



Aviation Human Factors Industry News

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"Classic Traps"

The Nose Tire Assembly Trap - ASRS Report:

In a **maintenance scenario** reported many times to ASRS, a technician is asked to change a B767-300 nose tire assembly. The work is performed and the aircraft is returned to service. All seems to be well – until a later inspection finds that the wheel washers or wheel spacers are **missing**. Here's how that can happen:



- Technician Y and [I] were assigned to the ETOPS [Extended Range Operations] and overnight check on Aircraft X. I don't recall who found the left nose tire worn, but I proceeded to get the equipment to change the assembly. Technician Z...rolled out a new tire assembly. I jacked up the nose tire and loosened the lock bolts and the axle nut. Usually, once the axle nut is broken loose, the tang washer will slide right off the axle. Unfortunately, in this case, the tang washer **stuck** to the tire assembly and neither Technician Y...nor I noticed this...At the conclusion of the routine check, I signed off the tire on the logbook...The aircraft departed without incident and a few days later during a preflight inspection, maintenance noticed the **improperly installed nose tire assembly**. The fact is the tang washer on the removed tire stuck to the bearing with grease and it did not occur to me that one belonged there with the new assembly.

Affected airlines have now started adding special instructions about the B767-300 washers/spacers to their job cards. In the meantime, maintenance technicians **should be aware that both washers and spacers can stick to greasy wheel assembly parts**, and be easy to miss.

FAA Orders Grounding Of Seven UAL 747s to Check Avionics

Inspectors Find Faulty Test Equipment at Outsourced Facility

This'll do nothing to quell the argument over outsourced maintenance for US airlines. On Thursday, seven United Airlines Boeing 747-400s were temporarily grounded, while personnel worked to determine whether cockpit avionics serviced at a South Korean maintenance station were in compliance.



The FAA ordered the jets grounded, according to The Wall Street Journal, after calibration equipment at the Ameco facility was **found to be faulty**. A source close to the matter said the needed checks require only a few hours, but added one UAL flight from San Francisco had already been delayed by as much as five hours.

FAA inspectors in South Korea reportedly found some of the equipment at Ameco **wasn't properly calibrated**, and ordered the airline to ground the aircraft. United's action comes two days after the FAA announced a sweeping "spot check" program, to determine whether airline maintenance facilities were properly complying with required checks and airworthiness directives. The agency took action following revelations Southwest Airlines failed to comply with required fatigue and rudder inspection checks last year, but continued flying the planes anyway.

United spokeswoman Jean Medina told Bloomberg the airline "found no issues" so far, and claimed no flights had been delayed or cancelled due to the checks.

It didn't take long for Teamsters President James Hoffa Jr. to link the groundings to the controversial issue of outsourced maintenance at foreign-owned facilities. "This just shows how risky it is to send airplanes offshore to be repaired," Hoffa said. As ANN reported Thursday, the Teamsters are actively seeking to take over representation for United mechanics.

Medina downplayed Hoffa's claims. "United's maintenance requirements and procedures meet, and typically exceed, FAA standards," she said in an email to Bloomberg. "**They are the same** no matter where the work is performed -- in the United States or overseas."

It's not clear how many United 747s may have flown away from the facility with erroneous altitude recording calibrations, or if planes flying for other airlines may have also been affected.

Indonesia releases final report of AdamAir Boeing 737-400 accident

The Indonesian accident investigation board, KNKT, released the final report of their investigation into the January 1, 2007 accident of an AdamAir Boeing 737 in which all **102 occupants were killed**. They found that, during the flight from Surabaya to Manado, the Inertial Reference System (IRS) malfunctioned.



Both pilots became **engrossed with trouble shooting** the IRS anomalies for at least the **last 13 minutes** of the flight, with minimal regard to other flight requirements. The pilots selected Attitude in the IRS, which disengaged the autopilot. After the autopilot disengaged and the aircraft rolled right and exceeded 35 degrees right bank, the pilots appeared to have become **spatially disoriented**. Control was lost and the **airplane broke up** and crashed into the sea.

CAUSES:

- 1) Flight crew coordination was less than effective. The PIC did **not manage** the task sharing; **crew resource management practices were not followed**.
- 2) The crew focused their **attention on trouble shooting** the Inertial Reference System (IRS) failure and neither pilot was flying the aircraft.
- 3) After the autopilot disengaged and the aircraft exceeded 30 degrees right bank, the pilots appeared to have become spatially disoriented.
- 4) The AdamAir syllabus of **pilot training did not cover** complete or partial IRS failure.
- 5) The pilots had **not received training** in aircraft upset recovery, including spatial disorientation.

