



CAPE FEAR VALLEY PASSPORT TO HEALTH

Passport To Health is a program for members ages 50 and better.

OFFICE

Passport To Health 3522 Village Drive Phone: (910) 615-4600 Fax: (910) 615-5385

Office hours vary.
Please call before stopping by.

MAILING ADDRESS

Cape Fear Valley Health Attn: Passport To Health P.O. Box 2000 Fayetteville, NC 28302-2000

EDUCATIONAL TOPIC LINE

For the topic of the month to be presented at Passport To Health's monthly educational meeting and other upcoming events, please call (910) 615-4468.

This newsletter is published by the Marketing and Outreach Department of Cape Fear Valley Health System for Passport To Health members, physicians, senior centers and community agencies.

Editor: Anna Ackerman Passport To Health Manager aackerman@capefearvalley.com

This educational information is provided to supplement the care provided by your physician. It is not intended to be substituted for professional medical advice. Always consult your physician with any questions you may have regarding a medical condition.









Choose a hospital that delivers exceptional care

If you were looking for a hospital that provided exceptional care, you could pour over graphs showing compliance with every measure of evidence-based care. Or you could do it the easy way. The Joint Commission, an independent organization that accredits and certifies more than 20,500 healthcare organizations across the nation, has done the work for you. Their Top Performer award recognizes hospitals providing exceptional care.

Cape Fear Valley has been recognized as a **TOP PERFORMER** in four areas: **HEART ATTACK** :: **HEART FAILURE** :: **PNEUMONIA** :: **SURGICAL CARE**

Top Performer status means Cape Fear Valley Health provides the most up-to-date, scientifically based care as compared to anywhere in the country. And it's right here in Fayetteville close to family and friends.

When you choose Cape Fear Valley, you're putting yourself in **CAPE**able hands.





Dear Friends,

Happy New Year! It's hard to believe there is already another year upon us. I'm happy to say that 2014 was a great year for me. I look forward to another year of excitement, new programs and fellowship with all of our Passport To Health Members.

As with any new beginning, sometimes change comes. This year, Monthly dinners will begin at 5 p.m. and doors will open at 4:30 p.m. This will allow you to get home earlier in the evening, sometimes even before dark. I hope you will like this change and it will not inconvenience you.

In the past, we have mailed out luncheon and dinner registrations booklet to all interested members. This year, we did not receive our luncheon and dinner dates in time to do that. We will, however, have Luncheon and Dinner booklets available for you at the February events. You can also use the registration forms in this and all Passport To Health newsletters.

I also expect that sometime this year, the free parking for Passport To Health members will switch to a 50 percent discount. I don't know when this might happen as it depends on a number of factors. However, I will make sure you receive advance notice.

New Year, new beginnings and changes are almost always for the better. I look forward to our best year yet! Thank you for your continued support of your Passport To Health program.

ANNA ACKERMAN, PASSPORT TO HEALTH MANAGER



Find Us On Facebook!

Stop by www.facebook.com/ CFVPassportToHealth and click on the "Like" button.

Our office is closed on Thursdays to walk-in traffic so that we may have uninterrupted time to plan workshops and programs for you. Thank you for being understanding.





In a social gathering of Baby Boomers in their 60s, the topic of dementia is bound to surface eventually in the conversation.

That's understandable. About 5.2 million Americans have dementia, with the numbers growing daily as the population ages. After age 60, nearly everyone has experienced memory lapses that trigger at least a glimmer of anxiety about future cognitive declines.

Twenty years earlier, these same folk were more interested in talking about the activities of their children and rarely even thought about dementia. Yet recent research suggests that it's during this midlife period – the years between 40 and 60 – that efforts to delay or prevent dementia may be most fruitful.

