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What can we expect as we age?

by Angela Menghraj, Contributing Editor

What we think about aging depends to some extent on family, friends and the media. These all affect how we think about our own aging. Here is a familiar remark you may hear, even in jest: "Now that Ann has celebrated her 65th birthday, she's over the hill. She can expect her body to begin to break down." The truth is, the experience of aging differs from one person to another.

What do the experts say?

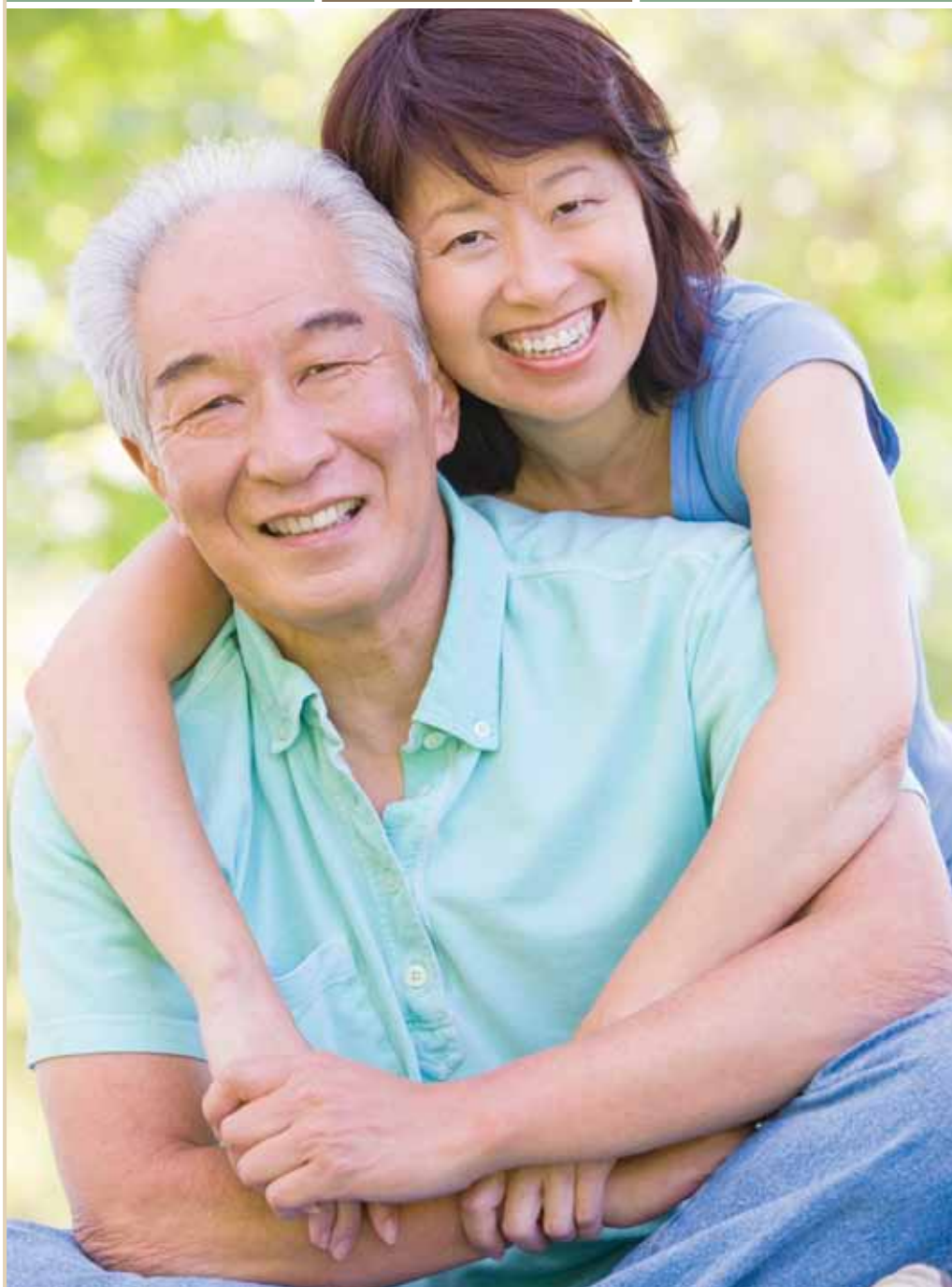
John Rowe, MD, and Robert L. Kahn, PhD, authors of *Successful Aging*, have conducted numerous studies on people as they age. There are a number of myths worth considering. The breakdown of physical, mental and psychological abilities isn't inevitable. There are, however, areas of life that are indicators of how well we will age. We know them. Lifestyle, including exercise, health, nutrition and family health history, all give us information about our own aging.

