) work.

Scott Brandeberry, Lapeer, Michigan



Editor's Note: Thanks! In addition to being on Amazon's Kindle, *Reader's Digest* is now available on Barnes & Noble's Nook and the Apple iPad.

PRISTIQ® (desvenlafaxine) is a prescription medication approved for the treatment of major depressive disorder in adults.
Important Safety Information About PRISTIQ®

Suicidality and Antidepressant Drugs
Antidepressants increased the risk compared to placebo of suicidal thinking and behavior (suicidality) in children, teens, and young adults. Depression and certain other psychiatric disorders are themselves associated with increases in the risk of suicide. Patients of all ages who are started on antidepressant therapy or when the dose is changed should be monitored appropriately and observed closely for clinical worsening, suicidality, or unusual changes in behavior such as becoming agitated, irritable, hostile, aggressive, impulsive, or restless. Should these occur, report them to a doctor. PRISTIQ is not approved for use in children under 18.

People taking MAOIs should not take PRISTIQ. Tell your healthcare professional about all prescription and over-the-counter medications you are taking or plan to take, including: medicines to treat migraines or psychiatric disorders, to avoid a potentially life-threatening condition; and aspirin, NSAID pain relievers, or blood thinners because they may increase the risk of bleeding. PRISTIQ may cause or make some conditions worse, so tell your healthcare

professional about all your medical conditions, including:

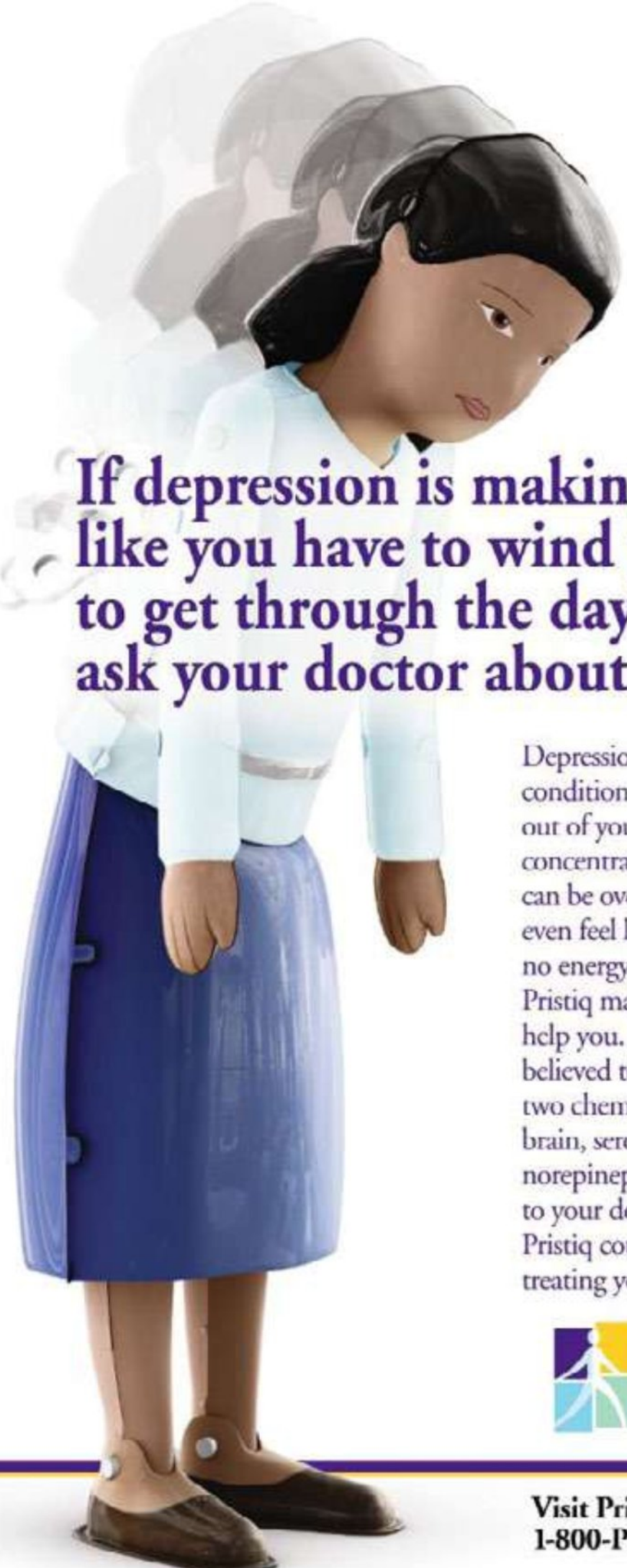
- High blood pressure, which should be controlled before you start taking PRISTIQ and monitored regularly
- Heart problems, high cholesterol or triglyceride levels, or a history of stroke, glaucoma or increased eye pressure, kidney or liver problems, or have low sodium levels in your blood
- Mania, bipolar disorder, or seizures or convulsions
- If nursing, pregnant, or plan to become pregnant

Discontinuation symptoms may occur when stopping or reducing PRISTIQ, so talk to your healthcare professional before stopping or changing your dose of PRISTIQ. Until you see how PRISTIQ affects you, be careful driving a car or operating machinery. Avoid drinking alcohol while taking PRISTIQ. Side effects when taking PRISTIQ 50 mg may include nausea, dizziness, sweating, constipation, and decreased appetite.

Please see Brief Summary of Prescribing Information on next page.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.





If depression is making you feel like you have to wind yourself up to get through the day, ask your doctor about Pristiq.

Depression is a serious medical condition that can take so much out of you. The sadness, trouble concentrating, and loss of interest can be overwhelming. You may even feel like you have no energy to keep going. Pristiq may be able to help you. Pristiq is believed to work on two chemicals in the brain, serotonin and norepinephrine. Talk to your doctor. Ask if Pristiq could be a key in treating your depression.



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Read the Medication Guide that comes with you or your family member's antidepressant medicine. Talk to your, or your family member's, healthcare provider about:

- all risks and benefits of treatment with antidepressant medicines
- all treatment choices for depression or other serious mental illness

What is the most important information I should know about antidepressant medicines, depression and other serious mental illnesses, and suicidal thoughts or actions?

1. Antidepressant medicines may increase suicidal thoughts or actions in some children, teenagers, and young adults within the first few months of treatment.

2. Depression and other serious mental illnesses are the most important causes of suicidal thoughts and actions. Some people may have a particularly high risk of having suicidal thoughts or actions. These include people who have (or have a family history of) bipolar illness (also called manic-depressive illness) or suicidal thoughts or actions.

3. How can I watch for and try to prevent suicidal thoughts and actions in myself or a family member?

- Pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts, or feelings. This is very important when an antidepressant medicine is started or when the dose is changed.
- Call the healthcare provider right away to report new or sudden changes in mood, behavior, thoughts, or feelings.
- Keep all follow-up visits with the healthcare provider as scheduled. Call the healthcare provider between visits as needed, especially if you have concerns about symptoms.

Call a healthcare provider right away if you or your family member has any of the following symptoms, especially if they are new, worse, or worry you:

- thoughts about suicide or dying
- trouble sleeping (insomnia)
- attempts to commit suicide
- new or worse irritability
- new or worse depression
- acting aggressive, being angry or violent
- new or worse anxiety
- acting on dangerous impulses
- feeling very agitated or restless
- an extreme increase in activity and talking (mania)
- panic attacks
- other unusual changes in behavior or mood

What else do I need to know about antidepressant medicines?

- **Never stop an antidepressant medicine without first talking to a healthcare provider.** Stopping an antidepressant medicine suddenly can cause other symptoms.
- **Antidepressants are medicines used to treat depression and other illnesses.** It is important to discuss all the risks of treating depression and also the risks of not treating it. Patients and their families or other caregivers should discuss all treatment choices with the healthcare provider, not just the use of antidepressants.
- **Antidepressant medicines have other side effects.** Talk to the healthcare provider about the side effects of the medicine prescribed for you or your family member.
- **Antidepressant medicines can interact with other medicines.** Know all of the medicines that you or your family member takes. Keep a list of all medicines to show the healthcare provider. Do not start new medicines without first checking with your healthcare provider.
- **Not all antidepressant medicines prescribed for children are FDA approved for use in children.** Talk to your child's healthcare provider for more information.

Important Information about Pristiq

Read the patient information that comes with Pristiq before you take Pristiq and each time you refill your prescription. There may be new information. If you have questions, ask your healthcare provider. This

information does not take the place of talking with your healthcare provider about your medical condition or treatment.

What is Pristiq?

- Pristiq is a prescription medicine used to treat depression. Pristiq belongs to a class of medicines known as SNRIs (or serotonin-norepinephrine reuptake inhibitors).
- Pristiq is not approved for use in children and adolescents.

Who should not take Pristiq?

Do not take Pristiq if you:

- are allergic to desvenlafaxine, venlafaxine or any of the ingredients in Pristiq.
- currently take, or have taken within the last 14 days, any medicine known as an MAOI. Taking an MAOI with certain other medicines, including Pristiq, can cause serious or even life-threatening side effects. Also, you must wait at least 7 days after you stop taking Pristiq before you take any MAOI.

What should I tell my healthcare provider before taking Pristiq?

Tell your healthcare provider about all your medical conditions, including if you:

- have high blood pressure
- have heart problems
- have high cholesterol or high triglycerides
- have a history of stroke
- have glaucoma
- have kidney problems
- have liver problems
- have or had bleeding problems
- have or had seizures or convulsions
- have mania or bipolar disorder
- have low sodium levels in your blood
- are pregnant or plan to become pregnant. It is not known if Pristiq will harm your unborn baby.
- are breastfeeding. Pristiq can pass into your breast milk and may harm your baby. Talk with your healthcare provider about the best way to feed your baby if you take Pristiq.
- **Serotonin syndrome or neuroleptic malignant syndrome (NMS)-like reactions:**

Rare, but potentially life-threatening, conditions called serotonin syndrome or Neuroleptic Malignant Syndrome (NMS)-like reactions can happen when medicines such as Pristiq are taken with certain other medicines.

Based on PI W10529C017
PQP00320A



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Serotonin syndrome or NMS-like reactions can cause serious changes in how your brain, muscles, heart and blood vessels, and digestive system work.

Especially tell your healthcare provider if you take the following:

- medicines to treat migraine headaches known as triptans
- St. John's Wort
- MAOIs (including linezolid, an antibiotic)
- tryptophan supplements
- sibutramine
- tramadol
- medicines used to treat mood, anxiety, psychotic, or thought disorders, including tricyclics, lithium, selective serotonin reuptake inhibitors (SSRIs), or serotonin norepinephrine reuptake inhibitors (SNRIs), antipsychotic drugs, or other dopamine antagonists, such as metoclopramide

Ask your healthcare provider if you are not sure whether you are taking any of these medicines.

Before you take Pristiq with any of these medicines, talk to your healthcare provider about serotonin syndrome. See "What are the possible side effects of Pristiq?"

Pristiq contains the medicine desvenlafaxine. Do not take Pristiq with other medicines containing venlafaxine or desvenlafaxine.

Switching from other antidepressants

Side effects from discontinuing antidepressant medication have occurred when patients switched from other antidepressants, including venlafaxine, to Pristiq. Your doctor may gradually reduce the dose of your initial antidepressant medication to help reduce these side effects.

What should I avoid while taking Pristiq?

- Do not drive a car or operate machinery until you know how Pristiq affects you.
- Avoid drinking alcohol while taking Pristiq.

What are the possible side effects of Pristiq?

Pristiq can cause serious side effects, including:

- See the beginning of this page.
- Serotonin syndrome or neuroleptic malignant syndrome (NMS)-like reactions. See "What should I tell my healthcare provider before taking Pristiq?"

Get medical help right away if you think that you have these syndromes. Signs and symptoms of these syndromes may include one or more of the following:

- restlessness
- hallucinations (seeing and hearing things that are not real)
- coma
- nausea
- vomiting
- confusion
- increase in blood pressure
- diarrhea
- loss of coordination
- fast heart beat
- increased body temperature
- muscle stiffness

Pristiq may also cause other serious side effects including:

• **New or worsened high blood pressure (hypertension).**

Your healthcare provider should monitor your blood pressure before and while you are taking Pristiq. If you have high blood pressure, it should be controlled before you start taking Pristiq.

• **Abnormal bleeding or bruising.** Pristiq and other SNRIs/SSRIs may cause you to have an increased chance of bleeding. Taking aspirin, NSAIDs (non-steroidal anti-inflammatory drugs), or blood thinners may add to this risk. Tell your healthcare provider right away about any unusual bleeding or bruising.

- **Glaucoma (increased eye pressure)**
- **Increased cholesterol and triglyceride levels in your blood**
- **Symptoms when stopping Pristiq (discontinuation symptoms).**

Side effects may occur when stopping Pristiq (discontinuation symptoms), especially when therapy is stopped suddenly. Your healthcare provider may want to decrease your dose slowly to help avoid side effects. Some of these side effects may include:

- dizziness
- irritability
- abnormal dreams
- diarrhea
- nausea
- sleeping problems (insomnia)
- tiredness
- sweating
- headache

• **Seizures (convulsions)**

• **Low sodium levels in your blood.** Symptoms of this may include headache, difficulty concentrating,

memory changes, confusion, weakness, and unsteadiness on your feet. In severe or more sudden cases, symptoms can include hallucinations (seeing or hearing things that are not real), fainting, seizures and coma. If not treated, severe low sodium levels could be fatal.

• **Allergic reactions.** Some reactions can be severe such as swelling beneath the skin (e.g., throat, face, hands). Contact your healthcare provider if you think you have any of these side effects.

Common side effects with Pristiq include:

- nausea
- insomnia
- diarrhea
- decreased sex drive
- headache
- constipation
- vomiting
- delayed orgasm and ejaculation
- dry mouth
- anxiety
- loss of appetite
- tremor
- sweating
- dizziness
- sleepiness
- dilated pupils
- tiredness

These are not all the possible side effects of Pristiq. Tell your healthcare provider about any side effect that bothers you or does not go away. Call your doctor for medical advice about side effects. For more information on these and other side effects associated with Pristiq, talk to your healthcare provider, visit our web site at www.pristiq.com or call our toll-free number 1-888-Pristiq.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Contact Information

Please visit our web site at www.pristiq.com, or call our toll-free number 1-888-Pristiq to receive more information. This product's label may have been updated. For current package insert and further product information, please visit www.pfizer.com or call our medical communications department toll-free at 1-800-934-5556.

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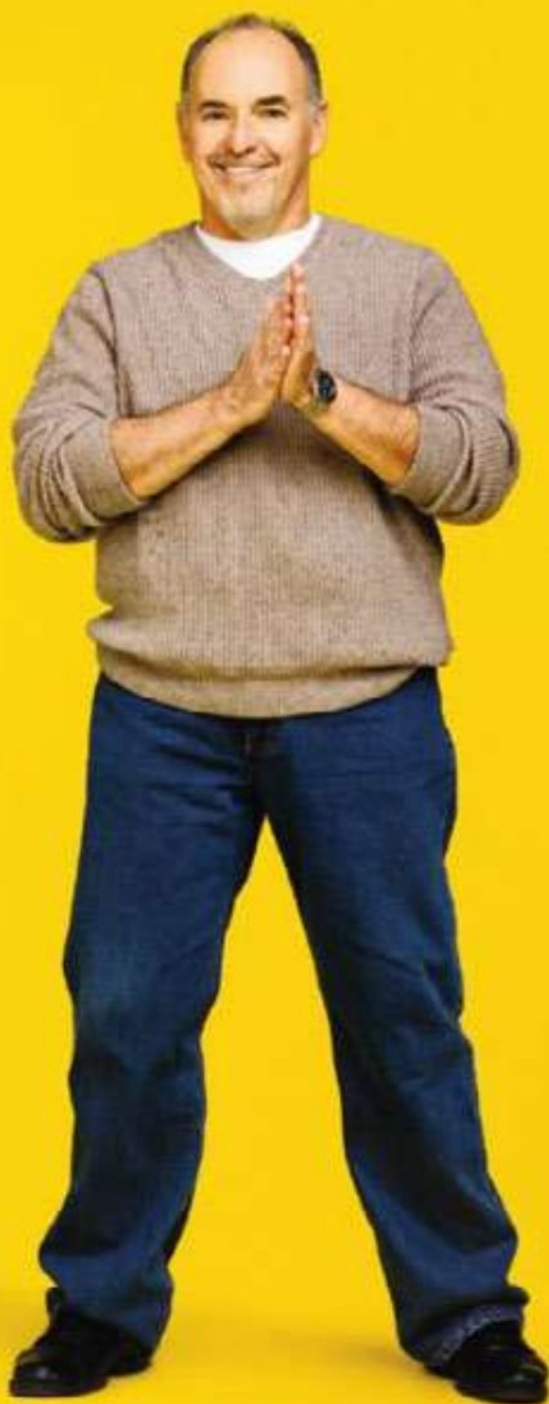




I am ProHeart.com

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Roddy thought he was invincible. Then he had a heart attack. Now he's following his doctor's advice to take 81mg Bayer Aspirin. Aspirin is not appropriate for everyone, so be sure to talk to your doctor before you begin an aspirin regimen.

1. Marrying Suzie
2. Staying healthy
3. Spending more time with my daughter
4. Visiting Europe
5. Getting back in shape
6. Memories of Chris
7. Go skydiving
8. Swimming with dolphins
9. Want to open a gym
10. Want to meet the President
11. Making people smile
12. Whirlpools
13. Massages
14. Chocolate
15. Warm sheets in winter
16. No traffic
17. Fishing
18. Fresh-cut grass
19. Walking the dog
20. Making love
21. Making love again
22. Watching clouds
23. My job
24. Working out
25. The beach
26. Watches
27. Sleeping more
28. Air conditioning in summer
29. Looking good in a bathing suit
30. Whale watching
31. Learning a new language
32. Want to open a restaurant
33. Go to Brazil
34. Theater
35. Foreign cars
36. My girlfriend's cooking
37. Movies
38. Winning the lottery
39. Getting up before everyone else
40. Finding buried treasure
41. Rainbows
42. Shrimp
43. Want to drive across the country
44. Buying a bike
45. Getting a haircut
46. Laughing
47. Time with my family
48. Singing
49. Long drives
50. Yard work
51. Jeans
52. Long Island
53. Want to adopt a golden retriever
54. Dumplings
55. Scuba diving
56. Any beach in the Bahamas
57. Swimming
58. Flying a small plane
59. Buying a house in Montauk
60. A nice overcoat
61. Going to Chinatown
62. I want to protect my loved ones
63. Pistachio ice cream
64. Seeing my daughter on Broadway
65. Long walks
66. Boats
67. Growing my hair back
68. Time with Mom
69. Going to Ireland
70. Never feeling that helpless again
71. Cats
72. Holding my daughter
73. Watching TV
74. Helping people
75. Shopping with Suzie
76. Seeing the U.S.A.
77. Dogs
78. Going dancing
79. Time with my family
80. Lobster sauce
81. Old sweatshirts



The Digest

Simply put

Travel
page 20

Family
page 27

Food
page 41

Health
page 47

Home
page 64

Work
page 69

Misc
page 81

CANYONLANDS NATIONAL PARK

Consider zigging when everybody else is zagging—a basic principle of off-season travel (see next page). Utah's Canyonlands National Park, for instance, may be daunting to some in winter, but not to savings.com CEO Loren Bendele: "In the daytime it's 40 to 50 degrees, and at night it gets really cold. But we dressed appropriately and brought the right gear. It was absolutely amazing and seriously humbling."

ALAN MAJCHROWICZ



Lake Tahoe

Bring On the Off-Season

Three travel experts reveal how the wrong time can be the right time for the perfect vacation

BY LAUREN J. GNIAZDOWSKI

THE EXPERTS

- **Loren Bendele**, CEO, savings.com
- **Seth Kugel**, Frugal Traveler blogger, *New York Times*
- **Nina Willdorf**, editor in chief, *Budget Travel*

WHERE LOREN BENDELE GOES

- **Nicaragua during the rainy season (May through November).** “You get the same beaches as in Costa Rica—

same water, same climate, and for a lot less money. When you start researching Nicaragua, you’ll find ‘Don’t go during the rainy season, because it might rain the whole time you’re there.’ But the locals all say it’s their favorite time of year because everything is green and lush, fresh and clear. During the dry season, it’s hot, it’s dry; there’s dust and dirt everywhere. Do the research—

(TAHOE) LYNN FAGERLIE/GETTY IMAGES

Principles of Off-Season Travel

Off-season doesn’t mean the wrong season, but it does mean deals and discounts.

Bendele: “It doesn’t mean you’re going when no one wants to go or that you won’t be able to experience the best of that area. Some of my favorite travel experiences have been during the off-season.”

Kugel: “Huge tourist destinations are the best bet for sharp discounts in the off-season because these economies are completely dependent on tourist income as opposed to business-travel income.”

You’ll save more on hotels than airfare.

Bendele: “If hotels can fill an otherwise empty room

for 25 or 50 percent of what they normally get, that money is just straight to their profit. Airlines just won’t fly as many trips.”

Kugel: “By far the nicest hotels I’ve stayed in for very small amounts of money have been major chain hotels, like Marriott, which I get on priceline.com. The best deals in



Cayman Islands



London

(CAYMAN ISLANDS) CORBIS;
(LONDON) JOHN LAMB/GETTY IMAGES

don't stop at the first hurdle."

● **Tuscany in winter.** "It was a little colder, but we owned it. No crowds, no traffic, a lot less expensive."

● **Canyonlands National Park in winter.** "A good friend said they were going in December, the coldest time of the year, because they would be the only people there. And that's what we did. We were the only ones there for five days. You've never

experienced such silence in your life. It's ominous and weird not to hear wind or traffic. How would that have felt if I were hearing footsteps behind me, if I were seeing people off in the distance?"

● **Vail, Colorado, in summer.** "Everyone says that people move there for the ski seasons and never leave because of the summers. In the winter it's all about skiing and >>

these places are during the off-season."

Do your homework.

Bendele: "Get on a site like tripadvisor.com, talk to friends, and find other communities. Go to the local chamber of commerce or local travel bureau's website, and get on the phone with people who work there."

Willdorf: "I'll find a specific deal online or something

through the hotel's own social-media marketing efforts or through a discount club like jetsetter.com. Then I call the hotel and try to book it directly, and I say, 'I found this deal online, but I'd rather book it through you.' You can talk about what type of room you want, and they'll have all your information when you get there. Sometimes they'll offer you the same

rate as online, and sometimes they won't. You can go back and book the one you found online."

Know when school's out.

Kugel: "Not that children aren't delightful, but I've been in places where there are huge groups of schoolkids running around making it a much less pleasant experience than it would otherwise have been." >>

snowboarding. In the summer it's all about hiking, rafting, rock climbing, great live music concerts, just hanging out, camping, swimming, fishing, fly-fishing. As far as value, ski towns in the summertime are phenomenal."

● **South/Southwest in winter.** "I love the South during February and March: Austin, New Orleans, Phoenix, Las Vegas. You just have to make sure there's nothing so big going on that will make it either too expensive or too crowded."

WHERE SETH KUGEL GOES

● **Barbados.** "Bigger islands have the better deals, and smaller islands have more luxury. Barbados struck me as a very nice compromise, right in the middle. It's a very manageable island. You have your beach areas and then vast expanses if you want to get away and go hiking. The island also offers a great bus system."

Remember business travelers.

Kugel: "Cities and major business centers are not as attractive for people looking for off-season deals, because there's no off-season for business travelers. It's hard to imagine a season in New York City that's the off-season."

Use social networks.

Bendele: "Everybody knows somebody who

knows somebody who's in that area or was in that area or is from that area. Put up a Facebook post that says, 'I've been thinking of going to Seattle. Is there anyone from Seattle or who knows someone there?'"

Negotiate.

Kugel: "I called a place in Barbados. It was the off-season, and I said, 'Is that your cheapest room? What

if I stayed a few extra days?' She said, 'Well, I can offer you the rate for Caribbean citizens.' *Caricom* is the term for the Caribbean community, and there's a rate for native Caribbeans. It was really easy for her, and it would never have come up online. Only by my calling the hotel did she think of saying, 'Oh, we can slip you in under this *Caricom* rate.'" ■



New Orleans

● **London over Paris in winter.** "In the summer, you'll be sharing the streets with more tourists than Parisians. You want to go to Paris when there's green on the trees and flowers in the parks. London may not be as much the case—it's maybe more of an indoor cultural city."

WHERE NINA WILLDORF GOES

● **Cayman Islands in summer.** "I had to go down to the Cayman Islands for one night this summer. It was 85 degrees, slight breeze, just perfect. We had the pool to ourselves. There was always a stool at the beach bar."

The people working there were eager to help because they had time.”

● **Europe in winter.** “I would consider Old World cities like Paris, Amsterdam, and Berlin. Hotel prices are much lower, and most activities would be indoors anyway.”

● **Lake Tahoe in summer.** “I’ve spent time in the Tahoe area in California in summer, which is just gorgeous. Ski resorts have a lot of deals to attract travelers in the off-season.”

● **ABC islands in summer (or even hurricane season).** “I would suggest the ABC islands—Aruba, Bonaire, and Curaçao—because they aren’t on the typical hurricane route.”

● **Punta Cana anytime.** “The average high in January is 81. In August, it’s 87. Not a big temperature difference, but you’ll see a huge savings.”

● **Cool small towns in America.** “You’re going to meet the locals and discover a relaxing way to experience the best of America.”

WHERE TO START

● **Bendele’s resources:** savings.com, tripadvisor.com, Lonely Planet and Fodor’s guidebooks, Facebook

● **What savings.com can offer:** “We’ve got our Ask, Answer & Save feature. You can log on there in the travel section and write, ‘What’s >>

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the best time of year to go to the Grand Canyon?’ You’ll get an answer from one of our travel experts, and you can start a dialogue.”

● **Kugel’s resources:** Frugal Traveler blog on nytimes.com, his Twitter feed (@frugaltraveler), hotwire.com, Frommer’s on nytimes.com, intimate hotelsbarbados.com

● **What the Frugal Traveler blog can offer:** “I try to show readers how to save money, but it’s also about getting away from hotels and restaurants that cater to tourists and getting into the real spirit of the places I visit.”

● **Willdorf’s resources:** budgettravel.com, orbitz.com, expedia.com, kayak.com, travelocity.com, jetsetter.com, luxurylink.com, familygetaways.com, cruisecritic.com

● **What budgettravel.com can offer:** “We have deals, many of them exclusive, with discounts when you use our name. We scour the world for the best deals. Many are off-season.” ■



TIME-SAVER

6 Sites for Simpler Travel

Amanda Schupak of *Popular Science* chooses a traveler’s best tech helpers:

1) Viator.com: A list of packages in 450 destinations—just type in an activity you’re interested in

2) Budgetyourtrip.com:

Reports from travelers on what they spent in more than 80 countries so you can anticipate your own expenses

3) Electricaloutlet

.org: Electrical specs from American Samoa to Zambia, with pictures of plugs and sockets to help you fit in, literally

4) Translate.google.com: Your personal Web linguist

5) Foodbycountry.com: The culinary habits in 70 different countries

6) Globalgourmet.com/

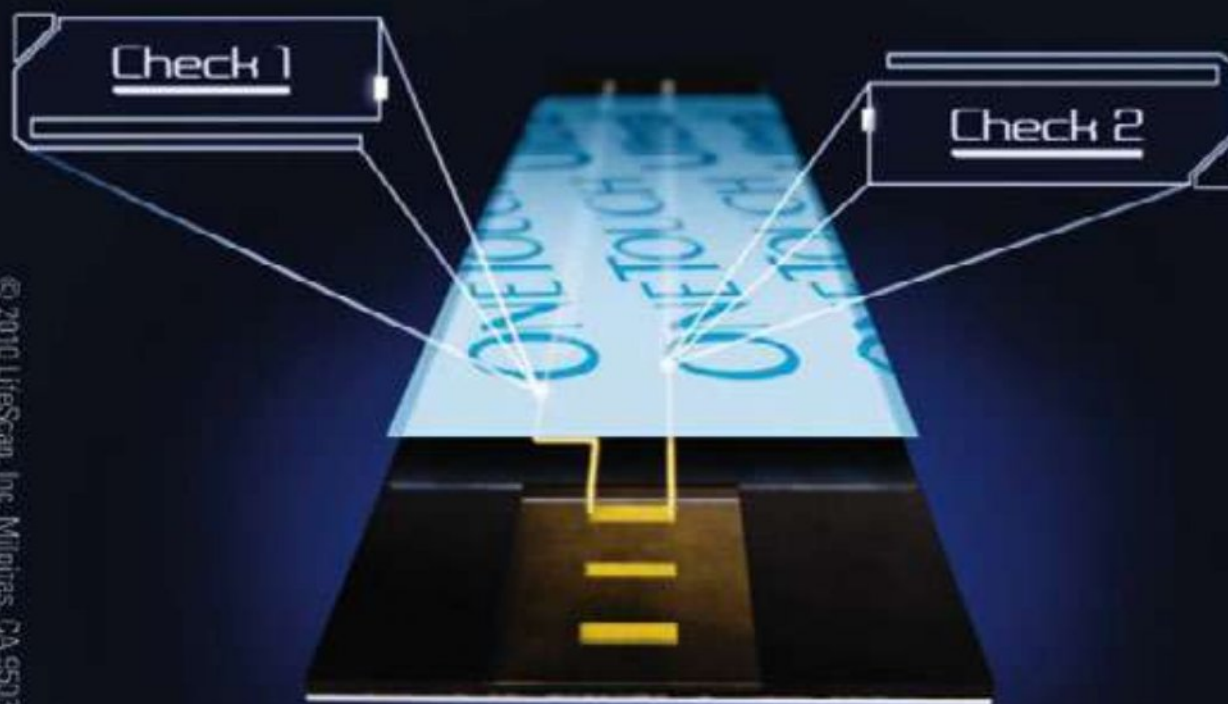
destinations: The dishes you’re likely to see on the menu—a sort of taste-bud tutorial

NOTABLE QUOTE

“When regular folks travel abroad, they represent both themselves and the collective American identity. Must we continue to be perceived as the most poorly dressed of all tourists?”

Robin Givhan, fashion critic and style writer, *Washington Post*

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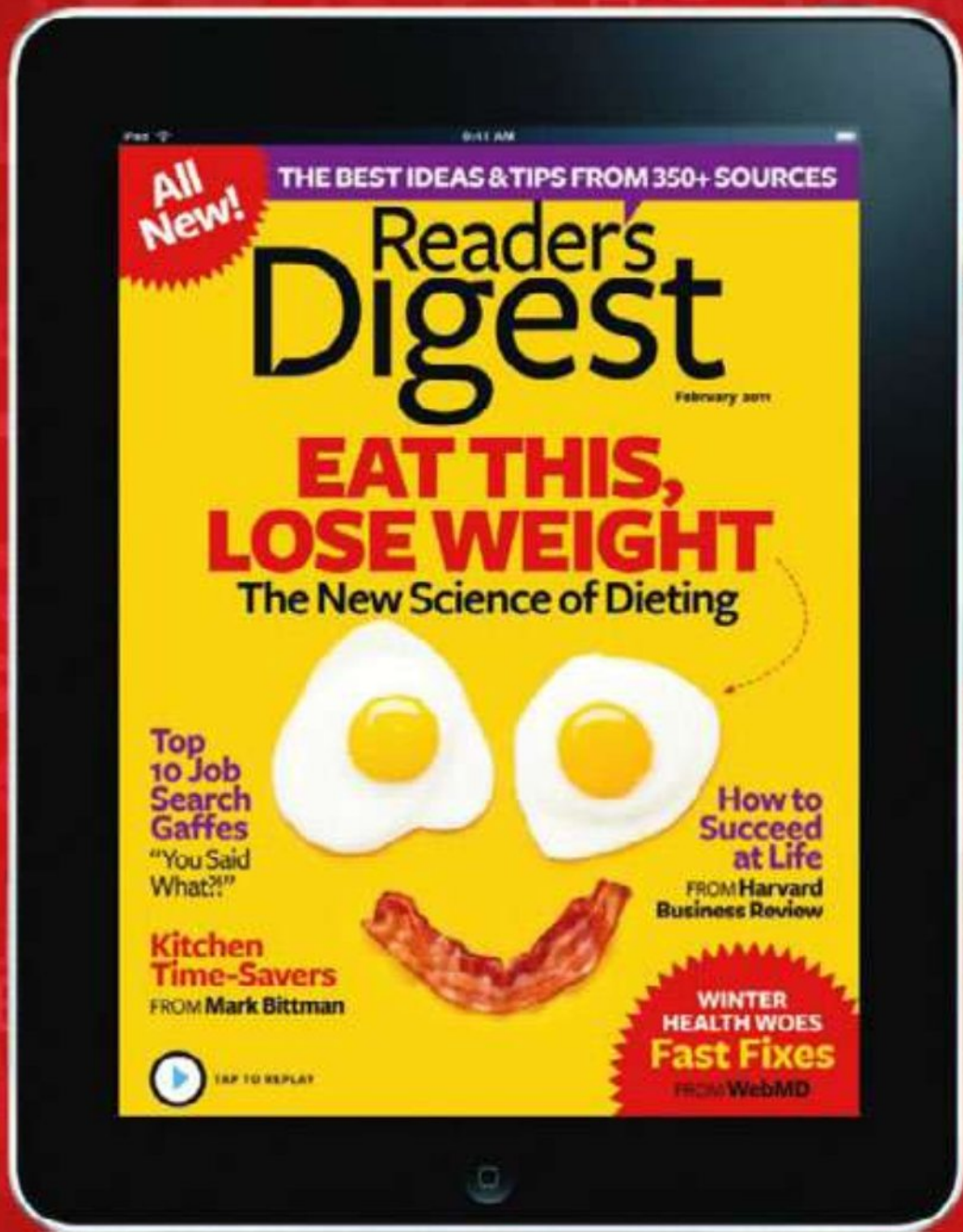
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How to Keep Your Marriage Happy

BY TARA PARKER-POPE

● ADAPTED FROM *For Better: The Science of a Good Marriage* (Dutton)



Can you spot a good marriage? I was pretty sure I could, starting with my own. My husband and I rarely argued, we had similar careers, and we shared common interests. So nobody was more surprised than we were when our 17-year marriage ended in divorce. It turns out I had been judging my marriage by the wrong standards—as most of us do. In one famous study, researchers asked therapists, married

couples, and others to watch videotaped conversations of ten couples and try to identify the relationships that had broken up. Even the therapists guessed wrong half the time.

Luckily, scientists have identified some simple but powerful indicators that can help you recognize marital strife long before your relationship hits the skids. For instance, a couple go hiking on their first date. They marry, and years later,

the wife tells this story: “We got terribly lost that day. It took us hours to find our way back, but we laughed about how neither of us had a good sense of direction. After that, we knew not to plan another hiking trip!” Another wife might tell it a different way: “He lost the map, and it took hours to find our way back. After that, I never wanted to go hiking again.” The keeper marriage? The one in which the positive >>

is accentuated and the problems laughed off.

Research shows that it's not what you say but how you say it: Your emphasis will correctly predict the success or failure of your marriage about 90 percent of the time. To size up your relationship, ask yourself these questions. Do you:

AVOID ARGUMENTS?

Studies show it's a mistake to judge a relation-

ship by the amount of time you argue, especially early on. When I was first married, I felt lucky that my husband and I rarely fought. A

Eye rolling, even when accompanied by a smile, indicates contempt.

University of Washington study of newlywed couples appeared to confirm my belief: It showed that couples

who argued relatively little were happier than combative ones. When the same couples were checked three years later, however, those

with an early history of bickering were more likely to have found stability in their marriages, whereas couples who prided themselves on their equanimity were in troubled relationships or already divorced. Of course, violence or verbal abuse is never acceptable, but the garden-variety marital spat? It's actually good for you!

ROLL YOUR EYES?

This seemingly harmless gesture is a clear sign of marital discord. The same researchers at the University of Washington found that eye rolling, even when accompanied by a laugh or smile, indicates some degree >>

I Dos and Don'ts

For a closer connection, says Parker-Pope:

▶ **TOAST SUCCESS** Good news can be as challenging as problems, say researchers. How do you react to your partner's success: a smile and a pat? Try champagne and chocolates.



▶ **TALK ABOUT SEX** A recent study showed that many couples want each other to be more direct in the bedroom but are too shy to ask.

Go ahead: Both of you write down five things you'd like your spouse to say or do during sex. Then compare your answers.

▶ **FIGHT RIGHT** Sometimes the difference between a good fight and a bad one is in how it starts. Think of it this way: Gripes ("I wish we had sex more often") are more welcome than snipes ("You never want to have sex"). Feel free to use that one.

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AFTER

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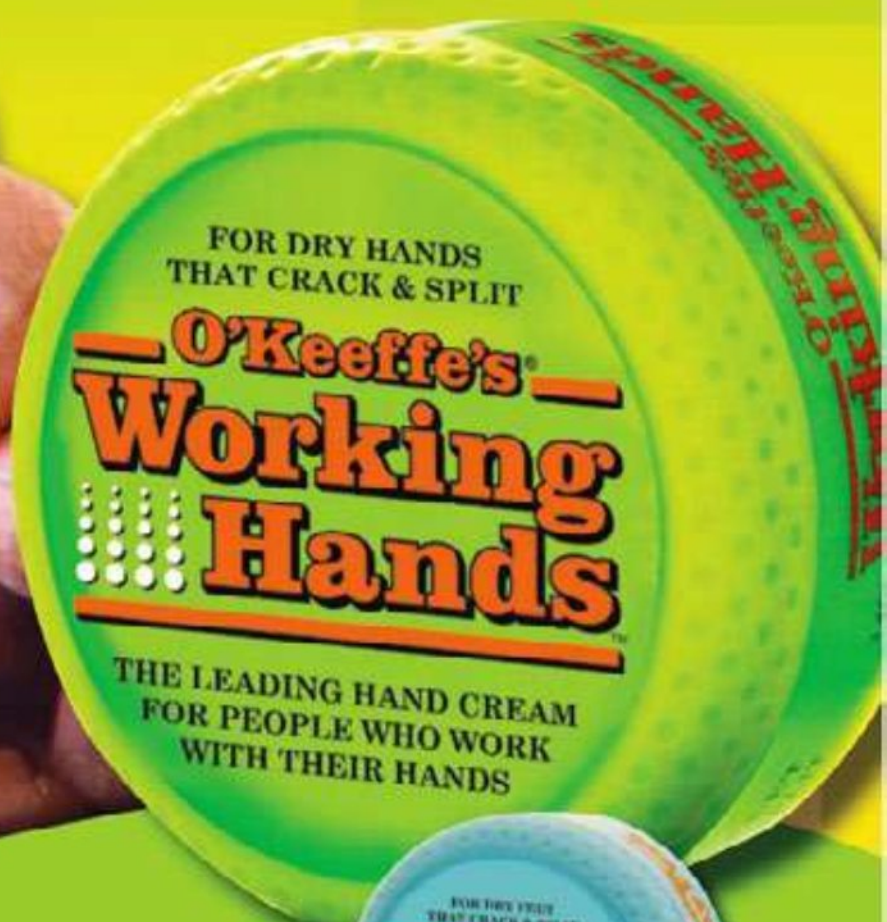
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of contempt—poison to a relationship. “This kind of sarcastic gesture doesn’t clearly state an objection, which makes it difficult for the other person to respond,” says Janice Kiecolt-Glaser at the Ohio State University College of Medicine. “The obvious first step is to stop the behavior. But the second is to explore the reasons behind it.”