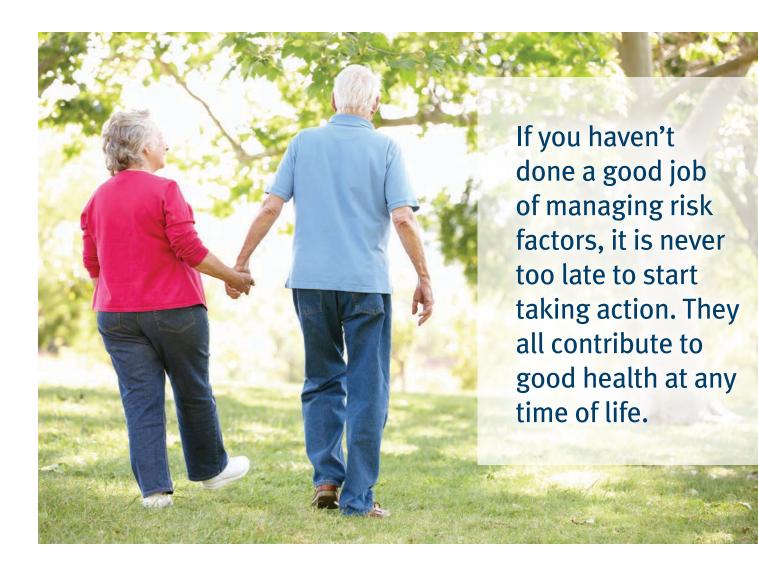
Researchers have identified several midlife factors that are believed to increase the risk of late-life dementia.

BLOOD PRESSURE: Several studies, including a large population-based study, have found a connection between high systolic blood pressure (the top number) during middle age and later risk of dementia. Another study reported "moderately strong evidence" that treatment of hypertension with medication during this period reduces that risk.

On the other hand, a Cochrane review concluded that blood pressure treatment during late life had no effect on preventing cognitive decline or dementia.

Failure to treat high blood pressure at an early stage, of course, is likely to lead to atherosclerosis and other cardiovascular problems that are also associated with an increased risk of dementia.

DIABETES: Large population studies have found a higher rate of dementia among older persons with diabetes. One study concluded that the risk was stronger when diabetes was diagnosed during mid rather than late life. This study also found that diabetes accelerated the process of memory decline, shortening the period when the patient had only mild to moderate cognitive impairment.



CHOLESTEROL: Epidemiological studies have found a similar connection between dementia and cholesterol, particularly high levels of LDL. Again, it's high cholesterol in midlife, but not late life, that is most likely to increase the risk.

Regarding the effectiveness of cholesterol-lowering statins in delaying or preventing cognitive decline, studies have had mixed results. As a result, a Cochrane review concluded that statins could not be recommended for that purpose at this time.

LIFESTYLE AND OTHER FACTORS: Other factors during middle age that are associated with a higher risk of dementia in later life include obesity, depression, excessive alcohol use and lack of social support or social activity.

On the other side, regular exercise and the Mediterranean diet or a diet high in antioxidants are associated with a lower risk. In a large twin study, subjects who exercised the most were least likely to experience cognitive decline.

Other lifestyle measures thought to be helpful include

quality sleep, stress management and an active social life.

While the evidence for the above midlife risk factors is based mostly on population-based studies and generally not conclusive, there is no risk – and considerable benefit – involved in controlling blood pressure, cholesterol and blood sugar while exercising regularly and eating a healthy diet.

If you've already passed your 60th birthday, and you haven't done a good job of managing those risk factors, it is never too late to start taking action. They all contribute to good health at any time of life.

If you're already showing early symptoms of dementia, you may not be able to prevent it, but there are two important things you can do to delay the onset: 1) physical activity and 2) mental exercise.

Physical activity keeps blood flowing to your brain. Intellectual pursuits help build and maintain connections between brain cells. Animal studies show they may also decrease the brain signs – plaques and tangles – that are associated with dementia.