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Mammograms every 2 years?

Annual mammograms have become a normal routine for many women; however, a new study has found that getting a mammogram every two years didn't increase the risk of being diagnosed with late-stage breast cancer for women ages 66 to 74.

Women tested every year were more likely to have false-positive results than those screened every two years, says the article published in the Journal of the National Cancer Institute. The study looked at data from more than 140,000 women ages 66 to 89. Of them, nearly 3,000 were diagnosed with breast cancer. Researchers estimated the probability of false-positives over a decade for women ages 66 to 74 and discovered that almost half of the women who were screened every year had at least one false-positive. Among those screened every two years, 29 percent had at least one false-positive after 10 years.

Results were similar in women ages 75 to 89.

Guidelines are frequently evolving and your individual schedule may vary based on your personal and family medical history. This study's findings are in line with recommendations from the U.S. Preventive Services Task Force, while the American Cancer Society recommends annual mammograms. Talk with your doctor about the frequency that's right for you.



New stroke guidelines

The American Stroke Association has released updated guidelines for treating stroke. The new guidelines stress seeking help immediately when stroke symptoms are present by calling 911 and going to a hospital with a stroke center, if one is available. Promptly receiving clot-busting treatment, such as tissue plasminogen activator (tPA), is critical to minimizing brain damage and speeding recovery.

It's important to know the signs of a stroke so you can act quickly if you or a loved one experiences them. A great way to remember the signs of stroke is by using the acronym F.A.S.T.:

- **Face drooping:** Does one side of the face droop or is it numb?
- **Arm weakness:** Is one arm weak or numb?
- **Speech difficulty:** Is your speech slurred, are you unable to speak or are you hard to understand?
- **Time to call 911:** If you have any of these symptoms—even if they go away—call 911 and get to the hospital right away.

Eggs—edible, but still incredible?

Eggs may be a morning staple, but how do they affect your cholesterol? While it's true that all the dietary cholesterol in eggs lies in the yolk, a new study says you can have your egg and eat the yolk, too.

After analyzing eight previous studies on coronary heart disease (CHD) and stroke that included more than 200,000 people who were followed for eight to 22 years, researchers found no evidence of an association between egg consumption and either CHD or stroke. However, a subgroup of people with diabetes with the highest egg consumption had an increased risk of CHD, a result

the researchers say warrants further study.

The American Heart Association currently recommends a daily dietary cholesterol intake of 300 milligrams. According to the U.S. Department of Agriculture, eggs can range from 154 to 203 milligrams, depending on the size. If you're concerned about the amount of eggs you consume and its affect on your cholesterol, discuss it with your doctor. Regular blood work will help you and your doctor monitor your cholesterol levels.

When is it time to seek assisted living?

It's the place dad has called home for the past 50 years, so it's understandable that now that he's older, he doesn't want to leave. But given the difficulty he's had getting around the house lately, you're thinking it might be time to look into assisted living.

It's a dilemma many people grapple with every day, for either themselves or aging relatives, and leaves them asking an important question: Can I or my loved one continue living at home or is it time to seek assisted living?

HOME IS WHERE THE HEART IS

Some people may be able to continue to enjoy independent living with the assistance of loved ones or by taking advantage of various services. Information on these services—and any associated costs or Medicare coverage—can often be found at local or state offices on aging, social services or senior centers, or by visiting www.eldercare.gov (1-800-677-1116) or www.nia.nih.gov/health (1-800-222-2225). These services include:

>> Meals. Programs such as Meals on Wheels are staffed with volunteer drivers who deliver to seniors' homes. Meal drivers may also act as a safety check, noting any deterioration in their clients' conditions. If getting out occasionally isn't a problem, check out local churches and community organizations for low-cost potlucks or spaghetti dinners.