DUCK DECISIONS?

I often deferred to my husband when it came to making weekend or vacation plans. Later I realized our social life didn’t reflect my favorite activities—a relationship red flag. Psychologist Howard Markman, a professor at the University of Denver, agrees. It’s risky for your relationship when one of you controls the social agenda, he says. ■

NOTABLE QUOTE

“In 19th-century Japan and China, “talks too much” was one of seven reasons for which a man could divorce his wife.

Source: *The Art of Marriage: A Guide to Living Life as Two* by Catherine Blyth

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LIFE LESSON

Real Women Read Maps

Psychologist Marcia Reynolds writes about gender issues, and she's recently changed her mind about a lot of things. Her piece "Stop Praising the Differences in Men and Women" is adapted from the *Huffington Post*.

I used to think: Women change the subject more frequently than men do, circling back to the original point after a while.

Now I get it: My companion does this far more than I do.



I used to think: Women are more collaborative and less commanding than men.

Now I get it: The male coaches I work with are sometimes more team-oriented than the women on the job.

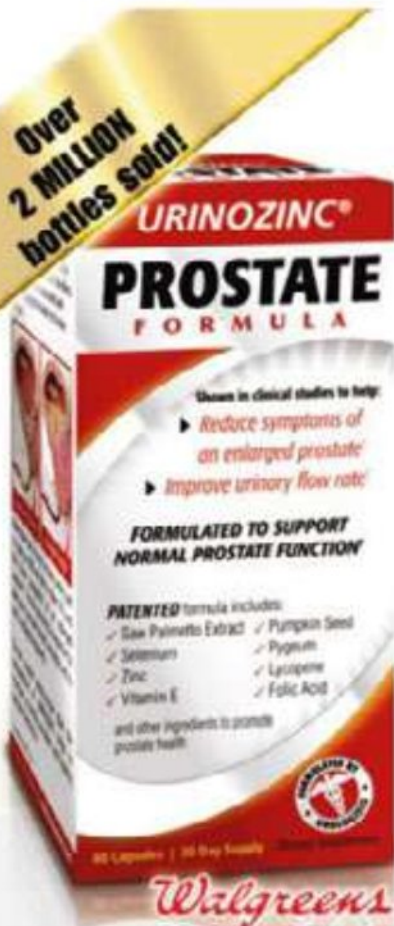
I used to think: Women multitask, and men focus.

Now I get it: We all multitask, and women often home in on a subject with intensity.

So now I suggest we:

- ▶ Stop generalizing about which gender does something better.
- ▶ Start acknowledging it's about individuals, not type.
- ▶ Quit praising our differences, and honor how the best of us, men and women, are more powerful together.

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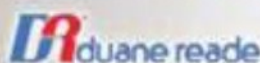
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IN THEIR WORDS

Comedy Couple

In the 57 years they've been together, comedy team Jerry Stiller and Anne Meara have learned that a quick comeback can fuel a happy marriage.

STILLER: I don't know if we knew [our marriage] could last. But if you run into roadblocks, you can either abandon ship or see if you get through it. If you do, you have a little more wisdom.

MEARA: You come off so sensitive. If you had talked like that when we were first married, we wouldn't have had any fights.

STILLER: Remember the time you left me?

MEARA: I can't remember all the times I've left you.

STILLER: Anne says, "I'm getting out of here. I've had enough."

MEARA: I packed a suitcase and went to my friend Dolly's place.

STILLER: No, I took you on the subway.

MEARA: All right, you took me.

STILLER: I just wanted to make sure nothing happened to you. You were still my comedy partner. Anyway, we got to the building, and I said, "Let me go upstairs with you."

MEARA: He clung to me like an infectious disease.

STILLER: Dolly says, "What are you doing here at two in the morning?" I said, "She's breaking up with me, and I just wanted to bring her over." Well, by five in the morning, we were together again.

IPAD EXTRA To watch laugh-out-loud video of this duo, download the *Reader's Digest* magazine app from the iTunes store.



STRATEGY

HOLD TIGHT

BY JANCEE DUNN

● FROM *Real Simple*

Call this the *Reader's Digest* Version of all the marriage advice in this section:

My folks have been married for 47 years. One of my father's rules for a happy marriage is that if a nasty argument threatens to erupt, hold hands while you hash it out. You'll feel incredibly goofy doing this (and your hand may sweat a little), but here's the thing: It works.

Recently my messy husband, Tom, forgot to pay a stash of bills that was buried under a pile of clutter. I was in a rage. But when I held his hand as we worked it out, my blood pressure immediately dropped. It's impossible to scream at someone who is sitting right next to you, meeting your gaze, and holding your hand. It just is.

(HANDS) CORBIS



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Important Safety Information

Some people have serious infections while taking ACTEMRA, including tuberculosis (TB) and infections caused by bacteria, fungi, or viruses that can spread throughout the body. Some people have died from these infections.

Please see Important Safety Information on the following pages. Please see full Prescribing Information and Medication Guide for additional important safety information at www.ACTEMRA.com.

"If I knew then what I know now about
Rheumatoid Arthritis,
I would have been
more proactive."

-Julie W. ACTEMRA patient since 2005
Hear Julie's story at ACTEMRA.com

Other serious side effects of ACTEMRA include tears (perforation) of the stomach or intestines, changes in blood test results (including low neutrophil count, low platelet count, and increase in certain liver function tests), hepatitis B infection in those already carrying the virus, nervous system problems, and serious allergic reactions.

Common side effects with ACTEMRA include upper respiratory tract infections (common cold, sinus infections), headache, and increased blood pressure (hypertension).

Tell your healthcare provider if you plan to become pregnant or are pregnant. It is not known if ACTEMRA will harm your unborn baby. Genentech has a registry for pregnant women who take ACTEMRA. If you are pregnant or become pregnant while taking ACTEMRA, contact the registry at 1-877-311-8972 and talk to your healthcare provider.

Call your healthcare provider for medical advice about any side effects. You may report side effects to the FDA at 1-800-FDA-1088. You may also report side effects to Genentech at 1-888-835-2555.

FIGHT BACK AGAINST RA

Talk to your doctor about something different, today.

Visit www.ACTEMRA.com or
call 1-800-ACTEMRA (1-800-228-3672)

 **ACTEMRA**[®]
tocilizumab

ACTEMRA® (AC-TEM-RA) (tocilizumab)

This is the consumer brief summary. For more information, please refer to the full prescribing information.

Rx only

Read the Medication Guide that comes with ACTEMRA before you start it and before each infusion. There may be new information. This brief summary does not take the place of talking with your healthcare provider about your medical condition or your treatment.

What is the most important information I should know about ACTEMRA? ACTEMRA can cause serious side effects including:

1. Serious Infections

ACTEMRA is a medicine that affects your immune system. ACTEMRA can lower the ability of your immune system to fight infections. Some people have serious infections while taking ACTEMRA, including tuberculosis (TB), and infections caused by bacteria, fungi, or viruses that can spread throughout the body. Some people have died from these infections.

- Your doctor should test you for TB before starting ACTEMRA.
- Your doctor should monitor you closely for signs and symptoms of TB during treatment with ACTEMRA.

You should not start taking ACTEMRA if you have any kind of infection unless your healthcare provider says it is okay.

Before starting ACTEMRA, tell your healthcare provider if you:

- think you have an infection or have symptoms of an infection such as:

- | | |
|---------------------------------|--|
| - fever, sweating, or chills | sores on your body |
| - muscle aches | - diarrhea or stomach pain |
| - cough | - burning when you urinate or urinating more often than normal |
| - shortness of breath | |
| - blood in phlegm | |
| - weight loss | |
| - warm, red, or painful skin or | - feel very tired |

- are being treated for an infection
- get a lot of infections or have infections that keep coming back
- have diabetes, HIV, or a weak immune system. People with these conditions have a higher chance for infections.

- have TB, or have been in close contact with someone with TB
- live or have lived, or have traveled to certain parts of the country (such as the Ohio and Mississippi River valleys and the Southwest) where there is an increased chance for getting certain kinds of fungal infections (histoplasmosis, coccidiomycosis, or blastomycosis). These infections may happen or become more severe if you use ACTEMRA. Ask your healthcare provider, if you do not know if you have lived in an area where these infections are common.

- have or have had hepatitis B.

After starting ACTEMRA, call your healthcare provider right away if you have any symptoms of an infection. ACTEMRA can make you more likely to get infections or make worse any infection that you have.

2. Tears (perforation) of the stomach or intestines.

- Before taking ACTEMRA, tell your healthcare provider if you have had diverticulitis (inflammation in parts of the large intestine) or ulcers in your stomach or intestines. Some people taking ACTEMRA get tears in their stomach or intestine. This happens most often in people who also take nonsteroidal anti-inflammatory drugs (NSAIDs), corticosteroids, or methotrexate.
- Tell your healthcare provider right away if you have fever and stomach-area pain that does not go away, and a change in your bowel habits.

3. Changes in certain laboratory test results.

Your healthcare provider should do blood tests before you start receiving ACTEMRA and every 4 to 8 weeks during treatment to check for the following side effects of ACTEMRA:

- low neutrophil count. Neutrophils are white blood cells that help the body fight off bacterial infections.
- low platelet count. Platelets are blood cells that help with blood clotting and stop bleeding.
- increase in certain liver function tests.

You should not receive ACTEMRA if your neutrophil or platelet counts are too low or your liver function tests are too high.

Your healthcare provider may stop your ACTEMRA treatment for a period of time or change your dose of medicine if needed because of

changes in these blood test results.

You may also have changes in other laboratory tests, such as your blood cholesterol levels. Your healthcare provider should do blood tests to check your cholesterol levels 4 to 8 weeks after you start receiving ACTEMRA, and then every 6 months after that. Normal cholesterol levels are important to good heart health.

4. Cancer.

ACTEMRA may decrease the activity of your immune system. Medicines that affect the immune system may increase your risk of certain cancers. Tell your healthcare provider if you have ever had any type of cancer.

See "What are the possible side effects with ACTEMRA?" for more information about side effects.

What is ACTEMRA?

ACTEMRA is a prescription medicine called an Interleukin-6 (IL-6) receptor inhibitor. ACTEMRA is used to treat adults with moderately to severely active rheumatoid arthritis (RA) after at least one other medicine called a Tumor Necrosis Factor (TNF) antagonist has been used and did not work well.

It is not known if ACTEMRA is safe and effective in children.

What should I tell my healthcare provider before receiving ACTEMRA?

ACTEMRA may not be right for you. Before starting ACTEMRA, tell your healthcare provider if you:

- have an infection. See "What is the most important information I should know about ACTEMRA?"
- have liver problems
- have any stomach-area (abdominal) pain or been diagnosed with diverticulitis or ulcers in your stomach or intestines
- have or had a condition that affects your nervous system, such as multiple sclerosis
- have recently received or are scheduled to receive a vaccine.

People who take ACTEMRA should not receive live vaccines. People taking ACTEMRA can receive non-live vaccines

- plan to have surgery or a medical procedure
- have any other medical conditions
- plan to become pregnant or are pregnant. It is not known if ACTEMRA will harm your unborn baby.

Pregnancy Registry: Genentech

has a registry for pregnant women who take ACTEMRA. The purpose of this registry is to check the health of the pregnant mother and her baby. If you are pregnant or become pregnant while taking ACTEMRA, talk to your healthcare provider about how you can join this pregnancy registry or you may contact the registry at 1-877-311-8972 to enroll.

- plan to breast-feed or are breast-feeding. You and your healthcare provider should decide if you will take ACTEMRA or breast-feed. You should not do both.

Tell your healthcare provider about all of the medicines you take, including prescription and non-prescription medicines, vitamins and herbal supplements. ACTEMRA and other medicines may affect each other causing side effects.

Especially tell your healthcare provider if you take:

- any other medicines to treat your RA. You should not take etanercept (Enbrel[®]), adalimumab (Humira[®]), infliximab (Remicade[®]), rituximab (Rituxan[®]), abatacept (Orencia[®]), anakinra (Kineret[®]), certolizumab (Cimzia[®]), or golimumab (Simponi[®]), while you are taking ACTEMRA. Taking ACTEMRA with these medicines may increase your risk of infection.
- medicines that affect the way certain liver enzymes work. Ask your healthcare provider if you are not sure if your medicine is one of these.

Know the medicines you take. Keep a list of them to show to your healthcare provider and pharmacist when you get a new medicine.

How will I receive ACTEMRA?

- You will receive ACTEMRA from a healthcare provider through a needle placed in a vein in your arm (IV or intravenous infusion). The infusion will take about 1 hour to give you the full dose of medicine.
- You will receive a dose of ACTEMRA about every 4 weeks.
- If you miss a scheduled dose of ACTEMRA, ask your healthcare provider when to schedule your next infusion.
- While taking ACTEMRA, you may continue to use other medicines that help treat your rheumatoid arthritis such as methotrexate, non-steroidal anti-inflammatory drugs (NSAIDs) and prescription steroids, as instructed by your healthcare provider.

- Keep all of your follow-up appointments and get your blood tests as ordered by your healthcare provider.

What are the possible side effects with ACTEMRA?

ACTEMRA can cause serious side effects, including:

- See "What is the most important information I should know about ACTEMRA?"
- Hepatitis B infection in people who carry the virus in their blood. If you are a carrier of the hepatitis B virus (a virus that affects the liver), the virus may become active while you use ACTEMRA. This happens with other biologic medicines used to treat RA. Your doctor may do blood tests before you start treatment with ACTEMRA and while you are using ACTEMRA. Tell your healthcare provider if you have any of the following symptoms of a possible hepatitis B infection:

- feel very tired
- skin or eyes look yellow
- little or no appetite
- vomiting
- clay-colored bowel movements
- fevers
- chills
- stomach discomfort
- muscle aches
- dark urine
- skin rash

- Nervous system problems. Multiple Sclerosis has been diagnosed rarely in people who take ACTEMRA. It is not known what effect ACTEMRA may have on some nervous system disorders.

- Allergic Reactions. Serious allergic reactions can happen with ACTEMRA. These reactions may not happen with your first infusion, and may happen with future infusions of ACTEMRA. Tell your healthcare provider right away if you have any of the following signs of a serious allergic reaction:

- shortness of breath or trouble breathing
- skin rash
- swelling of the lips, tongue, or face
- chest pain
- feeling dizzy or faint

Common side effects of ACTEMRA include:

- upper respiratory tract infections (common cold, sinus infections)
- headache
- increased blood pressure (hypertension)

Tell your healthcare provider if you have any side effect that bothers you or that does not go away. These are not all of the possible side effects of ACTEMRA. For more information, ask your healthcare provider or pharmacist.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088. You may also report side effects to Genentech at 1-888-835-2555.

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MAGAZINE

Readers Digest
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The International Foods of Love

What's for dinner on Valentine's Day? Last year, in the week before the big day, these were the most popular dishes on allrecipes.com sites around the world. The dessert recipe was the favorite in the United States:

UNITED KINGDOM

Dinner: Seared Duck Breasts with Honey, Soy, and Ginger
Dessert: Valentine Cookies

FRANCE

Dinner: Duck à l'Orange Super Facile ("supereasy")
Dessert: Chocolate Heart Cake

GERMANY

Dinner: Steak with a Red Wine and Balsamic Sauce
Dessert: Frosted Heart Cookies

BRAZIL

Dinner: Brie Fondue
Dessert: Truffles

MEXICO

Dinner: Clams with Chorizo
Dessert: Eggless Chocolate Mousse

AUSTRALIA AND NEW ZEALAND

Dinner: Garlic Chicken in Puff Pastry
Dessert: Crème Brûlée

UNITED STATES

CHOCOLATE-COVERED STRAWBERRIES

Makes about 20

16 oz. milk chocolate chips
2 tbs. shortening
1 lb. fresh strawberries with leaves

1. Insert toothpicks into tops of strawberries.
2. In double boiler, melt chocolate and shortening, stirring occasionally until smooth. Holding strawberries by toothpicks, dip each one into chocolate mixture.
3. Turn strawberries upside down and insert toothpick into styrofoam and let chocolate cool.

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HOW TO

Eat Sushi

BY BETH DREHER



To up your sushi satisfaction, follow these tips from Masaharu Morimoto, one of Food Network's Iron Chefs and the owner of restaurants in New York, Philadelphia, and Mumbai:

Dip the right end. When eating nigiri sushi (a slice of seafood draped over a small mound of rice), lightly dip the fish—not the rice—into soy sauce to best enjoy the flavor.

Eat in order. Eat from light to dark. To appreciate the flavors of each type of fish, start with mild, light-colored varieties before progressing to fattier, bolder-tasting dark fish.

Use wasabi wisely. If the chef hasn't already added wasabi to your sushi, smear it directly onto the fish or roll. Don't dilute wasabi's kick by mixing it into your soy sauce.

Cleanse your palate. Don't put pickled ginger on your sushi. Instead, eat it between bites to prepare your taste buds for what's next.

Forgo chopsticks. Sushi originated as a street food, and it's still acceptable to eat it with your fingers if you prefer.

Don't nibble. Sushi chefs carefully choose the proportions of fish, rice, and wasabi in each piece—eat it in one bite.



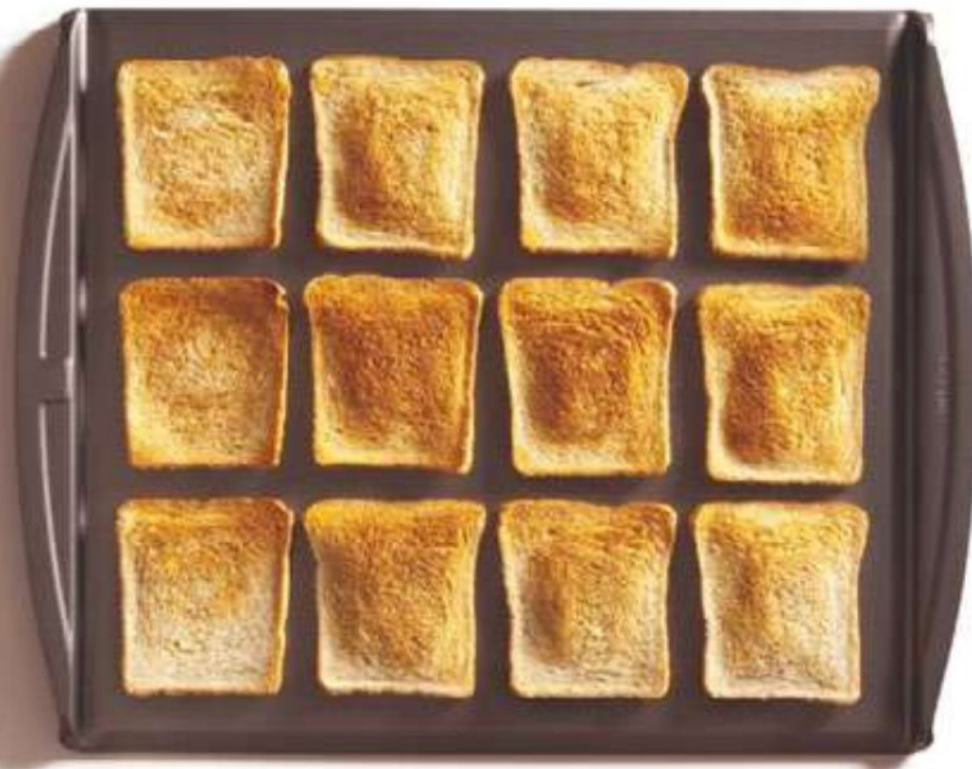
No wasabi in your soy sauce, says Iron Chef Masaharu Morimoto.

JUST IN CASE

Garlic Breath: What Works

Forget about parsley. No need to chew fennel seeds. Science suggests that the most effective way to neutralize the “odiferous sulfur compounds” in a food like garlic is to use a mouthwash with chlorine dioxide or zinc, like Tom's of Maine and ProFresh. (For simple halitosis, look for chlorhexidine and cetylpyridinium chloride in your mouthwash.) For more science applied to everyday life—including the

mathematical formula for figuring out if you can get a sofa around a corner—read *Better Living Through Science: The Basic Scientific Principles You Need to Solve Every Household Conundrum* (Rodale, \$15.99).



SHORTCUTS

Kitchen Tips from All Over

1 No need to make a fine mince of onions, garlic, or herbs, *Food Matters* author Mark Bittman tells lifehacker.com. “I think mincing came into vogue when French cooking became popular. It doesn’t matter.” Chopping is just fine.

2 Map your oven to see where the hot spots are (most likely the center and back of the oven): Heat the broiler and line a cookie sheet with a layer of white bread slices, suggests *Cook’s*

Illustrated. When all the slices have started to brown, take the pan out and carefully snap a photo. If you post the photo near the oven, you’ll know how to turn the pan for even cooking.

3 Don’t throw away that mustard jar. Instead of scraping out the last bit, a *Cook’s Country* reader suggests, add oil, vinegar, and spices. Shake the jar and you have vinaigrette for your salad—and no wasted mustard.

NOTABLE QUOTE

“Who invented the rule that you get a free dessert in a restaurant on your birthday? You don’t get a free pair of gloves or socks from Old Navy when you buy an outfit on your birthday.”

Ron Eyester, chef-owner of Atlanta’s Rosebud Restaurant, on cnn.com’s Eatocracy blog



FIVE-SPICE PORK AND APPLE SALAD

INGREDIENTS

- 1 1-lb. pork tenderloin
- 2 tsp. Chinese five-spice powder*
- 1/2 tsp. salt and pepper
- 1 Fuji or other sweet-tart apple
- 1/4 red onion
- 3 tbsp. seasoned rice vinegar
- 2 tbsp. canola or other neutral-flavored oil
- 12 c. mixed salad greens (about 6 oz.)

DIRECTIONS

Preheat oven to 425°F.

Season tenderloin on all sides with 1 1/2 tsp. five-spice powder, salt and pepper. Place tenderloin in shallow pan; roast for about 20 minutes, or until internal temp. reaches 160°F. Remove pork from oven, let rest 5 minutes.

While pork cooks, core and thinly slice apple. Thinly slice onion.

While pork rests, whisk together vinegar, oil, and remaining 1/2 tsp. five-spice powder in large bowl. Add salad greens, apple and onion. Toss and season with salt and pepper to taste. Arrange salad on plates or a platter.

Cut pork into thin slices. Arrange on top of salad and serve.

*Chinese five-spice powder is available in the spice section or the Asian/Ethnic food section of most major supermarkets.

Serves 4

TheOtherWhiteMeat.com

pork

pork
checkoff

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Des Moines, IA USA. This message
funded by America's Pork Checkoff Program.

SEVEN SUPERIOR SIPS OF WINE

(\$12 AND LESS A BOTTLE)

The envelope, please. *The Wine Trials 2011* is out (Fearless Critic Media, \$14.95), and the annual brown-bag blind tastings have yielded a list of the best wallet-friendly wines in every category:

SPARKLING J.P. Chenet Blanc de Blancs Brut (France, \$12)

LIGHT WHITE Bogle Sauvignon Blanc (California, \$9)

HEAVY WHITE Yalumba Unwooded Chardonnay (Australia, \$10)

ROSÉ Lâl Rosé (Turkey, \$10)

LIGHT RED Monte Antico (Italy, \$12)

HEAVY RED Doña Paula Los Cardos Malbec (Argentina, \$12)

SWEET/AROMATIC Dr. L Riesling (Germany, \$12)

THE TREND

Refill'er Up

Within a year, Americans could be taking refillable wine bottles back to the store and topping them off with Chardonnay. In France, where table wine and gasoline are roughly the same price per gallon, a wine bottle is refilled an average of eight times.



Idaho's Pend d'Oreille Winery gives refillers a 50 percent discount.

Source: treehugger.com

Five-Spice Pork
and Apple Salad



SATISFY YOUR HEALTHY APPETITE.

Who says eating better means eating boring? This Five-Spice Pork and Apple Salad is jam-packed with color, crunch and amazing flavor – and it's so simple to prepare. For more tasty ways to cook lean with pork, visit TheOtherWhiteMeat.com



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Fast Fixes for Winter Woes

FROM
WebMD

If your lips are chapped, your mood grim, and your skin itchy, it must be mid-winter. Your drugstore would like to sell you something to remedy those complaints, but sometimes the best fix can be found in your own cupboard. WebMD's chief medical editor, Michael Smith, MD, weighs in on what works and what's a waste:

DO I REALLY NEED to take vitamin D in the winter?

"A recent report from the Institute of Medi-

cine (IOM) reminds us not to go overboard with any supplement—even vitamin D, which has gotten such good press. But some experts continue to think that many of us don't get enough of this vitamin, which helps keep bones strong and may even cut your risk of cancer. Sun exposure raises your levels, but that has obvious risks and in winter may not be adequate anyway. And it can be tricky to get vitamin D through food (though wild salmon and mushrooms are good sources, and

milk and many cereals are fortified). A supplement can be a good insurance policy, if you don't overdo it. The IOM recommends 600 IU a day (or 800 IU if you're older than 70), and you can safely take that much in a pill." >>

GO FIGURE

6 MILES

Amount of weekly walking that may help prevent brain shrinkage, and possibly dementia, as you age.

Source: University of Pittsburgh study

... prescription eye-drops for my gritty, scratchy eyes?

“If your eyes feel dry all the time, see your eye doctor to determine the cause. The culprit may be a medication you’re taking (an antihistamine, for instance) or an undiagnosed medical condition. For most people, over-the-counter artificial tears do the trick, and you can use them as often as you like—they’re just lubricant saline. If those don’t help, the prescription

eyedrop Restasis is effective, though it can be expensive.”

... a light box for my low energy?

“If your low energy is from something called seasonal affective disorder (SAD), a light box can help. SAD resembles depression, but it’s caused by the winter decrease in sunlight. Before you spend the money, though, make your home sunnier, take daily walks outside, and exercise regularly—these changes might be enough.”

... a pricey moisturizer for my painfully dry skin?

“Many people get the same relief from a cheap brand. Look for one of these ingredients, which pull water into the skin or keep it there: ceramides, hyaluronic acid, dimethicone, lanolin, mineral oil, petrolatum jelly, and glycerine. Use a moisturizer, humidifier, and milder soap for a couple of weeks. If you’re still bothered, see a dermatologist.” ■

For more, go to WebMD.com and search for “winter tips.”

KITCHEN CABINET CURES

Three Spices Your Body Wants Now

TURMERIC

Its yellow tint makes your food look enticing, but turmeric’s biggest selling point is that it contains curcumin, which

may ease headaches, act as a decongestant, help reduce allergy symptoms, and ward off colds. “It seems to be as effective as some drugs for certain conditions,” said Bharat Aggarwal, PhD, professor of experimental therapeutics at MD Anderson Cancer Center in Houston.

CUMIN

Ground or whole, this seed is rich in vitamins A and C and is thought to help fight off sinus infections and colds,

says Aggarwal, author of the new book *Healing Spices*.

PEPPERMINT

It’s a powerful anti-inflammatory, Aggarwal says, and may soothe a sore throat and reduce coughs and congestion. Use it for tea, or mix it into yogurt and chutney.

Beth Dreher

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ALASKA

Beyond Your Dreams. Within Your Reach.



STELARA® is a prescription medicine approved to treat adults 18 years and older with moderate or severe plaque psoriasis that involves large areas or many areas of their body, who may benefit from taking injections or pills (systemic therapy) or phototherapy (treatment using ultraviolet light alone or with pills).

IMPORTANT SAFETY INFORMATION

STELARA® is a prescription medicine that affects your immune system. STELARA® can increase your chance of having serious side effects including:

Serious Infections

STELARA® may lower your ability to fight infections and may increase your risk of infections. While taking STELARA®, some people have serious infections, which may require hospitalization, including tuberculosis (TB), and infections caused by bacteria, fungi, or viruses.

- Your doctor should check you for TB before starting STELARA® and watch you closely for signs and symptoms of TB during treatment with STELARA®
- If your doctor feels that you are at risk for TB, you may be treated for TB before and during treatment with STELARA®

You should not start taking STELARA® if you have any kind of infection unless your doctor says it is okay.

Before starting STELARA®, tell your doctor if you think you have an infection or have symptoms of an infection such as:

- fever, sweats, or chills
- muscle aches
- cough
- shortness of breath
- blood in your phlegm
- weight loss
- warm, red, or painful skin or sores on your body
- diarrhea or stomach pain
- burning when you urinate or urinate more often than normal
- feel very tired
- are being treated for an infection
- get a lot of infections or have infections that keep coming back
- have TB, or have been in close contact with someone who has TB

After starting STELARA®, call your doctor right away if you have any symptoms of an infection (see above).

STELARA® can make you more likely to get infections or make an infection that you have worse. People who have a genetic problem where the body does not make any of the proteins interleukin 12 (IL-12) and interleukin 23 (IL-23) are at a higher risk for certain serious infections that can spread throughout the body and cause death. It is not known if people who take STELARA® will get any of these infections because of the effects of STELARA® on these proteins.

Cancer

STELARA® may decrease the activity of your immune system and increase your risk for certain types of cancer. Tell your doctor if you have ever had any type of cancer.

Reversible posterior leukoencephalopathy syndrome (RPLS)

RPLS is a rare condition that affects the brain and can cause death. The cause of RPLS is not known. If RPLS is found early and treated, most people recover. Tell your doctor right away if you have any new or worsening medical problems including: headache, seizures, confusion, and vision problems.

Serious Allergic Reactions

Serious allergic reactions can occur. Get medical help right away if you have any symptoms such as: feeling faint, swelling of your face, eyelids, tongue, or throat, trouble breathing, throat or chest tightness, or skin rash.

Before receiving STELARA®, tell your doctor if you:

- have any of the conditions or symptoms listed above for serious infections, cancer, or RPLS
- have recently received or are scheduled to receive an immunization (vaccine). People who take STELARA® should not receive live vaccines. Tell your doctor if anyone in your house needs a vaccine. The viruses used in some types of vaccines can spread to people with a weakened immune system, and can cause serious problems. **You should not receive the BCG vaccine during the one year before taking STELARA® or one year after you stop taking STELARA®.** Non-live vaccinations received while taking STELARA® may not fully protect you from disease.
- are receiving or have received allergy shots, especially for serious allergic reactions
- ever had an allergic reaction to STELARA®
- receive phototherapy for your psoriasis
- have any other medical conditions
- are pregnant or plan to become pregnant. It is not known if STELARA® will harm your unborn baby. You and your doctor should decide if you will take STELARA®
- are breast-feeding or plan to breast-feed. It is thought that STELARA® passes into your breast milk. You should not breast-feed while taking STELARA® without first talking to your doctor.

Tell your doctor about all the medicines you take, including prescription and non-prescription medicines, vitamins, and herbal supplements. Especially tell your doctor if you take:

- other medicines that affect your immune system
- certain medicines that can affect how your liver breaks down other medicines

Common side effects of STELARA® include: upper respiratory infections, headache, and tiredness.

These are not all of the side effects with STELARA®. Tell your doctor about any side effect that bothers you or does not go away. Ask your doctor or pharmacist for more information.

You are encouraged to report negative side effects of prescription drugs to the FDA.

Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

Please read the Medication Guide for STELARA® and discuss any questions you have with your doctor.



Stelara[®]
(ustekinumab)



If you suffer from **moderate or severe plaque psoriasis...**
Imagine the possibilities of clearer skin

*4 doses a year
after 2
starter doses*

Discover a proven psoriasis therapy. In a medical study, 7 out of 10 STELARA[®] patients saw at least 75% clearer skin at 12 weeks, and 6 out of 10 patients had their plaque psoriasis rated as cleared or minimal at 12 weeks. *Individual results may vary.*

The safety and effectiveness of STELARA[®] have not been evaluated beyond two years.

Discover a convenient psoriasis therapy. STELARA[®] is an injection given under the skin by a healthcare provider as directed by your doctor at weeks 0, 4, and every 12 weeks thereafter. Each injection is given using a small needle. STELARA[®] is available in 45 mg or 90 mg doses; your doctor will choose the right dose for you. Make sure you keep all your scheduled follow-up appointments.

Ask your dermatologist about STELARA[®]

Please read the Important Safety Information on the adjacent page.



Learn more about STELARA[®]

Text STELARA to 80800,
call 1-866-709-1050,
or visit www.STELARAinfo.com

MEDICATION GUIDE FOR STELARA® INJECTION

Read this Medication Guide before you start taking STELARA® and each time before you get an injection. There may be new information. This Medication Guide does not take the place of talking with your doctor about your medical condition or treatment with STELARA®.

What is the most important information I should know about STELARA®?

STELARA® is a medicine that affects your immune system. STELARA® can increase your chances of having serious side effects, including:

Serious Infections: STELARA® may lower the ability of your immune system to fight infections and may increase your risk of infections. Some people have serious infections while taking STELARA®, including tuberculosis (TB), and infections caused by bacteria, fungi, or viruses. Some people have to be hospitalized for treatment of their infection.

- Your doctor should check you for TB before starting STELARA®.
- If your doctor feels that you are at risk for TB, you may be treated with medicine for TB before you begin treatment with STELARA® and during treatment with STELARA®.
- Your doctor should watch you closely for signs and symptoms of TB during treatment with STELARA®.

You should not start taking STELARA® if you have any kind of infection unless your doctor says it is okay.

Before starting STELARA®, tell your doctor if you think you have an infection or have symptoms of an infection such as:

- fever, sweats, or chills
- muscle aches
- cough
- shortness of breath
- blood in your phlegm
- weight loss
- warm, red, or painful skin or sores on your body
- diarrhea or stomach pain
- burning when you urinate or urinate more often than normal
- feel very tired
- are being treated for an infection
- get a lot of infections or have infections that keep coming back
- have TB, or have been in close contact with someone who has TB

After starting STELARA®, call your doctor right away if you have any symptoms of an infection (see above).

STELARA® can make you more likely to get infections or make an infection that you have worse.

People who have a genetic problem where the body does not make any of the proteins interleukin 12 (IL-12) and interleukin 23 (IL-23) are at a higher risk for certain serious infections. These infections can spread throughout the body and cause death. It is not known

if people who take STELARA® will get any of these infections, because of the effects of STELARA® on these proteins in your body.

Cancers:

STELARA® may decrease the activity of your immune system and increase your risk for certain types of cancers. Tell your doctor if you have ever had any type of cancer.

Reversible posterior leukoencephalopathy syndrome (RPLS):

RPLS is a rare condition that affects the brain and can cause death. The cause of RPLS is not known. If RPLS is found early and treated, most people recover. Tell your doctor right away if you have any new or worsening medical problems including:

- headache
- seizures
- confusion
- vision problems

What is STELARA®?

STELARA® is a prescription medicine used to treat adults 18 years and older with moderate or severe psoriasis that involves large areas or many areas of their body, who may benefit from taking injections or pills (systemic therapy) or phototherapy (treatment using ultraviolet light alone or with pills).

STELARA® may improve your psoriasis but may also lower the ability of your immune system to fight infections. This may also increase your risk for certain types of cancer.

It is not known if STELARA® is safe and effective in children. It is not known if taking STELARA® for more than two years is safe and effective.

What should I tell my doctor before receiving STELARA®?

Before you receive STELARA®, tell your doctor if you:

- have any of the conditions or symptoms listed in the section "What is the most important information I should know about STELARA®?"
- have recently received or are scheduled to receive an immunization (vaccine). People who take STELARA® should not receive live vaccines. Tell your doctor if anyone in your house needs a vaccine. The viruses used in some types of vaccines can spread to people with a weakened immune system, and can cause serious problems. **You should not receive the BCG vaccine during the one year before taking STELARA® or one year after you stop taking STELARA®.** Non-live vaccinations received while taking STELARA® may not fully protect you from disease.
- are receiving or have received allergy shots, especially for serious allergic reactions. Allergy shots may not work as well for you during treatment with STELARA®. STELARA® may also increase your risk of having an allergic reaction to an allergy shot.
- receive phototherapy for your psoriasis.

- have any other medical conditions.
- are pregnant or plan to become pregnant. It is not known if STELARA® will harm your unborn baby. You and your doctor should decide if you will take STELARA®
- are breast-feeding or plan to breast-feed. It is thought that STELARA® passes into your breast milk. You should not breast-feed while taking STELARA® without first talking with your doctor.
- ever had an allergic reaction to STELARA®. Ask your doctor if you are not sure.

Tell your doctor about all the medicines you take, including prescription and non-prescription medicines, vitamins, and herbal supplements. Especially tell your doctor if you take:

- other medicines that affect your immune system.
- certain medicines that can affect how your liver breaks down other medicines.

Ask your doctor or pharmacist if you are not sure if your medicine is one that is listed above.

Know the medicines you take. Keep a list of them to show your doctor and pharmacist when you get a new medicine.

How will I receive STELARA®?

- STELARA® is given by injection under the skin (subcutaneous injection).
- STELARA® should only be given by a healthcare provider as directed by your doctor.
- Your doctor will decide the right dose of STELARA® for you and how often you should receive it.
- Be sure to keep all of your scheduled follow-up appointments.

What should I avoid while receiving STELARA®?

You should not receive a live vaccine while taking STELARA®. See "What should I tell my doctor before taking STELARA®?"

What are the possible side effects of STELARA®?

STELARA® can increase your chances of having serious side effects.

- See "What is the most important information I should know about STELARA®?"
- **Serious Allergic Reactions.** Serious allergic reactions can occur with STELARA®. Get medical help right away if you have any of the following symptoms of a serious allergic reaction:
 - feeling faint
 - swelling of your face, eyelids, tongue, or throat
 - trouble breathing, throat tightness
 - chest tightness
 - skin rash

Common side effects of STELARA® include:

- upper respiratory infections
- headache
- tiredness

These are not all of the possible side effects of STELARA®. Tell your doctor about any side effect that bothers you or that does not go away. For more information, ask your doctor or pharmacist.