Mental activities that are beneficial depend largely on the individual. They include playing board games with your children and grandchildren, doing crossword or number puzzles, playing cards, reading, writing or simply surfing the internet. Learning something new, such as another language, can be particularly beneficial.

The ACTIVE study (Advanced Cognitive Training for Independent and Vital Elderly), involving 2,802 adults ages 65 and over, found that subjects attending 10 braintraining sessions over a five- or six-week period showed improvements in memory, reasoning and speed of processing information.

These improvements showed up in everyday activities and lasted for at least five years. Ultimately, however, according to a study published in 2010, these activities could not stave off dementia. According to this study, subjects who showed gains from increased mental stimulation experienced a 52 percent faster decline once dementia began to set in compared to subjects who had not had the mental stimulation.

The result is a shortening of the dementia process – something that would be welcomed by most patients and their families.

As Alzheimer's dementia progresses, brain cells die and connections between them become lost. Although no medications now available can stop this damage, they can lessen symptoms for a while by their effect on chemicals involved in carrying messages between cells.

Cholinesterase inhibitors, such as Aricept, Exelon, Razadyne and Cognex, prevent the breakdown of acetylcholine, a key substance for communication between nerve cells. Roughly half of patients taking one of these drugs are able to delay the worsening of symptoms by 6 to 12 months.

Namenda regulates the activity of glutamate, another messenger substance that is involved with learning and memory. Its effect is similar to that of a cholinesterase inhibitor. And the two are sometimes prescribed together.

Vitamin E is sometimes prescribed, but should be taken only under the supervision of a physician since it could interact with other medications. Drugs may also be prescribed to help deal with depression, insomnia, agitation and behavior problems.

Although the above medications are strictly for Alzheimer's disease, they may also be helpful for other types of dementia.

Some Centenarians Resistant To Dementia

Dementia becomes increasingly common with advancing age, but it is by no means inevitable.

The New England Centenarian Study has found significant numbers of persons age 100 and over who have no evidence of neurodegenerative disease. And of those who do show signs of cognitive decline, about 90 percent delayed the onset until an average age of 92.

Control Stress, Reduce Your Risk of Dementia

Severe or persistent stress takes a toll on the brain, causing shrinkage of at least one area of the brain involved in memory (the hippocampus) and inhibiting growth of brain cells.

Learning stress management techniques such as deep breathing, relaxation therapy and meditation could be effective ways of reducing your risk of Alzheimer's disease and other dementias.

Dementia Prevalence Rises Sharply with Age

Your probability of developing Alzheimer's or vascular dementia doubles every five years after age 65.

About 2 to 3 percent of seniors aged 65 and over have dementia while 25 to 50 percent of those aged 85 and over have symptoms.

At age 65, a woman's risk of dementia is 1 in 6 compared to a man's risk of 1 in 11.

The second most common type is vascular dementia. In this case, the primary goal is to prevent future strokes, which may require antihypertensive and anticoagulant medications plus an effort to lower cholesterol.

With a rapidly aging population, research into finding a cure or treatment for dementia has become a priority. To date, a major breakthrough is not in sight. There are, however, many commonsense ways to protect yourself.

UPCOMING events

Monthly Luncheon & Dinner Programs

All luncheon and dinner programs are held in the Cape Fear Valley Rehabilitation Center Auditorium, located behind Cape Fear Valley Medical Center. Free parking is available in the Employee Parking Lot, located at the corner of Melrose and Walter Reed roads, with shuttle service provided to the door.

To allow our catering staff to get ready, doors will open at 11 a.m. for the luncheons and 4:30 p.m. for the dinners. We regret we cannot allow early entry.

FEBRUARY

Don't Be A Victim

Thursday, February 5 • 5:00 p.m. Registration deadline is January 29.

Monday, February 9 • 11:30 a.m. Registration deadline is February 2.

You may not be able to judge a book by its cover, but you can sometimes identify people and behaviors that put you at risk. Sharon Stevens, Crime Prevention Specialist with the Fayetteville Police Department, will teach you ways to avoid pickpockets, purse snatchers and identity theft.

