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Senior Guide
Senior Living Options, Memory Care, Home Care, Hospice, Senior Resources
See pages 37-49

Back to School Advice for Parents of Children With Special Needs
See pages 30-35
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By Kevin Brown

“Their legacy will live on in the halls of the UPMC Hillman Cancer Center and, when we get to the future without cancer, they will get the credit due,” Stanley M. Marks, M.D., said recently in describing Henry and Elsie Hillman, whose philanthropy impacted healthcare and medical research not only in western Pennsylvania, but around the world. Dr. Marks is chairman of the UPMC Hillman Cancer Center. The UPMC Hillman Cancer Center in Shadyside remains the flagship cancer research and treatment facility at UPMC.

Family patriarch and philanthropist Henry L. Hillman passed away on April 14 at the age of 98. His wife, Elsie Hillman, passed away in 2015.

According to the Hillman Family Foundations, the Hillmans donated $425.5 million to a variety of educational, cultural, community, and healthcare institutions and projects since the Hillman Foundation was established by Henry’s father in 1951. Of that total, more than $71 million was given for healthcare and medical research projects around the region.

“The impacted cancer care and research in our area in many ways,” said Dr. Marks. “Until the Hillman Cancer Center in Shadyside was built, we didn’t actually have a physical structure. It was a ‘virtual’ cancer center located mostly at Montefiore and Presby,” he said. In 2002, the Hillmans gave $10 million to the construction of the cancer center and, in 2004, committed $20 million to establish the Hillman Fellows for Innovative Cancer Research Program. The Hillmans subsequently donated another $6 million to the research program.

“It established a state-of-the-art clinical facility for one-stop shopping – where patients could have everything done on-site. The other half of the building is research. Just the facility alone enabled us to change the paradigm of cancer care, as well as cancer research, which hasn’t just impacted cancer care in this region, but across the world,” he said.

Dr. Marks noted that the research program funded by the Hillmans has reaped benefits many times over. “That $20 million for research was parlayed into nearly $100 million in additional research funding received from the federal government and other agencies that support cancer research.”

On May 31, UPMC officials announced the renaming of the 50-plus cancer center locations within the global UPMC network as UPMC Hillman Cancer Center. Today, the UPMC Hillman Cancer Center is western Pennsylvania’s only National Cancer Institute (NCI)-designated Comprehensive Cancer Center, one of five in the state, and one of just 47 nationwide.

What the Hillmans did to advance cancer care and research, they also did for pediatric organ transplantation. A gift of $10 million from the Henry L. Hillman and Hillman Foundations in 2005 established the Hillman Center for Pediatric Transplantation and the Hillman Endowment for Pediatric Transplantation at Children’s Hospital of Pittsburgh of UPMC.

The first pediatric kidney transplant was performed at Children’s Hospital in 1964. In 1981, Children’s opened the first pediatric transplant center in the country under the guidance of Thomas E. Starzl, M.D., Ph.D.

“The Hillman gift was really a transforming gift in several ways for our program and, ultimately, for transplantation programs across the country,” said George V. Mazariegos, M.D., chief of Pediatric Transplantation at Children’s.

“It allowed us to bring together the transplant programs that were operating at Children’s in the various disciplines such as the abdominal, thoracic and renal transplant programs, and identify common problems or opportunities that were facing our patients and address them together through clinical infrastructure and research,” said Dr. Mazariegos.

“The gift also allowed us, in an era of uncertain national research funding, to help our innovative investigators with preliminary funding that would lead to additional funding that was sustainable,” Dr. Mazariegos said.

In March 2017, the Scientific Registry of Transplant Recipients (SRTR) ranked Children’s the number one program in the country for pediatric liver transplant outcomes. Children’s also was the only hospital nationally to receive a “better than expected” outcomes rating for pediatric liver transplants.

The Hillmans’ legacy of advancing health care doesn’t stop with the UPMC Hillman Cancer Center and the Hillman Center for Pediatric Transplantation at Children’s. Grants from the various Hillman foundations have supported a multitude of other healthcare and medical research projects in the region.

The Magee-Womens Research Institute was the recipient of a Hillman grant to establish the Elsie Hillard Hillman Chair of Women’s Health Research held by Joel Sadovsky, M.D.

The Three Rivers Mothers’ Milk Bank was started in 2013 with a lead gift from the Henry L. Hillman Foundation. The milk bank provides donor human milk to medically fragile and premature babies in the region’s Neonatal Intensive Care Units (NICUs).

The Mary Hillman Jennings Foundation also supported the Child Advocacy Center (CAC) at Children’s, which provides comprehensive evaluations for children and adolescents who may be victims of physical or sexual abuse, or neglect, among other services related to child maltreatment.

A Henry L. Hillman Foundation grant is helping the Healthy Schools Initiative, a partnership of Children’s and Pittsburgh Public Schools. (Continued on page 22)
Hope When it’s Hillman, a lot.

UPMC CancerCenter is now UPMC Hillman Cancer Center.

As the region’s only National Cancer Institute-designated Comprehensive Cancer Center, our network of more than 50 sites already delivers the world-class care of Hillman Cancer Center, its flagship facility, at each of its locations across the region. And now, the Hillman name, which stands for unsurpassed excellence in cancer care, will be reflected in the name of every cancer center across our network. Working in close partnership with the University of Pittsburgh School of Medicine, we have always been – and will continue to be – committed to delivering truly world-class, compassionate care. Because every cancer patient deserves our very best care, right where they live.

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BELLY FAT: Something to Control
by Lois Thomson

It can sneak up on you slowly, almost without warning. If unchecked, it has the potential to cause all types of problems. "It" is belly fat in men (and women), and it comes with a host of dangers and risks to your health, as Susan Zikos, a dietician and certified diabetes educator at Ohio Valley Hospital, explained.

"Generally starting from age 30, as we become less active, the body maintains less muscle and it starts turning to fat. We all have two layers of fat, and the layer that's on the outside of the body is good, it helps protect the body and the internal organs. But the visceral fat that is stored around the organs shows up as belly fat, such as fat you see protruding over your belt, and that fat can cause many different problems."

Those problems may include risks of cardiovascular disease; insulin resistance, which can lead to type 2 diabetes; sleep apnea; and high blood pressure. Belly fat can contribute to high cholesterol and fat levels in the blood, and can also cause inflammation in the body that may lead to increased chances of arthritis.

For those reasons, losing weight and keeping it off is particularly important. Zikos said, "As we age, we need fewer calories. One estimate suggests a 60-year-old needs 200 fewer calories a day than a 30-year-old. That's because we generally lose muscle tissue as we grow older, even if we continue to exercise."

She added that studies have shown losing as little as 5 percent of your body weight can make a difference in your health. "That means that if a 200-pound man loses 5 percent of his body weight, he gets down to 190 pounds. That is going to improve a lot of different things, like blood sugar controls — even if he's not diabetic, a lot of people can be pre-diabetic if they're overweight or obese. Losing weight can lessen the risk of cardiovascular disease, lower the body's cholesterol levels, improve breathing and help people sleep better. It can reduce aches and pains people develop as they grow older, and it can improve mobility. Losing weight may also help them decrease the amount of some medications they need."

Zikos agreed that while losing weight is the key, setting a goal to lose 5 percent of body weight can be abstract, so it's often better to set smaller goals, such as eating a healthier diet — more fruits and vegetables and whole grains and fish, eating lean protein, and limiting portion sizes.

"It always just comes down to good, healthy eating. If we would all do that, we would be so much better off."

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"It always just comes down to good, healthy eating. If we would all do that, we would be so much better off."

Eliminate Common Causes

If you are experiencing sneezing, rashes or difficulty breathing, you may see an immediate change in your symptoms when you avoid chemicals in laundry detergent, cleaning products, air fresheners, candles, scented soaps, cosmetics, lotions and perfumes.

Consider an elimination diet in order to get to the root cause of allergies in the body. Common food irritants are dairy, sugar, wheat (gluten), eggs, soy, processed food, peanuts, and alcohol. Eliminating or cutting back on these foods reduces stress on your liver and colon and can help prevent toxins from building up in the immune system.

Foot Detox

In a basin with warm water, include 2 cups epsom salts, 1 cup baking soda and ½ cup of apple cider vinegar. Soak for 10-20 minutes up to three times a week.

Nutritional Supplements

For many people, intestinal imbalances result in allergy-like symptoms. Consider supplements like probiotics, allergy reducers such as fenugreek and mullein, stinging nettle, zinc, spirulina, vitamins C, D and E, milk thistle, red clover or bee pollen. Most naturopathic doctors offer a simple body scan to see which supplements will work best for you.

There are other natural options to try such as flower essences, essential oils, frequency alignment, and infrared sauna. No matter what your health condition, it's important to care for your entire body, mind and spirit, and not just your symptoms.

For more information, visit www.ohiovalleyhospital.org or call Susan Zikos at (412) 777-6205.

Tracie Yautz, ND, is a traditional naturopathic doctor at Divine Health Naturally Wholistic Wellness Center. Learn more at www.DivineHealthNaturally.com.
MyHouseCall App Makes Medical Visits Convenient, Affordable

By Vanessa Orr

It's bad enough being sick. But when you have to get out of bed, get dressed and go to see the doctor when all you really need is a prescription, it makes you feel even worse.

MyHouseCall is changing all that. Launched this past January, the app enables you to request a telemedicine (video) visit with a physician or nurse practitioner, or if you live in Allegheny County, you can receive an in-person house call.

“I used to work in a family practice office, and you could see how frustrated people were with the waiting time, and the staff was frustrated that people didn’t show up for their appointments,” explained co-founder and COO Michael Cole. Other co-founders include Dr. Stephen Ritz, who serves as CEO, Dr. Chris Fleissner, and Eric Cole.

“Telemedicine allows us to see simpler, acute conditions with a 5- to 15-minute video visit, but we also have a house call option for more complex or sicker patients,” he continued. “By combining new-school telemedicine with the old-school house call, we provide a convenient yet affordable option.”

To take advantage of MyHouseCall services, a person just downloads the free app and puts in a request. It’s available for iPhone and Android devices through the Apple App store and the Google Play store. “If a person lives in Mt. Lebanon, for example, they can request either a house call or telemedicine visit,” said Cole, adding that anyone in Allegheny County has access to both services. “If the person lives outside the county, the app will give them the option of a telemedicine visit.”

The patient provides a zip code, basic demographic information and a past medical history, just as they would at a doctor’s office. The app meets all HIPAA standards for privacy, and also features end-to-end encryption to protect users’ medical information. Patients also have access to all of their medical notes within the app.

Users pay for services using a credit card or FSA/HSA card; insurance is currently not accepted. Telemedicine visits cost $39 and house calls cost $99. “It’s as simple as putting in a request for an Uber,” said Cole.

To date, the majority of MyHouseCall’s users have utilized the telemedicine option to treat issues including colds, bladder infections, rashes, and the flu. “People really like the virtual visits because they are low-cost and they are typically seen within minutes,” said Cole. “House calls tend to be for patients who are non-ambulatory, who have more complex medical issues, or for younger children.”

MyHouseCall’s staff includes licensed and board-certified physicians and nurse practitioners, many of whom come from primary care and urgent care backgrounds.

“By providing a platform that connects patients and providers, we’re hoping to streamline patient care,” said Cole. "Basically we want to be an at-home triage service that believes in the right service, right cost, and right location for patients’ particular medical needs.”

To learn more, visit www.MyHouseCall.net.

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MedBridge
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By Nancy Kennedy

Two new studies published in major medical journals challenge the long-held belief that people with pacemakers and other implanted cardiac devices (ICDs) cannot have magnetic resonance imaging (MRI) studies. The MRI is a valuable diagnostic tool that provides excellent images of internal organs and structures; they are widely used in every medical specialty and are considered safe for most people. The concern for people with ICDs has been that the magnetic force generated by the MRI device might cause their pacemakers or defibrillators to malfunction, leading to an arrhythmia (abnormal heartbeat) or shock, or that the wires contained in the ICDs could overheat, causing injury to the patient.

Christopher E. Pray, M.D., an expert in heart and cardiovascular system imaging at St. Clair Hospital, says that although the studies are promising, additional research on a much larger scale is necessary; he believes that it is too soon to change practices. “These studies are interesting and thought-provoking, but it is premature to view this as a major shift,” he says. “Advances in technology are now producing pacemakers and other ICDs that are MRI-Compatible, and there are more advances on the horizon. In the future, it is likely that anyone with an ICD will be able to safely undergo MRI. But not yet.”

Millions of Americans have pacemakers and implanted defibrillators. They act as a back-up if the heart fails, restoring a normal sinus rhythm, or regular heartbeat. The patients that participated in the two studies were carefully selected and supervised, and the MRI scanners were set at the lowest possible strength, of 1.5 Tesla, and were done on non-chest areas of the body. The studies reported no significant adverse outcomes during the MRI exams.