Call your doctor for medical advice about side effects.

You may report side effects to the FDA at 1-800-FDA-1088.

You may also report side effects to Centocor Ortho Biotech Inc. at 1-800-457-6399.

General information about STELARA®

Medicines are sometimes prescribed for purposes other than those listed in a Medication Guide.

This Medication Guide summarizes the most important information about STELARA®. If you would like more information, talk with your doctor. You can ask your doctor or pharmacist for information about STELARA® that was written for healthcare professionals.

What are the ingredients in STELARA®?

Active ingredient: ustekinumab

Inactive ingredients: L-histidine, L-histidine monohydrochloride monohydrate, polysorbate 80, and sucrose.

Prefilled Syringe Manufactured by: Centocor Ortho Biotech Inc., Horsham, PA 19044, License No. 1821 at Baxter Pharmaceutical Solutions, Bloomington, IN 47403

Vial Manufactured by: Centocor Ortho Biotech Inc., Horsham, PA 19044, License No. 1821 at Citag AG, Schaffhausen, Switzerland

Revised October 2010

This Medication Guide has been approved by the U.S. Food and Drug Administration.

U.S. License No. 1821

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25ST10222



GROSS NEGLIGENCE

Who Washes ... and Who Doesn't

FROM good.is

Here's a dirty little secret that probably accounts for a fair number of the colds you get—and other nasty ailments too. People say they wash their hands all the time, but researchers who actually watched sinks in public restrooms around the country found that they remained unused alarmingly often—especially by men.

Source: American Society for Microbiology and the American Cleaning Institute

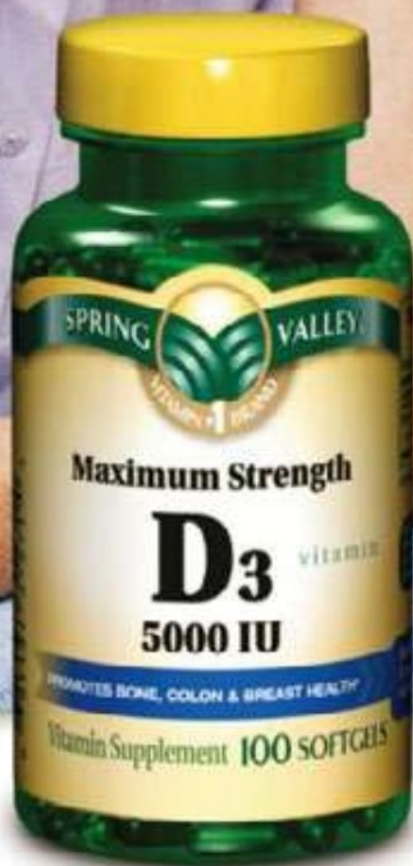
HOW TO

Cut Your Risk of Breast Cancer

A recent study of more than 85,000 women found three habits linked to a 25 percent lower risk of developing the disease:

- ▶ Exercising at least moderately for 20 minutes, five days a week.
- ▶ Consuming fewer than seven alcoholic drinks a week.
- ▶ Maintaining a body mass index between 18.5 and 24.9 (that's under 145 pounds for a five-foot-four woman).

Source: University of Rochester Medical Center study



Kathy knows 75% of all Americans don't get enough Vitamin D!

That's why she trusts Spring Valley® vitamins to supplement her diet with Vitamin D₃. This Maximum Strength formula supports bone, breast, colon, pancreas and immune system health.*

Spring Valley® vitamins and supplements are made under strict quality guidelines using the finest high quality ingredients.

So, if you're one of the millions of people who aren't getting enough Vitamin D... start supplementing with Spring Valley® Maximum Strength Vitamin D₃.



Spring Valley®
America's #1 Vitamin Brand.
Quality. Selection. Value.

Exclusively At
Walmart 
Save money. Live better.

*These statements have not been evaluated by the Food and Drug Administration. These products are not intended to diagnose, treat, cure or prevent any disease.

[†]Ginda A.A. Demographic difference and trends of vitamin D insufficiency in the US population, 1998-2004. *Nat Rev Rheumatol*. 2009 Aug; 5(8):417-8.

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Visit www.walmart.com/springvalley

More This, Less That

Over 1.5 million Americans are diagnosed with diabetes every year. Simple **additions** and **subtractions** might help reduce your risk.

+ BROCCOLI AND SPINACH

People who ate more leafy green vegetables were less likely to develop diabetes, a recent analysis of four studies showed. Adding a little more than a serving daily could cut risk 14 percent, researchers say.

+ FISH OIL

When overweight mice were fed fish oils, their levels of inflammation—which can lead to diabetes—dropped. Fish oil supplements may offer the same help to humans, say scientists from the University of California, San Diego.

+ BREAST-FEEDING

Mothers who breast-fed their newborns for as little as a month cut their own risk of developing diabetes later in life by as much as 33 percent.

- WHITE RICE

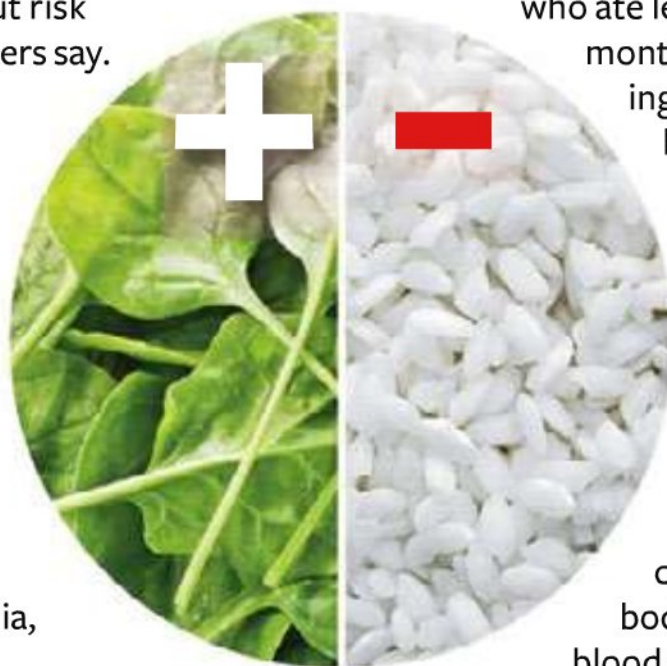
In a study of nearly 200,000 people, those who ate five or more cups of white rice a week were 17 percent more likely to wind up with diabetes than people who ate less than one serving a month. Surprisingly, switching to brown rice or barley was better than not eating rice at all.

- STAYING UP LATE

Sleeping less than six hours per night can increase your risk of developing diabetes by 30 percent by impairing your body's ability to regulate blood sugar, says a review of ten studies.

- SMOKING

Having even a few cigarettes a day can raise your risk of diabetes by 30 percent or more.



OTHER REASONS WE KISS

“Subconsciously, both partners are picking up on clues about the other’s health, reproductive potential, and even whether their very genetic codes may be compatible.” **Sheril Kirshenbaum**, *The Science of Kissing* (Grand Central Publishing, \$19.99)



TheraSeed®
Pd-103

Remember the name.
Forget the cancer.

1-800-458-4372
theraseed.com

Prostate Cancer? The choice for treatment is in your hands.

If you've been diagnosed with prostate cancer you should know there is a treatment that may be superior to surgery. More than 14 years of data show that brachytherapy, or "seeding," with TheraSeed® has cure rates* comparable to removal of the prostate¹ – either open or robotic surgery^{2,3} – and works without probable impotence or a higher risk of incontinence associated with surgery⁴.

TheraSeed® treatment is a non-invasive, outpatient procedure. In approximately 45 minutes, radioactive seeds are placed into the prostate to destroy cancer cells, while minimizing exposure to healthy tissue.

Get the facts. Ask your physician about the risks associated with all forms of treatment and discover a time-tested, proven option for life after prostate cancer.

* Biochemical disease-free survival. 1. Sharkey J, Cantor A, Solc Z, Chovinick SD, Behar RJ, Perez R, Otheguy, Rabinowitz R. Brachytherapy versus radical prostatectomy in patients with clinically localized prostate cancer. Poster presentation, International Prostate Brachytherapy Symposium, June 2006, New York. 2. Hu J, Wang Q, Pashos C, Lipsitz S, Keating N. Utilization and outcomes of minimally invasive radical prostatectomy. *Journal of Clinical Oncology*, 2008; 14:2278-2284. 3. Eggener S, Guillonneau B. Laparoscopic radical prostatectomy: Ten years later, time for evidence-based foundation. *European Urology*, 2008; 54:4-7. 4. The most commonly reported side effects of prostate brachytherapy are short-term urinary or obstructive symptoms within the first few weeks after the implant procedure.

TREND

“Good for You” Gets Better

Whole wheat pasta has always been better in theory (high fiber! extra nutrients!) than on the plate (mealy! mushy!). But there’s been a major leap in quality, says food writer Melissa Clark, who recently held a taste test with an editor of the *New York Times* Dining section and two New York chef-restaurateurs. For her notes on winners and losers, go to melissaclark.net. The best:



Bionaturae
100% Organic Whole Wheat Spaghetti
 Ranked best all-around. (\$3.19 for 16 ounces; six grams of fiber)

Gia Russa
100% Whole Wheat Fettuccini
 Mild flavor; kid-friendly. (\$2.99 for 16 ounces; five grams of fiber)

Garofalo
Organic Whole Wheat Spaghetti
 Tastes like whole wheat toast. (\$2.19 for 16 ounces; four grams of fiber)

INSIDE STORY

How Harvard Docs Protect Their Health

● FROM *Newsweek*

I try not to read work e-mail on the weekend. I love weekend naps. And every Friday, my college roommates and I e-mail each other. Our only rule for these missives is that we have to come up with several successes that we’ve had during the week, however small—and however bad the week may have been.

Lori Tishler

I refuse to use a smart phone. In a world that’s already pulling me in ten directions at once, I don’t need to be pulled in an 11th direction. Going crazy is not good for your health.

Tony Komaroff

I don’t take any supplements except vitamin D. Overall, if people eat a healthy diet, they really shouldn’t need supplements.

Marc Garnick

QUICK FIX

TONE YOUR TUSH

Sitting is the new smoking, researchers say: We’re doing so much of it that it’s raising our risk of dying young. In her new book *Le Personal Coach* (Best You, \$17.95), French fitness and nutrition coach Valérie Orsoni suggests ways to work in a workout, even if lots of your time is spent seated. “Each time you go to sit, stand back up before your butt hits the chair. The average office worker sits at least 50 times a day—that’s 50 squats. And each one takes only three seconds!”



Scientists discover “gift from the sea” that fights brain cell loss in adults.

Ocean protein boosts memory, focus & attention

Madison, WI – Can a simple sea protein hold the key to preserving your memory? Scientists are saying yes! Researchers have discovered a protein from the depths of the ocean that actually protects our brain cells as we age.

Robert Pastore, Ph.D., member of the New York Academy of Sciences, explains “as you age, you lose about 30,000 brain cells a day and that impacts every aspect of your life...how you think and how you feel.”

Recently, scientists made a significant breakthrough, locating a calcium-binding protein (CaBP) called “apoequorin,” that can help with a healthier brain, sharper mind and clearer thinking.

Protects brain cells & memories

According to Dr. Pastore, “CaBPs are vital and found naturally throughout the body. They bind with excess calcium in our cells. At around age 40, these vital CaBPs start to decrease. This is known to lead to cell damage and even cell death. This may be one of the factors that results in loss of memory, forgetting names, etc.”

The jellyfish connection

Apoequorin is in the same family of proteins as those found in humans, but it comes from one of nature’s simplest organisms – the jellyfish.

Recently, researchers formulated this vital protein into a product called PrevaGen®. It’s the first and only supplement that restores CaBP levels and protects brain cells.

Healthier Brain, Sharper Mind, Clearer Thinking

Just how well does PrevaGen® work? Research shows PrevaGen can improve memory function within 30 days.

When your brain is healthier, your whole body is healthier. It’s just that simple.

Call toll-free
877-981-4321
to learn more
about PrevaGen®

Available at:



With us, it's personal.



Could you do this with your vial and syringe?

Mealtime insulin doesn't have to stop you from living your life. No more drawing up to measure the correct insulin dose. No need for refrigeration once it's been used. Humalog KwikPen is truly portable, so you can take it just about anywhere. And it comes prefilled with Humalog mealtime insulin. Ask your healthcare provider if Humalog KwikPen is right for you.

Take the attached card to your healthcare provider to ask for a prescription for 5 FREE pens. Go to KwikPen.com for more information.

Who should use Humalog?

Humalog (insulin lispro injection [rDNA origin]) is for use in patients with diabetes to control high blood sugar and should be used with longer-acting insulin, except when used in combination with sulfonylureas in patients with type 2 diabetes.

What is some important safety information I should know about Humalog?

Starting or changing insulin therapy should be done cautiously and only under medical supervision.

Who should not take Humalog?

Humalog should not be used during episodes of low blood sugar (hypoglycemia) or if you are allergic to anything in Humalog.

What is Humalog?

Humalog is an injectable, fast-acting insulin available by prescription.

How should I use Humalog?

Humalog starts working faster than other insulins that contain regular human insulin. Take Humalog within 15 minutes before eating or right after eating a meal. Check your blood sugar levels as told by your healthcare professional.

If you have type 1 diabetes, you need to take a longer-acting insulin in addition to Humalog (except when using an external insulin pump). If you have type 2 diabetes, you may be taking diabetes pills and/or a longer-acting insulin in addition to Humalog.

Precautions

The safety and effectiveness of Humalog in patients less than 3 years of age have not been established. There are no adequate and well-controlled clinical studies of the use of Humalog in pregnant or nursing women.

Low blood sugar

Low blood sugar is the most common adverse effect associated with insulins, including Humalog. Low blood sugar can happen suddenly, and symptoms may be different for each person and may change from time to time. Know your symptoms of low blood sugar. Severe low blood sugar can cause seizures and be life threatening. Follow your healthcare professional's instructions for treating low blood sugar. Talk to your healthcare professional if low blood sugar is a problem for you.

Other side effects

Other potential side effects associated with the use of insulins include: low blood potassium, weight gain, changes in fat tissue at the injection site, and allergic reactions. Allergic reactions can happen at the site of injection and over the whole body. Whole-body allergic reactions are less common, but may be life threatening.

Humalog® KwikPen™ is so portable...

...you might not carry it this way, but you almost could.



Select safety information

Starting or changing insulin therapy should be done cautiously and only under medical supervision.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.FDA.gov/medwatch or call 1-800-FDA-1088.

Humalog
KwikPen™

insulin lispro injection (rDNA origin)

For other important information, see the accompanying Brief Summary of Patient Information. Please see full user manual that accompanies your pen.



Partnership for
Prescription Assistance

If you need assistance with prescription costs, help may be available. Visit www.pparx.org or call 1-888-4PPA-NOW.

Lilly

Patient Information

Humalog® (HU-ma-log)

insulin lispro injection, USP (rDNA origin)

Important

Know your insulin. Do not change the type of insulin you use unless told to do so by your healthcare provider. Your insulin dose and the time you take your dose can change with different types of insulin.

Make sure you have the right type and strength of insulin prescribed for you.

Read the Patient Information that comes with Humalog before you start using it and each time you get a refill. There may be new information. This leaflet does not take the place of talking with your healthcare provider about your diabetes or treatment. Make sure that you know how to manage your diabetes. Ask your healthcare provider if you have questions about managing your diabetes.

What is Humalog?

Humalog is an injectable fast-acting man-made insulin. Humalog is used to control high blood sugar (glucose) in people with diabetes.

Humalog comes in:

- 10 mL vials (bottles) for use with a syringe or external insulin pump
- 3 mL vials (bottles) for use with a syringe or external insulin pump
- 3 mL prefilled pens
- 3 mL cartridges for use with a reusable pen or external insulin pump

Who should not take Humalog?

Do not take Humalog if:

- your blood sugar is too low (hypoglycemia). After treating your low blood sugar, follow your healthcare provider's instructions on the use of Humalog.
- you are allergic to anything in Humalog. See the end of this leaflet for a complete list of ingredients in Humalog.

Tell your healthcare provider:

- **about all your medical conditions.** Medical conditions can affect your insulin needs and your dose of Humalog.
- **if you are pregnant or breastfeeding.** You and your healthcare provider should talk about the best way to manage your diabetes while you are pregnant or breastfeeding. Humalog has not been studied in pregnant or nursing women.
- **about all the medicines you take, including prescription and non-prescription medicines, vitamins and herbal supplements.** Many medicines can affect your blood sugar levels and insulin needs. Your Humalog dose may need to change if you take other medicines.

Know the medicines you take. Keep a list of your medicines with you to show to all of your healthcare providers.

How should I use Humalog?

Humalog can be used with a syringe, prefilled pen, reusable pen or external insulin pump. Talk to your healthcare provider if you have any questions. Your healthcare provider will tell you the right syringes to use with Humalog vials. Your healthcare provider should show you how to inject Humalog before you start using it.

- **Read the User Manual that comes with your Humalog prefilled pen and the manufacturer's instructions that comes with your external insulin pump. Use Humalog exactly as prescribed by your healthcare provider.**
- **If you have type 1 diabetes, you need to take a longer-acting insulin in addition to Humalog (except when using an external insulin pump).**
- **If you have type 2 diabetes, you may be taking diabetes pills and/or a longer-acting insulin in addition to Humalog.**
- **Humalog starts working faster than other insulins that contain regular human insulin.** Inject Humalog within fifteen minutes before eating or right after eating a meal.
- **Check your blood sugar levels as told by your healthcare provider.**
- Look at your Humalog before using. Humalog should be clear, have no color and look like water. If your Humalog is cloudy, thickened, even slightly colored, or has solid particles or clumps in it, do not use. Return it to your pharmacy for new Humalog.
- Humalog can be mixed with a longer-acting human insulin, but only if you are told to do so by your healthcare provider. If you are mixing two types of insulin, always draw Humalog into the syringe first. Talk with your healthcare provider about how to properly mix Humalog with a different insulin.
- Humalog can be used in an external insulin pump either by withdrawing Humalog from a vial or using a 3 mL Humalog cartridge that is inserted into the pump.
- Humalog was tested with MiniMed®^{®1} Models 506, 507, and 508 insulin pumps using MiniMed Polyfin®^{®1} infusion sets. Humalog was also tested with the Disetronic®^{®2} H-TRONplus®^{®2} V100 insulin pump (with plastic 3.15 mL insulin reservoir), using the Disetronic Rapid®^{®2} infusion set.
- A Humalog cartridge used in the D-TRON®^{®2} or D-TRONplus®^{®2} pump, may be used for up to 7 days. Humalog in the external insulin pump reservoir and the complete infusion set should be replaced and a new infusion site selected every 48 hours or less.
- Humalog in an external insulin pump should not be exposed to temperature above 98.6°F (37°C), such as in a sauna or hot tub, hot showers, direct sunlight, or radiant heaters.
- **Inject your dose of Humalog under the skin of your stomach area, upper arm, upper leg, or buttocks. Never inject Humalog into a muscle or vein.**
- **Change (rotate) your injection site with each dose.**
- **Your insulin needs may change because of:**
 - illness
 - stress
 - other medicines you take

Humalog® (HU-ma-log) insulin lispro injection,
USP (rDNA origin) PV 5561 AMP

Humalog® (HU-ma-log) insulin lispro injection,
USP (rDNA origin) PV 5561 AMP

- changes in eating
- physical activity changes

Follow your healthcare provider's instructions to make changes in your insulin dose.

- **Never dilute or mix Humalog with another insulin in the same prefilled pen, cartridge or external insulin pump.**
- **Always carry a quick source of sugar to treat low blood sugar, such as glucose tablets, hard candy, or juice.**

What are the possible side effects of Humalog?

Low Blood Sugar (Hypoglycemia). Symptoms of low blood sugar include:

- hunger
- dizziness
- feeling shaky or shakiness
- lightheadedness
- sweating
- irritability
- headache
- fast heartbeat
- confusion

Low blood sugar symptoms can happen suddenly. Symptoms of low blood sugar may be different for each person and may change from time to time. Severe low blood sugar can cause seizures and death. Low blood sugar may affect your ability to drive a car or use mechanical equipment, risking injury to yourself or others. Know your symptoms of low blood sugar. Low blood sugar can be treated by drinking juice or regular soda or eating glucose tablets, sugar, or hard candy. Follow your healthcare provider's instructions for treating low blood sugar. Talk to your healthcare provider if low blood sugar is a problem for you.

- **Serious allergic reactions** (whole body allergic reaction). Severe, life-threatening allergic reactions can happen with insulin. Get medical help right away if you develop a rash over your whole body, have trouble breathing, wheezing, a fast heartbeat, or sweating.
- **Reactions at the injection site** (local allergic reaction). You may get redness, swelling, and itching at the injection site. If you keep having injection site reactions or they are serious, you need to call your healthcare provider. Do not inject insulin into a skin area that is red, swollen, or itchy.
- **Skin thickens or pits at the injection site (lipodystrophy).** This can happen if you don't change (rotate) your injection sites enough.

These are not all the side effects from Humalog. Ask your healthcare provider or pharmacist for more information.

- **You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.FDA.gov/medwatch or call 1-800-FDA-1088.**

How should I store Humalog?

- **Store all unopened (unused) Humalog in the original carton in a refrigerator at 36°F to 46°F (2°C to 8°C).** Do not freeze.
- Do not use Humalog that has been frozen.
- Do not use after the expiration date printed on the carton and label.

Humalog® (HU-ma-log) insulin lispro injection,
USP (rDNA origin) PV 5561 AMP

- Protect Humalog from extreme heat, cold or light.

After starting use (open):

- **Vials:** Keep in the refrigerator or at room temperature below 86°F (30°C) for up to 28 days. Keep open vials away from direct heat or light. Throw away an opened vial 28 days after first use, even if there is insulin left in the vial.
- **Cartridge and Prefilled Pens:** Do not store a cartridge or prefilled pen that you are using in the refrigerator. Keep at room temperature below 86°F (30°C) for up to 28 days. Throw away a cartridge or prefilled pen 28 days after first use, even if there is insulin left in the cartridge or the pen.

General information about Humalog

Use Humalog only to treat your diabetes. Do not share it with anyone else, even if they also have diabetes. It may harm them.

This leaflet summarized the most important information about Humalog. If you would like more information about Humalog or diabetes, talk with your healthcare provider. You can ask your healthcare provider or pharmacist for information about Humalog that is written for health professionals.

For questions you may call 1-800-LillyRx (1-800-545-5979) or visit www.humalog.com.

What are the ingredients in Humalog?

Active ingredient: insulin lispro.

Inactive ingredients: glycerin, dibasic sodium phosphate, metacresol, zinc oxide (zinc ion), trace amounts of phenol and water for injection.

¹MiniMed® and Polyfin® are registered trademarks of MiniMed, Inc.

²Disetronic®, H-TRONplus®, D-TRON®, D-TRONplus and Rapid® are registered trademarks of Roche Diagnostics GMBH.

Humalog® and Humalog® KwikPen™ are registered trademarks of Eli Lilly and Company.

Patient Information revised September 2, 2009

PV 5561 AMP

PRINTED IN USA



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Eli Lilly and Company, Indianapolis, IN 46285, USA
Pens manufactured by
Eli Lilly and Company, Indianapolis, IN 46285, USA or
Lilly France, F-67640 Fegersheim, France
10 mL Vials manufactured by
Eli Lilly and Company, Indianapolis, IN 46285, USA or
Hospira, Inc., Lake Forest, IL 60045, USA or
Lilly France, F-67640 Fegersheim, France
3 mL Vials manufactured by
Eli Lilly and Company, Indianapolis, IN 46285, US
Cartridges manufactured by
Lilly France, F-67640 Fegersheim, France
for Eli Lilly and Company, Indianapolis, IN 46285, USA
www.humalog.com

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Humalog® (HU-ma-log) insulin lispro injection,
USP (rDNA origin) PV 5561 AMP

13 Things Your Mail Carrier Won't Tell You

BY MICHELLE CROUCH

1) Maybe your dog won't bite you. But in 2009, 2,863 of us were bitten, an average of nine bites per delivery day. That's why I wince when your Doberman comes flying out the door.

2) Remember this on Valentine's Day: It takes our machines longer to read addresses on red envelopes (especially if they're written in colored ink).

3) Why stand in line? At usps.com, you can buy stamps, place a hold on your mail, change your address, and apply for passports. We even offer free package pickup



and free flat-rate envelopes and boxes, all delivered right to your doorstep.

4) Media Mail is a bargain, but most of you don't know to ask for it. Sending ten pounds of books from New York City to San Francisco through Media Mail costs \$5.89, compared with \$16.77 for Parcel Post. Besides books, use it to send magazines, manuscripts, DVDs, and CDs; just

don't include anything else in the package.

5) We don't get a penny of your tax dollars. Really.

6) UPS and FedEx charge you \$10 or more for messing up an address. Us? Not a cent.

7) Paychecks, personal cards, letters—anything that looks like good news—I put those on top. Utility and credit card bills? They go under everything else.

8) Sorry if I seem like I'm in a hurry, but I'm under the gun:

Our supervisors tell us when to leave, how many pieces of mail to deliver, and when we should aim to be back. Then some of us scan bar codes in mailboxes along our route so they can monitor our progress.

9) Yes, we do have to buy our own stamps, but a lot of us carry them for customers who need them. If we don't charge you, that's because we like you.



TIME-SAVER

Snowplow-Proof Your Mailbox

Nothing is quite so disheartening in the dead of winter as a mailbox kneecapped by a snow plow or decapitated by the heavy wet stuff the plow throws its way. But there are mailbox posts that revolve, seesaw, and literally spring out of the way. Bonus: Come summer, your mailbox stands more of a chance against a careful of baseball-bat-wielding, beer-swilling teens.

► The Push Me Mailstation, Return-to-Center Mailbox System, and MailSwing each swivel 360 degrees—no standing in the street to pick up bills and circulars. (pushmemailstation.com, returntocentermailbox.com, mailswing.com)

► With the Tip Up Mailbox Kit, a weight raises the box up and out of harm's way. The mail carrier pulls a rope, brings the box back down, and fills it with those catalogs you don't want. (tipupmailboxkit.com)

► The Alpha Mailbox Protector enlists a heavy-duty spring to give the mailbox some flexibility if it's hit. (alphamailpro.com)

Scott Rosenfeld

10) Use a ballpoint pen. Ink from those felt tips runs in the rain.

11) Please dress properly when you come to the door. A towel wrapped around you doesn't cut it. And we definitely don't want to see you in your underwear—or naked!

12) We serve 150 million addresses six days a week, so we're often in the right place at the right time. We pull people out of burning cars, catch burglars in the act, and call 911 to report traffic acci-

dents, dead bodies, and more.

13) Most of us don't mind if you pull up to our trucks while we're delivering and ask for your mail a little early. But please get out of your car and come get it. Don't just put your hand out your window and wait for me to bring it to you.

Sources: Letter carriers in Missouri, New Jersey, and North Carolina; Fredric V. Rolando, president of the National Association of Letter Carriers; and a spokesman for the U.S. Postal Service.

► **For more things your mail carrier won't tell you, go to readersdigest.com/mailcarrier.**

RECAP

The Year in Pestilence

Bedbugs are like the cast of *Real Housewives*: They're everywhere and almost impossible to eradicate. What's the best advice for preventing and destroying America's newest scourge?



Bedbugs are the size of apple seeds.

► Keeping them out of your house is goal No. 1. Check your own bed (and any other beds you may stay in) with a flashlight, looking along mattress seams, ruffles, the headboard, the bed frame, walls, baseboards, etc., for the telltale dots and rusty-reddish stains.

► Some frequent travelers walk into a hotel room and immediately seal up their suitcases in one of those giant reclosable ziplock bags, reaching in to



Stinkbugs more than live up to their name.

grab what they need and then reclosing the bag. Others pack their clothes *inside* ziplock bags *inside* the suitcase. Back at home, some even leave their suitcases outside in extreme cold or extreme heat to kill any bugs that may have hitched a ride. Others run their clothes through the dryer.

► Remember that upholstered seats can harbor bedbugs, too, bringing a whole new level of horror to sitting in a movie theater or the doctor's office. ► Anyone can complain and post a report of bedbugs at

bedbugregistry.com, though some hotels claim they are being unfairly maligned by customers disgruntled for other reasons.

► Many experts recommend buying a good-quality zipper casing for mattresses and box springs—before or after an infestation. Bedbugs can live more than a year without feeding (but better entombed in plastic than running free under the sheets). ► Taking things to a higher level, some wary sleepers plant the legs of their bed in special moatlike protectors that keep bedbugs from traveling freely to and from other areas of the house.

► PackTite makes a \$309 portable oven for luggage and other possessions, though it's not big enough for some suitcases.

► Before you hire bedbug-sniffing dogs, keep in mind that that method may not be foolproof.

► Some moving companies are marketing themselves as bedbug-sensitive: They heat their moving blankets and trucks between jobs to kill pests.

PEST-FEST 2010, PART II

Brown marmorated stinkbugs

Crop killers, home invaders, and olfactory offenders, the bugs

were found in Pennsylvania in 1998 and have now spread to 25 other states—and stayed.

Emerald ash borers

They've killed 100 million ash trees in the United States and threaten most of the ash trees in North America.

Asian longhorned beetles All the sugar maples in New England are at risk.

Asian citrus psyllids These tiny lice thrive in Florida and spread an orange-shriveling disease.



The Asian longhorned beetle is a tree killer.

Grasshoppers The federal government approved \$11 million in emergency aid after the pests invaded the western United States this summer. *Beth Dreher*

Sources: Amanda Hodges, Southern Plant Diagnostic Network, University of Florida; Joseph LaForest, Center for Invasive Species and Ecosystem Health, University of Georgia; Environmental Protection Agency; *Time*; *Bloomberg Businessweek*; *Wall Street Journal*; *Washington Post*.



Grasshoppers have damaged crops in the western U.S.

JUST IN CASE

News About Shoes You Can Use



It's a winter wonderland, all right. You're wondering how to get from here to there over snow and ice, through freezing rain, without slip-sliding away and breaking your tailbone. Pull out a pair of Microspikes—think of them as ice galoshes with traction or as slip-on tire chains for your feet—and put them on over your shoes. The hefty stainless steel spikes keep you walking tall. (kahtoola.com, \$59.95)

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17 Job-Interview Tips

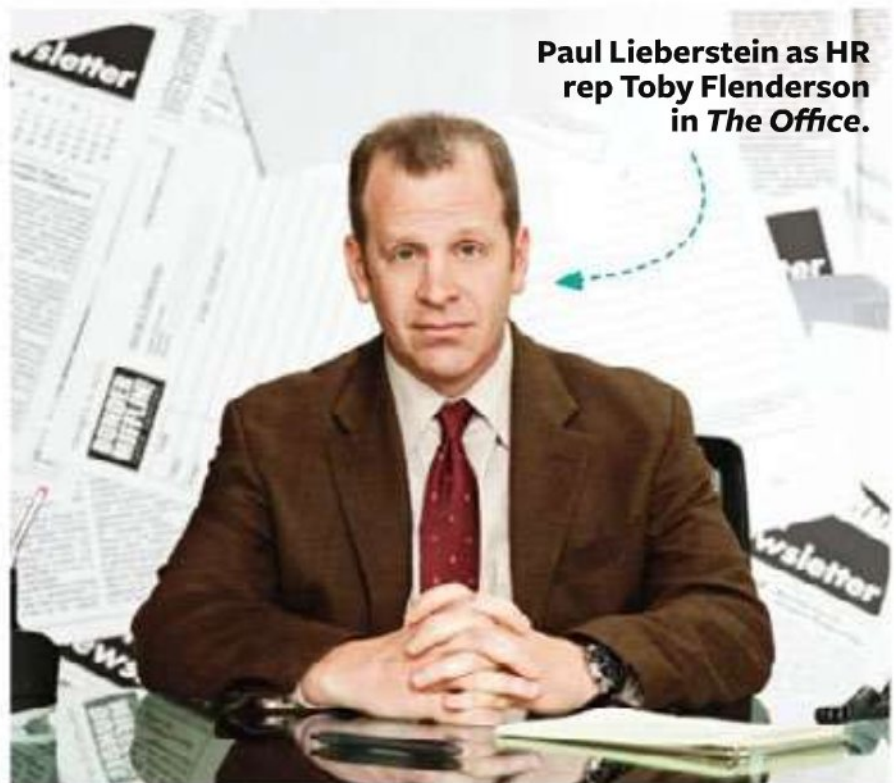
If companies start hiring again, or you want to make a move, consider this expert advice ● FROM MONEY, WSJ.COM, AND OTHERS

YOUR BACKGROUND

► Of course, you've kept an **exemplary Facebook profile** and never posted anything objectionable that a future employer might see. "All it takes is one person sharing information you might not want shared, forwarding a post, or otherwise breaching a trust for the illusion of privacy in a closed network to be eliminated," one job coach told *wsj.com*.

► And of course, you've **set up a professional e-mail address** (from now on, "dungeons anddragonsdorkl@email.com" is just for friends).

► A LinkedIn spokeswoman tells *wsj.com* that a job hunter with a **"100 percent complete"** profile on the site is 40 times



Paul Lieberstein as HR rep Toby Flenderson in *The Office*.

more likely "to receive opportunities."

► But have you checked your credit history?

Michelle Singletary, who writes the Color of Money column for the *Washington Post*, reports that some employers are checking applicants' personal finances before making an offer. Though the

checks are controversial and somewhat >>

GO FIGURE

74

percent of White House employees got a raise in 2010. Average raise: 9 percent.

Source: *gawker.com*

regulated, 60 percent of companies use them for some positions.

YOUR RESEARCH

► “Interviewers hire based on the previous employee’s failures in the job,” HR consultant Bill Byham tells *Fortune*. **Find out why your predecessor left** (problems with deadlines, problems speaking coherently?). Then mention, in flawless English, how you like to get things done early.

► **Come prepared with your own talking points** or even a portfolio of work, says Byham. You may get an incompetent interviewer who will follow your lead.

YOUR VOICE AND BODY LANGUAGE

► **Eye contact, a smile, a firm handshake:**

They’re as important in the reception area as in the big corner office, Sharon Sayler (*What Your Body Says—and How to Master the Message*) tells AOL’s WalletPop.

► **If you’re applying for a service position, let your voice and chin**

“rise” at the end of each sentence so you seem more agreeable.

► **If it’s a management job, use “the credible voice pattern,”** one that has “a calm cadence, almost monotone, with the chin dipping down a bit.”

► Sit up straight, and **keep eye contact “consistent but not constant”**—no need to creep anyone out with too much intensity. Where you look is important: Stay in “the professional zone,” from the bridge of the nose to the top of the forehead.

ANSWERING THE USUAL QUESTIONS

► **“Tell me about yourself.”** Be ready, and be ready with something good, writes Penelope Trunk of the CBS Interactive Business Network (bnet.com): “Tell the person what is important to you, [and] tell it to her in a story



TREND

You’re Getting a Raise!

If you have one of these jobs, you can be more confident than other Americans about getting your check goosed in the coming year:

- 1) Actuary
- 2) Information systems security engineer
- 3) Research-and-development manager
- 4) Human resources consultant
- 5) Information technology program manager

Source: payscale.com via *Money* magazine

she can remember and relay to other people.”

► **Boast and you’re toast.** An interview is no time for embroidering or fabricating the truth, says Byham.

► **“Do you have any questions for me?”**

This usually comes at the end of the talk, but Trunk says to ask early on what the perfect candidate looks like. That way, you can tailor answers accordingly. Before you leave, ask whether the interviewer has any reservations.

YOUR SALARY

► **Don’t lie, but don’t tell.** Do not reveal your current salary until you absolutely have to. Leave the space on the application blank or write “To be discussed in person,” vault.com’s Jason Levin tells *Money* magazine. Instead, say “I’d like to focus on the opportunity here and whether it’s a good fit.”

► **Make them name the number first.** Pam Lassiter (*The New Job Security, Revised*) on freemoneyfinance.com

recommends ducking when the question comes. Tell the interviewer that the pay systems at the two companies differ: “I’m sure you pay competitively. What did you have in mind?”

► **Be general at first.** Lee Miller (*Get More Money on Your Next Job ... in Any Economy*) tells *Money*, “The phrase to use is ‘my total compensation.’” That way, you can include upcoming raises, bonuses,

401(k) matches, and other benefits without overstating things. Lassiter suggests giving a broad range that includes all these things and then asking what the company’s own package looks like.

► **Be specific when you’re pushed.** When their patience is flagging, tell them what they want to know, Lassiter says. Then, smiling, ask what salary and compensation they have in mind for the job. ■

YOU’RE NOT ALONE

Confessions of a Jobless Man

Former newspaperman T. M. Shine writes a blog at pinkslipmyass.com. Here are a few of the things he has learned while he’s been unemployed:

- 1) If you want to apply for a position at Kohl’s, you’d better bring your A game.
- 2) Everything has to last forever now. Financially, I’ll never be able to replace anything. Refrigerator goes. That’s it. Washer and dryer go. That’s it. Roof goes. That’s it. Wife goes. That’s it.
- 3) People say you can’t keep a good man down. I’m the exception.

T. M. Shine’s new novel is *Nothing Happens Until It Happens to You: A Novel Without Pay, Perks, or Privileges* (Crown, \$23).

Is **Diabetic Nerve Pain** leaving you behind?



Prescription Lyrica is not for everyone. Tell your doctor right away about any serious allergic reaction that causes swelling of the face, mouth, lips, gums, tongue, throat or neck or any trouble breathing or that affects your skin. Lyrica may cause suicidal thoughts or actions in a very small number of people. Call your doctor right away if you have new or worsening depression, suicidal thoughts or actions, or unusual changes in mood or behavior. Lyrica may cause swelling of your hands, legs and feet. Some of the most common side effects of Lyrica are dizziness and sleepiness. Do not drive or work with machines until you know how Lyrica affects you. Other common side effects are blurry vision, weight gain, trouble concentrating, dry mouth, and feeling "high." Also, tell your doctor right away about muscle pain along with feeling sick and feverish, or any changes in your eyesight including blurry vision or any skin sores if you have diabetes. You may have a higher chance of swelling, hives or gaining weight if

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*Diabetes
damages nerves
which may cause a
unique type of pain.**



*Lyrica is
believed to
work on these
damaged nerves.*

*Artist depiction of diabetic nerve pain symptoms

Start the Lyrica conversation with your doctor today.

you are also taking certain diabetes or high blood pressure medicines. Do not drink alcohol while taking Lyrica. You may have more dizziness and sleepiness if you take Lyrica with alcohol, narcotic pain medicines, or medicines for anxiety. If you have had a drug or alcohol problem, you may be more likely to misuse Lyrica. Tell your doctor if you are planning to father a child. Talk with your doctor before you stop taking Lyrica or any other prescription medication.