OTHER CAUSAL FACTORS:

- 1) At the time of the accident, AdamAir **had not resolved** the airworthiness problems with the IRS that had been reoccurring on their Boeing 737 fleet for **more than 3 months**.
- 2) The AdamAir maintenance engineering supervision and oversight was **not effective and did not ensure that repetitive defects were rectified**. (KNKT)

Brake Problems Led to United Jet Skids

Two United Airlines A320 jetliners skidded off runways in recent months because of **crossed wires in their antilock brakes**, the airline said.



A United spokeswoman, Megan McCarthy, said on Sunday that both planes had **been tested after maintenance**, using a **test procedure devised by their builder**, Airbus. United, owned by the UAL Corporation, is evaluating the test procedure, she said. A spokesman for Airbus, Clay McConnell, said that his company was working with the airline and federal officials to investigation, but had **no indication thus far that the test procedure was inadequate when properly carried out**.

One of the planes, landing at **O'Hare International Airport** in Chicago on Oct. 9, skidded off the runway and then back on. A passenger and a flight attendant suffered minor injuries. On Feb. 25, a plane landing at **Jackson Hole**, Wyo., skidded past the end of a runway and hit a snow bank. Passengers and crew used the emergency slides to get out; there was one minor injury.

The National Transportation Safety Board is investigating both incidents. The fact that they had **the same cause** was reported Sunday by The Chicago Tribune.

Airplanes have antiskid systems similar to those on cars, though they are more automated. The brakes are applied when there is enough weight on the wheels; if a wheel starts to lock up and skid, the computer releases pressure on it to allow it to turn again.

According to a preliminary report on the Jackson Hole accident on the safety board's Web site, investigators found that, because of **crossed wires**, the system was using the speed of one wheel to decide to release the pressure on another wheel, almost guaranteeing a skid.

A check of United's other 95 A320s found one additional plane with crossed wires.

Ms. McCarthy said that the **work had been done by both outside maintenance companies and United's own mechanics**.

Unions have raised questions about the adequacy of work done by outside contractors, but Ms. McCarthy said that all work was performed according to programs approved by the Federal Aviation Administration, and that the airline was responsible for the quality of the work whether it was done in-house or contracted out.

This is United's second recent maintenance issue. The F.A.A. recently discovered that Korean Air Lines, a maintenance contractor, had checked the performance of altimeters on seven of United's 747s using an instrument that had **not been calibrated** as required. And Delta Air Lines and American Airlines, owned by the AMR Corporation, have recently grounded scores of planes to double-check whether **wiring was secured properly**, resulting in hundreds of flight cancellations.

A House committee is to hold hearings this week on the adequacy of the F.A.A.'s oversight and failure of Southwest Airlines to properly inspect the skins of some aging Boeing 737s.

[After Canadian Crash, Court Attacks Airline Culture](#)

Mark Tayfel managed a relatively safe landing on a public street in **Winnipeg** with both engines out that was, said one man, "an absolute miracle," according to Canada.com. Unfortunately, Tayfel had initiated the flight with six passengers aboard and **without enough fuel** to reach its destination, and one of Tayfel's passengers, 79-year-old Chester Jones, died of his injuries a few weeks after the crash. The trial regarding the 2002 crash apparently convinced the judge that a **"culture"** within the airline industry **"pressures young pilots to break the law."** Justice Holly Beard last week sentenced Tayfel to 240 hours of community service and a curfew. "It's clear the **failure to follow aeronautics regulations** is very prevalent," said Justice Beard while delivering Tayfel's sentence. And she would not lay blame for that culture squarely on Tayfel.



Prosecuting attorney Brian Wilford had argued that Tayfel had **acted recklessly** in his initiation of the flight and **did not communicate** the aircraft's condition until it was too late. Defense lawyer Balfour Der argued that Tayfel had not set out to endanger himself or his passengers and could better serve the community by **preaching of his mistake to student pilots**. Der noted that Keystone Air, Tayfel's employer, did not appear in court in support of his defense and that the company should have been held liable. Tayfel's former boss George Riopka did comment on the outcome of the trial, however, saying the judge's characterization of airline culture is outmoded. "That culture they're talking about is a dying breed in my eyes. There's very little of that in the aviation industry today from what I've seen," he told [The Globe and Mail](#).