Dr. Pray says that MRIs are so important and useful that they should be available to all patients. Those who have ICDs would probably benefit greatly from having an MRI. “An MRI is often essential to diagnosis and good patient care. The devices we are placing now are mostly MRI-compatible, so in the future these patients will be able to get MRI scans. But right now, there are many people with older model devices, which are not compatible. I scan patients with MRI-safe devices, but not with the older, non-safe ones that were used in these studies, for patient safety.”

A new program in advanced cardiovascular imaging, directed by Dr. Pray, launched this summer at St. Clair. Dr. Pray has recently completed a fellowship in cardiac MRI and advanced imaging; prior to that, he completed a fellowship in cardiology and a residency in internal medicine. He is a graduate of the State University of New York School of Medicine. He met his wife, Nina Fatigati, M.D., during their residencies and relocated with her to Pittsburgh. She is a primary care physician in the South Hills.

“Cardiac magnetic resonance imaging has revolutionized the field,” he says. “We have the capacity to do stress tests in the MRI scanner; we use medication to raise the heart rate. The images are much more accurate; we can see blockages, and scars from previous heart attacks. MRI is the most accurate way to assess the size and function of the heart; it’s the best way to diagnose treatable and sometimes reversible causes of heart failure. It is helpful in evaluating heart valve problems and we can also evaluate the great blood vessels including the aorta for aneurysms or dissections. I do MRI stress tests every day; they are becoming mainstream and they have many advantages for patients. With this diagnostic technology, we can make the diagnosis and manage the patient’s heart disease very well.”

Dr. Pray practices with South Hills Cardiology Associates, Bethel Park. He can be reached at (412) 942-7900.

Heart Health

Cardiac MRIs Are Becoming Safer for Patients with Implanted Devices

“With this diagnostic technology, we can make the diagnosis and manage the patient’s heart disease very well.”

Christopher E. Pray, M.D., an expert in heart and cardiovascular system imaging at St. Clair Hospital

Health Enhancing Thermography

Is a thermal scan different than a mammogram or ultrasound?

A thermal scan is different than other diagnostic tests such as a mammogram or ultrasound. Thermal scans are a test of what is occurring at the cellular level. Thermal screening or thermography looks for physiological changes in our bodies by analyzing temperature and vascular patterns. Other diagnostic tests, such as a mammogram, ultrasound or MRI, look for a structure that is present in the body – like a tumor.

Everyone has their own unique thermal pattern and changes to those patterns can indicate early stage abnormalities that accompany breast pathology, whether it is cancer, fibrocystic disease, an infection or a vascular disease. This is why it is important to keep a close eye on subtle changes to the temperatures and patterns that are unique to you.

Thermograms (the medical image that is produced) can aid your doctor in planning accordingly and developing a program to further diagnose and/or monitor your health. Thermography screenings are a great preventative screening tool to add to your health plan. Not only are they radiation-free, compression-free, and have no adverse effects, the test is something you can schedule on your own. You can then provide the results to your physician.

If you are looking for a safe proactive screening tool to monitor your health or to receive a screening before you are eligible for standard diagnostic testing, thermography is an option to explore.

Utilizing a combination of diagnostic tools increases your chance of detecting abnormalities at an earlier stage. These methods include:

- Annual breast thermography screening for women of all ages
- Mammography when considered appropriate by a physician
- A regular breast examination by a health professional
- Monthly breast self-examination
- Personal awareness for changes in the breasts
- Readiness to discuss quickly any changes in breast health with a doctor

These guidelines should be considered along with your background and medical history.


If you have any questions about how thermal imaging could benefit you, call (855) 254-4328 to speak with one of our technicians or to make an appointment. Health Enhancing Thermography is located at 110 Ft. Couch Rd. Bethel Park, PA 15241.

Visit www.heat-images.com for more information.
Our “Advances in Medicine” feature looks at some of the latest advances in heart care in western Pennsylvania. We spoke with doctors at Allegheny Health Network (AHN) and UPMC to find out what is being done locally to help those with serious heart conditions. This month we look at medical advances in the treatment of atrial fibrillation and new developments enhancing heart care at Allegheny General Hospital.

Helping Those with AFib

Atrial fibrillation (AFib) is one of the most common heart rhythm disorders. According to the Centers for Disease Control (CDC), between 2.7 and 6.1 million Americans have AFib. Left untreated, it can lead to stroke. AFib is usually treated with medications, however, the blood thinners normally prescribed for AFib can cause bleeding complications.

Doctors at UPMC began using the new Watchman implantable device in 2016 and AGH doctors started offering the device this year. The device, implanted into the heart via catheter, closes the area of the heart where most clots form, thus reducing the risk of stroke.

“Patients who are at high risk of stroke and bleeding can now be protected by the Watchman device against strokes and other thromboembolic events without having to be committed to taking blood thinners in the long term,” said Samir Saba, M.D., associate chief of Cardiology at the UPMC Heart and Vascular Institute, and associate professor of medicine in the Division of Cardiology at the University of Pittsburgh.

Enhancing Care for Patients

Several new developments at AGH are also enabling enhanced treatment of heart disease and care of heart patients.

Last January, AGH unveiled a new 48-bed Critical Care/Telemetry Unit for the care of cardiovascular patients, including 24 critical care beds and a 24-bed monitored step-down unit.

“The new 48-bed unit has been a great investment in the care of cardiovascular patients,” said Dr. Murali. “It brings new technology to the bedside, allowing us to practice multidisciplinary team care and minimize the risk of moving patients to other parts of the hospital for testing.”

AGH also opened a new electrophysiology lab for the treatment of heart arrhythmias featuring a low-radiation, three-dimensional navigation system called MediGuide. The lab also features the use of ultrasound to reduce the exposure to radiation during lengthy procedures.

“MediGuide is like the GPS system in a car that enables navigation of devices on a pre-recorded X-ray image helping to identify and place catheters at the precise location of the heart rhythm irregularity,” said Dr. Murali. “Using this advanced technology we have limited radiation exposure and achieved cure rates approaching 70 per cent for patients with atrial fibrillation.”

With the most advanced heart care available at institutions such as AGH and UPMC, western Pennsylvania residents can count on access to the latest technology in the treatment of heart conditions.

For more information about these advanced medical technologies, visit www.ahn.org and www.upmc.com.

Part 4: Fighting Coronary Artery Disease (Coming this Fall)
What I’ve Learned From Living With A Disability

By Dave Hale

MY NAME IS DAVE HALE, AND I LIVE WITH A PHYSICAL DISABILITY. I WAS BORN IN 1979 WITH A SEVERE FORM OF SPINA BIFIDA, LEAVING ME WITH LIMITED FEELING AND MOVEMENT IN MY LEGS AND FEET.

WHAT IF I TOLD YOU THAT HAVING A DISABILITY HAS TAUGHT ME MANY THINGS ABOUT LIFE? IT HAS.

Independence: At six-years-old, I began developing life skills in occupational therapy. The more I developed these skills, the less help I needed. Today, I’m a responsible adult, mostly because of the people who encouraged me to be independent. They showed me that I was capable of accomplishing more than I thought I could.

Empathy: I’ve learned to identify with others in their struggles. My friends with disabilities have similar experiences. Stigma, staves, inaccessibility, and negative comments are just some of them. It’s been good for us to know that we are not alone and there are friends who understand.

Curiosity: I’ve learned to ask questions about life. Living with a disability has raised important questions about my purpose and about my place in this world. I enjoy seeking and searching for the answers, which not only helps me live a meaningful life, but also leads to even more questions!

Gratitude: I’ve learned to be thankful and take nothing for granted. Are there heartaches and headaches that come from living a disability? Yes. Are there a lot of things to be thankful for in my life of disability? Absolutely! One of the main things I’m thankful for is the opportunity I get every day when I wake up to be inspired, learn, grow, and be productive. This is living well.

The Woodlands, a nonprofit organization serving people of all ages with disabilities, helps to cultivate these qualities for participants through year-round programming. Woodlands’ participants gain independence in a supportive environment, with opportunities to have fun and empathize with peers.

The Woodlands fosters a sense of curiosity as we imagine the possibilities for new adventures and accomplishments.

To learn more about The Woodlands visit www.mywoodlands.org.

By Susan Stuart,
President and CEO,
Center for Organ Recovery & Education

The decision to become an organ, tissue and cornea donor is an honorable one. It is a decision that displays generosity, selflessness and courage. In 2016, 237 donors became true heroes by giving the gift of life to someone else right here in the greater western Pennsylvania area. Their families understood that the decision to donate was one that someone else’s life depended on.

The Center for Organ Recovery & Education (CORE) in Pittsburgh works closely with these donors’ families. As one of the 58 federally designated not-for-profit organ procurement organizations (OPOs) in the United States, CORE collaborates with designated health care professionals to coordinate the surgical recovery of organs, tissue and corneas for transplantation, while also raising awareness in the community on the need for more organ, tissue and cornea donors in western Pennsylvania.

CORE brings together donor families and transplant recipients; a relationship that can often be awe-inspiring. Donor mom and transplant nurse Mary Grace Hensell’s son, Brian, saved multiple lives as a liver, kidney and pancreas donor after a fatal car crash in 2011. Her son’s heart recipient, Melvin Protzman, now affectionately calls Ms. Hensell “mom,” even though he is many years her senior. For Melvin, Brian and Mary Grace are true heroes.

At the same time, many families are still waiting for their personal hero. Three-year-old Rosalina “Rosie” Vargas is among them. Born with a rare, inherited metabolic disorder, Rosie’s best option to regain metabolic stability and avoid the constant risk of brain damage is a liver transplant from a deceased donor. After Rosie was added to the national transplant waiting list, the Vargas family permanently relocated to Pittsburgh from California to wait and undergo treatment at Children’s Hospital of Pittsburgh of UPMC.

And Rosie isn’t alone. Sadly, nearly 118,000 people nationwide are also waiting for a second chance at life. You can be a sign of hope for those waiting. Become an everyday hero by registering as an organ, tissue and cornea donor at core.org/register.

We are dedicated to enriching the lives of children and adults with disability and chronic illness.

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Summer has arrived! This usually means that local swimming pools will be crowded with children and adults trying to stay cool. Swimmers will pack up their swim suits, towels and pool toys while they make their way to a crisp swimming pool, a lake or river. But is that all that is needed when swimming? Summer is a time to have fun, but is also a time to be safe. Keep your family safe in and around water with the following tips:

- Swim only in designated areas monitored by certified lifeguards
- Never leave a child unattended around water
- Teach your children to ask permission before entering the water
- Never swim alone
- Always look before jumping into any body of water. Cloudy lake or ocean water may make obstacles difficult to see.
- Wear sunscreen and proper clothing to prevent sunburns
- Drink plenty of water throughout the day to avoid becoming overheated and/or dehydrated
- Keep a cellphone with you and know all emergency numbers to call
- Have inexperienced swimmers wear U.S. Coast Guard-approved life jackets around water
- Follow all posted rules. These rules are provided to help keep patrons safe

Making sure everyone in your family knows how to swim is extremely important. Never is it a substitute for not providing supervision, but it will help keep children safer. Swim lessons are available year-round at the Wilfred R. Cameron Wellness Center. Both group swim lessons and private swim lessons are available for children with highly trained and certified instructors. The WRCWC also provides adapted swim lessons for children with physical or developmental disabilities. These lessons are geared towards helping children of all ages and abilities to be safe and learn to swim. One parent in the Adapted Swim Program stated, “I am so happy with the adapted swim lessons and with Miss Mary. She is kind and motivating with children. She takes her time and really understands what my child needs. I am ecstatic the wellness center is offering a program for children with physical or development needs!”

The Wilfred R Cameron Wellness Center also offers teen and adult private swim lessons as well. These lessons focus on the goal of the client. Some of the clients at the wellness center are looking to become more comfortable in the water to enjoy beach vacations and others are triathletes looking to become more efficient swimmers. Whether you are a beginner or a competitive swimmer, the wellness center has a spot for you!

Katie Stache is an Aquatics Supervisor at Wilfred R. Cameron Wellness Center. For more information, please contact Aquatics Supervisor, Katie Stache at (724) 250-5242 or cstache@whs.org.
Make the most of what you eat by incorporating nutrient dense food into your snacks and meals. When you think nutrient dense, think fresh. Leafy greens, fruits, vegetables, fish, dairy, and whole grains are all nutrient dense. These powerhouses offer high vitamin and mineral content and are low in calories. Even small portions of these foods have exceptional nutritional value. When possible, select items that are organic and locally-sourced. Organic foods are grown without the use of harsh chemicals, pesticides, synthetic fertilizers, or genetically modified organisms. Food that is locally-grown is picked at peak freshness and tends to be higher in nutrients than food picked days or weeks before it arrives on store shelves. Fresh, local foods are in abundance in the summer, making it an ideal time to begin adding nutrient dense whole foods to your routine.

