

Prairie Fare: What you eat may affect your vision

BY JULIE GARDEN-ROBINSON, NDSU EXTENSION FOOD & NUTRITION SPECIALIST



Vegetables contain a variety of health-promoting phytochemicals with health-promoting properties. (Pixabay photo)

I noticed our backyard was starting to sprout green grass after some April showers. Some of my perennial plants are beginning to peek through the mulch in my flowerbed. I look forward to the pink, red and yellow tulips of spring.

Springtime is a favorite season for many as the colorful blossoming bulbs begin to appear. Of course, growing grass means mowing, but that activity promotes physical activity.

I am thankful about being able to enjoy the colors of spring and our upcoming summer. Unfortunately, not everyone has the ability to see well. As we grow older, we have greater risk of developing age-related vision issues. Regular vision screening can help prevent vision loss.

"Three of my friends have macular degeneration," I overheard someone say the other day.

My ears always perk when I hear about diseases with potential nutrition connections.

Macular degeneration, also called age-related macular degeneration or AMD, is a potential cause of blindness if untreated.

The macula or "yellow spot" is contained within the retina of the eye. It gives us the ability to have central vision and see color, and it allows our eyes

and brain to translate light into images.

The macula is about the size of the letter O in 12-point font used commonly in newspapers or magazines. Despite its small size, the macula plays an all-important role.

If the macula is damaged, we may lose our ability to do many tasks of daily life that require sharp vision. Those activities include driving, seeing faces in front of us and reading smaller print.

The macula is made up of lutein and zeaxanthin, which are two natural colorants, or pigments. They are in the carotenoid family of pigments.

We need to "feed" the macula by eating colorful fruits, vegetables and egg yolks.

Although you may think of carrots as being good for your eyes, other foods have larger amounts of these pigments to nourish the macula.

Corn, orange bell peppers, kale, collard greens and spinach are among the best sources of zeaxanthin. Egg yolks, dark leafy greens, corn and peas are among the best sources of lutein.

Remember that fresh, frozen, and canned vegetables and fruits are all good sources of these nutrients and provide abundant carotenoids.

Are you eating these foods and other colorful fruits and vegetables regularly? Most adults need about 4 to 5 cups of fruits and vegetables daily.

What about carrots and our eyes? Keep eating carrots, too, for lots of reasons. Carrots are rich in carotenoid pigments, and they help protect our night vision, but they do not contain the pigments in the macula.

Green vegetables such as broccoli, orange and red fruits, and vegetables such as pumpkin and tomatoes are all good sources of healthful carotenoids.

Dietary supplements are another option, but think of food first. Fruits and vegetables contain a variety of health-promoting phytochemicals (plant chemicals) with health-promoting properties.

As the sun grows brighter and

the weather warms, protect your eyes. Wear high-quality sun glasses and a wide-brimmed hat during outdoor activities such as picnics, gardening, walking and golf.

Be sure to have regular vision screening with your eye care professional. Many eye health professionals recommend a vision exam with dilated eyes for everyone over 50 years, or as recommended by your eye care professional.

Enjoy the colors of nature outdoors and on your plate.

Have you tried making ranch dressing from scratch? You might have all the makings in your cupboard and refrigerator. This can be used as a dip for colorful veggies or a dressing for your favorite salad greens to help nourish your eyes and your body.

Ranch Dressing Master Mix

2 tablespoons dried parsley flakes

5 tablespoons dried minced onions

1 tablespoon salt

1 teaspoon garlic powder

Mix together and store in an airtight container until ready to use. Label, date and store in a cool, dry place. Use within three months.

To prepare ranch salad dressing, mix together:

1 cup low-fat mayonnaise

1 cup low-fat buttermilk

3 tablespoons dry ranch mix

Chill salad dressing for a couple of hours in the refrigerator before serving to blend flavors. Shake and serve.

(Julie Garden-Robinson, Ph.D., R.D., L.R.D., is a North Dakota State University Extension food and nutrition specialist and professor in the Department of Health, Nutrition and Exercise Sciences.)

Prairie Doc... Reflecting on progress

By Debra Johnston, MD

It's human nature to tell stories about the past, and doctors aren't immune to that impulse. The second year medical students rotating through my clinic have me reflecting on my own years as a fledgling physician, and the changes I've seen in my decades of practice.

I remember one late evening spent in the PICU watching over a toddler who had meningitis. At one point I turned and bumped into a bedrail, which came crashing down. Both my preceptor and I jumped, and I probably even shrieked. The child, however, didn't even blink. That's when we knew her illness had left her profoundly deaf.

