

a letter from the President

SEVERAL YEARS AGO ADK embarked upon an effort to become more responsible environmental stewards of our facilities in Lake George and at Heart Lake. Many of our volunteers and staff worked toward evaluating our facilities, attempting to see how we could reduce ADK's carbon footprint, and trying to ensure that our facilities were geared toward a more sustainable future. During

that time, we have taken the following steps:

▲ Rebuilt our geothermal heating/cooling system at Lake George. While the initial costs were more expensive, the long-term costs will be less and the environmental benefits substantial. In addition, should ADK ever decide to sell the facility, the increase in

value will be beneficial.

▲ Implemented upgrades to Johns Brook Lodge including expanded and more efficient solar arrays. (Look for more on this in a future issue.)

▲ Had our eye on "green" improvements at Heart Lake that reduced the impact of the manufacturing of construction components used in the

wash house, the Hungry Hiker, and the recently expanded and improved High Peaks Information Center.

On a personal note, a little over a year ago, following the lead of several ADK members, we added solar panels to the roof of our home in the Berkshires. In the first year, that step generated more than 11 kW of electricity, zeroing out our electric bill, and reducing CO2 emissions by something near eight tons, the equivalent of planting more than four hundred trees. I urge anyone interested in taking such steps to thoroughly investigate the options. Please feel free to call me or other ADK members who have followed suit—I am certain they will be happy to provide advice and suggestions.

ADK will continue to look for ways to reduce our effect on the environment, from the standpoints of both energy consumption and simply going

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Painful Pee

By Tom Welch, M.D.

URINARY TRACT INFECTION (UTI) is one of the most common complaints bringing folks to their primary care providers. Since the urinary tract encompasses everything from the kidneys, where urine is made, to the urethra, the final tube through which it leaves the body, a UTI can involve a host of structures. UTIs can range from simple infections in the bladder, which may be more

of a nuisance than a real threat to health, to pyelonephritis, an infection of the tissue of the kidney that can be life-threatening. UTIs rarely may spread to the bloodstream, a condition called urosepsis and which carries a very high mortality rate.

The symptoms of UTI generally depend upon what part of the urinary tract is infected. The vast majority of infections involve the bladder, and are associated with painful urination, the sudden urge to urinate, and increased frequency of urination. Systemic symptoms such as fever are not common with bladder infections.

Infections in the kidney tissue itself tend to have more dramatic symptoms. These are the infections that typically have fever and general ill-health. There may be significant back or flank pain with pyelonephritis, as well as gastrointestinal symptoms such as nausea and vomiting.

While UTI may occur spontaneously in an otherwise normal urinary tract, it is also a frequent complication of underlying problems such as obstruction of the urinary tract (as in older men with prostate problems) or with kidney stones.

Treatment of suspected UTI begins

with a laboratory examination of a urine sample, which should dictate the appropriate type of antibiotic required, if any.

There is little in the way of first aid available in the event of a suspected UTI in the backcountry. Because of the risk of fulminant (quick and severe) urosepsis, anyone suspected of a kidney infection (fever, back or flank pain, with or without urinary symptoms) should be evacuated for definitive evaluation and care immediately. While bladder infections are not life-threatening, the symptoms can be so disabling that continuation of a trek could be untenable. Maintaining a good fluid intake and emptying the bladder as often as possible may help to minimize symptoms until definitive care can be reached.

Prevention of UTI in the backcountry begins with preparation. Some folks are predisposed to recurrent UTI, sometimes because of underlying problems such as stones or kidney cysts but otherwise for no apparent reason. These individuals may wish to consult with their personal health care providers regarding the potential benefit of carrying a supply of appropriate antibiotic to be used in the event that symptoms were to develop. This is a somewhat controversial approach, but it is certainly

outdoors. We will continue to reach out to our members, especially to younger members as the next several generations become the future of ADK, and in particular to the youth of the North Country through the Marie L. Haberl Three Seasons at Heart Lake School Outreach Program, making sure they understand the value of our environment and how they can help protect it. If you wish to support this fine program, please go to www.adk.org and consider making a donation online.

At a time when we face certain environmental challenges due to climate change and global warming, we must all take active steps to reduce the effect we have on the environment. We have an obligation to do so for the sake of future generations. Remember, we are all ADK. ▲

—John Gilewicz, President

worth a discussion prior to embarking on a trek into the wilderness. (This is one of the few situations in which I recommend campers carry antibiotics with them.) Homeopathic remedies such as cranberry juice are either not evidence-based or, when studied, have proven unhelpful.

A couple of situations can predispose to UTI, and could occur on a trek. When urine sits for prolonged periods in the bladder, it may become more susceptible to infection. Thus, both maintaining a good urine output by taking adequate fluid and regularly emptying the bladder during the day and before nighttime are advisable. Constipation may interfere with complete bladder emptying, so avoiding this is also important. Finally, to the extent feasible in the backcountry, women should try to maintain good perineal hygiene. ▲

Tom Welch, MD, is a physician at Upstate Medical University in Syracuse and a member of the Wilderness Medical Society. He is a licensed professional guide and a Wilderness Education Association instructor, and has guided groups in the Adirondacks, Montana, and Alaska. For more information, www.adirondoc.com.

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