FEBRUARY EDUCATIONAL PROGRAM REGISTRATION FORM

Member's Name:
Spouse's Name:
Phone #:
Cost: \$7.25 per person
Dinner Session: February 5 Registration Deadline is Jan. 29, 2015.
Luncheon Session: February 9 Registration Deadline is Feb. 2, 2015.

MARCH

How To Manage The Stress In Our Life

Monday, March 2 • 5:00 p.m. Registration deadline is February 23.

Monday, March 30 • 11:30 a.m. Registration deadline is March 23.

As we age, our stressors may change – health problems, the death of a loved one – but they don't go away. Honi Gluck, M.D., psychiatrist with Cape Fear Valley Behavioral Health Care, will teach us about stress and how to manage it.

MARCH EDUCATIONAL PROGRAM REGISTRATION FORM

Member's Name:
Spouse's Name:
Phone #:
Cost: \$7.25 per person
Dinner Session: March 2 Registration Deadline is Feb. 23, 2015.
Luncheon Session: March 30 Registration Deadline is March 23, 2015.

NOTICE: The Passport To Health office will close daily for lunch from 12 to 1 p.m.

Make checks payable to Passport To Health. Mail your registration form and payment to:

Passport To Health Cape Fear Valley Health System P.O. Box 2000, Fayetteville, NC 28302-2000

To receive a refund, cancellations must be made by the reservation deadlines.

APRIL

High-Mileage Feet

Monday, April 13 • 11:30 a.m. Registration deadline is April 6.

Thursday, April 30 • 5:00 p.m. Registration deadline is April 23.

By the time we have reached age 50, our feet have walked a lot of miles! Daniel Laut, D.P.M., podiatrist with Cape Fear Podiatry Associates, will discuss common feet problems affecting those over age 50 and their remedies.

APRIL EDUCATIONAL PROGRAM REGISTRATION FORM

Member's Name:
Spouse's Name:
Phone #:
Cost: \$7.25 per person
Luncheon Session: April 13
Registration Deadline is April 6, 2015.
Dinner Session: April 30 Registration Deadline is April 23, 2015.

MAY

Community Health Day

Holiday Inn Bordeaux 1701 Owen Drive, Fayetteville

Tuesday, May 12 • 10:00 a.m. – 1:45 p.m. Registration deadline is May 1.

Community Health Day offers free health screenings, exhibits and refreshments beginning at 10 a.m., followed by a buffet lunch, keynote speaker and door prizes – all for \$7.25! There will be no luncheon or dinner program in May due to Community Health Day.

COMMUNITY HEALTH DAY REGISTRATION FORM

Member's Name:
Spouse's Name:
Phone #:
Cost: \$7.25 per person
Holiday Inn Bordeaux
1701 Owen Drive, Fayetteville
Tuesday, May 12 • 10 a.m.
Registration Deadline is May 1, 2015.

UPCOMING events

Seminars & Workshops



A New Approach To Understanding Dementia

Wednesday, February 25 9:30 a.m. – Noon Cape Fear Valley Rehabilitation Center

Light Refreshments

Auditorium A

FREE! If you have a loved one with dementia, you probably have trouble understanding them and getting them to do what you need them to do.

This interactive workshop will help you understand why these things are difficult and how you can change your behavior to improve these interactions.

Melanie Bunn, RN, MS, GNP, Dementia Training Consultant with Alzheimers North

Carolina, will cover the types of dementia, its progression, the impact of chemical and structural changes on behaviors, and suggestions for improving communication.

You will also learn how to build a team to help you through the journey.

Please call 615-4600 to register.

Members On The Move: Exercises To Protect Your Back

Monday, March 9 9:30 – 10:30 a.m. Cape Fear Valley Rehabilitation Center Auditorium D

FREE! A Physical Therapist from Cape Fear Valley Health will demonstrate exercises you can do to strengthen and protect your back.