>> Personal care. Trouble with showering or getting dressed? A personal care aide can be hired for short periods of time to help you accomplish these daily tasks.

>> Errands. Check with a grocery store to see if they'll take an order over the phone and deliver. Some local laundromats may offer delivery services, and some home cleaning services also do laundry.

>> Paying the bills. Get a referral from your local Office on Aging for financial counselors, geriatric care managers or other professionals who can help. Some bills can be paid online, or check with your or your loved one's banking institution to see if bill payments can be automatically deducted from savings or checking accounts.

>> Taking medication. Specially labeled pillboxes can help keep track of a week's worth of medication. Home health aides can also assist with medication distribution.

>> Emergency alert system. Whether you or your loved one is afraid of neighborhood crime, falling or illness, a special button that you wear can get help to you fast.

>> Home modifications. Depending on need, items such as wheelchair ramps, nonskid flooring and shower grab bars may help make the home safer. Check with your local Office on Aging or housing agency to see if you or your loved one can get help in paying for these changes.

IS IT TIME TO LEAVE HOME?

Sometimes it's not possible to continue living at home. Warning signs that may indicate a lack of independence include:

- deterioration in personal appearance (soiled clothing, weight loss) or appearance of the home
- problems with managing chronic conditions
- memory loss
- frequent accidents
- depression or other mental health changes

In these instances, an assisted living facility, nursing home, skilled nursing facility or other care may be needed. **HK**



Small wounds— A big problem

Small or large, wounds take time to heal. Some wounds, like small cuts, can usually heal on their own. More serious wounds, like burns, infections or rashes, may require urgent medical attention. Your overall health may depend on how well you take care of wounds.

HELP FOR CHRONIC WOUNDS

As a general guideline, chronic wounds are wounds that fail to progress through a normal

reparative process over three months. All wounds have the potential to become chronic, and factors that may contribute to poor wound healing include diabetes, neuropathy, obesity, peripheral vascular disease, infection and immunosuppression.

Specialized care can help heal wounds and prevent more complex medical problems. Some strategies used for treating chronic wounds include:

- compression therapy (compression bandage systems)
- debridement (e.g., scraping away tissue to allow growth of new tissue)
- hyperbaric therapy (delivering more oxygen to the wound by breathing 100 percent oxygen in a special chamber)
- offloading (protective

footwear, crutches, walkers, wheelchairs)

- wound dressings (cleansing, covering the wound, ensuring moisture balance)

FOCUS ON PREVENTION

Here are a few ways you may be able to promote healing and help prevent wounds from becoming chronic:

>> Maintain a healthy lifestyle.

Eat a balanced diet and exercise regularly. If you use tobacco, make a plan to quit. If you have diabetes, monitor your blood sugar as recommended by your doctor, and adhere to your prescription medication to reduce the risk of complications.

>> Keep up with hygiene.

Shower or bathe often and wash your hands and feet. Elderly people and those with diabetes should check for small cuts, cracks, tenderness, redness or swelling on a daily basis.

>> **Schedule regular doctor appointments.** If you have diabetes,

Diabetic foot ulcers

For people with diabetes, wounds may not heal normally due to nerve damage and poor blood circulation. Many people who have diabetes struggle with diabetic foot ulcers, a nonhealing ulcer that can cause long-lasting effects like tissue damage or even amputation. Schedule an annual foot exam (visit your doctor sooner if you notice any cuts or sores) and ask about steps you can take to keep your feet healthy.



ask your doctor to check for early signs of nerve damage or other issues.

>> Take your injuries seriously.

If you injure yourself, don't hesitate to reach out to your doctor right away. It may require immediate attention. **HK**

Hyperbaric oxygen therapy

Hyperbaric oxygen therapy, also called HBOT, is a form of treatment for chronic, non-healing wounds. A hyperbaric oxygen therapy session involves breathing pure oxygen in a pressurized chamber. The air pressure is elevated up to three times higher than normal air pressure, which allows your lungs to gather more oxygen than you could breathing at normal air pressure. This may help speed the wound-healing process.