Please see Important Facts Brief Summary on adjacent pages.

To learn more visit www.lyrica.com or
call toll-free 1-888-9-LYRICA (1-888-959-7422).

*You are encouraged to report negative side effects of prescription drugs
to the FDA. Visit www.FDA.gov/medwatch or call 1-800-FDA-1088.*

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IMPORTANT FACTS



(LEER-i-kah)

IMPORTANT SAFETY INFORMATION ABOUT LYRICA

LYRICA may cause serious, even life threatening, allergic reactions.

Stop taking LYRICA and call your doctor right away if you have any signs of a serious allergic reaction:

- Swelling of your face, mouth, lips, gums, tongue, throat or neck
- Have any trouble breathing
- Rash, hives (raised bumps) or blisters

Like other antiepileptic drugs, LYRICA may cause suicidal thoughts or actions in a very small number of people, about 1 in 500.

Call your doctor right away if you have any symptoms, especially if they are new, worse or worry you, including:

- New or worsening depression
- Suicidal thoughts or actions
- Unusual changes in mood or behavior

Do not stop LYRICA without first talking with your doctor.

LYRICA may cause swelling of your hands, legs and feet.

This swelling can be a serious problem with people with heart problems.

LYRICA may cause dizziness or sleepiness.

Do not drive a car, work with machines, or do other dangerous things until you know how LYRICA affects you. Ask your doctor when it is okay to do these things.

ABOUT LYRICA

LYRICA is a prescription medicine used in adults 18 years and older to treat:

- Pain from damaged nerves that happens with diabetes or that follows healing of shingles
- Partial seizures when taken together with other seizure medicines
- Fibromyalgia (pain all over your body)

Who should NOT take LYRICA:

- Anyone who is allergic to anything in LYRICA

BEFORE STARTING LYRICA

Tell your doctor about all your medical conditions, including if you:

- Have had depression, mood problems or suicidal thoughts or behavior
- Have or had kidney problems or dialysis
- Have heart problems, including heart failure
- Have a bleeding problem or a low blood platelet count
- Have abused prescription medicines, street drugs or alcohol in the past
- Have ever had swelling of your face, mouth, tongue, lips, gums, neck, or throat (angioedema)
- Plan to father a child. It is not known if problems seen in animal studies can happen in humans.
- Are pregnant, plan to become pregnant or are breastfeeding.

It is not known if LYRICA will harm your unborn baby. You and your doctor should decide whether you should take LYRICA or breast-feed, but not both.

Tell your doctor about all your medicines. Include over-the-counter medicines, vitamins, and herbal supplements. LYRICA and other medicines may affect each other causing side effects.

Especially tell your doctor if you take:

- Angiotensin converting enzyme (ACE) inhibitors. You may have a higher chance for swelling and hives.
- Avandia® (rosiglitazone)*, Avandamet® (rosiglitazone and metformin)* or Actos® (pioglitazone)** for diabetes. You may have a higher chance of weight gain or swelling of your hands or feet.

BEFORE STARTING LYRICA, continued

- Narcotic pain medicines (such as oxycodone), tranquilizers or medicines for anxiety (such as lorazepam). You may have a higher chance for dizziness and sleepiness.
- Any medicines that make you sleepy

POSSIBLE SIDE EFFECTS OF LYRICA

LYRICA may cause serious side effects, including:

- See "Important Safety Information About LYRICA."
- Muscle problems, pain, soreness or weakness along with feeling sick and fever
- Eyesight problems including blurry vision
- Weight gain. Weight gain may affect control of diabetes and can be serious for people with heart problems.
- Feeling "high"

If you have any of these symptoms, tell your doctor right away.

The most common side effects of LYRICA are:

- Dizziness
- Blurry vision
- Weight gain
- Sleepiness
- Trouble concentrating
- Swelling of hands and feet
- Dry mouth

If you have diabetes, you should pay extra attention to your skin while taking LYRICA and tell your doctor of any sores or skin problems.

HOW TO TAKE LYRICA

Do:

- Take LYRICA exactly as your doctor tells you. Your doctor will tell you how much to take and when to take it. Take LYRICA at the same times each day.
- Take LYRICA with or without food.

Don't:

- Drive a car or use machines if you feel dizzy or sleepy while taking LYRICA.
- Drink alcohol or use other medicines that make you sleepy while taking LYRICA.
- Change the dose or stop LYRICA suddenly. You may have headaches, nausea, diarrhea, or trouble sleeping if you stop taking LYRICA suddenly.
- Start any new medicines without first talking to your doctor.

NEED MORE INFORMATION?

- Ask your doctor or pharmacist. This is only a brief summary of important information.
- Go to www.lyrica.com or call 1-866-459-7422 (1-866-4LYRICA).

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ATTITUDE ADJUSTMENT

How to Be More Charming



BY SCOTT RAAB

● FROM *Esquire*

It doesn't matter what you do for a living; it's all sales. It's making people feel good about doing business with you. You meet me. My voice is firm and sunny. I'm smiling. A smile is a primal thing, mighty past words.

1 The first thing I'm going to say is "Thanks for making time for me" [because] you don't owe me squat.

2 The next thing I'm going to do is ask about you. I'm going to learn about you, and I'm going to learn from you.

3 I'm going to make you laugh. [We're] just a planet full of folks—rich and poor alike—all hoping to get treated better than dirt. I can give them that gift. You can too.

THE RECEIPT

Where Your Taxes Go

BY DAVID KENDALL AND JIM KESSLER

● FROM thirdway.org

A U.S. taxpayer earning the 2009 median income (\$34,140) and paying \$5,400 in federal income tax and FICA ponies up for the following, for starters:

Social Security	\$1,040.70
Medicare	\$625.51
Medicaid	\$385.28
Interest on the national debt	\$287.03
Combat operations	
in Iraq and Afghanistan	\$229.17
Military personnel	\$192.79
Veterans benefits	\$74.65
Federal highways	\$63.89
Health-care research (NIH)	\$46.54
Foreign aid	\$46.08
Education funding for	
low-income K-12 students	\$38.17
Military retirement benefits	\$32.60
Pell Grants for low-income	
college students	\$29.75
NASA space program	\$28.09
Internal Revenue Service	\$17.69
Environmental cleanup (EPA)	\$11.67
FBI	\$11.21
Head Start	\$10.91
Public housing	\$10.50
National parks	\$4.27
Drug Enforcement	
Administration	\$3.14
Amtrak	\$2.23
Smithsonian Museum	\$1.12
Funding for the arts	\$0.24
Salaries and benefits	
for members of Congress	\$0.19

ILLUSTRATED BY JOHN KACHIK

Have you suffered a thigh bone/femur injury?

Attention
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Recent studies have indicated that use of the osteoporosis medicine Fosamax[®] can lead to fractures in the femur – the hip bone. These fractures can occur in low-impact situations, such as when stepping down stairs or even just falling from a standing height or less. This significant risk has been recently added to the Warnings and Precautions section of the label.

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Barry Nalebuff and Seth Goldman of Honest Tea.

DREAMERS

Tea from Two

How Seth Goldman and Barry Nalebuff built a business out of their cravings

INTERVIEW BY JESSICA SHAMBORA

FROM *Fortune*

“In September 1997, I went for a run with a friend in New York City,” says Seth Goldman. “We both wanted a tasty post-exercise drink, but everything was too sweet.

“I’d had the same discussion three years earlier with Barry Nalebuff, my business school professor at Yale. I e-mailed Barry, who had just returned

from India, where he was writing a case study about tea. He told me that tea was one of the world’s cheapest luxuries but that bottled teas in the U.S. were made from the lowest-quality tea. Barry and I had always wanted to work together. We had our product.

“I had no experience in the beverage industry, but I quit my job at Calvert, a socially re-

sponsible investment firm, and Barry and I began brewing tea in my kitchen [in Bethesda, Maryland]. In March 1998, we took a batch of tea in thermoses to Whole Foods, and the buyer ordered 15,000 bottles.

“Over the next eight weeks, we had to raise money, design the labels, and make the tea. Filtering those tea leaves was no easy task! We also found that by cutting down the amount of sweetener, we could afford natural sugar, a move that led us to make our drinks all organic.

“As health and environmental concerns hit the mainstream, our teas took hold, and after ten years in business, we sold 40 percent of the company to Coca-Cola. Our goal: to see Honest products in stores around the world.”

Here are Goldman’s secrets for getting there:
► Don’t take too much money. “If you’re grow-

ing at 50 percent, you're only going to get better terms next time around. Don't take the big money; just keep growing. When you take money before you're ready, you just make bigger and costlier mistakes."

► **Find the yin to your yang.** "We've taken various personality tests along the way, and we are at opposite ends of the spectrum. As a result, we're able to delegate to one another what we each do best. That's key, because you need to be good at so many things."

► **Figure out what business you're in.** "We started as Honest Tea. We had tea bags, bulk tea, bottled teas. About five years in, we realized the most important part of our name was 'Honest' and that was a much bigger idea than just being a tea company. Today our brands include Honest Kids and Honest Ade (like lemonade), and we have the rights to Honest Food." ■

ILLUSTRATED BY SERGE BLOCH

JUST IN CASE

If Your Elevator Plunges ...

Who hasn't considered this worst-case scenario? "What should you do?" writes Robert Krulwich on npr.org (reacting to an explanation in Mary Roach's *Packing for Mars*). "Jump? Squat? Lie down? You want to know before it happens because when the moment comes, you are not going to have time to go to the library."

Jumping up merely delays the inevitable. Sitting, at least, gives your buttocks a chance to provide cushioning. The winning strategy (which experts insist you won't need, by the way): **Lie down flat on the elevator floor for the most protection from the impact.**

IPAD EXTRA To see video of "If Your Elevator Plunges ...," download the *Reader's Digest* magazine app from the iTunes store.



NOTABLE QUOTE

“People with a college degree are the new working class.”

Lawrence Mishel, president of the Economic Policy Institute, a nonpartisan think tank, in the *New York Post*

U.S. GOV'T GOLD AT-COST

TODAY - The United States Rare Coin & Bullion Reserve has scheduled the final release of U.S. Gov't Issued \$5 Gold Coins previously held at the U.S. Mint at West Point. These Gov't Issued Gold Coins are being released on a first-come, first-serve basis, for the incredible markup-free price of only \$159.13 each. This "at-cost" Gov't Gold offer will be available for only a limited time, so do not delay. Call a Sr. Gold Specialist today.

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Random Ideas from All Over

● **Three reasons to be happy.** The divorce rate in the United States has fallen by 13 percent since 2000. The average credit card debt is under \$5,000 for the first time since 2002. Scientists have discovered that gorillas play tag. (*New York*)

● **Is radio dying?** Computer games and Facebook have siphoned off listeners ages 12 to 24. A decade ago, the group listened to radio two hours, 45 minutes a day; in 2010, less than 90 minutes. (*Rolling Stone*)

● **Muffle those TV ads: It's the law.** The Commercial Advertisement Loudness Mitigation (CALM) Act was passed by the House and Senate, but the FCC will have a year to mull over regulations and another year to enforce them. (unplggd.com)

● **Explaining poisonous pols and pundits.** Reviewing a new edition of H. L. Mencken's *Prejudices*, Russell Baker draws a distinction between honest and calculated vitriol: "In today's jargon, Mencken, eloquently proclaiming views certain to offend so

many, would be called a 'polarizing' figure. Whereas today's polarizers, however, are professional well-poisoners who spend vast sums for opinion

polls to determine how best to inflame the masses for political advantage, Mencken did the trick by simply writing what was on his mind." (*The New York Review of Books*)

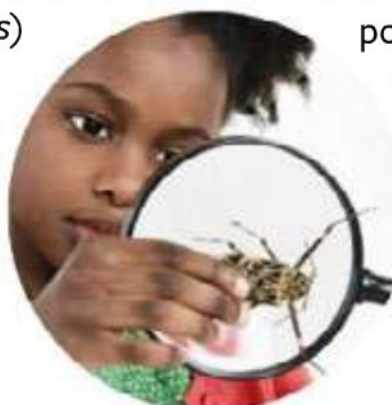
● **Teach your children to be experts, not blowhards.** Canadian professor Kieran



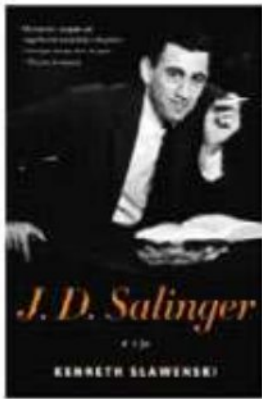
Egan believes kids should be assigned a specific topic in elementary school—dust, beetles, apples—and study it through high school, reports the *Washington Post*. As Egan himself writes in his new book *Learning in Depth*, "People who know nothing in depth commonly assume that their opinions are the same kind of thing as knowledge."

● **Our pets are getting porkier, just like us.** Researchers at the University of Alabama crunched statistics on 24 "pet populations"

and discovered that 23 of the 24 have been getting heavier. (*The Economist*) ■



Mini Book Excerpts



Biography

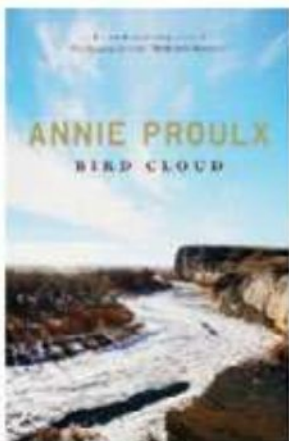
When he learned that a trailer park was to be built on the land, he was appalled and quickly mortgaged his own holdings in order to purchase the adjoining acreage and preserve it ... The townspeople never forgot the rescue and quickly developed a tenacious loyalty to their most famous resident. Just as Salinger had once built a fence to protect him from his neighbors, those same neighbors now rallied around him, defending his privacy from intrusion by the outside world.

***J. D. Salinger: A Life* by Kenneth Slawenski (Random House, \$27)**

History

On the morning of the 9th [1861] as we were dressing we suddenly heard the report of a heavy gun! followed by another! and another! A few moments sufficed to collect us all out in the front of the house where we had a fine view of Sumter, Moultrie & the Channel, and there sad to relate, steaming up the channel was a vessel with the US Flag flying at her peak! (*From the diary of Catherine Edmondston*)

***The Civil War: The First Year Told by Those Who Lived It* (The Library of America, \$37.50)**



Homes

[In Montreal] we had a little apartment of strange angles in a house owned and run by a one-armed German ex-POW. An extremely tall transvestite who only wore summer dresses—inadequate for a Montreal winter—lived down the hall. The most memorable feature of this place was an ancient electric stove with heat coils lining the oven interior. I baked a cake

in the oven once, and the top coil hung down into the batter.

***Bird Cloud* by Annie Proulx (Scribner, \$26)**



CORBIS



Medicine

On the Internet, facts float about freely and are recombined more according to the preferences of intuition than the rules of cognition: Mercury is toxic, toxins can cause development disorders, mercury is in vaccines; ergo, vaccines cause autism. Combined with the self-reinforcing nature

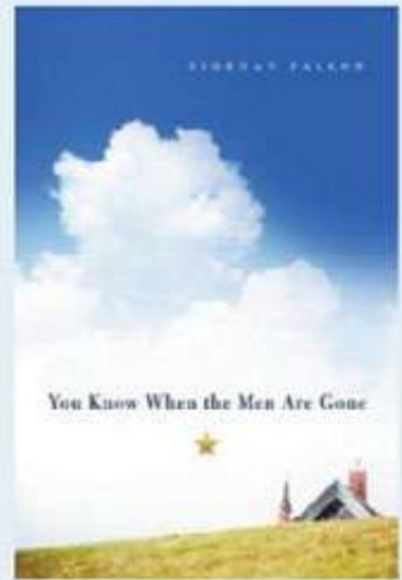
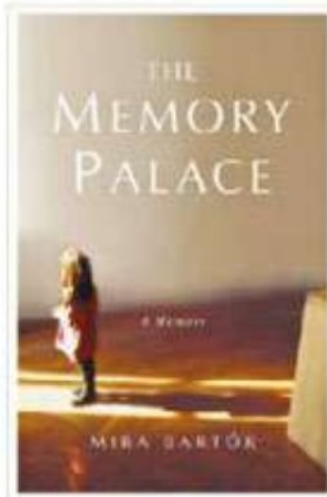
of online communities and a content-starved, cash-poor journalistic culture that gravitates toward neat narratives at the expense of messy truths, this disdain for actualities has led to a world with increasingly porous boundaries between facts and beliefs, a world in which individualized notions of reality, no matter how bizarre or irrational, are repeatedly validated.

The Panic Virus: A True Story of Medicine, Science, and Fear by Seth Mnookin (Simon & Schuster, \$26.99)

Memoir

Even now, when the phone rings late at night, I think it's her. I stumble out of bed ready for the worst. Then I realize—it's a wrong number, or a friend calling from the other side of the ocean. The last time my mother called was in 1990. I was 31 and living in Chicago. She said if I didn't come home right away she'd kill herself. After she hung up, she climbed onto the second-floor balcony of my grandmother's house in Cleveland, boosted herself onto the banister, and opened her arms to the wind. Below, our neighbor Ruth Armstrong and two paramedics tried to coax her back inside. When the call came the next time, almost 17 years later, it was right before Christmas 2006, and I didn't even hear the phone ring.

The Memory Palace by Mira Bartók (Free Press, \$25)



Short Stories

In Fort Hood housing, like all army housing, you get used to hearing through the walls. You learn your neighbors' routines: when and if they gargle and brush their teeth; how often they go to the bathroom or shower; whether they snore or cry themselves to sleep. You learn too much. And you learn to move quietly through your own small domain. You also know when the men are gone. No more boots stomping above, no more football games turned up too high, and, best of all, no more front doors slamming before dawn as they trudge out for their early formation, sneakers on metal stairs, cars starting, shouts to the windows above to throw down their gloves on cold desert mornings.

You Know When the Men Are Gone by Siobhan Fallon (Amy Einhorn/Putnam, \$23.95)

hello

Cleanse your system of treacly holiday music with pianist Simone Dinnerstein's first orchestral recording, *Bach: A Strange Beauty* (Sony Classical). A little "Jesu, Joy of Man's Desiring" will chase "Frosty the Snowman" right out of your head.

With *Blue Murder: Complete Collection*, Acorn Media continues to bring the best British TV series to the United States. The detective chief inspector in these 19 episodes embraces motherhood and, like *Prime Suspect's* Jane Tennison, solves gruesome murders.

There's a new way to discourage texting while driving, according to wsj.com. Police in Iowa are handing out thumb bands that say TXTNG KILLS. Next year: fines instead of fingerwear.



NOTABLE QUOTE

“The first thing I ask myself with every piece: Is it preferable to silence?”

Composer Nico Muhly, *New York Observer*

goodbye

Fancy-college name-dropping

A study by the National Bureau of Economic Research, reported on nytimes.com, shows that colleges enrolling students with higher SAT scores don't necessarily produce graduates who make higher incomes. “Evi-

dently, students' motivation, ambition, and desire to learn have a much stronger effect on their subsequent success” than those SAT scores, says the bureau.

Wooden pallets Pfizer and other drug companies have had to recall products because of the fire retardant sprayed on the pallets used to transport them, reports bnet.com. The companies' switch to plastic versions may sound the death knell for wooden pallets (and signal a reprieve for more than a few trees).

Plugging in your electric car before you can drive Car-battery rechargers embedded beneath roads may one day let you drive forever, using a battery one fifth the size of today's versions and at one third the cost. A working prototype is already on display near Seoul, South Korea, reports *Time*.



WHAT I'M UP TO

Candy Crowley

CNN's chief political correspondent also hosts *State of the Union*

INTERVIEW BY AMY WALLACE



WHAT SHE'S READING

“I’m enjoying—though *enjoying* is probably the wrong word—*Shake Hands with the Devil*, a book about Rwanda and the genocide there, written by one of the UN peacekeepers. It’s stark and it’s horrible, but it’s fascinating and very moving. Then, just for fun and giggles, because one of my nieces is reading this to her daughters, *Alice in Wonderland*.”

WHAT SHE'S PLUGGING

“My son’s band, Vinyette! Go on vinyette.com. Oh, also I anchor a show on CNN on Sunday mornings, at 9 a.m. Eastern Standard Time. When this comes out, I’ll have been doing it for exactly one year.”

Her READER'S DIGEST VERSION of life and work:

“Give it the deathbed test. When you’re lying there in your final days, what are you going to be thinking about? To me, it’s a great way to gauge what’s important in life.”

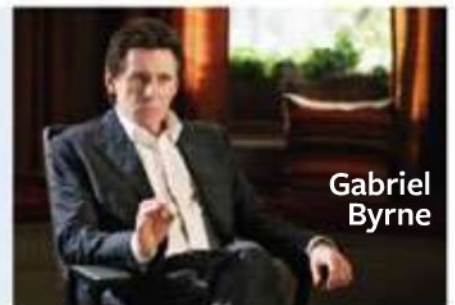
WHERE SHE'S SURFING

“This would never occur at work, but I certainly go to zappos.com a lot. It’s not just shoes anymore—go on there! They’re, like, selling the world! But never, never at work. At work, I use factcheck.org a lot. It’s just a great place to go when people are throwing statistics at you. The *St. Petersburg Times* has another one, politifact.com, that’s a really good take-it-to-the-bank-type site to go to and sort out the whirling numbers.”

IF SHE RULED THE WORLD, SHE WOULD ...

“I hate to sound like Miss America, but I would see that every child is fed and educated. Also, I’d make sure the beaches weren’t so crowded. You have to step on other people’s towels just to get to the water. What fun is that?”

WHAT SHE'S WATCHING “*Dexter* and *In Treatment*. As weird as this sounds, there are some laugh-out-loud moments in *Dexter*. And Gabriel Byrne is brilliant on *In Treatment*. You watch him with his patients and you think, I want *this* guy for a shrink.”



Gabriel Byrne

(BYRNE) COURTESY PAUL SCHIRALDI PHOTOGRAPHY/HBO



IPAD EXTRA To watch a video about Claire Wolff and the Urban Studio Café, download the *Reader's Digest* magazine app from the iTunes store.

The Power of

1

Hometown Heroes from All Over

● IN PARTNERSHIP WITH **AmericanTowns**

A Place to Gather

- Claire Wolff, 25
- St. Louis, Missouri
- Urban Studio Café

At 21, Claire Wolff was teaching high school students photography in a diverse neighborhood of St. Louis. She adored the kids, but she was disturbed by the lack of reliable job opportunities for them after they graduated. With financial backing from Washington University in St. Louis and Kaldi's, a local coffee company, she bought a spot in a ground floor art studio and, in 2009, opened a coffee and sandwich shop, thinking this was one way she might help the neighborhood. The Urban Studio Café now employs five neighborhood kids and hosts classes and workshops on printmaking, nutrition, and financial literacy. "It's been a good way to address the issues these kids are facing," says Wolff, who recently earned a master's in social work. "They get work skills, express their creativity, and build

relationships with their neighbors."

Wolff spends much of her time writing grants to keep the café afloat, but she also makes a mean latte and loves chatting it up with the customers. "They take out the trash, bring flowers from their gardens, and throw their parties here," she says. "It's a pretty magical thing."

Beth Dreher

Walking for Kids

- Zachary Bonner, 13
- Valrico, Florida
- Little Red Wagon Foundation

While many young people were enjoying the final weeks of summer vacation, Zachary Bonner was working his hardest. According to the *St. Petersburg Times*, Zach started walking from Valrico, Florida, his hometown, on Christmas, 2009, and stepped over the Los Angeles city line nine months later in September,

● **Know a local hero? Visit [AmericanTowns](http://AmericanTowns.com) to submit your nomination: american.towns.com/powerofone.**

racking up a total of 2,478 miles and raising close to \$120,000 for kids in need. Along the way, Zach attended school online, thanks to his mother, Laurie Bonner, and brother and sister, who alternated walking and driving alongside him. Among Zach's sponsors: AOL, McDonald's, and the Office Depot Foundation.

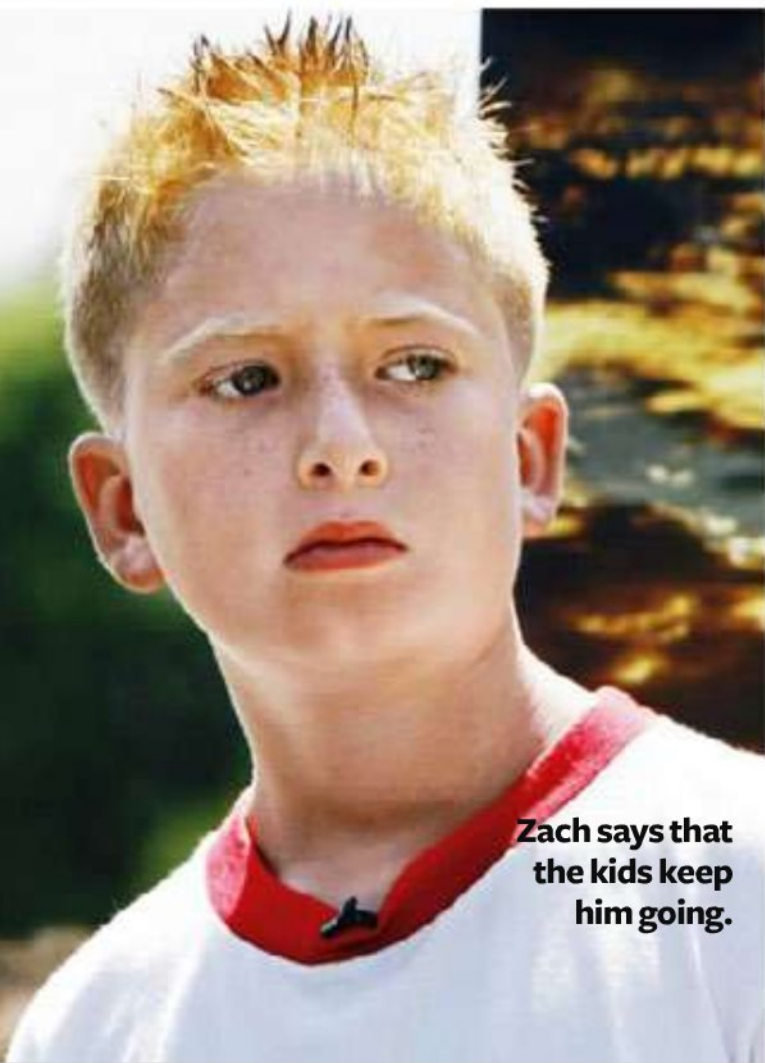
Despite his age, Zach has a long history of helping others. When Hurricane Charley hit town in 2004, Zach, then six, pulled a wagon through his neighborhood collecting food for storm victims. Since then, he has raised some \$400,000 for his tax-exempt Little Red Wagon Foundation, which gives money to projects aiding homeless and troubled children. In 2007, Zach began walking to support a children's charity

in Tampa, Florida, finishing his journey 23 days later, 280 miles away in Tallahassee. Then in the summer of 2009, he trekked about 670 miles from Atlanta to Washington, D.C., in just two months. "What really keeps me going [is] these kids," Zach has said. "They don't get to say, 'I'm tired of being homeless.' So why should I get to quit?" *Natalie van der Meer*

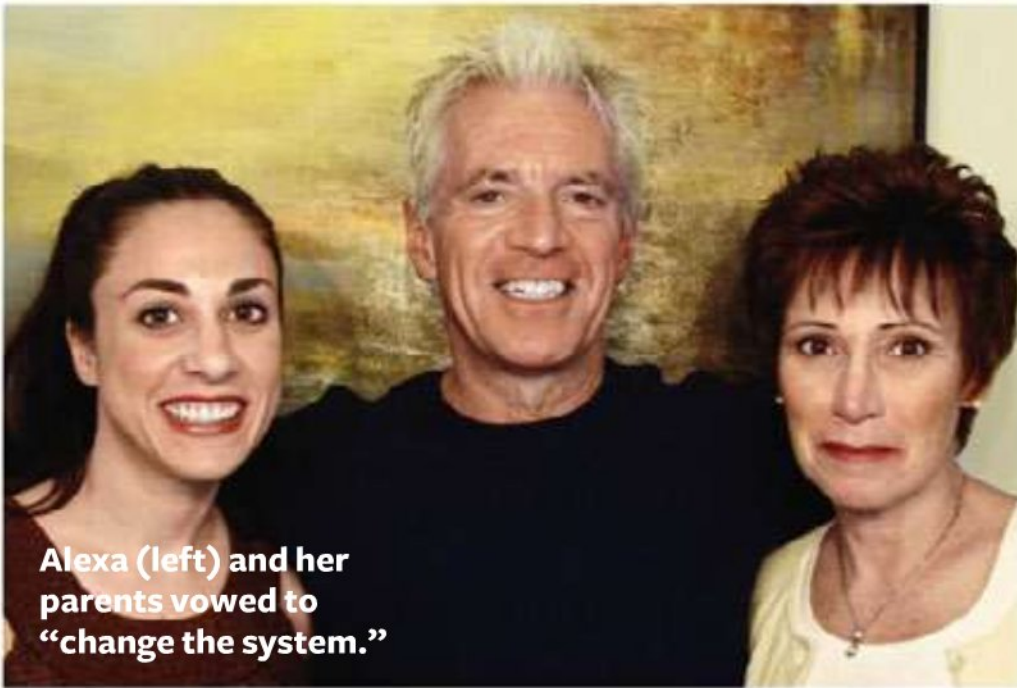
A Family Fights Back

- Alexa, Stacey, and Tom Branchini
- Lewiston, New York
- It Happened to Alexa Foundation

One September morning in 1999, Stacey Branchini woke up to a nightmare when she picked up the phone and was informed that her daughter Alexa, 18, had been raped inside her dormitory on the campus of Boston University, where she had just begun her freshman year. While her daughter's attacker was arrested later that night, his trial didn't take place until a year and a half later in January 2001. In the intervening months, Stacey, her husband, Tom, and her daughter faced a traumatic legal process. The family flew to Boston for each part of the trial. When they would land at the airport, "my daughter would break down in front of us," says Stacey. "We were appalled to learn how poorly [she was] being treated by the system." Alexa, who testified at the month-long trial, says, "I wouldn't have testified if my family hadn't been with me."



Zach says that the kids keep him going.



Alexa (left) and her parents vowed to “change the system.”

to Alexa Foundation to help families who might endure the same hardships. The only organization of its kind, the foundation provides funding for victims’ families so that they are able to accompany their loved ones

Her experience cost the family dearly in other ways as well, especially in travel expenses and lost income. Tom says now that he’d shake his head and say to his wife, “What would people do if they couldn’t afford this? We’ve got to do something.” Two years later, the Branchinis started the It Happened

to court. In its first year, the foundation dispersed \$7,400; in 2009, more than \$100,000 was raised to help 174 victims and their family members and friends. Alexa is now pursuing her PhD in criminal justice and is dedicated to assuring rape survivors that, despite their ordeal, they are not alone. *Amy Conway*


Watch for Our “We Hear You, America” Tour!

On January 18, *Reader’s Digest* will begin a remarkable road trip across our beautiful country. Visiting 100 towns in 100 days, we’ll spotlight the everyday heroes, special places, and creative companies that make America great. We’re also committing more than \$5 million in

funds and promotional support to towns that could use a boost. To nominate your town and have a chance to win a family road trip in a new car, as well as see photos and videos of the “We Hear You, America” tour, go to readersdigest.com.

It all culminates in May

with our special “Best of America” double issue that’ll be packed with the bright ideas and inspiring people we find along the way. Have your own “Best of America” to share? Whether it’s about the most dedicated volunteer in Versailles or the best pie in Pawtucket, we want to hear from you. E-mail us at BOA@readersdigest.com.

A roll of white toilet paper is mounted on a gold-colored metal holder against a white marble wall. The holder has a curved top bar and two side supports. The toilet paper is partially unrolled, and a message is printed on the sheet.

**YOUR
NIECE
IS
ABOUT
TO SAY,
'I DO'**

(And you're in here. Again.)

Maybe today is the day to talk to your doctor about overactive bladder.

Ready to take a vow to do something about your overactive bladder symptoms? Ask your doctor about prescription Toviaz® (fesoterodine fumarate), the once-daily pill that significantly reduces sudden urges and accidents over 24 hours.*

Plus, Toviaz comes with a plan, with tips on food and drink choices and exercises to help you train your bladder. Make a commitment to learn more about the symptoms of overactive bladder and Toviaz.

Ask if Toviaz is right for you.

Toviaz treats the symptoms of overactive bladder (leaks, strong, sudden urges to go, going too often).

**Results may vary*

The plan can help you manage overactive bladder symptoms:

.....

Did you know acidic fruits and vegetables such as tomatoes and citrus fruits may irritate your bladder?



Important Safety Information

If you have certain stomach problems, glaucoma, or cannot empty your bladder, you should not take Toviaz.

Medicines like Toviaz can cause blurred vision, drowsiness, and decreased sweating. Use caution when driving, doing unsafe tasks, or in especially hot environments, until you know how Toviaz affects you. Drinking alcohol while taking medicines such as Toviaz may cause increased drowsiness.

The most common side effects are dry mouth and constipation.

Toviaz has benefits and risks. There may be other options.

You're encouraged to report negative side effects of prescription drugs to the FDA. Visit www.FDA.gov/medwatch or call 1-800-FDA-1088.

 **Toviaz**[®]
fesoterodine fumarate
extended release tablets 4mg and 8mg



Please see Important Product Information on back.

For a **FREE TRIAL** offer, visit Toviaz.com or call 1-877-TOVIAZ-9.

FSD00433G

IMPORTANT FACTS

Toviaz[®]
fesoterodine fumarate
extended release tablets 4mg and 8mg

(TOH-vee-as)

ABOUT OVERACTIVE BLADDER

Overactive bladder happens when the bladder muscle squeezes too often or when you don't want it to. You may have wetting accidents (urge urinary incontinence). You may have a strong need to urinate right away (urgency). You may also have to go too often (frequency).

WHO IS TOVIAZ FOR?

Who can take TOVIAZ?

Adults 18 years and older with symptoms of overactive bladder. TOVIAZ has not been studied in children.

Who should not take TOVIAZ?

Do not take TOVIAZ if you:

- Are not able to empty your bladder (urinary retention).
- Your stomach empties slowly (gastric retention).
- Have an eye problem called "uncontrolled narrow-angle glaucoma."
- Are allergic to TOVIAZ or any of its ingredients.

BEFORE YOU START TOVIAZ

Tell your doctor about all your medical conditions, including:

- Stomach or intestinal problems or problems with constipation.
- Problems emptying your bladder or if you have a weak urine stream.
- Treatment for an eye problem called narrow-angle glaucoma.
- Kidney problems.
- Liver problems.
- A condition called myasthenia gravis.
- If you are pregnant or trying to become pregnant. It is not known if TOVIAZ can harm your unborn baby.
- If you are breastfeeding. It is not known if TOVIAZ passes into your breast milk or if it can harm your baby.

Before starting on TOVIAZ, tell your doctor about all the medicines you take, including prescription and nonprescription medicines, vitamins and herbal products. TOVIAZ may affect the way other medicines work, and other medicines may affect how TOVIAZ works. Especially tell your doctor if you are taking antibiotics or antifungal medicines.

POSSIBLE SIDE EFFECTS OF TOVIAZ

The most common side effects are:

- Dry mouth
- Constipation

TOVIAZ may cause other less common side effects, including:

- Dry eyes
- Trouble emptying the bladder

These are not all of the possible side effects of TOVIAZ. For a complete list, ask your doctor or pharmacist.

HOW TO TAKE TOVIAZ

- Take TOVIAZ exactly as your doctor tells you.
- Your doctor may give you the lower 4 mg dose of TOVIAZ if you have certain medical conditions, such as severe kidney problems.
- Take TOVIAZ with liquid and swallow the tablet whole. Do not chew, divide or crush the tablet.
- You can take TOVIAZ with or without food.
- If you miss a dose of TOVIAZ, begin taking TOVIAZ again the next day. Do not take two doses of TOVIAZ in the same day.

Things you should keep in mind when taking TOVIAZ:

- Use caution in driving, operating machinery, or doing other dangerous activities until you know how TOVIAZ affects you. Blurred vision and drowsiness are possible side effects of medicines such as TOVIAZ.
- Use caution in hot environments. Decreased sweating and severe heat illness can occur when medicines such as TOVIAZ are used in a hot environment.
- Drinking alcohol while taking medicines such as TOVIAZ may cause increased drowsiness.

What is TOVIAZ?

TOVIAZ is a prescription medicine used in **adults** to treat symptoms of a condition called **overactive bladder**, including:

- Urge urinary incontinence—leaking or wetting accidents due to a strong need to urinate.
- Urinary urgency—having a strong need to urinate right away.
- Urinary frequency—having to urinate too often.

NEED MORE INFORMATION?

- This is only a summary of important information. Ask your doctor or pharmacist for complete product information.
- Go to www.Toviaz.com.
- Call **1-877-9-TOVIAZ**.



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Laugh! 😊

I was driving when I saw the flash of a traffic camera. I figured that my picture had been taken for speeding, even though I knew I wasn't. Just to be sure, I went around the block and passed the same spot, driving even more slowly. But again the camera flashed.

Thinking this was pretty funny, I drove past even slower three more times, laughing as the camera snapped away each time while I drove by it at a snail's pace.

Two weeks later, I got five tickets in the mail for driving without a seat belt.

Submitted by *Adam J. Smargon*,
Newark, Delaware



Never trust a man with a tassel on his loafer. It's like, What, did your foot just graduate?

The Sklar Brothers, on comedysmack.com

Ode to America's Attic

Canada wants us to remember that it, too, is part of North America. So The Week asked its readers to come up with an eye-catching slogan for our neighbor to the north.

■ Canada: Where Your Cold Front Begins

People's parents actually give them sage advice, like "Do what you love, and the money will follow" or "The early bird gets the worm." All I remember is "Don't fill up on bread."

Comic *Ophira Eisenberg*

■ Canada: It's Not Just for Draft Dodgers Anymore

■ Canada: Land of Cheaper Drugs

■ Canada: Where Winter Spends the Summer

Jack wakes up with a horrible hangover and a throbbing black eye. The first thing he sees is a single rose on the side table and a note from his wife: "Dear, Breakfast

And the Winner Is ... Dr. Frankenstein!

Here are the winners of this year's Ig Nobel Prize, awarded by the journal *Annals of Improbable Research* in recognition of some very real and very weird science.

