



UAMS • Donald W. Reynolds Institute On Aging • AHEC-Northeast • St. Bernards Healthcare

#### Winter 2011



### **Method of Social Security Payments to Change**

Go-Direct, the program sponsored by the U.S. Department of the Treasury and the Federal Reserve Bank, recently announced that all benefits paid by the government soon will be only available electronically, by either direct deposit or debit card.

Those who apply for federal benefits on or after May 1, 2011 will need to choose which method to receive their payments. Those who do not make a choice automatically will receive the "Direct Express" debit card. People who currently receive paper checks will have until March 1, 2013 to

make a payment choice. However, people who are 90 and older will continue to receive their Social Security benefits by check.

To sign up for direct deposit or a Direct Express debit card, either call the toll free Go Direct helpline at 1-800-333-1795 or go online at <a href="www.GoDirect.org">www.GoDirect.org</a>. You also can visit your bank or local Social Security office to sign up for this option. As always, be alert to scams. Don't give out your Social Security number to anyone but the proper authorities. So Go Direct! Eight out of ten people already have. Shouldn't you too?

## MEDICARE NEWS YOU CAN USE!

By Cynthia Abel, MA, BSE

#### Good News for Those on Medicare!



- Due to the Healthcare Reform Law, Medicare now will pay 100% for wellness benefits, such as mammograms, colonoscopies or cancer screenings instead of the 80% they have paid. Annual wellness visits now will be paid in full. Medicare also will offer incentives for seniors to have access to programs that could help them eat healthier and exercise.
- Medicare recipients with the Part D Prescription Drug Coverage now will have the "donut hole" cut in half on name-brand drugs for 2011. There will be a 7% discount for generic drugs. The "donut hole" gradually will decrease until 2020 when it will be discontinued.
- If you reached the donut hole in 2010 you can expect a \$250 reimbursement check in the mail. If you haven't received your check after 30 days of entering the "donut hole," call Medicare at 1-800-633-4227. Everyone who entered the "donut hole" in 2010, no matter how much or little they spent, will receive the check.
- There is more good news for those in the "donut hole." Some expensive medications will become generic in 2011 so they now will be cheaper. These will include: **Lipitor, Xalatan, Zyprexa, Advair, Seroquel, Aricept, and Levaquin.** The date is uncertain since it takes a little time to get the generic drugs manufactured.

Resources: AARP

PBS Newshour The Financial Edge

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Health Education Page 2

## When a Pill Can Be a Problem

by Thomas Mulligan, M.D.

Tobacco

Vor



A Physician's Perspective

Recently, one of America's most prestigious medical journals (*New England Journal of Medicine*, Nov 3, 2010) reported that we need to improve prescribing of medications for older adults. According to this report, approximately 35% of older adults living in Northeast Arkansas receive one or more potentially inappropriate medications. For example, muscle relaxants, dizzy pills, some sedatives (eg, Valium), some nausea pills (eg, Phenergan), some allergy pills (eg, Benadryl), some antidepressants (eg, Elavil), and a variety of less frequently used medications are thought to have more risk than benefit in older adults. This issue is important because advances in medical science have provided safer medications.

Why do we have this problem? One reason is that most of us want a pill for every problem. Rather than learning coping strategies, patients often want Xanax. And, rather than spending the time to counsel the patient on how to lose weight and quit smoking, doctors give another prescription.

What can we do to improve medication use in our region? First, rather than asking for another pill, all of us need to develop healthy habits. We should eat healthier food, exercise more, and stop smoking. Secondly, everyone should use one pharmacy to create a single coordinated medication list. Third, take all medications (or at least an accurate list) to each medical office visit. Finally, whenever possible, physicians should stop high risk medications or change them to safer alternatives.

In the final analysis, this recent report is trying to improve medication use in older adults, which is a good thing.

Seniority

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Visit our website! www.centeronagingne.com

# Help For Those with Chronic Health Conditions By Beverly Parker, RN, MS

Chronic diseases are long-term illnesses that rarely are cured. Chronic diseases such as heart disease, stroke, cancer, and diabetes are among the most common and costly health conditions. Chronic health conditions can affect your ability to live your life fully and remain independent.



