

# That \$100 “Hamburger”

by

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When I was first learning to fly, one of the proffered advantages of aviation, and its potential privilege of plane ownership was to fly to an out-of-the-way place where an expensive meal could be consumed, with the exotic atmosphere of airport noise and the sensation of pleasure that comes when you figure you just spent lavishly for an ordinary culinary experience. I never could understand the additional attraction of the so-called “watering hole,” since both the FAA and this doctor’s common sense told him that alcohol and flying were not a good combination, either in the cockpit or in the pilot’s brain. For even one drink can knock out at least 100 good brain cells. They don’t recover either, unlike our skin, an ulcer, or a broken bone. And, I never figured that I could afford to lose that many, especially as the years advancing on me showed other signs of “maturity.”

There was something else about that gourmet meal that invited cautious investigation. For with middle age comes a risk, not unlike that vintage airplane who is due for its annual. The weigh in at the pilot’s medical, while not usually a cause of rejection, does reveal accurately a growing problem in human health; the waistline begins to expand. Every pilot knows that weight and balance are important in the take off distance. And, the center of gravity must be within certain limits for best performance in the air, such as recovery from a stall. Why should the pilot be less concerned when his center of gravity is sinking, as if the chest muscles were sinking into the abdomen? In youth we start off top heavy, with powerful chests, inflated ideas of grandeur and invincibility, and slim trim waists. But what happens over the decades, when the pilot starts to get bottom heavy, pear shaped, and weaker in the upper torso. My medical contention is that this need not be. It is up to the pilot to take corrective action, before the blood pressure rises, the sugar check shows signs of diabetes, or a disk bulges in the back, sidelining the pilot for months if not longer.

Just like the oil check in the pre-flight, an annual physical gives the pilot opportunity to check his oil. It is called a lipid panel, which means that the blood cholesterol (both the good kind, called HDL and the not-so-good type called LDL) and the triglycerides (fats and oils in the serum) are carefully monitored. Like faithful cockpit instruments these biologic “avionics” checks are helpful in assessing the risk of a premature crash, where an unforeseen heart attack or other cardiovascular event can put a sharp pilot in the unhappy “penalty box” for a long time.

The “it can’t happen to me” syndrome affects aviators much more seriously than flying unexpectedly into IFR weather conditions. We can easily get cavalier about our lifestyle, and diet is one of those pleasures that really demands close attention, much like the sterile cockpit accomplishes during a strong crosswind landing flare. When it comes to that \$100 hamburger, there is a consideration we American pilots should consider. At home on the range, where not only cows but deer and elk are grazing, there’s a disease stalking our herds, which you can see neither from the air nor in the laboratory. It is called the mad cow disease, but the illness also affects many other animals, including deer and elk. Caused by a deadly particle called the

“prion,” this disease produces detonation in the head of the hapless critter, and eventually the brain is full of holes, looking like Swiss cheese. Unfortunately, there is no cure, neither drug nor chemical, nor cooking temperature that can eradicate this fatal condition. And any person who consumes the meat of a mad cow, especially if it contains nerve tissue—the brain or spinal cord—has up to a 50-50 chance of getting the human form, also deadly, called CJD (Creutzfeldt-Jakob disease).

Feed lots are breeding grounds for this infection, because of the animal waste used in high protein supplements, given to fatten up the animals for better profits at time of slaughter. While organic grain-fed animals have decreased risk, the problem does not completely resolve. I thought about this last year in Oklahoma, when a group of aviation instructors were recommending spare ribs as a local delicacy. Instead, I opted for a “veggie-sub” which seemed both safer for the heart and free from the then-current risk which remains in the weekly news reports. There are increasing reasons to watch the weight, and keep the bench marks of health in optimum ranges, like we do our manifold pressures and prop speeds.

The best health care is not waiting until a crisis comes, dialing 911 (or 121.5) and heading for the nearest emergency room. It is called preventive maintenance, the privilege of every private pilot, and consists of living in such a way that our risk of sickness or premature death is minimized. Consider with me this new pilots adage: “That which we expect to find in the hereafter, depends on the way we choose to live, while we are dwelling here!”

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*[Doctor Hansen, author of the popular book on home health care, **Get Well At Home**, currently serves as medical director of the **Emerald Valley Wellness Clinic**, and its **Live-for-Health Seminars** in Creswell, Oregon. Pilots who for health reason are having trouble passing their medical should contact us. For further information or inquiries, contact: **clinic1@emeraldwellness.com**]*