To register, please call 615-4600.

How To Make A Spring Wreath

Wednesday, April 1 9 – 10 a.m.

Cape Fear Valley Rehabilitation Center Auditorium D

Please call 615-4600 to register and get a list of needed supplies.

Arthritis Of The Hip And Knee

Thursday, April 30 6:30 – 7:30 p.m.

Cape Fear Valley Education Center 3418 Village Drive

Does arthritis cause you pain and limit your activity? An orthopedic surgeon will discuss the signs and symptoms of arthritis and available treatments.

To register, please call 615-LINK (5465).

Living Alone

Living alone has become a trendy option among young Americans. Eric Klinenberg, author of *Going Solo: The Extraordinary Rise and Surprising Appeal of Living Alone*, points out that in cities such as San Francisco, Seattle, Chicago and New York 35 to 50 percent of households have just one person. Klinenberg states that many of these solo dwellers have richer social lives than other adults.

Living alone is also becoming increasingly common among older adults; about 30 percent of men and women ages 65 and older and more than half of women ages 75 and older live alone.

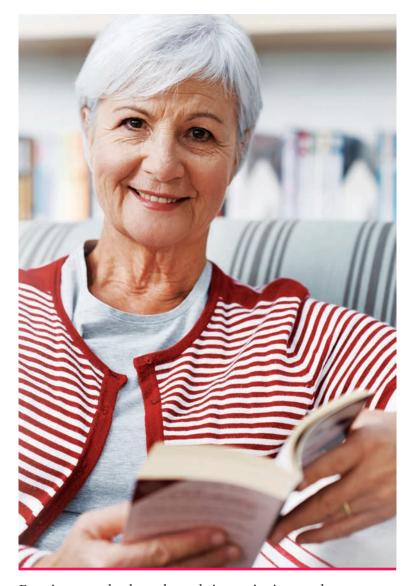
A good number of solo seniors have recently lost a spouse or lifetime partner and may still be grieving. Others have been single parents for many years and have seen their children leave the nest, move away and start families of their own. And, finally, most are retired, without a place to go every day and interact with others.

Instead of experiencing a Seinfeld-like social experience, these seniors often feel isolated and lonely. The youth-oriented world around them often seems to ignore them.

There are many ways to stay connected – through texting, email, Facebook and Twitter. However, be careful not to use cyber communication as a substitute for real life social contacts. In later life, it's too easy to remain at home behind the computer rather than staying involved with friends and activities in the community.

EXPAND YOUR SOCIAL CIRCLE

Karen, 75, has significantly expanded her social circle since her husband died three years ago. She continues to attend a yoga class, where she has a circle of long-term friends. And she recently started volunteering for a local hospice. She goes in three mornings a week for four hours at a time – a substantial commitment of time and energy, but a routine that keeps her socially and mentally active. Every Wednesday night, she goes out for dinner and conversation with a group of six from her yoga class.

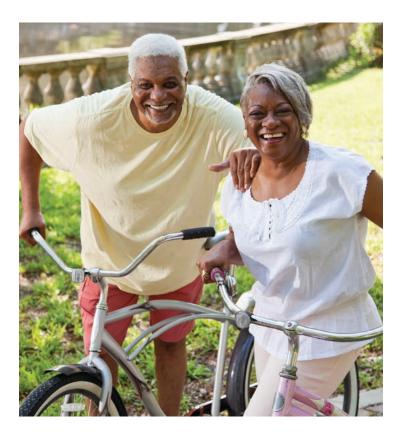


Exercise not only plays a key role in continuing good health but also offers opportunities for interacting with old and new friends. Some seniors get together as a group every day for a three- or four-mile walk.

Some seniors who live near each other get together for meals most days of the week, taking turns cooking and cleaning up. Groceries are cheaper, you have to cook only a few days each week and you have ongoing social contact with a circle of friends.