Medicine Prize: For the discovery that symptoms of asthma can be treated with a roller-coaster ride.

Public Health Prize: For determining via experimentation that microbes cling to bearded scientists.

Physics Prize: For demonstrating that, on icy footpaths in wintertime, people slip and fall less often if they wear socks on the outside of their shoes.

Peace Prize: For confirming the widely held belief that swearing relieves pain.

is ready. I've gone shopping to make you your favorite dinner tonight. I love you!"

He stumbles to the kitchen, and sure enough, there's breakfast. "Joe," he says to his son, "what happened last night?"

"You came home soused and got that black eye tripping over a chair."

"So why the rose, breakfast, and sweet note from your mother?"

"Oh, *that*. Mom dragged you to the bedroom, and when she tried to take off your clothes, you screamed, 'Leave me alone. I'm married!'"

From planetproctor.com

Paging Jeff Foxworthy

Are you a redneck? Want to be one? Take the Redneck IQ test and see how well you fare. Don't look for answers. If you need them, you're no redneck.

1) Which of these cars will rust out quickest when placed on blocks in your front yard?

'65 Ford Fairlane

'69 Chevrolet Chevelle

'64 Pontiac GTO

2) Calculate the smallest limb diameter on a persimmon tree that will support a ten-pound possum.

3) A woodcutter has a chain saw that operates at 2700 rpm. The density of the pine trees in the plot to be harvested is 470 per acre. The plot is 2.3 acres in size. The average tree diameter is 14 inches. Here's the question: How many Budweisers will be drunk before the trees are cut down?

4) If your uncle builds a still that produces 20 gallons of shine per hour, how many car radiators are required to condense the product?
Comic Wes Duncan

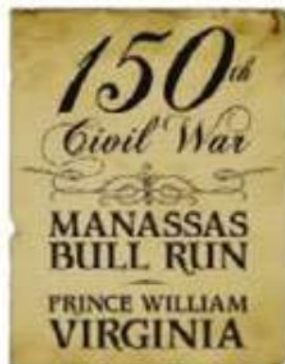
I have a bad attitude. When I was a kid, I wore Lex Luthor underwear.

Comic Craig Sharf

Your favorite new joke, funny anecdote, or crazy news story might be worth \$\$\$. See page 105 for details.



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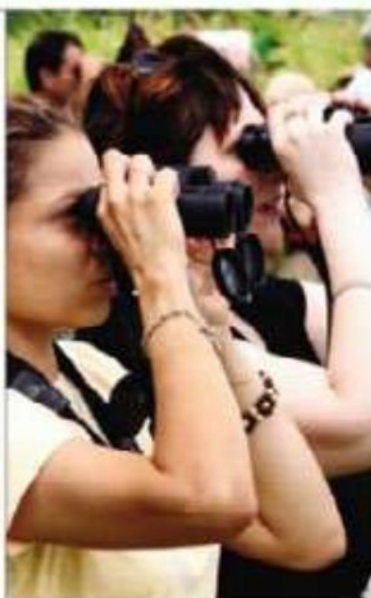
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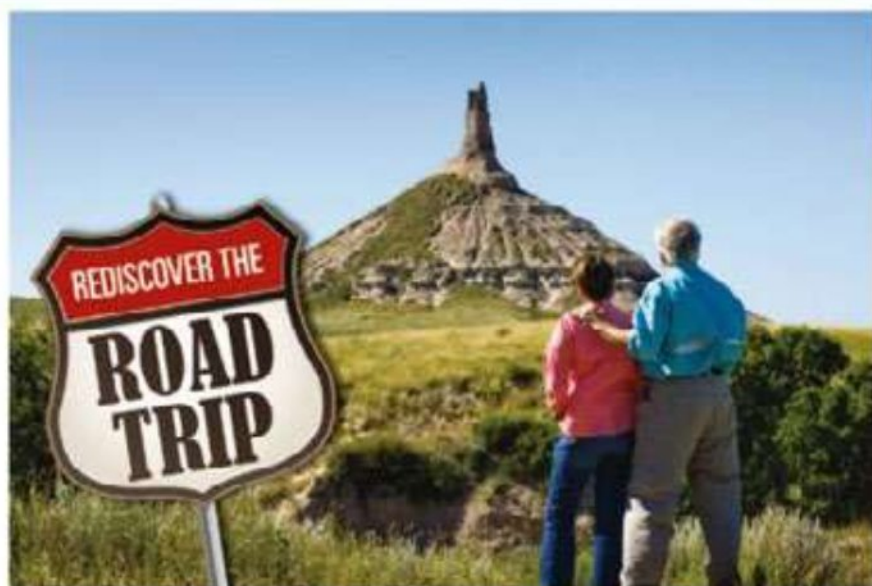


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Who Do You Tell Your Secrets To?

Who do you turn to first as a confidant? If it's your best friend, you've got company. This month, a full half of those surveyed in 16 countries say they go first to their closest pal to share their deepest wishes and darkest fears. Only in France and the

United Kingdom does best friend tie with spouse for first place. While a

buddy was top choice in the United

States, no country has more faith in the BFF than the Philippines, where 51% tell everything to their best friend.

My best friend. I don't want my spouse or parents to worry about me.

*Samson Wuon, 44,
Hong Kong, China*

I can't trust my stylist the way I trust my husband. Gossip thrives in salons.

*Carmen Salazar, 45,
Mexico City, Mexico*

I tell my best friend. She would never judge me, and I have enough secrets on her that she shouldn't!

*Stephanie Martin, 27,
Phoenix, Arizona*

IPAD EXTRA To see how different countries answered our question, download the *Reader's Digest* magazine app from the iTunes store.

Best friend is tops

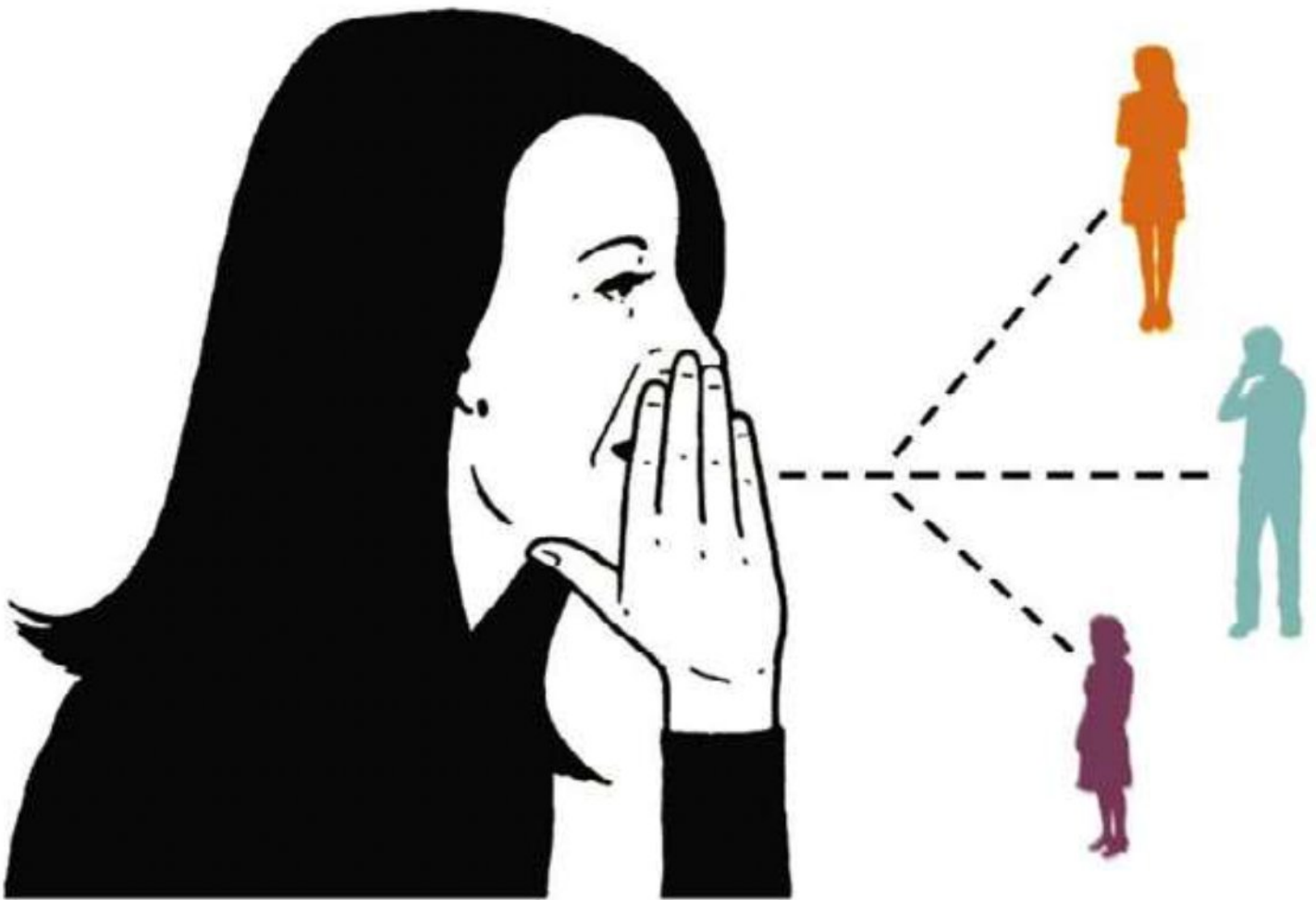
Philippines	51%
China	49
Australia	47
India	47
United States	43
Canada	41
Malaysia	39
United Kingdom	38
France	37
Germany	37

Spouse is No. 1

Netherlands	49%
Spain	46
South Africa	45
Russia	39
United Kingdom	38
France	37
Mexico	35

Only Mom will do

Brazil	42%
--------	-----



Cut the hairdresser

Hairstylists get the lowest vote of confidence in every country polled. Russian men are the only respondents inclined to exchange secrets at the salon, with 20% selecting the stylist as their top choice.

The last to know

While mothers are the favorite choice in Brazil, you won't catch many Australians running home to Mom; Aussie mothers were the bottom pick, at 11%.

Couple confessions

In 11 countries, the older generation's top pick was a spouse. Only in China, France, and Mexico did younger respondents favor their partner more than older poll-takers did.



Ask Laskas

JEANNE MARIE LASKAS

▶ **In the six years** I've been married, I've become increasingly health conscious. I eat well, exercise, and try to be positive. My husband is the opposite. He has excuses for why he eats junk food, why he can't exercise, why he feels so cruddy. I try to make it easy for him by stocking nutritious food, but then he sneaks the high-fat stuff. His bad habits are starting to affect the quality of his life—and our family's. He gets angry and withdrawn when I try to help him. What can I do?

Till Health Do Us Part

Dear Till,
Tactical retreat!
Tactical retreat!
Your campaign to tame the wildebeest is backfiring. The help you offer is likely received as nagging or disapproval, and that's a recipe for shame and rebellion. His response to "Exercise!" is to exercise his right to eat.



on his own. Support him when he makes a healthy choice, but don't go overboard, and don't brag about your bran flakes. Proceed gently.

▶ **I just turned 80.** In years past, other family members have thrown their own parties to celebrate milestone birthdays. I didn't want to host a big party, but I did expect to get a phone call or card. The day passed unnoticed, with very

few exceptions. Feeling slighted, I'm reluctant to attend upcoming weddings and birthday celebrations involving those who ignored me. Am I wrong?

Peeved in Pittsburgh

Jeanne Marie Laskas is not a shrink, but she does have uncommon sense.

ILLUSTRATED BY ISTVAN BANYAI; FRANK VERONSKY

Dear Peeved,
Depends on what you're going for. If you want to be cranky and lonely, stay on the path of resentment and anger. If, on the other hand, you want to participate in the joys of friendship in your golden years, consider letting this go. Don't cut yourself off from the people in your life. Forgive them their failings, and join in the fun. Pull one trusted friend aside and say "You know, it hurt that so few remembered me on my birthday." Just saying "Ouch!" is the first step to relieving pain.

▶ **My fourth grader** *confided in me that she has seen a classmate cheating on tests. I told her to mind her business and not tell the teacher. The teacher should be able to catch the child cheating—I don't want my daughter labeled a tattletale. Should I approach the teacher?* *Irked Momma*

Dear Irked,
What would you do if you discovered your neighbor was a bank robber? Alert the authorities, or look the other way? (It is, after all, the security guard's job to keep the robbers out, not yours.) You have an opportunity to teach your child about good citizenship. She, not you, should go to the teacher, privately, and report the misdeed. Being labeled a tattletale is a risk we all take when we do the right thing. She saw someone do something wrong, and the burden of that knowledge is hers to carry responsibly.

Life's Little Etiquette Conundrums

▶ **I recently moved to a big city, and several of my old friends are excited to come visit me. My problem is that money is a bit tight. As much as I'd love houseguests, I'm worried about my finances. Is it rude to ask them to purchase the groceries?**

These friends love you enough to want to come share in your new adventure; they can handle the truth. It's all in how you present the request for financial grocery aid. No apologies! Tell them life in the big city is fun but expensive, and right now you're living on tap water, noodles, and popcorn. If they expect to eat better at your place, they'll need to join you at the market and pitch in.

▶ **My lunch companion** *at work is a good friend but swears like a truck driver. We eat in a large company cafeteria, and although she doesn't seem to notice the dirty looks from those who overhear her profanity, I cringe every time. How do I broach the subject without ruining our friendship?* *Don't Like Swearing*

Dear Swearing,
Try this: "What's up with the cursing? You're making me lose my appetite!" If that doesn't work, try sitting with someone else.

▶ **Send questions about manners, parents, partners, or office politics to readersdigest.com/laskas. Sending gives us permission to edit and publish.**

@Work

It's often a challenge to explain to strangers exactly what I do in the aerospace industry. At one gathering, I didn't even try. I just said, "I'm a defense contractor."

One of the guys was intrigued. "So, what do you put up mainly? Chain-link?"

John McGeorge, Queensland, Australia

A customer pulled up to my drive-through window at the fast-food restaurant where I work and requested something from the lunch menu.

"I'm sorry, but it's 10:15," I told her. "We're only serving breakfast now."

After thinking it over, she asked, "Do you have anything on your breakfast menu that tastes like lunch?"

Beth Tilson, Moultrie, Georgia

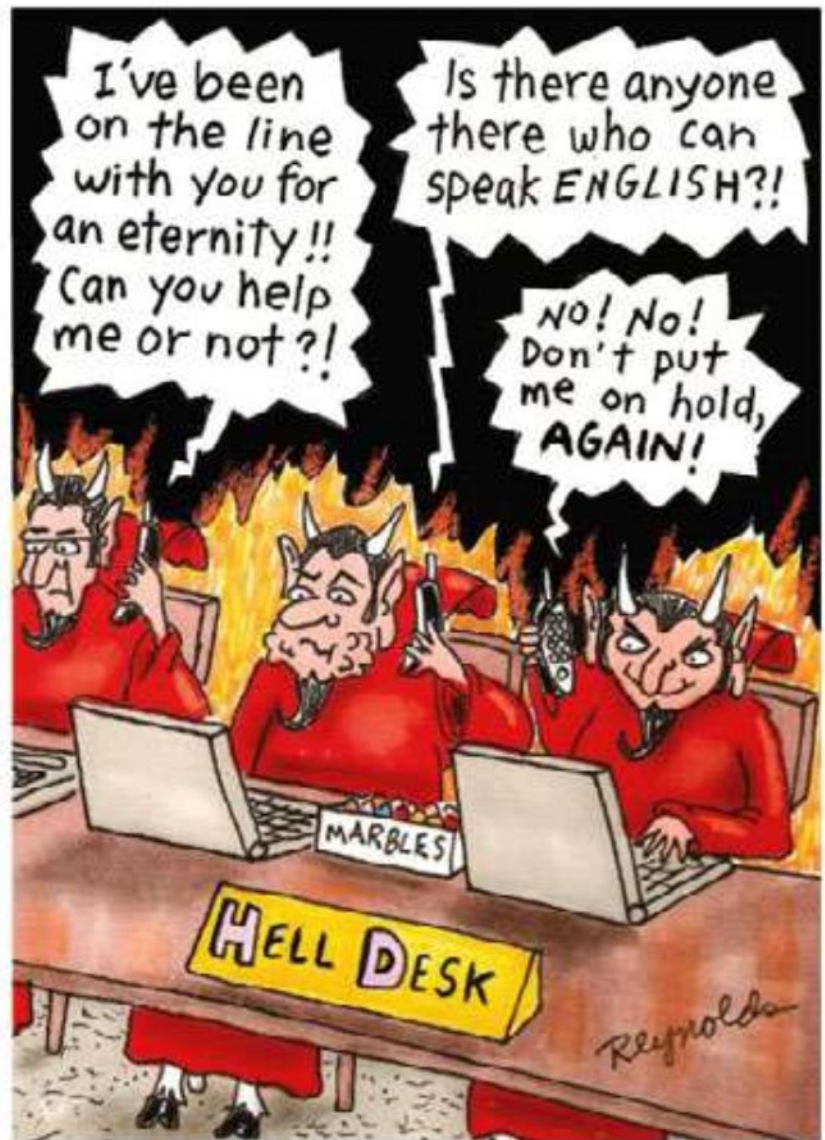
Yeah, Right ...

We know you'd never do it, but some people concoct crazy stories so they can skip work. Here are a few, collected by hiring managers:

- Employee said a chicken attacked his mom.
- Employee had a hair transplant that went bad.
- Employee called

"Where is Pearl Harbor?" I asked my fourth-grade history class. "Here's a hint: It's a place where everyone wants to go." One student blurted out, "Candy Land!"

Kara Silver, Plainfield, Indiana



in sick from a bar at 5 p.m. the night before.

■ Employee had to mow the lawn to avoid a lawsuit from the homeowners' association.

■ Employee's finger was stuck in a bowling ball.

■ Employee fell asleep at his desk while at work and hit his head, causing a neck injury.

Source: careerbuilder.com

@ Work in the News

Best Reason to Strike

Workers at the Carlsberg brewery in Denmark walked off the job after losing a prized perk: unlimited beer at work. They now have to settle for three beers at lunch. A worker told the *Wall Street Journal* that wasn't enough: "I need a beer when I take a cigarette break."

Worst Employee

When a Middletown, New Jersey, police officer retired, he cited low morale. But he didn't leave quietly. While walking the beat on his last day, he wrote 14 tickets for expired inspection stickers ... all to police patrol cars.

Source: Associated Press

Most Candid Pitch

Posted by the *Illinois Valley News*: "How bad do you want to be a reporter? Bad enough to work nights and weekends? In exchange for your long hours and tireless efforts, you will be rewarded with low pay and marginal health insurance."

Source: journalismjobs.com

Court of Less Appeal

If you're interested in becoming a lawyer, you'll need a degree. But as these court transcripts reveal, the question is, in what?

Attorney: "How was your first marriage terminated?"

Witness: "By death."

Attorney: "And by whose death was it terminated?"

Witness: "Guess."

Attorney: "Doctor, how many of your autopsies have you performed on dead people?"

Witness: "All of them. The live ones put up too much of a fight."

My coworker at the hotel was miserable at his job and was desperately searching for a new one.

"Why don't you work for your mother?" I suggested.

He shook his head. "I can't," he

said. "Her company has a very strict policy against hiring relatives."

"Who made up that ridiculous rule?"

"My mother."

Doug Barilla, Milwaukee, Wisconsin

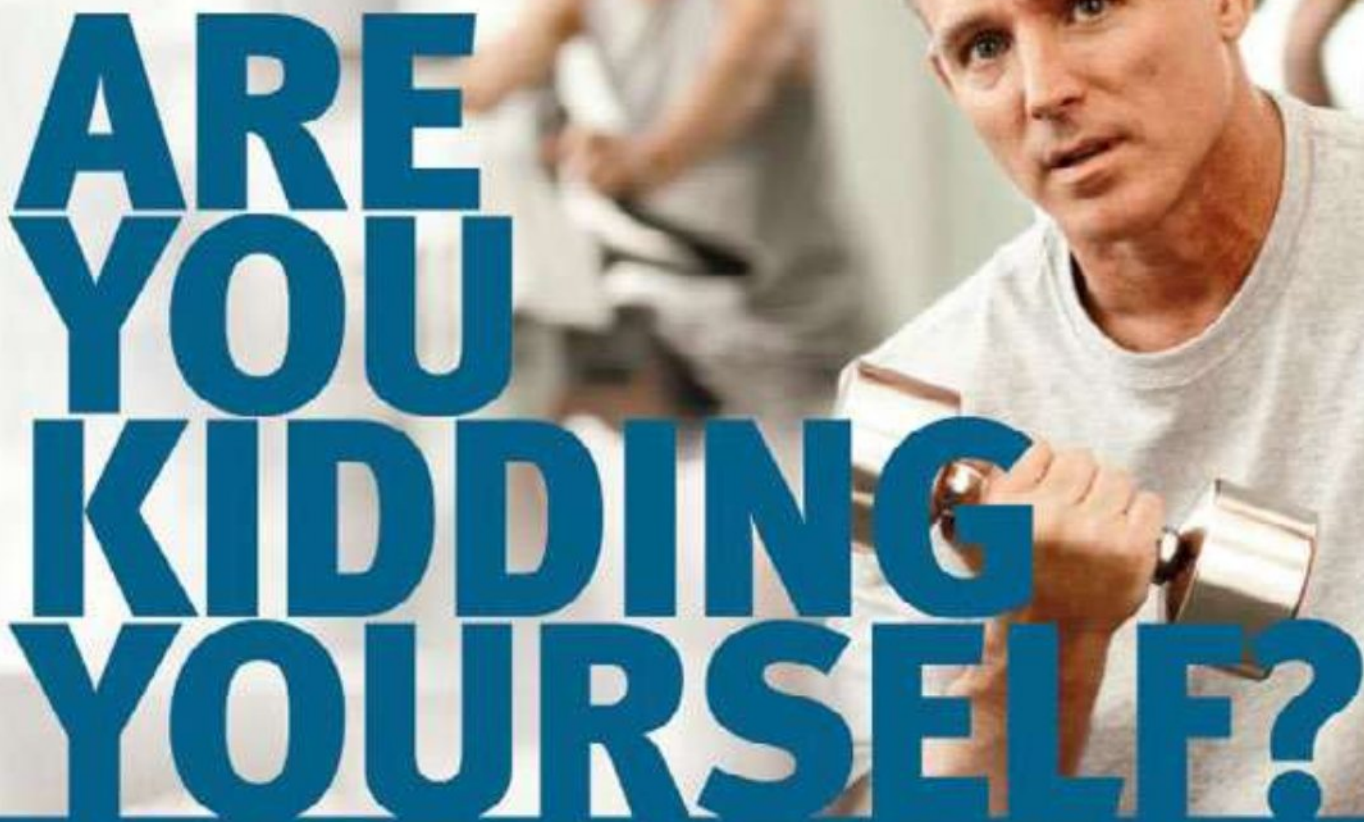


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ARE YOU KIDDING YOURSELF?

A LOT OF PEOPLE THINK EXERCISE AND HEALTHY DIET ARE ENOUGH TO LOWER HIGH CHOLESTEROL. FOR 2 OUT OF 3, IT MAY NOT BE.


INDICATION:

LIPITOR is a prescription medicine that is used along with a low-fat diet. It lowers the LDL ("bad" cholesterol) and triglycerides in your blood. It can raise your HDL ("good" cholesterol) as well. LIPITOR can lower the risk for heart attack, stroke, certain types of heart surgery, and chest pain in patients who have heart disease or risk factors for heart disease such as age, smoking, high blood pressure, low HDL, or family history of early heart disease.

LIPITOR can lower the risk for heart attack or stroke in patients with diabetes and risk factors such as diabetic eye or kidney problems, smoking or high blood pressure.

You are encouraged to report negative side effects of prescription drugs to the FDA.

Visit www.fda.gov/medwatch or call 1-800-FDA-1088.



Did you know, more than 80% of people who have had heart attacks have high cholesterol? For 2 out of 3 people with high cholesterol, diet and exercise may not be enough. If you haven't been successful in trying to lower your cholesterol on your own, stop kidding yourself. Talk to your doctor about your risk and if Lipitor is right for you. You can also learn more at lipitor.com or call 1-888-LIPITOR.

- When healthy diet and exercise are not enough, adding Lipitor may help.
- Along with diet, Lipitor has been shown to lower bad cholesterol 39-60% (average effect depending on dose) and Lipitor is FDA-approved to reduce the risk of heart attack and stroke in patients who have heart disease or risk factors for heart disease. These risk factors include smoking, age, family history of early heart disease, high blood pressure and low good cholesterol.

IMPORTANT SAFETY INFORMATION:

LIPITOR is not for everyone. It is not for those with liver problems. And it is not for women who are nursing, pregnant or may become pregnant.

If you take LIPITOR, tell your doctor if you feel any new muscle pain or weakness. This could be a sign of rare but serious muscle side effects. Tell your doctor about all medications you take. This may help avoid serious drug interactions. Your doctor should do blood tests to check your liver function before and during treatment and may adjust your dose.

Common side effects are diarrhea, upset stomach, muscle and joint pain and changes in some blood tests.

Please see additional important information on next pages.



LIPITOR[®]
atorvastatin calcium
tablets

DON'T KID YOURSELF

Find out more at lipitor.com

IMPORTANT FACTS



LIPITOR
atorvastatin calcium
tablets

(LIP-ih-tore)

LOWERING YOUR HIGH CHOLESTEROL

High cholesterol is more than just a number, it's a risk factor that should not be ignored. If your doctor said you have high cholesterol, you may be at an increased risk for heart attack and stroke. But the good news is, you can take steps to lower your cholesterol.

With the help of your doctor and a cholesterol-lowering medicine like LIPITOR, along with diet and exercise, you could be on your way to lowering your cholesterol.

Ready to start eating right and exercising more? Talk to your doctor and visit the American Heart Association at www.americanheart.org.

WHO IS LIPITOR FOR?

Who can take LIPITOR:

- People who cannot lower their cholesterol enough with diet and exercise
- Adults and children over 10

Who should NOT take LIPITOR:

- Women who are pregnant, may be pregnant, or may become pregnant. LIPITOR may harm your unborn baby. If you become pregnant, stop LIPITOR and call your doctor right away.
- Women who are breast-feeding. LIPITOR can pass into your breast milk and may harm your baby.
- People with liver problems
- People allergic to anything in LIPITOR

BEFORE YOU START LIPITOR

Tell your doctor:

- About all medications you take, including prescriptions, over-the-counter medications, vitamins, and herbal supplements
- If you have muscle aches or weakness
- If you drink more than 2 alcoholic drinks a day
- If you have diabetes or kidney problems
- If you have a thyroid problem

ABOUT LIPITOR

LIPITOR is a prescription medicine. Along with diet and exercise, it lowers "bad" cholesterol in your blood. It can also raise "good" cholesterol (HDL-C).

LIPITOR can lower the risk of heart attack, stroke, certain types of heart surgery, and chest pain in patients who have heart disease or risk factors for heart disease such as:

- age, smoking, high blood pressure, low HDL-C, family history of early heart disease

LIPITOR can lower the risk of heart attack or stroke in patients with diabetes and risk factors such as diabetic eye or kidney problems, smoking, or high blood pressure.

POSSIBLE SIDE EFFECTS OF LIPITOR

Serious side effects in a small number of people:

- **Muscle problems** that can lead to kidney problems, including kidney failure. Your chance for muscle problems is higher if you take certain other medicines with LIPITOR.
- **Liver problems.** Your doctor may do blood tests to check your liver before you start LIPITOR and while you are taking it.

Call your doctor right away if you have:

- Unexplained muscle weakness or pain, especially if you have a fever or feel very tired
- Allergic reactions including swelling of the face, lips, tongue, and/or throat that may cause difficulty in breathing or swallowing which may require treatment right away
- Nausea, vomiting, or stomach pain
- Feeling more tired than usual
- Allergic skin reactions
- Brown or dark-colored urine
- Your skin and the whites of your eyes turn yellow

Common side effects of LIPITOR are:

- Diarrhea
- Muscle and joint pain
- Upset stomach
- Changes in some blood tests

HOW TO TAKE LIPITOR

Do:

- Take LIPITOR as prescribed by your doctor.
- Try to eat heart-healthy foods while you take LIPITOR.
- Take LIPITOR at any time of day, with or without food.
- If you miss a dose, take it as soon as you remember. But if it has been more than 12 hours since your missed dose, wait. Take the next dose at your regular time.

Don't:

- Do not change or stop your dose before talking to your doctor.
- Do not start new medicines before talking to your doctor.
- Do not give your LIPITOR to other people. It may harm them even if your problems are the same.
- Do not break the tablet.

NEED MORE INFORMATION?

- Ask your doctor or health care provider.
- Go to www.lipitor.com or call 1-888-LIPITOR.
- Talk to your pharmacist.

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Rx only

IS THIS ANY WAY TO LOSE WEIGHT?

Actually, yes. Award-winning science journalist **Gary Taubes** explains (finally!) why conventional diets don't work—and what you can do to lose weight.

INTERVIEW BY LISA DAVIS

If obesity researchers are so smart, why are we so large? That's the question at the heart of Gary Taubes's new book, *Why We Get Fat—and What to Do About It*. After all, public health authorities have been hammering home a very simple message for the past 40 years: If you don't want to be fat, cut the fat from your diet. And in those years, obesity rates have gone from 13 percent to 22 percent to, in the last national survey, 33 percent.



PHOTOGRAPHED BY ERIK RANK; FOOD STYLING BY MARGARETTE ADAMS/MARNIE ROSE AGENCY

Taubes thinks he knows why: Obesity experts have gotten things just about completely backward. If you look carefully at the research, he says, fat isn't the enemy; easily digested carbohydrates are. The very foods that we've been sold as diet staples—fat-free yogurt, plain baked potatoes (hold the butter), and plain pasta (hold the olive oil, sauce, and cheese)—actually reset our physiology to make us pack on the pounds. And the foods that we've been told to shun—steak, burgers, cheese, even the sour cream so carefully scraped from that potato—can help us finally lose the weight *and* keep our hearts healthy.

As you might imagine, Taubes has stirred controversy with his contentions. Though he's known as an obsessive reporter and a science nerd (he studied applied physics at Harvard and aerospace engineering at Stanford and has won numerous science-writing awards), he's been called a dangerous cherry picker of data—someone who searches through decades of studies to weave together the bits he likes. But a series of studies in the past five years has compelled researchers to rethink their long-held prejudices against low-carb diets. These days, scientists like Mitchell Lazar, MD, who directs the diabetes institute at the University of Pennsylvania, and cardiologist Allan Sniderman, MD, at McGill University, take Taubes's argument very seriously.

Taubes calls his ideas just an alternative hypothesis for why we get fat. Then, with trademark confidence, he adds that this radical rethinking is “al-

most assuredly true.” Taubes sat down with our health editor, Lisa Davis, to share the Reader's Digest Version of his theory. Here's what he wants you to know.

THE OBESITY EXPERTS ARE WRONG.

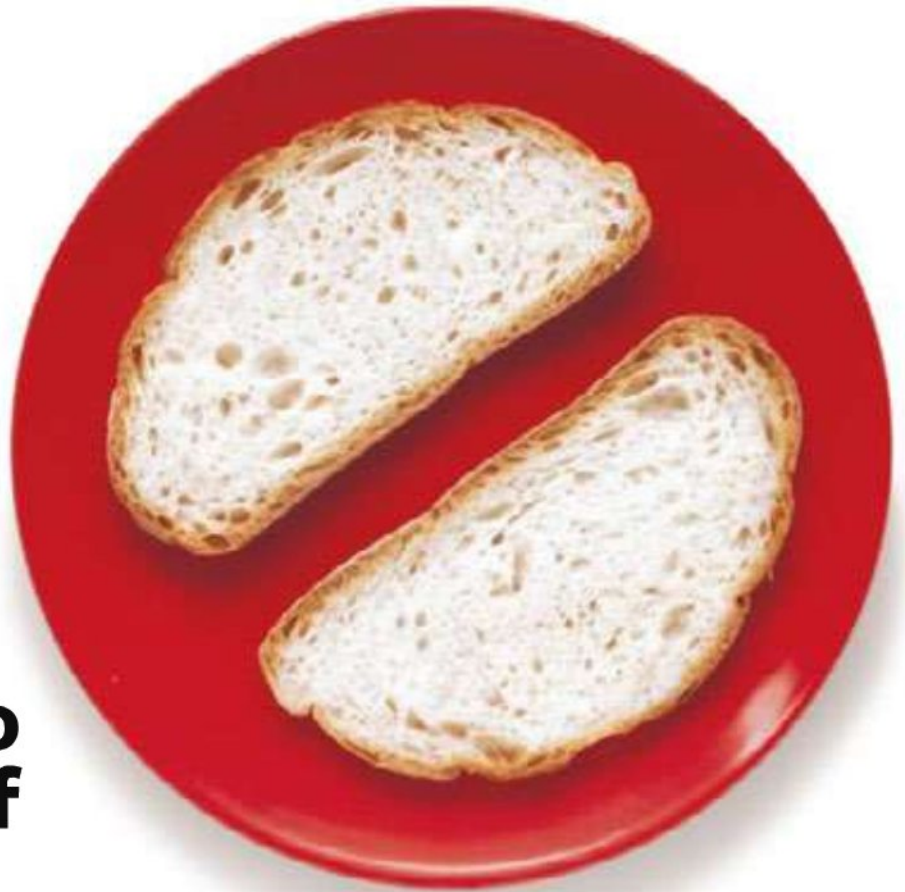
“There's this absolutely fundamental idea when it comes to weight and obesity—that the way we get fat is that we take in more calories than we expend. It's the gluttony and sloth hypothesis: We eat too much and exercise too little. It sounds undeniable, as commonsensical as can be, and it's actually nonsense—it doesn't tell us anything meaningful about why we get fat. If I get fatter, it's obvious that I must have overeaten. But if you ask the question, *Why* did you overeat? Well, that question I can't answer—not with the calories-in/calories-out theory of weight gain.

“People react to this as though I'm questioning the laws of thermodynamics. I'm not questioning them; I'm saying they're not relevant. Yes, if you're getting fatter, you're taking in more calories than you're burning—the question is why. There's a ridiculously simple alternative hypothesis, which is that you don't get fat because you're overeating. You overeat because you've developed a disorder in the way your fat tissue is regulated.”

DIETS DON'T WORK.

“Over the past 40 years, studies have shown that you can't get a clinically

What we tell people to do to lose weight—eat less and exercise—is exactly what you’d do if you wanted to make yourself hungry.



significant effect from cutting calories. At the same time that experts are saying that gluttony and sloth are responsible for weight gain, they’ll tell you that we know no diet works, and that’s why we have to come up with some anti-obesity drug that’ll make billions. That’s why the medical community considers bariatric surgery—actually altering your digestive system—a reasonable solution.

“It shouldn’t be a surprise that diets don’t work. Obese people have spent their lives trying to eat less. There are probably a few people who gave up early and said, This is hopeless and I’m going to have a good time. But for the most part, you can define an obese person as someone for whom eating less didn’t work. So the simple fact that a doctor tells

you to eat less—how much good is that going to do?

“If you cut calories, you’ll be hungry all the time—that’s a given. But what also happens is that you adjust your energy expenditure to match your reduced intake. Studies in animals show that if you restrict energy intake, their cells actually burn less energy, which is one reason that obesity researchers, in their honest moments, acknowledge that restricting calories is ineffective.”

IT’S IMPOSSIBLE TO COUNT CALORIES.

“Public health authorities want us to practice ‘energy balance,’ which is a new way to say that you shouldn’t take in more calories than you expend. So what does energy balance entail?

The low-fat diet that people have been eating in hopes of protecting their heart is actually bad for their heart.



“If you consume about 2,700 calories a day, which is typical if you average men and women together, that’s a million calories a year, or ten million calories in a decade. Over the course of a decade, you’re eating roughly ten tons of food. How accurately do you have to match calories-in to calories-out so that you don’t gain more than 20 pounds over the course of a decade? Because if you gain 20 pounds every decade, you’ll go from being lean in your 20s to obese in your 40s, which many of us do. And the answer is: 20 calories a day. If you take in an extra 20 calories a day and put it into your fat tissue, you will gain 20 pounds every decade.

“The point is, nobody can match calories-in to calories-out with that kind of precision. Twenty calories

is like a single bite of a McDonald’s hamburger. It’s a couple of sips of Coca-Cola or a few bites of an apple. No matter how good you are at counting calories, you can’t do it. So if practicing energy balance is really the way to keep from getting fat, the question is, Why aren’t we all fat?”

EXERCISING WON’T KEEP YOU THIN.

“People in nutrition are so keen on making us lose weight by exercising that they’ve forgotten the fact that the more energy you expend, the hungrier you get. Imagine I asked Alice Waters, the great chef from Chez Panisse, to my house to make a 12-course feast, and you’re invited. And I’ve got a pastry chef coming and a gourmet butcher—in Berkeley they

(BUTTER) MICHAEL ROSENFELD/GETTY IMAGES; (PASTA) DAVIES AND STARR/GETTY IMAGES; (BACON) JAMES AND JAMES/GETTY IMAGES; (ORANGE) EVGENIE IVANOV/GETTY IMAGES; (BRUSSELS SPROUT) JUSTIN LIGHTLEY/GETTY IMAGES;

5 WAYS TO GET STARTED

Eric Westman, MD, who directs the Duke Lifestyle Medicine Clinic in Durham, North Carolina, and who cowrote *The New Atkins for a New You*, has been studying low-carb diets for 12 years. His five guidelines:

1 DON'T TRY TO LIMIT FAT. “Eating high-fat foods keeps you from feeling deprived,” says Dr. Westman. Bacon, cheese, heavy cream, sour cream, cream cheese, mayonnaise, butter, and oil are all healthy parts of a low-carb diet.



2 SAY GOODBYE TO PASTA, BREAD, AND RICE. To lose weight, most people have to stay under 20 grams of “net” carbs per day (*net carbs* refers to the number of grams of carbs minus grams of fiber, because fiber doesn't send blood sugar spiking). That rules out bread (two slices contain about 24 grams of net carbs), rice (over 40 grams in a cup), and pasta (about 40 grams per cup). Once you hit your goal, you can slowly add in more carbs that don't have a big impact on blood sugar.



3 BE PICKY ABOUT VEGETABLES. Starchy (carb-heavy) vegetables—most of the ones that grow underground, as well as corn—are off-limits. But you can have up to four cups daily of leafy greens such as lettuce, spinach, and collard greens. Limit broccoli, cauliflower, green peppers, okra, and Brussels sprouts to two cups per day.