Door Falls Off Challenger

FAA investigators were to have arrived in Grand Junction, Colo., Tuesday to try and determine why the **cabin door fell off** a 25-year-old Canadair (Bombardier) Challenger 600 on climbout from the local airport. The door fell in a desert area and no one was hurt on the ground or in the air. It's not clear how many people were on board the aircraft, which is registered to a company in Snowmass, Colo.

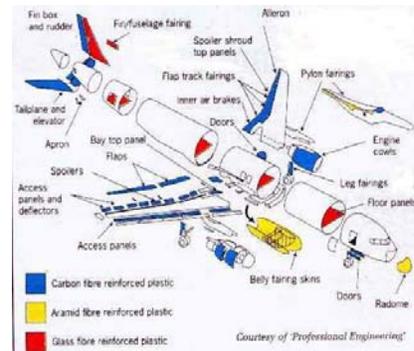


The incident occurred shortly after the aircraft took off from Grand Junction Regional Airport about 3:30 p.m. on Monday. The aircraft circled the airport briefly before landing uneventfully at about 4 p.m.

Chunk Falls Off Jet Over Baltimore

A piece of **composite material** fell off of a plane flying over Baltimore last Saturday.

Federal Aviation Administration officials said US Airways flight 1250 landed safely in Philadelphia after a piece of the **jet's wing broke away** and struck a passenger window. The flight was en route to Philadelphia from Orlando.



There were no injuries reported among the 180 people on board. The plane has been taken out of service while the Federal Aviation Administration investigates what happened.

Pictures May Show Bullet Hole In US Airways A319

When the gunshot is coming from the cockpit, there's a lot to figure out and that's undoubtedly why we don't know exactly what happened aboard US Airways Flight 1536 from Denver to Charlotte on Saturday. But pictures obtained by the **Associated Press** show what appears to be a **bullet hole** next to the captain's sidestick and an exit hole in the skin below the side window. The so-far unidentified captain of the flight is on leave while the airline, the FAA, the TSA and quite likely the FBI look into his alleged faux pas. .



The shot was fired as the A319 approached Charlotte and it appears the bullet breached the pressure vessel. The FAA says it's inspecting the aircraft to make sure it's fit to fly. It's also worth noting that no one else on board was aware of the shot.

Some Pilots Blame TSA For Cockpit Gunfire

The Airline Pilot Security Alliance (APSA) Thursday released a statement saying that TSA weapons-handling rules are to blame for the **accidental** discharge of a pilot's firearm while in the cockpit of a flying US Airways jet last weekend.

The APSA pointed specifically to the TSA's requirement for pilots to remove the guns from their person, lock them and carry them "off-body" when off the flight deck. The group quotes an unidentified federal flight deck officer who said the pilot involved was preparing for landing and was **trying to remove his gun and secure it when "the padlock depressed the trigger."** Personal responsibility aside, the rules may force some pilots to handle their guns **ten times each day** and that much gun play is "a recipe for disaster," according to David Mackett, president of the APSA. APSA's press release concluded with one pilot's opinion that Congress should take a look at how the program is operated, and the suggestion that pilots should follow the same procedures applied to federal air marshals.



Inspector arrested in crane collapse case

He allegedly lied about checking the New York crane before it fell, but would probably not have prevented the wreck.

A building inspector has **been arrested** after **allegedly filing a false inspection** of the crane that collapsed last week in Manhattan, city officials said Thursday.



Edward J. Marquette, 46, an inspector at the Department of Buildings' Division of Cranes and Derricks, **allegedly lied** about performing an inspection March 4 of the crane, which collapsed and killed seven people. He had been assigned to check it after a neighborhood resident complained that the crane did not appear to be properly braced to the building.

"According to our investigation, Marquette **made false statements** on his route sheet indicating that he had inspected the crane. He has admitted to DOI that he did not inspect the crane on March 4," Rose Gill Hearn, commissioner of the Department of Investigation, told reporters at the site of the disaster.

But the Department of Buildings told reporters that even if the inspection had been conducted, it probably would not have prevented the horrific accident.

"We think it's highly unlikely that the lack of this inspection caused or was remotely associated with the accident," said Patricia Lancaster, buildings commissioner.

"We believe at this time that the accident was caused during the jumping operation by mechanical failure or human error."

Lancaster said that the crane and its ties were built according to their approved plan, and the pieces involved in the "jumping" operation underway when the crane collapsed were not on site March 4.

All pieces of equipment have now been removed to protective custody to be inspected by forensic engineers, she said.