Whatever you do, don't cut your ties with your family. They are your most important lifeline. Even if a child or sibling has said something that has hurt your feelings, you gain nothing by holding a grudge. If your children forget to call you on Mother's Day, pick up the phone and call them.

Young people often say they relish the freedom solo living gives them. You can also have that freedom. With few exceptions, you can do anything and go anywhere you want.



Fear of Falling Not such a bad thing

Every morning at 9 a.m., Ron, 78, climbed on his bicycle to tour the town. The ride kept his heart pumping at a good rate without putting stress on his arthritic knees.

Then came the accident. Cycling rapidly down a big hill, he started braking too late, lost control and suffered a nasty spill at the bottom. The damage was a broken arm, some cuts and bruises and, probably most important, a fear of falling that kept him from getting back on the bike.

Everyone over age 65 knows the dangers of falling. One of every three seniors suffers a fall and the troubling consequences every year. It's the number one reason for injury-related death among seniors and a major reason for ending up in a nursing home or assisted living center. Two million seniors are brought to the emergency department each year because of fall-related injuries.

Seniors are at risk of falls for many reasons:

- Age related loss of balance and coordination
- Failing eyesight
- Chronic medical conditions and medications that contribute to dizziness or lightheadedness
- Weakened muscles that are unable to provide bracing support
- Weakened bones that break more easily

These risks increase with each passing decade.

Preventing Falls

EXERCISE: One of the best things you can do to prevent falls and remain independent as you age is to exercise. The focus should be not just on getting your heart pumping a little bit faster than usual, but also strengthening muscles, particularly those in your legs and core. These are the muscles that help you maintain balance and stability.

Cycling and stair climbing provide good aerobic benefits while also keeping leg muscles strong. Lunges and modified squats (avoid bending at the knee too much) are also excellent exercises to build leg strenth. Do them with or without hand weights.

Strong bones are needed to protect against fractures when a fall does occur. Weight-bearing exercises such as walking are best for this purpose.

VISION: vision problems such as cataracts can dim your vision, sometimes without your realizing it. It's important to have your eyes checked at least once a year. An optometrist can make sure your eyeglass prescription is up-to-date and note any other problems that require the attention of an ophthalmologist.

Once a major, lingering problem, cataracts can now be quickly and easily removed surgically and an intraocular lens inserted in less than an hour. Some patients are delighted to find that this procedure gives them 20/20 vision without glasses, although reading glasses might still be required.

MEDICAL CONDITIONS AND MEDICATIONS: A

number of medical conditions and medications can cause you to feel lightheaded or dizzy. Low blood pressure is often involved, and this often occurs in individuals being treated for high blood pressure.

Diuretics used to treat hypertension can contribute to dehydration or electrolyte imbalances that result in lightheadedness when you rise too quickly from a seated or lying position. The solution is to take it slowly when you arise; and drink plenty of fluids.

Amlodipine, also used to treat high blood pressure, is one of several medications associated with dizziness.

If you note some lightheadedness or dizziness, don't wait until you fall. Talk to your doctor about changes that could be made in your medications.

One common reason for dizziness in older persons is benign positional vertigo, caused by small pieces of calcium that float inside the semicircular canals of the inner ear and give confusing messages to the brain about the body's position.

Benign positional vertigo can be treated with the Epley maneuver, a simple routine that can be learned and performed on your own. Ask your doctor or go to http://www.dizziness-and balance.com/disorders/bppv/epley/fifth.html.

POSTURE AND GAIT: As you get older, it becomes increasingly important to pay attention to your posture and gait. Keep your abdominal muscles pulled in, your spine straight and your shoulders back.

Wear low-heeled shoes with rubber soles that give you good stability. Avoid distractions such as talking on a cell phone and pay attention to where you are placing your feet with each step.

OUTDOORS: Keep your porch stairs and walkways free of leaves, clutter, snow and ice. Keep your hands free for using rails.