4 SAY NO TO HIDDEN SUGARS. Fruit, that legendary healthful food, is packed with sugar, aka carbohydrates. So are fruit juices. Other concentrated sources include soda, cakes, and candy. You may be able to keep diet sodas, light beer, dry wine, and sugar-free sweets on the menu and still lose weight.



5 EAT AS MUCH AS YOU WANT. When it comes to protein and fat, “you don't have to use portion control,” says Dr. Westman. “Your hunger will go down automatically when you start eating this way—all you have to do is stop eating when you're full.”



Beth Dreher

have gourmet butchers now. Bring your appetite!

“The two things you’re likely to do are that you might skip lunch, and you might exercise more. You might even say, Look, Taubes lives three miles from my house—I’m going to walk there, and by the time I get there, I’m going to be hungry. The joke is that the two things we tell people to do in order to lose weight—eat less and exercise more—are the exact two things you would naturally do if you wanted to make yourself hungry.

“When you look at the data from research on obesity and exercise, there’s no compelling evidence that exercise has any effect on weight. The American College of Sports Medicine says in its guidelines, which were issued jointly with the American Heart Association, that it’s reasonable to assume that if you exercise more, you’ll be less likely to gain weight over time. But in those same guidelines, it also says that so far, data to support this hypothesis are not particularly compelling. Which is the kiss of death. It’s a 100-year-old hypothesis—if the data aren’t compelling by now, you can be pretty confident that the hypothesis is wrong.”

BUT THERE IS A WAY TO LOSE WEIGHT.

“Our mothers grew up believing refined carbohydrates and starches were fattening—pasta, potatoes, bread, sweets, rice, and corn. And they were right: These foods literally make you fat. Sweets are probably the worst,

along with sugar-water combinations, which can be anything from fruit juice to Coca-Cola. The reason is that refined carbohydrates raise your insulin levels. Scientists have known since the early 1960s that insulin is the primary hormone that regulates your fat tissue. This is not controversial—if you go to an endocrinology textbook and look up what makes a fat cell fat, it’ll tell you all the ways insulin does it. Then you look up *obesity*, and it’ll say people get fat because they eat too much and exercise too little. There’s a complete disconnect between the fundamental science and the cause of human obesity.

“All I’m saying to obesity researchers is, Pay attention to the hormonal and enzymatic regulation of the fat tissue. If you do, you’ll get a different answer for what causes obesity and what cures it. Basically, Dr. Atkins got it right with the Atkins diet, although he didn’t get all the science right.”

YOU NEED TO EAT FOODS THAT KEEP INSULIN LOW.

“We tend to think of our fat cells as a long-term bank account, where your body stores excess calories as fatty acids, which you don’t use until you’re starving. But the reality is that your fat tissue is more like your wallet, and your meals are like going to the ATM. You know how you use the ATM: You put the cash in your wallet and gradually spend it, and when you get too low, you go back to the ATM.

Not everyone gets fat from eating carbs, and getting rid of carbs might not make you lean. But it will make you the leanest you can be.



But insulin locks the money in your wallet, so you've got to keep going back to the ATM. Your fat cells are getting fatter and fatter, but you can't get at the fatty acids that are stored inside them. So you get hungry and you eat again."

A LOW-CARB DIET IS KEY.

"When I was first getting into this subject, I tried the Atkins diet as an experiment. It had never crossed my mind to do that—I associated it with quackery. But now I would go to a restaurant with friends, and they would get skinless chicken breast with green salad, and I would get a pepperoni and melted mozzarella cheese appetizer and a steak. The weight just dropped off. If I walked down the street, it was

like you could see the pounds lying behind me on the sidewalk.

"I eat eggs and bacon or sausage for breakfast every day. At lunch, I might have three quarters of a pound of hamburger with cheese, no bun. Dinner is a pound of steak or half a roast chicken or the largest piece of fish I can buy, and vegetables. You eat what you want until you're satiated—you just don't eat the things that will make you fat.

"You go on this diet and eat breakfast, and suddenly it's two o'clock and you're thinking, Oh, I really should eat lunch. But you're not hungry. I used to eat a very low-fat diet, and I was hungry every two hours or so. And I gained weight every year.

"The biggest study so far on low-carb diets came out last year. It compared a low-fat diet in which you got

1,200 to 1,800 calories per day with a low-carbohydrate diet where you could eat as much as you wanted. The researchers kind of buried this part of it, by the way. They barely touched on the fact that this is a severely calorie-restricted diet compared with an all-you-can-eat diet. But what they found was that the low-carb diet did just as well. To me, this has been the most important observation in the field of

WHAT A LOW-CARB DAY LOOKS LIKE

A typical menu for Eric Westman, MD, who directs the Duke Lifestyle Medicine Clinic in Durham, North Carolina:

BREAKFAST

2-egg ham-and-cheese omelet
Diet cranberry juice
Coffee with cream and sugar-free sweetener

LUNCH

Salmon salad (2 cups lettuce and 1 cup salad vegetables)
Water or diet soda

DINNER

8-ounce rib eye steak with blue cheese
1 cup of “mock mashed potatoes” (cauliflower with butter, cream, and bacon)

DESSERT

Sugar-free gelatin or sugar-free gelatin chocolate pudding (made with heavy cream)

obesity research: that you can have an effective diet that doesn't restrict calories. But the establishment has ignored that aspect of it. And in most of the studies that have been done, a low-carb diet actually does better than a low-fat, low-calorie diet.”

HIGH FAT IS BETTER FOR YOUR HEART.

“The idea that dietary fat causes heart disease is deeply, deeply ingrained. We all know the Atkins diet kills people—that's what we've been told, anyway. When I started eating this way, my wife made me get a life insurance policy. But over the past decade, dozens of studies have finally looked at the Atkins diet, and they show that heart disease risk factors improve more on this kind of low-carb diet than on the low-fat, low-calorie diet that doctors and the American Heart Association want you to eat. Your HDL goes up, which is the most meaningful number in terms of heart health. Small, dense LDL—which is particularly dangerous—becomes large, fluffy LDL. And not only does your cholesterol profile get better, your insulin goes down, and your insulin resistance goes away, and your blood pressure goes down.

“The low-fat diet that people have been eating in hopes of protecting their heart is actually bad for their heart, because it's high in carbohydrates. The public health effort to get everyone to eat that way is one of the fundamental reasons that we now have obesity and diabetes epidemics.”

IF YOU HAVE A WEIGHT PROBLEM, IT'S NOT YOUR FAULT.

“The past 40 or 50 years, obesity research has basically been an attempt to explain why obese people just don’t have the moral rectitude of lean people, without actually saying that. It’s terribly damaging. It’s inexcusable, but it’s still the conventional wisdom. Most doctors don’t want to deal with obese patients because they think they’re dealing with someone who simply doesn’t care enough to do what they do: Eat in moderation, and exercise.

“I’ll walk down the street and see somebody who’s obese, and I can’t see it as anything but a hormonal disorder. Not everyone gets fat from eating carbohydrates—it has to do with how sensitive your cells are to insulin and specifically how sensitive your fat cells are versus your muscle cells. But some huge percentage of the people who do get fat got that way because of the carbs in their diet. If you’ve been fat for a long time, getting rid of car-

bohydrates might not make you lean. But the leanest you can be is on the diet with the fewest carbohydrates.

“Are there some cautions? Yes—some people feel low energy while their bodies adjust to this way of eating, though adding a little salt or bouillon to your diet can take care of that. A low-carb diet can reduce your blood pressure, too, so you might have to adjust your medication—if you have a medical condition, you should talk to your doctor first. But basically, I’m just saying, Eat what humans evolved to eat. Highly refined grains and sugars were not part of our diet for 99.999 percent of human history. Back when we were hunter-gatherers, we ate meat as often as we could get it, and when we ate plants, they were much tougher and higher in fiber than they are today—much lower in digestible carbs, in other words. This isn’t a diet. The fundamental idea is, Don’t eat the foods that make you fat. Beyond that, you can eat as much as you want.” ■

THE CUSTOMS LINE

“Say something funny!” That’s what people say when they find out I’m a comedian. But how would they feel if I found out they were a plumber and said, “Fix my sink!”? So when someone asks me to say something funny, I reply, “You’re good-looking!” And they laugh. Usually.

Once at JFK airport, the customs guy looked at my paperwork and saw that I was a comedian. “Say something funny,” he commanded.

“You’re good-looking,” I shot back.

There was a pause, followed by a smile. Then he pulled me aside and went through all my luggage.

Eddie Brill, comedian and comic booker for Late Show with David Letterman

Miracle Boy

Pulled from the rubble of Haiti's earthquake after eight days of unimaginable suffering, Kiki Joachin and his triumphant smile captivated the world. Today he and his family struggle to rebuild their home, their lives—and their hopes.

BY KENNETH MILLER

IPAD EXTRA To watch an exclusive video interview of Kiki and his family, download the *Reader's Digest* magazine app from the iTunes store.





January 19, 2010:
A jubilant Kiki is
rescued by two
U.S. firefighters.

Deep in the Haitian countryside, three hours from teeming, quake-torn Port-au-Prince, Moïse “Kiki” Joachin shares a two-room wooden shack with his older sister and younger brother, their mother, her parents, and four or five other relatives. Coconut and banana trees grow in the dirt yard, but a recent flood has wiped out the family’s gar-

den. So they buy food from vendors down the road, a strain on their minuscule budget.

“They’re really struggling,” says photojournalist Allison Shelley, who tracked down the family in November for *Reader’s Digest*. “The adults share a couple of mattresses on the floor, and the kids sleep on piles of clothes and comforters.” Even so, the Joachins are better off than many in this beleaguered country, where more than one million people still live in tent cities and more than 2,000 have died in a cholera outbreak. An estimated 100,000 children were left orphaned by last year’s earthquake, but Kiki, luckily, is not one of them.

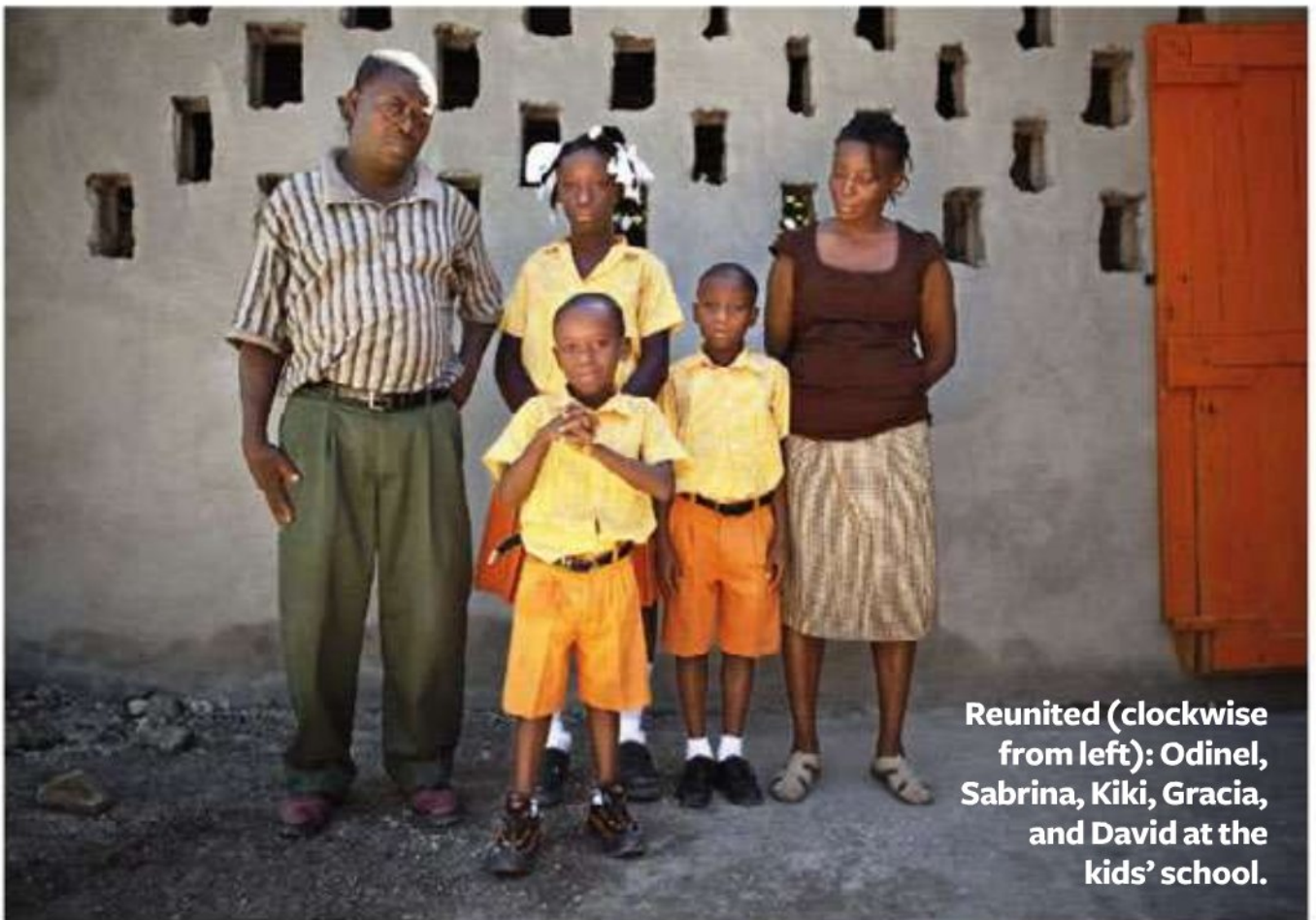
Even around his parents, however, he is a timid boy, given to one-word

answers, still struggling to find his place in these new surroundings. Asked which he likes better, the quiet village of Depale—where he has spent the past 12 months—or his bustling hometown, eight-year-old Kiki answers without hesitation: “Port-au-Prince.”

That’s where he was January 12, 2010, when a massive earthquake struck Haiti. As the ground began convulsing, Kiki’s mother, Gracia Raymond, ran from the porch of their apartment building in search of her five-year-old son, David, who was outside fetching water. Bloodied by falling cinder blocks, she began frantically burrowing through the crumbled concrete toward her five other kids. She could make no headway.

Bloodied by falling cinder blocks, Kiki’s mother frantically burrowed through the crumbled concrete.

Kiki’s father, Odinel, was trapped in his office at the Haitian customs service. It would take him two days to find his wife. When she told him that five of their children were buried in the wreckage of their home, “I asked a neighbor to chop off my



Reunited (clockwise from left): Odinel, Sabrina, Kiki, Gracia, and David at the kids’ school.

“I saw my brother die right next to me,” says Kiki. He wept as his sister Sabrina covered little Titite with her shirt.

head,” Odinel recalls, “because I had no reason to live.”

For eight days, Kiki was buried beneath the ruins of his apartment building. He and Sabrina, 11, huddled in a tiny space under tons of rubble, with no food or water, barely able to move; nearby lay Titite, four, and the bodies of their little sisters Yeye, nine, and Didine, 15 months.

“When our house fell down, I thought I was going to die,” Kiki recalls. On their fifth day in the ruins, he says, “I saw my brother die right next to me.” He remembers weeping as Sabrina covered little Titite with her T-shirt.

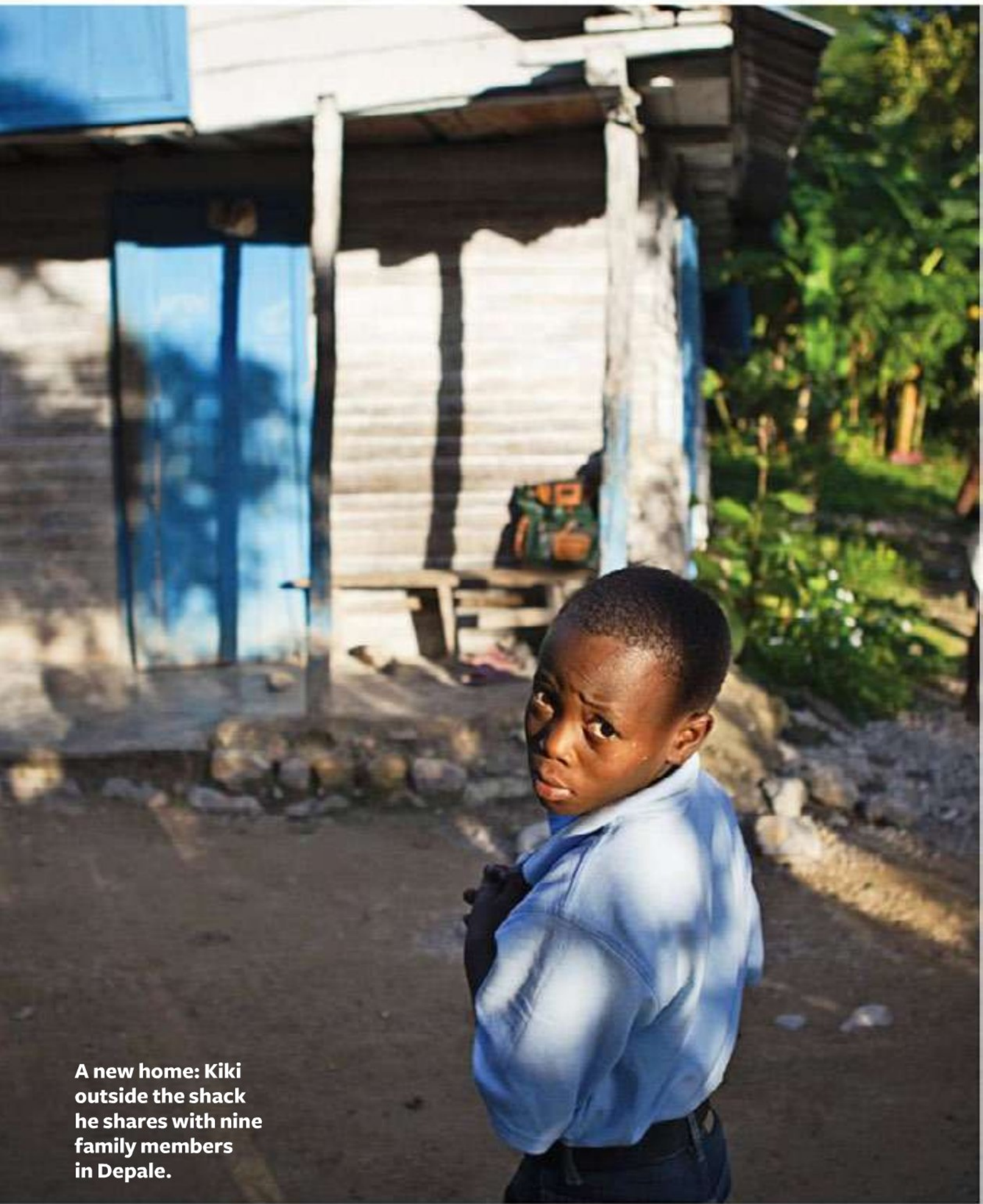
Then on the eighth day, a neighbor rummaging for her possessions heard Kiki’s faint cries for water. Two firefighters, New Yorker Chris Dunic and Virginian Brad Antons, spent the next four hours cautiously drilling through the debris and finally reached Kiki and his sister.

“The hardest thing was getting the kid to come up,” says Dunic, who was wearing a helmet and a face mask and



Constant sorrow:
Odinel at his family’s
former home in
Port-au-Prince.





**A new home: Kiki
outside the shack
he shares with nine
family members
in Depale.**

wielding a jackhammer. “We were scaring him.” Finally, Kiki’s neighbor reassured him. Dunic reached down and handed the boy to her.

As Kiki was raised from the hole, he broke into a blazing grin and flung out his arms in a victory gesture.

In the midst of a disaster that killed 220,000 people, Sabrina and Kiki’s rescue was a welcome bit of good news. “I smiled because I was free,” Kiki told reporters. “I smiled because I was alive.”

With his family safe in Gracia’s home village of Depale, Odinel haunts the streets of the capital, camping under a tarp near the ruins where his other children remain interred. His job at

“We’re not living very well,” Odinel says, “but I want my kids to continue to go to school. Afterward, they can learn a trade.”

the customs office has been cut back to three days a week; on his days off, he returns to Depale when he can afford the bus fare.

Kiki, Sabrina, and David walk three miles each morning to a school called



**Making progress:
Kiki, in class at
Ecole Renovation in
Jacmel, Haiti.**

Ecole Renovation, in the town of Jacmel. In Port-au-Prince many kids still haven't resumed their studies because most schools were destroyed by the quake. "I like school, even the homework," Kiki says, though the ordeal left him and his siblings so distressed that they failed all their classes last semester.

Like most schools in Haiti, Ecole Renovation charges tuition, nearly \$100 a year per child. Unable to keep up with the payments, Odinel owes \$400 and worries over how he will settle the debt. "We're not living very well," he says, "but I want my kids to continue to go to school. Afterward, they can learn a trade—any one they want."

DO MORE

Save the Children is one of many private organizations doing excellent work in Haiti. *Reader's Digest* is partnering with the group to help provide health care, clean water, sanitation, and school supplies to children like Kiki Joachin and their families. To donate, go to savethechildren.org/readersdigest, or mail your check to Save the Children, 54 Wilton Road, Westport, Connecticut 06880. Write "Reader's Digest" in the memo line on your check, and we'll report back on the good your donations do.

Information concerning Save the Children Federation, Inc., including financial, licensing, or charitable purpose(s), may be obtained, without cost, by writing to Save the Children Federation, Inc., Corporate Secretary, 54 Wilton Road, Westport, Connecticut 06880, or by calling 800-728-3843.

Kiki tells adults he hopes to be a mechanic when he grows up, or a truck driver, or perhaps an engineer so he can help rebuild his shattered country. But even talking about his dreams, Kiki is subdued. The joy that transfigured his face last January has seldom returned, his family says. Often he is silent and withdrawn.

Recently, however, his teacher says, he has been opening up in class, talking a little more, and trying his best to make progress. Kiki's country, meanwhile, has barely begun to dig itself out of the rubble. At press time, just \$897 million of the \$5.75 billion in reconstruction funds promised by 130 countries had been delivered to Haiti.

"The money isn't getting to these people," says rescuer Dunic, who has been following the situation through news reports. "They're no better off than they were right after the quake."

As the delays stretch on, families such as Kiki's face choices that people in richer nations rarely have to contemplate. Food or school? Tent in the city or shack in the country? Stay with your loved ones or travel to look for work?

"My dream is to start a business for my family," says Odinel, "maybe selling rice and beans, to be able to put another room on the house so the kids can sleep better."

Meanwhile, he and Gracia are grateful for what they have. "It was a miracle," she says. "God didn't want us to lose all of the children." ■

THE 2010 BLAME & SHAME AWARDS



COLD-BLOODED
BUREAUCRATS,
CARELESS
PENCIL PUSHERS,
AND LAZY
CIVIL SERVANTS:
HERE ARE OUR
WINNERS FOR
THE MOST
OUTRAGEOUS
ACTS OF
THE PAST YEAR.

BY SACHA Z. SCOBLIC



THE CRUEL AND UNUSUAL PUNISHMENT AWARD



Gene Cranick, 68, of Obion County, Tennessee, stood helplessly while firefighters watched his house burn to the ground. Cranick's rural Tennessee property lies outside the city of South Fulton, home to the nearest fire department. Residents of the rural areas there are asked to pay a \$75 fee for fire services. Fair enough. But when residents overlook their bill, are their homes, belongings, and even the lives of their pets suddenly worthless? That's how it felt to Cranick, who freely admits

he forgot to pay his fee on time. He and his family lost everything they owned, along with three dogs and a cat. "They could have been saved if someone had just put some water on them," says Cranick.

What's even more maddening is that Cranick offered both the 911 operator and the fire department the \$75. In fact, he was willing to pay anything to save his home. Which brings up the question: Is the point of the emergency-response fee to collect needed funds for an overworked fire department, or a kind of "protection" designed to punish those who don't pay up? And what if a child is trapped inside a burning building? When the fire department arrived at Cranick's farm, they ignored his pleas and made no attempt to save his property—though they spilled plenty of water on his neighbor's home.

South Fulton mayor David Crocker sees it in purely mercenary terms. "It's a service we offer," he told reporters. "Either they accept it, or they don't."

Surprisingly, Cranick's wife, Paulette, 67, told reporters she harbors no ill will against the no-pay, no-spray fire department. "You can't blame them if they have to do what the boss says to do."

But the decision to let the home burn was "incredibly irresponsible," said Harold Schaitberger, president of the International Association of Fire Fighters. "Professional career firefighters shouldn't be forced to check a list before running out the door to see which homeowners have paid up."

THE ABSENT AND ALMOST FORGOTTEN AWARD



When Maureen Womack took over as executive director of the Norfolk, Virginia, Community Services Board, she made a point of trying to get to know all her new employees. But one employee was missing—and had been for 12 years. Though Womack wouldn't comment on the ongoing investigation, which is currently with the Norfolk City Attorney's Office, she has acknowledged that one employee on the board's payroll "had not reported to work in years."

According to city officials, the employee drew a salary of \$25,000 to \$40,000 a year. That's \$300,000 to \$480,000 plus full benefits over the past 12 years—for not a single day of work. The Community Services Board is an independent organization that relies mainly on federal and state funding, with 14 percent of its budget coming from city dollars. Which means that the American taxpayer footed the bill for the salary of this no-show fraud.

"I'm horrified," says Norfolk mayor Paul Fraim. "How could something like this have gone on for so long?" What makes it worse, says Fraim, is that the Community Services Board helps some of the needi-

est members of the city of Norfolk. "This reflects poorly on everyone involved in local government."

Late last year, the ghost employee was finally fired. Womack's office issued a statement reading "The City Attorney's Office ... took appropriate steps to prevent any further payments to the employee, and the employee was terminated."

City Attorney Bernard Pishko has said that the hooky-playing employee "offered virtually no explanation" for cashing all those checks and accruing benefits for no work, and she may be forced to pay back the money. We certainly hope so.



THE REPORTS OF HER DEATH ARE GREATLY EXAGGERATED AWARD



When Judy Rivers was turned down by her bank after she asked to open a safe-deposit box, she could hardly believe the reason: According to bank records, she was dead. This came as news to Rivers, who at 58 was in good health and living in Jasper, Alabama. But apparently her Social Security number had been listed as “deceased.”

“Needless to say, I was startled,” Rivers told MSNBC’s Bob Sullivan.

Rivers went straight to the Social Security Administration. They confirmed that she was alive, much to her relief. But when Rivers’s applications for credit cards were turned down, when she couldn’t get her bank to issue her replacement debit cards, and when retail stores called the cops on her after her cards were rejected, Rivers was at her wit’s end. She even feared being “led away in handcuffs” for identity theft—of her own identity.

How could this happen? It turns

out that an investigative agency called Chex Systems, which conducts credit and background checks for retailers, banks, and services, had mistakenly listed Rivers as dead. Mistakes enter the system, says Jay Foley, head of the Identity Theft Resource Center, through a combination of fraud and error—“some smart guy tries to duck a debt collector by saying, ‘I’m dead.’” Then a company like Chex takes down the wrong number, which is fed into the financial-reporting system. The company, like other credit-checking



organizations, doesn't fact-check. It also doesn't require a death certificate, which means the firm's error can become the absolute truth.

If this happens to you, here's how to untangle yourself from the maddening mistake of a credit-checking company that doesn't check its facts. "Get a letter from the Social Security Administration verifying that you are alive and a letter from local police verifying [that you have a] driver's

license, and send them to the credit agency," says Foley.

Rivers, meanwhile, is still wading through the bureaucracy at Chex Systems. And she's in good company. Foley says that thousands of Americans suffer digital deaths every year and end up lost in some daunting bureaucratic labyrinth. Judy Rivers, for one, would like to return from the dead, and, she says, "I want to be able to write a check."

AND SOMETIMES THE LITTLE GUY WINS

Signed Off Barry Tuck was outraged at Verizon's unwillingness to fix an \$800 overcharge. When the company canceled his service, Tuck spray-painted, in big blue letters on a large piece of plywood, "Honk if Verizon Screwed U Over" and displayed it outside a Verizon store in South Boston, Virginia. Company employees threatened to call the police, but Tuck didn't budge and eventually got the manager's attention. His service was reinstated and the overcharge was corrected, but Tuck's trust has yet to be won. "A ton of people have been having problems," he says. So he's keeping the sign—just in case.

Source: southsidecentral.com

Not for Sale Eminent domain cases usually end the same way: The government wins; the citizen moves. Not Earl Giefer, a 94-year-old farmer in Oak Creek, Wisconsin. The 25-acre property he inherited in 1931 was worth much more to Giefer than the \$1.2 million offer made by the city of Oak Creek. After a battle that one city representative deemed "a PR nightmare," Giefer is staying put, and the city promises not to disturb him again. "At 94, why should I go anywhere?" he says.

Sources: todaystmj4.com and thedailyreporter.com

Hanging Up Michael Montoya tried customer service first. When his \$1,000 two-year-old Hewlett-Packard laptop

died, the victim of a faulty chip, he explained the problem, but the company demanded \$279 to fix it. Outraged, he hung up and called back, explaining that the chip had a history of defects. Rebuffed again, he sued the company in small claims court. "It's intimidating because you know they have lawyers at their disposal," Montoya says. But he still won a \$750 settlement. (HP denied any liability.) To help others, Montoya has posted a 26-page guide on the Web on how to file similar small claims: voidthevoid.com/lawsuitpdf. "This is the way to get a big company's attention," Montoya says.

Source: thebismarcktribune.com

Natalie van der Meer

THE GAMING THE SYSTEM AWARD



California welfare recipients have found that state-issued debit cards can make accessing cash really convenient. Perhaps too convenient. It turns out that the debit cards, meant to help poor families feed and clothe their children, work as well in a strip club or a casino as they do in a grocery store.

According to an investigation by the *Los Angeles Times*, more than \$12,000 in welfare funds was dispensed at strip clubs—places with names like Star Strip and Seventh Veil. But that’s nothing compared with the government assistance doled out at casinos: Within one year, a staggering \$1.8 million from the Temporary Assistance for Needy Families program was dispensed at casino and poker-room ATMs.



The state of California was just trying to help welfare recipients access their benefits at more locations—“so they wouldn’t have to carry around large sums of cash,” says Amy Palmer of California’s Department of Health and Human Services. Unfortunately, ATMs are found, well, just about everywhere.

“Not enough thought was given to the kinds of locations where access was being made available,” admits Palmer. Luckily, the state has now come to its senses and put an end to this risky practice. Sounds like a better bet to us.

THE HEARTLESS CIVIL SERVANTS AWARD



When you call 911, you expect that help will be on the way. But after 50-year-old Curtis Mitchell dialed Pittsburgh 911 with severe abdominal pains, no ambulance came for him. So he called again. And again.

In excruciating pain, Mitchell called 911 a whopping ten times over the course of one weekend before he died at home. Transcripts of his calls even show Mitchell saying, “I need a paramedic ... [My stomach] is killing me.”

So what happened? Due to heavy

snow in the area, paramedics could get only within four blocks of Mitchell's house. But instead of hitting the pavement and walking to Mitchell's home, the paramedics called Mitchell and told him he would have to come to them.

"That's the thing that disturbs me most," says Sharon Edge, Mitchell's fiancée. "When [the paramedic] made the comment, 'If he wants a ride, he's gonna have to come to the truck.' What are they running? A transportation system? I thought it was to save lives."

"It's unacceptable," said Mike Huss, director of Pittsburgh Public Safety,

at the time of the incident. "You get out of the damn truck and you walk to the residence."

The city is facing a civil suit from Mitchell's children. Meanwhile, two emergency medical technicians and one paramedic were fired over the incident (they've appealed the decision), and one additional paramedic was suspended for a week.

All of this is cold comfort to Edge, who thought that first responders were supposed to be "dedicated people who would go beyond the call of duty."

For some, apparently, that's only if the weather permits. ■

ACTS OF LOVE

If endear is earned
and is meant to identify
two halves

then it composes
one meaning

which means
a token

a knot
a note

a noting in the head
of how it feels

to have your heart
be the dear one

Pam Rehm

SMALL WORKS (FLOOD EDITIONS).
TO READ MORE POETRY, VISIT
POETRYFOUNDATION.ORG

**Alan Beaman,
here with wife
Gretchen, served
13 years in prison
for a crime he
didn't commit.**





The Best Day of My Life

AS TOLD TO LISA GOFF

The Day I Was Freed from Prison **ALAN BEAMAN**

I was 22 years old when I was sent to prison for murdering my former girlfriend Jennifer Lockmiller. One problem: I didn't do it. The only ones who believed me were my parents and my lawyers from the Center on Wrongful Convictions at Northwestern University. They worked tirelessly on my behalf, and in 2008, after I had been in lockup for 13 years, they got the Illinois Supreme Court to hear my appeal.

By all rights, I should have been excited. But I refused to let myself get carried away. What was the point? I'd already lost five challenges to my conviction. Five times I'd waited for a verdict, and five times I'd been sent back to my cell.

But still, I was hopeful. I had to be. The prosecutors pinned their case on the fact that Jennifer and I had sometimes had a volatile relationship. But I was never

physically violent. As for motive, they insisted I was jealous of her other boyfriends, which, truth be told, I was. But my lawyers had an ace up their sleeves—evidence left out of the first trial. Evidence that placed me 140 miles away at the time of the murder.

On the morning of May 22, 2008, the judges were ready to render their decision. A prison guard led me out of my cell. As I walked down the hall, I was intercepted by my friend Armando. He looked more nervous than me. “I can’t stand to hear you say you didn’t win,” he said. “So afterward, if you win, when you see me, don’t say anything—just jump up and click your heels.”

I went to a barren room at the Dixon Correctional Center. Inside was the warden. Minutes later, the verdict was in.

I walked back toward my cell in a daze. Armando spotted me from the dayroom. He searched my face for a

the State of Illinois. No matter how it winds up, they’ll never take away what happened on that day in May, the day I reclaimed my life.

The Day I Sang with Bruce Springsteen

NICK FERRARO

Singing onstage with Bruce Springsteen has been on the very top of my bucket list since 1975, when I was a high school freshman. Growing up in South Philly, we would cruise around in my buddy Bert’s Buick Skylark, blow out the eight-track, and go watch the races down on Front Street. Hell, my life was a Springsteen song.

I had been doing gigs as an Elvis impersonator since the late 1980s. I had this idea that if I could wear one of my Elvis suits to a Springsteen concert, Bruce might pull me up onto the stage to sing an Elvis song. Every

“**Bruce looked at me and said, “Okay, King, come on up.”**”

clue, but I just stared blankly ahead. Soon my pace quickened, until I was in a full sprint. I bent my knees slightly and sprang into the air. And after 13 years of abject hell ... I clicked those heels!

I’m currently suing five police officers and two prosecutors for conspiring to frame me. And because I wasn’t declared innocent, only not guilty, I’ve also filed a petition seeking a certificate of innocence from

time I went to one of his concerts, I thought, I’ll wear the suit this time! But I always chickened out.

On October 19, 2009, I had tickets for the show at the Spectrum in Philadelphia—the same place I’d seen my first Springsteen concert in 1980. There’s a lottery to get into the “pit”—right up next to the stage—and I got in. The stars were starting to align.

I showed up in my powder blue Elvis suit—complete with cape—carrying



Bruce Springsteen was all shook up when Nick Ferraro tried to sing again.

a sign that read “Can the King Sing with the Boss?” When Bruce saw it, he gave a little laugh and joked about it with the band. It was already the greatest day of my life. Then the band started playing “All Shook Up,” and Bruce looked at me and said, “Okay, King, come on up.”

Suddenly I’m face-to-face with Bruce and more than 18,000 screaming fans. Bruce handed me the microphone—it was like he’d handed me the keys to the E Street Band—and I gave it all I had. Well, it’s one for the money, two for the show!

After the song ended, I belted out the first few lines of “Blue Suede Shoes,” and Springsteen gave me a look that said, “Okay, dude, you’re done.” I gave one last bow, flourishing my cape. As I hopped down from the stage, Bruce shouted, “Elvis has left the building.”

The Day My Son Walked Again

CYNTHIA TEARE

The day your child takes his first steps is always a special day. But when my son Connor started walking, we knew something was wrong. He was 17 months old, and he walked on his tiptoes. The pediatrician told me not to worry, but soon Connor’s muscles began to lose strength. At three he showed signs of upper-body weakness, by five he couldn’t hold his head erect, and by the first grade, he’d gone from walking with leg braces to needing a power wheelchair. It was heartrending. His mind was fine, but as the day progressed, he tired and couldn’t hold a pencil to write. Within two years, he would be too tired to feed himself.

Everyone was puzzled—Connor’s symptoms didn’t fit into a tidy diagnosis. Physically, his body was contorted, but he was cognitively perfect.

We ran tests and more tests to rule out things such as muscular dystrophy. We got second, third, and fourth opinions, but no one could diagnose him. Frustrated, I started doing my own research. I had seen a magazine article in 2002, when Connor was four, about a very rare genetic disorder called dystonia, and I couldn't get it out of my mind. The children in the picture held their bodies just like Connor. I showed the picture to doctor after doctor, but they insisted "dystonia is too rare, and he doesn't have all the symptoms."

Finally, in 2004, we consulted Dr.

Shawn McCandless, a geneticist who took us seriously. That was gold for a mom, to be taken seriously. He agreed that Connor's symptoms had signs of dystonia, and a possible cure was L-dopa. But there was a catch—a big one. During drug trials with adults, it was discovered that possible side effects of the treatment included heart arrhythmia and hallucinations. No way was I putting my six-year-old through that. But when Connor's condition worsened, I had little choice.

For Connor to receive the L-dopa, it would need to be administered by a

Connor Teare can now walk, run, and shoot hoops.



neurologist. In 2006, we met with Dr. Irwin Jacobs, who eventually agreed to give him the drug. If it worked, he said, we would know immediately.

Dr. Jacobs gave Connor the first dose on June 21, 2007, when he was nine years old. The next morning, when I went in to wake him up, I found him kneeling on his bed—he hadn't done that since he was a toddler. He shouted, "Look at me, Mom!" Connor was excited, but I was afraid to let myself believe the medication was working.

Over the next few days, Connor kept getting stronger. He held his upper body much straighter after the first week. A few weeks later, he "furniture-walked," supporting himself on chairs and couches like a toddler does. He later walked holding

“**I could now believe the unbelievable: The medicine was working.**”

both of my hands, then just one hand. And on August 13, he walked across my mother's living room by himself.

I could now believe the unbelievable: The medicine was working. The child who had been too weak to feed himself dinner was walking. Since then, Connor has gone trick-or-treating, swum laps, run cross-country, and played on a basketball team.