Many with chronic conditions can be helped through a program called, "Chronic Disease Self-

Management". Through a set of classes, individuals can learn how to remain in control.

Individuals who learn to "self-manage," or take an active role in their care, fair better than those who rely on others to meet their needs. Good self-managers learn skills needed to deal with the illness, skills needed to continue a normal life, and skills needed to deal with emotions. This process places the individual in the driver's seat for a greater quality of life.

The Center on Aging-Northeast soon will be forming Chronic Disease Self-Management classes. If you are interested or would like more information, call 870-336-5088 or 1-800-745-0557 for more details.

## ANXIETY DISORDERS: THERE IS HELP AVAILABLE

By Cynthia Abel, MA, BSE

Everyone at one time has felt nervous and worried about problems or situations they encounter. It is normal to be anxious about a job interview or a loved one's surgery. Usually the anxious moments pass when the problem subsides. However, for 40 million Americans an anxiety disorder is a persistent and real problem.

Generalized anxiety disorder (GAD) is the most common form among older adults affecting as many as 7% of seniors with a higher percent among those receiving medical care. For those with GAD, problems are magnified into unsubstantiated worry over things such as health, family or even the economy. Women are affected by GAD twice as much as men. Symptoms of GAD to watch for include

headaches, shortness of breath, insomnia, nausea, dizziness, back pain or a rapid heartbeat. Unfortunately, GAD is difficult to diagnose in older adults due to the fact that its symptoms can mimic other geriatric medical problems. It is also difficult to distinguish between the symptoms of depression and anxiety.

GAD is very treatable. However, only about a third of older adults will seek professional help. This is unfortunate for those with heart disease since anxiety increases the risk of a heart attack or stroke. Treatment for GAD may include:

- Cognitive Behavior Therapy This form of treatment by a licensed professional, helps the patient to use different techniques to change the way the patient responds to stressful situations. One example would be to have the patient learn relaxation and deep breathing methods in order to counteract the agitation and other symptoms during an anxiety attack. You begin to see results in 12 to 16 weeks.
- **Medication** Some anti-depressants have been shown to be effective in treating GAD. Sedatives, because they are habit forming, only are prescribed for a very short time and in the most extreme cases. It is important to remember that side effects and risks, such as falls, exist when taking these types of medications.
- Exercise May reduce stress. 20% of those with GAD who regularly exercise report less anxiety.
- Alternative Therapies Massage therapy is a good way to reduce anxiety, by as much as 40% after a 12-week period. Also, acupuncture and yoga are good ways to reduce stress. However, herbal supplements, such as kava, valerian or others, have not shown to be effective in reducing stress. Check with your doctor before using herbal supplements to treat anxiety.

An important thing to realize is that people with GAD can be treated and are able to lead relatively normal lives.

#### Resources:

American Psychological Association Anxiety Disorders Association of America

#### **Anxiety Managing Tips**

- 1. <u>Take a time-out</u> stepping back from a problem can help bring it into perspective.
- Eat well-balanced meals do not skip meals and eat healthy snacks.
- 3. <u>Limit alcohol and caffeine</u> these can aggravate anxiety and cause panic attacks.
- 4. <u>Get enough sleep</u> your body needs extra rest when you are stressed.
- 5. Take deep breaths and count to 10 slowly.
- 6. Laughter it helps to break the tension of stress.
- 7. <u>Talk to someone</u> tell family, friends, your doctor or therapist how you feel.



The Schmieding Home Caregiver Training Program soon will complete its first year in operation. Thank you for all your support in this our freshman year. We are looking forward to a successful 2011.

Elder Pal Classes begin January 25 and February 15.

For information, call 336-5095 or 336-2115 or go to www.arcaregiving.org

**Educating Caregivers for Older Adults** 

This work is supported by a grant from the Donald W. Reynolds Foundation



IF YOU HAVE A CAREGIVER'S HEART, WE CAN TEACH YOU A CAREGIVER'S SKILL.