Lancaster said that she had ordered re-inspections of all of Marquette's work over the last six months and that the Department of Investigation would **do a full audit** of all inspections and the entire Division of Cranes and Derricks, since it was important to make systems transparent to the public and have a **"zero-tolerance policy towards corruption."**

"Today I suspended Marquette. We will not tolerate this kind of behavior at the Department of Buildings," she said.

Office of Emergency Management Commissioner Joe Bruno said that residents of nine of 18 evacuated buildings in the area had been allowed to return to their homes.

FIRST ANNUAL HUMAN FACTORS IN AVIATION MAINTENANCE PRACTITIONER'S SYMPOSIUM

Coming April 21-22, 2009 to Myrtle Beach!



The Aviation Consulting Group is currently accepting expressions of interest for the **First Annual Human Factors in Aviation Maintenance Practitioner's Symposium** to be held in Myrtle Beach, SC on April 21-22, 2009. This will be a 2 day event with speakers from within aviation industry as well as academia.

We are currently seeking presenters for this symposium. If you work in any area of **human factors in aviation maintenance** we would like to hear from you.

We are particularly interested in practitioner's (those who are in charge of, or work with, aviation maintenance HF programs) on a daily basis. We are also interested in researchers and academics.

Who Should Attend?

- Managers
- Supervisors
- Quality assurance
- Line maintenance technicians
- Manufacturers
- Trainers
- Researchers
- College students
- Those interested in learning more about human factors in aviation maintenance
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Please visit <http://www.tacgworldwide.com/symposium.htm> for the most current information.



AUDIO SAFETY TALKS!

DON'T GO THERE

Yes, good employees use their initiative. But there's a **big difference between initiatives and taking on a task you haven't got the training or authorization for.** Make sure your employees know the difference, and know when to seek out safety training, with this safety talk. Because an untrained employee can become an **injured employee** very quickly.

[To listen to the talk, click this link](#)



Midnight Shift Nugget

Overtime Overload

Although logging extra hours at the airport may put extra cash in your pockets, it takes a toll on your **health.**



Research shows that working extra hours may **increase the risk of occupational injuries and illnesses**, regardless of job type. In a study, people whose occupations required frequent overtime were 61 percent more likely to become injured or sick. Stick to a 40-hour workweek whenever you can.

A lifestyle that balances work and leisure time can help protect your health. If you can't avoid working extended hours, protect your health by getting **6 to 8 hours** of sleep per night, **eating a healthy diet**, getting plenty of **exercise** to keep your energy levels up, and taking **regular breaks** during your workday to help control **stress**. If your manager is flexible, ask for reassignment of some of your duties if your workload requires frequent overtime. Research shows that working 12 or more hours per day may increase the **risk of work illness or injury** by 37 percent, while working 60 or more hours per week could increase the risk by 23 percent, even in professions that aren't inherently dangerous.

Bad Designs

What's wrong with this intersection?

This is a picture of an intersection that causes people problems. Imagine that you are approaching the intersection in a car. There is a traffic light and you can only turn left or right. Going straight puts you into a parking lot. The lower traffic light has a green arrow that allows you to turn right without stopping.

It's been observed a lot of people approaching this intersection with the intention to turn right. They stop at the light and then turn right if they happen to see the green arrow.



(They **sheepishly** look in their rear view mirror to see if anyone noticed that they stopped unnecessarily.) They usually don't see the green arrow until someone honks at them.

Why are people confused? One problem is that it is **difficult to see** the green arrow compared to seeing the two red lights. The second possibility is that people aren't used to turning right at a red light without stopping. I think **these factors** conspire to cause the problem.

Design suggestion

This problem might be fixed by making the green turn arrow **more salient**. The arrow might be **made larger and brighter**. Another green arrow might be added to the overhead traffic light.

WORKING

Sleeping on the Job

Yawn. It's not even 11:30 and you're ready for a **java jump-start**.

More than one-fourth of workers say that daytime drowsiness hinders their activities at least a few times a month, according to the **National Sleep Foundation's** new survey.



And one in 11 say they have shown up to work late in the past month because they **were tired**.

Of respondents, 29 percent say they fell asleep or became very sleepy at the office every month -- and that doesn't count those who drive to work **half-awake** or use their lunch hour to **nab a nap**.

Longer workdays, taking work home and **too little sleep** at night all contribute to the problem. Their collective annual cost, the foundation says, is tens of billions of dollars in lower productivity.

The telephone survey of 1,000 people found glimmers of hope: One-third said their **workplaces permit naps during breaks**, and 16 percent of businesses even give them a place to plop down.