Connor turned 12 on May 9. That's his birthday, but we mark another anniversary. Every year on June 21, we celebrate Dopa Day with a cake and presents. In essence, it's Connor's second "birthday," and it marks the best day of my life.

The Day I Launched a Man into Space

CHRISTOPHER C. KRAFT, JR.

The best day of my life was May 5, 1961, the day we launched the first American into space. Alan Shepard was the astronaut. I was the flight director at Mission Control, NASA's first. I sat at the console and monitored communications with the astronaut and the technical crew. The safety of the mission was primarily my responsibility.

There were dark clouds above Cape Canaveral that day, and after the liftoff was delayed several times, the weather cleared and the countdown proceeded. T minus three hours, T minus one hour, T minus ten minutes. We got to T minus two minutes. We

had practiced this, what, hundreds of times? But we had never gone beyond T minus two minutes.

We had done everything we could to ensure the safety of the astronaut, but I knew that anything could happen. Rockets were a dangerous thing in 1961—there was always the real chance it would explode on the pad or in space. I pushed that fact out of my mind and ran the checklist: Telemetry? Radar? Range safety? Blockhouse? The officers all said, "Go."

After T minus two, you kept your mouth shut unless you wanted to stop the count. If anyone did, I would flip the switch to ignite the escape hatch.

I'm glad no one did because I was shaking so hard, I could barely see my microphone in front of me. But when Shepard spoke those magic words, "Roger, liftoff!" it was like the first kick in a football game—everybody was ready to play.

The whole flight lasted just 15 minutes and 28 seconds. It was a day of glory, in retrospect, because everything went well—just like it was another simulation.

I feel as if I made a contribution to my country on that day. On May 5, 1961, I represented America. Not NASA, or an astronaut, or myself... but my country. Heck, where else outside of a war can you get a feeling like that?

The Day I Stopped Being Lonely

KATIE SPOTZ

When people hear that I'm the youngest person ever to row solo across the Atlantic Ocean, they all have the same question: How did a 22-year-

old woman row a 19-foot boat for 70 straight days through high winds and crashing waves? Well, the biggest challenge for me wasn't physical. By the time I decided to do the ocean row, I had already biked 3,300 miles cross-country, run across the Mojave Desert, and swum the 325-mile length of the Allegheny River. No, the tough part would be mental: How would I handle the loneliness, the boredom—the sheer magnitude—of the open sea?

I pushed off the coast of Senegal on January 3, 2010, ready to find out. More than half the people who attempt a solo ocean row have to be rescued in the first two weeks, so I set my sights on getting past the quarter-way mark, which would take about 20 days.

Day 20, January 22, was gray and overcast. I told myself I should do something to celebrate, like crack open a Snickers bar. That's what qualified as going wild in the middle of the Atlantic. But I didn't indulge. I was suffering from a terrible bout of the lonelies. I hadn't seen land



“ **I saw something move. A dozen fins had broken through the water near my boat.** ”

Katie Spatz and the boat she called home for 70 days.



in over two weeks, and it had been one of those days when ten minutes seemed like ten hours. And every day was beginning to feel much the same. Eating, rowing, sleeping. Repeat. Repeat. Repeat. Watch the sky. Watch the ocean. Repeat, repeat, repeat ... *AAARRGGHHH!*

Then, around sunset, I saw something move on the horizon. A dozen fins had broken through the water near my boat. Sharks. I froze dead in the water, carefully eyeballing them as they came closer. And as they did, I heard a blowing sound, like a soft whistle. They weren't sharks; they were dolphins! They circled my boat and were close enough to touch, so I did.

Suddenly I felt so connected and so grateful. The dolphins had come along to help me celebrate, just when I needed it the most.

I rowed at full strength for the next 20 minutes with the dolphins by my side, jumping out of the water, doing flips, and playing games with my boat. By the time we went our separate

ing water programs around the world.

I know some endurance athletes spend the entire journey envisioning the end, and that helps them get through. But for me, the secret is to focus on the moment, where you experience the awe that leads to personal growth—those moments of awareness of being connected to the sun, the weather, the waves. And, on the best day of my life, those dolphins.

The Day I Ordered a Cup of Coffee

FRANKLIN MCCAIN

On February 1, 1960, I met three of my friends at the North Carolina A&T College library in Greensboro, and together we walked the mile to Woolworth's. I was wearing my ROTC uniform because I'd come straight from class. It was eerie, walking; nobody talked. For my part, I knew the day might end with me in a pine box.

At that time in the South, African Americans weren't allowed to eat with whites. Woolworth's had a sepa-

“**We sat down at the counter. Immediately, every eye was on us.**”

ways, I was no longer lonely. Better yet, I knew I would be okay, that I would make it all the way.

And I did make it, all 2,817 miles. I hit the coast of Guyana, South America, on March 14, after 70 days and five hours at sea. My ocean row raised \$70,000 for the Blue Planet Run Foundation, which funds drink-

rate lunch counter in the basement for “Negroes.” My friends and I had agreed that we would sit down at the white lunch counter and ask to be served. And we did just that.

Immediately, there was a hush—it felt like a church in that Woolworth's. Spoons stopped halfway to people's mouths. Every eye was on us.



Franklin McCain (second from left) and friends took a seat and took a stand against bigotry.

Again, we asked the waitress for coffee and doughnuts, and she said, “I’m sorry, but I can’t serve you.”

“Why not?”

“It’s just a custom,” she said.

And I asked, “But you’ll agree that the custom is wrong, won’t you?”

We had resolved to be very polite—our goal was to embarrass people into doing right. So we sat there, waiting.

A policeman came in, and it was clear he was angry. His face was as red as a beet. He stopped right behind me; I could feel his hot breath on my neck as he stood over me. He pulled out his nightstick, and I said to myself, This is it. But he just stood there for a minute, then backed away and started pacing up and down. It dawned on me: He didn’t know what to do. That’s when I thought, This could work—we could win this.

There was a little old white lady who must have been 200 years old

sitting farther down the counter. She finished her doughnut and headed straight for us. I braced myself for a blast of abuse. Instead, she put her hands on our shoulders and said, “Boys, I am so proud of you. I only regret that you didn’t do this ten years ago.” That gave me added resolve to see it through.

We went back to that lunch counter every day for six months until four African Americans—lunch counter employees of Woolworth’s—were finally served a cup of coffee.

Fifteen seconds after I sat down on that stool on that February day in 1960, I felt so relieved, so cleansed, so self-accepting. It was the kind of feeling that holy people pray and chant for. It was the feeling of freedom that people live a lifetime seeking. I wouldn’t have felt cheated if I had died right then and there. I was invincible. And I’ve never felt better in my life. ■

IPAD EXTRA To watch Best Day of My Life videos, download the *Reader’s Digest* magazine app from the iTunes store.

WHEN CAN YOU RETIRE?

(How's Never? Does Never Work for You?)

What everyone has been saying lately online, in print, on TV, and everywhere else about retirement. Are your golden years suddenly looking less golden and a lot farther off? **BY CHRIS RAYMOND**

IN A NUTSHELL

“By 2037, all the Social Security reserves will have been drained and the income flowing into the program will be enough to pay only 75 percent of scheduled benefits. If that sounds tolerable, consider that two thirds of seniors rely on Social Security as their main source of income. The average annual benefit is \$14,000.”

Washington Post
editorial

But is Social Security shuffling workers off to shuffleboard too early? Isn't 62 supposed to be the new 42?

“Social Security has morphed into a middle-age retirement system. It defines people as old—eligible for Old-Age Insurance—when they are 62. When this benefit was first made available some 70 years ago, people couldn't get it until they were 65, and on average they retired at age 68 (compared with about 64 today). If Americans were to retire for the same number of years today as they did then, on average they would work until about age 75 ... Instead, most draw benefits for about a decade more than they did when the system was first established—now approaching one third of their adult lives. One or another partner in a couple retiring at age 62 today will probably draw benefits for about 26 years!”

Eugene Steuerle, San Francisco Chronicle



Whoever did the math for this has some splainin' to do.

“The average life expectancy was only 63 years when Social Security was first created, and there were 40 workers supporting each retiree. We now have about 3.1 workers for each retiree. And by the time I reach my mid-60s, there will be about two workers supporting me—and I don’t think they’re going to want to do that.”

Ken Dychtwald, gerontologist, psychologist, author, New York Times

Admittedly, that little “economic downturn” hasn’t helped things.

“Nearly eight in ten small-business owners prior to the recession in 2007 thought they would have enough money to live comfortably when they retire. By 2010, fewer than two in three felt that way.”

Dennis Jacobe, gallup.com

The Roundup

Fixing the deficit will mean fixing Social Security. And any way you look at it, this is going to cost you.

“Our looming debt crisis is mostly a looming entitlement crisis. And our looming entitlement crisis is a looming retirement crisis. But the worry is not merely that 80 million baby boomers will phase into retirement over the next ten or 15 years. The worry is also that Americans today spend twice as many years in retirement [as] in 1970.”

Derek Thompson, theatlantic.com

Some people say that we should suck it up and stop being selfish 21st-century sissies ...

“Perhaps the best evidence that future Americans can work longer is that past Americans did: **Despite poorer health, shorter lives, and more strenuous jobs, in 1950, the typical individual did not claim Social Security until age 68.5.**”

Andrew G. Biggs, resident scholar, American Enterprise Institute, Los Angeles Times

... and they say we should be thankful we're alive at all.

“We will all have to work longer, but thanks to our extended life spans, that is true only if measured in absolute years, not as a fraction of our lives. In any case, it seems a very small price to pay for the extra decades of healthy life granted to us by modern society.”

Peter Baldwin, New York Times



And the idea didn't go over well in France either.

“*À la retraite enfin!*” (“Retired at last!”) Sign at a protest in France

But the idea of working longer has not gone over well here.

“The chairmen of the deficit commission [who suggested raising the retirement age and cutting some benefits] just told working Americans to ‘drop dead.’”

AFL-CIO president Richard Trumka

Though postponing the retirement age does have fans on the football field.

“The federal deficit commission is proposing raising the retirement age to 69. In other words, they want Brett Favre to play two more years.” *Conan O’Brien*

Some people just want to punch out and never punch back in, even if their finances aren’t exactly in order.

“Fifty-six percent of retirees had outstanding debts when they left the workforce, and 96 percent refused to delay retirement because of the outstanding debt. In addition, 59 percent had saved less than \$50,000 toward retirement.”

Survey, nonprofit CESI Debt Solutions

But the conscientious among us have other ideas.

Forty percent of U.S. workers say they will postpone their retirement because they’re worried about their decimated savings and rising health-care costs. Sixty-eight percent of the workers 50 and older who plan to delay their retirement cited the need to maintain their health-care coverage as a major reason. Fifty-six percent also blamed the decline in the value of the retirement plan sponsored by their employer.

Survey by professional-services company Towers Watson

Whatever Congress decides to do, that money you set aside—because you saw this mess coming? You may be penalized for saving it.

“We need to look at the American people and explain to them that we’re broke. If you have substantial non-Social Security income while you’re retired, why are we paying you at a time when we’re broke? We just need to be honest with people.”

Then-House Minority Leader *John Boehner*, in *Pittsburgh Tribune-Review*

Retirement plan? You’ve got to be kidding. My company makes us pay for coffee stirrers.

“The percentage of workers expecting to receive income from a defined benefit (or traditional pension) plan has fallen from 62 percent as recently as 2005 to 56 percent in 2010, according to the Employee Benefit Research Institute’s 2010 Retirement Confidence Survey.”

Mark Miller, Fiscal Times

The Roundup

And some of the folks on the other side of the aisle in Congress agree.

“Throughout most of our nation’s history, people were expected to work regardless of their age. Only over the past several decades has that changed. Now it is assumed, even if you are completely able-bodied and able-minded, you don’t need to work, and indeed you shouldn’t be required to do so if you reach a certain age and certain number of years at one job. But that is crazy. We can’t afford it.”

John Feehery, onetime staffer for former House Speaker Dennis Hastert, cnn.com

Meanwhile, will the rich just get richer (and older)?

“[One proposal for Social Security reform reduces] future payments to high earners while increasing them for people at the bottom ... [And that] would also help to offset a little-noticed trend: Affluent Americans are increasingly living longer than others.”

Peter Orszag, former director of the White House Office of Management and Budget, New York Times



STEVE KELLEY EDITORIAL CARTOON USED WITH THE PERMISSION OF STEVE KELLEY AND CREATORS SYNDICATE. ALL RIGHTS RESERVED.

Why not try to fix unemployment and Social Security in one fell swoop? “[University of Texas economist James] Galbraith’s priority is jobs for younger people who desperately want to work, made possible by retirement for older people who don’t: ‘People who have good reason not to be in the labor force should be allowed to get out ... gracefully.’”

Dan Froomkin, Huffington Post

Here’s an idea: More taxpayers would mean more revenue for benefits. How about encouraging more babies and immigrants?

“One option might be to generate a second ‘baby boom’ so that by the time 2050 rolls around, there are more workers to support the pensioners ... Another option is immigration. Opening the borders would increase the labor force, creating more taxpayers and more potential [caregivers] (in hospitals and nursing homes) to look after the elderly. Immigrants also tend to have more children.”

“Buttonwood,”
The Economist

In any case, our work spaces are going to look a little different.

“The person who invents the cubicle where you can discreetly hang your walker where it doesn’t trip anybody—that person will be very popular with the baby boomers. Who’s gonna be able to retire at 65? That’s only seven years away. Not me. I’ll be working until I die.”

Marguerite DiGaetano,
unemployed 58-year-old, on *Huffington Post*

America could just do what it always does: Postpone the decision, dig a deeper hole, hunker down, and wait again for the problem to somehow magically solve itself while the deficit gets bigger.

“The [latest] compromise would decrease Social Security payroll taxes to 4.2 percent from 6.2 percent for two years ... A worker earning \$50,000 would save \$1,000. Anyone earning above the current \$106,800 wage cap would save \$2,136.”

USA Today

But there is a simpler answer.

“Be part of a small generation. Then you need to give birth to a large generation, so when you are in your 70s and they are in their 40s and 50s, they’ll be [generating] enormous amounts of taxes.”

Ken Dychtwald, New York Times ■

Look >>

SEE THE WORLD
DIFFERENTLY

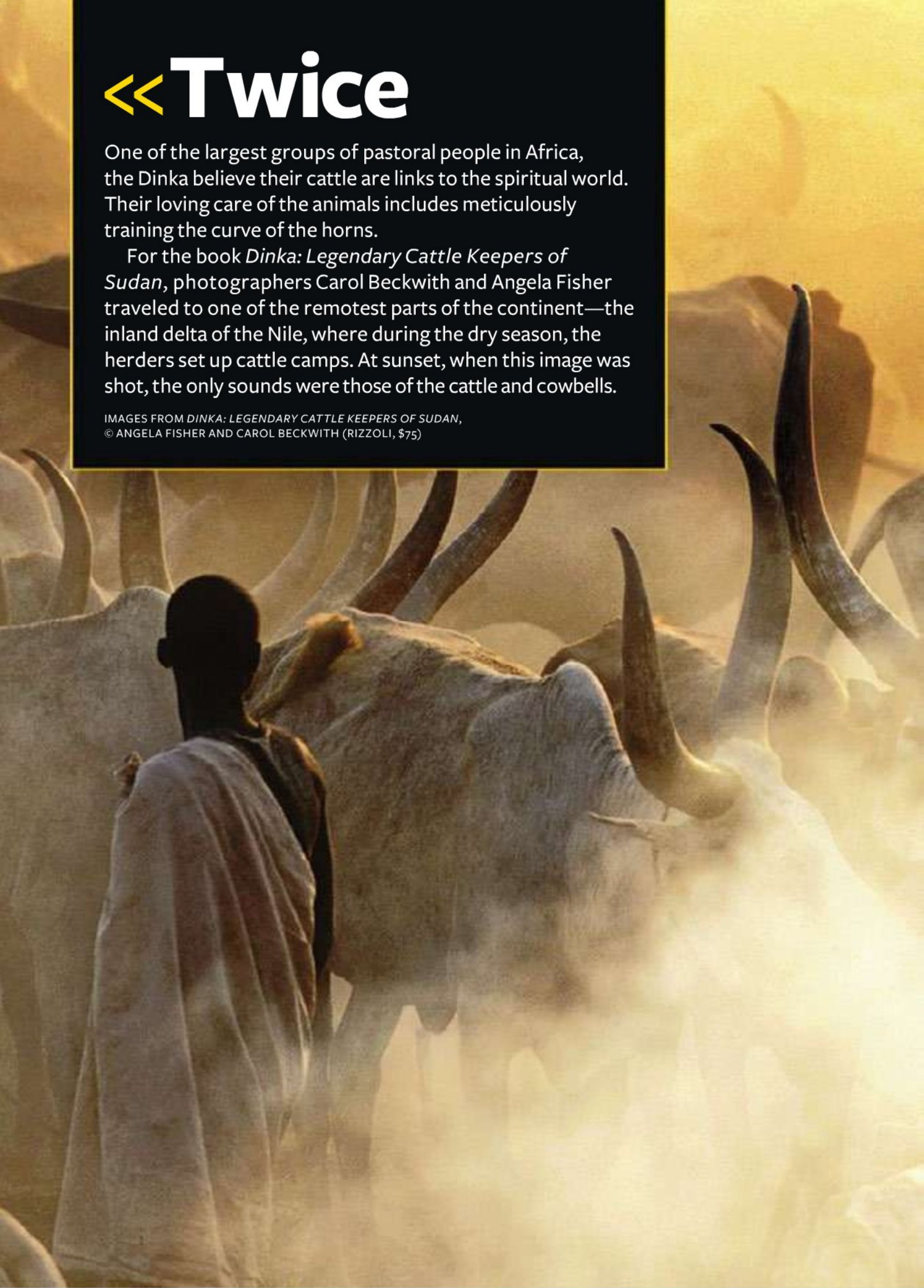


« Twice

One of the largest groups of pastoral people in Africa, the Dinka believe their cattle are links to the spiritual world. Their loving care of the animals includes meticulously training the curve of the horns.

For the book *Dinka: Legendary Cattle Keepers of Sudan*, photographers Carol Beckwith and Angela Fisher traveled to one of the remotest parts of the continent—the inland delta of the Nile, where during the dry season, the herders set up cattle camps. At sunset, when this image was shot, the only sounds were those of the cattle and cowbells.

IMAGES FROM *DINKA: LEGENDARY CATTLE KEEPERS OF SUDAN*,
© ANGELA FISHER AND CAROL BECKWITH (RIZZOLI, \$75)



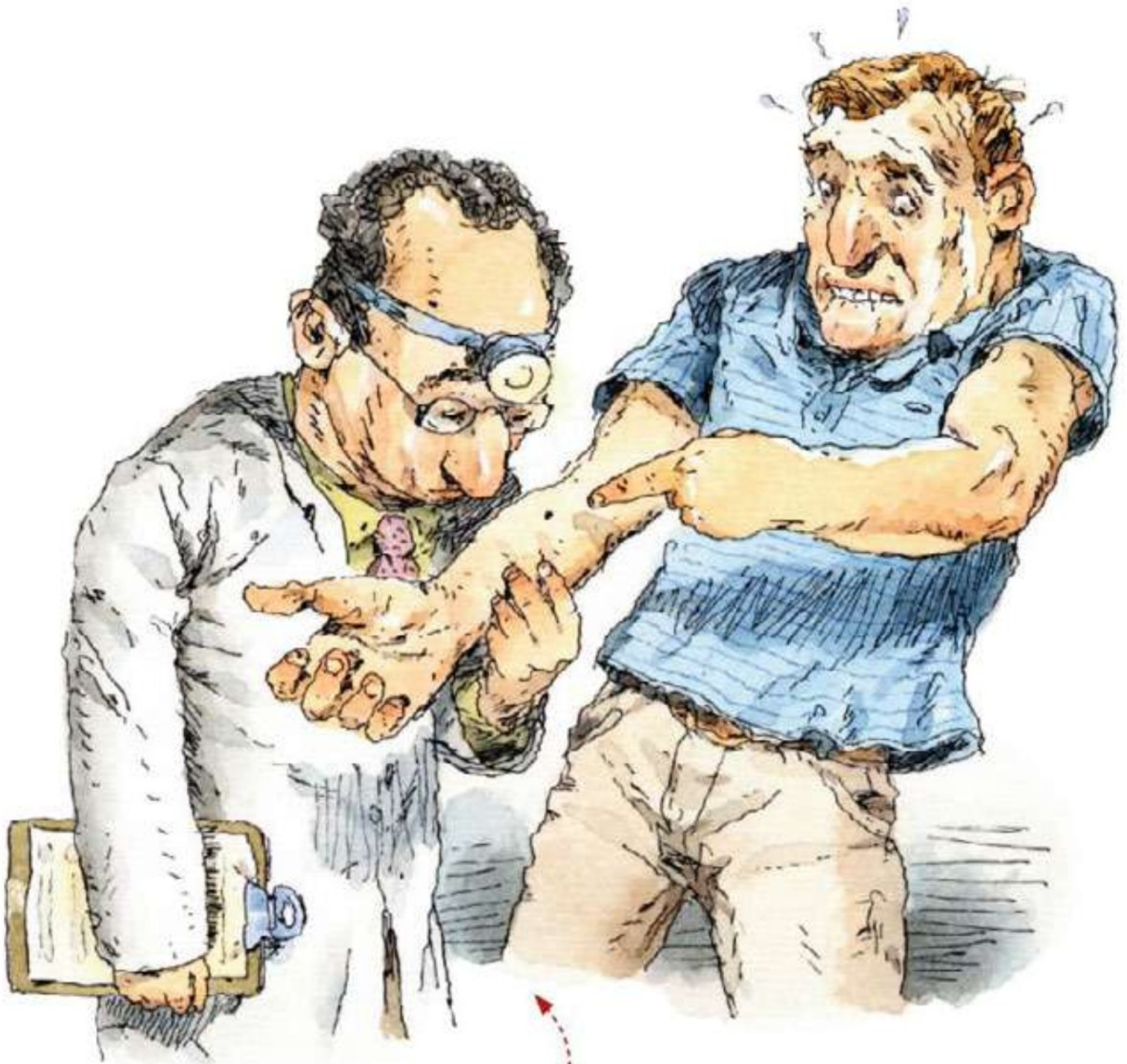


Worried Sick

THAT LITTLE MOLE, PERSISTENT COUGH, OR NASTY ITCH MUST BE A SIGN OF A RARE AND FATAL DISEASE, RIGHT? OUR RESIDENT M.D. AND HIS ASSISTANT ARE HERE TO SOOTHE YOUR FEVERED BROW.

BY MARK LEYNER & BILLY GOLDBERG, M.D.

There's a venerable Chinese proverb that says "Give a man a fish and you feed him for a day. Teach a man to fish and you feed him for a lifetime." The hypochondriac's version is "Give a man a symptom and he'll worry for a day. Give him access to Google and he'll torture himself for a lifetime." If you've been spending a little too much time online—and way too much time in abject terror—I'm here to help, with assistance from my literary (and medically savvy) scrub nurse, Mark Leyner. I've been an ER doctor for almost 20 years, and I've treated everything from leprosy to lumbago. I've seen innocent freckles that turned out to be deadly skin cancers and many more that were just innocent freckles. My job is to find out which camp you're in. Got an itch, rash, cough, or funny sound that keeps you up at night? Tell me all about it.



DEAR DR. BILLY,

I hear this weird popping sound when I move my right wrist in a certain way. Sometimes I feel it too. I'm 16, so it's not early arthritis or some other serious condition ... is it?

Don't worry—you're not turning into bubble wrap. It's perfectly normal for your joints to make a popping sound. The noise is produced when little bubbles

burst in the lubricating fluid surrounding the joint. Some people even get a kick out of making this sound by cracking their knuckles, which, by the way, is not a particularly bad thing to do. Taken to excess, knuckle cracking may cause minor damage, including stretching of the surrounding ligaments, which can cause a decrease in grip strength. But many parents are convinced it will lead to arthritis, and it's just not

so. Wrist popping, although it has never achieved the widespread popularity of knuckle cracking, is probably equally innocuous. Look at it this way: Next time you're in your flamenco class, you'll be the one who doesn't need castanets.

DEAR DR. BILLY,

I spent a happy Sunday afternoon in my garden pruning my rosebushes and mulching my flower beds. That night, I began to experience a weird itching on my hand. I also felt extremely fatigued, with back pain and aching calf muscles. I called my brother-in-law (an insomniac amateur infectious-disease specialist and general know-it-all). I could hear him typing away on his laptop, and within a minute or two, he grimly announced, "You've got sporotrichosis. You'd better get your affairs in order."

Tell your brother-in-law to get his own affairs in order. It's most likely that your hand itches because it's dry; maybe you also exposed it to something that you're slightly allergic to or that irritated your skin. You're fatigued because you worked all day in your garden. Your muscles ache because you're not used to being hunched over a hoe for 12 hours. Even if your hand is red and swollen and oozing pus and you have a fever, there's a good possibility you have a simple infection that an antibiotic



will easily cure. Call your brother-in-law back—preferably right after he falls asleep—and inform him that sporotrichosis, an infection caused by a fungus that grows on plants, occurs in just one or two people per million in the United States. And even in the unlikely event that you're the one in a million, the infection is easily treated with an antifungal medication. I recommend gardening gloves and a moratorium on late-night calls to Dr. Doom.

DEAR DR. BILLY,

For the past two months, I've been having headaches in the front of my head—basically in my temples, sometimes right, sometimes left. I've tried aspirin, Tylenol, Advil, cold compresses. Nothing works. So now I'm convinced I have terminal brain cancer. I've started working on my will when the pain lets up (which makes my new boyfriend irate because I haven't left him my red Miata convertible). I spend most of my free time on the Web, reading about gliomas and blastomas and ordering movies from Netflix about people with brain tumors. Help!

You like movies? Skip *Dark Victory*, and rent *Kindergarten Cop*. Then imagine the Teutonic tones of the movie's Detective John Kimble, aka the ex-governor of California, telling you, "It's not a tumor!" There

are innumerable possible reasons for your headaches, but least likely among them is a brain tumor. A better bet: You're suffering from stress, tension, allergies, sinus infections, or teeth grinding. Or you might just need a new prescription for your glasses or contact lenses.

So how do you tell a simple headache from a dangerous one? In the ER, there are a few questions we ask when someone comes in with a

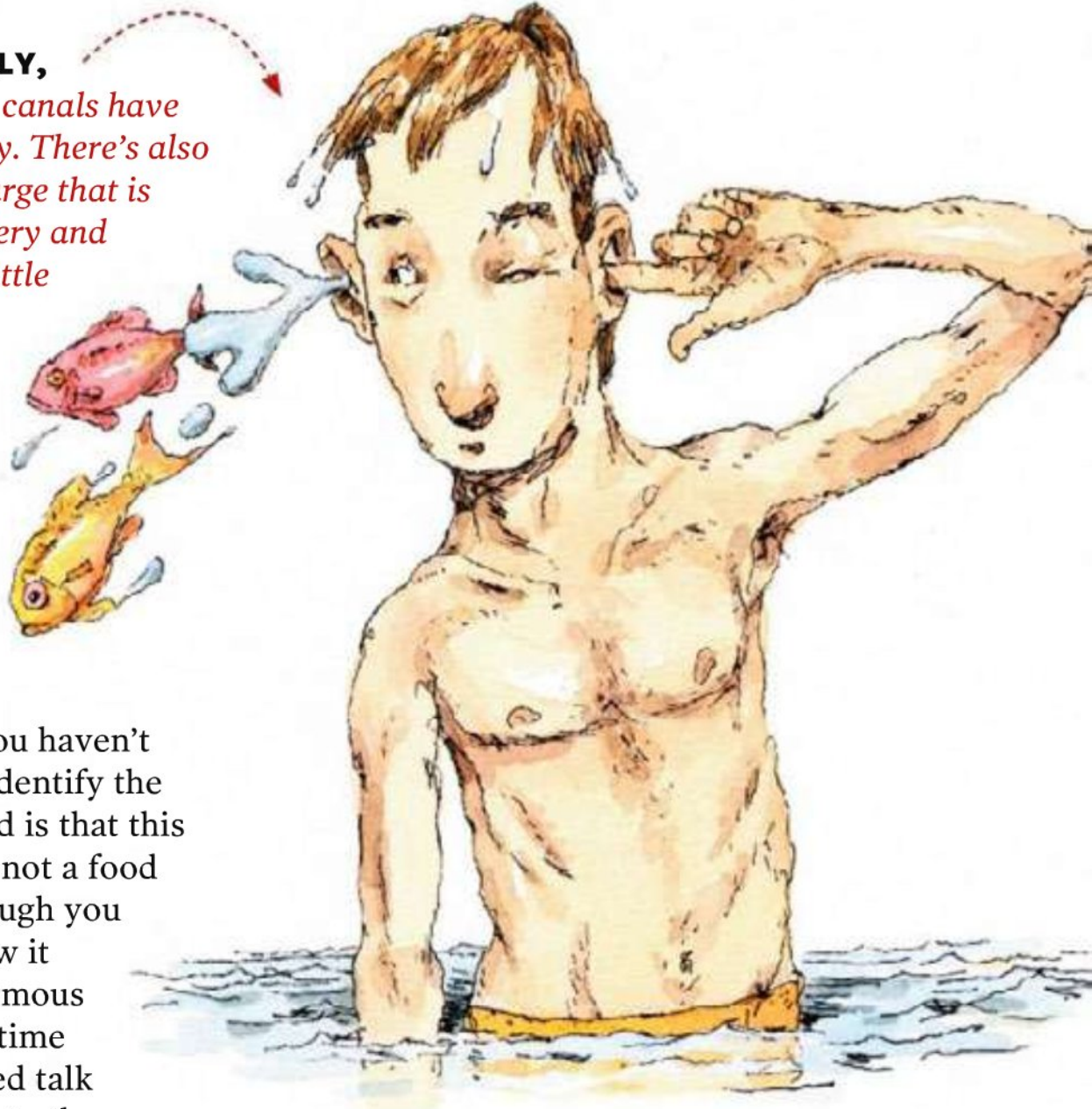
THERE ARE COUNTLESS POSSIBLE REASONS FOR A HEADACHE. LEAST LIKELY AMONG THEM: A BRAIN TUMOR.

headache: Was it a sudden onset of the worst headache of your life? (Makes us think of a ruptured aneurysm.) Do you have a fever and a stiff neck? (Makes us think of meningitis.) Is your headache consistent but worse in the morning and accompanied by vomiting, seizures, visual changes, or weakness in your limbs? (Makes us think it could be a brain tumor—but even then, the odds are against it.)

If you have any of those more serious warning signs, see your doctor, who may suggest that you consult a neurologist. In any case, try to relax, since stress about your headache is probably adding to it. And ditch the guy who seems to covet your Miata more than he covets you.

DEAR DR. BILLY,

Lately my ear canals have been very itchy. There's also a slight discharge that is clear and watery and sometimes a little sticky. I have come to the conclusion that it's a food allergy, but I haven't been able to pinpoint which food.



The reason you haven't been able to identify the offending food is that this is most likely not a food allergy. Although you wouldn't know it from the enormous amount of airtime health-oriented talk shows devote to the subject, serious food allergies are not very common. According to a report recently published in the *Journal of the American Medical Association*, while nearly three out of ten people think they have food allergies, less than 5 percent of adults and 8 percent of kids actually do. In fact, researchers who examined more than 12,000 studies found that when the right test was used, even people who had gotten a doctor's diagnosis had a less than fifty-fifty chance of being truly allergic.

If your waxy buildup isn't from a

food allergy, what's the problem? I'd put my money on an outer ear infection, or, to be fancy, *otitis externa*. That's an inflammation or infection of the external auditory canal—the tube that runs from the outer ear to the middle ear. The condition is also known as swimmer's ear because it's most common in people who are regularly submerged in water. If what's coming out of your ear is slightly yellow and you're in pain, then it's probably an infection and you should pay a visit to your physician to get antibiotic drops.

The other possibility is that you just have some excess earwax. But don't go reaching for a Q-tip—that's an appropriate cleaning implement for the outer ear only. The ear is a self-cleaning oven and usually produces the right amount of wax necessary for its own protection. (Let us wax poetic for a moment about earwax, or cerumen, as it's known in the biz: It's made up of keratin, the same substance found in fingernails and hair, along with fatty secretions—a mix that guards the ear canal against water and infection.) Cotton-tipped swabs tend to pack the wax in and can cause pain or even a perforated eardrum. If your ears are impacted with wax—you'll know it if you can barely hear—you need to break up the plug. You can try this at home with over-the-counter products, but if a solid nugget has formed, you are going to need a pro to do the excavating. Call your doctor.

DEAR DR. BILLY,

Since we moved to Florida in 2002, my mom, my sister, and I have developed bumps on our backs. (I checked online, and they look like lipomas.) Recently I found out that my friend, who lives nearby, also has one on her back. And a friend of hers, who has one too, consulted her doctor, who said they come from all the hormones added to the chicken we eat.

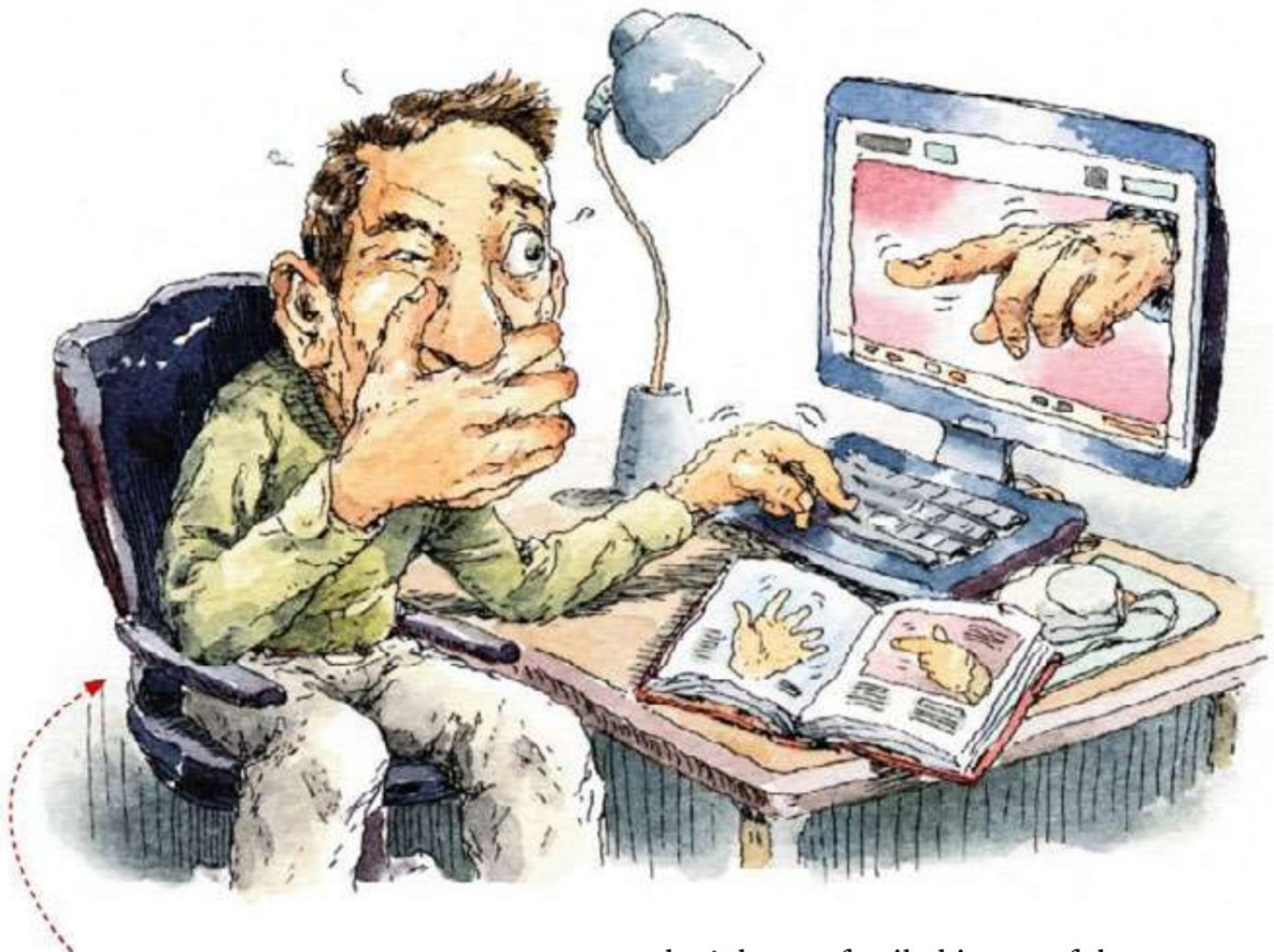
Although it's difficult to diagnose anything without seeing it, you may be absolutely correct in the first part of your diagnosis. Lipomas are benign tumors composed of mature fat cells. They tend to be painless and soft to the touch, and they move a little when you press on them. They're the most common noncancerous tumor in all adults, striking 1 percent of the population. They're seen mostly in women (and known

THE EAR IS A SELF-CLEANING OVEN AND USUALLY MAKES THE RIGHT AMOUNT OF WAX FOR ITS OWN PROTECTION.

to run in families), so it's not surprising that you and your mom and your friends share this lumpy affliction.

Usually you don't need to do anything about lipomas unless they become bothersome. Then the treatment is simple surgical removal.

Now for your chicken theory. There are many concerns about how environmental hormones might be affecting our health, but hormones are not used in chicken production. So you, your mom, and your sister can feel comfortable about keeping this item on the menu. (I'd probably stay away from the KFC Original Recipe Double Down Sandwich. It won't give you a new lipoma, but it might pack on the pounds.)



DEAR DR. BILLY,

Recently I started to notice a tingling in my left hand. It's worse when I wake up in the morning, but it's been three days, and it's still there. I looked it up online, and now I'm sure I have a benign spinal tumor or lumbar spinal stenosis, or maybe I've had a stroke. The Mayo Clinic website says tingling in parts of the body is a sign of multiple sclerosis. What do I do next? There are 930,000 more Google hits for "tingling fingers," and I don't think I have that much time left.

The first thing to realize is that multiple sclerosis affects one in 750 people worldwide. So if you

don't have a family history of the disease, the odds of your having MS are really quite small. Ditto for things like spinal tumors and stenosis. Do you sleep with your hand under the pillow? Squashing it that way could be disrupting blood flow. Are your symptoms associated with any repetitive movements, like typing on a keyboard and looking up disease symptoms all day? Carpal tunnel syndrome is a much more likely culprit in that case. Is your wristwatch too tight? Even that could cause needles and pins. Relax. MS is one of the hypochondriac's worst enemies. Its symptoms can be vague and tend to be things we all

experience from time to time. If the tingling persists for more than a week, or if it's accompanied by double vision, a tremor, or weakness in the limbs, or if the symptoms get worse when your body temperature goes up—say, when you take a hot bath—your doctor may want you to see a neurologist. But you're probably fine.