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#### Event Date, Time & Location

**Depression and Anxiety** \*• △ o (2 hrs. CE) Jessica Camp, RN, APN, MSN St. Bernards Behavioral Health

This program is designed to define and explore both depression and anxiety. The aim is to assist the healthcare professional in providing successful recognition and treatment of both disorders in the older adult.

Tuesday, February 22nd 7:30 - 9:30 a.m. (Registration begins at 7:15 a.m.) Lawrence Memorial 1309 West Main Street Walnut Ridge

#### Northeast Arkansas Stroke Symposium \*• △ 0 # (3.0 hrs. CE)

Thursday, March 3rd

Most healthcare professionals realize that stroke is the leading cause of serious, longterm disability in the United States and the 3rd leading cause of death. Did you know that Arkansas ranks 1st in stroke mortality? Join us to explore ways you can help decrease this alarming statistic.

"Recognition and Management of Acute Stroke"

James Wang, M.D., Neurologist University of Tennessee, Memphis

#### Objectives:

- Recognize acute stroke
- Interpret the best way to treat an acute stroke
- Define the risks and benefits of acute stroke care

Daytime (1 hour credit)

**Evening** 

(2 hours credit)

12:00 p.m.
Grand Rounds
Stroud Hall, St. Bernards
Jonesboro
Lunch provided by SBMC

#### "Prevention of Stroke in the 21st Century"

Ron South, M.D., Neurologist Neurology Associates of Northeast Arkansas

#### Objectives:

- Define the factors that cause or contribute to a stroke
- Discuss evaluation of patients at risk for stroke
- Examine current evidence-based treatments to prevent stroke

## 5:30 - 7:30 p.m. (Registration begins at 5:15 p.m.)

St. Bernards Auditorium
505 E. Washington
Jonesboro
Dinner provided by
HealthSouth Rehabilitation Hospital

#### "Stroke Rehabilitation: Challenges and Successes"

Hilary Siebens, M.D. Sponsored by HealthSouth Rehabilitation Hospital

#### Objectives:

- Understand the deficits caused by acute stroke
- Assess and prescribe acute stroke rehab
- Compare the most effective ways to rehabilitate a stroke survivor



- \* AHEC-Northeast is an approved provider of continuing nursing education by Arkansas Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.
- $\Delta$  Pharmacy CE credit approved by the Arkansas State Board of Pharmacy.
- Approved for CE credit by the Office of Longterm Care
- o PT credit approved by the Arkansas State Board of Physical
- # CME credit provided by St. Bernards Medical Center

Registration required for all programs.

Call 336-5088 or 1-800-745-0557.

**Event Date, Time & Location** 



## FAMILY CAREGIVER WORKSHOPS

These programs provide an overview of Dementia and skills for caregiving for anyone providing unpaid care for an older adult at home.



Dementia Care Skills for the Family Caregiver Wed., January 19th & Thurs., January 20th 12:00 - 4:00 p.m.

> Physical Skills for the Family Caregiver Wed., February 9th & Thurs., February 10th 12:00 - 4:00 p.m.

Attendance is recommended for both days, but not required. Registration is required by calling 336-5095. Space is Limited.

**A Matter of Balance** Cynthia Abel, MA, BSE Dianne Wage

A Matter of Balance stresses practical solutions to reduce the fear of falls. Participants learn to look at falls as controllable and seek to increase activity through exercise and lifestyle changes. Classes meet twice a week for four weeks. Registration is required.

**Atrial Fibrillation: More Than Just a Flutter** Deborah Levins, RN, BSN

Palpitations, the uncomfortable awareness of a rapid, irregular heartbeat is the most reported symptom of atrial fibrillation. Come learn about Atrial Fibrillation. what it is and what it means to you.

Hearing Loss: "Say What?" John Jiu, M.D.