A salad with fresh spinach, a handful of organic berries, a few unsalted slivered almonds, and a light drizzle of dressing or olive oil is tasty, filling, and full of vitamins, minerals, and phytonutrients. Swap side of fries for a baked or roasted sweet potato for a healthy dose of potassium, vitamins A, B6, C, and beta-carotene. You’ll never want for potato chips again once you’ve had a batch of kale chips! Just rinse and stem a medium bunch of kale and remove any excess water. Tear into 2” bite-size pieces and drizzle with 1 Tablespoon of olive oil. Massage the oil into the leaves so it is fully absorbed. Place kale leaves on a baking sheet lined with parchment paper then sprinkle with sea salt, nutritional yeast (for a dairy-free cheesy taste), or any seasoning of your choice. Bake at 350 degrees for 10-15 minutes. In no time, you’ll be snacking on a super food!

Submitted by Kate Safin, Marketing & Member Services Manager, at East End Food Co-op. East End Food Co-op is the last natural foods co-op left in Pittsburgh from those original, back-to-nature stores. The Co-op offers all of the products of a full-service grocery store, but with a natural and local touch. For more information, visit www.eastendfood.coop

For more tips and recipes, visit the East End Food Co-op on Wednesday, August 2 at 7 PM for a free wellness lecture, “Delicious Plant-based Sauces.” This workshop will allow you to create versatile sauces and dressings to take your healthy eating to the next level. Using the information presented, you’ll no longer have to choose between a healthy dish or a tasty one. Come by for this free demonstration to get some samples and try them for yourself!

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The Mighty Power of Nutrient Dense Foods

For more stories on Healthy Eating, log on to www.guidetogoodhealth.com

Summer 2017 www.guidetogoodhealth.com GUIDE TO GOOD HEALTH 13
By Jacqueline Ely, RD, LDN
Registered Dietitian at the Wilfred R. Cameron Wellness Center

The obesity epidemic not only affects adults but is reaching more and more children. Research and education is ongoing to try and combat this problem.

Very minimal changes have occurred over the past few years. There is an average of 17% of children and adolescents age 2-19 falling into the obese weight ranges. An article in the New York Times reported for the first time in two centuries the current generation of children in America may have a shorter life expectancy than their parents. This information came from a report published by the New England Journal of Medicine. Obese children have an increased risk of developing high cholesterol and blood pressure, early heart disease, diabetes, bone problems and skin conditions.

It is never too late to make changes and improve the health and wellbeing of the entire family. Make a pledge to become a healthier family overall. This needs to be a family effort and cannot single out any members of the group.

Here are some easy tips for you and your family to try to create a healthier lifestyle.

1.) Cut back on meals away from the home. Research shows that approximately 32% of Americans caloric intake is consumed outside the home. This includes fast food, take out and sit down restaurants. Foods consume while dining out are often higher in sodium, fat, cholesterol and calories.

2.) Prepare more meals at home and dine together as a family. Silence the TV and enjoy conversation. This is a great time for interaction. 33% of Americans report the TV is always on during dinner and 43% of Americans report the TV is sometimes on during dinner. Turn off electronic devices and other distractions during your meals for better portion control.

3.) Allow your children to help during meal preparation or in choosing the foods for the week. Make a game out of it. For example: each family member can choose one new food a week and it is their responsibility to come up with a recipe or way the food can be incorporated so everyone tries it.

4.) Replace all sugary beverages with water and milk. Eliminate soda, juices and other sweetened beverages. These drinks are only “empty calories.” One can of soda typically contain 10 teaspoons of sugar or more (40 grams). These products often contain little if any beneficial nutrients. Drinking high calorie beverages does not fulfill hunger pangs the same way whole foods do. Fill up on fruits, vegetables, whole grains and lean proteins not beverages.

5.) Get Moving! Children need a minimum of 60 minutes of play with moderate to vigorous activity every day. Take a walk as a family after dinner, give kids active toys such as bikes and kites, or encourage kids to join sports groups or try a new activity.

For resources on how to help your family and children be healthy, check out wrcameronwellness.org Kids Programs. Washington Health System Wilfred R. Cameron Wellness center offers kids’ activities such as Swimming Lessons, Nutritional Counseling, and KidZone Summer Camp where children spend their summer days learning how to treat their bodies well, make healthful choices, build self-confidence, and play as part of a team.

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WASHINGTON HEALTH SYSTEM
Wilfred R. Cameron Wellness Center

JARED ENGLERT | 724.225.WELL | JENGLERT@WHS.ORG
As recent temperatures remind us, summer has officially arrived. And with the warm sunny (and rainy) days comes Pennsylvania's glorious state pride: fresh produce.

At the grocery stores, the farmers markets and even in your own gardens, produce is becoming abundant. While the hot weather crops like corn and tomatoes aren't Pennsylvania local yet, we have seen local lettuce, peas and some of their early brothers.

The Squirrel Hill Community Food Pantry makes every effort to provide as many fresh healthy fruits and vegetables to people struggling with hunger in our community as possible, and you can help.

- Do you have a garden? The Pantry gladly accepts locally grown produce, and is able to distribute it quickly. Our clients enthusiastically take any produce we can offer. Later in the season when crops like squash get overwhelming, don't let them go to waste.
- Do you belong to a CSA? Perhaps you are able to donate a share to the Pantry and give a gift that keeps giving throughout the season.
- When you planted your garden, did you have any seedlings left over? The Pantry welcomes seedling donations too!
- When you are buying produce at the grocery or the farmers market, consider purchasing a few extra items for the pantry.
- If it's not convenient for you to donate produce — you don't live near the pantry, or your time is too limited — you can make a donation specifically to purchase produce. Like most food pantries, we can save money by buying in quantity, so your donated dollars go further.

Wherever you live, chances are there's a food pantry or soup kitchen near you that could use all of the above. Fresh produce can be expensive and beyond the tight budgets of low-income seniors and families struggling to put food on the table.

There is actually a nonprofit organization that helps to connect gardeners with extra produce and food pantries that could use it. Check out www.AmpleHarvest.org for more information.

Hunger touches 1 in every 7 Pennsylvania residents. With some coordinated effort, we can feed everyone. Donating your extra produce is one of many strategies that can really make a difference.

For more information on Jewish Family & Children's Services of Pittsburgh, call (412) 422-7200 or visit http://www.jfcsph.org.
INGREDIENTS

Meat option
• 1 lb of sausage
• 1 lb of ground beef
• 3-4 cans of Crushed Tomatoes (either regular or with basil, oregano and garlic) 28 oz. sized cans OR 12-15 fresh tomatoes (peeled, chopped and blended in a food processor)
• 1/2 onion, finely chopped
• 4 cloves of garlic
• A bunch of dried basil (probably 3-5 Tbsp)
• A bunch of black pepper (probably 1 - 2 tsp)
• 1 TBSP of Sugar (optional)
• 2 TSBP olive oil
• 1/3 cup of grated Parmesan or Romano Cheese
• Minced Green Peppers (optional)

INSTRUCTIONS

1. Heat the olive oil in a 5+ qt. pot over medium heat, and add the onion.
2. Sauté for 10 minutes or so, stirring often and being careful not to burn it.
3. Add the chopped or pressed garlic.
4. Heat for another one to two minutes, making sure not to burn the garlic, then add all the tomatoes, black pepper, basil and sugar. Stirring often, bring to a low boil.
5. Reduce heat to low and simmer for 2-3 hours stirring often.
6. For the first half of the simmer time, do so with the pot uncovered, then cover.
7. Add the cheese, and a handful of chopped fresh herbs oregano, basil and parsley. Stir in and simmer for an additional 5 minutes or so.
8. (Meat Option) Heat olive oil in a large skillet over medium-high heat. Cook and stir sausage (I cook sausage separate) cook ground beef add onion, green bell pepper, and garlic in the hot oil until both are browned and crumbly, about 20 minutes; drain and discard grease.

Yummy!

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SPF AND JOINT GUIDE

Sports Injuries Require Proper Care

By Lois Thomson

SPORTS ARE SOME OF THE BEST WAYS TO ENJOY THE OUTDOORS, BUT BEING A LITTLE TOO EXUBERANT OR JUMPING INTO AN ACTIVITY RIGHT AWAY MAY CAUSE YOU SOME HEALTH PROBLEMS. IF AFTER BEGINNING AN ACTIVITY YOU EXPERIENCE SOME DISCOMFORT, HOW DO YOU KNOW IF IT IS JUST A MUSCLE ACHE, OR SOMETHING MORE SERIOUS?

In her practice as a physical therapist and Director of Rehabilitation Services at Ohio Valley Hospital, Colleen Hamm is familiar with all types of sports-related injuries. She commented, "It depends on the amount of time. If the pain doesn't go away within a few days or week of icing or using anti-inflammatory medications, then you should definitely see your doctor, or a physical therapist."

Hamm continued by saying the first telltale sign would be how much swelling and pain there is. "If you have immediate swelling and heat associated with it, and the area becomes black and blue, that would be an indication of a problem. A sudden onset of pain and weakness may suggest a muscle injury. If the increase is gradual – it's probably not a tear or break. It may be an inflammation of a tendon, ligament, or surrounding tissues."

According to Hamm, such an injury could occur because the person is not employing proper motion during the activity. Using the shoulder as an example, she said somebody may have pain after they've been playing a lot of tennis or golf. "The pain might start in the shoulder, but the person keeps playing. Chances are the tissues are becoming inflamed either because of how they're swinging or because something is not moving right within the joint. You get abnormal movement patterns if muscles aren't recruited correctly. As you keep swinging, the tissues get more inflamed and that can lead to more damage."

Even professional athletes, who are attuned to proper warm-up, can have issues. Baseball players frequently find themselves on the disabled list with hamstring pulls, and Hamm said that can happen when athletes don't know how to bring the right muscles into play at the right time.

That is why it's important to seek help sooner rather than later. "As soon as pain begins it's probably a sign that something isn't right. So the prevention is, once you get the onset of pain, you have to take a step back and try to correct it so it doesn't get exacerbated."

For more information, visit www.ohiovalleyhospital.org or call (412) 777-6231.

Approved FDA Procedure Brings Patients Relief without Pain Medication

Osteoarthritis affects more than 30 million Americans each year, according to the Centers for Disease Control and Prevention. It can lead to joint pain, swelling, and stiffness due to the breakdown of cartilage between bones.

Coolief Radio Frequency Ablation has recently been approved by the FDA.

The procedure uses radio frequency to freeze pain nerves which typically sense knee pain. Dr. David DeChellis and Dr Ankur Gosalia began treating patients with Coolief about two years ago, and have seen their patients respond with immediate relief and increased function and mobility.

“We felt the procedure is an excellent option in our many pain patients with these conditions that have failed conservative care, including injections and therapy, and would like to avoid pain medications. The majority of our patients have responded well to the point that they will tell us there has been a positive change in their ability to tolerate life activities as well as diminish pain without medications,” said Dr. DeChellis.

In fact, Coolief Radio Frequency Ablation is one of the many nonsurgical procedures the Ohio Valley Hospital Pain Treatment Center prefers to prescribing medications.

“Our future generations of patients will likely benefit from the advanced technology and regenerative biologics/medicine becoming available in pain management, to the point where opioids will be rarely needed to treat chronic pain.”

For more information or to make an appointment, please call (412) 777-6400. The Ohio Valley Hospital Pain Treatment Center is located at West Kenmawr Plaza, 500 Pine Hollow Road, Kennedy Township. For more information, please visit www.ohiovalleyhospital.org.
Heritage Valley Sewickley

Only hospital in the Pittsburgh region\(^2\) to be a Five-Star Recipient for Total Knee Replacement for 7 consecutive years.

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\(^1\) “Region” is Pittsburgh, PA CBSA as defined by the federal government’s Office of Management and Budget.
Earlier this year, Jocelyn Idema, DO, of Washington, PA-based Advanced Orthopaedics and Rehabilitation, became the first spine surgeon in Pennsylvania to perform lumbar disc replacement using Aesculap’s activL Artificial Disc.

This is a breakthrough approach to treating chronic lower back pain caused by degenerative disease. The procedure is designed to help maintain normal motion in a person’s lumbar spine. Previously, patients would receive lumbar fusions for certain types of back pain.

“This was unfortunate when it came to younger patients because if you fuse a level in the back, it no longer moves,” explains Dr. Idema. “This means the motion has to come from somewhere. Usually the disc above it has to work a lot harder which can cause degeneration at the level above. Then you may end up adding on to the fusion 10, 15, or 20 years down the road.”

This new and better technique involves an artificial disc that is now in its third generation, notes Dr. Idema.

“It’s a good technique for younger patients with isolated low back pain that we can identify is caused specifically from the disc degeneration,” she says. “They have to have minimal joint arthritis otherwise their back pain will continue because they’re still having that motion back there.”