The rest of us either grin and bear it or grab some **caffeine or sugary food** to revive ourselves. Only one in 20 say they take NoDoz or another stay-awake-during-meeting medication.

SEASONAL SAFETY

Handling Hay Fever

Pesticide use is one sign of spring. Another sure sign that spring has arrived is seasonal allergic rhinitis (**hay fever**).

If you or your workers notice an increase in coughs, sneezes, congestion or itchiness of the nose, roof of mouth, throat, eyes and ears at this time of year, seasonal allergic rhinitis could be the culprit. The American Academy of Allergy, Asthma & Immunology (AAAAI) offers these **tips**:



- Stay indoors between **5am and 10am**, if possible. This is when tree and plant pollens are the most active.
- Avoid going outdoors on **windy days**.
- Avoid going outdoors after **heavy rains**, which produce a high mold spore count.
- **Wear a dust mask** while raking to avoid breathing in molds and other allergens stirred up from the leaves.
- **Remove and wash** right away all exposed clothing to avoid bringing the allergens into your home.
- **Don't hang-dry clothing or sheets outdoors**, where they may attract pollens or molds.
- **Spring clean your home**. Over the winter months, dust and mold accumulate on windows and shelves and in vents.

(Source: *The American Academy of Allergy, Asthma & Immunology*,
www.aaaai.org)



Sound Effects

Snoring isn't just annoying, it's linked to serious health problems.

A look at the risks—and the remedies.

Snorers have always been the butt of jokes. In cartoons, their nasal roar lifts the roof off houses. In sitcoms, there's the wife who rolls her eyes at her snoring bedmate. But in reality, it's not all that funny. In fact, snoring can be a nightmare for snorers and their beleaguered partners, who may wake up several times a night to poke, prod and maybe hoist loved ones onto their sides for a little relief. It's no wonder that bleary spouses can wake up grumpy and resentful.



But the nightly racket is more than a potential relationship strain. **According to the latest research**, an increasingly **older and heavier** population may make this condition an even greater a **health risk** than we previously thought. For Maggie Moss-Tucker, successful treatment for a longtime snoring problem came almost by accident. One fall morning in 2005, she saw a sign at her local gym seeking snorers as volunteers for a study at Boston's Brigham & Women's Hospital. Moss-Tucker, now 56, was intrigued. She had started snoring nearly a decade earlier. "I'd tried everything to stop," she says, from sleeping upright to using **nose strips** or a **mouth guard**. But to her and her husband's dismay, nothing worked. When she signed up for the study and spent a night at a suburban Boston sleep lab, she found out why.

After reviewing her sleep patterns and oxygen levels, researchers told her that her snoring was actually an indication of **something worse**. She suffered from **sleep apnea**, a condition in which patients **stop breathing** repeatedly as they sleep and can wake up as many as 100 times a night—often without remembering it. That kind of revelation has led to doctors re-evaluating a condition once treated as little more than a nuisance. "In the past, snoring has been treated like a joking matter; you never talked about it with your doctor," says Dr. David Rapoport, medical director of the Sleep Disorders Center at New York University Medical Center. "But when it becomes very prominent or such that it wakes you up or interferes with breathing, it can be a problem."

Not everyone who snores regularly has sleep apnea. UCLA pulmonologist Michael Littner, who is certified in sleep medicine by the American Board of Internal Medicine, estimates 50 to 60 percent of those with habitual loud snoring have it. But research is finding that sleep apnea is not the only health condition associated with snoring.

The sound occurs when the flow of air from the mouth or nose to the lungs makes tissues in the airway vibrate, usually because of an obstruction or a narrowing of the airway. The more the airway closes or is blocked, the harder the body has to work to push air, which puts pressure on the heart. That's why, **over time, loud snoring can lead to high blood pressure**, says Rapoport's colleague, Joyce Walsleben, past director of the New York University sleep center. "People who are just snorers have **higher incidence of stroke and cardiovascular disorders.**"

Sleep apnea, in which the airway becomes blocked or, less often, the brain fails to properly control breathing during sleeping, can be viewed as one extreme of the snoring spectrum. Soft or sporadic snoring, which is not generally considered a health hazard, would be at the other end. **As the sound and persistence of a patient's snoring grows, so do the health concerns.** A study published in the March 1 issue of the journal *Sleep* found that loud snorers had a 40 percent greater risk than nonsnorers of suffering from high blood pressure, 34 percent greater odds of having a heart attack and a 67 percent greater chance of having a stroke.

