

Mike Nichols MD

Health Management

Nam et ipsa scientia potestas est.

Knowledge is power. - Francis Bacon

May 2010

Disaster Preparedness

"Look out Custer, here come the Indians"

I studied music throughout college; both theory and performance. Don't get me wrong I had no future there, just minored in it, but loved music; didn't need to take a 'music appreciation course.' A friend of mine did and through him, his Professor nearly ruined Dvorak's New World Symphony; at least for me. To help his students remember certain themes for the music recognition test the professor taught his students little phrases, for example, the title above fits, in meter and phrasing the opening of the New World Symphony. Don't look it up or try to remember the association or it will ruin the awfully fun score for you as well.

Here is the connection: somewhere between the paranoia of a committed survivalist and the indifference of a Pollyanna lies a prudent level of disaster preparedness. I will here offer some thoughts on the matter from a medical and health perspective so that some disaster doesn't ruin more than your appreciation of a symphony.

At every governmental level you are encouraged to prepare for emergencies. <https://www.ready.gov> is a good place to begin. They even remember to tell you to include your pets in your preparations.

First give some thought to what emergency you are planning for.

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Even if you are not going to prepare to survive a nuclear attack or all out biological warfare have such emergencies in mind as part of the spectrum for which you are preparing as it will help you think through what to buy and store for even that very likely eventual 8.0 Richter Scale Earthquake. Here is how; even as you plan for the minimum 3 day disruption of access to water, food and medical supplies you will want to think of a possible extended variation. What if it is a week, a month, not just three days? What would change, what else should you have thought of and prepared for?

Thinking in an expanded time scale will clarify not only what and how much to buy but storage, access and other issues as well.

I've been surveying the various providers of storable food. And here is where health issues start to come to the fore. If you have celiac disease I must warn you that almost all dehydrated and freeze dried foods are grain based. Even the full moisture MREs (Meal Ready to Eat) are high in grains and use plenty of soy based protein, oil and lecithin. Not all but most. The caloric provisions are important too. Some of the commercial, consumer directed ones are built on a very low daily calorie intake of 1,100 to 1,300 daily; that would be quite a shock to most of us. Some of the MREs built on or derived from military and international preparedness have a three meal daily calorie base of over 3,000 calories a day; that's more like it if you are going to be lifting downed trees, shoveling mud out of your basement, or walking everywhere as the gas stations, deprived of electricity to pump gasoline, can no longer do so. No gas, no car.

Water preparedness is well covered in most emergency preparedness planners like the one on ready.gov and other commercial sites. They are all a little light on medical considerations.

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While they remind you to have your medication on hand and a back up supply I must admit I know of very, very few who actually do have adequate water or medications as part of their disaster preparedness. They know it they just don't do it. I also recommend going beyond the basic topical antibiotics, bandages and over the counter pain medications. By the way don't overlook the laxatives; freeze dried food and limited water can have some unexpected, unpleasant consequences. Any domestic mountain climber or backpacker knows what I am talking about and any international climber or backpacker knows this is the last problem you will have so plan for both too loose and not loose enough. I recommend you have a little prescription strength pain reliever handy too. While you are at it have an above-the-belt antibiotic for that sinusitis, bronchitis or pneumonia that can happen and a below-the-belt antibiotic or combination for that recurrent diverticulitis you struggle with or for your tendency to urinary tract infections or traveler's diarrhea.

My purpose in this Newsletter is to get you thinking about disaster preparedness. I cannot in this brief forum outline the whole problem and approach but I encourage you to get started on a plan in the light of your level of concern and need for preparedness. Whether you are planning for a three day emergency, the minimum that FEMA and other agencies recommend or for weeks or months know that there is cost and unfortunately waste involved. Waste, you say? Yes, because that prescription pain reliever or over-the-counter antibiotic ointment will very likely not get used and must be rotated or purchased anew. Still if and when they are ever needed and yours are at hand you will be very, very grateful.

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Should you wish I am available at my normal consultation rates to work with you on a disaster preparedness plan. Whether or not you wish to have my help, take heed and plan ahead.

Smile! Smile? Yes, Smile and God Speed,

Dr. Mike

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