Based on outcomes from the Artificial Disc clinical trial and Dr. Idema’s own patient feedback, she believes that the activL Artificial Disc represents the next generation of spinal disc replacement technology.

The activL includes cobalt chromium endplates that affixes to a patient’s vertebrae with bone-sparing spikes to help stabilize it. It then uses mobile ultra-high molecular weight polyethylene core to support the controlled translational and rotational movements. Dr. Idema trained on the technique under Scott Blumenthal, MD, at the Texas Back Institute’s Center for Disc Replacement in Plano.

According to Dr. Idema, the ideal candidate is anyone younger than 50 with isolated lower back pain on one level or one disc.

“One recent patient had isolated pain on the very last disc on his back and it was nearly bone on bone at that point. So we placed the artificial disc in there so that the disc above, which was nice and healthy, would remain that way as long as possible.”

The procedure, which usually takes two hours, begins from an anterior approach through a patient’s stomach. A vascular surgeon would assist Dr. Idema to help get her down to the spine. This is usually the longest portion of the procedure, taking anywhere from 20 minutes to an hour. Adding the artificial disc then just takes about an hour.

Since the procedure begins through the front of a person, there is some manipulation of the intestines. As a result, the patient (Continued on following page)
When you choose to have joint replacement surgery at The Orthopedic Institute at Monongahela Valley Hospital (MVH), you are taking the first step to move pain free.

Roseann Slobada, from Uniontown, had arthroscopic surgery on her left knee 12 years ago by Dr. Scott Baron. “He told me it would only be good for five years,” said Ms. Slobada. She just finished having her right knee replaced. “I spent those last 12 years favoring my left knee that I messed up my right one.”

MVH’s Orthopedic Institute offers a unique program; each step is designed to encourage the best results leading to a transition home or to a rehab facility from the hospital two to three days after surgery. Ms. Slobada praised the program saying, “The program is amazing, they have it down to a science.” She continued, “Everything is in that book. If you read that book and follow it, you won’t have any problems,” referencing the guidebook given to all orthopedic surgery patients in the physician’s office prior to surgery. “I had my surgery Wednesday, if I didn’t read that book there’s no way I’d be going home today (Friday).”

When asked about her stay, Ms. Slobada said the staff is the best. “I haven’t even been to a place where the staff is so nice. Everyone just seemed happy.” She continued her accolades for the anesthesiologist, “I was so scared, but he reassured me. When I woke up, I felt great, like when I went in (for surgery).”

Being from Uniontown, Mrs. Slobada said, “I have a hospital down the road from me, but this place is amazing.” She is excited for the opportunity to chase after her grandkids.

The program features a team of dedicated individuals trained to work with people having total joint replacement surgery. One such team member is Lorraine Damich, Care Coordinator for the Orthopedic Institute. She is responsible for your care needs from the surgeon’s office, to the hospital and home.

An orthopedic candidate was deciding to have her knee replaced, she and her husband wanted to visit the hospital to see how far was from their home.

“I received a call from a volunteer that there was someone who wanted to see the hospital because they were thinking of having their knee replaced,” said Mrs. Damich. “I went down, met them and gave them a short tour of the facility. When we finished, she said the tour helped her to make the decision to have the surgery.”

Local Physician Performs
1st Artificial Disc Replacement in Pennsylvania

(Continued from previous page.)

has to stay in the hospital for about 48 hours until their intestines start to “wake up” again. However, Dr. Idema says that the patient is typically up and walking immediately after surgery and can begin physical therapy the same day of surgery.

While this procedure has provided immediate relief to patients, Dr. Idema cautions that surgeries such as this are still always the last resort.

“We evaluate all patients and send them to physical therapy or prescribe medication to try and help with the pain,” she says. “Typically, 90% of the time that helps them to the point where they don’t need anything else. If they do come back after six weeks—which is the usual benchmark to see if physical therapy is going to alleviate their pain—we then get an MRI to see what’s happening in the back.”

Since X-rays only give physicians only one piece of the puzzle, it’s then just a matter of what appears to be their pain generator. With the back, Dr. Idema says the pain can be the result of all sorts of things—muscles, ligaments, arthritic joints, or degenerative discs. Another organ may be the cause of the pain too. For example, your kidneys and intestines can refer pain to the back.

“It’s really my job to figure out which one of these is the problem,” says Dr. Idema. “The lumber disc replacements are effective for young patients who have isolated degenerative disc disease. So if you’re under 50 years old and have isolated pain on just one disc and physical therapy, medication, and epidural injections did not work, then we’re left with a surgical option. This procedure can reduce your pain, increase your range of motion, and get you back to work faster than other alternatives.”
Ask The Experts

Expert Hypnosis

Jan Lee CH, RN, Jan Lee Hypnosis

Have I been hypnotized before?
Can I be hypnotized without knowing?

Yes. We go in and out of hypnotic states every day. Think of that foggy minute when you first awaken? Your brain is in slow mode. Waves are slower. You are in a suggestible state, so what do you put in your mind? Think of that drifting off state just before you fall asleep. Brain waves are slower and you are suggestible. What do you put in your mind when you are falling asleep?

Think of the last experience you had that "carried you away." You lost track of time and you were dreamily focused on something (a great book or movie, exhilarating music or sporting event, lovenmaking, art). Hypnosis is this state where you are focused in a relaxed way and suggestible to messages.

As a young girl, I was so focused on an episode of "Twilight Zone" (the one with the ape-like creature on the wing of a plane) that I still look for it when I'm flying!! That experience was hypnotic.

Now you know. Even if you haven't visited a hypnotist, you have been in many hypnotic states. The next step is to reprogram your mind while hypnotized. Delete the negative programs and add the positive!

Peace...

Jan Lee CH, RN, JanLeeHypnosis
(724) 351-1242

The Hillman Legacy

Schools, promote nutritious eating and physical activity using the Healthy Schools Program, the country’s largest school-based childhood obesity prevention initiative.

The Henry L. Hillman Foundation provided a grant to the University of Pittsburgh Department of Emergency Medicine for the local adoption of a smartphone app called PulsePoint. Volunteer CPR responders are alerted via the app to respond to nearby out-of-hospital cardiac arrest events until professional responders arrive. The goal is to reduce the number of deaths from out-of-hospital cardiac arrest.

Funds from a Henry L. Hillman Foundation grant supported the development of the MyHealthyPregnancy smartphone app by researchers and scientists at Magee-Womens Research Institute, Carnegie Mellon University and the University of Pittsburgh. The app is designed to reduce the incidence of pre-term birth among high risk mothers through a daily survey and intervention focusing on specific risk factors.

The list of Hillman grants supporting healthcare and medical research in western Pennsylvania adds up to millions of dollars. The impact of these grants is far-reaching and, at least in the case of advances made through the UPMC Hillman Cancer Center and the Hillman Center for Pediatric Transplantation, is being realized around the world.

In spite of the global impact of their philanthropy, Henry and Elsie Hillman remained Pittsburghers to the core and were personally committed to the projects they supported.

“Both had an indefatigable commitment to Pittsburgh. They loved this community and felt strongly that their giving could be more effective if it was directed locally where they could know the institutions and the individuals involved and see the impact of that giving,” said David K. Roger, president of the Hillman Family Foundations.

“Both were very hands on. It wasn’t unlike Elsie to just pop into the cancer center to make sure everything looked the way she hoped it would. Henry loved to unpack projects to find ways to use the money to be as impactful as possible,” Mr. Roger said.

The legacy of the Hillmans will live on through the Hillman Family Foundations as it was recently announced that a total of $800 million from Henry Hillman’s estate will be divided among the 18 foundations comprising the Hillman Family Foundations.

Thanks to the Hillmans and their generosity, countless lives have been affected through the many projects they supported to advance healthcare and medical research.

For more information about the philanthropic legacy of the Hillmans in western Pennsylvania, visit www.hillmanfamilyfoundations.org
Dr. Lisa Cibik, Director of Cataract Services at Associates in Ophthalmology (AIO), is the first surgeon in Pennsylvania to implant the most cutting-edge intraocular lens options available including the ACTIVEFOCUS™ Toric and Symphony Multifocal Toric. These lenses are FDA approved for patients undergoing cataract surgery who choose to address astigmatism and near vision correction at the same time.

Cataracts are a common eye condition where the natural lens becomes clouded, impairing a patient's vision. According to the National Eye Institute, more than 20% of Americans will have cataracts by the age of 65. In cataract surgery, the clouded natural lens is removed and replaced with an Intraocular Lens (IOL).

Traditional monofocal IOLs have been limited to improving distance vision without astigmatism correction. The ACTIVEFOCUS™ Toric and Symphony Toric IOLs improve visual acuity at close, intermediate and far ranges and, therefore, may reduce the need for patients to wear contacts or glasses after cataract surgery.

"In our continuing efforts to offer the most innovative services in cataract surgery, we are excited to include these IOLs as part of our options for patients." A leader in eye care, Dr. Lisa Cibik and her team strive to bring forth the most promising best-in-class technologies. As such, Dr. Cibik concluded, "With these options, we are ushering in a new refractive era and transforming the way we are able to address a multitude of optical issues in one minimally invasive procedure."

ACTIVEFOCUS™ Toric IOL

The unique optical design of the ACTIVEFOCUS™ Toric IOL gives cataract patients with astigmatism quality distance vision while increasing their range of vision to potentially reduce dependence on glasses. It is the only multifocal Toric IOL that is 100 percent dedicated to central distance vision. Previous presbyopia-correcting IOL designs tend to compromise on distance vision in efforts to provide patients with a range of vision.

Symphony Multifocal Toric IOL

The Symfony Toric IOL is indicated for the reduction of residual refractive astigmatism, or imperfections in the curvature of the eye. Of the patients implanted with the Symfony IOL, 85% of patients wore glasses none or a little bit of the time at intermediate distances, compared to the 34% of those with the monofocal IOL. For near distances, patients with the Symfony IOL were able to read 2 smaller lines on a standard eye chart than those with the monofocal IOL. Patients have fewer complaints of halos and glare after surgery.

Laser Assisted and Dropless Cataract Surgery

The laser assisted and dropless cataract surgery allows the surgeons to offer a more gentle, accurate and precise procedure while providing a simpler, less complex recovery.

AIO is the first eye surgical practice in Western Pennsylvania to offer Laser-Assisted Cataract Surgery. The femtosecond technology of the LenSx® Laser allows surgeons to make create corneal incisions, correct astigmatism, and soften the natural lens by using a laser instead of a blade, all before entering the eye to remove the cataract.

Dropless cataract surgery is a revolutionary treatment option that provides convenience and cost-savings while reducing patient's post-operative treatment regimen. Medication is placed in the eye to reduce the risk of inflammation and infection, and is a critical part of ensuring successful outcomes.
Helping people get well and stay well are the hallmarks of the nursing profession, and nursing continues to evolve as our world changes. Nurses are a critical partner in all aspects of patient care and good health.

Today’s nurses are trained for any role in which they may have an interest, or for which there is the greatest need. Whether it’s critical care, holistic, geriatric, pediatric, emergency and trauma, genetics, occupational health, wound care, forensic nursing, (and many more) nurses are at the heart of healthcare.

Few, if any, other professions offer the variety of career opportunities as nursing. Whether a nurse wishes to work in a hospital setting, see patients of a particular health condition or age in home healthcare visits, or travel to other countries to work with various populations, a degree in nursing can open many doors.

According to data published by the U.S. Bureau of Labor Statistics, employment for nurses is expected to increase by 16% by 2024, which is faster than the national average for all other occupations. Those with the Bachelor of Science in Nursing (BSN) are expected to have the greatest job opportunities.

Anyone seeking a career in nursing should research programs and pathways to determine what works best for them.

The Duquesne University School of Nursing offers excellent opportunities to enter this exciting career. Contact Gina Plocki for more information, (412) 396-6534.
The Washington Physician Hospital Organization is always looking for ways to collaborate with other organizations to improve the quality of our services and the health of our community members. Our goal is to develop new products, facilitate an exchange of health information and find new ways we can work with local health plans to deliver convenient, cost-effective care."

—CHARLES R. VARGO, EXECUTIVE DIRECTOR OF THE WASHINGTON PHYSICIAN HOSPITAL ORGANIZATION

PARTNERS IN BETTER HEALTH

WE’VE JOINED FORCES WITH LOCAL PHYSICIANS TO MAKE IT EASIER FOR OUR COMMUNITY MEMBERS TO ACCESS AFFORDABLE, HIGH-QUALITY HEALTH CARE.

The ever-changing, complex nature of health care can be tough on our patients and the physicians who care for them. That’s why Washington Health System and physicians throughout the region formed the Washington Physician Hospital Organization (WPHO).