That's a problem given the number of noisy sleepers out there. In a recent poll by the National Sleep Foundation, about one third of U.S. working adults reported snoring at least a few nights in the previous month. **Snoring generally worsens with age** so the rate is even higher among the elderly. And, contrary to common perceptions, it's nearly as common in women as men. Menopause appears to be a factor, as is weight. **Being overweight** can cause thickness in the airway tube, constricting the flow of oxygen.

Yet many who regularly snore don't realize that it could be bad for their health. The research linking hypertension, cardiac problems and loud snoring is relatively new. And though awareness of sleep apnea is growing, specialists say the condition is still **vastly undertreated**. Primary-care physicians don't routinely ask patients about the quality of their sleep—though that is beginning to change—and few patients think to tell their doctors that they're snoring,

Sleep specialists estimate that between **12 million and 18 million** Americans have some form of sleep apnea but many of them, like Moss-Tucker, remain undiagnosed for years. Research from the National Sleep Foundation indicates that only half of those with sleep apnea are being treated. Since it is a progressive condition, says Michael Twery, director of the National Institutes of Health's National Center on Sleep Disorders Research, "the person who's affected is usually not aware of how severe the condition is."

Moss-Tucker remembers being drowsy during the day sometimes, but she blamed it on her busy life. When researchers at the sleep lab asked if she had ever fallen asleep while driving, she laughed initially. But then she recalled long drives during which **she'd had to pull over every 45 minutes to take a cat nap to avoid dozing off at the wheel**. She'd also become accustomed to taking **daily 25-minute naps each afternoon**.

But once she was diagnosed and began using a Continuous Positive Airway Pressure (or CPAP) machine, the most common treatment for sleep apnea, she says, "My life changed."

Moss-Tucker no longer needed naps and her energy levels, mental clarity and general moods improved—so much so that she cannot imagine one night without the CPAP, a machine with a mask that attaches to the nose, mouth or both, helping to force oxygen into the airway while the patient sleeps. If it's used properly, it is nearly 100 percent effective. But CPAPs (or BiPaps, which deliver alternating levels of oxygen), which cost about \$500 or more with the mask, can be cumbersome to use and the noise may be as disruptive to sleeping partners as snoring. That can be a major factor in compliance. Despite its efficacy, estimates of overall long-term usage rates remain between 50 to 70 percent.

For snorers who don't appear to have sleep apnea, there are other measures to avoid bad nights. They include: avoiding big meals and sedating drugs like antihistamines and alcohol before bed; sleeping on one's side instead of the back; treating conditions like allergies and colds that can cause or worsen snoring, and maintaining a healthy weight.

There are also devices, like the one Moss-Tucker tried without success, which push the lower jaw forward to help keep the airway open. "They are effective in a fair number of snoring cases," says NYU's Rapoport, but he cautions that they need to be custom fitted by dentist and can be expensive if not covered by insurance.

Surgery to widen the airways or improve nasal airflow is also an option, though it too may not be covered by insurance and success rates vary. UPPP (or Uvulopalatopharyngoplasty), in which a surgeon removes tissue at the back of the throat, can require a hospital stay and a long recovery; it's typically used for patients with severe obstructive sleep apnea. But other procedures can be performed under local anesthesia in a surgeon's office, including laser-assisted uvulopalatoplasty (or LAUP), a modification of UPPP in which the surgeon uses a laser to cut the uvula. Patients who get LAUP can generally resume their normal routine almost immediately afterward, but they may require up to five treatments.

Somnoplasty is another short office-based procedure; it uses low-power radiofrequency energy that reduces the volume of the soft palate tissue (located at the back of the roof of the mouth) but may require more than one session. Nasal surgery may also be recommended for those with obstructions in the nose. Another treatment is the Pillar procedure, in which three tiny inserts are injected into the soft palate to offer support. Since it's a newer procedure only approved by the FDA in August 2004, there's less long-term data. "Studies are showing it does work—but to what extent is not really known yet," says Rapoport. With several options but no magic bullet, experts say it's important to have a full medical examination to determine the best course of action. But as long as snoring is seen as more of a joke than a risk, even that step may be too large for some.

PICTURE THIS!

According to reports, the driver of this vehicle was **traveling too fast**, struck the metal pole and wound up hooked on it. Perhaps the pole was badly placed or poorly marked. Nonetheless, when a driver's speeding, **safety is always in the back seat**. Just in case you were wondering, traffic accidents are still the number one killer of workers overall.