DEAR DR. BILLY,

I'm embarrassed to even write about this because it's a little gross. I keep coughing up these stinky little white things. They look like corn kernels but smell like toe jam. Help! What are these white smelly clumps in the back of my throat?

Your malodorous mouth balls are called tonsilloliths, or tonsil stones. These hard lumps are formed in the nooks and crannies of the tonsils and contain food particles, calcium and magnesium salts, bacteria, and sometimes small amounts of keratin (you remember keratin, found in fingernails, hair, and earwax). The bacteria

produce volatile sulfur compounds (such as methyl mercaptan and dimethyl sulfide) that can make your breath smell bad. It's not known how common tonsil stones are, because most people swallow them without ever noticing. Brush your teeth, gargle, and avoid eating right before bed, and you'll be less likely to get them.

So my advice to you is twofold: Stop worrying about those gross

little balls, and never feel ashamed about talking to someone (especially your doctor) about your health. We're all human, and we produce an astonishing variety of smelly, disgusting, and mysterious secretions.

Here's another rule of thumb: If you're experiencing new symptoms, sure, go online and do a little amateur medical sleuthing. But don't let all that information whip you into a frenzy of unbridled anxiety. If you're worried, see your doctor and have a frank, open conversation. That's the most efficient way to calm yourself down and treat what ails you—even if it's all in your head. ■

Really Sick

THE TEN MOST COMMON SYMPTOMS THAT SEND PEOPLE TO THE EMERGENCY ROOM

- 1) Abdominal pain, cramps, spasms
- 2) Chest pain
- 3) Fever
- 4) Headache
- 5) Back pain
- 6) Shortness of breath
- 7) Cough
- 8) Vomiting
- 9) Pain in general
- 10) Throat problems

Sources: National Hospital Ambulatory Medical Care Survey, 2006; National Center for Health Statistics, 2008.



Freedom to Worship



Freedom of Speech

The Freedom That Make Us Great

Amid war and economic tumult, it's easy to ignore the fact that we have more to offer the world than ever



Freedom from Want



Freedom from Fear

Americans aren't strangers to tough times. Consider 1941: The world was clawing its way out of the Great Depression only to come face-to-face with a troika of dictators hell-bent on world domination. Evil and uncertainty bred fear and pessimism.

But we pulled together, motivated by the ideals we hold most dear. In his State of the Union address that year, President Franklin Roosevelt famously summed up the stakes in the looming conflict: “freedom of speech and expression ... freedom of every person to worship God in his own way ... freedom from want ... and freedom from fear.”

“The four freedoms” speech so inspired painter Norman Rockwell that he created four iconic paintings on the theme, later reproduced

(along with four essays) in a *Saturday Evening Post* series called “The Four Freedoms for Which We Fight.” (The paintings, made into posters, raised \$132 million for the war effort.)

Today we face the Great Recession instead of the Great Depression, religious terrorism—and an anti-Islamic backlash—instead of Nazism, and a polarized political atmosphere that threatens to give free speech a bad name. But while our problems are serious, they are hardly insurmountable, especially if we summon the unity of purpose that has always been our strength. Over the next four issues, we’ll revisit the “freedoms” through the voices and visions of four remarkable American citizens. Their stories are moving, challenging, and—we hope—worth reading and sharing.



**Daisy Khan,
New York City,
2010.**

Freedom to Worship

The woman at the center of the Ground Zero mosque controversy calls America the world's beacon of religious freedom—and implores us to keep it that way

As executive director of the American Society for Muslim Advancement, Daisy Khan has led prayers in town squares, worked on behalf of women in the Islamic world, and sat on countless interfaith panels. But chances are, if you've heard of her, that's not why. ● After Khan, along with her husband, Imam Feisal Abdul Rauf, proposed building a community center and worship space two blocks from Ground Zero in downtown Manhattan—not far from where they have held prayer services for years—they found themselves at the center of a firestorm in which they were likened to terrorists. ● When author Katherine Lanpher caught up with Khan at the Interfaith Center of New York (where she now has a security buzzer on the door), Khan had just returned from a multireligious conference in Doha, Qatar, and a Muslim feminist conference in Madrid. But in a life seemingly designed for global travel, Khan is firm about where she wants to be: here, in America, with the freedom to worship as she pleases.

I grew up in a place called Paradise on Earth, in the foothills of the Himalayas in Kashmir, India—the most pristine place on earth. My paternal grandfather was a religious scholar who believed that under Islam, education is a right that has to be given to both boys and girls. My maternal grandmother was also a religious scholar and a spiritual leader at a time when you barely saw women in those roles. She looms larger in my life as I get older.

I was sent to St. Patrick's Convent School and said the Lord's Prayer every morning. The school was run by Catholic nuns, but many of the teachers were Hindu. My best friend was Sikh, and we used to buy freshwater pearls from the Buddhists who came from Tibet. We were never taught stereotyping. We were always taught to respect and show regard for others' religions.

At 16, I came to America and landed in a Jewish neighborhood: Jericho, Long Island, where I lived for the next seven years. So by the time I was in my mid-20s, my religious education was complete. I believe that if we show respect for one another's religion and don't profess superiority, we will be

fulfilling God's mandate much more powerfully than if we try to convert others to our point of view.

America is the one place where you can say that religious freedom truly does exist. This country was founded by people who were fleeing religious persecution—so religious freedom is the most essential foundational value of America. This is why it is so dear and why we must preserve it. Here I, as a Muslim, can fully practice my faith. I face no coercion. I can establish a place of worship, and I can practice my faith in its fullest form—or not. This is what makes America unique.

Muslims from all over the world come here and make this proclamation, that America is the most Islamic country in the world because America lives up to this ideal that God has created different religions. Plus the fact that all men are created equal and no one religion may dominate is so much a part of the Islamic ethos. In the theology of Islam, God clearly says, I have created you into nations and tribes so you can get to know each other.

However, many Muslim societies do not practice pluralism; they do not treat minorities the way they should, with equal rights. In Afghanistan, for example, you see so much intolerance, not only of people of other religions but also within the religious sects. This is fundamentally

We Muslims are currently going through the struggle to be accepted as equals. The reality is that Islam is an American religion.

un-Islamic. Islam has always celebrated the diversity that exists within Muslim thought as well as diversity among religions.

That ideal is living and breathing in America because we have an Islamic community here that is extremely diverse. In any given mosque, you can have Shia and Sunni praying side by side. You can have the different interpretations of the various schools of Islamic thought all in one mosque, showing tolerance and respect. How we evolve as a Muslim community will be a model for other nations that are struggling with extreme diversity.

Yet even though I say we have all these freedoms—the freedom to practice religion without coercion, the freedom to flourish as a religious community—journalists from overseas are surprised that a center that is supposed to be multifaith and tolerant is being rejected by Americans. A lot of people, especially from Europe, who interview me, say, “Wow, look at you. You guys can’t even build a center.”

I tell people that we all fall short of ideals. I remind people that Muslims have done this: They fall short of their ideals. And I tell them that we have to be patient. The Catholics had a very difficult time; the Jews could not erect their synagogues. Peter Stuyvesant, the Dutch governor of New Amsterdam (before it became New York), didn’t allow a synagogue to be erected in Manhattan. It took an act of Congress to have a synagogue established in Washington. We Muslims are currently going through the

COURTESY SOMA



Proposed design
for the Park51
Community Center
in Manhattan.



A Muslim American woman at a New York City rally in support of religious freedom, September 10, 2010.

struggle to be accepted as equals in this country. The reality is that Islam is an American religion. We, too, will be accepted, and American ideals will prevail. I'm confident of that because they always have in the past, and they have to if America is going to remain a vibrant nation.

Some Muslims have said this is our Rosa Parks moment. Just like Rosa Parks was asked to move from the front of the bus to the back, people are saying Muslims shouldn't be allowed to build their mosque here, to move it over there. One can never make these comparisons accurately, because the historical references are different, but you know when you're being marginalized. You know when you're being pushed away; you know when you're being told, "Just move

out of the neighborhood"—out of our own neighborhood, where we've already been for 27 years.

Our organization's foundations were built on bridge building. Our nation was wounded as a result of 9/11, and so we thought, What better way for us to heal this wound than by proposing a project that would bring not only peace, tolerance, and understanding but also much-needed healing? Let this be an open house to create community cohesion, and let Muslims lead this effort. Let us bear the financial brunt because we, too, want to be part of the rebuilding. Three community board meetings where we presented this plan were unanimously in favor. Then we

This is a time when we have to create a separation between extremes of all religions and moderates of all religions.

discovered that there was organized opposition, and this organized opposition was co-opted by politicians in an election cycle, and we were used as a political football.

People have accused us of being insensitive and not considering the feelings of 9/11 victims. They ignore the fact that this tragedy devastated us all and that it was our tragedy as well. They seem to be operating from the “I, thou” polarity: “You are different from me and I don’t see myself in you, so I’m American and you’re not.” This is hurtful.

I was recently meeting with some rabbis at the Jewish Theological Seminary, and they were telling me, “Please don’t give up. Your struggle is the struggle of all of us right now. You must continue to fight because you’re also fighting for others who will come after you, other minority groups that will be marginalized.”

This whole crisis has brought people of different faiths together as allies. You saw what happened to Terry

Jones [the Florida pastor who threatened to burn the Koran] and how the evangelical community stepped in and said, “You will not do this in the name of Christianity.” They attenuated what could have been a disastrous situation all over the world. It’s a testament to how this is a moment right for change. Faith communities, different people of different religions, are recognizing that we’re all in this together, and that this is the time when we have to create a separation between extremes of all religions and moderates of all religions. It’s not Islamic extremists versus the world; it’s really extremists of all religions versus the moderates of all religions.

From the Islamic perspective, freedom to worship is part of the divine plan. The Sufi poet Rumi has a very beautiful poem. He says that God is like an ocean, and religions are like rivers that all flow into the same ocean. Our origins are the same, and our destinations are the same; it is our paths that sometimes differ. ■

FEAST OR FAMILY

During the holidays, my daughter-in-law Heather called to ask me for a fruitcake recipe. As I looked it up, she mentioned that she had told some friends about the cakes she was making, and one of them asked her how she learned to make them. “Easy,” Heather told her. “I called my mother-in-law. She’s the queen of fruitcakes!”

Pam Northcott

Quick Study

Crime Scene Science



BY LISA GOFF

Fingerprints, blood spatter, bullet matching: It's the sexiest stuff on TV, but does this kind of evidence convict criminals in the real world?

Flash Points

► **Science or guesswork?** Crime scene evidence, from blood spatter to ballistics, is now being challenged in court, thanks to a 2009 report from the National Academy of Sciences, which found fault with everything from its standards to its very existence. In March 2010, a U.S. District Court judge in Boston directed defense attorneys to routinely contest bullet identification, handwriting analysis, and other trace-evidence techniques beloved by prosecutors. Even that bedrock of forensics, fingerprints, is under fire.

► **The CSI effect** The science may be suspect, but TV-trained juries demand it. Prosecutors are now more likely to order tests for blood, semen, and other substances in anticipation of jurors' questions. Calling "negative evidence witnesses," who can attest to the absence of trace evidence at the crime scene, has become common in many courtrooms. As a result, some say, trials are getting longer (and more expensive), and crime labs are falling behind.

► **Incompetence and fraud** The police crime lab in San Francisco was shut down last year after scandals involving stolen evidence. Earlier reports of foul-ups and falsified evidence have rocked police labs in Detroit, Houston, Nebraska, North Carolina, New York, and West Virginia. According to the Innocence Project, more than half of the 261 convicts exonerated by DNA tests since 1989 were convicted at least in part because of "unvalidated or improper forensic science."

► **Privacy** For as long as DNA has been used to link criminals to crime scenes, privacy advocates have warned of a slippery slope that will turn all Americans into suspects-in-waiting. With improved software, investigators can validate close, as well as exact, matches to DNA evidence found at crime scenes. Such partial matches naturally lead the police to a criminal's DNA-sharing relatives in the database, creating an ever larger pool of suspects.



BLOODSTAIN PATTERNS

Spray or spatter? Impact angles? Some aspects of analysis are backed by studies, but experts tend to go beyond what science supports.

BALLISTICS

It's sure-shot proof on TV, but in 2008, a major urban crime lab was shut after an audit found a 10 percent error rate in ballistic evidence.

DNA

The FBI's 6.7 million profiles aided 80,000 investigations in 2009, but DNA is not foolproof. In West Virginia, ten convictions were overturned due to lab fraud.

FINGERPRINTS

Last year 285,000 fugitives were fingered by prints, but in one study, experts looked again and changed their minds—in one out of four cases.

SHOEPRINTS

There's a database of 25,000 soles, but the search is manual, and the results are subjective and easily challenged in court.

Forward Thinking

► **Personal bacteria** Bacteria may one day join DNA as credible proof of who touched an object. A March 2010 study from the University of Colorado at Boulder linked bacteria swabbed from computer keyboards to the fingertips of computer users. Each user's collection of bacteria, researchers found, has a unique genetic profile, making it scientifically sound and potentially reliable evidence.

► **Morphometrics** Researchers at North Carolina State University have discovered that children's faces attain the shapes they will have in adulthood much earlier than previously thought, a finding that will help forensic experts identify the skeletal remains of children younger than 18. The technique, geometric morphometrics, uses computer-modeling software to identify craniofacial characteristics, a project that formerly relied on calipers.

► **PhotoDNA** The nonprofit National Center for Missing & Exploited Children analyzes 250,000 images of child pornography every week. With technology called PhotoDNA, computer forensic technicians can pinpoint similarities that amount to a digital signature (known as a hash) and use that to identify groups of images created by the same person—even if the images have been resized or edited. Online service providers can use PhotoDNA to trace and remove child pornography on their sites, and law enforcement can use it to track child pornographers.

► **Tattoo matching** Approximately 36 percent of people between 18 and 25 have at least one tattoo, and the rate is much higher among criminals and gang members. Using complex mathematical algorithms, biometric scientists from Michigan State University have developed software that can identify even



THE TIME LINE

1813 / Mathieu Bonaventure Orfila, father of modern toxicology, publishes his treatise on poisons.

1835 / Scotland Yard uses bullet comparison to catch a murderer.



1836 / British chemist James Marsh publishes his method of detecting arsenic in corpses.

1892 / Sir Francis Galton publishes

the first classification of fingerprints.

1894 / Alfred Dreyfus of France is convicted of treason, based on mistaken handwriting identification.

1901 / Karl Landsteiner, an Austrian pathologist, develops a modern system of blood group classification.

1910 / Edmond Locard, director of the first police laboratory, in Lyon, France, establishes rules

of evidence collection and the concept of “trace evidence.”

1935 / Forensic pathologists in England use superimposed photographs to identify victims of a killer who dismembered and scattered the bodies.

1976 / Television debut of *Quincy, M.E.*, with Jack

a blurry image on a security camera, using color, texture, and shape—much more efficient than searching tattoo databases using keywords or labels.

► **Bee sleuths** Bees have a keen sense of smell, reputedly as developed as any sniffer dog's. But bees have had to be individually hand-trained. Scientists in the United Kingdom have developed a “hotel” that trains large groups of the insects to recognize specific smells—of bombs and drugs, for example. Trained bees stick out their tiny tongues when they catch a scent.

► **CSI 2020** A portable device for detecting chemicals emitted by decomposing bodies is under development at Penn State University. The device would help locate buried corpses or allow investigators to estimate the time of death on-site rather than wait for a coroner's report. Among the chemicals the device would detect: the aptly named putrescine and cadaverine.

The Back-and-Forth ...

‘Forensic evidence is not uniquely immune from the risk of manipulation.’

Justice Antonin Scalia, Melendez-Diaz v. Massachusetts, June 25, 2009

‘Fingerprints have been around for over one hundred years, and they’re going to continue to be around for the next hundred years.’

Dwight Adams, PhD, director, University of Central Oklahoma Forensic Science Institute, former head of FBI Laboratory, Quantico, Virginia

‘DNA exonerations show us how the criminal justice system is flawed and how it can be fixed.’

Peter Neufeld, codirector, Innocence Project

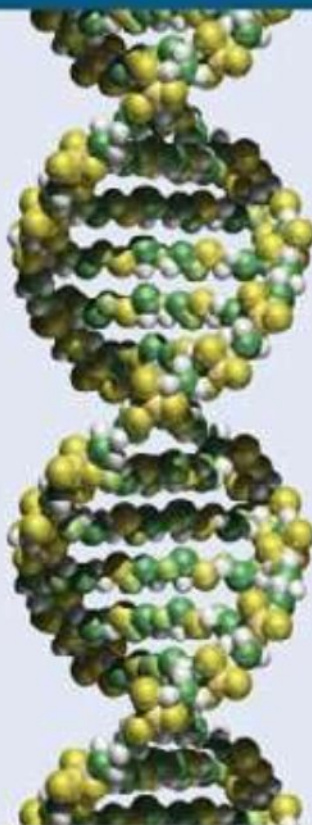
Klugman as a Los Angeles medical examiner.

1986 / DNA evidence is used for the first time in connection with a crime in the U.K.

1987 / DNA profiling introduced in a U.S. court.

1989 / First criminal conviction overturned on the basis of DNA evidence.

1998 / FBI's DNA database goes fully operational, including DNA from state and local law enforcement.



2000 / TV debut of *CSI*.

2001 / After serving 13 years for rape and murder, Calvin Washington of Texas is exonerated by DNA evidence and freed.

2005 / FBI abandons use of bullet-lead analysis, a technique used after the assassination of John F. Kennedy.

2009 / National Academy of Sciences reports “serious deficiencies” in the nation's crime labs. ■



Adi Ignatius,
editor in chief,
*Harvard Business
Review*

“One of our editors had heard students buzzing about a hugely inspiring talk that Harvard Business School professor Clayton M. Christensen had just delivered, and she asked him to turn it into an article. It’s one of the most resonant works we’ve ever published (July/August 2010). Hundreds of thousands of people came to hbr.org to read it.”

The Bottom Line on Happiness

Use the tools of business to create a life of fulfillment and integrity

BY CLAYTON M. CHRISTENSEN

● EXCERPTED FROM *Harvard Business Review*

My class at Harvard Business School helps students understand what good management theory is and how it is built. In each session, we look at one company through the lenses of different theories, using them to explain how the company got into its situation and to examine what actions will yield the needed results. • On the last day of class, I ask my students to turn those theoretical lenses on themselves to find answers to three questions: First, How can I be sure I’ll be happy in my career? Second, How can I be sure my relationships

(TOP LEFT) ILLUSTRATED BY GRAFILU



with my spouse and my family will become an enduring source of happiness? Third, How can I be sure I'll stay out of jail? Though the last question sounds lighthearted, it's not. Two of the 32 people in my Rhodes Scholar class spent time in prison. Jeff Skilling of Enron fame was my classmate at Harvard Business School.

I graduated HBS in 1979, and over the years, I've seen more and more of my classmates come to reunions unhappy, divorced, and alienated from their children. I can guarantee you that not a single one of them graduated with the deliberate strategy of getting divorced and raising children who would become estranged from them. And yet a shocking number unwittingly implemented that strategy. The reason? They didn't keep the purpose of their lives front and center.

Having a clear purpose has been essential to me. But it was something I had to think long and hard about before I understood it. When I was a Rhodes Scholar, I was in a very demanding academic program, trying to cram an extra year's worth of work into my time at Oxford. I decided to spend an hour every night reading, thinking, and praying about why God put me on this earth. It was a very challenging commitment because every hour I spent doing that, I wasn't studying applied econometrics. I was conflicted about whether I could really afford to take time away from my studies, but I stuck with it and ultimately figured out the purpose of my life.

My purpose grew out of my reli-

gious faith, but faith isn't the only thing that gives people direction. For example, one of my former students decided that his purpose was to bring honesty and economic prosperity to his country and to raise children who were as capably committed to this cause, and to each other, as he was. His purpose is focused on family and others, as is mine.

Here are some management tools that can be used to help you lead a purposeful life.

USE YOUR RESOURCES WISELY.
Your decisions about allocating your personal time, energy, and talent shape your life's strategy. I have a bunch of "businesses" that compete for these resources: I'm trying to have a rewarding relationship with my wife, raise great kids, contribute to my community, succeed in my career, and contribute to my church. And I have exactly the same problem that a corporation does. I have a limited amount of time, energy, and talent. How much do I devote to each of these pursuits?

Allocation choices can make your life turn out to be very different from what you intended. Sometimes that's good: Opportunities that you never planned for emerge. But if you don't invest your resources wisely, the outcome can be bad. As I think about my former classmates who inadvertently invested in lives of hollow unhappiness, I can't help believing that their troubles relate right back to a short-term perspective.

When people with a high need for achievement have an extra half hour of time or an extra ounce of energy, they'll unconsciously allocate it to activities that yield the most tangible accomplishments. Our careers provide the most concrete evidence that we're moving forward. You ship a product, finish a design, complete a presentation, close a sale, teach a class, publish a paper, get paid, get promoted. In contrast, investing time and energy in your relationships with your spouse and children typically doesn't offer that same immediate sense of achievement. Kids misbehave every day. It's really not until 20 years down the road that you can say, "I raised a good son or a good daughter." You can neglect your relationship with your spouse, and on a daily basis it doesn't seem as if things are deteriorating. People who are driven to excel have this unconscious propensity to underinvest in their families and overinvest in their careers, even though intimate and loving family relationships are the most powerful and enduring source of happiness.

If you study the root causes of business disasters, over and over you'll find this predisposition toward endeavors that offer immediate gratification. If you look at personal lives through that lens, you'll see the same

stunning and sobering pattern: people allocating fewer and fewer resources to the things they would have once said mattered most.

2 CREATE A FAMILY CULTURE. It's one thing to see into the foggy future with acuity and chart the course corrections a company must make. But it's quite another to persuade employees to line up and work cooperatively to take the company in that new direction.

When there is little agreement, you have to use "power tools"—coercion, threats, punishment, and so on, to secure cooperation. But if

employees' ways of working together succeed over and over, consensus begins to form.


Ultimately, people don't even think about whether their way yields success. They embrace priorities and follow

procedures by instinct and assumption rather than by explicit

decision, which means that

they've created a culture. Culture, in compelling but unspoken ways, dictates the proven, acceptable methods by which members of a group address recurrent problems. And culture defines the priority given to different types of problems. It can be a powerful management tool.

I use this model to address the question, How can I be sure my fam-

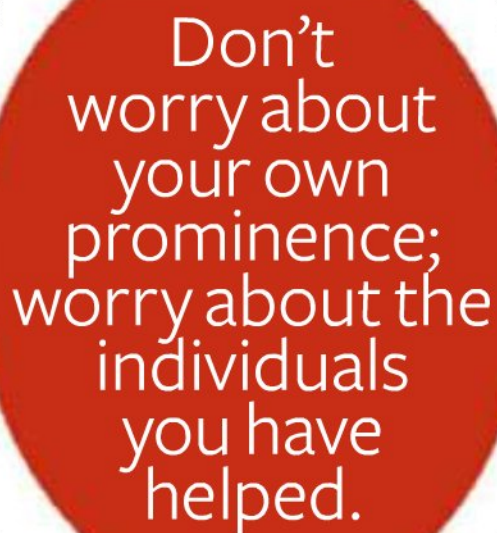


You've got to define for yourself what you stand for and draw the line in a safe place.

ily becomes an enduring source of happiness? My students quickly see that the simplest way parents can elicit cooperation from children is to wield power tools. But there comes a point during the teen years when power tools no longer work. At that point, parents start wishing they had begun working with their children at a very young age to build a culture in which children instinctively behave respectfully toward one another, obey their parents, and choose the right thing to do. Families have cultures, just as companies do. Those cultures can be built consciously or evolve inadvertently.

If you want your kids to have strong self-esteem and the confidence that they can solve hard problems, those qualities won't magically materialize in high school. You have to design them into your family's culture, and you have to think about this very early on. Like employees, children build self-esteem by doing things that are hard and learning what works.

3 AVOID "JUST THIS ONCE." We're taught in finance and economics that in choosing investments, we should ignore sunk and fixed costs and instead base decisions on the marginal costs—that is, the price of each individual new step or purchase. But I teach that this



Don't worry about your own prominence; worry about the individuals you have helped.

practice biases companies toward using what they've already put in place—what helped them succeed in the past—instead of guiding them to create the capabilities they'll need in the future. If we knew the future would be exactly the same as the past, this would be fine.

But if the future's different, and it almost always is, then it's the wrong thing to do.

The marginal cost doctrine addresses the third question I discuss with my students: how to live a life of integrity. Often when we need to choose between right and wrong, a voice in our head says, "Look, I know that as a general rule, most people shouldn't do this. But in this particular extenuating circumstance, just this once, it's okay." The marginal cost of doing something wrong "just this once" always seems alluringly low. It suckers you in, and you don't look at where that path is ultimately headed and at the full costs that the choice entails. Justification for infidelity and dishonesty in all their manifestations lies in the marginal cost economics of "just this once."

I'd like to share a story about how I came to understand the potential damage of "just this once" in my own life. I played on the Oxford University varsity basketball team. We worked our tails off and finished

the season undefeated. The guys on the team were the best friends I've ever had in my life. We got to the British equivalent of the NCAA tournament and made it to the final four. It turned out the championship game was scheduled for a Sunday. I had made a personal commitment to God at age 16 that I would never play ball on Sunday. So I went to the coach and explained my problem. He was incredulous. My teammates were, too, because I was the starting center. Every one of the guys on the team came to me and said, "You've got to play. Can't you break the rule just this one time?" I'm a deeply religious man, so I went away and prayed about what I should do. I got a very clear feeling that I shouldn't break my commitment, so I didn't play in the championship game.

In many ways, that was a small decision, involving one of several thousand Sundays in my life. In theory, I could have crossed over the line just that one time and then never done it again. But looking back, I can see that resisting the temptation of "just this once" was one of the most important decisions I have ever made. My life has been an unending stream of extenuating circumstances. Had I crossed the line that one time, I would have done it over and over in the years that followed.

The lesson I learned is that it's easier to hold to your principles 100 percent of the time than it is to hold to them 98 percent of the time. If you

give in to "just this once," based on a marginal cost analysis, as some of my former classmates did, you'll regret where you end up. You've got to define for yourself what you stand for and draw the line in a safe place.

4 REMEMBER TO BE HUMBLE. It's crucial to take a sense of humility into the world. If your attitude is that only smarter people have something to teach you, your learning opportunities will be very limited. But if you have a humble eagerness to learn something from everybody, your learning opportunities will be unlimited. Generally you can be humble only if you feel really good about yourself and want to help those around you feel really good about themselves too. When we see people acting in an abusive, arrogant, or demeaning manner toward others, their behavior almost always is a symptom of their lack of self-esteem. They need to put someone else down to feel good about themselves.

5 CHOOSE THE RIGHT YARDSTICK. Don't worry about the level of individual prominence you have achieved; worry about the individuals you have helped become better people. This is my final recommendation: Think about the metric by which your life will be judged, and make a resolution to live every day so that in the end, your life will be judged a success. ■

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DOWN-STAIRS
The ground feeding area will be a great attraction. The dome protects the feeders from rain and debris from above.

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Word Power

BY ROB LUTES

Going Places The height of winter always leaves us longing for some time away. If you, too, have a touch of wanderlust this month but can't manage even a mini vacation, this quiz might help: The theme is toponyms, words derived from place-names both real and fictional. Bon voyage! **Answers on next page.**

1. balkanize *v.*—A: divide into factions. B: coat with rubber. C: prevent from entering.

2. Byzantine *adj.*—A: artificial. B: complicated. C: dangerous.

3. sybarite *n.*—seeker of ... A: knowledge. B: power. C: pleasure.

4. lilliputian *adj.*—A: highly fragrant. B: very small. C: wondrous.

5. madras *n.*—A: colorful light-cotton fabric. B: hearty lentil soup. C: large, noisy crowd.

6. Dixieland *n.*—style of ... A: country music. B: country gospel. C: jazz.

7. tabby *n.*—A: type of silk taffeta. B: variety of wine grape. C: type of wallcovering.

8. El Dorado *n.*—A: symbol of peace. B: place of great wealth and opportunity. C: dance to celebrate life.

9. lyceum *n.*—A: trellised pathway. B: hall for public lectures. C: ornate display.

10. solecism *n.*—A: minor blunder in speech. B: expression of disgust. C: statement of worth.

11. jodhpurs *n.*—A: leather boots. B: riding breeches. C: protective gloves.

12. magenta *n.*—A: light pink. B: purplish red. C: dark blue.

13. Boeotian *adj.*—A: heavy. B: witty. C: dull or obtuse.

14. fescennine *adj.*—A: silent. B: loud. C: obscene.

15. canopic jar *n.*—jar for ... A: preserving food. B: storing embalmed entrails. C: keeping medicine.



Sound Smarter

Want to prove yourself a true grammarian? Take care to use *proved* and *proven* correctly. *Proved* is the verb form (a past participle, as in “Red with shame, Leah was proved wrong”). Use *proven* only as an adjective (“A trip to the tropics is a proven remedy for the winter blues”). Legalese exception: “innocent until proven guilty.”

Answers

1. balkanize—[A] divide into factions (the Balkan Peninsula was split into small warring nations). The policies *balkanized* the already troubled nation.

2. Byzantine—[B] complicated (the bureaucracy of Byzantium was complex). Confused by the *Byzantine* map, Jo was three hours late.

3. sybarite—[C] seeker of pleasure (the ancient Greek city Sybaris was known for wealth and luxury). A *sybarite*, Tom favored costly, rare Italian reds.

4. lilliputian—[B] very small (in *Gulliver's Travels*, the inhabitants of Lilliput were tiny). The *lilliputian* minnows slid through Puck's netting.

5. madras—[A] colorful light-cotton fabric (the style originated in Madras, India). Elsie begged Mom for the pricey orange-and-yellow *madras* top.

6. Dixieland—[C] style of jazz (Dixie is a nickname for the U.S. South, where the style originated). They sat for hours in awe of the *Dixieland* band.



7. tabby—[A] type of silk taffeta (the fabric was first made in Al-'Attabiya, Baghdad). Carol's elegant *tabby* scarf didn't suit her tattered tee.

8. El Dorado—[B] place of great wealth and opportunity (the city was said to hold fabulous riches). Eli labeled Silicon Valley his *El Dorado*.

9. lyceum—[B] hall for public lectures (Aristotle taught in Lyceum, a gymnasium near Athens). The professor feared the *lyceum's* massive scale.

10. solecism—[A] minor blunder in speech (a substandard form of language was spoken in Soloi, a city in ancient Cilicia). The groom's *solecism* led to the couple's first big tiff.

11. jodhpurs—[B] riding breeches (they were designed in Jodhpur, India). Lillie wore her old *jodhpurs* for the race.

12. magenta—[B] purplish red (the color's dye was discovered the year of the Battle of Magenta, Italy, 1859). At sunset, the sky turned a stunning *magenta*.

13. Boeotian—[C] dull or obtuse (Greek Boeotians were labeled bores by Athenians). Mae struggled to explain performance art to her *Boeotian* cousin.

14. fescennine—[C] obscene (the ancient Italian town Fescennia was noted for offensive verse). "Those lyrics are *fescennine*!" Will's mom cried.

15. canopic jar—[B] jar for storing embalmed entrails (it was mistakenly associated with Canopus, Egypt). King Tut's tomb holds four *canopic jars*.

Deep Roots

You might say your house has been absolute **bedlam** since that holiday puppy moved in, though you'd probably be exaggerating. Meaning "a state of uproar or confusion," the word is an allusion to Bedlam, the popular name of the Hospital of St. Mary of Bethlehem, an insane asylum in 14th-century London. (That spelling is from the Middle English *Bedlem*, or "Bethlehem.")

VOCABULARY RATINGS

- 9 and below: wordmonger
- 10–12: wordsmith • 13–15: etymologist

Challenge a friend to beat your score in our online game at readersdigest.com/wordpowergame.



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On his birthday, my husband was stuck driving our six rambunctious children around. As usual, they were yelling, punching, and annoying one another. Joel had finally had enough.

“Kids,” he said over the din, “if you would behave and be kind to each other, that would be a very nice birthday present for me.”

Our six-year-old shot back, “Too late. I already got you another present.”

Gayle Trotter, Washington, D.C.



“Nice party, but I guess I’m just not ready to meet anyone yet.”

■ That he was married, didn’t have a job, and lived with his parents.

Beau Jest

Thefrisky.com asked women to share some of the odd confessions they heard on a first (and last) date.

- That he had been stalking me online for over a year.
- That he was “polyamorous.”
- That he was a 9/11 conspiracy theorist who thought Bush/Cheney/Rove were behind the terrorist attacks.

I’d noticed that my 60-year-old father seemed to be losing his hearing, so I mentioned it to my mother.

“Things haven’t changed that much,” she said. “Only difference is, before, he didn’t listen. Now he can’t.”

Deborah Kelly, San Diego, California

After ringing cell phones ruined a service, our rabbi laid down the law in the latest temple newsletter: “Let’s turn off the technology and turn on each other.”

Annie Stutzman, Madison, Connecticut

I took four tires to a friend’s garage sale and was asking \$30 apiece. I needed

readersdigest.com 2/11

to leave for a few minutes, so I asked him to watch them for me.

“Sure,” he said, “but if someone offers less, how low are you willing to go?”

“Try for more, but I will accept \$15,” I said, and left.

When I returned, my tires were gone. “How much did you get for them?” I asked excitedly.

“Fifteen dollars each.”

“Who bought them?”

“I did!” *David Jensen, Vancouver, Canada*

My two daughters were discussing the less-than-desirable physical attributes they had inherited from their father.

The older one: “I hate my freckles from Dad.”

Her unsympathetic younger sister: “At least you got his freckles. I got his eyebrow.”

Tammy Riddle, Chagrin Falls, Ohio

House Dutiful

It's tough enough selling a home nowadays. Don't make the mistakes that turned off these readers on the City Room blog of the New York Times:

■ “It was a good house, well-maintained. But the bed with the person in it was off-putting.”

■ “The family dog, long departed, was stuffed and standing next to the fireplace. RIP Sparky.”

■ “The main distraction was dirt. Although there was the tiny child who proudly showed us the refrigerator full of ‘Daddy’s beer’ just outside an upstairs bedroom.”

Plenty of Time for All My Sand Shopping!



Seen in Glamis, California; from *Signspotting 2: More Absurd & Amusing Signs from Around the World* (Lonely Planet)

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See page 105 for details.

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Last Laugh

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In a final attempt to get the lilies to stand up straight in the vase, Elaine hung a picture and hoped they would get the idea.



Elaine so wanted to lounge outside, but when she saw a romantic moment between the two soda bottles, she left them in peace.

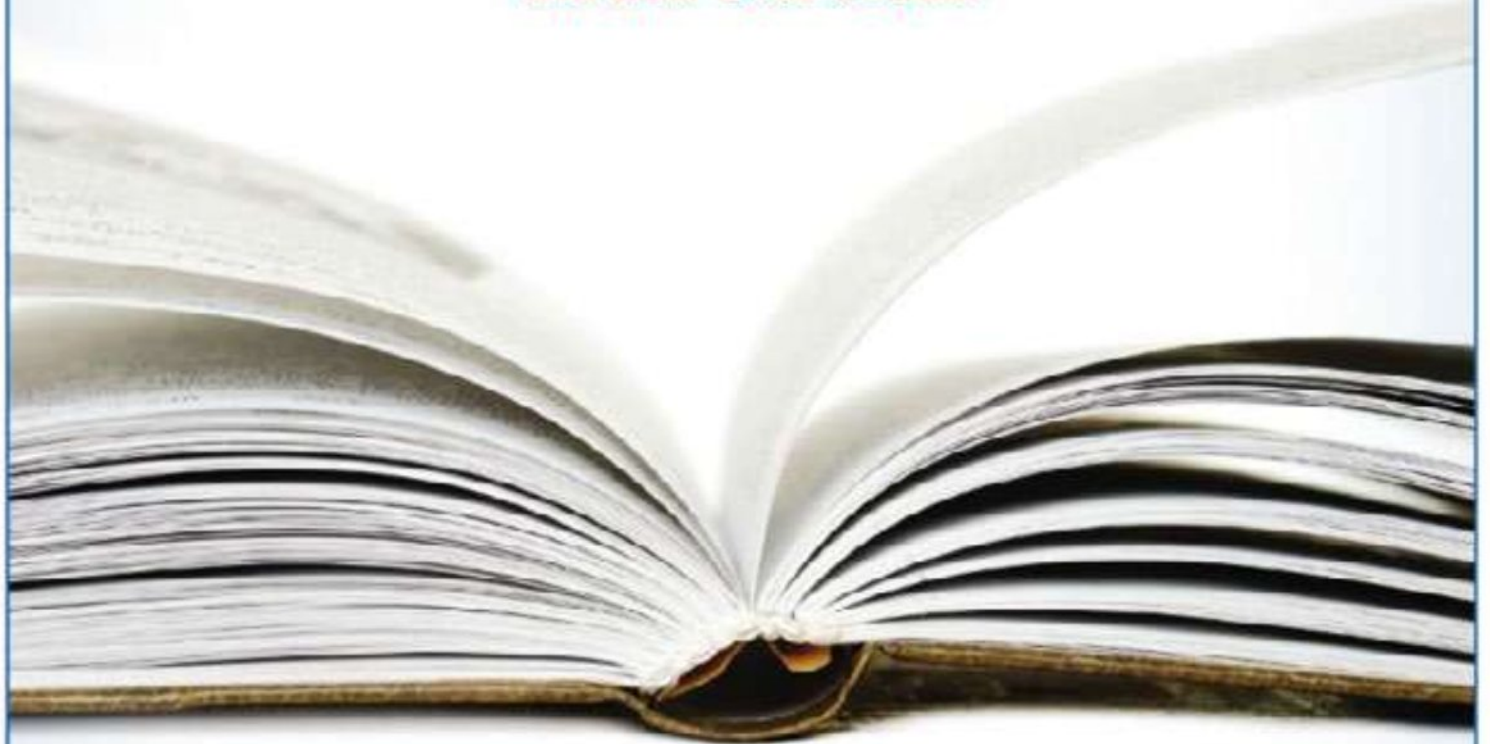


While Elaine wondered where all the apples had disappeared to, Gary thought he had a good idea.



Gary felt bad for the elk in the painting as they stared longingly at the frog, which had somehow managed to escape.

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