In winter, be wary of hidden slippery patches. Reach out and test that stair or piece of sidewalk before stepping out on it. Stop at curbs and check the height before stepping down or up.

Polished marble or tile floors in public buildings can be slippery when wet; use carpets whenever possible.

If you have fallen before, consider using hip pads or hip protectors.

INDOORS: After a certain age, depending on your balance and agility, you should establish a policy against climbing on chairs or stepstools to reach high shelves. Get someone else to do it for you.

Remove all throw rugs and make sure area rugs and carpeting are securely tacked to the floor. Use a non-skid rubber mat in the bathroom and install grab bars for the toilet, shower and tub.

Non-skid mats might also be useful in the kitchen, in front of the stove and sink. Be sure to clean up all spills immediately.

Climbing up and down stairs in your home can help keep your leg muscles strong and healthy. Be sure your stairs have sturdy handrails and are well lighted, with switches at both top and bottom.

As you get older, it becomes clear that there are many potential hazards waiting to take you off your feet. However, there is a thin line between being cautious about these hazards and letting them control your life.



It's Never Too Late

A large analysis of 20 studies found that subjects who ate fish regularly had a 36 percent reduced chance of dying from heart disease. The American Heart Association recommends at least two servings a week – preferably of fatty fish such as salmon, lake trout, herring, sardines, bluefish and tuna. Unfortunately, 80 percent of Americans do not follow that advice.

One big reason to eat fish is that, unlike red meat, it is a good source of low-fat protein. A Chinese metaanalysis of seven studies involving 254,489 subjects



[Neurology, June 11, 2014] identified fish protein as offering the best protection against stroke – better even than vegetable protein. Animal protein, on the other hand, increased the risk of stroke.

The most commonly cited benefit from eating fish derives from the omega-3 fatty acids that have been found to reduce inflammation throughout the body – inflammation that can damage blood vessels and increase the risk of heart disease. Omega-3 fatty acids also decrease triglycerides, lower blood pressure, reduce blood clotting and protect against irregular heart beats and rhythms.



The fatty fish mentioned previously have the highest levels of omega-3 fatty acids such as eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA). Some fish, such as tilapia and catfish, have less EPA and DHA and higher levels of unhealthy fatty acids. They are still good sources of low-fat protein, however.

Any fish dish can be unhealthy, of course, if it is breaded and deep fried in oil that is high in saturated fat. Broiling or baking is the best option.

Aside from the benefits to the cardiovascular system, fish consumption is also believed to be protective of the aging brain. In an MRI study of the brains of 260 older adults with normal cognitive function [American Journal of Preventive Medicine, July 29, 2014], researchers found that subjects who regularly ate baked or broiled fish had larger brain volumes in areas associated with memory and cognition. The same benefit was not found for those who ate fried fish.

Although brain volume was directly correlated with fish consumption, it was not significantly associated with blood levels of omega-3 fatty acids. The researchers concluded that "lifestyle factors," such as including fish in the diet were more important than the "presumed biological factors" such as consumption of omega-3 fatty acids.

For optimum health at any age, incorporate fish into your diet, lower your intake of sodium, and eat more fruits, vegetables and whole grains. All of these dietary changes are important, because the medications you may be taking for blood pressure and cholesterol will go only so far.

The rest is up to you.



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Sunday, March 8 from 2 – 4 p.m.

TOURS • REFRESHMENTS • BLOOD DRIVE

Get a sneak peek of Hoke Hospital during an open house on Sunday,
March 8, 2015. The event will be from 2 to 4 p.m. and include giveaways, refreshments and hot chocolate.
Tours of the hospital's Emergency Department, operating rooms, maternity, medical-surgical units, and other departments will be provided.

Become a hero for someone in your community. Donate blood. Cape Fear Valley Blood Donor Center will be hosting a blood drive from 1 to 5 p.m.