“The mission of the WPHO is to strengthen the local provider community by creating and maximizing opportunities to improve the delivery of quality, cost-effective health care,” says John D. Six, MD, Co-medical Director of the WPHO. “Your WPHO physician and WHS work hand in hand to improve your health and simplify the complexities of health care.”

The BENEFITS OF COORDINATION

The WPHO is the largest organization of its kind in southwestern Pennsylvania and boasts a roster of roughly 275 physicians. Behind the scenes, the WPHO works quietly performing a variety of necessary tasks, such as promoting clinical integration.

If you are admitted to the Emergency Department, for example, your WPHO-affiliated primary care physician receives an alert in real time. A second alert goes out as soon as you’re discharged, and your physician receives information about the care you received and your post-discharge instructions. This better enables your provider to perform follow-up care and answer any questions you may have.

Additionally, the WPHO collaborates with local insurers to develop products and programs that keep medical costs low.

“The WPHO’s emphasis on clinical integration helps improve the value of care,” says Matthew Stantspaintner, DO, Co-medical Director of the WPHO. “When people see an affiliated physician, they benefit from high-quality care.”

» TO FIND A WPHO PHYSICIAN NEAR YOU, CALL THE PHYSICIAN REFERRAL LINE AT (724) 250-4310 OR VISIT WHS.ORG AND SELECT “PHYSICIAN FINDER.”
Our Primary Care Physicians

WPHO, a partnership of 250 local primary care and specialist physicians and the Washington Health System, was founded in 1994 to assure access and availability of high-quality healthcare within our community for your benefit and convenience. Look for these local physicians and healthcare services in your health plan’s provider network. That way, you can receive the quality care you need at a location close to home.

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New Pediatric Endocrinologist Joins Pediatric Alliance

Earlier this summer, Dr. Jadranka Popovic joined the Division of Pediatric Endocrinology at Pediatric Alliance, PC, the largest independent medical physician group in the Pittsburgh region.

As a pediatric endocrinologist, Dr. Popovic will diagnose, treat, and manage disorders affecting the endocrine glands including:
- Growth problems, such as short stature
- Pubertal disorders, like early or late puberty
- Underactive or overactive thyroid gland
- Diabetes, both Type 1 and Type 2
- Adrenal gland problems
- Disorders of sexual differentiation

“When a patient has a pediatric endocrinology condition, such as a hormone deficiency or an excess of hormones, we can improve their life through treatment.”

For someone to become a pediatric endocrinologist, it requires dedication, passion and a lot of hard work. It's a long process, Dr. Popovic notes. She attended medical school at the University of Zagreb, Croatia. Later, she completed her pediatric residency training at St. Luke’s — Roosevelt Hospital of Columbia University in New York City and pediatric endocrinology fellowship training at Weill—Cornell Medical College in New York City. Since 2008, Dr. Popovic has served as attending pediatric endocrinologist at Children’s Hospital of Pittsburgh. During that time, she also held the position of Associate Professor of Pediatrics at the University of Pittsburgh School of Medicine.

Dr. Popovic initially wanted to study dentistry but in the eighth grade, one of her distant relatives, who was staying with her family, was undergoing specialty training who was staying with her family, was undergoing specialty training and her parents told her the most. During her third year of medical school, she had an opportunity to work with a group of pediatric endocrinologists in Croatia. The work was on new-born screening for congenital hypothyroidism, an inborn error of thyroid function. While this screening had started in the United States in the 1970s, during this time—in the mid-80s—it was not being performed in other parts of the world yet. Dr. Popovic was one of the authors on the paper that published the data from the study, and screening became universal in Croatia.

“If that condition is not diagnosed in time—and symptoms are very subtle—those babies will develop severe mental disabilities and have major issues later on in life.”

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Medical Profile

“When a patient has a pediatric endocrinology condition, such as a hormone deficiency or an excess of hormones, we can improve their life through treatment.”

-Dr. Jadranka Popovic

We Care About Your Kids!
Back to School
• Advice for Parents of Children with Special Needs
  • Autism • Anxiety • Schools • Resources

Every Child Team Eases Back-to-School
Anxieties for Children with Autism

By Nancy Kennedy

Most parents probably breathe a sigh of relief as September approaches, knowing that soon the kids will be back in the classroom and the routines of the school year. For parents of children with autism and related disorders, however, it can be a stressful time, as the return to school often means a lot of change and transition.

At Every Child, Inc., Pittsburgh’s pioneering non-profit organization that supports families and children with special needs through a range of services, this challenging time is addressed by the agency’s Family Based Mental Health program’s special Autism Team.

“Change is tough for kids with autism, even when it is well planned, and the back-to-school period can be full of changes,” says Samantha Baillie, M.A., L.P.C., therapist and leader of the Autism Team. “There may be a new school, new classroom, new teachers or classmates; even a new bus driver can be difficult. Summer is a time of less structure, and the school year requires keeping a schedule. Many kids will feel anxious as they anticipate going back to school, and their anxiety can be absorbed by the parents, who have concerns of their own.”

Baillie and her colleagues at Every Child help families identify and implement strategies to reduce back-to-school stress, helping the whole family to navigate the changes and adjust. Baillie suggests that parents ask the school to let them bring the child to the school ahead of time to get acquainted – or reacquainted - with the environment, and perhaps meet the teachers and other staff. “A calm, controlled personal visit to the school can be very helpful. It promotes a sense of control. Another idea is to keep bedtime and wake-up times consistent through the summer, and to do a little schoolwork over the summer, to maintain skills.”

JoJo Altebrando, Family Based senior clinician, says that an effective way to prepare for back-to-school is to use pictures and stories. “It’s best to prepare with open, honest conversation, using social stories. If the child doesn’t read, you can find ideas for stories at the library, online or on Pinterest. Be creative – use Google maps to show the child the school, or the new route. Parents should go to the school to meet the teachers and start a relationship with them.”

At home, there is usually a level of comfort, where things are familiar and predictable, says Stacey Pfalzgraf, Family Based clinician. “For any transition, structure should be encouraged. It helps make things more manageable. Some children will have difficulty managing the after school period. It helps to use planners, calendars and visual schedule so the kids know what to expect. The schools welcome us to collaborate with them as they get to know the child and prepare to meet their needs.”

Every Child’s Family Based Services program emphasizes the uniqueness of every child and family, and approaches each with great respect for their individual needs and efforts. It is an intensive service, providing in-home intervention for families with a child that has significant behavior problems and has not progressed with less intensive services. The Family Based program is also offered to families with a child who is at risk for placement outside the home, in a psychiatric hospital or therapeutic residential facility. The program provides family and individual behavioral therapy, service coordination, skills training and advocacy. The Autism Program offers intensive support, education and therapy, provided by clinicians who have advanced training and expertise specific to the needs of children on the autism spectrum and their families. There is also crisis intervention available 24/7. Families receive home visits two or three times per week, for a period of 32 weeks.

According to JoJo Altebrando, the Family Based service is holistic and comprehensive. “We look at every angle and consider every factor that may be contributing to the family’s situation. We make an effort to get the whole story and learn what they think is going on. We explain the process and help them identify the goals; the family decides what they need and chooses their treatment, and this is quite powerful for them. Often, they experience systems, such as school systems and healthcare, as intimidating, so when they can find their own voice and power, it’s enormous for them and so satisfying for us to see.”

“Back to School is an anxious time for kids and parents,” says Baillie. “It’s important to be open and honest with your child and to make the process more predictable for them.”

For more information, visit everychildinc.org or call (412) 665-0600. 

“Every Child, visit www.everychildinc.org or call (412) 665-0600.”

-Nancy Kennedy
By Nancy Kennedy

Just like adults, children experience anxiety. Meeting new people, going to the doctor or the dentist or fearing a monster in the closet are among the many things that might make a child anxious.

Anxiety in children is common, some anxiety is normal, and it’s not always a bad thing, says Laura Pagano, LCSW, Coordinator of the Social Services department at the Children’s Therapy Center of Washington Health System. But anxiety in children can become a problem says that she and her fellow clinicians take a strongly positive stance, reassuring children and their parents that this is temporary, help is available and that they will be able to cope.

Help comes in many forms at CTC. Individual, family and group therapy is available for children ages three to 18, provided by CTC’s team of licensed behavioral therapists, including social workers and psychologists.

Therapy gives the children skills that empower them to cope with their anxiety. “We teach the kids coping and social skills,” Pagano explains. “This gives them a grounding. In the group, they learn to cope with anxiety right away, as it happens, so they can work right through it. We give the children tools to practice in the group, and they take those tools home with them. Our anxiety group is very successful.”

CTC is a highly regarded, comprehensive pediatric rehabilitation and social/behavioral treatment center offering a broad range of outpatient services for children from birth to age 18. A service of the Washington Health System, it is the only center of its kind south of Pittsburgh.

With a team of expert and highly credentialed specialists in pediatric physical therapy, speech and language therapy, occupational therapy and behavioral therapy, the CTC helps each child overcome obstacles and reach his or her full physical, cognitive, social and emotional potential. Children who receive services at the CTC have many different types of challenges: developmental delay, motor or speech difficulties, sensory processing disorders, autism spectrum disorders, cerebral palsy, sensory losses and other disorders. Behavioral and mental health concerns are also effectively treated at CTC; problems such as anxiety, acting out in school, depression and post-traumatic stress disorder following trauma, abuse or neglect can be addressed by CTC’s experienced and dedicated clinicians.

As the intake coordinator, Pagano is usually the first professional to meet the child; she identifies the problem and connects the child and family to the resources that will help.

“Our door is always open,” she emphasizes. “Parents can call me and talk to me about what they are seeing in their child. They may just need some reassurance or insight, they may need to be referred to the right resources, or they may need help. If a parent is concerned, it is never too early to ask for help.”

The Children’s Therapy Center of Washington Health System has two locations, in McMurray at Waterdam Plaza and in Washington.

To make an appointment, call (724) 942-6100 or visit washingtonhospital.org/services/childtherapy.
New Story’s private licensed schools offer an academic learning environment and multiple therapeutic services to help students achieve success while dealing with emotional, educational and behavioral challenges. We serve students from 5 to 21 years of age.

New Story provides emotional support and autism support classrooms along with multiple community based programs. We work to create an individualized program to meet the student’s needs.

At New Story schools, students are writing new chapters filled with hope and success for their futures.

877.622.7245 www.newstory.com

Introduction

Introduce Yourself

Have you already met the new teachers? Do they have any questions about your child’s Individualized Education Plan (IEP)? Depending on what grade your child is entering, or the program they attend, there may be new faces this year and introducing yourself early can help promote communication from day one. Email the teacher or staff and set up a time that you can talk about your child’s summer, likes, dislikes, and goals.

Refresh Your Memory

Chances are, your child’s IEP has been set aside for the summer. Unless your child had summer services or Extended School Year (ESY), you may not remember exactly what academic or functional goals your child will focus on this school year. Does your child’s schedule align with the IEP? Refresh your memory and focus on this year’s growth!

Practice

A week or two before school starts, take a test drive with your child to the school and talk about what it might look like on the first day of school. Will your child ride a bus? Carpool with friends? Walk? Begin preparing your child to consider the excitement and challenges that go along with transportation. If you can get in to the building, help your child practice their locker combination or find their classroom and lunchroom.

Identify Essentials

It is so easy to get caught up in the excitement of school supplies. Think about what your child really needs before you shop. Elementary teachers typically send lists of materials they recommend. For children with disabilities, sometimes less distraction and reducing the amount of “stuff” to carry is helpful.

For more information on New Story Schools, you can reach Susan Griffith at sgrif@newstory.com or (724) 463-5390 ext 233 or visit the website www.newstory.com.

Susan Griffith, D.Ed is the Regional Director of Education at New Story Schools. Her career includes teaching first, second, and fifth grade elementary school, high school special education and special education courses at Indiana University of Pennsylvania. Susan is involved in the operations and quality of New Story schools located in Monroeville, Indiana, DuBois and Clearfield (New Story’s western region).

What Parents of Children with Special Needs Can Do to Ensure a Smooth Transition

by Susan Griffith

Pencils, notebooks, calculators, backpacks, lunch boxes. There are so many things parents begin to organize as the beginning of the school year approaches. In addition to the tangibles, there are important things parents can do to set up a successful transition for both their child and themselves.

Introduce Yourself

Have you already met the new teachers? Do they have any questions about your child’s Individualized Education Plan (IEP)? Depending on what grade your child is entering, or the program they attend, there may be new faces this year and introducing yourself early can help promote communication from day one. Email the teacher or staff and set up a time that you can talk about your child’s summer, likes, dislikes, and goals.

Refresh Your Memory

Chances are, your child’s IEP has been set aside for the summer. Unless your child had summer services or Extended School Year (ESY), you may not remember exactly what academic or functional goals your child will focus on this school year. Does your child’s schedule align with the IEP? Refresh your memory and focus on this year’s growth!