This form of therapy is often used for treating conditions associated with:

- burns
- decompression sickness
- nonhealing wounds
- radiation or crush injuries
- serious infections of the skin or bone that can cause tissue death

What can we expect ...

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Most important is the attitude we bring to life choices. Think about the importance we give to physical, intellectual and spiritual activities. Think about the amount of alcohol, unhealthy fats and carbohydrates we consume (sometimes unconsciously). These are some of the elements that reveal how much balance there is in someone's life.

What about the people we spend time with? Are they life affirming or full of groans and complaints? Hopefully, they're fun to be around and share an optimism for life.

What part does family history play in aging? About 30 percent of our health is inherited. That leaves a 70 percent chance you won't inherit your dad's diabetes or mom's high cholesterol. When asking people older than 65 years the most important area of their lives to which they pay the most attention, invariably, they answer "my health." So much depends on the balance we create among all aspects of health so that our lifestyle leaves nothing out. How can I create a healthier me? Whatever we do or don't do, it's motivation that counts.

So the final question is "What elements can I begin to incorporate into my life so that the way I age is more under my control?" The answer is up to you! **HK**

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Quick quiz

Test your health savvy

When it comes to your health, the more you know the better. Test your knowledge with this quick quiz.

- 1 The most common type of cancer in American men is:
 - A. prostate
 - B. skin
 - C. colon
 - D. lung
- 2 To help manage gout—a form of arthritis triggered by high uric acid levels—you should avoid or limit:
 - A. seafood
 - B. coffee
 - C. low-fat dairy
 - D. 100 percent fruit juice
- 3 Alzheimer's accounts for what percentage of dementia cases in those 65 and older?
 - A. 25
 - B. 40
 - C. 60
 - D. 95
- 4 Which is a possible cause of dry mouth?
 - A. medication
 - B. diabetes
 - C. radiation therapy
 - D. all of the above
- 5 In order to get the best-fitting shoe, you should:
 - A. purchase shoes that feel tight (they will stretch)
 - B. choose shoes with a stiff, inflexible upper portion
 - C. buy your shoes in the size of your biggest foot
 - D. buy shoes in the morning

ANSWERS: 1. B, 2. A, 3. C, 4. D, 5. C

Have diabetes? Stay active!

Being physically active is important to maintaining your health. That's true for anyone, but if you have diabetes, it's especially critical. Being active can help you control your blood sugar, weight and blood pressure, and help raise your "good" (HDL) cholesterol and lower your "bad" (LDL) cholesterol. Activity can also help prevent heart and circulation problems, reducing your risk of heart disease and nerve damage, which often affect people with diabetes.

According to guidelines from the U.S. Department of Health and Human Services, adults should get at least 150 minutes (two-and-a-half hours) of moderate intensity physical activity each week.

TIPS FOR BEING ACTIVE


>> Check with your doctor first. If you have certain diabetic complications, such as high blood

pressure, eye or foot problems, you may need to avoid certain kinds of exercise. For example, you may need to steer clear of lifting heavy weights if you have problems with your eyes, blood vessels or blood pressure. Also, discuss the time of day that's best for you to exercise.

>> Choose activities that you enjoy. Find activities that work your large muscles, increase your heart rate and make you breathe harder. Examples include brisk walking, bicycling, swimming, dancing or mowing the lawn.

>> Be active most days. It's better to get some exercise on most days of the week than to try to fit a full week's worth of activity into one or two sessions. If you haven't been active, start with shorter and less intense activity, and increase it gradually.

>> Monitor your blood sugar. Exercise can potentially lower your blood sugar too much, causing hypoglycemia, especially if you take insulin or certain medications. Carry snacks or glucose tablets with you. If your blood sugar is too high before you begin exercise, it may go even higher. It's important to learn what impact exercise has on your individual blood sugar levels, so monitor before and after exercise—and during long workouts.

>> Drink plenty of water. Your blood sugar level can be affected by dehydration. 