Otolaryngology & Facial Surgery Centre

Hear an expert discuss the different types of adult hearing loss and latest treatment options. (In cooperation with Harris Hospital Senior Circle)

Dementia: Answers to Questions You Don't Know to Ask

Carla Smith, RNC Penny Rogers, LCSW St. Bernards Senior Health Clinic

During this program, local experts will answer your questions about the different types of dementia, diagnosis and treatment, and why early detection is important. **Wednesdays and Fridays** February 2nd - 25th

12:45 - 2:45 p.m. Center on Aging-Northeast 303 E. Matthews Jonesboro

**Thursday, February 17th** 

1:30 p.m. Center on Aging-Northeast 303 E. Matthews Jonesboro

**Thursday, February 24th** 

12:00 p.m. Harris Hospital Community Room 1205 McLain Street Newport

Thursday, March 24th

4:00 p.m. Center on Aging-Northeast 303 E. Matthews Jonesboro

Attention! In the coming months, the Center on Aging-Northeast will continue to present community programs at senior centers and other facilities throughout Northeast Arkansas.

**Scheduled Programs Include:** 

"Diabetes: Fact or Fiction?" Mon, January 24th; 10:30 a.m. Eagle Mountain Assisted Living 302 Woodmont Circle, Batesville "Is It Depression or Just the Winter Blues?" Tues, January 25th; 11:00 a.m. Waychoff Senior Center 320 Trailwood Drive, Heber Springs

Call 336-5088 or 1-800-745-0557 to schedule a program in your community.



Save water on flushes by putting a plastic bottle filled with water and weight it with small pebbles in your tank.

Make sure your faucet doesn't drip! 60 drips a minute wastes 6,428 gallons of water per year!

Save by showering quickly. A 15 minute shower will cost you \$310 per year. Cutting your shower time by a third will save \$100 a vear.

Reset thermostat from 72 to 65 degrees for 8 hours of the day when no one is at home. This can cut the heating bill up to 10%.

Insulate your hot water heater. Do not cover the thermostat. top. bottom, or burner compartment. Also insulate the first 6 feet of the water pipes leading to the heater.

water using cold water detergents. Since 90% of the energy used for washing clothes is used for heating water, this can save you money.

Wash your clothes in cold

Improve your freezer efficiency by keeping it as full as possible. Be sure to keep at least 1 inch of open space on each side of the interior for better air flow.

During the day, keep drapes and shades open on windows facing the south to allow sunlight to enter and help with heat. Be sure and close them at night.

doors and windows.



#### **Auto Energy Tips**

\* Get a tune-up. You could save up to 88 cents a gallon on gas.

Put calk and weatherstrip on

- Don't speed, use the cruise control, and avoid idling, which wastes gas. Each 5 miles per hour you drive over 60 mph is the equivalent of paying 15 cents more per gallon for gas.
- Combine errands into one trip and save gas.

Resources: The U.S. Department of Energy **AARP** 

## How to Avoid Overactive Bladder By Cynthia Abel, MA, BSE

Having an overactive bladder (OB) can be inconvenient as well as embarrassing. However, contrary to popular belief, it is not a condition that all older adults suffer from. About 30% of people over the age of 50 are affected, and it is especially prevalent in women.

Symptoms of OB include frequent urination (more than 8 times a day) which can lead to mild to heavy leaking and the urge to urinate immediately. OB is primarily a problem of the nerves and muscles of the bladder. Weak pelvic floor muscles, urinary tract infections and/or neurological conditions such Parkinson Disease, Multiple Sclerosis and strokes can all interfere with normal bladder function. Caffeine, alcohol, diuretics and some pain medications will worsen the problem, as well.