Practice

A week or two before school starts, take a test drive with your child to the school and talk about what it might look like on the first day of school. Will your child ride a bus? Carpool with friends? Walk? Begin preparing your child to consider the excitement and challenges that go along with transportation. If you can get in to the building, help your child practice their locker combination or find their classroom and lunchroom.

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What is a Cochlear Implant?

By Jennifer Petrie-Signore, PhD

MORE THAN TWO-THIRDS OF STUDENTS ATTENDING DEPAUL SCHOOL FOR HEARING AND SPEECH WEAR A COCHLEAR IMPLANT (CI) TO GAIN ACCESS TO SOUND. BUT WHAT EXACTLY IS A CI, AND HOW DOES IT ALLOW A PERSON WITH HEARING LOSS TO PERCEIVE SOUNDS IN THE ENVIRONMENT?

For individuals with profound hearing loss, a CI translates sounds from the world around us into electrical signals for the brain. A microphone transmits sound to a processor that filters the sound and sends it to the internal unit. The signal is then translated into an electrical impulse at one of 20+ electrodes in the cochlea. The key to making this delicate technology function is that it harnesses the natural topography of the cochlea, a small, snail-shaped structure in the inner ear.

If you were to unroll the cochlea, you would find that the membrane in the base—the end attached to the bones of the middle ear—is narrow and stiff and responds best to high pitches. The other end is wider and flexible and responds best to low pitches and there exists a continuum in between these two points. Along the membrane, hair cells are displaced when sound waves vibrate the membrane and fluid within the cochlea. In turn, the hair cells send a location-specific signal to the brain, and this collection of frequency transmissions allows the brain to paint an auditory picture of the world. Because the CI electrode array uses discrete stimulation points along the cochlear membrane, it can mimic natural auditory stimulation and provide the brain with a representation of the full range of speech sounds.

For a very young child with hearing loss, a CI paired with intensive language training can result in listening and speaking skills that are on par with peers with typical hearing. But the key is providing intensive listening and spoken language education while the brain is the most receptive to learning language—from birth to around age three. While a CI does require specialized surgery, it provides an option for those with near-complete hearing loss to gain access to sound and develop spoken language.

For more information, visit our website at DePaulHearingAndSpeech.org

ON THE WEB: For more information and advice for Parents of Children With Special Needs, log on to www.guidetogoodhealth.com
**Good Advice for Parents of Children with Special Needs**

By Nancy Kennedy

Experienced professionals and parents from Western Pennsylvania have graciously shared with the Guide to Good Health their best advice and wisdom for parents of special needs children.

**Develop a personal peer support system**

“My best advice is to develop a good support system. When you are going through things, you can feel very alone, but when you have a peer who understands and supports you, it resets that. You may not be comfortable talking with professionals about all the things you are feeling, but a personal support system gives you a safe outlet, enabling you to rant, to laugh, and to talk about anything. I also recommend having a professional support system – a group that includes your medical team and your school team. You need professional advocates as well.”

Debbie Leggins, Disability Advocate, Achieva

**Keep pushing forward**

“Developing coping skills can be a daunting task. It takes practice and patience and it’s important to remember that setbacks might occur, but it is most important to not get down on yourself and keep pushing forward! When trying to find resources and services that can help, I start with places like United Way, Community Centers, and schools. Most have a running list of organizations in your area that can assist you. Be prepared with questions to make sure you are choosing the program that is best for your family. Google is also a good source, but you have to be specific.

Shacoya Bates, SWAN Permanency Caseworker/ Caregiver Family Support Program Coordinator

**Learn to accept help**

“Learn to accept help. You cannot do everything by yourself, and it’s good for your child to have other people in his life. Find caregivers who do this work because they love it and want to make the child’s life better. Be open to trying different things; the reward of that is growth.”

Ruth Ann Bartos, ten-year caregiver to Nick, age 22

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**The Children's Institute Serves Infants, Children and Teens with Developmental-Behavioral Disorders**

When you're looking for the right person to help address your child's health, you want an open ear, an open mind, and experience. At The Children's Institute of Pittsburgh, they have all three.

Its Developmental Pediatrics practice, led by Dr. Scott Faber, serves infants, children, and teens with a wide range of developmental-behavioral disorders, including autism spectrum disorders. Their team may include a physician and/or nurse practitioner, nurse, Certified Occupational Therapy Assistant (COTA) and additional therapists from its staff, as needed. Their entire Developmental Pediatrics practice is outpatient. Treatment can help children in numerous streams of development such as:

- Gross motor and adaptive skills, such as the ability to move large muscle groups to achieve movement of the body;
- Fine motor and adaptive skills, such as the ability to move smaller muscle groups, typically in the hands and arms;
- The ability to communicate, known as expressive language skills
- Various aspects of cognitive abilities
- The ability to understand verbal and non-verbal communication, known as receptive language skills;
- Biofeedback, where children with developmental disorders can benefit from learning to control brain blood flow, EEG, and skin temperature;
- Mixed developmental delays, where a child has significant developmental difficulties before the age of 5.

At The Children’s Institute, developmental pediatrician Dr. Bethany Ziss also cares for children ranging from infancy through adolescence who have a variety of developmental disabilities.

“Each child and family is unique and we provide ongoing individualized care and support as children grow and develop over time,” she said. “I come to developmental pediatrics from a perspective of neurodiversity, drawing from my background in education, the disability community and advocacy. The Children Institute’s family-centered plans incorporate a variety of strategies, from book recommendations to referrals to community organizations, as well as more traditional medical and therapy approaches.”

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**Plan for the future**

“Plan for your child’s future. It’s so easy to get caught up in the present, but you must keep your eyes open and have goals for the future, plus a plan to get there. Make plans so that you will have peace of mind, knowing that you set things up for when your child is out of the school system, when it is much harder to get what you need.”

-Sue Klaus, ACHIEVA/ The Arc of Westmoreland County, parent advocate, mother of Nick, age 22

**Become your child’s advocate**

“Your child may receive services from many professionals, but they will come and go, while you are the one constant in your child’s life. Parents often tell me that they need an advocate, but what they really need is to become their own advocate. Part of what we do at PEAL is empower parents to act as advocates and communicate assertively with professionals, because no one knows your child like you do. Professionals have a lot of knowledge, but parents do too – plus, parents have vision for the child.”

Cindy Duch, Director of Parent Advising, PEAL Center

**Siblings**

Siblings often feel left out because their other siblings require a lot of extra time and attention due to therapies and appointments and concerning behaviors. It’s important that parents try to give siblings their own “special time.” Parents need to create a safe place where all the siblings feel they’re able to communicate their feelings. Sibling support groups are very successful in helping them deal with and their own often confused feelings.

-Melissa Fligger, president, ASA-WCC

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Every child is unique. So is the way we care for them.

We have extensive experience treating children, yet we’ve never seen two the same. Every child we care for is perfectly unique. At The Children’s Institute, our developmental pediatrics team has the expertise to provide individualized care for children with a wide range of disorders, including autism, ADHD, cerebral palsy and spina bifida. We can partner with your family to create a personalized treatment plan using a range of innovative therapies to help your child reach their fullest potential. To learn more, call 412.420.2561 or visit amazingkids.org.

The Children’s Institute
Amazing Kids. Amazing Place.
New Pediatric Endocrinologist Joins Pediatric Alliance

(Continued from page 29.)

life,” she says. “That experience is what really persuaded Dr. Popovic to specialize in pediatric endocrinology. Dr. Popovic has more than 18 years of experience teaching medical students, pediatric residents, and pediatric endocrinology fellows in addition to her extensive clinical experience. She continues to be active in clinical research. Her recent emphasis is on Turner syndrome, as well as the use of aromatase inhibitors in pediatric endocrinology. She has presented her research at national and international meetings. She has also published extensively in the prominent medical journals. Most recently, she has participated in a work on revised Turner syndrome consensus guidelines.

She is also a member of Turner Syndrome Global Alliance Group. Dr. Popovic serves as a member on a number of committees of the European Society of Pediatric Endocrinology and Pediatric Endocrine Society of North America. Dr. Popovic served as a volunteer for Life for A Child and as a tutor for Pediatric Endocrine Training Center for West Africa. In her spare time Dr. Popovic trains in martial arts and has a blue stripe belt. She likes to cook and entertain with friends. She is an avid reader and traveler, and she enjoys spending time with her 11 year old daughter.

She was thrilled to join Pediatric Alliance because of its amiable and compassionate work environment. “The Pediatric Alliance is a friendly group of physicians, other health care providers, and ancillary staff,” she says. “The practice also provides a less stressful work environment and flexible work schedules. This allows for a nice professional and personal life balance.”

Visit the website www.pediatricalliance.com for more information about Pediatric Alliance or to make an appointment at one of its 17 different locations.
Vascular Cognitive Impairment Often Unrecognized

by Lisa Bianco

The decline in thinking skills due to vascular dementia is caused by conditions that block or reduce blood flow to the brain. Brain cells are deprived of vital oxygen and nutrients. Related dementias like Alzheimer's disease share some common symptoms.

The vascular changes that play a key role in storing and retrieving information can cause memory loss that looks very much like Alzheimer's disease. Virtually anywhere in the body inadequate blood flow can damage and eventually kill cells. One of the body's richest networks of blood vessels is located in the brain, making it especially vulnerable. Sometimes sudden changes in thinking skills occur after strokes that block major brain blood vessels. The spouse of a person with vascular dementia may first notice mild changes and thinking problems in his or her partner. But the gradual worsening of these changes because of repeated multiple minor strokes that affect smaller blood vessels, leads to cumulative damage.

Many experts prefer the term “vascular cognitive impairment (VCI)” to “vascular dementia” because it better expresses the concept that vascular thinking changes can range from mild to severe. Although common, vascular dementia remains underdiagnosed — much like Alzheimer’s disease. Depending on the severity of the blood vessel damage and the part of the brain affected symptoms can vary widely.

Depending on the brain areas where blood flow is reduced memory loss may or may not be a prominent symptom. Vascular dementia symptoms may be most obvious when they happen soon after a major stroke. Changes in thinking and perception may include: confusion, disorientation, trouble speaking or understanding speech and vision loss.

More typical physical stroke symptoms, such as a sudden headache, difficulty walking, or numbness or paralysis on one side of the face or the body can happen at the same time. As the damage accumulates from the multiple small strokes or other conditions that affect blood vessels and nerve fibers deep inside the brain more gradual thinking changes occur.

Some early signs of widespread small vessel disease are: impaired planning and judgment; uncontrolled laughing and crying; diminished ability to pay attention; impaired function in social situations; and trouble finding the right words when speaking.

Because vascular cognitive impairment may often go unrecognized, professional screening should be done to assess memory, thinking and reasoning for everyone considered to be at high risk for this disorder. Individuals at highest risk include those who have had a stroke or a transient ischemic attack (TIA, also known as a “ministroke”). High-risk groups also include those with high blood pressure, high cholesterol, or other risk factors for heart or blood vessel disease. Professional screening for depression is recommended because depression commonly coexists with brain vascular disease and can complicate the cognitive symptoms.

The Long Journey to Diagnosis

by Lisa Bianco

Vascular dementia struck my own family, slowly showing up in my father's deteriorating abilities to follow directions, obey traffic laws while driving, count money, do math and admit to his growing number of limitations. My mother, Shirley Bianco eventually became my dad's caretaker. She remembers the beginning of changes in my father’s behavior starting as early as 2005. But because vascular dementia comes on years before it is actually diagnosed, my dad's official diagnosis would not be confirmed until late 2012.

Somewhere around 2005 my dad had been making serious mistakes. When he drove he increasingly was unable to drive in a straight line. During one trip to the doctor's office my mother, riding in the back of the car watched my father attempt to drive to the doctor's office he’d been traveling to for years. His brother in the front seat gave him directions but my dad couldn't seem to follow them.

My father had more and more trouble walking and he had begun to develop a shuffling gait. A shuffling gait can be a symptom of dementia. But at the time my mother guessed these could be normal signs of aging. Thinking that the driving issues could mean my father had vision problems, mom had his vision tested and it was fine for a 75-year-old man. Physical therapy didn’t help the walking problems either, so the next step was getting my dad tested by a neurologist. The first neurologist suspected that dad had hydrocephalus, another condition with the symptom of a shuffling gait. My father also had two other symptoms of hydrocephalus — short term memory loss and incontinence. Hydrocephalus is the buildup of too much cerebrospinal fluid in the brain. Treatment usually involves surgery to insert a shunt in the brain — a flexible but sturdy plastic tube that moves the cerebrospinal fluid to another area of the body where it can be absorbed. The first neurologist had inclusive results. At the end of 2012 a second neurologist, Dr. Eric Dade, finally confirmed my mother's suspicions and pronounced the diagnosis of vascular dementia.