5 cancer prevention tips

Although each person's risk of developing cancer is as unique as the individual, you can make lifestyle changes to help prevent cancer. Here are five cancer prevention tips you have control over:



1 Avoid tobacco products. The use of any type of tobacco increases the risk of cancer. That includes chewing tobacco. Exposure to secondhand smoke may also increase the risk of lung cancer. If you smoke and need help giving up the habit, talk to your doctor about stop-smoking aids and other strategies for quitting.


2 Improve your diet. Eating a healthy diet—including plenty of fruits and vegetables and limiting fat and processed foods—may help reduce the risk of cancer. If you drink alcohol, do so only in moderation.



3 Protect yourself from the sun. Use sunscreen with an SPF of 15 or higher, avoid midday sun, stay in the shade when possible and wear sunglasses and wide-brim hats when outdoors. Consider having an annual skin and mole checkup with a dermatologist.

4 Exercise. An exercise regimen including daily physical activity can help you maintain a healthy weight and keep you physically fit. The American Cancer Society recommends at least 30 minutes of exercise five days a week.



5 Get screened. Ongoing self-exams and professional screening for different types of cancer may improve early detection and even detect precancerous cells in some cases. Talk with your doctor about a cancer screening schedule for you. 



Health dollars & sense

Want to cut medical expenses without compromising your health? Try the following tips to help keep your costs in check.


Fresh produce for all

Get plenty of fresh fruits and vegetables—it's the mantra of every nutritionist out there. But for some people, stocking up on these offerings can be cost prohibitive. However, help is available. The Senior Farmers' Market Nutrition Program (SFMNP), headed up by the U.S. Department of Agriculture's (USDA) Food and Nutrition Service, provides certain individuals with vouchers (in most states) to be used for fruits, vegetables, herbs and honey at participating farmer's markets, roadside stands and community supported agriculture programs.

In general, qualifying individuals must be at least 60 years old and have a household income that doesn't exceed 185 percent of the federal poverty income guidelines (\$1,679 a month for an individual or \$2,268 for a couple). According to USDA numbers, in 2010, more than 21,000 seniors visited 850 farmers at 210 farmers' markets and 70 roadside stands to purchase locally grown fruits and vegetables. To apply for the program, visit www.fns.usda.gov/wic/seniorfmnp/SFMNPcontacts.htm for your state's SFMNP agency.

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Bridge to Home: An important new program

by Angela Menghraj, Contributing Editor

Isabella Geriatric Center—in partnership with NewYork-Presbyterian Hospital and Continuum Health Partners (St. Luke's–Roosevelt Hospital Center)—has recently been awarded a grant to help seniors with chronic illnesses receive the support they need to avoid returning unnecessarily to the hospital. This new program, called Bridge to Home, is funded by Centers for Medicare and Medicaid Services.

Understanding the program

The Bridge to Home program provides support to patients before they leave the hospital and for a period of 30 days after discharge. The purpose is to ensure that patients receive a high level of care so that they don't need to be re-hospitalized unnecessarily. There is no cost for anyone to participate in this program, and this program doesn't replace any other

assistance someone may be receiving at home.

To qualify, individuals must be covered by Fee-for-Service Medicare plans and must live in certain zip codes within Manhattan. They must have a diagnosis of heart failure, heart attack, diabetes, pneumonia, chronic obstructive pulmonary disease (COPD) or end-stage renal disease.

This program is available to patients of the following hospitals:

- NewYork-Presbyterian Hospital
- Weill Cornell Medical Center
- The Allen Hospital
- St. Luke's Roosevelt Medical Center

The Bridge to Home program provides an array of services by a professional team of nurses and social workers (called Bridge to Home coaches). These services include:

- meeting the patient during his or her hospital stay



- visiting the patient at home within 48 hours after discharge
- communicating by phone during the 30-day period
- ensuring follow up with the personal physician
- helping the patient understand their medications
- educating the patient about his or her illness and how to manage symptoms
- setting up community resources for continuing care

If you or someone you know is interested in learning more about the Bridge to Home program, we suggest speaking with a social worker at one of the above listed hospitals who will put you in touch with one of the Bridge to Home coaches. In addition, you may call for information at the following numbers:

- toll-free: **855-604-1872**
- direct dial: **212-342-9566** 