Besides taking medications, there are certain foods and beverages you should avoid to prevent OB. These include:

#### **Avoid These Foods**

#### What to Eat or Drink

Food or Drink	Effect	Food or Drink	Effect
Caffeinated or carbonated drink (coffee, tea, soda)	Stimulates the bladder, acting as a diuretic	Water	Drink at least 6 glasses daily to avoid irritating the bladder.
Alcoholic beverages	Causes dehydration and gives brain wrong signals on when it is time to urinate	Non-citrus fruits (apples, bananas, berries)	Will not irritate the bladder like citrus fruits.
Spicy foods	Irritates the bladder	Whole grains	Helps to avoid constipation which can cause OB
Acidic foods (citrus fruits - oranges, grapefruits, lemons - and tomato based foods)	Irritates the bladder	Legumes (peas, beans, lentils, alfalfa and soy)	Provides fiber
Artificial sweeteners	Irritates the bladder	Vegetables (spinach, lettuce, broccoli)	Provides fiber

Other treatments may include pelvic muscle exercises (Kegel) which are repetitively tightening and relaxing for 5 seconds the muscles you use to stop urination. Other methods include the prescribing of medications and in extreme cases, surgery.

Resources: "Taming the Overactive Bladder," Health Monitor, August/September, 2010 The Cystitis/Bladder Foundation

### **ATRIAL FIBRILLATION: More Than Just a Flutter**

By Deborah Levins, RN, BSN

According to the American Heart Association, atrial fibrillation is a heart rhythm disorder found in 2.2 million Americans and affects 3-5% of people over 65 years of age. This disorder actually consists of two problems, an irregular heartbeat and a very rapid heartbeat, both of which are usually treatable.

The most reported symptom is heart palpitations, the uncomfortable awareness of a rapid, irregular heartbeat. Other symptoms include dizziness, unexplained shortness of breath, fatigue or chest pain. Symptoms tend to be related to heart rate, and some persons experience no symptoms at all. Treatments are aimed at rate control, return of regular beat, treating symptoms and preventing complications.



The dangers of rapid rates are related to an inability to provide adequate oxygen to the various parts of the body, thus dizziness, fatigue, etc. The dangers of an irregular heart beat are related to the formation of blood clots and the movement of those clots to body organs. Complications may include kidney failure, a blood clot in the lung, massive heart attacks/strokes and even death.

While atrial fibrillation can be very serious, many treatment options exist, and it can usually be diagnosed quickly and painlessly with an EKG. To learn more about this topic, attend the program, "Atrial Fibrillation: More Than Just a Flutter," on Thursday, February 17th at 1:30 p.m.

UAMS/AHEC-Northeast 223 E. Jackson Jonesboro, AR 72401

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## Parenting Across Generations





Ten years ago, the U.S. Census Bureau found that over 2.4 million grandparents have taken on the responsibility of raising their grandchildren. Some of these grandparents have taken on the obligation willingly and others out of desperation. Circumstances are that the child's parents either will not or cannot take care of them. Abandonment may be due to substance abuse, mental disorders, incarceration or death of one or both parents. Regardless of the reason, more than 7% of American homes, with children under 18 years of age, are headed by grandparents. Approximately half of these homes consist of only one grandparent.

These elder adults face many challenges. For most, the situation is unexpected. Retirement incomes rarely allow for the cost of providing the food, shelter and clothing required to raise a child, much less college tuition. Generally, seniors are just not as active or energetic as when they first became parents. And, for good or bad, parenting has changed. Where will they find the energy to take the children to the places they need to go? Even homework looks quite different than when they were raising their children. These elders are often overcome by feelings of shock and sadness as they realize that the life they planned is no longer feasible. Additionally, due to the circumstances that create these new relationships, many of the grandchildren bring to the home special problems that have to be dealt with. Unsurprisingly, many grandparents are overwhelmed.

But, significant rewards may also be found. Children have much to offer: boundless energy, overwhelming love and great joy. Children around the house tend to keep older adults more active. Accordingly, this increase in activity will often improve their general health.

There is help out there. If computer literate, there are hundreds of sites available to help deal with the problems seniors encounter in raising grandchildren. Search the internet: grandparents raising grandchildren. Sites include government information, legal information, financial information, as well as sites that are targeted to specific questions.

Also, additional help may come in the form of relatives, ministers, educators, social workers, and/or school counselors. The main thing for seniors to understand is that they are not alone. And, while not the retirement they expected, this really could be the best time of their lives.