ON THE WEB: ADVICE FOR CAREGIVERS - Log on to www.guidetogoodhealth.com for resources for caregivers Shirley Bianco discovered while caring for her husband.
With her improved strength and mobility combined with her steadfast determination, Bonnie was fitted with a new lightweight brace with a double-action joint that helped improve her range of motion and provided her with more stability.

Last summer, Bonnie learned about Senior LIFE from her cousin, who works for Senior LIFE as an outreach coordinator. Senior LIFE is a long-term care Medicare and Medicaid-funded program that provides coordinated medical, home care, meals and transportation services at no cost for eligible seniors so that they can remain living in their home.

Hopeful that Senior LIFE could help her, Bonnie became a member in September of 2016. Her goal was simple – walk better and make more friends.

“When Bonnie first joined Senior LIFE, she was weighed down by her brace,” says Richard Kruczek, Senior LIFE Executive Director. “The challenge of walking far distances fatigued her and she required frequent rest periods.” Bonnie began coming to the Senior LIFE center where she received customized physical therapy to strengthen her muscles and improve her gait. “Her posture and strength began to improve as she participated in therapy,” said Kruczek. While at the center, Bonnie also enjoyed the meals, entertainment and recreation and began to socialize and make new friends.

With her improved strength and mobility combined with her steadfast determination, Bonnie was fitted with a new lightweight brace with a double-action joint that helped improve her range of motion and provided her with more stability. Confidently, and less than two months after joining Senior LIFE, Bonnie strode into the Senior LIFE Center and in front of staff, fellow members and her family she proudly displayed her new brace and announced to everyone, “I got pretty new sneakers.”

Bonnie now enjoys getting around more with less effort and boasts a new found confidence. “I don’t go slow anymore or slow anyone else down. Best of all, I am finally able to wear pretty shoes!”

With her improved strength and mobility combined with her steadfast determination, Bonnie was fitted with a new lightweight brace with a double-action joint that helped improve her range of motion and provided her with more stability.

A new pair of shoes can change your life. Just ask Bonnie.

Pick the Proven Medicaid Plan.

“We’ll deliver your medications right to your home.”

From physician services to medications and transportation, our local healthcare team strives to meet our members’ every need. There is no cost to enroll in Senior LIFE for those who qualify. To learn more about Senior LIFE, call 1-877-998-LIFE (5433).

LIFE enrollment starts now. Choose Senior LIFE to provide all your Medicare and Medicaid services.

www.SeniorLIFEPA.com • 1-877-998-LIFE (5433)

When Bonnie was just five years old, she was involved in a car accident that caused a severe brain injury and left her physically disabled. After intense therapy, she regained her ability to walk with the assistance of a leg brace. But as she aged, walking became more difficult. “My feet would drag and everyone had to wait for me,” says Bonnie. “My brace and shoes were so heavy. I was afraid of falling.”

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Artis Senior Living of South Hills, which will be opening a new community in Bethel Park this winter, strives to make sure that its residents and their families have a say in how they live. Instead of a one-size-fits-all philosophy, the experience is tailored specifically to each person in order to ensure independence, dignity and quality of life.

“We work with our residents where they are,” explained Director of Marketing Megan Miske of the community’s emphasis on embracing what makes each resident unique. “For example, when the staff at one of our communities learned that a resident loved gardening, they created an activity working with a local gardening club.”

At each community, the Director of Partnership Development and the Director of Health and Wellness work together with the family and their loved one to compile an eight-page partnership profile detailing that person’s likes, dislikes, hobbies and more. The goal of the plan is to allow the resident to have as much independence as possible, from deciding what time to get up to what they want to eat for dinner.

“We follow what we call ‘The Artis Way,’” said Miske, explaining that each letter of the word Artis stands for a tenet of the organization. “A is the ability to have a voice—we want residents and their families to engage in open communication with our staff to make sure that what we’re doing is the right fit for them; this goes for our employees and management, too.

“R is about respecting and maintaining relationships; we’re so in tune with our residents’ likes and dislikes,” she added. “S is for success and recognition, which we promote both inside and outside the community,” Miske continued, noting that the company’s care partners promote the Artis philosophy as well.

While this is the first Artis community near Pittsburgh, the company does have two other communities in Pennsylvania and a number of communities along the East Coast. The Pittsburgh community will feature 72 private suites, offering single-level living within four distinct ‘neighborhoods.’

“We’ve found that having different neighborhoods helps those with memory issues re-orient themselves and gives them a better sense of their environment,” said Miske. Residents will be able to move freely among neighborhoods and can also take advantage of an outdoor area, though all areas are secured for safety.

While Artis will not officially open until early next year, staff is available now to talk with families about the community and to serve as a resource.

“There’s so much to learn, especially when a loved one is in the beginning stages of Alzheimer’s or dementia,” said Miske. “We can help families understand the signs and symptoms, answer their questions, and tell them what to look for when choosing a memory care specific community.”

For more information, visit www.artisseniorliving.com or call (412) 595-8917. The community will be located at 1001 Higbee Drive in Bethel Park.
Memory Loss VS. Forgetfulness
How to recognize the difference

If your mom and dad are advancing in years, chances are you’ve noticed some changes in their memory, like not remembering where they parked or forgetting to grab eggs at the grocery store. But where’s the line between “this is a normal part of aging” and “dad may need help”? The team at Locust Grove Personal Care & Memory Care in West Mifflin shares some signs to look for when assessing whether or not your parents might be having a significant decline in their memory.

1) Repetitive short-term memory loss
A lot of times, seniors with memory loss can recall the name of every friend they had 30 years ago, but they can’t remember what they ate for breakfast. Checking your parents’ short-term memory is easy: ask them questions about their day. If they have a hard time with their responses, that might be a red flag.

2) Difficulty following storylines
If your mom has a puzzled look on her face every time you explain why you had a rough day at work or try to catch her up on your favorite TV show, you might want to look into other symptoms of memory loss. Why? Because memory loss impairs our abilities to recognize words, both visually and audibly. So, if your mom can’t follow your stories, it may be because she doesn’t recognize some of the words you’re using.

3) Failing sense of direction
Did your dad always have an impeccable sense of direction that guided your family through every summer vacation, but now he needs to pull out a map? Chances are, that’s a normal part of aging. But what if your dad gets lost on his way to the same grocery store he’s gone to for 15 years? Or takes the wrong turn on his routine morning walk around the block? If your mom or dad has multiple episodes of being disoriented in familiar places, that may be a sign of more significant memory loss.

4) Skipping parts of their daily routine
We all have days where we put less effort into our appearance (messy hair and sweatpants, anyone?) but if your mom goes days without brushing her teeth or changing her clothes, or if she appears to be avoiding bathing altogether, that might be a cause for concern. If you can’t see your mom every day, some things to look for when you visit are unkempt hair, uncommonly bad breath or stained clothes.

5) Losing things... a lot.
Have you ever been in a panic over misplacing something important and thought to yourself “where is the last place I had it?” People with memory loss have a really hard time answering that question, so a lot of their stuff, important, mundane, or anywhere in between, gets lost and stays lost. Also, people with memory loss sometimes stash things away in “safe” places and forget where they are, compounding the lost-and-can’t-be-found conundrum.

To learn more about the effects of Alzheimer’s and other forms of Dementia, and what Locust Grove can do to help, call (724) 699-9735 or visit www.locustgrovesrliving.com.

Visit us online at www.guidetogoodhealth.com
Health Advice..... from LIFE Pittsburgh

Tips to Keep Your Brain Healthy
An active mind can lead to a better quality of life

At LIFE Pittsburg, we help our participants lead a better quality of life, in part, through engaging, fun activities, and socialization that helps keep their minds active and healthy. If you’re interested in maintaining or improving your brain health, experts agree the following tips can help keep your mind sharp as you age.

Be a life-long learner
Attending lectures, participating in book groups, and educational trips to museums or the theater provide opportunities to learn new ideas and information. Learning new ideas sparks parts of the brain infrequently used and as a result provides extra stimulation to the mind.

Play board games with friends
Board games like checkers and chess are a terrific way to keep your brain fit by using cognitive skills like problem-solving, and pattern recognition. Another benefit of board games is that it includes spending time with friends and family. In fact, one Harvard study found that seniors who had good relationships with friends and family had the lowest risk of dementia.

Work on a puzzle
Crosswords or Sudoku? It doesn’t matter; puzzles are good for the brain. According to the Alzheimer’s Association, doing puzzles daily keeps the mind active and sharp, especially as you age. The Wall Street Journal reported, “Puzzles boost verbal skills, cut dementia risk.”

LIFE Pittsburgh is a program of All-Inclusive Care for the Elderly, focused on helping seniors remain healthy and living independently at home. To learn how Pittsburgh LIFE can improve your quality life, call (412) 388-8050 TTY: 711 or visit LIFEPittsburgh.org.
Senior Living Centers Engage Residents with Person-Centered Activities

By Nancy Kennedy

If your idea of “activities” in senior living centers consists of the traditional three ‘B’s – Bingo, Bible and birthday parties - it’s time to update your thinking. These settings have been undergoing a sea change, embracing “lifestyle engagement,” an innovative new philosophy that is transforming the daily lives and living environments of residents. Seniors in residential and long term care settings are now full partners with staff, engaged in planning their own activities and empowered to make their own choices.

It’s a healthy trend, says Trey Coffman, Director of Lifestyle Engagement for PRESBYTERIAN SENIORCARE, and an evolving one that is impacting senior facilities locally, nationally and globally. “Person-centered care is a philosophy that is designed to meet the individual needs of residents and engage them in activities that not only enjoyable, but beneficial. It means learning about the resident’s preferences, passions and life story, and building programs around them. Whatever they enjoyed before coming to live here, they should be able to continue to enjoy. We don’t want anyone to give up doing things they love. If you love bird feeding and you always had a birdfeeder in your backyard, there’s no reason why you can’t have one here. We go to great lengths to accommodate our residents in a personal way, so that they live well and age well. This is their home.”

Residents at the care communities across the Presbyterian SeniorCare network are able to take advantage of individual or group activities. Many activities and classes are initiated by residents; there are classes in ceramics, cooking, gardening and various crafts. Coffman, who has a degree in recreation therapy, says that brain games are popular, as is technology: “The residents line up to use the computers. We use I-pads a lot.” Also popular are the decorating committees for each “neighborhood” within the care communities. “Decorating here doesn’t mean just holiday decorations. Each floor is called a neighborhood and has a name; the residents choose together how they want it to look. They choose the art on the walls for instance. They are a community of neighbors.”

Coffman believes that leisure is an important part of a healthy lifestyle, with benefits to physical and emotional health, and opportunities for social connections. Outings, especially to a new restaurant or the casino, are very popular. Visits by schoolchildren from nearby schools keep residents connected to the community, and seeing pets on a regular basis is therapeutic for everybody. “Some families bring pets in every day,” Coffman says, “and we encourage this. They’re always welcome.” Many residents participate in the Loving Hands program, which completes volunteer projects for various causes. Care packages for soldiers, lap blankets for veterans, or Christmas gifts for women’s shelters are created by residents, who also deliver them.

UPMC SENIOR COMMUNITIES offer residents a wide range of social and recreational activities geared to the interests and needs of seniors, says Greta Ceranic, Marketing Director. “Our focus is on socialization; we believe that socialization is the key to happy, healthy aging. In planning activities and outings, the emphasis is on building relationships. Many seniors are isolated and lonely, and social activity is crucial to healthy aging.”

Activities abound in the UPMC Senior Communities residences, which encompass independent and assisted living, skilled nursing and memory care settings. UPMC Senior Communities help seniors stay well, live vibrantly, remain engaged and meet the challenges of growing older. Each location has its own activities director; suggestions from residents are encouraged. Ceranic says that while the current generation of seniors love to play cards and board games, there are opportunities to enjoy physical activity as well. “We have structured exercise classes, plus fitness centers where residents can use exercise machines that are designed for added safety, such as recumbent bikes. We also offer fun events such as line dancing. Activities such as these help to keep the brain healthy.”

UPMC Senior Communities offer a full schedule of entertainment and classes. Art classes are among the most popular; the instructor brings in a famous painting which the group studies, then they attempt to paint in that artist’s style. There are opportunities for gardening; there is a knitting and crochet group; and there are outings to the community. Recent outings took residents to a Pirates game; to Phipps Conservatory and to the Nationality Rooms at the University of Pittsburgh. Outings are always well attended and there are plenty of them. Ceranic says, “We have lots of parties – birthday parties, anniversary parties, holiday celebrations and many other occasions. We love to have a party!”

UPMC Senior Communities include 21 locations extending UPMC’s world class senior care throughout seven counties in Pennsylvania. To learn more about UPMC Senior Communities, visit www.upmc.com/Services/senior-communities or call 1-800-324-5523.
In 1997, Dutch psychiatrist Bere Miesen introduced the idea of a place where those with Alzheimer's and related dementias and their caregivers can mingle in a comfortable and fun environment—a Memory Café. This concept spread throughout Europe and successfully made its way to the U.S. in 2008.