The seasoned pediatrician I was with that month had started practice before the introduction of the Hib vaccine. As we talked about what we could do now for the child in our care, he told me stories from "the old days", when the PICU at Sioux Valley Hospital would perpetually have 2 or 3 children being treated for meningitis. Less than 10 years later, our unimmunized patient was the first case they'd had in months.

Early in my own practice, winter months would see at least a child or two here in Brookings hospitalized with rotavirus on any give day, and the occasional adult. They would be with us for a few days or even a week, getting IV fluids until the diarrhea slowed down. Our first vaccine had rare but serious side effects and was pulled off the market.

The vaccine we've been using for nearly 20 years now has turned the illness into something that rarely lands a child in our hospital. To be sure, we still see rotavirus infections. It's just that far fewer patients are so sick that

they require IVs.

This last year, we got a new weapon against another common childhood scourge. RSV has been a terror for longer than I've been in practice. It results in the hospitalization of nearly 2% of children before they turn 1. We now have two ways to protect infants. The first is a traditional vaccine given to expectant mothers later in their pregnancy. Mom's immune system responds by developing antibodies, which are transferred to the infant. Since babies' immature immune systems can't respond to the vaccine we have for RSV, we can't give them that vaccine. However, we have an antibody against RSV that can be given directly to newborns. We've had something similar for most of my career, but it was expensive and had to be given monthly, so we only used it in the highest risk children. This new version is much less costly, and requires only one shot.

These strategies don't teach the baby's own immune system to fight the infection. Instead, they provide temporary soldiers to wage the battle. That protection will fade, and the baby's immune system will still have to learn to fight RSV by catching it, but we will have delayed that day until the child is older, and less likely to get terribly sick.

I am optimistic that RSV, too, will become something we still see, but that doesn't cause the suffering it once did. And I wonder, what will my young colleagues someday tell their future students about medicine in "the old days?"

Debra Johnson, M.D. is part of The Prairie Doc® team of Physicians. Follow The Prairie Doc® at www.prairiedoc.org and on Facebook.

SUDOKU

No. 695 Very Hard

		8	4			7		
7				6			8	
9	4			7				6
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	7							1
5			2	3				
8				1			4	9
	9			5				2
		4			9	3		

Previous solution - Tough

5	2	3	9	7	6	1	8	4
6	9	1	8	4	2	7	3	5
7	4	8	3	5	1	2	6	9
9	1	2	6	8	5	3	4	7
4	6	5	2	3	7	8	9	1
3	8	7	4	1	9	5	2	6
1	3	6	5	9	8	4	7	2
8	7	9	1	2	4	6	5	3
2	5	4	7	6	3	9	1	8

To complete Sudoku, fill the board by entering numbers 1 to 9 such that each row, column and 3x3 box contains every number uniquely.

For many strategies, hints and tips, visit www.sudokuwiki.org

If you like Sudoku you'll really like 'Str8ts' and our other puzzles, Apps and books. Visit www.str8ts.com

The solutions will be published here in the next issue.

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Field Inspector Wanted WILL TRAIN!

The North Dakota State Seed Department is seeking a seasonal field inspector who lives in or around the Dickey or Lamoure county areas. Small grain field inspection work is primarily in July-August for a minimum six weeks; soybean inspections are in September. Inspectors are guaranteed 240 hours of pay. No experience necessary. Training and vehicle are provided.

Contact NDSSD by emailing ndseed@ndseed.ndsu.edu or calling 701.231.5400 with questions.

PROPERTY FOR SALE BY BID

Dickey County is accepting bids for the sale of Lot 12 Block 31, First Addition, City of Ellendale, which is located at the northwest corner of the intersection of Third Street and Third Avenue North, with a 911 address of 221 3rd St. N. The property is sold as is. All bidders will be invited to do oral bidding on the parcel after the initial bid opening at the Commission Meeting on May 21st at 10:00 am.

Minimum Bid: \$3,600.00.

Bids to be opened: May 7, 2024, at 10:30 a.m.

Place: Dickey County Board of Commissioners Meeting Room, Dickey County Court House, 309 2nd St. Ellendale ND.

Bidders Information: Each bid envelope shall contain only one bid proposal and shall be marked with words SEALED BID-Lot 12, Block 31 First Addition. Mail bids to Dickey County Auditor, PO Box 215, Ellendale, ND 58436. Bids must be in the possession of the auditor before 4:30 p.m., May 6, 2024. The Board reserves the right to reject any and all bids.

ND Concealed Weapon License Certification

For More Information Call: (701) 710-1268 or E-mail: paladin.institute.llc@drtel.net

Upcoming Classes in Ellendale

April 27th June 1st

July 6th August 10th

All Classes Start at 9:00 AM - Pre-registration Required



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