WHAT IS A MEMORY CAFÉ?
A Memory Café is a casual gathering designed exclusively for people with dementia and their caregivers. The Memory Café is held in a private room and is a place where individuals with memory loss and their caregivers can get together in a supportive and engaging environment. The Memory Café encourages laughter, support and even the sharing of concerns—all without the feeling of being embarrassed or misunderstood.

Presbyterian SeniorCare Network hosts free monthly Memory Cafes in three locations:

Oakmont area
- Where: Somma Pizza, 380 Route 909, Verona, PA 15147 (private area)
- When: Held on the 2nd Wednesday of each month
- Time: 11:30 am to 1 pm

Washington area
- Where: Eat'n Park, 320 Oak Spring Road, Washington, PA 15301 (reserved room)
- When: Held on the 3rd Saturday of each month
- Time: 10 am to 11:30 am

Erie area
- Where: Wayside Presbyterian Church, 1208 Asbury Road, Erie PA 16505
- When: Held on the 2nd and 4th Tuesday of each month
- Time: 10 am to 12 pm

Open to the public, no RSVP required—just pop on in! Snacks provided.

For more information, visit www.SrCare.org/events.

Presbyterian SeniorCare Network offers a continuum of person-centered living options for older adults.
To learn more, visit www.SrCare.org or call 877-851-1440.

(Continued from previous month)

At CONCORDIA LUTHERAN MINISTRIES, activities are plentiful and many are resident-driven, says Vicki Bigley, Event Coordinator and Trip Manager for Haven 2, one of three continuing care retirement communities at Concordia at Cabot, PA. Each building has its own activities director and a full schedule of classes, entertainment and activities. “The residents bring ideas to us,” says Bigley; “We encourage them to do that. We have variety; there really is something for everybody: ice cream socials, happy hours, movie nights, and ‘Dining Destiny’ nights, when we go out to dinner. We have traditional activities like bowling, card games and board games, and we bring in speakers and entertainers. Recently we had beekeeping class, mail fraud class and a class on butterfly care. Our Lifelong Learning program offers a range of classes; cooking is a popular one. Families are welcome to attend every event or class.”

With her colleagues Chantelle Sweeney and Lynn Turner, Bigley excels at creative program ideas. “We get lots of feedback, and no matter what the residents ask, we find a way to do it. We even had a Family Feud night, among the three Havens. When an activity is initiated by a resident, attendance is better, because they promote it themselves. They have a voice in everything we do; we have a church committee, library committee and garden committee.”

“Our residents are aging in place, and this is home. Some babysit their grandchildren; some have their own gardens. They can borrow a golf cart and drive around the campus to visit the pond; they can walk the trails or sit on the patio to listen to a concert. We’ll take them to the mall. We encourage them to be active and we are passionate about meeting everyone’s needs; if they need help with an activity, we provide that help. The residents tell us that they love all the options and it’s rewarding to hear that.”

Concordia Lutheran Ministries has 14 locations and 17 facilities across the region. To learn more, visit www.concordialm.org.
As people age, they sometimes find that it is very difficult, if not impossible, to live independently at home. While some may need help on a temporary basis, such as while recovering after a fall, others may require personal assistance on a more permanent basis. In both cases, Consulate Retirement Village of North Strabane can help.

“At Consulate Retirement Village, we strive to provide personal care at a reasonable cost. One of the things that sets us apart is that our facility’s daily rate is all-inclusive; it includes assistance with activities of daily living, a furnished apartment, three meals a day, laundry and housekeeping services and more,” said Business Development Director Cassandra Legge. The rate also includes transportation to and from doctors’ appointments, scheduling interactive activities, entertainment and scheduled outings. There is also a WanderGuard system, which alerts the entire building if a resident is exiting the building. Families appreciate this reassurance.”

“Individuals who wander are at high risk of injury, so we provide a response to a huge need that we saw in the area,” explained Legge. “Quite frequently, patients in hospitals or skilled nursing facilities are dropped from their insurance though they, or their families, don’t feel that they’re strong enough to go home. Through our program, they are able to stay with us for a transitional period—at no extra cost—while they work to gain more strength with additional physical and/or occupational therapy.” This service is offered within the facility by Genesis Rehabilitation.

Consulate also provides short-stay respite service for families who need a safe and caring alternative for their loved ones when they can’t take care of them at home. “For example, we had a caregiver who hadn’t had a vacation in years; he was able to go to Florida for a month while we cared for this father,” said Legge. “It’s kind of like a hotel stay, with a fully furnished room and meals provided.”

In addition to short-term stay guests, Consulate also has permanent residents who live at the facility. “The advantage of staying in a personal care home is that it gives the person’s family peace of mind,” said Legge. “There are staff and nurses available 24/7 if a fall or something else should happen.

“A lot of seniors have memory issues, and they don’t always remember to take their medications. Some also suffer from Alzheimer’s or dementia, leaving their families concerned that they’ll wander,” said Legge. “Individuals who wander are at high risk of injury, so we provide a WanderGuard system, which alerts the entire building if a resident is exiting the building. Families appreciate this reassurance.”

Residents have access to a robust activities program that includes a lot of interactive activities, entertainment and scheduled outings. There is also a barbershop on-site as well as a kitchen area that is open to residents and their families for birthday parties and other events. “It’s a stressful time for families, and we want them to feel 100 percent comfortable that they’ve chosen the right place for their loved ones,” said Legge. “We try to make the transition as easy as possible.”

For more information, call (724) 746-0600 or visit www.northstrabaneretirement.com.

by Vanessa Orr

Consulate Retirement Village of North Strabane Offers Affordable Short-stay and Long-term Care
Presbyterian SeniorCare Network™ is western Pennsylvania’s largest aging services provider. Whatever service or setting you need—at-home, independent living, personal care, skilled nursing, Alzheimer’s care, short-term rehabilitation, income-eligible affordable housing and more—you’ll find the respect and person-centered experience you deserve!
Most families are understandably overwhelmed when a loved one is referred to hospice. The looming uncertainties and difficult decisions associated with end-of-life care add extra stress to an already difficult situation. Hospice programs can help by controlling pain, reducing anxiety and offering support to terminally ill patients and their families but with more than 4,000 hospice agencies nationwide, choosing the right program for your loved one can be challenging.

**Here are some important questions to ask hospice providers before choosing a specific program:**

**What services does the hospice company offer?**
Hospice provides care to patients during the end of life but some programs also provide specialized services to make the patient’s final days more enjoyable. For instance, as the nation’s leading provider of end-of-life care, VITAS Healthcare offers respiratory therapy, music therapy, pet visits and other services to further assist patients and their families during these trying times.

**Is it an established program?**
Experience is key when it comes to hospice services. As a pioneer and leader in the hospice movement since 1978, VITAS has developed and shared key practices to make sure patients at the end of life receive high-quality care and their families get the support they need. VITAS’ philosophy of care centers on comfort and quality, focusing on the patient, not the disease.

**Where can the patient receive care?**
Studies show that most patients prefer dying at home and VITAS can bring hospice services to whatever place is most comfortable for the patient. No matter where a person chooses to receive these services, hospice staff can guide them and their families through difficult decisions about their end-of-life care.

**Who covers the costs?**
Hospice care is covered by Medicare, Medicaid and most private insurance plans. To be eligible for hospice under Medicare, the patient must be entitled to Part A of Medicare, and certified by their physician and a hospice physician as having a terminal illness, with a prognosis of six months or less.

The National Hospice and Palliative Care Organization has resources to guide you if a loved one needs end-of-life care.

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**QUESTIONS TO ASK When Choosing a Hospice Provider**

By Evalisa McClure, VITAS Healthcare General Manager

VITAS works hard to ensure people can access these and other important resources. Our trained hospice professionals live in the counties VITAS services (Allegheny, Armstrong, Beaver, Butler, Lawrence, Washington, and Westmoreland) and work closely with patients and their families to provide the caring, compassionate attention they need.

For more information about VITAS, visit [www.VITAS.com](http://www.VITAS.com) or call (412) 799-2101.

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**What are the right words to say?**

**What are the next steps?**

**Where can you turn for help?**

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MARY JANE WAS STRUGGLING WITH MEETING NEW PEOPLE AND TIRED OF STANDING AT THE FOUR WALLS OF HER APARTMENT. SHE DECIDED TO TAKE THE ADVICE OF HER APARTMENT MANAGER BY CALLING COMMUNITY LIFE. “THEY CAME OUT AND TALKED TO ME. THEY EXPLAINED THAT I COULD COME TO THE CENTER AND HAVE FUN.” IN MAY OF 2008, MARY JANE ENROLLED INTO COMMUNITY LIFE.

Mary Jane will be celebrating her 80th birthday in October. “If I didn’t have Community LIFE, I may not be here.”

A little over a year ago, Mary Jane did not feel well, but luckily, she was able to call Community LIFE. “I was coughing and couldn’t breathe.” Mary Jane’s nurse came to her apartment, assessed the situation, and immediately took Mary Jane to the Community LIFE Day Center to be seen by her doctor.

Mary Jane was in need of a procedure but because she was an older lady suffering from multiple chronic conditions, a normal valve replacement surgery was not an option. A doctor at the hospital recommended a new procedure called Trans Catheter Heart Valve Therapy (TAVR). “This procedure is a minimally invasive surgical procedure that repairs the valve without removing the old, damaged valve, instead, it wedges a replacement valve into the aortic valve’s place. TAVR is completed without surgically opening the chest, but through very small openings that leave all the chest bones in place. The benefit is shorter hospitalization and faster recovery time.”

When ready for discharge, Community LIFE was there for Mary Jane by providing a personal care assistant who would visit her in her apartment to help her bathe and dress. At the center, she would meet with the physical therapist to do exercises. “They told me that it was going to take two weeks, but it only took me one week. I love going to the center, it helps me.” Mary Jane feels so much better knowing she has the support of Community LIFE. “I told my friend to join because she was sick all the time, couldn’t get to her doctors, and couldn’t afford the costs of her medications. I told her to come and they would care for you, just like they care for me.”

Mary Jane is living her life in her own apartment. She attends Community LIFE several times a week for lunch and fun activities. She continues working hard with therapy. Not only is she active at Community LIFE Day Center, she drives herself to the Salvation Army using her scooter she received from Community LIFE. “Community LIFE makes my life easier.”

She tells everyone, “I also have three other families: The Salvation Army, my Methodist Church, and Community LIFE.” “I am so happy I did it, join Community LIFE.”

For more information on Community LIFE, call 1-866-419-1693 or visit the website www.commlife.org

References
What is TAVR? (2017, February 17). Retrieved April 14, 2017, from http://www.heart.org/HEARTORG/Conditions/More/HeartValveProblemsandDisease/What-is-TAVR_UCM_450827_Article.jsp#.WPDg4E11qY0
Summer heat can be more than uncomfortable, it can be downright miserable and a threat to the health of you and your clients or loved ones. Older adults and children are particularly susceptible to ailments like heat exhaustion and heat stroke. It’s imperative that everyone practices sun safety to keep their leisure time truly relaxing and enjoyable.

**Heat Exhaustion**

Heat exhaustion occurs when a person cannot sweat enough to cool their body. This is usually the result of not drinking enough fluids during hot weather. It generally develops when a person is playing, working, or exercising outside in extreme heat. Symptoms include the following:

- Dizziness, weakness, nausea, headache, and vomiting
- Blurry vision
- Body temperature rising to 101 degrees Fahrenheit
- Sweaty skin
- Feeling hot and thirsty
- Difficulty speaking
- The elderly person have may cool and moist skin, fast and shallow breathing, as well as weak pulse rate.

A person suffering from heat exhaustion must move to a cool place and drink plenty of water to avoid a more severe heat-related condition – heat stroke.

**Heat Stroke**

Heat stroke is the result of untreated heat exhaustion. Symptoms include:

- Sweating stops
- Unawareness of thirst and heat
- Body temperature rising rapidly to above 101 degrees Fahrenheit
- Confusion or delirium
- Possible loss of consciousness or seizure

Heat stroke is a serious medical emergency that must be treated quickly by a trained professional. Until help arrives, cool the person down by placing ice on the neck, armpits, and groin. If the person is awake and able to swallow, have them drink a small glass of water every 15 minutes or until help arrives.

**Tips for Staying Cool**

- Offer your client plenty of healthy, cool beverages throughout the day, and make sure they understand why it’s so important that they stay hydrated.
- Skip the caffeine and soda (or pop), and choose water instead.
- Ensure that your client is dressed in lightweight clothing.
- Serve watermelon or frozen treats as healthy and refreshing snacks.
- Put moist towels on their neck, wrist, or back if they begin to feel too hot.
Use this guide as a handy reference for long term use!

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Sources: Comparison Medical Analytics; The Leapfrog Group; Press Ganey; CMS